

Implementer Portrait: Bianca Albers



Bianca Albers is a Postdoctoral Researcher at the [Institute for Implementation Science in Health Care](#), University of Zurich, Switzerland. In her research, she focuses on the usability and role of implementation strategies and frameworks as tools for guiding and structuring implementation practice and on strategies for building the capacity within health organisations and services to develop, implement and sustain research-supported interventions. With a background in political science, Bianca also maintains a deep interest for health systems research and the interface between implementation science and policy implementation. Bianca is a co-founder and past-chair of the [European Implementation Collaborative \(EIC\)](#) and a founding member of the [Society for Implementation Research Collaboration \(SIRC\)](#).

In German, Bianca says *Implementierung* or *Implementation* (implementation) and *Wissensübersetzung* or *Wissensüberführung* (knowledge translation).

What is one of your favourite articles on implementation?

I often enjoy reading articles that explore, examine and discuss questions of influence, authority and power as they relate to implementation work. I would, for example, highlight the work of [Roman Kislov](#) or [Lisa Rogers](#) here, both of whom have contributed to this area in the past years. I find it relevant and important to consider the “dark” and difficult sides of implementation work, why failure occurs, and resistance of dilemmas can be unsurmountable at times. I think this type of literature helps us in understanding these dynamics – because it, for example, integrates organisational, institutional or policy theories.

What are you currently working on that relates to implementation?

Two different projects are central pieces that are on my radar at the moment. [REVERSE](#) is a Horizon2020 funded project that aims to reduce the prevalence of anti-microbial resistance in different acute care hospitals in Europe using rather innovative practice bundles. I am part of the team that works to understand whether a tailored design of implementation strategies will lead to better clinical and implementation outcomes from these bundles, when compared with a standardised approach to their implementation. My other project has a Swiss focus. It is about organised colorectal cancer screening programmes in Switzerland and the strategies used to implement these programmes. We want to figure out what these are and how they are aligned with current best knowledge about quality implementation. The goal is to identify room and opportunities for implementation improvement.

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

Dr Roman Kislov, Manchester Metropolitan University. For the above reasons of course. 😊 I have never talked with him but think that we have a shared interest in understanding the opportunities, challenges and dilemmas of those working in boundary spanning roles in implementation and would like to discuss those – and also learn more about his current work.



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

I would like to do a trial of implementation support practitioners (ISPs), i.e. professionals, who support others in their implementation practice. This is still a fairly under-researched area in implementation science. There are so many questions that could be raised as part of such a trial. Whether the use of ISPs can improve implementation, service and patient outcomes; why and how that might be the case; how ISPs interact with formal leadership roles, and how that affects an implementation; how ISP competencies can be effectively built and strengthened. All of which are questions that interest me.

Get in touch with Bianca via email at bianca.albers@uzh.ch and follow her on Twitter [@Bianca Albers!](https://twitter.com/Bianca_Albers)
