Reviewer's report

Title: An organizational analysis of the implementation of telecare and telehealth: The Whole Systems Demonstrator

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Reviewer: Frances Mair

Reviewer’s report:

This is an important piece of research that should be able to make a valuable contribution to the field of telecare/telehealth implementation research. The authors should be congratulated on the large volume of qualitative data they have collected during this study and knowing this team’s work I am sure that their approach to data analysis has been rigorous.

Major Compulsory Revisions.

Making it clear what this paper adds

The authors of this paper have considerable expertise in the field of telecare and telehealth and it is therefore quite right that they should cite their own work in this field. However, I am sure that they are aware of previous relevant research in this sphere yet they fail to contextualise their research and its findings. By this I mean, that they fail to outline what was already known in this sphere and what their research adds to the existing literature.

The main finding from their paper relates to the difficulties caused by operating within the constraints of a RCT. This is presented as if it were a completely novel finding but in fact it resonates strongly with a previous publication from almost a decade ago, by Finch et al (2003) in the BMJ. This paper titled, “Integrating service development with evaluation in telehealthcare: an ethnographic study” (in: BMJ 2003 Vol. 327, No. 7425, p. 1205-1209) concluded that, “Combined implementation and evaluation of telehealthcare systems is complex, and is often underestimated” and recommended that more pragmatic approaches to evaluation than RCTS, that permit both quantitative and qualitative methods, were needed to improve the quality of such research and its relevance for service provision in the NHS. This finding seems very similar to that presented in this current paper which states that, “The implementation of a complex innovation such as remote care requires it to organically co-evolve......this evolution was not always aligned with the need to gather robust benefits evidence through a RCT. This tension needs to be resolved if government ambitions for the evidence based scaling up of remote care are to be realised.” This is a very important point and as the WSD is the biggest RCT of telecare/telehealth published to date I am sure the authors have important points to make but it is important that they make it clear how their findings differ from this earlier work and what their work adds.

The authors then state that, “...... very little implementation research has
attempted to look at the mechanisms through which change can be achieved.” They seem to have missed a paper by May et al (2011) published in BMC HSR just last year, titled “Integrating telecare for chronic disease management in the community: what needs to be done? “ (BMC Health Services Research, 11 . p. 131). This paper attempts to look at mechanisms and provides an explanatory framework and also addresses issues such as what evidence is deemed important by whom.

Apart from these papers there is the wider literature in this sphere worth considering including:


The authors describe the concept of “readiness” and conclude by talking about the issue of organisational “readiness” but fail to describe what is already known about organisational factors relevant to “readiness” for intervention in healthcare . Useful references might include:


Another major theme related to the challenges of integrating health and social care but again they give barely any reference to the large body of work in this sphere either. For example:


Now obviously there is always a tension between keeping an article tightly focused with clear messages and providing a comprehensive overview of the
relevant literature but in this paper the findings are presented as if in a vacuum whereas this is definitely not the case. The authors touch on subjects where there has been abundant published research. Their task should be to succinctly situate their work within this wider literature making it clear what conceptual advances result from their very large study. I think they must do this before the paper could be accepted for publication and I am sure if they do make such changes it will make their paper more useful to those interested in this sphere.

Analysis Issues

The authors state that their analysis draws on innovation theory and their earlier work which suggests they might be going to take some kind of framework approach to analysis as clearly and quite rightly they had very definite preconceived ideas about what they were looking for and yet they describe taking a “grounded theory approach” to analysis, which doesn’t seem quite right. It would therefore be helpful for them to explain what they mean by “drawing on innovation theory.” In particular, how did they operationalise this in relation to their approach to analysis? Although, the authors should be congratulated for their rigorous approach to ensuring the reliability of their analysis.

Data Presentation

Greater clarity and consistency is needed with regard to data presentation. A series of quotations are provided to illustrate the key themes/points. Sometimes we are told who the respondent is but frequently not. I think it is important for us to know whether respondents were managers or practitioners or what so I think more detail needs to be provided about the respondents who are quoted and this needs to be done in a standardised way throughout.

MINOR ESSENTIAL REVISIONS

There are a few minor typos. It would be helpful if the authors could proof read their paper again and sort these. Examples include:

1. “Managers expressed that the sites needed to deviate from previous ‘real-life’ models of assessment and service delivery and create new trial-specific ones...” I presume the word “the view” is missing.
2. “There was strong sense that the RCT was more focused on telehealth rather than telecare interventions.” I presume “a” is missing.
3. “The PCT saw participation in WSD an exciting opportunity.” “as” an exciting opportunity.
4. “According one interviewee”. The word “to” is missing.

To conclude this paper is presenting work from a landmark study in the field of telecare and telehealth. The authors need to make it clear how their findings resonate or contrast with the existing literature in this sphere and why it is
important.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I have no financial competing interests. I have co-authored and been a co-investigator on previous funded grants with one of the authors of this paper, Prof Anne Rogers. I, and a number of colleagues, have also received substantial external funding over the last decade to examine barriers and facilitators to the implementation of telecare/telehealth/ehealth.