Humble But Powerful: The Role of "Access to Information & Knowledge" in Implementation Success in the RE-INSPIRE Study

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Background and Hypothesis:

This study examines the role access to information and knowledge in acute stroke care following a 2011 stroke quality improvement clustered randomized trial and a national acute ischemic stroke (AIS) directive in the Veterans Health Administration. Access to information is associated with the highest levels of acute stroke care provision, as well as other key organizational features.

Experimental Design or Project Methods:

A multidisciplinary team analyzed and conducted semistructured interviews of clinical providers across 11 VAMCs over a 3-year period. The interviews were then coded and analyzed using a mix methods approach. This study focused on the "Access to Information and Knowledge" organization feature defined in the Consolidated Framework for Implementation Research constructs.

Results:

The manifestations of this organizational feature include: stroke binders, intranet share-points, pocket cards, algorithms, checklists, templates, stroke kits, flow sheets, care maps, posters, and room signs. Acute stroke is a low-volume, high stakes, time sensitive condition at these sites. Therefore, proper access to information is especially important to ensure a continuity of care that transcends the idiosyncrasies of individual providers allowing for quick, correct, and complete care of the patient.

Conclusion and Potential Impact:

The mere presence of certain tools in a clinical setting is not enough, but rather the feature relies on getting the right information, to the right people, at the right time. Access to information exemplifies the need for implementation science, and insights from this study can be broadly applied to a plethora of scenarios in other clinical settings.