

Using Readiness Assessment to Improve Implementation Outcomes: Implementation and Client Engagement Results of a Statewide Learning Collaborative for Children’s Behavioral Health

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OBJECTIVE

- Organizational readiness for implementation may impact the successful implementation of evidence-based practices (EBPs) for youth behavioral health problems^{1,2}
- Successful implementation of EBPs may improve equity and reduce disparities in youth behavioral healthcare
- Organizational *Readiness* for implementation = *Motivation* for adopting an innovation x *General Organizational Capacities* x *Innovation-Specific Capacities* ($R=MC^2$)¹
- Aim:** To identify pre-implementation readiness components that predict EBP integrity and penetration outcomes of a statewide Learning Collaborative (LC) of the Modular Approach to Therapy for Children (MATCH)³ in community mental health centers (CMHCs)

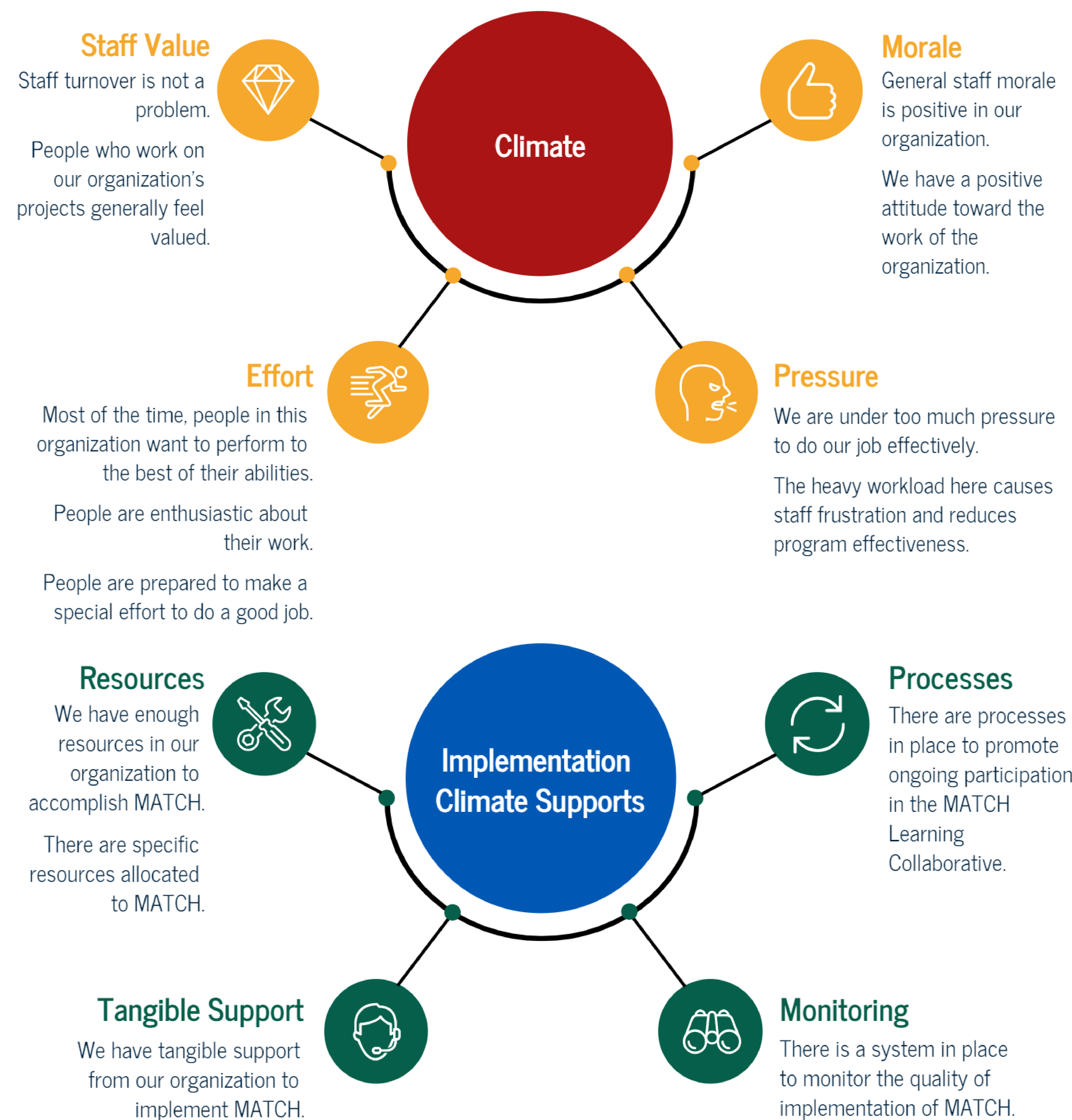
METHODS

- 10 CMHCs participated in the state-sponsored LC
- Readiness was assessed using an adaptation of the Readiness Diagnostic Survey (RDS)⁴
- RDS was completed by 90 clinicians, supervisors, and administrators at Pre-implementation
- Implementation outcomes, i.e., EBP integrity and penetration⁵, were measured through active implementation and 1 to 2 years post-LC.
- MATCH **Integrity** was measured by:
 - Session frequency in days (Standard: Weekly)
 - Clinical progress monitoring survey completion frequency in days – Youth and Caregiver (Standard: Weekly)
 - MATCH skill use (Standard: Every session)
- Penetration** of MATCH was measured by:
 - Number of clients per clinician
 - Number of sessions per client
- Conducted linear regression controlling for time

FINDINGS

- Higher **MATCH Capacity** Scores → Higher **Survey Frequency by Caregiver** ($b = -8.66, t(9) = -4.67, p < .01$)
- Higher **Climate** scores → Higher **Client Enrollment** ($b = 4.43, t(9) = 2.58, p < .05$)
- Higher **Implementation Climate Supports** scores → Higher **Client Enrollment** ($b = 4.25, t(9) = 3.04, p < .05$)

Pre-implementation capacities, such as **climate** and **implementation climate supports**, may facilitate EBP integrity and penetration through active implementation and sustainability phases.



RDS DOMAIN & SUBDOMAIN SCORES

	M (SD)
General Capacities*	5.46 (0.36)
Culture	6.03 (0.19)
Climate*	5.08 (0.40)
Structure	5.37 (0.36)
Org. Innovativeness	5.57 (0.48)
Resource Utilization	4.81 (0.61)
Leadership	5.87 (0.36)
Staff Capacity	5.53 (0.48)
Process Capacities	5.48 (0.51)
MATCH (Innovation) Capacities*	5.26 (0.40)
Knowledge & Skills	4.94 (0.54)
Program Champion	5.34 (0.46)
Implementation Climate Supports*	5.18 (0.49)
Inter-organizational Relationships	5.55 (0.68)
Leadership	5.56 (0.43)
Motivation*	4.79 (0.36)
Relative Advantage	4.66 (0.47)
Compatibility/Alignment	5.38 (0.54)
Complexity	4.17 (0.39)
Priority	4.98 (0.30)

1 Strongly Disagree, 2 Disagree, 3 Slightly Disagree, 4 Neither Agree nor Disagree, 5 Slightly Agree, 6 Agree, 7 Strongly Agree

*Domains and subdomains impacting implementation outcomes

INTEGRITY & PENETRATION DESCRIPTIVES

MATCH Integrity	M (SD)
Session Frequency (days)	16.13 (13.30)
Survey Frequency – Youth (days)	11.41 (27.91)
Survey Frequency – Caregiver (days)	12.18 (35.28)
Skill Use (percent of sessions)	94.32% (2.54%)
Penetration	
Clients per Clinician	11.30 (10.66)
Sessions per Client	10.35 (11.04)

IMPLICATIONS FOR PRACTICE

- Understanding pre-implementation organizational readiness can improve EBP implementation, thereby improving equity in youth behavioral health services
- Specific applications of pre-implementation readiness assessment include:
 - Facilitating organization selection for more efficient and effective EBP implementation
 - Providing an opportunity for targeted consultation to increase readiness prior to implementation⁴
 - Identification of early targets for consultation during active implementation⁶

Click [here](#) or email rkim@jbcc.harvard.edu for citations and more information!