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Diabetic Foot Ulcer Treatment and Amputation Prevention in Non-Tertiary VA Care Facilities: Implementation Study

Laura Damschroder, MS, MPH

VA Ann Arbor Healthcare System

Ann Arbor, MI

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Rationale

VA Rehabilitation R&D Service has funded a study on good care for patients with diabetic foot ulcers (referred to as "The Good Wound Care" study), which is being conducted by investigators at the Seattle VAMC. The objective of the study is to determine whether the intervention designed by the investigators is feasible, acceptable, and safe. The Good Wound Care study is nearing completion and we plan to conduct an independent post-implementation formative evaluation of this intervention. A formal implementation study is needed to identify factors that led to the success (or failure) of the various components of Good Wound Care. Findings will provide insights into why the intervention succeeded (or failed) in improving outcomes for wound patients and point to specific recommendations for successfully implementing this intervention in other facilities and sustaining it in Walla Walla.

Research Problems or Question: What were the facilitators and barriers to successful implementation of Good Wound Care in Walla Walla, Washington?

Specific Aims or Objectives

Conduct a post-implementation interpretive evaluation¹ to help explain summative evaluation results (end-point outcomes), evaluate the implementation process, and predict sustainability and dissemination success for the Good Wound Care intervention in other facilities.

Background Information (Literature review, including significance of proposed research)

We are collaborating with Gayle Reiber, MD, and Greg Raugi, MD, from the Seattle VAMC, on this study. Their study is nearly complete. The motivation for Good Wound Care is the fact that diabetic foot ulcers will affect about 150,000 patients in the VA care system during their lifetime. Published VA guidelines for care of patients with diabetes mellitus and foot ulcers contain an algorithm for what is termed **good wound care**. Unfortunately, these VA Guidelines are frequently not implemented completely or ignored altogether. The Good Wound Care intervention was designed to deliver *good wound care* in a non-tertiary care VA center to reduce downstream amputations and demand for expensive rehabilitation services by improving treatment outcomes for diabetic foot ulcers. Interview questions for this study have been formulated to cover key topics that have been shown to affect successful implementation in the literature.

General Methods

This is a descriptive study that will provide insights into the factors that influence success of implementing Good Wound Care at the study site. The interview guide comprises open-ended questions with probes to be tailored to the interviewee and context. Participants will be selected using a purposive sampling approach – first targeting those most integrally involved with implementation of the Good Wound Care program.

Experimental Plan

We will recruit 3-8 stakeholders (all staff) at the Walla Walla VA Medical Center. The precise number will depend on time availability and the number of staff who are identified by others as potentially important informants. Drs. Damschroder and Lowery from the Ann Arbor VA HSR&D will travel to the Walla Walla VAMC to conduct the interviews. All interviews will be audio-recorded and transcribed verbatim and then analyzed using standard qualitative content analysis methods.

Data analysis/interpretation

This analysis will be qualitative in nature with its purpose to uncover the nature of relationships between attributes of the Good Wound Care intervention, the context within which it was implemented, and the process used to implement the intervention. The data will be analyzed deductively based on previous findings from the field implementation research and also inductively to refine definitions and identify new themes. Standard qualitative content analysis methods will be used to analyze the data.