Imagining a co-created virtual immersive program in long-term care with residents, family, and staff
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Virtual immersive programs (VIPs) in long-term care have been widely suggested to confer positive benefits on quality of life and wellbeing of older adults with dementia in long-term care (LTC) homes. Despite evidence indicating the need for tailored programs for older adults to further promote engagement, there are limited efforts in understanding the expectations of a VIP in LTC homes from key end-users prior to implementation. Focusing on the empathize (desires of end-users and expected outcomes) and define (potential challenges and concerns) stages of the Design Thinking Framework, this presentation shares the expected outcomes, preferences, and concerns of residents, family, and staff as part of a larger study co-designing a VIP in LTC for older adults with dementia. **Method** With fourteen residents, six family members, and six staff members, we conducted qualitative focus groups and interviews in one LTC home in Vancouver, Canada. Most participants were at least 71 years old and of Caucasian descent. Key expectations of a VIP in LTC on content and delivery, positive outcomes, and challenges were identified using reflexive thematic analysis of interview and focus group transcripts. **Results and Discussion** Five themes were identified: (1) personalized and engaging content, which appreciates the ability of VIPs to recreate certain experiences catered to resident preferences and experiences (2) a world without boundaries, where residents connect with both novel and familiar worlds (3) shared experiences and care support, that potentially fosters social connections between residents while assisting staff as a practical behavioural support tool (4) challenges of transitioning back to actual reality, which entails difficulties taking breaks and potential feelings of sensory overloads and (5) technology and usability barriers, where staff undergo steep learning curves in navigating technology and are gatekeepers in VIP accessibility to residents. For future work in effectively co-designing technology with residents, staff, and family members in LTC, we suggest pragmatic tips through the framework IMAGINE: **I**nclude residents in shared decision-making and respect residents' agency; **M**otivate staff and family facilitators to be present and prepare for potential triggers; **A**dapt delivery and content to ensure that it's engaging, meaningful, and inclusive; **G**ive residents opportunities to try and avoid imposing; **I**ntrospect on personal assumptions regularly to ensure authentic inclusivity; **N**avigate technology dependency and strategies for transitions between virtual and actual reality; **E**mpathize with the personhood of each participant and appreciate their diversity in experience, background, and capacities. This presentation highlights the fundamental need for collaborative research and addresses an important stage that is often dismissed during technology development in LTC by exploring the expectations of essential perspectives.

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Figure 1: A resident using an Oculus headset during a focus group