



# The Role of Key Stakeholders in Co-Creating an Infrastructure to Support Evidence-Based Practice

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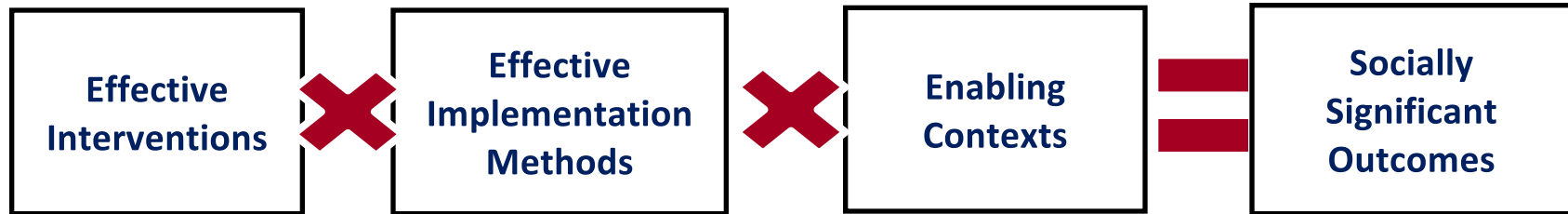
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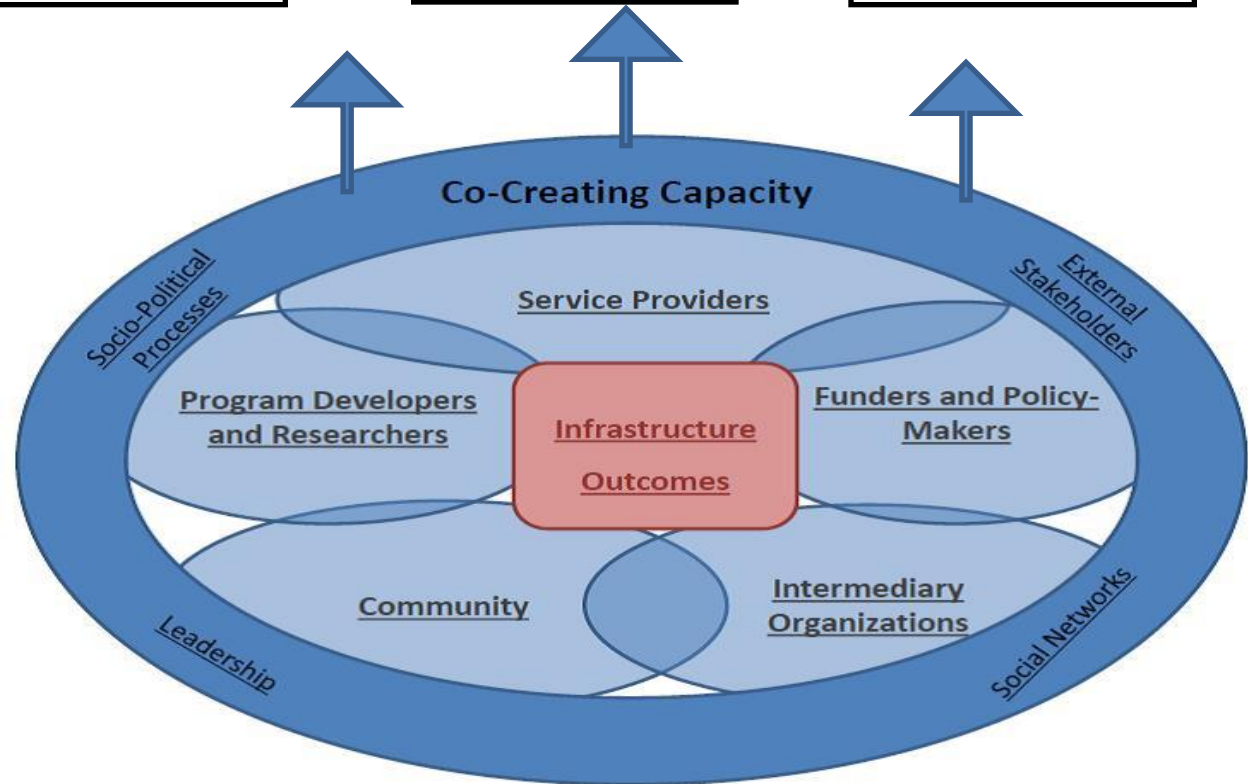
# **Purchasing evidence is not purchasing outcomes**

Every system has a different array of stakeholders with various assets and priorities. A key to successful implementation of evidence-based practices is clearly defining the roles of those stakeholders to develop a shared accountability for high quality implementation and improved outcomes.

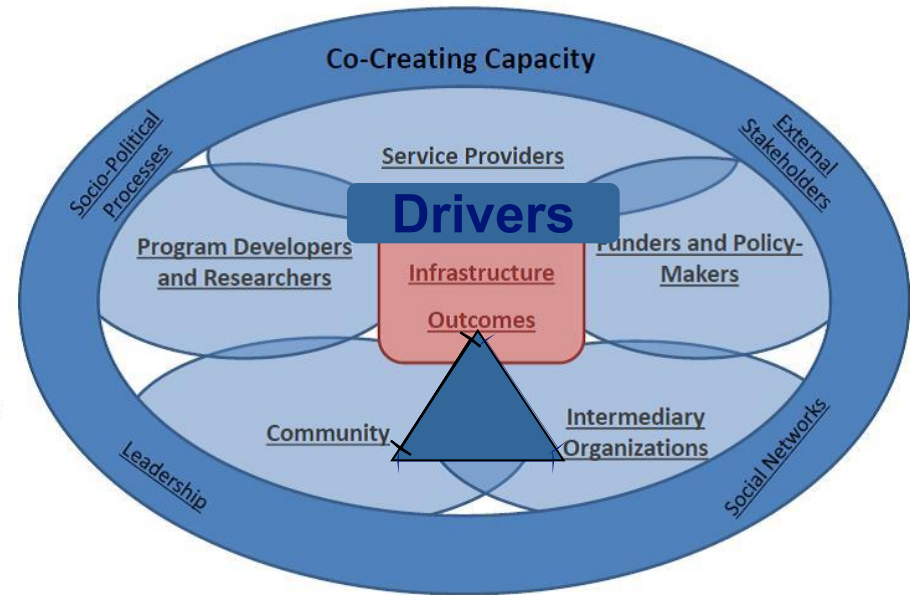
# Co-Creating Capacity



*Co-Creation refers to deeply involving a **range of key stakeholders** in identifying and creating the implementation infrastructure and context that **enables and sustains the use of evidence in practice.***



# Co-Creating Capacity



# Evidence-Based Initiative in NYC

NYC ACS has expanded its use of evidence-based and evidence-informed practice in the continuum of services offered to families in order to achieve better outcomes for children, youth, and families.



# Assessing a Complex System

- NYC has a complex child welfare system with approximately 30,000 families in preventive services
- NYC is implementing one of the largest and most diverse continuums of preventive EBPs in an municipality globally
  - 11 different models
- Program experts in NYC provide a range of supports for service providers
- NYC actively trying to close the research to practice gap

# Assessing a Complex System

## Discovered...

- Lack of knowledge of ACS staff;
- Perceived misalignment between child welfare policies and the practice of EBMs;
- Misalignment in the oversight of model adherence and current ACS evaluation and monitoring;
- Redundancy of documentation; and
- Limited internal training/technical assistance capacity



## Program Experts provide a range of supports

Half of program experts used best practices for all competency drivers

- Interview protocols, prerequisites
- Standard training, tailored supports
- Coach criteria
- Content, competency, fidelity

Most program experts did not use best practices for all organization and systems drivers

- Decision support data system focused solely on practitioner fidelity
- Limited leadership involvement
- Limited used of organizational data for improvement
- Limited policy guidance





# Building the “System To Be”

## Three main areas

1. Capacity Building
2. Policy and Practice Alignment
3. Evaluation and Monitoring

## What is the role of...

- Public agency
- Service providers
- Developers and consultants
- Community stakeholders

Area	Activity
<b>Capacity Building</b>	<b>Build Internal Capacity at ACS</b> 1. Training to build model mastery 2. Communication to support role clarity <ul style="list-style-type: none"> <li>• One pager on EBM</li> <li>• Desk Guide of all ACS Preventive models</li> </ul>
<b>Policy and Practice Alignment</b>	<b>Bring stakeholders together to create hospitable funding, regulatory and policy environment</b> 1. Develop long term strategies to promote the alignment of EBM practices and fidelity measurements in a child welfare preventive services context. 2. Engage leadership in quicker and more transparent policy-practice feedback loops
<b>Evaluation and Monitoring</b>	<b>Align current child welfare data reporting requirements with EBM reporting requirements</b> 1. Revise Preventive Standards and Indicators to reflect unique features of each EBM 2. Develop implementation informed monitoring tools

## Stakeholder groups have trouble navigating the complexities of implementation and understanding their roles related to...

Building, sustaining, and improving practitioner competency

Aligning policies and practices

Collecting and using data for improvement

Collaborating, linking and communicating

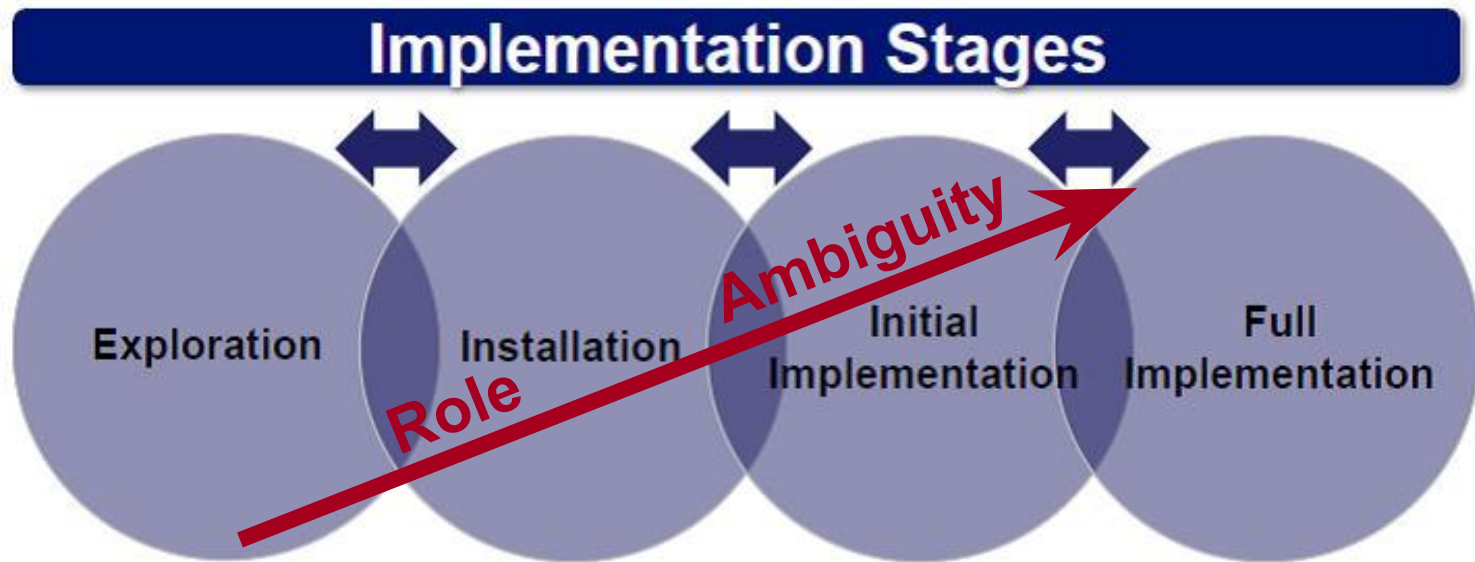
Navigating authority and making decisions

Attending team meetings and contributing to strategy development

Voicing concerns and sharing what is “not known” or “not understood”



Role ambiguity can increase from exploration to initial implementation, leaving implementation initiatives vulnerable to the negative effects of communication breakdowns, mistrust, and a lack of clear decision-making.



# Facilitators for Co-Creation

## Role Clarity

Facilitators	Activities
Cross-Sector Confidence in the EBPs	<ul style="list-style-type: none"><li>• Inclusion of stakeholders in model selection</li><li>• Emphasis on fit with local context</li></ul>
Broad Sense of Practice Mastery	<ul style="list-style-type: none"><li>• Trainings and resources for broad stakeholder group</li><li>• Broad understanding of logic model</li></ul>
Collaboration Early and Often	<ul style="list-style-type: none"><li>• Development of cross-sector implementation team</li><li>• Engagement of multiple perspectives</li><li>• Frequent meetings</li></ul>
Negotiation of Roles and Responsibilities	<ul style="list-style-type: none"><li>• Team charter or ToR</li><li>• Clarity on decision-making</li><li>• Explicit attention and revisiting of roles and responsibilities</li></ul>
Active Support and Coaching for CQI	<ul style="list-style-type: none"><li>• Shared data</li><li>• Shared decision-making</li></ul>
Courageous Conversations	<ul style="list-style-type: none"><li>• Open discussion of values, perspectives, worries and concerns</li><li>• Identification of adaptive challenges</li></ul>
Frequent and Inclusive Communication	<ul style="list-style-type: none"><li>• Inclusive meetings</li><li>• Weekly communication to limit informal discussion</li></ul>

- On average, providers meeting above 80% of their contract capacity less than a year after full slot availability.
- Doubled capacity of families served through preventive services
- Average length of service is at or approaching target levels for all programs
- It is important for EBM/PPM providers to focus on meeting all service goals in collaboration with families prior to closing cases

# For More Information

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