Implementation of Evidence-Based Practices
An Evaluation of a Monumental Organizational Change Process
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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., JCAP 2009).
• The field continues to rely on practices that have little supporting evidence or, at worst, have poor outcomes (Busch 2002, Ollendick, 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; JCAP 1998).

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)

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

adapted from Facilitation at a Glance® (GOAL/QPC, c.1993).

Emerging Themes…

Issues around who is accountable for decisions and how decisions get made.

It has been identified that committee roles and terms of reference have to be revised and re-visited as the CEC process expands.

A lexicon is under development with terms & definitions for the agency.

Inconsistent use of language is also challenging.

Makes it challenging to make definitive decisions.

This is changing Kinark's historical culture.

Moving towards the implementation of EBPs has sparked some change and different ways of doing business in Kinark.

Language

Semantics

Culture

Change

Decision Making

Lack of Info

Knowledge exchange across the organization is uncertain.

It has been identified that committee roles and terms of reference have to be revised and re-visited as the CEC process expands.

Lack of information and conflicting definitions for the agency.

Inconsistent use of language is also challenging.
The switch from research to practice has posed some challenges. Work load resulting from Clinical Transformation has led to challenges and situations that can be improved through reflection among those staff directly involved. Throughout the process, challenges and situations are reflected upon in order to generate lessons learned that can be applied to current and future needs.

Communication between those who sit on the committees and front line staff. Issues around selecting evidence-based practices that fit with Kinark's population. 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.

Emerging Themes…

EBP Selection

Work Load Balance

Learning From Process

Communication

Emerging Themes…

EBP

Process Challenges

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

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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
- 69% 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

Staff Understanding of Clinical Transformation, Evidence-Based Practice, Kinark named EBPs

Most frequent EBPs listed by Kinark staff – Fall 2007

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triple P CBT Intensive</td>
<td>67</td>
</tr>
<tr>
<td>Behavioural Intervention</td>
<td>61</td>
</tr>
<tr>
<td>SNAP Applied Behaviour Analysis</td>
<td>53</td>
</tr>
<tr>
<td>Therapeutic Crisis Intervention</td>
<td>51</td>
</tr>
</tbody>
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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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References

Thank you