

Implementation of Evidence-Based Practices
An Evaluation of a Monumental Organizational Change Process

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Kinark
 CHILD AND FAMILY SERVICES
 CARING • HELPING • HEALING

Rationale

- Practitioners are increasingly being encouraged to develop their practice knowledge, to adopt evidence-based practices, including empirically supported treatments, prevention programs, and assessment methods (Garland, Kruse, Aarons, 2003).
- They face important challenges in applying this knowledge, determining how best to implement evidence-based practices, increasing organizational and practitioner readiness or receptivity for change, addressing the clinical utility and efficiency of these practices, and demonstrating the impact following uptake (Barwick, et al., JACAP 2009).
- The field continues to rely on practices that have little supporting evidence or, at worst, have poor outcomes (Busch 2002; Dishion, McCord & Poulin, 1999) despite evidence that most children who receive an empirically supported treatment get significantly better and do so more quickly than with other treatments or no treatment (Chambliss & Ollendick, 2001; JCCP 1998).

Rationale

- In reality, clinicians do not change their practice readily (Haines & Donald, 1998)
- The prevention and treatment approaches with the best empirical support are rarely used in typical clinical practice (Kazdin, Bass, Ayers, & Rodgers, 1990; Weersing & Wiesz, 2002).
- Few 'toolkits' or practical examples detailing how to get evidence into practice in a way that leads to practice change are available to guide the adaptation or translation of evidence-based treatments to real-life clinical practice (Conner-Smith & Wiesz, 2003).

Clinical Transformation

The transition to full spectrum evidence-based clinical services at Kinark Child and Family Services provided a unique opportunity to conduct a process evaluation of evidence-based practices implementation and related organizational change.

This is research in progress, using an organizational level qualitative analysis of field notes, interviews, and brief questionnaires.

The aim is to describe the processes undertaken toward becoming a learning organization that is thoroughly structured to provide mental health services that are supported by scientific evidence.

Design

This is a prospective single case study of process change in a single child and youth mental health service provider organization using mixed methods to capture elements of the change process over time (two years and counting).

Process Evaluation

Process-based evaluations are geared to understanding how a program works -- how it produces the results that it does.

In this study, we seek to learn how a management led decision to have all services be 'evidence-based' comes to fruition.

We will document the management and organizational process that evolve over time, and capture staff members' perceptions and experiences of the change process over time.



Case Description - Kinark

Kinark Child and Family Services employs 800 direct service professionals

Four areas of service: Central East treatment program, Youth Justice and Secure Treatment, Autism, and the Kinark Outdoor Centre.

In 2006-07, 4,364 children and youth were served in the Central East Treatment Programs, 535 in Youth Justice and Secure Treatment, 695 in Autism services, and 6,917 in their Outdoor Centre.



Qualitative Measures

Interviews. One manager and one clinical staff per program and site will be interviewed from the list of staff who have consented to participate and who have been directly involved on some level. It is anticipated that 18 staff interviews will be conducted.

Fieldnotes. Non-participant observation and takes detailed field notes of the meeting process for several key meeting groups and to track two implementation teams through their processes.

Staff Perceptions and Knowledge. A staff questionnaire comprised of three open-ended questions is administered to staff on an annual basis:

- (Q1) What if anything, do you know about clinical transformation at Kinark?
- (Q2) How would you define evidence-based practice or treatment?
- (Q3) In your own work, do you use any courses of treatment considered to be evidence-based?

Tracking of Milestones. Sharepoint, a browser-based collaboration and a document-management platform, is used to document meetings, milestones, and goals and as for collaborative writing.



Quantitative Measures

Organizational Learning. To capture the extent to which the organization demonstrates qualities characteristic of learning organization we are using the Organizational Learning Survey (Goh & Richards, 2007).

47 items

- 21 items capture learning organization attributes and dimensions
- 6 items capture organization design and structure
- 9 items focus on job satisfaction
- 8 items capture training and skill development practices

Scale reliability has been demonstrated at alpha=.90.

Validity of the scale was established through a predictive validity study (Goh & Richards, 1997)



Quantitative Measures

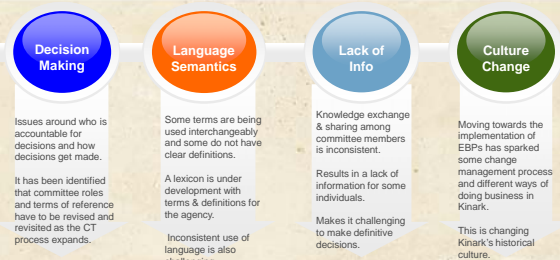
Meeting Effectiveness. The Meeting Effectiveness Inventory is used to assess leadership, participation, decision-making, conflict resolution and productivity for the following working groups/meeting groups:

- (1) all Clinical Excellence Committee (CEC) meetings;
- (2) monthly Steering Committee meetings; and
- (3) the Provincial Management meeting (portion of meeting dedicated to clinical transformation).

adapted from *Facilitation at a Glance!* (GOAL/QPC, c1999).
hhanson 7/8/2004



Emerging Themes...



Emerging Themes...

EBP Selection

The switch from research to practice has posed some challenges for Kinark, such as:

- identifying further needs in IT
- how well the EBP works with staff and clients
- change of deadlines

Work Load Balance

Work load resulting from Clinical Transformation has led to challenges and brainstorming of ways to improve this feeling among those staff directly involved.

Learning From Process

Throughout the process, challenges and situations are reflected upon in order to generate lesson learned that can be applied to current issues.

Communication

Communication between members who sit on the committees (CEC and CTSC)

Communication between those who sit on the committees and front line staff.

Emerging Themes...

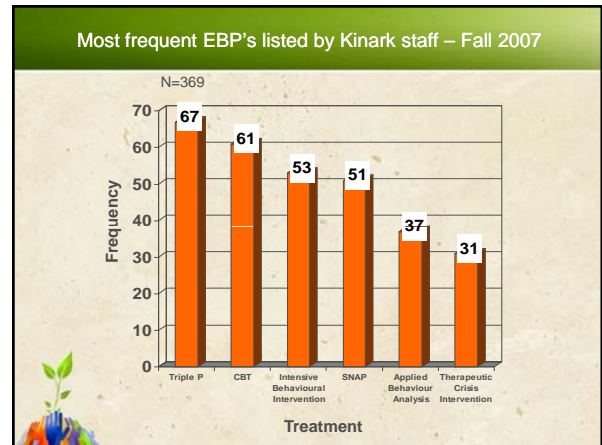
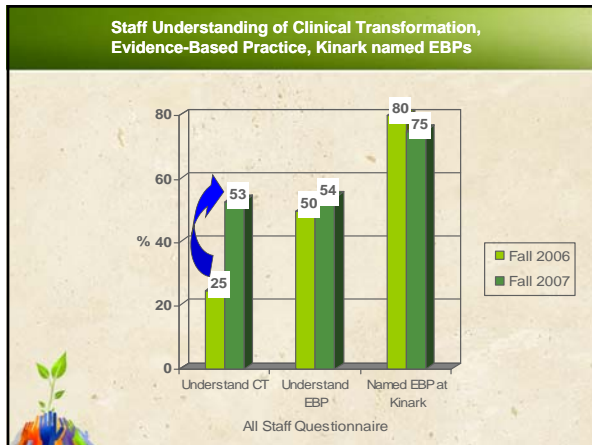
EBP

Issues around selecting evidence based practices that fit with Kinark's client population.

Process Challenges

The need to slow things down when people were feeling a great deal of work load stress.

Managing other tasks that generate work outside of Clinical Transformation.



Organizational Learning Factors at Baseline

- 64% agree there is widespread support & acceptance for the vision statement
- 62% agree that managers & employees share a common vision of what their work should accomplish
- 59% agree that new ideas from staff are treated seriously by management
- 35% believe managers frequently involve employees in important decisions
- 44% believe they can form informal groups to solve organizational problems
- 61% agree their system that allows them to learn successful practices from other organizations
- 63% agree that most problem solving groups feature employees from a variety of functional areas or divisions
- 72% agree they have the opportunities to work on challenging assignments
- 65% believe they have the opportunities to improve their knowledge, skills and abilities in order to undertake new work assignments
- 37% believe employee training is emphasized equally at all levels in this organization
- 34% agree that employees are required to continuously upgrade and increase their knowledge and educational level

- ### Research Challenges...
- 1 Data management: lots of qualitative data
 - 2 Learning as we go
 - 3 Holding the 'narrative' and writing as we go
 - 4 Telling a coherent story that is replicable

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Thank
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