Factors influencing adaptive implementation of MCSP in four European countries

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Implementation

• Implementation is a planned process of introduction of innovations or changes of proven value, in order to secure a structural position in [...] the health care system” (Hulscher, 2000)

• For implementation of care programs, it is important to adapt the implementation to regional circumstances or context ((Boekholdt 1994, Grol, 2004, Nilsen, 2015)

• To execute this implementation facilitators and barriers that may influence implementation should be considered
Aim and question process evaluation

• **Aim**: to evaluate the process of adaptive implementation of the Meeting Centres Support Programme (MCSP) with the goal to gain insight in conditions for successful implementation of MCSP in different European countries

• **Main questions:**
  – what are facilitators and barriers to implementation of MCSP in Italy, Poland and UK?
  – And are these comparable to those found in the Netherlands?
Methods

• A stepwise procedure was followed to prepare the MCSP in the participating countries
• Using the ‘theoretical model of adaptive implementation’ for data collection and analyses (Meiland et al., 2004, 2005)
• Data collected at three time points during the implementation process:
  – At the start of implementation
  – During the preparation phase
  – At the end of the execution phase
• By means of surveys, interviews, and minutes of the Initiative Groups
Stepwise Action plan

STEP 1: Recruit Initiative Group members, setting timeplan and working groups

STEP 2: Discuss potential facilitators, barriers and solutions

STEP 3: Working groups in action
  - target group
  - elaboration of support programme
  - location requirements and selection
  - personnel
  - financing
  - collaboration protocol
  - public relations

STEP 4: Finalize implementation plans

STEP 5: Signing collaboration protocol

Opening Meeting center
First Meeting Centres in the UK, Italy & Poland
## Model of adaptive implementation

### Influencing Factors: Preconditions

| Characteristics of the innovation | Time and other operational preconditions | Human and financial resources | Organizational conditions |

### Implementation Process

#### Preparation phase
- **Micro level** (user/primary process)
- **Meso level** (interorganizational/social context)
- **Macro level** (health care system, legislation, policy)

#### Execution phase
- **Micro level** (user/primary process)
- **Meso level** (interorganizational/social context)
- **Macro level** (health care system, legislation, policy)

#### Continuation phase
- **Micro level** (user/primary process)
- **Meso level** (interorganizational/social context)
- **Macro level** (health care system, legislation, policy)

(Meiland et al., 2004; 2005)
Participating stakeholders (n=85)

<table>
<thead>
<tr>
<th>Interviews/surveys</th>
<th>Italy (n)</th>
<th>Poland (n)</th>
<th>UK (n)</th>
<th>NL (n)</th>
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<tr>
<td>Total</td>
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</tbody>
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- managers and staff of hospitals, care and welfare organisations, MC
- local organisation/ charity/ municipality
- health insurance companies
- regional/ national level
- (representatives) of persons with dementia/ carers
Main results process evaluation -1

• In the implementation process, facilitators and barriers were found
  – in preconditions of implementation
  – in all phases of implementation (preparation, execution, continuation)
  – at all levels (micro- meso- macro)

• Main facilitators in all countries (also NL):
  – Characteristics of the innovation
  – Good implementation team/ project plan
  – Support from management
  – Good location
  – Enthousiastic and qualified staff
  – PR strategies
  – Good collaborations with other organisations
  – Funding opportunities
Main results process evaluation -2

• Main barriers in all countries
  – Difficulties in collaborations with other organisations
  – Uncertainty regarding long term funding

• Other barriers in less countries, e.g.
  – Difficulties social integration in centre (I, P)
  – Lack of adequate dementia care network (P)
  – Lack of PR activities (time)(UK)
  – Bureaucracy municipality (I)


Van Mierlo et al., (accepted International Psychogeriatrics). Facilitators and barriers to adaptive implementation of the Meeting Centres Support Programme (MCSP) in three European countries; the process evaluation within the MEETINGDEM study.
Conclusions

• During the MEETINGDEM project 13 Meeting Centres were set up in the three participating countries (I, P, UK)

• The stepwise action plan was considered feasible (especially using working groups to divide tasks) and efficacious

• Multi-targeted implementation strategies are recommended for future implementations, focussing a.o. on motivated key figures and qualified staff, support from management, collaboration in the region, mixed funding models

• Implementation guides were developed in each country based on these results
Next steps

- Keep the network of interest (set up during the MEETINGDEM project) informed and provide support to promote further implementation
Next steps

• An international symposium will be organized in the Netherlands
• We will keep our website with information regarding the results, implementation guides, locations of Meeting Centres
  www.meetingdem.eu
• Current and future MEETINGDEM Publications can be found at
  www.meetingdem.eu >publications

Thank you for your attention!
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