

## Infection prevention

#### through the lens of implementation science





## Infection prevention through the lens of implementation science

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#### Research group focusing on implementation of infection prevention

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## **Todays objectives**

- to explore the core of implementation science
- to discuss how we can use knowledge from implementation science in practice
- to learn how to identify barriers and facilitators
- to understand how to choose implementation strategies

Presentation informed by AMSCIS / Femke van Nassau

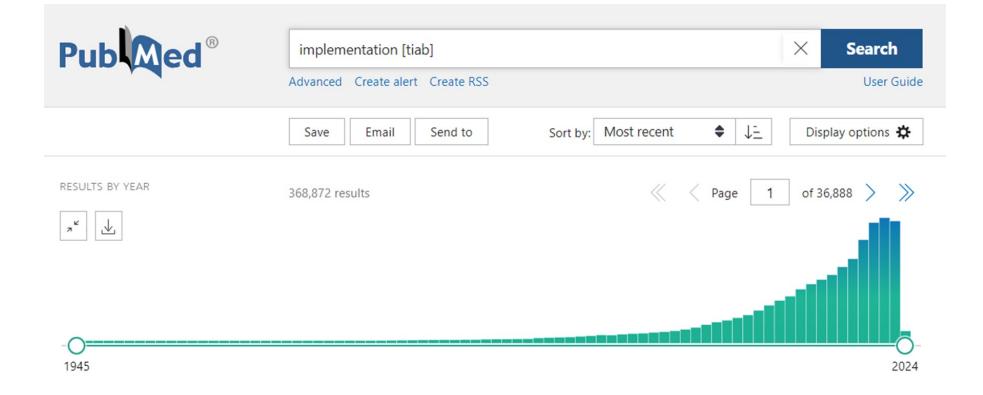


#### **Implementation Science**

"...the scientific study of methods to promote the systematic uptake of research findings and other evidence-based practices into routine practice... It includes the study of influences on healthcare professionals and organisational behaviour"

> Eccles & Mittman (2006) Welcome to implementation Science. Implementation Science (1)1, 1-3.







61 Dissemination (Scale up) & Implementation frameworks (Tabak et al., 2012)

601 Practice determinants (Krause et al., 2014)

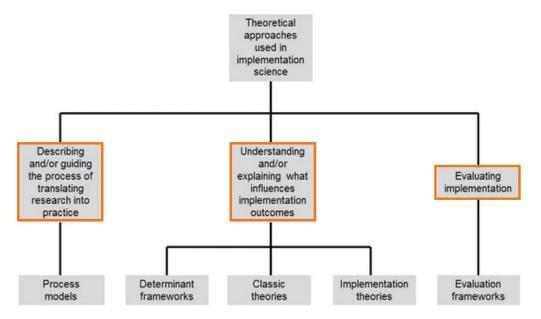
73 Implementation strategies (Powell et al., 2012 & 2015)

420 Implementation measures (Lewis et al., 2015)

10 De-implementation frameworks (Nilsen 2020)



### Making sense of implementation theories, models and frameworks



Nilsen P. Implementation Sci 10, 53 (2015).



## **Navigate Implementation Science Theory**

Dissemination Implementation - Just another WordPress site (dissemination-implementation.org)



#### Helping Navigate Dissemination and Implementation Models

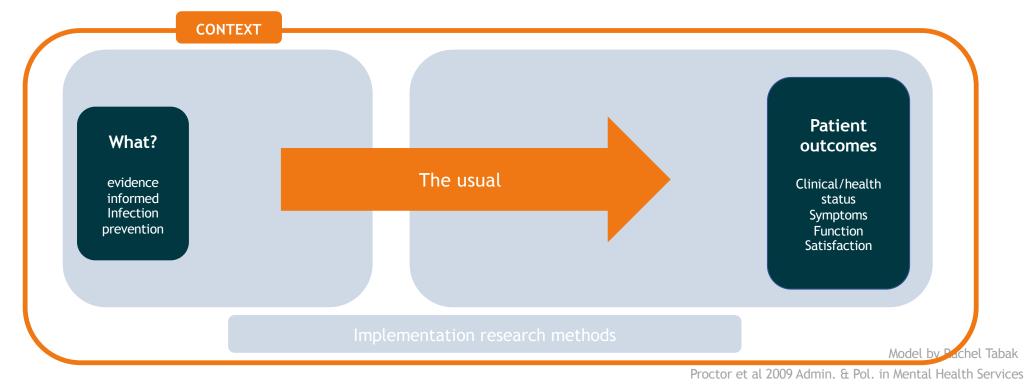
The D&I Models Webtool is an interactive, online application designed to help researchers and practitioners navigate D&I Models through planning, selecting, combining, adapting, using, and linking to measures.



Access the D&I Models Webtool Here!

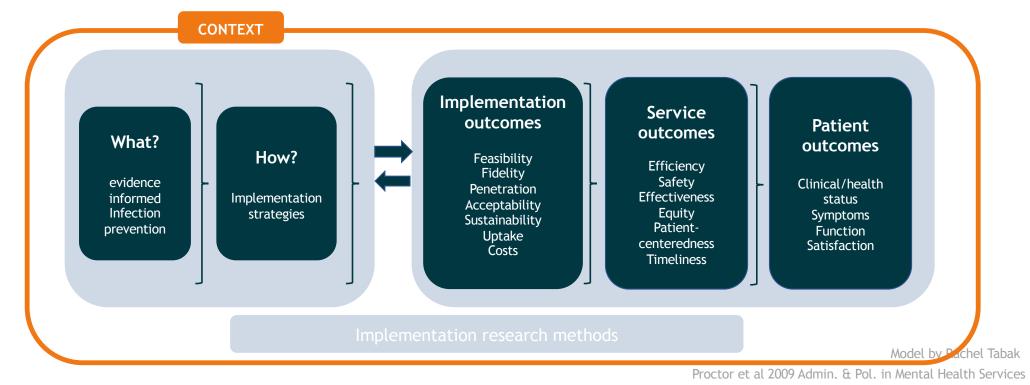


## Conceptual model for implementation research



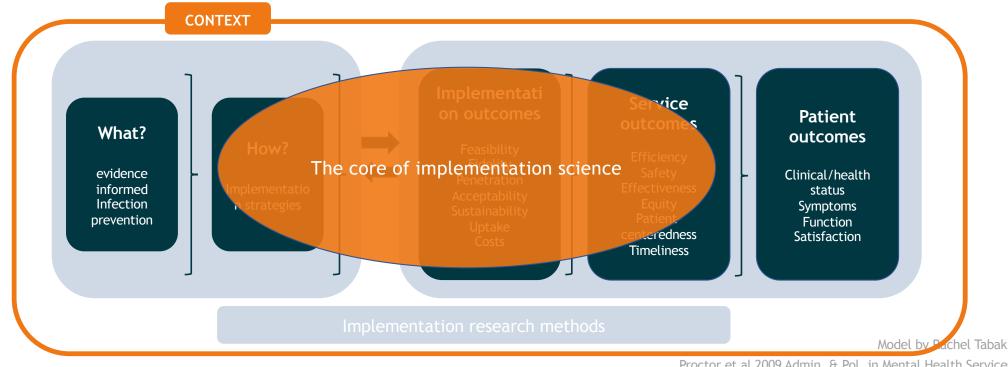


## Conceptual model for implementation research





#### **Conceptual model for implementation** research



Proctor et al 2009 Admin. & Pol. in Mental Health Services



## Implementation research

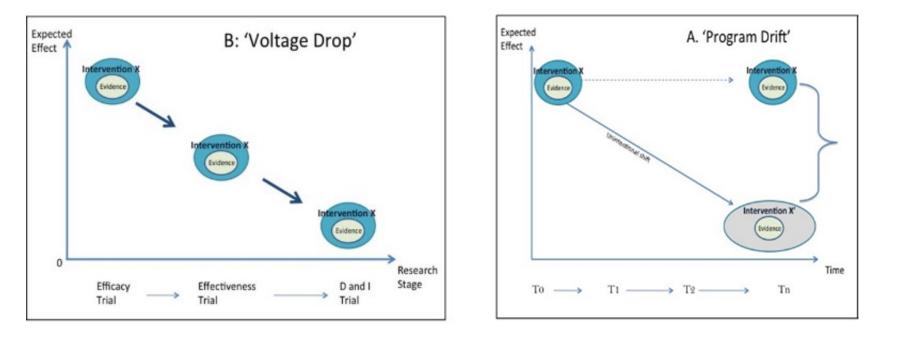
#### Implementation research is particularly important to

- understand the context surrounding an intervention (excluded from efficacy and effectiveness research)
- assess how well an intervention performs
- inform you on ways to improve implementation
  - factors that affect implementation
  - the process of implementation
  - how to introduce solutions that will make interventions more sustainable

Peters, D. (2013) Implementation research in health: a practical guide. Alliance for Health Policy and Systems Research, World Health Organization



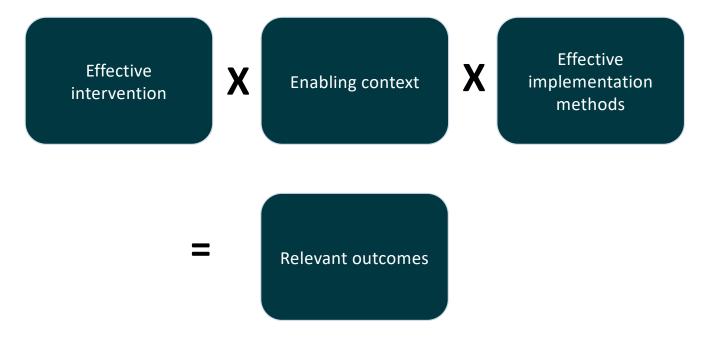
#### In real-world settings



Chambers et al. (2013) The dynamic sustainability framework: addressing the paradox of sustainment amid ongoing change. *Implementation Science* 



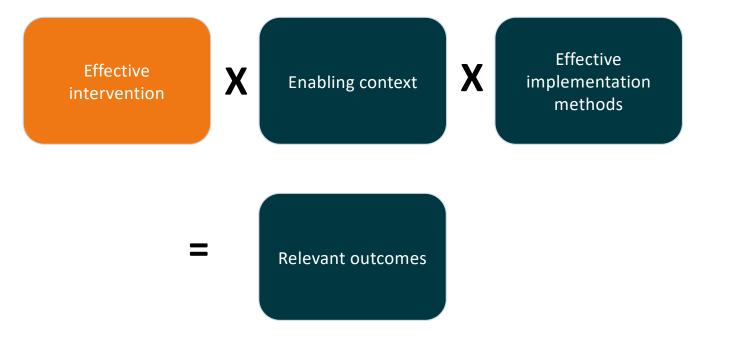
### Are we successful?



Model by Femke van Nassau



#### Are we successful in the real world?



Model by Femke van Nassau



#### Context

The 'implementation context' refers to the physical, social and cultural environment

where the intervention is be integrated

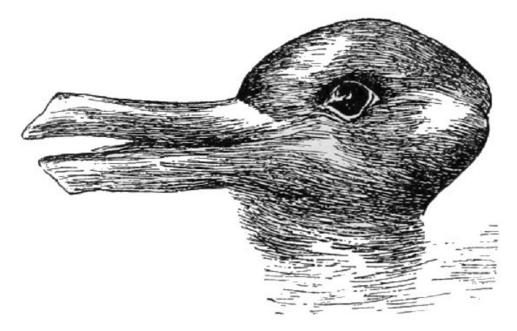
The implementation context also includes who, what and how the intervention would be

delivered if research funding has ceased

Koorts et al. 2018. Implementation and scale up of population physical activity interventions for clinical and community settings: The PRACTIS Guide. IJBNPA



Context





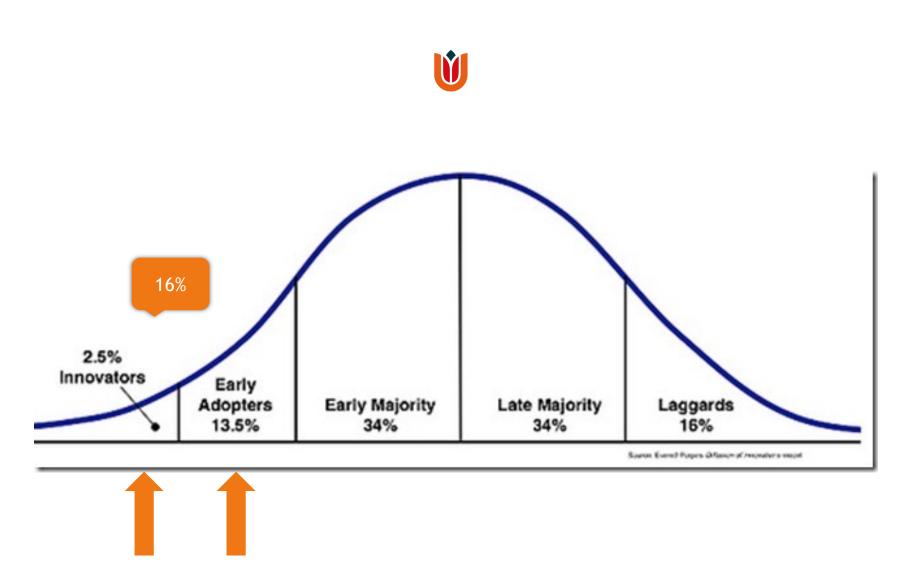
Meet their needs Engage/ Consult /foster buy in Aim to move to right Could be a risk to implementation Key Player Formal partner in planning of research and scale up Maintain relationship

#### **Stakeholders**

Low Priority Monitor Keep up to date Aim to move to the right

Keep informed Make use of their interest Can be a supporter /ambassador

Interest of stakeholder



Rogers, 1995



## Potential influences on intervention implementation in practice

#### **Innovation characteristics**

i.e. innovation's legitimacy, quality/validity of evidence, adaptability, trialability, complexity, compatibility, relative advantage, design quality and cost (Durlak & Dupre 2008, Damschroder et al. 2009)

#### **Process of implementation**

i.e. innovation specific and general capacity building (Durlak & Dupre 2008, Wandersman et al. 2008), and planning, engaging, executing, reflecting and evaluating the implementation process (Damschroder et al. 2009)

#### User characteristics at individual level

i.e. motivation, personality (Rojatz, Merchant et al. 2016), knowledge and beliefs (Damschroder et al. 2009)



## Potential influences on the implementation of infection prevention in practice

#### ORIGINAL RESEARCH

OPEN ACCESS

Implementing infection prevention practices across European hospitals: an in-depth qualitative assessment

Lauren Clack,<sup>1,2</sup> Walter Zingg,<sup>2</sup> Sanjay Saint,<sup>3,4</sup> Alejandra Casillas,<sup>5</sup> Sylvie Touveneau,<sup>2</sup> Fabricio da Liberdade Jantarada,<sup>2</sup> Ursina Willi,<sup>1</sup> Tjallie van der Kooi,<sup>6</sup> Laura J Damschroder,<sup>3</sup> Jane H Forman,<sup>3</sup> Molly Harrod,<sup>3</sup> Sarah Krein,<sup>3,4</sup> Didier Pittet,<sup>2</sup> Hugo Sax,<sup>1,2</sup> PROHIBIT Consortium

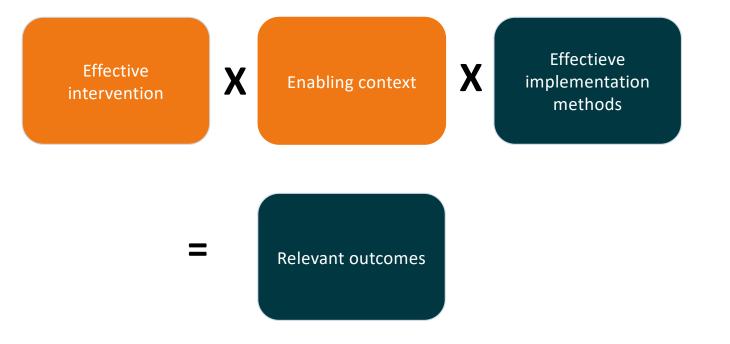


Validity of self-reported compliance and behavioural determinants of observed compliance: an application of the COM-B hand hygiene questionnaire in nine Dutch hospitals

M.D. van Dijk<sup>a,\*</sup>, D. Nieboer<sup>b</sup>, M.C. Vos<sup>a,†</sup>, E.F. van Beeck<sup>b,†</sup>



#### Are we successful in the real world?



Model by Femke van Nassau



## Implementation Strategies are...

"...methods or techniques used to enhance the adoption, implementation, and sustainability of a program or practice"

OR

The "how" of implementation



## Implementation strategies

Powell et al. Implementation Science (2015) 10:21 DOI 10.1186/s13012-015-0209-1

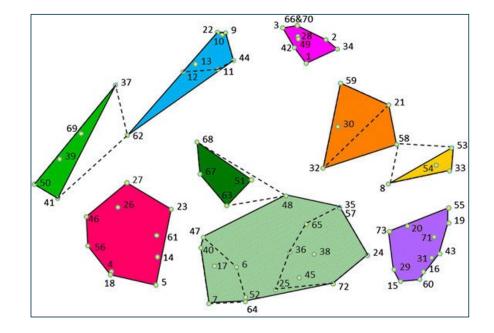


Open Access

#### RESEARCH

A refined compilation of implementation strategies: results from the Expert Recommendations for Implementing Change (ERIC) project

Byron J Powell<sup>1\*</sup>, Thomas J Waltz<sup>2</sup>, Matthew J Chinman<sup>3,4</sup>, Laura J Damschroder<sup>5</sup>, Jeffrey L Smith<sup>6</sup>, Monica M Matthieu<sup>6,7</sup>, Enola K Proctor<sup>8</sup> and JoAnn E Kirchner<sup>6,9</sup>



Waltz & Powell et al 2015, Implementation Science

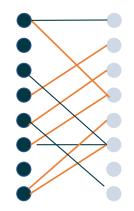
Use evaluative and iterative strategies	<ul> <li>Assess for readiness and identify barriers and facilitators</li> <li>Audit and provide feedback</li> <li>Purposefully reexamine the implementation</li> </ul>	Implementation s	strategies
		Facilitation	Provide
Adapt and tailor to context	<ul> <li>Tailor strategies</li> <li>Promote adaptability</li> <li>Use data experts</li> </ul>	<ul> <li>Provide local technical assistance</li> <li>Provide clinical supervision</li> </ul>	interactive assistance
Train and educate stakeholders	<ul> <li>Conduct ongoing training</li> <li>Distribute educational materials</li> <li>Use train-the trainer techniques</li> </ul>	<ul> <li>Identify and prepare champions</li> <li>Organize clinician implementation team meetings</li> <li>Identify early adopters</li> </ul>	Develop stakeholder interrelationships
	ose train the trainer techniques		
Engage consumers	<ul> <li>Increase demand</li> <li>Use mass media</li> <li>Involve patients/consumers and family members</li> </ul>	<ul> <li>Remind clinicians</li> <li>Revise professional roles</li> <li>Facilitate relay of clinical data to providers</li> </ul>	Support clinicians
Change infrastructure	<ul> <li>Mandate change</li> <li>Change record systems</li> <li>Change physical structure and equipment</li> </ul>	<ul> <li>Alter incentive/allowance structures</li> <li>Access new funding</li> <li>Fund and contract for the clinical innovation</li> </ul>	Utilize financial strategies

https://impsciuw.org/implementation-science/research/implementation-strategies/

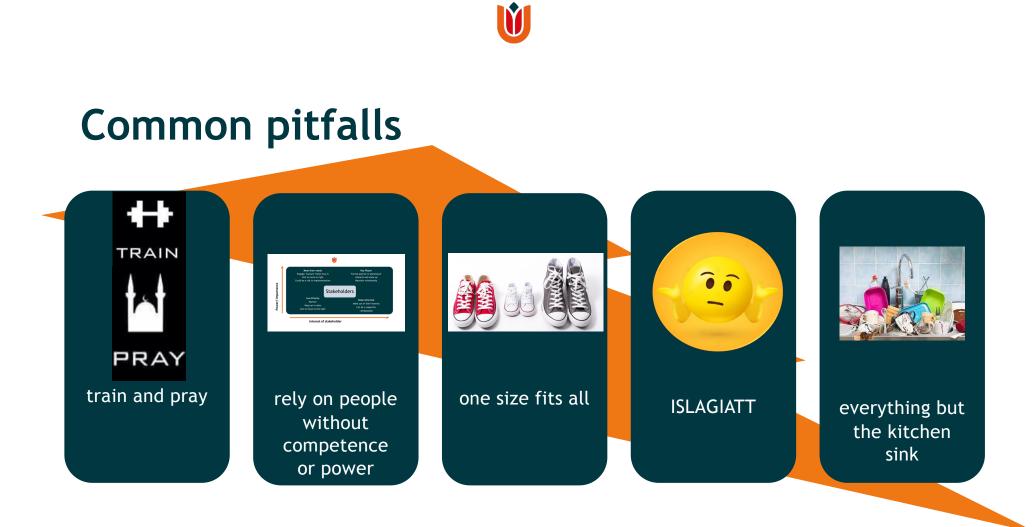


## Selection of strategies

- Ask your stakeholders
- Look into the literature
- Make sure your selected strategy is addressing your previously identified barriers
- One activity can contain more strategies (bundle), and, thus can address different barriers
- One barrier can be tackled using different strategies



https://cfirguide.org/tools/



Slide inspired by Lauren Clack & Byron Powell



## Strategies for infection prevention

Barrier	Why is this a barrier?	CFIR domain	CFIR construct Relative priority	
Infection control has no priority	There were other priorities at the hospital level	Inner setting		
at the hospital level	(e.g., hospital merger) which resulted in the ceasing of link nurse programmes	67.0	Tension for change	
	A lack of time and power (mandate) was allotted to link nurses which resulted in the ceasing of link nurse programmes	Inner setting	Leadership engagement Relative priority	
	A lack of support from ward management to acknowledge and validate the link nurse role to the rest of the team, e.g., when peers resist compliance with infection control policies. Link nurses felt their role was undermined when this support was not in place	Inner setting	Leadership engagement	
	Operational difficulty at the individual level — high workload and low staffing leaving insufficient time for link nurse activities	Inner setting	Available resources	



Top 10 implementation strategies based on the Consolidated Framework for Implementation Research (CFIR)-Expert Recommendations for Implementing Change (ERIC) tool

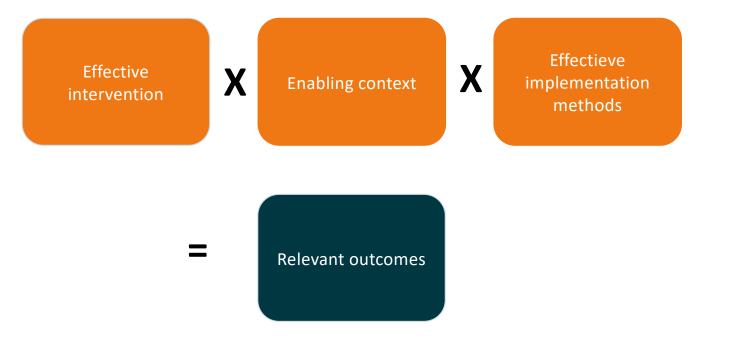
CFIR constructs	Cumulative	Design	Networks &	Culture	Tension	Compatibility	Relative	Learning	Leadership
ERIC strategies	value of percentages		communications		for change		priority	climate	engagement
Identify and prepare champions	670	15	17	52	48	21	18	31	41
Conduct local consensus discussions	439	26	22	22	43	41	46	27	27
Assess for readiness and identify barriers and facilitators	436	7	13	41	35	34	36	19	14
Inform local opinion leaders	387	19	22	22	39	3	14	19	18
Facilitation	363	7	26	30	0	24	14	54	18
Create a learning collaborative	313	7	35	30	9	14	4	15	5
Conduct local needs assessment	310	15	9	22	43	21	32	19	14
Develop a formal implementation blueprint	306	15	13	7	13	3	14	12	23
Build a coalition	301	0	39	19	9	21	18	19	18
Identify early adopters	300	11	17	11	13	10	7	12	9

Level 1 endorsements in dark grey, level 2 endorsements in light grey. Endorsements in % represent the proportion of panel participants that recommend the strategy for that specific barrier.

Dekker et al. 2022. Journal of Hospital Infection. 128:54-63



## Are we successful in the real world?



Model by Femke van Nassau



#### Key message

#### Carefully plan your implementation

- Identify barriers & facilitators
- Plan your implementation in close collaboration with stakeholders
- Choose strategies that fit barriers & facilitators and stakeholder groups
- Tailor these strategies to your local context



## Thank you

Happy to take questions m.vanoijen@amsterdamumc.nl

Implementation Science Knowledge Hub - Overview (amsterdamumc.org)



	www.webbertraining.com/schedulep1.php
March 5, 2024	(FREE Teleclass Denver Russell Memorial Teleclass Lecture) WATER AS A RISK OF HEALTHCARE-ASSOCIATED INFECTION Speaker: Prof. Jon Otter, Imperial College London
March 7, 2024	(FREE Teleclass) INFECTION PREVENTION AND CONTROL CERTIFICATION: OBTAINING YOUR ENTRY LEVEL IPC CERTIFICATION THROUGH CBIC Speaker: Jessica Dangles, Certification Board of Infection Prevention and Control
March 14, 2024	COVID-19 PREPAREDNESS – WHAT WENT WRONG? WHAT ARE THE NEXT STEPS? THE POINT OF VIEW OF A BIOMEDICAL ENGINEER Speaker: Dr. Davide Piaggio, University of Warwick, School of Engineering, UK
March 21, 2024	EMERGING FUNGAL INFECTIONS: ENVIRONMENTAL CHANGES BRING ABOUT NEW CHALLENGES Speaker: Dr. Tom Chiller, Centers for Disease Control, Atlanta
April 2, 2024	COVID-19's CHALLENGES TO INFECTION CONTROL DOGMA Speaker: Prof. Michael Klompas, Harvard University

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