BACKGROUNDER Implementation Science

The Art and Science of Success

Effective Intervention Practices + Effective Implementation Practices = Good Outcomes

For decades researchers and professionals have tried to understand why the delivery of human services is typically inconsistent, often ineffective and sometimes even harmful to the people they seek to serve even when there is evidence that the practice is sound. The search for the missing link between effective interventions (and/or promising practices) and intended benefits for children and families has revealed a lack of attention to implementation – *the art and science of incorporating an intervention into human service settings*.

Essentially, when proven interventions are consistently and systematically implemented as intended improved outcomes for children and families are realized.

The science of implementation needs to be employed so that systems support quality practice and successful services reach and positively impact children and families. Implementation science is applied at all levels of a system, from practitioners in a child welfare agency to the county and state agencies providing child welfare leadership, oversight and policy. Of course implementation does not and cannot occur all at once, it occurs in stages and can take two to four years to complete:

- Exploration Stage where information is collected and analyzed to identify the problem and potential solutions.
- Installation Stage where staff and systems plan, prepare and organize to support utilization of the intervention.
- Full Implementation Stage where the majority of staff are utilizing the intervention effectively.
- Innovation Stage where constructive changes and adaptation are made based on data to improve.
- Sustainability where quality assurance systems are developed and maintained.

From Science to Success

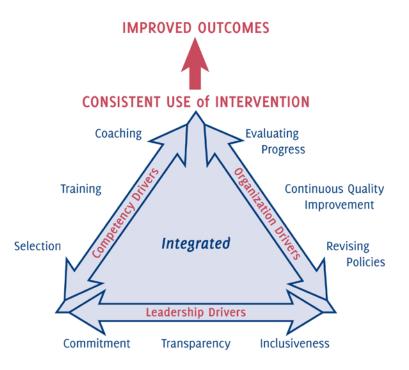
The goal of implementation is for all practitioners to use an intervention consistently and as intended. However, an intervention alone is not complete. The larger environment – organization and systems – must be supportive and able to help "drive" the success of the intervention. These "implementation drivers" are fundamental to the success of an intervention and are factors that must be considered in implementation. Indeed, they are interdependent and support one another.

Implementation research and state experience have helped to identify three categories of "Implementation Drivers:"

• Leadership Drivers – guide implementation by committing to the intervention or practice, adapting policies and organizational structures to support the intervention, pacing implementation and roll-out of the intervention, and being inclusive and transparent in involving

a broad array of internal and external stakeholders in the development and implementation of the intervention.

- Competency Drivers help build the ability of those throughout the organization to use an intervention's principles and approaches by training managers, supervisors, staff and stakeholders, providing experience and coaching, designating staff and supporting champions, and aligning staff selection and evaluation systems.
- Organization Drivers modify and align organizational systems to support the intervention by evaluating progress and outcomes through quality improvement, using feedback loops, revising policy and creating tools.



Implementation Science Triangle

Simply stated, even the best intervention or practice will not be effective if it is not implemented appropriately and it if is not supported by the organization or system. Neither interventions by themselves nor implementation activities by themselves are sufficient -- each needs the other to produce meaningful results for children and families.

CAPP and Implementation Science Intervention = Child and Family Practice Model

Implementation science is being used by California Partners for Permanency (CAPP) in a focused effort to reduce long-term foster care. Through a five-year, federally funded project, CAPP is working with state, county, community and tribal partners to address both the intervention that is needed as well as the implementation drivers that are necessary for its consistent and effective use.

After a year of research, planning and collaboration, CAPP's planned intervention is the development of an integrated model that informs and shifts child and family practice in California. This Child and Family Practice Model will require changes at the practice and organization and system levels.

Child and family practice will need to evolve to ensure that services are in line with the practice model and organizations and systems will need to build the capacity and internal structure to support those practices. With an eye toward implementation science, we will need to ensure that our implementation drivers are strong at the statewide, regional and local levels to support consistent and effective implementation of the model. Our efforts will also need to be informed by local analyses that have identified organizational and system barriers that stand in the way of success.

As CAPP moves forward with the installation and implementation stages of the practice model and addresses organization and system issues, we will share what we are learning and will continue to evolve and improve. To learn more about our work, visit <u>www.reducefostercarenow.org</u> or contact Karen Gunderson, CAPP Project Director, (916) 651.7395 or <u>karen.gunderson@dss.ca.gov</u>.

The information in this document has been adapted from:

- Implementation: The Missing Link Between Research and Practice by Dean I. Fixen, Sandra Naoom, Karen Al Blasé, and Frances Wallace as it appeared in the April 2007 Edition of the American Professional Society on The Abuse of Children Advisor
- Implementing Practice Models as it appeared in the Summer/Fall 2011 Edition of Child Welfare Matters a publication of the National Child Welfare Resource Center for Organizational Improvement

