

## CONFERENCE ABSTRACT

### **We know what to do, but how do we do it? A metanarrative review of implementation frameworks to guide the iCOACH project**

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**Introduction:** An abundance of studies have investigated the many influences on the implementation of healthcare aimed at bridging the gap between recommended practice, what healthcare consumers want and need, and what they actually receive. Yet it is still not well known which implementation approaches work best in the use of knowledge, and the adoption and perpetuation of new ways of providing care in community-based settings. The metanarrative review will purposively inform implementation in the third phase of a programme of research, implementing integrated care for older adults with complex health needs (iCOACH) in New Zealand and Canada.

**Methods:** This work reviewed what is known about implementation that may be suitable to guide the scaling up and evaluation phase of iCOACH. Metanarrative review methods were applied to systematic and narrative reviews of literature on implementation frameworks, theories and strategies. We synthesised heterogeneous findings in a way that informs the practice of implementation.

**Results:** Thirty-five systematic and narrative reviews met our inclusion criteria and were appraised, summarised, and qualitatively analysed. The various assumptions, worldviews and findings represented in the literature were subjected to high level analysis and interpretation that identified five metanarratives concerning the constructs, influencing factors, frameworks, and the effectiveness of interventions and strategies employed in implementation.

**Discussion:** A wide range of people have a stake in how to implement what works best and matters most for older adults with chronic health care problems in various community-based settings, not least consumers themselves. We call for collaborative adaptation with stakeholders, most importantly the person receiving care and their family in the implementation of a new model.

**Conclusions and lessons learned:** There is still no 'silver bullet' in implementation science in spite of abundant primary and secondary studies. People- and relationship-centred care is fundamental to integrated, community-based care at all levels in the broader health care delivery system. Yet many implementation theories and frameworks neglect these important considerations. All phases of implementation of a new model of care call for collaborative adaptation with stakeholders, the most important being the person receiving care in terms of what matters most to them.

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**Limitations:** While our search strategies were extensive we cannot guarantee that we located every systematic or narrative review on this topic.

**Suggestions for future research:** Participatory research methods and realist evaluation approaches informed by this metanarrative review is required of the implementation of a new model of integrated, community-based care for older adults with chronic health problems to establish what has worked best, for whom and how.

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**Keywords:** implementation; chronic care; community-based; older adult

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