

Program Implementation Guidelines

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Contents

Introduction	1
Preparing for change	2
STEP 1: IDENTIFY THE CHANGEMAKERS	2
STEP 2: UNDERSTAND THE ORGANISATION'S READINESS TO CHANGE	3
STEP 3: ESTABLISH CURRENT PRACTICE AND EVIDENCE-PRACTICE GA	APS :
STEP 4: EXAMINE REASONS FOR BEST PRACTICE GAPS	5
Initiating and supporting change	6
STEP 1: CHOOSE THE BEST APPROACH TO MAKE CHANGE	6
Meaningful involvement of staff in planning	6
Implementation adapted to service context	7
STEP 2: SET UP PROCESSES THAT ASSIST TO MAINTAIN THE CHANGE	7
Regular review of processes and reflection	7
Ongoing service-based supervision	8

Introduction

Developing and disseminating program guidelines are effective tools for program implementation. Ideally, 'bottom-up approaches, such as training in guideline use, are supported by 'topdown' organizational changes such as supporting policies and procedures to encourage long-termpractice and organizational change.

Many barriers can affect the implementation any new procedure or activity within an organization or service. Hunter et al. (2005) recommends undertaking a comprehensive package of strategies to target these multiple barriers to change. Other researchers agree that several elements are fundamental to producing meaningful, sustainable uptake of screening and treatment practices for comorbidity (Maslin et al., 2001; Proudfoot et al., 2003; Welch & Mooney, 2001).

Graham (2004), for example, recommends a multi-faceted program to implement integrated treatment for comorbid conditions, which includes:

- using a whole-team approach
- providing ongoing, service-based training as well as individual and group supervision
- addressing attitudes and perceptions about program implementer
- adopting a flexible and user-friendly approach to the delivery of benefit
- involving key stakeholders and team leaders in every phase of implementation

All *LADLI's Program* has developed with these considerations in mind. It takes a multi-modal approach, which includes strategies to assist managers and other leaders to:

- address barriers to change
- expand the service's capacity for program supervision
- Provide user-friendly materials for coordinators and support for their use through flexibly delivered and tailored training

Evidence from the evaluation of *LADLI* strongly supports the importance of involving all key stakeholders in each implementation phase. This includes managers, team leaders, and workers. In many cases, this will also involve Partners/ Donor. Partner enthusiasm for changed practices can assist in the change process.

These implementation guidelines are designed to assist Coordinators and other leaders in preparing their programs and staff for sustainable practice change in screening and intervention for targeted programs and populations.

Preparing for change

Before introducing any new initiative or practice in the service context, various preparatory stepsare recommended to enhance uptake. There are four key steps in preparing for change:

Step 1: Identify the changemakers

Step 2: Understand the organization's readiness to change

Step 3: Establish current practice and evidence-practice gaps

Step 4: Examine reasons for best practice gaps

Step 1: Identify the changemakers

Change needs a driver, especially when it may require fundamental changes to practice or attitudes. For this reason, once the need for change has been established, it is important to identify staff within the workplace who can provide credible leadership on practice change. NICS, 2006), typically, a champion' and an 'executive sponsor' should work together to lead an implementation team and should, ideally, be supported by a third person whoguides the change on a day-to-day basis. Others who may be involved are interested staff and possibly

a consumer representative, depending on the extent of the changes. An effective implementation team will comprise six to eight people.

Managers, Coordinators, and team leaders, in particular, have a critical role in encouraging the uptake of the *LADLI Pagan* by ground workers.

This approach arguably adds to the sustainability of the *LADLI* Program outside the context of a research trial. Clearly, managers and other leaders are ideally placed to recommend that this occur and to decide practically how and when the *LADLI* resources should be integrated within existing structures. Furthermore, the attitudes of coordinators and other leaders regarding the importance and appropriateness of addressing the importance of the prospective program.

Initial meetings between the change management team should take place prior to implementation. These meetings should cover at least the following points:

- discussion about the stage of change of the service
- discussion about which components of the LADLI Program to implement within the service
- discussion about how to examine evidence–practice gaps
- a decision about whether to mandate the use of the LADLI resources
- a decision about how to incorporate the *LADLI* resources into routine practices carried outby the service
- agreement on how to support training and supervision in the use of the LADLI resources
- identification of key stakeholders likely to be affected using the *LADLI* resources(e.g. other services, beneficiaries' groups) and development of a plan to discuss the *LADLI* Program with them.

Step 2: Understand the organization's readiness to change

It is essential to have a good understanding of the organization's readiness to change. To make change, staff need to:

- know what the best practice recommendations are
- agree with the recommendations
- believe they have the personal and organizational capacity to carry them out
- commit to adopt the recommendations into their practice
- be able to maintain adherence
- **Precontemplation** not intending to make a change within the next six months.
- **Contemplation** intending to make a change within the next six months.
- **Preparation** intending to act within the next 15 days.
- Action have made overt changes less than six months ago.
- Maintenance have made overt changes more than six months ago.

The changemakers identified in Step 1 need first to identify the organizational stage of change andmove forward accordingly. This should be reflected in the flavor and content of training, supervision, and implementation activities. Different strategies are required for different stages of organizational change.

Matching the implementation of the *LADLI* Program to the stage of change of the service and/or worker will increase participation and uptake of the program's resources and minimize resistance to change. Around 20 per cent of employees within an organization will be ready to take action and make changes at any one time. These individuals can be encouraged to commence using the *LADLI* resources as a matter of routine, participate in the *LADLI* training andprovide feedback to other workers about the outcomes of the implementation. This can occur with different strategies to encourage other staff to participate in the change.

Clear and consistent communication is critical regardless of the stage of change or the strategies selected to manage the change process. Some suggestions for supporting readiness to change include:

- **Involve staff in the process** find out what motivates the team: usually, consultants and field staff at least need to see that the changes will result in improved care.
- Include funding partner/donor in the process provide partners with information about the changes to educate them about the need for change and what to expect from treatment. Well-informed partners can support change by cooperating with the changes, making them less difficult to maintain, and asking filed staff questions.
- **Include management in the process** coordinators generally need to see that changes will result in improved care, increased efficiency, and improved team operation, and will supportaccreditation standards.

Table 1: Strategies for change

Stage of change	Broad strategies for change	Specific LADLI examples
Precontemplation	Information exchange Consciousness raising Examination of frustrations ofte current system Review of current activities	Regular information about comorbidity rates in the service Research updates Brief informational session (only) about the <i>LADLI</i> program Discussion about frustrations of current practice
Contemplation	Evaluation of benefitsof change Service engagement to increase self-efficacy for making change	Discussion at team meetings about potential benefits tochange (without suggesting change will happen) Conversations that focus on how little change is requiredso as not to overwhelm coordinators A practice audit, focusing on the big picture, without judgment toward individuals' practice
Preparation	Identification of practice-evidence gaps Specific training in newstrategies	Regular Training and Audit of organizational practices and policies
Action	Specific training Ongoing support strategies	Ongoing <i>LADLI</i> training and professional development bysenior staff Routine data collection and review of outcomesRegular supervision
Maintenance	Ongoing support strategies Rewards for change Application of review cycles	Regular feedback of outcomes to staff Regular input from staff about the process of screeningand intervention Reports of the use of <i>LADLI</i> as part of Partner review procedures Use of monitoring and outcome data for presentationsat conferences 'Promotion' of staff as resource person for <i>LADLI</i> program Ongoing professional development for Coordinators

Based on Levesque et al. (1999)

Step 3: Establish current practice and evidence-practice gaps

Depending on the organizational stage of change identified in Step 2, establishing current practice and gaps may need to be undertaken in several stages, with each stage also designed to enhance the participants' readiness for change. For PR contemplative and contemplative organizations, a simple discussion of frustrations in current practice may lead to a recognition of the need for practice change and a commitment to engage in more action-oriented strategies, such as the implementation of routine data collection or a full practice audit.

Ideally, in an action or preparation stage organization, objective quantifiable data about current practices should be collected prior to making any changes to practice or procedures, as impressions and opinions about how a system is functioning are not always accurate (NICS, 2006). If possible, use reliable and meaningful routinely collected data to indicate current practice and develop activities around the proposed change. Supplementary interviews with staff and/or partners may also be helpful in this process.

These data can assist in identifying practice gaps in screening, detection, recording, treatment or follow-up activities, and can guide the implementation of the change process. Consider which areas are most easily addressed and target these first.

Step 4: Examine reasons for best practice gaps

Evidence-practice gaps may be maintained by:

- Individual Coordinators (e.g. their attitudes towards Program Monitoring & Evaluation)
- the system in which they work (e.g. team structures, policies, and procedures)
- external practices (e.g. the way referrals in and out of the service are managed)

Identifying where gaps exist will assist in deciding which approach to take. It is important to involve coordinators and other staff in the change process by including the whole team in a meaningful way. However, individuals outside the change management team should not be given so much influencethat they are able to railroad the process.

Initiating and supporting change

In supporting the change process, there are two critical areas for managers and other leaders:

Step 1: Choose the best approach to make a change

Step 2: Set up processes that assist in maintaining the change

Step 1: Choose the best approach to make a change

NICS (2006) has identified a theoretical framework for tailoring a change package. They note that decisions can be informed by a mix of theory, evidence, ability, and local knowledge.

Problems or barriers identified need to be explicitly matched to solutions. This practice in terms of assessment, formulation, and tailored intervention can be framed for staff to understand. Table 2 includes some examples.

Table 2: Some barriers to change and recommended solutions

Barrier	Solution
Knowledge deficits	Education
Erroneous beliefs about current effectiveness	Audits and feedback
Lack of motivation	Incentives, 'workshopping' issues
Beliefs, attitudes	Leadership, education

Meaningful involvement of staff in planning

Workers, Volunteers within services need to have meaningful involvement in planning the implementation of the *LADLI* Programs. The *LADLI* Projects Implementation commenced at each site with an initial meeting with workers, which contributed to determining evidence-practice gaps.

This first meeting with workers should take the form of a 'needs analysis and should cover the following issues:

- attitudes about the detection and treatment of comorbidity within the service
- preparedness to implement the LADLI Screening Tool and Intervention
- stages of change for service workers
- training needs and format of training
- supervision needs and design of supervision
- barriers to and concerns about implementation
- decisional balance activity about implementing the use of organization resources or remaining with the same practice
- timeline for training, management, and commencement of the Intervention

The information collected from this meeting will assist in planning training, supervision and other implementation activities.

Evaluation of the *LADLI* Project: Implementation indicated that workers have a range of skills and experiences with the program and a range of attitudes about their role in undertaking proposed interventions. These factors influenced

the extent to which workers at each site in the project benefited from training and supervision, and

Implementation adapted to the service context

LADLI's intervention practices should be implemented in a way that is consistent with the existing methods of service. This type of flexibility in the application by an individual service is encouraged to maximize uptake and minimize resistance to adopting 'yet another new procedure'. However, there should be consistency within a service about the approach adopted to maintain a consistent standard for the Funding partner.

Step 2: Set up processes that assist in maintaining the change

A plan to maintain change should be developed in earlier planning. This is more usefully done before change occurs, as it will also support the change process. In particular, two specific practices are recommended to help maintain change. A system of regular review and reflection at a service level and ongoing supervision processes will help to ensure that the new processes are maintained in the service's collective awareness and can help prevent practice slippage.

Regular review of processes and reflection

Change is a process and requires planning, action and review. The action learning cycle describes this process. It is useful for all staff to understand the cycle and to understand that change may take time. Realistic timeframes are important, as are constant evaluation and review.

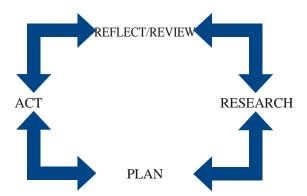


Figure 1: Action learning cycle

Ongoing service-based supervision

Program supervision is central to the implementation of the *LADLI* Program. Several researchers have identified that supervision as the critical component to practice change, and it is considered by many to be more potent than traditional forms of training. It was likewise recognized as one of the most critical aspects of the *LADLI's* Project implementation.

The LADLI's Training and Supervision Guidelines outline specific considerations for Monitoring and evaluation. Some factors include regularity and whether to support group, as well as individual, supervision. Conveying the importance of supervision to good practice, not just for the *LADLI's* Program, is essential for the change management team.