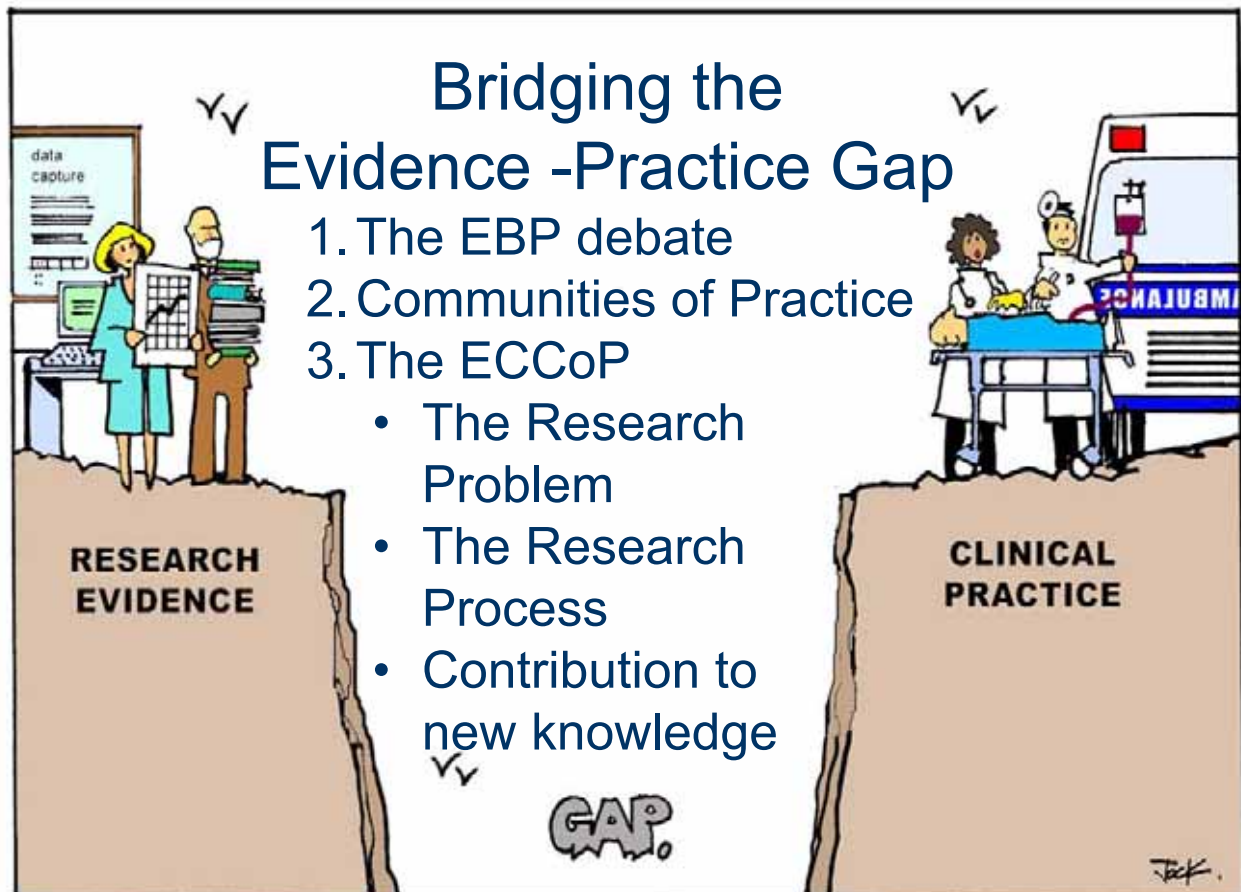




# Evidence Implementation in Health Care: A case study of a Community of Practice

Understanding how a community of practice contributes to improving the uptake of evidence in practice

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# Setting the Context

## 1. Evidence-based practice

- Assumptions underpinning the assertion of a “gap”
- What are the drivers for the EBP debate?
  - Under-utilisation of existing evidence from research
  - Social, economic and political imperatives
  - Quality health care outcomes



# Setting the Context

## 2. The Emergency Care Community of Practice

- National Institute of Clinical Studies (NICS)
  - Identify and close gaps between evidence and current practice
  - “evidence uptake”
- Emergency Care initiatives
  1. Multi-disciplinary networks
  2. National Collaborative
  3. The ECCoP



# Setting the Context

## 3. The Research Study

- Establishing evidential basis for health care improvement
- The PhD Research Study: Effectiveness of CoP model:
  1. Inform practice change in clinical setting
  2. Sustainability
  3. Transferability



# Communities of Practice

## What do we know?

- groups of people
- share information, insight, experience and tools
- an area of interest
- shared concern and passion
- set of problems
- deepening knowledge and expertise through interaction”

*(Wenger, 1998; Wenger at al, 2002)*



# Communities of Practice

## What do we know?

- voluntary interaction
- professionals within a domain of practice
- level of participation, cohesiveness and collaboration
- purpose, concerns and commitment cross boundaries
- “Practice improvement”

*(Wenger, 1999; Wenger et al, 2000; Gongla & Rizzuto, 2001)*

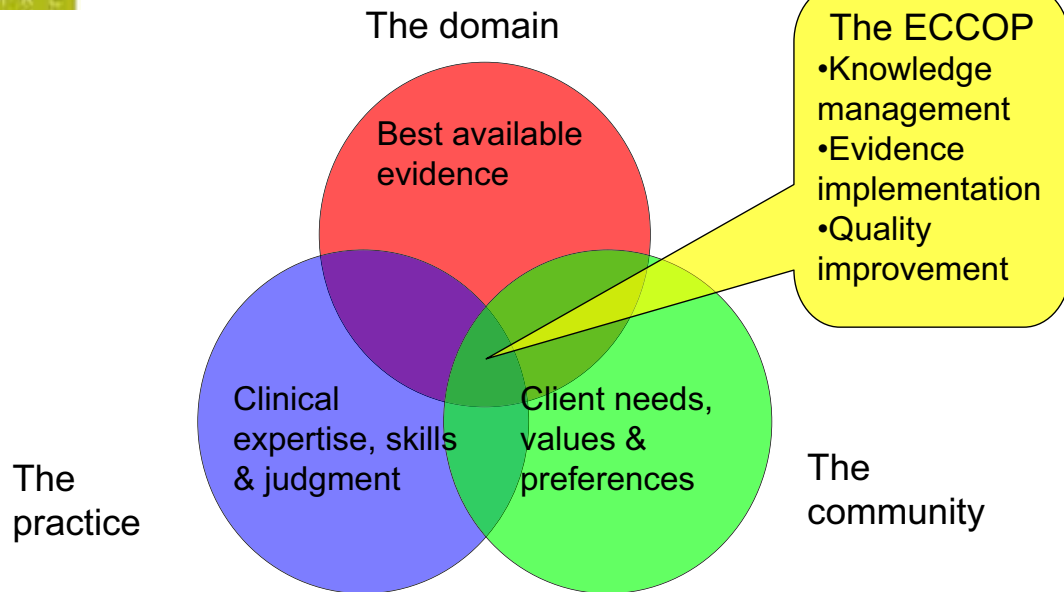


# Communities of Practice

## What is the knowledge gap?

- Influence on:
  - professional learning, knowledge & behaviour?
  - organisational knowledge?
- Significance of context?
- Evolution and sustainability?
- Generalisability?
- Transferability?

# The Emergency Care Community of Practice



# The ECCoP What do we know?

## Commonalities

- Commitment to shared values
- Willingness to learn through sharing
- Importance of inter-personal interaction
- Flexibility and responsiveness
- Role development & differentiation
- Significant of credible “brokerage”
- Life cycle changes & concern for sustainability



# The ECCoP

## What is do we know?

### Differences

- Commitment to practice change
- Importance of clinical relevance & priorities
- Sophisticated structure & dynamics
- Collaborative local EI projects
- Clinical leadership and champions
- Strategic partnerships & links
- Expectations of NICS
- “Life cycle” differences – “metamorphosis”



# The ECCoP

## What is the knowledge gap?

- Determinants of developmental pattern?
- Influence of specific context & clinical setting?
- Barriers and enablers to & for practice change?
- Efficacy - determinants? Indicators? Measurement?
- Sustainability?
- Transferability?

# Setting the context:

## 3. The Research Experience

### Tenets of evidence-based practice

1. Rigorous scientific research underpins evidence-based practice
2. Evidence implementation involves changing professional behaviour
3. Improved practice achieves improved clinical outcomes

*(Friedland et al, 1998; Grol and Grimshaw, 2003).*

# The Research Experience

## 1. The research problem

- **Scope**
  - Underpinning theoretical concepts and principles
  - Emergence, development, sustainability
  - Patterns and dynamics of interaction
  - Significance of setting & contextual factors
  - Applicability in practice
  - Strategies & mechanisms for evidence implementation
  - Indicators, attribution & measurement of effectiveness
  - Quality outcomes

# The Research Experience

## 1. The research problem

- Specific, meaningful, feasible questions
  1. What factors are instrumental in determining the effectiveness of the ECCoP?
  2. Is the CoP model an appropriate model for informing the implementation of evidence in practice?
  3. What is the potential transferability of the CoP model to other clinical contexts in health care?

# The Research Experience

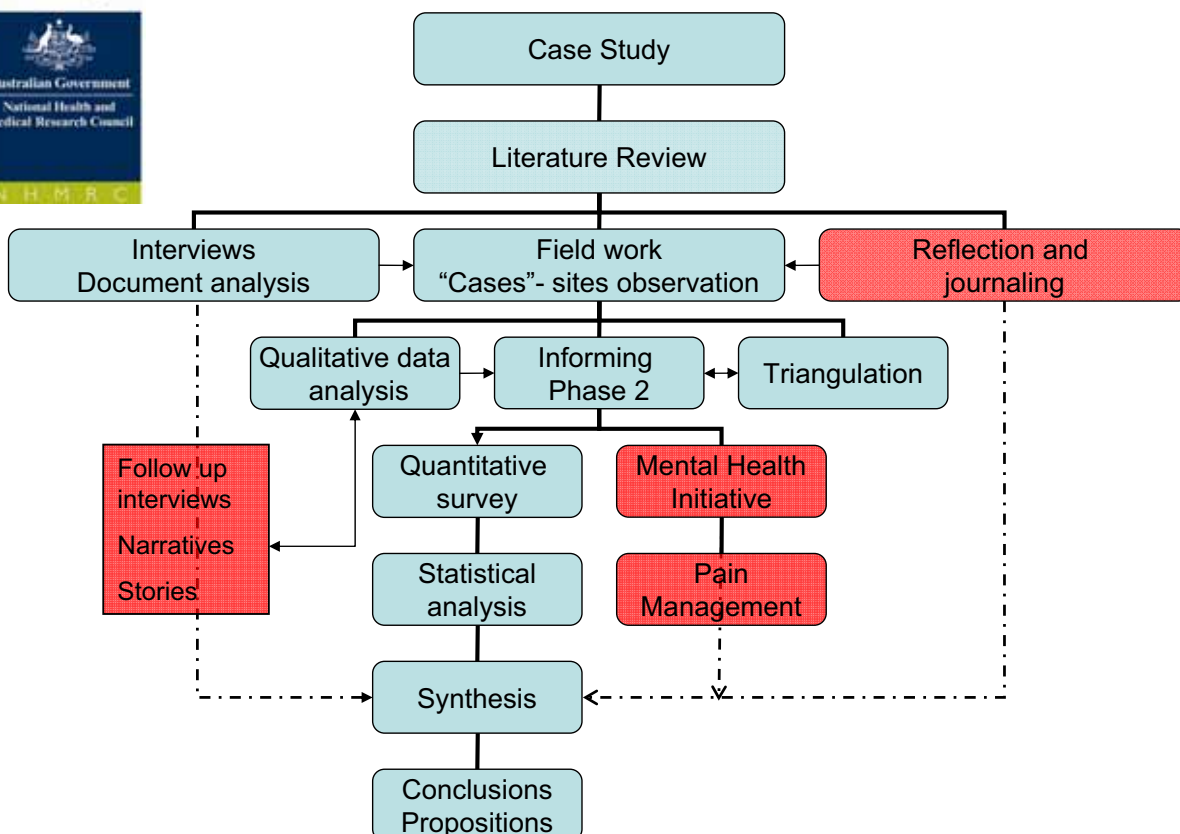
## 1. The research problem

- Theoretical framework
  - No one theory - learning and behavioural change
  - Learning within a community of practice occurs during peer interaction
  - Grol “Social Interaction Theory”
    - Analyse, integrate dynamics of learning, roles & relationships, interaction within a particular context

# The Research Experience

## 1. The research problem

- Research design and methods
  - Appropriate, empirical, rigorous design
  - Insight, meaning, understanding
  - Evolving responsive methodology
- Mixed qualitative & quantitative methods
- Case study
  1. Phase 1 – multiple data sources
    - Sample interviews, document analysis, site studies
  2. Phase 2 – survey
    - Test emergent assertions and propositions



# The Research Experience

## 1. The research problem

- Analysis
  - Codifying data
  - Compare and contrast the ECCoP
    - Theoretical models
    - Examples from other settings
    - Areas of convergence & divergence
  - Data synthesis
    - Deductive & inductive reasoning
    - Primary research questions

# The Research Experience

## 2. The Research Process

- Issues and challenges
  1. ECCoP established without evidence of appropriateness in health or effectiveness as medium for evidence uptake
  2. Limitations of existing theories of behavioural change to address complex multifaceted dynamic interventions
  3. Social research and the conundrum of establishing “causality”



# Contribution of the research to new knowledge

- Communities of Practice
  - Enhancing collaborative professional learning
  - Integrating of multi-disciplinary skills and experience
  - Determining contextual readiness and capacity
  - Enhancing professional role development and differentiation
  - Essential resources to support the CoP
  - Potential for adaptation and transferability



# Contribution of the research to new knowledge

- The Emergency Care Community of Practice
  - Determinants in the “host” setting
  - Enhancing the quality of inter-disciplinary interaction
  - Enhancing cohesiveness through social interaction
  - Effective strategies and mechanisms
  - Flexibility in the role of the broker
  - Change as a source of sustainability
  - Mutuality – ECCoP, organisational culture and climate for transferability

# Contribution of the research to new knowledge

- Bridging the Gap
  - Value of rigorous, mixed methods research
  - innovation in evidence implementation in health
  - Knowledge translation
  - Building research capacity in & across different disciplines, professions & organisations
  - Inform future research – “outcomes”

