

Contents

- 1 Introduction..... 1**
 - 1.1 The Promise of Science in Public Policy 4
 - 1.2 Why Community Corrections and Addiction Treatment? 5
 - 1.3 Building Knowledge in Community Corrections 7
 - 1.4 The Focus on Technology Transfer..... 8
 - 1.5 Community Corrections Presents Unique Challenges
for Addiction Treatment Interventions..... 10
 - 1.6 Multistage Conceptual Model for Identifying
and Selecting EBPs..... 11
 - 1.7 Evidence-Based Interagency Implementation Model (EB-IIM)..... 12
 - 1.8 Conclusions and Outline of the Book 14
 - References..... 15
- 2 Identifying the Evidence Base for “What Works”
in Community Corrections and Addiction Treatment 19**
 - 2.1 Introduction and Overview 19
 - 2.2 Basic Definitions and Concepts 22
 - 2.2.1 Hierarchy of Levels of Evidence..... 22
 - 2.3 Efficacy vs. Effectiveness 24
 - 2.4 Frameworks for Determining the Evidence Base 26
 - 2.4.1 The Food and Drug Administration (FDA) Model 26
 - 2.4.2 Applying the FDA Model to Behavioral
Interventions..... 27
 - 2.4.3 Synthesizing Across Research Designs 27
 - 2.4.4 Consensus Processes 28
 - 2.4.5 Systematic Reviews and Meta-Analyses 29
 - 2.5 Evidence-Based Repositories..... 32
 - 2.5.1 Cochrane Collaboration/Cochrane Reviews 32
 - 2.5.2 Campbell Collaboration–Crime and Justice Group 33
 - 2.5.3 National Registry of Evidence-Based Programs
and Practices 34

2.5.4	Blueprints for Violence Prevention	37
2.5.5	Washington State Institute for Public Policy	39
2.6	NIDA Principles of Effective Drug Treatment	40
2.7	Defining “What Works” in Community Corrections	46
2.8	Standards of Evidence in Community Corrections and Addiction Treatment	49
2.9	Conclusions.....	50
	References.....	52
3	Theories of Organizational Change and Technology Transfer.....	57
3.1	The Implementation Quandary	57
3.2	Understanding Organizational Approaches: Three Different Models.....	59
3.2.1	Diffusion Models	61
3.2.2	The Conceptual Model.....	62
3.3	Expanding the Concept of Implementation	68
3.4	Moving Past Initial Implementation: The Concept of Sustainability.....	70
3.5	Building Interagency Collaborative Supports: The Availability, Responsiveness, and Continuity (ARC) Model	76
3.6	Attention to Performance: Quality Improvement Processes, Performance Contracts, and Benchmarking	79
3.6.1	Plan-Do-Study-Act (PDSA).....	80
3.6.2	Network for Improvement of Addiction Treatment (NIATx): Quality Improvement Processes.....	81
3.6.3	COMPSTAT and Feedback Loops	82
3.7	Total Organizational Change Processes	83
3.8	Conclusion	85
	Appendix: List of Organizational Change Models	86
	References.....	87
4	Organizational Change – Technology Transfer Processes:	
	A Review of the Literature.....	91
4.1	Systematic Reviews of Change Strategies	92
4.2	Outer Setting: The Environmental Context for Change.....	96
4.3	Inner Setting: Within a Specific Organization	98
4.3.1	Readiness for Change.....	100
4.3.2	Alignment of Values.....	101
4.3.3	Structure.....	101
4.3.4	Professionalism and Staffing.....	102
4.3.5	Resources	103
4.3.6	Summary of Inner Setting Findings	104
4.4	Organizational-Level Models of Technology Transfer.....	104
4.4.1	Preparing the Organization for the Change.....	108
4.4.2	Staff-Level Concerns Regarding Technology Transfer	109

4.4.3	Client Factors	110
4.4.4	Change Actors.....	110
4.4.5	Training	112
4.5	Dissemination Efforts: Specialized Training by Researchers.....	113
4.5.1	Piloting	114
4.5.2	Fidelity and Program Integrity	115
4.5.3	Performance Monitoring	115
4.5.4	Quality Improvement Models	116
4.5.5	Summary	116
4.6	Conclusion	118
	Appendix: Summary of Major Findings from Organizational Studies in Behavioral Health Examining Inner Setting Issues.....	119
	References.....	123
5	Community Corrections Addiction Treatment: Strategies to Adopt, Implement, and Sustain Effective Practices	129
5.1	Current State of Evidence-Based Practice in the Addiction Treatment Field	129
5.2	Improving Treatment Processes.....	133
5.2.1	Federal and National Initiatives to Disseminate EBP in Treatment Agencies	135
5.2.2	Federal Initiatives to Define Quality and Key Outcome Measures for Treatment Agencies.....	136
5.3	Disseminating EBP: Lessons from the Centers for Disease Control and Prevention's REP and DEBI Models for HIV Interventions	141
5.3.1	Replicating Effective Programs	142
5.3.2	Diffusion of Effective Behavioral Interventions (DEBI)	143
5.4	Adoption of EBP in Community Addiction Treatment	144
5.4.1	State Initiatives.....	144
5.5	Conclusions.....	146
	References.....	147
6	Current State of EBP in the Community Corrections Field.....	151
6.1	EBP in Community Corrections Agencies: Results from the National Criminal Justice Treatment Practices Survey.....	152
6.1.1	Best, Evidence-Based, or Strongly Supported Practices	153
6.1.2	Adopting EBP	154
6.1.3	Adopting EBP in Community Corrections Settings	154
6.1.4	Important Constructs in Understanding Adoption Patterns.....	155
6.1.5	What Factors Affect the Likelihood of Adopting EBP in Corrections Settings?.....	157
6.1.6	How Do Corrections Administrators Handle the Competing Values of Providing Treatment and Other Services?	159

6.1.7	What Type of Reform Strategy Advances the Use of EBP in Corrections Settings?	160
6.1.8	Conclusions from NCJTP Survey Findings.....	160
6.2	NIC Initiative to Expand the Use of EBP by Community Corrections Agencies	161
6.2.1	Dissemination Materials for the Field	162
6.2.2	Initial NIC/CJI Adoption Sites: Maine and Illinois	164
6.2.3	NIC Framework Garnering Support from Sister Organizations	167
6.3	View from the Field: Results from Key Informant Interviews	169
6.3.1	How Are Evidence-Based Practices Identified?	171
6.3.2	Factors that Affect the Use of Evidence-Based Practice in Corrections Agencies.....	171
6.3.3	Current Use of EBP	172
6.3.4	Current Level of Corrections Staff Knowledge about EBP	174
6.3.5	What Constitutes Evidence in EBP?.....	175
6.3.6	Key Gaps in Knowledge about Evidence-Based Practice	176
6.3.7	Are State and Federal Regulators Requiring EBP?	177
6.3.8	Key Steps Required for Successful Implementation of EB Treatment.....	178
6.3.9	Key Challenges for Implementation and Sustainability of EBP	179
6.3.10	Organizational Changes and Conditions Needed for Implementing and Sustaining EBP.....	181
6.3.11	Necessity of Protocol Fidelity	182
6.3.12	Are Outcomes Regularly Obtained and Reported to Demonstrate Effectiveness?.....	184
6.4	Conclusion	185
	References.....	186
7	The Idiosyncrasies of the Corrections and Treatment Environments.....	189
7.1	Recognizing the First Hurdle	190
7.2	Opening the Door to Offender Change as a Goal of Corrections.....	192
7.2.1	Looking Through an Offender-Based Lens	193
7.2.2	Lack of Infrastructure, Knowledge, and Skills	196
7.3	The Deficiencies of Addiction Treatment Programs.....	196
7.3.1	Overcoming EBP Implementation Barriers to Achieve Improvements in Addiction Treatment.....	199
7.4	Conclusion	201
	References.....	202

8 Making Good Choices: A Multistage Conceptual Model for Identifying and Selecting Evidence-Based Practices	207
8.1 Overview of the Evidence Mapping Process	209
8.1.1 Tests of Scientific Rigor	210
8.1.2 Tests of Transportability	211
8.1.3 Tests of Organizational Capacity	211
8.2 The Challenges Associated with Scientific Studies	212
8.2.1 Limitations of RCT and Quasi-Experimental Designs	212
8.2.2 Selection Effects, Targeting, and Penetration	213
8.2.3 Population Impact and Penetration	215
8.2.4 Statistical Significance and Effect Size	217
8.3 Transportability Assessment	218
8.3.1 Setting and Populations	219
8.3.2 Fidelity and Program Integrity	220
8.3.3 Incorporating Clinician and Other Staff Input	222
8.4 Organizational Capacity Assessments	223
8.4.1 Perceived Value of EBP: Balancing Public Safety and Public Health	223
8.4.2 Improve Interagency Efforts Through Goal Alignment	224
8.4.3 Inner Setting Issues	225
8.4.4 Building Interagency Systems of Care	226
8.4.5 Considering Clients' Perspectives and Treatment Needs	227
8.4.6 Intervention Costs	228
8.4.7 Outer Setting	229
8.5 Making the Decision to Adopt an EBP	231
8.6 Conclusions	232
References	234
9 Conceptual Model: Evidence Based Interagency Implementation Model	239
9.1 The Evidence-Based Interagency Implementation Model (EB-IIM)	240
9.1.1 Develop Knowledge Stage	244
9.1.2 Building Foundation (Improving the Capacity at Individual and Organizational Level)	248
9.1.3 Set Expectations: The Use of Benchmarks for Performance	254
9.1.4 Align: Using the Pilot as a Learning Stage	256
9.1.5 Renovate and Sustain: The Ultimate Goals	258
9.2 Setting the Stage for Implementation: Core Components to Manage the Process	261
9.2.1 Creating a Culture of Change: Techniques and Strategies	262
9.2.2 Strategies to Build a Broad Base of Support: The Example of Social Marketing	263

9.3	Techniques to Manage the Change Process	265
9.3.1	Executive Leadership.....	265
9.3.2	Staff	266
9.3.3	Facilitators of the Change Process.....	267
9.3.4	Implementation Change Teams Through Cross-Sectional or “Vertical Slice” Working Teams.....	267
9.3.5	Stakeholders.....	268
9.3.6	Project Management Activities	268
9.3.7	Clear Performance Goals and Measures Provide Objective Feedback on Progress.....	269
9.4	Conclusion	270
	References.....	272
10	Evidence-Based Implementation Agenda	275
10.1	Implementation Tools	281
10.1.1	Intervention or Evidence-Based Practice/Treatment	281
10.1.2	Inner Setting	284
10.1.3	Outer Setting.....	286
10.1.4	Process: Evidence Mapping and Implementation Models	288
10.2	Advancing a Research Agenda on Implementation in Community Corrections Settings.....	289
10.2.1	Intervention Strategies	292
10.2.2	Implementation Strategies	295
10.3	Council for Public Health-Safety Evidence-Based Practice.....	298
10.4	Conclusion	299
	Appendix A: Interventions Checklist.....	301
	Appendix B: Inner Setting Checklist	304
	Appendix C: Outer Setting Checklist	306
	Appendix D: Process Management Issues Checklist.....	308
	References.....	310
	Index.....	315

Implementing Evidence-Based Practices in Community
Corrections and Addiction Treatment

Taxman, F.S.; Belenko, S.

2012, XIV, 318 p. 28 illus., Hardcover

ISBN: 978-1-4614-0411-8