The role of ZonMw in healthcare innovation

ZonMw links research and practice

Improving the quality, safety and cost-effectiveness of healthcare requires the continual development and introduction of innovations. ZonMw funds the necessary research and development to ensure this. Experience has shown that innovations do not find their own way into daily practice. ZonMw therefore actively supports initiatives designed to ensure that innovations actually reach end users. Many ZonMw programmes include components explicitly focused on the implementation of research results. ZonMw also has a number of specific instruments at their disposal to promote links between research and practice.

Instruments

Knowledge synthesis
ZonMw regularly commissions a ‘knowledge synthesis’ on a particular subject. A knowledge synthesis brings together the results of research with information on the subject from policymakers and practitioners. The synthesis gives care providers, professional associations, patient groups, healthcare managers, healthcare insurers and policymakers an up-to-date and handy summary of the latest knowledge available on the subject so that they can promote the use of that knowledge in practice. The synthesis also highlights outstanding questions and problems still encountered in practice, allowing researchers to conduct targeted follow-up research.

ZonMw Parels (pearls)
Out of all the projects ZonMw funds, some always stand out because their results are above average, they tie in perfectly with a current development, or they provide an appropriate answer to a relevant healthcare problem. ZonMw awards these projects ‘Pearl’ status to boost the implementation of their results. The projects receive a Pearl statue and are given extra publicity. ZonMw also offers extra support in disseminating and implementing the results of these projects.

Dissemination and Implementation Boost
Active dissemination and implementation of knowledge is an important aspect of all projects funded by ZonMw. Researchers are encouraged to consider these aspects carefully. If necessary, ZonMw can give projects extra support in this area in the form of a ‘Dissemination and Implementation Boost’ (known in Dutch by the acronym VIMP). A VIMP gives the project an extra financial injection of up to € 50,000 for this purpose.

Implementation fellows
ZonMw has appointed ten implementation fellows at the eight teaching hospitals (UMCs) and two of the larger regional hospitals in the Netherlands. They advise clinicians and researchers in their own organisation on implementation and implementation research. Over a period of three years the fellows research what factors foster or hamper implementation at their own institution. They also highlight problems at their institutions, and ensure internal dissemination of implementation knowledge, thus raising institutes’ implementation awareness.
Front runners in quality and cost savings (KIKK)
This ZonMw initiative supports healthcare providers as they conduct projects designed to raise quality and reduce costs. The aim is to achieve actual cost savings, providing an example to others. The front runners sign an agreement with ZonMw in which they set out the projects they are to conduct and the savings they intend to achieve. They also indicate what kind of support they will require. This might take the form of help with choosing projects that are relevant to them, or with measuring the baseline situation and the cost savings made. Support (financial or otherwise) might also be needed for project managers, in the form of training and intervision, or help with negotiating agreements with healthcare administration offices and health insurance companies. A modest budget is available for these services. To allow others to benefit from their experiences, the front runners share them with their online community.
(For more information and a link to the community, go to www.zonmw.nl/kikk)

Proven success

National quality programmes
In recent years, ZonMw has overseen ten national quality programmes. These research programmes aimed to improve the quality of disease prevention, curative care or long-term care on a national scale. Many parties were involved in the implementation of these programmes, all of which are now complete. These parties included healthcare professionals, managers, quality officers, centres of excellence, sector organisations and patients. A recently completed evaluation found that the programmes had been successful. Good examples have been implemented and, where necessary, new instruments and procedures have been developed.
Much has been achieved in two areas in particular:
- the introduction of new ideas and methods for quality improvement at participating institutions involved in disease prevention, curative care and long-term care
- capacity-building at these institutions to allow new methods of improvement to be applied

But quality improvement does not stop here. New programmes are up and running or in the pipeline, whilst healthcare providers also continue their efforts. New questions for implementation research include issues such as how knowledge is adapted in practice to the local context, how information technology should be used in implementation, and how users’ social networks can best be used.