

The California Evidence-Based Clearinghouse for Child Welfare

Information and Resources for Child Welfare Professionals

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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

Key Questions: How easily are the key players able to understand the practice? Can the practice be broken down into manageable parts for implementation?

Helpful Sections of the CEBC's Program Description:

- Essential Components
- Recommended Parameters (Duration and Intensity)
- Homework
- Delivery Setting
- Child Component
- Parent Component
- Identified Resources Necessary to Implement Program
- Education and Training Resources

Real World Example: An agency explored multiple parent training programs and decided to choose one that is easier for the staff to understand. The one they chose has the option of having the staff trained on the program in segments where they can learn new skills a few at a time; as opposed to having the staff trained on the whole program and having to learn all the new skills at the same time.

External Compatibility

Key Question: How compatible is the practice with the community, family, and stakeholder values, norms, traditions, and orientation?

Helpful Sections of the CEBC's Program Description:

- Essential Components
- Recommended Parameters (Intensity and Duration)
- Homework
- Delivery Setting
- Child Component
- Parent Component

If more specific questions arise, contacting the program representative listed in the Contact Information section can assist agencies in evaluating how compatible the practice is with the community, family, and stakeholder values, norms, and traditions.

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 implementing Motivational Interviewing into the existing substance abuse programs would help to increase the engagement of parents in the receiving substance abuse services.

Internal Compatibility

Key Question: How compatible is the practice with the organizational and workforce's values, norms, and clinical traditions and orientation?

Helpful Sections of the CEBC's Program Description:

- Essential Components
- Recommended Parameters (Intensity and Duration)
- Homework
- Delivery Setting
- Child Component
- Parent Component

If more specific questions arise, contacting the program representative listed in the Contact Information section can assist agencies in evaluating how compatible the practice is with the organization values, norms, and traditions.

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 would 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 Required to Use It

Key Question: Can the knowledge required to utilize the practice be codified and transferred from one context to another?

Helpful Section of the CEBC's Program Description:

- Education and Training Resources (in particular, the training contact information).

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 Question: Does the workforce possess the appropriate clinical background and education?

Helpful Sections of the CEBC's Program Description:

- Minimum Provider Qualifications
- Essential Components

Real World Example: An agency's existing workforce is composed of primarily 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 the minimum qualifications for its providers requires a degree in nursing. This would not be a good match of skill set.

Observability of Benefits

Key Question: Are the outcomes or interim results/measures easily observable?

Helpful Sections of the CEBC's Program Description:

- Relevant Published, Peer-Reviewed Research (discusses findings from past research, which can be used to begin evaluating how observable the benefits will be)
- Recommended Parameters: Duration and Intensity (becoming familiar with how long families are expected to participate is critical)

Real World Example: An agency looks at Parent-Child Interaction Therapy 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.

Relative Advantage

Key Question: Does the practice provide a financial or efficiency advantage to the organization?

Helpful Sections of the CEBC's Program Description:

- Recommended Parameters (Intensity and Duration)
- Essential Components

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.

Reinvention

Key Questions: Can the practice be adapted, refined, or modified to meet the needs of the organization? Will this adaptation influence the fidelity and outcomes?

Helpful Section of the CEBC's Program Description:

- Contact Information

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 much risk exists? What are the potential costs, as well as the benefits, of implementing the selected practice?

Helpful Sections of the CEBC's Program Description:

- Identified Resources Necessary to Implement Program
- Education and Training Resources.

Real World Example: A small agency is considering whether to implement 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.

Support

Key Question: How much training and consultation is available and utilized?

Helpful Section of the CEBC's Program Description:

- Education and Training Resources (in particular, the training contact information if you need more information)

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 was determined that this more efficient than sending their workers to a 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.

Trialability

Key Question: Does the practice lend itself to being tried out before a full implementation takes place?

Helpful Section of the CEBC's Program Description:

- Education and Training Resources (in particular, the training contact information so you can discuss the ability to "try out" the practice before fully implementing it or get referrals to other agencies that have implemented the practice so you can contact them if needed).

Real World Example: After talking to the program developer, the agency has one therapist trained in Motivational Interviewing. 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.