

**Outcome Evaluation Framework to Assess Knowledge/Beliefs/Barriers and Impact of KT interventions at the Individual & Organizational levels**

DOMAINS	Outcome measures
<b>STRUCTURE EVALUATION (process of care)</b>	
Clinician/patient knowledge*	<p><u>Quantitative</u></p> <ul style="list-style-type: none"> <li>• Knowledge questionnaire (based on the learning objectives of the KT intervention) to measure change in knowledge regarding a specific content area</li> </ul>
Clinician/patient Attitudes, Barriers, utilization*	<p><u>Survey questionnaires</u></p> <ul style="list-style-type: none"> <li>• <b>Practice Style Trait Questionnaire<sup>1</sup></b>: to identify the practice style trait of clinicians and their overall attitude towards evidence-based practice</li> <li>• <b>Pain Attitudes and Beliefs Scale<sup>2,3</sup></b></li> <li>• <b>Health Care Providers' Pain and Impairment Relationship Scale (HC-PAIRS)<sup>4</sup></b></li> <li>• <b>E-Base questionnaire incl. EPIC Scale<sup>5</sup></b>: to measure clinicians' belief in their ability to implement EBP, known as EBP self-efficacy.</li> <li>• <b>Barriers to Research Utilization scale</b> (BARRIERS; Funk et al., 1991; Carson &amp; Plonczynski, 2008 review)</li> <li>• <b>Evidence-Based Practice Questionnaire (Upton &amp; Upton, 2006)</b></li> <li>• <b>Evidence-Based Practice Attitude Scale (EBPAS)</b> (Aaron 2004, 2007, 2010, 2012; Patterson 2014)</li> <li>• <b>Evidence-Based Practice Attitude and Utilization Survey (EBASE)</b> (Leach 2008)</li> <li>• <b>Theoretical Domain Framework (TDF)</b> (Huijg 2014)</li> <li>• <b>Communication Skill</b> (Baig 2009)</li> <li>• <b>SIROP – Engagement</b></li> </ul> <p><u>Qualitative</u></p> <ul style="list-style-type: none"> <li>• <b>Theoretical Domains Framework (TDF)<sup>6</sup></b>: to identify clinicians' beliefs using interviews or focus groups (Michie 2005; Cane 2012; TDF Series 2012)</li> </ul>
Organizational	<p><u>Survey questionnaires</u></p> <ul style="list-style-type: none"> <li>• <b>Context Assessment Index (CAI)</b> (McCormack 2009)</li> <li>• <b>Organizational readiness to change assessment (ORCA)</b> (Helfrich, 2009)</li> <li>• <b>Stage of Implementation Completion (SIC)</b> (Chamberlain 2011)</li> </ul> <p><u>Framework</u></p> <ul style="list-style-type: none"> <li>• <b>Consolidated Framework for Implementation Research (CFIR)</b> (Damschroder, 2009)</li> <li>• <b>RE-AIM</b> (reach, efficacy, adoption, implementation and maintenance) (<a href="http://RE-AIM.org">http://RE-AIM.org</a>)</li> </ul>

Clinician practice behaviours*	<p><u>Quantitative</u></p> <ul style="list-style-type: none"> <li>• Electronic Health Records (EHRs)</li> <li>• Chart audit of clinician practices</li> </ul> <p><u>Qualitative</u></p> <ul style="list-style-type: none"> <li>• <b>PERFECT Tool<sup>3</sup></b>: standardized semi-structured questions regarding change and reasons for change in clinicians' practice behaviours</li> <li>• Clinical vignettes (behavioural simulation: proxy measure)</li> </ul>
<b>PROCESS EVALUATION</b>	
Program Logic model or Proceed-Precede model	
<b>OUTCOME EVALUATION</b>	
Patient outcomes*	<p><u>Quantitative</u></p> <ul style="list-style-type: none"> <li>• PROMIS : <a href="http://www.nihpromis.org/?AspxAutoDetectCookieSupport=1">http://www.nihpromis.org/?AspxAutoDetectCookieSupport=1</a></li> <li>• AHRQ : <a href="http://www.qualityindicators.ahrq.gov/">http://www.qualityindicators.ahrq.gov/</a></li> <li>• Field J. Care Response8: Free, pragmatic system to help practices gather and report clinical outcome and patient satisfaction information <a href="https://www.care-response.com/CareResponse/home.aspx">https://www.care-response.com/CareResponse/home.aspx</a></li> <li>• Any outcome measure relevant to the content area (e.g. Oswestry, NDI, VAS scores, etc.)</li> <li>• Patient Satisfaction Questionnaire (from RAND Health)</li> </ul> <p><u>Qualitative</u></p> <ul style="list-style-type: none"> <li>• Semi-structured interviews</li> </ul>

Framework adapted from Edith Strauss Rehabilitation Research Project (in Knowledge Translation). School of Physical and Occupational Therapy, McGill University

**\*Ideally these outcome measures should be used at baseline and at post-intervention, but can also be administered during the intervention**

1. Green, LA, Gorenflo, DW, Wyszewianski, L. Validating an instrument for selecting interventions to change physician practice patterns: A Michigan Consortium for Family Practice Research study. *Journal of Family Practice*. 2002 Nov; 51(11): 938-942.

2. Mutsaers JH1, Pool-Goudzwaard AL2, Ostelo RW3, Peters R4, Koes BW5, Verhagen AP6. The psychometric properties of the PABS-PT in neck pain patients: A validation study. *Man Ther*. 2014 Jan 18. pii: S1356-689X(13)00216-6.

3. Mutsaers JH1, Peters R, Pool-Goudzwaard AL, Koes BW, Verhagen AP. Psychometric properties of the Pain Attitudes and Beliefs Scale for Physiotherapists: a systematic review. *Man Ther*. 2012 Jun;17(3):213-8. doi: 10.1016/j.math.2011.12.010. Epub 2012 Jan 23.

4. Ostelo RW, Stomp-van den Berg SG, Vlaeyen JW, Wolters PM, de Vet HC. Health care provider's attitudes and beliefs towards chronic low back pain: the development of a questionnaire. *Man Ther* 2003;8:214e22.

5. Salbach, N. M. and Jaglal, S. B. (2011), Creation and validation of the evidence-based practice confidence scale for health care professionals. *Journal of Evaluation in Clinical Practice*, 17: 794–800. doi: 10.1111/j.1365-2753.2010.01478.x

*Evidence based practice attitude scale (EBPS)*

•Aarons GA, Cafri G, Lugo L, Sawitzky A. Expanding the domains of attitudes towards evidence-based practice: the evidence based practice attitude scale-50. *Adm Policy Ment Health*. 2012 Sep;39(5):331-40. doi: 10.1007/s10488-010-0302-3.

•Patterson Silver Wolf Adelv Unegv Waya DA, Dulmus CN, Maguin E, Fava N. Refining the Evidence-Based Practice Attitude Scale: An Alternative Confirmatory Factor Analysis. *Soc Work Res*. 2014 Mar;38(1):47-58.

### *Evidence-Based Practice Attitude and Utilization Survey (EBASE)*

- Leach MJ, Gillham D. Evaluation of the Evidence-Based practice Attitude and utilization Survey for complementary and alternative medicine practitioners. *J Eval Clin Pract.* 2008; 14(5):792-8.

### *Theoretical Domain Framework (TDF)*

Theoretical Domains Framework for behaviour change research: <http://www.implementationscience.com/series/TDF>

- Michie S, Johnston M, Abraham C, Lawton R, Parker D, Walker A: 'Psychological Theory' Group. Making psychological theory useful for implementing evidence based practice: a consensus approach. *Quality & Safety in Health Care* 2005, 14:26 - 33.
- Cane J, O'Connor D, Michie S. Validation of the theoretical domains framework for use in behaviour change and implementation research. *Implementation Science.* 2012;7(1):37. PubMed PMID: doi:10.1186/1748-5908-7-37.
- Huijig JM, Gebhardt WA, Dusseldorp E, Verheijden MW, van der Zouwe N, Middelkoop BJ, Crone MR. Measuring determinants of implementation behavior: psychometric properties of a questionnaire based on the theoretical domains framework. *Implement Sci.* 2014 Mar 19;9:33. doi: 10.1186/1748-5908-9-33.
- Huijig JM, Gebhardt WA, Crone MR, Dusseldorp E, Pesseau J. Discriminant content validity of a theoretical domains framework questionnaire for use in implementation research. *Implement Sci.* 2014 Jan 15;9:11. doi: 10.1186/1748-5908-9-11.

### *Communication Skill*

- Baig LA, Violato C, Crutcher RA. Assessing clinical communication skills in physicians: are the skills context specific or generalizable. *BMC Medical Education* 2009, 9:22

7. Menon A, Cafaro T, Loncaric D, Moore J, Vivona A, Wynands E, Korner-Bitensky N. Creation and validation of the PERFECT: a critical incident tool for evaluating change in the practices of health professionals. *Journal of Evaluation in Clinical Practice.* 2010 Dec; 16(6) 1170-1175. Refer to StrokEngine Assessment for more details on PERFECT: [www.strokingengine.ca](http://www.strokingengine.ca)

### **Reviews:**

Chaudoir, S. Dugan AG. Barr CHI. Dissemination Measurement Compendium: A Systematic review provider, patient, and implementation. Review of structural, organizational innovation level measures. Connecticut Institute for Clinical and Translational Science. *Implementation Science* 2013, 8:22 <http://www.implementationscience.com/content/8/1/22>

Bishop A, Thomas E, Foster NE. Health care practitioners' attitudes and beliefs about low back pain: a systematic search and critical review of available measurement tools. *Pain* 2007;132(1e2):91e101.

### **Organizational**

Context Assessment Index (CAI). McCormack B, McCarthy G, Wright J, Slater P, Coffey A. Development and testing of the Context Assessment Index (CAI). *Worldviews Evid Based Nurs* 2009;6(1):27-35. doi: 10.1111/j.1741-6787.2008.00130.x. Epub 2009 Jan 16.

Organizational readiness to change assessment (ORCA): Helfrich CD, Li YF, Sharp ND, Sales AE. Organizational readiness to change assessment (ORCA): development of an instrument based on the Promoting Action on Research in Health Services (PARIHS) framework. *Implement Sci* 2009 Jul 14;4:38. doi: 10.1186/1748-5908-4-38.8.

Stage of Implementation Completion (SIC): Chamberlain P, Brown H, Saldana L. Observational measure of implementation progress in community based settings: The Stages of implementation completion (SIC). *Implementations Sci* 2011, 6:116.

<http://www.implementationscience.com/content/pdf/1748-5908-6-116.pdf>

Damschroder L, Aron D, Keith R, Kirsh S, Alexander J, Lowery J. Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implementation Sci* 2009;4:50. PubMed PMID: doi:10.1186/1748-5908-4-50.

### **Patient outcomes**

- PROMIS : <http://www.nihpromis.org/?AspxAutoDetectCookieSupport=1>
- AHRQ : <http://www.qualityindicators.ahrq.gov/>
- Field J. Care Response: <https://www.care-response.com/CareResponse/home.aspx>