

THE CENTER FOR HEALTH CARE DISSEMINATION RESEARCH


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KAISER PERMANENTE.  thrive

RATIONALE AND OPPORTUNITY

- There is a unique opportunity to be a national leader in the *scientific study and research-based application* about dissemination and implementation
- Congress, NIH, CDC, AHRQ, and citizens are demanding *increased knowledge application and accountability*
- Federal and private foundation *resources are increasing* to support the science of dissemination
- There are many *dissemination research* efforts ongoing, but little organization of applicable concepts, translational tools, or shared resources



***“In theory, there is no difference
between theory and practice.
in practice, there is.”***

Yogi Berra

VISION

To contribute prominently in setting the national agenda for defining and advancing the fields of

- 1) implementation and dissemination research in terms of both translational research (*the science of dissemination*) and
- 2) Identification and use of best processes for translational practice (*the art of translation*)

MISSION

Conduct *research* on the production and dissemination of applicable concepts and practical tools for the integration of health care research and practice.

To serve as a *collaborative learning laboratory* and a resource to *stimulate, support, and evaluate* high-priority translational research.

ACTIVITIES ENVISIONED

- ***Plan, design, conduct *practical* implementation and dissemination research**
- **Develop and maintain shareable *databases* on successful dissemination research and transfer of research to practice**
- **Convene periodic *meetings* on translation issues**
- ***Test and provide validated *tools* to researchers, clinicians, and decision makers on best processes for implementation and sustainability**
- **Provide consultation and technical assistance to *improve performance* by reducing research – practice gaps**

* Primary focus of the Center

CORE CAPACITIES

- ***Theory and Science Base:*** Bring together literature on theory and practice of dissemination
- ***Intervention Planning and Design:*** For successful implementation, dissemination, and sustainability
- ***Evaluation:*** With focus on implementation, external validity, representativeness, potential for translation
- ***Economic analysis:*** Cost estimation, cost-effectiveness, simulation modeling
- ***Administration:*** Coordination, bibliographies, websites, budgeting

THE DISSEMINATION CENTER WILL BE:

- Collaborative
- Studying the PROCESSES of successful translation
- A mechanism for supporting, coordinating, and publicizing translational research
- Broadly focused—not on a single disease, topic, or translational issue
- Evolving over time

THE DISSEMINATION CENTER IS NOT:

- Focused on *Colorado*
- Exclusionary
- A quality improvement organization (though we partner with some)
- Fixed or set in stone

WHY KAISER PERMANENTE?

- Our Colorado research institute has a *unique mission* on late-stage translation, not bench-to-bedside research
- We are successful in partnering with delivery systems
- We both translate results of research *and* study the processes of translation
- *We have* requisite expertise and with recent additions, nationally and internationally recognized experts in dissemination and translation research

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EXAMPLE 1

Active Living Every Day (ALED)

- **Retrospective case-control study of implementation factors in worksites, health clubs, medical centers**
- **Focus on sector-level and organization-level variables that affect dissemination implementation**
- **Assess theoretic fidelity through program and setting adaptations**

EXAMPLE 2 (Proposed)

A Cardiovascular Practice Implementation Support Intervention

- **A resource for opinion leading rural Colorado health care providers show others what they are doing and how**
- **Centered on a web-based decision tool**
- **Acknowledges the literature in practice-based learning and guided adaptation**

EXAMPLE 3

Evaluating and Enhancing External Validity

- **RWJF “Prescription for Health” primary care networks throughout the country assisted to address these issues and collect EV measures**
- **Cross-site manuscript reporting lessons learned for translating research into practice being written**
- ***RE-AIM model* applied to enhance and assess Reach, Effectiveness, Adoption, and Implementation**

EXAMPLE 4 (Possible)

Multi-site Study of Interactive KP Health Behavior Change Program

- **Builds upon efficacy RCTs led by Vic Stevens at KPNW on multi-modality interactive automated program for healthy eating**
- **Coordinate several KP sites and systematically study variations to:**
 - **enhance Reach**
 - **enhance Adoption in primary care**
 - **enhance Implementation and participant retention**

CENTER FOR HEALTH CARE DISSEMINATION RESEARCH

Our Motto:

"We don't tell you what evidence-based practices you need; we help you plan, implement, spread, sustain, and evaluate them BETTER."

QUESTIONS, COUNTERPOINT, DISCUSSION

