Using Theory to Inform Implementation Research: The iSOLVE Project

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› **Integrated Solutions for Sustainable Fall Prevention**

- NHMRC funded project led by Professor Lindy Clemson at **The University of Sydney** in partnership with the **Northern Sydney Medicare Local** and the **NSW Clinical Excellence Commission.**

- To improve access to appropriate fall prevention interventions for older people and improve fall-related outcomes by establishing integrated multidisciplinary processes and pathways in primary care.

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iSOLVE Project (Integrated SOLutions for sustainable falls preVEntion)

The iSOLVE project is an NHMRC funded partnership project to be conducted in stages over a five year period (2014-2019). This is a new project supported by the University of Sydney in partnership with the Northern Sydney Medicare Local and the NSW State Falls Program (Clinical Excellence Commission).

Project aims:

- To establish integrated processes and referral pathways at levels of GP practice and allied health services to identify older people at risk of falls and engage a whole of primary care approach to fall prevention.
- To form collaborative, information rich, working arrangements with GPs and allied health service providers.
- To improve access to appropriate fall prevention interventions for older people, ensure ongoing knowledge acquisition and sustainable action by healthcare professionals and organisations, using a multidisciplinary team approach to fall prevention that is integrated and translatable nationally.

Initial stages of iSOLVE:

The team will be actively seeking participation in surveys and interviews to explore the acceptability and usefulness of iSOLVE resources being developed for the project for implementation within the Northern Sydney Medicare Local region. The team will also be offering education opportunities and conducting a randomised trial to test if the supports and referral pathways embedded in GP practices are effective in improving access to,

The aim is to achieve practice change and implement and sustain effective falls prevention across the Medicare local geographical area

- **GPs**: academic detailing, decision-making tools - STEADi, computer systems & software, iPAD, to identify older people at risk of falls, falls alerts to GP, facilitate management plan

- **Ambulance services**: referral pathways to GPs

- **Referral pathways**: NSML central to mapping and links to AHPs and other service providers

- **Medication reviews**: between GPs and accredited pharmacists, Home Medicine Review and part of educational detailing

- **AHP/Service Providers**: up-skilling, educational modules

- **Dissemination:** website, service directory

Blended implementation and effectiveness evaluation - To maximise generalisability

› Planning phase: Development of facilitation strategies

› Academic detailing and education, 'train the trainer'

› Implementation evaluation:

- Process evaluation – inform the emerging model and evaluate impact of iSOLVE – survey, interviews, etc

- Ecological evaluation- sampling of GPs (regional marker of change) and Network analysis to help understand peer and social influences

- Comparative evaluation of regional uptake (BEACH data)

› Effectiveness evaluation of pathways model:

- Cluster RCT of 28 practices measuring falls outcome, GP behaviour

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iSOLVE pathways model needed to be theoretically informed…but which theory?

› A complex intervention with many components

› Focus on implementation and sustainability

› No recommended approach to theory selection in complex intervention studies

› Choice of theory in research studies not well articulated

› Theory/conceptual framework/meta-theory/mid-range theory?

› Many knowledge translation theories (and the number is growing!)

› Mixed evidence supporting available theories

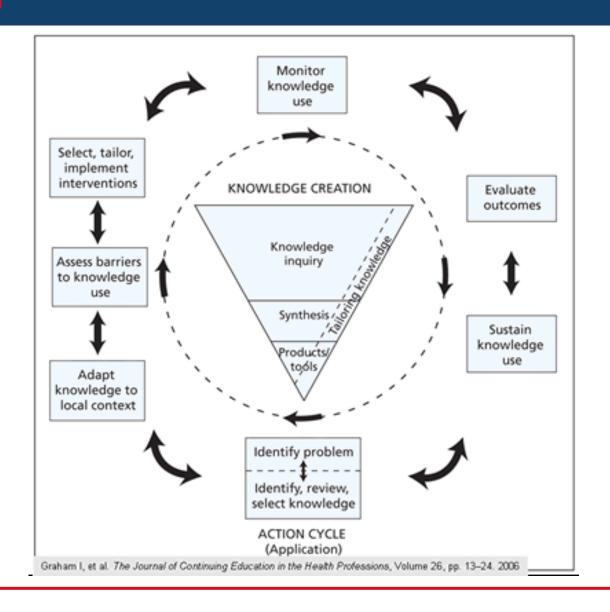› Is it possible to tailor theory application or use constructs most relevant to the project?

Useful Theories & Frameworks

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Theory/Framework	Application to iSOLVE
Innovative Care for Chronic Conditions (ICCC) Framework[2]	Provides an overarching framework focusing on collaborations between older people, service providers and health care systems to facilitate the routine delivery of fall prevention services in medical and community settings.
Knowledge to Action (KTA) Framework[3]	Outlines practical processes to facilitate practice change that can be tailored to specific services/organisations. Focus on implementation and sustainability of practice change.
Theoretical Domains Framework (TDF)[4]	To assist in the identification of the barriers and enablers of behaviour change and inform the design of behaviour change strategies.

Graham I, et al. *The Journal of Continuing Education in the Health Professions*, Volume 26, pp. 13–24. 2006

Useful Theories & Frameworks

Theory/Framework	Application to iSOLVE
Normalisation Process Theory (NPT)[5]	To evaluate the factors influencing how the new practices are routinely used by organisations and embedded into practice.
Conditions for Sustainability Theory[6]	To assist AHPs and other service providers identify and create the context-specific conditions needed to sustain community-based fall prevention programs.
The RE- AIM Framework[7]	To guide project evaluation.

References

1. Curren et al. (2012). Effectiveness-implementation hybrid design. Combining elements of clinical effectiveness and implementation research to enhance public health impact. *Medical Care*, *50*(3), 217-226.

2. Ganz et al. (2008). It takes a village to prevent falls: Re-conceptualising fall prevention and management for older adults. *Injury Prevention,14*, 266-271.

3. Graham et al. (2006). Lost in knowledge translation: Time for a map? *Journal of Continuing Education in the Health Professions, 26(1*), 13-24.

4. Francis et al. (2012). Theories of behaviour change synthesised into a set of theoretical groupings: Introducing a thematic series in the Theoretical Domains Framework. *Implementation Science, 7*, 35.

5. McEvoy et al. (2014). A qualitative systematic review of studies using the Normalization Process Theory to research implementation processes. *Implementation Science, 9*, 2.

6. Lovarini, M. (2012). Sustainability of a community-based falls prevention program. A grounded theory [Doctoral Thesis]. Available from: http://ses.library.usyd.edu.au/handle/2123/8044

7. Dzewaltowski et al. (2004). RE-AIM: Evidence-based standards and a web resource to improve translation of research into practice. *Annals of Behavioral Medicine, 28*(2), 75-80.

Acknowledgements