**Readme**

**Table 1. A Priori Categories of Influencing Factors of Digital Patient Experience based on the Performance of Routine Information System Management framework** (Aqil et al., 2009)

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| **Determinants and a priori categories** | **Description** |
| **Behavioral Determinants** |  |
| Patient Capability | The individual’s psychological and physical capacity to engage in the concerned digital health activity |
| Patient Opportunity | The individual’s internal conditions that enable or disrupt patients to engage in digital health |
| Patient Motivation | The reflective and automatic brain processes that energize and direct patients’ goal setting and decision-making and their behaviors regarding using digital health |
| **Technical Determinants** |  |
| Intervention Technology | The integration of telecommunications and computers, as well as necessary enterprise software, middleware, and storage and audiovisual software, which enables users to access, store, transmit, understand, and manipulate health information |
| Intervention Functionality | The ability of digital health to work as expected to help users meet their health goals and needs |
| Intervention Interaction Design | The process of moving digital health from its existing state to a preferred state to optimize interactions between patients and digital health interventions |
| **Organizational Determinants** |  |
| Organizational Environment | The management of the health service system, as affected by the rules, values, and practices of the involved people or community |
| Physical Environment | The tangible surroundings (such as space, light, or sound) around patients, which affects their interactions with digital health |
| Social Environment | The cultural environment (such as policy, business, or customs) that affect patients’ interactions with digital health |

**Table 2. Influencing Factors on Digital Patient Experience (Double-Edged Factors Imply Diverse Impact, Positive Factors Imply Positive Impact, and Negative Factors Imply Negative Impact).**

| **Themes** | | | **Studies, n (%)** | **Positive factors** | **Negative factors** | **Double-edged factors** | **References** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Behavioral determinants (3 categories, 6 themes, 11 positive factors, 21 negative factors, and 5 double-edged factors)** | | | | | | | |
|  | Patient capability category | | | | | | |
|  |  | Knowledge and skills | 16 (36) | * Familiarity with the technology * Previous positive experience with digital health | * Low literacy (language, technology; or health) * Previous negative experiences with digital health (eg, failure to achieve goals and disappointment with the DHIsa) | N/Ab | (Ames et al., 2019; Amberly Brigden et al., 2020; Brunton et al., 2015; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Greenhalgh & Shaw, 2017; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Katherine Morton et al., 2017; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Søgaard Neilsen & Wilson, 2019; Simen A Steindal et al., 2020; Randi Stokke, 2016; Rachael C Walker et al., 2019) |
|  |  | Confidence levels | 6 (13) | N/A | * Lack of confidence in skills * Perceived inability to use technologies or services * Misunderstanding digital health tasks | N/A | (Greenhalgh & Shaw, 2017; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Guillermo Molina-Recio et al., 2020; Dawn K Sakaguchi-Tang et al., 2017; Rachael C Walker et al., 2019) |
|  | Patient opportunity category | | | | | | |
|  |  | Identity | 22 (49) | * Younger age (eg, easier access to the internet) * DHIs fit into patient’s daily routine | * Older age (eg, with age-related barriers) * Low socioeconomic status (eg, lack of access to digital health) * Business (eg, travel required, household responsibilities) | * Gender differences | (Ames et al., 2019; Amberly Brigden et al., 2020; Brunton et al., 2015; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Joseph Firth & John Torous, 2015; Sakib Jalil et al., 2015; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Deborah Morrison et al., 2014; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Simen A Steindal et al., 2020; Randi Stokke, 2016; Swanepoel & Hall III, 2010; Rachael C Walker et al., 2019; Linda MP Wesselman et al., 2019; Gaby Anne Wildenbos et al., 2018) |
|  |  | Health status | 20 (44) | * The earlier stages of illness and partial or full remission | * Advanced chronic disease and complex comorbidities * The acute stages of illness * Out of control health condition * Cognitive barriers | * A stable (ie, under control) health condition | (Tina Lien Barken et al., 2019; Baumel et al., 2017; Amberly Brigden et al., 2020; Brunton et al., 2015; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Joseph Firth & John Torous, 2015; Fouquet & Miranda, 2020; Greenhalgh & Shaw, 2017; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Guillermo Molina-Recio et al., 2020; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Simen A Steindal et al., 2020; Randi Stokke, 2016; Gaby Anne Wildenbos et al., 2018) |
|  | Patient motivation category | | | | | | |
|  |  | Perception (perceived advantages and disadvantages) | 21 (47) | * Perceived sense of security, independence, empowerment, convenience and access to care, and less sense of vulnerability * Prepared for emergencies or hospital visits * Intact social networks * A suitable goal setting | * Perceived no benefits * Perceived threats to security, privacy, independence, or an individual’s sense of identity * Worried digital health would replace traditional appropriate (face-to-face) health care services * Impede social life or interfere with patient-to-provider relationships * Cause additional burden (being bombarded with too many messages) | N/A | (Ames et al., 2019; Baumel et al., 2017; Brunton et al., 2015; Anna Cox et al., 2017; Eze et al., 2020; Joseph Firth & John Torous, 2015; Greenhalgh & Shaw, 2017; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Kuijpers et al., 2013; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Randi Stokke, 2016; Rachael C Walker et al., 2019; Linda MP Wesselman et al., 2019; Gaby Anne Wildenbos et al., 2018) |
|  |  | Mindset | 15 (33) | * Prefer digital solutions * Strong desire to keep healthy or gain knowledge | * Computer anxiety * Overreliance * Loss of interest * Lack of motivation | * Patient preferences, expectations, desires, priorities, understanding, or beliefs * Reliance * Trust in technology | (Ames et al., 2019; Brunton et al., 2015; Anna Cox et al., 2017; Eze et al., 2020; Greenhalgh & Shaw, 2017; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Siew Lim et al., 2019; Guillermo Molina-Recio et al., 2020; Deborah Morrison et al., 2014; Katherine Morton et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Simen A Steindal et al., 2020; Swanepoel & Hall III, 2010; Rachael C Walker et al., 2019) |
| **Technical determinants (3 categories, 13 themes, 59 positive factors, 35 negative factors, and 13 double-edged factors)** | | | | | | | |
|  | Intervention technology category | | | | | | |
|  |  | Technical usability | 31 (69) | * Ease of use and understanding * Ready-to-use applications and devices * Automatic and seamless system updating * Adaptive interface * Avoiding error prompts | * Difficulty to use * Equipment or battery failure * High system complexity (eg, complex software downloads and account or password settings) * Data transmission and input difficulties * Unstable internet connection or slow loading of website * Low accessibility * Low error tolerance * Poor picture and sound quality * Low visibility on small screens | N/A | (Ames et al., 2019; Tina Lien Barken et al., 2019; Nazli Bashi et al., 2020; Baumel et al., 2017; Amberly Brigden et al., 2020; Brunton et al., 2015; Wonchan Choi et al., 2020; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Fouquet & Miranda, 2020; Greenhalgh & Shaw, 2017; Ingemann et al., 2020; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Kuijpers et al., 2013; Christopher Lemon et al., 2020; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Simen A Steindal et al., 2020; Randi Stokke, 2016; Yanxia Wei et al., 2020; Werder, 2015; Linda MP Wesselman et al., 2019) |
|  |  | Technical features | 23 (51) | * Detect an improvement from digital health data or share data with HCPsc * Medication or appointment reminders or altering * Symptoms tracking dairies or tools * Timely feedback or motivational feedback notifications * Ability to print or email information * Ability to take voice commands * Nutrition calculator * Clinical measurements * A security password for record access * Agenda setting * Recommender systems * Summary reports for supporting shared decision-making * Input or review information at any point | * Access to changeless or worse physiological data over time | * Access to data | (Ames et al., 2019; Tina Lien Barken et al., 2019; Amberly Brigden et al., 2020; Brunton et al., 2015; Kei Long Cheung et al., 2019; Wonchan Choi et al., 2020; Anna Cox et al., 2017; Eze et al., 2020; Kuijpers et al., 2013; Siew Lim et al., 2019; Guillermo Molina-Recio et al., 2020; Deborah Morrison et al., 2014; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Simen A Steindal et al., 2020; Rachael C Walker et al., 2019; Yanxia Wei et al., 2020; Werder, 2015; Linda MP Wesselman et al., 2019) |
|  |  | Delivery media or devices | 14 (31) | * Mobile technology * Video- or audio-based technology (for users with sensory impairments) * Assisted equipment (eg, provide headphones for people with hearing difficulties and larger monitors with improved lighting for people with visual impairments) | * Web-based technology | * Types of devices (eg, mobile phones or computers) * Device ownership (eg, personal devices or devices without personal identifiers) * Types of channels (eg, SMS text message or videos) | (Ames et al., 2019; Tina Lien Barken et al., 2019; Brunton et al., 2015; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Joseph Firth & John Torous, 2015; Fouquet & Miranda, 2020; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Guillermo Molina-Recio et al., 2020; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Helen Slater et al., 2017; Simen A Steindal et al., 2020) |
|  | Intervention functionality category | | | | | | |
|  |  | Intervention goals | 30 (67) | * Individualized or timely feedback * Remotely consultation with HCPs * Provide sufficient health information | * Be forced to share data with HCPs, which is undesired by patient * Under long-term video-based monitoring | * Remote data monitoring * Self-management support * Health information provision and patient education * Shared decision-making | (Ames et al., 2019; Tina Lien Barken et al., 2019; Nazli Bashi et al., 2020; Baumel et al., 2017; Amberly Brigden et al., 2020; Brunton et al., 2015; Wonchan Choi et al., 2020; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Joseph Firth & John Torous, 2015; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Kuijpers et al., 2013; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Deborah Morrison et al., 2014; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Simen A Steindal et al., 2020; Randi Stokke, 2016; Rachael C Walker et al., 2019; Werder, 2015; Linda MP Wesselman et al., 2019) |
|  |  | Social support | 23 (51) | * Interact with a real human being * Regular and continuous patient-to-physician interaction * Connect with peers * Exchange health information and advice with family and friends | * Replace interpersonal connections with HCPs * Lack of physical human contact with HCPs * Unable to contact HCPs directly or obtain timely feedback | * Remote connection | (Ames et al., 2019; Tina Lien Barken et al., 2019; Nazli Bashi et al., 2020; Baumel et al., 2017; Amberly Brigden et al., 2020; Brunton et al., 2015; Kei Long Cheung et al., 2019; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Ingemann et al., 2020; Sakib Jalil et al., 2015; Kuijpers et al., 2013; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Ramya Sita Palacholla et al., 2019; Dawn K Sakaguchi-Tang et al., 2017; Simen A Steindal et al., 2020; Randi Stokke, 2016; Rachael C Walker et al., 2019; Yanxia Wei et al., 2020; Werder, 2015; Linda MP Wesselman et al., 2019) |
|  |  | Performed quality | 19 (42) | * Reliability and credibility (eg, owner’s credibility, maintenance, third party verification, research support, involvement of clinical experts in the design process, and empirical evidence for successful implementation) * Regulation compliance * Flexibility | * Less accuracy of clinical assessments * Lack of availability and accessibility * Lack of safety and privacy (eg, incorrect intervention dosage and the absence of privacy notifications) * Without well-defined or safely standardized clinical indicators | N/A | (Ames et al., 2019; Nazli Bashi et al., 2020; Baumel et al., 2017; Brunton et al., 2015; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Joseph Firth & John Torous, 2015; Greenhalgh & Shaw, 2017; Lauren Jones & Carol Grech, 2016; Kuijpers et al., 2013; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Yanxia Wei et al., 2020) |
|  |  | Intervention structure | 12 (27) | * A structured format or regular weekly contact with HCPs * Longer duration * Flexible interventions | * Structured interventions not tailored to patients’ individual symptoms and preferences * Structured interventions that constantly remind patients of their symptoms | * The intensity, frequency or duration of interventions * Prefixed interventions | (Ames et al., 2019; Tina Lien Barken et al., 2019; Brunton et al., 2015; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Kuijpers et al., 2013; Siew Lim et al., 2019; Guillermo Molina-Recio et al., 2020; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Linda MP Wesselman et al., 2019) |
|  |  | Theoretical background | 11 (24) | * Presence of multiple underlying theories (BCTsd, EBIse, and persuasive technology) | N/A | N/A | (Nazli Bashi et al., 2020; Baumel et al., 2017; Amberly Brigden et al., 2020; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Sakib Jalil et al., 2015; Siew Lim et al., 2019; Deborah Morrison et al., 2014; Søgaard Neilsen & Wilson, 2019; Yanxia Wei et al., 2020; Linda MP Wesselman et al., 2019) |
|  | Intervention interaction design category | | | | | | |
|  |  | Personalized design | 23 (51) | * Individualized feedback, tailored features, or customization * Be able to choose the topic, content, and language of received messages * Be able to select the timing and frequency of the delivered interventions | N/A | N/A | (Ames et al., 2019; Tina Lien Barken et al., 2019; Nazli Bashi et al., 2020; Baumel et al., 2017; Amberly Brigden et al., 2020; Kei Long Cheung et al., 2019; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; Kuijpers et al., 2013; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Deborah Morrison et al., 2014; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Yanxia Wei et al., 2020) |
|  |  | Design procedures | 22 (49) | * User-centered design or human-centered design * Interorganizational collaboration * Co-design or participatory development methodology * Inclusive design * Involvement of multistakeholder and multidisciplinary teams in the early design stages | N/A | N/A | (Nazli Bashi et al., 2020; Baumel et al., 2017; Amberly Brigden et al., 2020; Anna Cox et al., 2017; Eze et al., 2020; Jacqueline Susan Feather et al., 2016; Fouquet & Miranda, 2020; Greenhalgh & Shaw, 2017; Lauren Jones & Carol Grech, 2016; Emily G Lattie et al., 2019; A.-C. L. Leonardsen et al., 2020; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Rachael C Walker et al., 2019; Werder, 2015; Linda MP Wesselman et al., 2019; Gaby Anne Wildenbos et al., 2018) |
|  |  | Navigation design | 18 (40) | * Instruction manuals and extra user training * Technical support or assistance * Interactive elements | * Lack of clear navigation or instruction design | N/A | (Baumel et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Fouquet & Miranda, 2020; Sakib Jalil et al., 2015; Lauren Jones & Carol Grech, 2016; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Rachael C Walker et al., 2019; Yanxia Wei et al., 2020; Linda MP Wesselman et al., 2019) |
|  |  | Visual design | 15 (33) | * Visualized health data * Tailored, attention-grabbing, simple, and consistent layout design (eg, appealing graphic presentation, pleasing and coherent color scheme, high text quantity, suitable font and interface size, and striking button appearance and location) * Unobtrusive wearable devices | * Unappealing user interfaces * Poorly crafted interface * Low visibility of the content * Bulkiness * Nonportability * Small screen or font size | NA | (Baumel et al., 2017; Wonchan Choi et al., 2020; Eze et al., 2020; Fouquet & Miranda, 2020; Sakib Jalil et al., 2015; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Katherine Morton et al., 2017; Esther Rincon et al., 2017; Søgaard Neilsen & Wilson, 2019; Simen A Steindal et al., 2020; Yanxia Wei et al., 2020; Linda MP Wesselman et al., 2019) |
|  |  | Information design | 12 (27) | A reliable, trusted, credible information sourceAn unmarked senderMultimedia messagesDetailed and comprehensive informationDiverse and updated informationA short, concise, personalized, clear, and direct messageFormal or clinical language for some functions (description of pathologies)Informal language for others (evaluation of conduct)A motivational, friendly, encouraging, polite, respectful, congratulatory, personalized, upbeat, positive, humorous, and relatable toneLayered medication information and warnings from basic to advanced | Overload of informationTechnical language | Information sourceInformation language | (Ames et al., 2019; Baumel et al., 2017; Kei Long Cheung et al., 2019; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Fouquet & Miranda, 2020; Lauren Jones & Carol Grech, 2016; Siew Lim et al., 2019; Guillermo Molina-Recio et al., 2020; Dawn K Sakaguchi-Tang et al., 2017; Simen A Steindal et al., 2020; Yanxia Wei et al., 2020; Linda MP Wesselman et al., 2019) |
| **Organizational determinants (3 categories, 5 themes, 13 positive factors, and 23 negative factors)** | | | | | | | |
|  | Organizational environment category | | | | | | |
|  |  | Cost and time | 21 (47) | Less travel costs and waiting timeComplete tasks at patients’ own paceLess time consumingFaster responseReal-time feedback or timely support | High start-up costs, ongoing costs, and costs related to loss of revenueThe cost of damage to equipmentUnrealistic financial reimbursement and higher costs relevant to internet or equipmentTime consuming for daily monitoring or recharging devicesEnergy to complete “one more task”Disruption to the daily routineLack of timely feedbackLong waiting times for digital health calls | N/A | (Ames et al., 2019; Tina Lien Barken et al., 2019; Amberly Brigden et al., 2020; Harman Chaudhry et al., 2021; Anna Cox et al., 2017; M. F. De La Cruz Monroy & A. Mosahebi, 2019; Eze et al., 2020; Greenhalgh & Shaw, 2017; Ingemann et al., 2020; Lauren Jones & Carol Grech, 2016; A.-C. L. Leonardsen et al., 2020; Siew Lim et al., 2019; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Deborah Morrison et al., 2014; Ramya Sita Palacholla et al., 2019; Esther Rincon et al., 2017; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Randi Stokke, 2016; Rachael C Walker et al., 2019) |
|  |  | Health care providers | 18 (40) | Many more HCPsClinical positive opinion and approvalPolite attitudesGood communication skills | Clinician resistance (eg, less positive views on digital health)Undermined clinical capacity and professional identityIncreased clinical workloadImpeded communication with patientsOvertreatment | N/A | (Ames et al., 2019; Nazli Bashi et al., 2020; Amberly Brigden et al., 2020; Brunton et al., 2015; Anna Cox et al., 2017; Eze et al., 2020; Greenhalgh & Shaw, 2017; Ingemann et al., 2020; Lauren Jones & Carol Grech, 2016; A.-C. L. Leonardsen et al., 2020; Guillermo Molina-Recio et al., 2020; Katherine Morton et al., 2017; Ramya Sita Palacholla et al., 2019; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Simen A Steindal et al., 2020; Randi Stokke, 2016; Yanxia Wei et al., 2020; Werder, 2015) |
|  |  | Health information systems | 13 (29) | The compatibility, interoperability, integration, sustainability, and completeness of systemsThe clarity and transparency on accountability, workflow, and data processingClear information on required stakeholder responsibility | Lack of compatibility and interoperability of the system with different mobile operating systems and terminalsPoor integration and working relationship between the service teamLack of adequate installationConnectivity issues between medical devices and mobile terminalsLimitation on scalability | N/A | (Brunton et al., 2015; Wonchan Choi et al., 2020; Anna Cox et al., 2017; Eze et al., 2020; Fouquet & Miranda, 2020; Greenhalgh & Shaw, 2017; Lauren Jones & Carol Grech, 2016; Mukhtiar Memon et al., 2014; Guillermo Molina-Recio et al., 2020; Katherine Morton et al., 2017; Helen Slater et al., 2017; Søgaard Neilsen & Wilson, 2019; Werder, 2015) |
|  | Physical environment category | | | | | | |
|  |  | Place | 9 (20) | Stay in a familiar and relaxing environment; not restricted to the hospital setting | Environmental distractions (eg, background noise and lighting) | N/A | (Ames et al., 2019; Anna Cox et al., 2017; Eze et al., 2020; Fouquet & Miranda, 2020; Ingemann et al., 2020; A.-C. L. Leonardsen et al., 2020; Dawn K Sakaguchi-Tang et al., 2017; Helen Slater et al., 2017; Simen A Steindal et al., 2020) |
|  | Social environment category | | | | | | |
|  |  | Culture | 4 (9) | N/A | The absence of or inadequate supporting policies and legislationLack of a plausible business caseUnrealistic financial reimbursementLack of well-established sociotechnical infrastructure | N/A | (Nazli Bashi et al., 2020; Eze et al., 2020; Greenhalgh & Shaw, 2017; Helen Slater et al., 2017) |