

A large, stylized compass rose graphic in shades of blue and light blue, centered on the page. It features a central four-pointed star with a circular center containing a smaller star. The rose is overlaid with a large, semi-transparent orange circle.

**PA Opioid
Overdose
Reduction**

**Technical
Assistance
Center**

Funded by: Pennsylvania Commission on Crime and Delinquency



**PittPharmacy
PER_XU**

IMPLEMENTATION GUIDE

Purpose.....	3
Overview.....	3
<i>A3: Patient Pathway</i>	3
<i>Implementation Protocol</i>	3
<i>Evaluation Scheme</i>	3
<i>Additional Components</i>	4
Appendix A: Implementation Guide	
Appendix B: Initiative Champions	
Appendix C: Principles of Performance Measurement	

Staff

Janice Pringle, PhD

Director, Program Evaluation and Research Unit (PERU)
jlpringle@pitt.edu

Lynn Mirigian, PhD

Program Director, TAC
lym17@pitt.edu

Megan Neuf, MSW, MPH

Project Coordinator

Laken Ethun, MPH

Health Services Administrator

Allison Burrell, MPH, CPH, CHES

Research Specialist

Erin Straw, MPH

Research Specialist

Marco Pugliese, MS

Research Specialist

Susan Fisher, MUP

Research Specialist

Erh-Hsuan Wang, PhD

Data Analyst

Nicholas Korach, MS

Data Manager

Monica Gaydos, MA

Technical Writer

Andrew Grossmann

Software Developer

IMPLEMENTATION GUIDE

Using Implementation Guides

Purpose

In order for the PA Opioid Overdose Reduction Technical Assistance Center (TAC) to assist counties with implementation of county specific programs, the TAC facilitates the development-tailored Implementation Guides. Implementation guides help specify roles, improve data collection, and ensure that a new project or program is efficient and beneficial to the participants. During development of the implementation guides, TAC works closely with the collaborating county to identify all aspects required for the desired program or service.

Implementation guides can provide guidance, and have been created for various county interventions including SBIRT, warm hand-offs, treatment in jail, and community paramedicine. The implementation guides include a summary of the program, initiative champions, the program's vision, evaluation, literature, and implementation specification.

Overview

An implementation guide, at the minimum, includes the project or program's vision, an A3, or patient pathway, the program or project implementation protocol, and an evaluation scheme. These can be found in Appendix A. A guide may also include initiative champions, literature, and implementation specification. These can be accessed in additional appendices.

A3: Patient Pathway

The first component of the implementation specification section is the A3, Figure A. The A3 is a visual model of the patient pathway that walks an individual through each step of the program or project. The ideal, listed on the right side of the figure, indicates that each step of the process

is on demand, immediate, one-on-one, defect free, no waste, and safe. A3 models help identify problems, countermeasures to problems, and tests to identify if the countermeasure is effective in resolving the problems.

Implementation Protocol

The implementation protocol consists of three components: Pre-implementation, program implementation protocol, and evaluation. Pre-implementation consists of all tasks that require completion, as well as who is responsible for each task, in order for the program or project to begin. The program implementation component is what happens each time the program is implemented. This can be per person, referral, training, screening, etc. The implementation protocol is broken down into daily, weekly, bi-monthly, monthly, quarterly, and yearly timeframes to ensure that every stakeholder knows when they are responsible for their role in the program or service.

Evaluation Scheme

The evaluation portion of the implementation guide is broken down by inputs and identifies who is responsible for the designated data. The evaluation scheme consists of the evaluation item (e.g., data to be collected), activity timeframe (e.g., weekly, monthly, etc.), when the evaluation item is reported (e.g., three days after the month), and to whom the evaluation item is reported (i.e., SCA, project director, etc.).

IMPLEMENTATION GUIDE

The Evaluation Goals and Objectives portion identifies the overall objective of the project, specific goals to achieve during the project, what information needs to be collected to determine if the project is successful, and the resources that are needed to determine if the project is successful.

Additional Components (Appendix B)

For some projects, it may be helpful to list initiative champions (Appendix B) that stakeholders may rely on to move a program or project forward or to provide public endorsement. To provide additional backing, stakeholders may also collect literature supporting the efficacy of a chosen program or project.

The last, and optional, component of the implementation specification section is the impact model. The impact model does not need to be completed unless there is difficulty completing the patient pathway, stakeholders are applying for funding, or the implementation team feels it is necessary to the program.

The impact model consists of inputs, activities, outputs, outcomes, and impact. Inputs are the resources needed to operate the overdose reduction activity and may include training, staff, and protocols. Activities are actions that will use the resources to accomplish the designated program and include items such as training participation, assessments, and referrals. Outputs are the results of accomplishing the planned activities that will lead to delivery of the intended product or service. Outputs include physical care of a patient and opportunities for participants to receive treatment and support. Outcomes are how the participants of the program will benefit and can include improvement in quality of life and well-being. Lastly, impact is the system changes that can be expected to occur as a result of program implementation. Impacts may include a decrease in overdoses, a decrease in criminal justice system involvement, an improvement in EMS system operations, and safer communities.

Appendix C also provides principles of performance measurement, which identify the idealistic qualities of a good performance measurement such as real-time collection and analysis and adaptiveness. Project stakeholders can follow a performance measure quality checklist. Principles of internal and external learning are also included.