12th Annual Conference on the Science of Dissemination and Implementation in Health

AcademyHealth

NIH National Institutes of Health

AGENDA

December 4–6, 2019 | Arlington, VA

academyhealth.org/DIscience

#DIScience19

12th Annual Conference on the Science of Dissemination and Implementation in Health

AcademyHealth

NIH — National Institutes of Health
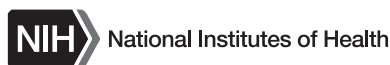
Welcome to the 12th Annual Conference on the Science of Dissemination and Implementation in Health (D&I), co-hosted by the National Institutes of Health (NIH) and AcademyHealth. Over the next two and a half days, guided by the theme, Raising the Bar on the Rigor, Relevance, and Rapidity of Dissemination and Implementation Science, we'll map the way forward for improvements in the development, execution, and application of D&I science. We will also acknowledge the contributions made by attendees like you, working each day to ensure that evidence is used to inform decisions that will improve the health of individuals and communities. We are thrilled that you have decided to join us and we look forward to working together to bridge the gap between research, practice, and policy in health and health care.

About AcademyHealth
AcademyHealth is the leading national organization serving the fields of health services and policy research and the professionals who produce and use this important work. Together with our members, we offer programs and services that support the development and use of rigorous, relevant, and timely evidence to increase the quality, accessibility, and value of health care, to reduce disparities, and to improve health. A trusted broker of information, AcademyHealth brings stakeholders together to address the current and future needs of an evolving health system, inform health policy, and translate evidence into action. www.academyhealth.org

About the National Institutes of Health (NIH)
The NIH's mission is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability. As part of this mission, the NIH supports funding opportunities in dissemination and implementation research that seek to maximize the integration of research findings and evidence-based health interventions into clinical and community practice, along with research training activities and meetings to build capacity of the field. www.nih.gov

Stay Connected Throughout the Conference

Twitter: @AcademyHealth, @NCI_ImplSci and @NCIDAChambers
Conference Hashtag: #DIScience19

CO-HOSTS

SUPPORTERS

Session Track Key

BH . . . . Behavioral Health

BF . . . . . Building the Future of D&I Science: Training, Infrastructure, and Emerging Research Areas

CCP . . . . .Clinical Care Settings: Patient-level Interventions

CCS . . . . Clinical Care Settings: System-level Interventions

GDI . . . . Global Dissemination and Implementation Science

HP. . . . . .Health Policy Dissemination and Implementation Science

MMM . . . . Models, Measures, and Methods

PPH. . . . . Prevention and Public Health

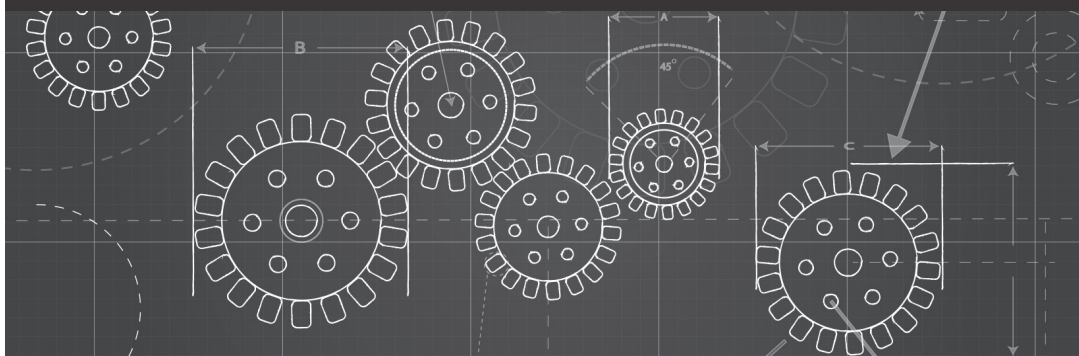**PHE**. . . . . .Promoting Health Equity and Eliminating Disparities

Where possible, presentations are listed in order. If order is unknown, presentations are listed alphabetically.

Dissemination and Implementation Research in Health (R01/R21/R03)

Program Announcements With Special Receipt, Referral, and/or Review (PARs)

https://grants.nih.gov/grants/guide/pa-files/PAR-19-274.html (R01)

https://grants.nih.gov/grants/guide/pa-files/PAR-19-275.html (R21)

https://grants.nih.gov/grants/guide/pa-files/PAR-19-276.html (R03)

NCI_ImplSci
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#Dissemination and #Implementation research news & resources from the NCI. Privacy policy: http://go.usa.gov/xyJZF

Follows & RT do not equal endorsement.

ACCESS FUNDING, TRAINING, AND OTHER RESOURCES AT:
https://cancercontrol.cancer.gov/IS/

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Where possible, presentations are listed in order. If order is unknown, presentation are listed alphabetically.

WEDNESDAY, DECEMBER 4

7:30 a.m.–6:00 p.m.

Registration
Sky View (First Level)

8:15 a.m.–9:45 a.m.

Pre-Conference Workshop: Orientation to the Science of Dissemination and Implementation
Arlington Ballroom (First Level)

Speakers: Cara Lewis, Kaiser Permanente Washington Health Research Institute;
Rinad Beidas, University of Pennsylvania; **Byron Powell**, Washington University in St. Louis;
Meghan Lane-Fall, University of Pennsylvania

Description: This pre-conference workshop will provide an introduction and orientation to the science of dissemination and implementation for conference attendees new to this field.

Workshop: Partnership-Based, Embedded Implementation Research: Maximizing External Validity and Policy/Practice Relevance
Salon A (First Level)

Speakers: Brian Mittman, Kaiser Permanente Southern California; **Stephen Bartels**, Massachusetts General Hospital; **Amy Kilbourne**, Department of Veterans Affairs

Description: Embedded research is designed to simultaneously produce (a) generalizable scientific knowledge and (b) near-term improvements in organizational performance and patient outcomes. Identifying and overcoming the inherent tradeoffs between these goals can be challenging. This workshop will fully define embedded research and describe its strengths and role in improving the validity and value of implementation research, discuss key challenges in developing and maintaining embedded research programs, and present study designs and research methods suitable for pursuing the dual goals of embedded research. Illustrations from academic health systems, the VA health system and private sector/commercial health systems will be provided.

10:15 a.m.–10:45 a.m.

Break

AGENDA

10:15 a.m.–11:30 a.m.

Opening Plenary
Arlington Ballroom (First Level)

Welcome and Conference Overview

Speakers: David Chambers, National Cancer Institute; **Lisa Simpson**, AcademyHealth

Keynote Plenary Session: The Fearless Health Care Organization: Creating Psychological Safety for Learning and Implementation

Speaker: Amy Edmondson, Harvard Business School

Description: This talk will explain what psychological safety at work is (and just as important, what it isn't) and why it matters more than ever in today's healthcare organizations. With so much riding on improvement and engagement, today's healthcare leaders must ensure that everyone is able to speak up. Ensuring high ethical standards also rests on the perceived ability—by everyone—to speak up with questions and concerns, to catch and correct errors and problems quickly. Participants will leave with tips and tools for building psychological safety in the workplace.

11:45 a.m.–1:00 p.m.

Plenary Session: Fostering "Natural Laboratories" for D&I Research: Present and Future
Arlington Ballroom (First Level)

Chair: Simon Craddock Lee, University of Texas Southwestern Medical Center

Speakers: Rinad Beidas, University of Pennsylvania; **Laura Damschroder**, VA Ann Arbor Healthcare System; **Peter Margolis**, Cincinnati Children's Hospital Medical Center; **Rohit Ramaswamy**, University of North Carolina at Chapel Hill

Description: This session will focus on considering the current range of clinical and community settings in which D&I research is conducted and discussion of how sustainable, reusable infrastructure might support those settings to engage in ongoing D&I studies to steadily improve knowledge, services and efficiency of research.

1:00 p.m.–2:30 p.m.

Lunch on Own

2:30 p.m.–4:00 p.m.
Workshops

Introduction to the Multiphase Optimization Strategy (MOST)
Rosslyn (Lobby Level)

Speakers: Linda Collins, Penn State; **Steven Bernstein**, Yale School of Medicine

Description: The multiphase optimization strategy (MOST) is a principled methodological framework for development, optimization, and evaluation of behavioral and bio-behavioral interventions. MOST has the potential to advance implementation science in two ways. First, it can be used to engineer interventions that deliver the best expected outcome obtainable within implementation constraints, such as limitations on cost, personnel time, or other resources. Second, it can be used to optimize the implementation of existing interventions. Approximately half of this workshop will be devoted to a brief introduction to MOST, and the remainder to open discussion of potential applications of MOST in implementation science.

Coincidence Analysis (CNA) Workshop at the D&I Conference
Salon B (First Level)

Speakers: Sarah Birken, University of North Carolina at Chapel Hill; **Laura Damschroder**, VA Ann Arbor Healthcare System; **Edward Miech**, VA PRIS-M QUERI; **Deborah Cragun**, University of South Florida

Description: This workshop will introduce Coincidence Analysis (CNA), a new member within the family of Configurational Comparative Methods (which also includes Qualitative Comparative Analysis). CNA is specifically designed to analyze causal complexity, which is common in implementation research. Presenters will discuss the types of studies for which CNA is useful, provide worked examples of applying CNA to datasets, and share practical resources for using CNA. Participants will learn how CNA works through hands-on exercises involving Boolean algebra, the bottom-up algorithm used by CNA and model performance measures like coverage. No prior knowledge or experience with configurational methods is required.

Introduction to Economic Evaluation in Implementation Science
Salon C (First Level)

Speakers: Alex Dopp, University of Arkansas; **Heather Gold**, New York University; **Todd Wagner**, VA Health Economics Resource Center

Description: This practical workshop will introduce the foundations of economic evaluation in implementation research, so that participants will understand the key issues and basic methods for this burgeoning area. We will incorporate interactive exercises to guide participants through considering how best to capture economic costs and outcomes in their research studies. Few educational opportunities exist for this subfield of implementation science, yet more researchers, stakeholders, and funders are interested in economic aspects of implementing evidence-based practices. Such evaluation helps identify whether implementation strategies and interventions add value in healthcare.

AHRQ Data Resources for Dissemination and Implementation Research
Salons D/E (First Level)

Moderator: Herbert Wong, Agency for Healthcare Research and Quality

Discussant: Jodi Holtrop, University of Colorado

Speakers: Michael Furukawa, Department of Health and Human Services; **Zeynal Karaca** and **Anita Soni**, both from Agency for Healthcare Research and Quality

Description: This workshop will introduce researchers to three databases for investigating care delivery, costs, insurance, provider characteristics, and delivery system contexts: Medical Expenditure Panel Survey, the most complete source of data on the cost and use of health care and health insurance coverage; Healthcare Cost and Utilization Project, which includes health care data on hospital inpatient discharges, ambulatory surgery and other outpatient services, and emergency department visits; and Compendium of US Health Systems, composed of 626 U.S. health systems, with characteristics for each system. Experts will introduce the databases, answer questions about accessing and using them, and describe how these databases may contribute to D&I research.

An Overview and Workshop on Hybrid Effectiveness-Implementation Designs
Salons F/G/H (First Level)

Speakers: Sara Landes, University of Arkansas for Medical Sciences; **Geoffrey Curran**, Central Arkansas Veterans Healthcare System

Description: The presenters will provide an overview of "hybrid effectiveness-implementation" research designs. The presenters will provide rationale for their use, provide examples of strong designs across the hybrid design continuum, offer recommendations for design specifications, and provide a tool which assists in selecting a hybrid design based on previous findings and current understanding of implementation context. Attendees will be invited to share their proposal ideas and work on them in pairs/small groups.

Introduction to Intervention and Implementation Trials along the Explanatory—Pragmatic Continuum
Salon J (First Level)

Speakers: Wynne Norton, National Cancer Institute; **Merrick Zwarenstein**, Western University; **Gila Neta**, National Cancer Institute

Description: This workshop will provide an overview of clinical trials along the explanatory--pragmatic continuum and describe its application to trials testing individual-level interventions and multi-level implementation strategies. The workshop will guide participants through two tools (PRECIS-2 and PRECIS-2-IS) that can help research teams plan for trials testing interventions and implementation strategies that are more explanatory or more pragmatic. As interest in pragmatic clinical trials continues to grow, this workshop provides educational opportunities for researchers to learn how to plan for and conduct trials, and match their specific trial design choices with the overall intent of the proposed study.

Selecting, Adapting, and Operationalizing Theoretical Models for D&I for Proposal Writing and Research
Salon K (First Level)

Speakers: Borsika Rabin, University of California, San Diego; **Rachel Tabak** and **Ross Brownson**, both from Washington University in St. Louis; **Russell Glasgow**, University of Colorado

Description: Systematic use of theoretical models improves the success of D&I projects and has been increasingly required by funders. Given the preponderance of D&I models (over 150), guidance on how to select, adapt, and operationalize them is needed. This learning session will introduce resources and provide hands-on training to participants on selection and meaningful use of D&I models. Main topics will include: 1) use of logic models to inform model selection, and 2) selection, adaptation, and operationalization of D&I models including their use during quantitative, qualitative, and mixed-methods evaluation. For each step, we will provide an easy-to-follow guide and multiple examples.

4:15 p.m.–4:30 p.m.

Break

VA HSR&D
Quality Enhancement Research Initiative
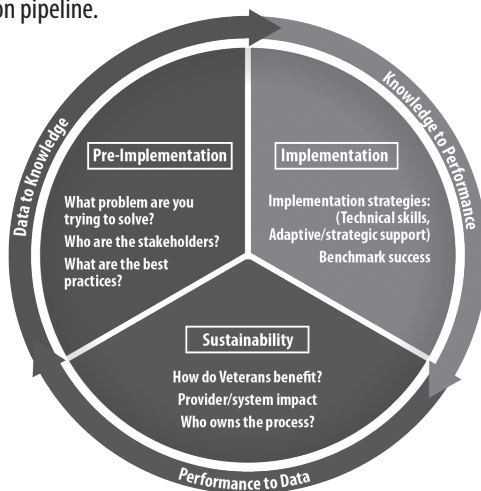
Amy Kilbourne, PhD, MPH, Director

VA's Quality Enhancement Research Initiative (QUERI) leverages innovative scientific methods—paired with a deep understanding of Veterans' preferences and needs—to accelerate evidence into practice and improve the quality and safety of care delivered to Veterans.

Since 1998, QUERI has led a national network of 40+ centers devoted to implementing evidence-based practices (EBPs) in routine care settings and rigorously evaluating the results of those efforts to inform VA policy and practice. QUERI's strategic goals are three-fold:

- Implement and sustain EBPs and promising innovations across various healthcare settings, especially in sites with demonstrated gaps in quality or outcomes.

- Conduct rigorous evaluations in partnership with national and regional health system leaders to optimize programs and policies affecting Veterans.

- Promote the application of implementation and quality improvement science to real-world practice across the translation pipeline.

QUERI Implementation Roadmap

How implementation strategies and multiple stakeholder involvement accelerate quality improvement in a Learning Health System.

Pre-Implementation
What problem are you trying to solve?
Who are the stakeholders?
What are the best practices?

Implementation
Implementation strategies: (Technical skills, Adaptive/strategic support)
Benchmark success

Sustainability
How do Veterans benefit?
Provider/system impact
Who owns the process?

Data to Knowledge · Knowledge to Performance · Performance to Data

For more information, please visit w*ww.queri.research.va.gov* or contact:

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faith.booker@va.gov

U.S. Department of Veterans Affairs
Veterans Health Administration
Quality Enhancement Research Initiative

AcademyHealth members are at the forefront of the evolving health services research and health policy field.

Benefits of Joining AcademyHealth

Discounts on registration fees to attend AcademyHealth's premier conferences;

Leadership opportunities through Interest Groups, councils and committees;

Connect with the leaders in the field for valuable networking and mentoring opportunities;

Access to unique professional development offerings and insight on new career opportunities;

Stay up-to-date on the field – from the newest job openings to the current events in the AcademyHealth daily and weekly updates.

AcademyHealth

JOIN TODAY
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4:30 p.m.–6:00 p.m.

Concurrent Sessions

CCP Strategically Employing Patient Navigation to Reduce Colorectal Cancer Screening Disparities
Rosslyn (Lobby Level)

Chair: Peggy Hannon, University of Washington

Discussant: Amy DeGroff, Centers for Disease Control and Prevention

Panelists:
Wendy Barrington, University of Washington
Patient Navigators and Their Activities in the Colorectal Cancer Control Program (CRCCP): A National Survey

Allison Cole, University of Washington
Implementing and Adapting a Promising Patient Navigation Intervention to Increase Colonoscopy Completion

Amanda Petrik, Kaiser Permanente Center for Health Research
Patient Randomized Trial of a Targeted Navigation Program to Improve Rates of Colonoscopy after Positive FIT in Community Health Centers

Panel Description: This panel applies the RE-AIM framework to patient navigation for colorectal cancer screening. Each of the three presentations addresses patient populations at-risk for screening disparities. Two presentations describe research in the Colorectal Cancer Control Program (CRCCP), a national screening program in 30 states serving low-income and un/underinsured adults. The third presentation describes research in a large health care system and a community health center. We will discuss issues related to reach, effectiveness, adoption, and implementation of patient navigation in these settings. Our research has implications for strategic implementation of patient navigation to reduce colorectal cancer screening disparities.

BH Reaching the Most Vulnerable Children and Families: Implementing Evidence-Based Behavioral Health Interventions in Child Welfare Systems
Salon A (First Level)

Chair: Alicia Bunger, The Ohio State University

Discussant: Gregory Aarons, University of California, San Diego

Panelists:

Geetha Gopalan, City University of New York
Engaging Front-Line Staff to Implement a Child Mental Health Intervention in Child Welfare Services

Lisa Saldana, Oregon Social Learning Center
Navigating Leadership Changes in Real-World Implementation: Examples from Three State Child Welfare Systems

Alicia Bunger, The Ohio State University
Linking Systems to Implement Substance Use Interventions in Child Welfare

Panel Description: Implementing evidence-based mental health and substance use interventions (EBIs) in child welfare systems has potential to improve health and well-being for vulnerable children and families. However, implementation within child welfare systems is especially challenging. We present three studies examining formidable contextual conditions that shape behavioral health EBIs implementation in this setting including (1) engaging front-line professionals in a high stress environment, (2) the effect of political shifts on executive leadership, and (3) dependence on external providers. From this multi-level context emerges new research questions about strategies and conditions for moving behavioral health EBIs into child welfare and other service systems.

HP Policy Level Interventions to Improve Prevention and Treatment across Diverse Care Settings

Salon B (First Level)

Chair: Dara Blachman-Demner, National Institutes of Health

Discussant: Alyce Adams, Kaiser Permanente Northern California

Call for Abstracts Session Panelists:

David Buller, Klein Buendel
An Implementation Intervention for School Sun Safety Policies Increased Parents' Reports of Sun Safety Communication from Schools and Children's Sun Protection

Pamela Hull, Vanderbilt University Medical Center
Implementation of Financial Incentives in the Federal Supplemental Nutrition Assistance Program (SNAP): Comparison across Settings

Kathryn McCollister, University of Miami
Implementation of Evidence Based Practices for Substance Use Disorders in Juvenile Justice Settings: Evaluating Costs across Implementation Phases

Connie Trinacty, Kaiser Permanente Hawaii
Implementation of a Real-World Value-Based Insurance Design Benefit Program to Improve Access to Necessary Chronic Medications for Diabetes Patients

Call for Abstracts Session Description: The studies in this session apply implementation science methods to evaluate policy strategies to improve prevention and treatment across diverse care settings. Topics range from interventions to reduce sun exposure in a school-based setting, reduce food insecurity at the community level, improve treatment of substance use disorders among youth in juvenile justice settings, and improve diabetes-related outcomes among adults. Together, these abstracts represent novel and rigorous methods for evaluating policy strategies in real world settings.

PPH The Role of Stakeholder Engagement in Guiding Community and Population-Level Interventions

Salon C (First Level)

Chair: Jesse Nodora, University of California, San Diego

Call for Abstracts Session Panelists:

Lauren Workman, University of South Carolina
How Well Are We Doing? Stakeholder Perspectives on Implementing Evidence-Based Interventions to Increase Colorectal Cancer Screening.

Lindsey Turner, Boise State University
Why Implementation Fails: Perspectives of Teachers Who Do Not Implement Classroom Based Physical Activity (And Those Who Do)

Jacob Szeszulski, University of Texas Health Science Center at Houston; University of Texas Health Science Center at Austin
Individual-Level Factors Related to the Implementation of School-Based Physical Activity Approaches: Perspectives from Multiple Stakeholders

Karen Goldstein, VA Durham Medical Center
Stakeholder Engagement in Implementing a Population Health Management Intervention to Address Uncontrolled Cardiovascular Disease Risk Factors

Megan Roberts, University of North Carolina at Chapel Hill
Understanding multilevel barriers and facilitators of cascade screening for lynch syndrome

Call for Abstracts Session Description: Active stakeholder engagement is required to truly understand the acceptability, appropriateness, and feasibility of an intervention for a given organization, community, or population. Dissemination and implementation science models and frameworks propose specific measures to capture stakeholder perspectives as well as internal and external contextual influences. This session will describe various approaches for stakeholder engagement at individual and organization levels.

Poster Slam Session
Salons D/E (First Level)

Chair: Lisa Simpson, AcademyHealth

Poster Slam Presenters:

Mark Bounthavong, University of Washington; U.S. Department of Veterans Affairs
Integrating Implementation into a Conceptual Framework for Academic Detailing's Impact on Providers' Prescribing Behavior

Maria Fernandez, University of Texas Health Science Center at Houston
Adaptation of Evidence-Based Interventions and Implementation Strategies: An Intervention Mapping Approach for Optimizing Impact

Lisa Juckett, The Ohio State University
Advancing the Capacity of Practice Implementers: An Educational Training Model from the Occupational Therapy Profession

Mary Kleinman, University of Maryland
Evaluating the Implementation of a Peer Recovery Coach Model to Reach Underserved, Minority Individuals not Engaged in Substance Use Treatment in Baltimore City

Ching-Ching Claire Lin, Health Resources and Services Administration
Telehealth use in Health Centers: Adoption Factors, Barriers, and Opportunities

Sara McMenamin, University of California, San Diego
Improving Implementation of Tobacco Cessation Policies in Medicaid Managed Care Plans in California

Beth Hurley, CAI (Cicatelli Associates)
Implementing a Trauma Informed Care Model at New Jersey HIV Care and Treatment Sites

Christopher Kemp, University of Washington
*Implementation Science for Depression Interventions in Low-and Middle-Income Countries:
A Systematic Review*

Lauren White, University of Michigan
*Results from Piloting an Innovative Model to Engage Multiple Key Stakeholders in Learning about Suicide
Prevention Research for Strategic Action in Under-Resourced Rural Indigenous Communities*

ⒸⒸⓈ Evaluating New and Established Strategies for Implementing Large-Scale, System-Level Interventions
Salons F/G/H (First Level)

Chair: Katharine Rendle, University of Pennsylvania

Discussant: Richard Ricciardi, George Washington University

Call for Abstracts Session Panelists:

Xi Zhu, University of Iowa
Dynamics of Change Agent Engagement during Implementation of Complex Interventions

Heather Campbell, U.S. Department of Veterans Affairs
VA Rapidly Reduces Prescribing After Randomized Clinical Trial Shows Harm

Luming Li, Yale University
*Clinical Redesign Strategies for Multi-Site Implementation and Quality Improvement Initiatives at a Large
Academic Healthcare System*

Andrea Nevedal, VA Palo Alto Healthcare System
*A National Evaluation of the Veterans Health Administration Diffusion of Excellence: Understanding Successes
and Failures in Gold Status Practice Implementation and Sustainability*

Call for Abstracts Session Description: Understanding how best to implement system-level interventions
across diverse settings is key to advancing rapid uptake of evidence-based practices. The four studies in this
session include a longitudinal study using qualitative comparative analysis to assess sustained engagement
of change agents, a retrospective dissemination study examining combination therapy prescribing patterns
before and after rapid communication of clinical trial findings, an evaluation of a large-scale, integrated clinical
design program on multiple quality improvement projects, and a national study evaluating the impact of "Shark
Tank" cohorts on implementation and sustainment of best practices.

GDI Understanding Contextual Factors Affecting the Implementation of Health Interventions in Clinic Settings

Salon J (First Level)

Chair: Mark Stoutenberg, University of Tennessee at Chattanooga

Discussant: Rachel Sturke, Fogarty International Center

Call for Abstracts Session Panelists:

Prerna Martin, University of Washington
What Makes an Enabling Context for Mental Health Delivery? Differential Implementation Practices for Task-Shared Delivery across Education and Health Sectors in Western Kenya

Erica Liebermann, New York University
Ready for Change? A CFIR-Driven Mixed Methods Study of Provider-Level Barriers and Facilitators to Adoption of Evidence-Based Practice for Cervical Cancer Screening in the Dominican Republic

Laurel Legenza, University of Wisconsin—Madison
Strengthening South African District Hospitals with the Implementation of a Clostridioides Difficile Infection Intervention: Understandings from the Consolidated Framework for Implementation Research

Julian Hertz, Duke University
Promoting Uptake of Evidence-Based Care for Acute Coronary Syndrome in Tanzania: A Prospective Mixed-Methods Study

Call for Abstracts Session Description: Despite the strength of evidence for many health interventions, multiple barriers affect their successful adoption and uptake in healthcare settings. The selection and tailoring of implementation strategies according to factors such as existing policies, organizational readiness, and provider knowledge likely plays a crucial role in the integration of these health interventions into routine practice. This panel will discuss multi-level contextual factors influencing the adoption and implementation of evidence-based practices in health systems in low-to-middle income countries. Panelists will present their work on identifying the barriers and facilitators affecting the adoption of evidence-based practices, exploring patient-, provider-, and system-related factors.

MMM Innovative Methods for Uncovering Mechanisms in Implementation Science

Salon K (First Level)

Chair: Shawna Smith, University of Michigan

Panelists:

Edward Miech, VA PRIS-M QUERI
Necessary but Not Sufficient: A Multimethod Study of the Role of Champions in Healthcare-Related Implementation

Laura Damschroder, VA Ann Arbor Healthcare System
Using Computational Comparative Methods to Synthesize Findings across Studies Using the Consolidated Framework for Implementation Research (CFIR)

Rod MacDonald, James Madison University
New Methods Enhancing the use of Qualitative Data in Simulation Modeling: A Case in Uncovering Mechanisms for Primary Care Transformation

Mark Your Calendar for Upcoming AcademyHealth Events

HEALTH DATAPALOOZA
AcademyHealth

Punch Your Ticket:
healthdatapalooza.org

February 10-11, 2020 | Marriott Marquis, Washington, D.C.
Co-located with the National Health Policy Conference.

Since its inception more than a decade ago, the Health Datapalooza has become the gathering place for people and organizations creating knowledge from data and pioneering innovations that drive health policy and practice.

Sitting at the nexus of ideas, evidence, and execution, the Health Datapalooza is where Federal policymakers and regulatory leads take their seats beside the health system's chief officers (information, medical, innovation), Silicon Valley startups, data gladiators, and patients. More than a meeting, the Health Datapalooza is a diverse community of big thinkers and roll-up-our-sleeves-and-get-it-done problem solvers who share a mission to liberate and use data to improve health and health care.

AcademyHealth NATIONAL HEALTH POLICY CONFERENCE

Register Today:
academyhealth.org/nhpc

February 10-11, 2020 | Marriott Marquis, Washington, D.C.
Co-located with the Health Datapalooza.

As the leading health policy event, the National Health Policy Conference (NHPC) brings together health care decision makers, policy experts, advocates, consumers, patients, researchers, and leaders from the public and private sectors to share the latest evidence and discuss the most critical issues and immediate policy priorities in United States health care.

There's always a bit more energy and buzz at the NHPC during a presidential election year. The 2020 event will be no exception!

AcademyHealth ANNUAL RESEARCH MEETING
TODAY'S RESEARCH DRIVING TOMORROW'S OUTCOMES

Submission Deadline:
January 9, 2020 at 5:00 p.m. ET

Learn More:
academyhealth.org/arm

June 13-16, 2020 | Boston, MA

The AcademyHealth Annual Research Meeting (ARM) is the gathering place for more than 3,000 individuals leading the charge to transform delivery systems and health care in a rapidly changing landscape. As the premier forum for health services research (HSR), the ARM convenes the foremost experts at the intersection of health, health care, and policy to share important findings and showcase the latest research on how the health system works, what it costs, and how to improve it.

NOW ACCEPTING ABSTRACTS
Showcase your research to an audience from around the world working to improve health and health care.

Rinad Beidas, University of Pennsylvania
Implementation Mapping: A Promising and Innovative Method to Design and Select Implementation Strategies for Firearm Safety Promotion in Pediatric Primary Care

Panel Description: Implementation science requires understanding mechanisms that operate across multiple levels of the healthcare system. Concurrently, theoretical advancement requires development and application of innovative methods to inform and test mental models of implementation, including how best to codify facilitators and whether presumed facilitators function in practice as anticipated. This panel's four innovative methodology papers advance our understanding of how to study mechanisms of successful implementation across the lifecycle of implementation efforts, including novel methods for building new implementation strategies, using Configural Analyses to map strategies to implementation success, and finally modeling the full set of system dynamics governing implementation efforts.

6:15 p.m.–7:45 p.m.

Poster Session #1 & Reception
Arlington Ballroom (First Level)

Features:

Best Poster Nominations (A1-A9)

Building the Future of D&I Science: Training, Infrastructure, and Emerging Research Areas (A10-A52)

Clinical Care Settings: Patient-Level Interventions (A53-A106)

Clinical Care Settings: System-Level Interventions (A107-A199)

Health Policy Dissemination and Implementation Science (A200-A217)

For an index of poster presenters, visit bit.ly/di19posters.

AGENDA

THURSDAY, DECEMBER 5

6:15 a.m.–7:00 a.m.

Sunrise Yoga
Lee (Lobby Level)

Start your day with a complimentary yoga session. Please bring a yoga mat or towel and water bottle. All levels are encouraged to attend. The 45 minute session will include 6 movements of the spine, breathing exercises, and opportunities for grounding and energizing.

7:30 a.m.–5:00 p.m.

Registration
Sky View (First Level)

8:00 a.m.–9:30 a.m.

Poster Session #2 & Continental Breakfast
Arlington Ballroom (First Level)

Features:

Best Poster Nominations (B1-B9)

Behavioral Health (B10-46)

Global Dissemination and Implementation Science (B47-B81)

Models, Measures, and Methods (B82-B132)

Prevention and Public Health (B133-B181)

Promoting Health Equity and Eliminating Disparities (B182-B224)

For an index of poster presenters, visit bit.ly/di19posters.

9:30 a.m.–9:45 a.m.

Break

9:45 a.m.–11:15 a.m.

Concurrent Sessions

ⒸⒸⓅ Implementation Strategies to Optimize Medication Use
Rosslyn (Lobby Level)

Chair: Jill Kolesar, University of Kentucky

Call for Abstracts Session Panelists:

Deonni Stolldorf, Vanderbilt University
Best Practices for Implementing Complex Healthcare Interventions: A Cluster-Analysis of Implementation Strategies Used During Medication Reconciliation Implementation in Acute Care Hospitals

Stephanie Lumpkin, University of North Carolina at Chapel Hill
Reducing Variability in Discharge Communication Reduces Administrative Burden

Toral Parikh, VA Puget Sound Healthcare System; University of Washington
How do Patients Respond to De-Implementing a Medication that is Potentially Harmful?

Carrie Blanchard, University of North Carolina at Chapel Hill
Development of a Self-Assessment Tool to Measure Fidelity to a Pharmacy Service to Optimize Medication Use

Call for Abstracts Session Description: This session focuses on implementation strategies in health systems to improve processes around medication prescribing and discharge.

⬛MMM Using Computational Modeling to Plan, Conduct, and Evaluate D&I
Salon A (First Level)

Chair: Bridget Gaglio, Patient-Centered Outcomes Research Institute

Discussant: Bo Kim, VA Boston Healthcare System

Call for Abstracts Session Panelists:

Ann Chou, University of Oklahoma Health Science Center
Comparing Modeling Approaches for Stepped-Wedge Cluster Randomized Trials as Applied to D&I Research in Community and Practice Settings

Rebekka Lee, Harvard
Advancing a Methodology for Engaging State Health Agency Stakeholders in Cost Analysis of Implementation Strategies: An Example of Early Childhood Obesity Prevention Translation across Four States

Radley Sheldrick, Boston University
Rapid Cycle Systems Modeling to Optimize Implementation: A Case Example of Family Navigation for Early Identification of Autism

Jessica Fry, University of Maryland, Baltimore
The Use of Network Analysis to Assess Community Partner Collaboration in an Early Childhood System of Care Grant

Call for Abstracts Session Description: Dissemination and implementation research continues to explore and apply a variety of methods to address implementation questions. Methods that employ computational modeling are increasingly used for planning, conducting, and evaluating D&I. These presentations will discuss applications of modeling that support stakeholder involvement, guide resource allocation, and inform context-driven adaptations of interventions and implementation strategies. The methods described could be a valuable resource for researchers to incorporate similar modeling-based analyses across implementation research studies and for agencies to carefully consider how best to leverage existing resources for implementation.

BH **Implementation Science Strategies to Address Co-Morbid Physical and Behavioral Health Issues**
Salon B (First Level)

Chair: Kate Stoney, National Institutes of Health

Discussant: Bruce Rollman, University of Pittsburgh

Call for Abstracts Session Panelists:

Stephen Bartels, Massachusetts General Hospital
Hybrid Type-3 RCT of Virtual Learning Collaboratives vs. Technical Assistance in Implementing Health Promotion Cardiovascular Risk Reduction for Individuals with Mental Illness and Obesity in Mental Health Organizations

Nathalie Moise, Columbia University Medical Center
Depression Screening among Coronary Heart Disease Patients: Measuring Fidelity When Guidelines are Simultaneously Over- and Under-Implemented

Allison Lewinski, Veterans Affairs Medical Center, Durham
Patient Perceptions of Data Visualizations and Utilizing Multiple Mobile Health Technologies to Support Diabetes Self-Management

Christopher Miller, VA Boston Healthcare System
Cost-Benefit Analysis of Team-Based Collaborative Care Implementation in Outpatient General Mental Health

Call for Abstracts Session Description: Integrated care for managing co-morbid physical and mental health conditions is increasingly being realized, but evidence for effectiveness varies across communities and populations, health conditions, and healthcare settings. This session will present data representing a variety of patient populations, healthcare settings, and conditions, and underscore some key issues to consider regarding study designs in this area of implementation science. Discussion will focus on strategies to address these issues, and additional design-relevant approaches that may enhance effectiveness among these complex patients.

PPH **Community-Based Implementation Research: Common and Unique Elements across Four Health-Promotion Interventions**
Salon C (First Level)

Chair: Rebecca Selove, Tennessee State University

Call for Abstracts Session Panelists:

Lisa Juckett, The Ohio State University
Examining the Influence of Client Characteristics and Contextual Factors on Fall Prevention Guideline Implementation in Home- and Community-Based Service Programs

Kristine Zimmermann, University of Illinois at Chicago
The Role of Rural Church Context in Participation and Attendance in a Cardiovascular Risk-Reduction Intervention

Renee Parks, Washington University in St. Louis
Community Health Networks: Capacity for Evidence-Based Program Implementation in the Context of Differing Network Structures

Leah Bartley, National Implementation Research Network
Identifying and Prioritizing Infrastructure Supports for a Community-Based Child Maltreatment Prevention Intervention

Call for Abstracts Session Description: The presenters will all describe approaches to community assessment to improve the impact of specific health-related interventions. These include: interviewing key informants from multiple sectors to support child maltreatment prevention; analyzing social networks across 12 local health departments to improve capacity to promote diabetes control; examining health care records for home and community-based clients to improve adherence to fall risk prevention guidelines; and examining attendance and outcomes for rural church program participants to reduce cardiovascular disease risk.

BF Building D&I Capacity in Academic Medical Centers: Experiences of Emerging and Established Centers for D&I Research and Education
Salons D/E (First Level)

Chair: Mari-Lynn Drainoni, Boston University

Panelists:

Erika Crable, Boston University
Promoting D&I Capacity with a Safety Net Focus through the Development of a Center for Implementation and Improvement Sciences

A. Rani Elwy, Brown University
An Emerging Implementation Science Core to Build Capacity among Psychiatrists and Psychologists at Brown University

Jodi Holtrop, University of Colorado
Dissemination and Implementation Science Program at the University of Colorado

Jennifer Leeman, University of North Carolina at Chapel Hill
The University of North Carolina's Approach to Advancing Implementation Science: The Dissemination and Implementation Methods Unit

Panel Description: There is growing demand to create professional training and educational resources that support researchers' knowledge of and capacity to conduct successful dissemination and implementation (D&I) science. Academic medical centers that house researchers and practitioners from schools of medicine, public health and social work provide a multidisciplinary environment to foster new centers for D&I research. However, these same environments may experience unique challenges including skepticism from other disciplines and resource constraints. This panel will feature 4 emerging and established centers promoting D&I capacity across university communities, describe differential approaches to operational structures, missions, and measuring their impact on D&I workforce capacity.

AGENDA

CCS **Advancing Intervention Implementation and Effectiveness through Adaptation**
Salons F/G/H (First Level)

Chair: Sarah Birken, University of North Carolina at Chapel Hill

Discussant: Alexis Kirk, University of North Carolina at Chapel Hill

Call for Abstracts Session Panelists:

Seiko Izumi, Oregon Health & Science University
Adaptation and Fidelity of Serious Illness Care Program across Primary Care Settings in the U.S. and Canada

Vera Yakovchenko, VA, BridgeQUERI& CHOIR
Longitudinal Assessment of Expert Recommendations for Implementing Change (ERIC) Strategies in the Uptake of Evidence-Based Practices for Hepatitis C Treatment in the Veterans Administration: Year Four

Yao Liu, University of Wisconsin—Madison
Increasing Diabetic Eye Screening Rates by Adapting the Niatx Model for Stakeholder-Engaged Teleophthalmology Implementation in Primary Care

Cati Brown-Johnson, Stanford University
Implementation Outcomes of Humanwide: A Pilot Project of Integrated Precision Health in Team-Based Primary Care

Call for Abstracts Session Description: This session will feature research on adapting evidence-based practices and implementation strategies and the influence of adaptations on implementation and effectiveness. We will explore patterns in outcomes across key adaptation features, including the reason and goal for adaptation, whether adaptation was proactive or reactive, and whether adaptations preserved core functions. The session will promote knowledge of adaptation and its outcomes, putting this knowledge into practice, and laying the groundwork for future research on adaptation.

PHE **Implementation of Physical Activity Programs to Promote Health Equity**
Salon J (First Level)

Chair: Belinda Sims, National Institute on Drug Abuse

Call for Abstracts Session Panelists:

Rebecca Hasson, University of Michigan
Utilizing Implementation Strategies to Increase Equity in Classroom-Based Physical Activity Programming among Low-Resource Schools

Sandra Echeverria, University of North Carolina at Greensboro
Identifying Social Barriers in the Pre-Implementation of Physical Activity Interventions Targeting Latinos Diagnosed with Diabetes: Physical Activity System of Support (PASOS) Pilot Study

Manorama Khare, University of Illinois College of Medicine, Rockford
Adaptations to Increase Recruitment and Retention in a Multi-Component Heart Disease Prevention Intervention for Rural Adults

Scherezade Mama, Penn State University
Understanding Determinants of Physical Activity Adoption and Maintenance in Rural Cancer Survivors: A Qualitative Study to Guide Future Implementation

Barbara Baquero, University of Washington
Adapting, Implementing, and Evaluating an Evidence-Based Community Intervention to Promote Physical Activity in a Midsize Rural Town

Call for Abstracts Session Description: Physical activity interventions can promote positive health outcomes but there are challenges in access, reach and uptake of programs, especially among health disparity populations. In this session, strategies for implementation of physical activity interventions targeting low resource schools, rural populations, and ethnic minority populations will be presented. Also, presentations will address issues such as social determinants of health, barriers to participation, and implementation supports.

ⓗⓟ Mechanisms and Strategies for Improving Use of Research Evidence in Health Policymaking
Salon K (First Level)

Chair: Itzhak Yanovitzky, Rutgers University

Discussant: Kimberly DuMont, William T. Grant Foundation

Panelists:

Elizabeth Day, Cornell University
Family Impact Seminars: A Model for Communicating Research to State Policymakers

Lawrie Green, Penn State University
Federal Use of Research Evidence: The Research-to-Policy Collaboration Model

Itzhak Yanovitzky, Rutgers University
Building the Capacity of Patient Advocacy Organizations to Broker Research Evidence in Health Policymaking

Panel Description: Since 2009, the William T. Grant Foundation has funded rigorous research that investigates strategies, mechanisms, and conditions for improving research use in state and federal policy decisionmaking. This session brings together a group of researchers to report, compare, and reflect on findings of projects funded by the Foundation that examine the efficacy of different mechanisms and strategies for engaging state and federal legislators with relevant research evidence. Together, these projects highlight the importance of implementing relationship-based and audience-centered strategies for promoting evidence-informed health policymaking, while advancing measurement of research evidence use in this context.

11:15 a.m.–11:30 a.m.

Break

11:30 a.m.–12:45 p.m.

Plenary Session: D&I Study Designs for Rapid, Relevant, and Rigorous Research
Arlington Ballroom (First Level)

Chair: Enola Proctor, Washington University in St. Louis

Speakers: Gregory Aarons, University of California, San Diego; **Daniel Almirall**, University of Michigan; **Alison Hamilton**, U.S. Department of Veterans Affairs; **Merrick Zwarenstein**, Western University

Description: This session will focus on considering the current range of research designs in D&I research, priorities and challenges for the field moving forward, and activities to fill remaining gaps.

12:45 p.m.–2:45 p.m.

Lunch on Own

1:30 p.m.–2:30 p.m.

Discussion Forums

A Conversation: Approaches to Move Implementation Science (IS) Forward in Low- and Middle-Income Countries (LMICs)
Rosslyn (Lobby Level)

Discussants: James Alaro, National Cancer Institute; **Linda Kupfer**, National Institutes of Health; **Rachel Sturke**, Fogarty International Center

Discussion Forum Description: Interest in implementation science (IS) is growing worldwide including in LMICs. To address this, IS platforms, workshops, and trainings have been developed for LMIC researchers in both HIC and LMICS. We will explore additional approaches to continue to support IS in LMICs. We will consider innovations in capacity building and mentorship; opportunities for IS conferences in LMICs; strategies to increase LMIC participation in IS conferences in HICs; innovative workshops and platforms in which LMIC IS research can be shared. Participants will be encouraged to discuss possible approaches and map out "next steps" to continue the conversation and move towards action.

Implementation Research in Practice: The Who and How
Salon A (First Level)

Discussants: Allison Metz, National Implementation Research Network; **Bianca Albers**, European Implementation Collaborative; **Katie Burke**, Centre for Effective Services

Discussion Forum Description: The integration of implementation research and practice often relies on implementation specialists who use and contextualize evidence derived from implementation research. Presenters will share results from a multi-method study of implementation practice competencies, including a survey of international intermediary organizations and a systematic scoping review. These findings will be used to: describe what skills and competencies are necessary for implementation specialists to use both intervention and implementation evidence in practice; link implementation specialist competencies to implementation strategies; and identify competencies needed by implementation specialists to select and use strategies across a range of contexts to improve implementation quality and outcomes.

Exploring Context and Decisional Dilemmas: Implementing Evidence-Based Change
Salon B (First Level)

Discussants: Brian Leas and **Emilia Flores**, both from University of Pennsylvania Health System; **Amanda Borsky** and **Christine Chang**, both from Agency for Healthcare Research & Quality

Discussion Forum Description: To enable successful dissemination and implementation, available evidence must be matched to the problem and context faced by a healthcare decision maker. To do this, it's critical for health system decision-makers, implementers of evidence, and systematic reviewers to collaborate. In this forum, we will describe new methods used by AHRQ and others for making systematic reviews accessible and actionable for health system decision-makers; describe how health systems have used evidence from systematic reviews to plan dissemination and implementation activities; and discuss lessons learned and solicit suggestions on how to further support dissemination and implementation of evidence in health systems.

Overcoming Challenges in Implementing Evidence to Improve the Care of People with Multiple Chronic Conditions
Salon C (First Level)

Discussants: Arlene Bierman, Agency for Healthcare Research and Quality; **Alexander Krist**, Virginia Commonwealth University; **Aaron Leppin**, Mayo Clinic; **Dan Matlock**, University of Colorado

Discussion Forum Description: We will explore challenges in implementing and assessing implementation of care for people with multiple chronic conditions, who often have competing risks, shorter life expectancies, and evolving goals and preferences. The discussion will examine differences from traditional implementation science approaches, particularly in research on: 1) primary care practice redesigns that assess behavior, mental health, and social risks as a basis for shared care planning; 2) shared decision making with patients having multiple morbidities. Emerging approaches and tools will be presented, and participants will discuss strategies to address the challenges of research in these areas.

Editors Corner: An Open Discussion about Implementation Science and Implementation Science Communications
Salons F/G/H (First Level)

Discussants: Paul Wilson, The University of Manchester; **Anne Sales**, University of Michigan

Discussion Forum Description: In this session Anne Sales and Paul Wilson, Co-Editors in Chief for Implementation Science and its new companion journal to Implementation Science Communications, will talk about how their journals work and what they are looking for in the papers that are submitted to them. They will discuss current journal scope and publishing policies, present trends in submissions and reflect on common reasons for rejection. There will be plenty of opportunity for questions and interaction, although discussion of specific manuscripts is not encouraged.

AGENDA

Implementing Evidence: PCORI's Dissemination and Implementation Program
Salon J (First Level)

Discussants: Ethan Chiang and **Joanna Siegel**, both from Patient-Centered Outcomes Research Institute; **Jennifer Leeman**, University of North Carolina at Chapel Hill; **Meg Simione**, Massachusetts General Hospital/Harvard Medical School

Discussion Forum Description: PCORI's Dissemination and Implementation (D&I) Program seeks to heighten awareness of PCORI-funded research and advance efforts to put these findings into practice to improve healthcare delivery and health outcomes. In this session, we will describe the types of D&I projects PCORI is funding through ongoing funding initiatives, highlighting principles from Implementation Science. A panel of current awardees will present their PCORI-funded D&I projects, including how they are addressing barriers to evidence uptake and integration into practice, as well as evaluating the successful execution of their implementation strategy and the impact of the implementation activities on healthcare and health outcomes.

2:45 p.m.–4:15 p.m.

Concurrent Sessions

CCS Optimizing the Use of Data: Understanding How and Why Data-Driven Feedback Works (or Doesn't)
Rosslyn (Lobby Level)

Chair: Laura Desveaux, Women's College Hospital

Panelists:

Nicola McCleary, Ottawa Hospital Research Institute; University of Ottawa
Audit and Feedback to Address Prescribing of High-Risk Medications in Long-Term Care: Theory-Based Process Evaluation Alongside a Pragmatic, Factorial, Cluster-Randomized Trial

Noah Ivers, Women's College Hospital
The Perceived Usability of an Audit and Feedback Report Aiming to Improve Quality in Primary Care

Laura Desveaux, Women's College Hospital
Understanding How Physicians Cognitively Engage with Audit and Feedback

Panel Description: The potential for audit and feedback (A&F) to improve quality of care is well-established, leading to its broad application across health systems. Unfortunately, impact remains variable and few studies have generated empirical insights to inform improvements to design and delivery. This session will provide an overview of empirical evidence to help advance understanding of how and why A&F achieves (or fails to achieve) its effect (i.e., its mechanism of action) and the factors that influence success (i.e., effect modifiers). These applied insights can directly inform the design, delivery, and evaluation of data-driven feedback in real-world settings.

CCS Uncovering the Secret Sauce of Implementation with Innovative Analytic Methods
Salon A (First Level)

Chair: Aaron Leppin, Mayo Clinic

Discussant: Sarah Birken, University of North Carolina at Chapel Hill

Call for Abstracts Session Panelists:

Vera Yakovchenko, VA, BridgeQUERI& CHOIR
Using Correlational and Configurational Comparative Methods to Identify Implementation Strategies Associated With Successful Uptake of Evidence-Based Practices for Advanced Liver Disease in the Veterans Health Administration

Amanda Petrik, Kaiser Permanente
How Variation in Health System Implementation Affects the Success of Colorectal Cancer Screening Outreach

DeAnne Turner, University of South Florida; Yale University
Prep Implementation during Community-Based HIV Testing in Florida: Application of the Consolidated Framework for Implementation Research

Kaitlin Piper, Emory University
Exploring the Heterogeneity of Factors that May Influence Implementation of Prep in Family Planning Clinics: A Latent Profile Analysis

Call for Abstracts Session Description: Calling all methodologists!! Advancing the science of implementation requires greater understanding of the strategies and factors that lead to success. Unfortunately, the complexity of real world settings makes it challenging to isolate effects with typical analytic methods. In this session, 4 investigators will demonstrate how innovative methods such as correlational and configurational analyses (first half) and latent class and profile analyses (second half) can be used to draw insights in the setting of complexity and advance the field of D&I. Come check it out!

CCP **Electronic Health Record and Text Solutions to Engage Patients and Improve Care**
Salon B (First Level)

Chair: Alexander Krist, Virginia Commonwealth University

Call for Abstracts Session Panelists:

Elizabeth Ciemins, AMGA
Preventing Diabetes with Benefit-Based Tailored Treatment: Implementation of an Individualized Risk Calculator in Electronic Health Records at Two U.S. Health Systems

Erin Staab, University of Chicago
Implementation of Diabetes Group Visits and Text Messaging in Midwestern Community Health Centers: Diabetes Messages Study (Medical Care, Education, Social Support, and Goal-Setting to Empower Self-Management)

Coral Bays-Muchmore, Boston Medical Center
Testing Implementation Strategies for the Autism Support Checklist: A Pilot Study

Virginia Fonner, Medical University of South Carolina
Exploring Barriers and Facilitators to Implementing Text Messaging to Facilitate Communication between Healthcare Providers and Patients Living with HIV in South Carolina

Call for Abstracts Session Description: Simple technology advances such as text messaging, checklists embedded into electronic health records, and risk assessment tools can ensure the provision of evidence-based care. However, implementing these tools can be difficult and understanding clinician and patient barriers to use, workflow, and needs is critical to successful implementation. This panel will review four studies that evaluated the implementation of a diabetes predictive risk calculator, diabetes self-management texting paired with group visits, autism support checklist, and text messaging to facilitate communication for HIV care. Discussions will focus on challenges and needs with disseminating and implementing these technological solutions to promote use of and engagement in care.

BF Method within the Madness: Emerging Insights to Address Organizational Dysfunction and Improve Implementation
Salon C (First Level)

Chair: Mary Dolansky, Case Western Reserve University

Discussant: Alex Ramsey, Washington University

Call for Abstracts Session Panelists:

Oyinda Osibanjo, Oregon State University
Organizational Communication: Public Health Program Adoption, Implementation, and Fidelity

Miriam Bender, University of California, Irvine
Clinical Routines as an Under-Explored yet Critical Component of Context in Implementation Science

Jack Warwick, University of Pittsburgh
Using a Systematic Continuous Quality Improvement Process to Improve the Provision of Medication-Assisted Treatment for Opioid Use Disorder within Rural Primary Care Practices

Margaret Padek, Washington University in St. Louis
Predictors of Mis-Implementation of Chronic Disease Control Programs in State Health Departments

Call for Abstracts Session Description: The quality of implementation is influenced by a range of organizational context factors, including dysfunctions in communication, workflow, performance measurement, and decision-making. This session features high impact research bringing emerging insights to prevent and address each of these potential dysfunctions. Presentations will open with research on the role of participatory communication on implementing behavioral prevention programs. Then, presenters will provide evidence on the importance of well-functioning clinical routines to sustain hospital-based implementation efforts, followed by a novel performance evaluation process to improve implementation of medication-assisted treatment, and finally, agency factors linked to mis-implementation of public health programs and policies.

PPH Advancing Implementation of eHealth Interventions for HIV Prevention through the Scale Up of Keep it Up!
Salons D/E (First Level)

Chair: Nanette Benbow, Northwestern University

Panelists:

Brian Mustanski, Northwestern University
Protocol for a County-Randomized Comparative Implementation Trial of Two Delivery Strategies for an Evidence-Based eHealth HIV Prevention Intervention

Dennis Li, Northwestern University
Keeping It Up: Updating and Upgrading an Evidence-Based eHealth HIV Intervention across Contexts and Over Time

Nanette Benbow, Northwestern University
Making It Real: Approaches to Ensure Validity in Community-Based Settings within a Pragmatic Implementation Trial of an eHealth Intervention for HIV Prevention for Young Men Who Have Sex with Men (YMSM)

Kathryn Macapagal, Northwestern University
Considerations for Implementing a Direct-to-Consumer Model of Keep It Up! An eHealth HIV Prevention Intervention for Young Men Who Have Sex with Men

Panel Description: Despite substantial NIH investment in developing eHealth HIV prevention interventions, little implementation research has examined strategies to effectively scale up these programs. The Keep It Up! 3.0 study advances our knowledge by comparing two approaches for delivering an online CDC-best-evidence HIV intervention in 44 counties. This symposium describes our county-randomized hybrid type III effectiveness–implementation trial, focusing on the pragmatic design of our sampling methodology, outcome measures, the intervention application, and recruitment/retention protocols. By emulating real-world contexts, we can understand how to not only have the greatest public health impact with but also speed up implementation of eHealth HIV interventions.

`MMM` Models for Dissemination and Implementation Science: Use Across the Research Continuum
Salons F/G/H (First Level)

Chair: Alison Hamilton, Department of Veterans Affairs

Call for Abstracts Session Panelists:

Borsika Rabin, University of Colorado; University of California, San Diego
A User-Friendly Resource to Help Select, Adapt, and Operationalize D&I Models for Proposal Writing and Research

Danielle Kasperavicius, St. Michael's Hospital
Enhancing Implementation Models, Theories, and Frameworks Using Intersectionality

Aaron Lyon, University of Washington
Advancing the Science of Intervention Adaptation: Integrating Human-Centered Design and Implementation Science in the UW Alacrity Center

Russell Glasgow, University of Colorado
Making Implementation Science More Rapid: Iterative Use of the RE-AIM Framework

Sara Jacobs, RTI International
Integrating the Consolidated Framework for Implementation Research into a Culturally Responsive Evaluation Approach: Examples from Mixed-Methods Evaluations of Diabetes Prevention and Management Programs Reaching Underserved Populations

Call for Abstracts Session Description: Models, theories, and frameworks form the foundation of dissemination and implementation (D&I) science. Models and frameworks can help to organize and understand phenomenon at the beginning of a study, make mid-course adaptations during implementation, and understand why/how D&I strategies succeed or fail. This session will highlight examples of D&I models and frameworks use across the research continuum from selection, to adaptation, integration, and application.

AGENDA

Health Systems Strengthening and Economic Approaches
Salon J (First Level)

Chair: Kenneth Sherr, University of Washington

Call for Abstracts Session Panelists:

Nicole Stadnick, University of California, San Diego
Advancing a Global Agenda for Implementation of Integrated Care

Sonja Hoover, RTI International
Using Behavioral Economics Approaches to Design Interventions to Decrease Cervical Cancer Mortality in Zambia: Results from a Discrete Choice Experiment on Preferences for Screening Services

Saria Hassan, Yale University
Costs of a Diabetes Prevention Intervention for Caribbean and Caribbean-Descent Individuals: Preliminary Results

Deo Mujwara, Virginia Commonwealth University
Offering the Choice of Self-Administered Oral HIV Testing (Chivst) among Long-Distance Truck Drivers in Kenya: A Trial-Based Cost-Effectiveness Analysis

Call for Abstracts Session Description: Understanding both health system- level and cost implications of interventions is critical for identifying efficient and cost-effective approaches to health care. This session will explore these implications in the context of global D&I. Presentations feature a broad range of perspectives including implementation of integrated care approaches, costing implications of a diabetes prevention intervention, behavioral economics, and a trial-based cost-effectiveness analysis of self-administered oral HIV testing.

PHE **Addressing Health Disparities through Engaged Partnerships and the Application of Dissemination & Implementation Frameworks: Implementation Research in the CDC Prevention Research Center (PRC) Network**
Salon K (First Level)

Chair: Brigette Ulin, Centers for Disease Control and Prevention

Panelists:

Janet Myers, University of California, San Francisco
Assessing Implementation of "Style" for African American Men with HIV: Using the Consolidated Framework for Implementation Research (CFIR) in a Community Participatory Study

Jennifer Leeman, University of North Carolina at Chapel Hill
Developing a Multi-Component Strategy to Scale-Up a Community Health Worker Intervention: Findings from a Hybrid Effectiveness-Implementation Study

Nadia Islam, New York University
Implementing a Multi-Level Electronic Health Record and Community Health Worker Intervention in Immigrant-Serving Primary Care Practices to Improve Hypertension Control among South Asian Patients

Sara Wilcox, University of South Carolina
Predictors of 12-Month Implementation of the Faith, Activity, and Nutrition (FAN) Intervention in a Statewide Dissemination & Implementation Study: Application of the Consolidated Framework for Implementation Research (CFIR)

Panel Description: This panel showcases four unique implementation studies from the CDC-funded Prevention Research Center Network focused on promoting health equity and eliminating disparities. The populations (behavior, settings) include African American men (HIV prevention, community-based organizations), rural African Americans (multi-component, public health and community clinics), South Asians (hypertension control, primary care practices), and African American and whites across South Carolina (physical activity and healthy eating, churches). Each presentation reports study outcomes and describes how a D&I framework guided the study and how clinical/community partners were engaged to ensure the evidence-based interventions were adapted to the local setting while maintaining implementation fidelity.

4:15 p.m.–4:30 p.m.

Break

4:30 p.m.–6:00 p.m.

CCP Implementation of Patient-Level Approaches to Improve Care Delivery, Quality, and Engagement

Rosslyn (Lobby Level)

Chair: Susan Shero, National Institutes of Health

Call for Abstracts Session Panelists:

Ann Chou, University of Oklahoma Health Science Center
Healthy Hearts for Oklahoma: Impact of Implementing Quality Improvement Intervention Bundle on Cardiovascular Care

Celia Kamath, Mayo Clinic
Effects of a Decision Aid on Increasing Clinicians' Discussions of Cost among Patients with Atrial Fibrillation

Katherine Abbott, Miami University
"I Learned a Lot, it was Very Eye Opening:" Nursing Home Provider Perspectives on Implementing a Person-Centered Communication Intervention

Lisa Masinter, AllianceChicago
Implementing Integrated Reproductive Health Care into a School Based Health Center Setting

Call for Abstracts Session Description: This session focuses on a variety of interventions to improve care delivery, quality, and engagement. Presentations in this session will discuss implementation of a quality improvement bundle in primary care; a decision aid for patients with atrial fibrillation; a person-centered care communication tool in a nursing home; and use of an integrated reproductive health model in a school-based health center.

BH The Supporting Primary Care Providers in Opioid Risk Reduction and Treatment (SUPPORT) Center to Increase Identification and Treatment of Opioid Use Disorder in VA Primary Care: An Operationally- Partnered Internal Facilitation Implementation Effort
Salon A (First Level)

Chair: Emily Williams, University of Washington

Discussant: Alex Harris, Stanford University

Panelists:

Carol Achtmeyer, VA Puget Sound Healthcare System
Development of and Model for the Support Center: Operationally-Partnered Internal Facilitation to Increase Opioid Use Disorder Treatment in VA Primary Care

Emily Williams, University of Washington
Rapid Mixed-Methods Formative Evaluation to Identify and Act On Implementation Barriers and Facilitators and Optimize Integration of Opioid Use Disorder Treatment In Primary Care

Eric Hawkins, VA Center of Excellence in Substance Addiction Treatment and Education; University of Washington
Early Implementation Outcomes from the Supporting Primary Care Providers in Opioid Risk Reduction and Treatment (SUPPORT) Center

Panel Description: Opioid use disorders (OUD) are increasingly common and dangerous. Though medication treatment of OUD is effective, recommended, and can be offered in primary care settings where patients with OUD are frequently seen, it is substantially underused with multiple barriers to its provision. The SUpporting Primary care Providers in Opioid Risk reduction and Treatment (SUPPORT) Center is a partnership between researchers and clinical leaders to assist VA primary care clinics in identifying and treating OUD. We describe operationally-partnered implementation using internal facilitation, use of rapid mixed-methods formative evaluation to refine implementation strategies, and initial results.

CCS Implementation in Community Healthcare Settings and Vulnerable Populations
Salon B (First Level)

Chair: Yao Liu, University of Wisconsin—Madison

Discussant: Sallie Weaver, Johns Hopkins University

Call for Abstracts Session Panelists:

Sarah Turecamo, New York University
Factors that Contribute to Successful Adoption of Primary Palliative Care for Emergency Medicine (PRIM-ER): A Mixed-Methods Study Using RE-AIM

Rachel Gold, Kaiser Permanente Center for Health Research
Comparing Strategies for Helping CHCS Implement Guideline-Concordant Care: Trial Results

Katherine Sterba, Medical University of South Carolina
Determinants of Evidence-Based Practice Uptake in Community ICUS: A Mixed Methods Study

Hannah Palm, University of New Mexico Health System
Implementing Immediate Postpartum LARC in Rural New Mexico

Call for Abstracts Session Description: Studies examining implementation in community settings and vulnerable populations are critical for pragmatically advancing both implementation science and practice. The four studies in this session include: a mixed method study of the Primary Palliative Care for Emergency Medicine (PRIM-ER) intervention in two unique Emergency Departments, a mixed method study examining determinants of evidence-based sepsis management practices in rural community ICUs; a mixed method evaluation of a postpartum long-acting reversible contraception program in seven rural hospitals; and a pragmatic trial of three increasingly intensive implementation strategies to facilitate community health center EHR adoption.

`GDI` Scalability and Sustainability—Keys to Successful Dissemination and Implementation

Salon C (First Level)

Chair: Rachel Sturke, Fogarty International Center

Call for Abstracts Session Panelists:

Benjamin Aceves, University of Arizona
Implementing a Diabetes Self-Management Intervention in a Mexican Regional Health System: Testing a Scalable Unit

Donna Shelley, New York University
Long-Term Sustainability of Improvements in Tobacco Use Treatment in Health Centers in Vietnam

Arianna Means, University of Washington
Organizational Readiness to Implement Soil-Transmitted Helminth Elimination Programs: Results from a Three-Country Hybrid Study

Call for Abstracts Session Description: In the field of dissemination and implementation it is imperative that implementation of interventions not only delivers successful results, but that these results are also scalable and sustainable. A model integrating the three elements of results, scalability, and sustainability will prioritize the following: context-derived solutions, integration within host country systems and culture, and holistic implementation within existing resources, supervisory structures, and policies. This session will engage participants through three different presentations on successful scale-up and sustainability as well as discussion on the topic.

`PPH` Promoting Prevention Though Schools and Community Programs

Salons D/E (First Level)

Chair: Elizabeth Neilson, National Institutes of Health

Call for Abstracts Session Panelists:

Margo Candelaria, University of Maryland, Baltimore
Using Implementation Science Principles to Demonstrate Improved Access to Services for Pregnant and Parenting Youth

Allison Dymnicki, American Institutes for Research
How Readiness Relates to Successful Adoption and Implementation of Prevention Orientated Frameworks

Lindsey Turner, Boise State University
Resources and School Culture are Associated with Readiness for Implementation of Universal Prevention Programs in Rural Schools

Lydia Kwak, Karolinska Institute
Integrating Evidence-Based Approaches for Social and Organizational Risk Management in a School Setting: A Randomized Trial on Implementation Effectiveness

Call for Abstracts Session Description: This session explores how schools and community programs can better implement evidence-based prevention practices for children, adolescents, and their teachers. The first two presentations focus on school readiness to implement strategies aimed at preventing youth mental and behavioral problems and promoting positive social, emotional, and academic outcomes. The third presentation examines how to prevent mental ill health among teachers by improving social and organizational risk management in schools. Lastly, this session will explore how strengthening partnerships and collaborative strategizing can improve access to services for pregnant and parenting youth.

MMM Advancing the Conversation on Implementation Science and Quality Improvement: Leaders Working at the Nexus
Salons F/G/H (First Level)

Chairs: Katie Coleman and **Cara Lewis**, both with Kaiser Permanente Washington Health Research Institute

Panelists:

Devon Check, Duke University
Quality Improvement and Implementation Science in Cancer Care: Identifying Areas of Synergy and Opportunities for Further Integration

Brian Mittman, Kaiser Permanente Southern California
Integrating Improvement and Implementation Science to Address Extreme Heterogeneity: The Case of HPV Vaccination

Anne Sales, University of Michigan
Quality Improvement vs. Implementation Research: Finding Middle Ground

Don Goldmann, Institute for Healthcare Improvement
How Epidemiology Can Strengthen both Improvement and Implementation Science

Panel Description: Quality improvement (QI) scientists and implementation scientists (IS) share a desire to see high-quality, evidence-based research translated into practice. However, the fields of implementation science and quality improvement emerged from two relatively distinct trajectories and vary with regard to audience and methodological approach. It has been asserted that better integrating and leveraging the fields' complimentary perspectives could enhance our ability to improve care, so how might that work? Each panelist will provide a brief perspective on ways to improve both QI and IS and their intersection through an exemplar project. Ample time for discussion and audience participation will be prioritized.

PHE The Role of Organizational Factors in Implementing and Sustaining Evidence-Based Practices to Promote Health Equity in Healthcare Settings
Salon J (First Level)

Chair: Christina Studts, University of Kentucky

Call for Abstracts Session Panelists:

Sivan Spitzer-Shohat, Bar-Ilan University; University of Chicago
Implementation Strategies to Advance an Organization-Wide Equity Initiative: Are Some Strategies More Effective Than Others?

Christie Pizzimenti, Oregon Health & Science University
Meeting Health Information Technology Needs in the Management of Social Determinants of Health

Andrew Knighton, Intermountain Healthcare
Using Intervention Mapping to Plan, Develop and Test Implementation Feasibility of an Integrated Health and Social Services Intervention in Two Diverse Communities

Lyndsay Nelson, Vanderbilt University Medical Center
Implementation Potential of a Text Message-Delivered Medication Adherence Intervention in Federally Qualified Health Centers

Rachel Shelton, Columbia University
A Prospective Comparative Case Study Examining Sustainability Outcomes and Determinants among Lay Health Advisor Programs in Low-Resource Settings

Call for Abstracts Session Description: Much of the research on delivery of evidence-based practices to patient populations experiencing health disparities has focused on making practices accessible and acceptable to these populations. This session focuses on organizational factors at the clinician, leadership, administrative, and structural level needed to ensure successful adoption and sustained delivery of evidence-based practices to disadvantaged populations in academic and community-based healthcare settings.

BF Transforming Innovations into Market-Ready Products: An Entrepreneurial Approach to D&I Science
Salon K (First Level)

Chair: Darcy Freedman, Case Western Reserve University

Panelists:

Roberto Martinez, Case Western Reserve University

Elva Arredondo, San Diego State University
Scaling Up and Disseminating Faith in Action: Discoveries from the Sprint Training

Keshia Pollack Porter, John Hopkins University
The Customer Discovery "Sprint:" Lessons from Spreading Play Streets to All

Panel Description: SPeeding Research-tested INterventions Training (SPRINT), is a training program for researchers with the goal of transforming interventions into "market-ready products" to increase uptake. Three teams focused on community-based prevention of chronic disease including "FreshLink Ambassadors" (Case Western Reserve University), "Faith in Action" (San Diego State University), and "Play Streets" (Baylor University and Johns Hopkins University), participated in SPRINT 2019. They applied business theory to their previously designed and tested interventions. This panel presentation describes the lessons learned during the process, and illustrates how the application of business theory may improve D&I science, producing interventions that are more context-specific and self-sustaining.

FRIDAY, DECEMBER 6

6:15 a.m.–7:00 a.m.

Sunrise Yoga
Lee (Lobby Level)

Start your day with a complimentary yoga session. Please bring a yoga mat or towel and water bottle. All levels are encouraged to attend. The 45 minute session will include 6 movements of the spine, breathing exercises, and opportunities for grounding and energizing.

7:30 a.m.–8:30 a.m.

Continental Breakfast
Foyer (First Level)

7:30 a.m.–12:00 p.m.

Registration
Sky View (First Level)

8:00 a.m.–9:30 a.m.

Concurrent Sessions

PHE **Implementation of Programs and Practices to Promote Health Equity for Sexual and Gender Minorities in School-Based and Healthcare Settings**
Rosslyn (Lobby Level)

Chair: Jennifer Alvidrez, National Institute on Minority Health and Health Disparities

Discussant: Lisa Wigfall, Texas A&M University

Call for Abstracts Session Panelists:

Lara Gunderson, Pacific Institute for Research and Evaluation
Amplification of School-Based Strategies Resulting from the Application of the Dynamic Adaptation Process to Reduce Sexual and Gender Minority Youth Suicide

Daniel Shattuck, Pacific Institute for Research and Evaluation
Coaching as an Implementation Strategy for Successful School-Based Interventions to Reduce Health Disparities among Sexual and Gender Minority Youth

Cathleen Willging, Pacific Institute for Research and Evaluation
Improving Implementation of Primary Care Practice Guidelines for Sexual and Gender Minority Patients: A Mixed-Methods Study

Pamela Tinc, Bassett Healthcare Network, Research Institute
Applying CFIR to the Implementation of a Center of Excellence in Transgender Health

Call for Abstracts Session Description: Sexual and gender minority (SGM) individuals experience stigma and discrimination in a range of settings. This session focuses on strategies to implement evidence-based programs and practices to create more inclusive and equitable environments for SGM populations in school-based and healthcare settings.

BH **Challenges and Opportunities in Implementation Science: Addressing the Unique Needs of Stigmatized Populations**
Salon A (First Level)

Chair: Denny Pintello, National Institute of Mental Health

Discussant: Gregory Aarons, University of California, San Diego

Call for Abstracts Session Panelists:

Bryan Garner, RTI International
Main Findings of the Substance Abuse Treatment to HIV Care (SAT2HIV) Project: A Type 2 Effectiveness-Implementation Hybrid Trial

Nathalie Moise, Columbia University Medical Center
A Theory-Informed, Rapid Cycle, Human-Centered Model for Improving Collaborative Care Sustainability

Katherine Watkins, RAND Corporation
Organizational Capacity and Readiness for Providing Co-AUD Treatment in Public Mental Health Settings

Nessa Ryan, New York University
Application of the 'What Matters Most' Framework to Examine Socio-Cultural Aspects of the Stigmatization Process for Women with Obstetric Fistula in Ghana: An Ethnographic Approach to Inform Selection of an Implementation Strategy

Call for Abstracts Session Description: Multiple challenges impede the delivery, adoption and sustainment of evidence-based practices for diverse, vulnerable and stigmatized populations, including individuals impacted by HIV, substance abuse, mental illness and specific health conditions. This session will present data from three studies that tested innovative implementations strategies (user-centered design principles within implementation team-based models, implementation and sustainment facilitation, and organizational readiness assessment), and a fourth study that used mixed-methods to target stigma reduction. The discussion will focus on the challenges and opportunities for implementation scientists to address the unique needs of stigmatized populations and future implications for building and sustaining tailored implementation strategies.

HP Innovative Methods in Policy Dissemination and Implementation Research
Salon B (First Level)

Chair: Megan McCullough, Center for Healthcare Organization and Implementation Research

Discussant: Jonathan Purtle, Drexel University

Call for Abstracts Session Panelists:

Renda Wiener, Edith Nourse Rogers Memorial Veterans Hospital; Boston University
Mixed-Methods Evaluation of Implementation of an Opt-Out Tobacco Treatment Service at a Safety-Net Hospital to Improve Tobacco Treatment Performance Metrics

Thomas Mackie, Rutgers University
A Decision Sciences Approach to Investigate Evidence Use in Trauma Screening for Children Entering Foster Care

Zuleyha Cidav, University of Pennsylvania
A Pragmatic Method for Costing Implementation Strategies Using the Time-Driven Activity-Based Costing

Isomi Miake-Lye, VA Greater Los Angeles Healthcare System
Scaling Beyond Early Adopters: A Systematic Review and Key Informant Perspectives

Call for Abstracts Session Description: The studies in this session showcase innovative implementation science methods to evaluate and study policy implementation and implementation strategies across different contexts, medical systems and critical health issues. Topics range from a systematic review with findings on hard-to-engage sites, a quasi-experimental pragmatic design to evaluate an opt-out tobacco treatment, using decision science to investigate how decisions are made in evidence use for trauma screening for children in care and the development of a time-driven activity-based costing model to evaluate the cost of implementation strategies. Together, these abstracts represent novel methods and approaches for evaluating policy implementation and policy implementation strategies.

BF Novel Approaches in D&I Training
Salon C (First Level)

Chair: Anne Sales, University of Michigan

Discussant: Sarah Bernal, National Cancer Institute

Call for Abstracts Session Panelists:

Kathryn Nearing, University of Colorado
I-Corps@Ncats: A Novel Designing-For-Dissemination Learning Laboratory for Clinical and Translational Researchers to Increase Intervention Relevance and Speed Dissemination

Ana Baumann, Washington University in St. Louis
Training Implementation Research in Rwanda: Evaluation, Challenges and Lessons Learned

JoAnn Kirchner, VA Central Arkansas Healthcare System
Transferring & Sustaining Implementation Science Knowledge and Skills through a Multifaceted Training Experience

Tanya Olmos-Ochoa, VA Greater Los Angeles Healthcare System
Designing for Facilitator Resilience in Implementation Science: A Conceptual Framework

Call for Abstracts Session Description: This session will focus on novel locations and opportunities for training in Dissemination and Implementation Sciences. The sessions range from novel laboratories in multiple countries to in-depth focus on sustainability and facilitator resilience.

PPH Using Exercise Intervention Translation to Advance Implementation Science: An Integrated Case Series
Salons D/E (First Level)

Chair: Laura Rogers, University of Alabama at Birmingham

Discussant: Prajakta Adsul, National Cancer Institute

Panelists:

Laura Rogers, University of Alabama at Birmingham
Identifying and Applying Implementation Strategies to Translating an Evidence-Based Exercise Intervention to a Rural Community Cancer Care Organization

Kathryn Schmitz, Penn State
Strength after Breast Cancer: An Evidence-Based Rehabilitative Exercise Program for Breast Cancer Survivors

Karen Basen-Engquist, The University of Texas MD Anderson Cancer Center
Active Living after Cancer: Adaptation for Community and Clinic

Panel Description: Identifying effective implementation strategies for multicomponent and expertise-dependent evidence-based interventions is crucial to advancing D&I science. This is particularly important for exercise oncology interventions because they provide tertiary prevention benefits for cancer survivors yet are infrequently translated to broader use. Hence, this panel will compare and contrast three case studies within clinical care organizations that have identified and applied implementation science construct targets and relevant effective implementation strategies when translating exercise interventions. Presenters will also discuss how results may apply to other multi-component and expertise-depending interventions.

CCS Cost and economic aspects of implementation
Salons F/G/H (First Level)

Chair: Michelle Moniz, University of Michigan

Discussant: Lisa Saldana, Oregon Social Learning Center

Call for Abstracts Session Panelists:

Edwin Wong, VA Puget Sound Healthcare System and University of Washington
Economic Costs of Implementing Virtual Care for Patients with Post-Traumatic Stress Disorder

Florence Tangka, Centers for Disease Control and Prevention
Costs and Effectiveness of Interventions Implemented to Increase Colorectal Cancer Screening in Eight CDC Colorectal Cancer Control Program Awardees

Tzeyu Michaud, University of Nebraska Medical Center
Costs of Recruitment and Adoption of a Diabetes Prevention Program - A Population Health Management Approach

Call for Abstracts Session Description: Studies examining the costs of implementation processes are vital for promoting efficient and effective implementation of evidence-based practices. This session will present studies of 1) the relative costs of two implementation bundles for a telemedicine intervention for veterans with post-traumatic stress disorder, 2) the cost and incremental cost effectiveness of various implementation interventions to promote colorectal cancer screening, and 3) recruitment activity costs in a hybrid implementation-effectiveness trial and opportunities to reduce costs to maximize reach. The session will include a robust discussion of opportunities to promote economic analyses in implementation research and real-world implementation processes.

⬚MMM⬚ Embracing, Guiding and Learning from Intervention Variation and Tailoring: Core Functions and Forms in Complex Health Interventions
Salon J (First Level)

Chair: Monica Perez Jolles, University of Southern California

Discussant: Russell Glasgow, University of Colorado

Panelists:

Brian Mittman, Kaiser Permanente Southern California
Embracing and Guiding, Rather than Suppressing or Ignoring, Heterogeneity and Tailoring: Core Functions and Forms in Complex Health Interventions

Monica Perez Jolles, University of Southern California
Using Ethnographic Methods to Identify the Core Functions and Forms of Patient-Centered Medical Homes (PCMH) Within Federally Qualified Health Centers (Fqhcs)

Alan McGuire, VA HSR&D Center for Health Information and Communication
Emergent Functions and Forms of Emergency Department-Based Peer Support for Opioid Use Disorders

Amytis Towfighi, Rancho Los Amigos National Rehabilitation Center
Identification of Core Forms and Functions in the Secondary Stroke Prevention by Uniting Community and Chronic Care Model Teams Early to End Disparities: The Succeed Trial

Panel Description: Tailoring implementation strategies to align with interventions core purposes and contextual characteristics is essential for the successful uptake of evidence-based practices. As opposed to interventions with linear pathways (simple), tailoring efforts are challenged by the characteristics of complex health interventions (CHIs). This session will introduce attendees to two key CHI terms - standard functions (purposes or goals) and customized forms (activities to carry out functions). Attendees will then learn about diverse methodology to identify CHIs' functions and forms, and implications for implementation efforts, through case studies on patient-centered care, secondary stroke prevention and emergency department peer support for opioid use.

CCP **Strategies to Promote Behavior Change in Clinical Settings**
Salon K (First Level)

Chair & Discussant: Ramzi Salloum, University of Florida

Call for Abstracts Session Panelists:

Jordan Neil, Massachusetts General Hospital/Harvard Medical School
Message Testing Recruitment Videos for a Smoking Cessation Trial

Dennis Li, Northwestern University
Monitoring Acceptability of and Engagement with SMART, An eHealth Stepped-Care HIV Prevention Intervention for Adolescent Men Who Have Sex with Men

Ryan Theis, University of Florida
Implementing a Multi-Level Intervention to Improve Tobacco Use Treatment for Cancer Patients: A Mixed-Methods Study

Gizachew Tiruneh, JSI Research and Training Institute Inc.
Effectiveness of Participatory Community Solutions Strategy on Improving Household and Provider Health Care Behaviors and Practices: A Mixed Method Evaluation

Call for Abstracts Session Description: This session focuses on the application of implementation strategies to promote the delivery of health education and behavior interventions in clinical settings. Strategies are a key component of implementation research, yet knowledge gaps persist regarding effective implementation strategies for clinical settings. Topics in this session cover various technology tools, experimental techniques, and the use of mixed methods for the assessment of implementation outcomes.

9:30 a.m.–9:45 a.m.
Break

9:45 a.m.–11:15 a.m.
Concurrent Sessions
BH **Main Findings of the SPARC Trial: Implementing Alcohol-Related Care in 22 Primary Care Clinics**
Rosslyn (Lobby Level)

Chair: Katharine Bradley, Kaiser Permanente Washington Health Research Institute

Panelists:

Carol Achtmeyer, VA Puget Sound Healthcare System
The Sustained Patient-Centered Alcohol-Related Care (SPARC) Trial—An Implementation Trial Across 22 Primary Care Sites—Findings Regarding Alcohol Screening snd Brief Intervention (Aim 1)

Katharine Bradley, Kaiser Permanente
The Sustained Patient-Centered Alcohol-Related Care (SPARC) Trial—An Implementation Trial Across 22 Primary Care Sites—Findings Regarding Diagnosis and Treatment of Alcohol Use Disorders (AUD)

Julie Richards, Kaiser Permanente Washington Health Research Institute
Sustainment of Alcohol-Related Care Following Implementation of a Multi-Faceted Intervention in Primary Care

Panel Description: The Sustained Patient-centered Alcohol-Related Care (SPARC) trial was a cluster-randomization stepped-wedge implementation trial in 22 primary care clinics. SPARC sought to implement sustained evidence-based alcohol-related prevention (Aim 1) and treatment (Aim 2). Prevention included screening and brief intervention recommended by US Preventive Services Task Force. Treatment included improved recognition and engagement in care for AUDs. This panel presents main trial results including prevention (Aim 1 - Abstract 1), treatment (Aim 2 - Abstract 2), and sustainability (Abstract 3). Abstracts focus on main quantitative outcomes and presentations will include qualitative data from weekly formative evaluation meetings to inform interpretation of findings.

MMM Accounting for Context in Implementation: Novel Measures and Methods
Salon A (First Level)

Chair: Lori Ducharme, National Institutes of Health

Discussant: Borsika Rabin, CRN Cancer Communication

Call for Abstracts Session Panelists:

Matthew Weber, University of Minnesota
Mapping Knowledge Brokers in Media Ecosystems to Assess the Use of Research Evidence

Aaron Lyon, University of Washington
Comparison of Generic vs. Intervention-Specific Referents When Measuring the Inner Organizational Context

Tim Rappon, University of Toronto
Predicting the Sustainability of Evidence-Based Interventions: A Neural Network Approach to Investigating Links between Contexts, Mechanisms and Outcomes

Sapna Mendon, University of Southern California
Advancing Our Understanding of Organizational Constructs Influencing the Delivery of Evidence-Based Practice across Publicly-Funded Mental Health Agencies: A Secondary Data Analysis Using Qualitative Comparative Analysis

Call for Abstracts Session Description: A complete understanding of the implementation process requires attention to the contexts in which individuals learn about, adopt, and deliver evidence-based practices. Using examples from a variety of settings, these presentations examine innovative measurement and analytic approaches to capture contextual influences and ultimately predict implementation, fidelity, and sustainment outcomes.

CCS System Level & Inter-Organizational Issues in Implementation
Salon B (First Level)

Chair: Sarah Greene, Health Care Systems Research Network

Discussant: Sarah Goff, University of Massachusetts, Amherst

Call for Abstracts Session Panelists:

Shari Rogal, VA Pittsburgh Healthcare System
Assessing Implementation Strategies in VA's National Opioid Risk Management Initiative

Nina Sperber, VA Durham Healthcare System
Determinants of Implementation Success in Complex Inter-Organizational Relationships: A Mixed-Methods Evaluation of Veteran Directed Care

Jennifer Frehn, University of California, Berkeley
Comparing Health System and Physician Practice Influences on Social Needs Screening

Jane Brock, Telligen
Interpreting Variation in Community-Based Care Coordination Efforts to Reduce State and National Medicare Hospital Readmissions Using the Consolidated Framework for Implementation Research (CFIR)

Call for Abstracts Session Description: Understanding the context, complexity, and conditions at a system level can help organizations with successful implementation. The four studies presented in this session use rigorous and innovative approaches to understanding aspects that create a receptive implementation climate. Included in this session: a program evaluation of the VA's opioid risk management initiative; a mixed-methods evaluation of Veteran Directed Care; an analysis of system and physician influences on social needs screening; and a sequential mixed-methods study of regional variation in a Medicare hospital readmissions reduction program. All four studies will illuminate how variations within and between systems can influence success.

CCP Patient-Facing Implementation Strategies in Vulnerable Populations
Salon C (First Level)

Chair & Discussant: Rinad Beidas, University of Pennsylvania

Call for Abstracts Session Panelists:

John McHugh, Columbia University
The Care of High-Need Patient Populations: Findings from a 2-Year Study of High-Performing Hospitals

Rebecca Hamm, University of Pennsylvania
Fidelity to Individual Components of a Standardized Labor Induction Protocol and Association with Improved Obstetric Outcomes: A Simplification Strategy Prior to Large-Scale Implementation

Montserrat Soler, Basic Health International
Acceptability of Innovative Treatments for Cervical Pre-Cancer in Global Settings

Jennifer Reckrey, Icahn School of Medicine at Mount Sinai
Implementation of Stride, an Office-Based Intervention to Prevent Falls and Fall-Related Injuries

Call for Abstracts Session Description: This session focuses on the applications of patient-facing implementation strategies in vulnerable populations. The first session applies a positive deviance approach to understand how high performing hospitals are able to serve the needs of their high-need patient populations. The second and third presentations focus on how best to maximize intervention acceptability, one with an eye towards women with cervical pre-cancer in low and middle income countries, and the other for pregnant women in obstetric settings. The fourth focuses on how best to implement a primary care based intervention to prevent falls in the elderly. All four presentations use novel methodology to embed implementation related questions across the continuum of research.

GDI Use of Technology and Innovation to Improve Global Health
Salons D/E (First Level)

Chair: Amit Mistry, National Institutes of Health

Call for Abstracts Session Panelists:

Juliet Iwelunmor, Saint Louis University
The 4 Youth by Youth Crowdsourcing Contest: Using Participatory Design to Reach and Increase Uptake of HIV Self-Testing among Young People in Nigeria

Devika Patel, University of California, San Francisco
Use of Human-Centered Design to Adapt a Novel Tuberculosis Digital Adherence Technology to the Local Context

Amanda Meyer, Yale University
Implementing mHealth Interventions in a Resource-Constrained Setting: A Case Study from Uganda

Ashley Hagaman, Yale University
A Feasibility and Acceptability Study of a mHealth Platform and Integrated Wearable Digital Sensors to Improve the Implementation of Manualized Psychological Treatment for Underserved Adolescent Mothers

Call for Abstracts Session Description: Innovative approaches to health care delivery, such as the use of digital technologies, create new opportunities as well as new challenges for effective implementation. This session will explore D&I science around innovative health interventions for improving health in low- and middle-income countries. Presentations feature a broad range of approaches, including crowdsourcing, participatory design, human centered design, mobile health (mHealth) platforms, automated SMS messaging, wearable digital sensors, and remote sensing. These innovative tools were used to address health issues such as increasing HIV self-testing, improving adherence to tuberculosis treatment and contact investigation, and post-partum depression among adolescent mothers.

Best of D&I Session
Salons F/G/H (First Level)

Chair: Meghan Lane-Fall, University of Pennsylvania

Discussant: Stephen Bartels, Massachusetts General Hospital

Call for Abstracts Session Panelists:

Thomas Mackie, Rutgers University
A Decision Sciences Approach to Investigate Evidence Use in Trauma Screening for Children Entering Foster Care

Lara Gunderson, Pacific Institute for Research and Evaluation
Amplification of School-Based Strategies Resulting from the Application of the Dynamic Adaptation Process to Reduce Sexual and Gender Minority Youth Suicide

Margaret Padek, Washington University in St. Louis
Predictors of Mis-Implementation of Chronic Disease Control Programs in State Health Departments

Prerna Martin, University of Washington
What Makes an Enabling Context for Mental Health Delivery? Differential Implementation Practices for Task-Shared Delivery across Education and Health Sectors in Western Kenya

Call for Abstracts Session Description: The Best of D&I session is intended to highlight some of the highest quality abstracts presented at the conference. Rather than serve as a recapitulation of the individual studies, presenters will highlight the impact of their work to the field. The moderator and discussant will further identify themes and take-home messages, and provide a broader context for the significance of these studies.

BF Expansion of D&I Research Capacity: A Holonic Perspective
Salon J (First Level)

Chair: David Aron, VA Northeast Ohio Healthcare System

Discussant: Lauren Brookman-Frazee, Child and Adolescent Services Research Center

Call for Abstracts Session Panelists:

Andrew Quanbeck, University of Wisconsin—Madison
Building capacity for dissemination and implementation research through stakeholder engagement in a clinical and translational science award institution: The university of Wisconsin story

Amy Rusch, University of Michigan
Beyond early adopters: Strategies for success in reaching and engaging diverse communities in implementation trials from the adaptive school-based implementation of CBT (ASIC) trial

Ana Baumann, Washington University in St. Louis
Global implementation research capacity building to address cardiovascular disease: An assessment of efforts in eight countries

Call for Abstracts Session Description: This session includes presentations describing focused efforts to build implementation science and practice capacity in varied contexts. The first presentation will describe strategies to reach and engage diverse communities and report data on the process of recruiting consumers in over 100 schools for a school-based implementation trial. The second presentation describes a systematic approach to building D&I capacity through a Clinical and Translational Science Award (CTSA) Community Engagement Core. The third presentation describes efforts in eight low and middle income countries to build implementation research capacity to address cardiovascular disease. Common themes regarding the process of engaging stakeholders and building implementation capacity across contexts will be discussed.

PHE Systems-Based Approaches for the Uptake of Evidence-Based Childhood Obesity Treatment Interventions to Advance Equity in Small Towns and Rural Areas
Salon K (First Level)

Chair: Paul Estabrooks, University of Nebraska Medical Center

Panelists:

Paul Estabrooks, University of Nebraska Medical Center
A systems-based approach for childhood obesity treatment across clinical and community contexts

Kate Heelan, University of Nebraska at Kearney
Building healthy families: A community-based program aimed at decreasing childhood obesity in rural communities

Jamie Zoellner, University of Virginia
Applying a CBPR approach to address capacity and sustainability of childhood obesity treatment interventions across and within different community organizations in a rural region

Jennie Hill, University of Nebraska Medical Center
Facilitating systems-based approaches in multiple rural communities to translate evidence-based childhood obesity interventions into practice

Panel Description: Small towns and rural communities are characterized by reduced clinical infrastructure and diffuse resources making it challenging to adopt and sustain evidence-based childhood obesity treatment interventions (EBCOTI)—despite higher rates of obesity. This panel will (1) introduce a systems-based approach to advance the uptake of EBCOTIs, (2) present the use of community-based participatory research to engage systems to address childhood obesity in a medically-underserved region, (3) describe methods to support cross organization adoption and implementation of an EBCOTI, and (3) present a protocol to engage systems in the adoption, implementation, and sustainability of an EBCOTI across multiple rural communities.

11:15 a.m.–11:30 a.m.

Break

11:30 a.m.–12:45 p.m.

Plenary Session: D&I Measures for Rapid, Relevant, and Rigorous Research
Arlington Ballroom (First Level)

Chair: Gila Neta, National Cancer Institute

Speakers: Maria Fernandez, The University of Texas Health Science Center at Houston; **Sara Landes**, University of Arkansas for Medical Sciences; **Lisa Saldana**, Oregon Social Learning Center; **Bryan Weiner**, University of Washington

Plenary Description: This session will focus on considering the current state of measurement in D&I research, priorities for the field moving forward, and related issues of data aggregation, study design implications, and remaining gaps.

1:30 p.m.–5:45 p.m.

Technical Assistance (TA) Workshop
Salons J/K (First Level)

The TA workshop provides guidance and feedback to investigators currently developing proposals to conduct dissemination or implementation research in health.

Registration required - email DIconfTAworkshop@mail.nih.gov to register. Feedback is not guaranteed if a proposal was not submitted by the deadline of November 15.

https://www.academyhealth.org/page/2019-di-adjunct-events

Getting Evidence into Decision Making and Practice

As of August 2019, PCORI has awarded

$2.5 BILLION TO FUND MORE THAN 700

COMPARATIVE CLINICAL EFFECTIVENESS RESEARCH (CER) studies and related projects advancing patient-centered outcomes research

In addition to funding CER, PCORI is taking steps to **SPEED UP** the **DISSEMINATION** of research findings from PCORI-funded studies and their **IMPLEMENTATION IN PRACTICE**

Upcoming D&I Funding Opportunities
Letters of Intent for the next funding cycle are due late January 2020

Interested in Learning about PCORI-Funded Dissemination & Implementation Projects?

Join us at the Discussion Forum:

Implementing Evidence: PCORI's D&I Program
December 5 | 1:30–2:30 pm

- Hear from **current PCORI D&I awardees** about their projects, their implementation strategies, how they are addressing obstacles, and how they are evaluating their projects

- Learn more about **PCORI funding opportunities** that support dissemination and implementation projects

COME VISIT US! PCORI D&I staff will be available December 4-6 at the PCORI Exhibition Booth (Table #11)

FUNDING PROJECTS to disseminate findings from PCORI-funded studies and implement them in practice

FUNDING RESEARCH on the comparative effectiveness of communication and dissemination strategies

TRANSLATING RESULTS into clear and easy-to-use summaries

Creating **EVIDENCE UPDATES** that present findings from systematic reviews and selected studies to facilitate dissemination of evidence

Facilitating **FREE PUBLIC ACCESS** to findings in journals

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ADJUNCT EVENTS

WEDNESDAY, DECEMBER 4

8:15 a.m.–9:45 a.m.

Organizational Theory for Implementation Science Framework Abstraction Review
Jefferson (Lobby Level)

Invitation only

THURSDAY, DECEMBER 5

7:00 a.m.–8:00 a.m.

Aging and D&I Special Interest Group
Jefferson (Lobby Level)

Open to all

7:00 a.m.–8:00 a.m.

QUERI Meeting
Salon A (First Level)

Invitation only

FRIDAY, DECEMBER 6

1:00 p.m.–5:00 p.m.

Strengthening Capacity for Implementation Research in Low- and Middle-Income Countries
Lee (Lobby Level)

Invitation only

1:30 p.m.–5:45 p.m.

Technical Assistance (TA) Workshop
Salons J/K (First Level)

The TA workshop provides guidance and feedback to investigators currently developing proposals to conduct dissemination or implementation research in health.

Registration required - email DIconfTAworkshop@mail.nih.gov to register. Feedback is not guaranteed if a proposal was not submitted by the deadline of November 15.

https://www.academyhealth.org/page/2019-di-adjunct-events

AcademyHealth

www.academyhealth.org

As the professional home for health services research, AcademyHealth connects researchers, policymakes, and providers in pursuit of higher quality, more accessible. Higher value health care. Together with our more than 4,000 members, AcademyHealth promotes and facilitates the application of research to improve health and health care across the research and policy arenas.

Agency for Healthcare Research and Quality (AHRQ)

www.ahrq.gov

The Agency for Healthcare Research and Quality (AHRQ) is the lead federal agency charged with improving the quality, safety, efficiency, and effectiveness of health care for all Americans. Within the Department of Health and Human Services, AHRQ supports research to improve the quality of health care and promote evidence-based decisions.

The Center for Translation Research and Implementation Science

www.nhlbi.nih.gov

The Center for Translation Research and Implementation Science, part of the National Heart, Lung, and Blood Institute serves as a strategic focal point for coordinating and advancing late-stage T4 translation research; implementation science; health inequities research; global health research; and research training and career development in the above areas.

Department of Veterans Affairs
Health Services Research & Development Service (HSR&D)
Quality Enhancement Research Initiative (QUERI)

www.hsrd.research.va.gov

www.queri.research.va.gov

The Department of Veterans Affairs, Health Services Research and Development Service (HSR&D) identifies and evaluates innovative strategies that produce accessible, high-quality, cost-effective healthcare for Veterans. VA HSR&D's Quality Enhancement Research Initiative (QUERI) focuses exclusively on implementing evidence-based research into clinical practice – and evaluating the results of those efforts.

Geisinger

www.geisinger.com

One of the nation's most innovative health services organizations, Geisinger serves more than 1.5 million patients in Pennsylvania and New Jersey. The system includes 13 hospital campuses, a nearly 600,000-member health plan, two research centers and the Geisinger Commonwealth School of Medicine.

Global Implementation Society

https://globalimplementation.org

The purpose of the Global Implementation Society (GIS) is to promote and establish coherent and collaborative approaches to implementation practice, science, and policy. The GIS promotes the development and integration of effective implementation, improvement, and scaling practices in human service settings in order to improve outcomes for children, families, individuals, and communities worldwide.

Intermountain Healthcare

www.IntermountainHealthcare.org/DeliveryInstitute

The Intermountain Healthcare Delivery Institute is known world-wide for its constant efforts toward excellence in healthcare services by delivering a unique combination of education, technical support, and implementation research in support of clinical, operational and service excellence across the Intermountain Healthcare system including external partners.

Mayo Clinic Robert D. and Patricia E. Kern Center for the Science of Health Care Delivery

www.mayo.edu/research/centers-programs/robert-d-patricia-e-kern-center-science-health-care-delivery

Through developing, analyzing and rapidly diffusing solutions for the transformation of health care, the Kern Center will drive the transformation of the Mayo Clinic practice to achieve high-value patient-centered care and serve as a global leader in the discovery, translation and application of innovative solutions.

National Center for Health Statistics (NCHS)

www.cdc.gov/nchs

The National Center for Health Statistics (NCHS) provides statistical information that guides actions and policies to improve the health of the American people. As the Nation's principal health statistics agency, NCHS leads the way with accurate, relevant, and timely data. The NCHS exhibit will feature the latest publication and data releases.

National Institutes of Health Office of Disease Prevention

prevention.nih.gov

The Office of Disease Prevention (ODP) is the lead office at the National Institutes of Health (NIH) responsible for assessing, facilitating, and stimulating research in disease prevention, and disseminating the results of this research to improve public health. Prevention is preferable to treatment, and research on disease prevention is an important part of the NIH's mission. The knowledge gained from this research leads to stronger clinical practice, health policy, and community health programs.

National Institutes of Health (NIH)
National Cancer Institute (NCI)
Implementation Science Team

http://Cancercontrol.cancer.gov/IS

The NIH's mission is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability. As part of this mission, the National Cancer Institute's Implementation Science (IS) team leads NIH funding opportunities in dissemination and implementation research that seek to maximize the integration of evidence and evidence-based health interventions into clinical and community practice, along with IS training activities, meetings to build capacity of the field and collaborations among researchers, practitioners and policymakers to improve uptake of NIH-funded research.

DISPLAY FORUM PARTICIPANTS

National Rehabilitation Information Center (NARIC)

www.naric.com

Established in 1977, NARIC serves as the library and dissemination center for the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR). The NARIC collection is cross-disciplinary and covers the life span. It includes more than 100,000 volumes of disability and rehabilitation literature.

Patient-Centered Outcomes Research Institute

www.pcori.org

The Patient-Centered Outcomes Research Institute (PCORI) is an independent, nonprofit organization that funds research to determine which care options work best for which patients given outcomes they care about. This research provides patients, their caregivers, and clinicians with the evidence-based information they need to make better-informed healthcare decisions. PCORI's work is continuously guided by input from a broad range of healthcare stakeholders to ensure that its research funding is timely, useful, and addresses outcomes that matter to healthcare decision makers.

Telligen

www.telligen.com

Telligen's Federal Health Solutions help government agencies and national programs improve the quality and value of healthcare delivered to millions of people in the U.S. We collaborate with payers, providers, and organizations across the care continuum to measure performance, identify process improvements, spread best practices, and facilitate peer-to-peer learning and connection.

UT Health School of Biomedical Informatics

http://sbmi.uth.edu

The mission of SBMI is to collect, process, and convert data - ranging from molecules to populations - into actionable information, knowledge, and intelligence; educate current and future leaders, innovators, and problem solvers across Texas, the nation, and the world; disrupt, transform, and innovate to elicit biomedical discoveries, improve healthcare delivery, and aid in disease prevention by conducting outstanding basic and applied research and developing impactful information technology products and solutions.

University of Washington
PhD Program in Health Services, University of Washington School of Public Health

http://depts.washington.edu/hservphd/

The mission of the University of Washington's PhD program in Health Services is to educate the next generation of health services researchers and prepare them to provide leadership in the field. The program is designed to prepare graduates for research careers in universities, policy-making organizations, health care industry, and government.

Participating Federal Agencies
The Agency for Healthcare Research and Quality

www.ahrq.gov

The Agency for Healthcare Research and Quality's (AHRQ) mission is to produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and work within the U.S. Department of Health and Human Services and with other partners to make sure that the evidence is understood and used.

Department of Veterans Affairs
Health Services Research & Development Service (HSR&D)
Quality Enhancement Research Initiative (QUERI)

www.hsrd.research.va.gov

www.queri.research.va.gov

The Department of Veterans Affairs, Health Services Research and Development Service (HSR&D) identifies and evaluates innovative strategies that produce accessible, high-quality, cost-effective healthcare for Veterans. VA HSR&D's Quality Enhancement Research Initiative (QUERI) focuses exclusively on implementing evidence-based research into clinical practice – and evaluating the results of those efforts.

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National Cancer Institute (NCI) Implementation Science Team

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Private Supporters
Intermountain Healthcare Delivery Institute

www.IntermountainHealthcare.org/DeliveryInstitute

The Intermountain Healthcare Delivery Institute is known world-wide for its constant efforts toward excellence in healthcare services by delivering a unique combination of education, technical support, and implementation research in support of clinical, operational and service excellence across the Intermountain Healthcare system including external partners.

Kaiser Permanente

https://kp.kaiserpermanente.org

Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America's leading health care providers and not-for-profit health plans. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.3 million members in eight states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health.

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Robert Wood Johnson Foundation

www.rwjf.org

For more than 45 years the Robert Wood Johnson Foundation has worked to improve health and health care. We are working alongside others to build a national Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.

Kristine Madsen, MD; Phillip W. Graham, MPH, DrPH; and Regina Jackson; Interdisciplinary Research Leaders team from Oakland, California

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Robert Wood Johnson
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The Patient-Centered Outcomes Research Institute (PCORI) seeks a dynamic, experienced communications professional to be our new Director of Communications.

The Director is a highly valued advisor to PCORI leadership and oversees a broad array of activities designed to effectively tell the story of our work to our stakeholder audiences. The successful candidate is a respected leader in the communications field with broad and deep knowledge of organizational and strategic communications and messaging, event management, professional publishing and clinical research.

Interested candidates should visit **pcori.org/careers.**

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