# Implementation Science: What Is It and What Does It Do For Me?

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20-25 years





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WE DICAL SCHOOL \* Implementation Science & Practice Advances Research Center School \* Improving Mental and Behavioral Health Services for Better Lives and Stronger Communities

# The service gap in mental health

- Only 12.5% of people with a mental health condition identify themselves as "recovered" or "in-recovery" (SAMHSA 2019)
- 24% report an unmet need for community mental health treatment
- Access to recovery-oriented interventions is still limited (Mental Health America, 2020)
  - 0.3% of the eligible population receive Supported Employment services (Drake et al., 2020)
  - 3.1% receive Supported Housing (ISMICC 2017)

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# Is "Implementation Science" & "Implementation" different?

Implementation:

- a specified set of activities designed to put into practice an activity or program of known dimensions or characteristics
- implementation processes are
  - purposeful
  - described in sufficient detail such that independent observers can identify the presence & strength of the "specific set of activities"

National Implementation Research Network, University of North Carolina 2021



## Is "Implementation Science" and "Implementation" different?

#### **Implementation Science**

The **study of methods** to promote the adoption and integration of evidence-based practices, interventions, and policies into routine health care and public health settings to **improve the impact on population health**.

National Institutes of Health, 2020



### **Frameworks of Implementation**

### Descriptive

### Example:

#### CFIR: Consolidated Framework for Implementation Research (Damschroder 2009)



Characteristics of Individuals	<ul> <li>Knowledge of intervention</li> <li>Individual identification with the organization</li> </ul>
	Culture
	Implementation climate
	• Networks and communication
Inner Setting	• Readiness
	Adaptability
	Complexity, Cost
	Design quality and packaging
Intervention Characteristics	• Evidence strength and quality
	External policy and incentives
Outer Setting	Patient needs and resources, Peer pressure
	Engaging
	Executing
Process	Planning
	• Reflecting and evaluating
	Acceptability, Adoption
Outcomes	Client Outcomes

# Frameworks of Implementation

#### **Process Oriented**

Example: Knowledge to Action

(Graham et. al.2006)





#### Frameworks of Implementation Process Drivers



#### Example: 3 C's of Program Change (Farkas, 2006; 2008)

- Culture: The values & implicit rules, ways of doing things
- **Commitment:** Stakeholder/leadership belief (both internal and external) that any changes will be positive, are possible and that there is sufficient support for the change
- **Capacity:** Program's resources (e.g., staff/leadership knowledge, attitude, skills; organizational infrastructure) to support the implementation of the innovation

#### **Promoting Good Implementation - "Drivers"**

© Fixsen & Blase, 2008

#### **Evidence-Based Practices [Quality, Sustainability]**



# **Example of Implementation Supports:** Coaching and Supervision

### **Purposes:**

- Ensure implementation with fidelity
- Develop clinical and practice judgment
- Provide feedback to selection and training processes
- Grounded in best practices







#### **Example Implementation Support Decision Support Data System**





- Measure Fidelity (are we following the model correctly) AND Measure Outcomes BECAUSE you need to know:
  - Are we having an implementation problem?
  - Are we having an effectiveness problem?



# **Application to Smoking Cessation Model**

If we were to implement this into ACCS successfully...

- What are some the leadership/organizational cultural changes that may need to occur first?
- What are some of the organizational drivers (e.g., facilitative administration, system intervention), to consider putting into place to facilitate success?
- What are some of the competency drivers that may be necessary?





Implementation Science and Practice Advances Research Center (iSPARC)

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Implementation Science and Practice Advances Research Center (iSPARC) > DMH Workforce Technical Assistance

MA Department of Mental Health Research Center of Excellence Technical Assistance for the Massachusetts Department of Mental Health Workforce

#### **iSPARC** Technical Assistance

Massachusetts Department of Mental Health Research Center of Excellence Technical Assistance Request Form

We are here to help the MA DMH workforce with any technical assistance (TA) needs they may have by providing information based on research. iSPARC can provide expertise and information on a wide range of mental health-related topics. We provide Basic TA (e.g., tip sheets, brief phone consultation, etc.) at no cost and can provide more intensive TA (e.g., policy development, training, etc.) which requires approval of your area director or deputy commissioner, or for a fee.

Please note that we do <u>not</u> provide clinical consultation, behavioral services, or referrals. You can contact resources such as NAMI Mass COMPASS at 617-704-NAMI (4264) or by email at <u>COMPASS@namimass.org</u>, or contacting the William James College INTERFACE Helpline at 617-332-3666, ext. 1411 or 888-244-6843 (website: <u>Interface.williamjames.edu</u>) for resource information and/or provider referrals from a mental health professional.

\*

Please select the type of information you are requesting. We will respond within 3 business days.

**TA Request Form** 

\*Your name

#### \*What DMH regional area is this request from?

-- Select an option --



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(https://www.umassmed.edu/ sparc/sparc-ta/)