

Implementation of the National Clinical Programme in Diabetes: a Realist Evaluation



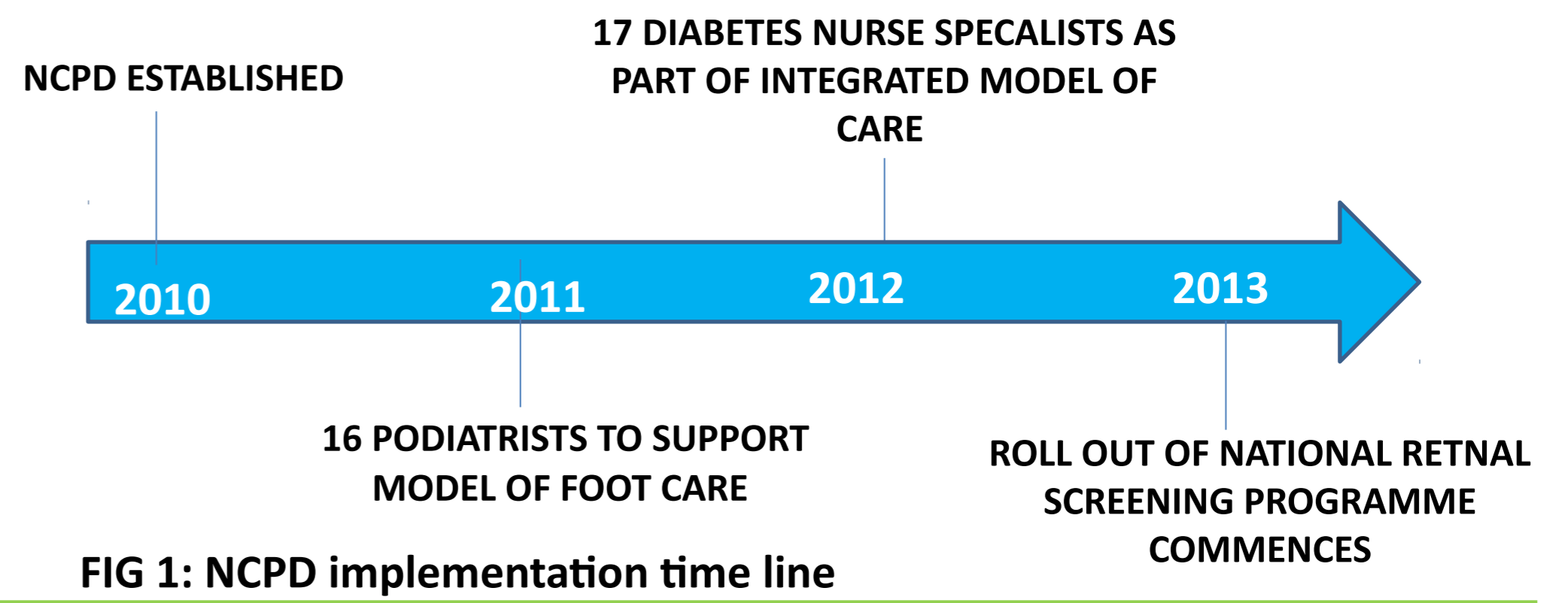
M.L. Tracey¹, S.M. Mc Hugh¹, C. Flannery¹, C.M. Buckley¹, P.M. Kearney¹

¹Dept. of Epidemiology & Public Health, University College Cork, Cork, Ireland.



BACKGROUND

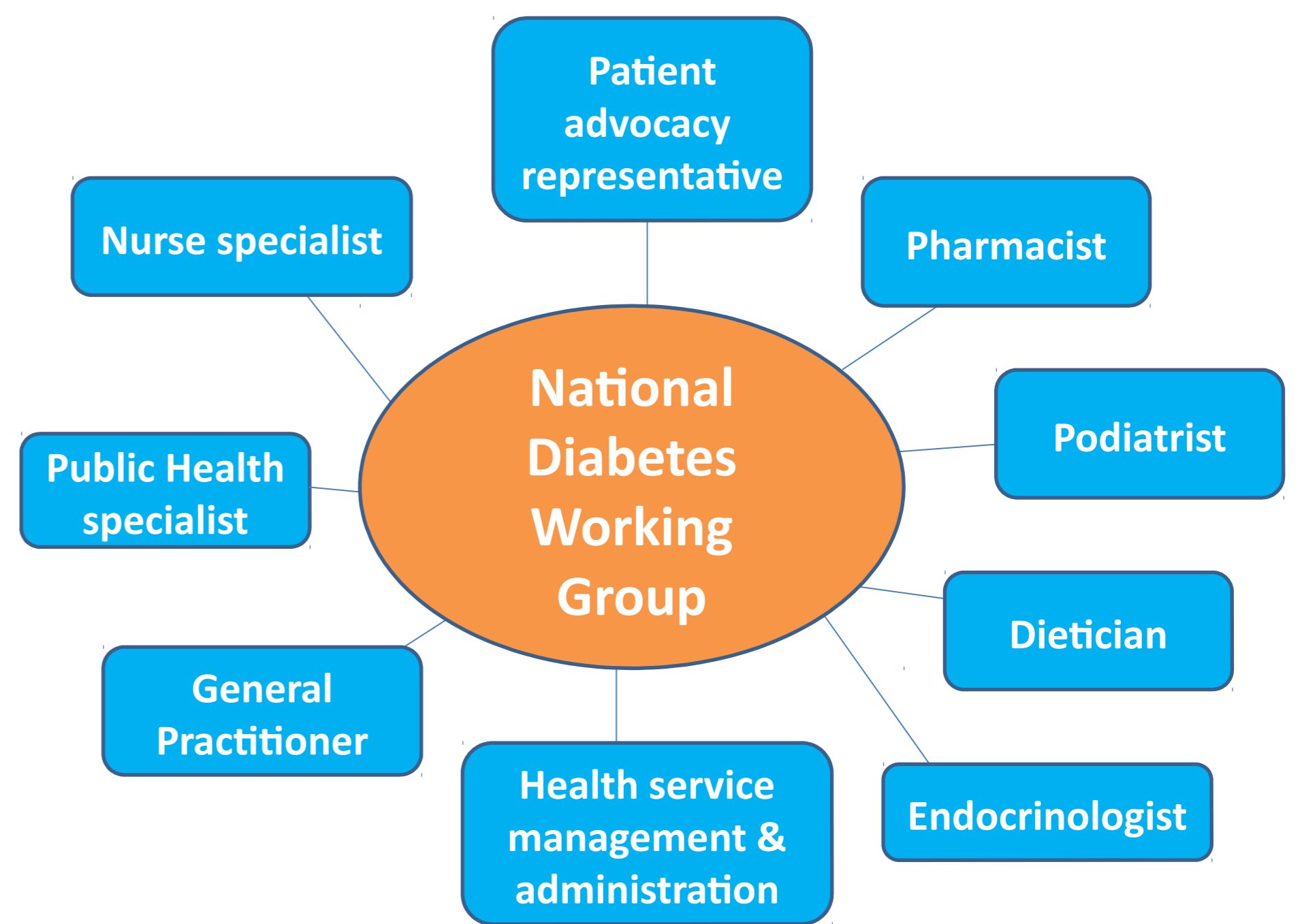
The National Clinical Programme for Diabetes (NCPD) was established to standardise the delivery of services, improve the quality of care and health outcomes for patients with diabetes. This will be achieved through the implementation of various interventions (Fig 1). Our aim is to evaluate the ongoing roll out of the NCPD, using a realist evaluation approach, to ascertain the context and mechanisms which have facilitated or hindered implementation.



STAGE 1: DEVELOPING PROGRAMME THEORY

Methods

- Design:** qualitative study using semi-structured interviews
- Sampling:** purposive sampling selected all current members of the national diabetes working group (Fig 2). Additional key stakeholders were identified by snowball sampling.
- Recruitment:** invitation letters & information sheets sent to all stakeholders (July-Sept 2014).
- Data collection:** interviews were carried out with a pre-piloted topic guide. All interviews were recorded & transcribed verbatim.
- Data analysis:** Framework approach using Nvivo software for data management. Initial team meetings to clarify codes. Preliminary analysis using multiple coders: open coding of two interviews to define and refine coding of context, mechanisms and outcomes.



STAGE 1 PRELIMINARY RESULTS

- 18 interviews (45-70 minutes) with multi-disciplinary stakeholders.
- Figure 3 illustrates some context, mechanisms & outcomes that have emerged.

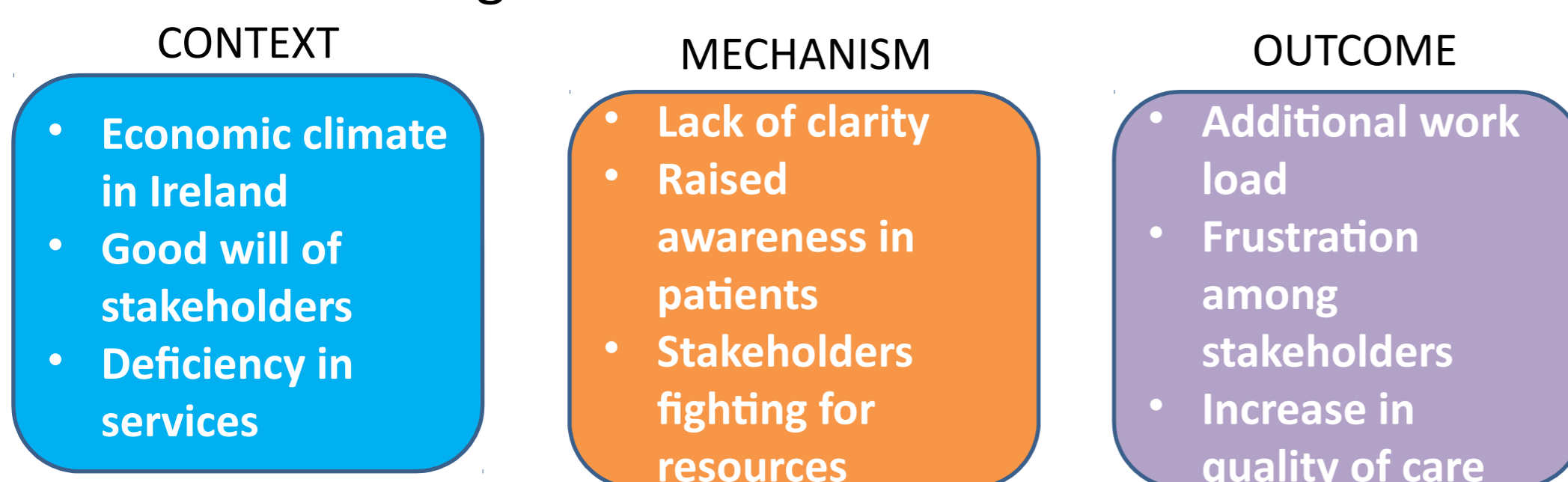


FIG 3: Example of codes for context, mechanisms and outcomes

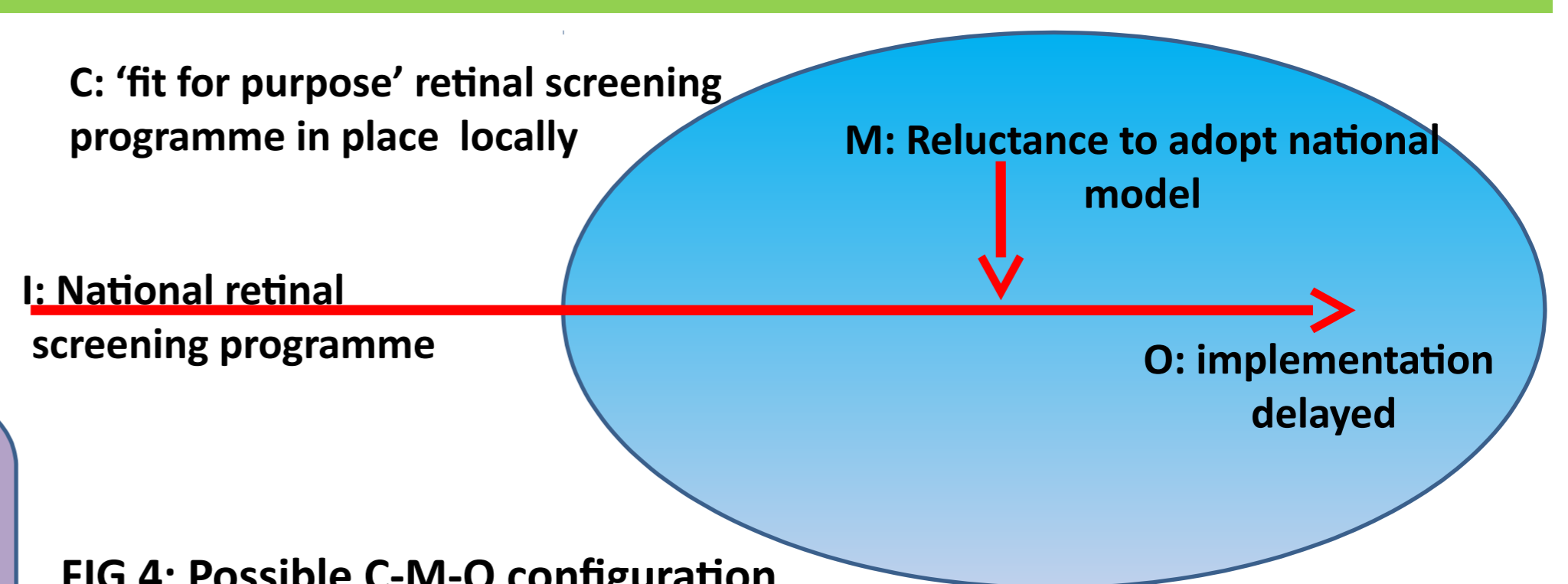


FIG 4: Possible C-M-O configuration

Possible programme theory: national screening programme (I) introduced into an area with adequate existing services (C) there was a reluctance to adopt the new model (M) which delayed the implementation of the new national service in that area (O).

NEXT STEPS

Stage 2: test our programme theories

- Multiple case study design (n=3): with each intervention as a single case.
- Purposive sampling of stakeholders involved in the implementation of each intervention.
- Semi-structured interviews, focus groups, surveys, routine audit data will be used to build a case description & test hypothesis from stage 1.

Stage 3: refine our programme theories

- Review analysis from stage 2 to refine CMO configurations and generate explanations of how, when and why the NCPD has worked or not worked.

CHALLENGES

- Difficulty with data management across research team using Nvivo.
- Developing coding framework : identifying mechanism & linking CMOs.
- How to communicate findings to policy makers & programme managers?

For more information please contact:
Marsha Tracey (m.tracey@ucc.ie)