The Case for Implementation
Science Research
Closing the Evidence to Practice Gap

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Disclosures

Nothing to Disclose

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Mission of the ACS Cancer Programs

Founding Principle

...to reduce the suffering and mortality from cancer by an organized application of $knowledge\ that\ is$ already available

Mission of the ACS Cancer Programs

...to help reduce quality gaps by promoting the **uptake** of **evidence-based practices**

...from bedside to practice **faster and smarter**

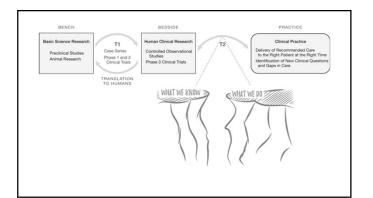
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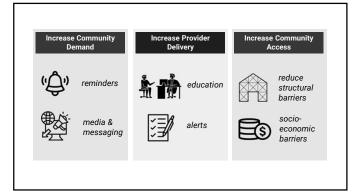
What is Implementation Science?

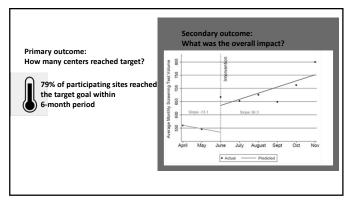


Methods to promote uptake of evidence-based practices to improve quality and effectiveness

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79% of participating sites reached target goal within 6-month period	21% of <i>participating</i> sites did not reach goal
Return to Screening 749 Programs Enrolled 814 PDSA Projects >700,000 Additional Screens	Uncertain of which projects worked or didn't Generalizability unknown Cost unknown Sustainability unknown

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When can implementation science support QI?



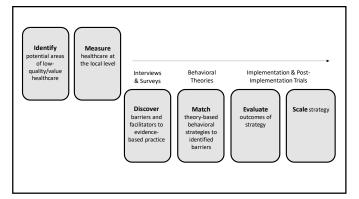




PERFORMANCE GAP

 \ldots many (if not most) of the QI challenges we face every day

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Implementation Research Committee	
Develop the process/infrastructure to support implementation	
projects/trials throughout the ACS Cancer Programs. • Execute/oversee priority implementation projects for the ACS CRP.	
 Educate the Cancer Program community on the role of implementation science research. 	
Build a community of cancer-focused IS researchers.	
from bedside to practice faster and smarter	
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Key Takeaways	
Implementation science research is consistent with	
 the mission of the ACS Cancer Programs. An IS approach can help support many, if not most, of our QI projects. The ACS Cancer Program is ideally suited to leverage IS methods to enhance current QI efforts. 	
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Thank you	