BARRIERS AND FACILITATORS IN THE IMPLEMENTATION OF EHEALTH PATIENT REPORTED OUTCOME APPLICATIONS IN ONCOLOGY: A QUALITATIVE FEASIBILITY STUDY.

MIET VANDEMAEL1, EVITA KIESEL2, ELKE RAMMANT1, RENÉE BULTIJNCK1,3

1 Radiation Oncology Department, Ghent University Hospital and Ghent University, Ghent, Belgium; Department of Human Structure and Repair, Ghent University, Ghent, Belgium.
2 Cancer Center, Ghent University Hospital, Belgium.
3 Cancer Research Institute Ghent (CRIG), Ghent, Belgium.
Corresponding author: Miet Vandemaele, miet.vandemaele@ugent.be

BACKGROUND
Implementation of electronic Patient-Reported Outcome Measures (ePROMs) in routine cancer care is lacking despite strong evidence, such as improved symptom control or even survival.

Healthcare providers’ (HCP) perspectives on implementation and routine use of ePROMs in a real-world oncology setting are reported from a qualitative feasibility study. Recruitment of patients into this study is currently ongoing.

METHODODOLOGY
Convenience sample of twenty-two HCP was recruited at a radiation oncology department;

9 nurses, 6 physicians, 3 supportive care professionals, 2 researchers, 1 study nurse; 16 male and 6 female HCP;

On-screen recording of an online ePROM try-out test was done for all participants

Subsequent semi-structured interviews were audio-recorded and transcribed;

Data was coded and thematically and inductively analysed through constant comparison. Data saturation was determined using the +3 stopping rule.

RESULTS

Identified themes
Themes and influential factors are grouped around:
• Pilot test experience;
• Implementation process (individual and organisational level);
• Routine use of the ePROM tool in standard workflow

ePROM pilot test

Pilot test experiences

Participants characteristics

Structural characteristics

Perception of impact for organisation

Perceived interventions on organisational level

Organisational level

Implementation process

Perceived interventions on individual level

Perception of impact for individuals

Individual characteristics

Knowledge and beliefs

Perspectives about standard workflow integration
✓ Patient follow-up
✓ Interacting with patients
✓ Information exchange between HCP
✓ Prevention
✓ Research
✓ PROM database

Expansions and valuable features
✓ Access
✓ Safety and privacy
✓ Task Differentiation for HCP
✓ Selective timing and patients
✓ ePROM features

Threats or absence of positive factors

Future perspectives
Final conclusions of this pilot study will use both HCP and patient’s perspectives to provide recommendations for implementation and routine use of ePROMs in oncology.

Additionally a hybrid type 2 intervention study will simultaneously evaluate effectiveness and implementation of remote symptom monitoring.

CONCLUSION
Perceptions of HCP on implementation and routine use of an ePROM tool in a real-world oncology setting reveal several influential factors: positive, negative or both.

Identifying these aspects can assist organisations to successfully implement or to optimise clinical use of an ePROM tool.

Some suggested interventions are easy to implement or can be included in ongoing efforts (for example education of HCP and patients).

Valuable features and potential expansions allow for future improvements but simultaneously provide additional positive incentives for implementation and routine use.