

Assessing Drivers Best Practices

Fixsen, D. L., Ward, C., Blase, K., Naoom, S., Metz, A., & Louison, L.



Please cite as:

Fixsen, D. L., Ward, C., Blase, K., Naoom, S., Metz, A., & Louison, L. (2018). *Assessing Drivers Best Practices*. Chapel Hill, NC: Active Implementation Research Network, <https://www.activeimplementation.org>.

Original Publication

Fixsen, D. L., Blase, K., Naoom, S., & Wallace, F. (2006, November). Measures of Core Implementation Components. National Implementation Research Network, Florida Mental Health Institute, University of South Florida.

© 2018 Dean L. Fixsen

This material is copyrighted by Dean Fixsen and is made available under terms of the Creative Commons license CC BY-NC-ND



<http://creativecommons.org/licenses/by-nc-nd/3.0>

Under this license, you are free to share, copy, distribute and transmit the work under the following conditions:

Attribution — You must attribute the work in the manner specified by the author or licensor (but not in any way that suggests that they endorse you or your use of the work);

Noncommercial — You may not use this work for commercial purposes;

No Derivative Works — You may not alter, transform, or build upon this work.

Any of the above conditions can be waived if you get permission from the author, the copyright holder. info@activeimplementation.org

Assessing Drivers Best Practices

As preparations are made for the first newly trained practitioners to use an innovation when interacting with recipients, the support of the Implementation Drivers becomes essential. The use of the Competency Drivers, Organization Drivers, and Leadership Drivers in practice can be assessed every three months during the first year, twice a year for the next five years, and annually thereafter. The results of each assessment provide data for action planning to establish each Driver, for practice-policy communication with executive leadership to assure organization and leadership support for the use of the Drivers as intended, and for continual improvement of each Driver and all the Drivers working in harmony. Regular assessments keep implementation in the forefront as innovations are used and improved in practice.

In implementation science, observation is a problem. Lewis et al. (2015) catalogued 104 existing implementation-related measures and found them lacking in reliability, validity, and conceptual clarity. Proctor et al. (2011) described potential implementation measures derived from a review of concepts in the literature. Of the eight proposed measures three (adoption, cost, fidelity) relate to implementation, three concern the innovation (acceptability, appropriateness/fit, feasibility), and two relate to scaling (sustainability, penetration). Weiner et al. (2017) developed new implementation outcome measures where each item concerns the innovation (“this EBP meets my approval;” “This EBP seems applicable”), similar to acceptability, appropriateness/fit, feasibility in the Proctor et al. list. Finally, reviews of the implementation research literature noted that it was unusual for any measure to be used by more than one researcher (Allen et al., 2017; Fixsen, Naoom, Blase, Friedman, & Wallace, 2005).

The lack of useful and agreed upon measures is a problem. If implementation independent variables must be produced, then there must be some way to detect the presence and strength of the implementation independent variable in practice. Otherwise, the risk of Type III errors increases; that is, attempting to study the impact of a variable that does not exist in practice (Dobson & Cook, 1980; Harvey, McCormack, Kitson, Lynch, & Titchen, 2018). In implementation studies, the fidelity with which implementation supports are provided is an important factor. Pinnock et al. (2017) have proposed criteria for publishing research on implementation that include specific descriptions of intervention methods and outcomes, and specific descriptions of implementation methods and outcomes. These criteria hold promise for advancing the field.

The lack of repeated measures is a problem. Implementation is widely acknowledged as a complex process that may take several years to accomplish desired outcomes. Yet, few research studies examine implementation variables over time and use data to bring the process to light. Panzano and colleagues (Massatti, Sweeney, Panzano, & Roth, 2008; Panzano & Billings, 1994; Panzano & Roth, 2006; Panzano et al., 2004) assessed 91 agencies every 9 months for several years and identified patterns of adoption, use, deadoption, and readoption of evidence-based

programs. McIntosh, Mercer, Nese, and Ghemraoui (2016) had repeated measures of intervention fidelity across 5 years for over 5,000 schools and found distinct patterns for achieving, sustaining, and losing fidelity. Independent studies have documented the progress of scaling for over a decade in Scandinavian countries using repeated measures of fidelity (Sigmarsson et al., 2018; Tommeraas & Ogden, 2016). The studies document the consistent fidelity resulting from the use of consistent implementation supports (Ogden et al., 2012). In other studies repeated measures of implementation capacity development have been conducted every six months over 18 months (Chaple & Sacks, 2016; McGovern, Matzkin, & Giard, 2007) and up to 5 years (Fixsen et al., 2018; Ryan Jackson et al., 2018). These studies show the impact of implementation capacity on attaining and sustaining criterion performance in organizations and systems. Repeated measures are used in global health environments to track the use of nationally sanctioned innovations and to document the improvements in innovations as they are used in practice (Adondiwo et al., 2013; Thomassen, Mann, Mbwana, & Brattebo, 2015).

These longitudinal studies are not typical, but they should be. To do something once or even a few times is interesting. To be able to do something repeatedly with useful outcomes and documented improvements over decades will produce socially significant benefits for whole populations. Data on the processes of implementation over time are badly needed.

Assessing Drivers Best Practices provides a measure that is practical, repeatable, and useful for action planning as attempts are made to use innovations in practice.

Validation

Ogden et al. (2012) at the Atferdssenteret - Norsk senter for studier av problematferd og innovativ praksis - Universitet i Oslo (The Norwegian Center for Child Behavioral Development, University of Oslo) validated a previous version of the Drivers Best Practices items. Ogden et al. collected data to establish the reliability and validity of the Implementation Driver items. The researchers interviewed 218 practitioners, supervisors, and managers associated with two well-established evidence-based programs in Norway. The Cronbach alphas obtained in their study were: selection, 0.89; training, 0.91; coaching, 0.79; fidelity, 0.89; decision support data systems, 0.84; facilitative administration, 0.82; systems intervention, 0.82; and leadership, 0.88.

Metz et al. (2014) assessed Active Implementation drivers in a county social service system before, during, and after implementation capacity was developed. Low scores on the Drivers assessment at baseline were associated with low levels of fidelity use of the innovation. As implementation capacity was developed, the scores on the drivers assessment increased (nearly doubled). Higher scores on the drivers assessment were related to higher fidelity use of the innovation.

For more information on the Implementation Drivers and other Active Implementation Frameworks go to www.activeimplementation.org.

Implementation Drivers

There are 3 categories of Active Implementation Drivers:

1. **Competency Drivers** – are components to develop, improve and sustain one’s ability to use an intervention as intended in order to benefit children, families and communities.
2. **Organization Drivers** – are components to create and sustain hospitable organizational and system environments for full and effective use of intended services.
3. **Leadership Drivers** – are components to provide the right leadership strategies for the types of leadership challenges. These leadership challenges often emerge as part of the change management process needed to make decisions, provide guidance, and support organization functioning.

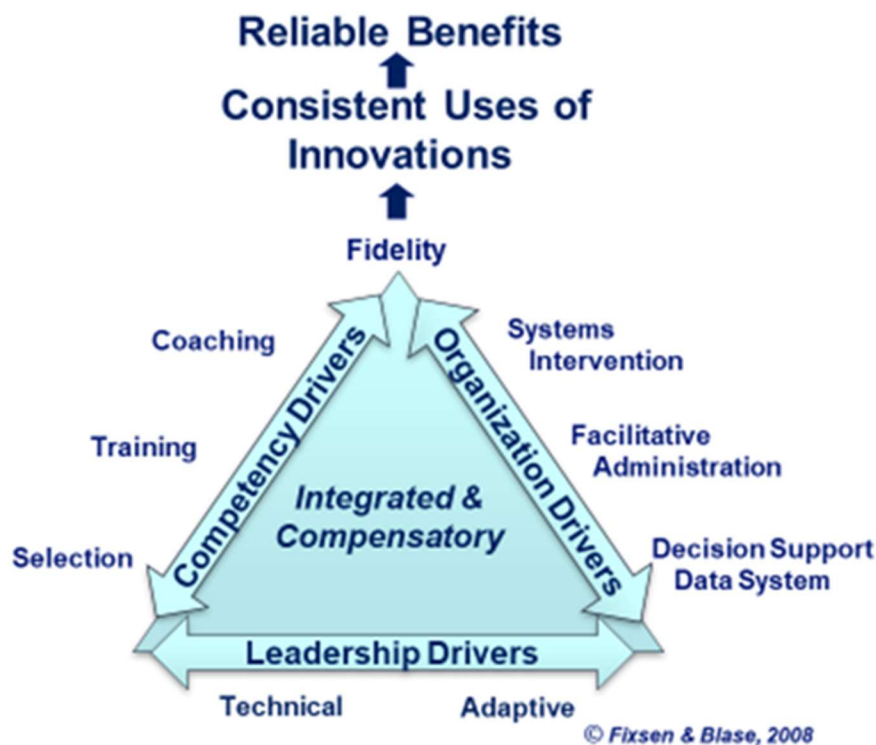


Figure 1. Active Implementation Drivers. Used with permission of the authors.

Implementation Drivers Assessment: Administration Checklist

Protocol Steps

Step Completed?

Y=Yes; N=No

N/A= not
applicable

Protocol Steps	Step Completed?		
	Y	N	N/A
1. Skilled Facilitator: An individual with expertise in Active Implementation Frameworks and skill in administering the assessment is identified to facilitate	Y	N	N/A
2. Respondents Invited- Administrator and/or Facilitator invites knowledgeable participants, including Implementation Team members who have a role in developing, monitoring and improving implementation drivers. Practitioners should not participate in assessment	Y	N	N/A
3. Intervention identified: A well operationalized intervention (program, practice or innovation) is identified for the assessment.	Y	N	N/A
4. Materials Prepared in Advance- Administrator and/or Facilitator ensures that a copy (paper or electronic) of a blank Drivers Assessment is available for each participant and ensures that a room is set up with a laptop, projector, internet connection, and conference phone (video if possible) for any participants joining remotely	Y	N	N/A
5. Overview- Administrator provides a review of the Drivers Assessment, purpose, and instructions for voting	Y	N	N/A
6. Implementation Stage: Facilitator determines stage of implementation for the intervention in the organization in order to frame the assessment	Y	N	N/A
7. Documentation: Facilitator documents date of the assessment, names and roles of participants, and the intervention being assessed	Y	N	N/A
8. Administration- Each section introduction and each question is read aloud. The Facilitator reads the description of the Driver and responds to any questions from participants about the Driver's definition. The Facilitator then reads each question and then says, "Ready, set, vote." All respondents vote simultaneously and publicly to neutralize influence during the voting process (e.g. hold up 2 fingers to vote "fully in place," 1 finger to vote "partially in place," or a closed hand to vote "not in place" or holds up a card with the number 0, 1, or 2)	Y	N	N/A
9. Administration- Facilitator tallies the votes and notes agreement or discrepancies for each question	Y	N	N/A
10. Consensus- If complete agreement is reached, move on to the next question. If not, the Facilitator invites an open, brief discussion of the reasons for differences in scoring. The group is asked to vote again. The vote can occur multiple times at the discretion of the Facilitator. The goal is to reach consensus. Consensus means that the minority voters can live with and support the majority decision on an item. If the minority persists in not being able to live with the majority vote, the Facilitator encourages further discussion at a later time and the majority vote is recorded so that the results can be scored and graphed	Y	N	N/A
11. Recording- Facilitator documents each scoring decision on Qualtrics or on the scoring form used to record all votes	Y	N	N/A
12. Note taking- For items where there is further clarity or information needed, the Facilitator notes the question in the "Notes" section	Y	N	N/A
13. Data summary- After the last question has been asked and answered, the Administrator enters the scores in a spreadsheet and generates the reports and displays graphs of total scores and subscale scores	Y	N	N/A

14. Review- While viewing the graphs, the Administrator leads the team in a discussion of the results to identify strengths and opportunities. For a repeated administration, the Administrator highlights all of the subscales that moved in a positive direction and celebrates progress toward 80% or better subscale scores	Y	N	N/A
15. Intervention Status Review- Facilitator initiates a discussion of updates on achievements, progress, and major milestones or barriers that have occurred since previous administration	Y	N	N/A
16. Action Planning- Facilitator asks respondents to discuss three Drivers they would like to set as agenda items for their regular meetings	Y	N	N/A
17. Planning- If there is not sufficient time for #15 and #16, the Facilitator ensures that a date and time are set for the Intervention Status Review and Action Planning	Y	N	N/A
18. Conclusion- Administrator thanks the team for their participation, openness, and sharing in the discussion	Y	N	N/A

Scoring Form

Today' Date:

Facilitator (s):

Individuals Participating in the Assessment:

Directions: Individuals complete the Drivers Best Practices Assessment together by using the *Scoring Guide* to discuss each item and come to consensus on the final score for each item. If the team is unable to arrive at consensus, additional data sources for each item are documented in the *Scoring Guide* and should be used to help achieve consensus on future administrations. Scores are recorded on this *Scoring Form* below.

Item	Score		
Selection			
1. There is someone accountable for the recruitment and selection of staff who will carry out the program or practice	0	1	2
2. Job descriptions are in place for staff positions that will carry out the program or practice	0	1	2
3. Interviewers understand the skills and abilities needed for the staff position	0	1	2
4. Interview protocols are in place to assess candidates' competencies for the staff positions that will carry out the program or practice	0	1	2
5. Interview processes are regularly reviewed	0	1	2
Training			
6. There is someone accountable for the training of staff who will carry out the program or practice	0	1	2
7. Agency staff provides or secures skill-based training for staff	0	1	2
8. Agency staff uses training data to target competency development and improve training	0	1	2

Coaching			
9. There is someone accountable for the coaching of staff who will carry out the program or practice	0	1	2
10. Coaching is provided to improve the competency of staff who carry out the program or practice	0	1	2
11. Agency staff uses a coaching service delivery plan	0	1	2
12. Agency staff regularly assess coaching effectiveness	0	1	2
Fidelity			
13. There is someone accountable for the fidelity assessments of staff who will carry out the program or practice	0	1	2
14. The agency supports the use of a consistent fidelity measure for the program or practice	0	1	2
15. Agency staff follow a protocol for fidelity assessments	0	1	2
16. Agency staff use fidelity assessment data to improve program and practice outcomes and implementation supports	0	1	2
Decision-Support Data System			
17. There is someone accountable for the decision-support data system	0	1	2
18. Data are useful and usable	0	1	2
19. Agency staff have access to relevant data for making decisions for program improvement	0	1	2
20. Agency staff have a process for using data for decision-making	0	1	2
Facilitative Administration			
21. Leaders and managers actively facilitate the use of implementation supports for programs and practices	0	1	2
22. Leaders and managers use an effective meeting process	0	1	2
23. Leaders and managers actively seek feedback from staff and recipients	0	1	2
24. Leaders and managers regularly use feedback from staff, stakeholders, and beneficiaries	0	1	2

Systems Intervention			
25. Leaders and managers engage with the larger service delivery and funding systems to create improved regulatory and funding environment	0	1	2
26. Leaders and managers engage key stakeholders and partners in supporting the program or practice	0	1	2
Leadership			
27. Agency leaders assesses contextual and “big picture” issues related to implementation of program or practice	0	1	2
28. Agency leaders identify adaptive challenges related to implementation (i.e., challenges that do not have a clear or agreed upon definition or a readily identifiable solution)	0	1	2
29. Agency leaders focus attention on implementation challenges	0	1	2
30. Agency leaders involve other agency staff and/or stakeholders in solving challenges	0	1	2
31. Agency leaders ensure that difficult issues and challenges are raised and considered by staff and stakeholders	0	1	2

Scoring Rubric

Selection				
<p>Staff selection is the beginning point for building a competent workforce that has the knowledge, skills, and abilities to carry out evidence-based practices with benefits to consumers. Beyond academic qualifications or experience factors, what essential skills are required? Certain practitioner characteristics critical to the use of an evidence-based program are difficult to teach in training sessions so must be part of the selection criteria (e.g. basic professional skills, basic social skills, common sense, empathy, good judgment, knowledge of the field, personal ethics, sense of social justice, willingness to intervene, willingness to learn).</p> <p>Implementation of effective programs on a useful scale requires:</p> <ul style="list-style-type: none"> • Specification of required skills and abilities within the pool of candidates, • Methods for recruiting likely candidates that possess these skills and abilities, • Protocols for interviewing candidates, and • Criteria for selecting practitioners with those skills and abilities. <p>Even when implementation is occurring in an organization with a well-established staff group, the new way of work can be described and volunteers can be recruited and interviewed to select the first practitioners to make use of an evidence-based intervention or other innovation. The pre-post test scores for training provide an immediate source of selection outcome data, and performance assessment scores provide a more important but longer-term source of feedback on the usefulness of the selection process. Organizations make use of these data to continue to improve recruitment and selection methods.</p>				
Drivers Item	2 points	1 point	0 points	Data Source
1. There is someone accountable for the recruitment and selection of	A specific person is responsible for coordinating the quality and timeliness of recruitment and selection	A specific person is responsible for coordinating the quality and timeliness of recruitment and	There is not a specific person responsible for coordinating the quality and timeliness of recruitment and selection	Job description of person accountable for recruitment and selection

staff who will carry out the program or practice	<p>processes for staff supporting the program or practice</p> <p>-AND-</p> <p>This person is able to execute the responsibilities related to his/her role in the selection process</p>	selection processes for staff supporting the program	processes for staff supporting the program or practice	
2. Job descriptions are in place for staff positions that will carry out the program or practice	<p>Job descriptions are clear about expectations for each position</p> <p>-AND-</p> <p>Job descriptions explicitly align with the practices and competencies required for the program to be used competently</p>	Job descriptions are clear about expectations for each position	Job descriptions are not clear about expectations for each position	Job descriptions
3. Interviewers understand the skills and abilities needed for the staff position	<p>Interviewers have knowledge, skills, and abilities related to the staff position</p> <p>-AND-</p> <p>Interviewers accurately assess applicant knowledge, skills, and abilities</p>	Interviewers have knowledge, skills, and abilities related to the staff position	Interviewers have little or no knowledge, skills, and abilities related to the staff position	

4. Interview protocols are in place to assess candidates' competencies for the staff positions that will carry out the program or practice	<p>Job interview protocol includes all of the following:</p> <ul style="list-style-type: none"> • an assessment of core skills needed for position • specific procedures (e.g., vignette, role play) for assessing candidate capacity to perform key skills • specific procedures for assessing capacity to use feedback provided during the interview to improve • specific procedures to assess capacity to receive feedback professionally • Review of adherence to the interview protocol is documented • Ratings of applicant responses are recorded 	<p>Job interview protocol includes all of the following:</p> <ul style="list-style-type: none"> • an assessment of core skills needed for position • review of adherence to the interview protocol is documented • ratings of applicant responses are recorded 	Generic job interview protocol (e.g., similar protocol for any position) exists	Interview protocol (including procedures used during the selection process); data showing the results of core skills assessments
5. Interview processes are regularly reviewed	Interview processes are annually reviewed and revised as needed to improve the selection process	Interview processes are annually reviewed and revised as needed to improve the selection process -AND-	Interview processes are not annually reviewed and revised as needed to improve the selection process	Selection and Interview process documentation

	<p>-AND-</p> <p>The annual review examines at least three of the following:</p> <ul style="list-style-type: none"> • Interview results (e.g. protocol adherence; applicant responses) • Pre-post training data for successful applicants • Turnover data • Fidelity data • Exit interview results 	<p>The annual review examines at least one of the following:</p> <ul style="list-style-type: none"> • Interview results (e.g. protocol adherence; applicant responses) • Pre-post training data for successful applicants • Turnover data • Fidelity data • Exit interview results 		<p>Data on interview outcomes</p>
<p>Training</p> <p>Staff training is important because evidence-based programs and other innovations represent new ways of providing treatment and support. Innovation-based training helps practitioners (and others) in an organization learn when, where, how, and with whom to use (and not to use) new approaches and new skills. Staff training is an efficient way to:</p> <ul style="list-style-type: none"> • Provide knowledge related to the history, theory, philosophy, and values of the program, • Introduce the components and rationales of key practices, and • Provide opportunities to practice new skills to criterion and receive feedback in a safe and supportive training environment. <p>Implementation best practices and science indicate that good training includes ample opportunities for demonstrations of evidence-based practice-related skills, behavior rehearsal to criterion, and pre-post tests of knowledge and skill. The results of post-tests of training are “fed-forward” to the coach for each newly trained practitioner. In this way the coach will know areas of strength and areas that need improvement on which to focus early in the coaching relationship. Organizations make use of these data to continue to improve training methods.</p>				

Drivers Item	2 points	1 point	0 points	Data Source
6. There is someone accountable for the training of staff who will carry out the program or practice	<p>A specific person is responsible for coordinating the quality and timeliness of training processes for staff supporting the program or practice</p> <p>- AND -</p> <p>This person is able to execute the responsibilities related to his/her role in the training process</p>	A specific person is responsible for coordinating the quality and timeliness of training processes for staff supporting the program	There is not a specific person responsible for coordinating the quality and timeliness of training processes for staff supporting the program or practice	Job description of person accountable for training

Drivers Item	2 points	1 point	0 points	Data Source
7. Agency staff provides or secures skill-based training for staff	<p>Training is required and provided before staff begin to use the program or practice</p> <p>-AND-</p> <p>Highly-competent individuals provide training (e.g., trainers who have deep content knowledge and effective presentation delivery skills)</p> <p>-AND-</p> <p>Training is skill-based and includes opportunities for practice/behavioral rehearsals for essential skills and includes both positive and constructive feedback to participants</p>	<p>Training is required and provided before staff begin to use the program or practice</p> <p>-AND-</p> <p>Highly-competent individuals provide training (e.g., trainers who have deep content knowledge and effective presentation delivery skills)</p>	<p>Training is not required and/or is not provided before staff begin to use the new program or practice</p> <p>-OR-</p> <p>Highly-competent individuals do not provide training (e.g., trainers who have deep content knowledge and effective presentation delivery skills)</p>	<p>Professional learning schedule</p> <p>Training outlines or agendas</p> <p>Training evaluations</p> <p>Presenter qualifications</p> <p>Agendas for training presenters</p>
8. Agency staff uses training data to target competency	<p>Training assessment data (e.g., pre-post assessments of individual trainee knowledge and skill) are collected and provided to supervisors and coaches in a</p>	<p>Training assessment data (e.g., pre-post assessments of individual trainee knowledge and skill) are collected and are not provided to supervisors</p>	<p>Training assessment data are not collected or used</p>	<p>Training outcome data</p> <p>Evidence that data are used for improvements</p>

Drivers Item	2 points	1 point	0 points	Data Source
development and improve training	<p>timely manner to target trainee competency development</p> <p>-AND-</p> <p>Training assessment data are used by individuals accountable for recruitment and selection to improve recruitment and selection activities</p> <p>-AND-</p> <p>Training assessment data are reviewed and used by training staff to improve future training events, materials, and processes.</p>	<p>and coaches in a timely manner to target trainee competency</p> <p>-OR-</p> <p>Training assessment data are collected but not used by individuals accountable for recruitment and selection to improve recruitment and selection activities</p> <p>-OR-</p> <p>Training assessment data are not reviewed and used by training staff to improve future training events, materials, and processes.</p>		

Coaching

Staff Coaching is essential because most skills needed by successful practitioners can be assessed during selection and introduced in training but really are learned on the job with the help of a coach. An effective coach provides “craft” information along with advice, encouragement, and opportunities to practice and use skills specific to the innovation (e.g. engagement, treatment, clinical judgment). The full and effective use of human service innovations requires behavior change at the practitioner, supervisory, and administrative support levels. Training and coaching are the principal implementation methods in which behavior change is brought about for carefully selected staff in the beginning stages of implementation and throughout the life of evidence-based practices and programs and other innovations. Organizations make use of data to continue to improve coaching methods.

Drivers Item	2 points	1 point	0 points	Data Source
9. There is someone accountable for the coaching of staff who will carry out the program or practice	<p>A specific person is responsible for coordinating the quality and timeliness of coaching processes for staff supporting the program or practice</p> <p>AND -</p> <p>This person is able to execute the responsibilities related to his/her role in the coaching process</p>	A specific person is responsible for coordinating the quality and timeliness of coaching processes for staff supporting the program	There is not a specific person responsible for coordinating the quality and timeliness of coaching processes for staff supporting the program or practice	Job description of person accountable for coaching

10. Coaching is provided to improve the competency of staff who carry out the program or practice	<p>The staff who carry out the program or practice receive coaching at least monthly</p> <p>-AND-</p> <p>Coaches' feedback to staff is based on direct observation (e.g. face to face, audio or video recording) and at least one other data source such as:</p> <ul style="list-style-type: none"> • Group or individual consultation • Product or document review • Interviews with key stakeholders 	<p>The staff who carry out the program or practice receive coaching at least monthly</p> <p>-AND-</p> <p>Coaches' feedback to staff is based on one of the following:</p> <ul style="list-style-type: none"> • Group or individual consultation • Product or document review • Interviews with key stakeholders 	<p>The staff who carry out the program or practice do not receive coaching at least monthly</p>	<p>Coaching schedules</p> <p>Samples of coaching feedback data</p>
---	---	--	--	--

11. Agency staff uses a coaching service delivery plan	<p>A written plan outlines the coaching supports provided to staff who carry out the program or practice including:</p> <ul style="list-style-type: none"> • requirements for coaches to be experts in delivering the program or practice • frequency of coaching • coaching methods <p>-AND-</p> <p>Adherence to the plan is reviewed at least three times a year</p>	<p>A written plan outlines the coaching supports provided to staff who carry out the program or practice including:</p> <ul style="list-style-type: none"> • requirements for coaches to be experts in delivering the program or practice • frequency of coaching • coaching methods 	A written coaching service delivery plan does not exist	<p>Sample of coaching service delivery plans</p> <p>Content and concept lists used by coaches</p>
12. Agency staff regularly assess coaching effectiveness	<p>Agency staff assess effectiveness of coaching quarterly through the use of two or more of the following data sources:</p> <ul style="list-style-type: none"> • Practitioner fidelity • Coach/supervisor fidelity • Satisfaction surveys from those being coached • Observations of coaches conducting coaching activities 	<p>The effectiveness of coaching to improve the competency of staff who carry out the program or practice is assessed at least annually through the use of at least one of the following data sources:</p> <ul style="list-style-type: none"> • Practitioner fidelity • Coach/supervisor fidelity • Satisfaction surveys from those being coached 	Coaching effectiveness is not assessed	<p>Coaching effectiveness data such as staff satisfaction surveys</p> <p>Evidence the data are used to inform improvements in coaching methods</p>

	<p>-AND-</p> <p>Coaching effectiveness data are used to inform improvements in recruitment and selection, training, and other implementation supports</p>	<ul style="list-style-type: none"> • Observations of coaches conducting coaching activities 		
--	---	--	--	--

Fidelity

Fidelity is designed to assess the use and outcomes of the skills that are reflected in the selection criteria, taught in training, and reinforced and expanded in coaching processes. Assessments of practitioner performance (sometimes called measures of fidelity) also provide feedback useful to key implementation staff (interviewers, trainers, coaches, program managers) regarding the progress of implementation efforts and the usefulness of selection, training, and coaching methods. For example, organizations consistently monitor current performance assessments in search of common strengths and areas that need improvement to make adjustments in how selection, training, and coaching are conducted to help strengthen skills related to that area. The organization remains accountable for assuring that current and future practitioners will achieve high levels of effective performance when working with children, families, and others. Organizations make use of data to continue to improve Performance Assessment methods.

Drivers Item	2 points	1 point	0 points	Data Source
13. There is someone accountable for the fidelity assessments of staff who will carry out the program or practice	<p>A specific person is responsible for coordinating the quality and timeliness of fidelity assessments processes for staff supporting the program or practice</p> <p>- AND -</p> <p>This person is able to execute the responsibilities related to his/her role in performance assessment process</p>	A specific person is responsible for coordinating the quality and timeliness of fidelity assessments processes for staff supporting the program	There is not a specific person responsible for coordinating the quality and timeliness of fidelity assessments processes for staff supporting the program or practice	Job description of person accountable for fidelity assessments
14. The agency supports the use of a consistent fidelity measure	<p>The fidelity measures:</p> <ul style="list-style-type: none"> Content - Measures whether the practitioner is following the 	<p>The fidelity measures:</p> <ul style="list-style-type: none"> Content - Measures whether the practitioner is following the guidelines of 	The agency does not support the use of a consistent fidelity measure	

for the program or practice	<p>guidelines of the program (e.g., compliance to model standards such as # of home visits; caseload, curriculum)</p> <ul style="list-style-type: none"> • Competence - Measures the extent to which the practitioner demonstrates skill in the delivery of services (e.g., skills, interactions with families) • Context - Measures the extent to which the prerequisites and conditions for the program to operate are met • Is demonstrated to be correlated with outcomes 	<p>the program (e.g., compliance to model standards such as # of home visits; caseload, curriculum)</p> <ul style="list-style-type: none"> • Context - Measures the extent to which the prerequisites and conditions for the program to operate are met 		
-----------------------------	--	--	--	--

<p>15. Agency staff follow a protocol for fidelity assessments</p>	<p>Agency staff follow a written protocol that includes all of the following:</p> <ul style="list-style-type: none"> • Staff are oriented to how fidelity is assessed • Fidelity assessments use multiple sources of information (e.g., practitioners, supervisors, consumers) • Fidelity assessment data are used to improve supports for practitioners • Fidelity assessment data are not used for annual staff evaluations or salary recommendations. 	<p>Agency staff follow a written protocol that includes the following:</p> <ul style="list-style-type: none"> • Fidelity assessment data are used to improve supports for practitioners • Fidelity assessment data are not used for annual staff evaluations or salary recommendations. 	<p>Agency staff do not follow a written protocol for fidelity assessments</p>	<p>Performance assessment (fidelity) protocol</p> <p>Documentation of staff performance (fidelity) assessments</p> <p>Policy and procedures related to annual reviews and/or salary recommendations.</p>
--	---	---	---	--

16. Agency staff use fidelity assessment data to improve program and practice outcomes and implementation supports	<p>Agency staff review fidelity assessment data at least four times per year to create action plans to:</p> <ul style="list-style-type: none"> Assess and improve the effectiveness of selection, training and coaching processes for practitioners 	Agency staff review fidelity assessment data at least annually	Agency staff do not review fidelity assessment data	<p>Documentation of action plans for improvement of selection, training, or coaching processes.</p> <p>Documentation of feedback to coaches and/or trainers</p> <p>Documentation of feedback provided to practitioners</p>
--	--	--	--	--

Decision-Support Data System

Decision Support Data Systems are sources of information used to help staff members make good decisions internal to an organization. Organizations make use of a variety of measures to:

- assess key aspects of the overall performance of the organization,
- provide data to support decision making, and
- assure continuing implementation of the evidence-based intervention and benefits to children and families over time.

At a minimum, all modern organizations have a financial data collection and reporting system that regularly is monitored internally and externally (e.g. through employment of professional financial managers and clerks in the organization, careful attention from the governing board, and annual audits by external experts). Many organizations also have data collection and reporting systems for their treatment and management processes and outcomes.

Decision support data systems are an important part of continuous quality improvement for interventions, implementation supports, and organization functioning (e.g. used as the “study” part of the never-ending plan-do-study-act cycle). Organizations establish and evolve their data systems so information is immediately accessible and useful to practitioners, trainers, coaches, and managers for short-term and long-term planning and improvement at clinical and organizational levels. If the feedback loops (staff performance evaluations and decision support data systems) indicate needed changes, then the organization adjusts aspects of the system to improve effectiveness and efficiency.

Drivers Item	2 points	1 point	0 points	Data Source
17. There is someone accountable for the decision-support data system	A specific person is responsible for coordinating the content, quality, and timeliness of the data system to support decisions regarding the use of a program or practice and implementation supports available in the organization	A specific person is responsible for coordinating the content, quality, and timeliness of a data system to support decisions regarding the use of a program or practice and implementation supports available in the organization	There is no person responsible for coordinating the content, quality, and timeliness of a data system to support decisions regarding the use of a program or practice and implementation supports available in the organization	Job description of person accountable for decision-support data system

	-AND- This person is able to execute the responsibilities related to his/her role in overseeing the decision support data system			
18. Data are useful and usable	<p>Data and information are collected systematically and prepared for use so they are:</p> <ul style="list-style-type: none"> • Reliable (standardized protocols, trained data collectors) • Valid (useful indicators of the concepts or practices being assessed) • Reported in a timely manner (when/to whom the data are most useful) • Built into regular practice routines 	<p>Data and information are collected systematically and prepared for use so they are:</p> <ul style="list-style-type: none"> • Reliable (standardized protocols, trained data collectors) • Valid (useful indicators of the concepts or practices being assessed) 	Data and information are not collected systematically and prepared for use	
19. Agency staff have access to relevant data for making decisions for	Agency staff have access to all of the following relevant data to analyze for program improvement:	Agency staff have access to the following relevant data to analyze for program improvement:	Agency staff do not have access to relevant data	

program improvement	<ul style="list-style-type: none"> • Fidelity data • Outcome data • Programmatic/ financial data 	<ul style="list-style-type: none"> • Programmatic/ financial data 		
20. Agency staff have a process for using data for decision-making	<p>Agency staff have a process for using data for decision-making that includes all of the following:</p> <ul style="list-style-type: none"> • The data are analyzed and summarized at least quarterly • Data summaries are communicated clearly in written reports to agency staff • Action plans are developed to improve implementation supports and outcomes • Data summaries and action plans are shared with key stakeholders (e.g., community, family members) 	<p>Agency staff have a process for using data for decision-making that includes two of the following:</p> <ul style="list-style-type: none"> • The data are analyzed and summarized at least quarterly • Data summaries are communicated clearly in written reports to agency staff • Action plans are developed to improve implementation supports and outcomes • Data summaries and action plans are shared with key stakeholders (e.g., community, family members) 	Agency staff do not have a process for using data for decision-making	<p>Documentation of processes used by agency to review data and make decisions</p> <p>Sample data reports</p> <p>Sample action plans</p>

Facilitative Administration

Facilitative administration provides leadership and makes use of a range of data inputs to inform decision-making, support the overall intervention and implementation processes, and keep staff organized and focused on the desired intervention outcomes. In an organization with facilitative administrators, careful attention is given to policies, procedures, structures, culture, and climate to assure alignment of these aspects of an organization with the needs of practitioners. Practitioners' interactions with children and families are the keys to any successful intervention. Facilitative administrators and others make full use of available resources to assure that practitioners have the time, skills, and supports they need to perform at a high level of effectiveness with every child and family even as practitioners, coaches, managers, and others come and go year after year. With implementation supports from training, coaching, and technical assistance, administrators continue to use available data and experience to find more and better ways to support practitioners.

Drivers Item	2 points	1 point	0 points	Data Source
21. Leaders and managers actively facilitate the use of implementation supports for programs and practices	<p>Leaders and managers accommodate and support the use of implementation best practices by:</p> <ul style="list-style-type: none"> • Making changes in organization roles, functions, and structures • Making changes in organization policies and procedures • Making use of data to inform decisions and action planning 	<p>Leaders and managers accommodate and support the use of implementation best practices by doing at least one but not all of the following:</p> <ul style="list-style-type: none"> • Making changes in organization roles, functions, and structures • Making changes in organization policies and procedures • Making use of data to inform decisions and action planning 	<p>Leaders and managers do not accommodate and support the use of implementation best practices</p>	<p>Management team meeting minutes</p> <p>Action plans</p> <p>Reports from staff who carry out programs or practices</p> <p>Reports from staff who carry out improvement initiatives focused on implementation best practices.</p>

22. Leaders and managers use an effective meeting process	<p>Leaders and managers use all of the following effective meeting processes:</p> <ul style="list-style-type: none"> • meets in person at least monthly or more frequently depending on amount of work • meeting roles and responsibilities are consistently assigned and used (e.g., facilitator, recorder, timekeeper, norms monitor) • process is in place for absent staff to receive updates shortly following the meeting • completes assignments and documents progress outlined on an action plan within designated timelines 	<p>Leaders and managers use at least two of the following effective meeting processes:</p> <ul style="list-style-type: none"> • meets in person at least monthly or more frequently depending on amount of work • meeting roles and responsibilities are consistently assigned and used (e.g., facilitator, recorder, timekeeper, norms monitor) • Process is in place for absent staff to receive updates shortly following the meeting • completes assignments and documents progress outlined on an action plan within designated timelines 	<p>Leaders and managers do not use effective meeting processes</p>	<p>Meeting schedule</p> <p>Meeting Agendas, Minutes, and Attendance</p> <p>Action Plan</p>
---	---	---	---	--

23. Leaders and managers actively seek feedback from staff and recipients	<p>Leaders and managers actively seek feedback from all of the following groups:</p> <ul style="list-style-type: none"> • Staff who are using the program or practices • staff who are providing implementation support • stakeholders (e.g. parents, teachers, caseworkers) • intended beneficiaries (e.g. children, families, students, community members) 	<p>Leaders and managers actively seek feedback including at least one of the following groups:</p> <ul style="list-style-type: none"> • Staff who are using the program or practices • staff who are providing implementation support • stakeholders (e.g. parents, teachers, caseworkers) • intended beneficiaries (e.g. children, families, students, community members) 	<p>Leaders and managers do not actively seek feedback from staff, stakeholders, and beneficiaries</p>	<p>Written plan for feedback loops to reduce administrative barriers</p> <p>Data reports</p> <p>Action plans</p>
24. Leaders and managers regularly use feedback from staff, stakeholders, and beneficiaries	<p>Leaders and managers use the data collected from staff and stakeholders to reduce internal administrative barriers in the agency to using the program or practice fully and effectively</p> <p>-AND-</p> <p>Leaders persist in using the data collected from staff and stakeholders until each barrier is reduced or eliminated</p>	<p>Leaders and managers use the data collected from staff and stakeholders to reduce internal administrative barriers in the agency to using the program or practice fully and effectively</p>	<p>Leaders and managers do not have or use data collected from staff and stakeholders to reduce internal administrative barriers in the agency to using the program or practice fully and effectively</p>	

Systems Intervention

Systems interventions are strategies for leaders and staff within an organization to work with external systems to ensure the availability of the financial, organizational, and human resources required to support the work of the practitioners. Alignment of these external systems to specifically support the work of practitioners is an important aspect of systems interventions. System interventions take on issues that impact the ability to provide effective services within organizations. System interventions are designed to help create a generally supportive context in which effective services can be provided, maintained, and improved over the years.

Drivers Item	2 points	1 point	0 points	Data Source
25. Leaders and managers engage with the larger service delivery and funding systems to create improved regulatory and funding environments	<p>Leaders and managers in the organization attend regular meetings with funders, system managers and leaders, and other provider organizations</p> <p>-AND-</p> <p>Information is shared regarding systemic facilitators and barriers to quality of:</p> <ul style="list-style-type: none"> • programs or practices • implementation supports <p>-AND-</p> <p>Systemic changes are proposed to the larger system to create a more</p>	<p>Leaders and managers in the organization attend regular meetings with funders, system managers and leaders, and other provider organizations</p> <p>-AND-</p> <p>Information is shared regarding systemic facilitators and barriers to quality of:</p> <ul style="list-style-type: none"> • programs or practices • implementation supports 	<p>Leaders and managers in the organization do not attend regular meetings with funders, system managers and leaders, and other provider organizations to discuss and resolve systemic issues</p>	<p>Meeting agendas</p> <p>Membership lists</p> <p>Data reports</p> <p>Action plans</p> <p>Guidance document outlining practice-policy communication</p>

	supportive environment for programs and practices			
26. Leaders and managers engage key stakeholders and partners in supporting the program or practice	Leaders and managers have a plan in place to communicate with key stakeholders quarterly	Leaders and managers have a plan in place to communicate with key stakeholders at least twice a year	Leaders and managers do not have a plan in place to communicate with stakeholders	<p>Communication plan</p> <p>Stakeholder surveys</p> <p>Implementation team membership</p> <p>Team meeting minutes</p>

Leadership

The critical role of leadership at organization and system levels is widely acknowledged. Recent studies have found that “leadership” is not a person but different people engaging in different kinds of leadership behavior as needed to establish effective programs and sustain them as circumstances change over time. For example, leadership needs change as implementation progresses: “adaptive leadership” styles are needed to “champion change” in the beginning; more technical leadership styles are needed to manage the continuing implementation supports (e.g. selection interviews, performance assessments, system interventions) for effective programs over the long run. In the midst of continual social and economic changes that impact human services, the need for adaptive leadership never goes away. Sometimes the same people provide both kinds of leadership. In other cases, leadership responsibilities are more widely distributed within organizations.

Drivers Item	2 points	1 point	0 points	Data Source
27. Agency leaders assesses contextual and “big picture” issues related to implementation of program or practice	<p>Agency leaders regularly assess contextual issues (e.g., political, demographic, funding, values, and philosophical issues)</p> <p>-AND-</p> <p>Agency leadership, at least twice a year discusses with staff and other key stakeholders how the program or practice aligns with organization’s vision, values, and philosophy</p>	Agency leaders regularly assess contextual issues (e.g., political, demographic, funding, values, and philosophical issues)	Agency leaders do not regularly assess contextual issues (e.g., political, demographic, funding, values, and philosophical issues)	<p>Leadership Team meeting notes</p> <p>Inter- and intra-agency communication materials (e.g., memos, papers, briefs)</p> <p>Leadership team presentations (e.g. PowerPoints)</p>
28. Agency leaders identify adaptive challenges related to implementation	Agency leaders verbally label and describe conflicting values and	Agency leaders verbally label and describe conflicting values and different perspectives on problems and solutions	Agency leaders do not verbally label and describe conflicting values and different	Leadership Team meeting notes

(i.e., challenges that do not have a clear or agreed upon definition or a readily identifiable solution)	<p>different perspectives on problems and solutions</p> <p>-AND-</p> <p>Agency leaders ask people inside and outside the organization:</p> <ul style="list-style-type: none"> • for their concerns and ideas related to challenges and include these ideas in future meetings • for their feedback on what the leaders are doing or not doing that contributes to the challenges 		perspectives on problems and solutions	<p>Surveys and survey reports from staff and/or stakeholders</p> <p>Written documents (e.g. memos, briefs) from agency leaders that describe adaptive challenges</p>
29. Agency leaders focus attention on implementation challenges	<p>Agency leaders ask team members to refocus their efforts on resolving implementation challenges</p> <p>AND</p> <p>Agency leaders reinforce or support staff in maintaining focus on problem solving issues</p>	Agency leaders ask team members to refocus their efforts on resolving implementation challenges	Agency leaders do not ask team members to refocus their efforts on resolving implementation challenges	<p>Meeting notes or minutes</p> <p>Written documents (e.g. memos, briefs, revisions to Terms of Reference)</p>

				Staff and stakeholder surveys rating how 'on mission' or 'on task' the team has been
30. Agency leaders involve other agency staff and/or stakeholders in solving challenges	<p>Agency leaders support staff in their implementation work through all of the following strategies:</p> <ul style="list-style-type: none"> • Specifying roles and responsibilities in writing • Ensuring staff have the time and resources for problem-solving • Stating clearly the level of authority for decision-making • Recruiting system stakeholders for meaningful input and participation 	<p>Agency leaders support staff in their implementation work through at least two of the following strategies:</p> <ul style="list-style-type: none"> • Specifying roles and responsibilities in writing • Ensuring staff have the time and resources for problem-solving • Stating clearly the level of authority for decision-making • Recruiting system stakeholders for meaningful input and participation 	Agency leaders do not involve staff and stakeholders in solving challenges.	<p>Terms of Reference</p> <p>FTE allocations in Position descriptions</p> <p>Survey results from staff and stakeholders</p> <p>Lists of workgroups and committee chairs and participants</p>
31. Agency leaders ensure that difficult issues and challenges are raised and considered by	<p>Agency leaders ensure that at least all of the strategies are used:</p> <ul style="list-style-type: none"> • ask staff and stakeholders to 	<p>Agency leaders ensure that at least 2 of the following strategies are used:</p> <ul style="list-style-type: none"> • ask staff and stakeholders to verbalize both 	Agency leaders do not provide opportunities for staff and stakeholders to raise and discuss implementation challenges	

staff and stakeholders	<p>verbalize both advantages and disadvantages of proposed solutions.</p> <ul style="list-style-type: none"> • provide at least one annual opportunity for staff and stakeholders to raise concerns and propose solutions (e.g. staff surveys, one-to-one meetings) • set and document ground rules and expectations related to difficult issues (e.g. respectful language, tone of voice, active listening, asking questions for clarification) 	<p>advantages and disadvantages of proposed solutions.</p> <ul style="list-style-type: none"> • provide at least one annual opportunity for staff and stakeholders to raise concerns and propose solutions (e.g. staff surveys, one-to-one meetings) • set and document ground rules and expectations related to difficult issues (e.g. respectful language, tone of voice, active listening, asking questions for clarification) 		
------------------------	--	---	--	--

References

- Adondiwo, A., Kubio, C., Kanyoke, E., Bagni, F., Dasoberi, I. N., Amenga-Etego, I. A., . . . Barker, P. M. (2013). Using quality improvement methods to test and scale up a new national policy on early post-natal care in Ghana. *Health Policy and Planning*, 29(5), 622-632. doi:10.1093/heapol/czt048
- Allen, J. D., Towne, S. D., Maxwell, A. E., DiMartino, L., Leyva, B., Bowen, D. J., . . . Weiner, B. J. (2017). Measures of organizational characteristics associated with adoption and/or implementation of innovations: A systematic review. *BMC Health Services Research*, 17(1), 591. doi:10.1186/s12913-017-2459-x
- Chaple, M., & Sacks, S. (2016). The Impact of Technical Assistance and Implementation Support on Program Capacity to Deliver Integrated Services. *The Journal of Behavioral Health Services & Research*, 43(1), 3-17. doi:10.1007/s11414-014-9419-6
- Dobson, L., & Cook, T. (1980). Avoiding Type III error in program evaluation: results from a field experiment. *Evaluation and Program Planning*, 3, 269 - 276.
- Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). *Implementation research: A synthesis of the literature*: National Implementation Research Network, University of South Florida, www.activeimplementation.org.
- Fixsen, D. L., Ward, C., Ryan Jackson, K., Blase, K., Green, J., Sims, B., . . . Preston, A. (2018). *Implementation and Scaling Evaluation Report: 2013-2017*. Retrieved from National Implementation Research Network, State Implementation and Scaling up of Evidence Based Practices Center, University of North Carolina at Chapel Hill:
- Harvey, G., McCormack, B., Kitson, A., Lynch, E., & Titchen, A. (2018). Designing and implementing two facilitation interventions within the 'Facilitating Implementation of Research Evidence (FIRE)' study: a qualitative analysis from an external facilitators' perspective. *Implementation Science*, 13(1), 141. doi:10.1186/s13012-018-0812-z
- Lewis, C., Fischer, S., Weiner, B., Stanick, C., Kim, M., & Martinez, R. (2015). Outcomes for implementation science: an enhanced systematic review of instruments using evidence-based rating criteria. *Implementation Science*, 10(1), 155. doi:10.1186/s13012-015-0342-x
- Massatti, R., Sweeney, H., Panzano, P., & Roth, D. (2008). The de-adoption of innovative mental health practices (IMHP): Why organizations choose not to sustain an IMHP. *Administration and Policy in Mental Health and Mental Health Services Research*, 35(1-2), 50-65. doi:10.1007/s10488-007-0141-z
- McGovern, M. P., Matzkin, A. L., & Giard, J. (2007). Assessing the Dual Diagnosis Capability of Addiction Treatment Services: The Dual Diagnosis Capability in Addiction Treatment (DDCAT) Index. *Journal of dual diagnosis*, 3(2), 111-123. doi:10.1300/J374v03n02_13
- McIntosh, K., Mercer, S. H., Nese, R. N. T., & Ghemraoui, A. (2016). Identifying and Predicting Distinct Patterns of Implementation in a School-Wide Behavior Support Framework. *Prevention Science*, 17(8), 992-1001. doi:10.1007/s11121-016-0700-1
- Ogden, T., Bjørnebekk, G., Kjøbli, J., Patras, J., Christiansen, T., Taraldsen, K., & Tollefsen, N. (2012). Measurement of implementation components ten years after a nationwide introduction of empirically supported programs – a pilot study. *Implementation Science*, 7, 49. Retrieved from <http://www.implementationscience.com/content/pdf/1748-5908-7-49.pdf>.
- Panzano, P. C., & Billings, R. S. (1994). The influence of issue frame and organizational slack on risky decision making: A field study. *Academy of Management Proceedings*, 1994(1), 377-381. doi:10.5465/ambpp.1994.10345891

- Panzano, P. C., & Roth, D. (2006). The decision to adopt evidence-based and other innovative mental health practices: Risky business? *Psychiatric Services*, 57(8), 1153-1161.
- Panzano, P. C., Seffrin, B., Chaney-Jones, S., Roth, D., Crane-Ross, D., Massatti, R., & Carstens, C. (2004). The innovation diffusion and adoption research project (IDARP). In D. Roth & W. Lutz (Eds.), *New Research in Mental Health* (Vol. 16, pp. 78-89). Columbus, OH: Ohio Department of Mental Health Office of Program Evaluation and Research.
- Pinnock, H., Barwick, M., Carpenter, C. R., Eldridge, S., Grandes, G., Griffiths, C. J., . . . for the StaRI Group. (2017). Standards for Reporting Implementation Studies: (StaRI) Statement. *British Medical Journal*, 356(16795). doi:<http://dx.doi.org/10.1136/bmj.i6795>
- Proctor, E. K., Silmere, H., Raghavan, R., Hovmand, P., Aarons, G., Bunger, A., . . . Hensley, M. (2011). Outcomes for Implementation Research: Conceptual Distinctions, Measurement Challenges, and Research Agenda. *Administration and Policy in Mental Health*, 38, 65-76. doi:10.1007/s10488-010-0319-7
- Ryan Jackson, K., Fixsen, D., Ward, C., Waldroup, A., Sullivan, V., Poquette, H., & Dodd, K. (2018). *Accomplishing effective and durable change to support improved student outcomes*. Retrieved from National Implementation Research Network, University of North Carolina at Chapel Hill:
- Sigmarsdóttir, M., Forgatch, M., Vikar Guðmundsdóttir, E., Thorlacius, Ö., Thorn Svendsen, G., Tjaden, J., & Gewirtz, A. (2018). Implementing an Evidence-Based Intervention for Children in Europe: Evaluating the Full-Transfer Approach. *Journal of Clinical Child & Adolescent Psychology*, 1-14. doi:10.1080/15374416.2018.1466305
- Thomassen, O., Mann, C., Mbwana, J. S., & Brattebo, G. (2015). Emergency medicine in Zanzibar: the effect of system changes in the emergency department. *International Journal of Emergency Medicine*, 8(1), 22. doi:10.1186/s12245-015-0072-5
- Tommeraaas, T., & Ogden, T. (2016). Is There a Scale-up Penalty? Testing Behavioral Change in the Scaling up of Parent Management Training in Norway. *Administration and Policy in Mental Health and Mental Health Services Research*, 44, 203-216. doi:10.1007/s10488-015-0712-3
- Weiner, B., Lewis, C. C., Stanick, C., Powell, B. J., Dorsey, C. N., Clary, A. S., . . . Halko, H. (2017). Psychometric assessment of three newly developed implementation outcome measures. *Implementation Science*, 12(1), 108. doi:10.1186/s13012-017-0635-3