

FROM THE EDITORS' DESK

Implementation Science Workshop: An Open Call for Cases for a New *JGIM* Feature Bridging Research and Practice

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In 2009, the Journal of General Internal Medicine adopted a new tagline, “practice-based evidence for evidence-based practice.” Over the past four years, the editors have tried to take this tagline seriously, seeking to publish research derived from real-world settings and offering substantial value to generalists performing the day-to-day work of clinical care and education. Meanwhile, healthcare systems have evolved. New experiments in healthcare delivery are launching every day. The Affordable Care Act has supplied a new crucible for innovation at the state and local levels.

As exciting as these experiments might be, they have exposed new inadequacies. For one thing, we lack common venues for sharing locally developed and tested innovations. For another, there are insufficient channels to discuss and teach standards for the scientific advancement of this work. We must address these gaps head-on if we are to make meaningful delivery system changes that will result in improved outcomes.

Much effort in healthcare improvement is an adult version of parallel play. Healthcare systems are facing similar challenges, but working separately to solve them. We can more effectively improve systems by sharing ideas with each other to learn from a wider range of experiences. To respond to this need, *JGIM* is pleased to announce the launch of a new series, *Implementation Science Workshop*. This series aims to disseminate novel ideas in healthcare delivery, and it relies, in part, on your contributions.

We are soliciting “Cases” for the new series. Ideal cases consist of two elements. They should first describe a promising intervention in health service delivery. Topic areas of interest include, but are not limited to, care and workforce redesign, patient education or engagement tools, novel applications of healthcare information technology, quality improvement and patient safety initiatives, and the implementation of new payment models. Additionally,

cases should include a component that highlights challenges in evaluation, implementation, or dissemination. The series places greater value on the diversity of approaches and the challenges faced in conducting implementation and evaluation than on the size or significance of the results.

The case method has long been used in the teaching of clinical medicine, both on the medical wards and in written form in medical journals.¹ However, the use of cases for the sharing and teaching of ideas in healthcare system innovation is still in its infancy. An early leader, the Commonwealth Fund, began publishing case studies in the early 2000s to share ideas across a range of healthcare settings.² More recently, the Agency for Healthcare Research and Quality launched a Healthcare Innovation Exchange to catalogue the proliferating number of innovations in a searchable format.³ *JGIM* has itself experimented with narrative case descriptions and personal interviews under the heading of Innovation and Improvement.^{4,5} Despite these advances, “thick descriptions” of healthcare system innovations are still rare events in academic journals, which tend to focus on efficacy and effectiveness studies with rigorous methods and positive results. However, with the growth of the quality improvement movement and emergence of implementation science, there is new appreciation for sharing ideas at various stages of maturity.

Implementation Science Workshop joins a growing movement to improve the dissemination of ideas across health systems, but what makes this series unique is its effort to tackle a second inadequacy in the changing healthcare environment: the lack of opportunities for providers to learn about research methodologies. In the last decade, there has been a surge of interest in improving healthcare delivery and an emphasis on including more providers in these efforts. An essential component of improvement is to study what’s being done, but rigorous evaluation strategies require research knowledge and input from colleagues with methodological training and experience. Outside of formal training programs, there are few opportunities for healthcare providers and administrators to learn how to evaluate healthcare interventions and receive feedback on different strategies. Even for those with prior research training or experience, there is value in ongoing review.

The second part of the *Workshop* series, the Teaching Commentary, aims to fill this gap in methodological education

by providing teaching on research concepts in a format accessible to providers, administrators, and researchers at all levels. For this section, *JGIM* will invite an expert to employ the case method, using topics highlighted by the affiliated Case to guide what concepts are discussed in the Commentary. The case method is ideal for teaching conceptually challenging methodological concepts, because it builds connections between theory and practice. The teaching commentary will cover concepts from the evaluative health sciences, particularly from the rapidly emerging field of implementation and dissemination.

Since the publication of “Crossing the Quality Chasm” in 2001, there has been exponential growth in efforts to improve quality in healthcare, but this journey has only just begun.⁶ To make an impact on important endpoints, particularly patient-centered outcomes and costs of the healthcare system, these efforts will require more collaboration across regions, disciplines, and institutions. Together, we can achieve the goal of a national learning healthcare system if we build opportunities to share our ideas, learn from each other, and encourage more providers to be active participants. Implementation Science Workshop aims to assist in this national effort, creating a forum to disseminate promising innovations and teach core principles of research methodology, to empower more people with the skills and knowledge needed

to transform our healthcare system. We welcome submission of innovative cases for future issues. Instructions for authors can be found on the *JGIM* website: <http://www.jgim.org>

Conflict of Interests: The authors declare that they have no conflict of interest.

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