

## Implementer Portrait: Tim Rapley



Tim Rapley is a Professor of Applied Health Care Research at [Northumbria University, Newcastle upon Tyne](http://www.northumbria.ac.uk), UK. He is a medical sociologist focusing on medical practice and research with a special interest in the implementation of care, the organization of care, and social studies of qualitative research. Tim asks what people actually do, as opposed to what people think they do or tell you they do, when studying every day, taken-for-granted aspects of medical care.

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

'Better reporting of interventions: [template for intervention description and replication \(TiDieR\) checklist and guide](#)'. Currently, I really like working with the TiDieR checklist when helping people in workshops who are trying to develop their own implementation plan. This was originally designed to be a reporting guideline (and I really do *\*not\** like

the idea of reporting guidelines, far, far, too constraining). However, when used in practice, especially with groups of stakeholders, it can become a lovely way to enable a more pragmatic and focused approach to shaping their implementation desires and plans of action.

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

Lots (and lots). I'm part of the [ImpleMentAll family](#), in the UK arm I'm working with Tracy Finch, Carl May and Sebastian Potthoff, trying to develop a tool, that can be used by implementers on the ground, to support the scaling up and scaling out of internet-based Cognitive Behavioural Therapy. It has been a lot of fun albeit at times head scratching work, especially as it asks us to have what I want to call a more 'pragmatic implementation science' focus – so developing ideas, approaches and resources that (non-academic, non-practitioner) stakeholders can think and work with.

I'm also currently doing a lot of work, embedding implementation thinking and practices much earlier into the research cycle. So, for example, making sure that all the intervention development work I support, has a specific focus on questions of 'implementability', so designing new practices, system, tools with and for users (and taking what they 'say' very seriously), and developing proto-types and seeing them in use in real-life settings (and learning from what they actually 'do'), prior to letting the pilot/feasibility study then full-trial machine roll into action.



*If you were to have lunch with another 'implementer', whom would you pick?*

Anyone who does implementation work on the ground, who is out with the academic community and academic debates. I feel the academic work on implementation is in danger of becoming too divided between specific theoretical and/or methodological tribes, with people often choosing to adopt a single model, framework or theory (albeit, for good conceptual reasons). I'd be interested in discussing how they develop and apply tailored solutions to problems, how they work with a range of ideas, concepts or theories, as needed, to manage the problem at hand. Ideally, they'd also have to a keen interest in the wines from Bordeaux.

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

Pragmatically, I'm interested in developing tools, approaches and resources that support implementation thinking for non-academic, non-practitioner, audiences. So, following [Whalen \(1995\)](#), a focus on developing 'systems for experts' instead of 'expert systems', approaches that enable and support innovative, conceptually-informed (but not overly directed or constrained) thinking that is appropriate to the problem at hand. Conceptually, I'm interested in mapping the range of ways we can support and embed more creative and effective stakeholder engagement and involvement in our implementation work.

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