

Towards Sustainable Improvements in Primary Care: What Are the Priorities on the Research Agenda?



CANADA RESEARCH CHAIR IN
IMPLEMENTING INTEGRATED CARE
FOR PEOPLE WITH COMPLEX NEEDS

Catherine Hudon MD, PhD
Family Medicine and
Emergency Medicine Department

NAPCRG Annual Meeting

November 24, 2024

Some milestones of my story...

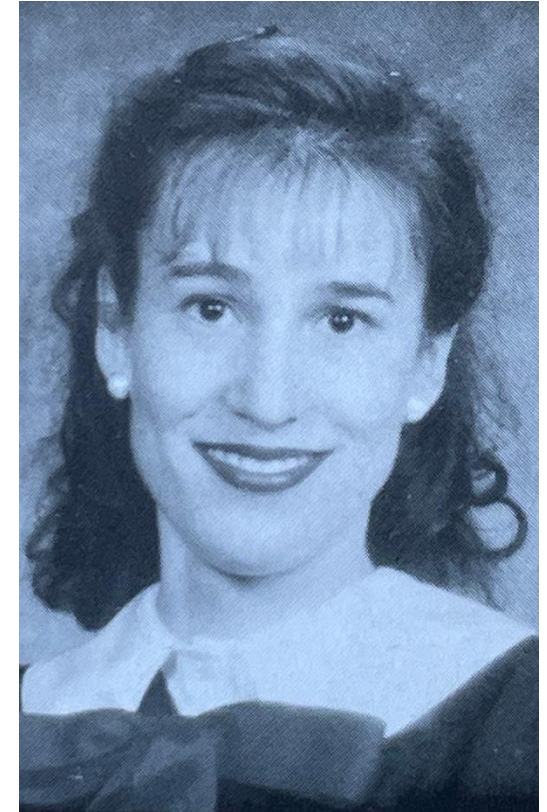
A lot of learning along the way



CANADA RESEARCH CHAIR IN
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FOR PEOPLE WITH COMPLEX NEEDS

26 years ago...

- A very interesting practice
- But a lot to do to improve care for people with complex needs



Research to improve health care

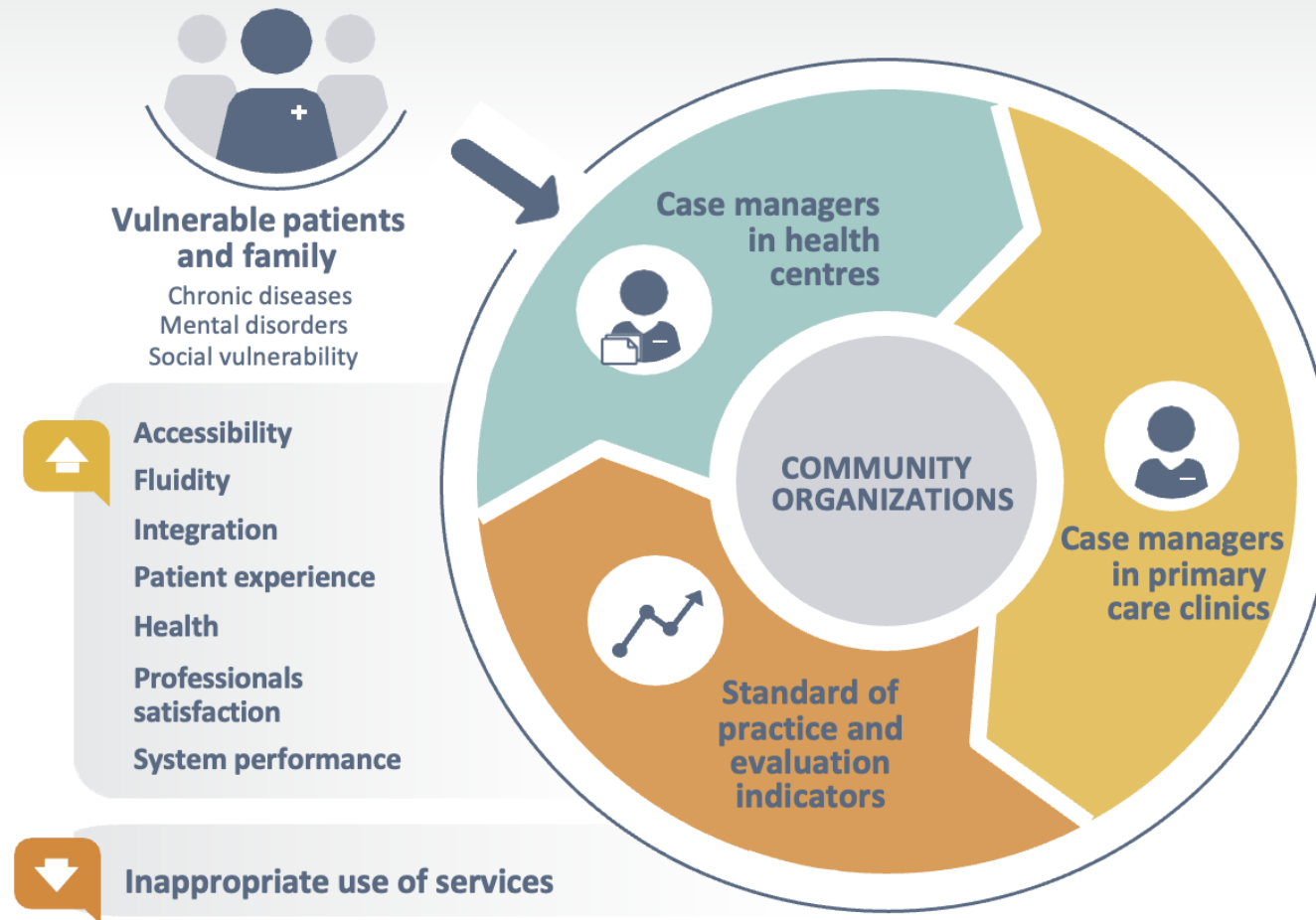




12 years ago...

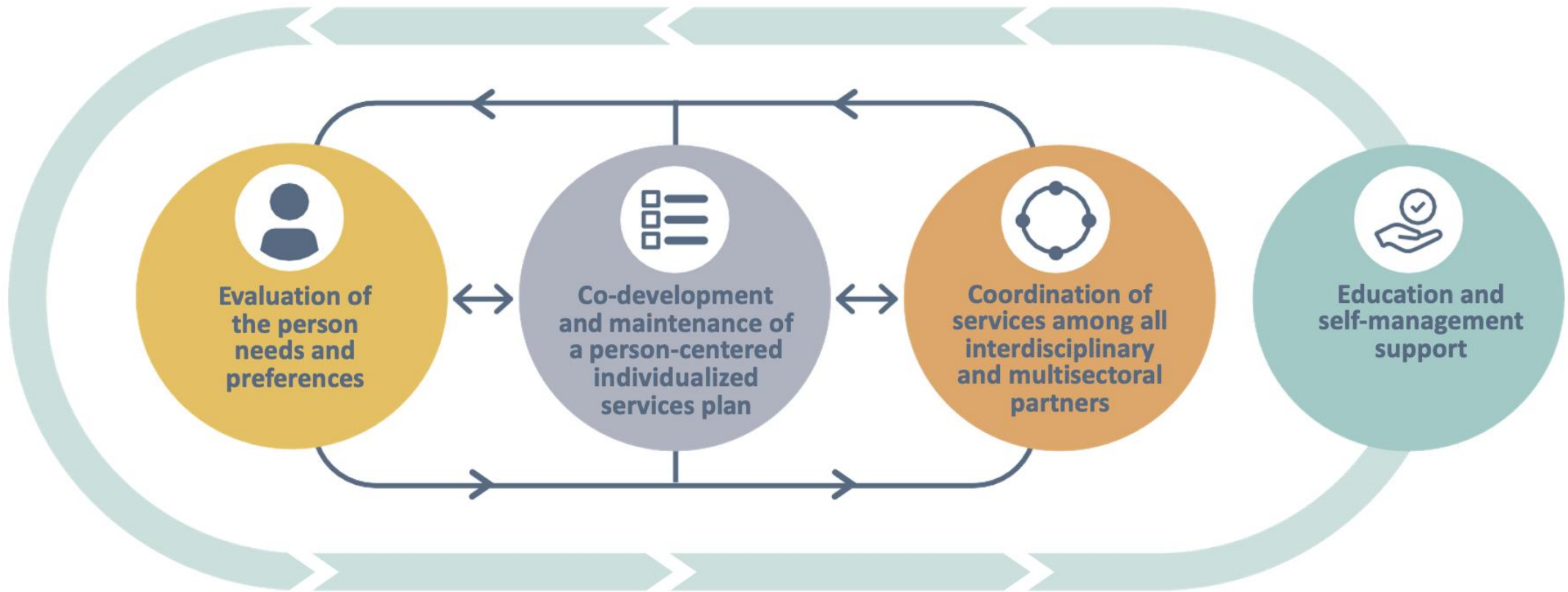


The V1SAGES approach



An innovation based on **improving practices and interdisciplinarity**, supported by **evidence**, and offering an **implementation toolkit**.

Main components



12 years of evaluation

Research Article | Original Research

Case Management in Primary Care for Frequent Users of Health Care Services With Chronic Diseases: A Qualitative Study of Patient and Family Experience

Catherine Hudon, Maud-Christine Chouinard, Fatoumata Diadiou, Mireille Lambert and Danielle Bouliane

The Annals of Family Medicine November 2015, 13 (6) 523-528; DOI: <https://doi.org/10.1371>



Research Article | Original Research | A

Case Management in Primary Care for Frequent Users of Health Care Services: A Mixed Methods Study

Catherine Hudon, Maud-Christine Chouinard, Marie-France Dubois, Pasquale Roberge, Christine Loignon, Éric Tchouaket, Mireille Lambert, Émilie Hudon, Fatoumata Diadiou and Danielle Bouliane

The Annals of Family Medicine May 2018, 16 (3) 232-239; DOI: <https://doi.org/10.1370/afm.2233>

Case Management in Primary Care for Frequent Users of Health Care Services: A Realist Synthesis

Catherine Hudon, Maud-Christine Chouinard, Kris Aubrey-Bassler, Nazeem Muhajarine, Fred Burge, Paula Louise Bush, Alya Danish, Vivian R. Ramsden, France Légaré, Line Guénette, Paul Morin, Mireille Lambert, Fiona Fick, Olivia Cleary, Véronique Sabourin, Mike Warren and Pierre Pluye

The Annals of Family Medicine May 2020, 18 (3) 218-226; DOI: <https://doi.org/10.1370/afm.2499>

104804

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Health policy

journal homepage: www.elsevier.com/locate/healthpol



Integrated case management between primary care clinics and hospitals for people with complex needs who frequently use healthcare services in Canada: A multiple-case embedded study

Catherine Hudon ^{a,b,*}, Maud-Christine Chouinard ^c, Olivier Dumont-Samson ^a, Annie-Pier Gobeil-Lavoie ^d, Jean Morneau ^e, Mélanie Paradis ^e, Yves Couturier ^f, Marie-Eve Poitras ^a, Thomas Poder ^g, Véronique Sabourin ^h, Mireille Lambert ^e



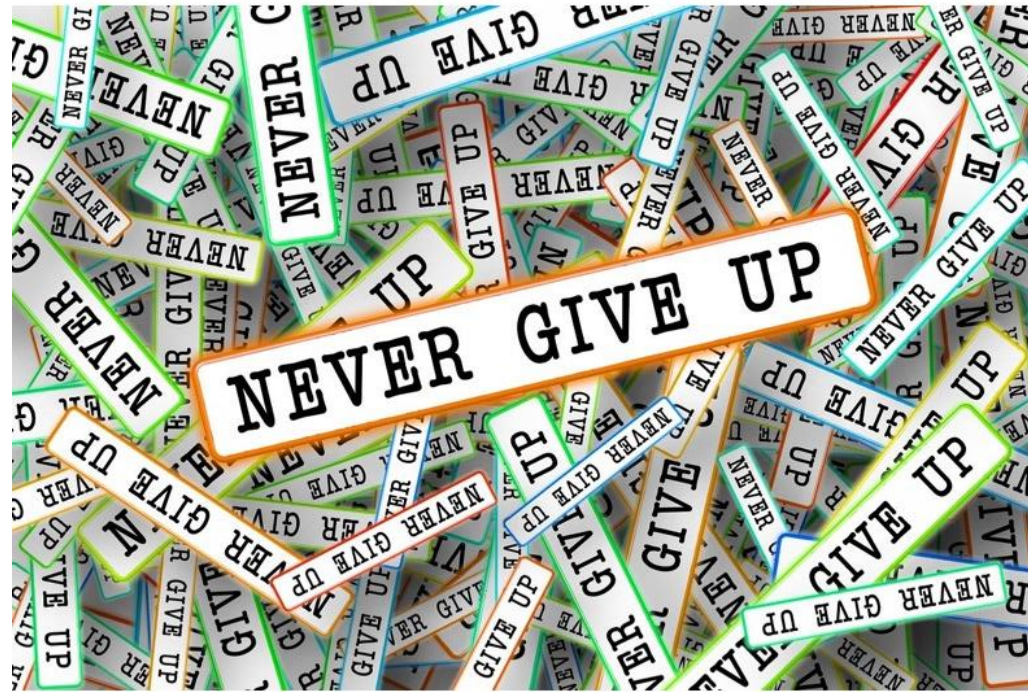
2023: scale-up of the V1SAGES approach in Quebec

2021-2023: pilot project in 2
healthcare centers

2023: Consultant physician,
Quebec Ministry of Health and
Social Services



A lot of learning along the way...



Know-Do Gap

REVIEW



The answer is 17 years, what is the question: understanding time lags in translational research

Zoë Slote Morris¹ • Steven Wooding² • Jonathan Grant²

¹Institute of Public Health, University of Cambridge, Cambridge CB2 0SR, UK

²RAND Europe, Cambridge CB4 1YG, UK

Correspondence to: Jonathan Grant. Email: jgrant@rand.org

Time Gap

Health Expectations

An International Journal of
Public Participation in
Health Care and Health Policy

ORIGINAL ARTICLE


[Health Expect.](#) 2022 Oct; 25(5): 2365–2376.

Published online 2022 Jul 22. doi: [10.1111/hex.13542](https://doi.org/10.1111/hex.13542)

PMCID: PMC9615076

PMID: [35593113](https://pubmed.ncbi.nlm.nih.gov/35593113/)

Patient and researcher experiences of patient engagement in primary care health care research: A participatory qualitative study

Sophie Béland MSc¹ | Mireille Lambert MA² | Alannah Delahunty-Pike MSc³ |
Dana Howse PhD⁴ | Charlotte Schwarz MA⁵ | Maud-Christine Chouinard PhD⁶ |
Kris Aubrey-Bassler MD, MSc⁴ | Fred Burge MD³ | Shelley Doucet PhD⁵ |
Alya Danish PhD⁷ | Olivier Dumont-Samson MA¹ | Mathieu Bisson MA¹ |
Alison Luke PhD⁵ | Marilyn Macdonald PhD⁸ | André Gaudreau⁹ | Judy Porter⁹ |
Donna Rubenstein⁹ | Véronique Sabourin⁹ | Cathy Scott⁹ | Mike Warren⁹ |
Linda Wilhelm⁹ | Catherine Hudon MD, PhD^{1,10} 

Research-Politics Gap

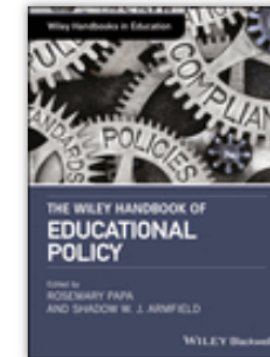
Chapter 4

Bridging the Research and Politics Gap to Set the Policy Agenda

David R. Garcia

Book Editor(s): Rosemary Papa, Shadow W. J. Armfield

First published: 07 May 2018 | <https://doi.org/10.1002/9781119218456.ch4>



The Wiley Handbook of Educational Policy

Research to improve health care

A good idea?

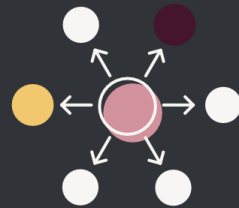
Yes, but the scientific community still has an agenda to address in order to foster lasting improvements



**Cambridge
Elements**
Improving Quality and
Safety in Healthcare

Approaches to Spread, Scale-Up, and Sustainability

Chrysanthi Papoutsi,
Trisha Greenhalgh,
and Sonja Marjanovic



THIS.Institute The Healthcare
Improvement
Studies Institute

ISSN 2754-2912 (online)
ISSN 2754-2904 (print)

What are improvements?

« ... novel sets of behaviours, tools, routines, and ways of working (technological or not) that are directed at improving health and service outcomes, efficiency, effectiveness, or experience »

Papoutsi et al. 2024; Greenhalgh et al. 2004

What are the priorities?

- A shared agenda
- Research methodologies aligned with this agenda
- The right balance between effectiveness and sustainability



1) A shared agenda



Many partners with different agendas and different pace

Develop real partnerships with stakeholders : decision-makers; clinicians; citizens; and others



SYSTEMATIC REVIEW

Open Access



Organizational participatory research: a systematic mixed studies review exposing its extra benefits and the key factors associated with them

Paula L. Bush^{1*}, Pierre Pluye¹, Christine Loignon², Vera Granikov¹, Michael T. Wright³, Jean-François Pelletier⁴, Gillian Bartlett-Esquilant¹, Ann C. Macaulay⁵, Jeannie Haggerty¹, Sharon Parry⁶ and Carol Repchinsky⁷

« *...the likelihood of an OPR study exhibiting at least one extra benefit is quadrupled when the impetus for the study comes from the organization... (OR = 4.11, CI = 1.12–14.01) »*

Chapter 1.2

Integrated knowledge translation

Sarah Bowen, Ian D. Graham

Book Editor(s): Sharon E. Straus MD, FRCPC, MSc, Jacqueline Tetroe MA,
Ian D. Graham PhD, FCAHS

First published: 09 June 2013 | <https://doi.org/10.1002/9781118413555.ch02> | Citations: 57



Knowledge Translation in
Health Care

*« To promote knowledge use, potential knowledge users must be engaged in **appropriate and meaningful ways** from the beginning of the research process »*

A common agenda needs time...

*« Evolving relationships refers to how partnerships grew and improved over time with an **acceptance of tensions and willingness to move beyond them**, two-way communication and leadership... »*

Béland et al., Health Expectations 2022



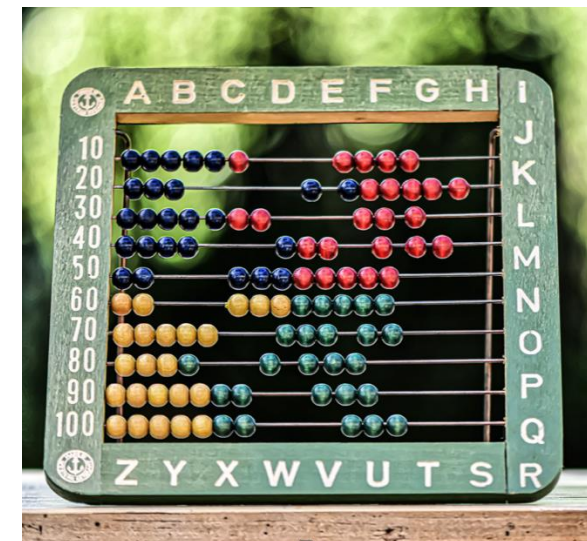
Needs appropriate funding opportunities

Strategy for Patient-Oriented Research



More consideration of time in traditional competition

With budget and timeline coherent with knowledge users engagement...



An agenda that must consider the social determinants of health (SDH)

« ...numerous studies suggest that SDH account for between 30-55% of health outcomes... estimates show that the contribution of sectors outside health to population health outcomes exceeds the contribution from the health sector »



Editorials

An inverse care law for our time

BMJ 2018 ; 362 doi: <https://doi.org/10.1136/bmj.k3216> (Published 31 July 2018)

Cite this as: *BMJ* 2018;362:k3216

« The availability of good care tends to vary inversely with the needs of the population served »

Marmot 2018

Addressing inequities to improve population health

Articles

Premature mortality attributable to socioeconomic inequality in England between 2003 and 2018: an observational study



Dan Lewer, Wikum Jayatunga, Robert W Aldridge, Chantal Edge, Michael Marmot, Alistair Story, Andrew Hayward



Summary

Background Low socioeconomic position is consistently associated with increased risk of premature death. The aim of this study is to measure the aggregate scale of inequality in premature mortality for the whole population of England.

*Lancet Public Health 2020;
5: e33-41*

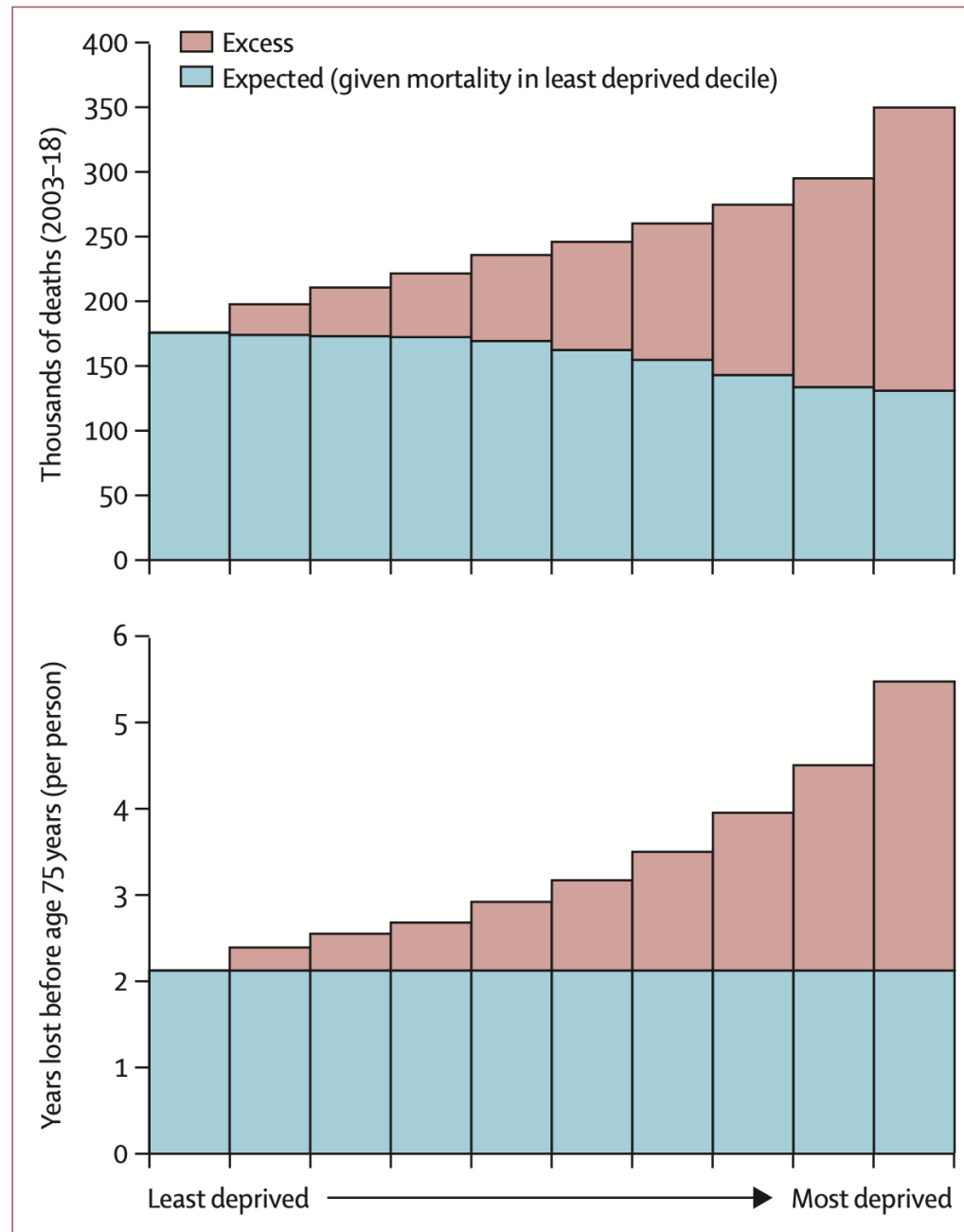
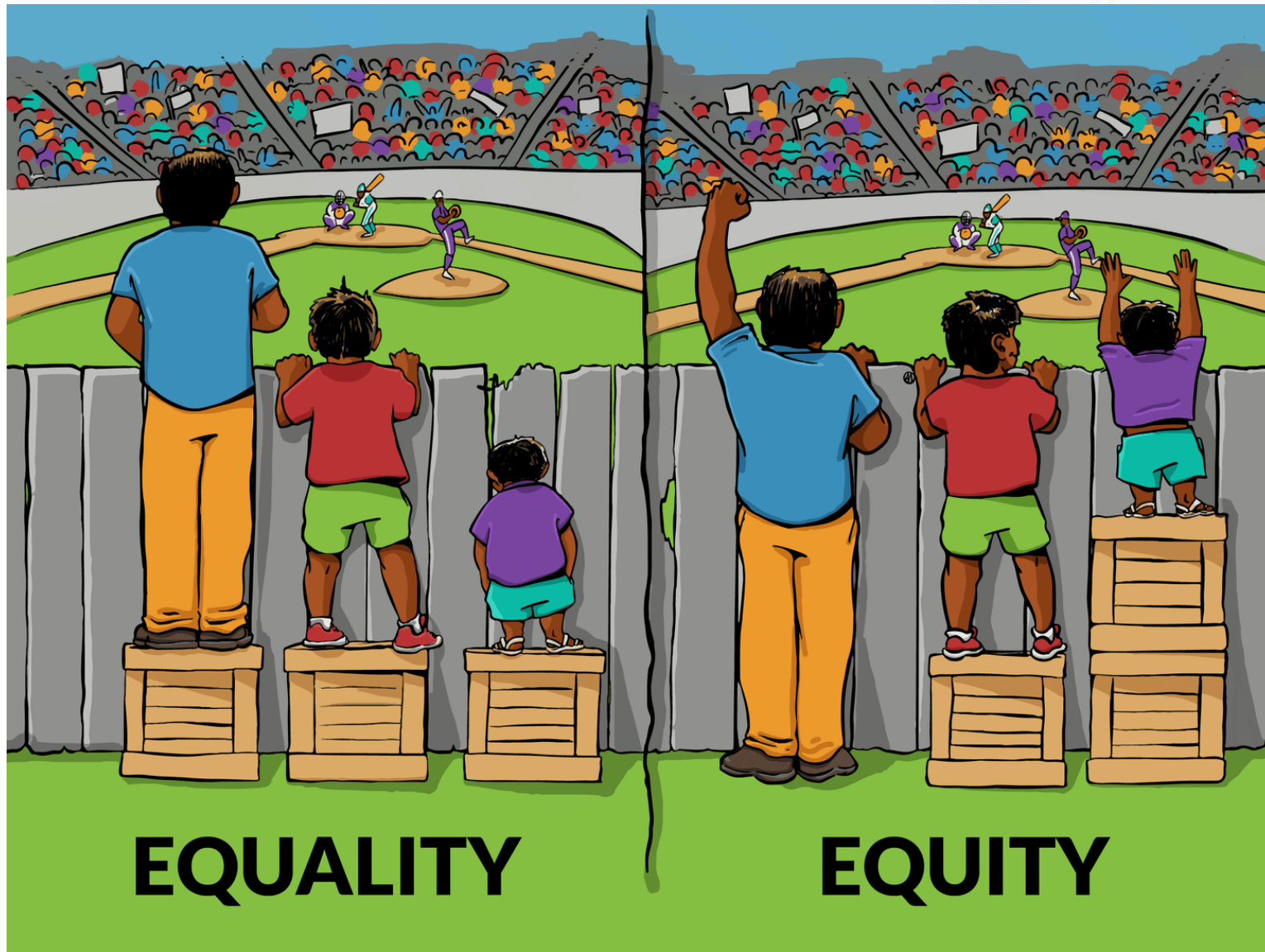


Figure 1: Mortality attributable to socioeconomic inequality and years lost to inequality in England, 2003-18 by index of multiple deprivation decile



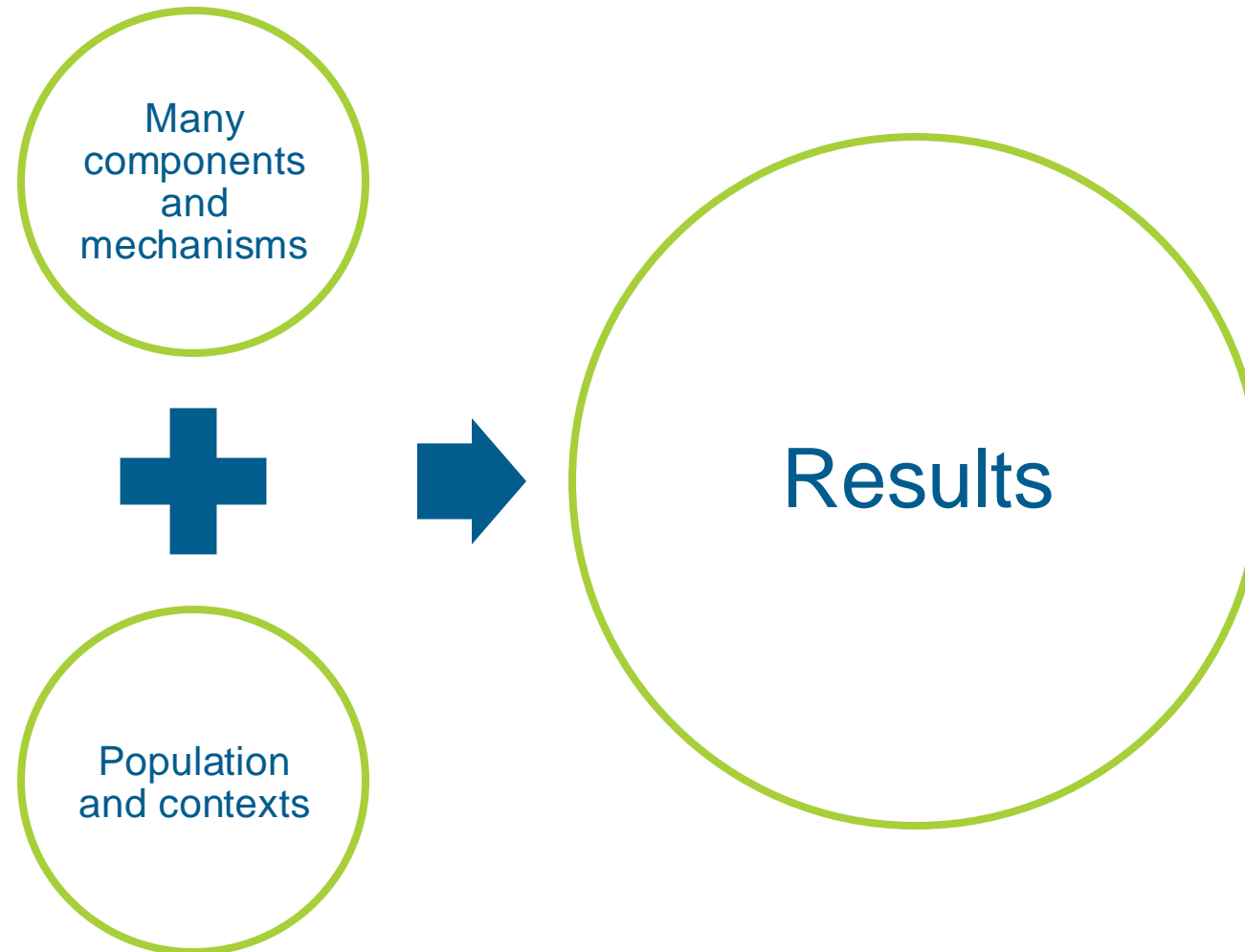
EQUALITY

EQUITY

2) Research methodologies aligned with this agenda



Interventions often complex in primary care



Education And Debate

Framework for design and evaluation of complex interventions to improve health

BMJ 2000 ; 321 doi: <https://doi.org/10.1136/bmj.321.7262.694> (Published 16 September 2000)

Cite this as: *BMJ* 2000;321:694

Article

Related content

Metrics

Responses

Michelle Campbell, senior policy analyst^a,

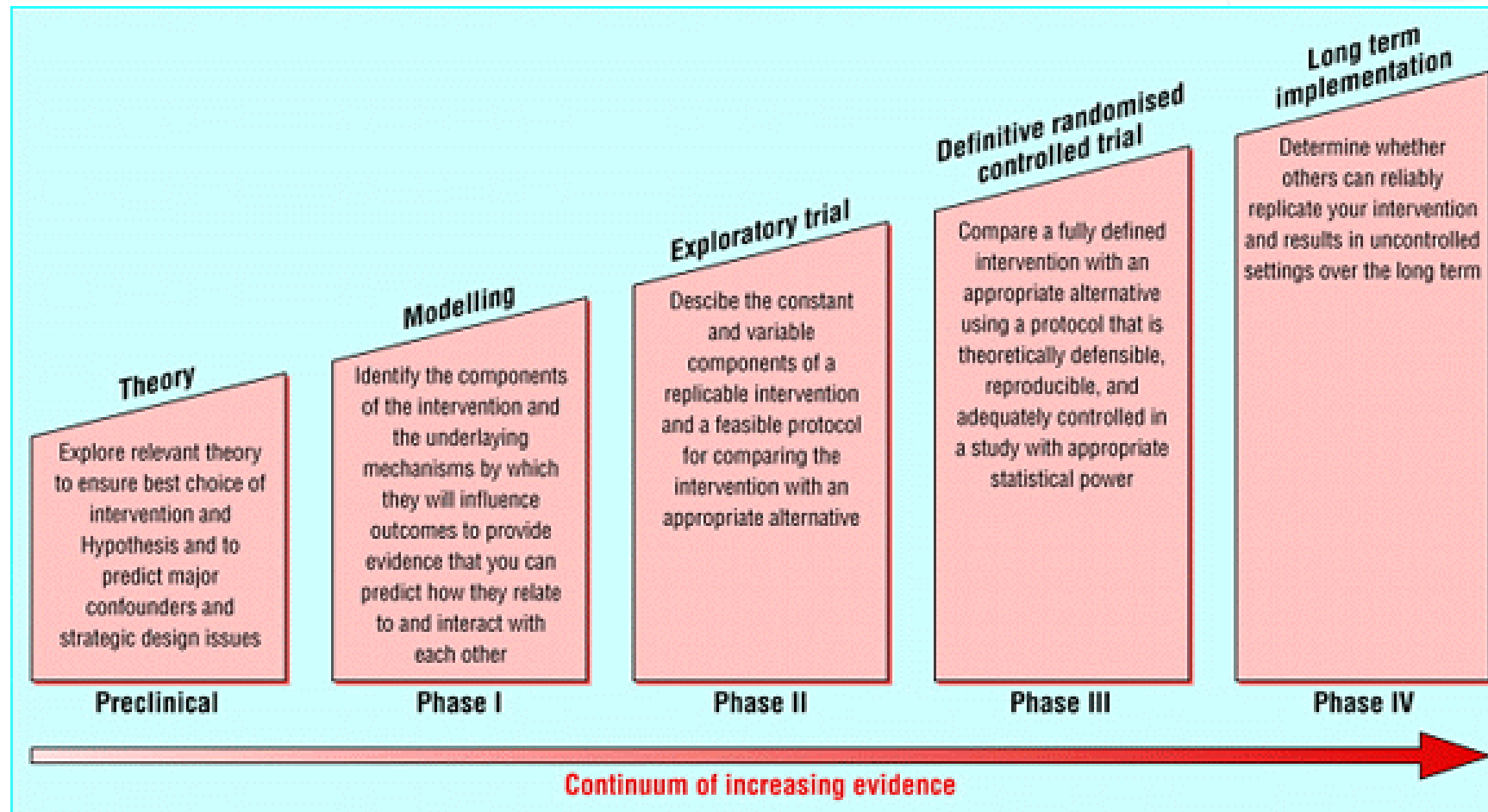
Ray Fitzpatrick, professor of public health and primary care (raymond.fitzpatrick@nuffield.ox.ac.uk)^b,

Andrew Haines, professor of primary health care^c, *Ann Louise Kinmonth, professor of general practice*^d,

Peter Sandercock, professor of medical neurology^e, *David Spiegelhalter, senior scientist*^f,

Peter Tyrer, professor of community psychiatry^g

Sequential phases of developing RCTs of complex interventions



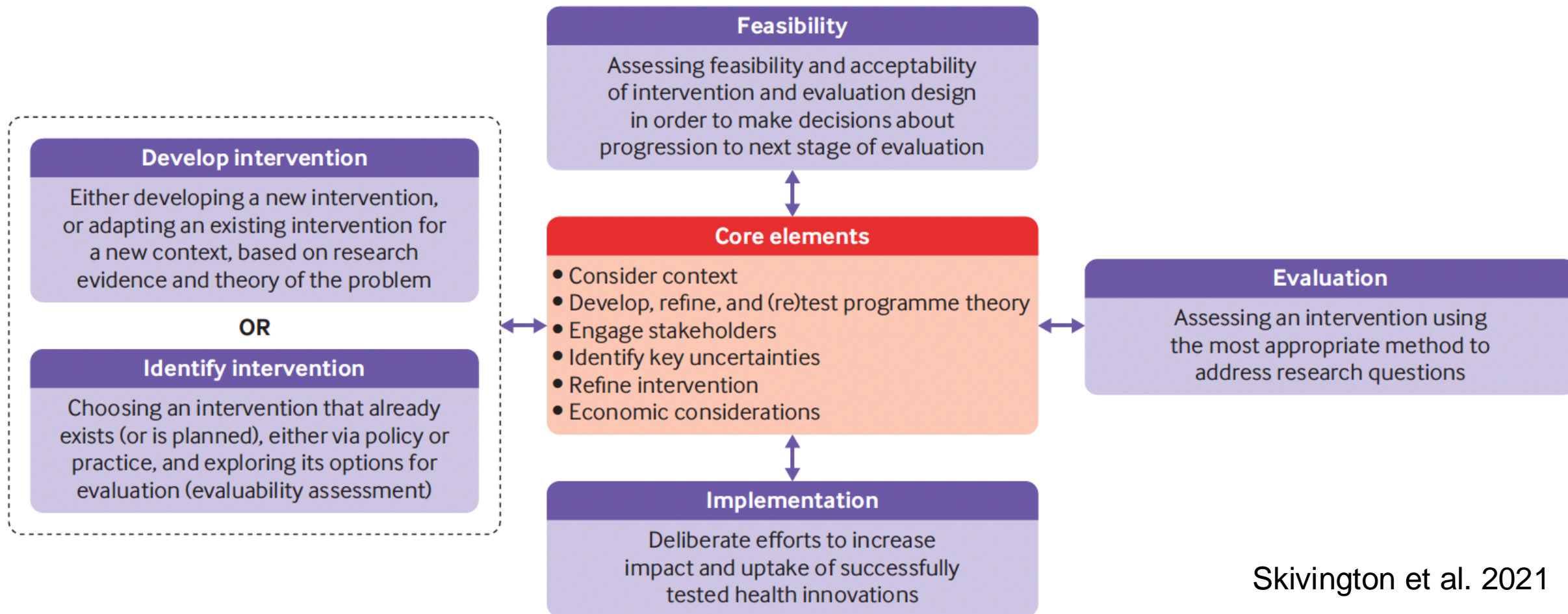
Research Methods & Reporting

A new framework for developing and evaluating complex interventions: update of Medical Research Council guidance

BMJ 2021 ; 374 doi: <https://doi.org/10.1136/bmj.n2061> (Published 30 September 2021)

Cite this as: *BMJ* 2021;374:n2061

New Framework



Skivington et al. 2021

Revised Medical Research Council Framework

« Use of diverse research perspectives and the pragmatic choice of research questions and methods, rather than focusing on effectiveness alone. »



Skivington et al. 2021

In your experience



- Do you think all publishers are equally receptive to all types of research?

The case of integrated care

Hudon and Kessler
Health Research Policy and Systems (2023) 21:9
<https://doi.org/10.1186/s12961-023-00960-4>

Health Research Policy
and Systems

COMMENTARY

Open Access

Integrating case management for patients with complex needs in the ground practice: the importance of context in evaluative designs



Catherine Hudon^{1*}  and Rodger Kessler²

Contexts matter

« ...having almost all randomized controlled trials (RCT) documenting effectiveness of complex interventions targeting patients with complex needs remain unlikely because of variations in key ingredients of the intervention, populations recruited in the study or local contexts. »

Hudon & Kessler 2023



Effectiveness remains important, but...

- Evaluation needs to include theory-based and systems perspective
- Implementation needs to be considered early
- Stakeholders have to co-define relevant research questions

Skivington et al. 2021



What early consideration of implementation means?

*« it implies involving stakeholders in all phases of development and evaluation of a complex intervention from the beginning, to ensure **asking the most relevant research questions** and increasing the potential an intervention be widely adopted »*

Hudon & Kessler 2023

Participatory approaches suit all designs



[Ann Fam Med](#). 2021 Nov-Dec; 19(6): 540–546.

doi: [10.1370/afm.2717](https://doi.org/10.1370/afm.2717)

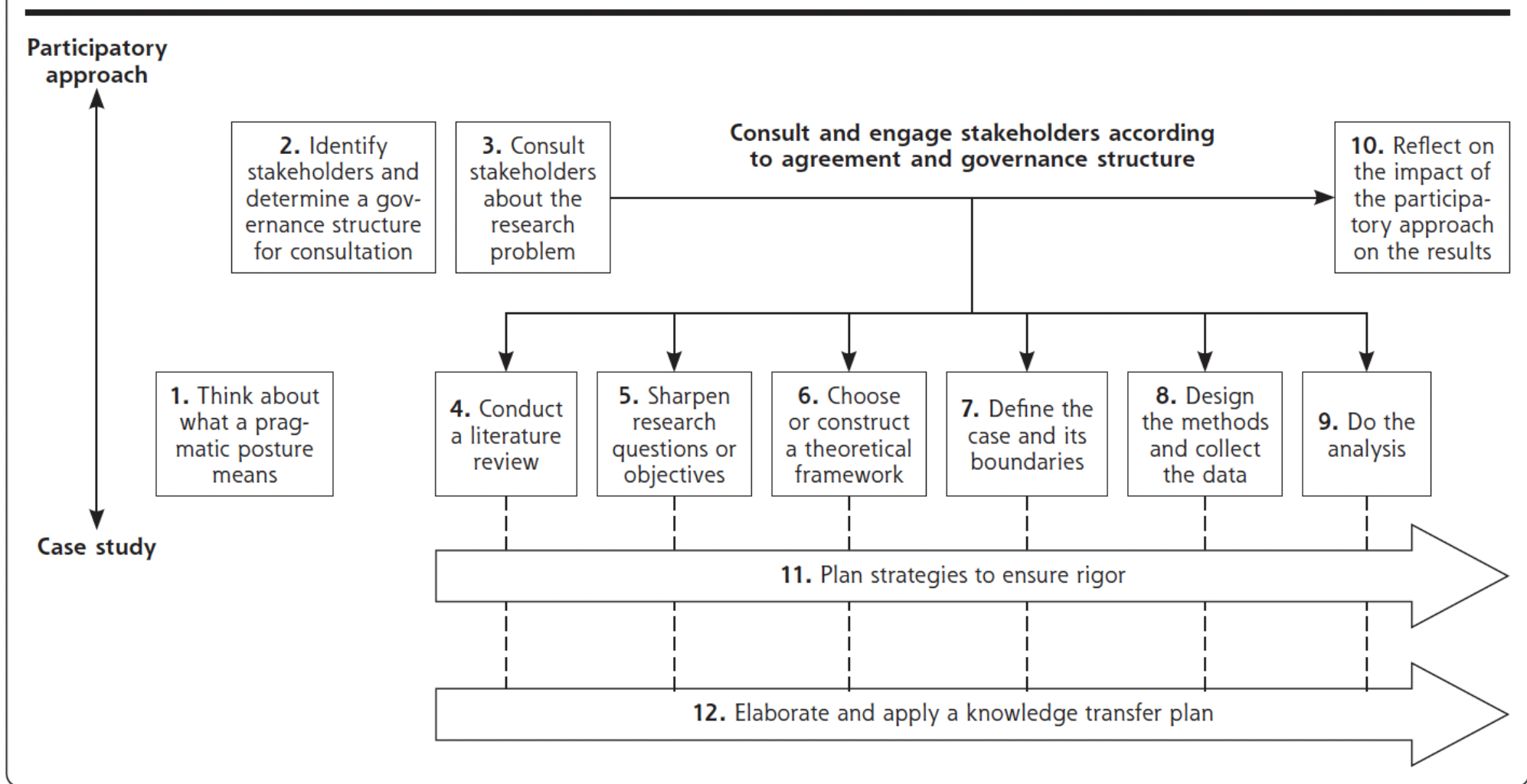
PMCID: PMC8575520

PMID: [34750129](https://pubmed.ncbi.nlm.nih.gov/34750129/)

Case Study With a Participatory Approach: Rethinking Pragmatics of Stakeholder Engagement for Implementation Research

[Catherine Hudon](#), MD, PhD,¹ [Maud-Christine Chouinard](#), RN, PhD,² [Mathieu Bisson](#), MA,¹ [Alya Danish](#), PhD,¹
[Marlène Karam](#), PhD,² [Ariane Girard](#), RN, PhD,¹ [Pierre-Luc Bossé](#), MSW,¹ and [Mireille Lambert](#), MA³

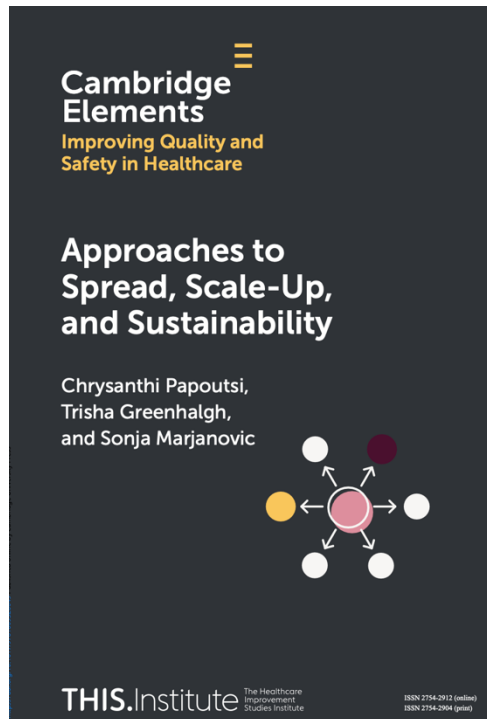
Figure 1. Twelve steps to conduct a case study with a participatory approach.



3) The right balance between effectiveness and sustainability



From effectiveness to sustainability



- Spread: transferring successful improvement interventions beyond the original adoption setting
- Scale-up: support widespread implementation of improvements interventions
- Sustainability: maintaining improvements (through adaptation to context) over time

Greenhalgh et al. 2017 and 2019

A non-linear perspective

« Spread, scale-up, and sustainability need to be pursued concurrently to be able to deal with the complexity of improvement efforts in contemporary health systems »

Papoutsis, Greenhalgh, and Marjanovic 2024



Tensions between both concepts

Effectiveness

Sustainability

Internal validity



Adaptation to context

Standardisation



Flexibility

Value for scientific community

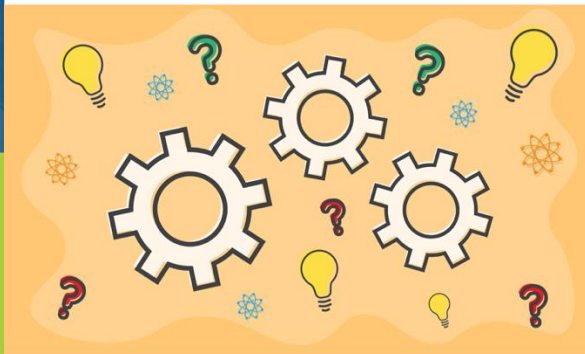


Value for all partners



How conciliate standardisation and adaptation?

*« instead of attempting to reproduce an intervention in the same format across settings, the emphasis should be (...) on understanding the **principles** by which an intervention is expected to generate change in one or more contexts – for example, through more informed use of programme theory »*



Papoutsi, Greenhalgh, and Marjanovic 2024

Why quality improvement may help with sustainability?

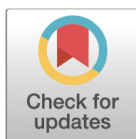


BMJ 2020;368:m865 doi: 10.1136/bmj.m865 (Published 31 March 2020)

Page 1 of 6




PRACTICE



CLINICAL UPDATES

Quality improvement into practice

 OPEN ACCESS

Adam Backhouse *quality improvement programme lead*¹, Fatai Ogunlayi *public health specialty registrar*²

Combine different strategies for improvement

Research

Generate new generalisable knowledge

Implementation science can be defined as “the scientific study of methods to promote the systematic uptake of research findings... into routine practice...”

Quality improvement

Implement existing knowledge in a specific setting

Iteratively test the conditions required to adapt research findings to local contexts

A non-linear perspective

« Spread, scale-up, and sustainability need to be pursued concurrently to be able to deal with the complexity of improvement efforts in contemporary health systems »

Papoutsi, Greenhalgh, and Marjanovic 2024

So it's the same for QI...



Revised Medical Research Council Framework

Skivington et al. 2021

« Use of diverse research perspectives and the pragmatic choice of research questions and methods... »



Effectiveness



Sustainability

Collective leadership to drive change

Health policy 132 (2023) 104804



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Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

Health policy

journal homepage: www.elsevier.com/locate/healthpol

Integrated case management between primary care clinics and hospitals for people with complex needs who frequently use healthcare services in Canada: A multiple-case embedded study

Catherine Hudon^{a,b,*}, Maud-Christine Chouinard^c, Olivier Dumont-Samson^a, Annie-Pier Gobeil-Lavoie^d, Jean Morneau^e, Mélanie Paradis^e, Yves Couturier^f, Marie-Eve Poitras^a, Thomas Poder^g, Véronique Sabourin^h, Mireille Lambert^e

Change agency in a primary health care context: The case of distributed leadership

Samia Chreim
B.E. (Bernie) Williams
Linda Janz
Ali Dastmalchian

TheKingsFund



Developing
collective
leadership for
health care

Authors

Michael West
Regina Eckert
Katy Steward
Bill Pasmore

May 2014



COMMENT

Open Access



Fostering collective leadership to improve integrated primary care: lessons learned from the PriCARE program

Catherine Hudon^{1*}, Mireille Lambert¹, Kris Aubrey-Bassler², Maud-Christine Chouinard³, Shelley Doucet⁴, Vivian R. Ramsden⁵, Joanna Zed⁶, Alison Luke⁴, Mathieu Bisson¹, Dana Howse², Charlotte Schwarz⁴, Donna Rubenstein⁶ and Jennifer Taylor⁴

Principles and lessons learned

Table 1 Collective leadership principles associated with lessons learned in PriCARE to help overcome implementation challenges

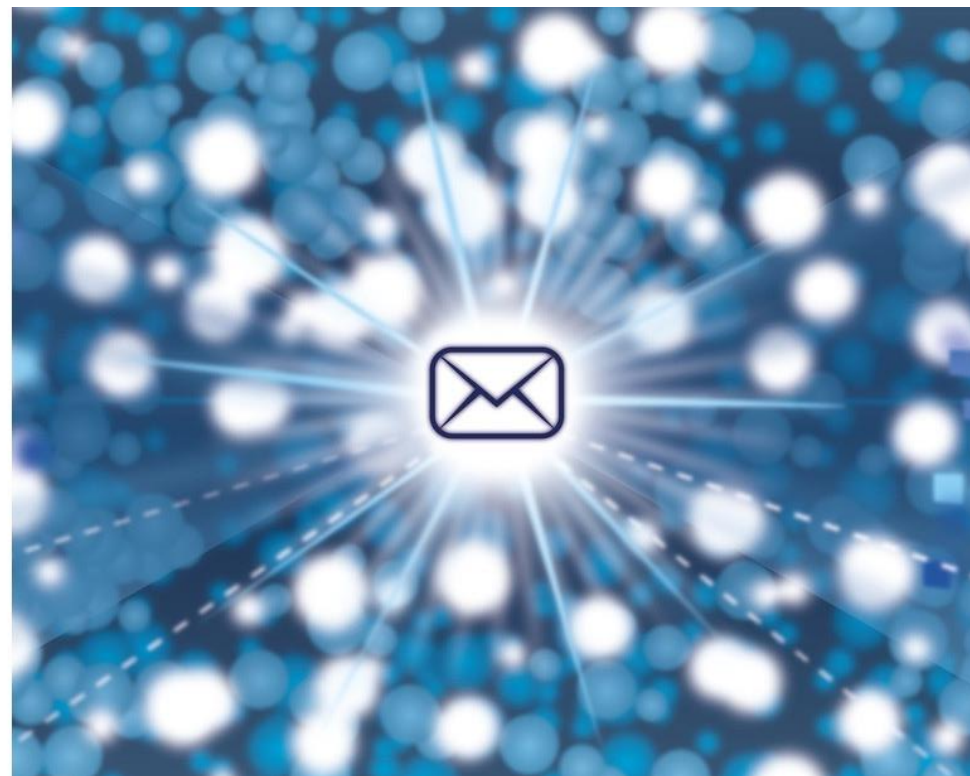
Collective leadership principles	Lessons learned in PriCARE
Communicate a vision oriented on the provision of high-quality care at every level and agree on clear objectives	Disseminate largely that patient-centered care and CM is a priority for the organization Provide tools for facilitating communication and information about the program
Encourage dialogue, debate, and discussion among stakeholders	Organize regular discussions to communicate important information, share objectives, receive feedback, and discuss local adaptation of the intervention
Involve stakeholders in decision-making, listen, support, and empower them to lead the implementation	Consult stakeholders on key decisions, promote the intervention without forcing change, and adapt the intervention to local needs Train and support case managers Create a CoP for case managers
Foster stakeholders' engagement by encouraging respect, recognizing everyone's contribution, giving timely feedback, promoting equity and trust	Create a trusting environment, recognize the added value of stakeholders, encourage innovation, and ensure transparency
Promote collective leadership qualities and behaviors: compassion, support, commitment, desire to involve patients and their family in care;	Select case managers based on their engagement, leadership, and interpersonal skills

Crucial to address the change

Seek input from experts in change management at key points



Take-home messages



CANADA RESEARCH CHAIR IN
IMPLEMENTING INTEGRATED CARE
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1) Let's be advocates for this new agenda

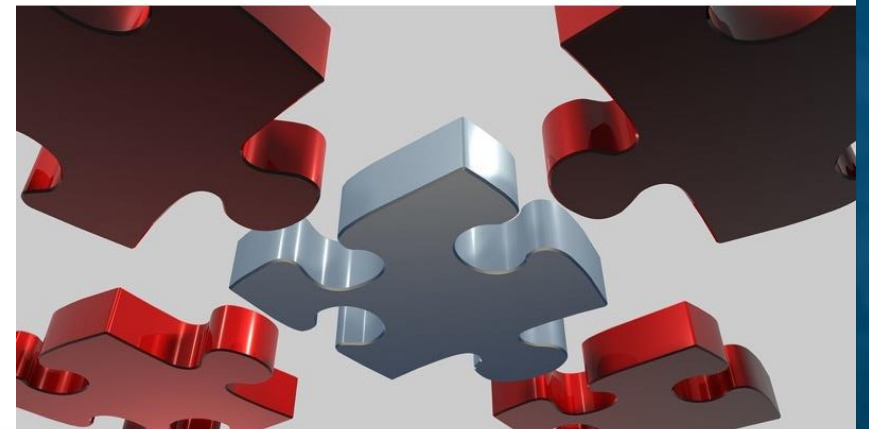
When we sit at various tables and committees related to:

- Performance assessment (new metrics)
- Research funding (money for time)
- Publication (variety of designs)



2) Continue to develop our capacity and expertise in a range of research methods and in implementation science

And our ability to work with experts in quality improvement, change management, etc.



3) Continue to develop formal consultation mechanisms to build consensus on priorities

Among others with policy-makers to plan appropriate support and budget from the outset



4) Share our learning

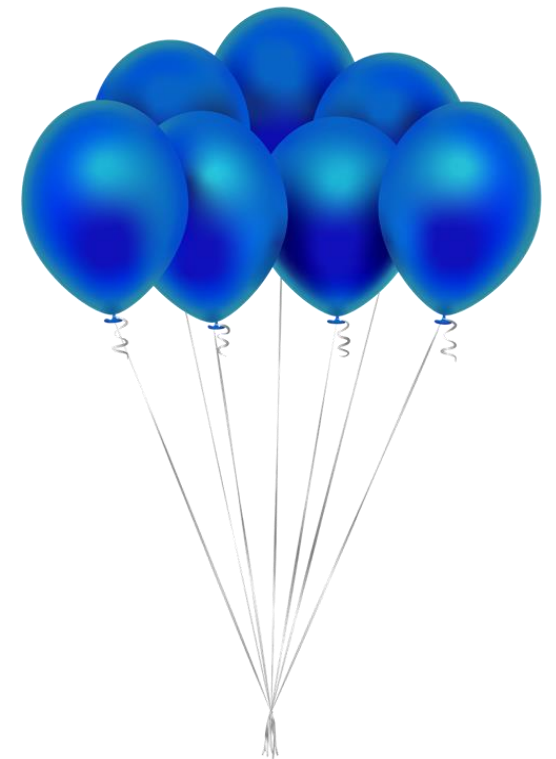
- Why not publications or sessions at NAPCRG on 'Failures and mistakes'?



5) Celebrate every little success

Growing too big too fast can jeopardise sustainability

Small, sustainable improvements are valuable, and necessary steps towards large scale-up



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Thank you :)



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