



Syllabus
MHCH 728: Introduction to Implementation Research and Practice in
Maternal, Child and Family Health
Fall 2020

Table of Contents

| | |
|--|-------------------------------------|
| Course Description | 2 |
| Course Details | 3 |
| Course-at-a-Glance | 5 |
| Course Assignments and Assessments | 6 |
| Map of Competencies to Learning Objectives and Assessment Assignments | 6 |
| Module Literature and Resources | 8 |
| Syllabus Appendix | Error! Bookmark not defined. |
| Additional Resources and Policies | Error! Bookmark not defined. |
| Zoom Meeting Details | Error! Bookmark not defined. |

Course Description

Domestically and internationally, there is a substantial gap between the development of innovations to improve maternal and child health and their delivery in routine practice. Implementation science emerged to address this kind of research to practice gap. Implementation science includes both research and practice. Implementation *research* is “the scientific study of methods to promote the systematic uptake of research findings and other evidence-based practices” to improve the quality of service delivery in routine care settings (Eccles & Mittman, 2006). It includes the study of influences on professional and organizational behavior that impact implementation effectiveness. Implementation *practice* uses the evidence generated by implementation research and other fields to support practice change at the individual, agency, community and policy levels. In the ideal world, implementation research and practice are closely linked and complementary. In reality, the same research to practice gap described above is found in implementation science.

This course will provide an overview of core theories and methods in implementation science, with a focus on their application to MCH challenges. The course will also explore implementation determinants and strategies at the intervention, individual, organizational, and policy levels. Through individual and group assignments, students will have numerous opportunities to apply course content to their own areas of interest and to implementation challenges and opportunities in global MCH. In addition to course readings and assignments, active class discussion and debate will facilitate learning.

At the conclusion of this course, students will be able to:

- 1) Explain why implementation science is necessary for achieving global maternal and child health goals and objectives;
- 2) Differentiate frameworks for implementation practice and research;
- 3) Understand the needs of and opportunities related to the implementation science workforce (research and practice);
- 4) Analyze factors that influence implementation and how they manifest among different stakeholders and system levels; and
- 5) Select and justify implementation strategies to address identified determinants.

Throughout the course students will have the opportunity to explore how their academic and professional experience relate to and could draw on the field of implementation science.

Prerequisites: None

Course Details

Instructor

W. Oscar Fleming, MSPH, DrPH
Clinical Assistant Professor
Department of Maternal, Child and Family Health
Email: oscar.fleming@unc.edu

Teaching Assistant

N/A

Office Hours: [Tuesdays and Thursdays, 11-12 OR by appointment.

Course Website : <https://sakai.unc.edu/welcome/>. Use your ONYEN and password.

Class Days, Times, Location: Tuesdays and Thursdays 9:45-11:00 AM, McGavran-Greenberg 2308

Course Overview

This course introduces students to the field of implementation science, its purpose, origins, key concepts and tools, and future directions. Students will find the course content useful in future academic and professional endeavors. Readings, lectures, discussion and assignments are all designed to help students learn about, critically appraise and apply implementation science to key MCH issues.

The course is organized into seven modules, each briefly explained below. The course structure allows students to explore key 'pieces' of the field and recognize how these pieces are interlinked and interact. Individual and team assignments are described below. Online discussion (3 total) will help students to link course content to learning from other courses and provide the professor with feedback for the course.

Module one provides an overview of the field and its origins. Assigned readings trace the development of the field and provide definitions of core concepts. Definitions and descriptions of implementation research and practice allow students to interpret the evolving literature and language of the field. Links to related fields (e.g. health behavior) will be introduced and explored. This course is not primarily focused on evidence-based programs and other innovations (hereafter call innovations) design or selection, yet module lectures and readings prepare students to compare and contrast the strengths and weaknesses of such innovations. The personal reflection assignment (#1) will ask students to explore implementation challenges and opportunities in their area(s) of interest

Module two will introduce several relevant theories, frameworks, and models (hereafter referred to as frameworks) that have significantly influenced implementation science. Readings will explore the purpose of these frameworks and describe several frameworks widely used in the field. Assignments begun in this module (team framework review; continuing throughout the course) will engage students in review, critique and presentation of other relevant frameworks.

Module three focuses on three central issues in the field: equity, engagement and workforce. Readings offer students insight as to why these issues are central to successful implementation and their evolution of the field. The personal reflection assignment (#2) requires students to

reflect on their own learning and practice in these areas and explore potential career paths in the field.

Modules four, five, six and seven are organized around the Active Implementation Stages. Team-based case assignments (4 total) place students in small groups where they will reflect on and respond to one of two case studies across each of these four modules. Associated assignments ask students to consider/describe how equity and engagement can be centered in each stage. Stage-relevant measurement issues and tools will be shared in each module.

Module four introduces the exploration stage and the its relevant work. Readings support student's recognition of the importance of the exploration stage, key determinants of success, and strategies that can be employed to support robust exploration. Students will be introduced to an exploration tool that allows them to link course content to real world applications.

Module five presents the installation/preparation stage. Readings in this module illuminate the key infrastructure needed to initiate, support and sustain individual, organizational and systems practice change. Students will be introduced to an infrastructure assessment tool to assist in their identification of options for infrastructure assessment and use the results to guide improvement work.

Module six highlights the initial implementation stage and its expectations for ongoing performance assessment and data gathering to drive rapid improvement. Readings will provide examples of this work in a variety of MCH settings. Quality improvement tools and methods will be explored and related to MCH implementation work.

Module seven addresses the full implementation/sustainment stage. Module readings will explore issues of scale up and sustainment. A sustainability assessment tool will be introduced to link stage relevant concept to practice.

There is no final exam. However, two assignments are designed to prepare students with the knowledge to integrate and demonstrate learning across the course modules. The final case assignment will ask student teams to reflect on the accumulated case assignments and to integrate revisions of previous work with the final case assignment. In addition, the final personal reflection (#3) asks students to consider how their thinking, in regard to implementation science has evolved and what opportunities for application of course content may be of interest in relation to their professional goals and interests.

Course Format

The course format will consist of a mix of lecture and seminar-style classes. The lecture will be supplemented with small group discussions, in-class exercises, guest speakers, case studies, and examples from the public health literature. **Students are expected to complete the readings before class and come to each class prepared to discuss the texts** (except for the first class).

Course-at-a-Glance

The instructor reserves the right to make changes to the syllabus, including topics, readings, assignments, and due dates. Any changes will be announced as early as possible. For session-by-session course schedule details, please see the Sakai course site.

| Dates/ Sessions | Topic | Assignment Due |
|--------------------------|---|--|
| Aug. 11- 20 | Module 1: Introduction to Implementation Research and Practice | Individual Reflection #1, due 8/20/20 |
| Aug. 25 - Sept. 3 | Module 2: Guiding Conceptual Frameworks and Theories; Equitable Implementation | Team 1 Framework review, due 9/3/20 |
| September 8 - 17 | Module 3: Implementation Practice and Competencies | Team 2 framework review, 9/10/20 Individual Reflection #2 Due 9/17/20 Forum Post due 9/20/20 |
| September 22 - October 1 | Module 4: Active Implementation in Exploration Stage | Team 3 Framework review, due 9/24/20; Case Assignment #1, Due 10/1/20 |
| October 6 - 15 | Module 5: Active Implementation in Installation/Preparation Stage | Team 4 Framework review, due 10/8/20; Case Assignment #2 Due 10/16/20 Forum Post 2 Due 10/22/20 |
| October 20 – 29 | Module 6: Active Implementation in Initial Implementation Stage | Team 5 Framework review, due 10/22/20; Case Assignment #3, due 10/30/20 Forum Post 3 due 11/3/20 |
| November 3 - 12 | Module 7: Active Implementation in Full Implementation Stage | Team 6 Framework review, due 11/5/20; Team 7 Framework review, due 11/12/20; |
| November 18-24 | Final Exams | Case Assignment #4, due 11/18/20; Individual Reflection #3 due 11/18 |

Course Assignments and Assessments

This course includes the following graded assignments that contribute to your final grade in the course. For assignment descriptions and assignment grading rubrics, please see the Sakai course site.

| Graded Assignments | Points/Percentages of Final Course Grade |
|---|--|
| 1) In class and online discussions & engagement | 15 |
| 2) Individual Reflection Papers (3) | 30 |
| 3) Team Framework review (1) | 15 |
| 4) Team Case Assignments (4) | 40 |
| TOTAL | 100 |

Map of Competencies to Learning Objectives and Assessment Assignments

Below are the anticipated competency(s) you can develop in this course, the learning objectives that comprise that competency, and the assignment in which you will practice demonstrating this competency.

| Competency |
|---|
| Practice: Understand and apply implementation, monitoring, and evaluation strategies to improve MCFH programs in the U.S. and globally. |
| Learning Objectives that comprise the competency |
| <ul style="list-style-type: none"> Explain why implementation science is necessary for achieving global maternal and child health goals and objectives Differentiate frameworks for implementation practice and research Understand the needs of and opportunities related to the implementation science workforce (research and practice) |
| Assessment Assignment for evidence of student attainment of competency |
| Individual Papers 1, 2 & 3; Online Discussion Boards |

| Competency |
|--|
| Develop skills for monitoring and evaluating the processes and outcomes of global health programs and policies. |
| Learning Objectives that comprise the competency |
| <ul style="list-style-type: none"> Differentiate frameworks for implementation practice and research Analyze factors that influence implementation and how they manifest among different stakeholders and system levels Select and justify implementation strategies to address identified determinants |
| Assessment Assignment for evidence of student attainment of competency |

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| Team Framework Review (1) and Case Assignments (4) |
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| Competency |
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| Policy: Advance MCFH policy and impact through critical analysis of research, monitoring, and evaluation evidence. |
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|---|
| Learning Objectives that comprise the competency |
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|---|
| <ul style="list-style-type: none">• Explain why implementation science is necessary for achieving global maternal and child health goals and objectives;• Analyze factors that influence implementation and how they manifest among different stakeholders and system levels; and• Select and justify implementation strategies to address identified determinants. |
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| Assessment Assignment for evidence of student attainment of competency |
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| Individual Reflections 1 & 3; Case Assignments 1-4 |
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Module Literature and Resources

Module 1: Introduction to Implementation Research and Practice

a. Session 1.1

- i. No Reading

b. Session 1.2

- Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation.(1)
- Rabin and Brownson. Terminology for dissemination and implementation research (2)

c. Session 1.3

- Proctor, E. K., Landsverk, J., Aarons, G. A., Chambers, D. A., Glisson, C., & Mittman, B. S. (2009). Implementation research in mental health services: An emerging science with conceptual, methodological, and training challenges.(3)
- Bauer, M. S., Damschroder, L., Hagedorn, H., Smith, J., & Kilbourne, A. M. (2015). An introduction to implementation science for the non-specialist.(4)

d. Session 1.4

- Keats et al. What works for maternal and child undernutrition. (5)
- Kroelinger C, Rankin K, Chambers D, Diez Roux A, Hughes K, Grigorescu V. *Using the Principles of Complex Systems Thinking and Implementation Science to Enhance Maternal and Child Health Program Planning and Delivery* Maternal Child Health J (2014) 18:1560–1564(6)

Additional Resources (Optional)

- Bauer and Kirchner. Implementation Science: What is it and why should I care? (7)
- Ogden, T. and Fixsen, D. Implementation Science: A Brief Overview and a Look Ahead. fi(8)

Module 2: Guiding Conceptual Frameworks and Theories; Equity and Engagement

a. Session 2.1

- Nilsen, P. (2015). Making sense of implementation theories, models and frameworks. *Implementation Science*, 10(53), 1–13.(9)
- Tabak, R. G., Khoong, E. C., Chambers, D. A., & Brownson, R. C. (2012). Bridging research and practice: Models for dissemination and implementation research. *American Journal of Preventive Medicine*, 43(3), 337–350(10)

b. Session 2.2

- Damschroder, L. J., Aron, D. C., Keith, R. E., Kirsh, S. R., Alexander, J. A., & Lowery, J. C. (2009). Fostering implementation of health services research findings into practice: A consolidated framework for advancing implementation science. *Implementation Science*, 4(50), 1–15.(11)
- Metz A, Bartley L. Active Implementation Frameworks for Program Success. Zero to three. 2012;March:11–18 (12)

c. Session 2.3

- Rogers, E. M. (2002). Diffusion of preventive innovations. *Addictive Behaviors*, 27, 989–993.(13)
- Proctor, E. K., Silmere, H., Raghavan, R., Hovmand, P., Aarons, G. A., Bunger, A., ... Hensley, M. (2011). Outcomes for implementation research: Conceptual distinctions, measurement challenges, and research agenda. *Administration and Policy in Mental Health and Mental Health Services Research*, 38(2), 65–76.(14)

d. Session 2.4

- Meyers, D. C., Durlak, J. A., & Wandersman, A. (2012). The quality implementation framework: A synthesis of critical steps in the implementation process. *American Journal of Community Psychology*, 50, 462–480.(15)
- Albers, B, Mildon, R, Lyon, AR, Shlonsky, A. Implementation frameworks in child, youth and family services – Results from a scoping review. *Children and Youth Services Review*, July 2017. 101-116.(16)

Additional Resources (Optional)

- Michie, S., Johnston, M., Abraham, C., Lawton, R., Parker, D., & Walker, A. (2005). Making psychological theory useful for implementing evidence based practice: A consensus approach. *Quality and Safety in Health Care*, 14, 26–33.(17)
- Wandersman, A., Duffy, J., Flaspohler, P., Noonan, R., Lubell, K., Stillman, L., ... Saul, J. (2008). Bridging the gap between prevention research and practice: The interactive systems framework for dissemination and implementation. *American Journal of Community Psychology*, 41, 171–181.(18)

- Michie et al.: The behaviour change wheel: A new method for characterising and designing behaviour change interventions. *Implementation Science* 2011 6:42. (19)
- Grol, R., Bosch, M. C., Hulscher, M. E. J., Eccles, M. P., & Wensing, M. (2007). Planning and studying improvement in patient care: The use of theoretical perspectives. *The Milbank Quarterly*, 85(1), 93–138.(20)
- Graham, I. D., Logan, J., Harrison, M. B., Straus, S. E., Tetroe, J., Caswell, W., & Robinson, N. (2006). Lost in knowledge translation: Time for a map? *The Journal of Continuing Education in the Health Professions*, 26(1), 13–24.(21)
- The Improved Clinical Effectiveness through Behavioural Research Group. (2006). Designing theoretically-informed implementation intervention. *Implementation Science*, 1(4), 1-8.(22)

Videos:

- Pesseau, J. (2014). Collaborating for better care partnership [view the section on the Theoretical Domains Framework from 24:00 to 34:51]. (<https://www.youtube.com/watch?v=j8dSmOFvb2A>).
- Straus, S. (2015). Use of theory in implementation research: Pragmatic application and scientific advancement of the knowledge-to-action (KTA) cycle. (<https://www.youtube.com/watch?v=ASQhwjfOYhw>)
- Proctor, E. K. (2014). Priority questions and outcomes. [view the section on implementation outcomes from 28:16-37:40]. (<https://www.youtube.com/watch?v=T614w2zUh50>)
- Nilsen, P. (2016). Theory use in implementation science. (<https://www.youtube.com/watch?v=sjV751QzCVs>)
- Damschroder, L. (2015). Use of theory in implementation research: CFIR (<https://www.youtube.com/watch?v=KAJ-oCJyWcs>).

Module 3: Implementation Practice and Competencies

a. Session 3.1

- Cabassa LJ. Implementation Science: Why It Matters for the Future of Social Work. *J Soc Work Educ.* 2016;52(1):S38-S50. doi:10.1080/10437797.2016.1174648(23)
- Equity at the Center of Implementation. Beadsie Woo, The Annie E. Casey Foundation; Kim DuMont, The William T. Grant Foundation; and Allison Metz, National Implementation Research Network. (<https://cssp.org/2019/12/implementation-equity/>) (24)
- Five Recommendations for How Implementation Science Can Better Advance Equity. Kim DuMont Allison Metz, Ph.D. Beadsie Woo (<https://www.academyhealth.org/blog/2019-04/five-recommendations-how-implementation-science-can-better-advance-equity>). (25)

b. Session 3.2

- Metz, A., Louison, L., Ward, C., & Burke, K. (2017). *Implementation support practitioner profile: Guiding principles and core competencies for implementation practice*. Chapel Hill, NC: National Implementation Research Network, University of North Carolina at Chapel Hill.(26)
- Estabrooks PA, Brownson RC, Pronk NP. Dissemination and implementation science for public health professionals: An overview and call to action. *Prev Chronic Dis*. 2018;15(12):1-10. doi:10.5888/pcd15.180525(27)

c. Session 3.3

- Stakeholder Engagement: Finding the Fit through Diversity, Equity, and Inclusion. *Lisa Saldana*. <https://www.youtube.com/watch?v=ZAdkeSmPCUs&feature=youtu.be> (28)
- Yates L. and Fleming O. (2019) Inequity in Implementation: A perspective from two implementation science students. <http://news.consortiumforis.org/commentary/commentary-on-inequity-in-implementation-a-perspective-from-two-implementation-science-students/> (29)

d. Session 3.4

- No Small Matters: Reimagining the Use of Research Evidence From A Racial Justice Perspective. David E. Kirkland, December 2019.(30)
- Woodward et al. *Implementation Science* (2019) 14:269. The health equity implementation framework: proposal and preliminary study of hepatitis C virus treatment.(31)

Additional Resources

- Evaluating the Public Health Impact of Health Promotion Interventions: The RE-AIM Framework. Russell E. Glasgow, PhD, Thomas M. Vogt, MD, MPH, and Shawn M. Boles, PhD. *AJPH*. September 1999, Vol. 89, No. 9.

Videos

- Reframing Implementation Science to Address Healthcare Inequities. *Leo Cabassa*. <https://www.youtube.com/watch?v=rN3c7rLoSoA&feature=youtu.be>

Module 4: Active Implementation in Exploration Stage

a. Session 4.1

- Powell, B. J., McMillen, J. C., Proctor, E. K., Carpenter, C. R., Griffey, R. T., Bunger, A. C., ... York, J. L. (2012). A compilation of strategies for implementing clinical innovations in health and mental health. *Medical Care Research and Review*, 69(2), 123–157.(32)
- Implementation strategies: recommendations for specifying and reporting. Enola K Proctor, Byron J Powell and J Curtis McMillen.. *Implementation Science* 2013, 8:139. <http://www.implementationscience.com/content/8/1/139> (33)

b. Session 4.2

- Leeman, J., Birken, S.A., Powell, B.J., Rohweder, C., Shea, C.M. Beyond “implementation strategies”: classifying the full range of strategies used in implementation science and practice *Implementation Science* (2017) 12:125.(34)
- Lyon, A. R., & Koerner, K. (2016). User-centered design for psychosocial intervention development and implementation. *Clinical Psychology: Science and Practice*, 23, 180–200.(35)

a. Session 4.3

- Rotheram-Borus, M. J., Swendeman, D., & Chorpita, B. F. (2012). Disruptive innovations for designing and diffusing evidence-based interventions. *American Psychologist*, 67(6), 463–476.(36)
- The Hexagon Tool Streaming Lesson. <https://modules.fpg.unc.edu/sisep/hexagon-tool/index.html>

b. Session 4.4

- French, S. et al. (2012). Developing theory-informed behaviour change interventions to implement evidence into practice. *Implementation Science*, 7(38), 1–8.(37)
- Weiner et al. (2009). A theory of organizational readiness for change.(38)

Additional Resources (Optional):

➤ Articles

- Harn, B., Parisi, D., & Stoolmiller, M. (2013). Balancing fidelity with flexibility and fit: What does we really know about fidelity of implementation in schools? *Exceptional Children*, 79(2), 181–193.(39)
- What is a planning model? An introduction to PRECEDE-PROCEED. Richard Crosby, PhD; Seth M. Noar, PhD.

Videos:

- Grimshaw, J. (2015). Improving design of dissemination and implementation strategies to promote evidence-based care. (https://www.youtube.com/watch?v=h6rK38c_gdc).
- Powell, B. J. (2016). Identifying, Specifying, and Applying Implementation Strategies (<https://www.youtube.com/watch?v=MGtw7WAlkOk>)
- Chorpita, B. (2014). Putting more evidence in evidence-based practice. (<https://www.youtube.com/watch?v=lxXUs1WX78Y>)
- Dearing, J. (2012). Diffusion of innovations: Implications for practice. (<https://www.youtube.com/watch?v=B5Kx0hV6jhY>)
- Castro, F. (2012). Replicating evidence-based programs: Fidelity and adaptation. (<https://www.youtube.com/watch?v=EvwJlokJxfc>)
- Patel, V. (2012). Mental health for all by involving all. (<https://www.youtube.com/watch?v=yzm4gpAKrBk>)

Module 5: Active Implementation in Installation/Preparation Stage

a. Session 5.

- Cara C. Lewis, Kelli Scott, and Brigid R. Marriott. A methodology for generating a tailored implementation blueprint: an exemplar from a youth residential setting et al. *Implementation Science* (2018) 13:68. <https://doi.org/10.1186/s13012-018-0761-6>. (40)
- Livet, M., Yannayon, M., Richard, C., Sorge, R., and Scanlon, P. Ready, set, go!: exploring use of a readiness process to implement pharmacy services (41)

b. Session 5.2

- Edmunds, J. M., Beidas, R. S., & Kendall, P. C. (2013). Dissemination and implementation of evidence-based practices: Training and consultation as implementation strategies. *Clinical Psychology*, 20(2), 152-165.(42)
- Flaspohler et al. (2008). Unpacking Prevention Capacity: An Intersection of Research-to-practice Models and Community-centered Models.(43)

c. Session 5.3

- Hill, Z., Dumbaugh, M., Benton, L., Källander, K., Strachan, D., ten Asbroek, A., ... Meek, S. (2014). Supervising community health workers in low-income countries: A review of impact and implementation issues. *Global Health Action*, 7, 1–10.(44)
- McSherry, L. A., Dombrowski, S. U., Francis, J. J., Murphy, J., Martin, C. M., O’Leary, J. J., ... ATHENS Group. (2012). “It’s a can of worms’: Understanding primary care practitioners’ behaviors in relation to HPV using the theoretical domains framework. *Implementation Science*, 7(73), 1–16(45)

d. Session 5.4

- Ramos-Vidal, I., Palacio, J., Villamil I., and Uribe, A. Examining the effect of the individual characteristics of implementers and the interaction of multiple relationships on the structure of psychosocial intervention teams.
- Powell, B. J., Beidas, R. S., Lewis, C. C., Aarons, G. A., McMillen, J. C., Proctor, E. K., & Mandell, D. S. (2015). Methods to improve the selection and tailoring of implementation strategies. *Journal of Behavioral Health Services & Research*. <http://doi.org/10.1007/s11414-015-9475-6>. (46)

Additional Resources (Optional):

- Harvey, G. and Kitson, A. PARIHS revisited: from heuristic to integrated framework for the successful implementation of knowledge into practice. *Implementation Science* (2016) 11:33 DOI 10.1186/s13012-016-0398-2(47)
- Aarons, G. A., Cafri, G., Lugo, L., & Sawitzky, A. (2012). Expanding the domains of attitudes towards evidence-based practice: The Evidence Based Attitudes Scale-50. *Administration and Policy in Mental Health and Mental Health Services Research*, 39(5), 331–340.(48)

Module 6: Active Implementation in Initial Implementation Stage

a. Session 6.1

- Aarons, G. A., Horowitz, J. D., Dlugosz, L. R., & Ehrhart, M. G. (2012). The role of organizational processes in dissemination and implementation research. In R. C. Brownson, G. A. Colditz, & E. K. Proctor (Eds.), *Dissemination and implementation research in health: Translating science to practice* (pp. 128–153). New York: Oxford University Press.
- Beidas, R.S., Becker-Haimes, E.M., Adams, D.R. Skriner, L., Stewart R.E., Wolk, C.B., Buitenheim, A.M., Williams, N.J., Inacker, P., Richey, E., Marcus, S.C. Feasibility and acceptability of two incentive-based implementation strategies for mental health therapists implementing cognitive-behavioral therapy: a pilot study to inform a randomized controlled trial. *Implementation Science* (2017) 12:148.(49)

b. Session 6.2

- Glisson, C., & Williams, N. J. (2015). Assessing and changing organizational social contexts for effective mental health services. *Annual Review of Public Health*, 36, 507–23.(50)
- Kimberly, J. R., & Cook, J. M. (2008). Organizational measurement and the implementation of innovations in mental health services. *Administration and Policy in Mental Health and Mental Health Services Research*, 35, 11–20.(51)

c. Session 6.3

- Li, S. A., Jeffs, L., Barwick, M., & Stevens, B. (2018). Organizational contextual features that influence the implementation of evidence-based practices across healthcare settings: A systematic integrative review. *Systematic Reviews*, 7(1), 72.(52)
- Wensing, M., Laurant, M., Ouwens, M., & Wollersheim, H. (2013). Organizational implementation strategies for change. In R. Grol, M. Wensing, M. Eccles, & D. Davis (Eds.), *Improving patient care: The implementation of change in health care* (2nd ed., pp. 240–253). Chichester, West Sussex: Wiley-Blackwell.(53)

d. Session 6.4

- Aarons, G. A., Ehrhart, M. G., & Farahnak, L. R. (2014). Aligning leadership across systems and organizations to develop a strategic climate for evidence-based practice implementation. *Annual Review of Public Health*, 35, 255–274.(54)
- Weiner, B. J., Lewis, M. A., Clauser, S. B., & Stitzenberg, K. B. (2012). In search of synergy: Strategies for combining interventions at multiple levels. *JNCI Monographs*, 44, 34–41.(55)
- Hulscher, M., Wensing, M., & Grol, R. (2013). Multifaceted strategies for improvement. In R. Grol, M. Wensing, M. Eccles, & D. Davis (Eds.), *Improving patient care: The implementation of change in health care* (2nd ed., pp. 278–287). Chichester, West Sussex: Wiley-Blackwell.(56)

Additional Resources (Optional):

- Aarons, G. A., Ehrhart, M. G., Farahnak, L. R., & Hurlburt, M. S. (2015). Leadership and organizational change for implementation (LOCI): a randomized mixed method pilot study of a leadership and organization development intervention for evidence-based practice implementation. *Implementation Science*, 10(11), 1–12.(57)
- Hurlburt, M., Aarons, G.A. Fettes, D., Willging, C., Gunderson, L., Chaffin, M.J. Interagency Collaborative Team model for capacity building to scale-up evidence-based practice. *Children and Youth Services Review* 39 (2014) 160–168.(58)
- McCullough, M. Gillespie, C., Petrakis, BA., Jones, E., Park, A., VanDeusen, C., & Rose, A. Forming and activating an internal facilitation group for successful implementation: A qualitative study. *Research in Social and Administrative Pharmacy* 13 (2017) 1014-1027.
- Saldana, L., & Chamberlain, P. (2012). Supporting implementation: The role of community development teams to build infrastructure. *American Journal of Community Psychology*, 50(3-4), 334–346. (59)
- Sanders, K. Wolcott, M. McLaughlin, J., D’ostroph, A., Shea, C., & Pinelli, N. Organizational readiness for change: Preceptor perceptions regarding early immersion of student pharmacists in health-system practice. *Research in Social and Administrative Pharmacy* 13 (2017)
- Lou Atkins, Jill Francis, Rafat Islam, Denise O’Connor, Andrea Patey, Noah Ivers, Robbie Foy, Eilidh M. Duncan, Heather Colquhoun, Jeremy M. Grimshaw, Rebecca

Lawton and Susan Michie. A guide to using the Theoretical Domains Framework of behaviour change to investigate implementation problems. *Implementation Science* (2017) 12:77

- **Videos:**

1. Edmondson, A. (2014). Building a psychologically safe workplace. (<https://www.youtube.com/watch?v=LhoLuui9gX8>)
2. Glisson, C. (2012). Organizational effectiveness. (<https://www.youtube.com/watch?v=hCGI0owg3WI>)
3. Green, P. (2012). Measuring organizational social context. (<https://www.youtube.com/watch?v=jGNBqQtIFKE>)

Tools:

1. Consolidated Framework for Implementation Research Qualitative Interview Guide Generator (<http://www.cfirwiki.net/guide/app/index.html#/>)
2. Organizational Readiness for Implementing Change Measure (<https://implementationscience.biomedcentral.com/articles/10.1186/1748-5908-9-7>)

Module 7: Active Implementation in Full Implementation Stage

a. Session 7.1

- Chamberlain, P., Roberts, R., Jones, H., Marsenich, L., Sosna, T., Price JM. (2011). Three Collaborative Models for Scaling Up Evidence-Based Practices. *Adm Policy Ment Health* (2012) 39:278–290.(60)
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a. Session 7.2

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b. Session 7.3

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a. Session 7.4

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- Metz, A. & Albers, B. (2014). What Does It Take? How federal initiatives can support the implementation of evidence-based programs to improve outcomes for adolescents. *Journal of Adolescent Health*, 54(3 Suppl): S92-6. Doi: 10.1016/j.adohealth.2013.11.025. (67)

Additional Resources (Optional):

- Hurlburt, M., Aarons, G.A. Fettes, D., Willging, C., Gunderson, L., Chaffin, M.J. Interagency Collaborative Team model for capacity building to scale-up evidence-based practice. *Children and Youth Services Review* 39 (2014) 160–168.(58)
- Milat, A., Bauman, A., and Redman, S. Narrative review of models and success factors for scaling up public health interventions. Milat et al. *Implementation Science* (2015) 10:113 (68)
- Hoagwood, K. E., Olin, S. S., Horwitz, S., McKay, M., Cleek, A., Gleacher, A., ... Hogan, M. (2014). Scaling up evidence-based practices for children and families in New York state: Toward evidence based policies on implementation for state mental health systems. *Journal of Clinical Child & Adolescent Psychology*, 43(2), 145–157.(69)
- A Practical, Robust Implementation and Sustainability Model (PRISM) or Integrating Research Findings into Practice. Adrienne C. Feldstein, M.D., M.S. and Russell E. Glasgow, Ph.D.(70)
- Nilsen, P., Stahl, C., Roback, K., & Cairney, P. (2013). Never the twain shall meet?: A comparison of implementation science and policy implementation research. *Implementation Science*, 8(63), 1–12.(71)
- Kok, M. C., Kane, S. S., Tulloch, O., Ormel, H., Theobald, S., Dieleman, M., ... de Koning, K. A. M. (2015). How does context influence performance of

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- Powell, B. J., Beidas, R. S., Rubin, R. M., Stewart, R. E., Benjamin Wolk, C., Matlin, S. L., ... Mandell, D. S. (2016). Applying the policy ecology framework to Philadelphia's behavioral health transformation efforts. *Administration and Policy in Mental Health and Mental Health Services Research*, 43, 909-926.(73)

Videos:

- JoAnn Kirchner and Mona Richie - Facilitation: An evidence-based implementation strategy
(http://www.hsrd.research.va.gov/for_researchers/cyber_seminars/archives/video_archive.cfm?SessionID=1144)
- Hemmelgarn, A. (2012). ARC strategy.
(<https://www.youtube.com/watch?v=FTSGGvKAmck>)
- Ezeanolue, E. (2016). Finding the Walgreens and CVS in congregation-based health interventions: Evidence from the Baby Shower Trial.
(<https://www.youtube.com/watch?v=ZB9cbs3zDY4>)
- Chambers, D. A. (2013). Building a lasting impact: Implementation science and sustainability. (https://www.youtube.com/watch?v=J8vp1wKt_YI).
- Samuels, B., Chamberlain, P., Wuczyn, F., & Anderson, C. (2014). At scale implementation of evidence-based interventions: Policy, practice, and evaluation perspectives. (<https://www.youtube.com/watch?v=JImLEXnDs8Y>).
- Evans, A. (2016). Promoting mentally health cities.
(<https://www.youtube.com/watch?v=9Fi0uMuluY4>)

Tools:

- Implementation Climate Measures
 - a. <https://implementationscience.biomedcentral.com/articles/10.1186/s13012-014-0157-1> and
 - b. <http://implementationscience.biomedcentral.com/articles/10.1186/1748-5908-9-46>
- Program Sustainability Assessment Tool (<https://sustaintool.org>)
- National Implementation Research Network Implementation Teams Module (<http://4mplementation.fpg.unc.edu/module-3>)

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