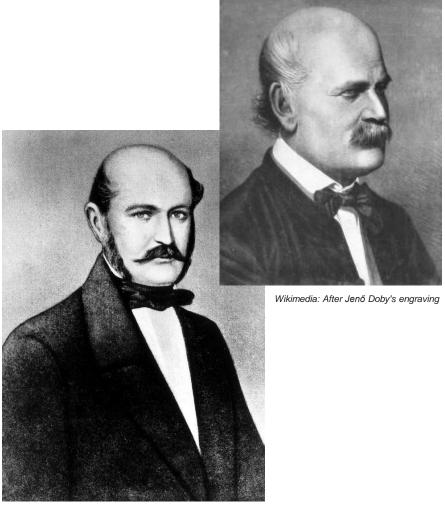
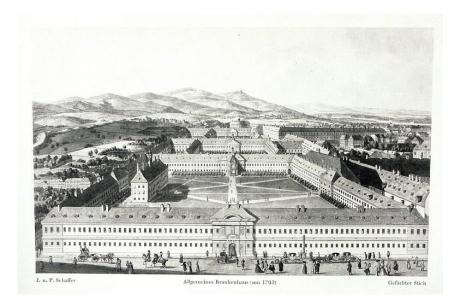
Implementation Science 101

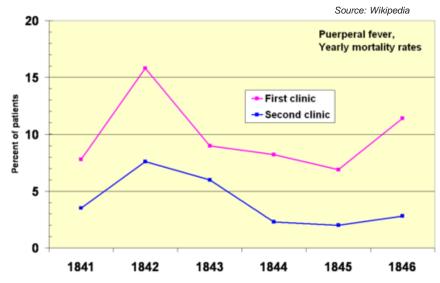
Dr Bridget Abell

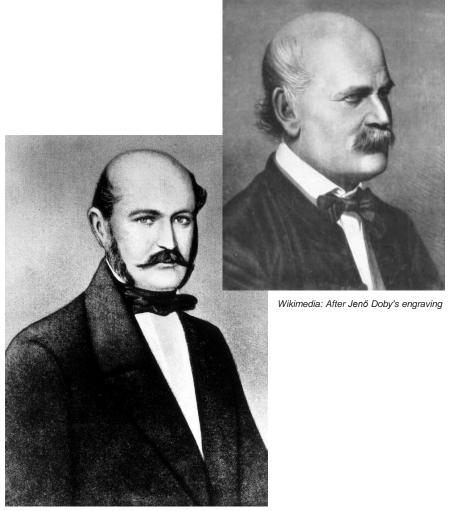
Senior Research Fellow-Implementation Science Australian Centre for Health Services Innovation, QUT



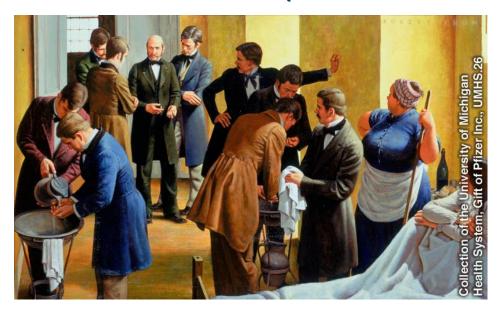
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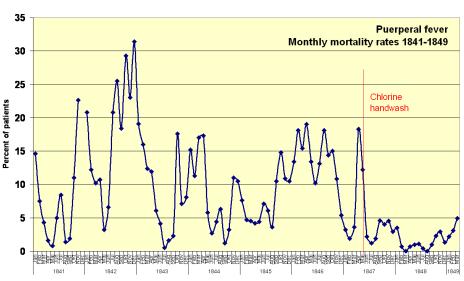






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Despite strong evidence Semmelweis was not able to convince his peers to implement his simple solution

- did not communicate the evidence (14 years to publish)
- contradicted established norms, beliefs and paradigms of disease at the time
- not supported by his superiors/poor stakeholder engagement
- washing of hands before treating each patient would be too much work
- needed structural redesign
- unreasonable to think doctors were carrying disease and killing patients
- personal characteristics (rude, confrontational, insulting) not a change agent

It would be 2 decades after his death before more knowledge about germ theory and antiseptic techniques demonstrated the value of hand washing

Evidence is not enough!

"Good ideas and missionary zeal are sometimes enough to change the thinking and actions of individuals; they are rarely, if ever, effective in changing complicated organizations" Seymour Sarason, 1971

Evidence is not enough

- Gap between research evidence and clinical practice is widely recognised
- Several publications have estimated a mean gap of 17 years between publication and routine uptake in practice
- In 2012/2013 40% of care for children across 3 Australian states did not adhere to guidelines [1]
- Surely things have improved with the broader push towards translational research in recent years?

https://doi.org/10.1007/s10552-020-01376-z **ORIGINAL PAPER** 21 INTERVENTION 12 13 17 12 Legend Mammography for women ages 50-74 within the past two years # of Years from Publication to Guideline Clinicians' Advice to guit smoking for adult smokers seeing a physician during the past 12 months [19] # of Years from Guideline to Implementation Colorectal Cancer Screening for adults ages 50-75 based on most current screening guidelines [32] Total # of Years from Publication to Implementation Co-testing for cervical cancer screening using combination of pap and HPV test for women ages 30-65 [6:7] HPV vaccination ≥2 doses for male and female adolescents

Cancer Causes & Control (2021) 32:221-230

Choosing an evidence-based practice is one thing, implementation of that practice is another thing altogether. One without the other is not sufficient for reliably producing benefits.

A role for implementation science



Many attempts to implement change/improvement within organisations fail and effective treatments/interventions take too long to be integrated into routine patient care



Successful implementation requires more than just knowledge production and dissemination; it's largely a social process which requires **human agency**, **behavioural** change, **culture** change and **organisational** change.



Need to focus on **'how to**' turn new knowledge into action: **introducing solutions** into a health system, understand **processes** of implementation, identify **barriers and facilitators** of implementation, and factors that promote **sustainability**



Led to the development of 'Implementation Science'

What is implementation science?

Key concepts/definitions





Dissemination, knowledge translation, implementation science?

Sharing information, in order to increase people's awareness and their knowledge of something e.g present at conference, guidelines

"How do we get the word out about this evidence?"

The dynamic and iterative process of making evidence usable, understandable, and applicable in practice or policy e.g tailored messages

"How do we adapt this evidence for practical use in real-world settings?"

The scientific study of methods and strategies to promote the systematic uptake of research findings and evidence-based practices into routine practice or policy e.g understand barriers and enablers

"What strategies work best to implement and sustain this in real-world contexts?"

Words used to define implementation science

Action From To Goal Result Translating/transferring/ Intervention/program Practice/routine practice Improve/change Quality of transporting/exchanging healthcare Meet/achieve Use/utilisation/routine Research Intervention/ Reducing/closing gap use Deliver Knowledge implementation Real-world/ reality/ Promoting uptake Identify/clarify Evidence context/ settings Healthcare Getting/bringing/delivering **Practice** Innovation/program/ Outcomes/health **Understanding** policy outcomes Innovation Knowledge **Implementing** Science

Implementation science relates to the idea of transferring evidence-based knowledge into practice, in a scientific way to improve outcomes

Process

Putting

Bridging/nexus

Integrating

Promoting/encouraging

Key implementation science questions

How do contextual factors influence implementation success or failure? How can they be modified to increase chances of success)?

What are the most effective techniques to incorporate new discoveries and evidence-based practices into care delivery?

What are the most effective techniques to de-implement practices that are no longer effective or were never effective?

- Scaling up
- Sustaining
- Replicating
- Integrating
- Equitability
- Real-world effectiveness

- Exploring
- Describing
- Influences
- Explaining
- Predicting

Multi-faceted uses and targets



Change in practice behaviour

e.g. getting doctors to prescribe new Drug B, instead of old Drug A

New model of care

Simple: single organisation / single clinical discipline
Complex: multiorganisational / multi-disciplinary





Product, infrastructure or technology

e.g. multiorganisational rollout of digital management software Policy change
Within an organization
Large scale



A simplified explanation



The goal of implementation science is not to establish the health *impact* of a clinical innovation, but rather to identify the factors that affect its *uptake* into routine use

What is implementation science?

The process







...although there are many wrong answers to the question of how to 'do' implementation, there is rarely a single right answer

A science informed practice



"There is no tooth fairy. Nor is there any formal framework or model or checklist of things to do (or questions to ask) that will take you systematically through everything you need to do to 'implement' a particular piece of evidence in a particular setting."

science?



What methods can I use?

Rapid Evidence Synthesis

Used to summarize and synthesize research literature and can be applied to synthesizing evidence on known determinants for implementing evidence-based interventions. To learn more, visit lmpSciMethods.org.

Impact Evaluation

An evaluation of how the intervention or implementation affects relevant outcomes, intended or otherwise, and typically includes evidence of how outcomes would or would not differ in the absence of the intervention or implementation.

Organizational Assessment

Evaluation of an organization's readiness and capacity to implement evidence-based practices. This process helps identify strengths, weaknesses, and areas needing improvement to ensure successful implementation.

Qualitative Health Systems Research

Research that uses methods of observation and interviewing to evaluate health systems through the lens of those who experience them, and to explain factors that shape outcomes, dimensions of care, as well as the social and political determinants of health. For an excellent overview of qualitative methods in implementation research, see Qualitative methods in implementation research: An introduction (Psychiatry Research, 2019).

Operations Research

The use of qualitative or quantitative models to facilitate decision-making in complex implementation, particularly relating to structure, prospective evaluation, and reconfiguration.

Economic Evaluation

Comparing the costs and benefits of different courses of action. Specifically, understanding the costs associated with evidence-based practices (such as interventions, policies, programs, and tools) and the efforts required to deliver and sustain them.

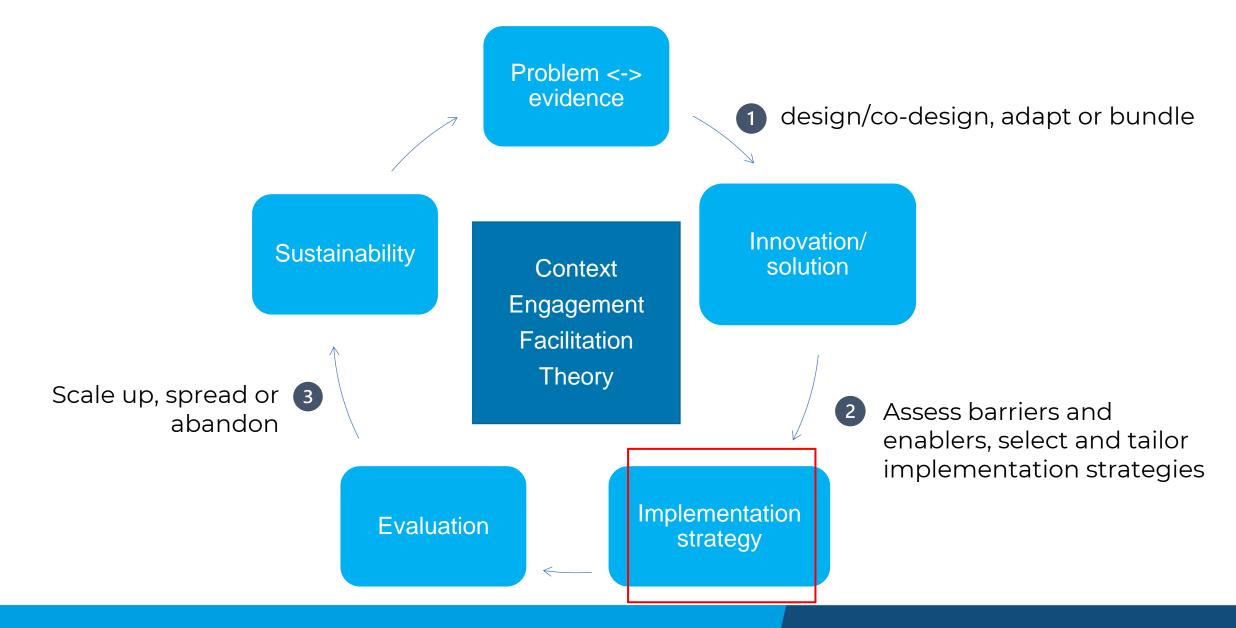
Causal Pathway Diagrams

A graphical tool that enables visualization of how implementation strategies bring about implementation outcomes and the conditions under which they work. To learn more, visit ImpSciMethods.org.

Stakeholder & Policy Analysis

The intentional integration of stakeholder (individuals or groups who have an interest in a particular policy or program) perspectives and feedback in the analysis of policy advisability, execution and impact.

The process of implementation science



Implementation strategies

Approaches or techniques used to enhance the adoption, implementation, sustainment, and scale-up/spread of an innovation [1] —— implementation outcomes

- discreet/single (e.g. training)
- multifaceted/bundle (e.g. training plus reminders)

A refined compilation of implementation strategies: results from the Expert Recommendations for Implementing Change (ERIC) project

Byron J Powell ™, Thomas J Waltz, Matthew J Chinman, Laura J Damschroder, Jeffrey L Smith, Monica M Matthieu, Enola K Proctor and JoAnn E Kirchner

Implementation Science 2015 10:21

https://doi.org/10.1186/s13012-015-0209-1 © Powell et al.; licensee BioMed Central. 2015

Received: 23 October 2014 | Accepted: 22 January 2015 | Published: 12 February 2015

An expert derived compilation of implementation strategies

73 discreet implementation strategies

From: https://impsciuw.org/implementation-science/research/implementation-strategies/

Example implementation strategies

Use evaluative and iterative strategies

- · Assess for readiness and identify barriers and facilitators
- Audit and provide feedback
- · Purposefully reexamine the implementation

Adapt and tailor to context

- · Tailor strategies
- · Promote adaptability
- · Use data experts

Train and educate stakeholders

- Conduct ongoing training
- Distribute educational materials
- · Use train-the trainer techniques

Engage consumers

- · Increase demand
- Use mass media
- Involve patients/consumers and family members

Change infrastructure

- Mandate change
- Change record systems
- Change physical structure and equipment

Facilitation

- Provide local technical assistance
- · Provide clinical supervision

Provide interactive assistance

- · Identify and prepare champions
- · Organize clinician implementation team meetings
- · Identify early adopters

Develop stakeholder interrelationships

- · Remind clinicians
- · Revise professional roles
- · Fascilitate relay of clinical data to providers

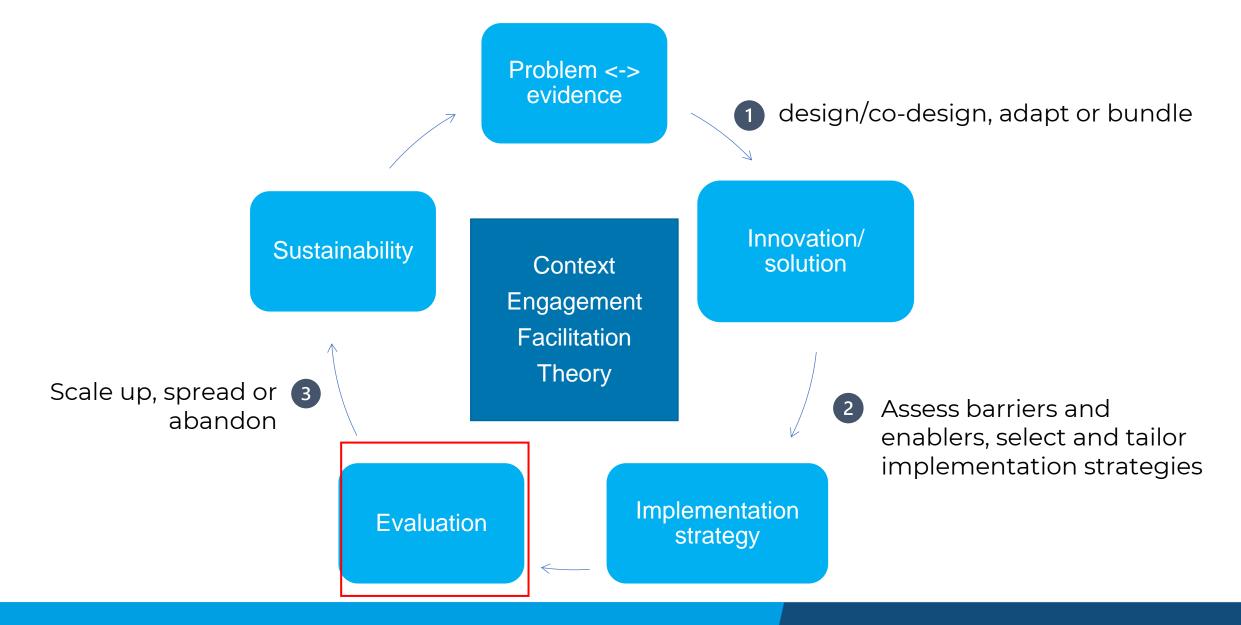
Support clinicians

- Alter incentive/allowance structures
- Access new funding
- · Fund and contract for the clinical innovation

Utilize financial strategies

Waltz TJ, et al. Use of concept mapping to characterize relationships among implementation strategies and assess their feasibility and importance: results from the Expert Recommendations for Implementing Change (ERIC) study. Implementation Science. 2015 Dec;10(1):1-8

The process of implementation science



Implementation Outcomes

Evaluation Outcomes

Implementation Outcomes

- Acceptability
- Adaptation
- Adoption
- Appropriateness
- Effectiveness
- Feasibility
- Fidelity
- Implementation cost
- Penetration
- Sustainability

Service Outcomes*

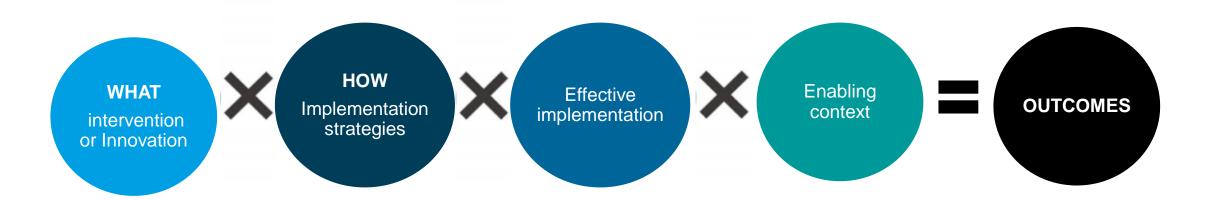
- Effectiveness
- Efficiency
- Equity
- Patient Centeredness
- Safety
- Timeliness

Patient Outcomes

- Symptoms
- Function
- Satisfaction
- Cost (affordability)
- Self-report measures

*Institute of Medicine standards of care

The implementation equation



What is implementation science?

Theories, models and frameworks





"There is nothing so practical as a good theory"

A central tenant of implementation science is the use of theories, models and frameworks \

An efficient way to share understanding across diverse settings by using "synthesising architecture" of implementation-related phenomena

guide implementation

facilitate the identification of implementation determinants

help select implementation strategies

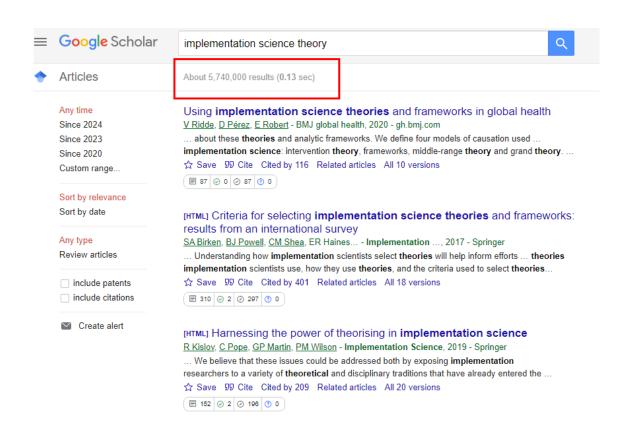
frame study questions and motivate hypotheses

clarify constructs to be measured

depict relationships to be tested

contextualise results

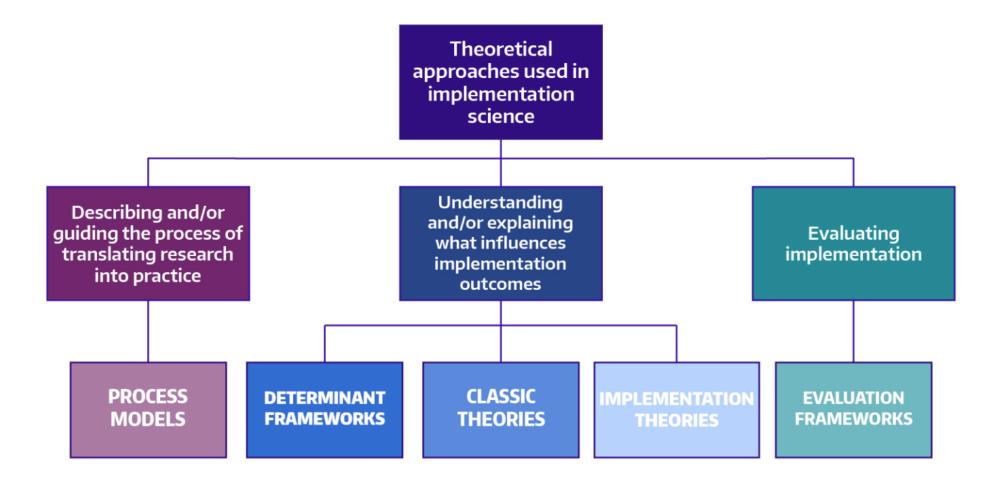
"Theories are like toothbrushes"



Over 150 theories, models or frameworks for knowledge translation and/ or implementation found in the literature

So how do I choose which is right for my project?

Categorisation of implementation science TMF



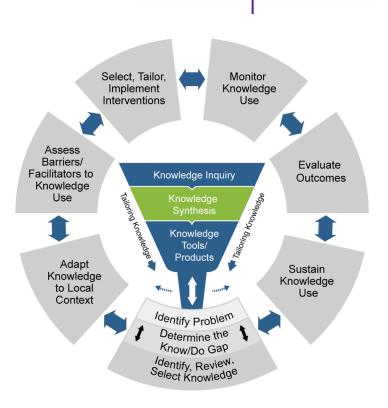
Adapted from: Nilsen P. Making sense of implementation theories, models and frameworks. *Implement Sci.* 2015;10(1):1-13.

Process models

Dynamic Sustainability EPIS Model Dynamic Adaptation PRISM Quality Implementation

Describing and/or guiding the process of translating research into practice

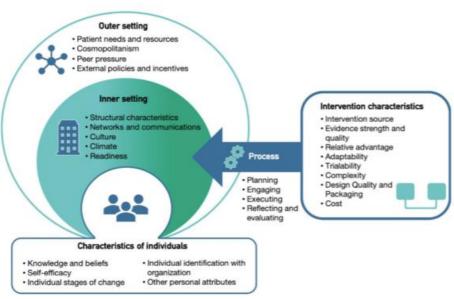
- Specify the steps or stages in the process of implementation
- Provides a "roadmap" for your journey
- May be a good place to start
- Usually depict a dynamic/iterative process
- Can use additional models or frameworks to help with various process model stages e.g. examining contextual factors that may influence implementation



Determinants frameworks

 Understanding and/or explaining what influences implementation outcomes

- Descriptive, highlight factors which may influence implementation outcomes and relationships between them
- Assessment of barriers and enablers to implementation
- Can be used to assess context
- No "how-to" support



Classic theories

Organizational Theory

Behavioral Theories

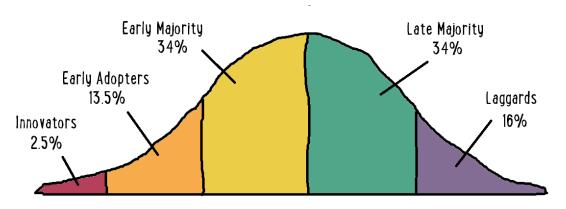
Diffusion of Innovation

Understanding and/or explaining what influences implementation outcomes

- Theories from external fields that may be useful in understanding implementation
- Psychology, sociology, organisational

Diffusion of Innovations Model

Everett Rogers, 1962





Implementation theories

Implementation Climate

Organizational Readiness for Change

Normalization Process Theory

Theories that have been developed or adapted by implementation researchers from scratch to understand implementation

implementation outcomes

Understanding and/or explaining

what influences



What is NPT?

A way of thinking about implementation problems that focuses on:

- · How interventions can become part of everyday practice
- · How different groups of people need to work together to achieve

How do I use it?

Thinking of your intervention, use the four sets of questions on the right to identify possible barriers to successful implementation, and suggest solutions to improve the process.

COHERENCE How do people make sense of the intervention as something 'new'? (eg. what it involves, why?)

COLLECTIVE ACTION

How do people make it work in practice?

What do they need to make it happen?

COGNITIVE PARTICIPATION

How do people get involved and stay committed?

Can they see how they contribute?

'WHAT WORK NEEDS TO BE DONE?'

REFLEXIVE MONITORING

How do people assess whether it is worth the effort?

> Can improvements be made?

www.normalizationprocess.org

From: https://impsciuw.org/implementation-science/research/frameworks/

Evaluation frameworks

RE-AIM (Reach, Efficacy, Adoption, Implementation, Maintenance)

Framework for Reporting Adaptations and Modifications-Enhanced (FRAME)

Implementation Outcomes Framework

Stages of Implementation Completion (SIC)

Evaluating implementation

- Specify aspects of implementation that could be evaluated to determine implementation success
- Implementation outcome measures
- Qualitative and quantitative



Use the right tool (TMF) for the job

"TMF arise through a lens that is shaped by the service contexts chosen for emphasis and by the contextual levels that serve as primary organizing arenas" (individual, organisational, system, community)



"Frameworks are like tools in your toolbox.

A screwdriver is amazing if you are inserting a screw, but if you have a nail it's going to feel like a useless tool"

Aarons GA, et al. Administration and Policy in Mental Health and Mental Health Services Research. 2011 Jan 1;38(1):4-23.

The Centre for Implementation: https://thecenterforimplementation.com/

From: https://impsciuw.org/implementation-science/research/frameworks/

Where to start?

- 1. What stage of implementation are you at: *planning*, *doing*, *evaluating*?
- 2. What is the focus of your project: individuals and how they behave, teams and how people work together, organisational aspects, process of change, other?
- 3. What is the purpose of the project: evaluation, context assessment?
- 4. What is the complexity/socioecological level of the intervention? individual, team, organisational level change?
- 5. What level of guidance is required: practical, conceptual, both?
- 6. What is your role in the project: implementor, researcher?
- 7. What resources are available for data collection and analysis
- 8. What is the content area and/or context of your project

Where to start?

D&I Models Webtool Explore D&I TMFs Plan Select Combine Adapt Use Assess **Explore Models:** Type in name...

Explore D&I TMFs

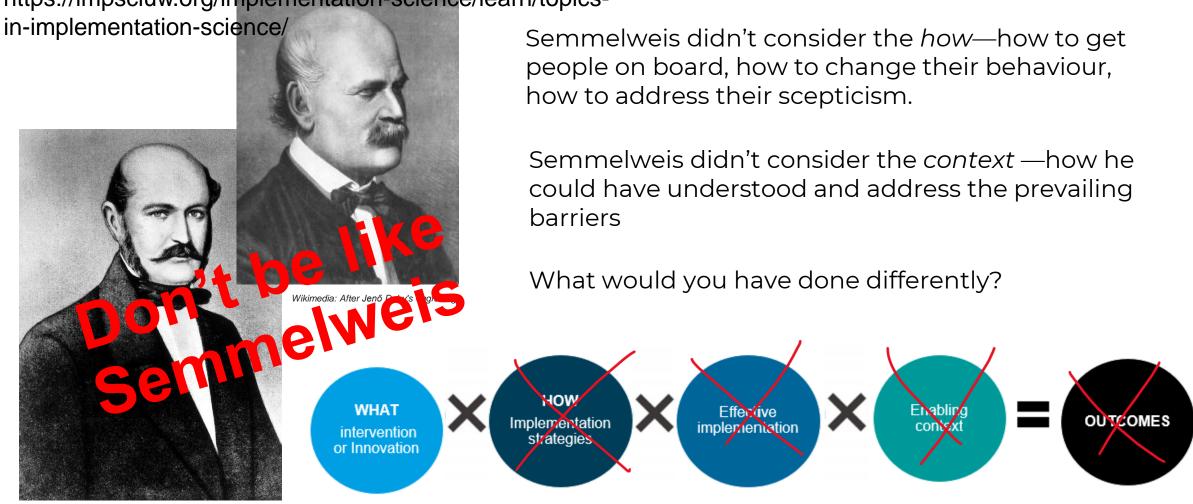
You can search for D&I TMFs by entering a keyword OR by selecting from the categories below.

Model	D &/or I	÷	Socio-Ecological Levels	*	Field of Origin 🗘	Times Cited	Ť
A Model for Evidence-Based Practice							
ACE Star Model of Knowledge Transformation	D>I		IndividualOrganizationCommunity		Nursing	44	
Active Implementation Framework	I-Only		IndividualOrganizationCommunity		Education	1870	
Adaptation in dissemination and implementation science	I-Only		IndividualOrganizationCommunity		Health Disparities	39	

https://dissemination-implementation.org/tool/explore-di-models/

https://impsciuw.org/implementation-science/learn/topics-

Wikimedia: unknown authour



For more topics on Implementation Science via University of Washington





Resources for steps of Implementation Science via University of Washington



Australian Centre for Health Services Innovation



Centre for Healthcare Transformation

