Making It Stick

A Practical Approach
to Dissemination and Implementation

Internal Learning Community

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

- Strengths-based and hopeful
- Inclusive and accepting of diverse cultures, genders, perspectives, and experiences
- Healing-centered and trauma-responsive
- Inviting to individuals participating in their own journeys
- Person-first and free of labels
- Non-judgmental and avoiding assumptions
- Respectful, clear and understandable
- Consistent with our actions, policies, and products

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf

Welcome and Introductions

Please introduce yourself in the chat:

Name
Pronouns, if comfortable
Center and Network
Location
Favorite food from your region

Polls

Importance of training goals: In your current role, how important is it for you to master the information, tools, and/or skills described in the learning objectives for this learning community?

Existing mastery/competence: What is your current level of mastery or competence related to dissemination and implementation science?

Overall Objectives of this Learning Community

- **Define** dissemination and implementation (D&I) science.
- **Implementation Stages:** How D&I science can help guide the development of training and TA topics, activities, formats, evaluation, etc., based on implementation stage and readiness.
- **Context:** How to understand the drivers and barriers (context) and readiness for implementation, and how those factors impact your decisions about level of TA.
- **Strategies:** Mapping out specific implementation/technical assistance strategies and adjusting to any challenges encountered.
- **Evaluation:** Analyze how key concepts from D&I science can assist TTCs in evaluating technical assistance and training activities.

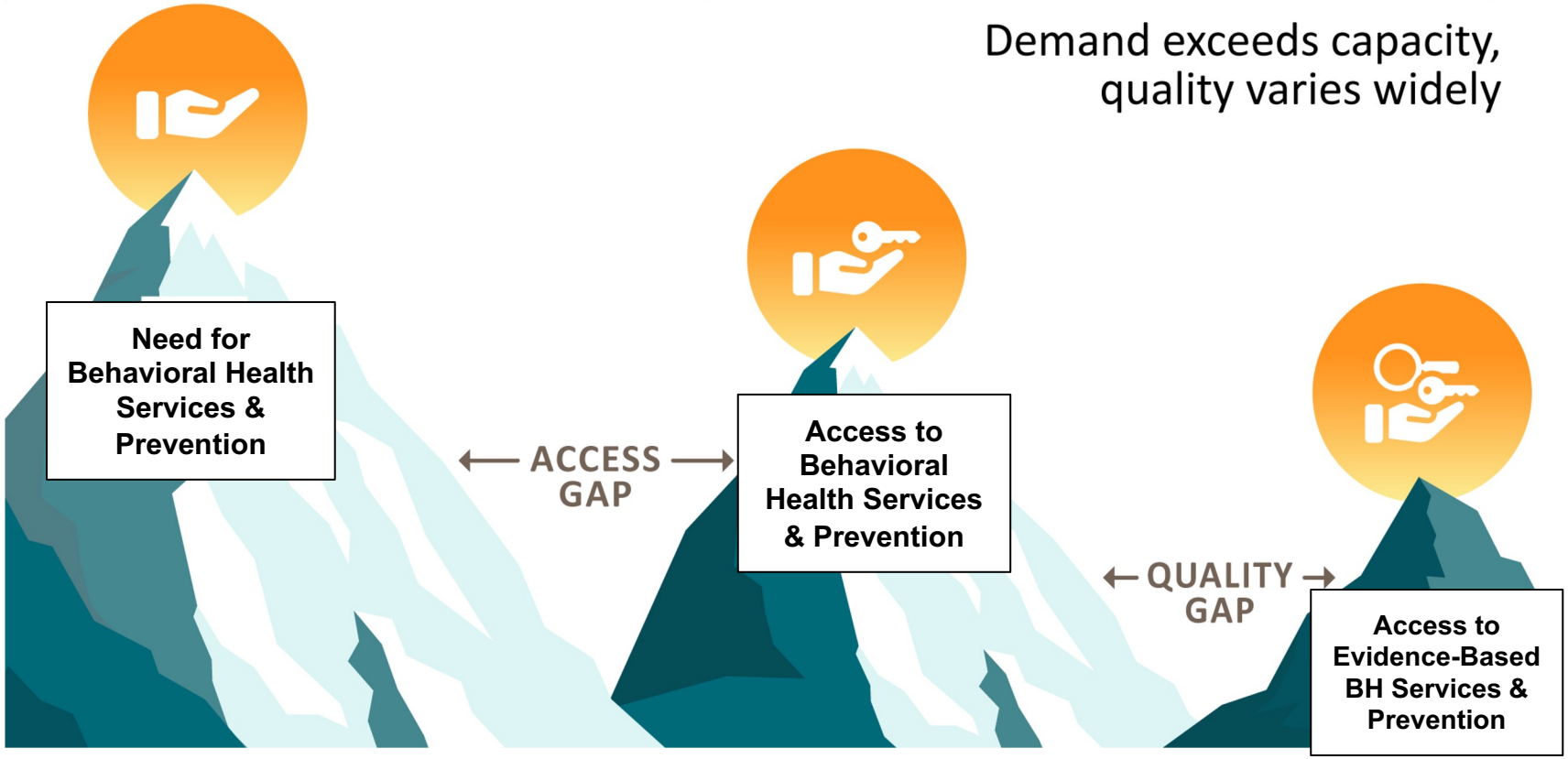
Part 1 - D&I Science: Where do we start?

Topics Covered:

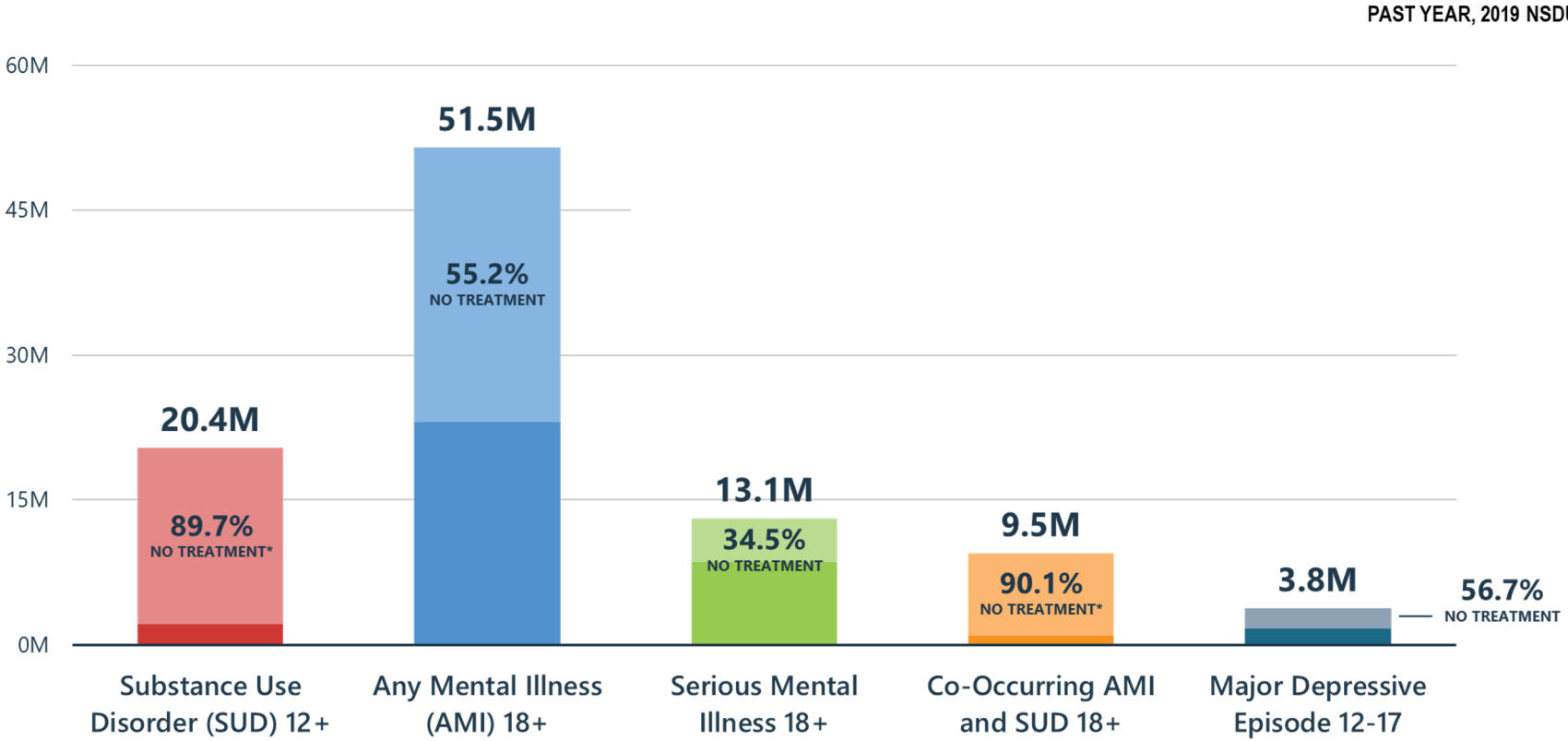
- Defining D&I Science
- Stages of Implementation
- Intensive TA Project Example

Challenges in Behavioral Health Services Delivery & How We Provide Technical Assistance

The demand for behavioral health services exceeds capacity of evidence-based strategies



There are enormous treatment gaps despite significant need for behavioral health services and supports



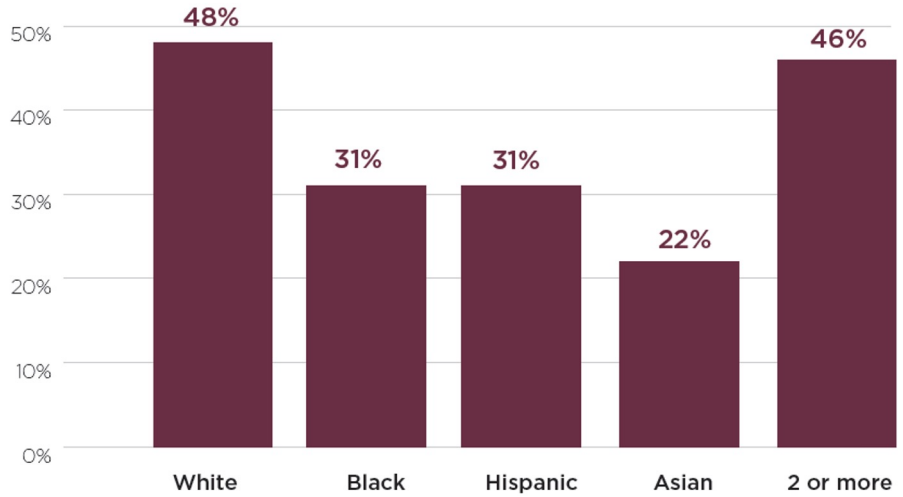
* No Treatment for SUD is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor's office, self-help group, or prison/jail.

SAMHSA
Substance Abuse and Mental Health Services Administration

There are significant disparities in access to services and supports

- Disparities related to:
  - Diagnosis – over/under-diagnosis
  - Burden of disability
  - Access to services
  - Access to effective treatments

Among People with Any Mental Illness, Percent Receiving Services, 2015



Budhwani H, Hearld K, and Chavez-Yenter D., 2015; Maura & Weisman de Mamani, 2017; SAMHSA, 2015.

Access to EBPs is particularly limited

Table 1.1. Populations Receiving Select Evidence-Based Practices in Selected State Mental Health Systems in 2016[4]

Evidence-Based Practice	Target Population for Service	Percent of State MH Population Who Receive Practice in States that Report Data
Medication management	Adults and youth with SMI/SED	32.0%
Illness self-management	Adults with SMI	19.0%
Dual diagnosis treatment	Adults with SMI and SUD	10.5%
Assertive community treatment	Adults with SMI	2.1%
Supported employment	Adults and transition-age youth with SMI	2.1%
Supported housing	Adults and transition-age youth with SMI	3.1%

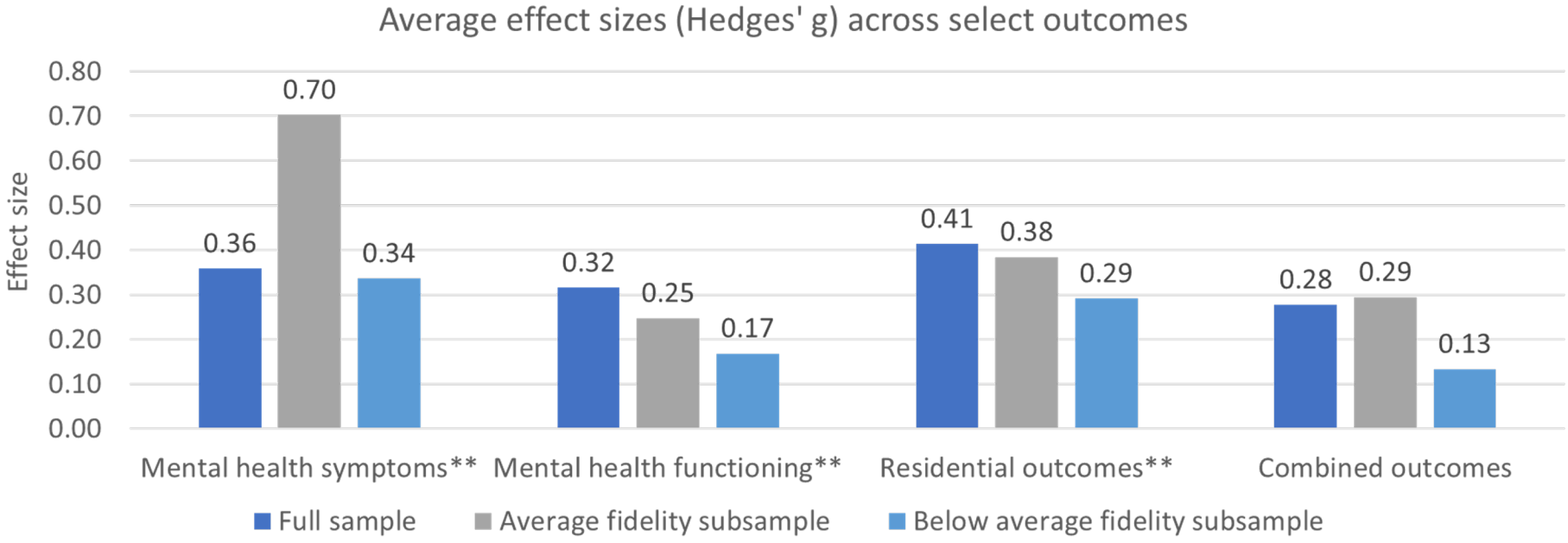
ISMICC Report to Congress, 2017
SAMHSA Uniform Reporting System Data - https://wwwdasis.samhsa.gov/dasis2/urs.htm

Fidelity matters: Example from Assertive Community Treatment (ACT)

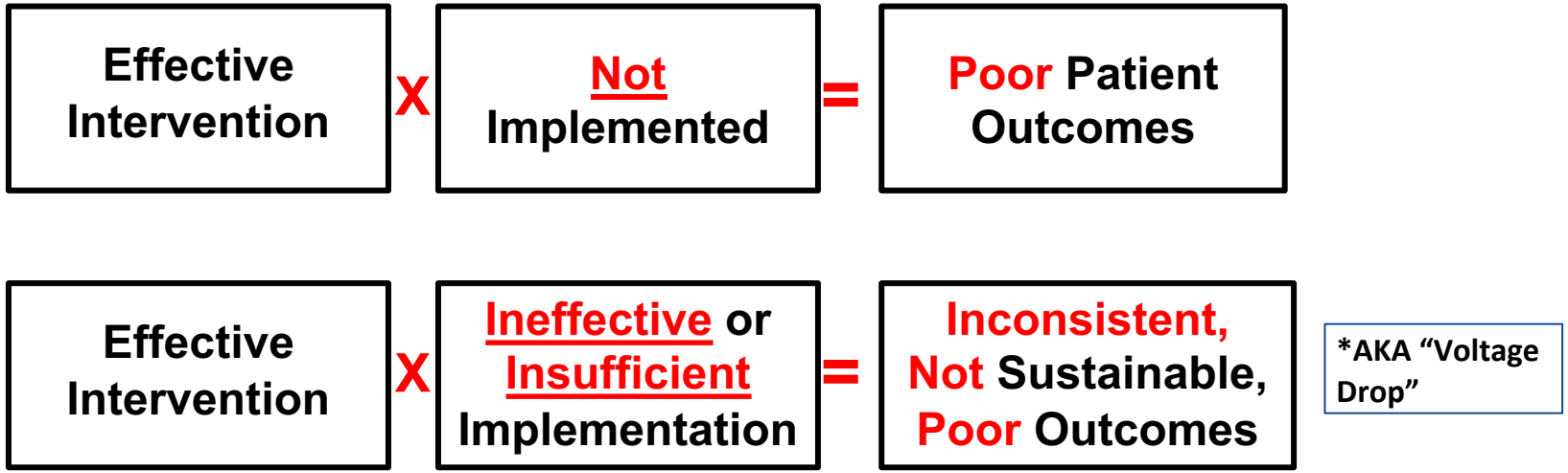
	Strong Implementation (High Fidelity) ACT team	**Weak Implementation (Low Fidelity) ACT team**
Treatment Drop-outs	15%	30%
Substance Use in Remission	55%	13%
Hospital Admissions	2.87	4.69

McHugo et al., 1999

Effect sizes for Wraparound Care Coordination are significantly higher under conditions of higher fidelity



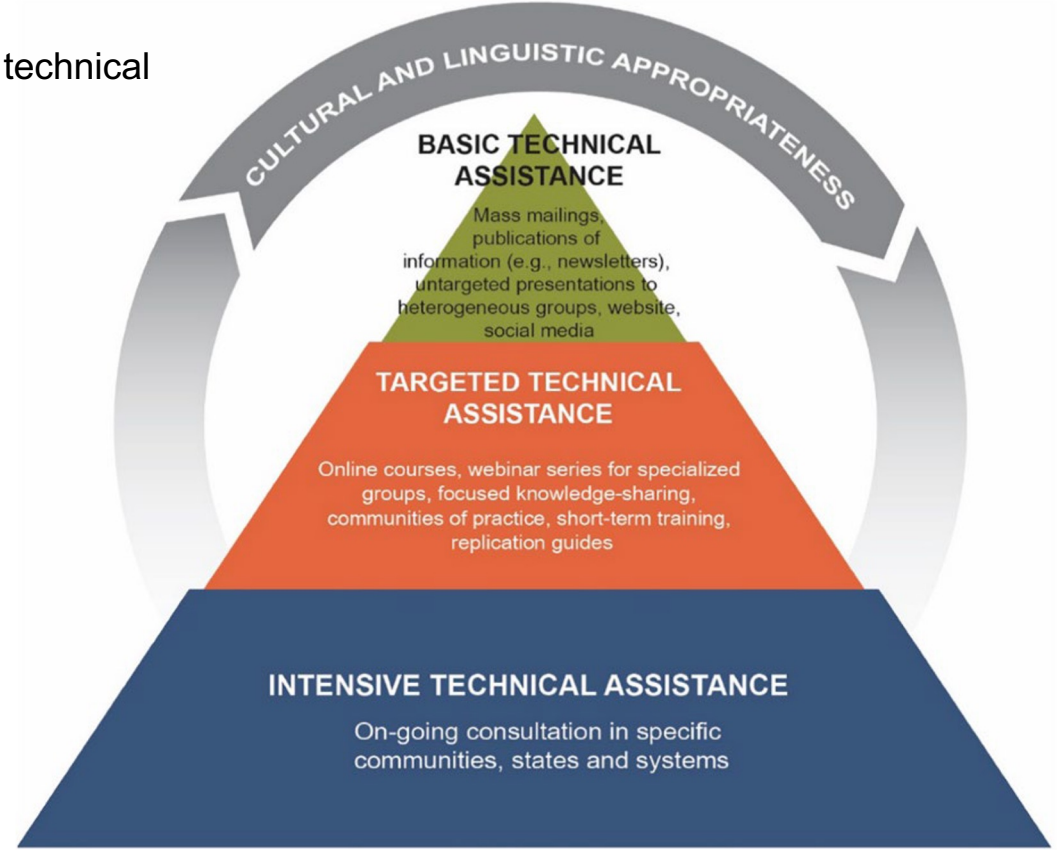
Together, these challenges result in implementation gaps



Adapted from Bertram, Blase, Shern, Shea, & Fixsen, 2011

How can we, as TA purveyors, respond?

Levels of training and technical assistance (TA)



Cross-Technology Transfer Center (TTC) Workgroup on Virtual Learning, 2021

Basic training and TA can help increase knowledge

- Basic training and technical assistance include:
  - Mailings, treatment manuals, webinars, fact sheets
  - Conference sessions, short seminars, lectures
- Goal: Awareness raising, dissemination
- Impact of such strategies is relatively limited:
  - “Passive approaches are generally ineffective and unlikely to result in behavior change” (Grimshaw, 2001)

Targeted training and TA can help support skill development

- Targeted training and technical assistance include:
  - One time trainings, workshops
  - For a targeted audience, but not tailored to individual needs
- Goal: Skill development
- Gains from such strategies tend to be short-term:
  - “Train and hope” doesn’t usually work (Stilen, 2013)

Intensive training and TA with ongoing follow-up show the most promise

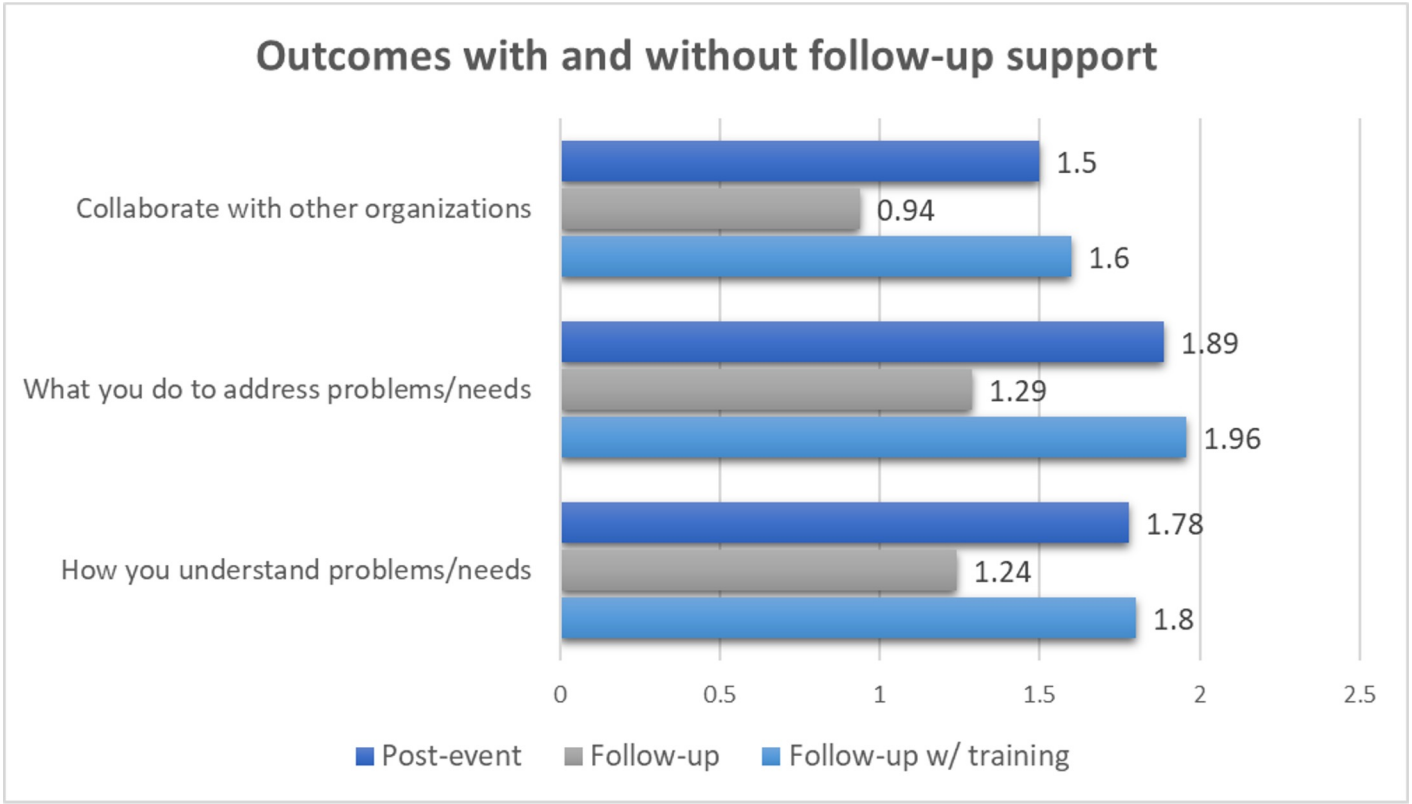
- Intensive training and technical assistance include:
  - Ongoing, customized consultation to specific sites, communities, or systems
  - Ongoing coaching/consultation, supervision, performance feedback, implementation facilitation, learning collaboratives, Project ECHO
- Goal: Change in practice, implementation
- Recent evidence suggests that such approaches show promise

Follow-up coaching promotes long-term positive impacts on implementation outcomes

Joyce and Showers (2002) study of implementing new education practices in the classroom

	OUTCOMES (% of Participants)		
TRAINING COMPONENTS	Knowledge	Skill Demonstration	Use in the Classroom
Theory and Discussion	10%	5%	0%
..+Demonstration in Training	30%	20%	0%
..+ Practice & Feedback in Training	60%	60%	5%
..+ Coaching in Classroom	95%	95%	95%

Ongoing support helps eliminate drop-off on outcomes between post-event and follow-up



Reflection - Breakout Rooms

Decide on volunteer leader/timekeeper and report out person.

1. Introduce **yourself**: Name, Role, Network, and Center
2. Talk about the **best** TA or training you were involved in:
    a. What level of TA was it?
    b. What was the secret sauce that made it work?

Report Out

What did you hear identified as secret sauce?

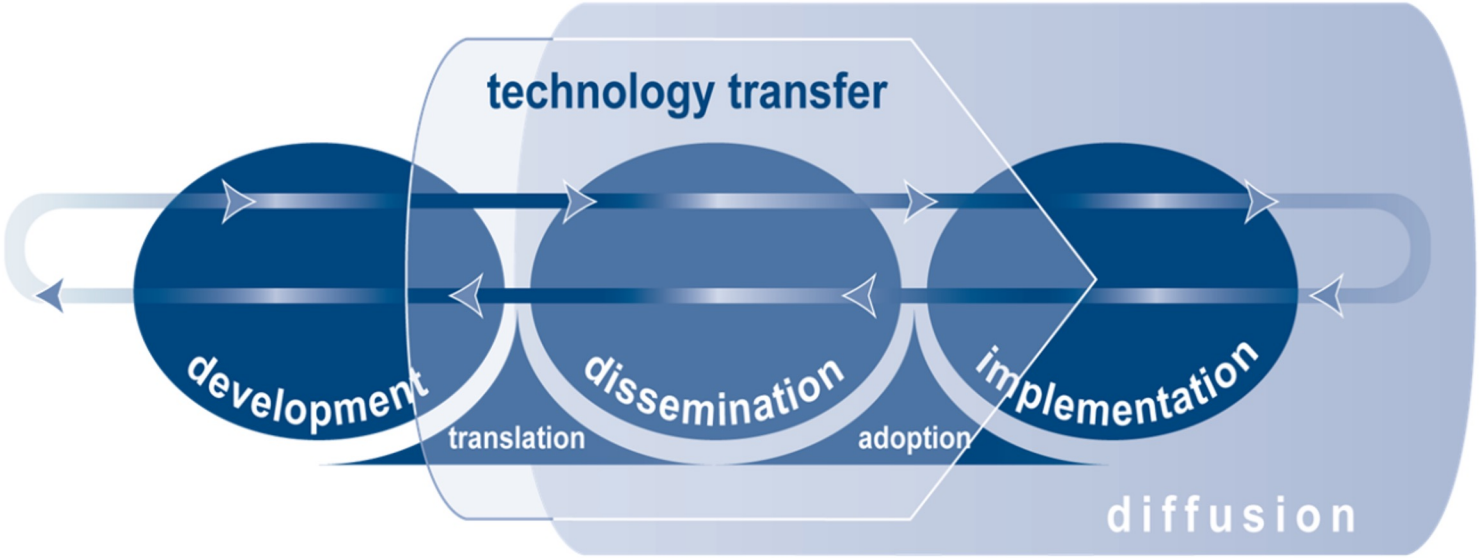
- Type in chat
- A few people unmute and share

What D&I Science Is,

- Definitions
- Frameworks
- Strategies
- Outcomes

And How It Can Help…

Continuum of the Diffusion of an Innovation: The ATTC Network Technology Transfer Model



ATTC Network Technology Transfer Workgroup, 2011

Terminology

- Diffusion: A passive, untargeted, unplanned, and uncontrolled spread of new interventions.
- Dissemination: An active approach of spreading evidence-based interventions to the target audience via determined channels using planned strategies.
- Implementation: The process of putting to use or integrating evidence-based interventions within a setting.
- Sustainment: The process of maintaining or continuing the intervention within a setting, beyond a more active implementation period.

Rabin & Brownson, 2018

Terminology

- TA purveyor or intermediary/purveyor organization: Us! Organizations that disseminate EBPs, train individuals and organizations in EBPs, and provide implementation support.
- Implementation strategy: “the stuff we do to try to help people and places” change; training and technical assistance activities.

Proctor et al., 2019; Curran, 2020

Terminology

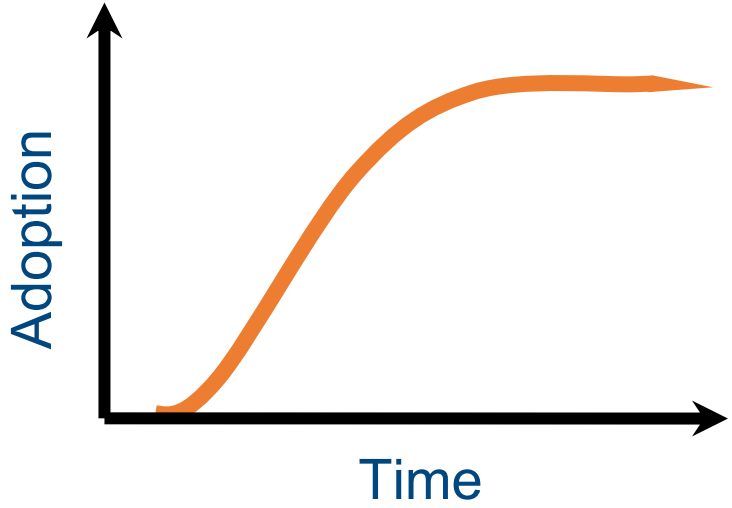
D&I Science

- Scientific study of processes and factors associated with successful integration of evidence-based interventions within a particular setting.
  - How do you get evidence-based practices into routine practice settings so that more people can receive the best care possible?
  - How do you keep the practice in place? (sustainment research)

Rabin & Brownson, 2018

D&I Science

- Draws upon research from many fields – public health, communications and marketing, evidence-based medicine, organizational change
- It is not the same as process/quality improvement
  - Improvement science - improve the quality, safety, and value of health care
  - Implementation science - promote the uptake of evidence-based interventions



Koczwara et al., 2018

Frameworks and Concepts in D&I Science

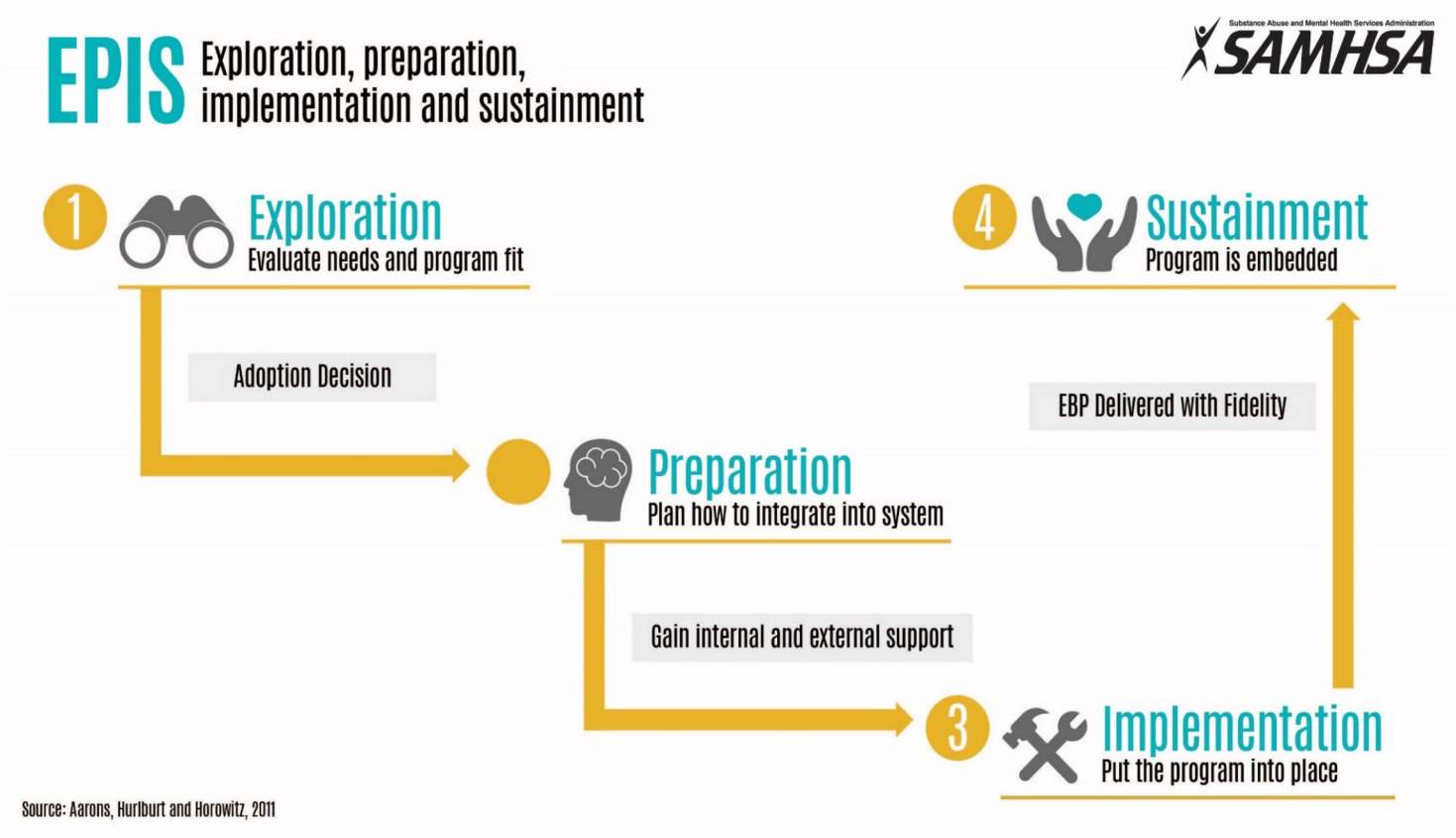
- Four types of D&I frameworks and concepts can help us make our work more effective
  - Implementation stages (session 1)
  - Context for implementation (barriers and facilitators) (session 2)
  - Implementation strategies (TA activities; session 2)
  - Evaluation of implementation (session 3)

Nilsen, 2015

Implementation Stages

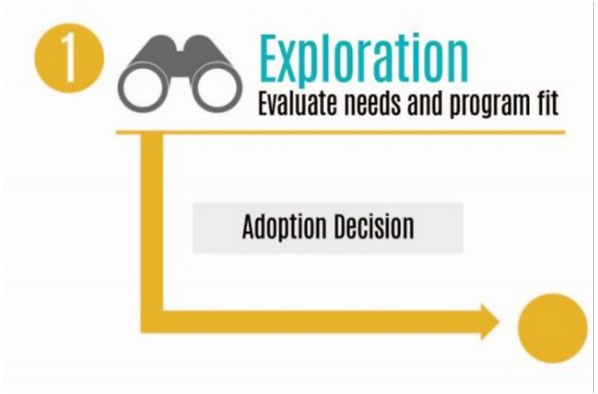
- What are the steps and stages to implement a new practice?
- Examples of stage models in D&I science
  - EPIS; Greg Aarons and colleagues, 2011
  - Stages of Implementation; Dean Fixsen, Karen Blase, and colleagues, 2005

Implementation Stages



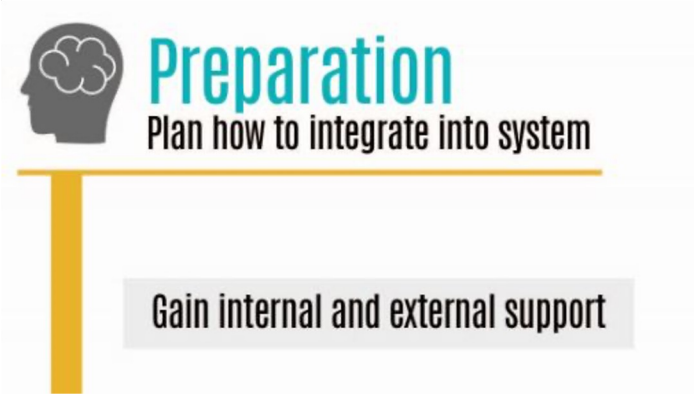
Exploration

- Awareness of a patient/consumer/community need or a change in practice
- Exploring options that might meet the need
- Making the decision to adopt a new practice



Preparation

- Building buy-in and support for change
- Getting ready to implement the new practice
  - Staff training
  - Changing protocols and policies



Implementation

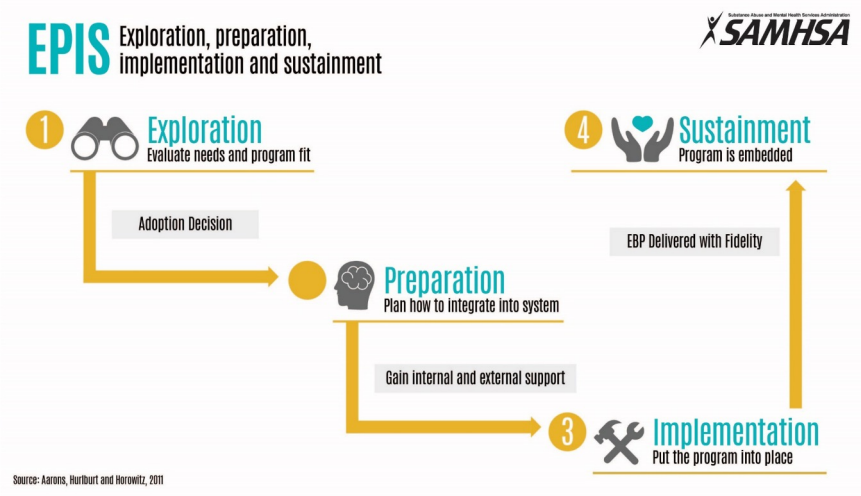
- Beginning to provide or use the new practice
- Initial implementation - awkward teenager phase
- Full implementation - running smoothly
- “First do it right, then do it differently” - Karen Blase

Sustainment

- Maintenance of the practice over time and hopefully delivering it with fidelity
- Continuing to provide support
  - Resources
  - Supervision
  - Plan for turnover

Implementation Stages: Summary

- Stages…
  - Have variable timelines
  - Are not necessarily linear
  - May not have a definite beginning or end
- Knowing what stage a project is in…
  - Helps you decide which technical assistance/implementation strategies to use
  - Helps set expectations with leadership/staff



Questions?

Intensive TA Project Example

Northeast & Caribbean MHTTC's Motivational Interviewing Technical Assistance project

Why?	Who/Where?
• Rationale for MI	• Target audience • Individuals' roles and disciplines • Recruitment

Reflection - Breakout Rooms

Thinking about Northeast & Caribbean MHTTC's Motivational Interviewing project:

- What stage do you think this project is in?
- What are the implications for how you would move forward with this project?
- What might you do differently, depending on implementation stage?

Report Out

How did your group answer the questions?

- What stage do you think this project is in?
- What are the implications for how you would move forward with this project?
- What might you do differently, depending on implementation stage?

Wrap Up and Next Session

- Summary: *Session 1: D&I Science: Where do we start?*
  - Define dissemination and implementation (D&I) science
  - Implementation Stages: A stage model, like EPIS, helps the TA purveyor decide what TA/implementation strategies to use, and helps set expectations with agencies and providers
- Preview: *Session 2: Roll Out: How do we decide what to do?*
  - Readiness: How to engage the audience in intensive TA projects; How to assess readiness to adopt and implement;
  - Context: How to understand the drivers and barriers (context) and readiness for implementation, and how those factors impact your decisions about what TA to provide
  - Strategies: Deciding which implementation/TA strategies to use and adjusting to challenges
  - June 6, 2022, 12-1:30pm PT

Closing

- Plus / Delta questions
  - What did you like most about today’s session?
  - What do you suggest we change for next session?