

Poster – #EIE2021

The added-value of living labs for successful implementation of innovation in healthcare: a systematic review

Presenter: Nina Zipfel (Amsterdam university medical center, University of Amsterdam, Department of Public and Occupational Health, Coronel Institute of Occupational Health, Amsterdam Public Health research institute) – **Netherlands**

Co-authors: Sylvia van der Burg-Vermeulen, Bedra Horreh, Carel Hulshof, and Angela de Boer (*Amsterdam university medical center, University of Amsterdam, Department of Public and Occupational Health, Coronel Institute of Occupational Health, Amsterdam Public Health research institute*) – *Netherlands*

Research aim

The aim of this systematic literature review is to summarize the literature on the effectiveness of a living lab approach on successful implementation of innovations.

Methods

To identify relevant publications, a systematic search was performed in the bibliographic databases PubMed, Embase, Cinahl and PsycINFO from January 2000 up to December 2019. Additionally, snowball strategies were used to screen reference lists of eligible papers. Search terms included free text terms to capture the concept of "living lab" (e.g. 'co-creation' or 'co-design') and "successful implementation" (e.g. 'fidelity' or 'implementation evaluation'). The goal was to include studies that used a living lab approach in either of the following phases of an innovation: development, implementation or evaluation. Studies that report successful implementation were included in this study. For the purpose of this systematic review, implementation was defined as purposeful activities designed in order to put a program or activity into practice. A quality assessment was performed to score the quality of the included studies in terms of implementation component evaluated (i.e. acceptability, adoption, feasibility, etc.) for each study as well as scoring methodological rigor of studies based on the tool from Hawker et al. Studies evaluating or assessing at least one or more of the following implementation outcomes as proposed by Proctor et al. were eligible for inclusion to evaluate successful implementation: acceptability, adoption, appropriateness, feasibility, fidelity, implementation cost, penetration, sustainability. We anticipated that there will be limited scope for meta-analysis and pooling of data as the studies were expected to be heterogeneous.

Key findings

The final systematic search resulted in 1173 unique articles for initial screening; 171 were included for full-text screening of which 32 articles were included for data synthesis. The analysis of included articles is currently underway.

Discussion

How can co-creation with end-users support successful implementation? Does the living lab approach lead to better practice-wide implementation of innovations in healthcare?