Title: Using Normalization Process Theory to facilitate sustainable practice change: the MOVE randomised controlled trial of Maternal and Child Health nurse screening and care for women experiencing family violence.

**Aims and rationale**: Family violence (FV) is prevalent and harmful for abused women and children and damages women's capacity to maintain wellbeing and parent effectively. As women's health is poor, greater identification and support by health care professionals for abused women is needed. Normalization Process Theory (NPT) can facilitate implementation of complex interventions in health care settings, such as MOVE (*Improving Maternal & Child Health (MCH) nurse care for vulnerable mothers*). The MOVE controlled trial aimed to increase nurse inquiry, safety planning and referral of abused women in a theory driven, nurse-designed and sustainable model of nurse FV care.

**Methods**: NPT was used in the design, implementation and evaluation of MOVE. Considering the constructs of NPT within the context of MCH nursing in local government, we designed a consensus FV screening and care model of best practice. Combining published evidence and participatory action research with nurses, we developed new strategies, including a maternal wellbeing screening checklist, clinical guidelines around nurse and women's safety and formal links with FV services. The new model was implemented for twelve months in four MCHN teams and evaluated in a randomised controlled trial across eight MCHN teams (>160 nurses) in North West Melbourne. We collected routine screening data from eight teams for the full 12 months (n=125,155 consults) and 2621 mothers responded to a postal survey.

**Results**: 12.6% mothers had experienced any FV in the past twelve months. Although only 30-45% of women reported being screened, nurse client interaction, safety planning and collaboration with local FV services were all enhanced by MOVE. We will discuss how NPT was applied to all stages of the trial and present the final results of the MOVE two year follow-up study, indicating sustainable FV screening and care in MCH practice.