

# #153 - A scoping review of implementation strategies and outcomes in Asia's healthcare landscape

### Presenting Author(s)\*

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## **Objectives/aims**

To examine implementation strategies and outcomes in implementation research studies in Asia's healthcare landscape.

#### Methods

Scoping review methodology was used, following the well-established Arksey and O'Malley five stages framework and using a systematic search strategy. The search was initially conducted through PubMed, Embase, CINAHL and PsycInfo, then supplemented by expert suggestions, handsearching, and reference mining. Studies that described the use of implementation theory (broadly defined), reported determinants/factors influencing implementation, outlined strategies or interventions evidence-based practice effects to improve uptake, or assessed of implementation/scale up strategies on implementation outcomes were included if they were conducted in Asia and published from 2012 to 2022. Studies that were excluded were those that were conducted in a multi-country setting including both western and Asian and non-asian countries but data on the Asian countries could not be separated or were conducted among on the Asian population but not in an Asian country. To standardise the terminology used, the strategies and outcomes from each article were mapped onto Powell's ERIC implementation strategy taxonomy and Proctor's framework for implementation outcomes, respectively. The reporting of implementation outcomes were also examined with reference to Lengnick-Hall's recommendations for improved implementation outcomes reporting.

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#### Main findings

Sixty-nine publications (60 unique studies) were included, with the earliest publication year of 2013. There was a marked increase in the number of publications in the last five years (2019: n=9; 2020: n=18; 2021: n=18 publications). The majority were from India (n=11) or China (n=10). Most publications were focused on descriptive implementation evaluation (n=43), rather than interventions and employed qualitative study methods (n=32).

It was found that 31 publications reported on implementation strategies. The most common strategy category was train and educate stakeholders (n=26) while the least common was to adapt and tailor to context (n=1). Twenty-six studies reported using multiple strategies (median: n=4, range: 1 - 10). Five studies reported using only a single strategy (i.e. conduct educational meeting) for their implementation.

Of the 69 publications, 34 reported implementation outcomes. The rest did not as they were at the earlier stage of identifying factors or barriers and facilitators to successful implementation, understanding perceptions or context, or developing implementation strategies. Fidelity (n=15) and acceptability (n=12) were the most frequently studied implementation outcomes, while implementation cost (n=1) was the least studied. Among service and client outcomes, effectiveness was measured most frequently (n=14). Although not an implementation outcome, 'implementation readiness' was also assessed in 5 publications as a determinant of implementation success.

This review also took reference from recommendations for improved implementation outcomes reporting to examine if there was clarity in the implementation outcomes reported. Most publications that described implementation outcomes had reported them as recommended by Lengnick-Hall. Only 7 publications either did not clearly state the study's implementation outcome, specify how the implementation outcome was analyzed relative to other constructs or specify "the thing" that each implementation outcome will be measured in relation to.

To our knowledge, this is the first review on healthcare implementation research conducted in Asian settings. More than half employed multiple strategies in studies that reported on strategies, and half had reported implementation outcomes. But few provided specific details on how the strategies were selected, what the content of the strategies were, or tested the relationships between strategies and outcomes. To improve implementation, there is a need for better reporting of strategies and testing

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to build more evidence for effective implementation. Good reporting of implementation strategies and outcomes would also help readers understand necessary factors to consider and lessons learnt when planning their own implementation to facilitate their own research or practice.