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Title: INTEGRATING TASK-SHARING FOR RHEUMATIC HEART DISEASE SCREENING: REALIST INITIAL PROGRAM THEORIES

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Background & Aims: Access to adequate echocardiographic detection of rheumatic heart disease (RHD) remains limited in endemic settings. One solution is a task-sharing model whereby trained local healthcare workers use handheld devices to acquire echocardiographic images which are then interpreted by experts off-site. To transition this model from research into a sustainable public health intervention we need to understand how to integrate it into routine health service delivery by studying what implementation strategies work, under what circumstances, and why. The aim of this study was to elicit initial program theories for a realist evaluation of an RHD screening program in Australia and Timor-Leste.

Methods: This was an implementation science study using a realist design. Five phases to initial program theory development were conducted, including: 1) Mapping the complexity of the RHD screening model using Pawson’s ‘VICTORE complexity framework’. 2) Systematically identifying relevant existing implementation theories, models, and frameworks. 3) Completing an exploratory review to identify partial or complete initial program theories. 4) Conducting informal discussions with global RHD screening experts, health workforce experts, multi-disciplinary health services research experts, local community members, and healthcare workers involved in the screening program. 5) Holding dialogic research team discussions to finalise the initial program theories for use in the subsequent realist evaluation of the RHD screening program. As per a realist approach, retroductive analysis using abductive reasoning was used to analyse the information gathered from the five phases. The IPTs were mapped onto the realist evaluation heuristic tool - the context-mechanism-outcome configuration for testing in the realist evaluation.

Results: NOTE: This study is expected to be completed within the next two months. Results will be analysed and reported at that time and a complete abstract can be emailed well in advance of the World Congress on Rheumatic Heart Disease in November and for the subsequent publication in Global Heart. The results section will present identified theories that provide a rigorous explanation for how and why various implementation strategies are expected to work for this model of screening.

Conclusions: NOTE: This study is expected to be completed within the next two months. Conclusions will be made at that time and a complete abstract can be emailed well in advance of the World Congress on Rheumatic Heart Disease in November and for the subsequent publication in Global Heart.