From Novice to Expert: Methods for Transferring Implementation Facilitation Skills to Improve Healthcare Delivery

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Background

- Implementation Facilitation (IF)
  - Can improve uptake of evidence-based innovations[1,2,3]
  - is widely used in research studies and clinical initiatives (particularly in primary care settings)

- Facilitators need a wide range of complex skills[4,5]

- Lack of relevant skills can impact:
  - Facilitator's credibility
  - Time and cost of facilitation and implementation efforts
  - Fidelity to the innovation[6]

Background

- Methods for transferring/learning IF skills
  - Didactic instruction
  - Learning through interactions with skilled others
  - Trial and error

- Learning complex knowledge and skills is challenging
  - It is unlikely that didactic instruction is sufficient
  - Mentoring, coaching, and apprenticeship are commonly used in other professions to transfer complex skills and foster learning

- No studies have explored how facilitation skills can be transferred

Purpose of study

- Purpose: understand how experts in implementation facilitation (IF) of evidence-based practices and programs can help novice facilitators, including healthcare system change agents, learn IF skills

- Specifically,
  - What methods/processes do experts use to help novices learn IF skills?
  - How do experts tailor their efforts to learners' characteristics and the context?

METHODS

Context: Blended Facilitation Project

- Blended Facilitation Project[2,3]

    - Enhancement of a national VA policy initiative mandating primary care-mental health integration (PC-MHI)

    - One national expert facilitator (EF) and an internal regional facilitator (IRF) in each of two VA networks helped four clinics in each network implement PC-MHI

    - The expert EF transferred implementation facilitation skills to the initially novice IRFs over a two year period

    - Before the end of the project, IRFs were recognized nationally in VA as implementation facilitation experts

Source Data

- Data analyzed for this study:

  - Pre-site visit call notes

  - Individual monthly debriefing interviews with facilitators:

    EF interviews focused on activities to help IRFs learn implementation facilitation skills (notes, near verbatim)

  - Individual semi-structured qualitative interviews with EF and both IRFs at two time points (transcripts)

Analysis

- Conducted directed content analysis of source data to identify techniques and processes EF utilized
  - Developed initial code list based on review of mentoring, coaching, and cognitive apprenticeship literature
  - New codes added as they emerged from data and codes refined during analysis

- Explored patterns of interactions, including intensity, over time

- Explored EF's level of focus on specific skills and variation
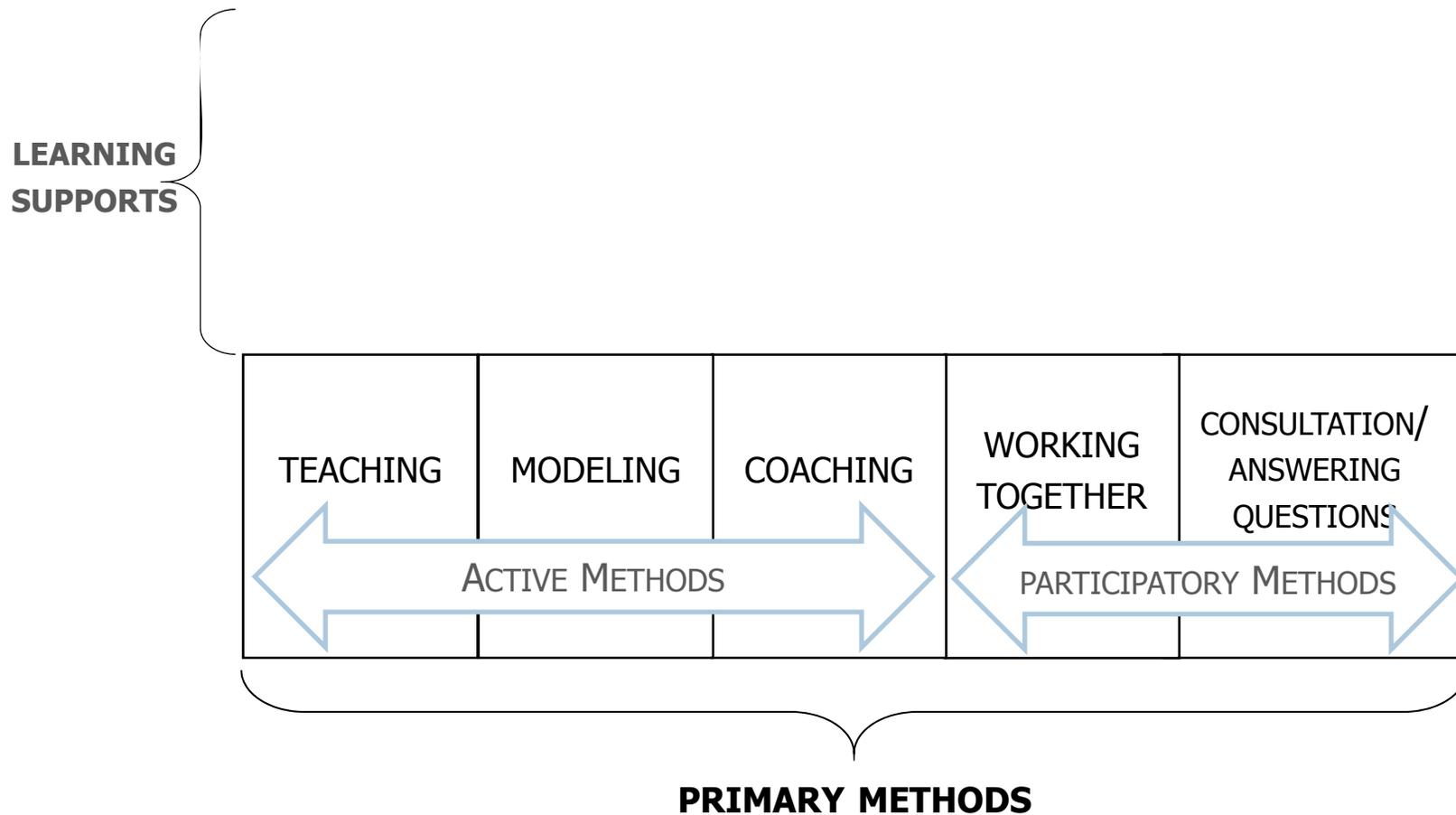
RESULTS

Key findings

The External Facilitator:

- used twenty methods and supportive techniques to help IRFs learn implementation facilitation skills;

- used an interactive process with the IRFs and stakeholders (VA staff) to support IRF learning; and

- tailored her efforts to context <u>and</u> the characteristics of IRFs.

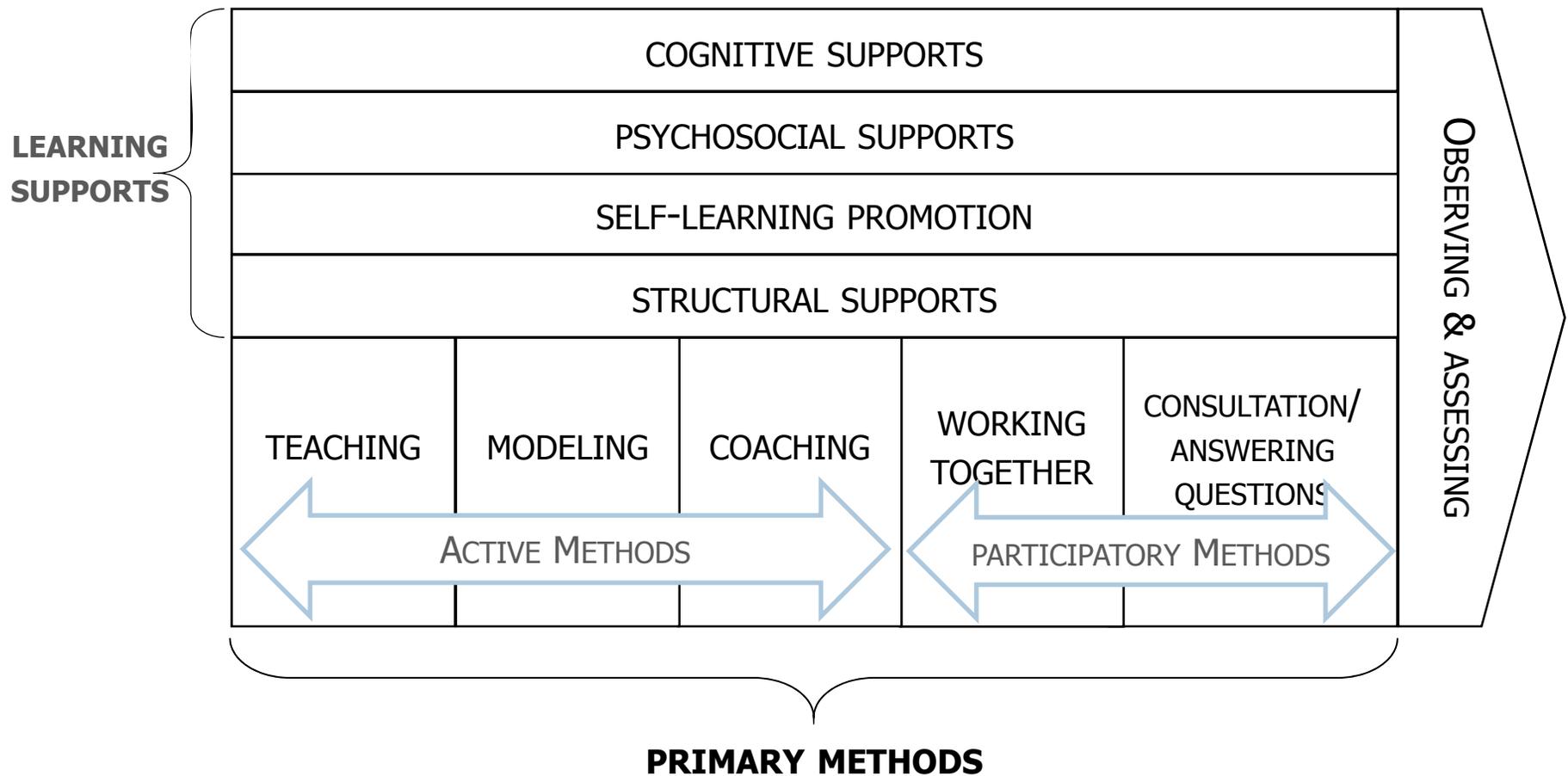# Methods used for transferring IF skills

Learning supports

- Cognitive supports
  - Making thinking visible
  - Using heuristics (rules of thumb)
  - Sharing experiences/telling stories
  - Making comparisons to clinical skills/activities

- Psychosocial supports
  - Providing acceptance/confirmation
  - Providing protection when IRF was not ready
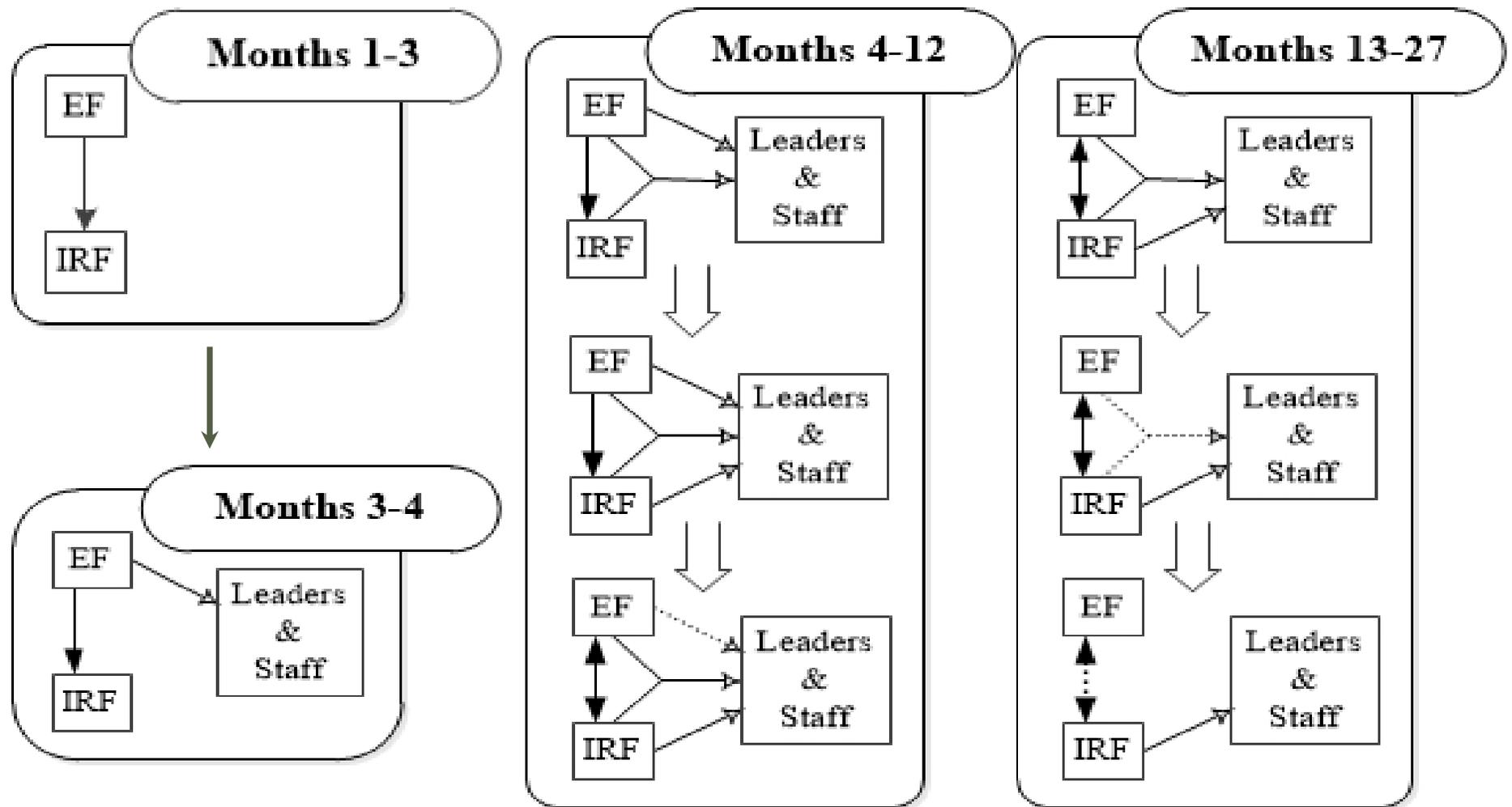 - Facilitating visibility of IRF
  - Promoting IRF

Learning supports

- Promoting self-learning
  - Encouraging IRFs to express their own thinking about barriers and how to address them
  - Encouraging IRFs to seek out and learn from other experts

- Structural supports
  - Encouraging/empowering IRFs to take on new roles
  - Taking advantage of 'teaching moments'
  - Stepping in and out when IRFs needed help
  - Pulling back

Methods used for transferring IF skills

Patterns of interaction that supported learning

Level of EF focus on individual skills

	IRF A	IRF C
Communication skills	High	High Moderate
Building relationships and creating a supportive environment		
Engaging stakeholders	High	High
Interpersonal skills	High	High Moderate
Interacting and working with leaders	Low	High
Motivating and building confidence	Low	Moderate
Political skills	Low	Low Moderate
Changing the system of care and the structures and processes that support it		
Problem-identification/solving	High	High
Helping to design adapt a program to meet local needs	Moderate	Low
Presenting and using data to improve the program	Low	Low
Integrating the program into the system	Low	Low
Transferring knowledge and skills		
Learning from experts/similar others/experience	High	High
Establishing learning collaboratives	High Moderate	High Moderate
Education and marketing skills	High Moderate	Moderate
Training/mentoring and coaching	Low Moderate	Low
Planning and leading change efforts		
Leading and managing team processes	High Moderate	Low
Administrative and project management skills	Low Moderate	Moderate
Thinking strategically and planning	Low Moderate	Low
Pulling back and disengaging	Low	Low
Meeting facilities and individuals where they are	Low	Low
Assessing people, processes and outcomes		
Assessment skills	Moderate	Moderate
Developing a program monitoring system	Moderate	Low Moderate
Monitoring implementation	Low	Low

Low = 0-9; Low Moderate = 10-12; Moderate = 13-16; High Moderate = 17-19; High ≥ 20

Tailoring level of focus

	IRF A	IRF C
Communication skills	High	High Moderate
Building relationships and creating a supportive environment		
Engaging stakeholders	High	High
Interpersonal skills	High	High Moderate
Interacting and working with leaders	Low	High
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Conclusions

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- To transfer skills, you need more than IF expertise, you need to know how to facilitate learning

- This study provides a novel model of methods for transferring IF skills

  - Traditional methods

  - Supportive techniques, including those for transferring tacit dimensions of skills

- Limitation: lack of formal training materials likely affected length of transfer process

Conclusions

- Our findings have practical applications for:
  - Building facilitation programs
  - Training facilitators
  - Learning facilitation skills
  - Planning wide-scale innovation implementation

QUESTIONS

References

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