

APH - Amsterdam Center for Implementation Science AmsCIS

Update October 2023

Purpose of this document

This working document is to formulate the mission, vision, rationale, activities, and structure for the Amsterdam Center for Implementation Science (AmsCIS), launched on April 13 2021, embedded in the Amsterdam Public Health research institute.

The document addresses the following topics:

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Introduction

As a research institute of Amsterdam UMC, VU and UvA, Amsterdam Public Health (APH) is an important link between clinical care, scientific research and the extramural care practice and policy in the Amsterdam metropolitan area, as well as beyond Amsterdam (both national and international). Much of the research that is carried out within the institute potentially has a direct impact on public health practice including quality of care, policy, and society. Like other knowledge institutions, APH is expected to contribute to knowledge in line with societal challenges and to ensure that this knowledge is used in public health practice and policy and beyond.^{1,2,3,4} Yet, the gap between academic settings and public health practice and policy is often large, resulting in a lack of uptake of evidence and substantive change. To provide APH researchers with state-of-the-art knowledge on this matter and to better equip them with skills and tools needed to bridge this gap, the Amsterdam Center for Implementation Science (AmsCIS) was initiated.

Vision

AmsCIS envisions effective and efficient integration and embedding of **evidence-based practices** in Public Health **through evidence-informed** implementation.

Mission

To realise this vision, AmsCIS will see it as its mission to:

- Provide APH-researchers with knowledge, skills, and tools about implementing research-based knowledge into practice and policy;
- Increase awareness among APH researchers of the importance of effective implementation and sustainable uptake of research-based knowledge into practice and policy throughout the APH research lifecycle (as depicted in figure 2);
- Contribute to state-of-the-art research in the field of Implementation Science and become a leading research center on implementation science in Europe.

Rationale

Within APH, we approach implementation challenges along three thematic lines:

- 1) Integrate 'implementation-thinking' throughout the whole research lifecycle;
- 2) More effective implementation of research-based knowledge into better policies and practices;
- 3) Advancing the scientific study of implementation methods, strategies, outcomes, mechanisms and theories.

Implementation throughout the research lifecycle

The first theme focusses on taking implementation into account throughout the research lifecycle. Studies consistently show that the likelihood of successful implementation can be increased substantially by identifying and addressing implementation challenges throughout the research lifecycle. Development and evaluation studies should therefore pay more attention to contextual elements in the early design phase of research that play a role at a later stage in implementation

¹ Gezondheidsraad. (2016). Onderzoek waarvan je beter wordt. Een heroriëntatie op umc-onderzoek. Den Haag: Gezondheidsraad

² Gezondheidsraad. (2000). Van implementeren naar leren. Het belang van tweerichtingsverkeer tussen praktijk en wetenschap in de gezondheidszorg

³ NFU. (2019). Onderzoek & Innovatie met en voor de gezonde regio. Think globally, act locally. Utrecht: NFU

⁴ NWO (2018). Verbinden van wetenschap en samenleving. Den Haag: NWO

and upscaling, such as the potential reach of the intervention, barriers and facilitators that play a role in implementation, and stakeholder engagement, and differences between the research setting and the real world public health setting.⁵ Within APH, this provides the opportunity to make APH researchers more aware of all research possibilities within the research lifecycle that contribute to successful implementation. The figure below provides suggestions of implementation research activities that are relevant within each step of the research lifecycle.

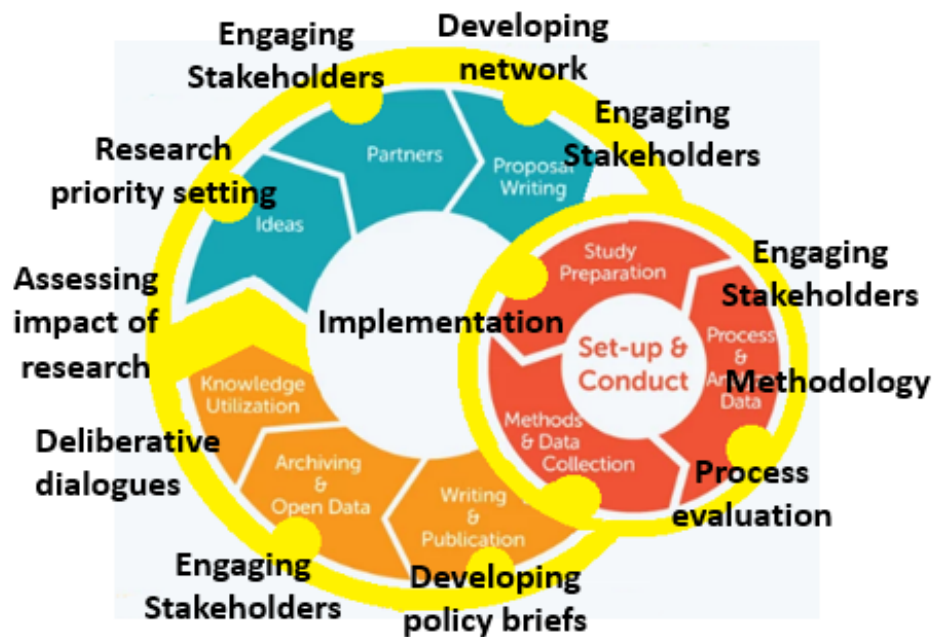


Figure 1 - Implementation research activities conducted throughout the APH research lifecycle

Implementing research findings into policy and practice

The second theme starts with existing research-based knowledge and aims to implement this more effectively. In the health sector, innovations are developed and studied at unprecedented rates. Numerous trials are conducted including proof-of-concept studies, trials aimed at elucidating working mechanisms, studies of efficacy and effectiveness of novel interventions for prevention, diagnosis, treatment and management of health and health disorders. However, the implementation of the results of research findings into policies, practices and daily routines remains a major challenge^{6,7}. While implementation science has advanced significantly and has yielded useful tools, approaches and insights, implementation challenges continue to exist throughout the health sector.⁸ For APH, the continuing challenges imply that researchers need advanced knowledge, skills and tools to better facilitate translation of research into practice and policy.

⁵ Glasgow, R. E., Lichtenstein, E., & Marcus, A. C. (2003). Why don't we see more translation of health promotion research to practice? Rethinking the efficacy-to-effectiveness transition. *American Journal of Public Health*, 93(8), 1261-1267. doi:10.2105/ajph.93.8.1261

⁶ Grol R, Grimshaw J. From best evidence to best practice: effective implementation of change in patients' care. *The Lancet*. 2003;362:1225-30; Institute of Medicine (US) Committee on Quality of Health Care in America. *Crossing the Quality Chasm: A New Health System for the 21st Century*. Washington (DC): National Academies Press (US); 2001;

⁷ Grol R, Wensing M, and Eccles M. *Improving Patient Care: The Implementation of Change in Clinical Practice*. Grol R, Wensing M, Eccles M, Davis D, editors. eweb:280905. Oxford, UK: John Wiley & Sons, Ltd; 2005.

⁸ Koorts, H., Naylor, P. J., Laws, R., Love, P., Maple, J. L., & Nassau, F. v. (2020). Why we don't see more translation of physical activity and nutrition research from academia into practice? An international perspective on Dissemination and Implementation (D&I) research. *International Journal of Behavioral Nutrition and Physical Activity*.

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Advancing the scientific study of methods, strategies, outcomes, mechanisms and theories for and of implementation

The third theme focusses on contributing to the field of Implementation Science with state-of-the-art research by becoming an anchor point for implementation research that is conducted within APH. During the past decades, many models, frameworks, and theories have been developed⁹. Yet there are still many under-researched topics¹⁰, such as de-implementation, scaling-up, measurement of implementation outcomes, mechanisms of implementation strategies, and the complexity of context and (learning) systems. Similar to the diversity in APH's research programmes, Implementation Science is an interdisciplinary field of research linking other scientific disciplines, such as organisational science, public administration, (medical) sociology, science and technology studies, systems science, and organizational psychology. Consolidating insights from these diverse fields will help to advance Implementation Science in the health sector in general as well as specifically in Public Health. As such, in-depth knowledge of and experience with implementation processes is relevant for the APH research community and beyond. Furthermore, integrating insights from implementation science and translating them into generalisable and practical tools may provide a unique opportunity for advancing the field and establishing APH as a leading institute addressing the full innovation cycle ranging from proof-of-principle, efficacy and effectiveness research, to applied implementation science.

Core activities

To achieve the mission and realise our vision, AmsCIS will engage in the following activities:

- Facilitate networking and sharing experiences with implementation research;
- Educate: equipping researchers with knowledge and skills in implementation research;
- Initiate and conduct implementation research;
- Stimulate local, national and international collaboration;
- Agenda setting & lobby.

AmsCIS will not take a prominent role in advising practical implementation projects. Although there is a great need in advice, guidance and reflection on practical implementation projects in the APH community and associated partners, the target audience of AmsCIS are researchers involved in studying implementation related questions and processes. For this reason, various ways to sustainably establish a dedicated implementation support office or expertise center are currently explored.

The core activities are realised through the following (recurring) tasks. A detailed planning is included in Appendix 1.

Facilitate networking and sharing experiences

- Grow and sustain a network of APH-researchers with an interest in implementation
- Organize four networking events, including 'yes we can', journal clubs and topical sessions
- Synthesise implementation research carried out within APH and identify strengths and opportunities for improvement;
- Sustain an online [AmsCIS Knowledge Hub](#) with information about implementation research and related topics.

⁹ Nilsen, P. (2015). Making sense of implementation theories, models and frameworks. *Implementation Science*, 10. doi:10.1186/s13012-015-0242-0

¹⁰ Driessen & van Nassau, (2022), Kennisagenda implementatie, i.o.v. ZonMw en Nederlands Implementatie Collectief

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Educate & teach

- Provide a comprehensive teaching programme with various relevant modules that can be followed as needed on the following topics
 - Introduction to implementation research and obtaining funding;
 - Stakeholder management;
 - Determinants and implementation strategies;
 - Implementation process evaluation and logic models;
 - Sustaining the implementation and scaling-up;
 - De-implementation.
- Maintain an overview of external Implementation Science courses and post-graduate education programs.
- Organize occasional thematic webinars (where possible combined with networking events; see above).

Initiate and conduct implementation research

- Provide an anchor point and go-to place for APH researchers who have an interest and are engaged in implementation research;
- Stimulate APH researchers to include implementation studies in their research;
- Engage in relevant fundamental and experimental (ie. beyond descriptive applied research) implementation science projects on state-of-the-art topics, such as mechanisms of scaling up, methods for strategy matching and methodological innovation, including validation of implementation outcome measures.

Stimulate local, national and international collaboration

- Represent APH and UMC Amsterdam in relevant networks
- Maintain collaboration with the Nederlands Implementatie Collectief (NIC), in which Amsterdam UMC and APH are actively participate;
- Expand collaboration with networks and consortia, such as the European Implementation Collaborative (EIC, Europe), Global Implementation Collaborative (GIC, USA), the Society for Implementation Research Collaboration (SIRC, USA), and other national collaborations;
- Stimulate and engage in collaboration with national and international research consortia, including Academic Collaborative Centers, and projects funded by Horizon Europe, or other relevant initiatives.

Agenda setting & lobby

- Internal: Continuous lobby for the importance of implementation (with APH directors, but also (indirectly) with the directors of Amsterdam UMC, VU and UvA (as parent organizations of APH) to secure the (future) embedding of AmsCIS and its resources needed to thrive
- External: liaise (low-key and through existing relations and network) with decision makers and policy makers such as ministry of Health, Welfare and Sport, NWO and ZonMw, NWO, KWF, Dutch Healthcare Institute (ZIN), and other national and regional stakeholders;
- Where relevant and opportune, publish viewpoints or white papers on topics such as the academia-practice gap and relevance of implementation research, and presenting APH-AmsCIS to the wider scientific community.

Communication

Clear, concise and timely communication is essential for every collaboration to be successful. AmsCIS will facilitate this in various ways:

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- Online presence through a [dedicated area](#) within the APH website, www domain registrations www.AmsCIS.nl / www.AmsCIS.com linking to that area.
- Online knowledge hub in the above-mentioned dedicated website area
- A recurring implementation newsletter to APH members (mailing list) consisting of a
 - A digital newsletter with various in-depth articles and links to interesting resources (2 x per year)
 - A short newsflash with relevant updates on events, funding opportunities and other implementation related news (2 x per year)
- Social media (e.g. LinkedIn) expression of for example PR for events takes place through and on behalf of personal accounts of AmsCIS members.
- Management board members have access to a dedicated SharePoint site hosted by APH as working area and for storing and archiving relevant documents.

Positioning in APH and governance

AmsCIS is embedded in the Amsterdam Public Health research institute. It is a cross-cutting center of expertise that is horizontally positioned in relation to the vertical research programs, and is regarded as a theme relevant to all APH research programs.

Membership of the AmsCIS community is open and free-of-charge to all APH researchers. Researchers from other Amsterdam UMC institutes can become a member and participate in AmsCIS' activities. Researchers can sign up through the website or by email to become an AmsCIS member and be informed and involved in the AmsCIS activities.

The daily and operational management of AmsCIS is governed by a Management Board. The Management Board is supported by an Advisory Committee that provides solicited and unsolicited advice on strategic directions of AmsCIS.

Managing Board

Members of the managing board have the responsibility and ambition to realise AmsCIS and its various activities. The group consists of chair and a number of working group leaders who are each initiator or maintainer of a specific focus area of AmsCIS. As a point of departure, the board members sign up for a period of three to five years. The roles including chair are periodically rotated amongst AmsCIS managing board members. Board members take seat on a voluntary basis. Current members are:

Name	Affiliation	Role
Femke van Nassau	Public and Occupational Health, Amsterdam UMC, APH Health Behaviors & Chronic Diseases	Chair
Andrea Thoosen	Public and Occupational Health, Amsterdam UMC, APH Quality of Care	Secretariat
Christiaan Vis	Public and Occupational Health, Amsterdam UMC, APH Health Behaviors & Chronic Diseases; Clinical, Neuro-, & Developmental Psychology, FGB VU, APH Mental health;	Strategic directions
Nina Zipfel	Public and Occupational Health, Amsterdam UMC, APH Societal Participation & Health	Networking and events
Mireille Dekker	Medical Microbiology and Infection Prevention, Amsterdam UMC, APH Quality of Care	Networking and events
Annicka van der Plas	Public and Occupational Health, Amsterdam UMC, APH Aging & Later Life	Knowledge hub
Esther Bisschops	Clinical Child & Family Studies, FGB, VU, APH Quality of Care	Educational program

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Advisory Committee

The AmsCIS Advisory Committee provides the Management Board with solicited and unsolicited advice concerning progress towards objectives and future directions and related issues such as positioning of AmsCIS within APH, general prioritisation of activities, research topics, and financial stability. The Management Board hosts an annual meeting in which Advisory Committee members are invited to share their views. As a starting point, the meetings are structured around the following topics:

- General status update and priorities for coming year;
- Topical advice such as stimulating research excellence, capacity building in implementation research, outreach and positioning in APH and the wider research community, etc.;
- Operational and financial management of AmsCIS;
- Committee members have the opportunity to raise other topics they find relevant to discuss with the committee and board members.

Committee members take seat on a voluntary basis. Currently, the Advisory Committee is chaired by prof. dr. Martine de Bruijne and in principle members take seat for 3 to 5 years. For the period 2021-2024 the following persons have agreed to partake in the Advisory Committee:

Name	Affiliation
Prof. dr. Martine de Bruijne (chair)	Director of Amsterdam Public Health research institute (APH) & Professor of Public Health, especially Quality of Care at Dept. of Public and Occupational Health (SG)
Prof. dr. Han Anema	Chair of the section Societal Participation & Health Amsterdam University Medical Center, Department of Public and Occupational Health, APH Institute
Prof. dr. Margriet Mullender	Head of department of Plastic, Reconstructive and Hand Surgery, Amsterdam University Medical Center - location VUmc
Prof. dr. Michel Wensing	Health services research and implementation science, Heidelberg University Hospital, Dept. Primary Care & Health Services Research
(vacancy)	(Director of one of the other Amsterdam UMC research institutes)
(vacancy)	(external; policy maker)

Reporting

AmsCIS reports annually to the APH Board of Directors. The reporting is as brief as possible and as elaborate as required addressing topics such as workplan, a justification of the resources used and an overall reflection on the current developments and strategic and operational relevance of AmsCIS for APH and the field of implementation science.

Resources and financial aspects

AmsCIS is established and ran by APH-researchers with a passion for implementation research. A pragmatic approach is chosen focussed at accessibility, harnessing this passion, and stimulating growth of individual and institutional knowledge in implementation research.

APH-researchers and those interested are engaged in AmsCIS on a voluntary basis, as are the members of the management board and of the advisory committee. Investment in AmsCIS in time or financially should be regarded as part of the individual and institutional responsibility of the scientific community in improving effective implementation of evidence-based practices.

However, realising the AmsCIS mission and vision solely on the virtue of passion and effort of volunteers is likely not to be sustainable. Some, minimal, financial resources are required to realise the tasks and potential. This is currently done in the following manner:

- Dedicated support (hours) for running secretariat and communication activities through the APH website;

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- Operational costs for educational modules (rooms, catering, etc.) are covered by APH bureau on a case-by-case basis.

To further improve AmsCIS reach and impact, and to ensure sustainability, AmsCIS should obtain some form of structural funding. Similar to other APH initiatives and programs, a (limited) recurring (ie. not project based) budget would be required to ensure viability. A ball-park estimate would be that with a yearly budget of € 50k would enable to engage in the mentioned activities with more rigour and responsibility, and specifically for:

- Hosting scientific meetings with external speakers also contributing to improving external visibility and presence.
- Conducting and maintaining a knowledge synthesis of implementation related projects and research in APH.
- Engage in well-equipped and well-organised educational activities
- Improve continuity through a dedicated secretariat.

Sources of income could be:

- Providing educational courses (for a fee; through 1e lijnsgeld; a summer school).
- Providing implementation advisory, e.g. the first meeting is for free, if more is needed, then on hourly basis

Currently, AmsCIS is in transitioning from an organic starter to a more professional sustained centre. Funding decisions need to be made and put in place in the coming years.

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Appendix 1: Activity planning 23/24

2024

Maand/ Activiteit	1	2	3	4	5	6	7	8	9	10	11	12
Nieuwsbrief		x				x		x				
Nieuwsflits				x								x
Onderwijs modules	x		x		x			x		x		x
(Networking and events) Yes We Can! Sessie	x											
(Networking and events) Journal club				x								
(Networking and events) Seminar and drinks										x		
Overleg met Adviesraad	x								x			
Strategisch overleg AmsCIS kernteam		x							x			
AmsCIS overleg (4-6 wekelijks)	x	x	x	x	x	x			x	x	x	x

2023

Maand/ Activiteit	1	2	3	4	5	6	7	8	9	10	11	12
Nieuwsbrief		x				x		x				
Nieuwsflits				x								x
Onderwijs modules				x					x		x	
Yes We Can! Sessie	x											
Journal club				x								
Netwerkevent kosteneffectiviteit										x		
Overleg met Adviesraad	x								x			
Strategisch overleg AmsCIS kernteam	x									x		
AmsCIS maandelijks overleg (4-6 wekelijks)	x	x	x	x	x	x			x	x	x	x