Sample Dissemination & Implementation Frameworks

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CDC’s Replicating Effective Practices (REP) for Healthcare Interventions

- Provides a roadmap for implementing evidence-based interventions in community-based settings through a combination of intervention "packaging," training, technical assistance, and other strategies.
- Well-suited framework for implementing healthcare interventions, as it specifies steps needed to maximize fidelity (adherence to the original intervention) while allowing opportunities for flexibility (i.e., adapting) to maximize transferability.

Chart adapted from Figure 1: https://implementationscience.biomedcentral.com/articles/10.1186/1748-5908-2-42
Reach, Effectiveness, Adoption, Implementation, Maintenance (RE-AIM)

- Identifies which implementation outcomes should be tracked
- Evaluates the dimensions considered most relevant to real-world implementation
- Provides ideas for quantitative outcome measures

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<th>RE-AIM Concept</th>
<th>Key Questions for Concept</th>
<th>Outbreak Preparedness and Response Examples</th>
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<tr>
<td><strong>REACH</strong></td>
<td>Who is expected to benefit?</td>
<td>Patients, providers</td>
</tr>
<tr>
<td></td>
<td>What percent of those are actually exposed to intervention?</td>
<td>Case patients</td>
</tr>
<tr>
<td></td>
<td>Who are the stakeholders?</td>
<td>Public, administrators, patients, healthcare providers, healthcare workers</td>
</tr>
<tr>
<td><strong>EFFECTIVENESS</strong></td>
<td>What is the impact of the intervention on the proposed outcome (clinical markers, retention, adherence)?</td>
<td>Measurements of transmission of outbreak, number of case patients, epidemiological curve, deaths prevented</td>
</tr>
<tr>
<td><strong>ADOPTION</strong></td>
<td>What settings applied the practice? Who applied it?</td>
<td>Track units/locations (e.g. local nursing homes, dialysis centers) affected by outbreak</td>
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<tr>
<td><strong>IMPLEMENTATION</strong></td>
<td>How was the practice applied? How consistently was it applied in the way it was intended?</td>
<td>Assessments of adherence to cleaning and disinfection protocols, donning and doffing PPE, hand hygiene, etc.</td>
</tr>
<tr>
<td><strong>MAINTENANCE</strong></td>
<td>Is the practice maintained over time?</td>
<td>Findings from use of secret shoppers, visual indicators (e.g. fluorescent gel), environmental cultures</td>
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**Getting to Outcomes (GtO)**

- Applies empowerment evaluation principles
- Summary of resources to help the user navigate which measures to use for assessing implementation constructs.
- Description for forming an implementation team

The 10 steps in the GTO model are easy to grasp, and useful when working with organizations in the field.

1) Identifying needs and resources
2) Setting goals to meet the identified needs
3) Determining what science-based, evidence-based (EBP) or evidence-informed practices or casework practice models exist to meet the needs
4) Assessing actions that need to be taken to ensure that the EBP fits the organizational or community context
5) Assessing what organizational capacities are needed to implement the practice or program
6) Creating and implementing a plan to develop organizational capacities in the current organizational and environmental context
7) Conducting a process evaluation to determine if the program is being implemented with fidelity,
8) Conducting an outcome evaluation to determine if the program is working and producing the desired outcomes
9) Determining, through a continuous quality improvement (CQI) process, how the program can be improved
10) Taking steps to ensure sustainability of the program.

https://www.ncimapp.org/resources/

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4Es
This commonly used framework for healthcare epidemiology may serve to expand REP and/or RE-AIM. It is well-suited for larger scale projects that include multiple sites. The cyclical nature of the model allows for formative work and feedback to drive modifications and adaptations. This model does not provide clear evaluation methodology.

- Engage (develop multidisciplinary [implementation] team [see below], involve local champions, utilize peer networks)
- Educate (provide sessions, materials)
- Execute (standardize care processes, create redundancy)
- Evaluate (measure performance, provide feedback)