



# National Centre of Implementation Science Annual Report 2020



NATIONAL CENTRE OF  
**IMPLEMENTATION SCIENCE**



## Message from the director

I am pleased to present our annual report for 2020.

This year brought significant challenges to our community and the community settings we work with. I would like to give special acknowledgement to the incredible efforts of our partners working in childcare services, schools, sporting clubs and workplaces who faced unprecedented disruptions and were continually adapting the services they provide in response to the COVID-19 pandemic.

While COVID-19 restrictions meant we needed to delay some of our studies in these settings, I am proud to share the many activities and outputs our Centre has achieved this year.

We have begun to understand new evidence to practice gaps, we have begun to unearth some of the barriers to implementing chronic disease prevention programs in community settings, and we are on our way to understanding more. Planning is also underway so that we are in a position to refine and test implementation strategies in schools when things return a little more to normal.

It is exciting that we have shared our findings in numerous papers and presentations, and I am thrilled our centre is contributing to developing the next generation of chronic disease prevention implementation scientists through hosting PhD students, mentoring and the launch of our training program TIDIRH Australia.

Perhaps never before has it been so apparent what can be achieved when researchers, policy makers and practitioners come together to improve the health of our community. We are excited by the opportunities before us and look forward to working with our partners to implement better chronic disease prevention.



Professor Luke Wolfenden  
NCOIS Director



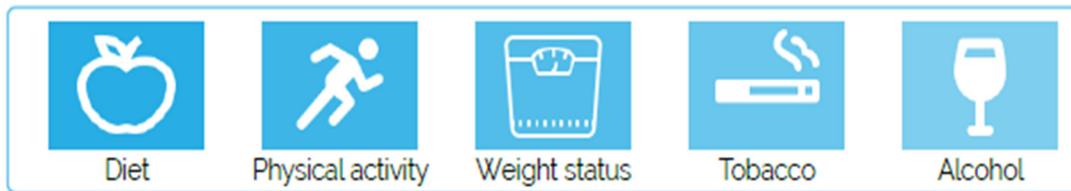
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## About us

The National Centre of Implementation Science (NCOIS) is an NHMRC funded Centre for Research Excellence.

Our aim is to reduce the burden of chronic disease in our community. To do this, we work to ensure evidence-based programs, policies and practices that reduce modifiable chronic disease risks are implemented in community settings including schools, childcare services, sporting groups and workplaces. We focus on prevention strategies targeting diet, physical activity, weight status, tobacco and alcohol.



Why do we do this?

- 1 Chronic diseases are the leading cause of morbidity and mortality globally and in Australia.
- 2 We know how to alleviate the burden of chronic disease. For example, more than half of cancer occurring today could be prevented if interventions already known to be effective in addressing cancer risks were implemented.
- 3 Diet, physical activity, weight status, tobacco and alcohol use are among the primary modifiable risks for a range of chronic diseases.
- 4 Implementing interventions in community organisations such as schools, childcare, sporting clubs and workplaces is recommended given their existing infrastructure and capacity to access a large proportion of the population.
- 5 To achieve a positive health impact, interventions need to be implemented effectively.

## Where we are

NCOIS consists of researchers from across the globe. The University of Newcastle is the primary administrator of NCOIS, which is located in Newcastle, NSW, Australia.

## Snapshot data

### Our 2020 achievements



2 systematic reviews complete  
11 in progress  
3 in planning  
6 scheduled to commence



3 national surveys in progress  
2 scheduled to commence



3 prioritisation processes  
underway



1 mediation analysis in progress



2 economic analyses in progress  
1 in planning



7 research presentations given



5 papers published  
3 papers submitted



1 launch of implementation  
science training with 12 expert  
facilitators and 26 attendees



3 PhD students hosted



4 early-mid career  
researchers mentored



2 Chief Investigator meetings  
held



Many collaborations with our  
partners who:

- joined advisory groups
- provided input into study and program design
- attended presentations on our findings
- provided resources and staff to support our projects
- co-presented training
- co-authored papers and funding reports
- integrated our research into policies, service delivery and program design



2 newsletters published



2 randomised controlled trials  
in planning

## Who we are

### Chief Investigators

**Professor Luke Wolfenden**  
University of Newcastle

**Professor John Wiggers**  
University of Newcastle

**Professor Adrian Bauman**  
University of Sydney/University of Newcastle

**Professor Chris Rissel**  
Flinders University NT

**Professor Andrew Wilson**  
University of Sydney

**Professor Jeremy Grimshaw**  
University of Ottawa

**Dr Serene Yoong**  
University of Newcastle

**Associate Professor Julian Elliot**  
Monash University

**Professor Chris Doran**  
Central Queensland University

**Dr Hopin Lee**  
University of Newcastle

### Associate Investigators

**Professor John Attia**  
Hunter Medical Research Institute

**Dr Andrew Milat**  
NSW Ministry of Health/University of Sydney

**Dr Andrew Bailey**  
Mid North Coast Local Health District

**Ms Nicole Evans**  
Central Coast Local Health District

**Professor James Thomas**  
Department of Childhood, Families and  
Health, Institute of Education/ Department of  
Health (England)

**Associate Professor Andrew Searles**  
Hunter Medical Research Institute

**Professor Sarah Lamb**  
University of Oxford

**Dr Cara Lewis**  
Kaiser Permanente Washington Health  
Research Institute

**Dr Nicole Nathan**  
NHMRC Translating Research into Practice  
Fellow/Hunter New England Clinical Research  
Fellow/ Winston Churchill Fellow

**Dr David Chambers**  
National Cancer Institute (US)

### Research stream leads

**Dr Rebecca Hodder**  
**Dr Serene Yoong**  
**Dr Nicole Nathan**

**Dr Penny Reeves**  
**Dr Hopin Lee**  
**Dr Rachel Sutherland**

## **Centre manager**

**Dr Meghan Finch**

## **Research and support staff**

**Ms Susan Abrahams**

**Ms Megan Alston**

**Mr Mathew McLaughlin**

**Ms Mary Shefi D'Silva**

**Dr Alice Grady**

**Dr Alix Hall**

**Dr Jacklyn Jackson**

**Dr Jannah Jones**

**Associate Professor Kenny Lawson**

**Dr Alicia Leonard**

**Ms Sasha Lorien**

**Mr Mathew McLaughlin (Tepi)**

**Ms Rebecca Muddle**

**Ms Beatrice Murawski**

**Dr Kate O'Brien**

**Dr Heidi Turon**

## **Students**

**Ms Melanie Lum**

**Ms Cassandra Lane**

**Mr Adam Shoesmith**

**Ms Alison Brown**

## Our partners

Collaboration and partnership with groups in the field is an integral part of achieving our objectives. We are committed to building on existing relationships and forging new partnerships with key organisations to facilitate research, capacity building and knowledge translation. We work with our partner organisations, stakeholders and end users to make real world change.

In 2020, our collaborators included:

- Heart Foundation
- Cancer Council
- Alcohol and Drug Foundation
- Australian Council for Health, Physical Education and Recreation Inc (ACHPER)
- Early Learning and Care Council of Australia (ELACCA)
- The Australian Prevention Partnership Centre
- NSW Ministry of Health
- VicHealth
- SA Wellbeing
- NSW Department of Education
- Catholic Schools Offices
- Association of Independent Schools in NSW
- Hunter New England Local Health District
- Central Coast Local Health District
- Mid North Coast Local Health District NSW
- University of Newcastle
- University of Sydney
- Deakin University
- Queensland University of Technology
- University of Ottawa
- Monash University
- Central Queensland University
- University of Oxford Clinical Trials Unit
- University of Exeter

In 2020, our collaborators joined us across many stages of the research process: as members of advisory groups, by providing feedback and input into how we conduct our research, by attending presentations on our findings, by providing resources and staff to assist with research projects, by providing methodological support, by co-presenting training, by co-authoring papers and funding reports. We value the contribution of our collaborators and greater impact our joint efforts produce for the health of our community.

## The Collaboration for Enhanced Research Impact (CERI)

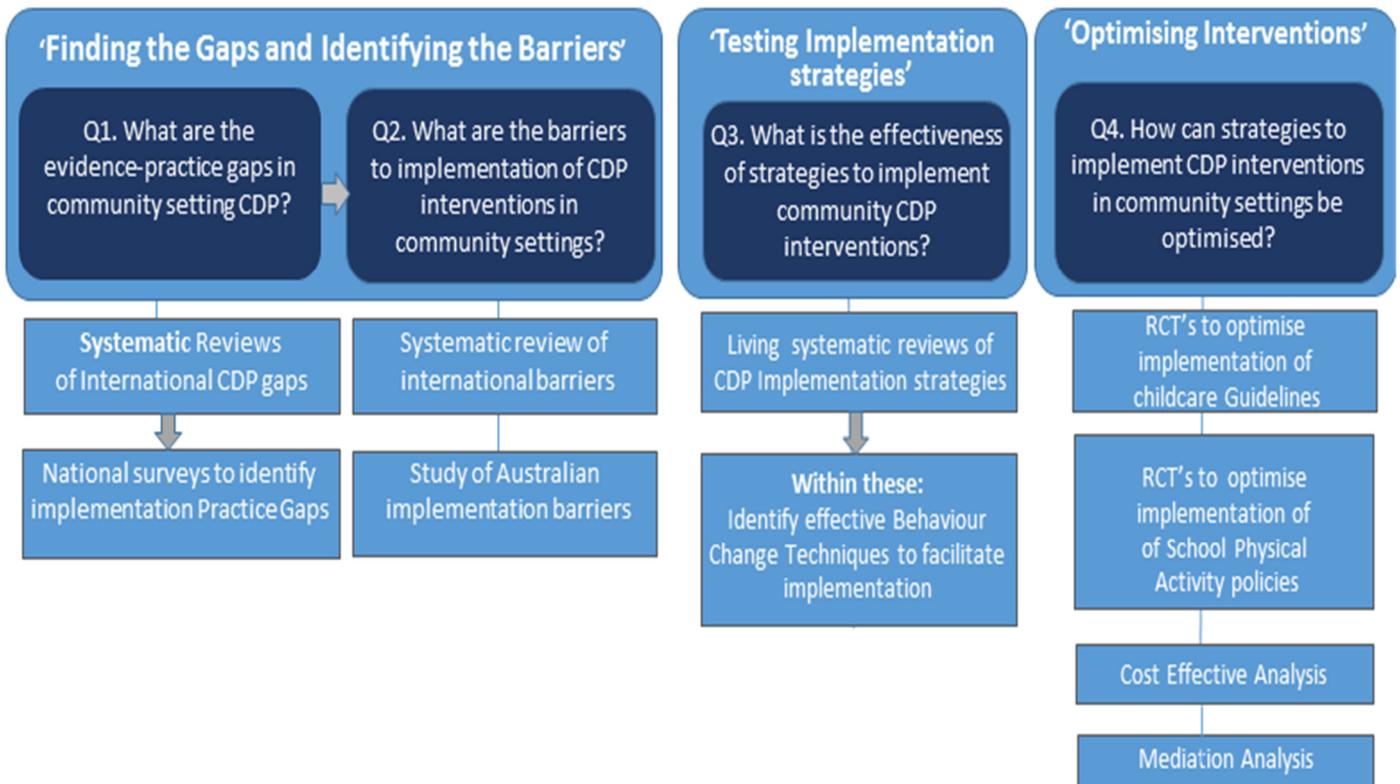


CERI is an exciting new collaboration which began in June 2020. A joint initiative of The Australian Prevention Partnership Centre and four NHMRC Centres of Research Excellence, including our centre, CERI aims to enhance the profile and impact of chronic disease prevention research in Australia. It brings together some of Australia's leading prevention researchers to develop shared narratives, work together to translate new knowledge, and support early- to mid-career researchers across all member institutions.

## Our research

Our foundation research projects are organised into four streams. The projects within these streams are outlined below.

### NCOIS Research Streams



## Stream 1: Finding the gaps

This work is identifying evidence-practice gaps in chronic disease prevention in our community settings.

### *Systematic reviews to identify practice gaps internationally*

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Childhood obesity prevention interventions in primary schools</i>	Schools	Weight status	Complete
<i>School-based obesity prevention interventions</i>	Schools	Weight status	In progress
<i>School-based nutrition interventions</i>	Schools	Diet	In progress
<i>School-based tobacco and alcohol interventions</i>	Schools	Tobacco Alcohol	In progress
<i>Prevalence of school-based obesity interventions</i>	Schools	Weight status	In planning
<i>Prevalence of school-based tobacco and alcohol interventions</i>	Schools	Alcohol Tobacco	In planning
<i>School-based obesity prevention guidelines and policies</i>	Schools	Weight status	In progress
<i>School-based tobacco and alcohol prevention guidelines and policies</i>	Schools	Alcohol Tobacco	In progress
<i>Chronic disease prevention interventions in sporting clubs</i>	Sporting clubs	Alcohol Diet Physical activity Tobacco	Complete
<i>Healthy eating interventions for improving child diet in early childhood education and care settings</i>	Childcare	Diet	In progress
<i>Physical activity interventions in early childhood education and care settings</i>	Childcare	Physical activity	In progress
<i>Obesity prevention policies and practices in early childhood education and care settings</i>	Childcare	Weight status Diet Physical activity	In progress
<i>International prevalence of childcare-based chronic disease prevention interventions</i>	Childcare	Alcohol Diet Physical activity Tobacco	Under consideration
<i>Workplace interventions targeting chronic disease health risk factors</i>	Workplaces	Alcohol Diet Physical activity Tobacco	In progress

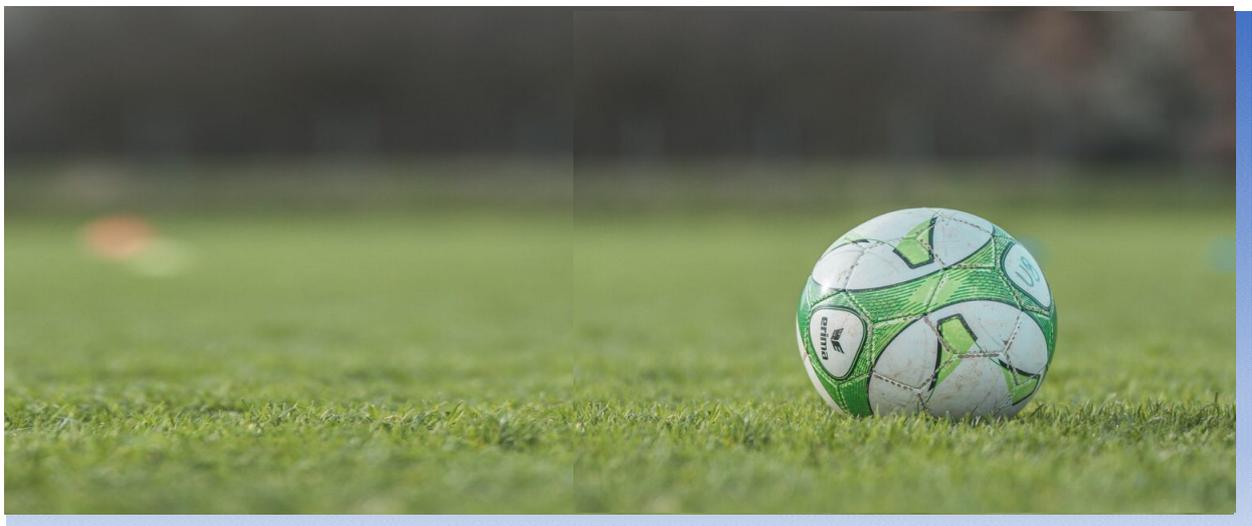
## Stream 1: Finding the gaps continued...

### National surveys to identify practice gaps

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Chronic disease prevention policy and practice implementation in primary schools</i>	Schools	Alcohol Diet Physical activity Tobacco	In progress
<i>Chronic disease prevention policy and practice implementation in early childhood education and care</i>	Childcare	Diet Physical activity	In progress

### Prioritisation processes to identify evidence gaps

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Prioritisation process of interventions with greatest impact and where improved implementation could yield greatest health gains</i>	Schools	Alcohol Diet Physical activity Tobacco	In planning
<i>Prioritisation process to assess scalability of evidence based practices within early childhood education and care</i>	Childcare	Diet Physical activity	In planning
<i>Prioritisation of physical activity interventions in centre-based childcare</i>	Childcare	Physical activity	In progress



## Stream 2: Identifying the barriers to implementation

This work will examine barriers and facilitators to the implementation of chronic disease prevention policies, programs and practices in community settings.

### *Systematic reviews to identify the barriers to implementing chronic disease prevention strategies*

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Barriers to implementation in childcare</i>	Childcare	Diet, physical activity	In progress
<i>Barriers to dissemination in childcare</i>	Childcare	Physical activity	In planning
<i>Barriers to implementation in schools</i>	Schools	Alcohol Diet Physical activity Tobacco	Scheduled to commence
<i>Barriers to implementation in sporting club programs</i>	Sporting clubs	Alcohol Diet Physical activity Tobacco	Scheduled to commence

### *National surveys to identify the barriers to implementing chronic disease prevention strategies*

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Barriers to implementation in childcare</i>	Childcare	Diet Physical activity	In progress
<i>Barriers to implementation in schools</i>	Schools	Alcohol Diet Physical activity Tobacco Weight status	Scheduled to commence
<i>Barriers to implementation in sporting club programs</i>	Sporting clubs	Alcohol Diet Physical activity Tobacco Weight status	Scheduled to commence

### Stream 3: Testing implementation strategies

This work seeks to identify effective community setting chronic disease prevention implementation strategies.

#### *Living systematic reviews to test the effectiveness of implementation strategies and to identify effective behaviour change techniques to facilitate implementation*

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Interventions to increase fruit and vegetable consumption in preschool aged children</i>	Childcare	Diet Implementation	In progress
<i>Implementation strategies in schools</i>	Schools	Diet Physical activity Weight status	Scheduled to commence
<i>Implementation strategies in childcare</i>	Childcare	Diet Physical activity Weight status	Scheduled to commence
<i>Behaviour change techniques to improve implementation of school-based interventions</i>	Schools	Diet Physical activity Weight status	Scheduled to commence
<i>Behaviour change techniques to improve implementation of childcare-based interventions</i>	Childcare	Diet Physical activity Weight status	Scheduled to commence



## Stream 4: Optimising the implementation of interventions

This work seeks to identify how strategies to implement chronic disease prevention programs can be optimised.

### *Randomised controlled trials to optimise implementation (our implementation laboratory)*

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Dissemination of the SWAPIT program (a lunchbox focused school-based M-Health intervention)</i>	Schools	Diet	In planning
<i>Implement a school physical activity policy (PACE pilot study)</i>	Schools	Physical activity	Complete (prior to 2020)
<i>Increase schools' implementation and maintenance of a mandatory school physical activity policy (PACE effectiveness study)</i>	Schools	Physical activity Implementation	Complete (prior to 2020)
<i>Increase schools' implementation and maintenance of a school physical activity policy across three NSW jurisdictions (PACE scale study)</i>	Schools	Physical activity Implementation	Complete (prior to 2020)
<i>Phase-I Optimisation (Comparative effectiveness) Optimise the multi-strategy implementation support designed to improve teachers' implementation of a school physical activity policy and assess the comparative effectiveness of a lower dose version of the support compared to the original high dose support.</i>	Schools	Physical activity Implementation	Complete (prior to 2020)
<i>Phase-II Optimisation (Comparative effectiveness) Further optimise the multi-strategy implementation support designed to improve teachers' implementation of a school physical activity policy. The multi-strategy support will be informed by previous learnings to design and test a support strategy that is less resource intensive, low in cost and feasible to deliver at scale.</i>	Schools	Physical activity Implementation	In planning

### *Economic and mediation analyses*

<b>Project</b>	<b>Setting</b>	<b>Focus</b>	<b>Status</b>
<i>Cost effectiveness of PACE pilot study</i>	Schools	Physical activity	In progress
<i>Cost effectiveness of PACE effectiveness study</i>	Schools	Physical activity	In progress
<i>Cost effectiveness of PACE scale studies</i>	Schools	Physical activity	In planning
<i>Mediation analysis for PACE trial</i>	Schools	Physical activity	In progress

## Our Implementation Laboratory

An integral part of our research is our implementation laboratory. Here we rapidly test, refine and develop the best ways to implement chronic disease prevention strategies in natural settings. The laboratory is an ongoing collaboration between our researchers, the NSW Ministry of Health, Hunter New England Local Health District and other partnering policy and practice organisations. Together, we co-design research questions which address significant knowledge gaps and policy or practice needs. Knowledge is exchanged between researchers and practitioners at every stage of the process meaning our work directly informs the decisions of our partner organisations. When we determine the best strategies for implementation, our partner organisations are committed to implementing these strategies at scale.

Our implementation laboratory is acknowledged as an international exemplar of best practice in translational public health research and practice. We have generated more trials of community chronic disease prevention implementation strategies than any other group in the world.

Our current trials are testing how best to implement healthy lunchbox programs and activity policy in schools.

These trials were selected because:

- systematic review evidence supports their efficacy
- effective strategies to implement these programs and policies do not exist
- the trials align with NSW government policy and local health district priorities
- there is evidence these strategies are currently poorly implemented.

## Building Future Leaders: Our training

### TIDIRH Australia

In 2020, we launched the Training Institute for Dissemination and Implementation Research in Health (TIDIRH Australia) in partnership with The Australian Prevention Partnership Centre. TIDIRH Australia is a training course in implementation science based on the TIDIRH US and TIDIRH Ireland programs. The program was facilitated by world-leading implementation science academics and focused on training and mentoring health practitioners and academics to use implementation science methods for prevention.



TIDIRH Australia ran from January-May 2020. Our first cohort involved 26 participants from universities, health departments, non-government organisations, research institutes, industry and other government agencies. With the support of 12 expert facilitators, participants learned to evaluate and integrate interventions into real-world settings to improve health. While the program was planned to mirror the roll-out and content of the US and Ireland programs, due to COVID-19, the in-person component had to be abandoned. A two week online closing forum was delivered instead.

The program was a success, with the majority of participants and facilitators rating their overall perception of the program as “very positive”. We plan to run the training again towards the end of 2021.

### PhD students

The centre hosted three PhD students in 2020.

### Mentoring

We provided mentoring and coaching to four early and mid-career researchers. This included coaching in economic analysis methods, measurement, and involving the early and mid-career researchers in study implementation.

We will be rolling out a capacity building program in 2021 for PhD students, early and mid-career researchers, with training to build on our existing networks, along with focused training on social media use, optimisation and knowledge translation.

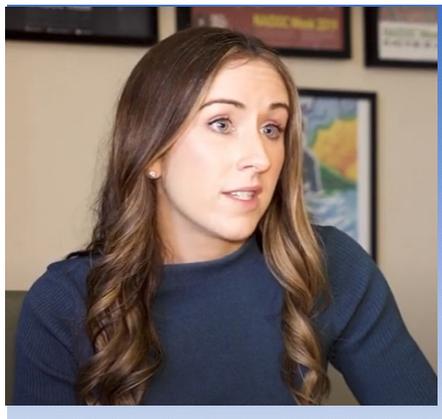


## Communications

With COVID restrictions limiting our ability to deliver face to face conferences and communications, in 2020 we focused on delivering a 2 week online closing forum for participants of the TIDIRH Australia training program. We also published two newsletters to keep our stakeholders updated on our work and our researchers conducted radio interviews and participated in webinars to share our research findings.

## Awards

NCOIS Director Luke Wolfenden was awarded one of two Sax Institute Research Action Awards for 2020. The Sax Institute's Research Action Awards honour individuals whose research has made a significant impact on health policy, programs or service delivery. The winners were chosen by a committee of national and international experts chaired by distinguished public health physician Dr Heather Buchan.



### Emerging Health Researcher Award

NCOIS researcher, Dr Alice Grady was awarded one of four 2020 Bupa Health Foundation Emerging Health Researcher Awards.

The awards recognise researchers for work which has a tangible impact on the health of the Australian community. Dr Grady's work focuses on developing scalable programs delivered in childcare settings to prevent childhood obesity.

Dr Alice Grady works with childcare services to co-design healthy eating and physical activity initiatives to reduce the potential for childhood obesity. Her research uses digital technologies and existing infrastructure to ensure the programs are scalable and can reach as many children as possible.

## Publications

In 2020, we published the following papers:

### **Published papers**

Hodder RK, O'Brien KM, Tzelepis F, Wyse RJ, Wolfenden L. Interventions for increasing fruit and vegetable consumption in children aged five years and under. *Cochrane Database of Systematic Reviews* 2020, Issue 5. Art. No.: CD008552.

Jackson J, Wolfenden L, Grady A, Lum M, Leonard A, McCrabb S, Hall A, Pearson N, Barnes C, Yoong SL. Early childhood education and care-based healthy eating interventions for improving child diet: a systematic review protocol. *Systematic reviews*. 2020 Dec;9(1):1-9.  
<https://systematicreviewsjournal.biomedcentral.com/articles/10.1186/s13643-020-01440-4>

Nathan NK, Sutherland RL, Hope K, McCarthy NJ, Pettett M, Elton B, Jackson R, Trost SG, Lecathelinais C, Reilly K, Wiggers JH, Hall A, Gillham K, Herrmann V, Wolfenden L. Implementation of a School Physical Activity Policy Improves Student Physical Activity Levels: Outcomes of a Cluster-Randomized Controlled Trial. *J Phys Act Health*. 2020 Sep 12:1-10. doi: 10.1123/jpah.2019-0595. Epub ahead of print. PMID: 32919383.

Jackson J, **Wolfenden L**, Grady A, Lum M, Leonard A, McCrabb S, Hall A, Pearson N, Barnes C, Yoong SL. Early childhood education and care-based healthy eating interventions for improving child diet: a systematic review protocol. *Systematic reviews*. 2020 Dec;9(1):1-9.

Lee K, van Nassau F, Grunseit A, Conte K, Milat A, **Wolfenden L**, Bauman A. Scaling up population health interventions from decision to sustainability—a window of opportunity? A qualitative view from policy-makers. *Health research policy and systems*. 2020 Dec;18(1):1-2.

**Wolfenden L**, Williams CM, Kingsland M, Yoong SL, Nathan N, Sutherland R, Wiggers J. Improving the impact of public health service delivery and research: a decision tree to aid evidence-based public health practice and research. *Australian and New Zealand journal of public health*. 2020 Oct 1;44(5):331-2.

Pearson N, **Wolfenden L**, Finch M, Yoong SL, Kingsland M, Nathan N, Lecathelinais C, Wedesweiler T, Kerr J, Sutherland R. A cross-sectional study of packed lunchbox foods and their consumption by children in early childhood education and care services. *Nutrition & Dietetics*. 2020 Aug 24.

McConnell-Nzunga J, Weatherson KA, Masse L, Carson V, Faulkner G, Lau E, McKay H, Temple V, **Wolfenden L**, Naylor PJ. Child care setting and its association with policies and practices that promote physical activity and physical literacy in the early years in British Columbia. *Journal of Physical Activity and Health*. 2020 Feb 21;17(4):429-34.

Sutherland R, Nathan N, Brown A, Yoong SL, Reynolds R, Walton A, Janssen L, Desmet C, Lecathelinais C, Gillham K, Herrmann V, **Wolfenden L**. A cross-sectional study to determine the energy density and nutritional quality of primary school lunchboxes. *Public Health Nutrition*. 2020 Apr;23(6):1108-16. doi: 10.1017/S1368980019003379

Brown A, Barnes C, Byaruhanga J, McLaughlin M, Hodder RK, Booth D, Nathan N, Sutherland R, **Wolfenden L**. Effectiveness of Technology-Enabled Knowledge Translation Strategies in Improving the Use of Research in Public Health: Systematic Review. *Journal of medical Internet research*. 2020;22(7):e17274.

Lee K, Milat A, Grunseit A, Conte K, **Wolfenden L**, Bauman A. The Intervention Scalability Assessment Tool: a pilot study assessing five interventions for scalability. *Public Health Research & Practice*. 2020 Jun 30;30(2).

Mclaughlin M, Duff, Campbell E, **Wolfenden L**, Wiggers J. Protocol for a mixed methods process evaluation of a hybrid implementation-effectiveness trial of a scaled-up whole-school physical activity program for adolescents: Physical Activity 4 Everyone (PA4E1). *Trials*. 2020 Mar 17;21:268. doi: 10.1186/s13063-020-4187-5

Shelton RC, Lee M, Brotzman LE, **Wolfenden L**, Nathan N, Wainberg ML. What is dissemination and implementation science?: An introduction and opportunities to advance behavioral medicine and public health globally *International Journal of Behavioural Medicine*. 2020 Feb 14;27:3-20. doi: 10.1007/s12529-020-09848-x

**Wolfenden L**, Barnes C, Jones J, Finch M, Wyse RJ, Kingsland M, Tzelepis F, Grady A, Hodder RK, Booth D, Yoong SL. Strategies to improve the implementation of healthy eating, physical activity and obesity prevention policies, practices or programmes within childcare services. *Cochrane Database of Systematic Review*. 2020 Feb 10;(2):CD011779. doi: 10.1002/14651858.CD011779.pub3

Yoong SL, Grady A, Wiggers JH, Stacey FG, Rissel C, Flood V, Finch M, Wyse R, Sutherland R, Salajan D, O'Rourke R, Lecathelinais C, Barnes C, Pond N, Gillham K, Green S, **Wolfenden L**. Child-level evaluation of a web-based intervention to improve dietary guideline implementation in childcare centers: a cluster-randomized controlled trial. *The American Journal of Clinical Nutrition*. 2020 Feb 24;nqaa025. doi: 10.1093/ajcn/nqaa025

Gogovor A, Zomahoun HTV, Ben Charif A, McLean RKD, Moher D, Milat A, **Wolfenden L**, Prevost K, Aubin E, Rochon P, Ekanmian G, Sawadogo J, Rheault N, Legare F. Essential items for reporting of scaling studies of health interventions (SUCCEED): protocol for a systematic review and Delphi process. *Systematic Reviews*. 2020 Jan 11;9(1):11. doi: 10.1186/s13643-019-1258-3

Milat AJ, Lee K, Conte K, Grunseit A, **Wolfenden L**, van Nassau F, Orr N, Sreeram P, Bauman A. Intervention Scalability Assessment Tool: a decision support tool for health policy makers and implementers. *Health Research Policy and Systems*. 2020 Jan 3;18:1. doi: 10.1186/s12961-019-0494-2

Grady A, Seward K, Finch M, **Wolfenden L**, Wyse R, Wiggers J, Lecathelinais C, Yoong SL. A Three-Arm Randomised Controlled Trial of High-and Low-Intensity Implementation Strategies to Support Centre-Based Childcare Service Implementation of Nutrition Guidelines: 12-Month Follow-Up. *International Journal of Environmental Research and Public Health*. 2020 Jan;17(13):4664.

Grady A, **Wolfenden L**, Wiggers J, Rissel C, Finch M, Flood V, Salajan D, O'Rourke R, Stacey F, Wyse R, Lecathelinais C, Barnes C, Green S, Herrmann V, Yoong SL. Effectiveness of a web-based menu-planning intervention to improve childcare service compliance with dietary guidelines: randomized controlled trial. *Journal of Medical Internet Research*. 2020;22(2):e13401. doi:10.2196/13401

## Presentations

In 2020, we provided the following presentations:

Hodder RK, O'Brien KM, Stacey FG, Wyse RJ, Clinton-McHarg T, Tzelepis F, James EL, Bartlem KB, Nathan NK, Sutherland S, Robson E, Yoong S, Wolfenden L. Interventions for increasing fruit and vegetable consumption in children aged 5 years and under: systematic review. Australasian Society for Behavioural Health and Medicine Conference, February 2020; Sydney, Australia.

Hodder RK, O'Brien KM, Stacey FG, Wyse RJ, Clinton-McHarg T, Tzelepis F, James EL, Bartlem KB, Nathan NK, Sutherland S, Robson E, Yoong S, Wolfenden L. Interventions for increasing fruit and vegetable consumption in children aged 5 years and under: systematic review. Nutrition Society of Australia 43rd Annual Scientific Meeting; December 2019; Newcastle, Australia.

Nicole Nathan, April Oh, Paul Estabrooks, Rachel Sutherland. Moving evidence based nutrition and physical activity interventions into the real world: application of dissemination and implementation science ISBNPA Auckland 2020

Cassandra Lane, Sam McCrabb, Luke Wolfenden, Nicole Nathan, Rachel Sutherland. How effective are physical activity interventions when they are scaled-up: A systematic review- ISBNPA Auckland 2020

Cassandra Lane, Nicole Nathan, Rachel Sutherland, Adrian Bauman, Luke Wolfenden, Optimising a school-based physical activity intervention for scale up. ISBNPA Auckland 2020

Nicole Nathan, Hannah Brown, Rachel Sutherland, Nicole McCarthy, Adam Shoesmith, Luke Wolfenden. An Evaluation of the Sustainability of Physical Activity Scheduling in Schools. ISBNPA Auckland 2020

Hannah Brown, Nicole Nathan, Sam McCrabb, Adam Shoesmith, Rachel Sutherland, Luke Wolfenden. Systematic review of the factors which support or impede the maintenance and sustainability fidelity of nutrition, physical activity, obesity, alcohol and/or tobacco prevention policies, practices or programmes in schools and childcares ISBNPA Auckland 2020

Our researchers were also accepted to present the following in 2021:

Effectiveness of interventions to increase pre-schooler fruit and vegetable intake: a living systematic review. Accepted for the Evidence and Implementation Summit in March 2021

Identifying effective school-based practices to prevent obesity in children. Accepted for the Evidence and Implementation Summit in March 2021

## Contacts

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## Our Partners

