Conducting Formative Evaluation, Studying Implementation Facilitation, & Documenting Model Adaptation "Over the Shoulders" of Facilitators

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Acknowledgments

- Project facilitation team
  - Karen Anderson Oliver Ph.D. (facilitator)
  - Eva Woodward Ph.D. (facilitator)
  - JoAnn Kirchner M.D. (expert consultant)

- Consultation with Behavioral Health QUERI Implementation Coordinators
  - Mona Ritchie, Ph.D.
  - Jeff Smith

Overview

- Background on parent study

- Background on implementation facilitation

- Studying facilitation in the Tele-PCMHI project: Goals & Methods

- Lessons Learned

- Limitations/Challenges

Poll Question #1

- What is your primary role?
  - Researcher
  - Clinician or staff
  - Administrator, manager, or policy maker
  - Student, trainee, or fellow
  - Other

Poll Question #2

- Which of the following best describes your familiarity with implementation facilitation?
  - Very familiar
  - Moderately familiar
  - Slightly familiar
  - Not at all familiar

Parent Study: The Tele-PCMHI Project

- Hybrid type 2 pragmatic effectiveness-implementation trial: *Adapting & Implementing the Blended Collaborative Care Model in CBOCs* (CRE 12-310, Richard R. Owen, PI)*

- Adapting Primary Care-Mental Health Integration (PCMHI) for tele-delivery to rural community-based clinics in VHA (AR & LA)

- Studying implementation & effectiveness of Tele-PCMHI

*Owen RR, Woodward EN, Drummond KL, Deen T, Oliver K, Petersen NJ, Meit SS, Fortney JC, Kirchner JE. Using implementation facilitation to implement primary care mental health integration via clinical video telehealth in rural clinics: Protocol for a trial using a stepped-wedge design. (Protocol paper under review)

Step 1:
Develop Tele-PCMHI Service Delivery Model

- Expert panel process conducted to identify and come to consensus on the core & adaptable components of PCMHI via telehealth

  – Interviews w/ early adopters

  – Development of draft Tele-PCMHI service delivery model

  – Expert panel call (feedback & consensus on domains & components)

  – Revision & refinement of Tele-PCMHI service delivery model

Step 2:
Implement & Test Tele-PCMHI

- Implementation Facilitation (IF) strategy used to support implementation

- Research-funded psychologist hired for VAMC PCMHI program to provide PCMHI services via telehealth to 6 CBOCs

- Facilitation efforts at parent VAMC & all 6 CBOCs

- Stepped-wedge design – 2 clinics at a time
  - Currently in 4 of 6 CBOCs
  - Facilitators starting to engage wave three CBOCs

Background:
Implementation Facilitation

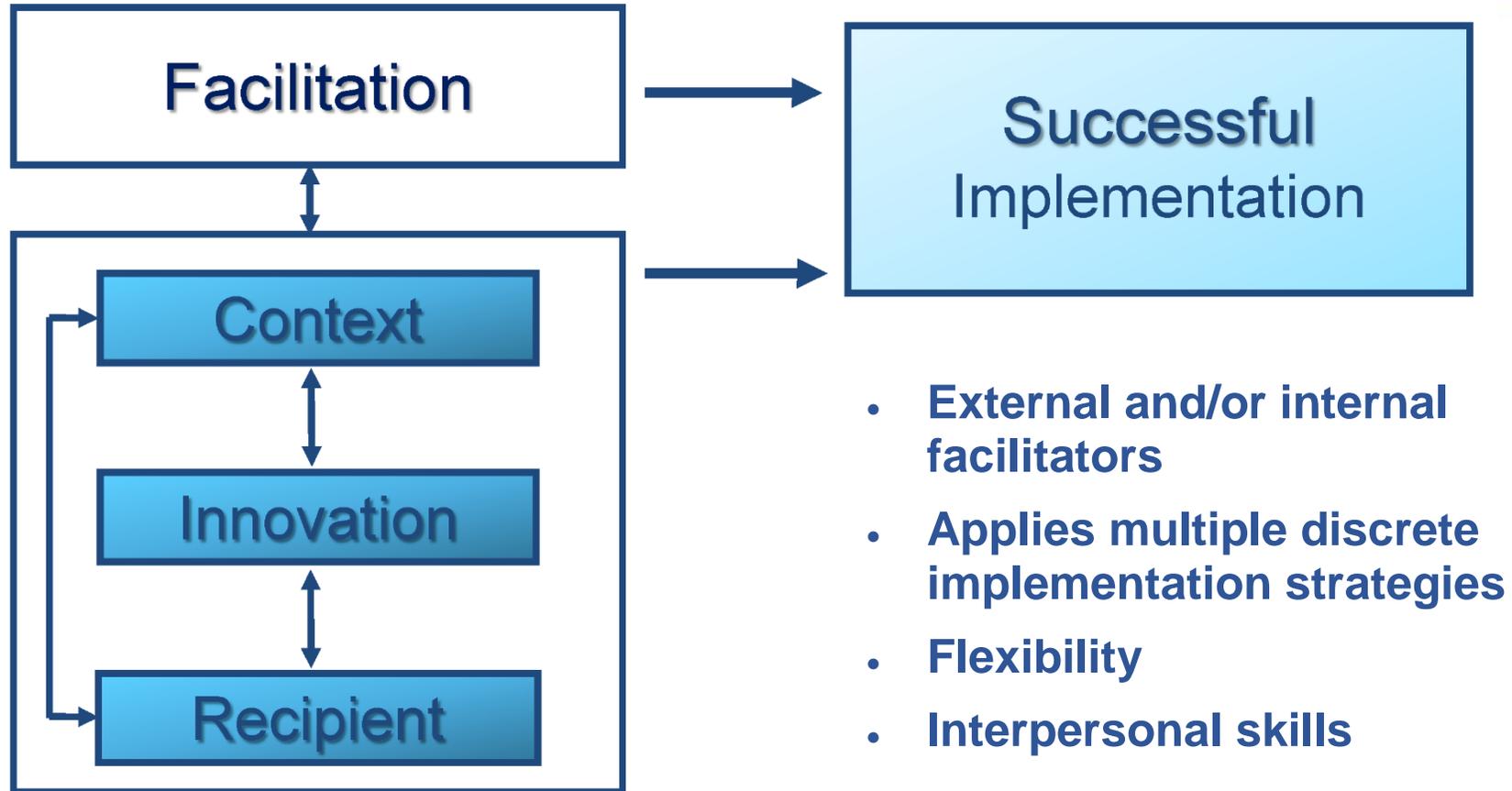# Innovations are challenging to implement

- Top-down initiatives/mandates are not sufficient

- Education efforts alone are rarely sufficient

- Readiness to implement differs across facilities/clinics

- Participation of multiple stakeholder groups is needed

- Provider & staff availability is limited

Implementation Facilitation

Process of **interactive problem solving** and **support** that occurs in a context of a recognized need for improvement and a **supportive interpersonal relationship.**

Powell, et al., Implement Sci, 2015

i-PARIHS Framework

- **External and/or internal facilitators**
- **Applies multiple discrete implementation strategies**
- **Flexibility**
- **Interpersonal skills**

Evidence for Implementation Facilitation

- Baskerville NB, Liddy C, Hogg W. Systematic review and meta-analysis of practice facilitation within primary care settings. Ann Fam Med. 2012;10(1):63-74. https://doi.org/10.1370/afm.1312

- Wang A, Pollack T, Kadziel LA, et al. Impact of practice facilitation in primary care on chronic disease care processes and outcomes: a systematic review. J Gen Intern Med. 2018. https://doi.org/10.1007/s11606-018-4581-9

Facilitation in the Tele-PCMHI Study

- ## Two external facilitators

    However…

    – One facilitator is also a PCMHI provider (part-time) in the program supporting the study's tele-PCMHI service

    → Some aspects therefore = more like internal facilitation (e.g., access to key stakeholders, insider understanding of program providing service, etc.)

- ## One experienced facilitator, one novice facilitator

- ## Collaborative facilitation processes

    – Facilitators work together on all sites (vs. dividing sites up)

Multiple Study Goals in Examining Implementation Facilitation

- Document & analyze facilitation activities

- Examine dual-facilitator process/strategy

- Document facilitation mentoring & learning processes in real-time

- Conduct formative evaluation

- Track & examine adaptation & tailoring of intervention

Formative Evaluation

- "A rigorous assessment process designed to identify **potential** and **actual influences** on the progress and effectiveness of implementation efforts" – Stetler et al. 2006

- May involve quantitative (surveys, fidelity measures) &/or qualitative methods (interviews, focus groups, observations)

- May be conducted at one or more stages of implementation:
  - Developmental FE → pre-implementation (diagnostic)
  - Implementation-focused & progress-focused FE → during implementation
  - Interpretive evaluation → post-implementation (using data above + new data)

Tele-PCMHI Study: FE "Over the Shoulders" of Facilitators

- FE performed as part of gold-standard implementation facilitation by study facilitators (developmental & implementation/progress-focused)
  - Documented by evaluator
  - Discussed in implementation team meetings & facilitation debriefings
  - Analyzed by evaluator
  - Informs interpretive FE post-implementation

- Interpretive FE conducted by evaluator
  - Results from above + interviews w/ study site personnel

Methods: Approach

- Methods adapted from Ritchie study of facilitation of PCMHI implementation*

- Evaluation team member (a medical anthropologist/implementation scientist) "embedded" in implementation team

- "Fly on the wall" role in weekly implementation team meetings

- Loosely structured dyadic debriefing interviews weekly with facilitators

*Ritchie, Parker, Edlund, & Kirchner 2017

Methods: Data Collection

❑ Detailed documentation of team meetings (fieldnotes, quotes)

❑ Detailed notes taken during debriefing interviews (on-the-fly transcription)

❑ Facilitators forward key email exchanges with stakeholders

❑ Facilitators complete time & activity tracking logs

Dispatches from the Field

First "barrier" encountered (& texted to me as evaluator):

"Karen D—our first barrier…getting gas at the VA gas station for the VA van that takes a special type of fuel!"

Methods: Preparing data for analysis

❑ Notes cleaned immediately following each meeting / interview

❑ Notes divided into separate documents, numbered, dated
  - All Sites (e.g., *All Sites 15, 05.01.18*)
  - Site-specific documents (e.g., *Site A 19, 07.05.18*)

❑ Final notes uploaded into Atlas.ti for coding

Methods: Data Analysis

❏ Content analysis process

    o Data extraction & rapid analysis of key themes

    o Coding & analysis using Atlas.ti

❏ Inductive-deductive approach informed by:

    o iPARIHS (Harvey & Kitson 2016)

    o Inductive/emerging themes

    o Research on assessing adaptations (Stirman et. al 2013, Rabin et al. 2018)

Example: iPARIHS Constructs as Codes

- Innovation
  - Evidence, complexity, relative advantage, usability, etc.

- Context
  - Leadership support, structures/systems, culture/climate, policies, etc.

- Recipients
  - Skills, knowledge, values, beliefs, motivation, etc.

- Facilitation ("active ingredient")
  - Codes for facilitation activities

Emerging Theme: "Lagniappes"

- Southern cultural term "lagniappe" (a little something extra)

- Unanticipated positive consequences of implementation facilitation
  - Something that benefits a clinic or the system, was unforeseen, & beyond original scope of IF goals
  - Actual or potential benefit
  - Discovered during IF for the innovation, but was tangential to or larger than implementing Tele-PCMHI

- Example: IF uncovered suicide protocol need

- "Lagniappe" became a theme for a focused rapid analysis via data extraction & is now an inductive code

Lessons Learned (So Far...)

- Benefits of documenting implementation team meetings:
  - Capturing expert mentoring in action
  - Capturing consultations w/ operations partner (MH leadership co-I attends)
  - Feeds/seeds debriefing interviews (usually done same-day)

- Debriefings in lieu of FE site interviews:
  - Reduces burden on sites, clinic personnel
  - Efficient: eliminates common FE research barriers (recruitment, scheduling)
  - No waiting time for facilitators to receive FE data from evaluation team

- Debriefings as value-added for facilitators:
  - Both facilitators report usefulness of debriefings to planning process
  - New facilitator finds debriefing process helpful to learning/improving facilitation skills

Limitations/Challenges

- FE relies upon facilitator perceptions vs. site interviews
  - Evaluation team not engaging w/ sites directly until post-implementation
    - But… facilitators perform FE naturally as part of gold-standard facilitation
    - And… debriefings provide opportunity for dialogue & analytical conversation about site context, barriers, facilitators, etc. (facilitators & interviewer are all implementation scientists)

- LOTS of data produced by 2 hrs of weekly documentation!
  - Keeping up with data analysis is a significant challenge
    - → Coding w/ Atlas.ti, but with rapid analysis approach/mindset
    - → Data extraction of key themes as needed, team analysis

Resources

- HSR&D Cyberseminar, "Facilitation: An Evidence-Based Implementation Strategy," JoAnn Kirchner, MD & Mona Richie, Ph.D., MSW, 04/07/16, https://www.hsrd.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=1144

- HSR&D Cyberseminar, "The Use of Facilitation as an Implementation Strategy," JoAnn Kirchner, MD, 12/01/16, https://www.hsrd.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=1233

- HSR&D Cyberseminar, "An Introduction to the Integrated-Promoting Action on Research Implementation in Health Services (i-PARIHS) Framework," Jeffrey Smith, 11/02/17 https://www.hsrd.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=2389

Resources

- Implementation Facilitation Manual: Using Implementation Facilitation to Improve Care in the Veterans Health Administration (Version 2). Ritchie MJ, Dollar KM, Miller CJ, Oliver KA, Smith JL, Lindsay JA, Kirchner JE. Veterans Health Administration, Quality Enhancement Research Initiative (QUERI) for Team-Based Behavioral Health, 2017. Available at: https://www.queri.research.va.gov/tools/implementation/Facilitation-Manual.pdf

- QUERI Implementation Guide: Implementation Guide. Department of Veterans Health Administration, Health Services Research & Development, Quality Enhancement Research Initiative. Updated 2013. Available at: https://www.queri.research.va.gov/implementation/default.cfm

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- Rabin et al. 2018 Systematic, multimethod assessment of adaptations across four diverse health systems interventions. Front. Public Health 6:102

- Ritchie, Parker, Edlund, & Kirchner 2017. Using implementation facilitation to foster clinical practice quality and adherence to evidence in challenged settings: A qualitative study. BMC Health Services Research 17:294

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