When Training is Not Enough
Implementing Clinical Best Practices
*Texas Conference on Ending Homelessness*
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t³ think • teach • transform

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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.

(Rabin et al., 2008)

Definitions

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

(Rabin et al., 2008)

Definitions

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.

Implementation Brief, Number 1; January 2009
National Implementation Research Network

Definitions

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

(Rabin et al., 2008)

In implementing best practices, what are the challenges?

In implementing best practices, what's helped?

Implementation stories

One review identified

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implementation models.

(Tabak et al., 2012)

Implementation distilled to three fundamental steps

Nexus©
Where research and best practices meet

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Where research and best practices meet

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

DISCOVER

DISCOVER

OUTCOME
Individualized recommendations for implementation

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

DEVELOP

DEVELOP

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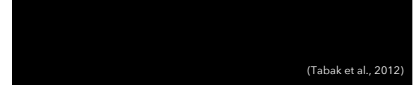✓ Evidence-based implementation plan
✓ Training plan
✓ Benchmarks and success indicators
✓ Core implementation team

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

ACT

ACT

OUTCOMES
✓ Meet individualized benchmarks
✓ Demonstrate improved outcomes
✓ Demonstrate capacity to sustain new practices

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

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- 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

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Courses > Live Online Courses > the MICA

Who should take this course:

- MI practitioners who want to improve their skillfulness
- Supervisors, coaches, and coders who want to provide feedback to staff
- Key leaders and administrators who want to support MI implementation
- Quality assurance and quality improvement professionals
- Health and human service providers who want to experience more skillful MI

The Motivational Interviewing Competency Assessment (MICA)

Description

The MICA was developed to assess competence in MI and provide a quality improvement process for practitioners to cultivate their use of MI intentions and strategies. The MICA allows coders, coaches and/or practitioners to form easily digestible, structured, specific feedback along the dimensions of the MI intentions and MI strategies. Unlike other coding tools, the language of the MICA is more directed to helping practitioners cultivate and express their MI intentions and is not as "adherence-focused." Instead, the MICA focuses on helping practitioners convey MI intentions and skills conversationally.

This fast-paced, interactive course will introduce participants to the MICA and provide multiple practice opportunities to evaluate conversations along five MI intentions, two MI strategies, and two coherence

Learning objectives:
- Offer feedback to share MI skill development
- Evaluate conversations along seven different MI dimensions
- Identify specific MI skills in conversations

Course facts:
- Dates:
  - Winter 2018: Fridays, January 12-February 9
  - Time: 12:00-1:15 PM ET
  - Subject: Motivational Interviewing (MI), Coding and Coaching

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Courses > Live Online Courses > Learning to Use the MITI (Version 4.2.1) for Coding and Coaching
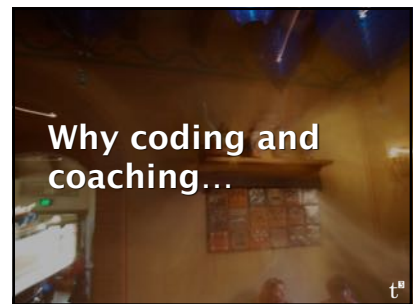
Why take this course:

Learn to use the MITI to:

- Improve your own MI skills
- Code MI conversations
- Provide structured feedback and effective coaching
- Facilitate MI communities of practice
- Enhance your clinical supervision skills
- Implement MI practice more fully in organizations
- Incorporate into continuous quality improvement efforts
- Prepare for applying to the MINT

Learning to Use the MITI (Version 4.2.1) for Coding and Coaching

How effectively are clinicians using Motivational Interviewing (MI)? The Motivational Interviewing Treatment Integrity (MITI) Version 4.2.1 behavioral coding system provides answers to this question. The MITI also yields feedback that can be used to increase clinical skill in the practice of MI. The MITI is intended to be used as a:

1. Treatment integrity measure for clinical trials of Motivational Interviewing
2. Means of providing structured, formal feedback about ways to improve MI practice in non-research settings
3. Component of selection criteria for training and hiring

Participants will engage in learning through webcasts, written materials, videos, audio recordings, exercises, and practice opportunities. Course instructors are experienced members of the Motivational Interviewing Network of Trainers (MINT).

Learning objectives:
- Describe the MITI 4.2.1 coding system and its uses
- Assign global scores in MI conversations
- Assign behavior codes to MI conversations
- Recognize effective and ineffective responses to change talk and sustain talk
- Evaluate a work sample, providing global ratings, behavior counts and skill development plan

Course facts:
- Dates:
  - Spring 2018: Fridays May 4-June 1

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

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- 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

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- 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

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- 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

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- 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

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Initiate your own inspired ideas…

Ideas for implementing trauma-informed care

thank you

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ACTIVITY

mock implementation plan

Support to Implement Best Practices in Homeless Services

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Onsite Training

Coaching (phone, video, email)

thinkt3.com