Strengthening Access to the Essential Public Health Services Package for Hypertension and Diabetes care In Rural China using E-Health (SAPPHIRE)

Dr. Maoyi Tian on behalf of the SAPPHIRE team
Background

- High hypertension prevalence and low control rate
- Increasing type 2 diabetes prevalence
- Weak primary health care system
- Essential public health service package – launched in 2009
- Evidence – practice gap exists
Aim

To strengthen the primary health care system to support maximal uptake of the essential public health services package for hypertension and type 2 diabetes in three diverse regions (Sichuan, Zhejiang and Hubei) in China, using three evidence-based interventions: point-of-care decision support, auditing tool and quality improvement initiative.
(1) Using models, frameworks and theories throughout the whole lifecycle of the scale-up project: development, implementation and evaluation.

- Process model – basic logic models
- Determinant framework – CFIR
- Implementation theory – normalization process theory
- Evaluation framework – RE-AIM

Challenge – lack of local capacity/knowledge level in implementation science
Doing the scale-up – innovative methods

(2) Evaluation method

- Proposal - Stepped wedge cluster RCT hybrid type 3 design
- Alternative – time series analysis, two parallel cohorts with control group

Challenge – is (cluster) RCT the only way to provide robust evidence in implementation science?
Doing the scale-up – innovative methods

(3) Stakeholder engagement

- Early engagement
- Buy in from the key implementation partner
- Thought leadership, advocacy events

Challenge – language and/or culture barrier
Thank you!

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