

Scottish School of Primary Care Implementation Framework (SSPC-IF)

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Workshop Plan

- SSPC-IF Background and Methods
- SSPC-IF Overview
- SSPC-IF as a potential online tool
 - for the frontline user
 - for strategists

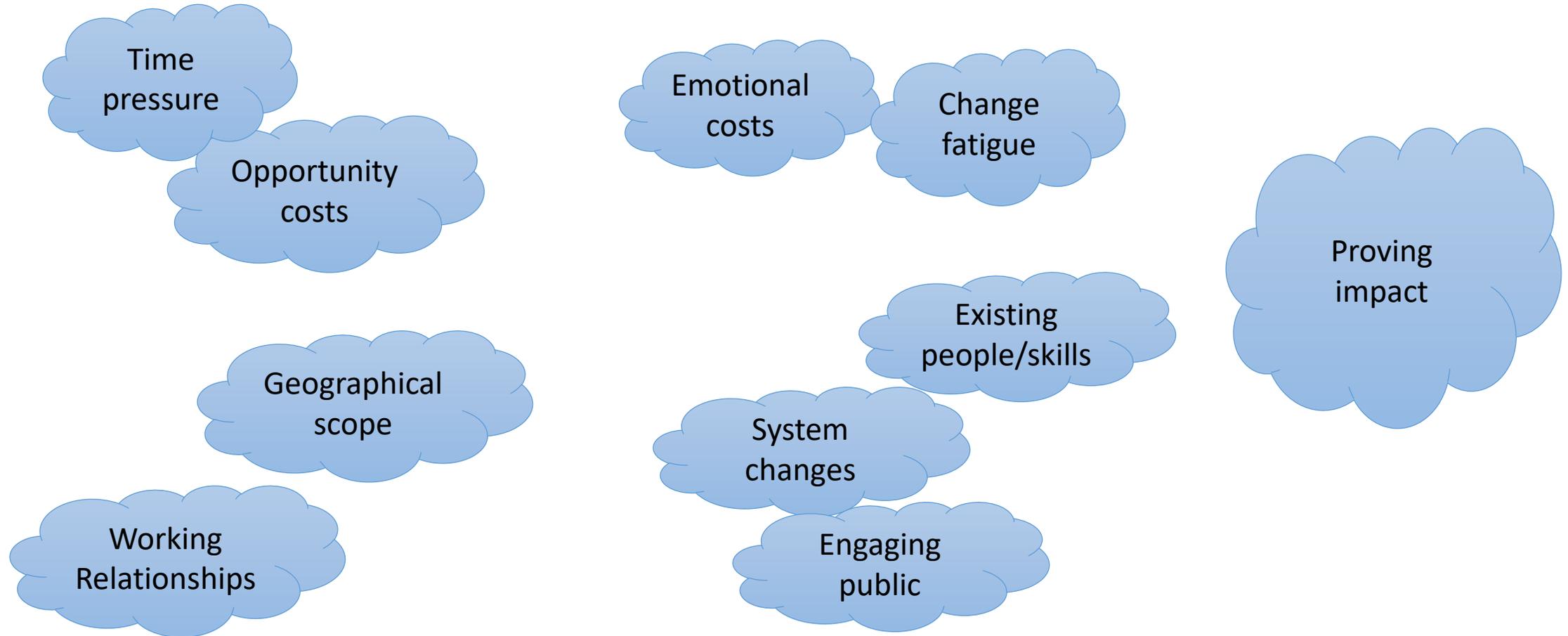
(we believe that it may also be a useful framework for evaluating tests of change)
- Group Workthe 1st test run of part of the draft SSPC-IF

SSPC-IF Background

Based on the findings of the SSPC national evaluation of primary care transformation:

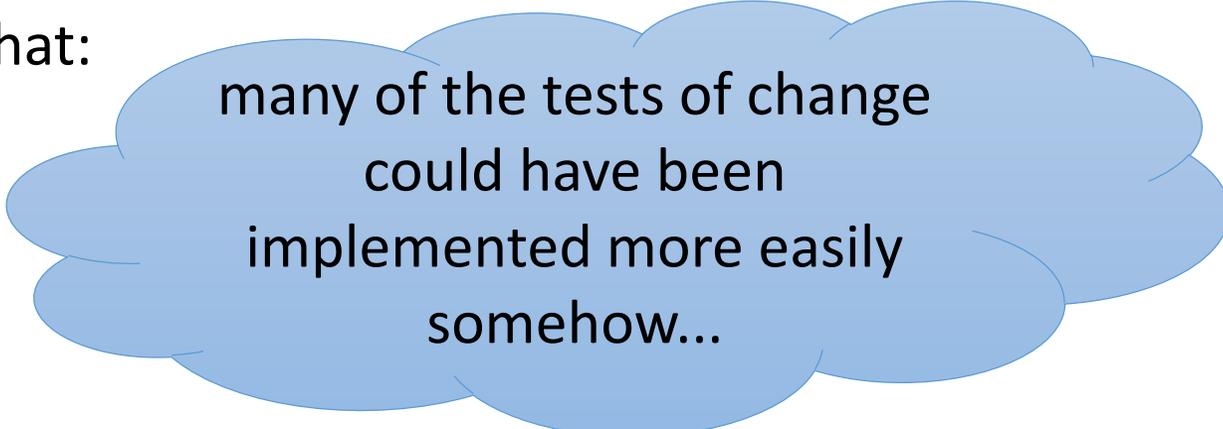
- 204 tests of change
 - 58% fully implemented,
 - 34% partially implemented
 - 6% stopped or abandoned

SSPC-IF Background



SSPC-IF Background

Ultimately, there was a sense that:



many of the tests of change
could have been
implemented more easily
somehow...

We identified that ease of implementation (and indeed outcomes) related mainly to:

- Contextual factors
- Resources
- Processes

Ultimately, we developed a framework that can be used as a guide for implementing change – **after the choice of change has been**

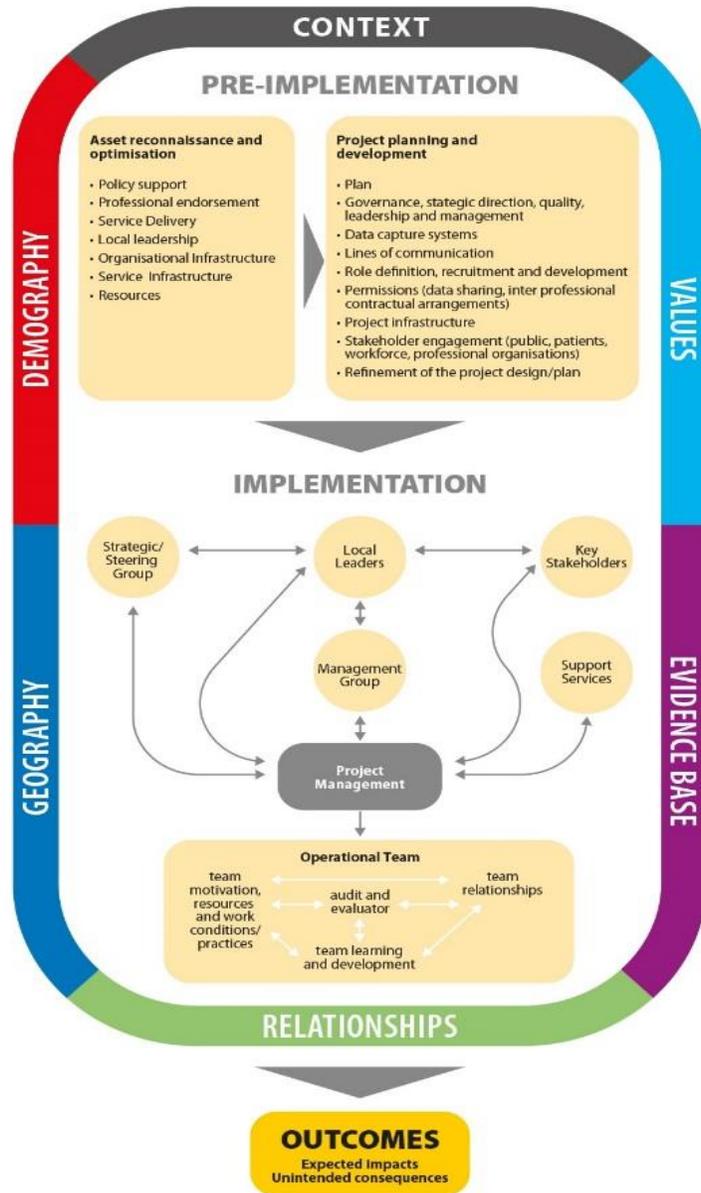
SSPC-IF Lens and Method

Lens

- Development of the SSPC-IF **led by 2 researchers** with decades of experience of project management (*from single-site to international studies*)
 - utilising range of theories (*as well as theoretical modelling*)
 - involving range of populations (*policy makers, service providers, service users, general public*)
 - extensive range of methods (*including action research and collaborative approaches of community-based participatory research*)

Method

Analysis of findings of the SSPC national evaluation of primary care transformation 204 tests of change (but particularly from 34 selected as deep dives as well as the Inverclyde pilot case study tests of change)



influencing every phase of change-implementation from planning to completion

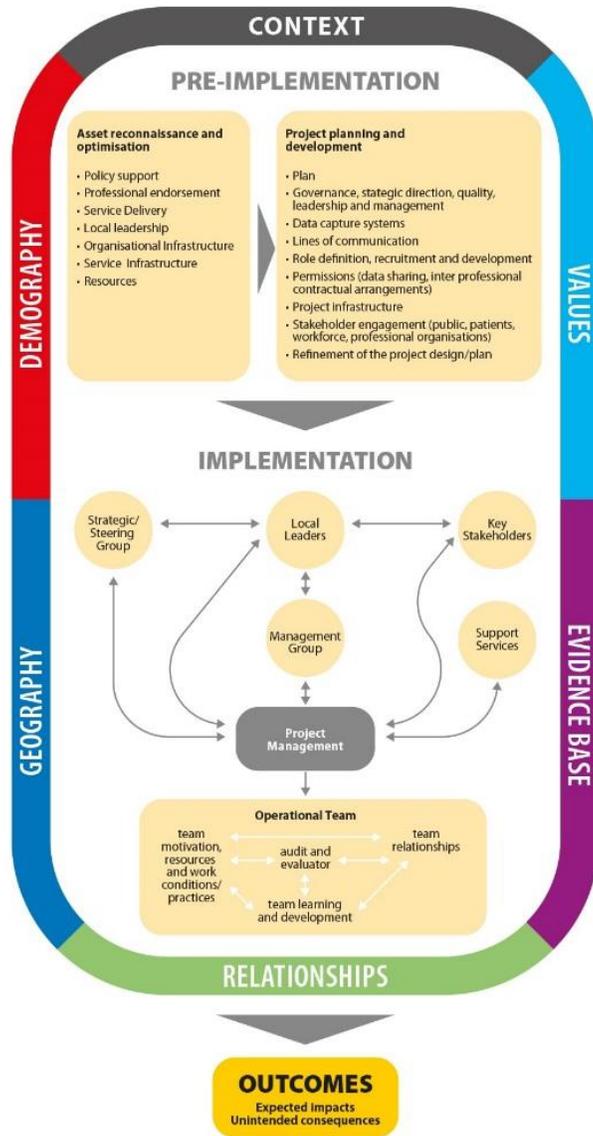
Context

- Values (behaviour)
- Geography (physical and human)
- Demography
- Evidence-base (what and how)
- Relationships

the context can be enabling or limiting but it is a concept that can mean different things to people (Watson et al 2018)

SSPC-IF: Pre-implementation considerations

Pre-implementation



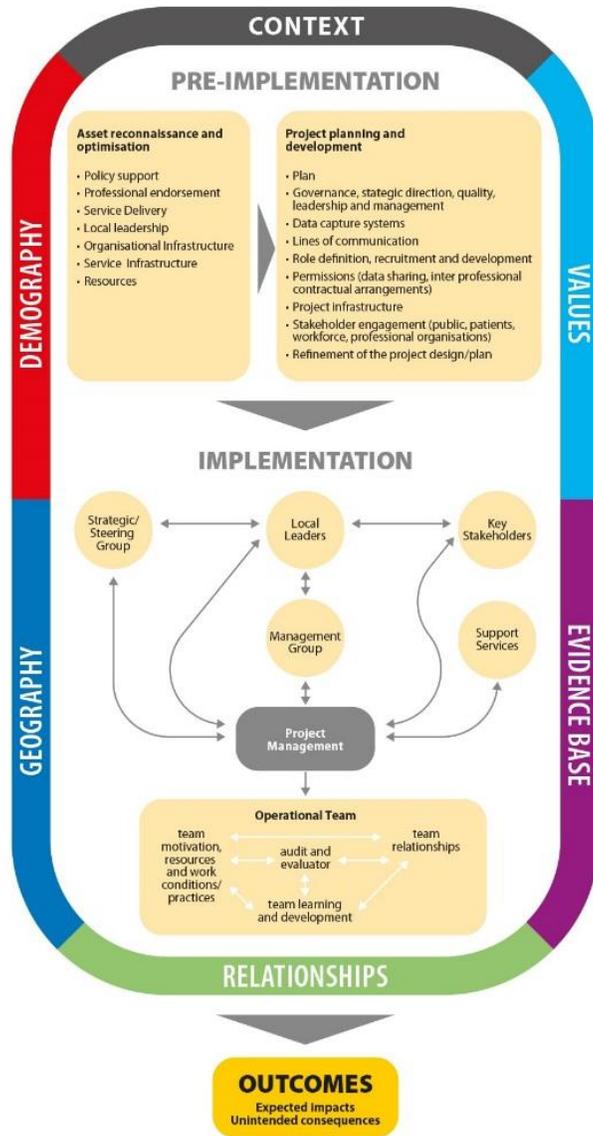
Asset reconnaissance and optimisation

- Policy support
- Professional endorsement
- Service Delivery
- Local leadership
- Organisational Infrastructure
- Service Infrastructure
- Resources

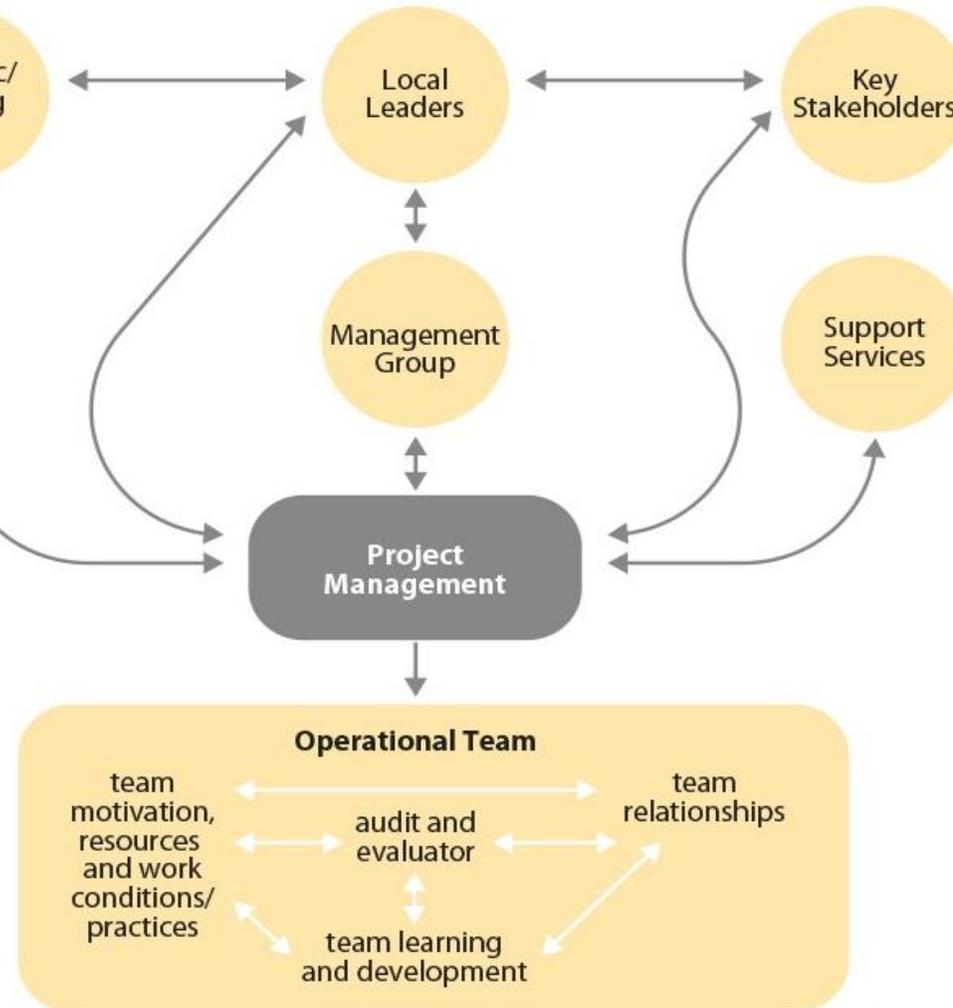
Project planning and development

- Plan
- Governance, strategic direction, quality, leadership and management
- Data capture systems
- Lines of communication
- Role definition, recruitment and development
- Permissions (data sharing, inter professional contractual arrangements)
- Project infrastructure
- Stakeholder engagement (public, patients, workforce, professional organisations)
- Refinement of the project design/plan

SSPC-IF: Implementation considerations



IMPLEMENTATION



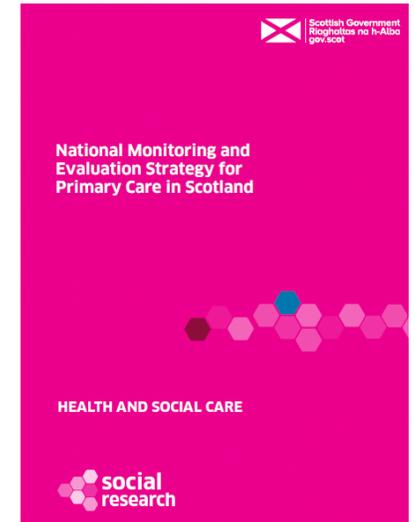
SSPC-IF: Outcomes

- Monitoring expected and unexpected outcomes
- Showing impact
- Evaluation and evaluability assessment (big task)
- iHub Improvement tools – Evaluating New Models of Care Sept 2017



**Semantics:
evaluate/evaluability,
audit, monitor,
impact assessment...**

- Primary care: national monitoring and evaluation strategy March 2019
www.gov.scot/publications/national-monitoring-evaluation-strategy-primary-care-scotland/pages/6/



SSPC-IF workshop

- Group Work
- Feedback and discussion

Alba Health and Social Care Partnership (HSCP) is situated on the west central coast of Scotland, and has a population of around 80,000 people. The population profile is similar to the rest of Scotland with around 17% aged less than 16 years and around 19% aged 65 years or older.

Alba HSCP contains areas of affluence as well as significant deprivation. Two coastal towns account for just under half its population, which increases during summer months with an influx of holiday makers and seasonal workers. Its landward areas comprise smaller rural areas with farming communities. The rural population tend to be older than Alba HSCP as a whole.

Alba HSCP is served by 1 district general hospital with an acute psychiatric wing that is situated in the outskirts of one of the coastal town. The more remote areas in Alba HSCP are around 20-25 miles from this hospital. Other services include 12 care homes; 15 community pharmacies and 15 GP Practices. Planning and provision of services is overseen by Alba Integrated Joint Board.

A Community Treatment and Care (CTAC) service (CTAC) has been proposed to carry out clinical activities like phlebotomy, injections, dressings, and procedures currently performed in both general practices and hospital clinics.

SSPC-IF workshop: existing frameworks and tools

- Traditional frameworks and models – linear, causal, if-then.
- High theory
- Logic models – inputs, activities, outputs, outcomes, intended impact
- Procedural documents
- Mind-lines (Gabbay & le May 2004)



Each have
their role but...