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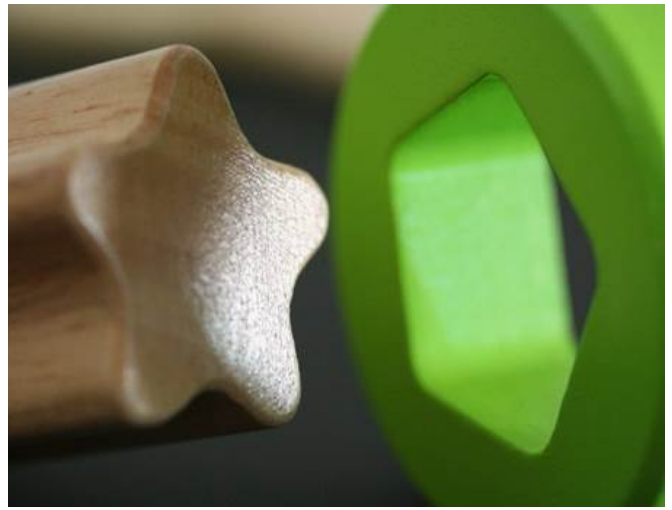
Developing Implementation Capacity Through Team Training

An evaluation of individual- and team-level outcomes

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Background and aims

- **Only about 60% of care is estimated to align with evidence-based guidelines**
- Team training in implementation for clinicians has been proposed as a promising strategy to address this gap



- This study investigates if a team-training intervention can enhance individual- and team-level implementation capacity, specifically implementation self- and team efficacy, implementation knowledge and whether team efficacy predicts implementation performance

Methods

The BIC-intervention

- Workshop-based team training intervention conducted in region Stockholm, Sweden
- Participants learn how to use the BIC-implementation model (Augustsson et al, 2021)
- Health and social care clinicians

Evaluation study

Pre-post questionnaires assessed:

- Knowledge
- Self- and team efficacy

A practical implementation assignment was used to assess:

- Team level implementation performance

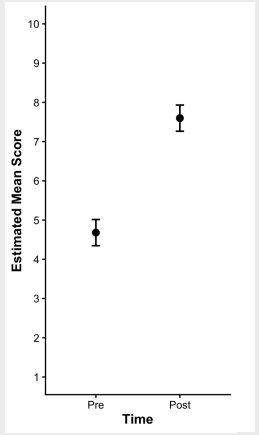


The BIC implementation model

Results

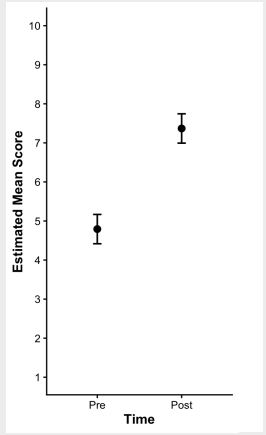
Mixed linear modelling correlation

N= 122



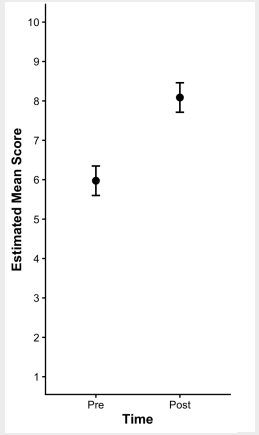
Knowledge

N= 122



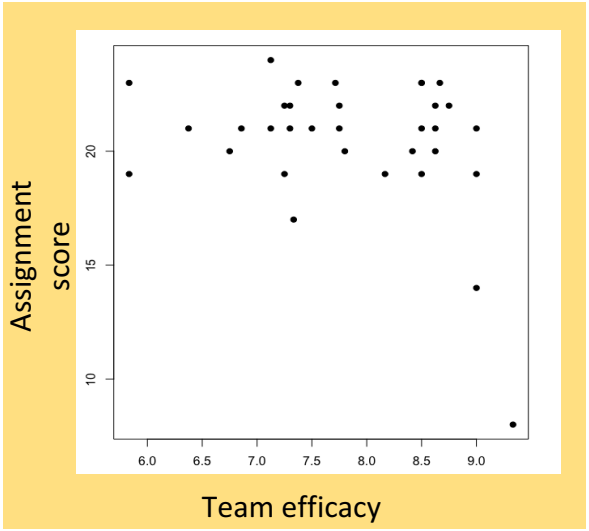
Self-efficacy

N= 33



Team-efficacy

Spearman rank



Rho	P_value	CI_lower	CI_upper
-0.168	0.3513	-0.546	0.164

Limits and conclusions

The BIC intervention appears to contribute to implementation capacity development, as it improved both individual- and team-level efficacy and implementation knowledge and led to high performance on the practical assignment

Important limitations

- Absence of control group
- Knowledge was measured using self-reported data, which may be subject to response bias
- Lack of follow-up precludes conclusions regarding sustainability of observed improvements

Results should be interpreted as exploratory – an indication that this type of intervention is worth exploring further