Designing for Dissemination

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Concept Mapping Results

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Steps in Concept Mapping **1. Prepare Project** One thing that should be done to accelerate the adoption of cancer control research discoveries by health service delivery programs ..focus İS...

Steps in Concept Mapping

1. Prepare

One thing that should be done to accelerate the adoption of cancer control research discoveries by health service delivery programs is... •Researcher

- -Academic research
- -Academic teaching
- •Intermediary
 - -Advocacy
 - -Federal Government Research
 - -Federal Government Service
 - -Local Government
 - -Managed Care
 - -Philanthropy/Funding
 - -State Government
- •Practice
 - -Community based education
 - -Hospital/Clinic
 - -Private Group practice



Steps in Concept Mapping

- Support collaboration between cancer control researchers and researchers examining diffusion of innovations process.
- Design a mechanism that guides systems through the process of customizing the discoveries to their unique circumstances.
- Develop structures to make implementation information and skills available to service providers.
- Encourage research on diffusion processes within the Small Business Innovation Research/Small business Technology Transfer Research projects.
- Identify opinion leaders in health service delivery settings and "detail" the discoveries to them, individually.
- Translate research to health services using new communication technologies (e.g. videoconferences).
- Engage primary care practice based research networks in dissemination research.
- Train community resource people to serve on all panels for grant review, similar to having a consumer advocate role.
- Include cost as a factor in all research discoveries. (Don't design a Cadillac and expect it to work in a rural clinic.)







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This initial map shows all the elements in relation to each other.



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Conceptually *similar ideas* are in *close proximity*

Develop an NCI-CDC-ACS website that makes cancer control research discoveries available to diverse audiences (66). [•] 20[•] 30 • 20[•] 30 • 52 • 16 3 ■ 39 **■** 73 □ 98 □ 33 [□]57_□94 □41 ■68 **2**3 ■ 88 ∎5 **1**0 □ 17 □76 □ 1 **5**2 [•]6[•]2 □49 ²26 □ 34 87 □42 □43 Provide an electronic network or listserv where □ 36□ 56 information and ideas can be shared(18). <u>/ ه</u>روپات 9 تا **□¤2**9 **95** ■83 [□]54_{□86} □3 □ 75 □44 **5**5 □ 60 **9**1 ∎ 51 **7**2 **7**0 82 **6**9 ¹ 50 67 **486**4 ^{II} 35 □79 ■32 ■90 ■ 14 ∎₽3 **6**2

Conceptually *different ideas* are *further apart*.

Make sure the product will be valued by the target populations as it is being developed (vs. after implementation)(34).



The Detailed Ideas are Organized into Themes

Develop research dissemination approaches (e.g. Internet) that include practical adoption advice. (13)

Provide an electronic network or listserv where information and ideas can be shared. (18)

Translate research to health services using new communication technologies (e.g. videoconferences). (40)

Use NIH and CDC web sites and email to announce the availability of products that result from discoveries. (46)

Develop an NCI-CDC-ACS website that makes cancer control research discoveries available to diverse audiences. (66)

Place educational resources on the web and design them to allow organizations to personalize. (74)

Link effective practices via the web by having the description and support for the intervention on line. (80)



The detailed ideas are organized into themes or concepts



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The Concepts are labeled to summarize the detailed ideas



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The ratings show the relative value of each concept.

Importance





Diffusion/Dissemination

Training & Support

Barriers



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The ratings show the relative value of each concept.

Feasibility

Electronic Dissemination

Strategies Diffusion/Dissemination

Dissemination Research Funding

Methods Challenges & Opportunities User Tools & Messages

Research/Practice Partnerships Community Involvement Research/Practice Funding Training & Support

Service Standards



Barriers





Turn up the power and examine the detail



Practitioner v. Researcher Importance



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Practitioner v. Researcher Importance







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Practitioner v. Researcher Feasibility



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Turn up the power and examine the detail











- Expand NIH & Foundation collaborations around the adoption & implementation of evidence-based interventions. (3)
- Have state health departments require the use of evidence-based interventions in Master Settlement Agreement funded tobacco control programs. (4)
- Encourage CMS (HCFA), HRSA, IHS to require the use of evidence-based interventions in their demonstration programs (48)
- Change regulatory/accreditation standards to require proven interventions. (62)
- Include adoption of research discoveries as an expectation of quality improvement programs.
 (69)
- Incorporate evidence-based practice by HRSA community health centers and evaluate results.
 (72)
- Encourage system changes (e.g., payment mechanisms, benchmarks) that encourage the adoption of successful interventions. (79)
- Promote program standards that require evidence-based interventions. (93)





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Electronic Dissemination



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Detailed results are available on the web:

http://www.conceptsystems.com/results/d4d/



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