

APPLICATION OF THE CONSOLIDATED FRAMEWORK FOR IMPLEMENTATION RESEARCH (CFIR) TO EVALUATE IMPLEMENTATION OF THE PATHWAYS TO COMORBIDITY CARE (PCC) TRAINING PACKAGE IN DRUG AND ALCOHOL SETTINGS

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Introduction and Aims: The Pathways to Comorbidity Care (PCC) training package was designed to improve the management of mental health and substance use comorbidity in drug and alcohol settings across NSW, Australia. Four main modes of training included seminars, an online portal, 'clinical champion' led workshops, and telephone supervision.

Design and Methods: PCC was evaluated over 9 months in drug and alcohol outpatient services across NSW (N = 30 clinicians). A semi-structured interview was conducted with each participating clinician and evaluated according to the Consolidated Framework for Implementation Research (CFIR). The CFIR consolidates the concepts generated by implementation research into five domains of influence: (1) intervention characteristics, (2) outer setting, (3) inner setting, (4) individuals involved, and (5) the implementation process.

Results: Strengths included: *intervention characteristics* (viable intervention source, quality of the evidence, design and packaging of the intervention); *inner setting* (positive learning climate fostered). Weaknesses included: *outer setting* factors (networking between services, sense of urgency about the adoption of the integrated management approach). There were mixed results with regards to *characteristics of individuals*. Clinical champions were an important and effective component of the implementation *process*.

Discussions and Conclusions: CFIR provided a useful framework for appraising components that may influence implementation of a multi-modal training package to improve management of comorbid mental health and substance use and to elucidate what adaptations may be needed for translation into drug and alcohol settings.

Disclosure of Interest Statement: This study was supported by the NSW Health Translational Research Grant Scheme.