



Developing the Autism Model of Implementation for ASD Community Providers: Use of a Research-Community Partnership

Amy Drahota,^{1,2} Gregory A. Aarons,^{2,3} Aubyn C. Stahmer,^{2,3}
and the AMI Collaborative Group

*San Diego State University¹, Child and Adolescent Services Research Center²,
University of California, San Diego³*

Seattle Implementation Research Conference

May 16, 2013

Many Thanks

- * NIMH (K01 MH093477)
- * NIH Training Institute for Dissemination and Implementation Research in Health (TIDIRH)
- * San Diego State University
- * AMI Collaborative Group Members
- * ASD Community Agencies
- * Research Assistant: Rosemary Meza
- * Research Intern: Emily Spurgeon
- * K01 Mentors: Drs. Aubyn Stahmer & Greg Aarons

Autism Spectrum Disorders (ASD)

- * 1 in 88 children are diagnosed with an autism spectrum disorder (ASD) (CDC, 2012)
- * Set of pervasive, clinically complex disorders requiring **multiple intervention** types to alleviate common clinical targets (Volkmar & Klin, 2005)

- | | |
|--|--------------------------------|
| * Impaired social skills & communication | * Executive functioning |
| * Restricted and circumscribed interests | * Empathy & perspective taking |
| | * Sensory Perception |
| | * Motor skills |
| | * Psychiatric disorders |

ASD Services

- * ASD community providers (ASD-CPs) are not implementing EBPs at the same rate that they are being developed and tested
- * Instead, ASD-CPs are delivering a **single type** of intervention for all clinical targets, **combining** practices in a non-systematic manner, or using practices that **lack supportive** evidence
- * Unsure why ASD-CPs are not successfully implementing EBPs for common clinical targets related to ASD
 - * Likely organizational and individual ASD-CP characteristics play a role in hindering implementation
 - * ASD-CPs do not have efficient, effective and contextually specific process to facilitate adoption, implementation, and sustainment

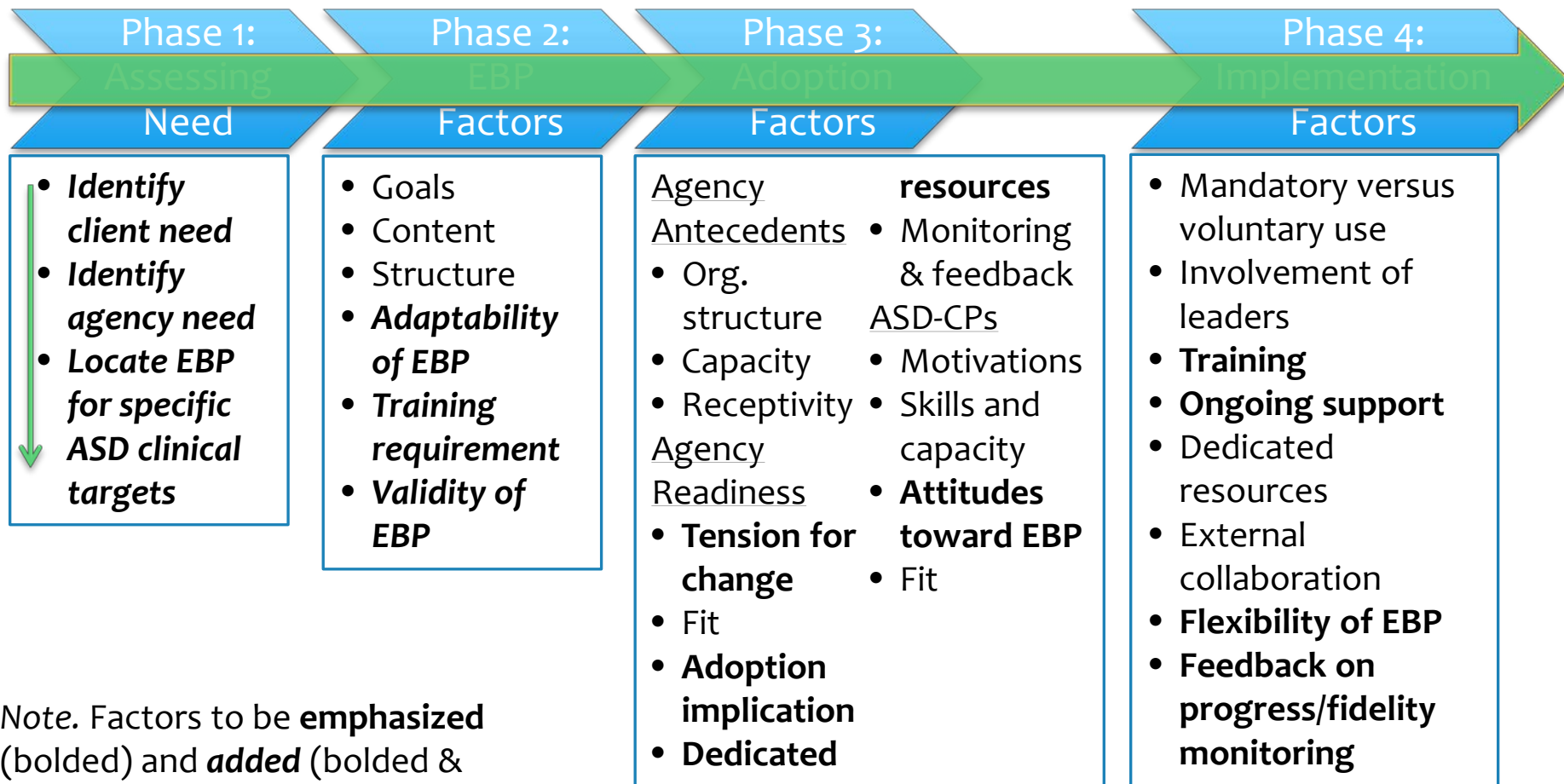
Autism Model of Implementation

- * A contextually specific model designed for use by ASD-CPs is needed to facilitate implementing EBPs with children with ASD and their families

The purpose of the AMI is to provide a systematic process for ASD-CPs to efficiently implement new EBPs in community-based agencies serving children with ASD

Preliminary Autism Model of Implementation

(Drahota et al., 2012)



Note. Factors to be **emphasized** (bolded) and **added** (bolded & italicized)

Developing the AMI: Use of a Research-Community Partnership

- * Academic-Community Collaborations (ACC) model:
 - * Shared vision and impact benchmarks
 - * Building interdependence between collaborative partners
 - * Consensus and shared decision making
 - * Formalized collaborative structure (roles, responsibilities)
- * Use of an ACC to revise the AMI should improve:
 - * Feasibility, acceptability and utility of the AMI and activities
 - * Use and sustainment of AMI in ASD community-based agencies

Study Purpose

- * To evaluate the development, collaborative process, function, and tangible products of the AMI Collaborative Group

Research-Community Partnership Framework

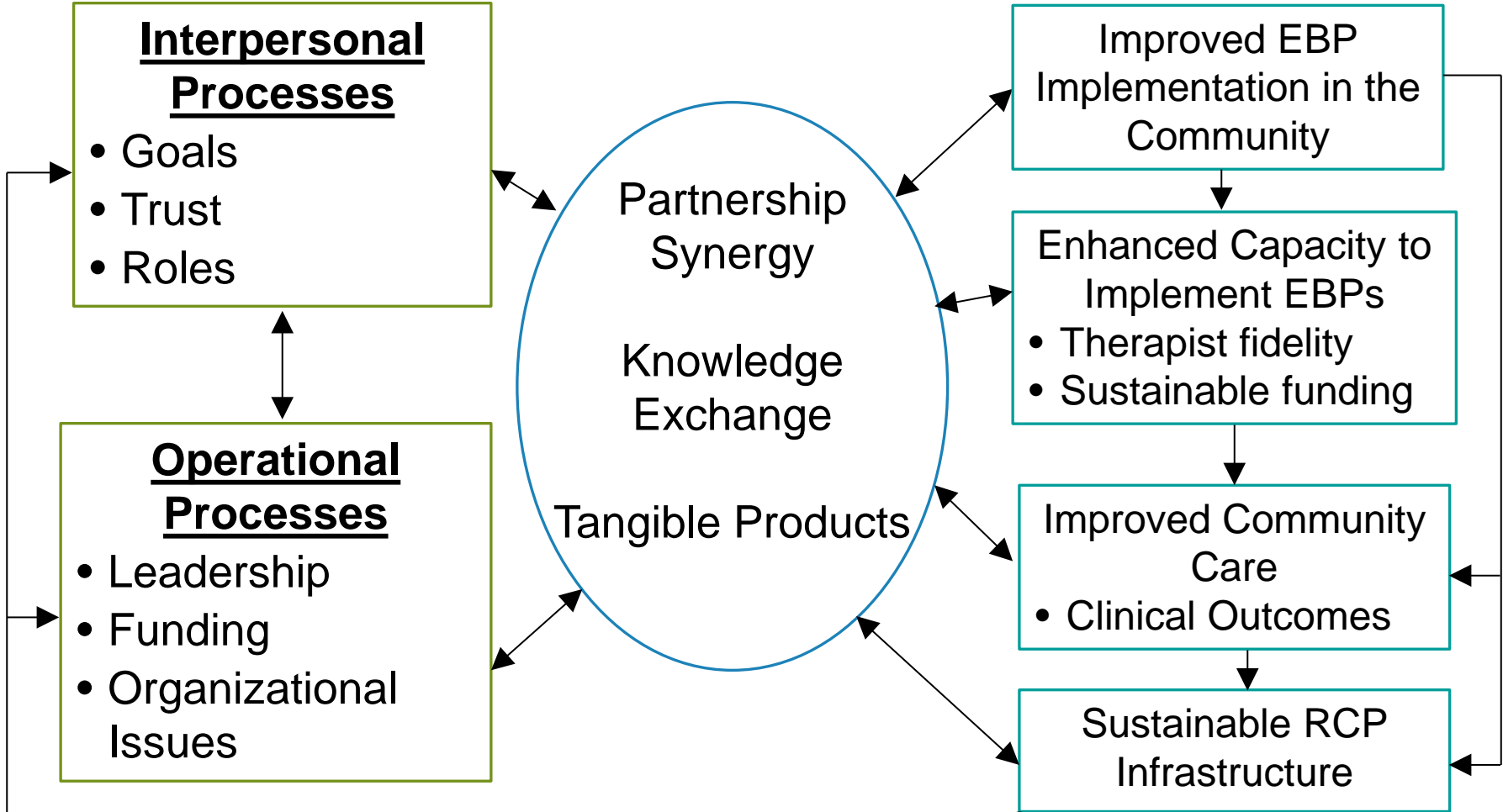
(Brookman-Fraze et al., 2012)



Collaborative Process

Proximal (Process) Outcomes

Distal Outcomes



COMMUNITY CONTEXT

Methods

Procedure



Collaborative group members offered \$100 per collaborative group meeting

Inclusion Criteria

- * Eligible participants
 - * ASD-CP: Director, supervisor, or trainer position at an ASD community-based agency
 - * Funder: Work at a funding agency and understand funding decisions for children with ASD
 - * IS: Expert in implementation science for 3 or more years
- * Interest in working on the Autism Model of Implementation
- * Have time to invest in developing a RCP
- * Is willing and able to share information about her/his ASD agency with other agency representatives

Individuals/agencies identified through resource searching (n=97)

Additional individuals/agencies identified through other resources (n=10)

Individuals/agencies after duplicates removed (n=107)

Individuals/agencies recruited (n=31)

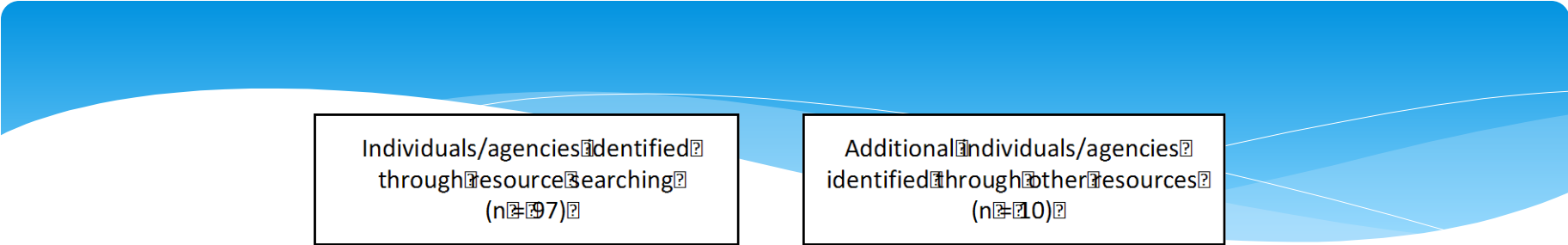
Individuals/agencies excluded (n=16)
• Did not respond (n=16)

9 ASD-CP
1 Implementation Scientist

Individuals assessed for eligibility (n=15)

Agencies excluded (n=5)
• Not interested (n=4)
• Co-director eligible (n=1)

Individuals included in ACC (n=10)



Participants

Collaborative Group (n = 10)

- * 9 ASD-CP
 - * 7 Directors, 2 Supervisors
- * 1 Implementation scientist
- * Education
 - * 4 Master
 - * 6 Ph.D.
- * Agency size (<40 to 100+)
 - * Primarily less than 40 employees (66.7%)

Agency Characteristics (n = 9)

- * Services vary
 - * Behavioral, Psychotherapy, Speech/ Language, OT, Social skills, Other
- * Client SES
 - * 1 Upper/high SES
 - * 1 Middle to upper SES
 - * 7 All levels of SES
- * Geographical location of clients
 - * 4 Urban & Suburban
 - * 2 Urban
 - * 2 Urban, Suburban & rural
 - * 1 Suburban

Mixed Methods Data Collection

Phase & Focus of Data	Quantitative Data	Qualitative Data		
Phase 1: Formation Collaborative Process Interpersonal Processes Operational Processes	<ul style="list-style-type: none"> • Telephone Screening • Decision to Participate survey • Collaborative Group Process survey • Meeting attendance • Attrition 	<ul style="list-style-type: none"> • Semi-structured recruitment interview • Meeting process notes • Agenda and meeting minutes 		
Phase 2: Execution of Activities Proximal (Process) Outcomes Partnership Functioning Knowledge Exchange Tangible Products				
Phase 3: Sustainment Distal Outcomes Sustainable RCP Infrastructure				

Results

Phase 1: Formation Collaborative Process

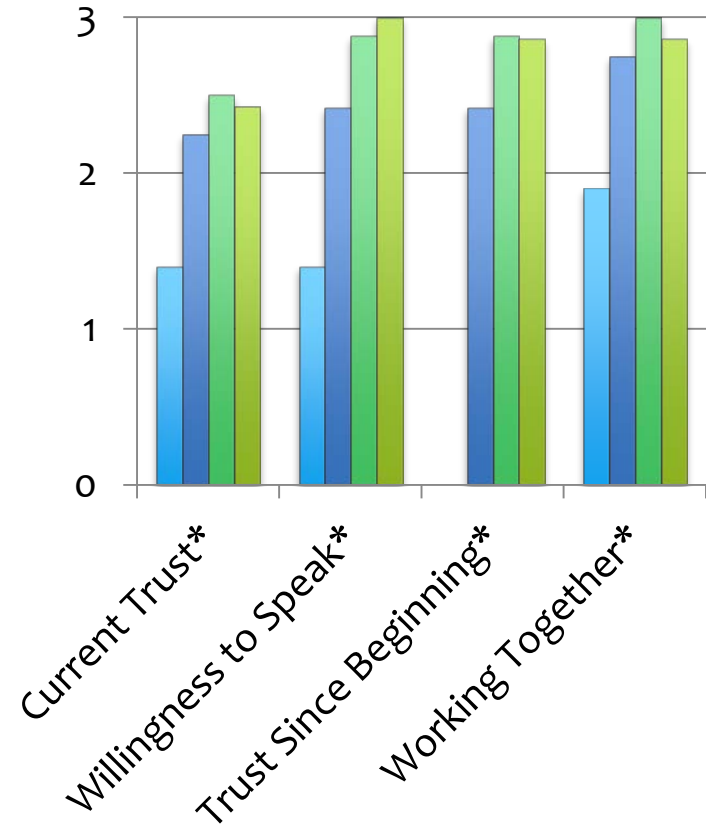
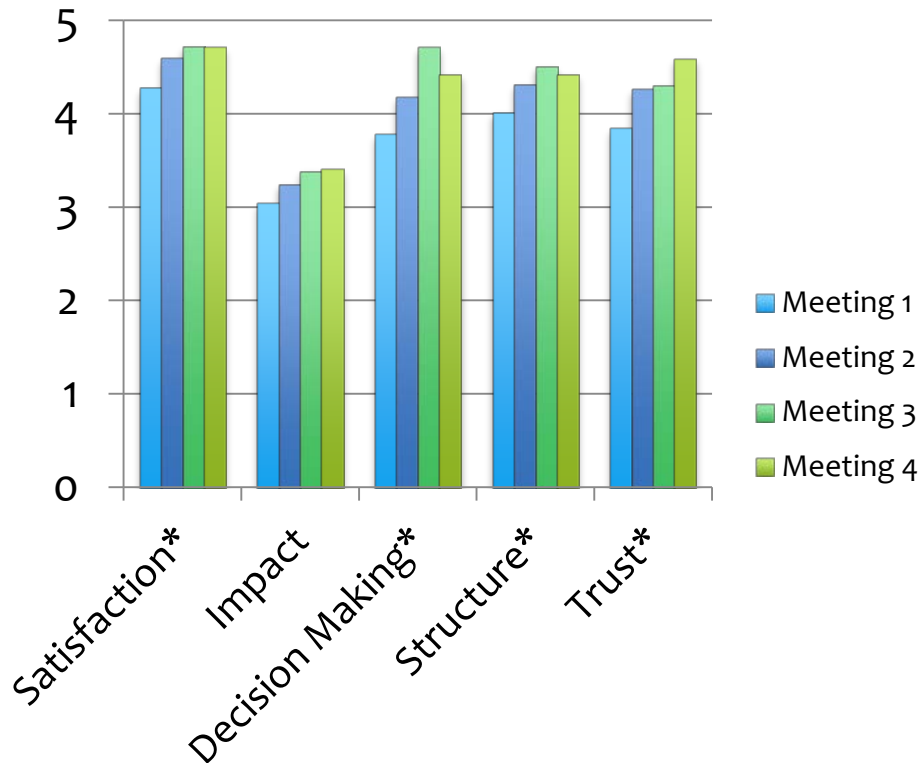
Interpersonal Processes

- * Goals
 - * Systematic process of implementing EBPs
 - * Generate innovation that meets agency needs
 - * Share, learn and network
- * Trust
 - * Respect perspectives
 - * Confidentiality
- * Roles
 - * Clear roles and responsibilities

Operational Processes

- * Leadership
 - * Researcher-initiated, yet
 - * Shared decision making
 - * Consensus
 - * Researcher the tie breaker
- * Funding: NIMH
- * Organizational Issues
 - * Communication methods
 - * Tasks (clear, reasonable, time management, delegation)

Phase 1: Formation Collaborative Process



Phase 2: Execution of Activities

Proximal (Process) Outcomes

- * Conducting Mixed Methods study
 - * Revised recruitment and study materials
- * Interpretation of Mixed Methods study results
- * Revising Autism Model of Implementation

Phase 3: Sustainment

Distal Outcomes

- * Participation in meetings
 - * Meeting 1 (Formation – Interpersonal Processes): 83.3%
 - * Meeting 2 (Formation – Operational Processes): 100%
 - * Meeting 3 (Execution of Activities): 66.7%
 - * Meeting 4 (Execution of Activities): 63.6%
- * 90% of initial members are still participants
 - * 1 person got new job at an agency already participating
- * 90% of agencies committed to ongoing participation

Important Lessons

- * Researcher-initiated and researcher-funded RCPs can generate positive interpersonal and operational processes consistent with an ACC model
- * Engagement strategies are necessary
 - * Between infrequent meetings
 - * Balancing collaborative group work with engagement
- * Emergent themes
 - * Communication: confidentiality, respectful, various modes
 - * Tasks: specific, clear, reasonable, delegated
 - * Leadership structure: clear roles and responsibilities
 - * Shared decision-making
 - * Connecting and creating, innovation, progress

Thank you!

adrahota@projects.sdsu.edu

(858) 966-7703 extension 3155