Improving Technical Assistance and Improving Readiness to Implement Evidence-based Interventions:

Stepping Over the Gap Between Research and Practice!

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Problem

"My impression is that there is a normal curve of program success in multi-site interventions with some sites doing very well, most sites doing mediocre, and some sites that apparently wasted time and money"

Laura Leviton, Senior Evaluator, Robert Wood Johnson Foundation (Retired) personal communication.



Possible Solutions

- Use Evidence-Based Interventions
- Implementation Science (Readiness)
- Build Capacity of Organization and Communities to implement Evidence-Based Interventions (Technical Assistance)



Improving Technical Assistance and Improving Readiness to Implement Evidence-based Interventions: Stepping Over the Gap Between Research and Practice

Readiness to implement evidence-based interventions and readiness to change course are essential for effective implementation and outcomes. Technical assistance to build capacity to do so is often necessary. In this presentation, Wandersman will present on 1) a new evidence-informed TA engagement framework and 2) the R=MC² organizational readiness Readiness Building System. Our goal is to step over the gap between research and practice so that researchers, practitioners, funders, and "the real world" can benefit. He will describe our approaches to TA and to readiness and provide an example combining them in a multi-site project to implement evidence-based interventions.



Brief Story of Implementing EBIs in 2020

- Leviton suggests—even in "normal times", change through interventions is tough.
- Opioid Crisis
- January 2020 Training and TA on Two EBIs in 10 Substance Abuse Treatment Centers in a state
- COVID-19 hits, Virtual services start
- How can TA build the readiness of organizations to implement something new in a way that relates to their context?



Opioids and other Substance Use Disorders

- Increase in drug use
- Need for an Evidence-Based Practice
 - Building practitioner skills requires training, coaching and environmental (work) changes

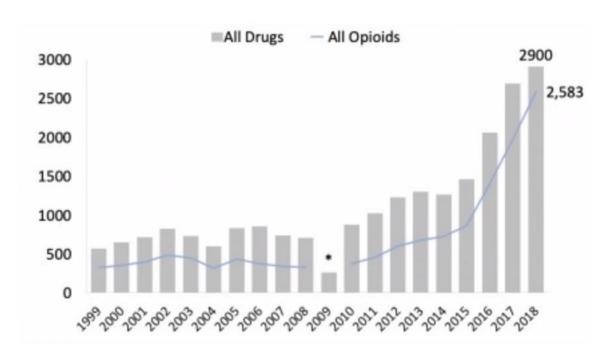
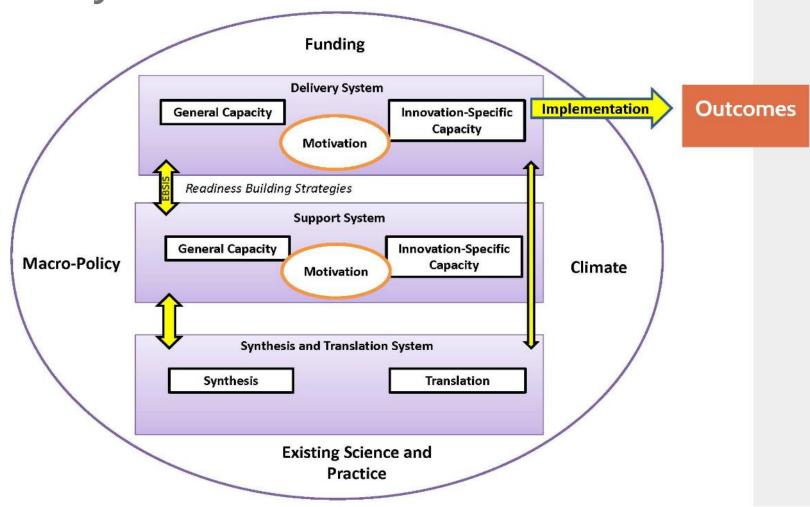


Figure 1. Number of drug and opioid-involved overdose deaths in New Jersey. *Circumstances in New Jersey for the



Interactive Systems Framework





READINESS IS...

The extent to which a person, organization, community, or state is **willing** (motivation) and **able** (capacity) to implement an innovation.

An innovation is a program, practice, or policy that is being implemented in a setting.

Readiness is critical for quality implementation



READINESS IS...

Readiness

Motivation

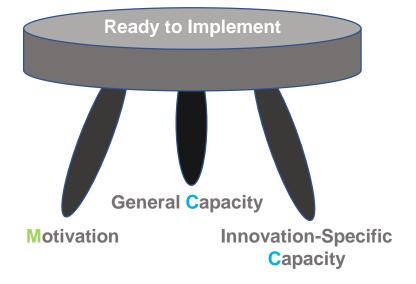
X

<u>Capacity</u> (Innovation-Specific)

X

Capacity (General)





Motivation

- Relative Advantage
- Compatibility/ Alignment
- Simplicity
- Observability
- Ability to Pilot
- Priority

Innovation- Specific Capacity

- Innovation-Specific Knowledge and Skills
- Program Champion
- Supportive Climate
- Interorganizational Relationships
- Intraorganizational relationships

General Capacity

- Culture
- Climate
- Innovativeness
- Structure/Inter nal Operations
- Leadership
- Resource Utilization
- Staff Capacity



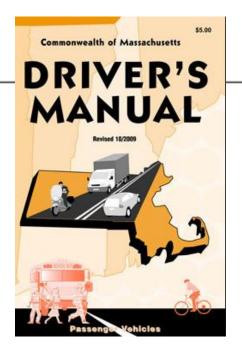




Support: Technical Assistance & Readiness



1. Tools



2. Training



4.
Quality
Assurance/
Quality
Improvement



3. Technical Assistance

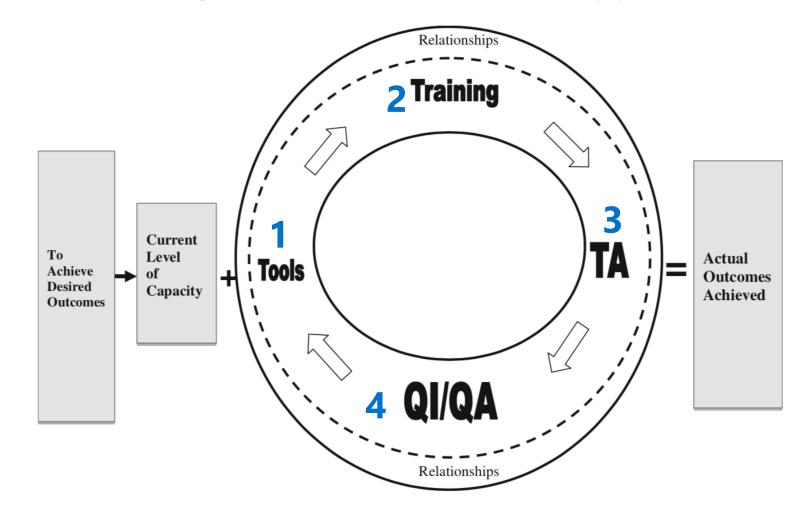




Support

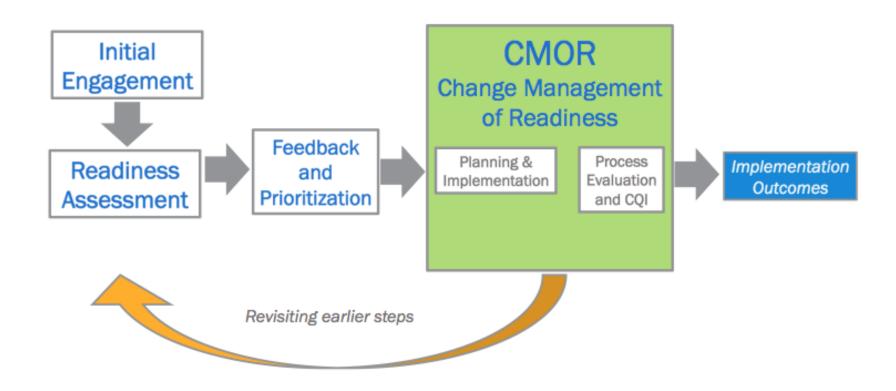
EBSIS: Evidence-Based System for Innovation Support

- 1. MI & CBT Manual
- 2. MI & CBT Training Sessions & Follow-Up Coaching Calls
- 3. TA on Readiness with Leadership to Integrate MI & CBT into Big 6
- 4. Continuous Feedback
 System and Evaluation
 Plan





Readiness Building System





How will readiness be used?

- Assess each individual site's readiness to implement Cognitive Behavioral Therapy and Motivational Interviewing
- Receive readiness report
- Follow up TA (via phone and in-person)



Organization's Readiness Report

Readiness for Implementation of Cognitive Behavioral Therapy and Motivational Interviewing

May 2019

About this report

This report summarizes results from the administration of the Readiness Diagnostic Tool (RDT). The purpose of the RDT was to hear from members of your implementation team and other staff to learn how "ready" they think the Organization is to implement Cognitive Behavioral Therapy and Motivational Interviewing

The items in the RDT measured two major subcomponents of program readiness: general capacities and motivation. Organizations that are beginning major change efforts, including the adoption of a new program or practice, will benefit from high levels of general capacities to include the support from leadership, adequate staff capacities, and a culture of innovativeness. Sites with high motivation to adopt a new program or practice typically prioritize this change, recognize the advantage of the change, and see how it aligns with the organization's mission.

A total of 11 members started and 6 members completed the tool in May 2019. The results are provided for you in the following report to help your site identify strengths and potential areas for improvement to increase readiness to implement Cognitive Behavioral Therapy and Motivational Interviewing

Summary of Organization's Readiness to implement an evidenceinformed program

The scores in Table 1 show your team's average readiness scores across all of the subcomponents from high to low, on a scale from 1 (indicating lower readiness) to 7 (indicating higher readiness). Your scores are a reflection of how the respondents from your site answered, not a comparison to other sites. Understanding which readiness subcomponents are stronger or weaker will help your implementation team decide where to focus efforts on building or maintain readiness to implement an evidence-informed Cognitive Behavioral Therapy and Motivational Interviewing







Technical Assistance

- Technical Assistance (TA) is a key approach for supporting the implementation of EBIs in community-based settings, and a strategic priority of the Wandersman Center.
- Four Areas of Development
 - Planning and Implementation
 Engagement TA framework
 Examining readiness for TA
 - Evaluation

TA Tracker
TA Engagement Questionnaire

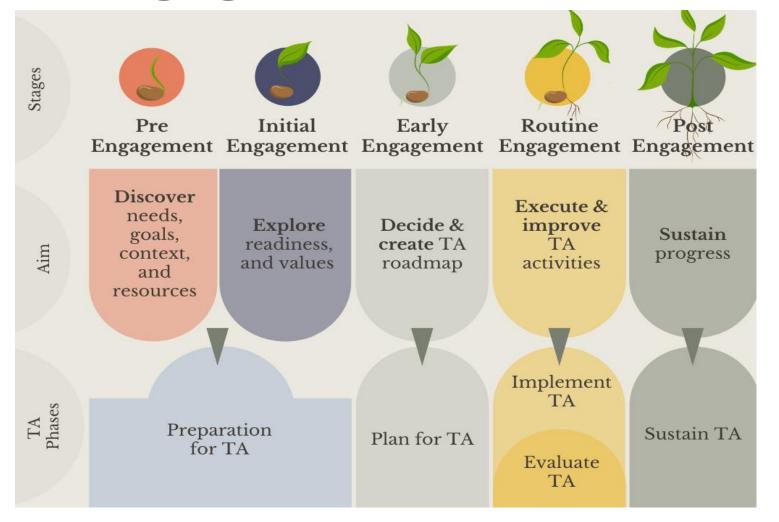


Rationale: The "Why" Fueling Our Spirit

- TA is a ubiquitous approach in the private and public sector.
- Substantial national and international investment in TA initiatives.
- Recent literature reviews and research indicate:
 - Little consensus about the essential features of TA¹,
 - Explicit model/framework is rarely used ³ limited systematic implementation of TA
 - Quality evaluations of TA are minimal difficult to discern TA effectiveness⁴



TA Engagement Framework



Relationship-focused Guiding Principles

(Katz & Wandersman, 2016)

- **Trust:** TA recipient's faith or confidence in the TA provider.
- **Respect:** Quality or state of being esteemed (holding in high regard).
- Collaboration: TA providers and recipients work together in the direction of a shared purpose.
- Adjusting to readiness: TA
 provider structures the TA process to
 match the recipient's perception of
 how important change was at that
 moment.
- Strengths-based: TA provider focuses on current assets and/or inspires the recipient with courage or hope.
- Autonomy-supportive: TA provider promotes self-governance on the part of the TA recipient.
- Rapport: Collegiality and/or a cooperative interpersonal climate.



Recipient Readiness for TA

- Research literature and practice-based experience is increasingly recognizing the importance of attending to readiness for TA
- Recipient readiness for TA is reflected in the Initial Engagement stage of the Engagement Framework
- Two methods of assessments:
 - Readiness for TA Scale (survey format)
 - Assess all domains of R=MC²
 - R=MC² -informed open-ended questions (interview format)
 - Tailor and delve more deeply into select domains



TA Engagement Questionnaire

- Aim:
 - To assess the quality of engagement between the recipient and their provider
- Broad Construct: Relationship x Technique
- Scale:
 - 5-point: frequency of practice
 - 1-never, 2-rarely, 3-sometimes, 4-often, 5-always
- Mulitdisciplinary Literature Search:
 - Technical assistance lit. Public Health
 - Education & Business: e.g., Knoff et al 1995 Consultant Effectiveness Scale; Tooth et al 2013 Coaching Effectiveness Survey
 - Psychology (Clinical): The Helping Alliance Questionnaire

TA Provider Effectiveness Questionnaire

Services refer to active (in-person or virtual conversations, site visits) and passive (email, tools, resources) supports provided to you by your Technical Assistance (TA) provider.

5-point frequency of practice scale

1- never, 2- rarely, 3- sometimes, 4- most of the time, 5- always

Construct	Item			
Global Measures				
Satisfaction	I am satisfied with the services provided by my TA provider			
Value/Utility	The time I spend with my TA provider is valuable.			
	The services provided by my TA provider are helpful to my work.			
	The insights and resources provided by my TA provider are relevant and timely.			
Interpersonal Skills				
Collaboration (CES1.I)	I feel I am working together with my TA Provider in a joint effort.			
	My TA provider and I work together to generate solutions to questions.			
	I have a strong relationship with my TA provider.			
	I work with my TA provider toward a shared goal or purpose			
Communication	My TA provider offers suggestions in a constructive manner. (CES1.k - tactful)			
	My TA provider listens attentively. (CES 1.x. Attentive $\underline{\text{Or}}$ CES2.k active listener)			
	I feel heard and understood during TA sessions.			
	Enough time is allocated during conversations for me to share my thoughts.			
Empathetic				



TA Engagement Questionnaire

- Example constructs:
 - Interpersonal skills (Relationship):
 - Collaboration
 - Communication
 - Empathy
 - Encouraging
 - Shows Respect
 - Trustworthy
 - Technical skills (Technique):
 - Client-centric
 - Strengths-based
 - Skilled at questioning
 - Summarizes
 - Responsiveness
 - Provider preparedness
 - Maintains confidentiality
 - Practices ethically

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Empathetic				



Think about January 2020 and an initiative you were involved in



Using the Readiness, Resilience and Recovery Tool: An Emerging Approach to Enhance Readiness Thinking in Times of Disruption



STEP OVER THE GAP Between Research & Practice



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Step over the gap, not in it.

Watch your step as you board and exit the train.



READINESS FOR COVID-19 RECOVERY AND RESILIENCE ©

Subcomponent	Definition	Questions	Notes (Has this increased, decreased, stayed the same?) How (be specific)?
Priority	The initiative would have a high-level of importance compared to other things we do.	a) How have priorities shifted b) Is the initiative a priority at your organization?	How do you know it's a priority? Compared to other initiatives started before COVID-19? Compared to changes that resulted from COVID-19? Priority for your team? Priority for the target audience? Priority for leadership?



Readiness for Recovery and Resilience

 How is COVID-19 slowing the progress and what needs to be done about it (Recovery)?

 What conditions are allowing certain sites to maintain momentum? (Resiliency) **Priority**

Compatibility

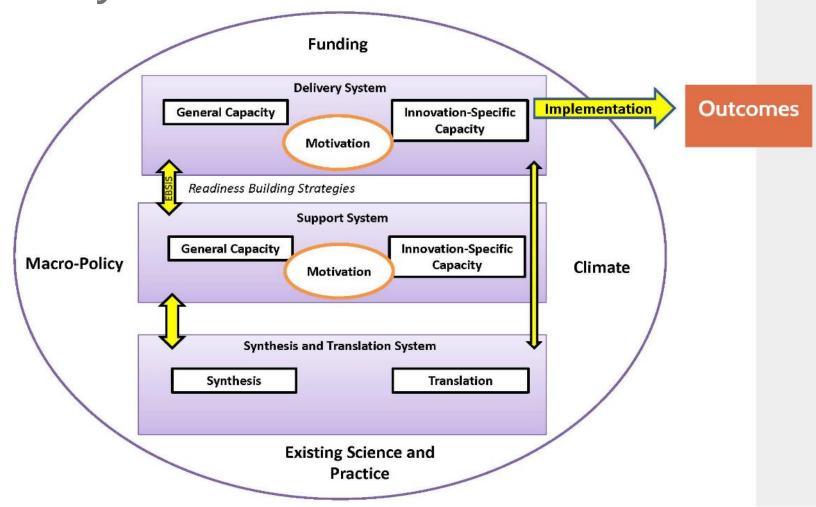
Staff Capacity

Leadership

Simplicity



Interactive Systems Framework





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Selected References

- Katz, J. & Wandersman, A. (2016) Technical assistance to enhance prevention capacity: A research synthesis of the evidence base. Prevention Science, **17**, pages417–428(2016).
- Scaccia, J., Cook, B., Lamont, A., Wandersman, A., Castellow, J., Katz, J., & Beidas, R. (2015) A Practical implementation science heuristic for organizational readiness: R = MC². Journal of Community Psychology. 43, 483-501.
- Wandersman, A., Chien, V., & Katz, J. (2012). Toward an Evidence-Based System for Innovation Support for Implementing Innovations with Quality: Tools, Training, Technical Assistance, and Quality Assurance/Quality Improvement. American Journal of Community Psychology. 50, 445-460.
- Wandersman, A., Duffy, J., Flaspohler, P., Noonan, R., Lubell, K., Stillman, L., et al. (2008). Bridging the gap between prevention research and practice: The Interactive Systems Framework for Dissemination and Implementation. American Journal of Community Psychology, 41, 171-181.



Willingness x Ability = Readiness

≠DOES NOT EQUAL

Ready to Roll or Ready, Set, Go