

Exploration of the sustainability of innovations in hospital care

Citation for published version (APA):

Ament, S. M. C. (2015). *Exploration of the sustainability of innovations in hospital care*. Datawyse / Universitaire Pers Maastricht. <https://doi.org/10.26481/dis.20150904sa>

Document status and date:

Published: 01/01/2015

DOI:

[10.26481/dis.20150904sa](https://doi.org/10.26481/dis.20150904sa)

Document Version:

Publisher's PDF, also known as Version of record

Please check the document version of this publication:

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Valorisation

Valorisation of knowledge is a process of making knowledge available for society. Besides educating students and performing research, universities play a major role in the valorisation of new obtained insights. Although a lot of scientific research is performed in the Netherlands, the actual uptake of knowledge in society is limited. The current chapter describes the valorisation potentials of this thesis.

The present thesis explored the concept of sustainability of health care innovations in hospital care after active implementation of these innovations. The findings that are reported in this thesis can be of relevance for health care professionals, patients, researchers, quality improvement specialists, policy makers and insurance companies. The valorisation possibilities are described on target group level.

Healthcare professionals

For results of research to be effective in practice, they have to be communicated to health care professionals. The research results presented in this thesis were presented at several international and national conferences aimed at general surgeons and breast cancer and gastroenteral surgeons. The results were also presented to other disciplines. For example, the ERAS programme for gynaecologic surgery was implemented in 15 hospitals in 2015. The findings regarding the sustainability of the ERAS programme for colonic surgery were shared at a gynaecologic symposium targeting the hospitals involved with the implementation project. The insights of this thesis were useful to motivate and facilitate sustainable change in the gynaecologic setting.

Patients

Yearly, many patients receive medical care in the Netherlands. Unfortunately, a major proportion of these patients do not receive care following the latest evidence, which may lead to negative results on morbidity and mortality. Besides harm to patients, health care costs may increase as a result of imperfect care delivery. Sustainability of actively implemented innovations potentially leads to a reduction in medical errors. Reduction of medical errors will lead to increased quality of care and a reduction in unnecessary care or care as a result of complications and therefore in costs. The results of this thesis were communicated to care givers involved in the breast cancer surgery and colonic surgery setting. As a result of the valorisation of the findings presented in this thesis, professionals may have adjusted their long-term routines with respect to the ERAS programme or the short stay programme years after successful implementation. The impact of this research in terms of sustainability of medical innovations can be valuable for breast cancer and colonic cancer patients. As the ERAS programma was

implemented in 15 hospitals in the Netherlands between 2014 and 2015, the insights of this thesis can also be valuable for gynecologic patients.

Scientific community

The results of this thesis contribute to current models for determinants of effective implementation and cost-effectiveness. The results and recommendations of this thesis were published in peer reviewed international journals and were presented at international scientific conferences. The journals and conferences had a quality improvement, surgical or a health technology assessment scope. Furthermore, this thesis will be spread among researchers in the main researcher's network. These researchers are specialised merely in quality improvement, surgery or health technology assessment and they may use these insights in their research. The paper "*Identification of promising strategies to sustain improvements in hospital practice*" (BMC Health Services Research 2014, 14:641) was mentioned as an editor's choice on the homepage of BMC Health Services Research. This may have facilitated the valorisation of the knowledge to this target group.

Also, data of the Netherlands Cancer Registry was used in the discussion of chapter 3 of this thesis. The Netherlands Cancer Registry has the policy to collect publications if their data is used. As a result, this generates structural valorisation between research parties. This thesis was also sent to the Netherlands Cancer Registry.

Quality improvement experts

Last decades, a large body of research evidence has become available and from this, new technologies and ideas for process redesigns have emerged. The rate of scientific publications has been increasing over the last 50 years and new insights are increasingly being spread using new distribution channels such as open access journals and publications on the internet. Given the exponential increase in knowledge on innovations and knowledge on effective implementation strategies to implement and sustain these innovations, the actual use of the last available evidence has become quite a challenge. There is a growing interest in clinical practice guidelines and they are increasingly being developed and implemented in practice. Although the goal of implementation projects is to embed health care innovations in daily routines, many implementation projects focus primarily on immediate results. To create awareness about the long-term impact of quality improvement efforts, the current thesis was sent to the Dutch institute for healthcare improvement (CBO, Kwaliteitsinstituut voor de gezondheidszorg CBO) and to the Netherlands organisation of health research and development (ZonMw) implementation fellows. The implementation fellows aim to transfer knowledge about implemen-

tation of evidence in hospitals. Also, they support implementation research proposals and projects. The research presented in this thesis will be discussed during next implementation fellow meeting.

Policymakers

Most research that is performed in the Netherlands is financially supported by external organisations. In health care for example, ZonMw invests in health research. The thesis revealed gaps in current sustainability research and the insights of this thesis may be a starting point for further sustainability research and projects related to healthcare.

An interview was given for the ZonMw journal Mediator (December 2014, issue 9). Mediator is a journal with articles about results and updates of ZonMw quality improvement projects. The journal is digital and is spread among all people involved in ZonMw quality improvement projects and to people who subscribed to receive this journal. The subject of the interview was the sustainability of the short stay programme for breast cancer surgery. In this interview results and recommendations for practice were given. Hopefully, this interview and this thesis created awareness about the need for sustainability of evidence-based health care innovations in the real-world to safeguard the time and money invested to improve medical care. To ensure that policy makers are aware of the potential of a sustainability approach, this thesis was distributed among the innovation departments of policy makers such as ZonMw and the Dutch Ministry of public health, welfare and sports.

Health insurance companies

Increasingly, insurance companies aim to contract integrated patient centred care. The current thesis revealed that an integrated care programme for breast cancer surgery patients was sustained five years following implementation in four early adopter hospitals. This programme is a good illustration of structural and integrated primary and secondary care collaboration. Treating patients in short stay was shown to be effective, safe, efficient and sustainable. Insurance companies could use the insights of this thesis in their contracting policy for oncologic care.