How the Consolidated Framework for Implementation Research Can Strengthen Findings and Improve Translation of Research Into Practice: A Case Study

Nadja Klafke, PhD, MA, Cornelia Mahler, PhD, MA, RN, Cornelia von Hagens, MD, Michel Wensing, PhD, MSc, Andreas Schneeweiss, MD, Andreas Müller, MD, MHBA, Joachim Szecsenyi, MD, MSc, and Stefanie Joos, MD

Klafke is a post-doctoral researcher and Mahler is a senior researcher, both in the Department of General Practice and Health Services Research at Heidelberg University Hospital; von Hagens is a senior physician in the Department of Gynecological Endocrinology and Reproductive Medicine at Heidelberg University Women’s Hospital; Wensing is a professor and deputy head in the Department of General Practice and Health Services Research at Heidelberg University Hospital; Schneeweiss is the head of the Division of Gynecologic Oncology at the National Center for Tumor Diseases at Heidelberg University Hospital; Müller is the director of the Women’s Clinic at the Community Hospital of Karlsruhe; Szecsenyi is a professor and head of the Department of General Practice and Health Services Research at Heidelberg University Hospital; and Joos is a professor and head of the Institute of General Practice and Interprofessional Care at Tuebingen University Hospital, all in Germany.

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Klafke and Mahler shared first authorship and supervised the data collection and data analysis and provided statistical support. All authors contributed to the conceptualization and design and the manuscript preparation.

Klafke can be reached at nadja.klafke@med.uni-heidelberg.de, with copy to editor at ONFEditor@ons.org.

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Purpose/Objectives: To answer how the planned intervention was performed in routine care, which factors supported or distracted from its implementation, and how key organizational structures have been built and sustained.

Research Approach: Mixed-methods process evaluation.

Setting: Two German outpatient cancer clinics.

Participants: Purposive sampling of 297 recruited patients with gynecologic cancer, their treating oncology nurses, and their interprofessional healthcare team, and the clinical stakeholders of two different outpatient cancer clinics.

Methodologic Approach: Guided by the Consolidated Framework for Implementation Research (CFIR), five distinct interrelated substudies were designed to evaluate intervention characteristics, inner and outer settings, characteristics of the individuals involved, and the process of implementation. Quantitative and qualitative data will be analyzed separately and then integrated into a framework analysis.

Findings: Oncology nurses found the regular process analytic sessions to be beneficial, not only for sharing their experience, but also for experiencing social support and social connectedness.

Interpretation: Key implementation facets of the nurse-led intervention will be examined systematically. The results can guide future implementation processes, which need to be tailored to interested facilities.

Implications for Nursing: The CFIR framework is well established but not yet widely applied in supportive treatment research. The current study aims to apply and combine this framework with the concept of intervention fidelity.

A lthough randomized, controlled trials (RCTs) provide the lowest risk of bias in assessment of treatment outcomes, they have a number of important limitations. They offer only data on predefined and measurable outcomes and do not explain how and under which social and process-oriented circumstances the intervention works, or which contextual factors are essential for the sustainment of intervention effects. Therefore, process evaluations are strongly recommended when comprehensively evaluating complex interventions (Richards & Hallberg, 2015) to understand the mechanisms through which the intervention achieves its outcomes (Grant, Treweek, Dreischulte, Foy, & Guthrie, 2013; Medical Research Council, 2006). Accompanying research is particularly important in multicenter trials in which the intervention may have been implemented in different ways (Grant, Dreischulte, Treweek, & Guthrie, 2012; Grant et al., 2013). Understanding how the components of the intervention and the context vary across sites can assist in interpreting differences and similarities in results.