

WEBVTT

1 00:00:00.780 --> 00:00:03.960 <v ->Okay. Well, hello, everybody.</v>
2 00:00:03.960 --> 00:00:06.940 Welcome to our CMIPS seminar.
3 00:00:06.940 --> 00:00:09.637 CMIPS is the acronym for our Center for Methods
4 00:00:09.637 --> 00:00:12.720 in Implementation and Prevention Science.
5 00:00:12.720 --> 00:00:16.290 I'm Donna Spiegelman, the Director of the Center,
6 00:00:16.290 --> 00:00:19.590 and this seminar is being co-sponsored
7 00:00:19.590 --> 00:00:21.900 by the Dissemination and Implementation
8 00:00:21.900 --> 00:00:26.310 Science Methods Core, the NIH T32 training
9 00:00:26.310 --> 00:00:29.650 Implementation Science Research in Methods,
10 00:00:32.010 --> 00:00:34.110 and R3EDI, the Rigorous, Rapid,
11 00:00:34.110 --> 00:00:37.500 and Relevant Evidence Adaptation and Implementation
12 00:00:37.500 --> 00:00:42.210 to Ending the HIV Epidemic Implementation
13 00:00:42.210 --> 00:00:44.820 Science Hub.
14 00:00:44.820 --> 00:00:46.380 We're very pleased to welcome our guest,
15 00:00:46.380 --> 00:00:49.590 Dr. Rani Elwy,
16 00:00:49.590 --> 00:00:53.340 who's Professor of Psychiatry and Human Behavior,
17 00:00:53.340 --> 00:00:55.473 and Professor of Behavioral and Social Sciences
18 00:00:56.790 --> 00:01:00.600 at Brown University.
19 00:01:00.600 --> 00:01:02.880 She is a health psychologist, health services
20 00:01:02.880 --> 00:01:05.580 researcher,
21 00:01:05.580 --> 00:01:08.490 and an implementation scientist
22 00:01:08.490 --> 00:01:10.200 who examines patients' access to
23 00:01:10.200 --> 00:01:13.320 and uptake of mental health care,
24 00:01:13.320 --> 00:01:16.353 the effectiveness and implementation
of complementary and integrative health services
for treating mental health disorders and pain,

25 00:01:17.250 --> 00:01:20.490 and she works on crisis and risk communication

26 00:01:20.490 --> 00:01:24.600 between patients, families, providers, and health systems.

27 00:01:24.600 --> 00:01:28.200 Dr. Elwy is the Founding Director of the Brown Research

28 00:01:28.200 --> 00:01:30.330 on Implementation and Dissemination

29 00:01:30.330 --> 00:01:33.360 to Guide Evidence Use BRIDGE Program,

30 00:01:33.360 --> 00:01:36.690 which sounds like a sister program to our own here,

31 00:01:36.690 --> 00:01:39.900 Co-Director of Implementation Science in Advance,

32 00:01:39.900 --> 00:01:43.140 Rhode Island Clinical Translational Research,

33 00:01:43.140 --> 00:01:44.880 and Implementation Scientist

34 00:01:44.880 --> 00:01:47.220 in the Biobehavioral Sciences Core

35 00:01:47.220 --> 00:01:50.700 of the Providence/Boston Center for AIDS Research.

36 00:01:50.700 --> 00:01:52.800 Dr. Elwy is a VA

37 00:01:52.800 --> 00:01:56.160 or Veterans Administration Implementation Scientist

38 00:01:56.160 --> 00:01:59.280 serving as the multiple principal investigator

39 00:01:59.280 --> 00:02:01.320 of two program grants:

40 00:02:01.320 --> 00:02:03.120 The Bridging the Care Continuum

41 00:02:03.120 --> 00:02:06.690 for Vulnerable Veterans Bridge QUERI Program,

42 00:02:06.690 --> 00:02:08.760 which consists of three hybrid

43 00:02:08.760 --> 00:02:11.940 type three effectiveness implementation trials

44 00:02:11.940 --> 00:02:13.920 to increase the uptake of mental health

45 00:02:13.920 --> 00:02:16.470 and substance use services and treatments

46 00:02:16.470 --> 00:02:21.060 among veterans in 18 sites.

47 00:02:21.060 --> 00:02:24.750 And two, the Evidence Policy and Implementation Center,

48 00:02:24.750 --> 00:02:26.040 a QUERI program

49 00:02:26.040 --> 00:02:29.340 dedicated to building capacity in implementation science

50 00:02:29.340 --> 00:02:32.460 across the entire VA healthcare system.

51 00:02:32.460 --> 00:02:34.380 Additionally, Dr. Elwy is a Fellow

52 00:02:34.380 --> 00:02:36.570 of the Society of Behavioral Medicine

53 00:02:36.570 --> 00:02:40.830 and the recipient of a VA Research Center Scientist Award.

54 00:02:40.830 --> 00:02:42.900 So, clearly, she's got her bona fide

55 00:02:42.900 --> 00:02:47.580 in implementation science all across the spectrum.

56 00:02:47.580 --> 00:02:49.170 Today, she's gonna talk about

57 00:02:49.170 --> 00:02:52.050 Hybrid Effectiveness Implementation Trials:

58 00:02:52.050 --> 00:02:55.110 Testing Strategies, Assessing Outcomes,

59 00:02:55.110 --> 00:02:57.390 and Planning for Sustainability.

60 00:02:57.390 --> 00:03:00.270 And, Dr. Elwy, would you prefer to give your talk

61 00:03:00.270 --> 00:03:01.530 and then take questions,

62 00:03:01.530 --> 00:03:04.260 or would you like to have people pop in questions

63 00:03:04.260 --> 00:03:06.138 into the chat as you go along?

64 00:03:06.138 --> 00:03:08.555 (indistinct)

65 00:03:19.590 --> 00:03:22.200 <v ->Thank you for the invitation and that introduction</v>

66 00:03:22.200 --> 00:03:24.960 and apologies that it was so long.

67 00:03:24.960 --> 00:03:27.420 But anyway, I'm really happy to be here.

68 00:03:27.420 --> 00:03:28.253 And as you see,

69 00:03:28.253 --> 00:03:31.110 I actually took out the word trials and put in studies

70 00:03:31.110 --> 00:03:35.013 and I'll explain why in a minute.

71 00:03:36.000 --> 00:03:39.300 So I have some funding grants

72 00:03:39.300 --> 00:03:41.490 and just wanted to provide those disclosures,

73 00:03:41.490 --> 00:03:44.040 and also that my views are mine alone

74 00:03:44.040 --> 00:03:46.773 and not that of the VA or the federal government.

75 00:03:48.330 --> 00:03:51.780 So when I think about why I feel so passionate

76 00:03:51.780 --> 00:03:53.940 about implementation science...

77 00:03:53.940 --> 00:03:55.560 Actually I just realized that just so you know,

78 00:03:55.560 --> 00:04:00.560 I can't actually see the chat here in the system that...

79 00:04:01.851 --> 00:04:03.751 So yeah, so yeah, thank you very much.

80 00:04:06.180 --> 00:04:09.090 <v Donna>You know, I'll take care of it. (in-distinct)</v>

81 00:04:09.090 --> 00:04:09.930 <v ->Thank you.</v>

82 00:04:09.930 --> 00:04:12.990 So when I think about why I'm so passionate

83 00:04:12.990 --> 00:04:14.100 about implementation science

84 00:04:14.100 --> 00:04:17.190 or how I really just fell into it, two things come to mind,

85 00:04:17.190 --> 00:04:19.140 and I'm very well aware

86 00:04:19.140 --> 00:04:22.020 that I'm talking to a very quantitatively strong group,

87 00:04:22.020 --> 00:04:24.660 so at least here are some statistics for you.

88 00:04:24.660 --> 00:04:27.270 So the first is that we all know that on average

89 00:04:27.270 --> 00:04:30.630 it takes 17 years for 14% of research

90 00:04:30.630 --> 00:04:32.310 to make its way into practice.

91 00:04:32.310 --> 00:04:34.320 I recently read that the statistic

92 00:04:34.320 --> 00:04:36.660 is now approximately 15 years,

93 00:04:36.660 --> 00:04:40.200 but that's really not enough of a change,

94 00:04:40.200 --> 00:04:42.420 we still have a long way to go.

95 00:04:42.420 --> 00:04:47.400 And then the other statistic is that 85% of federal research

96 00:04:47.400 --> 00:04:50.220 is wasted every year due to the fact

97 00:04:50.220 --> 00:04:53.820 that we do not move our evidence into practice,

98 00:04:53.820 --> 00:04:58.110 and this equates to about \$70 billion per year,

99 00:04:58.110 --> 00:05:00.360 which is kind of shocking.

100 00:05:00.360 --> 00:05:03.360 And it was actually those two statistics

101 00:05:03.360 --> 00:05:06.660 that I said to my dean

102 00:05:06.660 --> 00:05:09.210 who made him really sort of pay attention

103 00:05:09.210 --> 00:05:10.320 to implementation science

104 00:05:10.320 --> 00:05:12.783 and decide to invest in our program at Brown.

105 00:05:14.370 --> 00:05:16.350 I feel very fortunate to have grown up

106 00:05:16.350 --> 00:05:20.070 in the VA healthcare system as an implementation scientist.

107 00:05:20.070 --> 00:05:23.400 Our national implementation science program is called QUERI,

108 00:05:23.400 --> 00:05:26.160 which is the Quality Enhancement Research Initiative.

109 00:05:26.160 --> 00:05:29.640 And under the leadership of Amy Kilborn, Dr. Amy Kilborn,

110 00:05:29.640 --> 00:05:32.160 we now have over 50 centers

111 00:05:32.160 --> 00:05:36.600 who partner with up to 70 or more different program offices

112 00:05:36.600 --> 00:05:38.610 and regional partners around the country.

113 00:05:38.610 --> 00:05:41.010 One of the programs that I am PI of,

114 00:05:41.010 --> 00:05:42.360 with three other colleagues,

115 00:05:42.360 --> 00:05:46.350 is the BRIDGE program, which is in Bedford, Massachusetts.

116 00:05:46.350 --> 00:05:49.800 And it's one of these five year

117 00:05:49.800 --> 00:05:52.020 five plus million dollar grants

118 00:05:52.020 --> 00:05:55.320 where we have three hybrid type three trials

119 00:05:55.320 --> 00:05:56.880 that we are doing all at once,

120 00:05:56.880 --> 00:05:58.980 implementing three different evidence-based practices,

121 00:05:58.980 --> 00:06:01.575 and so that's what I'm gonna be talking about today.

122 00:06:01.575 --> 00:06:05.970 I brought my implementation science knowledge and training

123 00:06:05.970 --> 00:06:08.850 from the VA into Brown five and a half years ago,

124 00:06:08.850 --> 00:06:12.150 and we recently rebranded our implementation science core

125 00:06:12.150 --> 00:06:15.340 as the Brown Research on Implementation and Dissemination

126 00:06:17.280 --> 00:06:18.930 to Guide Evidence Use BRIDGE Program.
127 00:06:18.930 --> 00:06:21.090 And as you all know here,
128 00:06:21.090 --> 00:06:23.250 we just don't have enough training programs,
129 00:06:23.250 --> 00:06:25.230 we don't have enough capacity building programs
130 00:06:25.230 --> 00:06:26.310 for implementation science,
131 00:06:26.310 --> 00:06:27.210 and so a lot of us
132 00:06:27.210 --> 00:06:30.363 are just starting to like implement our own as a result.
133 00:06:32.310 --> 00:06:37.310 So I just wanted to talk about hybrid designs and trials,
134 00:06:38.040 --> 00:06:42.330 but I'm actually gonna try to convince us all
135 00:06:42.330 --> 00:06:45.720 to use the language of hybrid studies from here on out
136 00:06:45.720 --> 00:06:47.280 and I'll explain why.
137 00:06:47.280 --> 00:06:50.400 So we all know the original paper that came out in 2012
138 00:06:50.400 --> 00:06:53.640 by Jeff Curran, Mark Bauer, Brian Mittman,
139 00:06:53.640 --> 00:06:58.080 Jeff Pyne, and Cheryl Stettler, that was really seminal.
140 00:06:58.080 --> 00:07:00.380 I was just starting my implementation science training
141 00:07:00.380 --> 00:07:03.540 in this year at the Implementation Research Institute,
142 00:07:03.540 --> 00:07:05.520 and everyone was so excited
143 00:07:05.520 --> 00:07:06.960 about these different hybrid designs,
144 00:07:06.960 --> 00:07:08.490 the one, the two, the three.
145 00:07:08.490 --> 00:07:11.160 I know that many of you already know what these are.
146 00:07:11.160 --> 00:07:13.470 I'm just gonna be focusing today on the three
147 00:07:13.470 --> 00:07:16.860 where really the primary aim is on testing the effectiveness
148 00:07:16.860 --> 00:07:18.450 of the implementation strategies

149 00:07:18.450 --> 00:07:22.683 to increase the uptake of the evidence-based practice.

150 00:07:23.760 --> 00:07:25.320 When this paper came out,

151 00:07:25.320 --> 00:07:27.990 Brian Mittman was one of my mentors and he said, you know,

152 00:07:27.990 --> 00:07:30.360 they really should have said right from the beginning

153 00:07:30.360 --> 00:07:34.740 that every randomized trial is always a hybrid one,

154 00:07:34.740 --> 00:07:36.180 and so they've actually started

155 00:07:36.180 --> 00:07:38.610 to really change that language.

156 00:07:38.610 --> 00:07:40.740 And so just recently they published,

157 00:07:40.740 --> 00:07:42.990 this was from last December,

158 00:07:42.990 --> 00:07:47.130 reflections on 10 years of using hybrid designs,

159 00:07:47.130 --> 00:07:47.997 hybrid trials,

160 00:07:47.997 --> 00:07:49.830 and they tried to make a good case

161 00:07:49.830 --> 00:07:53.460 for why it's really much more important

162 00:07:53.460 --> 00:07:55.260 to be calling these hybrid studies.

163 00:07:55.260 --> 00:07:59.850 And I'm really happy about this because this...

164 00:07:59.850 --> 00:08:01.020 And I know that, again,

165 00:08:01.020 --> 00:08:04.110 I'm talking to a very quantitatively savvy group.

166 00:08:04.110 --> 00:08:06.960 Not all things in the real world can be randomized,

167 00:08:06.960 --> 00:08:09.330 and so we have had to do studies

168 00:08:09.330 --> 00:08:10.800 that I would consider a hybrid

169 00:08:10.800 --> 00:08:12.630 but didn't fit under the definition

170 00:08:12.630 --> 00:08:15.510 because it wasn't a randomized control trial.

171 00:08:15.510 --> 00:08:18.000 So in these updated recommendations,

172 00:08:18.000 --> 00:08:19.740 they really have three things

173 00:08:19.740 --> 00:08:21.390 that they want people to take away.

174 00:08:21.390 --> 00:08:24.430 Replacing the term design in favor of the word study

175 00:08:25.590 --> 00:08:26.850 because, as I just said,
176 00:08:26.850 --> 00:08:30.120 many people are applying hybrids and non
trial designs
177 00:08:30.120 --> 00:08:33.610 and it is possible to conduct a hybrid study
178 00:08:34.500 --> 00:08:36.630 to answer questions about intervention effec-
tiveness
179 00:08:36.630 --> 00:08:39.724 and implementation in a wide range of study
design.
180 00:08:39.724 --> 00:08:42.960 (indistinct)
181 00:08:42.960 --> 00:08:44.430 They offer in this paper,
182 00:08:44.430 --> 00:08:49.050 four questions to help people decide
183 00:08:49.050 --> 00:08:52.740 which of the hybrid studies that they should
be conducting,
184 00:08:52.740 --> 00:08:53.970 and I'll tell that to you in a minute,
185 00:08:53.970 --> 00:08:57.480 and they've also really emphasized how you
can build cost.
186 00:08:57.480 --> 00:08:59.427 And I know that we have some cost people in
the audience,
187 00:08:59.427 --> 00:09:01.920 how to really bring in cost into hybrid studies,
188 00:09:01.920 --> 00:09:05.550 because when our ultimate goal from all of
this work
189 00:09:05.550 --> 00:09:09.420 is to implement and sustain our evidence-
based practice,
190 00:09:09.420 --> 00:09:12.063 cost is such a huge and driving factor for that.
191 00:09:13.170 --> 00:09:16.650 So these are the four questions that are asked
in the paper.
192 00:09:16.650 --> 00:09:19.410 What is the nature of your effectiveness data?
193 00:09:19.410 --> 00:09:20.640 How much do you expect
194 00:09:20.640 --> 00:09:23.100 the intervention will need to be adapted?
195 00:09:23.100 --> 00:09:26.190 How much do you know about implementation
determinants?
196 00:09:26.190 --> 00:09:28.170 And how ready are you to evaluate
197 00:09:28.170 --> 00:09:30.540 real world implementation strategies?

198 00:09:30.540 --> 00:09:33.120 If you know a lot about your effectiveness data,
199 00:09:33.120 --> 00:09:36.660 if you feel that there needs to be some components
200 00:09:36.660 --> 00:09:41.223 of adaptation built into your actual aims,
201 00:09:42.270 --> 00:09:44.220 if you already have a good sense
202 00:09:44.220 --> 00:09:45.870 of what your implementation determinants,
203 00:09:45.870 --> 00:09:48.240 your barriers and facilitators are,
204 00:09:48.240 --> 00:09:52.380 and if you feel that you can develop and evaluate
205 00:09:52.380 --> 00:09:54.180 those real world implementation strategies
206 00:09:54.180 --> 00:09:55.650 to address those determinants,
207 00:09:55.650 --> 00:09:57.960 then you're probably ready for a hybrid three
208 00:09:57.960 --> 00:10:00.420 or if not at least a hybrid two.
209 00:10:00.420 --> 00:10:03.360 But if you're more on the end of I don't know,
210 00:10:03.360 --> 00:10:05.730 then you probably wanna go to more of a hybrid one.
211 00:10:05.730 --> 00:10:08.220 And so this paper really helps people
212 00:10:08.220 --> 00:10:10.713 think that through more than the original one.
213 00:10:12.540 --> 00:10:13.710 So this is gonna be the crux
214 00:10:13.710 --> 00:10:14.970 of what I'm gonna be talking about today.
215 00:10:14.970 --> 00:10:17.970 When I think about what we want to achieve
216 00:10:17.970 --> 00:10:19.050 in implementation science,
217 00:10:19.050 --> 00:10:20.910 I think of these three big buckets,
218 00:10:20.910 --> 00:10:22.230 and I'm sure that there are other ones
219 00:10:22.230 --> 00:10:23.790 and we can definitely have a conversation
220 00:10:23.790 --> 00:10:25.860 about why I haven't included others.
221 00:10:25.860 --> 00:10:28.470 But I think of testing strategies
222 00:10:28.470 --> 00:10:31.110 because strategies are what is going to make us
223 00:10:31.110 --> 00:10:36.110 be able to get things implemented uptake in the real world.

224 00:10:36.960 --> 00:10:39.090 But it has a lot of different factors to it.

225 00:10:39.090 --> 00:10:42.000 You need to specify and operationalize your strategies,

226 00:10:42.000 --> 00:10:43.920 you have to randomize on strategies,

227 00:10:43.920 --> 00:10:46.350 and for some people that's a very new thing,

228 00:10:46.350 --> 00:10:47.970 you're not randomizing on the intervention,

229 00:10:47.970 --> 00:10:51.630 you're randomizing on the strategies, and tracking.

230 00:10:51.630 --> 00:10:54.810 You know, I often say that as implementation scientists,

231 00:10:54.810 --> 00:10:56.260 our job is just to track,

232 00:10:56.260 --> 00:10:58.920 track everything, track adaptations,

233 00:10:58.920 --> 00:11:00.900 track whether they were fidelity consistent,

234 00:11:00.900 --> 00:11:02.070 track your strategies,

235 00:11:02.070 --> 00:11:03.120 and especially if you're doing something

236 00:11:03.120 --> 00:11:05.340 across a lot of sites, that's a lot of tracking.

237 00:11:05.340 --> 00:11:07.350 So we'll talk about that.

238 00:11:07.350 --> 00:11:09.090 I also think that we really need to be focusing

239 00:11:09.090 --> 00:11:10.260 on assessing outcomes,

240 00:11:10.260 --> 00:11:12.120 and these always need to be guided

241 00:11:12.120 --> 00:11:14.070 by a theory, model or framework.

242 00:11:14.070 --> 00:11:16.170 You need to do this over multiple time points.

243 00:11:16.170 --> 00:11:17.370 One time is not enough

244 00:11:17.370 --> 00:11:19.383 in the scope of an implementation trial,

245 00:11:20.250 --> 00:11:21.540 things change over time.

246 00:11:21.540 --> 00:11:26.540 So one strategy might be leading to a better outcome,

247 00:11:26.610 --> 00:11:28.200 but when you use other strategies,

248 00:11:28.200 --> 00:11:30.240 maybe those outcomes aren't so good,

249 00:11:30.240 --> 00:11:32.610 and so we really need to know those differences.

250 00:11:32.610 --> 00:11:34.680 And one of the most important things,

251 00:11:34.680 --> 00:11:36.870 and this has been a message I've had to give
 252 00:11:36.870 --> 00:11:39.850 to a lot of my clinical trialist efficacy re-
 searchers,
 253 00:11:39.850 --> 00:11:42.060 our measures need to be pragmatic.
 254 00:11:42.060 --> 00:11:45.300 Please don't use a 60 item measure
 255 00:11:45.300 --> 00:11:46.590 in your implementation study,
 256 00:11:46.590 --> 00:11:48.270 it's not gonna be used in the real world.
 257 00:11:48.270 --> 00:11:50.640 Please don't include a two hour
 258 00:11:50.640 --> 00:11:54.120 clinical structured interview to assess out-
 comes,
 259 00:11:54.120 --> 00:11:55.950 again, not gonna be used in the real world,
 260 00:11:55.950 --> 00:11:58.980 really focusing on pragmatic, easy to use,
 261 00:11:58.980 --> 00:12:00.930 transferable measures.
 262 00:12:00.930 --> 00:12:03.892 And then finally planning for sustainability.
 263 00:12:03.892 --> 00:12:06.720 If we don't plan, it will not happen,
 264 00:12:06.720 --> 00:12:09.510 and that's also a very hard message for people
 to hear.
 265 00:12:09.510 --> 00:12:12.600 How do I know, if I'm doing a hybrid type
 one,
 266 00:12:12.600 --> 00:12:15.300 that whatever I'm implementing is gonna be
 effective?
 267 00:12:15.300 --> 00:12:18.480 And I say, let's just pretend that it will be.
 268 00:12:18.480 --> 00:12:21.210 Let's find out what is happening during that
 trial
 269 00:12:21.210 --> 00:12:23.760 that actually can inform our next steps
 270 00:12:23.760 --> 00:12:25.680 and help us think through,
 271 00:12:25.680 --> 00:12:27.900 you know, who is gonna own this eventually.
 272 00:12:27.900 --> 00:12:29.520 And obviously this involves
 273 00:12:29.520 --> 00:12:32.310 a lot of engagement with the partners, com-
 munity based,
 274 00:12:32.310 --> 00:12:35.280 health system based that we're gonna be need-
 ing
 275 00:12:35.280 --> 00:12:37.413 to eventually sustain our efforts.

276 00:12:39.240 --> 00:12:40.440 When I think about the theories,
277 00:12:40.440 --> 00:12:43.140 models and frameworks I use, I always have
a process model,
278 00:12:43.140 --> 00:12:47.070 and so in the VA we have this QUERI imple-
mentation roadmap
279 00:12:47.070 --> 00:12:48.645 that everyone can use.
280 00:12:48.645 --> 00:12:53.645 It's very foundational, but it works in every
case,
281 00:12:54.870 --> 00:12:57.480 so we have a pre-implementation phase,
282 00:12:57.480 --> 00:12:59.640 an implementation phase, a sustainment
phase.
283 00:12:59.640 --> 00:13:02.280 It looks like you always go in one way around
this,
284 00:13:02.280 --> 00:13:03.540 but you can go back and forth,
285 00:13:03.540 --> 00:13:04.887 especially in the pre-implementation
286 00:13:04.887 --> 00:13:06.930 and implementation phases.
287 00:13:06.930 --> 00:13:08.850 So we use this to guide our work
288 00:13:08.850 --> 00:13:10.200 and this is really applicable
289 00:13:10.200 --> 00:13:11.940 and we'll talk more about these details,
290 00:13:11.940 --> 00:13:14.640 but it's something that you should consider
291 00:13:14.640 --> 00:13:15.960 to have a process model
292 00:13:15.960 --> 00:13:19.323 to drive what your steps are of your work.
293 00:13:20.760 --> 00:13:23.040 In our Bridge QUERI Program,
294 00:13:23.040 --> 00:13:28.040 which is testing the uptake and hopefully
sustainability
295 00:13:28.470 --> 00:13:29.910 of three evidence-based practices,
296 00:13:29.910 --> 00:13:32.040 these are each in a hybrid type three trial.
297 00:13:32.040 --> 00:13:33.840 So they're simultaneously happening
298 00:13:33.840 --> 00:13:37.377 led by three different people and their teams.
299 00:13:37.377 --> 00:13:40.860 We're working with veterans who have opioid
use disorders,
300 00:13:40.860 --> 00:13:43.320 we're working with veterans who have been
recently released

301 00:13:43.320 --> 00:13:45.330 from an incarceration setting,
302 00:13:45.330 --> 00:13:46.560 and then we have veterans
303 00:13:46.560 --> 00:13:50.490 who are engaging in criminal activities
304 00:13:50.490 --> 00:13:52.590 and are going through the veteran treatment
court.
305 00:13:52.590 --> 00:13:53.430 Veteran treatment courts
306 00:13:53.430 --> 00:13:54.960 are actually based in the community,
307 00:13:54.960 --> 00:13:57.450 but we work with our veteran justice outreach
group
308 00:13:57.450 --> 00:13:59.367 within the VA to work with that.
309 00:13:59.367 --> 00:14:00.200 And so, as you can see,
310 00:14:00.200 --> 00:14:03.390 these are not easy to solve problems,
311 00:14:03.390 --> 00:14:07.410 this is a vast amount of effort on these people.
312 00:14:07.410 --> 00:14:12.410 So the Homeless Overdose Prevention Expansion
Project, HOPE,
313 00:14:12.480 --> 00:14:15.996 is really trying to implement an opioid over-
dose education
314 00:14:15.996 --> 00:14:19.380 and naloxone distribution to reduce overdoses.
315 00:14:19.380 --> 00:14:21.330 So that's the evidence-based practice there,
316 00:14:21.330 --> 00:14:24.753 and that is led by Dr. Amanda Midboe at
Palo Alto.
317 00:14:25.590 --> 00:14:29.730 The PIE Project is a peer support initiative.
318 00:14:29.730 --> 00:14:32.340 It's a Post-Incarceration Engagement Project
319 00:14:32.340 --> 00:14:34.590 where we're really helping to work with vet-
erans
320 00:14:34.590 --> 00:14:37.050 when they come out of jails for social support,
321 00:14:37.050 --> 00:14:39.780 skill building, linkage to care.
322 00:14:39.780 --> 00:14:41.340 And then we have MISSION-CJ,
323 00:14:41.340 --> 00:14:43.920 which is very long acronym I'll tell about it
in a second,
324 00:14:43.920 --> 00:14:46.380 where we are aiding veterans in case manage-
ment,
325 00:14:46.380 --> 00:14:50.823 assertive outreach, hybrid treatments, linkage
support.

326 00:14:51.780 --> 00:14:53.130 Also really trying to make sure
327 00:14:53.130 --> 00:14:56.700 that we are examining the health equity needs
328 00:14:56.700 --> 00:14:57.533 of our veterans
329 00:14:57.533 --> 00:15:02.450 as well as how we can help them stay housed
330 00:15:03.750 --> 00:15:05.550 if they're at risk for homelessness.
331 00:15:05.550 --> 00:15:09.690 My job in all of this is I run our implementa-
tion core,
332 00:15:09.690 --> 00:15:13.170 and here we are trying across all these three
projects
333 00:15:13.170 --> 00:15:18.170 to have similar phases, similar measures, sim-
ilar designs.
334 00:15:18.390 --> 00:15:21.840 So that's been a real learning experience for
me
335 00:15:21.840 --> 00:15:24.420 to simultaneously work with three different
trials
336 00:15:24.420 --> 00:15:26.340 at the same time to really make sure
337 00:15:26.340 --> 00:15:29.493 that we are capturing data on a widespread
basis.
338 00:15:30.330 --> 00:15:32.850 Here are my three MPI colleagues.
339 00:15:32.850 --> 00:15:35.580 Keith McInnes is running the PIE Project
with his team,
340 00:15:35.580 --> 00:15:38.700 David Smelson is running the MISSION-CJ
Project,
341 00:15:38.700 --> 00:15:41.340 and Amanda Midboe is running the HOPE
Project.
342 00:15:41.340 --> 00:15:44.640 It's definitely a village that's doing this.
343 00:15:44.640 --> 00:15:45.780 And what's really exciting
344 00:15:45.780 --> 00:15:48.780 is when your work is totally aligned with
policy,
345 00:15:48.780 --> 00:15:50.610 and I really want people to think about that
346 00:15:50.610 --> 00:15:52.080 with the types of work that you do,
347 00:15:52.080 --> 00:15:54.150 because policy is actually going to help you
348 00:15:54.150 --> 00:15:55.680 with your sustainability.

349 00:15:55.680 --> 00:15:59.340 So this is from the February State of the Union,

350 00:15:59.340 --> 00:16:03.060 and there were three parts of this that completely aligned

351 00:16:03.060 --> 00:16:04.260 with the work that we are doing.

352 00:16:04.260 --> 00:16:08.040 So expanding peer support services in the VA.

353 00:16:08.040 --> 00:16:10.440 Two of our three evidence-based practices

354 00:16:10.440 --> 00:16:13.650 that I'll tell you about, the PIE and MISSION-CJ,

355 00:16:13.650 --> 00:16:15.930 are being implemented by peer support specialists.

356 00:16:15.930 --> 00:16:17.700 So we need more of them in the VA,

357 00:16:17.700 --> 00:16:21.210 and so the federal government is funding this.

358 00:16:21.210 --> 00:16:23.970 We're trying to reduce homelessness.

359 00:16:23.970 --> 00:16:26.280 So this is also a focus

360 00:16:26.280 --> 00:16:28.920 of the Biden Administration for veterans.

361 00:16:28.920 --> 00:16:30.870 And then we're also expanding outreach

362 00:16:30.870 --> 00:16:32.100 to justice involved veterans,

363 00:16:32.100 --> 00:16:34.920 which is a very big part of the MISSION-CJ Project

364 00:16:34.920 --> 00:16:35.850 as well as PIE.

365 00:16:35.850 --> 00:16:38.280 So we can see that we have

366 00:16:38.280 --> 00:16:40.320 a lot of policies support behind this

367 00:16:40.320 --> 00:16:43.440 and we just also need the funding too.

368 00:16:43.440 --> 00:16:45.240 So just a brief thing about HOPE,

369 00:16:45.240 --> 00:16:49.260 and just to sort of maybe state the obvious to people,

370 00:16:49.260 --> 00:16:50.903 I am not the content experts with any of these,

371 00:16:50.903 --> 00:16:53.070 I'm the implementation scientist.

372 00:16:53.070 --> 00:16:54.540 My colleagues who run these projects

373 00:16:54.540 --> 00:16:56.430 also have implementation science expertise,

374 00:16:56.430 --> 00:16:58.590 but we needed a central core

375 00:16:58.590 --> 00:17:00.030 to sort of oversee all of these.

376 00:17:00.030 --> 00:17:04.890 And so Amanda is working with HOPE in
five sites
377 00:17:04.890 --> 00:17:07.053 that are in California, Nevada, and Hawaii,
378 00:17:07.980 --> 00:17:10.860 with veterans who have a diagnosis
379 00:17:10.860 --> 00:17:12.120 of an opioid use disorder,
380 00:17:12.120 --> 00:17:15.843 a stimulant use disorder or are being pre-
scribed opioids.
381 00:17:17.250 --> 00:17:19.710 The PIE Project, the Post-Incarceration
Project,
382 00:17:19.710 --> 00:17:21.510 really works intensely with veterans
383 00:17:21.510 --> 00:17:23.400 when they're coming outta incarceration
384 00:17:23.400 --> 00:17:24.840 and coordinates with our healthcare
385 00:17:24.840 --> 00:17:29.840 for reentry a veteran office and also our hous-
ing,
386 00:17:29.910 --> 00:17:33.750 and the HUD-VASH is taking housing vouch-
ers
387 00:17:33.750 --> 00:17:34.860 from the federal government
388 00:17:34.860 --> 00:17:39.030 and then pairing that with veteran supported
housing
389 00:17:39.030 --> 00:17:41.070 and other support services.
390 00:17:41.070 --> 00:17:42.840 There are four components to PIE,
391 00:17:42.840 --> 00:17:45.540 linkage and referral, skill building and goal
setting,
392 00:17:45.540 --> 00:17:48.440 community reintegration, and social and emo-
tional support.
393 00:17:49.290 --> 00:17:51.780 So right now PIE is being implemented in six
sites,
394 00:17:51.780 --> 00:17:54.060 other sites have either previously implemented
it
395 00:17:54.060 --> 00:17:56.283 or are no longer implementing it.
396 00:17:57.540 --> 00:18:00.450 And then MISSION-CJ, which is our most
complex intervention,
397 00:18:00.450 --> 00:18:02.760 is Maintaining Independence and Sobriety
398 00:18:02.760 --> 00:18:04.920 through System Integration Outreach

399 00:18:04.920 --> 00:18:06.840 and Networking-Criminal Justice.

400 00:18:06.840 --> 00:18:10.050 MISSION was developed 25 years ago by David Smelson

401 00:18:10.050 --> 00:18:13.590 and has had a whole bunch of evidence behind it,

402 00:18:13.590 --> 00:18:15.030 but it's pretty complex.

403 00:18:15.030 --> 00:18:18.600 They build it into the criminology concept

404 00:18:18.600 --> 00:18:20.283 of risk, need, responsivity,

405 00:18:21.840 --> 00:18:23.520 where they're trying to identify

406 00:18:23.520 --> 00:18:26.700 which person in the criminal justice system,

407 00:18:26.700 --> 00:18:28.680 how can we tailor what they need to support them.

408 00:18:28.680 --> 00:18:30.390 And so they have core services

409 00:18:30.390 --> 00:18:34.260 of critical time intervention, empowering pro-social change,

410 00:18:34.260 --> 00:18:36.240 dual recovery therapy, peer support,

411 00:18:36.240 --> 00:18:37.860 and then they also offer

412 00:18:37.860 --> 00:18:39.720 some vocational and educational support

413 00:18:39.720 --> 00:18:41.580 and trauma-informed care,

414 00:18:41.580 --> 00:18:45.150 and they are implementing this across eight sites.

415 00:18:45.150 --> 00:18:49.680 David actually has a really massive \$12 million HEAL grant

416 00:18:49.680 --> 00:18:52.110 where he's doing this in even greater sites,

417 00:18:52.110 --> 00:18:53.700 so I really don't know how he's managing,

418 00:18:53.700 --> 00:18:56.340 but there's a lot of MISSION implementation

419 00:18:56.340 --> 00:18:58.590 happening around the country right now.

420 00:18:58.590 --> 00:19:01.830 So HOPE has five sites, PIE has six sites,

421 00:19:01.830 --> 00:19:04.383 and MISSION has eight sites.

422 00:19:05.910 --> 00:19:09.374 My job is to say how are we gonna do this all.

423 00:19:09.374 --> 00:19:12.120 How can we keep similar methods

424 00:19:12.120 --> 00:19:13.317 across everything that we're doing?

425 00:19:13.317 --> 00:19:17.340 And so again, we've used the roadmap model, process model,

426 00:19:17.340 --> 00:19:20.520 and we have a really strong pre-implementation phase.

427 00:19:20.520 --> 00:19:22.650 And I will just also say, I don't know if anyone saw it,

428 00:19:22.650 --> 00:19:26.763 but maybe four months ago, Lisa Saldana,

429 00:19:27.720 --> 00:19:29.490 came out with a paper with some colleagues

430 00:19:29.490 --> 00:19:33.870 that showed across a large swath of papers

431 00:19:33.870 --> 00:19:36.300 that they reviewed that studies

432 00:19:36.300 --> 00:19:40.650 that had a very in-depth pre-implementation period

433 00:19:40.650 --> 00:19:42.240 actually were more successful

434 00:19:42.240 --> 00:19:43.620 in their implementation efforts later.

435 00:19:43.620 --> 00:19:45.360 So a lot of people, you know,

436 00:19:45.360 --> 00:19:49.530 they wanna just dive in and I say embrace this period.

437 00:19:49.530 --> 00:19:52.770 Even when you have an effective evidence-based practice

438 00:19:52.770 --> 00:19:54.240 that you wanna implement,

439 00:19:54.240 --> 00:19:56.610 you still need to know about a new site,

440 00:19:56.610 --> 00:19:58.830 you still need to know what the clinical work-flow is,

441 00:19:58.830 --> 00:20:02.580 you still need to know what are the anticipated barriers

442 00:20:02.580 --> 00:20:04.320 and facilitators implementing something.

443 00:20:04.320 --> 00:20:06.630 And so from there, we're not gonna change

444 00:20:06.630 --> 00:20:08.070 what our evidence-based practices are,

445 00:20:08.070 --> 00:20:09.960 but what we're gonna do is we're gonna think

446 00:20:09.960 --> 00:20:12.120 how can our strategies address these

447 00:20:12.120 --> 00:20:15.360 and how can we create any adaptations

448 00:20:15.360 --> 00:20:16.860 but without changing those core components.

449 00:20:16.860 --> 00:20:21.503 So really, you know, let yourself be immersed in this phase.

450 00:20:23.003 --> 00:20:24.528 Yeah, of course.

451 00:20:24.528 --> 00:20:28.778 (audience conversing indistinctly)

452 00:20:42.082 --> 00:20:46.749 (audience member speaking indistinctly)

453 00:20:58.297 --> 00:21:02.964 (audience member speaking indistinctly)

454 00:21:29.457 --> 00:21:33.000 Yeah, I don't know if the Zoom audience can hear,

455 00:21:33.000 --> 00:21:37.500 but there's some conversation around

456 00:21:37.500 --> 00:21:40.500 how difficult it is to get RO1 funding

457 00:21:40.500 --> 00:21:42.794 to have a substantial pre-implementation phase

458 00:21:42.794 --> 00:21:46.980 even when you already have an evidence-based practice

459 00:21:46.980 --> 00:21:49.080 and whether the VA is different.

460 00:21:49.080 --> 00:21:50.977 I do think the VA is different,

461 00:21:52.589 --> 00:21:55.110 but we have built this into RO1 grants,

462 00:21:55.110 --> 00:21:58.260 and in fact, I will say that what was really interesting

463 00:21:58.260 --> 00:21:59.820 for my colleagues who...

464 00:21:59.820 --> 00:22:01.080 So what I do at Brown

465 00:22:01.080 --> 00:22:02.760 is work with a lot of efficacy researchers

466 00:22:02.760 --> 00:22:04.680 who are building an implementation science

467 00:22:04.680 --> 00:22:05.513 into their grants.

468 00:22:05.513 --> 00:22:08.880 So I have several colleagues who do suicide prevention work,

469 00:22:08.880 --> 00:22:11.220 and they were taking a suicide prevention

470 00:22:11.220 --> 00:22:15.930 an intervention called STEP into an inpatient setting.

471 00:22:15.930 --> 00:22:17.940 And it has a lot of evidence-based,

472 00:22:17.940 --> 00:22:21.660 they're just moving it to a new setting and it's an RO1,

473 00:22:21.660 --> 00:22:26.660 and the program, the POs from NIMH came back and said,

474 00:22:27.510 --> 00:22:30.240 you need to do, as part of this,

475 00:22:30.240 --> 00:22:32.220 a bunch of formative evaluation
476 00:22:32.220 --> 00:22:34.050 with a health system leadership
477 00:22:34.050 --> 00:22:37.534 before you can do the rest of the aims.
478 00:22:37.534 --> 00:22:39.660 They weren't saying we're not gonna fund
your project,
479 00:22:39.660 --> 00:22:42.750 they said you need to build in a pre-aim
480 00:22:42.750 --> 00:22:43.740 before your aim one.
481 00:22:43.740 --> 00:22:45.660 And so I worked with the team
482 00:22:45.660 --> 00:22:47.790 to build a formative evaluation phase
483 00:22:47.790 --> 00:22:51.030 because the STEP had never been in an inpa-
tient,
484 00:22:51.030 --> 00:22:52.312 it had always been used outpatient,
485 00:22:52.312 --> 00:22:54.780 and the program office said,
486 00:22:54.780 --> 00:22:55.613 we're not gonna fund it
487 00:22:55.613 --> 00:22:57.540 until you know more about what you're gonna
go into,
488 00:22:57.540 --> 00:22:59.790 and so that was very positive.
489 00:22:59.790 --> 00:23:01.972 It didn't come from the reviewers,
490 00:23:01.972 --> 00:23:03.180 it came from the program office,
491 00:23:03.180 --> 00:23:05.460 so you know, that's a positive thing.
492 00:23:05.460 --> 00:23:09.930 So yes, I will say you kind of have to limit
yourself.
493 00:23:09.930 --> 00:23:11.880 You could go crazy and spend a lot of time,
494 00:23:11.880 --> 00:23:13.560 but like we lot a lot ourselves.
495 00:23:13.560 --> 00:23:18.560 And unfortunately we started this in October
of 2020
496 00:23:18.750 --> 00:23:22.050 when the VA was still dealing with a lot of
challenges
497 00:23:22.050 --> 00:23:24.450 with COVID and virtual work
498 00:23:24.450 --> 00:23:27.060 and also about a month and a half
499 00:23:27.060 --> 00:23:30.420 before the vaccines were implemented.
500 00:23:30.420 --> 00:23:33.907 So this was not a good time to do a lot of
informative work,

501 00:23:33.907 --> 00:23:36.150 I'll tell you, but anyway, we did it.

502 00:23:36.150 --> 00:23:39.780 And then our implementation is a lot of the training of...

503 00:23:39.780 --> 00:23:41.640 You know, because in a hybrid three,

504 00:23:41.640 --> 00:23:43.620 the goal is to get the people at the sites

505 00:23:43.620 --> 00:23:45.000 to do the implementation.

506 00:23:45.000 --> 00:23:46.590 You are helping to direct that,

507 00:23:46.590 --> 00:23:48.930 you're providing them with support through your strategies,

508 00:23:48.930 --> 00:23:51.675 but you should not be implementing that in the hybrid three

509 00:23:51.675 --> 00:23:52.890 because that's not real world.

510 00:23:52.890 --> 00:23:55.710 And so we have, in the HOPE project, social workers,

511 00:23:55.710 --> 00:23:57.870 and in the other team, PIE and MISSION-CJ,

512 00:23:57.870 --> 00:24:00.300 we have peer support specialists

513 00:24:00.300 --> 00:24:02.490 and we need to train them to do this,

514 00:24:02.490 --> 00:24:05.580 and so we spend a lot of time on that and implementation.

515 00:24:05.580 --> 00:24:07.590 And then obviously as we go through,

516 00:24:07.590 --> 00:24:09.120 we're also assessing our outcomes

517 00:24:09.120 --> 00:24:11.760 but they are a secondary aspect.

518 00:24:11.760 --> 00:24:13.290 And then sustainability.

519 00:24:13.290 --> 00:24:17.490 So we have just finished three years of our trial,

520 00:24:17.490 --> 00:24:21.030 see I slipped, three years of our study,

521 00:24:21.030 --> 00:24:23.610 and we've launched year four,

522 00:24:23.610 --> 00:24:25.410 and so some of our sites

523 00:24:25.410 --> 00:24:26.700 have gone through the implementation

524 00:24:26.700 --> 00:24:29.040 and are moving towards sustainment assessment

525 00:24:29.040 --> 00:24:30.090 and some are just starting.

526 00:24:30.090 --> 00:24:31.490 So there's kind of like a...

527 00:24:32.640 --> 00:24:34.080 Well, it's a stepped wedge design,
528 00:24:34.080 --> 00:24:38.310 so we're not there with all of them right now.
529 00:24:38.310 --> 00:24:43.200 So again, I'm not the statistician on the
project,
530 00:24:43.200 --> 00:24:45.120 but I just wanted to let you know
531 00:24:45.120 --> 00:24:47.973 that we're doing cluster randomized step
wedge trials,
532 00:24:49.380 --> 00:24:51.270 in parentenses, studies,
533 00:24:51.270 --> 00:24:53.670 as I try to transition to this language.
534 00:24:53.670 --> 00:24:56.610 But our overall goal is really to estimate the
effect
535 00:24:56.610 --> 00:24:58.350 of what it's like to transition
536 00:24:58.350 --> 00:25:01.950 to a higher intensity implementation strategy
package
537 00:25:01.950 --> 00:25:04.860 from a baseline lower intensity strategy pack-
age.
538 00:25:04.860 --> 00:25:07.050 On each of the effectiveness outcomes that
we're using,
539 00:25:07.050 --> 00:25:09.750 we're gonna use mixed effects regression mod-
els,
540 00:25:09.750 --> 00:25:11.160 we'll have a fixed effect
541 00:25:11.160 --> 00:25:14.430 before the implementation strategy package.
542 00:25:14.430 --> 00:25:17.040 I keep saying package but we do know
543 00:25:17.040 --> 00:25:18.960 because we're tracking these things really well
544 00:25:18.960 --> 00:25:22.590 that not all of our implementation strategies
are being used
545 00:25:22.590 --> 00:25:23.940 despite all our best efforts.
546 00:25:23.940 --> 00:25:26.760 So we're trying to track individual strategies
547 00:25:26.760 --> 00:25:29.430 within each of these higher intensity
548 00:25:29.430 --> 00:25:32.160 and lower intensity states.
549 00:25:32.160 --> 00:25:33.930 And then also we will,
550 00:25:33.930 --> 00:25:35.730 we are trying to do some balancing
551 00:25:35.730 --> 00:25:38.130 and, you know, we did that prior, you know,

552 00:25:38.130 --> 00:25:39.960 to look at the different site characteristics

553 00:25:39.960 --> 00:25:41.550 of our different wedges.

554 00:25:41.550 --> 00:25:43.440 And we have had sites drop out,

555 00:25:43.440 --> 00:25:45.150 we've had sites that we've added in,

556 00:25:45.150 --> 00:25:49.083 it has not been textbook perfect by any means.

557 00:25:49.980 --> 00:25:50.820 <v Donna>I want to ask a few questions.</v>

558 00:25:50.820 --> 00:25:55.500 <v ->Yeah, but I may not be able to answer. (laughs)</v>

559 00:25:55.500 --> 00:26:00.240 <v Donna>In terms of your primary outcome of analysis,</v>

560 00:26:00.240 --> 00:26:02.160 when you write implementation strategy,

561 00:26:02.160 --> 00:26:06.360 you mean the whole bundle or your putting in variables,

562 00:26:06.360 --> 00:26:10.287 each one of the components individually assess the impact

563 00:26:10.287 --> 00:26:13.110 of each one of the components of the bundle?

564 00:26:13.110 --> 00:26:14.351 <v ->So when we wrote the proposal,</v>

565 00:26:14.351 --> 00:26:17.400 we thought bundle slash package.

566 00:26:17.400 --> 00:26:20.370 But as we are doing a lot of tracking of those strategies,

567 00:26:20.370 --> 00:26:23.550 I think that our analysis is gonna be by the individual

568 00:26:23.550 --> 00:26:25.320 so they don't overlap.

569 00:26:25.320 --> 00:26:28.200 We tried really hard to make sure our bundle of strategies

570 00:26:28.200 --> 00:26:30.030 in the higher intensity do not overlap

571 00:26:30.030 --> 00:26:32.310 with the bundle of strategies in the lower intensity.

572 00:26:32.310 --> 00:26:33.720 So if only a few

573 00:26:33.720 --> 00:26:35.970 of the higher intensity strategies get used,

574 00:26:35.970 --> 00:26:37.980 we'll know that those are higher intensity,

575 00:26:37.980 --> 00:26:40.413 but they may not be the whole package.

576 00:26:41.580 --> 00:26:43.500 That is definitely a difficult thing

577 00:26:43.500 --> 00:26:45.693 to get people to use all of them.

578 00:26:47.430 --> 00:26:49.740 And I will tell you about those strategies in just a second.

579 00:26:49.740 --> 00:26:51.420 So now I'm gonna move into the testing strategy.

580 00:26:51.420 --> 00:26:52.253 So as you remember,

581 00:26:52.253 --> 00:26:54.990 I said really important to achieve what our goals,

582 00:26:54.990 --> 00:26:56.040 in implementation science,

583 00:26:56.040 --> 00:26:57.750 we need to randomize some strategies,

584 00:26:57.750 --> 00:26:59.074 we need to do a lot of tracking,

585 00:26:59.074 --> 00:27:02.100 we need to do a lot of specifying and operationalizing.

586 00:27:02.100 --> 00:27:04.260 And one of the things I really wanna get across is this,

587 00:27:04.260 --> 00:27:06.600 nothing about me without me motto

588 00:27:06.600 --> 00:27:09.540 that was developed in the late 90s, early 2000s,

589 00:27:09.540 --> 00:27:11.280 about patient-centered care,

590 00:27:11.280 --> 00:27:14.700 and I would argue that this is absolutely necessary

591 00:27:14.700 --> 00:27:16.950 for doing an implementation study.

592 00:27:16.950 --> 00:27:19.980 Because as you're developing your implementation strategies,

593 00:27:19.980 --> 00:27:23.340 you are doing this in concert with your sites,

594 00:27:23.340 --> 00:27:26.160 with your partners, with the champions,

595 00:27:26.160 --> 00:27:29.100 with everyone that you're gonna be working with.

596 00:27:29.100 --> 00:27:31.560 And I think the reason this is so important is because,

597 00:27:31.560 --> 00:27:32.850 in the end,

598 00:27:32.850 --> 00:27:37.680 successful implementation is going to be because of trust.

599 00:27:37.680 --> 00:27:40.230 And Alison Metz wrote a paper

600 00:27:40.230 --> 00:27:43.110 in "Implementation Science Communications" last year

601 00:27:43.110 --> 00:27:45.450 on sort of thinking of trust in a conceptual way

602 00:27:45.450 --> 00:27:47.100 across implementation studies,

603 00:27:47.100 --> 00:27:50.010 and she talks about intrapersonal trust

604 00:27:50.010 --> 00:27:51.360 and interpersonal trust.

605 00:27:51.360 --> 00:27:55.350 But I believe that in any shape or form,

606 00:27:55.350 --> 00:27:57.690 this is why the pre-implementation work is so important,

607 00:27:57.690 --> 00:28:00.210 you are building trust through those efforts.

608 00:28:00.210 --> 00:28:02.040 And so people realize

609 00:28:02.040 --> 00:28:03.810 that you are not just doing a research study

610 00:28:03.810 --> 00:28:04.650 'cause you got funding,

611 00:28:04.650 --> 00:28:06.270 you're not just trying to write a publication,

612 00:28:06.270 --> 00:28:08.520 that you're actually trying to change care

613 00:28:08.520 --> 00:28:11.010 and improve care and make lives better.

614 00:28:11.010 --> 00:28:13.440 And so if people can see that

615 00:28:13.440 --> 00:28:15.450 as you're doing your formative work,

616 00:28:15.450 --> 00:28:17.430 then I think that that is the basis

617 00:28:17.430 --> 00:28:19.413 for your successful implementation.

618 00:28:20.370 --> 00:28:21.780 I like to show this slide

619 00:28:21.780 --> 00:28:24.510 about the nine buckets of implementation strategies.

620 00:28:24.510 --> 00:28:26.070 Even though it's the earlier paper

621 00:28:26.070 --> 00:28:29.550 on implementation strategies by Byron Powell and colleagues,

622 00:28:29.550 --> 00:28:31.440 it's really hard for people to conceptualize

623 00:28:31.440 --> 00:28:33.330 73 implementation strategies,

624 00:28:33.330 --> 00:28:35.310 but when you think about them in nine buckets,

625 00:28:35.310 --> 00:28:37.170 I think that's much more helpful.

626 00:28:37.170 --> 00:28:38.640 And so when you look at them,

627 00:28:38.640 --> 00:28:41.190 you can imagine trust being part of all of this.

628 00:28:41.190 --> 00:28:43.920 You know, when you're assessing people for readiness,

629 00:28:43.920 --> 00:28:46.230 when you're trying to do interactive assistance,

630 00:28:46.230 --> 00:28:47.820 when you're doing adaptations,

631 00:28:47.820 --> 00:28:49.890 when you're trying to develop relationships

632 00:28:49.890 --> 00:28:52.620 and training people, supporting clinicians,

633 00:28:52.620 --> 00:28:54.090 engaging consumers, et cetera,

634 00:28:54.090 --> 00:28:55.800 trust is such an important part of that.

635 00:28:55.800 --> 00:28:56.670 People wanna know like,

636 00:28:56.670 --> 00:28:58.144 why are you interested in doing this?

637 00:28:58.144 --> 00:29:02.700 You know, what is in it for me and what is in it for you?

638 00:29:02.700 --> 00:29:05.910 So I think relationship building is so critical

639 00:29:05.910 --> 00:29:09.690 and the trust piece comes naturally with that.

640 00:29:09.690 --> 00:29:11.700 So in addition to our process model

641 00:29:11.700 --> 00:29:13.140 of the QUERI implementation roadmap,

642 00:29:13.140 --> 00:29:16.140 we also have a model that's helping us examine

643 00:29:16.140 --> 00:29:17.520 the various determinants

644 00:29:17.520 --> 00:29:20.670 that we're going to be needing to consider throughout.

645 00:29:20.670 --> 00:29:22.710 And we chose, because it's a hybrid type three

646 00:29:22.710 --> 00:29:24.600 and we're focused on sustainability,

647 00:29:24.600 --> 00:29:26.370 The Dynamic Sustainability Framework

648 00:29:26.370 --> 00:29:28.080 that was developed by David Chambers,

649 00:29:28.080 --> 00:29:29.820 Russ Glasgow, and Kurt Stingy.

650 00:29:29.820 --> 00:29:33.780 And this is saying that there are three main components

651 00:29:33.780 --> 00:29:35.640 that we need to consider, intervention,

652 00:29:35.640 --> 00:29:38.400 the evidence based practice, the practice setting,

653 00:29:38.400 --> 00:29:40.170 the context of what we're implementing,

654 00:29:40.170 --> 00:29:42.210 and then the wider ecological system,
655 00:29:42.210 --> 00:29:43.950 which is very much a thing to think about
656 00:29:43.950 --> 00:29:45.840 from a sustainability perspective.
657 00:29:45.840 --> 00:29:48.330 But what's different about their suggestions
is that,
658 00:29:48.330 --> 00:29:51.060 again, it's not just a one-time assessment.
659 00:29:51.060 --> 00:29:52.560 How does this change over time?
660 00:29:52.560 --> 00:29:54.360 So at the pre-implementation phase,
661 00:29:54.360 --> 00:29:55.950 it may look like one thing,
662 00:29:55.950 --> 00:29:57.270 at the implementation phase,
663 00:29:57.270 --> 00:29:59.340 it may have a different feeling about it,
664 00:29:59.340 --> 00:30:02.250 and then at the sustainment phase, we might
see things.
665 00:30:02.250 --> 00:30:04.680 So we need to have a constant process
666 00:30:04.680 --> 00:30:06.540 by which we're examining that.
667 00:30:06.540 --> 00:30:10.230 And in fact, Enola Proctor recently published
a paper
668 00:30:10.230 --> 00:30:11.400 sort of looking at, you know,
669 00:30:11.400 --> 00:30:13.380 10 years of implementation outcomes
670 00:30:13.380 --> 00:30:16.170 according to her implementation outcome
framework.
671 00:30:16.170 --> 00:30:17.880 The critiques that she has of the literature
672 00:30:17.880 --> 00:30:20.370 is that people are just doing one-time assess-
ments
673 00:30:20.370 --> 00:30:22.920 of implementation analysis, that's just not
enough.
674 00:30:24.030 --> 00:30:25.680 So this is just an example from HOPE
675 00:30:25.680 --> 00:30:27.210 about how we're sort of doing this
676 00:30:27.210 --> 00:30:29.220 across the three phases of the roadmap
677 00:30:29.220 --> 00:30:32.220 and then guided by The Dynamic Sustainabil-
ity Framework.
678 00:30:32.220 --> 00:30:33.540 So in phase one,

679 00:30:33.540 --> 00:30:37.679 they did 52 interviews of various people at the sites,

680 00:30:37.679 --> 00:30:40.530 and HOPE is still in the phase two and phase three stages,

681 00:30:40.530 --> 00:30:41.760 as are all the other projects.

682 00:30:41.760 --> 00:30:43.170 So there's been 21 interviews

683 00:30:43.170 --> 00:30:44.970 so far in implementation phase,

684 00:30:44.970 --> 00:30:47.640 21 interviews so far in sustainment phase.

685 00:30:47.640 --> 00:30:50.160 But really doing interviews with the housing,

686 00:30:50.160 --> 00:30:54.510 supportive housing staff, the prescribers for the Naloxone,

687 00:30:54.510 --> 00:30:57.840 other key staff, pharmacists,

688 00:30:57.840 --> 00:31:01.770 social workers and veteran patients.

689 00:31:01.770 --> 00:31:05.640 And we're using a rapid directed content analysis approach

690 00:31:05.640 --> 00:31:07.620 with really guided by

691 00:31:07.620 --> 00:31:10.533 The Dynamic Sustainability Framework construct.

692 00:31:12.120 --> 00:31:14.541 So when we decided on this proposal,

693 00:31:14.541 --> 00:31:17.760 we had years of research building up to this

694 00:31:17.760 --> 00:31:21.300 and so we decided that we were going to use facilitation

695 00:31:21.300 --> 00:31:22.923 as our implementation strategy.

696 00:31:23.940 --> 00:31:26.010 But when I say that, it sounds so funny,

697 00:31:26.010 --> 00:31:28.080 because facilitation is like literally like 10 things.

698 00:31:28.080 --> 00:31:31.530 It's a bundle in itself, so it's a natural bundle of things.

699 00:31:31.530 --> 00:31:35.010 And so we're trying to use, you know, engagement,

700 00:31:35.010 --> 00:31:38.310 identifying champions, action planning, staff training,

701 00:31:38.310 --> 00:31:41.340 problem solving, technical support,

702 00:31:41.340 --> 00:31:44.100 which is different from technical assistance, I'll just say.

703 00:31:44.100 --> 00:31:46.650 So technical support is a much more hands-on process

704 00:31:46.650 --> 00:31:48.240 and audit and feedback process.

705 00:31:48.240 --> 00:31:50.370 So lots of things go into facilitation,

706 00:31:50.370 --> 00:31:54.600 it's a naturally existing high intensity bundle.

707 00:31:54.600 --> 00:31:58.770 And then we start with the more lower intensity bundle,

708 00:31:58.770 --> 00:32:03.720 which is either education outreach or academic detailing.

709 00:32:03.720 --> 00:32:04.650 They're very similar.

710 00:32:04.650 --> 00:32:06.180 HOPE uses academic detailing,

711 00:32:06.180 --> 00:32:07.860 the other projects use education outreach.

712 00:32:07.860 --> 00:32:08.693 But this is more

713 00:32:08.693 --> 00:32:12.210 to really have these targeted structured visits,

714 00:32:12.210 --> 00:32:14.250 we're delivering tailored training

715 00:32:14.250 --> 00:32:15.480 and we're doing technical assistance

716 00:32:15.480 --> 00:32:17.430 as in contact us if you have a problem

717 00:32:17.430 --> 00:32:19.770 as opposed to us contacting you.

718 00:32:19.770 --> 00:32:22.200 So it's much more lower intensity.

719 00:32:22.200 --> 00:32:25.650 I would love for our results to be really strong

720 00:32:25.650 --> 00:32:26.483 in the lower intensity

721 00:32:26.483 --> 00:32:28.140 because that's gonna be much more sustainable.

722 00:32:28.140 --> 00:32:30.710 But that's an empirical question so we will...

723 00:32:32.550 --> 00:32:37.020 It really comes from the world of pharmaceuticals, I think,

724 00:32:37.020 --> 00:32:40.297 people would show up and have like a one-on-one and say,

725 00:32:40.297 --> 00:32:41.880 "Dr. Spiegelman, let me tell you

726 00:32:41.880 --> 00:32:45.060 about this medicine that I have

727 00:32:45.060 --> 00:32:46.590 that can help patients with diabetes,"

728 00:32:46.590 --> 00:32:48.390 and they'll have like a one-on-one conversation

729 00:32:48.390 --> 00:32:49.470 and really just tell them about it.

730 00:32:49.470 --> 00:32:52.830 And so we've taken that and made it into, I mean,

731 00:32:52.830 --> 00:32:53.663 and we're not dealing,

732 00:32:53.663 --> 00:32:54.540 but other people have made that

733 00:32:54.540 --> 00:32:57.750 into more of a one-on-one strategy just to inform.

734 00:32:57.750 --> 00:32:59.763 It's more of an educational activity.

735 00:33:03.000 --> 00:33:06.180 So the good news is there's lots of tracking supports

736 00:33:06.180 --> 00:33:09.090 available for us out there that are getting published.

737 00:33:09.090 --> 00:33:12.510 The bad news is they're a lot of work.

738 00:33:12.510 --> 00:33:16.680 So in 2020 our colleagues in Little Rock Arkansas

739 00:33:16.680 --> 00:33:19.110 who are really have been the group

740 00:33:19.110 --> 00:33:21.960 that have been defining what facilitation is,

741 00:33:21.960 --> 00:33:24.060 doing lots of trainings, they have a manual,

742 00:33:24.060 --> 00:33:25.290 if you need that let me know,

743 00:33:25.290 --> 00:33:28.170 but it's probably listed in that paper.

744 00:33:28.170 --> 00:33:30.750 But in this paper they actually, as an appendix,

745 00:33:30.750 --> 00:33:32.580 gave a Excel tracking sheet.

746 00:33:32.580 --> 00:33:35.550 This is how you can track facilitation and we use this,

747 00:33:35.550 --> 00:33:37.200 we've adapted it a little bit

748 00:33:37.200 --> 00:33:39.660 because we're also tracking the stage of implementation

749 00:33:39.660 --> 00:33:42.720 in which people are at, but we can see what type of event.

750 00:33:42.720 --> 00:33:44.010 So when you have facilitation,

751 00:33:44.010 --> 00:33:46.440 you have an external person who's part of the team,

752 00:33:46.440 --> 00:33:48.360 you have an internal facilitator at the site
753 00:33:48.360 --> 00:33:49.860 and you're working one-on-one,
754 00:33:49.860 --> 00:33:51.240 but the internal facilitator
755 00:33:51.240 --> 00:33:52.530 is the one who's doing the work.
756 00:33:52.530 --> 00:33:54.090 So our peer support specialists,
757 00:33:54.090 --> 00:33:55.857 our social workers are the ones doing the work.
758 00:33:55.857 --> 00:33:59.490 And so we are tracking all type of communication they have,
759 00:33:59.490 --> 00:34:02.700 we're tracking the type of personnel involved at the site,
760 00:34:02.700 --> 00:34:05.280 we're tracking the facilitation activity codes,
761 00:34:05.280 --> 00:34:09.210 which of the various things of facilitation are happening.
762 00:34:09.210 --> 00:34:10.170 Really importantly,
763 00:34:10.170 --> 00:34:12.360 we're tracking how many hours and minutes
764 00:34:12.360 --> 00:34:15.420 each facilitation activity takes.
765 00:34:15.420 --> 00:34:20.100 And so clearly we know what we do on the external side,
766 00:34:20.100 --> 00:34:21.120 what our research staff does
767 00:34:21.120 --> 00:34:22.427 when they reach out to the peer support specialist
768 00:34:22.427 --> 00:34:23.550 or the social worker,
769 00:34:23.550 --> 00:34:25.440 what we don't know is what happens on their side.
770 00:34:25.440 --> 00:34:27.930 And so we have these check-in calls with them,
771 00:34:27.930 --> 00:34:30.450 it might just be 15 minutes just to say like,
772 00:34:30.450 --> 00:34:32.580 what did you do this week? Who did you talk to?
773 00:34:32.580 --> 00:34:34.020 And that's really essential
774 00:34:34.020 --> 00:34:36.600 because to ask people to complete this type of tracker
775 00:34:36.600 --> 00:34:38.553 would be really difficult to do.
776 00:34:40.020 --> 00:34:42.030 We actually also adapted this

777 00:34:42.030 --> 00:34:43.870 so that we could add in some education
778 00:34:43.870 --> 00:34:46.830 and academic detailing outreach to this
779 00:34:46.830 --> 00:34:49.690 so that we didn't have to have more than one
tracker.
780 00:34:49.690 --> 00:34:51.787 (audience member speaking indistinctly)
781 00:34:51.787 --> 00:34:54.834 I'll come to that. (laughs)
782 00:34:54.834 --> 00:34:56.700 (audience member speaking indistinctly)
783 00:34:56.700 --> 00:34:58.952 Yeah, no, this is really, thank you for...
784 00:34:58.952 --> 00:34:59.850 'Cause I was gonna say this
785 00:34:59.850 --> 00:35:01.980 and what has been so essential about this
786 00:35:01.980 --> 00:35:03.930 is because we know what type of personnel it
is,
787 00:35:03.930 --> 00:35:05.190 we know how much time they spend,
788 00:35:05.190 --> 00:35:07.710 we can actually estimate their salary
789 00:35:07.710 --> 00:35:10.590 and we know how much every facilitation
activity took.
790 00:35:10.590 --> 00:35:12.270 Yes, we're doing that.
791 00:35:12.270 --> 00:35:15.210 It was actually a requirement of the project
to do that.
792 00:35:15.210 --> 00:35:17.880 So we've created our own sort of Excel dash-
board,
793 00:35:17.880 --> 00:35:19.020 it's not really a dashboard
794 00:35:19.020 --> 00:35:21.840 because it's not updated automatically,
795 00:35:21.840 --> 00:35:24.000 but we're sort of tracking every project.
796 00:35:24.000 --> 00:35:26.730 This is the PIE project with its six sites
797 00:35:26.730 --> 00:35:28.407 to see whether people are in pre-
implementation
798 00:35:28.407 --> 00:35:29.430 and implementation.
799 00:35:29.430 --> 00:35:30.960 So we're sort of using these trackers
800 00:35:30.960 --> 00:35:33.060 to find out where those are.
801 00:35:33.060 --> 00:35:35.100 And then here is a snapshot
802 00:35:35.100 --> 00:35:37.380 of how we can sort of examine
803 00:35:37.380 --> 00:35:39.030 those different facilitation activities.

804 00:35:39.030 --> 00:35:40.230 The pie chart on the left
805 00:35:40.230 --> 00:35:42.600 shows us the different support staff
806 00:35:42.600 --> 00:35:45.000 who are involved in the facilitation activities.
807 00:35:45.000 --> 00:35:48.180 So we are working with either the social worker
808 00:35:48.180 --> 00:35:49.230 or the peer support specialist,
809 00:35:49.230 --> 00:35:51.810 but then they're going on and working with
other people too.
810 00:35:51.810 --> 00:35:54.063 And then we see on the right side,
811 00:35:54.900 --> 00:35:55.890 all the different activities
812 00:35:55.890 --> 00:35:57.090 that's happening in facilitation,
813 00:35:57.090 --> 00:35:59.670 and you can see that some are more popular
than others,
814 00:35:59.670 --> 00:36:02.583 and so this is why we know that not all are
getting used.
815 00:36:03.570 --> 00:36:05.310 And then the bottom left shows us
816 00:36:05.310 --> 00:36:07.623 how much time in minutes is being spent.
817 00:36:08.640 --> 00:36:12.900 And so obviously site one and four are doing
great,
818 00:36:12.900 --> 00:36:14.997 like they're really spending a lot of time on
this
819 00:36:14.997 --> 00:36:16.920 and the other sites are spending less time,
820 00:36:16.920 --> 00:36:19.410 that doesn't necessarily mean that they're
worse or better,
821 00:36:19.410 --> 00:36:21.510 it's just there's so many different dynamics
822 00:36:21.510 --> 00:36:23.640 that go into any organization in any site.
823 00:36:23.640 --> 00:36:26.790 And so, you know, this'll be something
824 00:36:26.790 --> 00:36:28.650 that we'll have to examine when we do our
analysis,
825 00:36:28.650 --> 00:36:31.320 but it could be really important to know,
826 00:36:31.320 --> 00:36:34.563 does more time lead to better outcomes? Who
knows?
827 00:36:36.690 --> 00:36:38.820 So how are we gonna assess these outcomes?
828 00:36:38.820 --> 00:36:41.670 So again, remember guided by a theory model
framework,

829 00:36:41.670 --> 00:36:44.670 multiple time points as outcomes change over time

830 00:36:44.670 --> 00:36:47.610 and involving pragmatic measures is really key.

831 00:36:47.610 --> 00:36:51.060 So on the left column is all the pragmatic measures

832 00:36:51.060 --> 00:36:53.820 that we said and/or how we are going to conceptualize

833 00:36:53.820 --> 00:36:54.653 some of these things.

834 00:36:54.653 --> 00:36:57.030 So at the top we have an organizational readiness

835 00:36:57.030 --> 00:36:58.890 for implementing change scale,

836 00:36:58.890 --> 00:37:02.010 we have the three quantitative assessments

837 00:37:02.010 --> 00:37:04.770 of acceptability, appropriateness and feasibility,

838 00:37:04.770 --> 00:37:07.290 which align with the Proctor model.

839 00:37:07.290 --> 00:37:11.250 We are looking at four of the re-aim outcomes

840 00:37:11.250 --> 00:37:12.690 in terms of implementation outcomes,

841 00:37:12.690 --> 00:37:16.110 reach, adoption, fidelity to the implementation,

842 00:37:16.110 --> 00:37:17.580 and then sustainability.

843 00:37:17.580 --> 00:37:20.940 And so each of these is being assessed in different ways,

844 00:37:20.940 --> 00:37:22.065 slightly,

845 00:37:22.065 --> 00:37:25.080 the measures stay the same across all three studies,

846 00:37:25.080 --> 00:37:27.060 but the re-aim ones

847 00:37:27.060 --> 00:37:29.880 are a little bit different depending on the project.

848 00:37:29.880 --> 00:37:34.100 So these are the two scales that we're using,

849 00:37:34.100 --> 00:37:35.340 scale packages,

850 00:37:35.340 --> 00:37:37.890 organizational readiness for implementing change,

851 00:37:37.890 --> 00:37:41.130 and then the implementation outcome measures.

852 00:37:41.130 --> 00:37:41.963 Yes, oh.

853 00:37:44.039 --> 00:37:48.706 (audience member speaking indistinctly)

854 00:37:50.730 --> 00:37:52.263 They're really kind of basic.

855 00:37:53.206 --> 00:37:57.873 (audience member speaking indistinctly)

856 00:38:00.390 --> 00:38:04.501 Oh, interesting. Yeah, I haven't heard that section.

857 00:38:04.501 --> 00:38:06.391 I did reach out to him at one point,

858 00:38:06.391 --> 00:38:09.690 because I work with a lot of clinical trials,

859 00:38:09.690 --> 00:38:12.450 they were like, is there a cutoff point for these scales,

860 00:38:12.450 --> 00:38:13.283 and Brian was like,

861 00:38:13.283 --> 00:38:16.200 "Oh no, we're nowhere near having that kind of data."

862 00:38:16.200 --> 00:38:18.510 But I agree that they're really basic

863 00:38:18.510 --> 00:38:22.320 and we do use them at three time points,

864 00:38:22.320 --> 00:38:25.500 luckily they are not exactly next to each other,

865 00:38:25.500 --> 00:38:28.602 like they're like a six months to 12 months apart.

866 00:38:28.602 --> 00:38:30.420 (audience member speaking indistinctly)

867 00:38:30.420 --> 00:38:32.700 Well, each of those has four questions.

868 00:38:32.700 --> 00:38:34.443 Yeah, this has 12.

869 00:38:35.292 --> 00:38:39.959 (audience member speaking indistinctly)

870 00:38:51.360 --> 00:38:52.650 We've also, I think,

871 00:38:52.650 --> 00:38:54.690 only given the feasibility to some people,

872 00:38:54.690 --> 00:38:55.770 I don't think the feasibility

873 00:38:55.770 --> 00:38:57.030 has been relevant for everybody.

874 00:38:57.030 --> 00:38:59.023 Oh, there's something in the chat.

875 00:38:59.023 --> 00:39:03.690 (audience member speaking indistinctly)

876 00:39:06.773 --> 00:39:09.930 ORCHA's big, this is 12 item.

877 00:39:09.930 --> 00:39:12.600 Yeah, there's some statement that they're having,

878 00:39:12.600 --> 00:39:13.950 people are having trouble hearing the questions.

879 00:39:13.950 --> 00:39:18.210 So the questions are about just the relevance
880 00:39:18.210 --> 00:39:21.060 and the usefulness of these implementation
outcome measures
881 00:39:21.060 --> 00:39:24.060 because people find them very repetitive
882 00:39:24.060 --> 00:39:27.840 and not really informative,
883 00:39:27.840 --> 00:39:30.030 and I think there's more work to be done
884 00:39:30.030 --> 00:39:31.180 in this space for sure.
885 00:39:32.290 --> 00:39:36.957 (audience member speaking indistinctly)
886 00:39:43.757 --> 00:39:46.924 Oh, yeah, that's great to think about.
887 00:39:47.802 --> 00:39:49.470 <v Speaker>You have an international audi-
ence,</v>
888 00:39:49.470 --> 00:39:51.810 people participating from all over the world.
889 00:39:51.810 --> 00:39:55.410 <v ->Oh, wonderful. I'm glad this time works.
Thank you.</v>
890 00:39:55.410 --> 00:39:58.860 So in our dashboard we are collecting the
data,
891 00:39:58.860 --> 00:40:01.080 so this we can do it automatically.
892 00:40:01.080 --> 00:40:04.748 So we send out a red cap survey to people,
they complete it,
893 00:40:04.748 --> 00:40:09.510 and it transitions into our Excel spreadsheet
automatically.
894 00:40:09.510 --> 00:40:11.910 So this is actually some very good part
895 00:40:11.910 --> 00:40:13.560 of having these three projects
896 00:40:13.560 --> 00:40:16.170 and being able to collect the data that way.
897 00:40:16.170 --> 00:40:17.730 So we have sort of some assessments,
898 00:40:17.730 --> 00:40:21.990 this is by site of where people are with their
mean scores,
899 00:40:21.990 --> 00:40:24.810 and then we can sort of compare the scores
900 00:40:24.810 --> 00:40:26.883 across the different projects as well.
901 00:40:29.130 --> 00:40:30.540 The challenge here is that
902 00:40:30.540 --> 00:40:33.480 everybody's not doing the same measurement
at the same time,
903 00:40:33.480 --> 00:40:36.903 so we try to stay on top of this and sort of
remind people

904 00:40:36.903 --> 00:40:38.550 that it's a little bit more challenging
 905 00:40:38.550 --> 00:40:40.020 than I hoped it would be.
 906 00:40:40.020 --> 00:40:44.220 Just looking at reach for HOPE, you know,
 907 00:40:44.220 --> 00:40:45.720 maybe the bottom is the best to look at.
 908 00:40:45.720 --> 00:40:48.120 We just had a technical expert panel meeting
 909 00:40:48.120 --> 00:40:48.953 on November 7th,
 910 00:40:48.953 --> 00:40:51.900 so a lot of these more recent information
 911 00:40:51.900 --> 00:40:53.850 on reach and adoption, implementation,
 912 00:40:53.850 --> 00:40:56.130 just came from that November 7th meeting.
 913 00:40:56.130 --> 00:40:57.540 So you can see that the percent
 914 00:40:57.540 --> 00:40:59.850 of eligible veterans offered
 915 00:40:59.850 --> 00:41:02.820 versus six months post implementation
 916 00:41:02.820 --> 00:41:07.820 has definitely gone up in the opioid education
 917 00:41:07.920 --> 00:41:09.480 and naloxone distribution.
 918 00:41:09.480 --> 00:41:12.810 So this all very positive, no statistics here,
 919 00:41:12.810 --> 00:41:14.880 we're just tracking it at the moment.
 920 00:41:14.880 --> 00:41:17.130 We're also looking at how many people were
 offered it,
 921 00:41:17.130 --> 00:41:18.780 how many case managers trained,
 922 00:41:18.780 --> 00:41:22.560 and one site has just started implementation
 in this case.
 923 00:41:22.560 --> 00:41:24.390 <v ->Go back a second?</v> <v
 ->Yeah.</v>
 924 00:41:24.390 --> 00:41:26.190 <v Speaker>There's a very interesting is-
 sue</v>
 925 00:41:26.190 --> 00:41:28.710 that arises in looking this data,
 926 00:41:28.710 --> 00:41:29.760 which is, you know,
 927 00:41:29.760 --> 00:41:32.007 we always think about privacy of individual,
 928 00:41:32.007 --> 00:41:35.520 but actually in some of the work I've done
 now,
 929 00:41:35.520 --> 00:41:37.480 we found that there are privacy issues
 930 00:41:38.460 --> 00:41:40.770 all concerns by facilities

931 00:41:40.770 --> 00:41:44.190 where like it could be embarrassing to say Palo Alto

932 00:41:44.190 --> 00:41:46.614 that they were only at 19%

933 00:41:46.614 --> 00:41:49.740 and they could even get in trouble or lose their funding.

934 00:41:49.740 --> 00:41:50.790 And so I'm wondering-

935 00:41:50.790 --> 00:41:53.503 <v ->I shoulda probably. (laughs)</v>

936 00:41:54.870 --> 00:41:56.430 Yeah, we probably should've DM'd.

937 00:41:56.430 --> 00:41:59.130 Maybe I'll go on, so no one's looking at that anymore.

938 00:42:01.410 --> 00:42:04.110 Yeah, well, I mean I probably should have done it here too.

939 00:42:04.110 --> 00:42:07.500 So yeah, I mean I think it's like, you know...

940 00:42:07.500 --> 00:42:10.450 I think everyone knows that people are working really hard.

941 00:42:12.570 --> 00:42:14.640 We've done a lot of qualitative work

942 00:42:14.640 --> 00:42:17.520 to show that the reasons why people don't offer it,

943 00:42:17.520 --> 00:42:22.290 like veterans get offended that you're offering it to them,

944 00:42:22.290 --> 00:42:25.860 like, is one, you know, like other social workers said

945 00:42:25.860 --> 00:42:27.930 that it was not within their scope of work,

946 00:42:27.930 --> 00:42:30.180 you know, like scope of practice.

947 00:42:30.180 --> 00:42:33.120 So we have a lot of barriers that we've identified

948 00:42:33.120 --> 00:42:33.953 that we're trying to address,

949 00:42:33.953 --> 00:42:34.890 and obviously some of those things

950 00:42:34.890 --> 00:42:36.390 we need to raise to a higher level

951 00:42:36.390 --> 00:42:39.180 to say like we go to the National Social Work Agency

952 00:42:39.180 --> 00:42:42.000 and say, "How can you help us?"

953 00:42:42.000 --> 00:42:43.740 Because we want social workers to be able to do this,

954 00:42:43.740 --> 00:42:45.300 but they don't think it's in their scope of practice.

955 00:42:45.300 --> 00:42:47.040 So yeah, so those are the types things

956 00:42:47.040 --> 00:42:49.080 that we are working on.

957 00:42:49.080 --> 00:42:50.790 Then we look at how many veterans

958 00:42:50.790 --> 00:42:54.060 have been released from jail in the PIE Project,

959 00:42:54.060 --> 00:42:55.530 the Post-Incarceration Engagement,

960 00:42:55.530 --> 00:42:59.460 and we can see how many we actually served in our project.

961 00:42:59.460 --> 00:43:01.170 You know, there's six sites on the bottom,

962 00:43:01.170 --> 00:43:02.760 so this is more just to give you an idea,

963 00:43:02.760 --> 00:43:03.900 you don't have to look at the details,

964 00:43:03.900 --> 00:43:06.480 but just to how we're trying to track things.

965 00:43:06.480 --> 00:43:08.610 And then we also look at

966 00:43:08.610 --> 00:43:11.910 the different total encounters post release.

967 00:43:11.910 --> 00:43:15.330 So it's just, you know, some projects are just starting,

968 00:43:15.330 --> 00:43:18.453 like we know, so we don't have very much data in them there.

969 00:43:19.680 --> 00:43:21.540 And then in MISSION,

970 00:43:21.540 --> 00:43:25.230 we are tracking who is trained at each of the sites.

971 00:43:25.230 --> 00:43:26.850 And this is actually a really difficult one

972 00:43:26.850 --> 00:43:28.740 because we're working with a community organization,

973 00:43:28.740 --> 00:43:30.090 which is the veteran treatment court,

974 00:43:30.090 --> 00:43:33.180 and so we're now going completely outside of the VA

975 00:43:33.180 --> 00:43:35.760 to do this, so it's really challenging.

976 00:43:35.760 --> 00:43:37.890 Who's trained, who's implementing

977 00:43:37.890 --> 00:43:39.300 of those who have been trained,

978 00:43:39.300 --> 00:43:40.830 how many veterans have been served,

979 00:43:40.830 --> 00:43:42.660 and how many mission encounters have happened,

980 00:43:42.660 --> 00:43:44.910 and mission encounters are pretty complex.

981 00:43:44.910 --> 00:43:47.410 So the fact that there are over a thousand already

982 00:43:48.900 --> 00:43:50.670 after year three is really great news.

983 00:43:50.670 --> 00:43:52.890 <v Speaker>Can you remind us what a mission encounter is?</v>

984 00:43:52.890 --> 00:43:55.470 <v ->Yeah, mission encounter is,</v>

985 00:43:55.470 --> 00:43:56.790 I'll just quickly scroll back

986 00:43:56.790 --> 00:43:57.990 'cause I won't be able to remember it all.

987 00:43:57.990 --> 00:44:01.743 it's several different evidence-based practices.

988 00:44:04.470 --> 00:44:07.830 There's a critical time intervention, pro-social change,

989 00:44:07.830 --> 00:44:11.070 dual recovery therapy, peer support sessions.

990 00:44:11.070 --> 00:44:13.470 So lots of things happening,

991 00:44:13.470 --> 00:44:18.470 and this is to keep veterans out of the jail basically.

992 00:44:18.990 --> 00:44:21.240 Sorry, close your eyes as I scroll back down.

993 00:44:26.034 --> 00:44:26.880 <v Donna>It's all so interesting,</v>

994 00:44:26.880 --> 00:44:28.480 but we have 10 minutes left.

995 00:44:28.480 --> 00:44:29.400 <v ->Okay, yeah,</v>

996 00:44:29.400 --> 00:44:31.320 so here are some of our effectiveness outcomes,

997 00:44:31.320 --> 00:44:32.520 which we're not assessing yet,

998 00:44:32.520 --> 00:44:35.460 but we're gonna look at linkage to care, overdose rates,

999 00:44:35.460 --> 00:44:37.863 criminal recidivism, et cetera.

1000 00:44:39.270 --> 00:44:40.860 So from planning for sustainability,

1001 00:44:40.860 --> 00:44:43.500 I'll just go and just give you a high level overview

1002 00:44:43.500 --> 00:44:45.210 of what we're trying to do to do this.

1003 00:44:45.210 --> 00:44:47.280 So we just started year four,

1004 00:44:47.280 --> 00:44:48.840 we've decided this is the right time

1005 00:44:48.840 --> 00:44:50.370 to really start engaging our partners.

1006 00:44:50.370 --> 00:44:53.010 We talked about this at the November 7th meeting.

1007 00:44:53.010 --> 00:44:54.690 And so just as a paper,

1008 00:44:54.690 --> 00:44:56.850 this is a really useful paper to look at

1009 00:44:56.850 --> 00:44:58.620 in terms of thinking about how do you design

1010 00:44:58.620 --> 00:45:00.510 post dissemination and sustainability.

1011 00:45:00.510 --> 00:45:03.333 I really have learned a lot from this group.

1012 00:45:05.280 --> 00:45:07.980 And we're collecting a lot of qualitative data, as I said,

1013 00:45:07.980 --> 00:45:11.640 we're actually putting that into our dashboard

1014 00:45:11.640 --> 00:45:14.400 to sort of see what qualitative data emerges

1015 00:45:14.400 --> 00:45:17.760 from each of the three phases of pre-implementation,

1016 00:45:17.760 --> 00:45:19.020 implementation and sustainment,

1017 00:45:19.020 --> 00:45:24.000 all guided by The Dynamic Sustainability Framework.

1018 00:45:24.000 --> 00:45:27.450 This was a poster presented last year at the DNI conference.

1019 00:45:27.450 --> 00:45:29.040 And we're using this tool,

1020 00:45:29.040 --> 00:45:30.840 the Program Sustainability Assessment Tool,

1021 00:45:30.840 --> 00:45:32.550 which is freely available online,

1022 00:45:32.550 --> 00:45:35.040 developed by Doug Luke at Wash U.

1023 00:45:35.040 --> 00:45:37.860 We do not have people fill out this 40 item survey,

1024 00:45:37.860 --> 00:45:40.230 and this is like for our program partners.

1025 00:45:40.230 --> 00:45:42.840 What we do instead is when we have our conversations

1026 00:45:42.840 --> 00:45:45.630 like we just had with the technical expert panel meeting,

1027 00:45:45.630 --> 00:45:48.690 we'll choose a few of these concepts to talk about.

1028 00:45:48.690 --> 00:45:50.760 So what are we gonna need

1029 00:45:50.760 --> 00:45:53.610 in terms of organizational capacity to keep this running?

1030 00:45:53.610 --> 00:45:55.740 What is the funding going to be like?

1031 00:45:55.740 --> 00:45:59.460 How do we adapt this to continue to make it useful?

1032 00:45:59.460 --> 00:46:01.590 What information do you still need?

1033 00:46:01.590 --> 00:46:03.930 So we are using this more in a conceptual way,

1034 00:46:03.930 --> 00:46:06.680 and I do this with a lot of my NIH funded projects too.

1035 00:46:08.040 --> 00:46:10.590 This is a very short and sweet pragmatic measure

1036 00:46:10.590 --> 00:46:14.190 called PRESS to get at sustainment use.

1037 00:46:14.190 --> 00:46:19.080 So these three questions, Donna, are being asked to people.

1038 00:46:19.080 --> 00:46:20.643 This is a fairly new measure.

1039 00:46:22.380 --> 00:46:23.509 So we are trying to see,

1040 00:46:23.509 --> 00:46:25.710 when we're done with the implementation effort,

1041 00:46:25.710 --> 00:46:28.170 are people using PIE, are people using HOPE,

1042 00:46:28.170 --> 00:46:29.670 are people using MISSION

1043 00:46:29.670 --> 00:46:32.313 now that we're no longer actively implementing?

1044 00:46:33.690 --> 00:46:36.240 And then just as a cost piece that you brought up,

1045 00:46:36.240 --> 00:46:37.800 we are using the coins,

1046 00:46:37.800 --> 00:46:39.690 which is built on the sticks of coins

1047 00:46:39.690 --> 00:46:42.390 as for cost of implementing new strategies.

1048 00:46:42.390 --> 00:46:44.760 The stick is the stages of implementation completion,

1049 00:46:44.760 --> 00:46:47.100 both have been developed by Lisa Saldana.

1050 00:46:47.100 --> 00:46:51.030 So we are actually taking these eight steps

1051 00:46:51.030 --> 00:46:53.640 of the stick through our tracker,

1052 00:46:53.640 --> 00:46:56.100 we added them to our facilitation tracker,
 1053 00:46:56.100 --> 00:46:58.470 and we're deciding which of our activities
 1054 00:46:58.470 --> 00:47:02.220 are in pre-implementation, implementation
 and sustainment,
 1055 00:47:02.220 --> 00:47:04.020 and then we already have that data
 1056 00:47:04.020 --> 00:47:06.840 on how many hours and minutes, the per-
 sonnel involved,
 1057 00:47:06.840 --> 00:47:08.850 and we are capturing those costs.
 1058 00:47:08.850 --> 00:47:11.010 I'll just say that we use the same exact
 approach
 1059 00:47:11.010 --> 00:47:12.420 in a Cory funded paper.
 1060 00:47:12.420 --> 00:47:14.313 This just came for Cory funded project,
 1061 00:47:14.313 --> 00:47:15.600 this paper just came out.
 1062 00:47:15.600 --> 00:47:18.390 I only leave it here just to show
 1063 00:47:18.390 --> 00:47:21.093 like a completed cost of implementation.
 1064 00:47:22.285 --> 00:47:25.080 You know, I'm not an economist, I led this,
 1065 00:47:25.080 --> 00:47:26.790 it took me out of my comfort zone,
 1066 00:47:26.790 --> 00:47:29.540 but I've decided that if I can do it, anyone
 can do it.
 1067 00:47:31.140 --> 00:47:32.550 And so really just wanna wrap up
 1068 00:47:32.550 --> 00:47:36.660 and say this is a gigantic village project,
 1069 00:47:36.660 --> 00:47:39.330 I think team science is everything.
 1070 00:47:39.330 --> 00:47:41.310 Everyone on here has something to contribute
 1071 00:47:41.310 --> 00:47:44.940 and it's absolutely not me,
 1072 00:47:44.940 --> 00:47:49.080 it's all of these people that we have made
 this possible,
 1073 00:47:49.080 --> 00:47:51.600 and we'll have our final results in two years.
 1074 00:47:51.600 --> 00:47:52.433 So we'll stay tuned
 1075 00:47:52.433 --> 00:47:55.230 to see how effective everything has been.
 1076 00:47:55.230 --> 00:47:56.433 So questions.
 1077 00:47:57.440 --> 00:48:02.107 (audience member speaking indistinctly)
 1078 00:48:05.414 --> 00:48:06.960 <v ->The question here is,</v>

1079 00:48:06.960 --> 00:48:09.090 can we hear about power consideration
1080 00:48:09.090 --> 00:48:11.430 for effectiveness versus implementation outcomes
1081 00:48:11.430 --> 00:48:13.920 with hybrid studies one through three.
1082 00:48:13.920 --> 00:48:15.960 Specifically, how much should we consider power
1083 00:48:15.960 --> 00:48:19.140 for implementation outcomes in hybrid two and three studies?
1084 00:48:19.140 --> 00:48:23.580 We did actually, not me,
1085 00:48:23.580 --> 00:48:27.180 we did do power analysis on our hybrid threes.
1086 00:48:27.180 --> 00:48:31.230 We estimated how many veterans
1087 00:48:31.230 --> 00:48:35.400 we would need to include across all sites,
1088 00:48:35.400 --> 00:48:38.523 so not just one site because we're aggregating data,
1089 00:48:39.780 --> 00:48:43.470 and I think we have met that bar,
1090 00:48:43.470 --> 00:48:46.110 but I would be very happy
1091 00:48:46.110 --> 00:48:50.160 to put you more in touch with our statistician if you...
1092 00:48:50.160 --> 00:48:53.040 I'm gonna capture this person's name
1093 00:48:53.040 --> 00:48:55.440 and I'll put them in touch with our statistician.
1094 00:48:55.440 --> 00:48:59.040 But yes, it's necessary to power
1095 00:48:59.040 --> 00:49:02.370 because we are going to be using these regression analysis
1096 00:49:02.370 --> 00:49:04.560 to determine whether which types of strategies
1097 00:49:04.560 --> 00:49:07.260 actually led to increased uptake,
1098 00:49:07.260 --> 00:49:09.900 but also the uptake is one implementation outcome,
1099 00:49:09.900 --> 00:49:12.503 but we wanna look at the other implementation outcomes too.
1100 00:49:15.127 --> 00:49:19.794 (audience member speaking indistinctly)
1101 00:49:23.055 --> 00:49:27.060 Yeah, I think I actually have it in my proposal

1102 00:49:27.060 --> 00:49:29.160 in my laptop somewhere that I could look up,

1103 00:49:29.160 --> 00:49:34.160 but I think we had to do a milestone report

1104 00:49:35.340 --> 00:49:39.300 of how many providers or people we thought we would train,

1105 00:49:39.300 --> 00:49:41.070 peer support specialists, social workers,

1106 00:49:41.070 --> 00:49:43.470 so we have that for every project,

1107 00:49:43.470 --> 00:49:46.396 how many veterans that they would then serve.

1108 00:49:46.396 --> 00:49:49.740 So we have that and we kind of have it by time,

1109 00:49:49.740 --> 00:49:52.230 so after year one, year two, year three,

1110 00:49:52.230 --> 00:49:53.520 of course when we wrote this proposal,

1111 00:49:53.520 --> 00:49:54.480 COVID had not happened.

1112 00:49:54.480 --> 00:49:57.570 We just submitted this in December of 2019,

1113 00:49:57.570 --> 00:50:00.900 so we absolutely got behind on that.

1114 00:50:00.900 --> 00:50:02.980 So we didn't follow the milestones

1115 00:50:04.470 --> 00:50:07.020 despite best efforts as best as we can.

1116 00:50:07.020 --> 00:50:09.150 Yes, so the provider piece is important,

1117 00:50:09.150 --> 00:50:12.540 but then we also are learning all about their challenges

1118 00:50:12.540 --> 00:50:14.190 with talking to veterans.

1119 00:50:14.190 --> 00:50:16.560 Like the fact that we could get a provider

1120 00:50:16.560 --> 00:50:19.710 really bought into this, trained, willing to implement it,

1121 00:50:19.710 --> 00:50:22.080 but if their initial conversations

1122 00:50:22.080 --> 00:50:25.860 with veterans are not positive, then that's a challenge too.

1123 00:50:25.860 --> 00:50:28.660 So we're trying to interview veterans to learn more too.

1124 00:50:33.268 --> 00:50:37.935 (audience member speaking indistinctly)

1125 00:50:41.160 --> 00:50:42.941 Oh, I'll repeat.

1126 00:50:42.941 --> 00:50:45.968 I'll repeat the question.

1127 00:50:45.968 --> 00:50:50.635 (audience member speaking indistinctly)

1128 00:51:06.710 --> 00:51:08.420 So the question is about...

1129 00:51:09.480 --> 00:51:10.770 Thank you, Jen.

1130 00:51:10.770 --> 00:51:15.270 The question is about how do you build trust by showing up

1131 00:51:15.270 --> 00:51:18.570 when you have real world challenges of,

1132 00:51:18.570 --> 00:51:21.705 you know, you aren't funded on a project at that point.

1133 00:51:21.705 --> 00:51:24.780 So in this project were funded to do this,

1134 00:51:24.780 --> 00:51:26.420 but we also had...

1135 00:51:28.920 --> 00:51:30.390 Often, by the time you get to a hybrid three,

1136 00:51:30.390 --> 00:51:32.640 we've already built relationships.

1137 00:51:32.640 --> 00:51:33.990 These sites are new to us,

1138 00:51:33.990 --> 00:51:35.970 but our program partners are not new,

1139 00:51:35.970 --> 00:51:38.490 and so we had their backing to help us.

1140 00:51:38.490 --> 00:51:41.700 But for people who are just starting out doing this,

1141 00:51:41.700 --> 00:51:44.100 I often have had calls from, you know,

1142 00:51:44.100 --> 00:51:45.937 a full professor saying,

1143 00:51:45.937 --> 00:51:48.330 "I've never done this before. How do I do it?"

1144 00:51:48.330 --> 00:51:49.927 And I literally say to them,

1145 00:51:49.927 --> 00:51:52.410 "Please go have coffee with someone."

1146 00:51:52.410 --> 00:51:54.630 Like, they'll say, "The only thing I've ever done

1147 00:51:54.630 --> 00:51:55.830 is I've gone to a clinic

1148 00:51:55.830 --> 00:51:58.452 and I've hung up flyers for my project."

1149 00:51:58.452 --> 00:52:02.850 That's the extent of their engagement, and I get it,

1150 00:52:02.850 --> 00:52:05.400 like all they needed is to recruit people from that site.

1151 00:52:05.400 --> 00:52:06.233 That site had to say,

1152 00:52:06.233 --> 00:52:09.030 "Sure, you can recruit people, but we're not gonna help you.

1153 00:52:09.030 --> 00:52:10.470 This is something you do on your own."

1154 00:52:10.470 --> 00:52:14.520 But I say, you know, yes, it takes time and effort,

1155 00:52:14.520 --> 00:52:18.600 but try to meet with a clinic head, somebody,

1156 00:52:18.600 --> 00:52:22.260 and just do not tell them what you wanna do.

1157 00:52:22.260 --> 00:52:23.467 Go meet with them and say,

1158 00:52:23.467 --> 00:52:26.610 "I would love to learn more about what matters to you.

1159 00:52:26.610 --> 00:52:29.550 What are you trying to work on? What are your priorities?

1160 00:52:29.550 --> 00:52:32.010 What keeps you up at night? What would you love to address?"

1161 00:52:32.010 --> 00:52:34.590 And they'll tell you seven things right off the bat.

1162 00:52:34.590 --> 00:52:36.540 One of those things might already align

1163 00:52:36.540 --> 00:52:38.580 with what you wanna do.

1164 00:52:38.580 --> 00:52:42.090 And at that point though, they feel like you're listening,

1165 00:52:42.090 --> 00:52:44.430 you are, and then you can say, well, I have this idea,

1166 00:52:44.430 --> 00:52:45.870 and you can start that conversation.

1167 00:52:45.870 --> 00:52:48.060 If, for example, they don't say anything

1168 00:52:48.060 --> 00:52:50.190 related to what you wanna do,

1169 00:52:50.190 --> 00:52:52.530 then I say, then step back and go,

1170 00:52:52.530 --> 00:52:55.050 well, clearly there's a mismatch.

1171 00:52:55.050 --> 00:52:56.670 You know, and they're the ones who are living,

1172 00:52:56.670 --> 00:52:57.960 breathing this day to day,

1173 00:52:57.960 --> 00:53:00.660 and maybe your idea needs to change a little bit.

1174 00:53:00.660 --> 00:53:05.660 But I love the idea of starting with asking questions

1175 00:53:05.670 --> 00:53:07.620 and showing up as opposed to
1176 00:53:07.620 --> 00:53:10.470 coming in with a fully developed specific
aims page
1177 00:53:10.470 --> 00:53:13.110 and saying, I really wanna do this, yeah.
1178 00:53:13.110 --> 00:53:14.853 Is that what you meant? Yeah.
1179 00:53:17.280 --> 00:53:19.140 And someone says,
1180 00:53:19.140 --> 00:53:21.060 it'll be interesting to have an in-depth session
1181 00:53:21.060 --> 00:53:22.550 on the methodologies you...
1182 00:53:23.490 --> 00:53:28.410 Sorry, I can't read this thing, there's a little
thing.
1183 00:53:28.410 --> 00:53:30.690 Oh, that you'll apply for analysis
1184 00:53:30.690 --> 00:53:33.090 of the stepped wedge design.
1185 00:53:33.090 --> 00:53:36.630 Yes, luckily that isn't me,
1186 00:53:36.630 --> 00:53:39.030 but so in our implementation core,
1187 00:53:39.030 --> 00:53:42.150 we have a qualitative core and we have a
quantitative core,
1188 00:53:42.150 --> 00:53:44.245 and I meet with them.
1189 00:53:44.245 --> 00:53:47.010 I'm a stronger qualitative person,
1190 00:53:47.010 --> 00:53:49.230 that doesn't mean I haven't done quantitative
analyses,
1191 00:53:49.230 --> 00:53:54.230 but our quantitative statistician is Dr. Tom
Berry,
1192 00:53:54.300 --> 00:53:56.160 he's at BU,
1193 00:53:56.160 --> 00:53:59.970 also our head economist Dr. Laura Saban is
at BU,
1194 00:53:59.970 --> 00:54:03.000 and so we meet with them regularly
1195 00:54:03.000 --> 00:54:04.470 to talk through the different issues.
1196 00:54:04.470 --> 00:54:09.040 But Tom has the homeless opioid use
1197 00:54:10.410 --> 00:54:11.940 incarceration perspective
1198 00:54:11.940 --> 00:54:15.690 as well as incredible statistical knowledge.
1199 00:54:15.690 --> 00:54:17.403 So it's a great partnership.
1200 00:54:20.184 --> 00:54:21.630 (indistinct)

1201 00:54:21.630 --> 00:54:22.953 <v Donna>And so maybe we have to end,</v>

1202 00:54:22.953 --> 00:54:26.080 but I can say that Rani has provided her email address

1203 00:54:26.080 --> 00:54:27.480 as you can see here

1204 00:54:27.480 --> 00:54:31.050 so I'm sure you'll welcome further comments and questions.

1205 00:54:31.050 --> 00:54:33.333 <v ->Yes, absolutely, I'd be very happy to.</v>

1206 00:54:34.453 --> 00:54:36.450 <v ->Thank you so much.</v> <v ->Thank you.</v>

1207 00:54:36.450 --> 00:54:37.410 Thanks, everyone.

1208 00:54:37.410 --> 00:54:40.057 I really appreciate it, great to see you all.