

Building from “Usable Interventions:”

Understanding and Measuring Implementation Outcomes

*Session 4: UC Davis Continuing and Professional Education
Fundamentals in Evidence-Based Decision Making
November 6, 2018*

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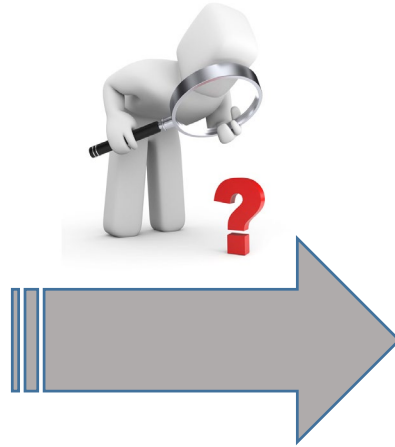
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Today's Agenda

9:00 – 9:20 am	Welcome Back, Intros, Recap
9:20 – 9:40	Usable Interventions: Making Linkages to Theory of Change
9:40 – 10:40	County Sites: Making Your Case (<u>YOU SHARE</u>)
10:40 – 11:00	<i>STRETCH BREAK</i>
11:00 – 12:15 pm	Process of Implementation (Group Work Activity)
12:15 – 1:00	<i>LUNCH</i>
1:00 – 1:30	Measuring Implementation Outcomes
1:30 – 2:15	County Group Work
2:15 – 2:30	<i>STRETCH BREAK</i>
2:30 – 3:30	County Sharing
3:30 – 3:45	Next Steps Homework, Q&A
3:45 – 4:00	Process Reflections, Plus-Delta

Evidence-Based Strategies and Getting to Social Impact

Effective
Practice
Strategies



Improved safety,
permanency &
wellbeing for children,
families, communities

Active Implementation: Strengthening Systems for Social Impact

Evidence-Based,
Effective Strategies



Local Capacity &
Practices for Active
Implementation &
Scale-Up



Supportive and
Efficient Child & Family
Service Systems



Improved safety,
permanency &
wellbeing for children,
families, communities

Focus on both people and organizations

People: What knowledge and skills do they need?

Training

- Knowledge acquisition
- Skill Development (“rehearse and demonstrate”)
- Continue “buy-in” process
- Form a ‘community’

Coaching

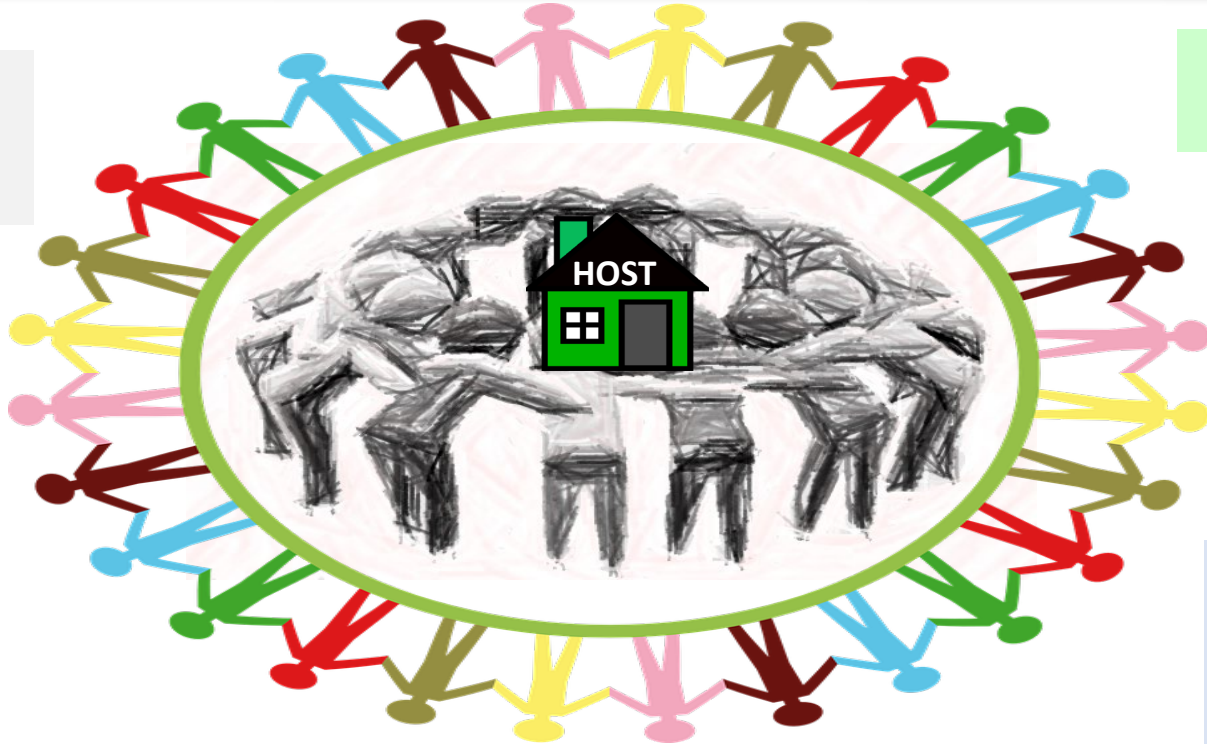
- Enables ongoing practice of new, fragile skills in real-world context
- Develops professional judgement for application in varied situations and settings

Organization and Leadership: Implementation Structures and Processes

Engage
leadership at
multiple levels

Use data
for
improvement

Meaningfully
involve
community
partners



Create and
nurture change

Manage
addressing
how to
improve
policies and
practices

Gather and share
feedback from
staff at all levels
about strengths
and challenges

“What it Takes” for Implementation

1. A focus on **People** matters.
2. A focus on the **Organization** matters just as much if not more.
3. **Leadership** for change lives at multiple levels.
4. Supporting use of an intervention is a deliberate, ongoing **Process**.

Using data for understanding and ongoing improvement



*“ . . . I think it’s because . . . So I plan
to . . . ”*

Building Linkages in Your Theory of Change



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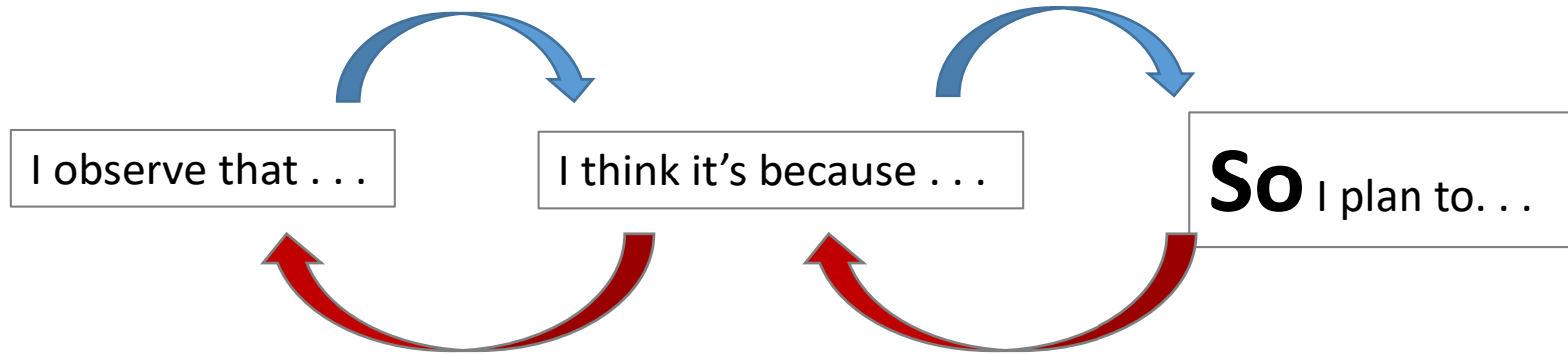
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Using Data & Information to Make the Case

1. Defining the “problem” (“I observe that . . .”) as the absence of your proposed intervention is a trap.
2. Your proposed intervention should functionally link back to what you are observing and why you think it is happening (the “rationale”).

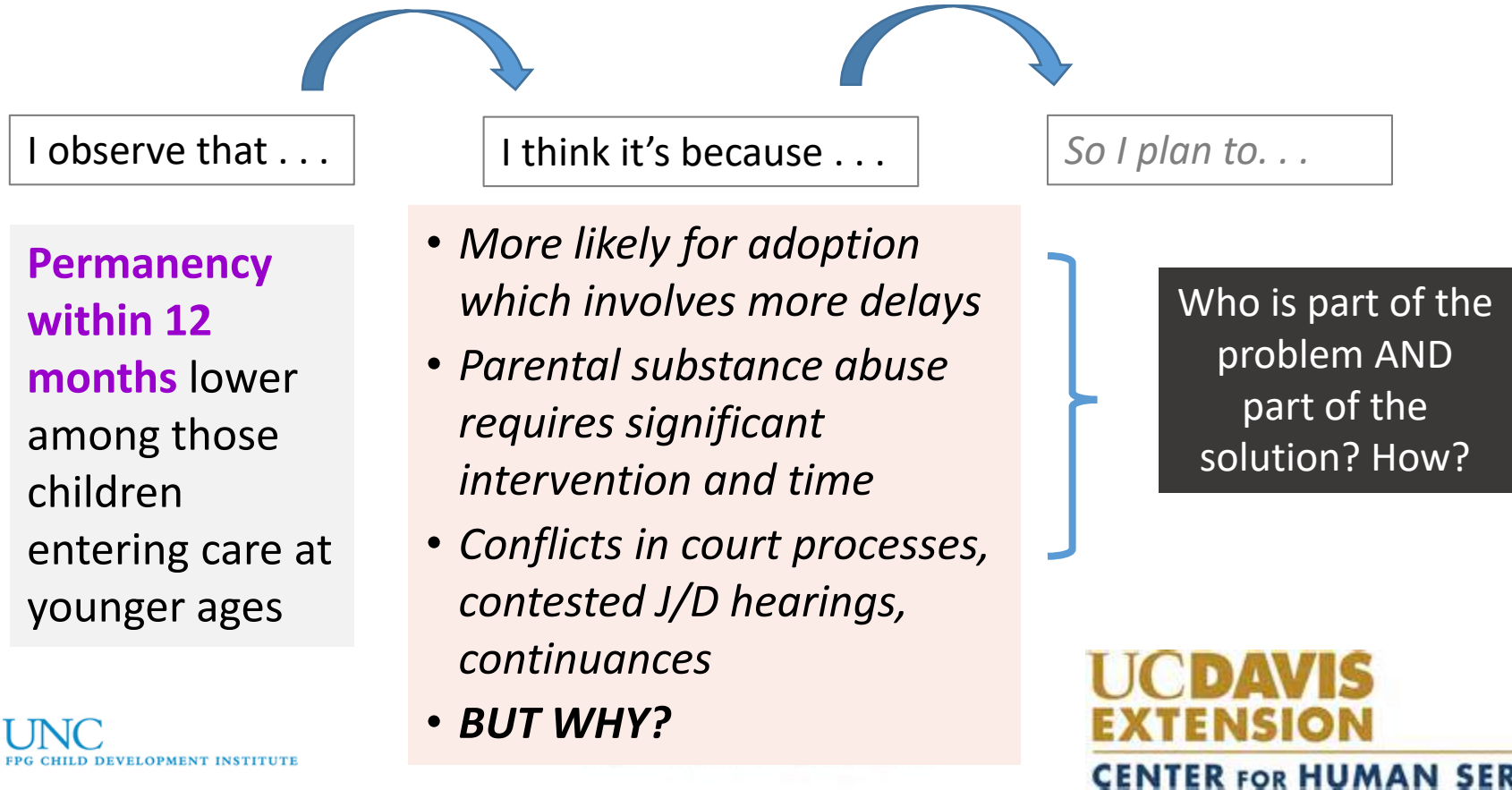
Planning: Using Data to Clarify Rationales



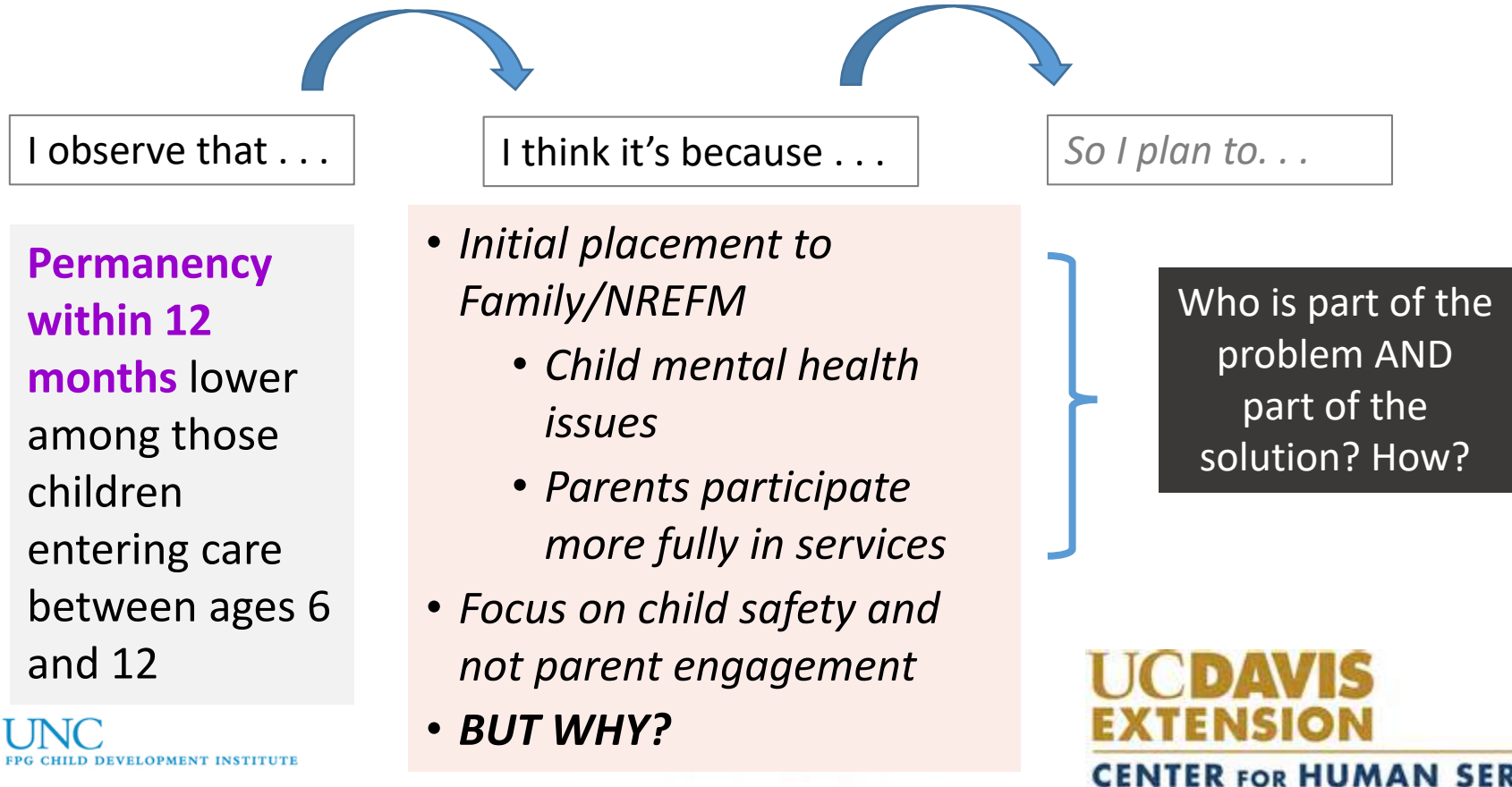
How do proposed intervention components address key features of the problem?

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Planning: Using Data to Make The Case



Planning: Using Data to Make The Case



Usable Interventions



The Problem: Younger age of entry into care suggests less likelihood to exit by 12 months.

I think it's because

- Children entering at young ages might be more likely to be part of adoption processes which take more time (takes at least 18 months)?
- Parents often have substance abuse issues, and treatment services take more time?
 - Actual services for parents are only short term/less effective?
- Conflicts in court processes, continuances?
 - Due diligence processes regarding paternity?

So I plan to Strengthen family engagement and support

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Functional Linkages in Theory of Change (Ex)

So I Plan To . .	Intervention Component	Essential Function: How does this address the problem?	Whose behavior?	What does this look like?
Family Engagement	E.g., Outreach and Assessment	E.g. Immediacy	Case worker Parent, Family members	First contact happens within 14 days
		E.g., Tailored to parents of young children	Case worker	Use of revised forms?
	E.g., Parent Partner	E.g., peer-to-peer	Parent Partner (PP) Case worker	Both attend visits, greet the parent/family. Time talking is split 60/40% (PP/worker). Both involved in checking for clarity, communicating next steps
	E.g., Support for services	E.g., Intensive, then flexible	Parent Partner Case worker Service referral org	Follow-up outreach and contact happens proactively every 7-10 days for first month. Then . . .
	E.g., Support in context	Parent Partner Case worker	Parent Partner Case worker	At least two contacts per month happen in person in the home

Stretch BREAK
(15 mins)

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*Contributing Factor to the Problem,
Essential Function for the Intervention From Session 3*

County	I observe that	I think its because	So I plan to (ex.)
El Dorado	Reunification overall trending down	Timeliness of first visitation; referral services for visitation not effective	Policy – w/in 72 hours after removal
Yolo	Ages 6-12 staying in care longer	Lack of parent engagement . . . Difficult to engage non-voluntary participants	Better engagement of parents via lens of knowing not a choice
Sac 1	Under age 1 less likely to exit to perm in less than 12 mo	This age – statute requires less time; parents have less time to get engaged and address factors which brought them into care; impacting worker willingness to follow thru?	[explore reasons for continuances, then come up with plan]
Sac 2	Ages 6-12, Family/NREFM	Families not complete court ordered services . . . (explore relevant but whys with families, face validity)	Parents – review expectations, network for peer support, etc.

*Contributing Factor to the Problem,
Essential Function for the Intervention From Session 3*

County	I observe that	I think its because	So I plan to (ex.)
Calaveras	Ages 0-3 less likely to exit 12 mo	Delays in in-house adoption processes? Extending services even when parents out of compliance with case plans; SDM assessment quality?	Training on SDM assessments; missing data about sup visits indicating extending services
Riverside	Under age 1 less likely to exit to perm	Parent substance use issues? Legal statute – under age 3, reunify within 6 months – too little time; worker gap in knowledge about approp services	Multi disciplin., integrated teaming, merges services, address procedural conflicts?
San Joaquin	Below state avg, across all ages	Agency culture and climate; explore with judges, workers mixed, unclear expectations	Adjust CFT process, case plans, safety goals (parent and family voice)
Shasta	Not reaching perm within 12 mo	Continuances, explore this process and what's behind this	Streamline data input to monitor better, learn as we go



Functional Linkages in Theory of Change: County Feedback

So I Plan To . .	Intervention Component	Essential Function: What feature of the problem does this address?
Riverside:	Eliminate 30-day sobriety requirement (coming from SPs) MDT/Integrated Tx	Removing conflict to necessary care Immediacy (identification, assessment), tailored to moms, intensive, flexible/supportive, ongoing
Yolo: parent engagement	Case note template (prompts for engagement, document if/how they are trying, ID lack of parent engagement?)	Clear definition and expectations
Calaveras:	Visitation policy (clarity in function), re-assessment	Urgency/Earlier, more worker and parent engagement, goal-oriented, ongoing/more regular assessments
El Dorado: Parent engagement	Visitation and CFT (NOTE – parent partner and youth advocate aspects coming in early 2019; help to ensure circles of support?)	Timeliness/immediacy, urgency. Parent motivation or voice piece?

- *LUNCH* -
Regroup at 1:00pm-ish



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Functional Linkages in Theory of Change: County Feedback *Cont.*

So I Plan To . .	Intervention Component	Essential Function: What feature of problem does this address?
Sac 1	[more data digging to id reasons] “Bypass provisions” for not being offering services if criteria; yet can make the case for services if in the best interest of the child (if a infant with less of a current bond (have a policy)	Family voice, behavioral based case plans “despite” previous history with the system ; courage and legal authority
Sac 2	“Group workshop” Parent partners Safety assessments (every 90 days) (versus risk)	Less understanding, buy-in, shared ownership of court-ordered services and “my/our” roles in meeting them together (among, across parents, caregivers, circle of support) Immediacy and repeated, ongoing Interactive
San Joaquin	PDSA for changes to CFT to pilot in court program (harm and danger statements (established), safety goals, changes in behavior vs service driven that may not impact behavior) Incorporating linkage/reflection on judge’s visit	Timely. Initial, 6-months (or earlier) – including perm recs Opportunities to see progress Structure with behavioral focus Proactive, turning technical aspects (visits) into action “Efficiencies”

The Process of Implementation

*What does it take to
support use of
interventions?*

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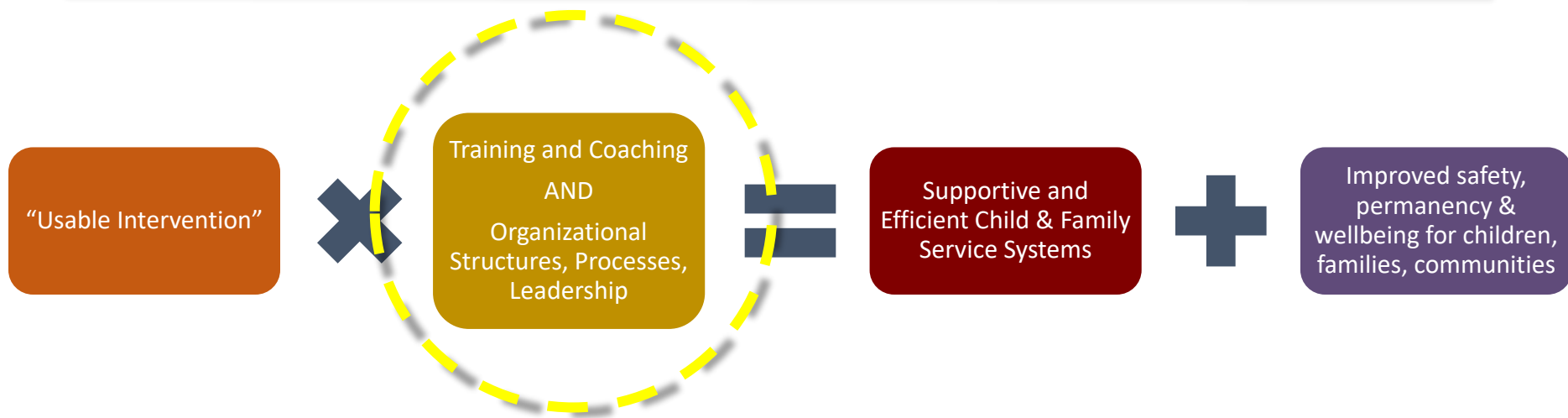
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Active Implementation:

Focus on both People & Organizations

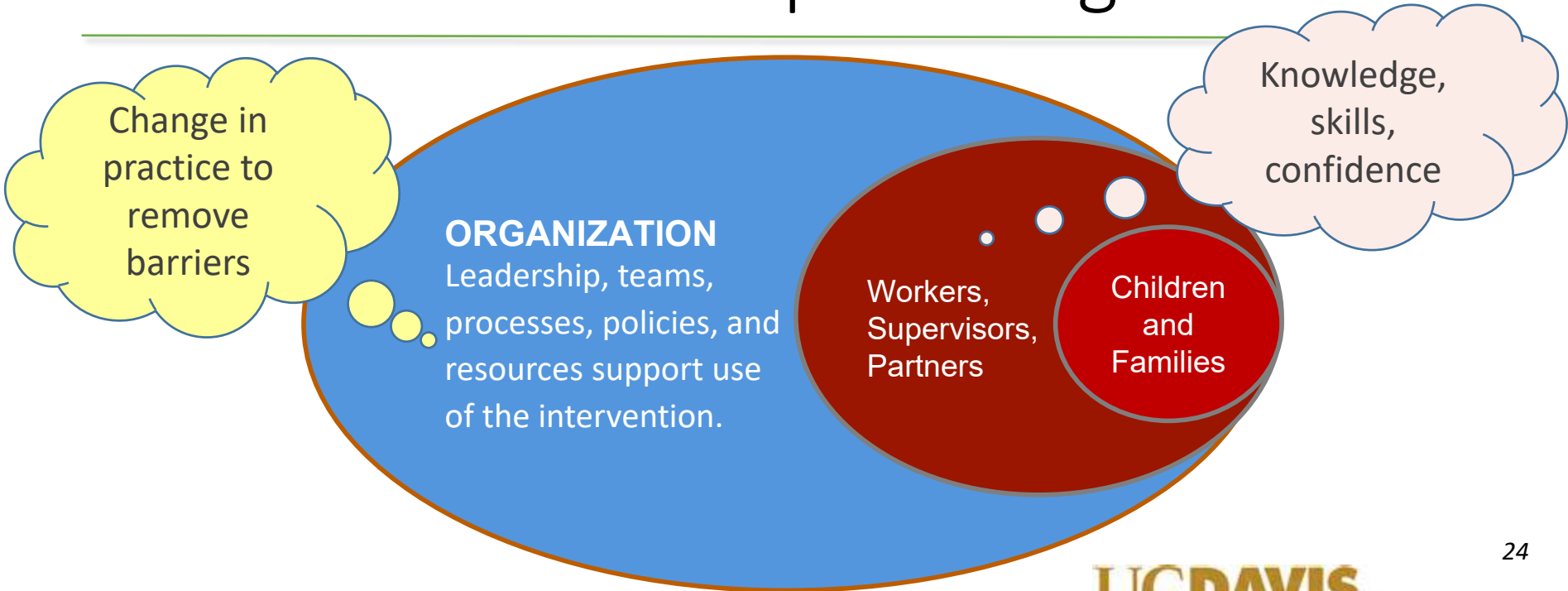


Make “it” teachable, learnable, doable, assessable, and repeatable in practice

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Active Implementation:

Focus on both People & Organizations



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The Process of Implementation

- *People*: Who? What knowledge and skills do they need to do the intervention? E.g., critical thinking, active listening, new exit plan process, coaching on using revised forms
- *Organization*: What may help/get in the way of delivering the intervention? How might you manage that? E.g., time to participate in coaching sessions, feedback loops, formal practices for partnering, supervisor support, relationships with courts

Supporting Use of the Intervention (Ex.)

So I Plan To . .	Intervention Component	Essential Function: What feature of the problem does this address?	Whose behavior? What do they need? What about the org may help/get in the way? (noted in HW#3)
Family engagement	Family meeting about exit	Ask them, discuss vs. prescribe. Present, active role of natural supports. Accountability (with others, with self; documented)	<ul style="list-style-type: none"> Workers may need training and coaching on facilitation and active listening skills Workers may need training and coaching on documenting essential components of family-engaged exist plan, including getting and documenting shared buy-in
	Early engagement, identify natural supports	Timely, immediacy	<ul style="list-style-type: none"> Organization may need to define and broadly share policy-practice for ensuring outreach/assessment completed in shorter time frame
Thorough assessment of the family for reunification	Complete SDM family reunification tool	Know the right, targeted questions to ask to spark discussion about risk and safety Guidance and accountability (supervisor role in case reads) with constructive feedback loop	<ul style="list-style-type: none"> Workers may need training and coaching on the “right” questions, what tools may apply to case and why, and how to apply them Supervisors may need coaching for identifying worker evidence of “thorough” assessment in case plans



Supporting Use of the Intervention (County Ex.)

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Supporting Use of the Intervention (County Ex.)

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San Joaquin	PDSA for changes to CFT to pilot in court program (harm and danger statements (established), safety goals, changes in	Timely. Initial, 6-months (or earlier) – including perm recs Opportunities to see progress	



Measuring Implementation Outcomes

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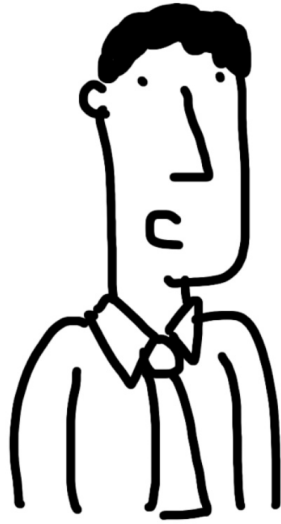
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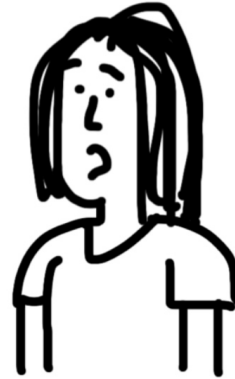
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Thinking About Measuring Implementation

Can you describe how the program is doing?



No, but I can give you some numbers based on crazy assumptions and lots of big data.



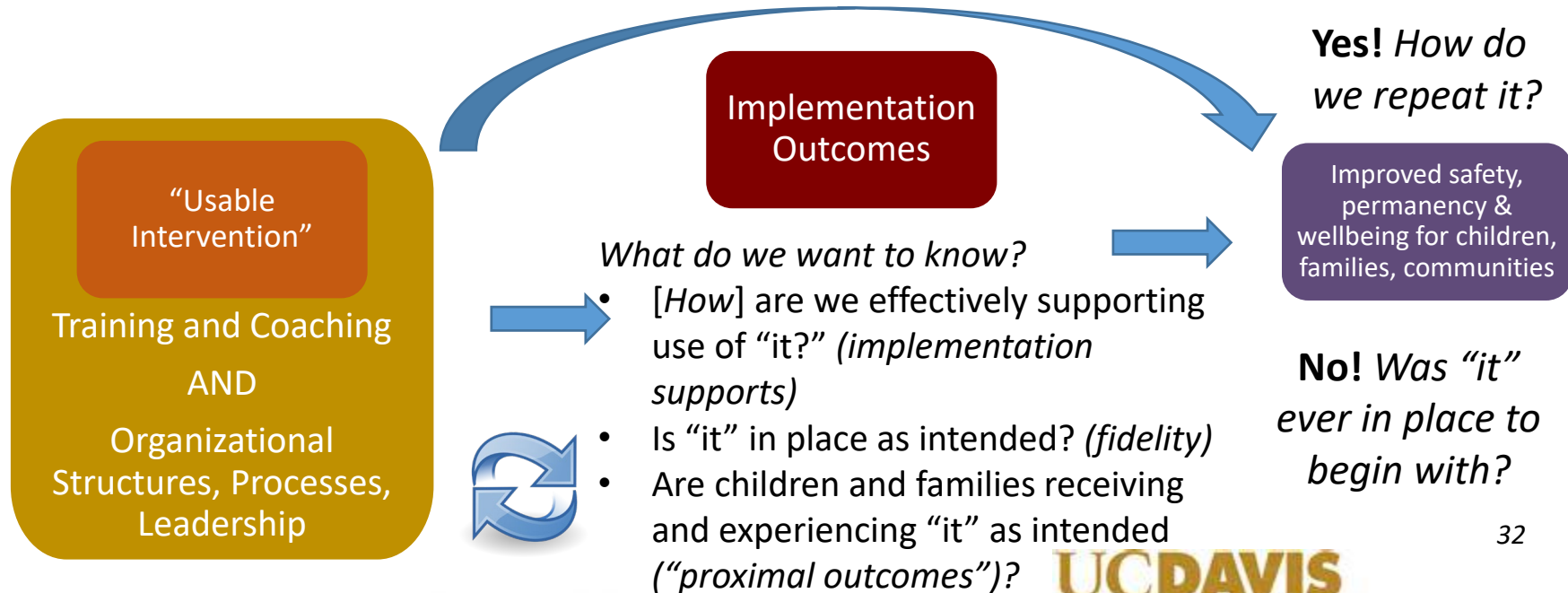
Active Implementation:

Focus on both People & Organizations



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The Process of Implementation: What do we want to know?



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Implementation Process and Outcomes

What do you want to know?	Dimension of Implementation
Is training happening? When? With whom? Is training addressing essential components?	<i>Provision</i> of implementation support <i>Quality</i> of implementation support
Are workers participating in coaching? Are workers satisfied with coaching? Are worker skills improving after coaching?	<i>Provision</i> of implementation support <i>Quality</i> of implementation support <i>Outcome</i> of implementation support
Are outreach visits happening within defined time and in appropriate setting?	<i>Fidelity</i> – “adherence” to approach
Are families interacting with broader circles of natural supports? Are families feeling more engaged?	<i>Proximal child and family outcomes – the experience of children and families in the intervention</i>

Implementation Process and Outcomes

What do you want to know?

Is training happening? When? With whom?
Is training addressing essential components?

Are workers participating in coaching?
Are workers satisfied with coaching?
Are worker skills improving after coaching?

Are outreach visits happening within defined time and in appropriate setting?

Are families interacting with broader circles of natural supports?
Are families feeling more engaged?

How are you going to know it?

Counts from training delivered
Review of objectives/activities; pre-post survey of knowledge change by key content

Counts from coaching logs
Coaching survey for workers
Observational assessments

Case record reviews; other data entries

Case record reviews
Family questionnaire



County Group Work *with Measuring Implementation*

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The Process of Implementation

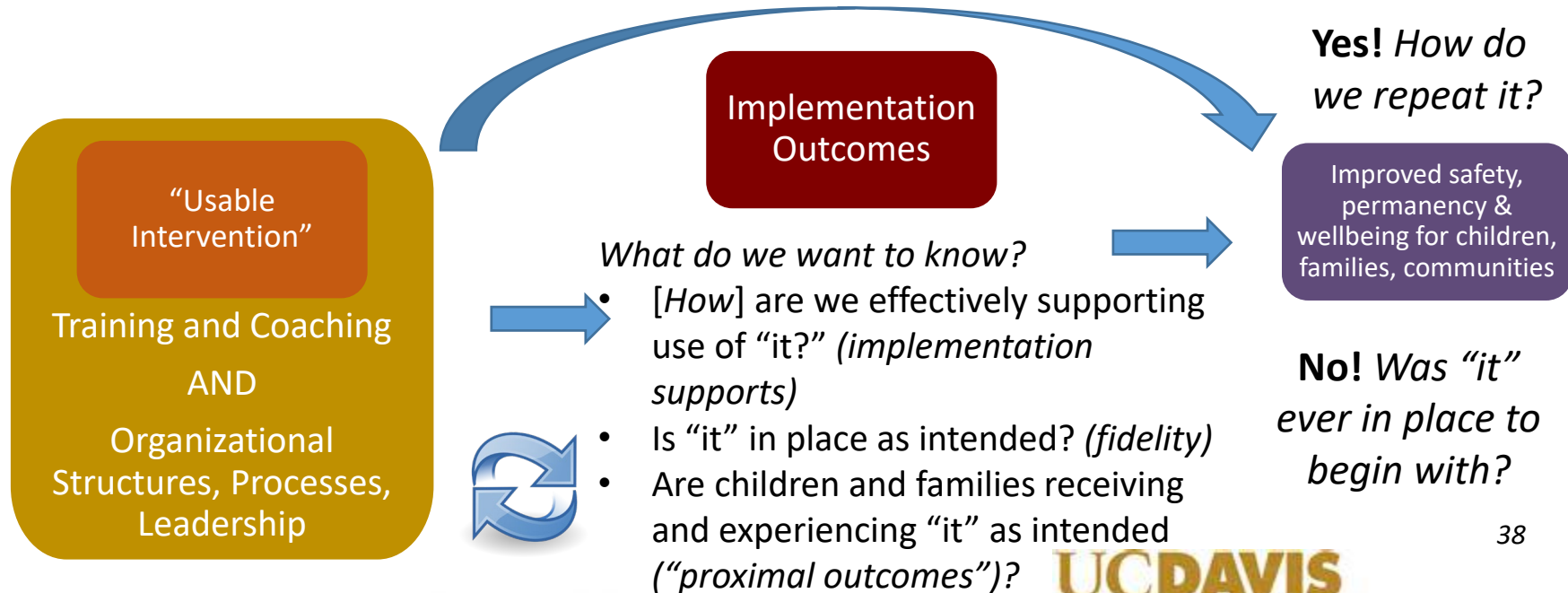
- *People*: Who? What knowledge and skills do they need to do the intervention?
- *Organization*: What may help/get in the way of delivering the intervention? How might you manage that?



Implementation Process and Outcomes

What do you want to know (questions)?	How are you going to know it? (measures, ideas about data sources)
2 - Implementation Supports (for individuals, in the organization)	
2 – Fidelity (guided by essential functions of your intervention)	
2 - Short term outcomes (child/family, system)	
Other:	

The Process of Implementation: What do we want to know?



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Implementation Supports – County Feedback

What do you want to know?	How are you going to know it?

Implementation Supports – Previous Feedback

What do you want to know?	How are you going to know it?
Are SW facilitation skills improving after training?	Direct observation, evidence at 14-day mark and the exit plan
Is the revised tool feasible to use?	Feedback loops (“interview”)
Are workers going to SDM trainings? Getting the training they need? Is Training and Coaching happening regularly/enough?	Counts, when; plus satisfaction feedback from participants (.g., is training helping me address aspects of my work?)
Are workers utilizing coaching after training? Are sups offering?	Counts; survey about quality, utility – even factors that help, hinder
Are sups facilitating workers attending coaching?	Surveys of both workers and supervisors
Is training resulting into clear roles and responsibilities in action plan (PHN, SW)?	Results from activities in training sessions
Are SWs using the right questions in the assessments?	Completed quest. to share with sup during staffing
Are cases being referred to mentors?	
Do mentors understand what they are supposed to be doing? Alignment with agency expectations.	

Fidelity – accountability to essential functions (County Feedback)

What do you want to know?	How are you going to know it?



Fidelity – accountability to essential functions (Previous Feedback)

What do you want to know?	How are you going to know it?
Is use of the tool consistent across use by different units?	
Do sups have appropriate training to assess worker knowledge to use tool?	
Are visits happening during time frame? Documented?	Database and reports
Do workers have more and relevant information to complete assessment?	
Are post perm meetings actually happening?	Records
Are community brokers connecting families with community supports?	PHN service referral networks
Are all the questions being asked and is it complete? (assessment)	
Are families linked to services more immediately?	Count of attendees from orientations
Are mentors meeting with families under framework of expectations?	Logs, feedback meetings
Are roles and responsibilities being clearly documented in action plans?	Review of action plans
Are staff demonstrating the value of principles/behaviors of intervention?	Family voice documented in case file



Proximal child/family, system outcomes – County Feedback

What do you want to know?	How are you going to know it?
What services have you experienced? What is working well? What are the gaps?	

Proximal child/family, system outcomes – Previous Feedback

What do you want to know?	How are you going to know it?
Does the family have a clearly defined circle of natural supports? With clear roles?	
Is use of the tool, correctly applied, increasing?	Online survey tool for sups to document case reads
Are families more aware of and can connect to community supports?	Surveys
Are SW maintaining connections with case even if not lead?	F/U surveys with PHN – partnership connection
Are families engaging in services as mutually defined and owned in plan?	Contract monitoring, levels of engagement, surveys from different audiences
Are families driving the safely planning?	Survey families and workers
Are families benefiting from participating in mentoring?	<i>Surveys</i>

HOMEWORK #4:

Measuring Implementation

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Session #4 Homework (*building from Session #3*)

- I. Determine a manageable set of intervention components (2-4) and associated essential functions, whose behavior they involve, what that behavior looks like in operation
- II. Determine implementation supports that may be needed for both people (2) and the organization (2)
- III. Define how to measure implementation process and outcomes
 - I. What do you want to know? (*see Handout; 3 categories*)
 - II. How will you know it?
 - III. Where can you get this information? What is available, what might you need to create to get it?

<https://www.acf.hhs.gov/cb/resource/framework-workgroup> (*first two phases may be useful*)

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Homework Schedule

Session #4

Nov 6 (today)

You Submit Draft H/W

Nov 30

My Feedback to You

Dec 11

Other Instructor Feedback

Jan 10 (TBD)?

Session #5

January 23

Extended
amount of time
as final session
rescheduled into
January 2019

Homework and Questions

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Implementation Support and Capacity Building