

Incorporating Evidence-based Practice into Planning



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Robert Hess III is the founder and Chief Executive Officer of Hess III Consulting, Inc. and has over 16 years of executive experience designing, implementing and optimizing health systems.



Robert completed his Bachelors degree in Social Work at Arizona State University and is completing his Masters in Public Health at John's Hopkins University. Additionally, Robert is a certified Project Management Professional (PMP), Certified Professional of Healthcare Quality (CPHQ) and LEAN Six Sigma Black Belt (SSBB).

Robert's work has focused on defining health system/agency strategy, implementing over \$10 billion in healthcare start-ups/ mergers/ acquisitions and optimizing process efficiency and efficacy. Robert's work has been recognized and solicited nationally as well as internationally including successful projects for two Fortune 50 companies, the United States federal government, in addition to working in Mexico, India, Costa Rica, the Republic of the Philippines, Kenya, Tanzania.



Learning Objectives

- 1. Increase knowledge about how to identify and locate evidence-based practices for community-based preventions
- Identify how to assess whether an intervention qualifies as being evidencebased
- Increase technical capacity to utilize evidence-based practices when facilitating strategic planning



The Strategic Prevention Framework

- Founded by SAMHSA
- 5 step Process model
- Promotes
 development
- Reduce risktaking
- Build assets & resiliency
- Prevents problem behaviors





Needs Assessment

- Asses current substance use epidemiology (trends and outliers)
- Asset mapping of existing programs for prevention and treatment including:
 - National/state initiatives
 - Funding priorities
 - Social determinants of health
- Identify greatest area(s) of need
- Identify coalition priorities

EXAMPLE PRIORITY:

Opioid mis-use



What other key components are contributing to the opioid epidemic in your community?

FOR MORE INFORMATION, PLEASE VISIT: WWW.HESS3.COM

Example Priority

Problem: Opioid misuse.

Contributing environmental factors:

- Over prescribing
- Lack of monitoring systems & 'pill shopping'
- Patient becoming addicted post medical necessity
- Easy access (over-prescribing resulting in excess medication the home)
- Poverty (financial need drives drug dealing)



Capacity Building Prior to Planning

Capacity building ensures the organization has the tools and resources needed to do the job (including knowledge, skills and abilities).

Prior to strategic planning:

•Review the needs assessment

Review evidence-based practices

•Leverage research to inform strategy development



Locating Evidence-based Practices

https://www.samhsa.gov/ebp-web-guide/substance-abuse-prevention



A list of organizations' websites that cover substance abuse prevention evidence-based practices (EBPs).



Locating Evidence—based Practices HANDOUT

- National Institute on Drug Abuse
- <u>Center for Substance Abuse Prevention</u>
- <u>National Registry of Evidence-based</u>
 <u>Programs and Practices (NREPP)</u>
- youth.gov Program Directory
- SAMHSA



What other resource libraries are you aware of?

Identifying Evidence/Proving Program Effectiveness

- When reviewing evidence-basis of other programs, validate the rigor of the evidence.
- There is such thing as weak evidence and strong evidence 'power'
 - Is the study design appropriate?
 - Sample size (how many participants)
 - Significance: p-value = <0.05 (less than 5% chance we are wrong')
- Correlation is <u>not</u> causation



Identifying Evidence/Proving Program Effectiveness

Which would you chose and why?



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Monitor and Evaluate Your Program

Process Evaluation – did we do what we said we were going to do?

Outcome Evaluation – did it have the effect we intended it to have?

Table 1.0 Robert's Process and Outcome Monitoring Project Plan Template

Goal	Activity	Inputs	Person Responsible	Due Date	Current Progress	Outcomes
						\times
			XXX	XX	\times	

Revisit: 2017-04-14 Telling Your Story Through Data



Use a Strong Research Design

Research design is an art AND a science. <u>Basic</u> steps include:

1. **Define hypothesis:** 'a substance use disparity exists'

2. Define study design

- Cross sectional study 'snapshot in time'
- Longitudinal study 'over extended period of time'
- Sample size calculation (>30 participants)
- Sampling method: random, convenience
- 3. Collect baseline data: literature review, presurvey
- 4. Collect study data: surveys v. medical record review
- 5. Analyze data
- 6. Report findings

RECRUIT AN EXPERT!



What methods have you used for your program monitoring?

Build an Evidence Base

- Time/longevity of the program is the most important factor
- Use a broad data set to control for confounders and allow imbedded cohort (sub-groups) studies
- Peer review
- Numerous studies
- Longitudinal data



How have your incorporated the review of evidence-based practices in your strategic planning process?

REVISIT: 2014-04-10 You better WORK your plan!

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Incorporating Evidence into Planning: Level-setting

Level-setting

- Agree upon an objective and trained third party to facilitate planning
- Review history, mission, vision and values. Thoroughly understand regulatory & contractual requirements
- Review findings from needs assessment specifically gap analysis, readiness assessment, and S.W.O.T.
- Review evidence-based practices and empirical literature



Incorporating Evidence into Planning

Based on needs assessment findings:

- 1. Identify the target issue(s) the coalition will focus on
- 2. Conduct literature review of evidence-based practices (see HANDOUT of online libraries)
- 3. Compile annotated bibliography of evidencebased practices.
 - Short list those that best align with your community, target population, needs assessment findings
 - Include promising practices, innovations

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Adapting Evidence-based Programs

- No evidence-based intervention will be a perfect fit for your community.
- Look at the evidence to identify causal factors - what part of the intervention drove the change? (<u>DO NOT CHANGE</u>).





Example: Opioid Misuse

Contributing factor: over prescribing of opioids following surgery (or other medical events).

Evidence-based intervention: State officials provided medical education on appropriate prescribing, citing research on pain management and prescribing 7-day supplies v. 14 day supplies.

Adaptations:

How can we adapt this evidencebased program for your community?



www.surveymonkey.com/r/UALRPrevent

Training evaluation – must be completed within 48 hours for credit.

For more information, please contact us: robert@hess3.com 480-559-1051



