

Researching Implementation Support Experiences

# RISE Home Visiting Evaluation Leadership & Facilitative Administration Brief Report

This brief report describes findings from an analysis exploring the relationship between the implementation science drivers of leadership and facilitative administration conducted as part of the Washington Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Researching Implementation Support Experiences (RISE) Home Visiting Evaluation study. The RISE Home Visiting Evaluation was a four-year study that ran from fall of 2013 to fall of 2017. During the course of the evaluation several additional ad hoc exploratory analyses of interest to DEL and Thrive were identified. Of particular interest for further exploration to the State was the impact of differences in leadership and facilitative administration on home visiting program outcomes.



## **Key Findings**

- By and large, differences between evidence based home visiting programs in their leadership and facilitative administration were related to differences in their program outcomes of training, TA, coaching, and support; quality implementation and model fidelity; and staff competency and self-efficacy.
- Home visitors' perceptions of the effectiveness and quality of their leadership (supervisors and administrators) were most consistently associated with indicators of programs' training, technical assistance, coaching and support and staff competency and self-efficacy.
- Home visitors' perceptions of the extent to which their administration were datadriven were most consistently related with indicators of programs' training, technical assistance, coaching and support, quality implementation and model fidelity and staff competency and self-efficacy.
- Home visitors' perceptions of the extent to which their administration were facilitative of their work were most consistently associated with indicators of programs' training, technical assistance, coaching and support and staff competency and self-efficacy.



#### **Background and Context**

Evaluation findings are interpreted with an Implementation Science lens.

In 2012, the Washington State Department of Early Learning (DEL) was awarded competitive grant funding through the federal MIECHV program to expand the implementation of evidence-based home visiting (EBHV) in the state.

One priority of Washington's grant application was to build an Implementation HUB (HUB), in partnership with the non-profit Thrive Washington, that would act as a centralized support system for home visiting programs in order to improve organizational capacity, model fidelity, and quality of service delivery. By providing supports including continuous quality improvement (CQI), program monitoring, model-specific supports, coaching, training, and technical assistance (TA) using Implementation Science frameworks, the HUB would work to:

- broaden the availability of home visiting services,
- develop community capacity for implementing home visiting services, and
- support the quality and accountability of home visiting program implementation.

Another related priority area for the state was the expansion of home visiting, particularly with the goal of building the home visiting system's capacity to reach Washington's rural and frontier areas. Given this, MIECHV funds were used both to expand existing EBHV programs already serving rural communities as well as to start up new programs in areas that did not have EBHV.



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#### **Description of Evaluation**

DEL hired SRI International in fall 2013 to conduct an evaluation of the MIECHV grant activities. SRI's evaluation, known as the RISE Home Visiting Evaluation, was designed to (1) measure the progress and impacts of the Implementation HUB's centralized support system on participating programs and staff and (2) meet the federal funding requirement associated with the competitive MIECHV expansion grant to conduct a rigorous evaluation that will contribute to the national body of research and knowledge on implementing EBHV programs on a large scale. The evaluation focused on programs that are implementing Parents as Teachers (PAT) and Nurse-Family Partnership (NFP), two EBHV models that are the target of Washington's MIECHV expansion funding and included 18 MIECHV-funded home visiting programs in Washington and 32 similar comparison programs in 17 other states around the country.1

Given that DEL and Thrive utilized an Implementation Science framework to inform the development of the HUB and guide its work with programs, evaluation findings are interpreted through an Implementation Science lens. Implementation Science describes several stages of program implementation, including Exploration, Installation, Initial Implementation, and Full Implementation. It also identifies several implementation drivers that are critical to successful implementation: competency drivers (selection, training and coaching), leadership drivers (technical and adaptive leadership), and organization drivers (systems intervention, facilitative administration, decision support data system).<sup>2</sup> The exploratory analyses examining the relationship between leadership and facilitative administration drivers and program outcomes that we describe in this brief report represents one component of the RISE Evaluation.3

Exploratory
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evaluation.

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For more information on the evaluation design and sample, see Schachner, A., Gaylor, E., Chen, W., Hudson, L., & Garcia, D. (2017). RISE Home visiting evaluation: Final evaluation report, Selected findings from Year 1 and Year 4 of the evaluation. Menlo Park, CA.

<sup>&</sup>lt;sup>2</sup>See the National Implementation Research Network (NIRN) website for more details: http://nirn.fpg.unc.edu/learn-implementation/implementation-drivers

<sup>&</sup>lt;sup>3</sup>For the complete Year 4 RISE Evaluation report, see Schachner, A., Gaylor, E., Chen, W., Hudson, L., & Garcia, D. (2017). RISE Home visiting evaluation: Final evaluation report, Selected findings from Year 1 and Year 4 of the evaluation. Menlo Park, CA.



### Leadership and Facilitative Administration Exploratory Analysis

We sought to answer the question: How are leadership and facilitative administration implementation drivers associated with key program outcomes?

Implementation Science identifies several implementation drivers that are critical to successful implementation: competency driers (selection, training and coaching), leadership drivers (technical and adaptive leadership), and organization drivers (systems intervention, facilitative administration, decision support data system).4 Variation in the extent to which these drivers are in place is therefore expected to impact differences in the quality of implementation and desired outcomes. Through the process of reviewing the RISE evaluation findings, other state and MIECHV reporting

data, and implementing the HUB, the impact of differences in leadership and facilitative administration were identified as being of particular interest and relevance for further investigation. Specifically, we sought to better understand the following question through ad hoc exploratory analysis: We sought to answer the question: how are leadership and facilitative administration implementation drivers associated with key program outcomes relating to 1) training, TA, coaching, and support; 2) quality implementation and model fidelity; and 3) staff competency and self-efficacy.

<sup>&</sup>lt;sup>4</sup>See the National Implementation Research Network (NIRN) website for more details: http://nirn.fpg.unc.edu/learn-implementation/implementation-drivers



#### Methods and Sample

To examine this question, we used an empirical, data-driven approach to create leadership and facilitative driver measures using data from online surveys completed by home visitors (N = 231) at Time 2 (2016) and correlate the relationship between those data-derived drivers to program outcomes at Time 3 (2017) gathered through a combination of quarterly technical assistance and training logs (TA logs), an online survey of home visiting program staff, data exports from the model National Service Offices, and home visit snapshot forms (HV snapshot) of the first 10 visits completed within a 4-week period capturing the content of the topics and activities conducted during the home visits, as well as the relationship

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#### Data Collection Methods and Sample

quality with the family.5 We first identified all potential survey items that home visitors responded to related to their program, leadership and administrators or supervisors may be relate to leadership or facilitative administration conceptually and practically. We then conducted an exploratory factor analysis on the survey items which uses a mathematical process to identify the survey items that most group together in the data to identify the underlying constructs. The factor analysis was conducted using both principal components and varimax rotation methods. Principal components rotation allows for overlap or correlation between factors while varimax rotation does not allow for overlap or correlation between factors. The best fit for the data results in three factors with both good coherence analytically and theoretically: (1) an overall leadership factor ( $\alpha = .92$ ), (2) a data driven facilitative administration factor ( $\alpha = .88$ ), and (3) a general facilitative administration factor ( $\alpha = .63$ ). Exhibit 1 below provides the loading screen and alpha for each factor. A composite, standardized variable was created for each of the three factors. To examine the relationship between these leadership and facilitative administration factors derived from the data, we

analyzed the bivariate correlations between these factors and the key indicators of each program outcome construct (see Exhibits 2–4).

#### **Findings**

A number of significant findings suggest that leadership, data driven facilitation, and general facilitative administration were related to key outcomes in a breadth of areas.

- and highly significant correlations relating to programs' abilities to make changes based on CQI. In particular, there was a consistent positive pattern among programs with higher rates of data driven facilitative administration and their ability to conduct CQI activities, as would be expected (Exhibit 2).
- There was a significant negative correlation between the duration of client participation and the factors of leadership (*p* < .05) and general facilitative administration (*p* < .01). Programs stronger on these factors may be able to stabilize families more quickly or serve their needs more efficiently, there by moving them through the program more quickly (Exhibit 3).

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<sup>&</sup>lt;sup>5</sup>For more information on the data collection sources, methods and sample, see Schachner, A., Gaylor, E., Chen, W., Hudson, L., & Garcia, D. (2017). RISE Home visiting evaluation: Final evaluation report, Selected findings from Year 1 and Year 4 of the evaluation. Menlo Park, CA.



- All three factors were significantly and positively correlated with the presence of clear and systematic approaches for training new staff (leadership, *p* < .05; data driven facilitative administration, *p* < .05; general facilitative administration, *p* < .10) (Exhibit 3). Program supervisors and administrators were the staff responsible for establishing these practices, and programs that are higher on each factor are likely better equipped to generate and maintain these practices.
- Several items relating home visitors' comfort collecting data and attitudes on implementing evidence based practices were significantly positively correlated with the three factors (Exhibit 4). Program supervisors and administrators at programs with more effective leadership and administration may facilitate home visitors' buy in to

- concepts about collecting and using data, and the value of evidence based practices.
- There was a positive, significant correlations for indicators of home visitors' understanding of model requirements; more effective supervisors and administrators may be better able to communicate the goals of home visiting program and share concrete data pointing to its positive effects (Exhibit 4).
- Similarly, there were positive, significant correlations on home visitors' beliefs about their selfefficacy (Exhibit 4). Data driven programs with quality leadership and facilitative administration may be able to clearly demonstrate how home visiting makes a difference in the lives of families served, and may increase home visitors' feelings that they are competent and confident in their work.



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Data Driven General **Facilitative** Facilitative Leadership Administration Administration Survey Item  $(\alpha = .92)$  $(\alpha = .88)$  $(\alpha = .63)$ Administrators and supervisors have continually looked for ways to align program policies and .72 procedures with the overall mission, values, and philosophy of the [NFP/PAT] program. Administrators and supervisors have been very good at focusing our time on making changes to .83 things that really matter at the home visitor level. Administrators and supervisors have been fair, respectful, considerate, and inclusive in dealings .80 with others. Administrators and supervisors have established clear and frequent communication channels to .79 provide information to home visitors and to hear about their successes and concerns. Administrators and supervisors have been very good at giving reasons for changes in policies, .85 procedures, or staffing. Administrators and supervisors have actively and routinely sought feedback from home visitors and .82 others about what is needed to help implement the [NFP/PAT] model effectively. Our program has reviewed data at least monthly to .84 see how we are performing. Our program has used data to identify areas for .90 improvement. I can think of at least one example of when our program made a change in policies, procedures, .74 or activities in response to or after reviewing data. Our program has involved people at multiple levels to review data and consider how it might inform changes in practices or program .77 decisions (e.g., home visitors, supervisors and administrators review data). In the last 6 months, administrative policies and procedures have made it difficult to implement my -.59 home visiting role effectively. In the last 6 months, administrators have made efforts to change or improve existing policies .73 and procedures in response to identified staff concerns. In the last 6 months, administrators have shown interest in learning new things that might help .61 them improve the program. Administrators are knowledgeable about the [NFP/PAT] program model and our home visiting .50 activities.

Exploratory factor analysis was used to identify how the data clustered together and revealed three different underlying drivers.

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# Exhibit 2. Leadership and Facilitative Administration Correlated with Training, TA, Coaching and Support Outcome Indicators

There is a consistent positive pattern among programs with higher rates of data driven facilitative administration and their ability to conduct CQI activities, as would be expected.

Program Outcome Construct	Data Source	Factor A: Leadership $(\alpha = .92)$	Factor B: Data Driven Facilitative Admin $(\alpha = .92)$	Factor C: General Facilitative Admin $(\alpha = .63)$
Overarching: Training, TA, Coaching, and Support		Correlation coefficient (r)	Correlation coefficient (r)	Correlation coefficient (r)
Amount of training, TA and coaching				
Average number of TA hours received	TA Log	-0.05	-0.10	-0.15*
by home visitors per month <sup>a</sup>	171 209	197	197	134
Changes made as a result of CQI activities				
Our program has reviewed data at least	Survey	0.16**	0.29***	0.23**
monthly to see how we are performing.	Ourvey	163	163	112
Our program has used data to identify	Survey	0.11	0.26***	0.05
areas for improvement	Survey	163	163	112
I can think of at least one example of when our program made a change in policies, procedures, or activities in response to or after reviewing data	Survey	0.21*** 163	0.30*** 163	0.14 112
Our program has involved people at multiple levels to review data and consider how it might inform changes in practices or program decisions	Survey	0.20*** 163	0.38*** 163	0.21** 112

Note: Significant correlations are shaded. The strength of the correlation is indicated by the degree of the shading. 
<sup>a</sup>Measured at the program-level.

p < .10; p < .05; p < .05; p < .01.



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Exhibit 3. Leadership and Facilitative Administration Correlated with Quality Implementation and Model Fidelity Outcome Indicators

Program Outcome Construct	Data Source	Factor A: Leadership $(\alpha = .92)$	Factor B: Data Driven Facilitative Admin $(\alpha = .88)$	Factor C: General Facilitative Admin $(\alpha = .63)$
Overarching: Quality Implementation and Model Fidelity		Correlation coefficient (r)	Correlation coefficient (r)	Correlation coefficient (r)
Frequency of visits to clients				
Percent of expected visits completed (NFP only) <sup>a</sup>	Data export	0.11 119	0.16* 119	-0.01 89
Required visits completed with clients with 1 or fewer needs (PAT only) <sup>a</sup>	Data export	-0.09 146	-0.19** 146	-0.04 97
Required visits completed with clients with 2 or more needs (PAT only) <sup>a</sup>	Data export	-0.06 159	0.06 159	-0.14 106
Duration of client participation				
Duration of client participation (met duration of client participation fidelity) <sup>a</sup>	Data export	-0.13** 278	-0.03 278	-0.22*** 195
Caseload size				
Caseload size	Survey	0.05 115	0.21** 115	0.14 107
Staff meetings and/or cross-team meeting				
How often have you participated in meetings with other home visitors where the group discussed specific cases and jointly considered strategies for working with the children/families?	Survey	0.15 101	0.22** 101	0.02 101
Staff qualifications				
Meeting expected staff qualifications criteria <sup>a</sup>	Data export	0.07 278	-0.03 278	0.12* 195
Presence of clear, systematic approach for training new staff				
Presence of clear, systematic approach for training new staff	Survey	0.31** 60	0.30** 60	0.58* 11
Staff turnover				
Staff turnover <sup>a</sup>	Computed from survey	-0.04 271	-0.01 271	0.01 89

All three drivers are significantly and positively correlated with the presence of clear and systematic approaches for training new staff.

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HOME VISITING EVALUATION

Exhibit 3. Leadership and Facilitative Administration Correlated with Quality Implementation and Model Fidelity Outcome Indicators (continued)

content covered
on home
visits was not
significantly
correlated with
the leadership
or facilitative
administration
drivers.

Data Source	Factor A: Leadership	Factor B: Data Driven Facilitative Admin	Factor C: General Facilitative Admin $(\alpha = .63)$
000100	(u = .02)	(u = .00)	(α = .00)
HV	0.14	-0.10	-0.19**
Snapshot	116	116	107
HV	-0.08	-0.09	-0.05
Snapshot	116	116	107
HV	-0.01	-0.05	-0.11
Snapshot	116	116	107
HV	0.00	0.08	-0.02
Snapshot	116	116	107
HV	0.02	0.00	-0.02
Snapshot	116	116	107
HV	0.02	0.11	-0.15
Snapshot	116	116	107
HV	0.06	0.10	-0.01
Snapshot	116	116	107
HV	0.05	0.11	0.03
Snapshot	116	116	107
HV	0.05	0.11	-0.02
Snapshot	116	116	107
HV	0.04	-0.05	-0.15
Snapshot	116	116	107
HV	-0.06	0.23**	-0.18*
Snapshot	116	116	107
	HV Snapshot	Data Source         Leadership (α = .92)           HV 0.14 Snapshot 116 HV -0.08 Snapshot 116 HV -0.01 Snapshot 116 HV 0.00 Snapshot 116 HV 0.02 Snapshot 116 HV 0.02 Snapshot 116 HV 0.05 Snapshot 116 HV 0.04 Snapshot 116 HV 0.04 Snapshot 116 HV 0.04 Snapshot 116 HV 0.06 Snapshot 116 HV 0.04 Snapshot 116 HV 0.06 HV 0.	Data Driven Facilitative Admin (α = .92)         Data Driven Facilitative Admin (α = .88)           HV 0.14 -0.10         -0.10           Snapshot 116 116         116 116           HV -0.08 -0.09         -0.09           Snapshot 116 116         116           HV 0.01 -0.05         -0.05           Snapshot 116 116         116           HV 0.02 0.00         0.08           Snapshot 116 116         116           HV 0.02 0.11         0.11           Snapshot 116 116         116           HV 0.05 0.11         0.11           Snapshot 116 116         116

Note: Significant correlations are shaded. The strength of the correlation is indicated by the degree of the shading. 
<sup>a</sup>Measured at the program-level.

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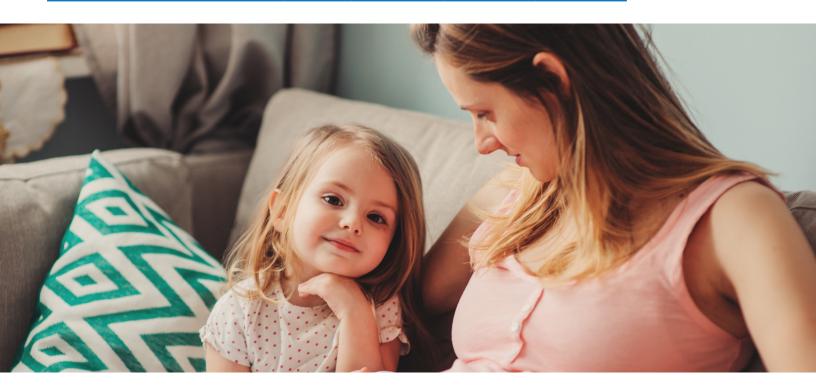
p < .10; p < .05; p < .05; p < .01.



Exhibit 4. Leadership and Facilitative Administration Factors Correlated with Staff Competency and Self-Efficacy Outcome Indicators

Outcome Evaluation Construct	Data Source	Factor A: Leadership (α = .92)	Factor B: Data Driven Facilitative Admin $(\alpha = .88)$	Factor C: General Facilitative Admin $(\alpha = .63)$
Overarching: Staff Competency and Self-Efficacy		Correlation coefficient (r)	Correlation coefficient (r) N	Correlation coefficient (r) N
Consistent, high-quality reflective supervision				
How often have you had a scheduled time to meet with your supervisor individually?	Survey	0.07 101	-0.02 101	0.19** 101
How often has your supervisor actually met with you individually?	Survey	0.14 101	0.02 101	0.20** 101
I can think of examples of how my home visiting has improved as a result of supervision I received in the last 6 months.	Survey	0.34*** 101	0.23** 101	0.20** 101
Staff behaviors that contribute to client retention and dosage (HV Flags)				
Child excitedly turns to the mother when you arrive, expecting something fun together.	Survey	0.20** 102	0.15 102	0.00 102
Child is excited to see you because of the toys or materials you bring. (Reverse coded)	Survey	0.10 102	0.00 102	0.06 102

General
facilitative
administration
was consistently
positively
correlated with
indicators of
consistent, highquality reflective
supervision.



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Exhibit 4. Leadership and Facilitative Administration Factors Correlated with Staff Competency and Self-Efficacy Outcome Indicators (continued)

**Data driven** programs with strong leadership and facilitative administration may be able to clearly demonstrate how home visiting makes a difference and increase home visitors' feelings of selfcompetence and self-efficacy.

	Data	Factor A: Leadership	Factor B: Data Driven Facilitative Admin	Factor C: General Facilitative Admin
Outcome Evaluation Construct	Source	$(\alpha = .92)$	$(\alpha = .88)$	$(\alpha = .63)$
Comfort collecting data/conducting screening and positive attitudes toward implementing evidence-based practices				
I was comfortable assessing family needs and strengths	Survey	0.27** 102	0.19* 102	0.06 102
Based on experience, it has been important to deliver the [NFP/PAT] intervention in the same way as it was done in studies that found it to be effective.	Survey	0.29*** 165	0.18** 165	0.22** 113
Based on experience, it has been important to know that our home visiting practices are supported by research that shows they are effective.	Survey	0.14* 165	0.05 165	0.16* 113
Based on experience, clinical judgment or my experience has been more important than using a specific curriculum in work with families. (Reverse coded)	Survey	-0.08 165	-0.02 165	-0.05 113
Staff understanding of model requirements being implemented				
I was comfortable explaining the goals of the [NFP/PAT] model to families and others.	Survey	0.27*** 102	0.24** 102	0.21** 102
I knew how my specific home visiting activities related to the [NFP/PAT] program goals.	Survey	0.28** 102	0.11 102	0.17* 102
Beliefs about self-efficacy and that the home visiting makes a difference				
Throughout my time at this program, I have had sufficient training about my role as a home visitor to be able to implement the [NFP/PAT] program effectively.	Survey	0.30*** 102	0.15 102	0.04 102
I have been effective at engaging families so that they actively participate in the program over time.	Survey	0.35*** 102	0.21** 102	0.07 102
I have been effective in facilitating the family to support their child's development.	Survey	0.36*** 102	0.30*** 102	0.12 102

Note: Significant correlations are shaded. The strength of the correlation is indicated by the degree of the shading. p < .10; p < .05; p < .05; p < .01.

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#### Summary and Key Implications

These results provide preliminary evidence for a robust relationship between leadership and facilitative administration drivers and program-level outcomes. By and large, differences between evidence based home visiting programs in their leadership and facilitative administration were related to differences in their program outcomes of training, TA, coaching, and support; quality implementation and model fidelity; and staff competency and self-efficacy:

- Home visitors' perceptions of the effectiveness and quality of their leadership (supervisors and administrators) were most consistently associated with making changes as the result of CQI activities, the presence of a clear consistent approach to training new staff, their comfort in conducting assessment, positive attitudes toward implementing evidence based practices, greater understanding of model requirements, and more self-efficacy amongst home visitors.
- Home visitors' perceptions of the extent to which their administration was data-driven is most
  consistently related with making changes as a result of CQI activities, meeting caseloads, more regular
  case conferencing, the presence of a clear consistent approach to training new staff, more referral
  activity, and greater self-efficacy amongst home visitors.
- Home visitors' perceptions of the extent to which their administration was facilitative of their work is
  most consistently associated with the higher amounts of training, TA and coaching received by home
  visitors, meeting staff qualifications criteria, more referral activity, high-quality reflective supervision,
  and greater understanding of model requirements.

From a policy perspective, these findings suggest that providing supports focused on increasing the skills of home visiting supervisors and administrators to be effective leaders and for program policies and processes to facilitate the use of data to inform decisions and to be responsive to staff needs and concerns will likely have a positive impact on program-level quality and implementation.



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