

The adoption of digitalisation by healthcare professionals: Insights and Opportunities



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Impressum

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Table of Contents

Executive Summary	4
About digitalswitzerland	5
Survey Method	5
About Digital Health initiative	5
About the authors	5
Chapter 1: Healthcare Professionals at the forefront	6
Chapter 2: Healthcare Professionals insights	8
2.1 Digital health and Tools	8
2.2 Support and Involvement	12
2.3 Barriers	15
2.4 Optimising adoption process	16
Chapter 3: Opportunities and take away messages	17
Definition Glossary	19
Question Glossary	22
Appendix: Demographics	23
References	27



Executive Summary

The integration of digitalisation and new technologies in healthcare offers both challenges and opportunities. Swiss citizens are ready to embark a digitalised healthcare system if it provides added value, whereas healthcare professionals (HCPs) face concerns with the fear of increased workload and non-intuitive systems. This study explores how HCPs can be empowered to adopt digital health tools effectively.

An in depth online research indicated that while many institutions offer CAS or masters on digital health, few initiatives directly support HCPs in adopting these solutions.

Interviews with Swiss HCPs were conducted on 4 key areas: “Digital health and Tools”, “Support and Involvement”, “Barriers towards digitalisation”, and “Optimising adoption”.

During the interviews, the healthcare professionals clearly showed their willingness to adopt new technologies. The digital literacy of the participating HCPs is of a high level. They have clear ideas on what to implement next and how it can support them in giving more efficient care to their patients. Enhanced communication between systems (data interoperability) and

reduction of administrative burden have the most potential for HCPs. By addressing concerns and potential barriers in an early state, like fear of extra workload and non-intuitive nature of many digital systems, the perception of new digital technologies can be positively altered.

A potential solution for the future is to implement a co-design framework in three stages, where healthcare professionals, clinic leaders but also patients collaboratively determine the priorities and identify potential barriers for new digital health technologies. First to identify and address the priorities, potential benefits and barriers along with strategies to tackle these obstacles. The second stage offers continuous evaluation and adaptation. And finally, in the third stage digital solutions will be implemented with the help of the HCP champions.

In conclusion, actively involving HCPs in the digitalisation process and addressing their concerns and needs are crucial for successful integration of digital health technologies. By leveraging their insights and providing adequate support and training, the healthcare sector can navigate the digital transformation more effectively, ultimately enhancing the work of the healthcare professionals and thereby patient care and outcomes.



Survey Method

This study was conducted with healthcare professionals practising in Switzerland (doctors, nurses, therapists etc). They were contacted via oral interviews or a written questionnaire. The HCPs were interviewed in April and May 2024. The online questionnaire was open between April 19th until May 31st 2024. The participation in the online questionnaire was voluntary and anonymous. Certain HCPs gave their authorisation to be named within the study. A total of 25 HCPs filled out the questionnaire and 7 HCPs were interviewed. All percentages are rounded to a whole number. All information regarding the demographic composition can be found in the appendix.

About the authors

This document was written between April 2024 and June 2024 based on the results of the questionnaire: Digitalisation adoption among healthcare professionals

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About digitalswitzerland

digitalswitzerland is a Swiss-wide, cross-industry initiative that aims to transform Switzerland into a leading digital nation. Along with our network of 170+ association members and non-political partners, including more than 1,000 top executives, we're engaged in over 25 projects to inspire, initiate, co-create and lead digital change in Switzerland.

Our mission is to orchestrate the digital transformation of Switzerland to become a leading digital nation. To achieve this goal, we work closely together with our members, partners, and other important stakeholders. We address all aspects of digitalisation and focus on generating impact in relevant topics, such as Education, Professionals and Diversity, Digital Health, and more.

About Digital Health initiative

digitalswitzerland's Digital Health initiative aims to digitalise the entire healthcare system in Switzerland and make it patient-centric. This will help increase transparency, accessibility and understanding of health information for the entire Swiss population. All healthcare actors need to collaborate, including the healthcare professionals and patients to achieve this ambitious goal.





Chapter 1 : Healthcare professionals at the forefront

In the evolving landscape of healthcare, the integration of digitalisation and new technologies stands both as a challenge and a promising opportunity. Healthcare professionals (HCPs) as well as patients are at the forefront of this transformation. According to digitalswitzerland's Digital Health Study (Sternberg, 2022), Swiss citizens are ready to embark a digitalised healthcare system – if it provides an added value. HCPs on the other hand are more concerned with digital transformation; different studies suggest that infrastructure and technical barriers, as well as psychological and personal issues or increased workload are commonly linked to digitalisation. In fact, the journey towards embracing and adopting digitalisation within healthcare systems still remains today a complex process.

Imagine a world where healthcare professionals navigate a digital realm of patient data, treatment protocols, and innovative tools to enhance patient

outcomes, while keeping close contact with the patients. This vision is the key driver to digitalswitzerland's study which explores how doctors, nurses, physicians, and other healthcare professionals can be empowered to adopt digital health effectively and benefit from digital tools to improve their daily work.

This is why we are researching ways to enhance digital adoption in healthcare among medical professionals (HCPs). This will help us to better understand the needs and challenges HCPs face daily and to better support them in the future

This goal can only be achieved through better understanding of the needs and challenges of HCPs. In-depth interviews with HCPs from Switzerland provided insights into their experiences, challenges, and aspirations. These insights will help to develop a strategy to support/empower HCPs to become advocates for digital health. The four main topics covered in the interviews were "Digital Health and tools",

“support and involvement”, “barriers towards digitalisation” and “optimising adoption”.

To assess existing resources designed to assist healthcare professionals and healthcare systems in integrating digital health technologies, an in-depth online analysis was conducted. The findings indicate that numerous institutions (over 30) are active in this field, primarily offering extensive educational programs such as Certified Advanced Studies (CAS) or master’s degrees as well as multi-day courses targeting managers and clinic leaders. However, this analysis reveals the existence of only a limited number of initiatives that directly support HCPs in adopting digital health solutions effectively. For example, Careum offers a course for ward leaders in how to successfully shape digitalisation and SIWF (Schweizerische Institut für ärztliche Weiter- und Fortbildung) offered a symposia with digitalisation as one of the topics and accredited Seminars from two different firms.

Typically, HCPs are only consulted or brought into the fold after a digital health solution has been implemented, at which point they are expected to use it. This often leads to scepticism, apprehension, and concerns about additional workload. If HCPs are empowered to take active roles in developing and implementing digital health tools, they can become peers to their colleagues and thereby smoothen the integration process and enhance the overall effectiveness of digital health initiatives.

The results of this publication will serve as a baseline to better equip stakeholders and HCPs with the tools and resources they need to adopt digitalisation effectively in their daily work, but also ensure their active involvement in the digitalisation journey. It is crucial to recognise that HCPs are the primary users of digital health tools to improve diagnostics and treatment of patients. Therefore, their engagement is crucial for a successful digitalisation implementation.





Chapter 2: Healthcare Professionals insights

2.1 Digital Health and Tools

What is Digital Health?

Digital health encompasses a variety of technologies and innovations aimed at improving healthcare delivery and management and patient outcomes through digital solutions. This includes tools like the electronic patient record, telemedicine, and wearable devices. (World Health Organisation, 2024; FDA, 2020") During the interviews, HCPs highlighted several recurring themes. The most frequently mentioned aspects include the importance of electronic

patient records and data management, the potential for monitoring and managing chronic illnesses, and the limitations of digital health where physical consultation can not be replaced by telemedicine. The need for improved collaboration and hospital information system integration between healthcare providers to ensure seamless information flow is also mentioned. The HCPs from the study have a good understanding of what digital health entails.



How digitally literate are you?

Digital literacy refers to the ability to use information and communication technologies to find, evaluate, create and communicate information, requiring both cognitive and technical skills (ALA, 2011). 64% of the interviewed healthcare professionals evaluate themselves as having high to very high health literacy levels (score 4 to 5), with only 4% stating that they have none to low digital capabilities (score 1-2). Keeping in mind that the interviewed HCPs might generally be more interested in digitalisation, they have strong capabilities to understand and adapt to new digital technologies.

"We need an automated voice-to-text transcription tool to help us manage our work."

*Nathalie Daina-Laville,
Independent nurse
specialist diabetics*

Which digital health solutions could benefit your work? What do you want to be implemented?

Digital health solutions have the potential to significantly enhance the efficiency and effectiveness of HCP. Saving time is one of the key benefits digital tools could bring to HCPs (NHS, 2022), nevertheless, it is important to better understand what HCPs think could most benefit them.

Two of the most named solutions are systems that can properly communicate between each other (data-interoperability), and digital tools that lower the administrative burden.

HCPs are often frustrated about systems that can not communicate with each other. Effective data interoperability means that various healthcare systems can share and use information seamlessly. This will not only streamline workflows but also reduces time spent on manual data entry and retrieval. Dr. med. Conrad Müller also refers to this, bridging the gap between the different systems is key to improve efficiency in healthcare.

A significant portion of HCPs' is consumed by administrative tasks such as documentation, scheduling, and retrieving information. Digital tools that automate these processes can free up considerable time for HCPs. Nathalie Daina-Laville, Independent nurse specialist in diabetics, also commented on lightening the administrative burden during her interview.

One interviewee stated that up until today HCPs need to support the systems, but now, the time has come for the systems to start supporting the HCPs. This statement underscores the need for user-friendly and efficient digital tools that aid healthcare professionals rather than add to their workload. HCPs are willing to use digital health tools for their daily work as long as it brings clear added value for them and the patients.

Digital health solutions have the potential to transform healthcare delivery, but their design should be guided by the needs and preferences of HCPs. Ensuring data interoperability and reducing the administrative burden are key areas where digital health tools can make a difference. The ultimate goal is to enable HCPs to focus on their primary role: providing patient care.

"We need a digital network structure that connects all the systems and provides a bridge between the different hospitals, clinics and general practitioners."

*Dr. med. Conrad Müller,
President Pro UKBB Foundation*



Do you already use specific digital health tools or wearables to track your patient's health status?

In recent years, more digital health tools to track patient's health status have emerged. These can play a critical role in enhancing healthcare delivery and patient outcomes. (Kirk, M. 2019). Among these, sensors for home monitoring are an important tool to increase treatment efficiency, patient satisfaction and reduce the amount of hospitalised patients (Mantena S. 2020). Despite the evident benefits these devices can offer, most of the interviewed HCPs are not using any digital health tools to track patients' health statuses.

A good example of using devices is reported by Dr. med Conrad Müller. There are sensors with a chip that can monitor vital parameters like temperature, puls, and frequency of breathing which can send live information to the hospital. Thereby allowing the doctor to closely monitor patients who are at home.

Wearables that are mentioned are glucose home monitoring systems and smart watches to monitor heart rates. Some of the interviewed HCPs mention using hospital records that combine prescription assistance with discharge letters and computerised hospital files. These tools primarily support treatment and administrative tasks but do not actively monitor patient health status.

Some HCPs have participated in digital health pilots. One example is COBEDIAS, which focuses on early disease recognition. Another pilot project was around an AI-supported X-ray reading tool by tracking potential diagnoses at the emergency department.

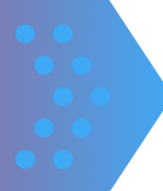
These pilot projects enabled the HCPs working on them to be interested in the new technology since they were intensively involved in testing and could see the direct benefits. This highlights the importance of involving HCPs in the development and testing phases to ensure that the tools are understood and meet the clinical needs.

HCPs who have experienced the benefits of a pilot project or testing the digital health tools first hand can become influential advocates or champions during the implementation phase. This peer-to-peer influence will help foster an environment that is open to digital health innovations.

The adoption of digital health tools or wearables to track patient's health status holds great promise for improving healthcare. Through a collaborative approach, tools to track a patient's health status can be effectively integrated into clinical practice, leading to better health outcomes and more efficient care delivery.

"With a complete and up-to-date patient history, potentially 1/3 of today's hospitalised patients can be treated at home after being seen on the emergency department."

***Dr. med. Conrad Müller,
President Pro UKBB Foundation***



2.2 Support and Involvement

How could you be supported in adopting digital health solutions?

As mentioned above, getting HCPs involved in the implementation process enhances the adoption of new digital health tools. In addition, training and education as well as robust infrastructure have shown to be effective (AMA, Digital Health Research 2022). A majority of the interviewed HCPs emphasised the need for training and conferences, preferably in-person, to support the adoption of digital health solutions. Seminars and workshops, especially if integrated into everyday working life and counted as working time, are frequently mentioned. A minority of HCPs mentioned the importance of continuous evaluation and having more training opportunities during work hours. Intuitive and simple user interfaces that reduce the need for extensive training are also a common suggestion. Involvement in any form is key for adoption and understanding the new technology.

How do you familiarise with new technologies? Do you use platforms or tools to better adopt digitalisation in your daily work?

If HCPs do not come into contact with new technologies they can not familiarise themselves with them or adapt to them. For example, as already mentioned previously, pilot projects or workshops on digital solutions help users to get accustomed to them. Peers are frequently named by HCPs as a main source of learning and knowledge sharing. Attending conferences, both in-person and online are also a source of knowledge. Educational videos and reading articles are also popular methods. The interviewed healthcare professionals have a willingness to adopt new technologies within their daily work, but incentivisation and training resources are still limited.



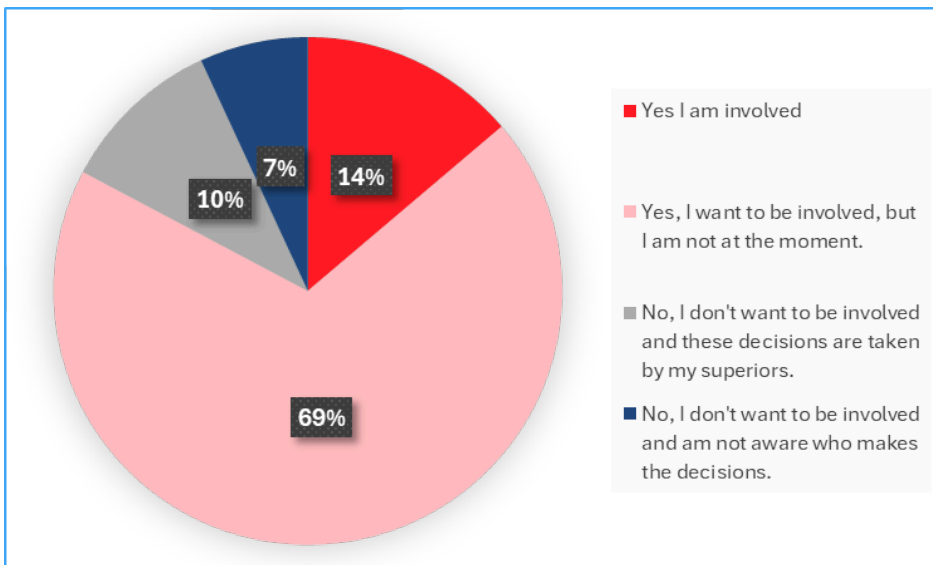
Would you like to be involved in the design and development of digital health solutions? Are you already involved?

The willingness to be involved in the design and development phase are strongly

highlighted. 83% of the interviewed HCPs responded that they would like to be involved at some level of the implementation process of digital health solutions. Within this group of 83%, only 20% are actually involved.

This illustrates that different hospitals and clinics do not leverage their resources efficiently and would be able to bring more innovation forward by co-creating together with their staff.

Graph 1 - Willingness to be involved



Information on willingness to be involved (n = 29, 24 from questionnaire, 5 from interviews, data in percentage).

What type of involvement would you like to have?

Participation in the implementation process of digital health solutions occurs on different levels. They can be divided into: participating in brainstorming sessions to conceptualise, being an active member of the design team, contributing to the testing and validation phase or giving feedback on the suggested digital health tools (Bird, 2021).

The brainstorming sessions would focus on conceptualisation. In these sessions HCPs and other stakeholders would name all ideas that can potentially be beneficial to them. This process is needed to gain insights on the different perspectives the stakeholders have. Among the interviewees, 63% want to be involved in brainstorming sessions, showing their willingness and importance of collaborative creation in the early stages of development.

Being part of the design team allows HCPs to actively shape the digital health solution. About a third (32%) of the interviewed HCPs showed interest in being a member of the design team, indicating that they want to contribute to the creation process.

During the testing and validation phase HCPs can contribute and adapt the final version of the digital health solution. This will improve the user friendliness, intuitivity and meet the required functions set out by the HCPs. 56% of the interviewees were open to be involved in this phase.

Providing feedback during the implementation phase supports the continuous improvement and addressing any issues that might arise post-implementation. 79% of the participants would be willing to give feedback.

Before deciding on implementing a new technology within a hospital, clinic or practice, it is recommended to invite interested HCPs to contribute to the discussion and analysis of said technology.



2.3 Barriers

Which barriers do you see when it comes to the implementation of digital solutions?

The motivation behind HCPs to be more involved in the digitisation process is important, however, it is also important to better understand the different barriers that medical professionals are facing.

Infrastructure, the fear of additional workload or personal reasons (resistance to change, perception of less interaction with the patient or the fear of digital tools taking over the work of the HCPs), are commonly named challenges (Borges do Nascimento, I.J., 2023). Only 13% of the interviewed HCPs report not encountering any barriers in implementing digital solutions. Half of the respondents identified infrastructure and fear of extra work as limitations, whereas 29% named personal reasons. The introduction of new digital solutions is often perceived as an additional burden rather than a relief, leading to resistance prior to implementation or understanding of the new system.

Another recurrent issue is the non-intuitive nature of many digital systems. The systems are often complex, requiring significant support and training to be effectively used and perform tasks efficiently. This complexity and the need for extensive training further exacerbate resistance to adopting new technologies.

Why are you (not) worried about the protection of personal health data?

HCPs and citizens frequently express their concerns on the protection of personal health data. This apprehension is driven by fear of data misuse and rising risks of becoming victims of hacking attacks, as was often mentioned in the media (Bavli, I, 2024).

The protection of personal health data was a commonly voiced concern during the interviews (66%). Many respondents stated that they are worried of data manipulation and misuse by insurance companies. Fear of systems being hacked by third parties is another obstacle. Despite these concerns, $\frac{1}{3}$ of the HCPs feel that hospital information systems are becoming increasingly secure and do not identify additional risks in adopting new digital applications. In their perspective, current laws and regulations are sufficient. Health data is already widely available to major technology companies in Switzerland. To address concerns and shift the current narrative on data protection, a stronger emphasis should be made on existing measures taken by both software developers and hospitals. By making them aware and highlighting the robust data protection protocols already in place can help reassure HCPs and improve confidence in digital health solution

2.4 Optimising adoption process

Why is digitalisation in healthcare currently not improving at your workplace?

After collecting information on the current state of digital adoption, on HCPs' involvement, and on identified challenges in the space, it is important to focus on how adoption processes can be optimised in the future (Medoza, L.E. 2023)

Digitalisation in healthcare is currently not advancing at the interviewee's workplace due to a combination of factors, including a shortage of personnel, limited time, and insufficient financial resources. There is also a notable fear towards change and scepticism about the overall benefits of digitalisation. The lack of collaboration between different healthcare organisations, such as hospitals, clinics and practices, are also significant barriers. There is a general sentiment that current digital tools are not developed with professionals' needs in mind, and that rigid or conservative structures within companies or organisations make it difficult to incorporate innovative ideas.

What do you think is needed to improve adoption of digitalisation among healthcare professionals?

To improve the adoption of digitalisation among healthcare professionals, many respondents emphasised the need for simple, user-friendly solutions that enhance administrative efficiency and free up time for direct patient care. There is a strong call for digital tools that are useful and well-adapted to the needs of healthcare professionals, rather than those supporting other stakeholders, like healthcare insurance companies, in the healthcare system. HCPs want training courses integrated into the education program. Additionally, the need for gradual integration, hands-on implementation, and active involvement of healthcare professionals in the design and development of digital solutions is mentioned. To address the scepticism and tiredness towards new systems, it can be helpful to clearly demonstrate their benefits and ensure cooperation among all involved stakeholders.

***"All new software applications need to be self-explanatory, no need for support teams to explain."
Dr. med. Nicolas Geigy,
Head physician emergency department, KSBL***



3 OPPORTUNITIES AND TAKEAWAY MESSAGES

Chapter 3: Opportunities and takeaway messages

During the interviews, the healthcare professionals clearly showed their willingness to adopt new technologies. The digital literacy of the participating HCPs is of a high level. They have clear ideas on what to implement next and how it can support them in giving more efficient care to their patients. By addressing concerns and potential barriers in an early state the perception of new digital technologies can be positively altered.

A potential solution for the future is to implement a co-design framework where healthcare professionals, clinic leaders but also patients collaboratively determine the priorities for new digital health technologies. This should tackle potential barriers and issues early in the process, in the end leading to more successful adoption and utilisation of the technology. Based on the findings of this study, and already published research, a framework consisting of three stages is proposed.

The first stage addresses the different stakeholders' priorities upfront, identifying what benefits the technology needs to deliver, outlining potential barriers, such as fear of extra work and non-intuitivity that are mentioned by the HCPs in this study, along with strategies to tackle these obstacles.

Every stakeholder has different priorities. Hospitals want processes done efficiently, HCPs want to spend as little time as possible on administration and patients want these tools to be easily accessible and used to provide the information they need.

Investing time and resources upfront will save frustrations, revising the tools, and poor implementation after.

The second stage involves continuous evaluation during the development process to ensure that the technology meets its intended goals and is intuitive to use. Continuous evaluation is something HCPs are already doing in their medical processes, and what they are also referring to in this study when asked. This will ensure

that the tool will still fulfil its intended tasks for both the side of the HCPs as well as the patients. During this phase the user intuitiveness, which is a key priority to our interviewed HCPs, can be closely monitored. This remains crucial for adoption by the HCPs and will reduce the need of support teams to assist the HCPs to use the new technology after implementation.

And in the third stage, when the development is done, the HCPs become champions of the technology, addressing scepticism among colleagues and demonstrating to them the clear benefits it offers. This creates a crucial role in the phase of implementation with the HCPs who were actively involved in the development phase. Usual practice these days is that HCP champions are created after a training day with the development team. These (old) champions can still remain sceptical to the new technology, have certain barriers towards it, or do not fully understand all the different

possibilities. The HCPs involved in the entire process become real champions that will demonstrate the benefits of the new technology.

This co-design framework will enhance adoption amongst all stakeholders by actively involving them, and assuring it fulfils the needs of the users. It will assure the technology is intuitive to use, improving overall user experience. Lastly, the involvement of the new champions will make the solution sustainable and robust for the future.

In conclusion, actively involving HCPs in the digitalisation process and addressing their concerns and needs are crucial for successful integration of digital health technologies. By leveraging their insights and providing adequate support and training, the healthcare sector can navigate the digital transformation more effectively, ultimately enhancing the work of the healthcare professionals and thereby patient care and outcomes.



Definition Glossary

Term	Definition
Administrative Burden	The workload associated with administrative tasks such as documentation and scheduling.
AMA (American Medical Association)	A professional association for physicians in the United States that supports the advancement of medical practice.
Automated Voice-to-Text Tool	Technology that converts spoken language into written text automatically.
Barriers	Obstacles that prevent the successful implementation or adoption of something.
Careum Foundation	A Swiss institution that offers educational courses for healthcare professionals.
CAS (Certified Advanced Studies)	Specialised postgraduate courses aimed at providing advanced knowledge in specific areas.
Champion	An advocate or proponent who actively supports or promotes something.
COBEDIAS	A Swiss pilot project focusing on early disease recognition.
Co-design Framework	A collaborative approach involving various stakeholders in the design and development process.
Continuous Evaluation	Ongoing assessment to ensure that a process or system meets its goals and remains effective.
Data Interoperability	The ability of different systems and organisations to exchange and use data seamlessly.
Digital Health Tools	Technologies designed to improve healthcare delivery and patient outcomes through digital means.
Digital Health Solutions	Applications and technologies used to improve health care services and delivery through digital means.

Digital Literacy	The ability to use information and communication technologies, to find, evaluate, create and communicate information, requiring both cognitive and technical skills
Digital Network Structure	A framework that allows different digital systems to connect and communicate.
Digital Transformation	The integration of digital technology into all areas of a business, fundamentally changing how it operates.
Digitalisation	The process of converting information into a digital format.
FDA (Food and Drug Administration)	The US government agency responsible for regulating food, drugs, and medical devices.
Hacking Attacks	Unauthorised access to computer systems to steal or manipulate data.
Healthcare Professionals (HCPs)	Medical personnel such as doctors, nurses, and other health practitioners.
Hospital Information System	An integrated system that manages the administrative, financial, and clinical aspects of a hospital.
In-depth Online Research	Comprehensive and detailed investigation conducted via the internet.
Infrastructure	The basic physical and organisational structures needed for the operation of a society or enterprise.
Multi-sector Collaborations	Partnerships that involve multiple sectors or industries working together.
Non-intuitive Systems	Systems that are not easy to use or understand without significant training.
Personal Health Data	Information related to an individual's health status, healthcare, or medical history.
Pilot Projects	Initial small-scale implementations of a project to test its feasibility and benefits.

Post-implementation	The phase after a new system or technology has been deployed, focusing on its continued use and improvement.
SIWF (Schweizerische Institut für ärztliche Weiter- und Fortbildung)	A Swiss institute for medical education and continuing education.
Telemedicine	The use of telecommunications technology to provide medical care remotely.
Wearable Devices	Electronic devices worn on the body that can track health metrics like heart rate and activity levels.
WHO (World Health Organization)	An international public health agency of the United Nations.



Question Glossary

Chapter 2.1 Digital Health and Tools

2.1.1 What are your thoughts when it comes to Digital Health?

2.1.2 How do you rate your digital literacy?

2.1.3 Which digital health solutions could benefit your work? What do you want to be implemented?

2.1.4 Do you already use specific digital health tools or wearables to track your patient's health status?

2.2 Support and Involvement

2.2.1 How could you be supported in adopting digital health solutions?

2.2.2 How do you familiarise yourself with new technologies? Do you use platforms or tools to better adopt digitalisation in your daily work?

2.2.3 Would you like to be involved in the design and development of digital health solutions? Are you already involved?

2.2.4 If you are interested in being part of the innovation process, what type of involvement would you like to have?

2.3 Barriers

2.3.1 Which barriers do you see when it comes to the implementation of digital solutions?

2.3.2 Could you elaborate on the barriers about the implementation of digital solutions that you checked above?

2.3.3 Are you worried about the protection of personal health data?

2.3.4 Why are you (not) worried?

2.4 Optimising adoption process

2.4.1 What do you think is needed to improve adoption of digitalisation among healthcare professionals?

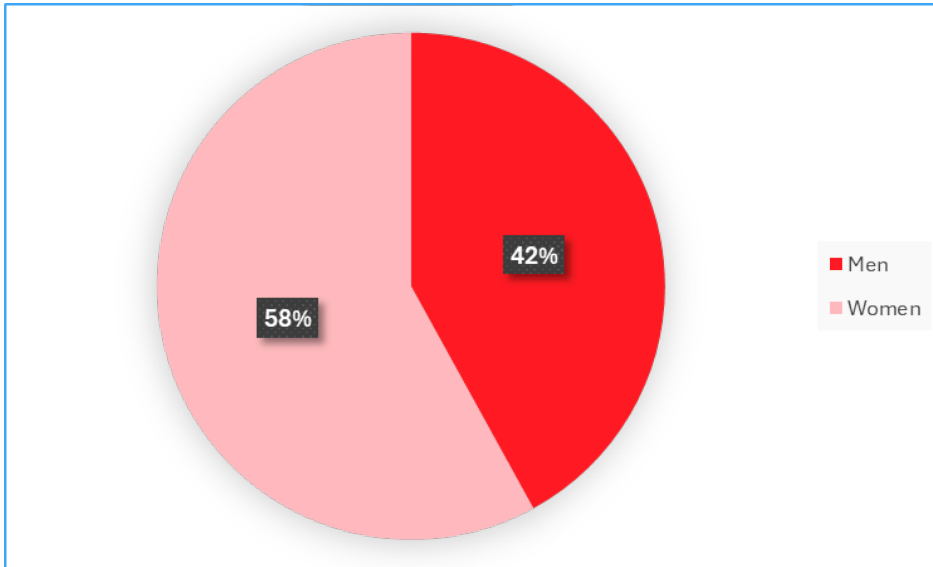
2.4.2 Why is digitalisation in healthcare currently not improving at your workplace? What do you think are the reasons for slow pace digitalisation in healthcare?

2.4.3 Would you like to add something to this questionnaire? Is there an important topic for you related to Digital Health we didn't discuss?



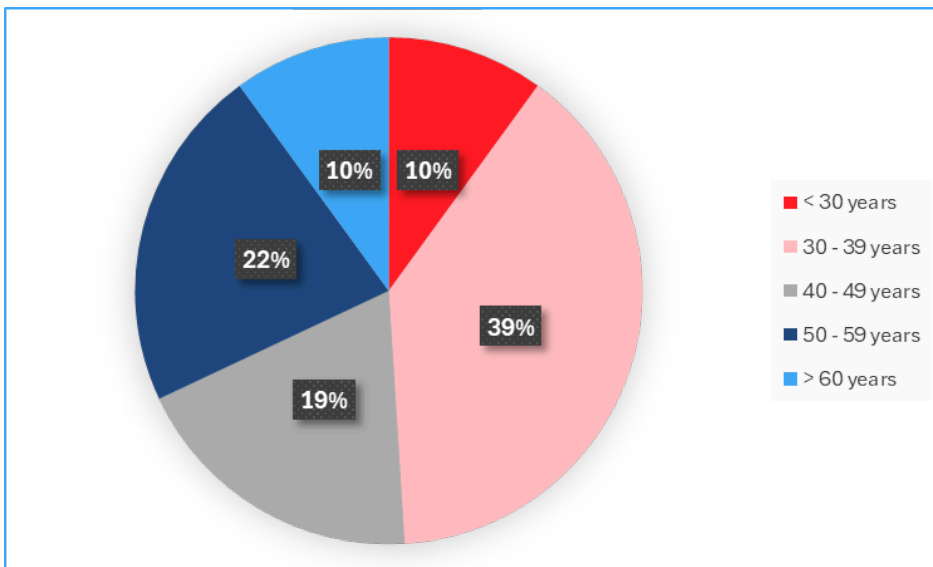
Appendix: Demographics

Graph 2 - Gender



Information on gender (n = 31, data in percentage)

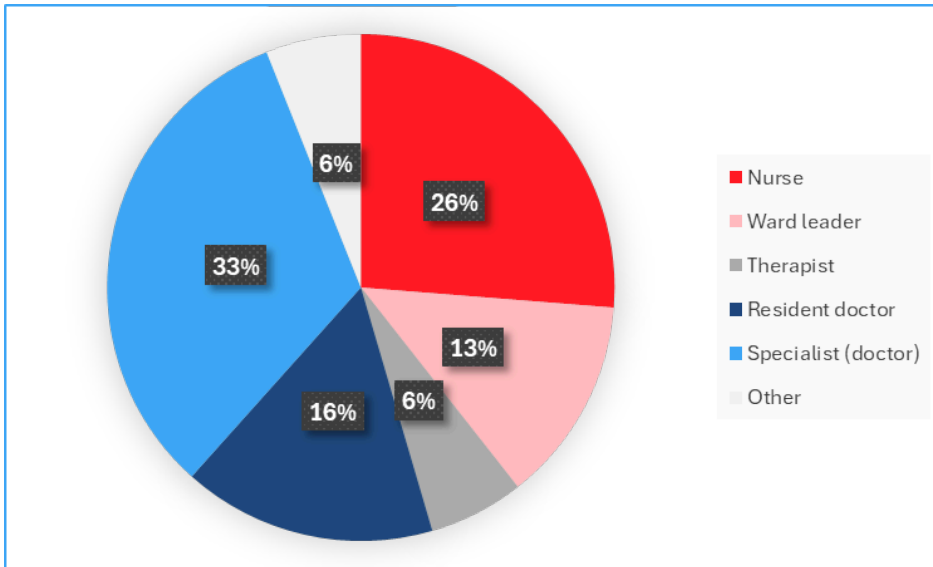
Graph 3 - Age Groups



Information on age (n = 31), data in percentage

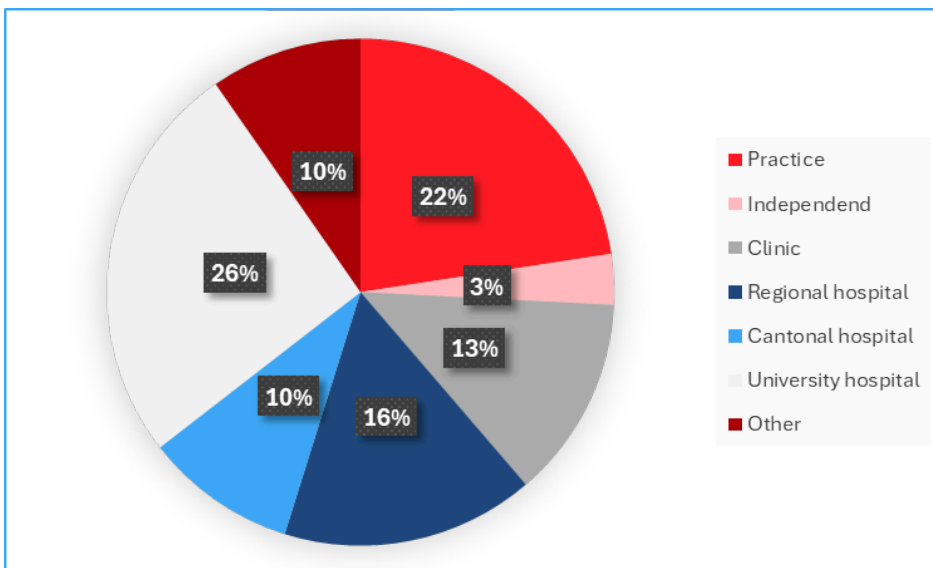


Graph 4 - Profession



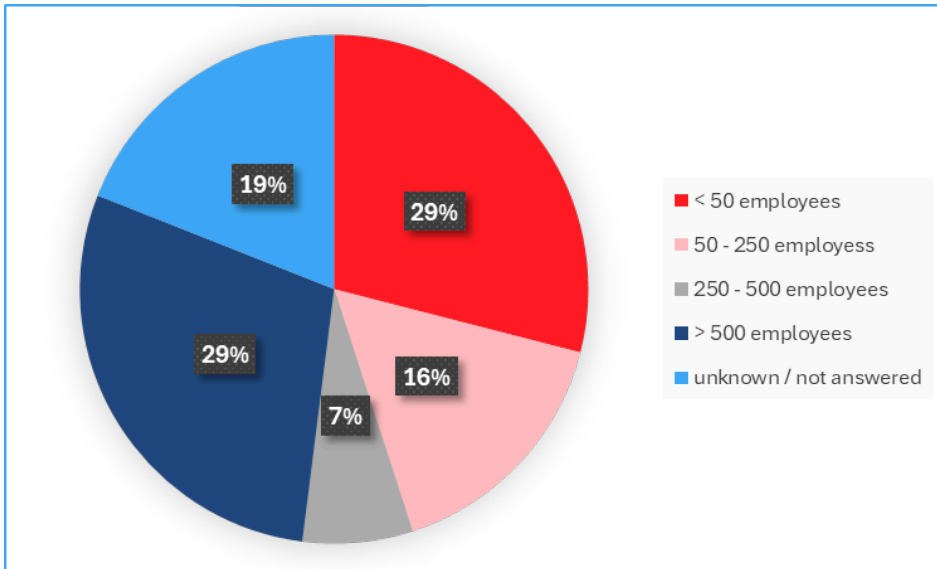
Information on profession (n = 31, data in percentage), Other was once specified as researcher within the medical field.

Graph 5 - Type of Workplace



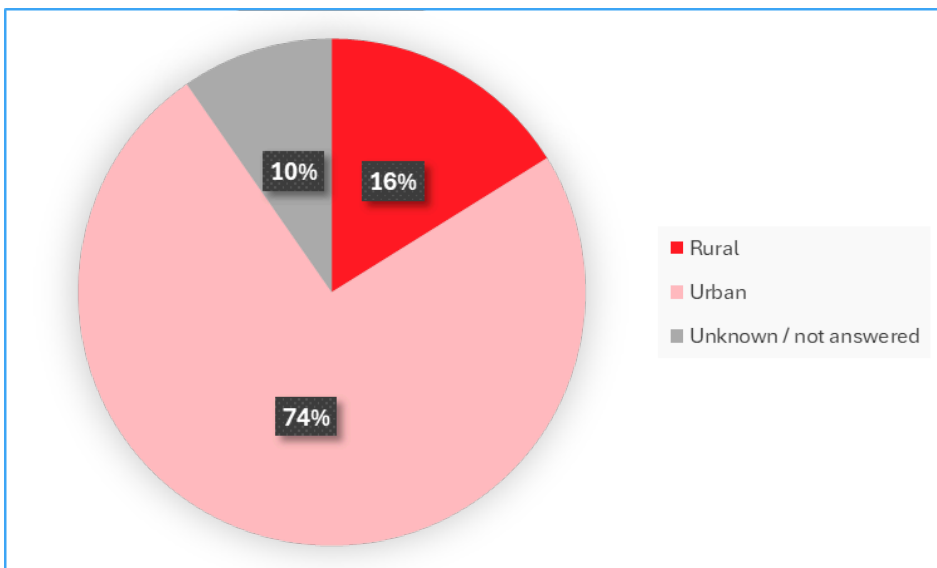
Information on type of workplace (n = 31, data in percentage)

Graph 6 - Size of Workplace



Information level on size of workplace (n = 31, data in percentage)

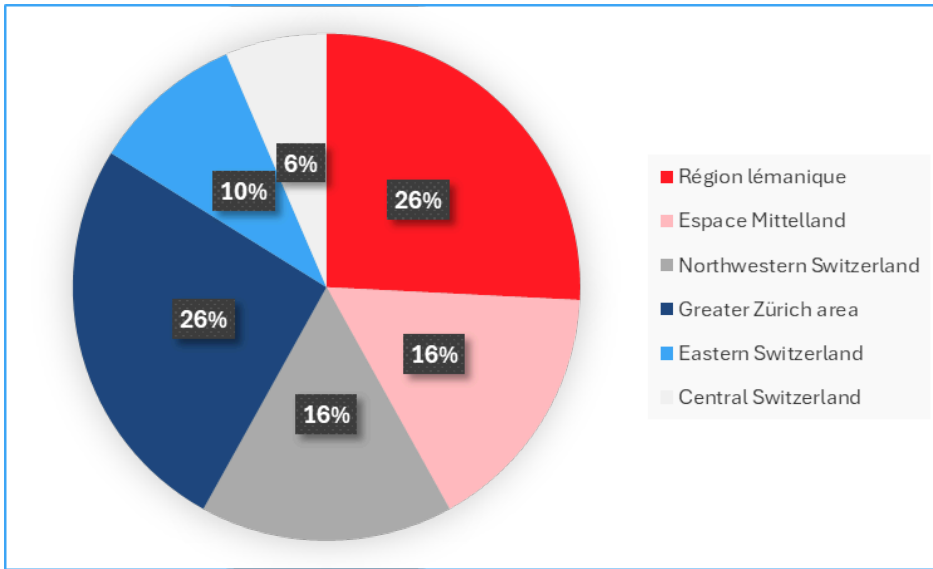
Graph 7 - Workplace rural of urban



Information level on workplace situated in a rural or urban area (n = 31, data in percentage)

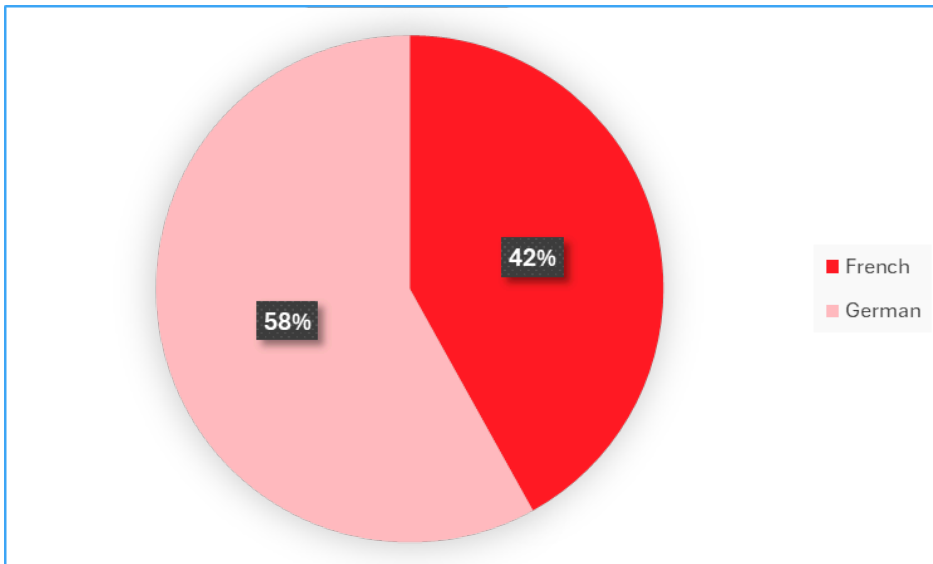


Graph 8 - Region of Workplace



Information level on region of workplace (n = 31), data in percentage). Région lémanique: Cantons of Geneva, Vaud, Valais. Espace Mittelland: Cantons of Bern, Solothurn, Fribourg, Neuchatel, Jura. Northwestern Switzerland: Cantons of Basel-Stadt, Basel-Landschaft, Aargau. Greater Zürich area. Eastern Switzerland: Cantons of St. Gallen, Thurgau, Appenzell Innerrhoden, Appenzell Ausserrhoden, Glarus, Schaffhausen, Graubünden. Central Switzerland: Cantons of Uri, Schwyz, Obwalden, Nidwalden, Lucerne, Zug. Ticino: Canton of Ticino (no interviewees)

Graph 9 - Linguistic region of workplace



Information level on linguistic region of workplace (n = 31, data in percentage). No interviewees from the Italian and Romansh linguistic regions.

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