

Advancing Uptake of EBPs through Sound Organizational Change Processes

Faye S Taxman, Ph.D.
University Professor
George Mason University
ftaxman@gmu.edu

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MD Department of Public Safety & Correctional Services

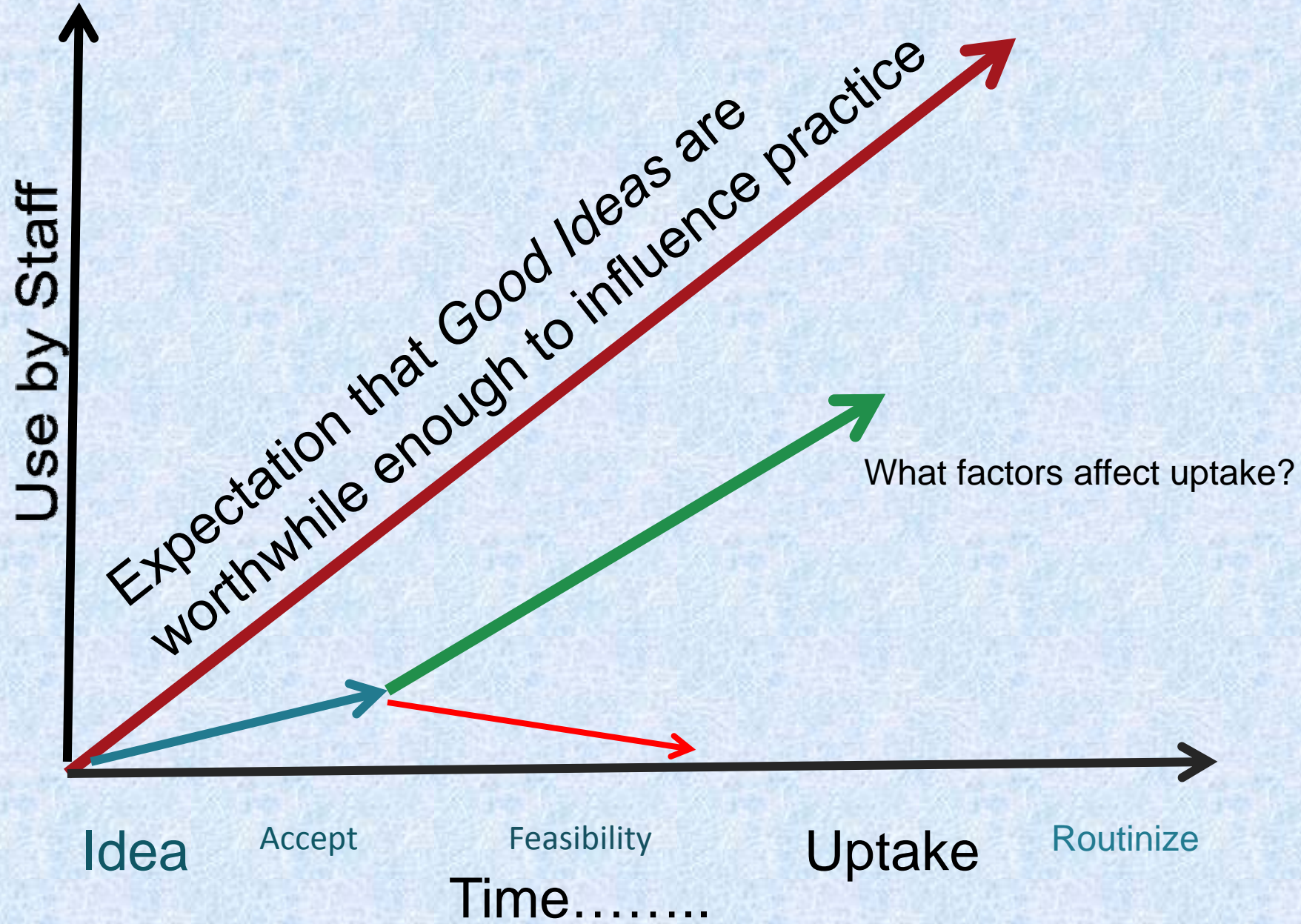
Center for Advancing Correctional Excellence!
<http://gemini.gmu.edu/ebct>

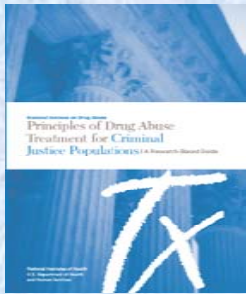


Uptake of EBPS in CJS



The long and winding road





The Challenge: Adopting EBPs

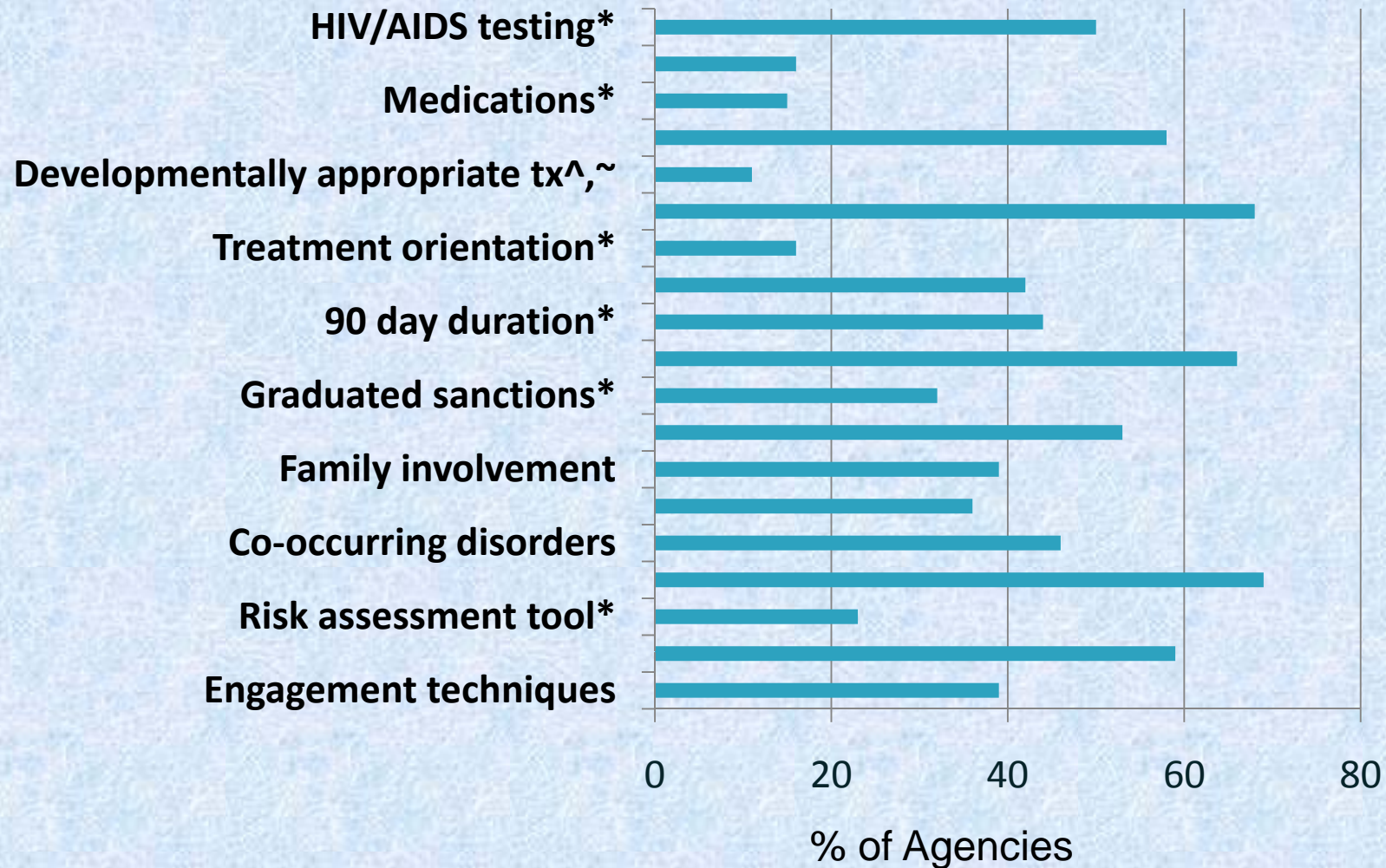
The Greater Challenge: Implementation

Less than
1/3 adopted

Setting	Mean EBPs Adopted
Adult Prison	5.6
Adult Jail	3.9
Adult CC	5
Juvenile Res.	5.7
Juvenile CC	4.8
Drug Court	5.6

- Standardized risk assessment
- Standardized substance abuse assessment
- Addressing co-occurring disorders
- Treatment duration of 90 days or longer
- Comprehensive Services
- Use of therapeutic community/CBT
- Continuing care or aftercare
- Use of graduated sanctions and incentives
- Systems integration
- Use of drug testing in treatment
- Use of techniques to engage and retain clients in treatment
- Assessment of treatment outcomes
- Family involvement in treatment
- Availability of qualified treatment staff
- Developmentally appropriate treatment

% of Respondents Providing EBPs



- = Treatment directors were not assessed on this item
- ^ = Facility administrators were not assessed on this item
- ~ = Adult program treatment directors/facility administrators not assessed on this item

Should Screen for...

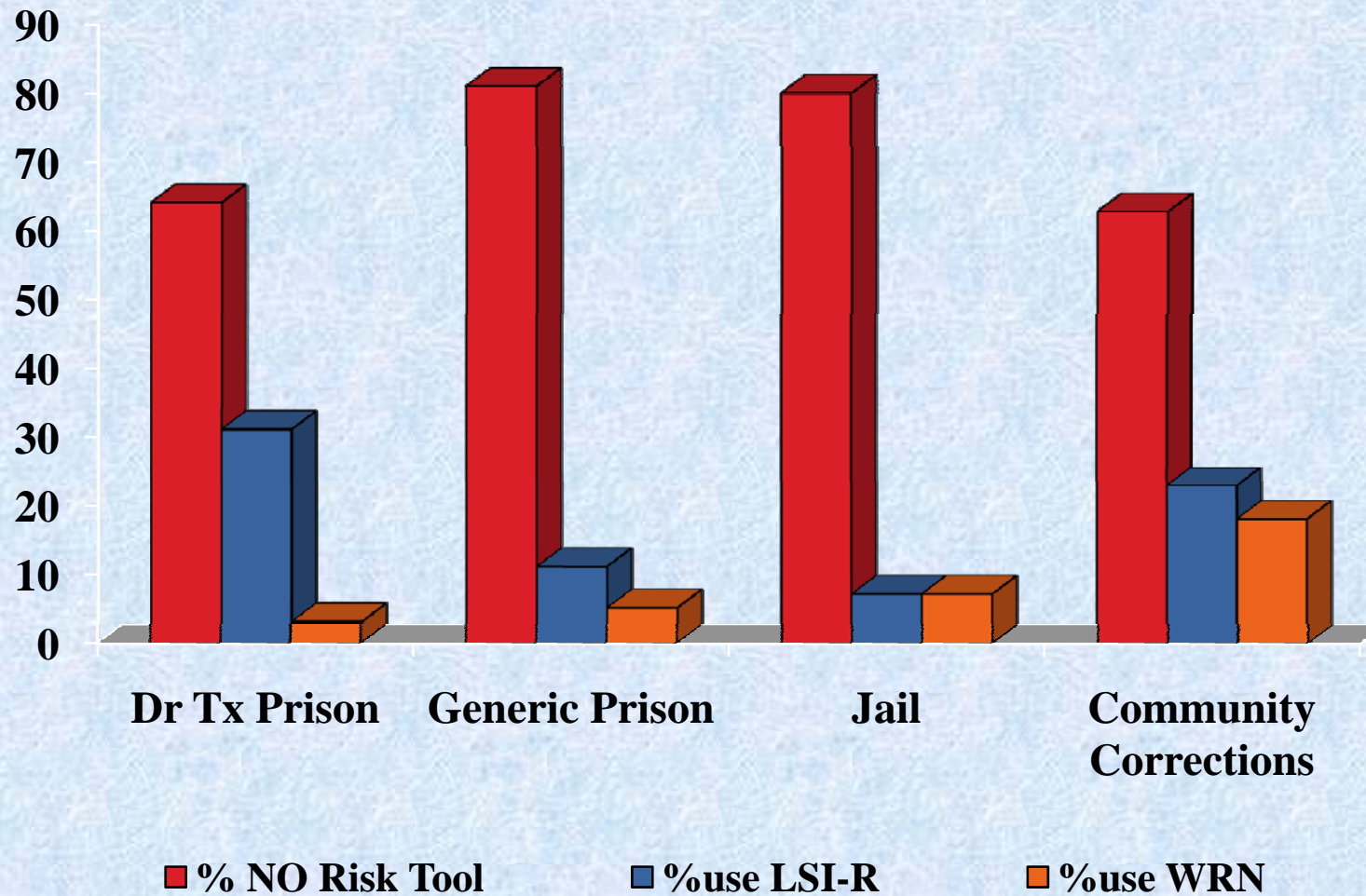
Criminal Justice Risk

- Actuarial based Models
- Historically used to determine sanction
- Main Factors
 - Age of first arrest
 - Number of arrests and/or convictions
 - Number of failed attempts on probation (or parole)
 - Number of incarcerations
 - Number of escapes
 - Substance Abuse
- Main Tools:
 - Composite Score of Criminal History
 - Wisconsin Risk/Needs**
 - Level of Service Inventory
 - Other Tools (Specialized)

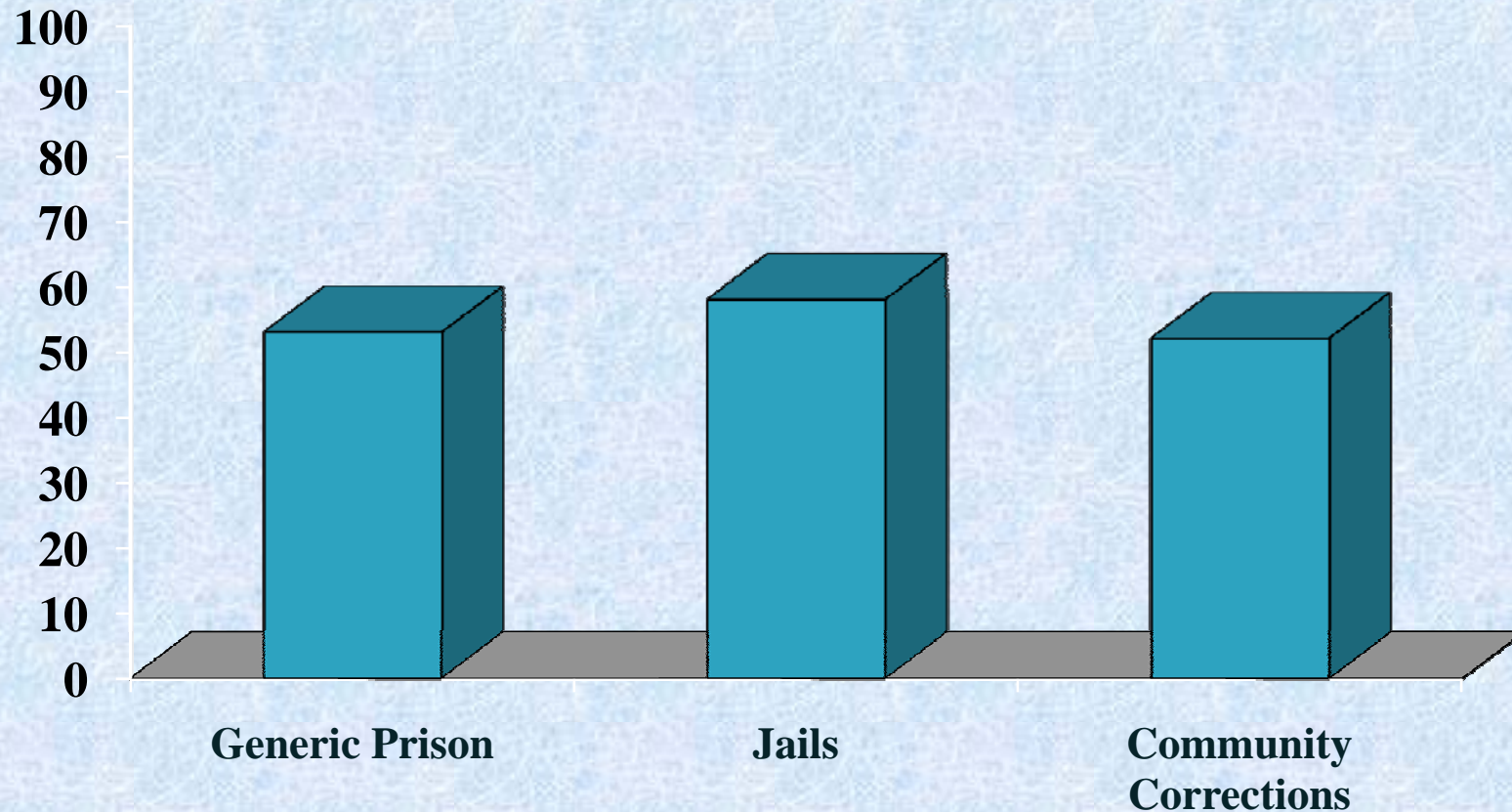
Substance Abuse

- Screen for SA Problem (Based on DSM-IV)
- Triage Method
- In CJ, used to refer to clinical assessment
- Many tools exist:
 - CSAT's SSI
 - ASI**
- Co-Occurring Disorders

Actuarial Risk Tools: Few In Place

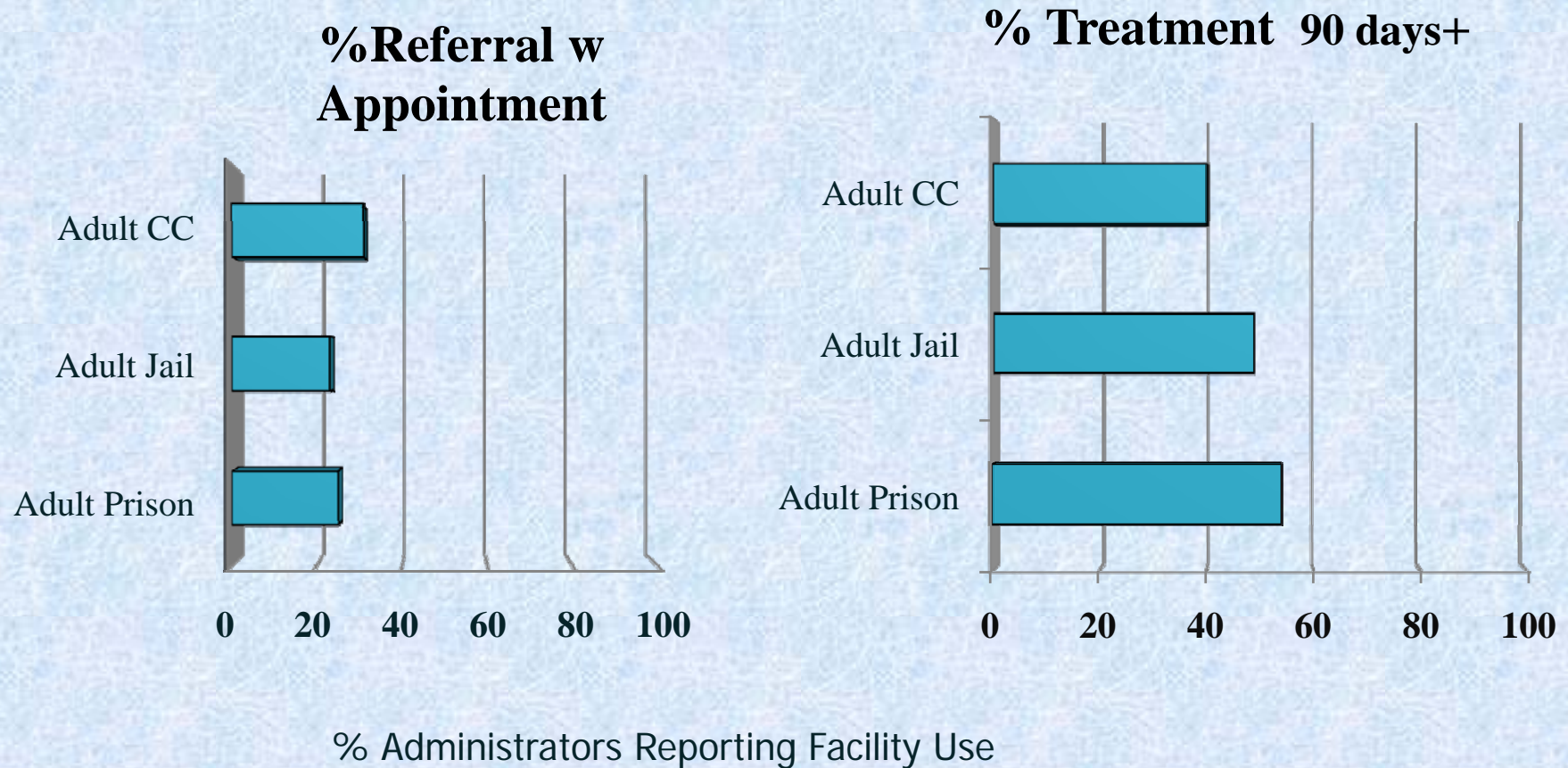


Standardized SA Tool is More Prevalent



Dr Tx Prison: ASI (55%), TCUDS-II (39%)/Generic Prison: SASSI (39%), TCUDS-II or ASI (33%)/Jail: ASI (58%), MAST (29%)/State Comm Corr: SASSI (58%), ASI (47%)/Local Comm Corr: SASSI (46%), ASI (43%)
Chi-Square=17.8, $p < .01$ for Use of SA Tool by setting

Tx Practices in “Practices”



- 20% report the use of Cognitive Behavioral Treatments; few use manuals

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The long and winding road

Training for organizational change

- One session is ineffective-less than 10 percent uptake on knowledge, even less utilization
- Knowledge will not lead to utilization
- A mental model of the “vision” increases utilization
- Training methods (see meta-analysis by Agunisis & Kraiger, 2009)
 - Most effective “training programs” involve cognitive and interpersonal skills, followed by psychomotor skills or tasks
 - Training focused on mental models (conceptual) with rehearsal of tasks increases declarative knowledge and task performance
 - Training should include **declarative knowledge** (“what”, facts, meaning of terms), **procedural knowledge** (“how”), **strategic knowledge** (when to apply the technique)

Transfer...the problem

- Transfer methods allows for “generalized to the job context and maintained over a period of time ” (Baldwin & Ford, 1988:63).
 - **Individual Level Characteristics:** motivation to transfer, perceived utility/value, anxiety, self-efficacy, organizational commitment
 - **Training and Transfer Methods:** clear goals and objectives in the materials that are job specific, establish proximal goals for utilization of training materials, designs focused on feedback, reinforcement and remediation, *overlearning (i.e., repeated practice)*
 - **Environment:** supportative climate, social network support (peers and colleagues), opportunities to use new knowledge/skills
- Failure to get management support undermines adoption and implementation
- Lacks of mental model/conceptual framework reduces success: RNR principles is a conceptual model

Overall agencies will keep with old familiar models unless they are challenged to move ahead

Technical Assistance Efforts in USA

- Model 1: Let the agency request based on their needs
- Model 2: Have one “declarative **knowledge** event” followed by agency-requested assistance
- Model 3: Drug Court Model
 - Funding Stream: Plan—Implement—Enhance
 - **Core** Sanctions and Incentive Curriculum (NADCP)
- Model 4: NIC Model (evolving)
 - Select Sites
 - Focus on organizational development/benchmarks; long term

Most models lack well-defined skill building components, mental model, or transfer applications

What Matters in Adoption of EBPS?

Overview of NCJTP Findings

Qualities of Leaders

- 1. Community Setting**
- 2 Administrator:**
 - Human Services
 - Increased Knowledge of EBPs
 - Supports Rehabilitation
 - Pursue Reforms from Clinical Perspective
- 3. State Executive Support** (even for county)

Organizational Culture & Climate

Learning
Performance
Emphasis Quality
Tx
State Support*

Training Resources

Secure Physical Facilities
Internal Support
Training
Resources

Network Connections

Integration

Special Edition of *Drug and Alcohol Dependence*, August 2009

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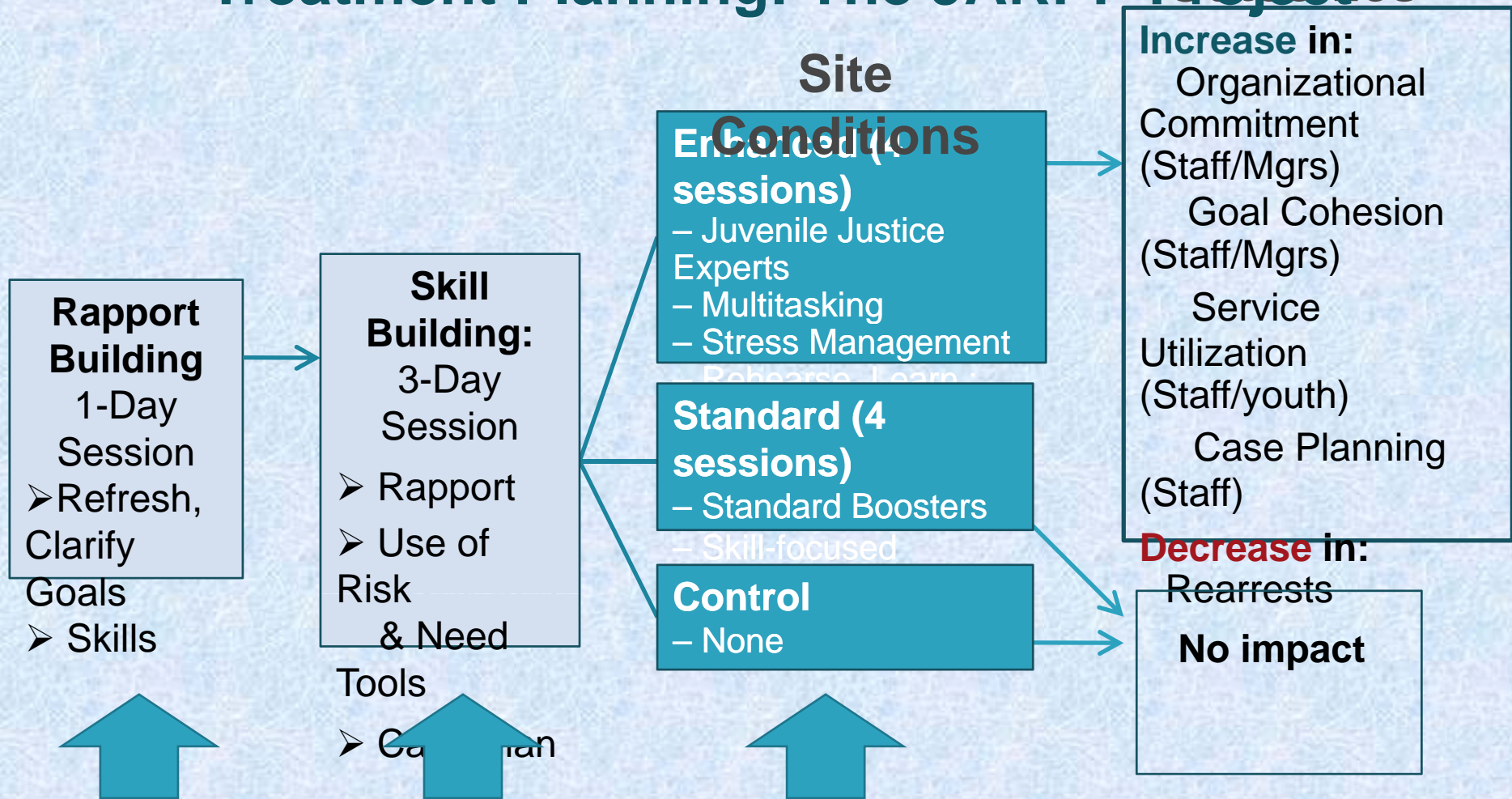
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What does it take for caseworkers to: 1) develop a *case plan* based on the risk of an individual and their criminogenic needs? 2) to refer/place the person in appropriate services and use appropriate controls?

Juvenile Assessment, Referral, Placement, and Treatment Planning: The JARPP **Projects**



Management Initiative to Support RNR Goals

Enhanced key components

- Juvenile Justice Specialists: Create in-house experts on techniques and application
- Booster Sessions were focused on combination of applied skills and case conferencing
- Social networks where consultant had monthly phone sessions, easy access; quarterly meetings
- Address time management, multitasking, reconcile agency priorities
- Focus on value clarification and organizational commitment

What type of role should the probation officer have in their use of risk and needs assessment to manage offenders in the community?

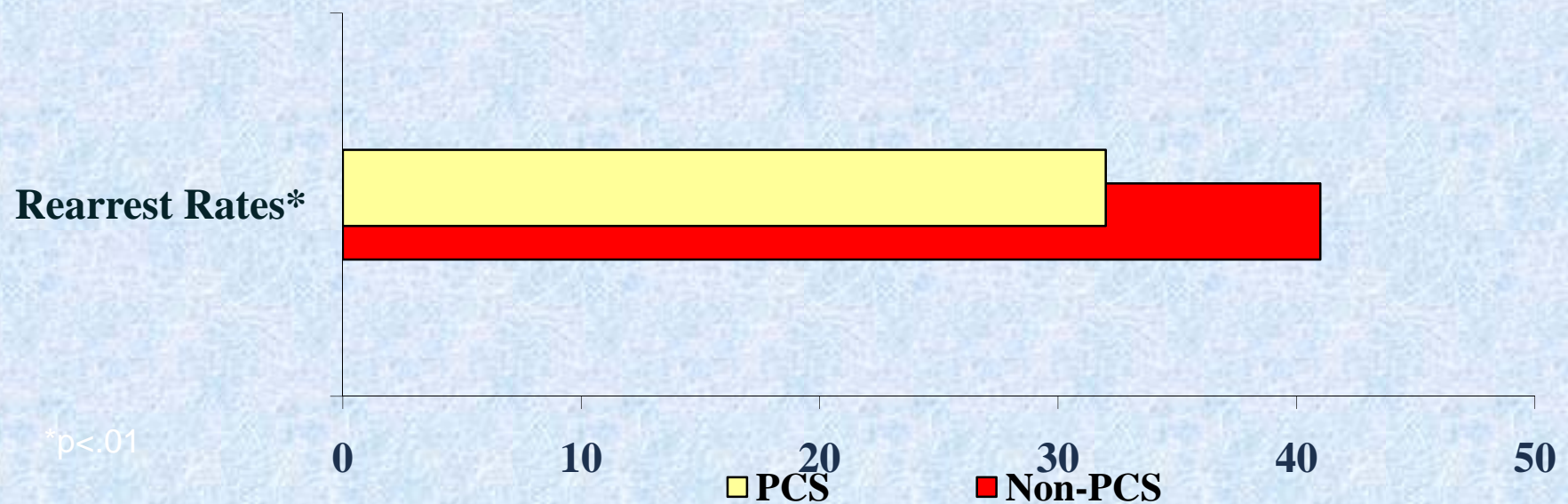
Behavioral Management Strategies in Supervision

- Unclear rules
- Discretionary procedures
- CJ Procedures
- Focus on Conditions, not goals
- Outlaw *persona*

- **Department/Respect**
 - Office Decorum
 - Citizen *persona*
- **Social Learning Model**
 - Mutually Develop Plan Tied to Criminogenic Traits
 - Feedback on Risk/Need, Supervision Plan, Progress
 - Focus on Prosocial Networks
 - Tie to Stages of Supervision
 - Positive Reinforcers
- **Clarify Expectations for Success**

Behavioral Management Strategies

- ✓ Reduced Recidivism
- ✓ Reduced Technical Violations
- ✓ Increased Access to Treatment
- ✓ Increased Retention in Treatment



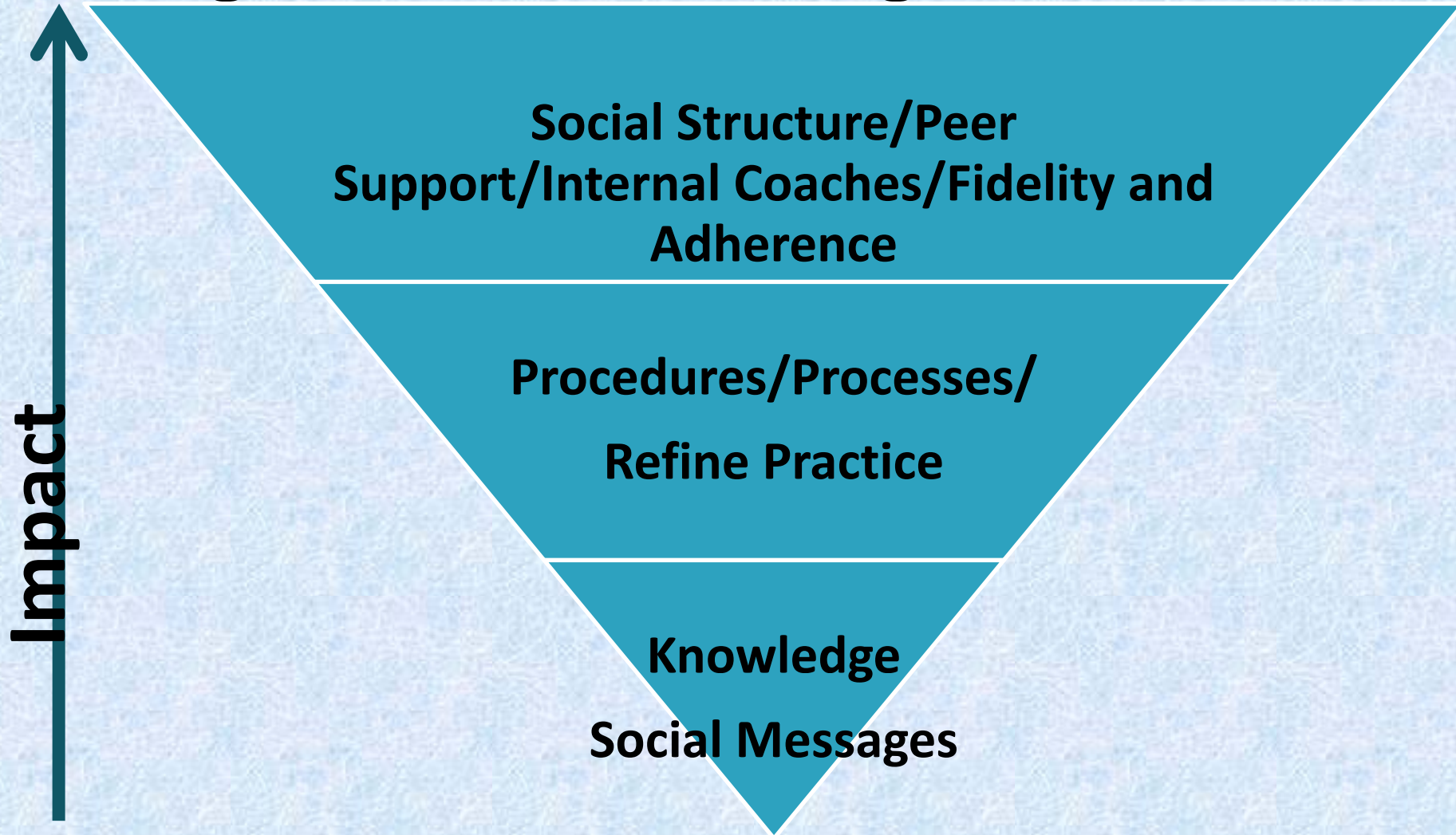
•38% Reduction in Odds of Rearrest Rates

What did we do in MD PCS project?

Model: Declarative Knowledge intertwined with Procedural Knowledge and Skills, followed by job-specific rehearsal, overlearning, and organizational support

- Phase 1:
 - Design the PCS Model (Mental Model with Proximal Goals)
 - Market the PCS Model in the Agency (Leadership, Team, Supervisors)
 - Learn MI modified for Probation Environment
 - Practice
 - Have Supervisors Measure Skills (QCS)
- Phase 2:
 - Learn Risk, Need, Responsivity (mental model)
 - Learn and Practice Level of Service Inventory-R (over learning)
 - Learn and Practice Case Planning (over learning)
 - “Book Club” (reinforcement)
 - Measure Outcomes of Case Plans (proximal)
- Continued Organizational Development
 - Train Supervisors in Coaching Skills
 - Conferences, Meetings, etc.

Organizational Change Processes



Transforming the Field

- **Political and Management Support of the New Concept:** Make sure leadership supports in spirit the new concept
- **Mental Models based on Conceptual Framework:** Build a picture of how EBPs will improve operations; work on the same foundation of a vision for the field
- **Reinforce Clinical Orientation:** a focus on more clinical aspects improves uptake (Henderson, Oser & Taxman, 2009) (culture and values)
- **Enhance staff “soft skills” in job: use reinforcement tools**
- **Focus on strategic transfer where structured after training experiences reinforce the mental models**
- **Build internal coaches and expertise**

Reference

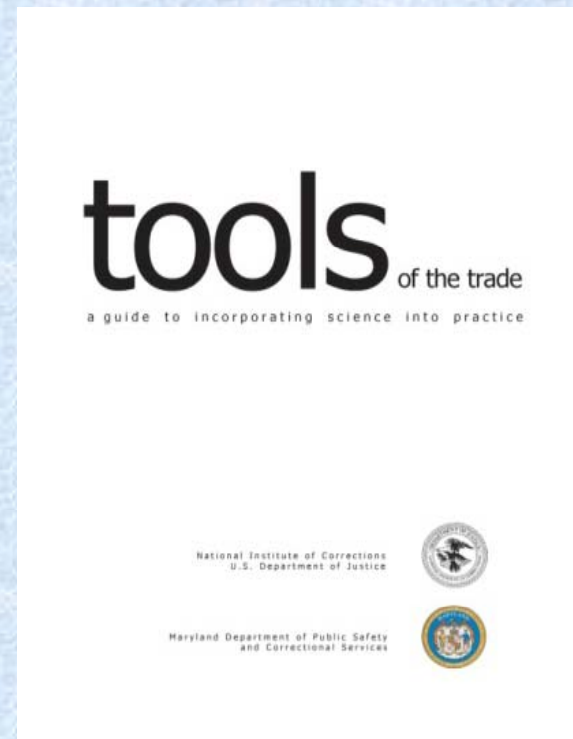
White Paper on Change

Technology Transfer of Evidence-based Practice in Substance Abuse Treatment in Community Corrections Settings: A White Paper

Steven Belenko, Faye
Taxman, & Harry Wexler

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Change Process



<http://www.nicic.org/Library/020095>