

How can implementation quality be evaluated?

An example from a pilot initiative in Victorian child and family services

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The context

- The State government of Victoria Government has undertaken a redesign of the funded family services system
- This included a \$5.1m investment into the delivery of family and parenting programs \geq Level 3 of the EIF evidence standards:
 - *The programme has evidence from at least one rigorously conducted RCT or QED demonstrating a statistically significant positive impact on at least one child outcome.*
- Consequently, five programs were funded have these characteristics in common:
 - structured and manualised, with prescribed content delivered in a series of steps / sessions;
 - supported by empirical research evidence;
 - require licensing (and often accreditation) agreements with developers or a purveyor;
 - packaged with implementation support, which is provided in various forms and with varying degrees of intensity



Scope and Timeframe

- 5 programs; 5 agencies – most with multiple sites
- Agencies received notification of program funding December 2017
- Short study observation period, dictated by funder timelines:
 - January – October 2018

Program	Number of implementing agencies	Country of origin	Area	Aboriginal agency partnership?
SafeCare®	2	USA	Metro and regional	Yes
Functional Family Therapy- Child Welfare (FFT-CW®)	2	USA	Metro and regional	Yes
Family Foundations®	1	USA	Metro	No
Multisystemic Therapy with Psychiatric Supports (MST- Psychiatric®)	1	USA	Metro	Yes
Tuning in to Kids™ / Teens™ (TINK™/TINT™)	1	Australia	Regional	Yes

NB: Two agencies implemented both SafeCare and FFT

The opportunity

- CEI were commissioned by DHHS to:
 - undertake an implementation evaluation of the manualised programs in the Victorian context
 - develop an outcome evaluation framework for future use (in partnership with University of Melbourne)
- First implementation evaluation of its size and scope in Australia
- Unique opportunity to explore transportability of several well-known programs developed and tested in the U.S.A.
 - Most untested in Australia, especially with Aboriginal and Torres Strait Islander communities
- To influence the way evaluations are conceptualised and funded by government
 - Demonstration of the value of evaluating implementation, not just impact



Implementation evaluation

- Effective interventions require far more than just making the interventions available – **BUT our evaluations often fail to take this into account**
- Most research addresses 'what works' – but it's now a high priority to explore what works where, for whom, under what circumstances, and why (Institute of Medicine, 2007)
- An **implementation evaluation** is an assessment of the implementation process
- It assesses the extent to which implementation is effective in a specific context. This promotes (Stetler et al., 2006):
 - optimisation of intervention benefits
 - prolonged sustainability in context
 - dissemination of findings into other contexts



Implementation evaluation aims

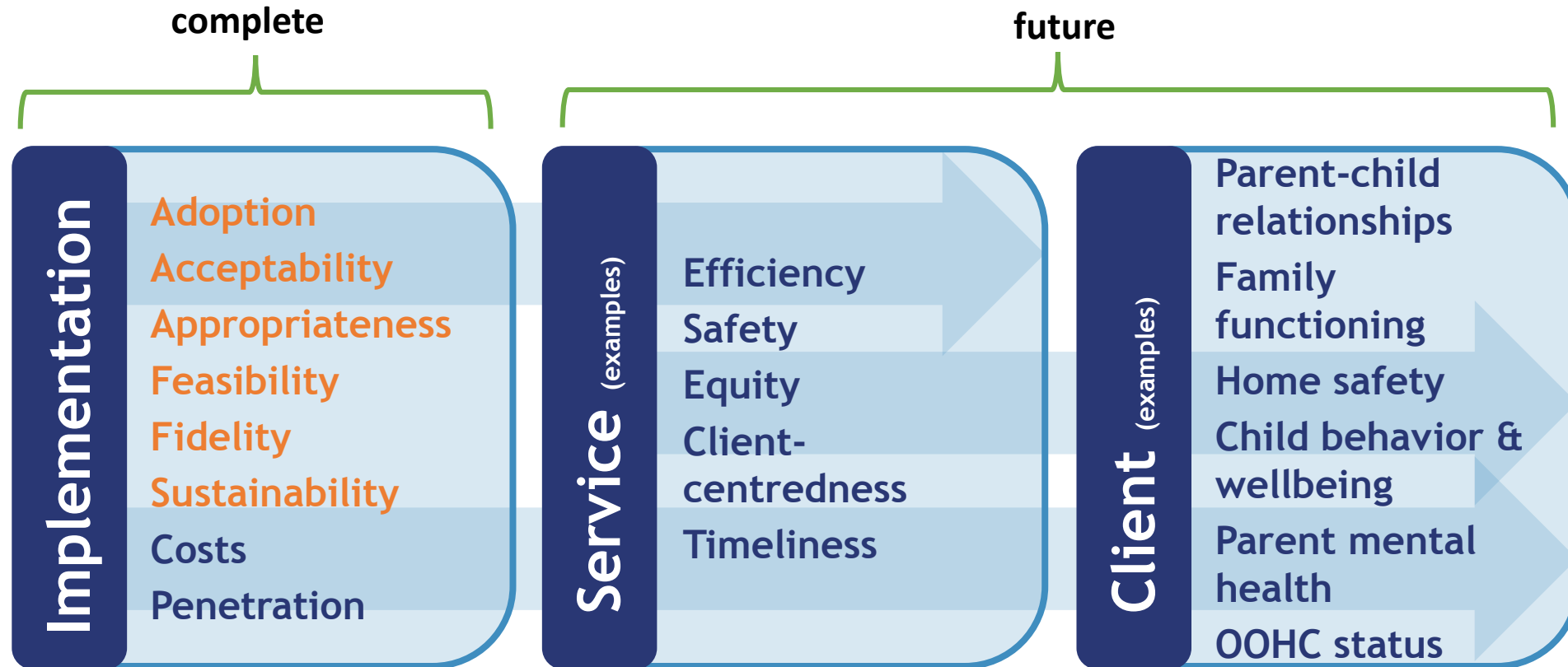
Aims:

1. To analyse the implementation processes undertaken by each agency, providing an indication of:
 - the **comprehensiveness and pace** of implementation
 - the **quality** of implementation through assessing key implementation outcomes
2. To provide context and early insights to shape the subsequent (planned) outcome evaluation



Design

- Part of an overall hybrid design – only implementation outcomes have been assessed to date
- Implementation evaluation: pragmatic, real-world, mixed-methods, multi-site observational study
- Informed by Proctor's (2011) model of implementation research



- Outcomes in **orange** were in scope of the implementation evaluation
- Comprehensive fidelity assessments were not possible/available for most sites given very stage of implementation; so data not reported

Implementation Outcome	Definition
Adoption (uptake)	The intentional initial decision or action to take on or try an intervention/program.
Acceptability	The perception among stakeholders that a program or practice is agreeable, palatable or satisfactory.
Feasibility	The extent to which the program or practice can be successfully used or carried out within your setting.
Appropriateness	The perceived fit, relevance or compatibility of a program or practice.
Fidelity	The degree to which a program or practice was delivered as intended.

Methods

Participants

- Implementing agency staff
- Purposive sampling was used to identify potential participants
- N=25 from across all agencies:
 - n=5 executive leaders
 - n=6 managers/supervisors
 - n=14 frontline practitioners



Methods

Assessing adoption and sustainability

- Stages of Implementation Completion tool; completed by implementation lead at each site (Chamberlain, Brown, & Saldana, 2011; Saldana, 2014)
- Assesses implementation pace and completion
- Specifies activities within eight stages:

1. Engagement
 2. Consideration of Feasibility
 3. Readiness Planning
 4. Staff Hired and Trained
 5. Adherence Monitoring Planning
 6. Service Commencement
 7. Ongoing Services, Fidelity Monitoring and Feedback
 8. Competency
-
- The diagram illustrates the eight stages of implementation completion, grouped into three phases:
- Pre-implementation:** Stages 1, 2, and 3 (Engagement, Consideration of Feasibility, and Readiness Planning).
 - Implementation:** Stages 4, 5, 6, and 7 (Staff Hired and Trained, Adherence Monitoring Planning, Service Commencement, and Ongoing Services, Fidelity Monitoring and Feedback).
 - Sustainability:** Stage 8 (Competency).

- Data is collected in the form of a date
- Three scores :
 - **Duration** - how long is spent in each stage;
 - **Proportion** - percentage of set activities completed activities within each stage
 - **Stage** - describes the stage achieved (1-8)

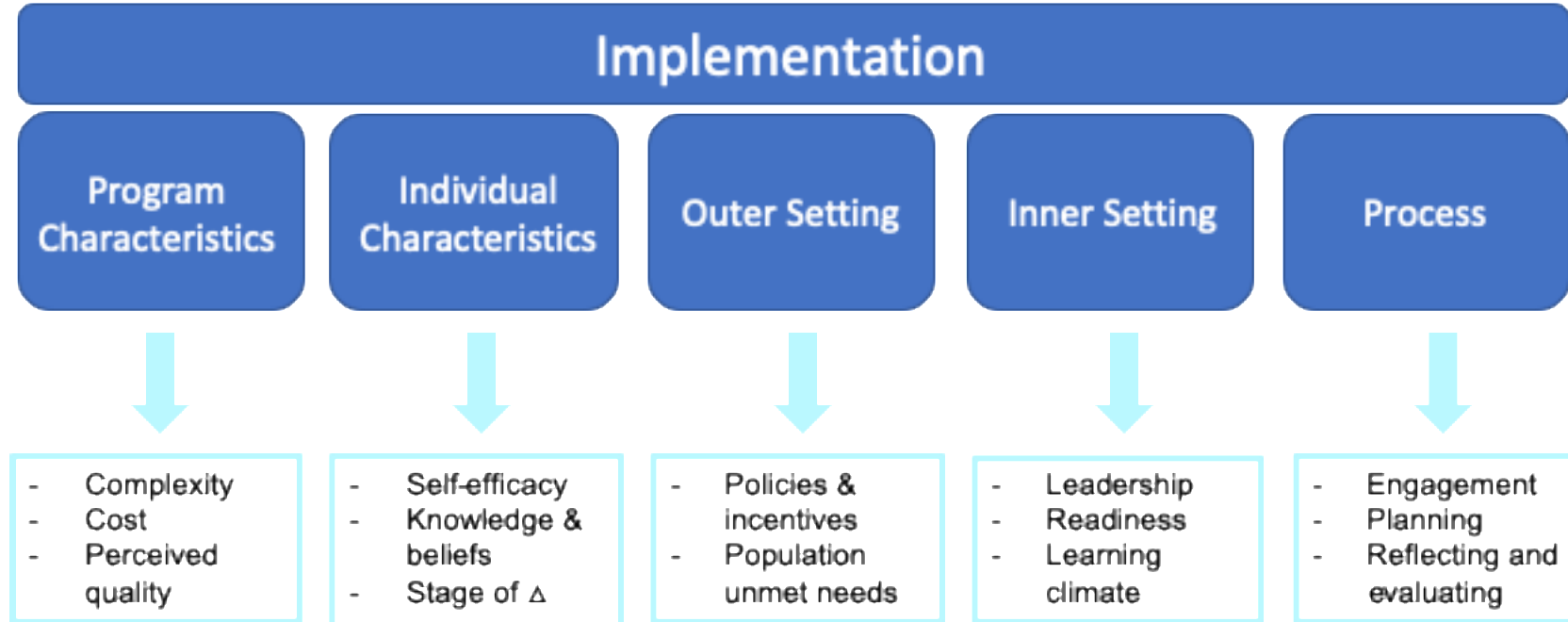
Stage 4 – Staff Hired & Intro Training

	Activity Date	Missing	
4_01	Date first program staff begin employment in the project	11/2/18	—
4_02	Date facilitators completed 4-day training by Safecare	10/1/18	—
4_03	Date supervisors completed training	10/10/18	—
4_04	Was there facilitator turn-over	Y <input checked="" type="radio"/> N	—
4_05	Date facilitator turned-over	TT	—
4_06	Date of facilitator replacement	TT	—
4_07	Was there supervisor turn-over	Y <input checked="" type="radio"/> N	—
4_08	Date supervisor turned-over	TT	—
4_09	Date of supervisor replacement	TT	—
4_10	Was there additional program staff turn-over	Y <input checked="" type="radio"/> N	—
4_11	Date of additional program staff turned-over	TT	—
4_12	Date of additional program staff replacement	TT	—
4_x	Did site discontinue their implementation process in this stage? If yes, please indicate the date	TT	—

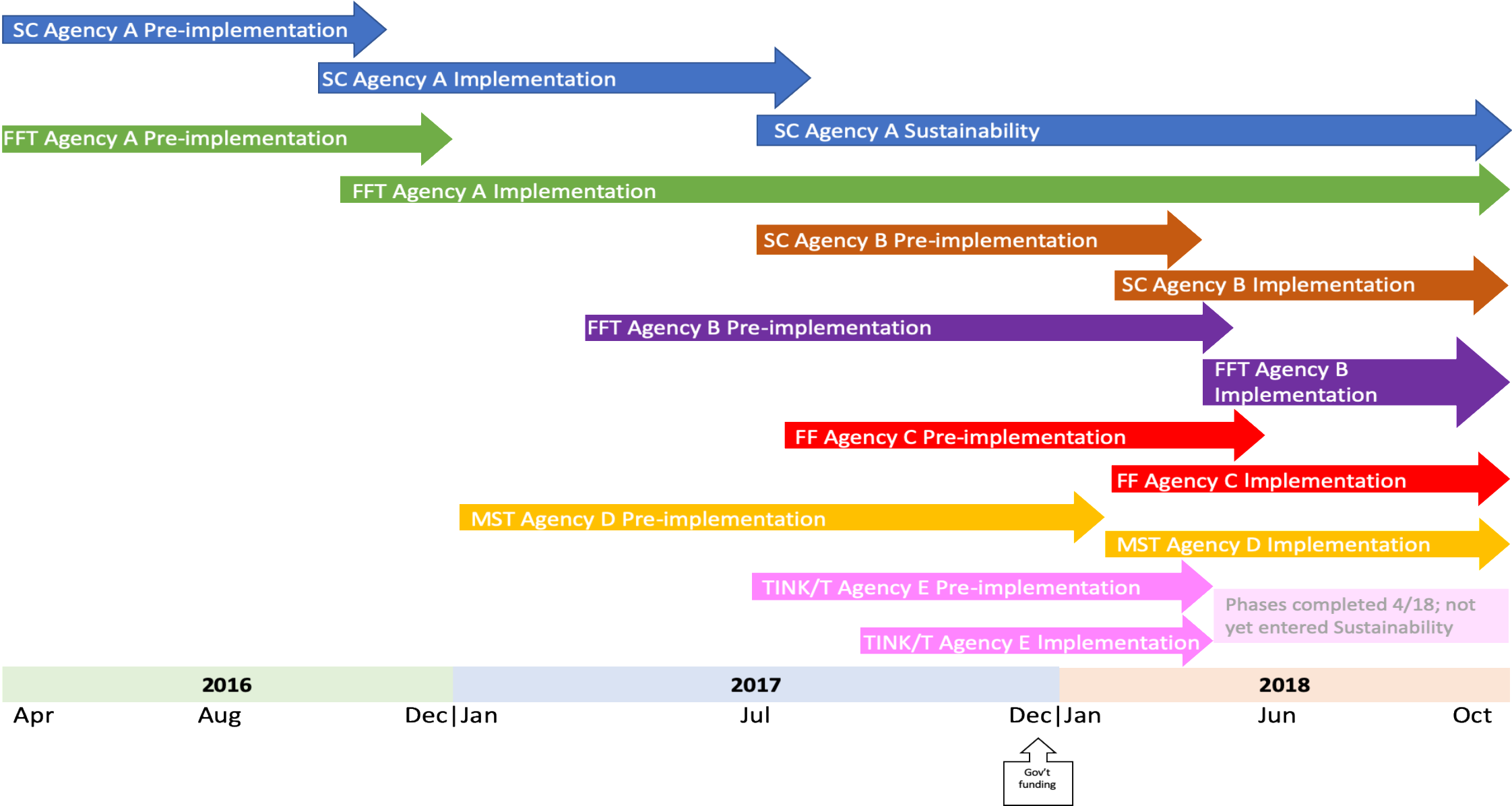
Methods

Assessing Acceptability, Appropriateness, Feasibility

- Semi-structured interviews to explore barriers and facilitators to program implementation in context – based on *Consolidated Framework for Implementation Research* (CFIR; Damschroder et al., 2009)
 - Framework analysis according to CFIR domains and constructs
 - Mapped back to implementation outcomes: acceptability, appropriateness, feasibility





















Results – Stage of implementation



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- Implementation has been a time and resource intensive process, **but no more so than usually observed**
 - Arguably faster due to external funder pressures
- Average duration for pre-implementation = 10.5 months
 - range: 8-14 months
- Implementation activities were often highly-concentrated and overlapping, which may have compromised the **quality** of implementation
 - Funder-driven timelines and completion targets
- The more complex programs (SafeCare[®], FFT-CW[®], MST-Psychiatric[®]) had longer duration scores and lower completion scores for each stage

	CFIR domain	Acceptability	Appropriateness	Feasibility
BARRIERS	Inner setting			
	Outer setting			
	Intervention characteristics			
	Individual characteristics			
	Process			
FACILITATORS	Inner setting			
	Outer setting			
	Intervention characteristics			
	Individual characteristics			
	Process			

	CFIR domain	Acceptability – illustrative quotes
BARRIERS	Inner setting	<i>it's been challenging in that it's a very different way of working.</i>
	Outer setting	<i>I'm aware that there was a real critique of just buying in off the shelf American programs</i>
	Intervention characteristics	<i>The risk of burnout is higher than a nine to five job. Because we see our clients between 4.00 and 9.00pm...And I think that can be really taxing</i>
	Individual characteristics	<i>It has been challenging for a few of them. They are a lot more under the spotlight.</i>
	Process	-
FACILITATORS	Inner setting	-
	Outer setting	<i>There is wider acceptance on that this is outcome-based like it's no longer acceptable to just say 'well we serviced a 100 people'</i>
	Intervention characteristics	<i>I think is a model that has demonstrated over a long period of time a strong level of efficacy, and I had experienced already that I thought it was quite a good contextual fit.</i>
	Individual characteristics	<i>the level of satisfaction amongst [implementing] staff, I think is higher. Because (1) they're getting feedback in it, but (2) I think it's giving them a sense of skill learning</i>
	Process	-

	CFIR domain	Appropriateness – illustrative quotes
BARRIERS	Inner setting	-
	Outer setting	-
	Intervention characteristics	<i>There's no way we should claim that any of these models can translate across and work with an Aboriginal community...It may be that models need to be appropriately different, and I don't think we can claim to be there [yet]</i>
	Individual characteristics	-
	Process	<i>from developing contracts to paying on-call recall because of Australian labour laws...employment contracts had to be written and then rewritten</i>
FACILITATORS	Inner setting	-
	Outer setting	-
	Intervention characteristics	<i>None of the ideas are new, they're just packaged in a way they can be delivered to families, in a way that again is fairly easy to digest for them.</i>
	Individual characteristics	-
	Process	-

	CFIR domain	Feasibility – illustrative quotes
BARRIERS	Inner setting	<i>I think we underestimated the change in the work cycle for practitioners</i>
	Outer setting	<i>having people understanding what the program is would have been one of the biggest external barriers</i>
	Intervention characteristics	<i>I think the area that stands out the most for me is the impact of after-hours work on staff. Like they all knew there would be some, we just really didn't think there would be as much</i>
	Individual characteristics	<i>It was [hard] to get people with appropriate qualifications...it's not just the qualification but with the right resilience and the right character to be a frontline practitioner in this program</i>
	Process	<i>you haven't got other people to kind of ring up and get a bit of advice, there's really only New York and New York's a very different context to here</i>
FACILITATORS	Inner setting	<i>We have a very large family services footprint</i>
	Outer setting	-
	Intervention characteristics	<i>You would think with running a new program, like a program in Australia for the first time, there'd be a whole lot of issues...It's been very simple actually</i>
	Individual characteristics	-
	Process	<i>we've got a research team...they set us up right from the beginning with the proper communications plan and the proper risk assessments...we sort of got up and running very quickly</i>

Conclusions and Recommendations

- Real-world implementation evaluation is feasible and delivers important insights for agencies and government
- Government needs to consider what levers to use to improve quality and sustainability of implementation – **prior to scale-up**
- **Funding pre-implementation activities** (e.g. partnership planning, engagement, exploration, and feasibility/readiness planning) is needed for high-quality and sustainable implementation
- **Ongoing monitoring** of implementation outcomes is needed – especially fidelity – which can be used as an indicator for when to commence the impact evaluation
- Context trumps program – so **contextually-aware adaptations** are vital
- **Co-design** adaptations with Aboriginal communities, or alternative practice approaches
- A need for caution around adopting and scaling **untested adaptations** that have been developed in practice settings



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