VALORISATION
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In this valorisation addendum, the relevance of the outcomes of this dissertation for patients, care professionals, eHealth developers and entrepreneurs, policymakers and researchers will be discussed. In addition, efforts that have been done to disseminate the findings to these stakeholders, as well as activities that will be done to continue dissemination are presented.

Relevance of the findings and the eLabEL project

Dutch primary care is facing challenges due to the growing number of elderly and people with a chronic condition, resulting in an increasing care demand. At the same time, the labor force that provides care to this growing group of patients is decreasing. These trends and challenges are not unique to the Netherlands; similar trends can be observed worldwide. The view that eHealth can contribute to these challenges in health care is endorsed by the European Union¹ and the World Health Organization.² Still, the broad-scale implementation and use of eHealth is low around the world. The studies of this dissertation provide insights into the patient perspective regarding eHealth and present recommendations for stakeholders involved in eHealth that are needed to stimulate the implementation of it. The studies of this dissertation are mainly focused on the Dutch health care setting, but are relevant to eHealth stakeholders worldwide.

In the previous years many eHealth projects and initiatives have been set up. In comparison with other eHealth projects the eLabEL project was unique in three ways. First, the focus was not on developing new eHealth technologies, but on the integration of existing eHealth applications developed by different small- and medium-sized enterprises (SME’s). To achieve this, an intensive collaboration among SME’s had to be set up. Second, using a living lab approach eHealth could be implemented and studied in real practice, and patients, health care professionals and eHealth developers and entrepreneurs were actively involved. Third, the research team of this project consisted of researchers with different backgrounds that work at four different research institutes in the Netherlands. Therefore, we could tackle eHealth aspects from different perspectives, related to technology, business and health sciences.

The relevance and potential of the eLabEL project was acknowledged by all stakeholders of the project. Small- and medium-sized enterprises (SME’s) that participated in eLabEL acknowledged the fact that they need to collaborate with other entrepreneurs as they were not big enough to enter the market on their own. In this project we set up an intensive collaboration among SME’s, which resulted in small alliances of two or three SME’s, who are now exploring future eHealth collaboration projects. In addition, in this project we brought industry and primary care practice together, which was valued by both eHealth entrepreneurs and primary care professionals. Furthermore, care professionals mentioned that it was unclear what
technologies they can benefit most from, and what is needed to implement them. Projects like eLabEL give them the opportunity to experiment with eHealth and to inform them about the possibilities. In addition, care professionals valued the intensive involvement in the project, in particular the fact that they could mention their eHealth needs and concerns. The latter was also mentioned by patients during the needs assessment interviews. In addition, although not actively participating in the project, health insurers and policymakers mentioned to share the eLabEL ambitions and need for the development of an integrated infrastructure for eHealth applications in order to transform traditional primary healthcare into technology-supported healthcare. In 2014, the potential and uniqueness of the eLabEL project was awarded with the ‘high potential primary care transformation award’ by the Jan van Es institute.

Converting the scientific outcomes of the studies of this dissertation to a social meaning was a main focus during the entire PhD trajectory. Because of the living lab approach and co-creation with patients, care professionals and eHealth developers and entrepreneurs, the outcomes can be directly applied in the real-life setting. The findings are of relevance for the aforementioned stakeholders as well as policy makers and researchers. Findings are valuable far across the borders of the project, as we developed general ‘lessons learned’ and recommendations for the implementation and use of eHealth in primary care. We state that the implementation of eHealth is a multi-layered challenge; only when all stakeholders act together within their own layer and with their own values, expectations and challenges, the potential of eHealth will be realized. At the end of the General Discussion Chapter of this dissertation (Chapter 7) it is discussed how our findings are valuable to and could be applied by patients, care professionals, eHealth developers and entrepreneurs, policy and research.

**Dissemination of findings**

As mentioned, the findings of this dissertation are directly shared with participating patients, care professionals and eHealth developers and entrepreneurs within the eLabEL project. We did this by organizing meetings with project partners (individual and multi-disciplinary meetings) and by sending brief summaries of interview results and newsletters. Interested people outside the project could also subscribe to these newsletters. In addition, a website was launched to share information about the eLabEL project, including news facts and research results. Furthermore, a short video about the project was developed, which explains the aim and vision of the project for a lay audience. This video can be reached via the eLabEL website and YouTube.

The eLabEL project was set up by the Centre for Care Technology Research, in which four research institutes collaborate: Maastricht University, Twente University, TNO and Nivel. One or two researchers of each institute actively participated as project members in the eLabEL project, and took care that results of the projects were shared inside their organization and with their research partners.
Scientific results of this dissertation are published in four types of international journals (open access) focusing on digital health care, health services research and primary care. In addition, results are presented at international scientific conferences in which researchers from different backgrounds participated including ICT, policy and integrated care. To disseminate results outside science, we published our results in various national societal journals focusing on digital care and primary care. Furthermore, we presented the results of our studies at national conferences to an audience of Dutch health care professionals, health care managers and patients.

During the last year of the project/PhD trajectory the focus was on exploring the way of eHealth adoption in primary care, based on experiences that we gathered in the eLabEL project. This included successes and failures from the perspective of different stakeholders involved in eHealth implementation. Findings of this study are presented in Chapter 6 of this dissertation. The ambition of the eLabEL project was to implement and integrate eHealth applications in a way that they would become part of regular health care. Unfortunately, we did not achieve this goal. However, that we did not reach our intended project goal does not mean that this project has failed. We have learned important aspects regarding the adoption of eHealth in primary care from the perspective of different stakeholders, and what is needed to successfully implement eHealth in future projects. By sharing our experiences, other projects can learn from our successes and failures. In our opinion, this is an important aspect of knowledge dissemination.

In addition, eLabEL is not the only eHealth project that experienced difficulties in the implementation of eHealth in daily practice. ZonMw, who partly funded the project, recognizes our struggles and appreciates the way how we described and share the successes and failures of the project.

References