

Implementation strategies: The active implementation ingredients

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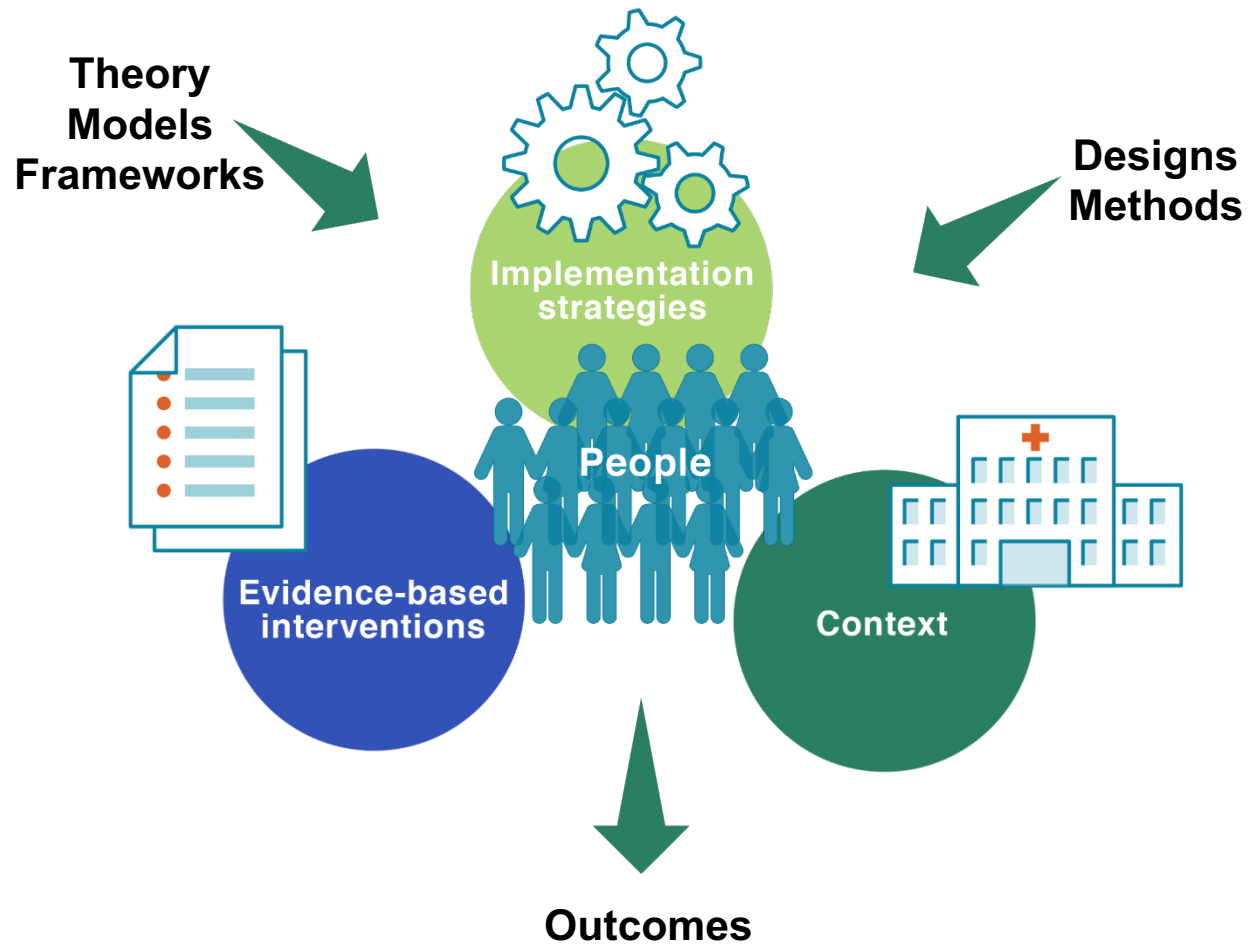
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Implementation science ingredients



Implementation science made (too) simple

- Evidence-based practice / innovation / clinical measures == **THE THING** 
- Implementation strategies == what we do to try to help people/places **DO THE THING** 

ISLAGIATT approach to implementation

Prof. Martin Eccles, Implementation Researcher

“It Seemed Like A Good
Idea At The Time”

Implementation strategies

Definition: “methods or techniques used to enhance the adoption, implementation, and sustainability of a clinical program or practice” (Proctor, Implement Sci. 2013)

Single strategy



Multiple strategies in combination



Clinical interventions (The 'WHAT')

**Hand hygiene according to the WHO
5 moments**

Implementation strategies (The 'HOW')

Clinical interventions (The 'WHAT')

Implementation strategies (The 'HOW')

The WHO Safe Surgery Components (focus: sign-out)



Routine information exchange and systematic documentation of intraoperative adverse events (iAEs)



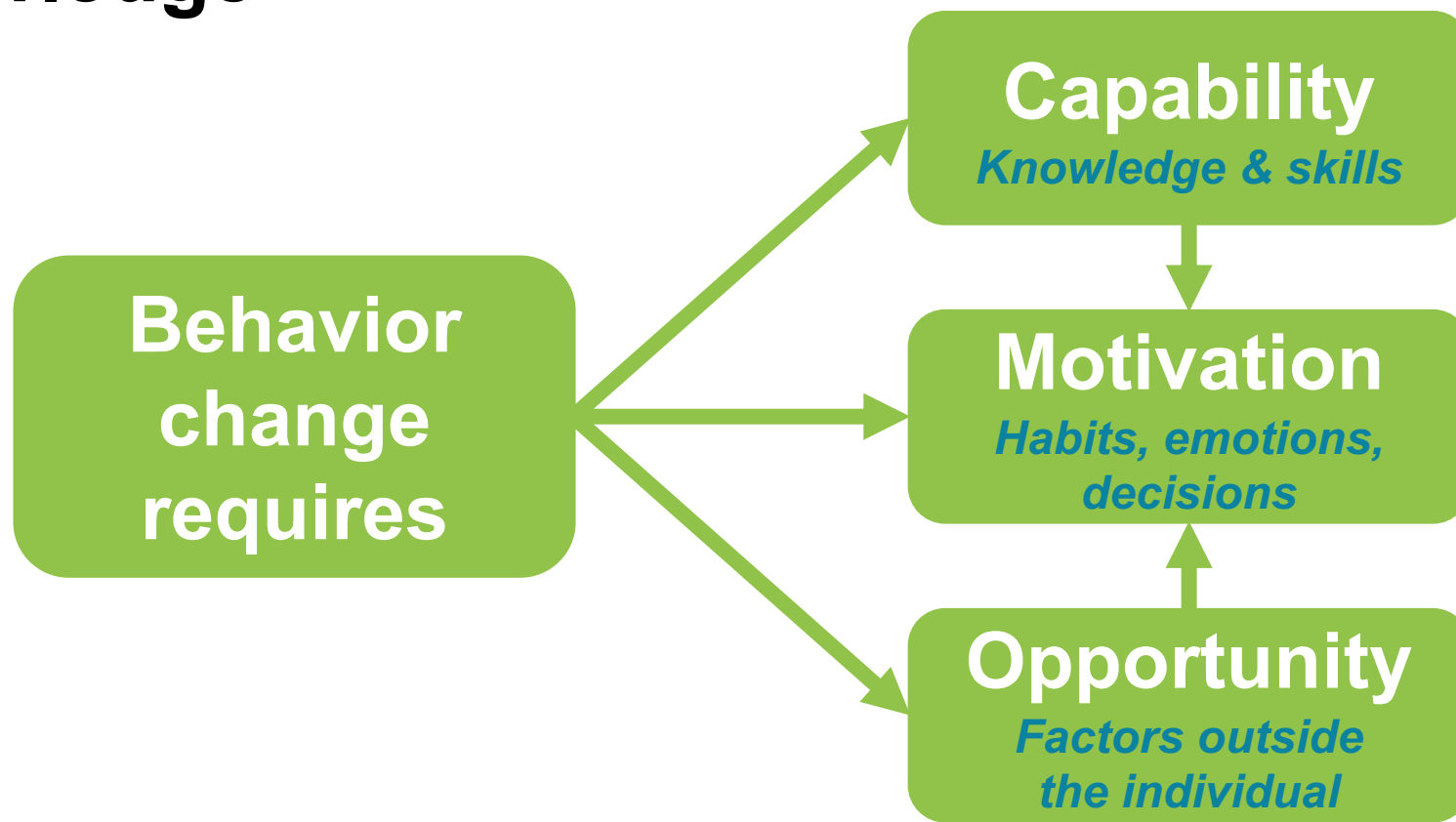


Implementation strategies

- “To a man with a hammer, everything looks like a nail.”
- Over-reliance on a familiar tool

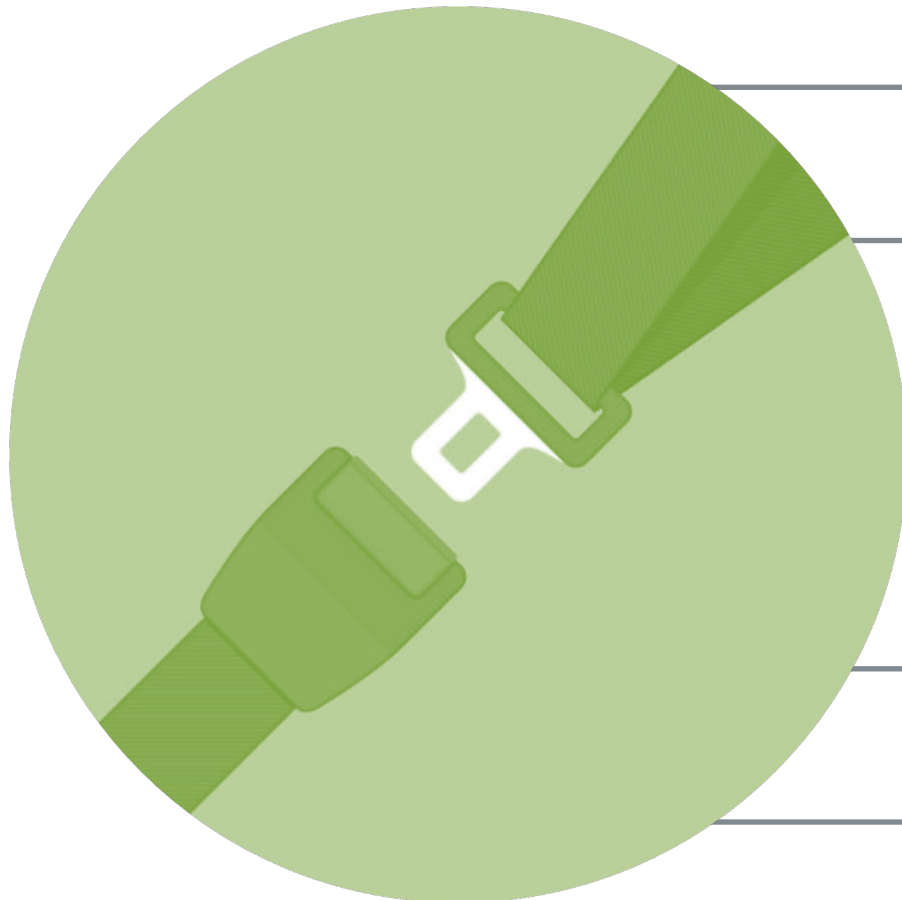
- Training and education are necessary, yet insufficient to change behavior
- We must consider a broader range of implementation strategies addressing individual, organizational, and systems change

Implementation strategies need to target more than knowledge



Michie et al., 2015

Convincing people to „buckle up“



Seat belt invention & improvement



Introducing seat belts in new vehicles



Change of legislation – making seat belt use compulsory



Media campaigns



Penalties

Strategy examples

Plan

- Gather information about your needs, barriers and facilitators for implementation
- Select and adapt strategies to fit your context
- **Establish dedicated implementation team**
- Involve management

Educate

- Develop effective educational materials
- Conduct training
- Use train-the-trainer strategies
- Inform and influence stakeholders (use media, meetings)

Finance

- **Dedicate resources to the intervention/ implementation process**
- Use incentives

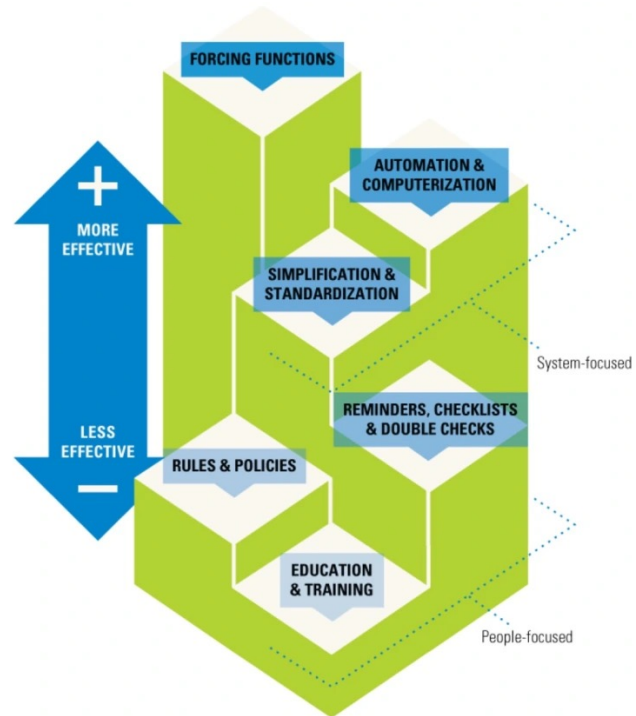
Restructure

- Introduce new roles or teams
- Dedicate professional responsibilities
- Change physical structure and equipment
- Change record systems for a better assessment of implementation and outcomes

Quality assurance

- **Use tools to monitor implementation process**
- Audit and provide feedback
- Remind clinicians and nurses
- Provide clinical supervision
- Organize clinician implementation team meetings

Implementation strategies



Powell, B.J., Waltz, T.J., Chinman, M.J. *et al.* A refined compilation of implementation strategies: results from the Expert Recommendations for Implementing Change (ERIC) project. *Implementation Sci* **10**, 21 (2015)
<https://patientsafe.wordpress.com/the-hierarchy-of-intervention-effectiveness/>

Example: match vs mismatched implementation strategies



PPE: Personal protective equipment

Contextual factors identified in CIBOSurg

1. **Complexity** → (e.g., multiple professional groups involved, many sign-out items)
2. **Design Quality & Packaging** → (e.g., compatibility with existing processes)
3. Peer Pressure
4. External Policy & Incentives
5. **Structural Characteristics** → (e.g., unclear responsibility, size of hospital, number of Ops per day, nature & duration of OP)
6. **Networks & Communications** → (e.g., lack of established communication structures for debriefing)
7. **Culture** → (e.g., psychological safety & safety culture, acceptance of “speaking up”)
8. Implementation Climate
9. Tension for Change
10. Compatibility

Clinical interventions (The 'WHAT')

Implementation strategies (The 'HOW')

The WHO Safe Surgery Components (focus: sign-out)



Routine information exchange and systematic documentation of intraoperative adverse events (iAEs)



Your turn!

- **What are you already doing to enable** systematic use of the WHO Safe Surgery (sign-out) and routine information exchange and systematic documentation of intraoperative adverse events (iAEs)?



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Take home messages

- **Implementation strategies are the “active ingredients”** in your implementation process
- **Training and education are necessary, yet insufficient** to sustainably change behavior
- **Implementation strategies should be “tailored”**, i.e., designed to address your locally identified barriers and facilitators
 - **Combining theory with local, clinical expertise!**



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Thank you!

