Active Implementation for Successful Service Delivery

Children's Behavioral Health Knowledge Center

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As we consider how to mainstream the use of evidence in everyday practice, let's consider…

How are we **selecting strategies** that are a good "fit" with local context and how are we **using data** to optimize the use of these strategies in practice?

How are we **building the capacity** of practitioners to support the new ways of work?

How are we creating **hospitable funding, policy and regulatory environments** for new ways of work to be implemented effectively and sustained over time?

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Active Implementation

| Effective Interventions | ✖ | Effective Implementation Methods | ✖ | Enabling Contexts |

$$\text{Effective Interventions} \times \text{Effective Implementation Methods} \times \text{Enabling Contexts}$$

$$= \text{Socially Significant Outcomes}$$

Selecting Evidence

Effective Interventions
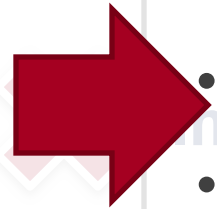
Interventions

- **Fully operationalized program model or approach**

- **"Good Fit" Evidence**

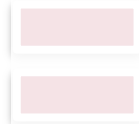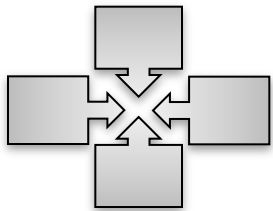- **Fit and Feasibility Assessment**

  - **Need**

  - **Fit**
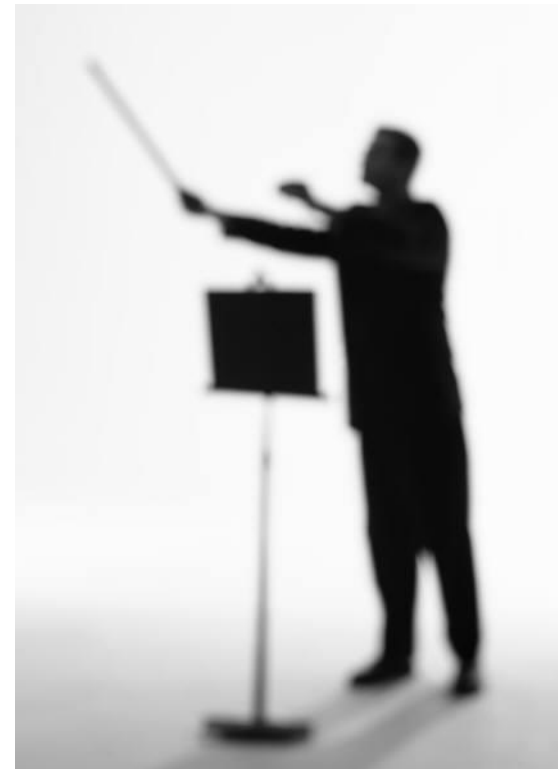
  - **Resources for Implementation**

  - **Evidence**

  - **Readiness for Replication**

  - **Capacity**

Leading with Need and Fit

CONTEXTUAL FIT

Contextual fit is the match between the strategies, procedures, or elements of an intervention and the values, needs, skills, and resources of those who implement and experience the intervention

Horner, Blitz & Ross, 2014

ASPE Issue Brief

Effective, Usable Interventions

- What is the strength of the **evidence**?

- Does the model fit the **needs** of children and families in the local service area?

- Is the model **fully operationalized**? Is it replicable?

- Does the model **fit** with current efforts and initiatives in the service system?

- What **resources** are available to support implementation?

- Do organizations have **what is required** to fully and effectively implement these strategies?

- Are **leaders** engaged and committed?

The dynamic interplay between characteristics of the service system, service delivery organization, and client calls for early and ongoing assessments of the multi-level characteristics to first determine if "good enough fit" exists between a potential EBP and local context and then to optimize that "fit" over time (Supplee and Metz, 2015)

- Systems – funding, policy, regulatory environment

- Organization – leadership, culture, climate

- Provider – staff attitudes towards innovation and EBPs

- Clients – needs, culture, co-occurring diagnoses

Developing the Infrastructure

The development of a sustainable infrastructure is critical for effective implementation

- Developing, improving and sustaining the competency of practitioners
- Developing organizational structures and processes
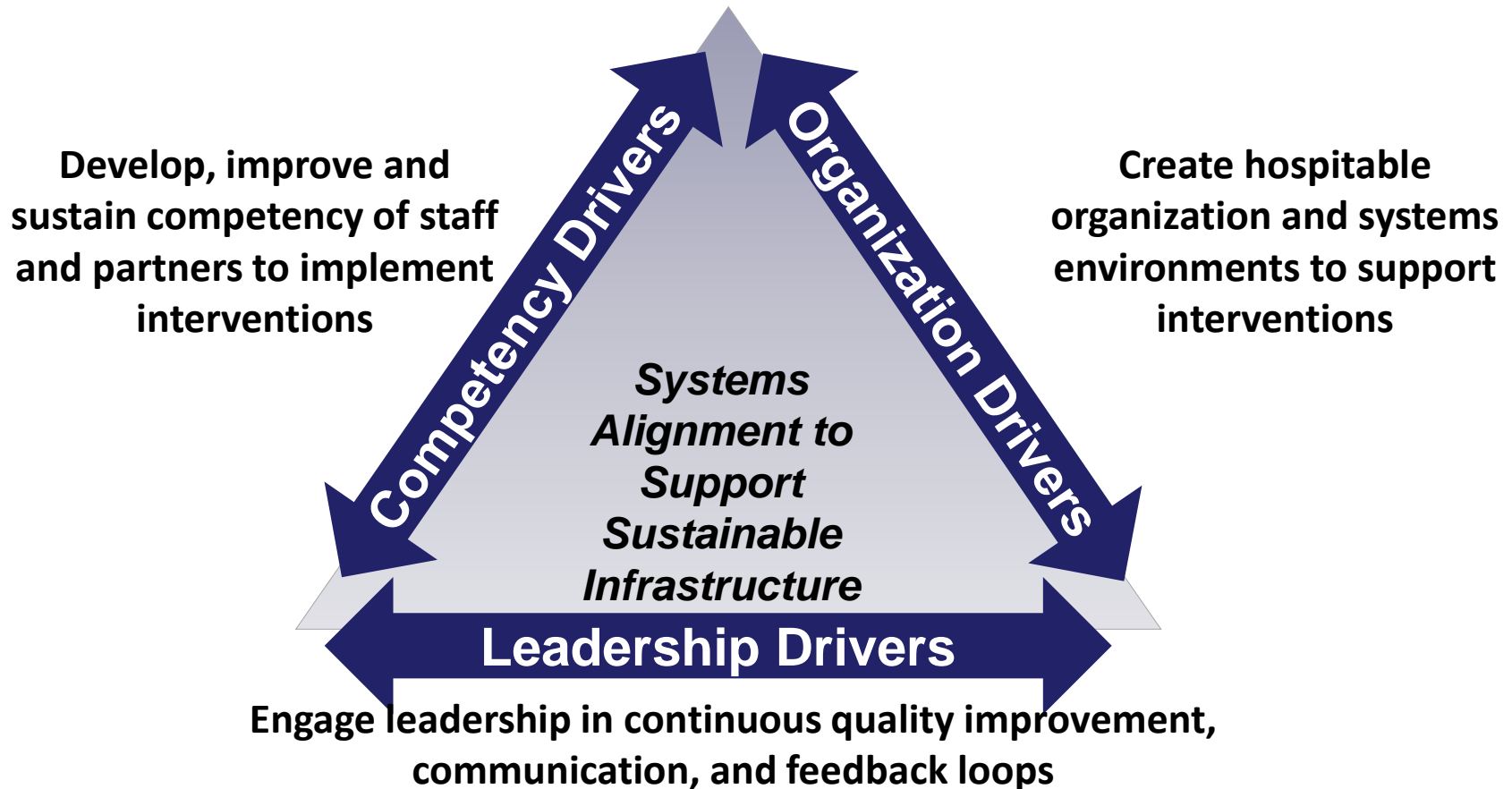- Developing hospitable systems environments including policies, partnerships, and funding streams

Make the Infrastructure Visible

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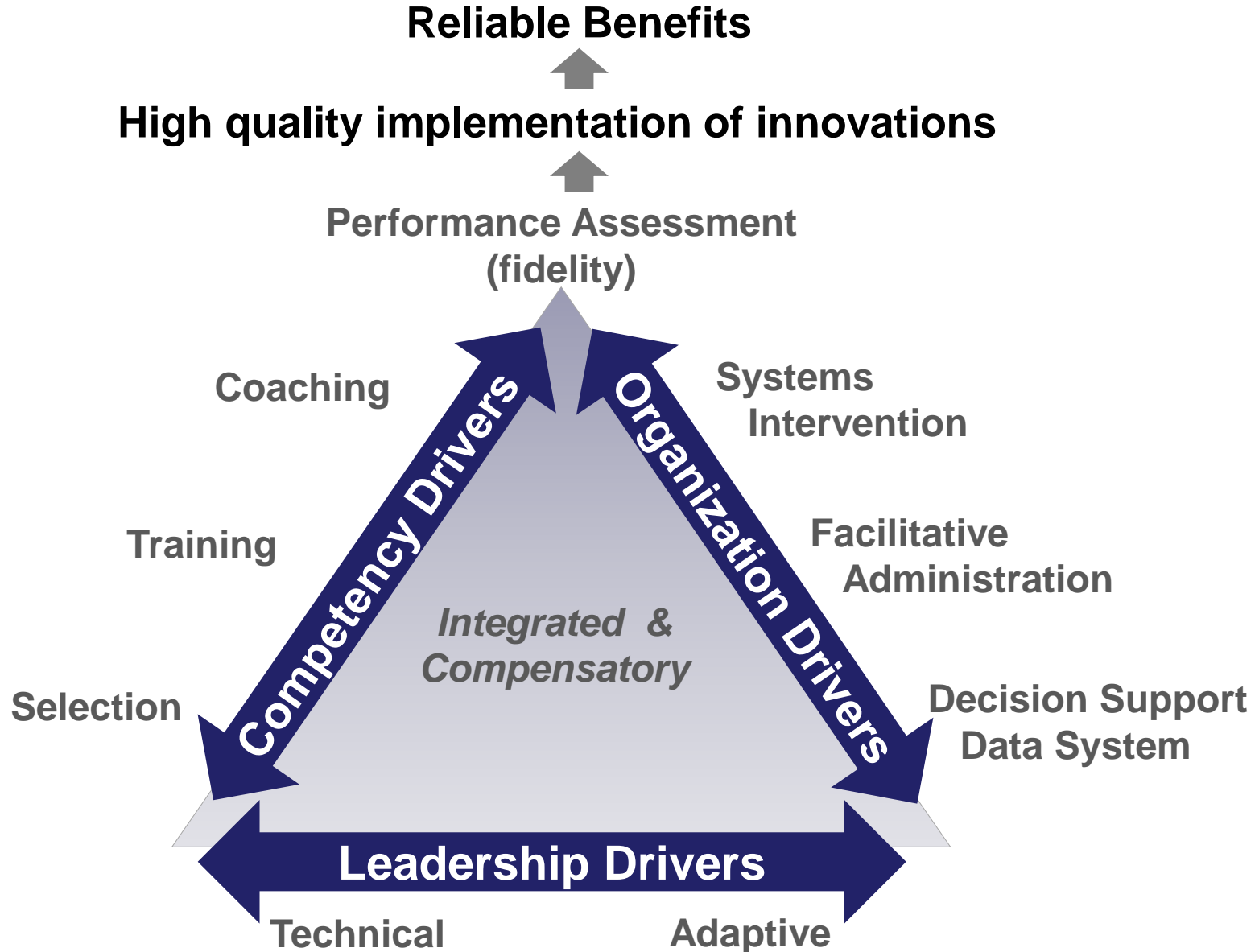
Implementation Drivers

Benefits to Children, Youth, Adults & Families
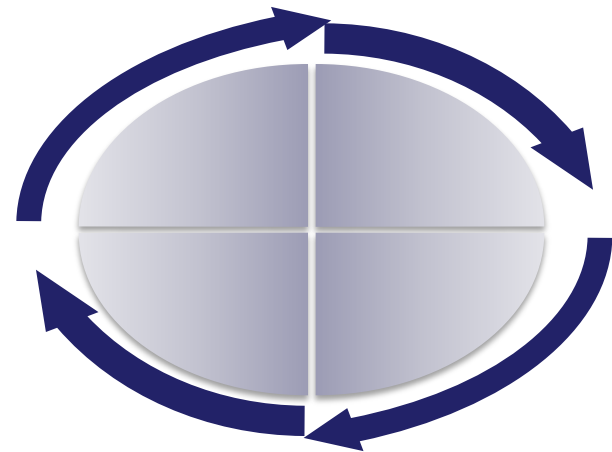
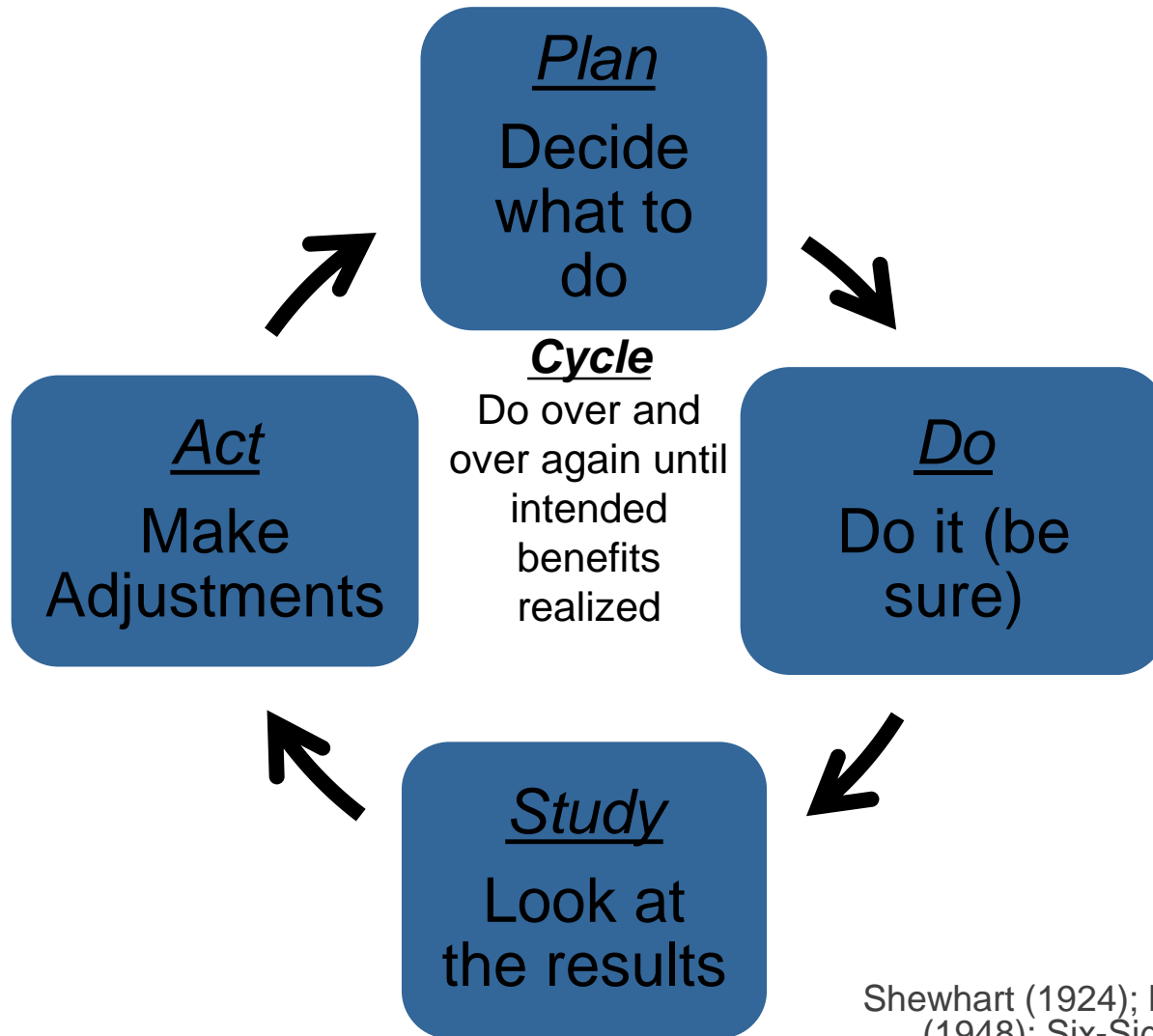**High fidelity implementation of Mental Health Strategy**

Develop, improve and sustain competency of staff and partners to implement interventions

Competency Drivers

Organization Drivers

Create hospitable organization and systems environments to support interventions

Systems Alignment to Support Sustainable Infrastructure

Leadership Drivers

Engage leadership in continuous quality improvement, communication, and feedback loops

Implementation Drivers

Reliable Benefits

High quality implementation of innovations

Performance Assessment (fidelity)

Coaching

Competency Drivers

Systems Intervention

Organization Drivers

Training

Facilitative Administration

Integrated & Compensatory

Selection

Decision Support Data System

Leadership Drivers

Technical   Adaptive

Supporting Continuous Quality Improvement for Scale and Sustainability

Cycles

Plan
Decide what to do

Cycle
Do over and over again until intended benefits realized

Do
Do it (be sure)

Act
Make Adjustments

Study
Look at the results

Shewhart (1924); Deming & Juran (1948); Six-Sigma (1990)

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Dynamic frameworks for sustainability and scale emphasize that change exists in the use of interventions over time, the characteristics of practice settings, and the broader system that establishes the context for how care is delivered.

Evidence is grown in research settings.

Evidence is optimized in practice.

Interventions can be continually improved, boosting sustainment in practice, and can enable ongoing learning among developers, interventionists, researchers and patients

Chambers, et. al., 2014

Active Implementation

- Effective collaboration of cross-sector stakeholders

- Facilitative agency administration (aligned agency policy and procedures)

- Organizational and system structures to support and sustain improvement efforts

- Effective systems interventions (aligned state policy and procedures)

- A commitment to learning and intentional improvement

Enabling Contexts

How are we **creating hospitable systems**?

POLICY

PRACTICE

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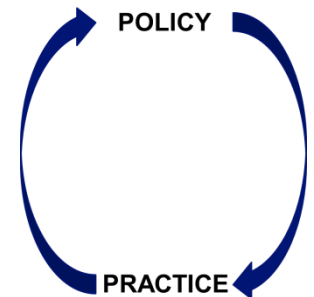
Clarifying Stakeholder Roles and Functions
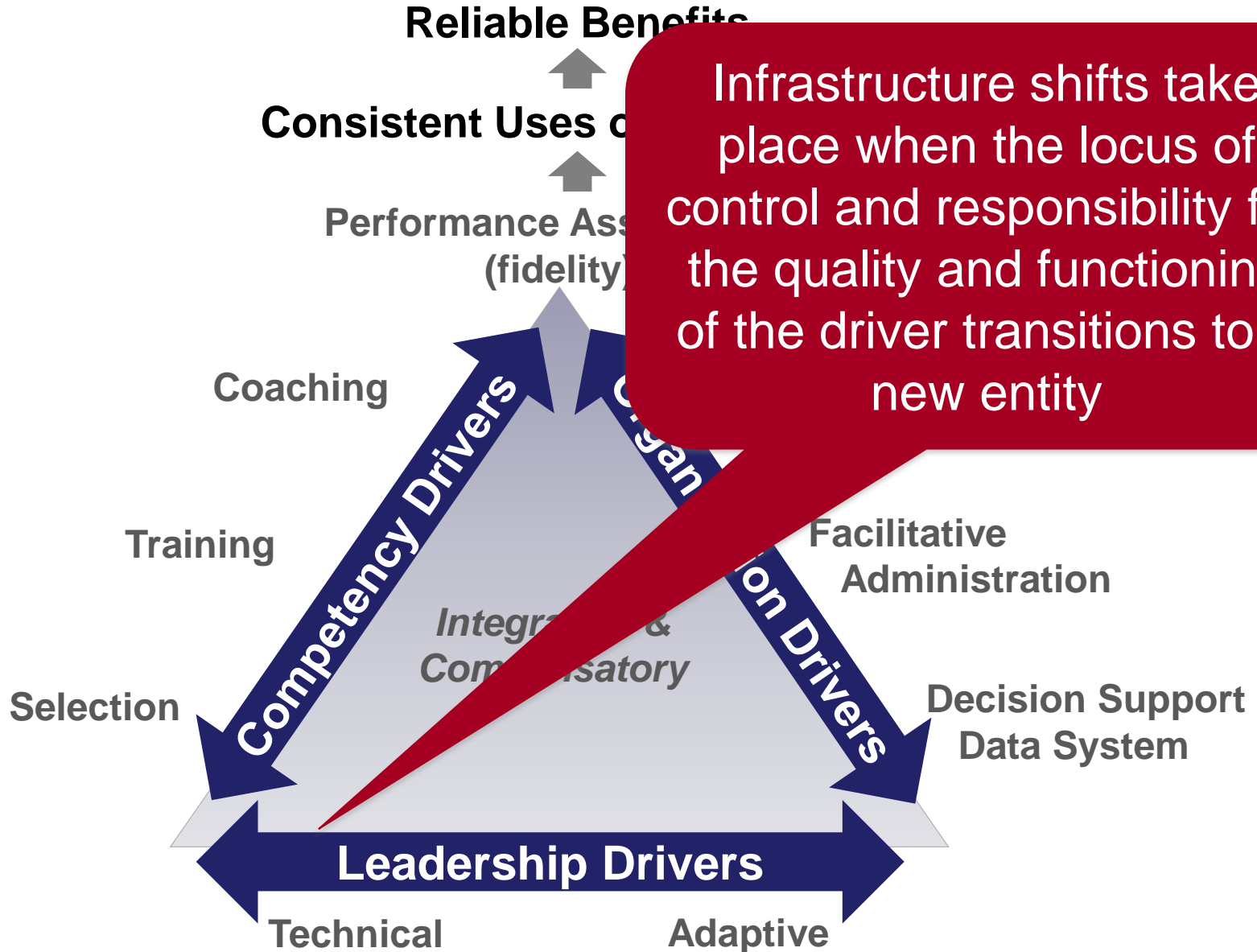
Co-Creating Capacity

*Co-Creative capacity refers to deeply involving a **range of key stakeholders across scientific, governance, and local practice boundaries** to create the infrastructure and context that **enables and sustains the use of evidence in practice**. (Metz, 2014).*
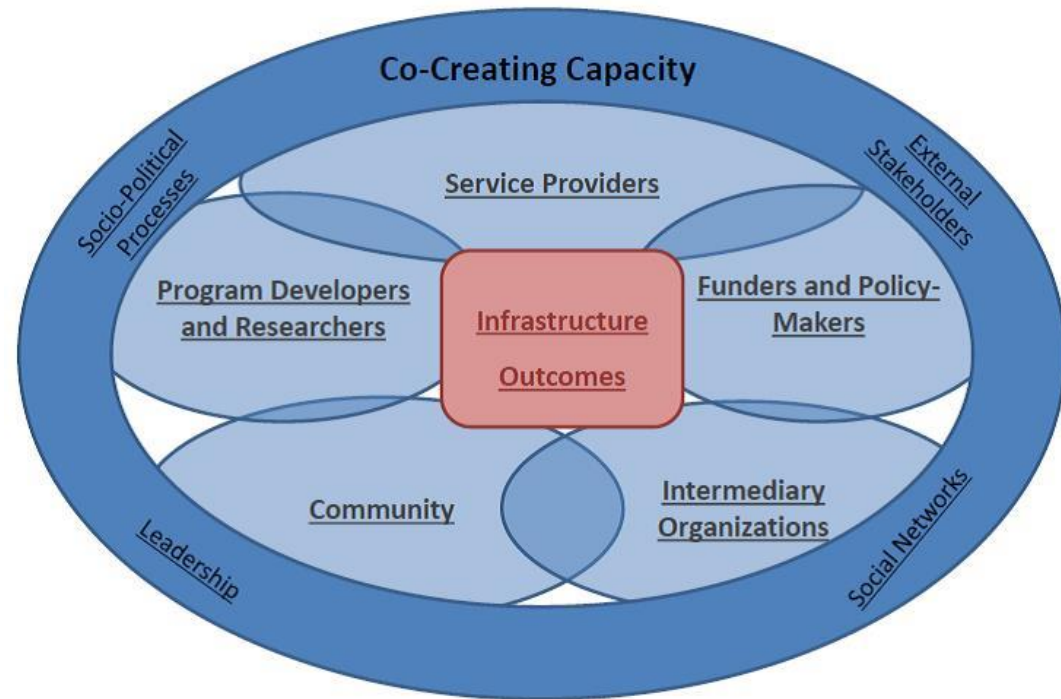
Co-Creating Capacity
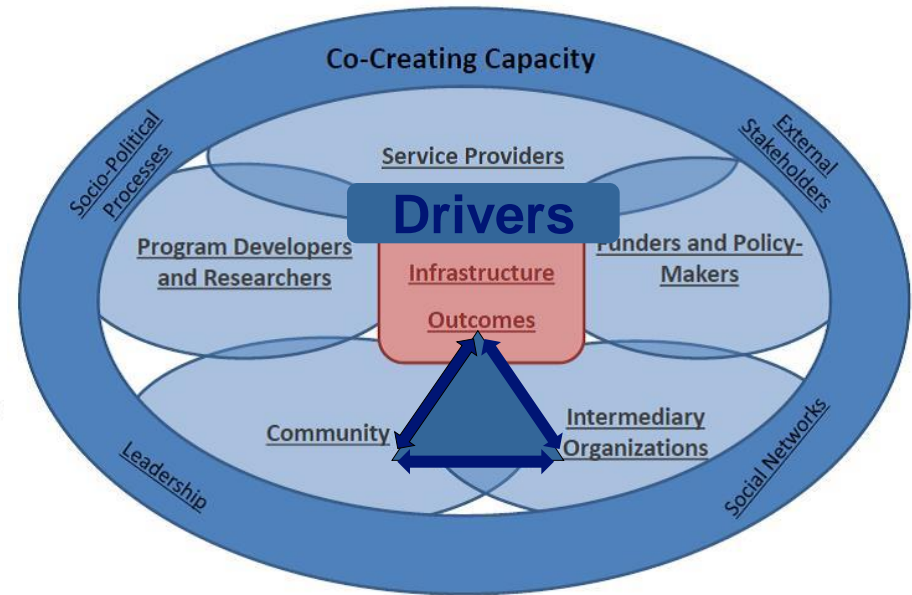
Implementation Drivers

When do these shifts happen?

- Program developer or purveyor supports diminish
  - Coaching, fidelity assessments transition to local jurisdiction
- Research and evaluation funding ends
  - Decision-support data systems are no longer funded
- "Special" accommodations end
  - Planning periods end; integration of new services into overall service system takes place
- Scaling Up is a focus
  - The goal is to develop more proximate implementation capacity that is effective, efficient, and integrated; regional or local capacity developed

For More Information

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