FOUR KEYS TO SUCCESS

RTC PLENARY 2009
SYSTEM OF CARE VALUES
IN RESEARCH AND EVALUATION

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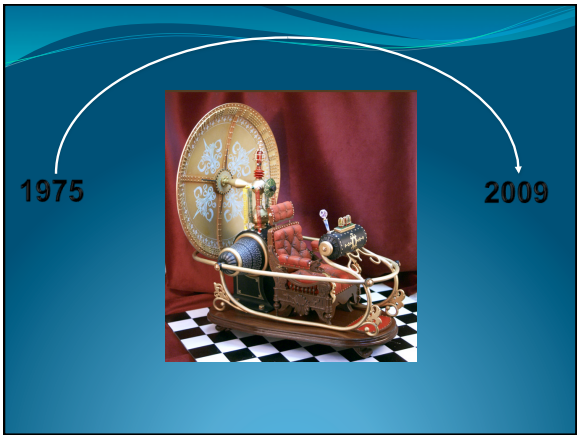


Overview

- HIGH HOPES AND CHALLENGES
- FOUR KEYS TO SUCCESS
- PARTICIPATION
  - THEORY
  - IMPLEMENTATION
  - EVALUATION (EMPOWERMENT EVALUATION & GTO)
  - RESOURCE/SYSTEM SUPPORT\
- FOUR KEYS TO SUCCESS AND FAMILY PARTICIPATION—ELAINE SLATON

OPTIMISM
HIGH HOPES
CHALLENGES
DISAPPOINTMENTS

HIGH HOPES

A COALITION IS

"AN ORGANIZATION OF DIVERSE INTEREST GROUPS THAT COMBINE THEIR HUMAN AND MATERIAL RESOURCES TO EFFECT A SPECIFIC CHANGE THE MEMBERS ARE UNABLE TO BRING ABOUT INDEPENDENTLY" (BROWN, 1984)

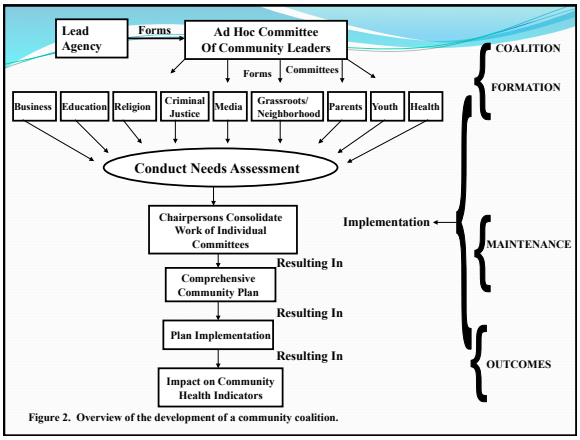


Figure 2. Overview of the development of a community coalition.

CHALLENGES

WHY DON'T MORE COMMUNITY COALITIONS SHOW RESULTS?

FOUR KEYS TO SUCCESS

- THEORY (A GOOD IDEA)
- IMPLEMENTATION
- EVALUATION
- RESOURCE/SYSTEM SUPPORT

THEORY

- **PARTICIPATION**

Definition: **"is a process in which individuals take part in decision making in the institutions, programs, and environments that affect them"** (Heller, Price, Reinharz, Riger, & Wandersman, 1984, p. 339)

Relevant to Systems of Care (e.g., Family-Driven, Youth-Guided)

ADVOCATES OF EXPERT PLANNING

- ON THE BASIS OF THEIR EDUCATION AND EXPERIENCE, PROFESSIONALS ARE ABLE TO DEVELOP AND IMPLEMENT SERVICES AND SYSTEMS EFFICIENTLY AND EFFECTIVELY

ADVOCATES OF PARTICIPATION

- IMPROVES QUALITY OF PROGRAM, STRATEGY, SYSTEM
- INCREASES FEELINGS OF CONTROL AND IMPROVES FIT (MEETS NEEDS AND VALUES BETTER)
- INCREASES FEELINGS OF HELPFULNESS, CREATIVITY, AND RESPONSIBILITY

AND DECREASES ALIENATION AND ANONYMITY

THEORY

- A FRAMEWORK OF PARTICIPATION

INDIVIDUAL LEVEL

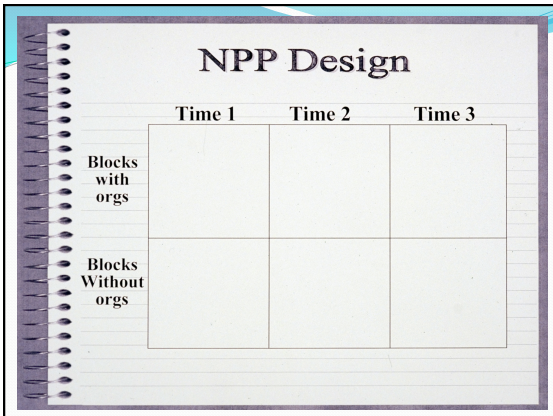
- IF PARTICIPATION IS SUCH A GOOD THING, WHY DOESN'T EVERYONE PARTICIPATE?
- WHO PARTICIPATES, WHO DOES NOT, AND WHY?

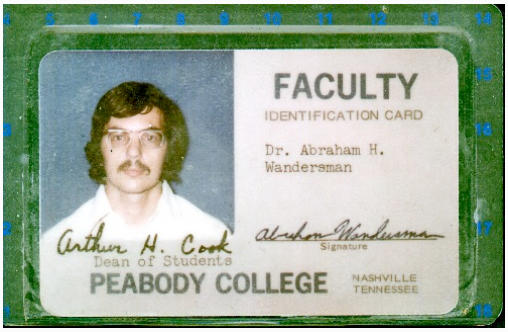
ORGANIZATIONAL LEVEL

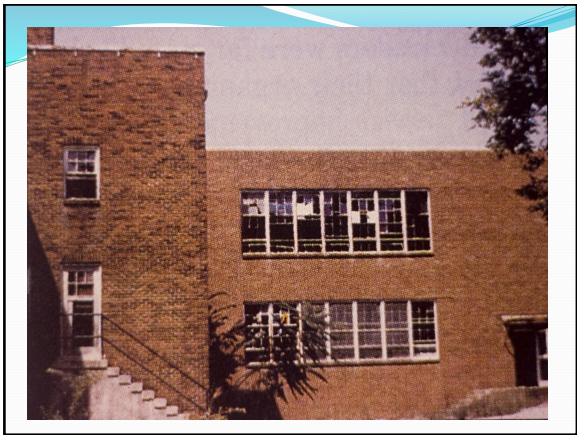
- WHY DO SOME ORGANIZATIONS SURVIVE AND THRIVE, WHILE OTHERS DIE OUT?

THE NEIGHBORHOOD PARTICIPATION PROJECT

- COLLEAGUES INCLUDED:
  DAVID CHAVIS
  PAUL FLORIN
  GARY GIAMARTINO
  DOUG PERKINS
  JOHN PRESTBY
  DONALD UNGER







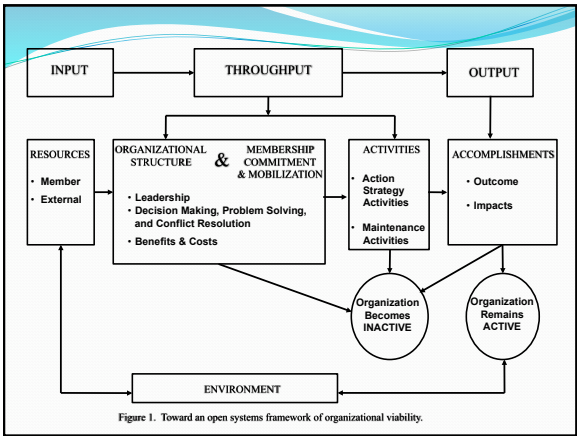


Figure 1. Toward an open systems framework of organizational viability.

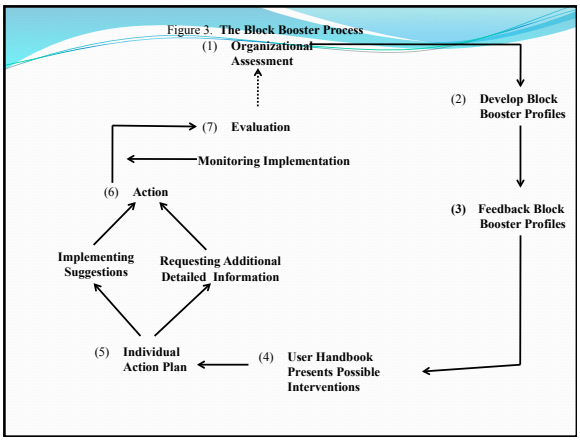
IF THE FINDINGS ABOUT ORGANIZATIONAL VIABLITY ARE OBVIOUS, WHY DO SO MANY DIE OUT?

HOW CAN ACADEMICS COLLABORATE WITH COMMUNITY ORGANIZATIONS TO IMPROVE ORGANIZATIONAL VIABILITY?

THE BLOCK BOOSTER PROJECT

- COLLEAGUES INCLUDED:
  DAVID CHAVIS
  PAUL FLORIN
  JOHN PRESTBY
  DOUG PERKINS
  RICHARD RICH

RESEARCH



COALITIONS

- COLLEAGUES INCLUDED:
  FRAN BUTTERFOSS
  MATT CHINMAN
  CINDY CRUSTO
  BOB GOODMAN
  PAM IMM
  MAURY NATION

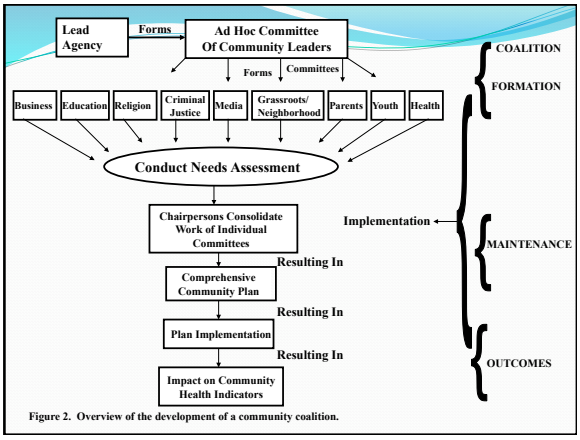


Figure 2. Overview of the development of a community coalition.

Table 1. Evaluation of MPA by Developmental Phases, Ecological Levels, and Stages of Readiness

Developmental phases and measures	Ecological Levels: Intra-personal	Inter-personal	Organizational	Community	Public Policy	Stages of readiness
Phase 1: Coalition formation						
Forecast			X			Initial mobilization and establishing organizational structure
Meeting Effectiveness Inventory	X	X	X			
Project Insight Form	X	X	X			
Committee survey	X	X	X			
Needs Assessment Checklist			X	X		
Plan Quality Index			X	X	X	
Phase 2: Plan implementation						
Tracking of Actions			X	X	X	Building capacity for action and implementing
Prevention Plus III	X	X	X	X	X	
Policy Analysis Case Study			X		X	
Phase 3: Impact						
Key Leader survey	X		X		X	Refining and institutionalizing
Community survey	X			X		
Trend data				X	X	
Level of Institutionalization Scale			X	X	X	

IMPLEMENTATION

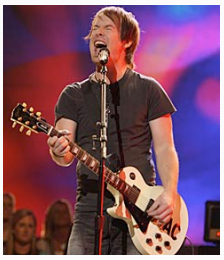
- FORECAST

EVALUATION

EVALUATION IN EVERYDAY LIFE

American Idol

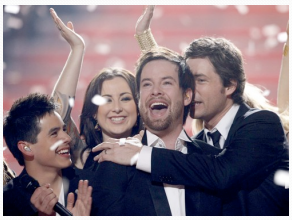
In 2008, more than 97 million votes were cast.



David Cook, 2008 *American Idol* winner

David Cook accepts the win in the 2008 competition

American Idol



- "DON'T BE SCARED--DATA IS YOUR BEST FRIEND"
- "USE DATA IN YOUR PRACTICE TO HELP IMPROVE YOUR SYSTEM"
- MARIE MURILUS-BLACK (FORMERLY FROM ERIE COUNTY SYSTEMS OF CARE)

Empowerment Evaluation

Evaluation approach that aims to increase the probability of program success by:

- **Providing program stakeholders with tools to assess planning, implementation, & self-evaluation of their program**
- **Mainstreaming evaluation as part of program/ organization's planning & management**

Empowerment Evaluation Principles in Practice, **Fetterman & Wandersman, Guilford Press, 2005**

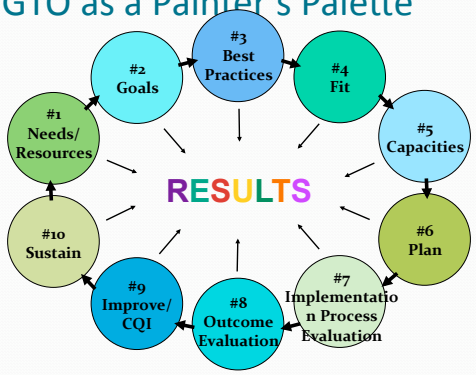
Core Principles of Empowerment Evaluation

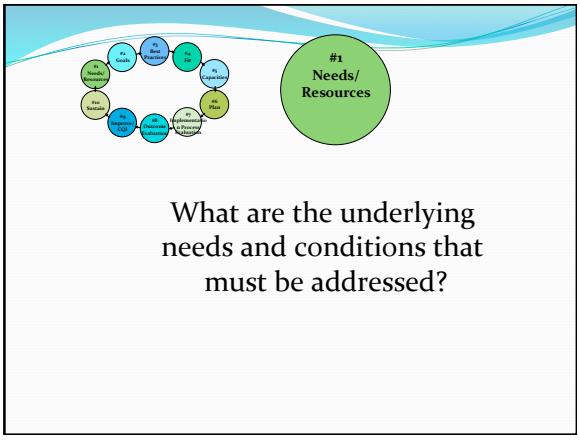
Principle 1:	Improvement
Principle 2:	Social Justice
Principle 3:	Inclusion
Principle 4:	Democratic participation
Principle 5:	Capacity building
Principle 6:	Organizational learning
Principle 7:	Community ownership
Principle 8:	Community knowledge
Principle 9:	Evidence-based strategies
Principle 10:	Accountability

GETTING TO OUTCOMES®

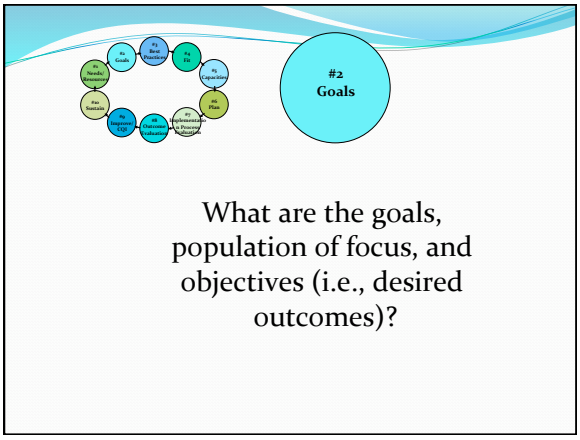
- A "HOW-TO" FOR EMPOWERMENT EVALUATION
- Colleagues include
  Matt Chinman
  Pam Imm
  Cathy Lesesne
  Gordon Hannah
  Marilyn Ray
  Diane Green

GTO as a Painter's Palette

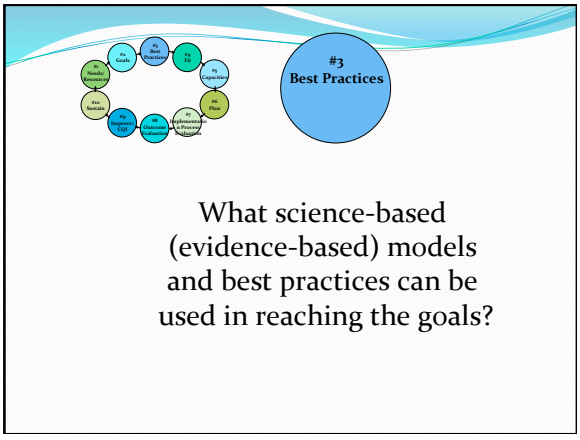




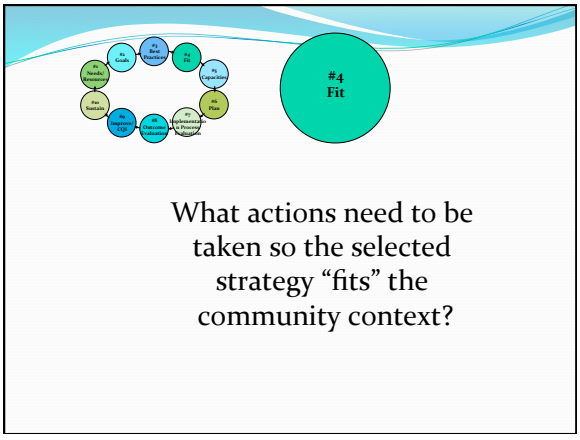
What are the underlying needs and conditions that must be addressed?



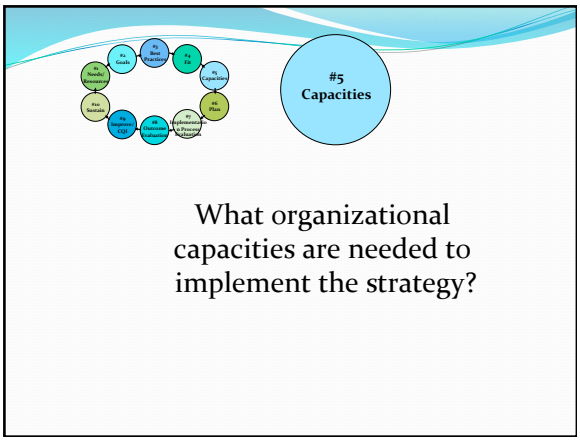
What are the goals, population of focus, and objectives (i.e., desired outcomes)?



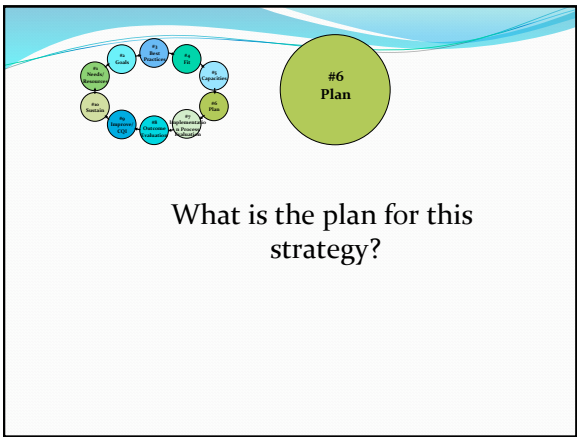
What science-based (evidence-based) models and best practices can be used in reaching the goals?



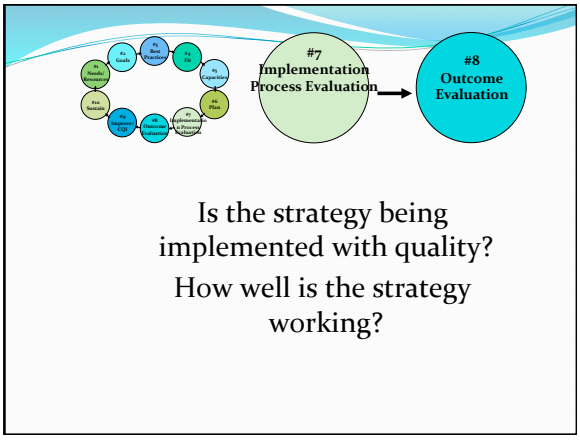
What actions need to be taken so the selected strategy "fits" the community context?



What organizational capacities are needed to implement the strategy?

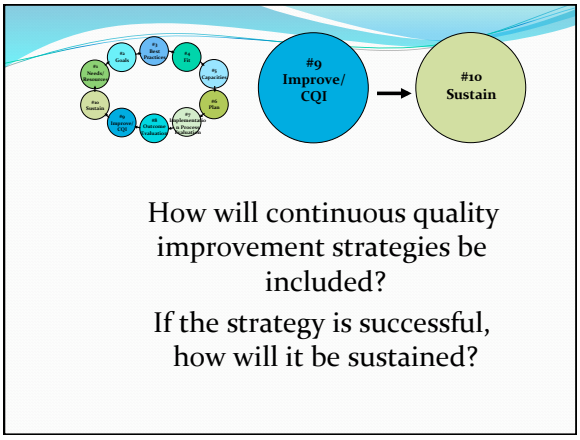


What is the plan for this strategy?



Is the strategy being implemented with quality?

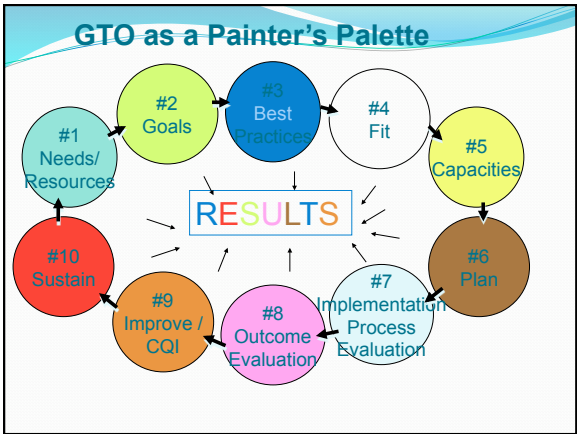
How well is the strategy working?



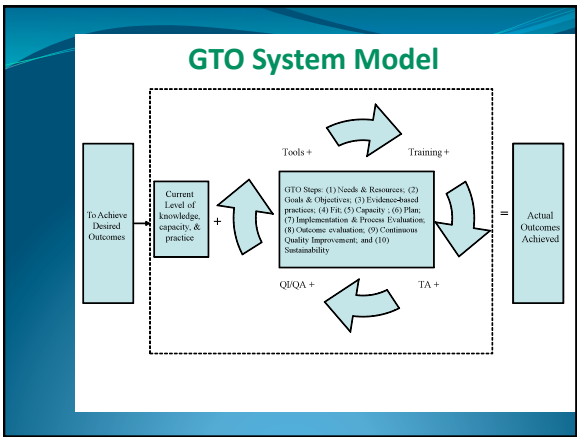
How will continuous quality improvement strategies be included?

If the strategy is successful, how will it be sustained?

Accountability Questions	Relevant Literatures
1. What are the underlying needs and conditions that must be addressed? (NEEDS/RESOURCES)	1. Needs/Resource Assessment
2. What are the goals, target population, and objectives? (i.e., desired outcomes)? (GOALS)	2. Goal Setting
3. What science (evidence) based models and best practice programs can be used in reaching the goals (BEST PRACTICE)?	3. Consult Literature on Science Based and Best Practice Programs
4. What actions need to be taken so the selected program "fits" the community context? (FIT)	4. Feedback on Comprehensiveness and Fit of Program
5. What organizational capacities are needed to implement the program? (CAPACITIES)	5. Assessment of Organizational Capacities
6. What is the plan for this program (PLAN)	6. Planning
7. Is the program being implemented with quality (PROCESS)	7. Process evaluation
8. How well is the program working? (OUTCOME EVALUATION)	8. Outcome and Impact Evaluation
9. How will continuous quality improvement strategies be included? (IMPROVE)	9. Total Quality Management; Continuous Quality Improvement
10. If the program is successful, how will it be sustained? (SUSTAIN)	10. Sustainability and Institutionalization



RESOURCE/SYSTEM SUPPORT



GTO RESULTS

Chinman, Hunter, Ebener, Paddock, Imm, Stillman &

Wandersman (2008) The Getting To Outcomes Demonstration and Evaluation: An Illustration of the Prevention Support System. American Journal of Community Psychology, 206-224.

Getting To Outcomes Evaluation: Model of the Project

GTO Theoretical Model
EXISTING prevention capacity
↓
EXISTING prevention performance
↓
GTO Intervention
- **GTO Manual**
- **GTO Training**
- **GTO Technical Assistance**

↓
IMPROVED prevention capacity
↓
IMPROVED prevention performance

Getting To Outcomes Evaluation: Model of the Project

GTO Theoretical Model	GTO Evaluation
EXISTING prevention capacity	**Baseline** Coalition Survey (Yr 1)
EXISTING prevention performance	**Baseline** GTO-IC Map (Yr 1)

GTO Intervention
• GTO Manual
• GTO Training
• GTO Technical Assistance
	GTO Utilization
	• Focus Groups (Yr 2)
	• Interviews (Yr 3)
	• TA Monitoring (Ongoing)
	• GTO Participation Index (part of the Coalition Survey in Years 2, 3)
	  • Participation in training
	  • Participation in TA
	  • Reading the materials
	  • Planning
	  • Collaborating with colleagues
	  • Securing resources

IMPROVED prevention capacity	**Follow-up** Coalition Survey (Yrs 2,3)
IMPROVED prevention performance	**Follow up** GTO-IC Map (Yrs 2,3)

Getting To Outcomes Evaluation: Model of the Project

GTO Theoretical Model	GTO Evaluation	Research Questions
EXISTING prevention capacity	**Baseline** Coalition Survey (Yr 1)	
EXISTING prevention performance	**Baseline** GTO-IC Map (Yr 1)	

GTO Intervention
• GTO Manual
• GTO Training
• GTO Technical Assistance
	GTO Utilization
	• Focus Groups (Yr 2)
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	• TA Monitoring (Ongoing)
	• GTO Participation Index (part of the Coalition Survey in Years 2, 3)
	  • Participation in training
	  • Participation in TA
	  • Reading the materials
	  • Planning
	  • Collaborating with colleagues
	  • Securing resources
		Process Evaluation
		How and to what extent is GTO used?

IMPROVED prevention capacity	**Follow-up** Coalition Survey (Yrs 2,3)	**Outcome Evaluation** **What is GTO's impact on prevention capacity and performance?**
IMPROVED prevention performance	**Follow up** GTO-IC Map (Yrs 2,3)	

Results: Process Evaluation

- GTO participation varied widely
  - 60% trained, ⅓ read manual, 40% got TA
  - Significant intervention bleed, greater at Time 3
- Staff perceptions
  - GTO helped with planning, organization, reporting, evaluation, created consistency across programs
  - resources of time, staff, and computers biggest barrier
  - MANUAL: good resource, but too long and complex
  - TRAINING: good intro, but needs to be more applied
  - TA: helped staff adapt; translated complex ideas
- Technical assistance hours
  - Hours of TA across programs varied, but most wanted assistance with planning (#6) and process & outcome evaluation (# 7 & #8)

Results: Outcome Evaluation

- Individual staff prevention capacity
  - Intent to treat: No change over time in skill & attitudes
  - Using GTO Participation Index, GTO participation was associated with significant increases in knowledge, attitudes, & skill across almost all areas targeted by GTO
- Prevention Program Performance
  - GTO programs showed greater % improvement
    - After 1 yr: 13% v 7%; After 2 yrs: 47% v 8%
  - GTO programs added in Yr 2 remained flat, then improved
  - Across all 6 GTO programs, correlation between TA hours & change in performance r (10) = .59, p=

Getting To Outcomes Evaluation: Conclusions

- GTO can improve practitioner capacity and performance of tasks known to be associated with high quality prevention (planning, evaluation, etc.)
- Those with greater exposure to GTO demonstrated more gains in capacity
- TA hours show that practitioners mostly want & got help with evaluation activities
- GTO can be difficult to absorb, therefore, ongoing TA critical to the success of GTO
- Organizational issues a major factor
  - Conversion to "learning organization" not complete
    - Resources are significant barrier to adoption, implementation, and sustainability
    - Incentive structure within which coalitions operate not aligned with CQI

FOUR KEYS TO SUCCESS AND FAMILY PARTICIPATION

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Key #1 Theory (a good idea)

Families' ideas have driven many system of care innovations:

- Parent Peer-to-Peer Support
- Respite Services
- Focusing systems on both mental health & substance abuse
- Identifying gaps in services
- Insisting on emergency services & crisis intervention
- Identifying law enforcement as a critical collaborator

Key #2 Implementation

Plans call for services to be culturally appropriate and family friendly. Families play a role in the hiring and training of staff to assure that staff are culturally appropriate and family friendly

Key #3 Evaluation

Family-driven success stories:

- Families in GA knew how to solve the MH Clinic's no-show problem by conducting the right survey aimed at the right parts of the problem – they asked families who didn't show what the issues were!
- In the ***early 1990's***, families co-presented evaluation based presentations by reading slides they had been assigned – ***today***, families conduct their own studies and present their own studies – as well as ask critical questions of findings, helping to sort out & advocate appropriate application of current research

Key #4 Resource/System Support

Leadership & Workforce resources

Natural community leaders are among families with life experiences and knowledge that comes from raising a child with special needs

Community based resources

Families bring connections to local faith communities

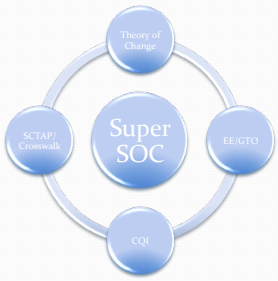
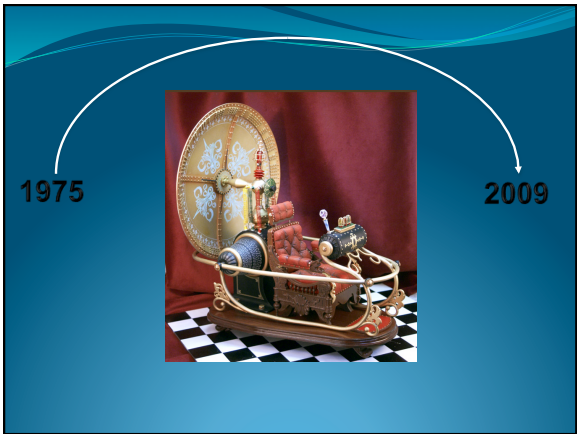
Sustainable funding

Families lend their influence to legislation that mandates and funds system of care

SUMMARY

- **HIGH HOPES AND CHALLENGES**
- **FOUR KEYS TO SUCCESS**
- **PARTICIPATION**
  - **THEORY**
  - **IMPLEMENTATION**
  - **EVALUATION (EMPOWERMENT EVALUATION & GTO)**
  - **RESOURCE/SYSTEM SUPPORT**
- **FOUR KEYS TO SUCCESS AND FAMILY PARTICIPATION—ELAINE SLATON**

REFERENCE

- WANDERSMAN, A. (2009) FOUR KEYS TO SUCCESS (THEORY , IMPLEMENTATION, EVALUATION, RESOURCE/SYSTEM SUPPORT: HIGH HOPES AND CHALLENGES IN PARTICIPATION. American Journal of Community Psychology, March.

It Links Together