



What it takes to scale-up a complex intervention: Findings from a pilot study of a transitional care intervention

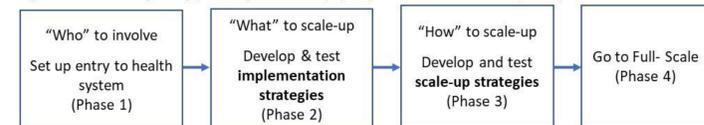


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Background

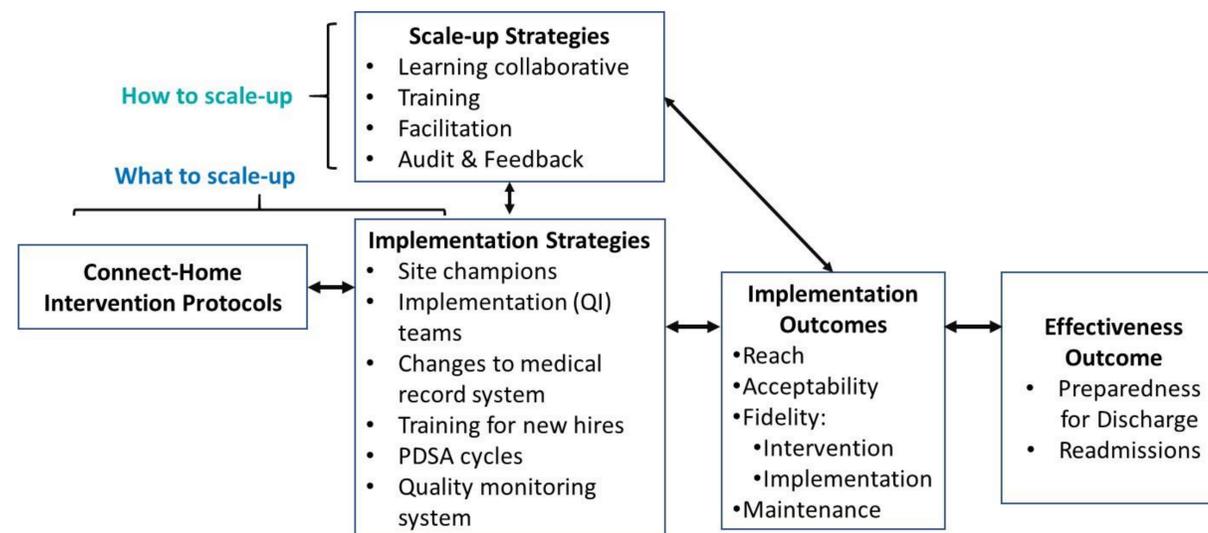
Each year, 1.6 million older Americans transition from hospital to nursing home (NH) to home. Within 90 days of returning home, more than 50% of these patients die, use emergency services, or are re-hospitalized. Connect-Home is a transitional care intervention that prepares patients and their caregivers for the transition to home. Guided by Barker et al.'s (2016) framework for intervention scale-up, we developed two levels of strategies to take Connect-Home to scale.

Figure. Framework guiding planning for scale-up (Adapted from Barker et al., 2016)



We developed and tested (1) the intervention protocols and implementation strategies needed to integrate Connect-Home into routine practice (“**what**” to scale-up) and (2) the scale-up strategies needed to take Connect-Home to scale (“**how**” to scale-up).

Framework for Connect-Home scale-up



PDSA = Plan-Do-Study-Act

Leeman, J., & Toles, M. (2019). What does it take to scale-up a complex intervention? Lessons learned from the Connect-Home transitional care intervention. *Journal of Advanced Nursing*. Epub ahead of print.

Findings

Scale-up Strategy Reach to Staff

Two off-site collaborative meetings	Excellent
Four-hour on-site training	Excellent
Monthly facilitation calls	Mixed

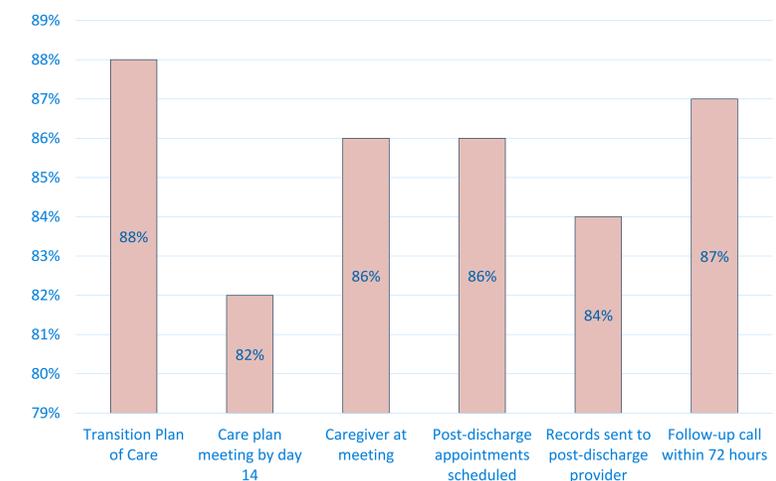
Fidelity - Implementation

Site champions	Excellent
Changes to EHR	Excellent

Quality improvement teams	Mixed
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PDSA cycles	Poor
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Fidelity - Intervention



Implications

Intervention fidelity was good but there were gaps in implementation fidelity. Closing these gaps is essential to continued improvements in intervention fidelity and to sustaining the intervention over time. In our current research, we are refining scale-up strategies to better support NH fidelity to protocols for QI teams and PDSA cycles.

Purpose

Assess the acceptability, feasibility, and impact of Connect-Home implementation and scale-up strategies.

Methods

We scaled Connect-Home up in 4 not-for-profit NHs in 4 states and used tracking logs, in-depth interviews, and chart audits to collect data on the following implementation outcomes: reach to NH staff, implementation fidelity, intervention fidelity, acceptability, and feasibility.

Measures	Definition
Reach to staff	Staff participation in scale-up strategies (tracking logs)
Fidelity - Implementation	Staff completion of implementation strategies (tracking logs)
Fidelity - Intervention	Staff delivered Connect-Home per protocols (chart audits)
Acceptability & Feasibility	Staff perceptions of the Connect-Home intervention protocols (interviews)