



**MACQUARIE**  
University

**AUSTRALIAN INSTITUTE  
OF HEALTH INNOVATION**

# Does implementation science have an implementation problem?

WORKSHOP REPORT FROM EVIDENCE AND IMPLEMENTATION SUMMIT 2021

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Workshop report from the Evidence and Impact Summit 2021.

# Report

## Executive Summary

With over 100 frameworks on offer in the literature, implementation science can be a confusing field to access. We held a workshop at the Evidence and Implementation Summit 2021 to discuss the challenges of implementing implementation science and what could be done to promote its use. Workshop participants identified four key enablers: *building relationships, finding a common language, defining roles, and dedicated implementation resources*. We examined two of these areas, communication and building relationships, in more detail.

## INTRODUCTION

**How clear is ‘the offer’ from implementation science? At one end of the spectrum**, there are more than 100 published frameworks making it challenging for stakeholders and researchers to engage in implementation science. At the other end, there is an expectation that implementation science will be a ‘**silver bullet**’; rapidly resolving all implementation challenges. We ran a cross-disciplinary workshop to:

- a. Identify how to communicate the value of implementation science.
- b. Investigate how to engage our stakeholders.
- c. Promote shared learning.

## METHODS

We adopted a modified world café approach with facilitated break-out sessions with attendees of the virtual Evidence and Implementation Summit 2021. We kept the number of participants per group in break-out sessions low (4-5 people) to promote discussion. After each round the most interesting/surprising findings/ideas/pitches/tips were shared with the whole group.

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## BREAK-OUT SESSION 1: COMMUNICATION

We shared a vignette to prompt thinking:

*You are starting out in a new post as an implementation practitioner, keen to see research make it into practice. It's clear that your new colleagues don't 'get' what implementation science is and what you can add to their practice.*

Participants were asked to consider:

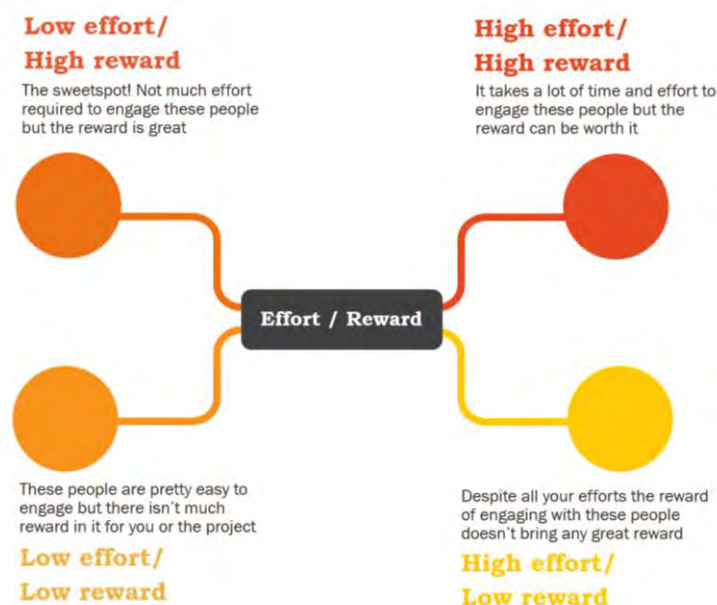
- How would you go about communicating what implementation science has to 'offer'?
- What would your elevator pitch sound like?

## BREAK-OUT SESSION 2: BUILDING SUSTAINABLE RELATIONSHIPS

We shared an effort/reward stakeholder matrix (Figure 1) with participants and asked them to consider:

- How do you go about engaging your stakeholders?
- Does it vary depending on where they are in the effort/reward matrix?
- How do you go about sustaining those relationships?

Figure 1: Stakeholder matrix – *effort/reward* (source: Authors' representation)



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A pilot event was held two weeks before the Evidence and Implementation Summit to fine-tune the presentation, questions posed and team/IT requirements with a group of 11 attendees at the Implementation Science Interest Group (ISIG) through the Australian Institute of Health Innovation (AIHI), Macquarie University.

## DATA COLLECTION AND ANALYSIS

At the outset of the workshop, we gathered data on participant characteristics via Zoom polls. We also asked one open-ended question to explore participants' experiences of 'what works' when implementing in practice. Discussions in break-out rooms were captured using Google Forms, and completed by facilitators and workshop participants. Quantitative data were analysed using descriptive statistics and qualitative data was analysed using content analysis.

## RESULTS

The workshop was well attended with 37 participants taking part.

### PARTICIPANT CHARACTERISTICS

Not all participants completed all the Zoom polls (Table 1 – percentages are rounded to whole number). Of those who responded, nearly three quarters were from Australia (n=23/32, 72%). There was strong attendance from the health sector (n=15/28, 54%), including mental health practitioners and researchers. About half the participants had found implementation science somewhat or very useful previously (n= 15/31, 48%) though several participants had not used implementation science before (n=5/31, 16%). There was a fairly even split between those who had less than five years' experience of implementation in practice (n=15/31, 48%) and those who had over 6 years (n=16/31, 52%).

Table 1. Zoom poll results

Where do you live?	n=32	%
Australia	23	72
Singapore	4	13
USA	4	13
Other	1	3

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What field do you work in?	n=28	%
Health	12	43
Social welfare	6	21
Education	4	14
Mental health	3	11
International development	1	3
Early childhood	1	3
Aboriginal and Torres Strait Islander	1	3

How useful has implementation science been to help you get evidence into practice?	n=31	%
Never used it	5	16
Not useful)	2	6
Neither useful nor un- useful	9	29
Sometimes useful	13	42
Very useful	2	6

How many years of experience do you have of translating evidence into practice and/or quality improvement?	n=31	%
0-5 years	15	48
6-10 years	8	26
11 years +	8	26

What is your no. 1 enabler in implementing evidence into practice? You may want to think about the last project you were involved with.

*Four common enablers:*

- Relationship building; building trust; developing long term collaborations.
- Finding common language for talking about implementation; plain language.
- Defined roles for implementation work, especially when embedding within existing teams.
- Dedicated implementation resources, including funding for resources and/or external partners; getting sponsorship; executive buy-in.

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## THEMES FROM BREAK OUT SESSIONS

### **SESSION 1. HOW WOULD YOU GO ABOUT COMMUNICATING WHAT IMPLEMENTATION SCIENCE HAS TO 'OFFER'?**

- **Understand others' starting point,**  
learn their perspective, acknowledge and value what they already know.
- Tailor your explanation of what implementation science is to suit the audience and their context.
- Are they already doing something similar to implementation science but calling it by another name (e.g., quality improvement, quality assurance, monitoring, and evaluation)?
- Minimise the use of jargon and reach a common language. It might not be necessary to talk in terms of frameworks and theories.
- Frame implementation science as a systematic, intentional way of doing what many people may already be doing, that is, implementation science provides a structured way of thinking about how to get evidence into practice and can support the adoption of new practices.
- Communicate that you have a common goal, for example, improving the quality of care, support, intervention, and/or practice delivered to individuals and/or families.

### **SESSION 2. HOW DO YOU GO ABOUT ENGAGING YOUR STAKEHOLDERS? (DOES IT VARY DEPENDING ON WHERE THEY ARE IN THE EFFORT/REWARD MATRIX?)**

- Stakeholder mapping and networking  
– Find out who is who, and how they are going to help or impede implementation. Remember informal influence as well as formal interaction. Leverage people with existing relationships with those you are trying to engage. Nurture and develop your informal contacts. Informal conversations can be a very valuable source of insight, e.g., how service works, how to engage other key people?
- Be humble – Draw on the practice wisdom of staff and acknowledge that practitioners may already be implementing new practices or changing their practice. Practice active listening and ask, “**what can I do to help you?**”
- The importance of timing – Manage expectations early and make sure the ‘right’ people are in the room to start with. An early effort to meet people in their own environment is often appreciated.
- Two-way street – Mutual engagement should be expected. Policy makers and practitioners also need to engage with the process.
- Clear value-added element – Engaging stakeholders and getting them to see the value of an implementation project often



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requires considerable effort. It can help to demonstrate the value you are adding, as this is not always obvious to others.

purpose to improve services and outcomes.

## **SESSION 2. HOW DO YOU GO ABOUT SUSTAINING RELATIONSHIPS?**

- Time to build relationships – Develop long-term relationships and collaborations. Factor in a reasonable time in the project to build relationships and trust with other stakeholders who may wish to be invested in your implementation work, especially with First Nations communities.
  - Lived experience and consumer engagement – Engaging with consumers requires a lot of effort but is highly valuable. Joining with patient, parent, or client voices is a powerful way to engage others with the shared
- Acknowledge resistance – Understanding why there might be resistance and do not take it personally. **Sometimes the “squeaky wheel” gets all the time and attention.** Find out why they are squeaky.
  - Sustain engagement – Ensure to follow through and follow-up after projects have reached fruition. Use different communication channels to, inform others and keep in regular contact with, updates and information. Keep turning up. Be 'visible'. It may be a valuable lesson, though does require effort and persistence.

## **CONCLUSION**

It is evident that what implementation science can offer others could be made clearer. Our participants reported four key enablers:

- Building relationships
- Finding a common language
- Defining roles
- Dedicated implementation resources

We examined two of these areas (building relationships and finding a common language) further and collectively identified ways to help improve the way the benefits of using implementation science are conveyed. **This ranged from understanding others’ starting points** to communicating a shared common goal. Equally, the focus on building sustainable, trusting relationships and developing strongly linked networks also benefits from targeted attention. For example, taking the time to map who your stakeholders are and engaging with consumers. To maximise the benefits of working across multiple settings we, as implementation researchers and practitioners, can learn



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from the themes identified in this workshop and ISIG meeting. There is a need to support greater collaborative practices, create opportunities for mutual learning and sharing of knowledge, and build stronger trusting relationships to promote equitable engagement in, and development of, service innovations and practices.



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### **FIND OUT MORE**

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