

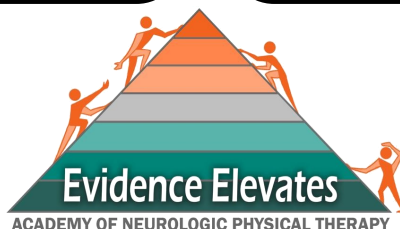
IMPLEMENTATION AND DE-IMPLEMENTATION STRATEGIES

Remove: *Completely eliminate an inappropriate or low-value practice*

- Perform a database search for existing evidence for a specific intervention (there several open access resources)
- Remove interventions that do not have evidence to support them
- Interventions with mixed/low evidence, consider removing completely in place of high-evidence interventions
- Do not rely on clinical expertise/opinion alone

Remove

Reduce



Replace

Restrict

Replace: *Started a new high-value practice while concurrently stopping a lower value practice*

- Use task-specific strategies
- Use shared-decision making
- Aim for proper intensity/aerobic activities especially for gait training
- Use the EDGE/CPG documents to help guide decisions regarding outcome measures
- Use the various CPGs to help guide decision-making for best available treatment interventions (available on the ANPT website)

References

- Avers D, Brown M. White paper: Strength training for the older adult. *J Geriatr Phys Ther.* 2009;32(4):148-158.
- American College of Sports Medicine, Liguori G, Felto Y, Fountaine C, Roy BA. *Acsms' Guidelines for Exercise Testing and Prescription.* Eleventh. Wolters Kluwer; 2022.
- American Physical Therapy Association. Academy of Neurologic Physical Therapy. <https://neuropt.org/>
- Norton WE, Chambers DA. Unpacking the complexities of de-implementing inappropriate health interventions. *Implement Sci.* 2020;15(1):2. Published 2020 Jan 9. doi:10.1186/s13012-019-0960-9
- Scheets PL, Hornby TG, Perry SB, et al. Moving Forward. *J Neurol Phys Ther.* 2021;45(1):46-49. doi:10.1097/NPT.0000000000000337

Reduce: *Changing the frequency with which a low-value practice is utilized*

- Determine the amount of evidence available for low-value practice and reduce accordingly.
- Example: If the person cannot work on task-specific activities consider pertinent impairment-based strategies that have the strongest evidence and perform the intervention with fidelity (White paper: Strength Training in the Older Adult)

Restrict: *Narrowing the scope of practice (by target population, setting, and health care professional)*

- Use Evidence based principles when delivering an intervention (i.e. performing population specific interventions based on best evidence)
- Be mindful that not all interventions are generalizable
- Example: Perform moderate-intensity interventions for those with contraindications for high-intensity
- Example: Limit the amount of impairment based interventions for patients with ambulatory goals