

Appendix E7: CEBC 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 to implement in their agency. The information in this guide is based on the work of Trisha Greenhalgh and her colleagues, who 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 help make critical decisions about selecting a practice for implementation.

Please note that there is an Implementation Information section in the CEBC Program Description for each program that is rated a 1, 2, or 3 on the CEBC Scientific Rating Scale. The section includes information on Pre-Implementation Materials, Formal Support for Implementation, Fidelity Measures, and Implementation Guides. These are additional items that may be helpful to consider when comparing different programs for selection.

This Guide is meant to assist in leading discussion about the selection process. It is suggested that it be used in conjunction with the *Selection Guide Worksheet* (Appendix E8) to note information from the discussion on each of the practices being considered.

Ease of Use

Key Questions:

- How complex is the program?
- How easily will the key players be able to understand the practice?
- Will the complexity make it more difficult to describe the practice to stakeholder and key internal and external partners?
- Can the program be broken down into smaller, more manageable parts for implementation?

CEBC Program Description Sections to Review:

- Essential Components
- Recommended Parameters (Duration and Intensity)
- Identified Resources Necessary to Implement Program
- Education and Training Resources

Real World Example:

An agency explored multiple parent training programs and decided to choose the one that would be easiest for the staff to understand. The one they chose had the option to train the staff on the program in segments, learning new skills a few at a time, as opposed to training the staff on the whole program and learning all the new skills at the same time.

External Compatibility

Key Questions:

- How compatible is the practice with the beliefs and values of the local community and clients?
- Is the practice compatible with the referral sources currently in place in the community – will they feel comfortable referring clients to it?

CEBC Program Description Sections to Review:

- Target Population
- Essential Components
- Recommended Parameters
- Delivery Setting
- Languages
- CWS Relevance
- Relevant Research (look at the types of populations involved in the research – how similar are they to the desired target population?)

Real World Example:

A community has been struggling with finding services that will engage parents in treatment for their substance abuse issues. After holding a stakeholders meeting and discussing possible treatment programs, it is agreed that adding Motivational Interviewing (MI) into the existing substance abuse programs would help to increase parents' engagement in substance abuse services.

Financial Considerations/Relative Advantage

Key Questions:

- What financial resources to fund the practice exist, both in the short and long term?
- What is the cost for training and consultation?
- Does the practice have a clear advantage for the organization, in terms of efficiency or cost-efficiency, compared to what is currently being done?

CEBC Program Description Sections to Review:

- Essential Components
- Recommended Parameters
- Identified Resources
- Education and Training Resources

Real World Example:

After implementing Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT), a short-term therapeutic intervention, the organization was able to better serve its clients by decreasing the time clients waited to receive services.

Internal Compatibility

Key Questions:

- How does the practice fit with the agency/workforce norms, values, and beliefs?
- Will it require a radical change in thinking or process?
- How much change will be required of the existing workforce – training, new processes, new forms, etc.?

CEBC Program Description Sections to Review:

- Target Population
- Essential Components
- Recommended Parameters
- Delivery Setting
- CWS Relevance
- Relevant Research (look at the types of populations involved in the research – how similar are they to the desired target population?)

Real World Example:

Therapists at an agency have been trained in psychodynamic techniques and have a long history of using psychodynamic approaches with clients. The agency director is considering implementing Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT). Based on the clinical background of the therapists, this could be a difficult transition and would have to be explored in depth to determine if the therapists would be willing to make a radical shift in their treatment approach.

Knowledge Requirements

Key Questions:

- How much training is required to implement the program?
- Can the skills required to deliver the program be applied in other contexts in which the staff works (e.g., can home visiting skills be applied to routine case work practice)?

CEBC Program Description Sections to Review:

- Education and Training Resources
- Minimum Provider Qualifications
- Essential Components

Real World Example:

An agency with only two full-time staff and multiple interns is considering having the staff trained in Triple P, but decides that it would be too difficult to have that knowledge transferred to the next group of interns once the current interns leave.

Match of Skill Set

Key Questions:

- What education level or pre-existing skill set is required for staff?
- How does this fit with the existing workforce in the community?
- Are staff with the appropriate skill set/education level available to recruit?

CEBC Program Description Sections to Review:

- Education and Training Resources
- Minimum Provider Qualifications

Real World Example:

An agency's existing workforce is composed primarily of social workers. The agency is interested in implementing a home visiting program. Despite the high level of research evidence for the Nurse Family Partnership (NFP) program, a decision is made to not select NFP since a nursing degree is a minimum qualification for providers. This would not be a good match of skill set.

Observability of Benefits

Key Questions:

- Are the outcomes of the program, either short or long term, easily observable?
- How soon can results be seen (e.g., how long is the program)?
- How will program results and outcomes be measured and does this measurement fit with the existing data collection or outcomes process?

CEBC Program Description Sections to Review:

- Relevant Research (look at the outcomes that were examined and how they were measured)
- Recommended Parameters: Duration and Intensity

Real World Example:

An agency looks at Parent-Child Interaction Therapy (PCIT) and presents the findings of the research, as well as videos of a session, to the staff. The staff is excited by the idea of implementing a practice that shows an appreciable benefit so quickly.

Reinvention/Adaptability

Key Questions:

- Can the practice be adapted, refined, or modified to meet local needs?
- Will this adaptation influence the fidelity and outcomes?

CEBC Program Description Sections to Review:

- Target Population
- Brief Description (does it list any existing adaptations?)
- Relevant Research (has research been done on any adapted or modified versions?)
- Contact Information (Need to confirm with developers what adaptations, if any, are possible)

Real World Example:

An agency is interested in implementing Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT), but does not have the ability to conduct 90-minute therapy sessions. After consulting with the program developers, they are able to modify the sessions to fit their standard 50-minute therapy session by extending the number of total sessions that clients attend.

Risk

Key Questions:

- How risky is the adoption of the program?
- Is there a large cost upfront (e.g., training, supplies, licenses, etc.)?
- How big a change would this be to individual worker practice, as well as that of the organization as a whole (i.e., a radical change may feel more risky)?
- What are the potential costs and benefits of implementing the practice? How strong is the research support for the program?

CEBC Program Description Sections to Review:

- Essential Components
- Education and Training Resources
- Identified Resources
- Relevant Research
- Scientific Rating

Real World Example:

A small agency is considering whether to implement Parent-Child Interaction Therapy (PCIT). After considering the costs of training their staff and remodeling their offices to allow for this practice, they decide that there is too high a risk of spending a lot on training and construction and not getting enough referrals to justify this cost. The agency decides to use a parent training program that requires fewer resources.

Training/Support

Key Questions:

- How much training and consultation is required before the program can be delivered?
- How will current staff be trained (e.g., impact on caseloads, time off for training, etc.)?
- Is the training for the practice currently available, or if there is a waitlist, will it be available in the timeframe necessary for it to be implemented?
- Does ongoing consultation get transferred from the trainers to the agency level to continue support once the initial training is finished, or will there be a need to contract for ongoing training?
- What is the process for new staff to get trained when turnover occurs?

CEBC Program Description Sections to Review:

- Education and Training Resources
- Implementation Information
- Contact Information (Need to confirm with developers the specific regarding training and support costs)

Real World Example #1:

A small agency in a rural area reviews the training costs and availability and uses this information to select a practice where training is provided on-site. It is determined that this is more efficient than sending their workers to training off-site. This on-site trainer will also provide phone consultation as a follow-up to the training, which will allow staff to get further support.

Real World Example #2:

An agency director is interested in implementing an evidence-based parent training practice. After contacting the program about training, it is discovered that there is a long wait-list for being trained in this practice. The agency director then explores the training requirements for a second evidence-based parent training program and after contacting the program about training, discovers that there is not a wait for being trained in this practice. This leads to the agency implementing the second practice, because they are able to get the needed support and training in a timely manner.

Triability

Key Questions:

- Does the practice lend itself to being tried out on a small scale before a full implementation takes place?
- Is it possible to attend a training session, review program manuals, or visit another agency implementing the program prior to making a decision?

CEBC Program Description Sections to Review:

- Education and Training Resources
- Contact Information

Real World Example:

After talking to the program developer, the agency has one therapist trained in Motivational Interviewing (MI). Once the therapist is comfortable and it is clear that MI is benefiting the clients, then additional therapists in the agency are trained.

Reference:

Greenhalgh, T., Robert, G., Macfarlane, F., Bate, P., & Kyriakidou, O. (2004). Diffusion of innovations in service organizations: Systemic review and recommendations. *The Millbank Quarterly*, 82(4), 581-629.