

QH-TRIP | Translating Research Into Practice

Implementation Masterclass

Module 1: Identify a Problem Participant Handbook



Implementation Masterclass Module 1: Identify a Problem Participant Handbook

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Prelude

Welcome to the Implementation Masterclass. It's great to have you here.

You may have recently completed the Implementation Foundations workshop, or you may be returning to implementation after some time away from formal learning. Wherever you are starting from, this Masterclass series is designed to build your confidence, deepen your understanding, and strengthen your capability to work with implementation in real-world health settings.

Across the seven Implementation Masterclass modules, you will revisit familiar concepts and explore new ways of thinking about implementation, with greater structure, practical tools, and opportunities to consider how implementation decisions are made in practice. The Masterclass moves beyond *what* implementation is to focus on *how* implementation unfolds within complex health systems.

A single case study is used throughout the Masterclass to bring implementation decisions to life. You will explore how choices were made in a local health service, why particular strategies were selected, and how plans were adapted along the way. You are also invited to bring your own project to this workshop to apply your learnings to your own practice in a safe and supported learning environment. Finally, each module also includes reflective prompts to help you connect the content to your own context. Over time, these reflections are intended to build your confidence to engage more actively with mentors, researchers, and peers in future implementation and improvement work.

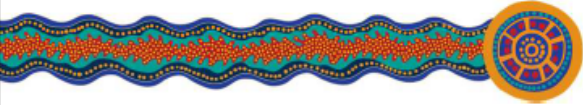
This Masterclass is an invitation to think more clearly about change, work with complexity rather than around it, and recognise implementation as a skill that can be developed, strengthened, and shared. We encourage you to stay curious, reflect openly, and enjoy the learning journey ahead.

Helpful links and resources

The following articles, blogs, videos, podcasts and websites provide useful information to support your learning. You do not need to read all resources before commencing the module.

Implementation	Implementation science: What is it and why should I care? (Bauer & Kirchner, 2019).
	An introduction to implementation science for the non-specialist. (Bauer et al., 2015).
	Implementation science: A critical but undervalued part of the healthcare innovation ecosystem. (Chan et al., 2022).
	Implementation science made too simple: a teaching tool. (Curran, 2020).
	Concept analysis of health research translation nomenclature. (Lizarondo et al., 2025).
	What can implementation science do for you? Key success stories from the field. (Kilbourne, Glasgow, & Chambers, 2020).
Implementation – podcast	An implementation scientist and clinical nurse specialist compare their journeys into using implementation. Demystifying Implementation Science. (Swiss Learning Health System)
Case study key article	Implementing evidence to inform recovery after cardiac surgery via median sternotomy is feasible and effective using a research translation framework. (Phillips et al., 2025).
Keep Your Move in the Tube – videos	Keep Your Move in the Tube. (Sarasota Memorial Health Care System).
	Keep your 'Move in the Tube' During Heart Rehab. (KSAT 12).
	2022 Gage Award Winner Memorial Healthcare System – Keep Your Move in the Tube (America's Essential Hospitals).
The future of healthcare	The future of health in Australia: The time to act is now. (Butler, Daddia, & Azizi). PwC.
	3 megatrends that will shape the future of health. (Bourla, 2025). World Economic Forum
	Beyond tomorrow: Health megatrends anticipated to impact NSW and the healthcare workforce to 2040. (Naughtin et al., 2024). CSIRO.
The 7Ps of implementation	7 Ps (The Center for Implementation).
Patient journey mapping	The Fundamentals of Patient Journey Mapping. (Patient Experience Agency (2024).
Complexity	Seeing the System: How to map what's really going on. (Sharon Mickan, 2025). LinkedIn.
Resource allocation	Sustainability in Health care by allocating resources effectively (SHARE) 1: introducing a series of papers reporting an investigation of disinvestment in a local healthcare setting. (Harris et al., 2017).

Presentation slides

Slide	Notes
QH-TRIP Translating Research Into Practice Implementation Masterclass Module 1: Identify a Problem  0	
 The Queensland Government respectfully acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional and Cultural Custodians of the lands on which we live and work to deliver healthcare to all Queenslanders and recognises the continuation of First Nations peoples' cultures and connection to the lands, waters and communities across Queensland. 1 QH-TRIP Implementation Masterclass Identify a Problem 1	
Welcome to the Implementation Masterclass You will be able to: • Explore practical implementation methods. • Apply an efficient process to deliver and sustain improvement. • Build on Foundation Implementation Workshop • Plan an implementation project.  2 QH-TRIP Implementation Masterclass Identify a Problem 2	
Module 1: Identify a Problem Define a clinical problem, that is suitable for implementation. <i>Clarify why this problem is important, to guide future planning.</i>  3 QH-TRIP Implementation Masterclass Identify a Problem 3	

Slide	Notes
Masterclass Overview • Familiarity with Implementation Foundations workshop. • A potential or proposed TRIP / implementation project to draw on through the Masterclass. • A space to learn, discuss, and explore implementation. • Contribute with curiosity and draw on your own experience. 4 QH-TRIP Implementation Masterclass: Identify a Problem 4	
Learning Objectives - Define a clinical problem that is suitable for implementation - Clarify why this problem is important - Set a personal learning goal for the whole Masterclass 5 QH-TRIP Implementation Masterclass: Identify a Problem 5 Template: <u>My personal learning goal</u>	
DISCUSSION  Discuss: • Your current role. • Your experience with implementation. • Why you are starting this Masterclass now. Remember to: Listen with curiosity. Respect confidentiality. Contribute authentically. 6 QH-TRIP Implementation Masterclass: Identify a Problem 6	
What is the purpose of implementation? To systematically introduce, integrate, and support evidence-informed interventions and innovations in clinical practice, so that patient outcomes, equity and service efficiency are improved. Implementation: putting evidence into practice 7 QH-TRIP Implementation Masterclass: Identify a Problem 7	

Slide	Notes
Why is implementation needed? Effective interventions are not always adopted or sustained. Research takes years to reach routine practice. Guidance from research does not always translate into clear local protocols. Variation exist across teams, wards, and services. 8 QH TRIP Implementation Masterclass: Identify a Problem 8	
How does implementation add value? Implementation adds value for: - Patients and families - Clinicians - Managers - Health systems Implementation leads to: - Improved outcomes - Enhanced patient safety - Enhanced quality of care - Equitable use of resources - More efficient practices 9 QH TRIP Implementation Masterclass: Identify a Problem 9	
Perspectives of Implementation Implementation can be viewed as: A practice area where evidence is integrated into routine clinical practice. A science that studies theories, models, and strategies. A process to plan, deliver, and sustain evidence-informed change. A set of strategies including specific actions that support the process of implementation. 10 QH TRIP Implementation Masterclass: Identify a Problem 10	
Connecting Science and Practice Implementation Science Provides evidence-informed theories, frameworks, and strategies... ...to support the systematic integration of research evidence into practice... ...Improving patient outcomes and service efficiency. Implementation Practice Bridges the gap between what is known to work and what is actually done in clinical settings... ...by applying theory-informed strategies to address context, behaviour, and systems, so evidence can be adopted, adapted, and sustained in practice. 11 QH TRIP Implementation Masterclass: Identify a Problem 11	

Slide	Notes
How to describe a problem  1. Where is the problem? 2. What do you want to change? 3. What is the evidence for change? 4. Who is involved? 12 QH TRIP Implementation Masterclass: Identify a Problem 12	
Two ways to get started 1) Listen for problems • Clinical audits and benchmarking studies • Practice is not aligned with the evidence • Unexplained variations • Clinician and consumer complaints 2) Look for evidence • Clinical guidelines • Systematic reviews • Colleagues who attend conferences • Journal clubs Implementation starts where evidence and practice problems intersect 13 QH TRIP Implementation Masterclass: Identify a Problem 13	
Identify a clinical problem Look for a clinical problem... • That is perceived as important by many people. • Where research evidence is not being integrated into practice. • Where there is variation between similar services. • Where practice is not up-to-date with clinical guidelines. 14 QH TRIP Implementation Masterclass: Identify a Problem 14	
Many problems exist  IDENTIFY a problem.  EXPLORE why the problem exists.  EXPLAIN why implementation is needed. 15 QH TRIP Implementation Masterclass: Identify a Problem 15	

Slide	Notes
Explore challenges in current practice Current Practice Clinical guidelines often exist but are not always used in practice. Increasing research production. Rapid digital innovation. Workforce shortages. Aging population. Finite resources. 16 Q4 TRIP Implementation Masterclass: Identify a Problem 16	
1. Where is the problem? Identify the service, team, and setting where the problem occurs. It may be a hospital, primary care clinic, aged care facility, or community service.  17 Q4 TRIP Implementation Masterclass: Identify a Problem 17	
What is shaping the problem?  Consider how the work setting is keeping the problem in place. Problems are shaped by culture, structures, resources, relationships, and routines. 18 Q4 TRIP Implementation Masterclass: Identify a Problem 18	
2. What do you want to change? What should be happening? What is (or is not) happening? When and where is it happening? Are perspectives aligned about what is happening? 19 Q4 TRIP Implementation Masterclass: Identify a Problem 19	

Slide

Notes

Describe what you want to change

- **Program:** coordinated activities to accomplish a specific goal
- **Practices:** guidelines or recommendations
- **Procedures:** work instructions or sequences of activities
- **Products:** tools or resources that help achieve certain tasks
- **Pills:** drugs, medication schedules

Based on Brown et al. (2015) image developed by The Center for Implementation, © 2015, 2016, 2017, 2018, 2019, 2020
<https://thecenterforimplementation.com/7ps/>

20 QH-TSP | Implementation Masterclass: Identify a Problem

20

3. What is the evidence for change?

A range of evidence, from different sources, is required to clarify what could and 'should' be happening.

- Look for evidence-informed clinical practice guidelines.
- Look for organisational evidence.

This evidence will describe potential future practice and outcomes.

21 QH-TSP | Implementation Masterclass: Identify a Problem

21

Emphasise the importance of the problem

Look for evidence that the problem is important:

Alignment with strategic priorities	Leadership support for change	Sufficient resources	Consequences of doing nothing
Does the problem address key priorities?	Is there recognition of the problem?	Are there resources available to act now?	How would this create additional problems?

22 QH-TSP | Implementation Masterclass: Identify a Problem

22

4. Who is involved?

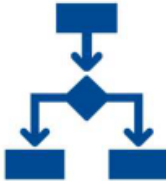
Identify people or groups who

- deliver,
- influence, or
- experience the problem.

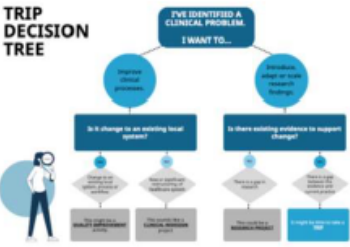
They can actively shape or support progress.

23 QH-TSP | Implementation Masterclass: Identify a Problem

23

Slide	Notes
Use practical tools to identify people Look for a: • process map • clinical practice guideline • flowchart that describes clinical practice. Identify people providing and influencing care processes.  24 QH-TSP Implementation Masterclass: Identify a Problem	
24	
Another practical tool  Map the patient journey Create a visual representation of how patients and families experience health services... • From their initial health need, • Through accessing services, • Receiving treatment, and • Follow-up care. 25 QH-TSP Implementation Masterclass: Identify a Problem	
25	
CASE STUDY Implementation of evidence-informed exercise program following cardiac surgery, using median sternotomy. https://doi.org/10.1016/j.jhc.2025.06.008  26 QH-TSP Implementation Masterclass: Identify a Problem	
26	
CASE STUDY Keep Your Move in the Tube  Change in research evidence from more to less restrictions. 27 QH-TSP Implementation Masterclass: Identify a Problem	
27	

Slide	Notes
CASE STUDY Traditional rehabilitation  Upper limb activity and lifting restrictions Consider best practice  A more active model of cardiac rehabilitation 28 QH TRIP Implementation Masterclass: Identify a Problem 28	
DISCUSSION  1. Where is the problem? 2. What needs to change? 3. Who is involved? 4. What is the evidence for change? 29 QH TRIP Implementation Masterclass: Identify a Problem 29 <u>Activity 1: Describe the problem (case study)</u>	
DISCUSSION: Review the problem  1. Where is the problem? Acute hospitals Outpatients 2. What needs to change? Keep Your Move in the Tube 3. Who is involved? Clinical team 4. Why is there need for change? International guidelines 30 QH TRIP Implementation Masterclass: Identify a Problem 30	
TRANSLATE INTO PRACTICE Describe your problem. 1. Where is the problem. 2. What needs to change. 3. Who is involved. 4. What is the evidence for change. 31 QH TRIP Implementation Masterclass: Identify a Problem 31 <u>Activity 2: Describe the problem (TRIP)</u>	

Slide	Notes
Is the problem suitable for implementation? TRIP DECISION TREE  32 QH-TRIP / Implementation Masterclass Identify a Problem	
Compare Quality Improvement and Implementation Quality Improvement - Urgent local problem around workflow inefficiencies. - Problem-solving strategies used to find root cause/s and make care safer, more efficient, and reliable. - Progressive trial and error until the best solution is found. Implementation - Problem where research benefits are not being realised. - Implementation plan needed to help people actually use the evidence in the clinical guideline. 33 QH-TRIP / Implementation Masterclass Identify a Problem	
Compare Research and Implementation Research Projects - Problem where the answer is not known. - Research expertise is required to design a study to address the question. - Research project is required to answer the question. Implementation - Problem where research benefits are known but not being realised. - Implementation expertise is required to influence people to use the evidence in practice. 34 QH-TRIP / Implementation Masterclass Identify a Problem	
Connecting it all together... Aim to choose the right approach at the right time - Research discovers what works. - Implementation ensures people use what works. - Quality improvement refines existing workflow problems. Discuss with peers and mentors to clarify every situation. 35 QH-TRIP / Implementation Masterclass Identify a Problem	

Slide	Notes
DISCUSSION  Discuss why / how the case study is an implementation problem. 36 QH-TROP Implementation Masterclass: Identify a Problem 36	
DISCUSSION: Confirm the problem  Research is clear about what is effective movement in hospital and home. Implementation is required to understand why current practice is inconsistent. 37 QH-TROP Implementation Masterclass: Identify a Problem 37	
TRANSLATE INTO PRACTICE Is your problem an implementation problem? 38 QH-TROP Implementation Masterclass: Identify a Problem 38	
Learning Objectives: Progress update - Define a clinical problem that is suitable for implementation. - Clarify why this problem is important. 39 QH-TROP Implementation Masterclass: Identify a Problem 39	

Slide	Notes
Systems thinking can help Problems are part of a larger, interconnected system.  Systems: elements, connections within a boundary.  Elements: services, structures, processes, resources.  Connected by people working with and influencing each other. 40 QH TRIP Implementation Masterclass Identify a Problem 40	
Change in health systems Systems thinking helps to look beyond the individual problem to understand the patterns shaping practice. • Relationships connect the elements and shape how they function. • Patterns emerge from common pathways and interactions. Over time, systems are adaptive, and workarounds and solutions emerge from within. 41 QH TRIP Implementation Masterclass Identify a Problem 41	
Complexity in human systems  In patients who have chronic and complex conditions, treatment for one condition may impact on others. 42 QH TRIP Implementation Masterclass Identify a Problem 42	
Complexity in healthcare systems Complexity also exists in health organisations • A change may appear simple, but making change in complex systems can be challenging. Complex systems are dynamic and relational • Interactions matter more than individual components. • Effects ripple in unpredictable directions. • Context influences what 'works'. 43 QH TRIP Implementation Masterclass Identify a Problem 43	

Slide	Notes
Look to understand the system Relationships and routines exist beyond roles, workflows, and protocols. How people enact protocols varies. Look within the system to: • Clarify what's working (and why). • Spot where things get stuck. • Understand where to focus your efforts.  The Complexity Lens 44 QH-TROP Implementation Masterclass: Identify a Problem 44	
Multiple problems exist in complex systems  Every clinical setting contains multiple problems.  Prioritisation is Important.  Choose where action will generate greatest benefit, with the least uninterrupted disruption. 45 QH-TROP Implementation Masterclass: Identify a Problem 45	
Discuss what matters most Does the problem compromise patient safety? Does the problem contribute to inequity, risk, or inefficiencies? Where do people experience frustration most acutely? Where is the biggest gap between evidence and practice? Are there people with time and resources to address this problem? Are the conditions favourable right now?  46 QH-TROP Implementation Masterclass: Identify a Problem 46	
Prioritise by value and impact VALUE • Clinical benefit • Patient experience • Equity • Safety • Evidence-informed  IMPACT • Workforce capability • Resource requirements • Efficiency • Timing • Strategic priorities 47 QH-TROP Implementation Masterclass: Identify a Problem 47	

Slide	Notes
Reduce low value practices De-implementation: to reduce or stop ineffective, outdated, or non-evidence-based practices e.g. <i>X-ray for non-specific low back pain</i> Dis-investment: to reallocate resources toward higher-value alternatives. e.g. <i>Personalised exercise program</i> 48 Q4-TRIP Implementation Masterclass: Identify a Problem 48	
Disinvest in low value care Sometimes improvement involves stopping something that no longer adds value. • Health systems accumulate rather than remove practices. • Clinicians inherit routines shaped by culture, history, convenience. Without intentional review, low-value practices quietly persist. 49 Q4-TRIP Implementation Masterclass: Identify a Problem 49	
Review evidence integration in clinical practice UNDERUSE Inconsistent application of evidence. MIS-USE Evidence used incorrectly, unsafely. OVER-USE Practices that no longer add value. 50 Q4-TRIP Implementation Masterclass: Identify a Problem 50	
CASE STUDY: DISCUSSION Why this problem matters... Underuse Inconsistent application of the new guideline. Overuse Practices that no longer add value are still being used. 51 Q4-TRIP Implementation Masterclass: Identify a Problem 51	

Slide	Notes
DISCUSSION  Discuss why this case study is an important problem that needs to be addressed. 52 QH TRIP Implementation Masterclass: Identify a Problem 52 <u>Activity 3: Discuss the importance of the problem</u>	
TRANSLATE INTO PRACTICE 1. Where is the problem? 2. What do you want to change? 3. What is the evidence for change? 4. Who is involved? • Is the research being consistently integrated? • Is the problem relevant and important? 53 QH TRIP Implementation Masterclass: Identify a Problem 53 <u>Activity 4: Reflection – Describe your own clinical problem</u>	
Close: Review Learning Objectives You can now: - Define a clinical problem that is suitable for implementation. - Clarify why this problem is important. 54 QH TRIP Implementation Masterclass: Identify a Problem 54	
Next: Evidence to support change  55 QH TRIP Implementation Masterclass: Identify a Problem 55	

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Thank you. Next Module: Evidence to Support Change 56	
With thanks to Sharon Mickan Mosaic Health Consulting  57 Q4-TRIP / Implementation Masterclass Identify a Problem 57	

Appendix

1. Template: My personal learning goal
2. Activity 1: Describe the problem (case study)
3. Activity 2: Describe the problem (TRIP)
4. Activity 3: Discuss the importance of the problem
5. Activity 4: Reflection – Describe your own clinical problem
6. QH-TRIP Decision Tree: Identify a Problem

A.1 Template: My personal learning goal

My Personal Learning Goal	Date:

A.2 Activity 1: Describe the problem (case study)

1. Where is the problem?	
2. What do you want to change?	
3. What is the evidence for change?	
4. Who is involved?	

A.3 Activity 2: Describe the problem (TRIP)

1. Where is the problem?	
2. What do you want to change?	
3. What is the evidence for change?	
4. Who is involved?	

A.4 Activity 3: Discuss the importance of the problem

Parameters	Describe Local Problem
Does the problem compromise patient safety?	
Does the problem contribute to inequity, risk or inefficiencies?	
Where do people experience frustration most acutely?	
Where is the biggest gap between evidence and practice?	
Are there people with time and resources to address this problem?	
Are the conditions favourable right now?	

A.5 Activity 4: Reflection – Describe your own clinical problem

If you've identified your problem...	
Where is the problem?	
What do you want to change?	
If you're looking for a problem...	
Is there a problem where research evidence is not being consistently integrated into practice?	
Is this problem relevant and important?	

A.6 QH-TRIP Decision Tree: Identify a Problem

TRIP DECISION TREE

