Envisioning the future of quality, safe health care

March 26 2021, by Kristen Mitchell

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The COVID-19 pandemic has forced the world to rethink standard medical practices to ensure patients are getting the best care. In a new commentary published in the Journal of Nursing Research, GW School

of Nursing professor Ric Ricciardi envisions changes that could be made to ensure evidence-based interventions are implemented effectively in the future.

Dr. Ricciardi, director of strategic partnerships in the Center for Health Policy and Media Engagement, spoke to GW Today about his vision for health care quality and safety in 2030:

Q: Can you explain what implementation science is and how that provides a foundation for your vision of health care in 2030?

A: Implementation science is the scientific study of methods and strategies to increase the effectiveness and efficiency of applying and integrating evidence-based practices into regular use by administrative and clinical practitioners and in routine health care delivery—thereby improving the quality of care that is being delivered to patients.

Implementation science complements and extends the current traditional model of conducting outcomes research by examining the link from evidence-based interventions to improved outcomes in diverse and complex patient populations and in varying health care settings, many of which also have varying contextual influences.

Q: What are the current barriers that stall research findings that support best practices and patient care from being implemented in patient care?

A: A not all inclusive list of barriers to implementing evidence-based interventions are: lack of knowledge on implementation science and implementation principles and practices; lack of support from

leadership, resistance from clinical providers and teams; cost, time, traditional practices and structures (habits and resistance to change); lack of practice facilitators and resources dedicated to practice improvement; questions regarding the strength of the evidence; organizational culture and characteristics; and complexity of the evidence-based intervention.

Q: What role should frontline workers have in determining structural or systemic changes necessarily to improve health services moving forward?

A: Health care is a team sport and practice improvements require an all-hands-on-deck approach. Frontline providers are key in identifying potential operational strengths and weakness in implementation practices and provide real time feedback during the implementation process. Further, they are key in understanding the feasibility of the implementation strategy and how to adapt the evidence-based intervention to the context of the practice setting. Frontline providers are uniquely positioned to provide real time feedback throughout the implementation phases.

Q: Can you explain how embedded nurse researchers might contribute to these efforts?

A: The nurse researcher of the future will fill an existing gap within a health system or a large care delivery or /payment organization as an embedded scientist with full access to contextual and medical data on the population. The embedded scientist is empowered by senior executive leadership to implement system-wide and targeted evidence-based interventions to improve population health and evaluate the impact of the implementation on the quadruple aim of health care: improving the

health of populations, enhancing the experience of care for individuals, reducing the per capita cost of health and improving the clinician experience and joy of work.

Q: What role do telehealth services—more popular than ever because of the pandemic—play in the future of health care?

A: The pre-pandemic fragmented delivery of health care in the United States slowly attempted to adapt to meet the COVID-19 public health demands and adjust to Centers for Disease Control and Prevention mitigation strategies and quarantine orders. Over time, health care providers and patients realized the benefit of telehealth in meeting the health care needs of chronically ill patients and to address delays in access to preventive health.

With the passage of the 2020 CARES Act, telehealth services were incentivized and became more widely implemented across all practice settings. Given the rise and success of telehealth during the pandemic, telehealth has found a home in acute, long-term and primary care settings and is well positioned to be fully integrated into routine care. Telehealth has the potential to improve access to care—particularly in underserved and vulnerable populations—who have disproportionately higher suffering and mortality from COVID-19.

Provided by George Washington University

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