



## Implementer Portrait: Cecilie Varsi

Cecilie Varsi is a Senior Researcher working for the Center for Shared Decision Making and Collaborative Care Research at Oslo University Hospital in Norway.

### *How do you say, “knowledge translation” and “implementation” in your own language, Norwegian?*

Implementation is “*Implementering*” in Norwegian, and for “Knowledge Translation” we are using the term “*Kunnskapsoverføring*”.

### *What is one of your favourite articles on implementation?*

I very much like Per Nilsen’s [Making sense of implementation theories, models and frameworks](#). It is helpful in understanding what implementation is all about, because it draws a map of the important steps of implementation, from planning to conducting and evaluation. And the most important point with this article, it helps to decide which implementation theories, frameworks or models that can support the work in each of the implementation process steps. When I first came across this article, it helped me sort all the rather messy pieces of the puzzle into an understandable complete picture.

### *What are you currently working on that relates to implementation?*

I am working for the Center for Shared Decision Making and Collaborative Care Research at Oslo University Hospital, Norway, where we combine e-health research and implementation research with the overall goal to improve shared decision making, illness management, self-management and patient-centred collaborative care for persons with long term illnesses.

My main activities here right now are related to an eHealth research project, called EPIO. As part of this project, we aim to develop, test and evaluate a person-centred interactive e-health intervention to support self-management for people with chronic pain. My colleagues and I are conducting a process evaluation and implementation exploration in parallel with an [RCT](#), to understand how EPIO and similar interventions can be effective for patients, be implemented well within the health care system and become part of standard clinical care.

### *If you were to have lunch with another ‘implementer’, whom would you pick?*

Clearly, [Dr Cara C. Lewis](#). She is an associate investigator at Kaiser Permanente Washington Health Research Institute (KPWHRI)’s MacColl Center for Health Care Innovation and affiliate faculty of psychiatry and behavioral sciences at the University of Washington School of Medicine. She has worked with many large implementation projects, has had several leading positions within implementation science networks and a large number of publications. Also, she is a young female and mother of young children. It would have been very interesting to learn from her work, how she manages everything, and to get some advice in how to move implementation research in Norway forward.

### *If you had the resources for it, what within implementation science or practice would you want to work with next?*

I would want to progress the implementation science agenda within my field, that’s for sure. I want to help ensure that evidence-based e-health interventions are integrated into routine care to improve the quality and effectiveness of care for people with long term conditions. That is truly what motivates me. So, a project that combines studies of patient *and* implementation outcomes of e-health interventions for chronic illness management for persons living throughout Norway would be perfect. Simply because there is an urgent need to examine the development and evaluation of strategies to implement e-health programs into daily practice. No doubt that there has been rapid development within eHealth lately, with a large number of interventions having led to positive research results – but their implementation into routine health care settings still is difficult, and that’s where I would like to put my energy.