

Lecture Transcript								
Module Name	Mental Health in the Community							
Week 5	Implementation in Health Care							
Topic	Implementation Outcomes (Part 1 of 4)							
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Implementation outcomes are one of the core concepts of implementation science. Yet there is widespread variation on how to conceptualise and evaluate implementation success. This hinders the development of an evidence base for implementation strategies where meta-analyses are unable to synthesise varying constructs and measures. This talk provides an overview of the key considerations when selecting an implementation outcome for your research or evaluation.

The learning outcomes for this session are: firstly, to help you define implementation outcomes; to recognise Proctor's taxonomy of implementation outcomes; to appreciate the suitability of different methods for assessing implementation outcomes; to understand the importance of validated and pragmatic quantitative outcome instruments; and finally, to know where to identify validated implementation outcome instruments.

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So just before we begin, please note that this lecture contains a multiple-choice question, which will appear as an automatic pop-up on Slide 11. This question is not marked and does not count towards your overall grade. It is simply intended as a point of reflection on the topic discussed. Once you have chosen your multiple-choice answer, hover your mouse over it and press 'Select'. At this point, the lecture video will automatically resume.

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So what are implementation outcomes? One of the most popular definitions is provided by Enola Proctor, who defines implementation outcomes as 'deliberate and

purposive actions to implement new treatments, practices, and services'. Implementation outcomes have three important functions.

First, they serve as indicators of implementation success, so they tell us how well an intervention has been implemented. Second, they are proximal indicators of implementation processes, so they tell us how an intervention has been implemented. And third, they are key intermediate outcomes. An intervention will not be effective if it is not implemented well. So implementation outcomes are preconditions for achieving change in patient or service outcomes.

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Proctor conducted a literature review of implementation outcomes and proposed what she calls a working taxonomy of eight conceptually distinct implementation outcomes. The taxonomy is also referred to as the Implementation Outcomes Framework. The aim of the taxonomy is to bring consistency and comparability to the field.

I'm just going to talk through each of the implementation outcomes and their definitions. So acceptability is the perception among stakeholders that the new intervention is agreeable. Adoption is the intention to apply or the application of a new intervention. Appropriateness is the perceived relevance of an intervention to a setting, audience, or problem. Feasibility is the extent to which an intervention can be applied. Fidelity is the extent to which an intervention gets applied as originally designed or intended. Implementation costs are the costs of the delivery strategy, including the cost of the intervention itself. Coverage, which is sometimes called penetration or reach, is the extent to which eligible patients, or the population actually receive the intervention. And sustainability is the extent to which a new intervention becomes routinely available, or is maintained post-introduction.

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To help us conceptualise and define implementation outcomes, Proctor suggests comparing them to service outcomes and patient or client outcomes. In the first column, we have the eight implementation outcomes included in Proctor's taxonomy, which were defined on the previous slide. The second column lists types of service outcomes, such as efficiency, safety, equity, and timeliness. An example of a service outcome is A&E visits. And the third column includes patient outcomes, such as function and symptoms.

An example of a patient outcome is alcohol consumption. So implementation outcomes are interactive. Acceptability, appropriateness, and feasibility are thought to predict adoption. Fidelity is linked to effectiveness of patient outcomes. So if an intervention is not received, or used as anticipated, it may not be effective, for

example, only one in eight treatment sessions are received by the patient, and efficient service is more likely to be acceptable among healthcare professionals.

So these are just a few examples of how implementation outcomes interact with service and patient outcomes. Researchers and evaluators encouraged to consider and empirically test the hypothesised relationships between implementation, service, and patient outcomes.

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Proctor's framework of implementation outcomes is one of the most popular when selecting an implementation outcome, but there are other frameworks that help identify implementation outcomes. Here are two examples, the Consolidated Framework for Implementation Research (CFIR) aims to understand and/or explain influences on implementation outcomes. It assesses 39 constructs over five domains. The five domains include intervention characteristics, outer setting, inner setting, characteristics of individuals, and the process of implementation.

So examples of intervention characteristic constructs include adaptability or complexity. And an example of an inner setting construct is readiness for implementation. So some systematic reviews have used the Consolidated Framework for Implementation Research to identify implementation outcome instruments that measure all 39 constructs.

Another framework that has some overlap with Proctor's taxonomy, is RE-AIM. The RE-AIM framework aims to encourage greater attention to intervention elements that can improve the sustainable adoption and implementation of evidence-based interventions. RE-AIM assesses five dimensions across individual, organisation, and community level. These include reach; effectiveness; adoption; implementation, where they mean fidelity; and maintenance.

Slide 11

I'd like you to answer the following question. Which implementation outcomes does the following definition refer to? 'Extent to which eligible patients/ population actually receive intervention?' A: Fidelity, B: Coverage, C: Feasibility, D: Adoption.

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In summary, implementation outcomes are conceptually distinct from service and patient outcomes. There are many frameworks, theories, or models that can guide the identification of implementation outcomes, such as Proctor's taxonomy of implementation outcomes, the Consolidated Framework for Implementation Research (CFIR), and RE-AIM.

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