

## USE – Case Example

- Adapting the Dissemination of Evidence-based Policy (DEBP; Dobson et al., 2012) framework to guide a mixed methods study evaluating the impact of varied strategies to increase knowledge and use of best practices to improve patient outcomes.
- The timeline for the funded project included an objective to use an implementation science model to guide the design of measures and procedures for the study to evaluate how evidence-based policy impacted nursing practice and ultimately the key patient outcomes identified for the study. This model was considered to be a good fit for many reasons including the fact that it contained many core D&I concepts and depicted the sequential process for both procedures: passive dissemination and active dissemination (AKA implementation). This distinction captured the options that health care organizations face every day – disseminating evidence-based practice changes using passive educational strategies because they are easily carried out to push content with minimal time, effort, and cost vs. engaging units to engage in active implementation with ongoing maintenance.
- We used the model for all stages of the three year project. It was included in our aims, our design, our measures, evaluation, and analyses. Most importantly – the model was used to interpret the findings when the results did not occur as predicted. We also circled back to recommend further adaption of the model based on the evidence (refer to Adaptation example).
- We used the model to guide all aspects of our study. This model existed in literature as a conceptualized model without any empirical testing. The model adaptations that were proposed supported the team to identify and clarify concepts, and select variables to capture unit level, staff-level, and patient-level metrics to inform the study.