Pre-implementation Processes Implementation, Adoption, and Utility of Family History in Diverse Care Settings Study

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Implementation Stages

Pre-Implementation		Implementation		Post-Implementation	
٠	Identify current practice patterns	•	Assess implementation integrity (used as intended)	•	Assess acceptance and satisfaction for stakeholders
•	Identify barriers & facilitators	•	Assess implementation exposure (used at intervention sites)	•	Assess clinical impact for all stakeholders
•	Assess feasibility	•	Identify explanations and solutions for low integrity or intensity	•	Adapt and finalize implementation strategy
•	Establish implementation plan	•	Modify implementation plan	•	Assess impact of final implementation strategy

Adapted from Smith J, editor. Evaluation Methods in Implementation Research: An introduction. Implementation Science Meeting; 2010.





Implementation Outcomes

<u>Outcomes</u>	<u>Measure</u>	<u>Source</u>		
Model Reach	Representativeness of patient population to general population	Recruitment data (# enrolling / # invited); SES and demographics compared to overall population; compare across clinical settings and institutions		
Effectiveness see Domains of Meas		and Outcomes Table		
Model Adoption	Representativeness of clinics agreeing to participate	Recruitment data on clinic settings and characteristics as compared to general clinic settings at the institution; % of providers opting out and their characteristics compared to overall provider population in the clinics; formative evaluations on reasons for opting out		
Implementation Integrity	% time intervention used as intended	Formative evaluations, study coordinator tracking patient through steps in the model (ex. MeTree ^{TM TM} log-in vs completion), adaptations to the model, patient and provider FAQs derived during implementation, % time providers review CDS output		
Implementation Exposure	% time intervention used	Formative evaluations, study coordinator tracking patient through steps of the model		
Maintenance and Sustainability	Cost to Implement Cost/Effectiveness	 EHR Administrative data for utilization Formative evaluations (clinic resource needs, successful elements for each setting, factors association with long-term adoption or not), % adoption at study end costs/disease prevented, early stage detected, or visits avoided 		





Pre-implementation Steps

SITES

- Clinic data collection forms
- Site physician and IT champions
- Site visits
- IRB approval
- Qualitative interviews
- ORCA survey

MANAGEMENT

- Coordinating Center
- Educational Materials
- Patient portal
- Coordinator portal
- IRB approval
- Data Use Agreements





Sites continued

- Clinic data collection forms
 - Demographics to monitor recruitment compared to baseline clinic pop
 - Adjust for implementation and effectiveness outcomes
- Site Visits (Goals)
 - Review study flow, recruitment, and monitoring
 - Discuss Provider preparation
 - Obtain buy-in from clinics and administrators
 - Informal interviews of clinic staff and administrators to gather details about each clinic environment
 - Identify key barriers to implementation and develop solutions
 - Work with IT to establish an initial report-EMR integration plan
 - Completing study regulatory materials





Sites continued

- IRB approval
 - Duke, Essentia approved
 - MCW one hospital approved, second hospital pending
 - Air Force pending
- Qualitative interviews
 - 20 minutes long
 - Every clinic: 1 provider champion, scheduler, administrator & nurse
 - Implementation measures related to environment and staff
 - Taped and transcribed
- Organizational Readiness to Change Survey (ORCA)
 - All providers, nurses, and administrators at every clinic
 - Electronically administered through Qualtrix



