Successful Implementation of
PRACTICES AND PROGRAMS WORKBOOK

The work of putting a program or practice in place (implementation) in a lasting manner is often a challenging and complex task that requires strategic leadership, significant planning, and the allocation of resources.

There are different models or frameworks for putting practices and programs into operation. Many share similar phases, approaches, and techniques. This interactive and practical workbook contains information about some of those common steps; probing questions about the implementation goals, plans, processes; and desired outcomes.

While the workbook is divided into sections, some phases of this work might need to be addressed simultaneously or in a different order than presented in the workbook.

The sections of this tool include:
I. Information about the practice or program
II. Implementation planning
III. Identifying key stakeholders
IV. Financing the practice or program
V. Engaging key stakeholders
VI. Training and consultation
VII. Continuous quality improvement
VIII. Workforce considerations
IX. Leading the implementation
X. Early adopter sites

I. Information about the practice or program
When making decisions about practices or programs to implement and when planning for a successful implementation, it is important to gather some specific information about the size of the implementation, develop time frames, and begin the work of effective implementation planning.

What is the practice or program that has been identified to be implemented?

What are the principles of the practice or program?

What are the core components of the practice or program?

II. Implementation Planning
When starting to implement a practice or a program, one of the first important decisions is to develop a clear description of where the practice or program will be provided. As you begin the work of implementation it is important to have a clearly defined target for what a complete and satisfactory implementation will look like. For example, will it be when half of the agencies in a system provide the practice or program, or will it be when all the clients who want to participate in the program or practice are able to do so on a consistent basis?

For larger and more complex settings, such as a county or state mental health or substance use treatment system, it

is sometimes important to roll out the implementation of the practice or program over an extended time frame such as several months or even years. For smaller and less complex settings, such as a team of people at an agency, or a group of individuals, the practice roll out might occur over a relatively short time frame. Either way it is important to start with a time line for the complete implementation and plan accordingly.

What are the specific outcomes and the target population(s) for the practice or program you will be implementing?

What is the timeframe for reaching a completed and satisfactory implementation of the program or practice?

Who are the key stakeholders who will benefit from the outcomes from this practice or program?

How many agencies or people will provide the practice or program after the first timeframe (for example 6 months) of working on implementation?

After reviewing the definition, principles, and core components of the practice or program the next step is to identify key stakeholders who will need to be involved (either directly or indirectly) with providing the practice or program as it is defined and described by principles and core components.

What are the intermediate goals and time frames for how many agencies or people will provide or receive the practice or program throughout the implementation process?

Who are the key stakeholders that will be providing the practice or the program? (Consider including staff from different parts of an agency, for example quality assurance, billing, and finances; or from different agencies for a larger system implementation)

III. Identifying Key Stakeholders

Another critical step in planning a successful implementation is to develop a working understanding of the practice and program including: (1) the key stakeholders who will benefit from the practice or program, (2) key stakeholders to provide the practice or program (3) key stakeholders who might refer people to the practice or program, and (4) key stakeholders who will play a role in sustaining the practice or program.

As the practice is reviewed and a shared understanding of how the practice is implemented and functions is developed, these lists will change over time. However, identifying and engaging critical stakeholders in the beginning of the implementation process remains an important early task.

Who are the key stakeholders that will be marking referrals to the practice or the program? (Consider including different agencies, healthcare providers, legal systems, school systems from the community or the larger system)

IV. Financing the practice or program

Installing a program or practice successfully requires task planning and collaboration with a variety of stakeholders and other organizations including funding sources from the beginning and throughout the implementation process.

What revenue sources will be used to fund or pay for the implementation, including the training of staff that will be providing the practice or program, supervisors, and other agency personnel or referral sources?

What revenue sources will be used to fund or pay for the practice or program after it has been implemented?

What key stakeholders will need to be involved in the implementation process to assure ongoing and successful funding for the practice or program?

V. Actively Engaging Key Stakeholders

After developing a list of the key stakeholder groups necessary to implement the practice or program effectively, develop structured plans and mechanisms for sustaining partnership with those stakeholders throughout the intervention.

For some agency implementations, an agency and community steering or advisory committee is used to engage key stakeholders. Some system implementations have employed a similar countywide or statewide committee structure to assure effective implementation of the program or practice. It is important to plan, identify and activate a method of strategic collaborative partnerships for the practice or program through planned and regular meetings and communication structures.

What structures or committees will be convened with key stakeholders to develop active partnerships regarding the implementation and sustaining of the practice or program?

When and where will the first meeting of this group occur? How often will the group meet? Who will be responsible for oriented the group regarding the practice or program and the mission of the group?

VI. Training and consultation

An effective implementation often requires the investment of specific resources, including financial resources. Once again, the plan for needed resources may change over the course of the implementation, so consistently reviewing and evaluating if this is the right plan is important for success.

Plan for the training of individuals, teams or agencies that will be providing the practice or program in the philosophy, skills, strategies, principles and core components. Some practices or programs also require the training of other staff in an agency or system who might be referring people, or working with the program or practice but not directly providing it. Resources may also be used to consult different organizational or system personnel regarding policy and procedure changes, data collection, supervision and job descriptions regarding the practice or program.

How long is the usual training process for the practice or program? What are the usual costs of hiring a trainer or consultant to help with the implementation process?

What are the anticipated costs for providing the training of individuals, teams or agencies to provide the program or practice? What are the costs (for example lost billing and personnel salaries) for individuals, teams or agencies to participate in the training process?

Other implementation costs include resources and materials that are necessary to either learn or provide the practice or program or both. For example, a practice or program might require the use of a curriculum-based workbook with handouts; a specific manual on how to provide the practice, the use of a specific assessment tool, or a program or practice might require providers to have cell phones or laptops.

What are the anticipated resources and materials and their respective costs for implementing and providing the practice or program?

VII. Continuous Quality Improvement

Some programs or practices have resources or fidelity assessment tools to help guide the implementation and the sustaining in an effective and structured manner. Some of these assessments are based on self-report and others use external review sources to provide fidelity assessments.

What types, if any, of fidelity or quality improvement measurement tools are available regarding the practice or program? What are the usual costs, if any, associated with using these fidelity or quality improvement tools?

What is the specific plan for how often fidelity or quality improvement measurements will be used? How will the information from fidelity or quality improvement reviews be used to monitor and improve the effectiveness of the practice during the initial implementation?

Who will be responsible for assuring these measurements are done as intended and the results are shared with key stakeholders?

What is the plan for funding the costs of fidelity and quality improvement measurements including outside resources as well as provider staff time?

How will the information from fidelity or quality improvement reviews be used to improve the effectiveness of the practice or program while it is being sustained?

Some programs or practices have specific outcome measures that are used when providing them. Others have information about specific outcomes that have been demonstrated when the practice or program is provided as intended. It is important to identify which outcome measures will be used to demonstrate the value and importance of the practice to key stakeholders.

What are the specific outcomes that are expected from the practice or program? How will these outcomes be defined, reported and measured? How frequently will outcomes be measured? Who will be responsible for gathering and sharing outcomes with key stakeholders to monitor and improve the quality of the practice or program?

VIII. Workforce Considerations

Another important consideration for implementing programs or practices is the workforce needs or requirements for implementing, providing and sustaining them. Some practices or programs might require providers to have a specific license like a "Licensed Clinical Social Worker," or specific educational degrees, or specific lived experiences.

It is important to identify the workforce needs of the practice or program and then compare that with the existing workforce in the place(s) that it will be implemented. If necessary a specific plan to address the gap in workforce needs should be developed as part of the implementation process.

What are the specific workforce requirements for the practice or program? What is the current supply of such a workforce? If there is an undersupply of the necessary workforce, what specific strategies will be used to address the gap and what key stakeholders will be involved in that process?

IX. Leading the Implementation

While the implementation of some practices or programs in large systems or agencies can be very complex, it is best done with an effective strategic plan, close collaboration with a variety of important stakeholders, and strong change management leadership. Some leaders have effective skills and experiences in leading and facilitating effective sustained changes. Such leaders play a vital role in effective implementations.

What criteria are most important in identifying a leader for the implementation of the practice or program? How will that criteria be evaluated? How will candidates be identified or chosen to lead the implementation?

X. Early Adopter Sites

When larger systems, such as a county or state mental health or substance use treatment system, implements a practice or program it is often necessary to start with a designated number of sites to begin the implementation process; with a specific plan to continually expand the number of sites providing the practice or program. With these large scale implementations, the identification and selection of those places that will provide the practice or the

program first (often referred to as "early adopter sites" plays an important role in effective implementations.

Just like hiring a good employee, or identifying an effective implementation leader, it is important to identify and use specific criteria for identifying favorable early adopter sites in a large system. Some systems require early adopter sites to agree to implement the practice or program faithfully and to work in collaboration with trainers and consultants to implement the practice. Other considerations might include requiring early adopter sites to become demonstration or shadow sites after they have implemented the program or practice successfully. Some agreements also include language about the site transparently providing the necessary data regarding practice outcomes and quality improvement or fidelity measurements.

For larger system implementations or staged implementations: what are the most important agency behaviors necessary for the first sites to effectively implement the practice? How will these agency behaviors be used to evaluate and identify the first sites to implement the practice or program? Who will complete those evaluations? How will this information be shared with sites that want to apply?