

# Implementation science – A novel perspective on bridging the gap between evidence and immunisation acceptance

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***Does my intervention  
actually work...?***



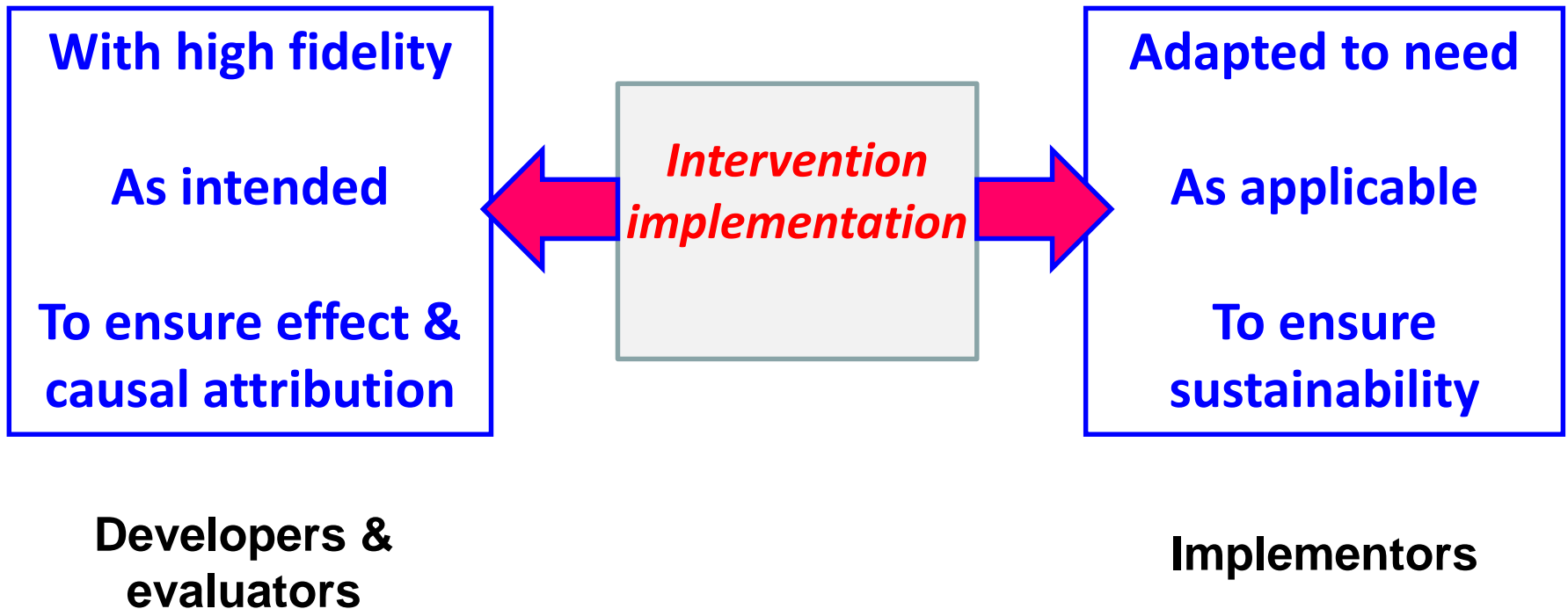
## Dissecting effectiveness (i)

*Does **my** intervention **actually** work...?*

**Intervention as I,  
the researcher,  
designed it vs. as  
delivered in  
practice**

**Fidelity vs.  
adaptation  
tension**

# Fidelity: a point of tension?



## Dissecting effectiveness (ii)

*Does my **intervention** actually work...?*

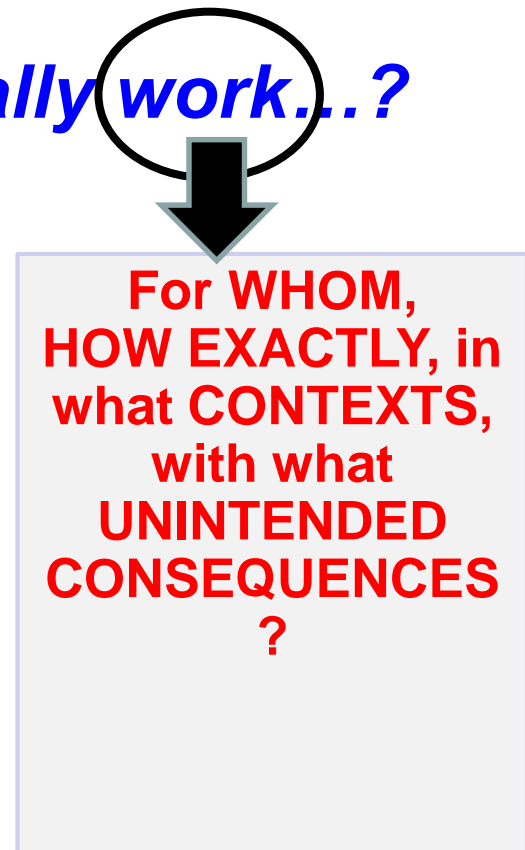


**Multiple  
intervention  
components, or  
'active  
ingredients'**

**Concept of  
'complex  
interventions'**

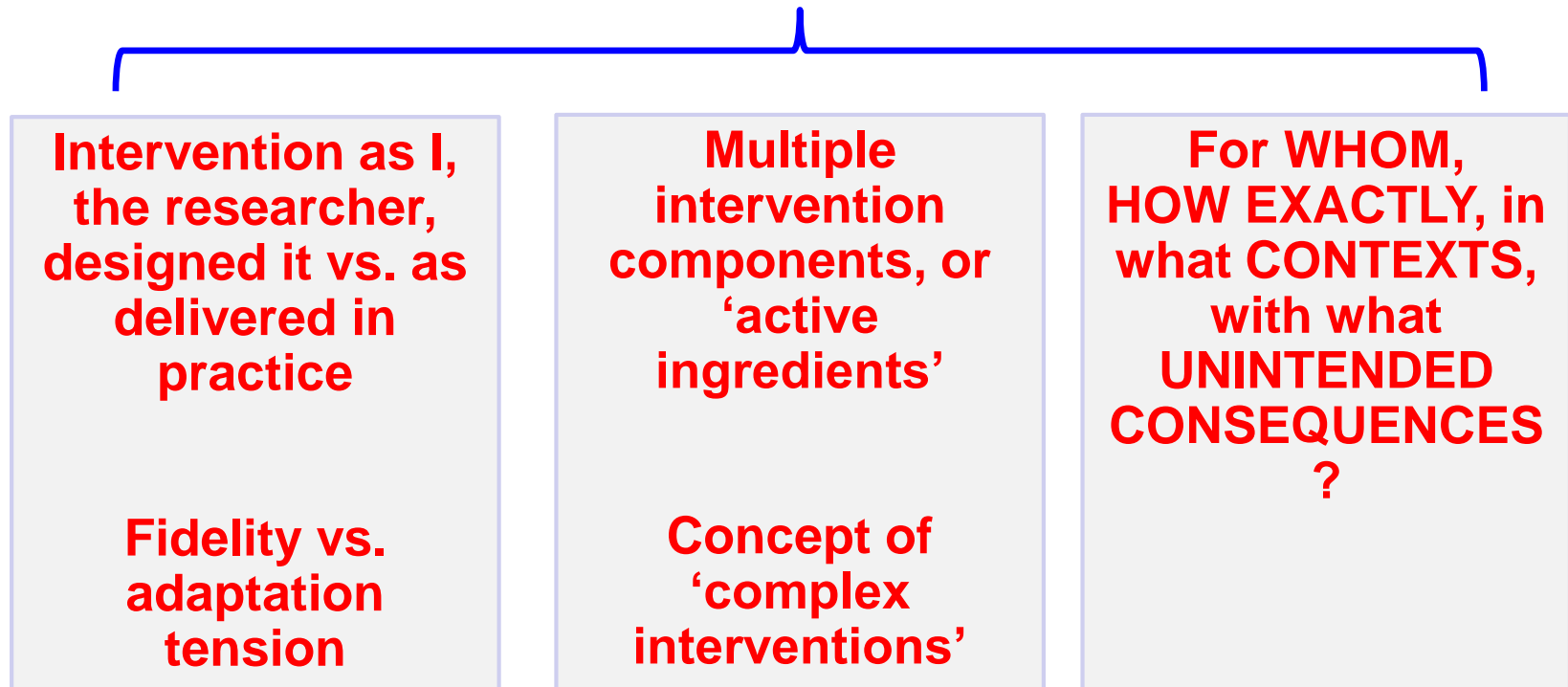
## Dissecting effectiveness (iii)

*Does my intervention actually work...?*

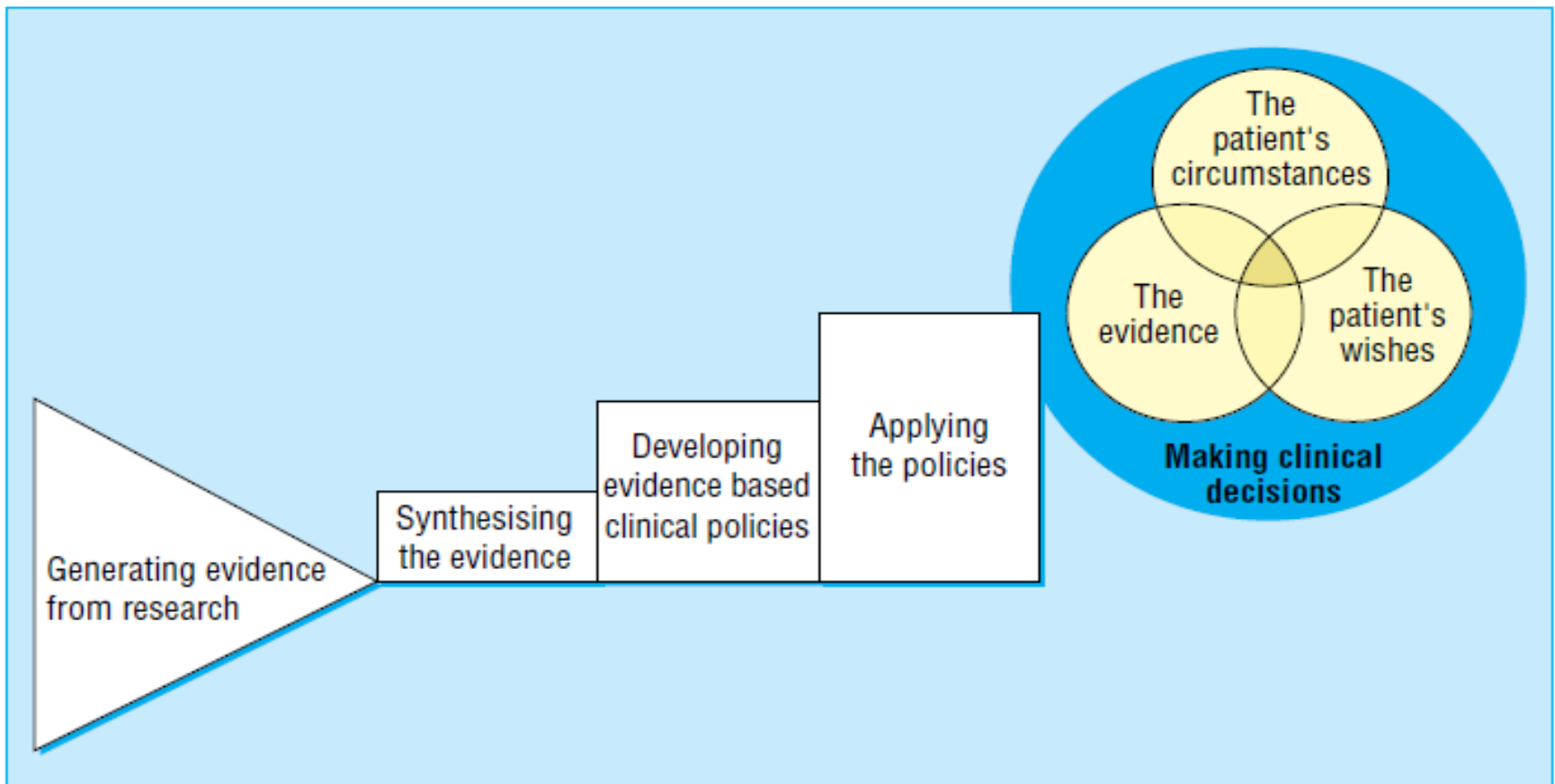


# Intervention evaluation = a complex matter

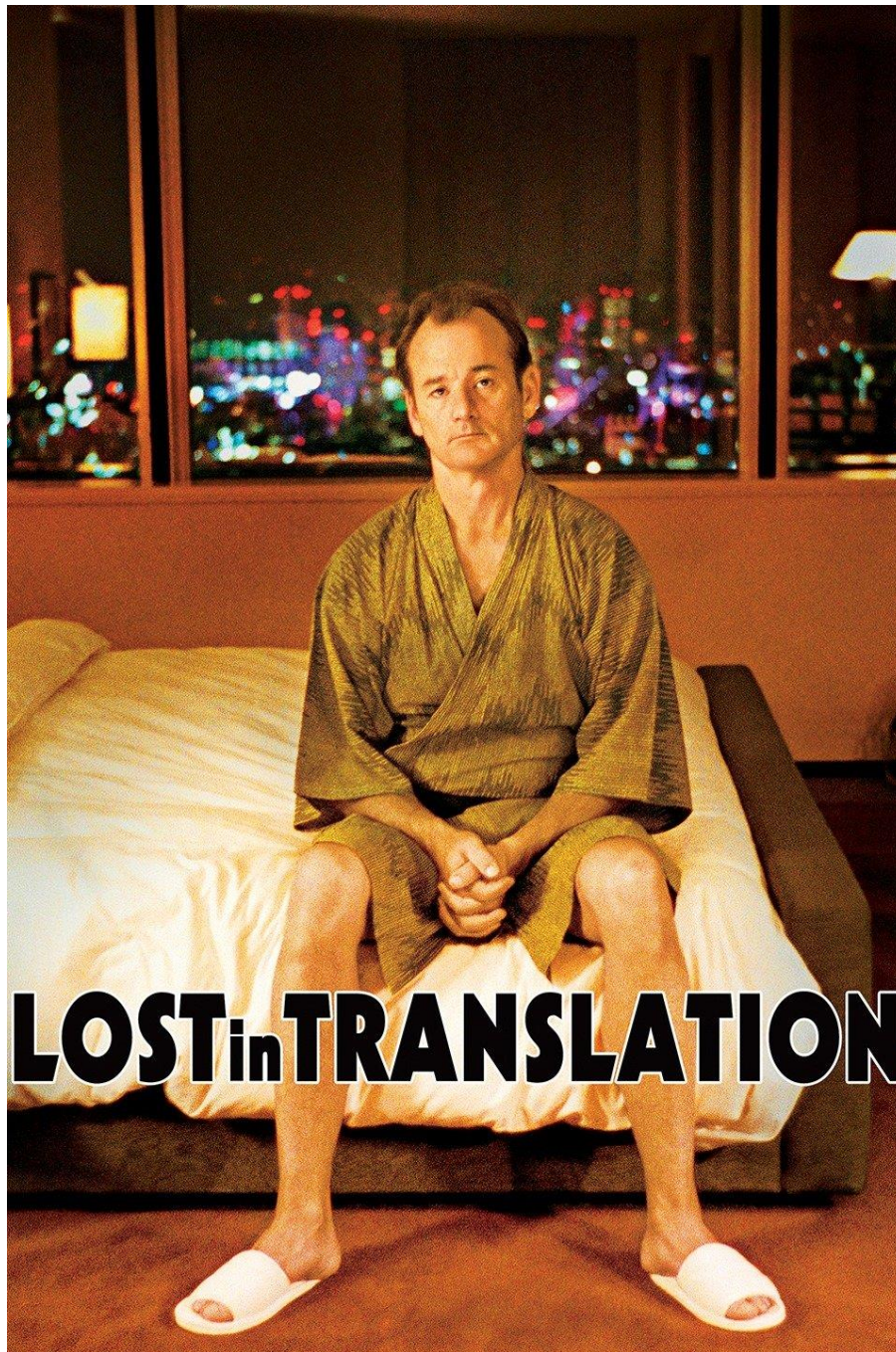
*Does my intervention actually work...?*



# Path from generating to applying evidence





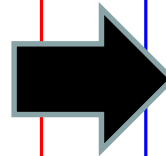


**LOST in TRANSLATION**

# Things that often get 'lost'...

## ***RCT world***

- Intention to maximise intervention efficacy
- Careful selection of patients/participants
- Specialised+trained researchers implementing & measuring
- Research funds



## ***Real life***

- Intention to achieve sustainable delivery
- Widespread adoption
- Generalist practitioners, often no further training, no ad hoc measurement
- Service delivery funds (limited)

# Deadly gap between research and real life



BELIE MELLOR 2012  
ADAPTED FROM AN ORIGINAL BY B. MELLOR



# Deadly gap between research and real life



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FIND THE GAP

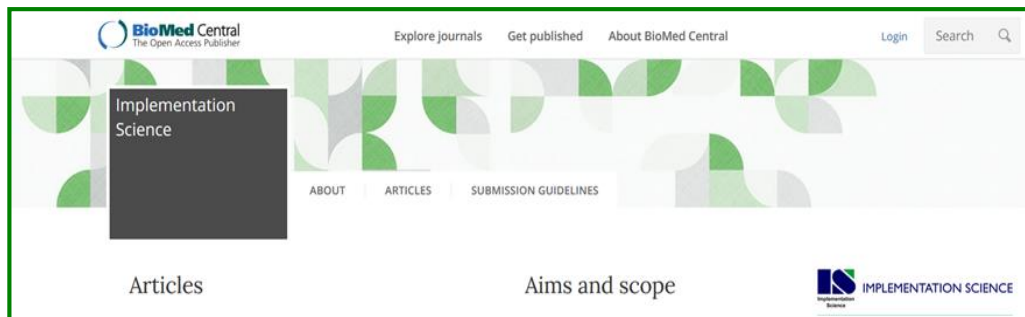


# Closing the gap: Implementation science

- The **scientific study of methods to promote the uptake of research findings into routine healthcare** in clinical, organisational or policy contexts

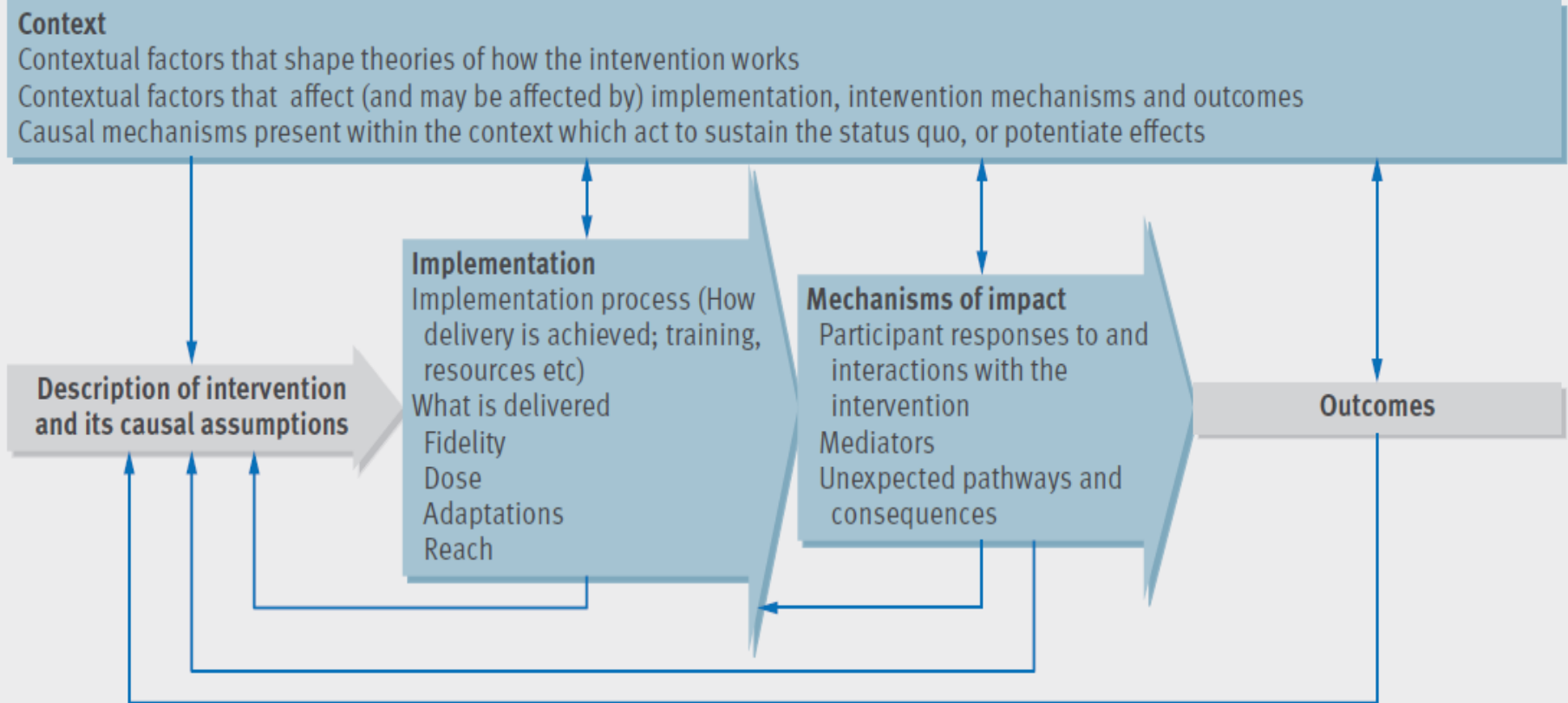
*[Implementation Science journal website]*

- It supports **innovative approaches to identifying, understanding, and overcoming barriers to the adoption, adaptation, integration, scale-up and sustainability of evidence-based interventions**, tools, policies, and guidelines



*[NIH, 2015]*

# Evaluate implementation **ALONGSIDE** effectiveness



# Implementation success

$$I = fE + IO's$$

I = Implementation success

E = Effectiveness of the treatment being implemented

IO's = Implementation factors or outcomes



<b>Implementation outcome</b>	<b>Definition</b>
<b>Acceptability</b>	Perception amongst stakeholders new intervention is agreeable
<b>Adoption</b>	Intention to apply or application of new intervention
<b>Appropriateness</b>	Perceived relevance of intervention to a setting, audience, or problem
<b>Feasibility</b>	Extent to which an intervention can be applied
<b>Fidelity</b>	Extent to which an intervention gets applied as originally designed / intended
<b>Implementation costs</b>	Costs of the delivery strategy, including the costs of the intervention itself
<b>Coverage</b>	Extend to which eligible patients/population actually receive intervention
<b>Sustainability</b>	Extent to which a new intervention becomes routinely available / is maintained post-introduction

# Implementation strategies

**Methods or techniques used to enhance the adoption, implementation, and sustainability of a clinical programme, practice or intervention**

## Examples include:

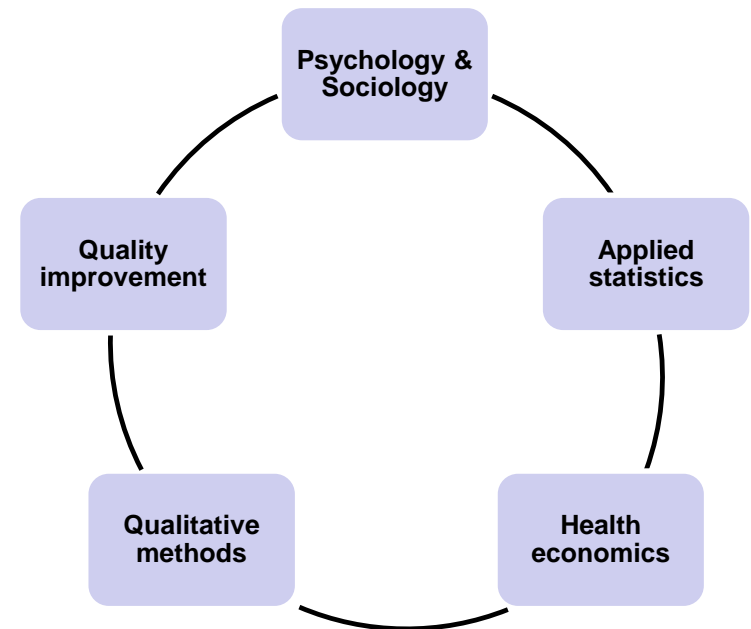
- Adaptation & tailoring of interventions to local setting
- Clinical/service stakeholder engagement (e.g. champions, train-the-trainers)
- Training & education
- Patient/service user engagement
- Audit and feedback

*Choose and tailor strategies depending on the  
contextual factors you are faced with*



## Reflections – for discussion!

- Producing evidence does not equate improving services or uptake
- Implementation science offers a language and a way of thinking around how interventions work (or not) in the real world
  - Takes us from research to real life settings
- Multidisciplinary endeavour



THANK  
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