2022 IMIA Yearbook of Medical Informatics

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Title: Telehealth as a Means of Enabling Health Equity: Results of a Modified Delphi Process

Authors : C Kuziemsky, A Taylor, JG Udayasankaran, P Ranatunga, G Kulatunga, S John , O John, JF Flórez-Arango, M Ito, K Ho, SB Gogia, K Araujo, VK Rajput, W Meijer, MS Iyengar, A Basu

Dear Colleagues,

Your paper "**Telehealth as a Means of Enabling Health Equity: Results of a Modified Delphi Process**" has been reviewed and the reviewers agreed and recommend **Acceptance**. The comments are attached to this note.

Please send your revised manuscript (in Word format and PDF) to the IMIA VP for Services Lina Soualmia, at lina.soualmia@chu-rouen.fr,within the next days but not later than **March 13th, 2022** so that it could be included in the first part of the Yearbook of Medical Informatics.

Yours sincerely,

Katharine Fultz Hollis, Fleur Mougin, and Lina F. Soualmia
Editors

Encl.

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Comments of reviewers:

Reviewer 1: Minor revision

Thank you for the opportunity to review the article *" Telehealth as a Means of Enabling Health Equity: Results of a Modified Delphi Process "*.

This review article is important in medical informatics research and in the design of telehealth to manage pandemics. It dresses a review on telehealth services used the COVID-19's pandemic for analyzing the usage and its evolution, and the unintended generated consequences.

The authors used a Delphi technique process with several experts and proposed valuable recommendations in the design of HIT, in order to make them equitable for all patients (using the concept of "global health equity").

The design of the study is very well conducted, and the recommendations are interesting and should be re-used as a generic guideline.

However, the paper is missing a general definition of a Delphi process, since I'm not sure that the audience is familiar with this concept. The authors referred to it but without presenting the main ideas. Except if readers consult the referenced papers, they would have no ideas of how it was used and how it has been modified.

The paper is well-written, and the audience should learn a lot on telehealth and this new way of medical consultation that has been increased in several countries with the COVID-19 pandemic. The paper includes also a great number of relevant references and it is in the scope of the IMIA Yearbook 2022 special topic.

Reviewer 2: Accept

This paper is about the proposition of recommendations in the development and implementation of telehealth and complex HIT with a focus on equity, literacy in health, generally speaking, a set of "unintended" encountered consequences. The paper is very timely and would certainly be a reference for many researchers in the field of medical informatics.

I liked the way the study was designed in this active working group, and mainly the way of capturing real world issues across countries (represented by co-authors of the paper) that are

facing practitioners, policy makers and researchers on regards to the unintended consequences and inequities induced by telehealth. The data is provided by fine-grained analysis
I would only suggest the authors the use of the term "unanticipated consequences".

Reviewer 3: Accept

The paper addresses the need for evaluation of digital technologies, mainly telehealth, being deployed and the unintended consequences, in terms of inequities. It addressed a specific study question : "How can telehealth help design resilient and equitable global health systems?"
This research relies on existing study of this working group in which the authors compared telehealth responses to COVID-19 across several countries to identify learning points to better enable telehealth capacity for critical response, such as that encountered during a global pandemic.
Using the same approach, they used in-country responses from the IMIA telehealth working group members and received answers that led them to propose several perspectives. The authors did not simply asset claim for more inclusive telehealth and the challenging ways to address these gaps, but gave a global perspective on telehealth design to support resilience and inclusive telehealth service delivery.
The authors reviewed recent publications on this topic mainly on the need of inclusive digital health technologies (addressing socio-economic disparities for a better equity).
I don't think that it is necessary to specify that the process is a "Modified Delphi process" in the title, I would remove the second part of the title.