

## *What organisational factors facilitate or impede the sustainable adoption and integration of telehealth and telecare?*

Past attempts to mainstream telehealth and telecare have largely been unsuccessful, despite the growing evidence that it is beneficial at an individual and system level. In the longer term, its widespread diffusion will require not just a policy mandate but also a better understanding of the factors that ensure successful and sustainable local implementation. Health service innovation is not linear or orderly [50,51] and technological innovation requires both individual and organisational change [52]. Policy support may increase an organisation's predisposition, but not its capacity, to adopt an innovation [53]. Research on the adoption of telemedicine [54] and telecare [55,56] and systematic reviews on telemedicine implementation success factors [57] point to the need for support from local 'sponsors' and coalition building across stakeholders.

### *Aims*

Theme 5 is exploring the challenges in scaling up from the Whole System Demonstrator trials to adopt and diffuse telehealth and telecare on a mainstream basis. It is assessing the implementation process across the range of stakeholders involved in planning, delivering, operating and embedding these technologies, and highlighting the lessons learnt for improving the future implementation of telehealth and telecare in the UK.

This study involves a qualitative analysis of organisational and contextual factors in the implementation of telehealth and telecare within the three sites. The emphasis is on the decisions taken by local stakeholders, including the equipment supply chain, and their impact on the implementation outcomes. The role of strategic policy and operational decisions and targets, and relationships between organizations and between professional groups are likely to be of particular importance. The impact of the boundaries on local implementation practice set by the evaluation itself are also likely to be of importance.

### *Methods*

An in-depth, comparative, longitudinal analysis of implementation within the 3 sites, focusing both on processes and outcomes [58,59] is being conducted. The case study method is useful where the range of issues is wide, the concepts are related in complex ways [60] and context is important [61].

Qualitative data is being collected through semi-structured interviews with representatives from key stakeholders involved in the sites (e.g. local social service and housing authorities, primary / acute care trusts, private sector equipment suppliers and installers) from 'set-up' to the 'completion' phase . The sample has been selected purposively to include appropriate stakeholders and to include a range of experiences.

To situate the research within the context of telehealth and telecare adoption in the UK, we are reviewing relevant literature and monitoring policy and organisational developments. This involves regular access to websites, meeting with key local and national personnel, attending conferences, and monitoring of new research. Findings will be used to inform policy and develop a conceptual framework about telehealth and telecare implementation that takes into account the interaction between context, mechanism and outcome.

Parallel to the Whole System Demonstrator programme, we are exploring the process of implementation and progress made in remote care services in 6 sites that are not part of the trial. Studying sites that are and are not constrained by conditions in a trial will shed light upon context-specific and generic factors influencing the implementation of these services and their likelihood of sustainability in the absence of external support. Matched semi-structured interviews with stakeholders in 3 Whole System Demonstrator sites outside the trial (Lincolnshire, Croydon, Norfolk) and 3 other non-Whole System Demonstrator sites (Surrey, Durham, Sandwell) have been carried out. The findings from this study are helping us understand how different management structures and contexts impact on implementation