Change methodology – Implementation science, translating knowledge to practice, and why my kids catch fish

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Barriers to nutrition care

• Write down what you think are the 3 main barriers to nutrition care in hip fracture inpatients
Why do my kids catch fish?

Knowledge translation / Implementation science / Action research
Prawns or squid?
Pragmatic action research

Prawns or squid?
Knowledge-To-Action Framework

Figure 1 The Knowledge to Action Framework. From Graham I, Logan J, Harrison M, Strauss S, Tetroe J, Caswell W, Robinson N: Lost in knowledge translation: time for a map? The Journal of Continuing Education in the Health Professions 2006, 26, p. 19. Reprinted with permission from John Wiley and Sons.

Graham et al, 2008
Theoretical Domains Framework

• Environmental context and resources
• Knowledge
• Skills
• Optimism
• Goals
• Beliefs about capabilities
• Beliefs about consequences
• Social / professional role and identity
• Social influences
• Reinforcement
• Intentions
• Memory, attention, and decision processes
• Emotion
• Behavioural regulation

Cane et al, 2012
Why do they catch fish? – COM-B
& the Behaviour Change Wheel

Sources of behaviour

Intervention functions

Policy categories

Michie et al, 2011
CFIR - Consolidated Framework for Implementation Research

Damschroder et al, 2009
Prawns or squid?

Chocolate or Strawberry?
Want good nutrition care?
Consider the bigger picture.
The food might not actually be the problem…
Implementation ‘Bubble and Squeak’

Baseline phase

1. Identify clinical problem / evidence-practice gap

2. Map groups requiring change
   - Medical, Nursing, Allied Health
   - Administration / operational support staff
   - Diagnostic services
   - Clinical and corporate governance stakeholders & agencies
   - Consumers
   - Community clinicians, NGO’s, Tertiary institutions, Media

3. Collect data to explain baseline status
   - validated tools
   - applied within routine clinical practice

4. Explore qualitative and quantitative analysis of barriers/ enablers

5. Uncover key change agents & champions
Intervention Phase

1. Engage teams to tailor locally relevant, applicable, effective and sustainable interventions that could overcome barriers and enhance enablers
2. Apply an implementation model (or tailor a few to fit)
3. Collect process and outcomes data and provide live feedback
4. Leverage off individuals, inner and outer setting drivers
5. Convert the anti-champions & manage the minefields
6. Iterative improvement through action cycles
The science of implementation

Post-intervention phase

1. Re-measure behaviour change (process measures)
2. Re-measure qualitative and/or quantitative outcomes
3. Sustain and spread

Laur et al, 2018
Workshop

Bell, J. J., Rossi, T., Bauer, J. D., & Capra, S. (2014). Developing and evaluating interventions that are applicable and relevant to inpatients and those who care for them - a multiphase, pragmatic action research approach. BMC medical research methodology, 14, 98. doi: 10.1186/1471-2288-14-98


