When Training is Not Enough
Implementing Clinical Best Practices
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What training in clinical best practices do staff in your team/agency receive?

How do you know if it’s sticking (being translated into practice)?

What best practices are being implemented in your team/agency?

What are the reasons for implementing best practices?

What’s the difference between training and implementation?

Training does not equal implementation

Definitions

**Dissemination:**
An active approach of spreading evidence-based interventions to the target audience via determined channels using planned strategies.

(Rezin et al., 2008)

**Adoption:**
The decision of an organization to commit to and initiate an evidence-based intervention.

(Rabin et al., 2008)

**Implementation:**
The process of putting to use or integrating evidence-based interventions within a setting.

(Rabin et al., 2008)
Definitions

**Implementation:**
Implementation is the ART AND SCIENCE of incorporating innovations into typical human service settings to benefit children, families, adult, and communities.

**Sustainability:**
The extent to which an evidence-based intervention can deliver its intended benefits over an extended period of time after external support is terminated.

Includes:
- Maintenance
- Institutionalization
- Capacity building

In implementing best practices, what are the challenges?

Implementation stories

One review identified 61 implementation models.

Implementation distilled to three fundamental steps

Nexus
Where research and best practices meet

Each Phase includes:
- Clearly defined outcomes
- Keys to success

Nexus
Where research and best practices meet
OUTCOME
Individualized recommendations for implementation

KEYS TO SUCCESS
✓ Meeting with the right people
✓ Gathering information across all levels
✓ Identifying key questions for sustainability

OUTCOMES
Identify strategic priorities
Evaluate risk-based implementation plan
Funding plan
Stakeholders and success indicators
Strategy and action tools

KEYS TO SUCCESS
✓ Top-level support from leadership
✓ Cross-organization staff
✓ Peer network and engagement
✓ Participation of all employees

OUTCOMES
Identify strategic priorities
Evidence-based implementation plan
Training plan
Benchmarks and success indicators
Core implementation team

KEYS TO SUCCESS
✓ Buy-in and support from leadership
✓ Clear communication to staff
✓ Representative workgroup
✓ Empowerment of workgroup
✓ Participation of staff in evaluation

OUTCOMES
Identify strategic priorities
Evidence-based implementation plan
Training plan
Benchmarks and success indicators
Core implementation team

KEYS TO SUCCESS
✓ Consistent workgroup meetings
✓ Leadership and supervisor support
✓ Clear feedback mechanisms

OUTCOMES
Identify strategic priorities
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KEYS TO SUCCESS
✓ Consistent workgroup meetings
✓ Leadership and supervisor support
✓ Clear feedback mechanisms

Ideas for implementing MI

- Designate an MI Skills Development person or team to promote ongoing training and skills practice opportunities within the agency
- Establish MI learning circles (aka communities of practice, coaching circles) that meet regularly to sustain learning and strengthen skills
  - Groups of 4-8
  - Focus on practicing specific MI skills and incorporating them into practice conversations with accurate feedback and coaching
- Develop an organizational philosophy of care statement that aligns with MI spirit and practice
- Code audiotaped segments of MI conversations using the MICA (Motivational Interviewing Competency Assessment) or MITI (Motivational Interviewing Treatment Integrity) tool to provide feedback and coaching

Why MI skills development:
- Improvement in case management
- Improved patient satisfaction
- Increased staff retention

Why take MI skills training:
- Increased self-awareness
- Improved empathy
- Enhanced problem-solving skills

Why coding and coaching...
**Benefits for clients/residents**
- Feel safe, comfortable
- Feel accepted, respected, understood
- Willing to talk more
- Feeling valued for their own knowledge and expertise
- Open to making positive changes

**Benefits for staff/teams**
- Develop important skills and improve confidence
- Grow professionally
- Practice in non-coercive, strengths-based manner
- Focus on helping people make positive change
- Improved job satisfaction
- Better client outcomes
- Improved staff satisfaction and retention

**Benefits for coder/coaches**
- Enhance your own MI skills and proficiency
- Learn how to evaluate samples of MI practice
- Learn how to provide structured feedback/coaching
- Strengthen your clinical supervision skills
- Prepare for applying to become MINT trainer

- Include MI experience as a job requirement or preference when advertising for, screening, and hiring new staff, especially direct-service and supervisory positions
- In job interviews, ask applicants to provide MI-adherent responses to sample statements (e.g. Helpful Responses Questionnaire), demonstrate their MI skills in a “mock interview” in the moment, or submit a sample tape of their practice to be reviewed later
- Offer regularly scheduled introductory and advanced MI training opportunities (ensuring that participants are assigned to or already a part of an ongoing learning circle)
- Contract as needed with external MI coaches, trainers, and consultants to promote ongoing learning
- Encourage self-initiated learning by providing resources such as MI books, ebooks, articles, training tapes, skill-building exercises, and other learning tools
- Ensure that clinical supervisors are trained in MI and are MI-consistent in their supervisory methods
- In supervisory sessions, make it an expectation for supervisors to pay attention to staff progress in MI skill-building
- Include MI skill-building as a professional development goal for all practitioners in their job performance plans

- Provide opportunities for select staff to be trained in using the MICA (Motivational Interviewing Competency Assessment) or MITI (Motivational Interviewing Treatment Integrity) tool to code MI conversations for feedback and coaching
- Participate in MI-related clinical research studies (or possibly seek out opportunities to conduct research)
- Revise program intake forms and progress notes to reflect and promote an MI-consistent approach
- Create MI-related visual reminders (posters, signs, buttons, importance and confidence rulers)
- Develop an online MI discussion forum within your agency
- Encourage selected staff to become trained as MI trainers through the Motivational Interviewing Network of Trainers (MINT) and participate in the MINT community of practice

Initiate your own inspired ideas…
Ideas for implementing trauma-informed care

thank you
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Support to Implement Best Practices in Homeless Services

mock implementation plan

ACTIVITY