headspace

Evaluating the national implementation of early psychosis services

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The Evidence-based trend

- Continuing call for evidence-based programs
- These programs can be complex and if seen to be effective there is demand to implement on a larger scale

Raises important questions for implementation science:
- What if the evidence-based model is implemented differently in another setting?
- What does this mean for expected outcomes?
- How much variation can occur before outcomes are affected?

And also evaluation:
- How do we design evaluations that can draw linkages between implementation and outcomes?
What is headspace?

• **headspace** is Australia’s National Youth Mental Health Foundation

• Provides mental and general health support, information & services to young people (12 – 25) and their families across Australia.

• Services delivered through **headspace** centres - currently 60. These centres are:
  • Youth friendly
  • Focus on early intervention and early help seeking
  • Provide a seamless service/no wrong door
  • Co-location and integration of support services
  • Governed by a lead agency with a consortium of local services

Each centre is different, designed to fit local community needs

headspace model

headspace model
A national opportunity

• In May 2013, headspace contracted by Federal Government to implement an evidence-based, internationally recognised model, the Early Psychosis Prevention Intervention Centre (EPPIC).

• Delivers early psychosis services to young people aged 12 to 25 experiencing early psychosis or those who are likely to develop a psychotic disorder without specialist interventions

• To be delivered as an expansion of headspace services with a seamless pathway of care. This integrated model is called the headspace Youth Early Psychosis Program (hYEPP)

• hYEPP will deliver 16 Core Components of the EPPIC model with the capacity to tailor to the local environment
Overview

- Complexities of the program and implementation
- How we plan to evaluate it
- What we hope to achieve
The headspace Youth Early Psychosis Program (hYEPP)
Implementation Challenges

Implementing hYEPP is complex on two levels:

1. **The intervention** – complex, integrated and multi-level

2. **The implementation process** – multiple delivery agencies with varying experience in different state and territory jurisdictions.
Complexities -the Intervention

EPPIC Model

Integration

hYEPP Model

Delivered by different agencies, adapted to state & territory mental health systems

Specialist services in primary health platform

Evidence-based

16 components

EPPIC

headspace
Complexities – the Process

Department of Health

headspace

Oxygene

hYEPP

Site level

hYEPP

hYEPP

hYEPP

hYEPP

hYEPP

hYEPP

hYEPP

hYEPP
Evaluation Framework
At the logic model repair shop ...

So, I'm guessing this is for a comprehensive program-level intervention
So what are the implications?

- Large scale roll-out in different environments will mean the sites will be different as they are adapted to the local setting.
- Evidence-based models rely on implementation fidelity to achieve outcomes.
- Need to know what happened and why in order to interpret outcomes.
The Evaluation Framework

Stage 1: Map the process of service development and establishment

Stage 2: Assessment against the 16 core components outlined in the EPPIC model

Stage 3: Evaluation against the headspace Best Practice Framework

Stage 4: External outcome evaluation managed by the Federal Department of Health
Stage 1: Map the process of service development and establishment

Preliminary evaluation focus to determine what factors affect successful service development and establishment, including analysis of:

- barriers or facilitators to establishment
- major decisions that are made
- adaptations or changes that occur through the implementation cycle
- variance across sites
Methodology
Process Documentation

• Data on establishment and implementation collected through a process documentation approach

• Three key activities:
  - Document Analysis
  - Observation
  - Interviews

• But what to document? Traditionally use program theory, but given novel approach – unclear how theory of change will work.
Two Guiding Frameworks

Using two frameworks from implementation science to structure project and data collection processes:

• the **Consolidated Framework for Implementation Research**
  - To guide and categorise data collection and analysis

• Overlaid with **Replicating Effective Programs Framework**
  - To focus on balancing fidelity and adaptability
Consolidated Framework for Implementation Research (CFIR) helps to structure implementation project processes.

Five domains:

- Intervention – characteristics being implemented
- Outer setting – economic, political and social context
- Inner setting – structural and social context of process
- Process – activities of the implementation process
- Relationships – organisations involved in process
Replicating Effective Programs

• Framework developed to disseminate effective behavioural and treatment interventions for implementation in community-based service settings.

• Focuses on achieving a balance between adequate fidelity to the intervention and accommodating differences across sites.

• Four steps to disseminate and replicate effective programs:

  - Stage 1
  - Pre-conditions
  - Pre-implementation
  - Implementation
  - Maintenance & evolution
Documenting the Implementation Process

Pre-conditions

Adaptation from EPPIC Model to headspace Platform

Initial design of program model

Outer Setting – economic, political and social context of hYEPP program

Inner Setting – structural, political and social context of implementation process

headscape
- Organisational context
- Project processes
- Delivery Partnerships
- Key decisions made (What, who, when, how & why)

Lead agency selection
Packaging program model

Transfer of package information and guidance from hNO to site

Pre-implementation

Implementation of package to establish services

hYEPP site
- Local Context
- Cluster delivery configuration
- Establishment Process (incl. governance, SLAs, local providers)
- Key adaptations to local setting (What, who, when, how & why)

Implementation

Service Delivery Commences

hYEPP service delivery model at each site

Final design of site-level model
What we hope to achieve
Building the evidence base

• Opportunity to test the appropriateness of these frameworks to conduct evaluation of complex, evidence-based programs that are being implemented on a national scale

• Determine how detailed knowledge of the implementation process can be used to interpret outcomes.

• This may be able to inform future implementation practice and the roll-out of services of this nature

• And contribute to implementation science to understand how such complex service reforms are achieved in practice
References

CFIR

REP

Process Documentation
questions