## Robbie C Foy

## List of Publications by Year in descending order

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140 6,387 35 75 papers citations h-index 9467

times ranked

citing authors

docs citations

all docs

#	Article	IF	CITATIONS
1	A guide to using the Theoretical Domains Framework of behaviour change to investigate implementation problems. Implementation Science, 2017, 12, 77.	6.9	1,734
2	Process evaluations for cluster-randomised trials of complex interventions: a proposed framework for design and reporting. Trials, 2013, 14, 15.	1.6	358
3	No more â€business as usual' with audit and feedback interventions: towards an agenda for a reinvigorated intervention. Implementation Science, 2014, 9, 14.	6.9	271
4	Health Research Funding Agencies' Support and Promotion of Knowledge Translation: An International Study. Milbank Quarterly, 2008, 86, 125-155.	4.4	243
5	Advancing the Science of Patient Safety. Annals of Internal Medicine, 2011, 154, 693.	3.9	174
6	Barriers to effective management of type 2 diabetes in primary care: qualitative systematic review. British Journal of General Practice, 2016, 66, e114-e127.	1.4	168
7	Meta-analysis: Effect of Interactive Communication Between Collaborating Primary Care Physicians and Specialists. Annals of Internal Medicine, 2010, 152, 247.	3.9	155
8	Attributes of clinical recommendations that influence change in practice following audit and feedback. Journal of Clinical Epidemiology, 2002, 55, 717-722.	5.0	150
9	What context features might be important determinants of the effectiveness of patient safety practice interventions?. BMJ Quality and Safety, 2011, 20, 611-617.	3.7	139
10	How evidence based are recruitment strategies to randomized controlled trials in primary care? Experience from seven studies. Family Practice, 2003, 20, 83-92.	1.9	138
11	Universal weekly testing as the UK COVID-19 lockdown exit strategy. Lancet, The, 2020, 395, 1420-1421.	13.7	127
12	The role of theory in research to develop and evaluate the implementation of patient safety practices. BMJ Quality and Safety, 2011, 20, 453-459.	3.7	107
13	Role of patient and public involvement in implementation research: a consensus study. BMJ Quality and Safety, 2018, 27, 858-864.	3.7	100
14	Designing and undertaking randomised implementation trials: guide for researchers. BMJ, The, 2021, 372, m3721.	6.0	99
15	Development of the Quality Improvement Minimum Quality Criteria Set (QI-MQCS): a tool for critical appraisal of quality improvement intervention publications. BMJ Quality and Safety, 2015, 24, 796-804.	3.7	98
16	Reinvigorating stagnant science: implementation laboratories and a meta-laboratory to efficiently advance the science of audit and feedback. BMJ Quality and Safety, 2019, 28, 416-423.	3.7	92
17	A reanalysis of cluster randomized trials showed interrupted time-series studies were valuable in health system evaluation. Journal of Clinical Epidemiology, 2015, 68, 324-333.	5.0	89
18	How does context affect interventions to improve patient safety? An assessment of evidence from studies of five patient safety practices and proposals for research. BMJ Quality and Safety, 2011, 20, 604-610.	3.7	87

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19	Why does primary care need more implementation research?. Family Practice, 2001, 18, 353-355.	1.9	83
20	Challenges, solutions and future directions in the evaluation of service innovations in health care and public health. Health Services and Delivery Research, 2016, 4, 1-136.	1.4	83
21	Conducting Online Expert panels: a feasibility and experimental replicability study. BMC Medical Research Methodology, 2011, 11, 174.	3.1	77
22	Revitalising audit and feedback to improve patient care. BMJ, The, 2020, 368, m213.	6.0	77
23	Prescribed opioids in primary care: cross-sectional and longitudinal analyses of influence of patient and practice characteristics. BMJ Open, 2016, 6, e010276.	1.9	75
24	Using the Theoretical Domains Framework (TDF) to understand adherence to multiple evidence-based indicators in primary care: a qualitative study. Implementation Science, 2015, 11, 113.	6.9	68
25	Appropriate disclosure of a diagnosis of dementia: identifying the key behaviours of 'best practice'. BMC Health Services Research, 2008, 8, 95.	2.2	65
26	How can we recognize continuous quality improvement?. International Journal for Quality in Health Care, 2014, 26, 6-15.	1.8	64
27	Understanding long-term opioid prescribing for non-cancer pain in primary care: a qualitative study. BMC Family Practice, 2015, 16, 121.	2.9	51
28	The development of a theory-based intervention to promote appropriate disclosure of a diagnosis of dementia. BMC Health Services Research, 2007, 7, 207.	2.2	50
29	Behavioural medicine: changing our behaviour. BMJ: British Medical Journal, 2006, 332, 437-438.	2.3	49
30	The demonstration of a theory-based approach to the design of localized patient safety interventions. Implementation Science, 2013, 8, 123.	6.9	49
31	Implementation science: a reappraisal of our journal mission and scope. Implementation Science, 2015, 10, 51.	6.9	43
32	Perspectives of commissioners and cancer specialists in prioritising new cancer drugs: impact of the evidence threshold. BMJ: British Medical Journal, 1999, 318, 456-459.	2.3	41
33	Clinical trials in primary care. BMJ: British Medical Journal, 1998, 317, 1168-1169.	2.3	40
34	Identifying continuous quality improvement publications: what makes an improvement intervention 'CQI'?. BMJ Quality and Safety, 2011, 20, 1011-1019.	3.7	37
35	How patients understand depression associated with chronic physical disease $\hat{a} \in \hat{a}$ a systematic review. BMC Family Practice, 2012, 13, 41.	2.9	37
36	Implementation Science six years onâ€"our evolving scope and common reasons for rejection without review. Implementation Science, 2012, 7, 71.	6.9	36

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37	The effects of financial incentives for case finding for depression in patients with diabetes and coronary heart disease: interrupted time series analysis. BMJ Open, 2014, 4, e005178-e005178.	1.9	36
38	A multidimensional approach to assessing intervention fidelity in a process evaluation of audit and feedback interventions to reduce unnecessary blood transfusions: a study protocol. Implementation Science, 2016, 11, 163.	6.9	36
39	Which factors explain variation in intention to disclose a diagnosis of dementia? A theory-based survey of mental health professionals. Implementation Science, 2007, 2, 31.	6.9	35
40	Planning for knowledge translation: a researcher's guide. Evidence and Policy, 2010, 6, 527-541.	1.0	34
41	TIA and minor stroke: a qualitative study of long-term impact and experiences of follow-up care. BMC Family Practice, 2019, 20, 176.	2.9	34
42	Prescribing tamoxifen in primary care for the prevention of breast cancer: a national online survey of GPs' attitudes. British Journal of General Practice, 2017, 67, e414-e427.	1.4	33
43	Using Q-methodology to guide the implementation of new healthcare policies. BMJ Quality and Safety, 2018, 27, 737-742.	3.7	33
44	Identifying quality improvement intervention publications - A comparison of electronic search strategies. Implementation Science, 2011, 6, 85.	6.9	32
45	Developing â€~high impact' guideline-based quality indicators for UK primary care: a multi-stage consensus process. BMC Family Practice, 2015, 16, 156.	2.9	30
46	A randomised controlled trial of a tailored multifaceted strategy to promote implementation of a clinical guideline on induced abortion care. BJOG: an International Journal of Obstetrics and Gynaecology, 2004, 111, 726-733.	2.3	29
47	Theory-based identification of barriers to quality improvement: induced abortion care. International Journal for Quality in Health Care, 2005, 17, 147-155.	1.8	29
48	Incentivised case finding for depression in patients with chronic heart disease and diabetes in primary care: an ethnographic study. BMJ Open, 2014, 4, e005146-e005146.	1.9	29
49	A framework for classifying patient safety practices: results from an expert consensus process. BMJ Quality and Safety, 2011, 20, 618-624.	3.7	28
50	Do clinical guidelines enhance safe practice in obstetrics and gynaecology?. Best Practice and Research in Clinical Obstetrics and Gynaecology, 2007, 21, 657-673.	2.8	27
51	Patients understanding of depression associated with chronic physical illness: a qualitative study. BMC Family Practice, 2014, 15, 37.	2.9	26
52	Education and training for implementation science: our interest in manuscripts describing education and training materials. Implementation Science, 2015, 10, 136.	6.9	25
53	Variations in achievement of evidence-based, high-impact quality indicators in general practice: An observational study. PLoS ONE, 2017, 12, e0177949.	2.5	24
54	Barriers to clinical guidelines: the need for concerted action. British Journal of Clinical Governance, 2001, 6, 166-174.	0.3	23

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55	The evaluation of enhanced feedback interventions to reduce unnecessary blood transfusions (AFFINITIE): protocol for two linked cluster randomised factorial controlled trials. Implementation Science, 2017, 12, 84.	6.9	22
56	The development of an intervention to promote adherence to national guidelines for suspected viral encephalitis. Implementation Science, 2015, 10, 37.	6.9	19
57	Improving Professional Practice in the Disclosure of a Diagnosis of Dementia: A Modeling Experiment to Evaluate a Theory-Based Intervention. International Journal of Behavioral Medicine, 2009, 16, 377-387.	1.7	18
58	To what extent can behaviour change techniques be identified within an adaptable implementation package for primary care? A prospective directed content analysis. Implementation Science, 2018, 13, 32.	6.9	18
59	Identifying positive deviants in healthcare quality and safety: a mixed methods study. Journal of the Royal Society of Medicine, 2018, 111, 276-291.	2.0	18
60	An adaptable implementation package targeting evidence-based indicators in primary care: A pragmatic cluster-randomised evaluation. PLoS Medicine, 2020, 17, e1003045.	8.4	18
61	Effectiveness of an implementation optimisation intervention aimed at increasing parent engagement in HENRY, a childhood obesity prevention programme - the Optimising Family Engagement in HENRY (OFTEN) trial: study protocol for a randomised controlled trial. Trials, 2017, 18, 40.	1.6	17
62	The impact of guidelines on mild hypertension in pregnancy: time series analysis. BJOG: an International Journal of Obstetrics and Gynaecology, 2004, 111, 765-770.	2.3	16
63	The pathway to induced abortion: women's experiences and general practitioner attitudes. Journal of Family Planning and Reproductive Health Care, 2006, 32, 15-18.	0.8	16
64	NorthStar, a support tool for the design and evaluation of quality improvement interventions in healthcare. Implementation Science, 2007, 2, 19.	6.9	16
65	How do hospitals respond to feedback about blood transfusion practice? A multiple case study investigation. PLoS ONE, 2018, 13, e0206676.	2.5	16
66	Antenatal detection of domestic violence. Lancet, The, 2000, 355, 1915.	13.7	15
67	A cluster randomised trial of educational messages to improve the primary care of diabetes. Implementation Science, 2011, 6, 129.	6.9	14
68	Action to Support Practices Implement Research Evidence (ASPIRE): protocol for a cluster-randomised evaluation of adaptable implementation packages targeting †high impact†clinical practice recommendations in general practice. Implementation Science, 2015, 11, 25.	6.9	13
69	General practitioner attitudes towards prescribing aspirin to carriers of Lynch Syndrome: findings from a national survey. Familial Cancer, 2017, 16, 509-516.	1.9	13
70	The effects of an evidence- and theory-informed feedback intervention on opioid prescribing for non-cancer pain in primary care: A controlled interrupted time series analysis. PLoS Medicine, 2021, 18, e1003796.	8.4	12
71	A trial platform to develop a tailored theory-based intervention to improve professional practice in the disclosure of a diagnosis of dementia: Study protocol [ISRCTN15871014]. Implementation Science, 2006, 1, 7.	6.9	11
72	Partners at Care Transitions: exploring healthcare professionals' perspectives of excellence at care transitions for older people. BMJ Open, 2018, 8, e022468.	1.9	9

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73	Repeated analyses of national clinical audit reports demonstrate improvements in feedback methods. Implementation Science Communications, 2020, 1, 106.	2.2	9
74	â€~Wads up, doc' – trends in British newspapers' reporting of general practitioners' pay. Primary He Care Research and Development, 2010, 11, 405-409.	alth 1.2	8
75	`Just another incentive scheme': a qualitative interview study of a local pay-for-performance scheme for primary care. BMC Family Practice, 2014, 15, 168.	2.9	8
76	Optimizing primary care research participation: a comparison of three recruitment methods in data-sharing studies. Family Practice, 2016, 33, 200-204.	1.9	8
77	General practitioners' perceptions of irritable bowel syndrome: a Q-methodological study. Family Practice, 2018, 35, 74-79.	1.9	8
78	Education in Advanced Disease. Journal of Pain and Symptom Management, 2012, 43, 885-901.	1.2	7
79	Does a local financial incentive scheme reduce inequalities in the delivery of clinical care in a socially deprived community? A longitudinal data analysis. BMC Family Practice, 2015, 16, 61.	2.9	7
80	Study protocol for a cluster randomised controlled feasibility trial evaluating personalised care planning for older people with frailty: PROSPER V2 27/11/18. Pilot and Feasibility Studies, 2020, 6, 56.	1.2	7
81	Developing and evaluating packages to support implementation of quality indicators in general practice: the ASPIRE research programme, including two cluster RCTs. Programme Grants for Applied Research, 2020, 8, 1-96.	1.0	7
82	Interâ€professional learning in primary care: lessons from an actionâ€learning programme. British Journal of Clinical Governance, 2002, 7, 40-44.	0.3	6
83	A new health technology: where is the consensus on a clinically worthwhile benefit? Eye, 2002, 16, 469-471.	2.1	6
84	Understanding depression associated with chronic physical illness: a Q-methodology study in primary care. British Journal of General Practice, 2015, 65, e401-e408.	1.4	6
85	Primary palliative care team perspectives on coordinating and managing people with advanced cancer in the community: a qualitative study. BMC Family Practice, 2018, 19, 177.	2.9	6
86	Can we do better? Bridging the research to practice gap in patient blood management–optimizing â€~audit & feedback' and the challenges of undertaking a national clusterâ€randomized controlled trial. ISBT Science Series, 2019, 14, 129-135.	1.1	6
87	General practice responses to opioid prescribing feedback: a qualitative process evaluation. British Journal of General Practice, 2021, 71, e788-e796.	1.4	6
88	Effectiveness of Enhanced Performance Feedback on Appropriate Use of Blood Transfusions. JAMA Network Open, 2022, 5, e220364.	5.9	6
89	Quality indicators and performance measures for prison healthcare: a scoping review. Health and Justice, 2022, 10, 13.	2.1	6
90	A randomised fractional factorial screening experiment to predict effective features of audit and feedback. Implementation Science, 2022, 17, .	6.9	6

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91	Evidence-based family planning: finding answers to clinical questions. Journal of Family Planning and Reproductive Health Care, 2003, 29, 48-52.	0.8	5
92	Increasing use of a new health technology during the wait for NICE guidance: findings from the third national tracker survey of photodynamic therapy. Journal of Public Health, 2004, 26, 52-55.	1.8	5
93	The development and application of audit criteria for assessing knowledge exchange plans in health research grant applications. Implementation Science, 2014, 9, 93.	6.9	5
94	A pragmatic cluster randomised controlled trial of a tailored intervention to improve the initial management of suspected encephalitis. PLoS ONE, 2018, 13, e0202257.	2.5	5
95	A cluster randomised controlled trial of educational prompts in diabetes care: study protocol. Implementation Science, 2007, 2, 22.	6.9	4
96	The evaluation of a tailored intervention to improve the management of suspected viral encephalitis: protocol for a cluster randomised controlled trial. Implementation Science, 2015, 10, 14.	6.9	4
97	Making a positive diagnosis of irritable bowel syndrome. British Journal of General Practice, 2017, 67, 580-581.	1.4	4
98	Strategies to self-manage side-effects of adjuvant endocrine therapy among breast cancer survivors: an umbrella review of empirical evidence and clinical guidelines. Journal of Cancer Survivorship, 2022, 16, 1296-1338.	2.9	4
99	Evidence-based reproductive health: testing times for treatments. Journal of Family Planning and Reproductive Health Care, 2003, 29, 165-168.	0.8	3
100	Feasibility of applying review criteria for depression and osteoporosis national guidance in primary care. Primary Health Care Research and Development, 2014, 15, 396-405.	1.2	3
101	A policy of universal screening for depression: caution needed. BMJ, The, 2016, 353, i2174.	6.0	3
102	Exploring the feasibility of patient safety huddles in general practice. Primary Health Care Research and Development, 2020, 21, e24.	1.2	3
103	Establishing a primary care audit and feedback implementation laboratory: a consensus study. Implementation Science Communications, 2021, 2, 3.	2.2	3
104	Explaining variable effects of an adaptable implementation package to promote evidence-based practice in primary care: a longitudinal process evaluation. Implementation Science, 2022, 17, 9.	6.9	3
105	Interventions to optimise the outputs of national clinical audits to improve the quality of health care: a multi-method study including RCT., 2022, 10, 1-284.		3
106	Testing for Helicobacter pylori in primary care: trouble in store?. Journal of Epidemiology and Community Health, 1998, 52, 305-309.	3.7	2
107	Introduction of photodynamic therapy for the treatment of neovascular age-related macular degeneration: tracking a moving target. Eye, 2003, 17, 583-586.	2.1	2
108	Evidence-based reproductive health care: getting evidence into practice. Journal of Family Planning and Reproductive Health Care, 2004, 30, 17-20.	0.8	2

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109	Improving induced abortion care in Scotland: enablers and constraints. Journal of Family Planning and Reproductive Health Care, 2005, 31, 20-23.	0.8	2
110	Structured career pathways in academic primary care. Family Practice, 2007, 25, 63-67.	1.9	2
111	Optimising participation and generalisability: the use of opt-out recruitment for an implementation trial in primary care. Trials, 2015, 16, .	1.6	2
112	Longer-term health and social care strategies for stroke survivors and their carers: the LoTS2Care research programme including cluster feasibility RCT. Programme Grants for Applied Research, 2021, 9, 1-268.	1.0	2
113	Childhood constipation. BMJ, The, 2021, 375, e065046.	6.0	2
114	Research shapes policy: but the dynamics are subtle. Public Money and Management, 2013, 33, 9-14.	2.1	1
115	Use of electronic health records in the design and evaluation of implementation research in primary care - experiences from the aspire cluster randomised controlled trials (CRCTS). Trials, 2015, 16, .	1.6	1
116	Supporting doctors who make mistakes. BMJ: British Medical Journal, 2019, 365, l2161.	2.3	1
117	A cluster RCT and process evaluation of an implementation optimisation intervention to promote parental engagement enrolment and attendance in a childhood obesity prevention programme: results of the Optimising Family Engagement in HENRY (OFTEN) trial. Trials, 2021, 22, 773.	1.6	1
118	Reforming primary care. Ending inertia but avoiding fatigue. Canadian Family Physician, 2002, 48, 663-5, 671-4.	0.4	1
119	Pain self-management interventions for community-based patients with advanced cancer: a research programme including the IMPACCT RCT. Programme Grants for Applied Research, 2021, 9, 1-92.	1.0	1
120	Embedded trials within national clinical audit programmes: A qualitative interview study of enablers and barriers. Journal of Health Services Research and Policy, 2022, 27, 50-61.	1.7	1
121	Structured follow-up pathway to support people after transient ischaemic attack and minor stroke (SUPPORT TIA): protocol for a feasibility study and process evaluation. BMJ Open, 2022, 12, e060280.	1.9	1
122	Evidence-based reproductive health care: using evidence about diagnostic tests. Journal of Family Planning and Reproductive Health Care, 2003, 29, 245-248.	0.8	0
123	Trends in provision of photodynamic therapy and clinician attitudes: a tracker survey of a new health technology. BMC Health Services Research, 2005, 5, 34.	2.2	0
124	Cracking the system. British Journal of General Practice, 2008, 58, 734-735.	1.4	0
125	Will Evidence Be Enough to Promote Interactive Communication for the Benefit of Patients?. Annals of Internal Medicine, 2010, 153, 131.	3.9	0
126	Complex considerations for randomisation across linked randomised trials of complex interventions: illustration from the affinitie programme. Trials, $2015, 16, \ldots$	1.6	0

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127	General practitioner attitudes towards prescribing aspirin to carriers of Lynch Syndrome: Findings from a national survey. European Journal of Surgical Oncology, 2016, 42, S233.	1.0	0
128	General practitioner attitudes towards prescribing tamoxifen for the primary prevention of breast cancer: Results of a vignette study. European Journal of Surgical Oncology, 2016, 42, S233-S234.	1.0	0
129	General practice in UK newspapers: the influence of major policy changes. British Journal of General Practice, 2019, 69, 119.1-119.	1.4	0
130	$1086 { m Methodological}$ challenges using routine aggregated data in a primary care implementation trial on opioid prescribing. International Journal of Epidemiology, 2021, 50, .	1.9	0
131	Management of Helicobacter pylori infection. BMJ: British Medical Journal, 1998, 316, 1244-1244.	2.3	0
132	Developing theory-based text messages to support retention in clinical trials: A mixed methods approach. Research Methods in Medicine & Health Sciences, 2022, 3, 22-31.	1.2	0
133	Factors influencing follow-up care post-TIA and minor stroke: a qualitative study using the theoretical domains framework. BMC Health Services Research, 2022, 22, 235.	2.2	0
134	Enhanced feedback interventions to promote evidence-based blood transfusion guidance and reduce unnecessary use of blood components: the AFFINITIE research programme including two cluster factorial RCTs. Programme Grants for Applied Research, 2022, 10, 1-112.	1.0	0
135	Title is missing!. , 2020, 17, e1003045.		0
136	Title is missing!. , 2020, 17, e1003045.		0
137	Title is missing!. , 2020, 17, e1003045.		0
138	Title is missing!. , 2020, 17, e1003045.		0
139	Title is missing!. , 2020, 17, e1003045.		0
140	Cancer patients' needs assessment in primary care: study protocol for a cluster randomised controlled trial (cRCT), economic evaluation and normalisation process theory evaluation of the needs assessment tool cancer (CANAssess). BMJ Open, 2022, 12, e051394.	1.9	0