Barriers and facilitators to implementing telehealth interventions for people with primary progressive aphasia (PPA) and dementia: a systematic review Talbot, R.^{1,3}, Harris, C.¹, Warren, J.D. ^{2,3}, Varley, R.¹ & Volkmer, A. ^{1,3}

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Background

- Behavioural interventions can help people living with PPA and other rare dementias
- Therapy can be difficult to access
- Getting therapy on-line might be one solution
- There can be significant barriers accessing and implementing telehealth solutions

Methods - systematic review

Systematic **search** of the literature for synchronous, on-line (i.e. via telehealth) intereventions for people with dementia with or without their care partners, since 2018

Narrative synthesis of implementation barriers and facilitators using the **Theoretical Domains Framework** + additional inductively identified behaviour change / implementation domains

• We found out what the literature says (some of) these barriers are, alongside ways to overcome them

Results ➡ ★ → ↓ → ⊕ → ⊕ → ★

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SLT (PPA) interventions = 5 (20%)
PT focus = 5 (20%) OT focus = 2 (8%)
Music therapy intervention = 1 (4%)

1:1 interventions = 9 (36%)



Dyadic interventions = 10 (40%)

- 14 countries including the global South
- 8 qualitative + 13 quantitative + 3 mixed methods + 1 case study
- Overwhelmingly positive feasibility and acceptability

'Mixed' = 12 (48%) e.g.: Most use Zoom = 13 (52%)
3 x OT+PT+SW Not specified = 5 (20%)
1 x SW, PT, yoga, 10 (40%) do not say *why* that



- Group interventions = 6 (24%)
- The papers which used **an implementation framework** identified more implementation / behaviour change domains
- **17 (68%)** papers had *inclusion* criterea resulting in digital *exclusion*
- 5 (20%) studies included person centred goal setting
- 7 (28%) papers involve people living with PPA (i.e., telehealth intereventions are accessible to people with PPA)

platform or *how* it was adapted

- 12 papers (48%) did not specify participant's dementia type
- 3 (12%) studies specifically exclude people with communication difficulties
- No studies provided cost details, but many discussed cost savings

Top 6 facilitator domains(no. of papers)		
	Environmental context and resources	24
	Knowledge (of the intervention or technology)	20
	Social Influences	17
	Creativity / flexibility of the intervention	14
	Skills (development & of the therapist)	14
	<mark>Safety</mark>	12

Top 6 barrier domains (no. of papers)		
Environmental context and resources	18	
Knowledge	9	
Emotion	9	
Social Influences	8	
Memory, attention & decision processes	7	
<mark>Safety</mark>	7	

Least identified domains		
Beliefs about capabilities		
Beliefs about consequences		
Social & professional role		
Optimism / pessimism		
Behavioural regulation		
Goals		

Conclusions

@rtslt

alternative therapists

- Telehealth intereventions are accessible to people with PPA & dementia
- Improved reporting and specificity needed in future studies
- Use a framework to comprehensively identify implementation issues

• Provide resource to get around digital exclusion

- Weave socialization opportunities into telehealth intereventions
- Importance of dyadic intereventions, or 'proxy' support
- Need to move beyond barriers and facilitators model to explore what is not said in this literature













