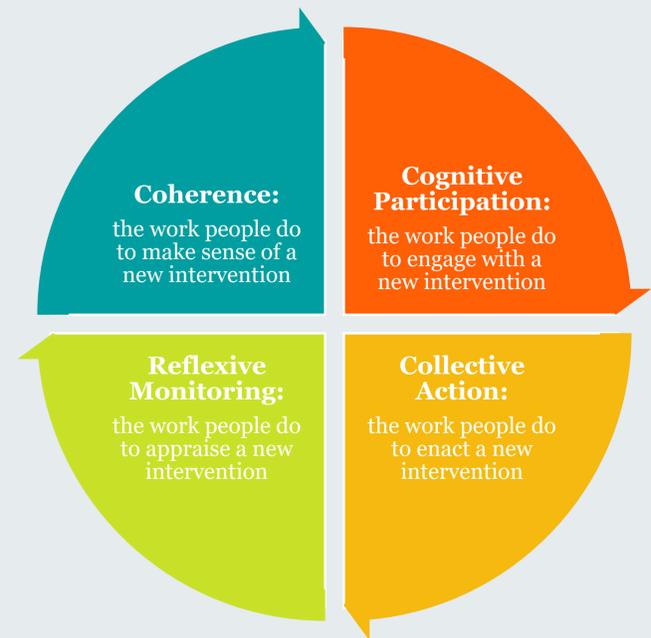


# Co-design of an implementation plan for a digital holistic assessment and decision support framework for people with dementia in care homes

**Table 1: O'Cathains six-step 'Partnership' approach to intervention development:**

O'Cathains six-step 'Partnership' Approach:
• Identify a team of end-users and relevant stakeholders
• Share knowledge and experience and understand the current problem
• Co-create by listening to all voices
• Co-design the solution using qualitative research and prototypes
• Build the solution in small action groups using relevant expertise
• Measure outcomes together

**Figure 1: Normalisation Process Theory (NPT) Constructs**



## Background

Positive findings around the use of eHealth to support dementia care in care homes are unfortunately insufficient to ensure its adoption in routine practice. A key strategy to promote uptake of eHealth is to co-design the intervention and implementation plan with users and relevant stakeholders.

## Aim

The aim of this study was to develop a plan with people with dementia, family carers and health and social care professionals to implement an eHealth intervention in care homes.

## Method

An iterative co-design

method using O'Cathains 'Partnership Approach' (see Table 1) was applied through a series of workshops which focused on co-developing implementation strategies, in response to identified determinants of implementation. Participants included family carers of people with dementia and practitioners with direct experience of working in care homes. A deductive thematic analytic approach was taken, guided by the constructs of the Normalisation Process Theory (NPT) (See Figure 1). Where data did not align, an inductive approach was taken.

## Results

Implementation strategies which

promoted the constructs of the NPT were selected. To target 'coherence', strategies focused on developing materials to promote the value of the eHealth intervention. 'Cognitive participation' was targeted through strategies which aim to maximise engagement with the intervention, including identifying champions and engaging care home managers. To promote 'collective action', strategies centered around maximising compatibility between routine practice and the intervention, and providing sufficient training and built-in user prompts. Strategies around ongoing adjustment and evaluation of the plan targeted 'Reflexive

monitoring'.

## Conclusion

Implementing eHealth into such a complex system is a multifaceted process involving multiple stakeholders. Collaborating with stakeholders provided unique insight and perspective which can only be gained through lived-experience, and allowed us to co-develop a credible implementation plan with real world relevance. The theoretically informed strategies target the constructs of the NPT; mechanisms previously demonstrated to shape implementation process and outcomes. The plan is now ready for feasibility testing in care homes.

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