Integrating Evidence-Based Practice into Strategic Planning: Building an Evidence-Based Continuum

CEBC Hosted Webinar

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Cambria Rose Walsh, LCSW, Project Manager

Jennifer Rolls Reutz MPH, Research Coordinator

www.cebc4cw.org
Today we will focus on…

- Increasing knowledge of practical use of the CEBC website
- Understanding the importance of Exploration, the initial phase of implementation
- Learning ways to apply lessons learned from the CEBC work in the areas of Exploration to your own communities
Welcome to the CEBC:
California Evidence-Based Clearinghouse for Child Welfare

Information and Resources for Child Welfare Professionals

The California Evidence-Based Clearinghouse for Child Welfare (CEBC) provides child welfare professionals with easy access to vital information about selected child welfare related programs. The primary task of the CEBC is to inform the child welfare community about the research evidence for programs being used or marketed in California.* The CEBC also lists programs that may be less well-known in California, but were recommended by the Topic Expert for that Topic Area.

- How do You Use the CEBC?
- What’s New on the CEBC?
- What is Evidence-Based Practice?
- How are Programs on the CEBC Reviewed?
- How is Culture Related to Evidence-Based Practice?
- Sign-up to get Email Alerts!

* Please note that the CEBC was created for informational and educational purposes and as such does not endorse any of the programs listed on the website.

Information presented on the CEBC website is considered public information and may be distributed or copied. When using information obtained from the CEBC, we ask that you please use the following acknowledgment: Material/Image/Information obtained from the California Evidence-Based Clearinghouse for Child Welfare (CEBC) at www.cebc4cw.org.
CEBC Project Began in 2004

- CDSS - Office of Child Abuse Prevention
- Child and Adolescent Services Research Center (CASRC)
- Guidance from our Advisory Committee and Scientific Panel
- The CEBC was launched on 6/15/06
- 36 Topic Areas on CEBC website with over 280 programs

and More to be Added Soon!
Goal of The CEBC:

- Provide easy access to information about child welfare related programs through a user-friendly website.

Information on Practices arranged in Topic Areas

- Brief and detailed summaries for each reviewed program – each user can determine the level they want.
- Programs are rated on level of scientific support.
EBPs in Child Welfare

- Less is known about EBPs in Child Welfare than other areas such as medicine and mental health

- No one was looking specifically at EBPs for Child Welfare services and populations
  - Unique population with complex needs
Components of EBPs

- Best Research Evidence
- Best Clinical Experience
- Consistent with Family and Client Values
CEBC’s Definition of EBP for Child Welfare

- Best Research Evidence
- Best Clinical Experience
- Consistent with Family & Client Values

[Based on Institute of Medicine, 2001]
What the CEBC Brings to the Equation...
Best Research Evidence
What the CEBC Brings to the Equation...

- Detailed information to help you determine if:
  - The program would be consistent with Family & Client Values
  - The program would fit with what your Clinical Experience says is needed
Child Welfare Relevance and Outcomes

• Each program is reviewed for its relevance to Child Welfare Services populations

• Examine whether program has outcomes related to the Child and Family Services Reviews (CFSRs) in their published, peer-reviewed research:
  – Safety, Permanency, Well-being
Topics Currently on the Website

- Anger Management, Domestic Violence, and Substance Abuse
- Behavior Management including Parent Training
- Core Child Welfare Services including Placement and Reunification
- Engagement and Parent Partnering Programs
- Mental Health
- Prevention and Early Intervention
- Support Services for Youth in the Child Welfare System
CEBC Programs by Scientific Rating

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<th>Scientific Ratings</th>
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Other materials on CEBC website

• Reviews of commonly used Screening and Assessment tools
• Training materials
  – Webinars and on-line tutorials
• Implementation resources
  – Selection guide
  – Program-specific resources
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1-2-3 Magic: Effective Discipline for Children 2-12

**Brief Description**

The information in this program outline is provided by the program representative and edited by the CEBC staff. The 1-2-3 Magic: Effective Discipline for Children 2-12 program has been rated by the CEBC in the area of Parent Training.

- **Target Population:** Parents, grandparents, teachers, babysitters, and other caretakers working with children.

1-2-3 Magic is a group format discipline program for parents of children approximately 2-12 years of age. The program can be used with average or special needs children. 1-2-3 Magic divides the parenting responsibilities into three straightforward tasks: controlling negative behavior, encouraging good behavior, and strengthening the child-parent relationship. The program seeks to encourage gentle, but firm, discipline without arguing, yelling, or spanking.

**View detailed report which includes:**
Essential Components, Published Relevant Peer-Reviewed Research, Education and Training Resources, etc.

**Contact Information**

Name: Thomas W. Phelan, PhD  
Agency/Affiliation: Parent Magic, Inc.  
Website: www.parentmagic.com  
Email: pm@pmi.cnchost.com  
Phone: (630) 790-9600  
Fax: (630) 469-4571
1-2-3 Magic: Effective Discipline for Children 2-12

Scientific Rating:

2

Supported by Research Evidence
See scale of 1-5

Child Welfare System Relevance Level:
Medium
See descriptions of 3 levels

Jump to...
- Brief Description
- Essential Components
- Child/Adolescent Component
- Parent/Caregiver Component
- Group Format
- Recommended Parameters
- Delivery Settings
- Homework
- Languages
- Resources Needed to Run Program
- Minimum Provider Qualifications
- Education and Training Resources
- Implementation Information
- Relevant Published, Peer-Reviewed Research
- References
- Contact Information

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Essential Components

1-2-3 Magic is typically taught in a group format. The program defines two basic kinds of problems that children present to adults; Stop Behavior and Start Behavior. When adults are frustrated with their youngsters, the kids are either (1) doing something the adults want them to Stop, or (2) not doing something the adults would like them to Start. Some Start behavior tactics (behavioral management techniques) include using: positive verbal feedback, a kitchen timer method, a docking system, natural consequences, and charting.

1-2-3 Magic has three simple steps:

1. Control Obnoxious Behavior. Learn a simple technique to get your kids to Stop doing what you don’t want them to do, and (1) give them a warning, (2) don’t give them a warning.

2. Start Desired Behavior. Learn a simple technique to get your kids to Start doing what you want them to do.

3. Reward Positive Behavior. Learn a simple technique to reinforce what you want your kids to do, and (1) give your kids reinforcement, (2) don’t give your kids reinforcement.
Implementation Information

Since *1-2-3 Magic: Effective Discipline for Children 2-12* is highly rated on the Scientific Rating Scale, information was requested from the program representative on available pre-implementation assessments, implementation tools, and/or fidelity measures.

Show Implementation information...

Pre-Implementation Assessments

There are no pre-implementation assessments to measure organizational or individual provider readiness.

Implementation Tools — for the program (e.g., Implementation guides or manuals)

There are Leader Guides and a Presentation Package, which provide materials to assist trainers in giving 1-2-3 Magic workshops. These can be found on the website: [www.parentmagicstore.com/All-Products/Professionals-Presenters](http://www.parentmagicstore.com/All-Products/Professionals-Presenters)

Fidelity Measures

There are no fidelity measures available for this program.
This program is rated a "2 - Supported by Research Evidence" on the Scientific Rating Scale based on the published, peer-reviewed research available. The practice must have at least one rigorous randomized controlled trial with a sustained effect of at least 6 months. Please see the Scientific Rating Scale for more information.

**Child Welfare Outcome:** Child/Family Well-Being


**Type of Study:** Randomized Controlled Trial with wait-list control
**Number of Participants:** 222

**Population:**
- **Age range** — 3 - 4 years
- **Race/Ethnicity** — Majority White
- **Gender** — Not Specified
- **Status** — Volunteers recruited through community ads.

**Location / Institution:** Toronto, Canada

**Summary:** (To include comparison groups, outcomes, measures, notable limitations)
Families were randomly assigned to 1-2-3 Magic or a wait-list control group. Measures were taken before and one month after the intervention and also at one-year post-intervention for a cohort of 70 intervention group participants. Measures of parenting behavior included the Parenting Scale (PS), which measures the dimensions of Over-reactivity, Lackness, and Verbosey. Parents filled out the Preschool Behavior Questionnaire (PBQ), which measures child behavior on three factors: Hostile/Agressive, Anxious, and Hyperactive/Distractable. They also completed the Preschool Characteristics Questionnaire (PCQ) which assesses levels of "difficult" behavior and, as a self-report, the Brief Symptom Inventory (BSI), which measures issues such as depression, hostility and anxiety. All subscales of the PS, PBQ, and PCQ improved for the intervention group versus the control group pre- to posttest. Hostility improved on the BSI. At one-year follow-up, the intervention subgroup maintained improved results on the PS and the PBQ. PCQ difficult behavior score improvements were not maintained. Also, when examined more closely this subgroup did not exhibit the pretest posttest gains on the PBQ Hyperactive/Distractible and the BSI Hostility score shown by the total intervention sample. One limitation was that the sample overall was white, middle-class and educated and results might not generalize to other groups.

**Length of post-intervention follow-up:** 1 year

**References**

Implementation Resources Section

- Implementation Definitions
- Implementation Tools
- Implementation Information for Programs Rated at the Highest Levels on the CEBC Scientific Rating Scale
- Implementation Approaches
- Implementation Resources Reference List for the CEBC

Welcome to the Implementation Resources section of the California Evidence-Based Clearinghouse for Child Welfare (CEBC). This section of the website provides child welfare professionals with useful information to assist in the process of selecting and implementing Evidence-Based Practices (EBPs).

There is a wealth of practical experience documented in the literature on implementing new practices. However, the actual research on implementation both in the realm of child welfare, as well in related fields, is still in its early stages. The limited amount of existing implementation research in child-welfare focuses on factors (e.g., research-practice partnerships, provider attitudes, technical assistance teams, organizational culture and climate) that facilitate or impede the implementation of EBPs.

Over the coming years, data from completed studies and studies currently under way will help to inform policy makers, agency directors, providers, and consumers about the best ways to facilitate implementation of evidence-based practice in real-world practice settings. Additional resources and information will continuously be added to this section of the CEBC website that will keep the consumer up-to-date on the emerging field of implementation.
Selection Guide for EBPs in Child Welfare

The California Evidence-Based Clearinghouse for Child Welfare (CEBC) was designed to provide clear and concise information about practices that are commonly used in child welfare. Each practice is rated for both the level of scientific evidence as well as its relevance to child welfare. Selecting a practice that is a good fit with one’s organization goes beyond choosing a practice that is scientifically rated a "1" on the website. This guide is designed to assist child welfare professionals in selecting which practices highlighted on the CEBC website to implement in their agency. The basic concepts of this guide can also be applied to practices that are not highlighted on the website.

The information in this guide is based on the work of Trisha Greenhalgh and her colleagues (Greenhalgh, Robert, Macfarlane, Bate, & Kyriakidou, 2004). Greenhalgh conducted a systematic literature review that addressed the question: "How can we spread and sustain innovations in health service delivery and organization?" Using the key findings of this review, we have designed a guide to using the CEBC to help make critical decisions about selecting a practice for implementation.

Key Findings:

For each key finding below, we provide:

- A key question that agencies should consider.
- Where in the CEBC’s detailed view of the program description you may be able to find information to help answer that question.
- An example on how that key finding can be applied to a real world situation.

» Complexity

» External Compatibility

» Internal Compatibility

» Knowledge Required to Use It

» Match of Skill Set
Questions and Answers
Time for Two More Polls!
CEBC is a neutral source of information on EBPs

• “The CEBC helps to identify and disseminate information regarding evidence-based practices relevant to child welfare“
• Cannot support active implementation of specific programs
• Already provide information on implementation resources for highly rated programs
Based on discussions with counties, they needed help with

- Determining what service areas needed to be targeted and what the EBP options were

- Figuring out which EBP would be the best fit in their current system

- Planning for Implementation
Assessment & Planning Initiative

- Wanted to offer a more formal assistance process to California counties

- Developed a pilot assessment and planning process to help increase the use of EBPs in their community.
Each County Receives:

• Needs assessment related to the current level of EBPs within targeted areas identified by the agency
  • Web survey based on CEBC template

• Assistance in looking at available data to analyze needs within the county
Each County Receives:

- Written Road Map with individualized plan of how to increase the use of appropriate EBPs and identification of several appropriate EBPs to consider, based on the needs assessment

- In person, phone and email consultation
Tulare County in Central California

Tulare Identified 6 areas from their System Improvement and Self Assessment Plans that they wanted assistance with

Narrowed it down to 2: Parenting Education and Aftercare Services
How does the CEBC Support Implementation?
Implementation Support

- Implementation is not always an easy process
- EBPs are not “one size fits all” – what works for one agency may not work for you
- Agencies need assistance with the entire implementation process
Implementation Support

• Some EBPs already have their own implementation support mechanisms (MST Services, MTFC Inc, etc)
  – Readiness Checklists, etc

• BUT these assume you already know what you want and need to do.
Common Implementation Mistakes

• Deciding to implement a new practice because you heard about it at a conference or meeting

• Adopting a new practice without looking at the existing practices and data

Before you seek the answer, be sure you are asking the right question.
Example #1

• County wants to reduce re-entry through better post-reunification support services

• How do you know you need better post-reunification services?
• Need to look at data regarding reasons for re-entry
EPI S Phases of Implementation

EXPLORATION -> PREPARATION -> IMPLEMENTATION -> SUSTAINMENT

Exploration Phase

• Actively **considering** the possibility of implementing an evidence-based practice

• Example: Agency wants their services to be more evidence-based

Exploration Phase

• A key step involves **awareness** of an issue that needs to be addressed in a more effective way.

• Example: Agency data shows that parent education program is not having desired outcomes.

Sample Tasks in the Exploration Phase:

• **Work with stakeholders** to identify factors that may support or detract from effective implementation of a new program
  - Funding issues
  - Existing agency policies and practices
  - Staffing issues

Sample Tasks in the Exploration Phase:

- **Determine what areas** need to be addressed with evidence-based practices
  - Where do weaknesses currently exist in your services?
  - What data do you have on these issues?
  - What are the outcomes you want to see?
  - Drill down past symptoms to causes
    - Ask why 5 times

Sample Tasks in the Exploration Phase:

- Consider which potential EBPs target the core issues you want to address
- Develop internal support for the changes at administrative and staff levels
- Consider the fit of the potential EBPs in your organization
  - Supervision process, IT, documentation requirements, etc.
  - Referral process changes?
- Fit with workforce

Example #2

• County wants to make parenting education “more evidence-based”

• CEBC review showed that they had several parenting education EBPs already in place
  - They weren’t thinking of them as parent education because they weren't all traditional classroom based programs.
Example #2

• CEBC helped county see that parenting education is a continuum
  – Start with a group based program and then move to more intensive

• All parenting education is not equal
  – General parenting skills, difficult child behavior, etc

• More is not always better…
Example #3

- County wanted to determine the evidence level for their current services and determine what EBPs to add
  - County contracted with multiple providers to deliver “mental health services” but did not know exactly what was being delivered by the providers
Example #3

• Several EBPs were in place through contract, but they were **not always being used with the appropriate target population** and it was not clear how/why the EBP were selected.

• Suggestion: Revise assessment and referral process
Example #3

• Several EBPs were available locally, but the agency *was not referring to them*, even when they already had contracts with the providers for other services.

• Suggestion: Revise referral process
Applying what the CEBC has learned

How to implement an EBP in your own community
Getting Started

• Set up a small group of individuals who will work on the project
  – May already have a group in place, establish a subcommittee, etc
  – Incorporate different type of members – administrators, supervisors, front line, contractors, etc.
  – Involve key stakeholder representatives
Set the Stage

• Determine the area(s) of interest
  - Identify 3-5 potential areas

• Look at the data that is available
  - Population demographics
  - Indicators of need
  - Referral and retention rates
  - Existing contracts – numbers served, outcomes, waiting times, etc.
Narrow the Focus

• Identify 1 or 2 areas to work on
• Clearly define the issue and the outcomes you want to see from practice changes
Exploration: Identify Potential Programs

• Use the CEBC website

• Talk to others in the field – similar states / counties

• Put together a comparison document / table
Exploration: Determine Program Fit

- Use the CEBC Selection Guide for EBPs in Child Welfare to examine each program
  - Complexity
  - External Compatibility
  - Internal Compatibility
  - Knowledge Required to Use It
  - Match of Skill Set
  - Observability of Benefits
  - Relative Advantage
  - Reinvention
  - Risk
  - Support
  - Trialability
Exploration: Narrow the programs

• Identify 1 or 2 programs that fit well

• Take these programs to the larger group for feedback
  – Child Welfare stakeholders
  – Community forums
Put it in Writing

• Summarize the process and feedback

• Make a clear recommendation

• Determine how the next steps will occur
  – Preparation phase of Implementation
Examples of Applying the Exploration Steps
Example #4
Domestic Violence

• County sees an increase in referrals that have a domestic violence (DV)/intimate partner violence (IPV) component
  - Some are families that are re-entering the system

• County wants to put new service(s) in place for these families
Example #4
Domestic Violence

• Before deciding on what to implement, the first step needs to be figuring out what the true problem is…
  – **Why** are you seeing an increase in families with domestic violence involvement?
  – **Who** are these families?
  – **What** are their needs?
  – Etc, etc…
Example #4
Domestic Violence

• Issue: Continued DV/IPV in families that have received services in the past

• Look at what Batterers Intervention programs are in place in your area
  – How effective are they? Outcomes?
  – Retention rates?
  – Recidivism rates?
Example #4
Domestic Violence

• Issue: Women need **help accessing DV and related services** over time

• Example: Community Advocacy Project
  – Home and community-based advocacy services
  – Empowerment-based, strengths-focused intervention designed to increase women's quality of life and decrease their risk of re-abuse.
Example #4
Domestic Violence

• Issue: **Young child neglect** in families with DV histories

• Look at what DV related services are available for mothers and children

• Example: Child-Parent Psychotherapy
  – Helps re-establish the parent-child bond in cases of trauma, DV, etc.
Example #4

Domestic Violence

- **Issue:** Mothers with DV histories need help parenting in a more positive way.

- **Example:** Project SUPPORT
  - Designed for families that have been in DV shelters
  - Supportive services for mother
  - Parent training to address behavior problems in families with DV history
Preparation Phase

• After you have identified the EBP you want to implement, the tasks are much more specific to the individual EBP
• Work with the developer to see what assistance or materials they offer
• Recommendation: one person ultimately responsible for overseeing the process
Preparation Phase

• Example tasks
  - Staffing decisions
  - Timetables
  - Community/stakeholder meetings
  - RFPs and/or contract changes
  - Training plan
  - Etc, etc, etc
Final Thoughts

• Successful implementation of any new program requires
  – careful planning
  – thoughtful selection
  – detailed preparation

• All of this needs to occur before anything is actually implemented
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For More Information:

Cambria Rose Walsh, LCSW, Project Manager
Chadwick Center- Rady Children’s Hospital-San Diego

Jennifer Rolls Reutz, MPH, Research Coordinator
Child and Adolescent Research Center- Rady Children’s Hospital-San Diego

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