Refining Expert Recommendations for Implementing Change (ERIC) strategy surveys

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Implementation Science
Communications

RESEARCH   **Open Access**

Refining Expert Recommendations for Implementing Change (ERIC) strategy surveys using cognitive interviews with frontline providers

Vera Yakovchenko[1], Matthew J. Chinman[1,2], Carolyn Lamorte[1], Byron J. Powell[3,4,5], Thomas J. Waltz[6], Monica Merante[1], Sandra Gibson[1,7], Brittney Neely[1], Timothy R. Morgan[8,9] and Shari S. Rogal[1,7,10*]

IMPLEMENTATION SCIENCE

RESEARCH   **Open Access**

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

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

2015

-National Hep C Treatment Program

Implementation Science

RESEARCH   **Open Access**

2017

The association between implementation strategy use and the uptake of hepatitis C treatment in a national sample

Shari S. Rogal[1,2,3*], Vera Yakovchenko[4], Thomas J. Waltz[5,6], Byron J. Powell[7], JoAnn E. Kirchner[8], Enola K. Proctor[9], Rachel Gonzalez[10], Angela Park[11], David Ross[12], Timothy R. Morgan[10], Maggie Chartier[12] and Matthew J. Chinman[1,13]

Implementation Science Communications

BMC Health Services Research

2021

RESEARCH   **Open Access**

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RESEARCH ARTICLE   **Open Access**

Mapping the road to elimination: a 5-year evaluation of implementation strategies associated with hepatitis C treatment in the veterans health administration

Vera Yakovchenko[1], Timothy R. Morgan[2], Matthew J. Chinman[3,4], Byron J. Powell[5], Rachel Gonzalez[2,6], Angela Park[7], Patrick S. Malone[8], Maggie Chartier[9], David Ross[9] and Shari S. Rogal[3,10*]

2023

Poll Question 1

How do you use strategy data?

a) Never collected strategy data

b) Collected but not used strategy data

c) Collect and feed data back to respondents

d) Collect and feed data back to leaderships

e) Other

Research Question and Purpose

How do frontline health care providers understand and interpret the 73 ERIC strategies?

- Improve overall strategy clarity
- Confirm valid results
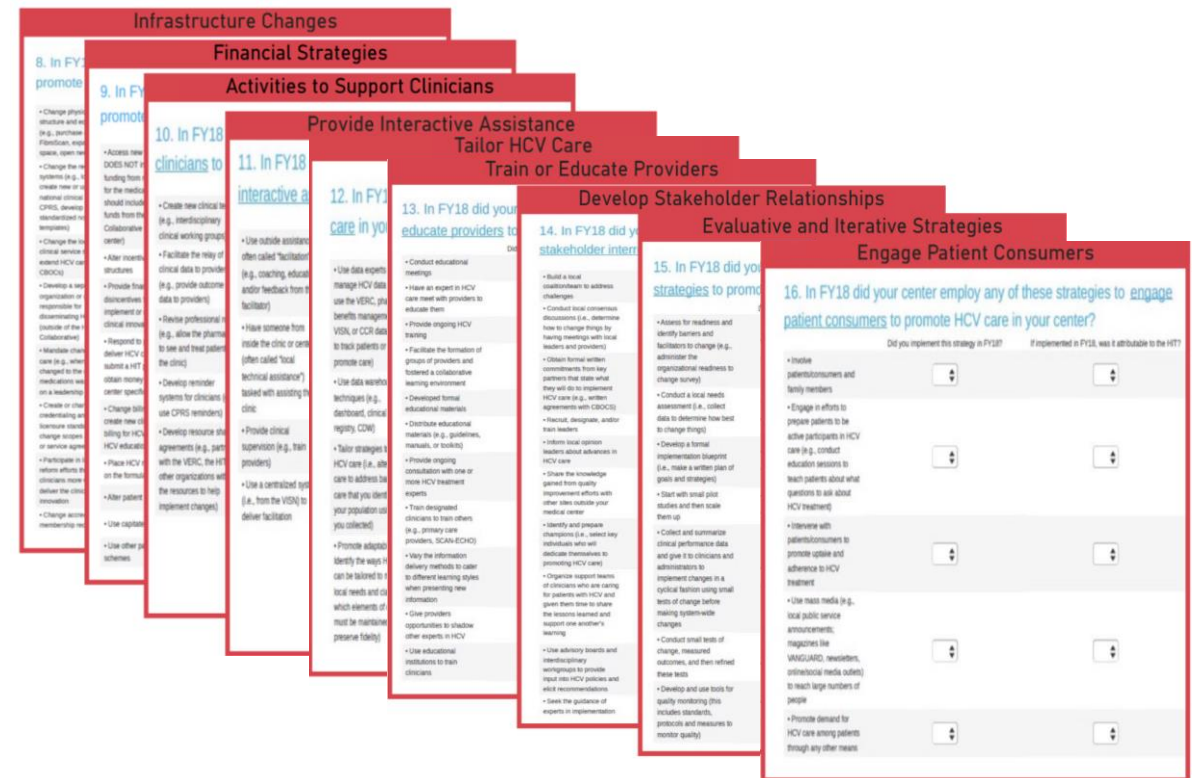- Replicability
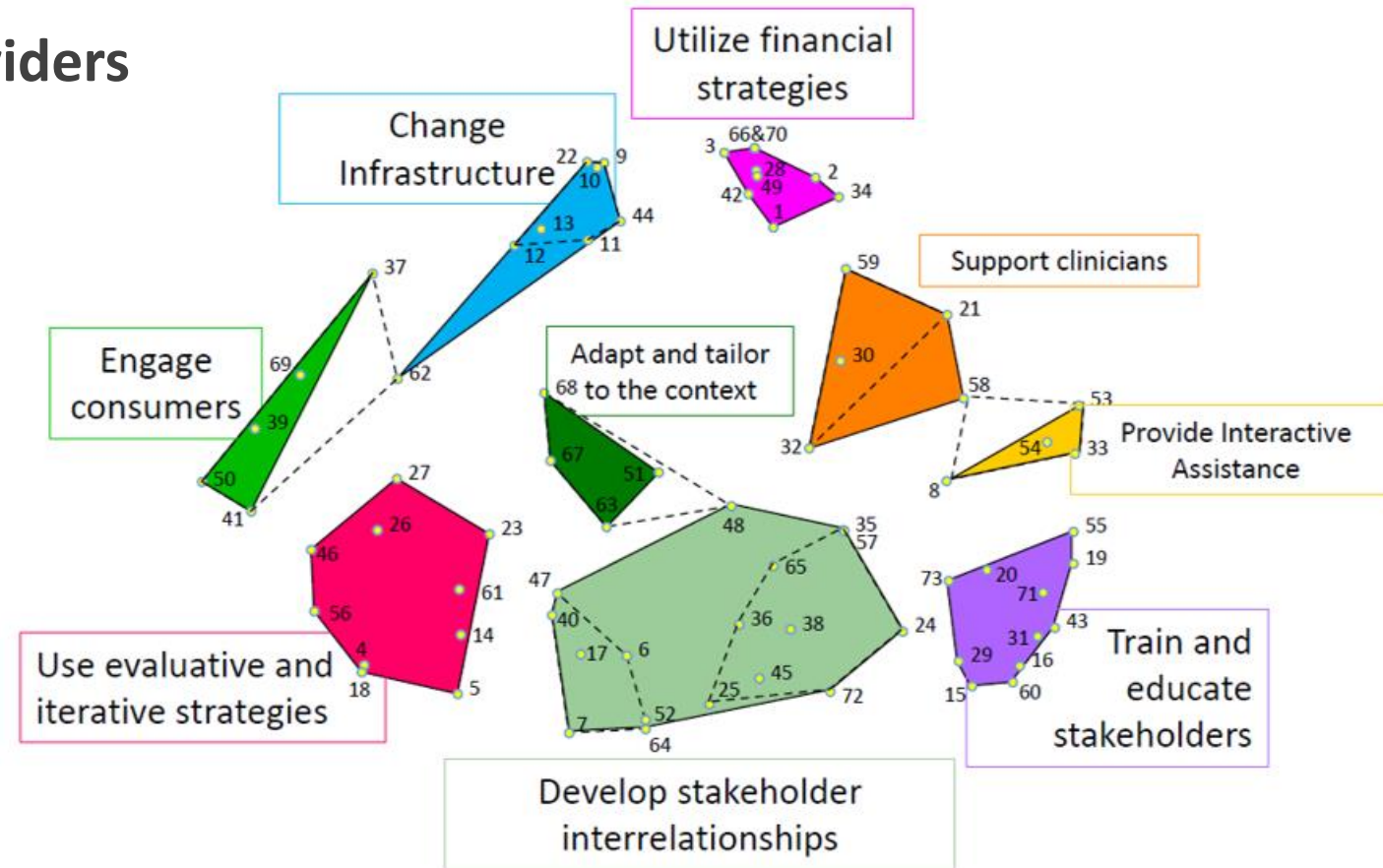
Methods

Sample

- Invited 30 VA providers participate
- Completed 3+ surveys in 7 years

Mixed Methods

- Part 1: online 15 min 73 item survey
- Part 2: 60-90 min cognitive interview

Results – Participants
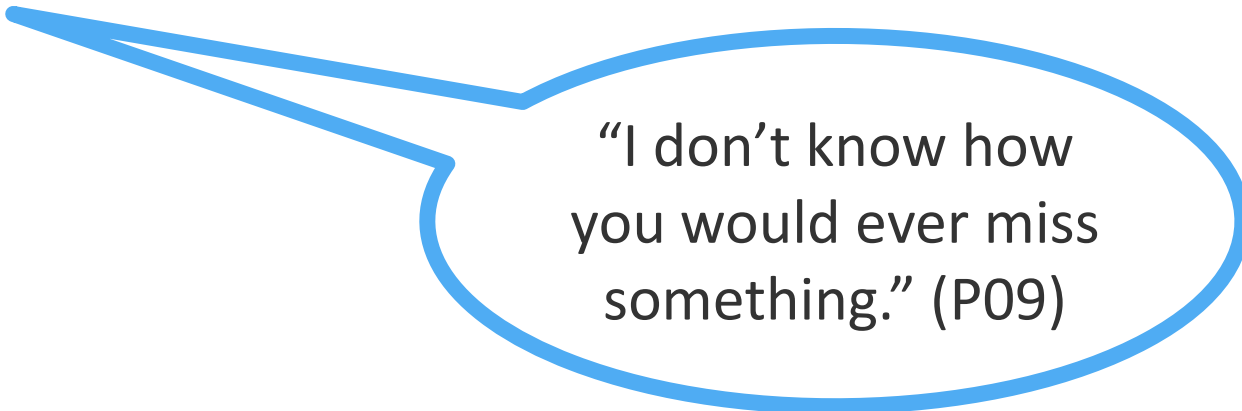
- 2 pilot interviews

- 12 cognitive interviews

  - 1 MD, 4 PharmDs, 1 PA, 4 NPs, and 2 RNs

  - Half had previous QI experience

  - No IS/research training
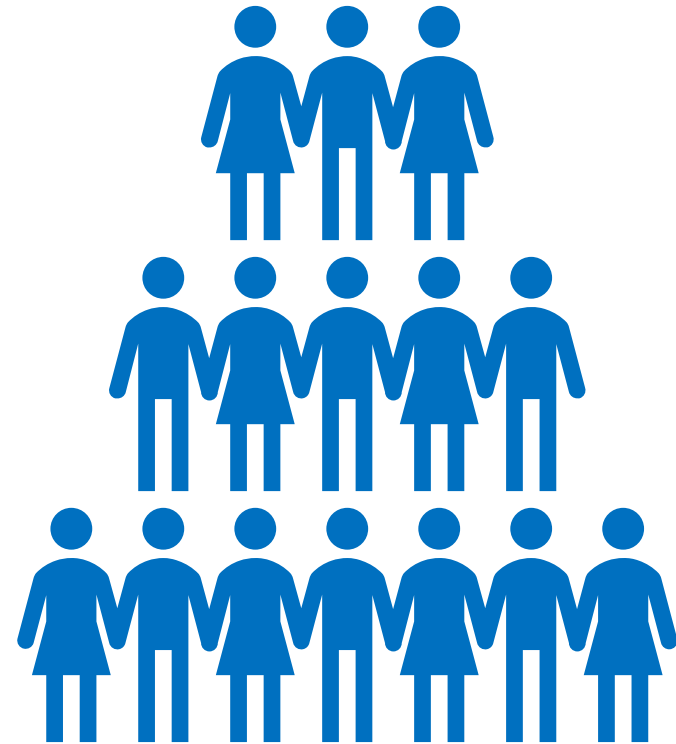
Results – Survey Response Process

- 83%: correct person to complete survey

- 50%: understanding of strategy items increased over years

- 78%: would say "No" to completing a strategy if didn't they understand meaning

- Survey deemed comprehensive

"I don't know how you would ever miss something." (P09)

Theme:

Using Clinical language

- Minimize jargon/ conceptual burden
- Reflect 'real world perspective'
- "Use" vs. "Implement"

"**If I slow down** and really think about it **and kind of overanalyze it,** because that's what I tend to do, **I think I can tell the difference**" (P03)

"…translate that into **normal English** that somebody is going to understand" (P10)

"**Implement, to me, meant something I actively did this within this year**." (e09)

Results –Strategy Clarity

- 85% of 73 strategies had **at least 1 confusing element** to participants

- Strategies were **unclear** due to
  - similarity between strategies (42%)
  - conceptual confusion (33%)
  - wording (22%)
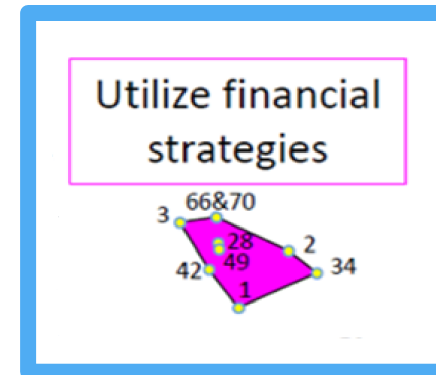
Most confusing

Most similarity

Most clarity

Results – Organizing and Specifying Strategies

PARTICIPANTS COULD SPECIFY

- Action
- Dose
- Theoretical justification

PARTICIPANTS COULD NOT SPECIFY

- Actor
- Action targets
- Stage of Implementation
- Implementation outcomes addressed

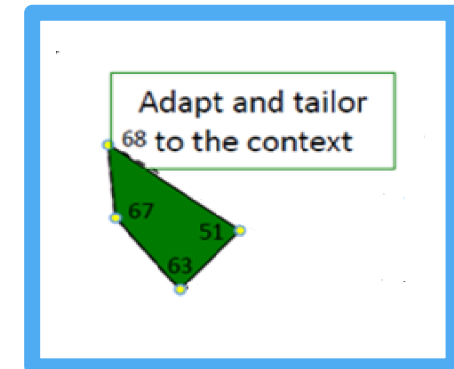Proctor *et al. Implementation Science* 2013, **8**:139
http://www.implementationscience.com/content/8/1/139

IMPLEMENTATION SCIENCE

DEBATE   **Open Access**

Implementation strategies: recommendations for specifying and reporting

Enola K Proctor[1*], Byron J Powell[1] and J Curtis McMillen[2]

Implementation strategies: recommendations for specifying and reporting | Implementation Science | Full Text (biomedcentral.com)

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Some strategies may be very similar to others. For each pair of strategies below, please:
 1) Use the scale below to indicate: *how clear is the difference to you* ?

Very Unclear   Unclear   Clear   Very Clear

2) Describe what the difference between them is, in your own words.

Change accreditation or membership requirements.

Definition: Strive to alter standards or requirements to encourage use of the clinical innovation.

Create or change credentialing and/or licensure standards.

Definition: Create or encourage organizations to certify clinicians in the innovation or change licensure requirements to shape practice towards the innovation.

Results

Similar Strategies

10 pairs: combine 5, separate 3, and undecided on 2

Including similar strategies can result in unintended overinterpretation

Patient-facing strategies often overlapped or were unclear

Similar Strategies

Results

Strategy 1	Strategy 2
Facilitate relay of clinical data to providers	Audit and provide feedback

Poll Question 2:

How clear is the difference to you?

a) Very Unclear

b) Unclear

c) Clear

d) Very Clear

Similar Strategies

Results

Strategy 1	Strategy 2	Frequency of response: "very clear" or "clear" difference	Action
Facilitate relay of clinical data to providers	Audit and provide feedback	83%	Separate

"The first box is talking about **'How do we get…the information or data out to the providers?'**…And then the second box seems like, **'How do we evaluate how it was received or if it's being implemented?'"** (P04)

Similar Strategies

Results

Strategy 1	Strategy 2	Frequency of response: "very clear" or "clear" difference	Action
Involve patients and family members	Obtain and use patients and family feedback	33%	Combine

"That's unclear as well. … **Either way, you're still gonna involve the patient, consumers, and family** to get the feedback, so it just seems like it's a **redundant question,** maybe." (P10)

Similar Strategies

Results

Strategy 1	Strategy 2	Frequency of response: "very clear" or "clear" difference	Action
Conduct educational meetings	Conduct educational visits	42%	Undecided

"Well, the first one, ... that would be **someone internally**, ... And the other one would be an **external trainer.**" (P05)

Some strategies have multiple parts that are often done together. The first column below contains a full strategy, while its parts are separated in the next two columns. For Parts 1 and 2 of each strategy, please use the scale to indicate *how often they are done together*

| Never | Sometimes | Usually | Always |

Full Strategy	Part 1	Part 2
1) Assess for readiness and identify barriers and facilitators.	Assess for readiness.	Identify barriers and facilitators.
2) Capture and share local knowledge.	Capture local knowledge.	Share local knowledge.
3) Change physical structure and equipment.	Change physical structure.	Change equipment.
4) Develop and implement tools for quality monitoring.	Develop tools for quality monitoring.	Implement tools for quality monitoring.
5) Develop and organize quality monitoring systems.	Develop quality monitoring systems.	Organize quality monitoring systems.
6) Fund and contract for the clinical innovation.	Fund for the clinical innovation.	Contract for the clinical innovation.
7) Identify and prepare champions.	Identify champions.	Prepare champions.
8) Obtain and use patients/consumers and family feedback.	Obtain feedback.	Use feedback.
9) Recruit, designate, and train for leadership.	Recruit and designate for leadership.	Train for leadership.
10) Use advisory boards and workgroups.	Use advisory boards.	Use workgroups.

Results

Multi-barreled

5/10 multi-barreled strategies should remain combined

Sequencing important for determining (dis)aggregation

Part 1	Part 2
Recruit and designate for leadership	Train for leadership

Poll Question 2:

How often are they done together?

a) Never

b) Sometimes

c) Usually

d) Always

Multi-barreled

Results

Part 1	Part 2	Frequency of response: strategy parts "always" or "sometimes" combined	Action
Recruit and designate for leadership	Train for leadership	58%	Keep combination

"It's **sequentially**: you recruit or designate them and then you have to train them." (P12)

Multi-barreled

Results

Part 1	Part 2	Frequency of response: strategy parts "always" or "sometimes" combined	Action
Capture local knowledge	Share local knowledge	42%	Separate

"Like, it feels like **there should be a step in the middle,** so you capture, assess and then share local knowledge. Something like that." (e01)

Multi-barreled

Results

"Each time we do the survey…you look at it as, '**Oh, I have to do this'**" (P02).

"It leads to this **sense of failure** because you have not done something like work with an educational institution and then you start spinning in your brain like, **"How would I even accomplish that?"** (P11)."

"This is a 100% one of those things that I don't understand what you're asking, and that **the people answering would not have any role in anything to do with funding or contracting**." (e13)

Unintended uses

- Idea generation

- Increasing frustration

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Discussion & Next Steps

Identified areas for improvement

Reinforced ERIC survey validity

Plans
- Improve wording
- Reduce cognitive burden in future surveys
- Increase precision by uncovering mechanisms
- Use strategy data to prescribe strategies

Interested in collaborating?

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