

# Evidence on Implementation

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**What Can We Learn from Nike,  
The U.S. Army, & Home Depot?**



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John Hudgens, Oklahoma Department of Mental Health  
& Substance Abuse Services - June 24, 2005

The task is not to see if a practice works. Rather it is to implement it in a fashion so it will work.

People in need of services deserve the best. They need the benefit of effective services now.

# PACT Roots in Oklahoma

- Advocacy Interest
  - Legislative Insistence
    - Agency Initiative

# Key Agency Decision – Be the Purveyor

- Proactive not Reactive
- Fidelity Fidelity Fidelity
  - Show Me the Money – for Fidelity
  - Dedicate Staff to Implementation – for Fidelity
  - Prepare to Articulate Success through Outcomes – because of Fidelity

# History

## ■ 2001

- Legislature funded one full Team – Required annual report
- ODMHSAS “saw that bid” and funded a second full team
- RFPs developed & bids awarded
  - 2 sites selected - one in each metro area – January 2001
  - Services initiated – May 2001
- NAMI as partners & prodders – State and Local Implementation Teams
- One FTE at state level – exclusively dedicated to implementation, training, monitoring, and support

# More History

## ■ 2002

- Reallocated resources within CMHCs to initiate 4 partial teams – primarily in rural areas
- Initial Legislative report on PACT
- Funds appropriated for 2 additional PACT (for FY2003)
- Former PACT psychiatrist becomes Med School Dean
- Statutory authority to certify PACT

## ■ 2003

- 2 new full teams initiated – one as part of Med School
- Administrative Code for PACT adopted

# PACT Continues to Expand

## ■ 2004

- Medicaid rules for PACT adopted
- One partial team expands to full team status
- Additional state level staff to assist with implementation and monitoring.

## ■ 2005

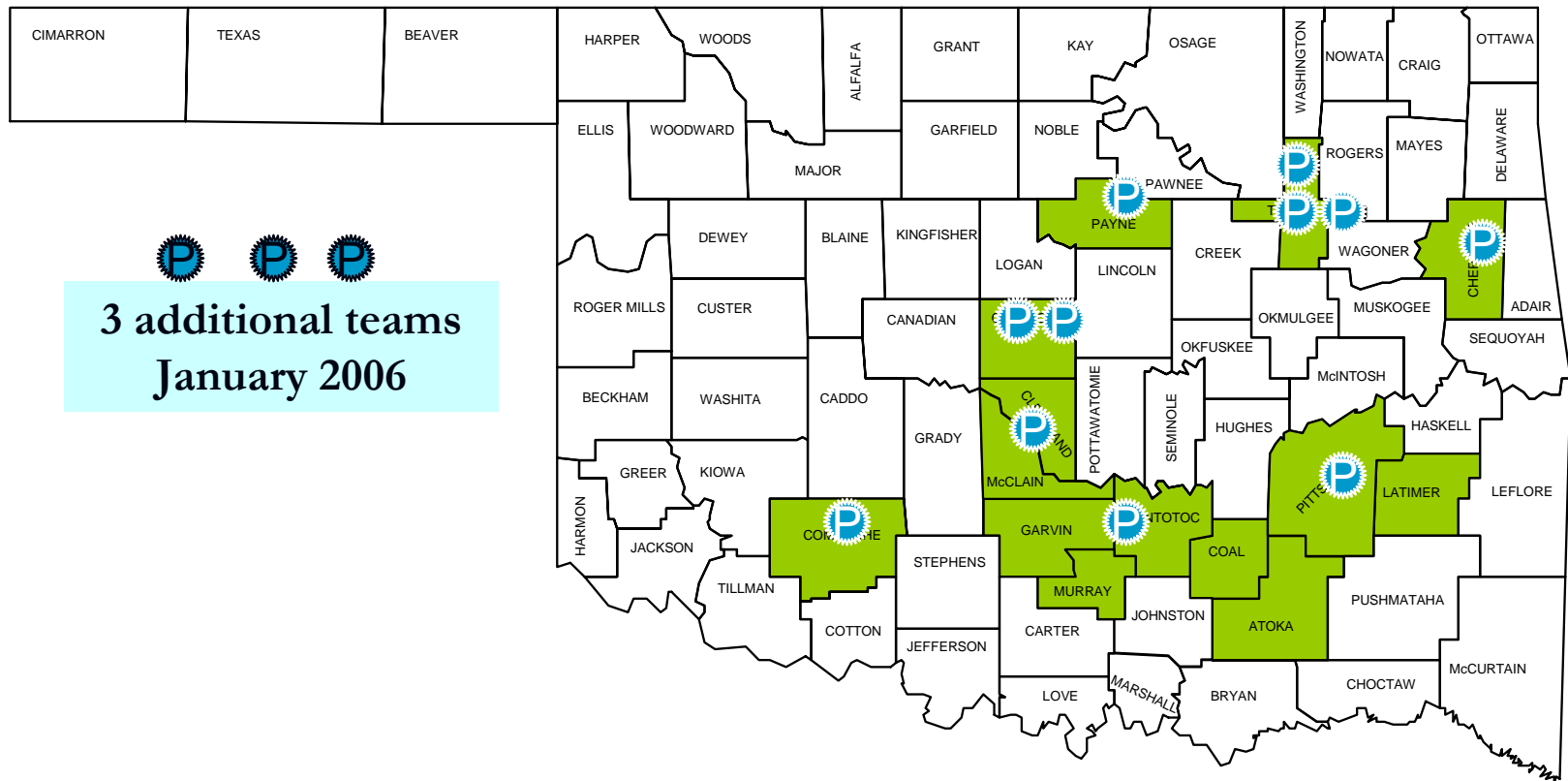
- Medicaid Rate for PACT approved
- 3 additional partial teams funded in rural areas
- SAMHSA grant for contracted provider to establish Co-ACT (for co-occurring population) – state added funding to bring up to full fidelity

# More Growth Ahead

## 14 Teams by January 2006

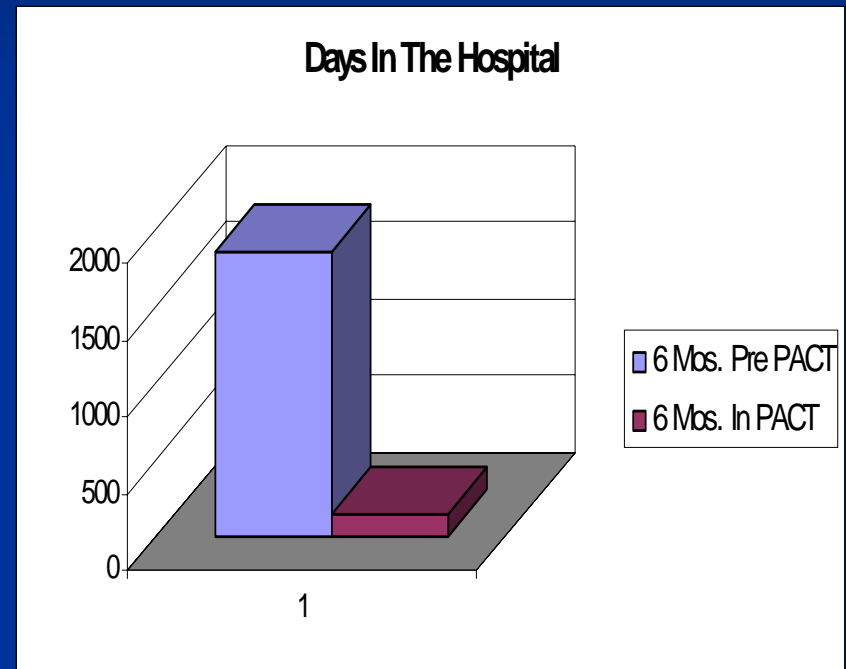


3 additional teams  
January 2006

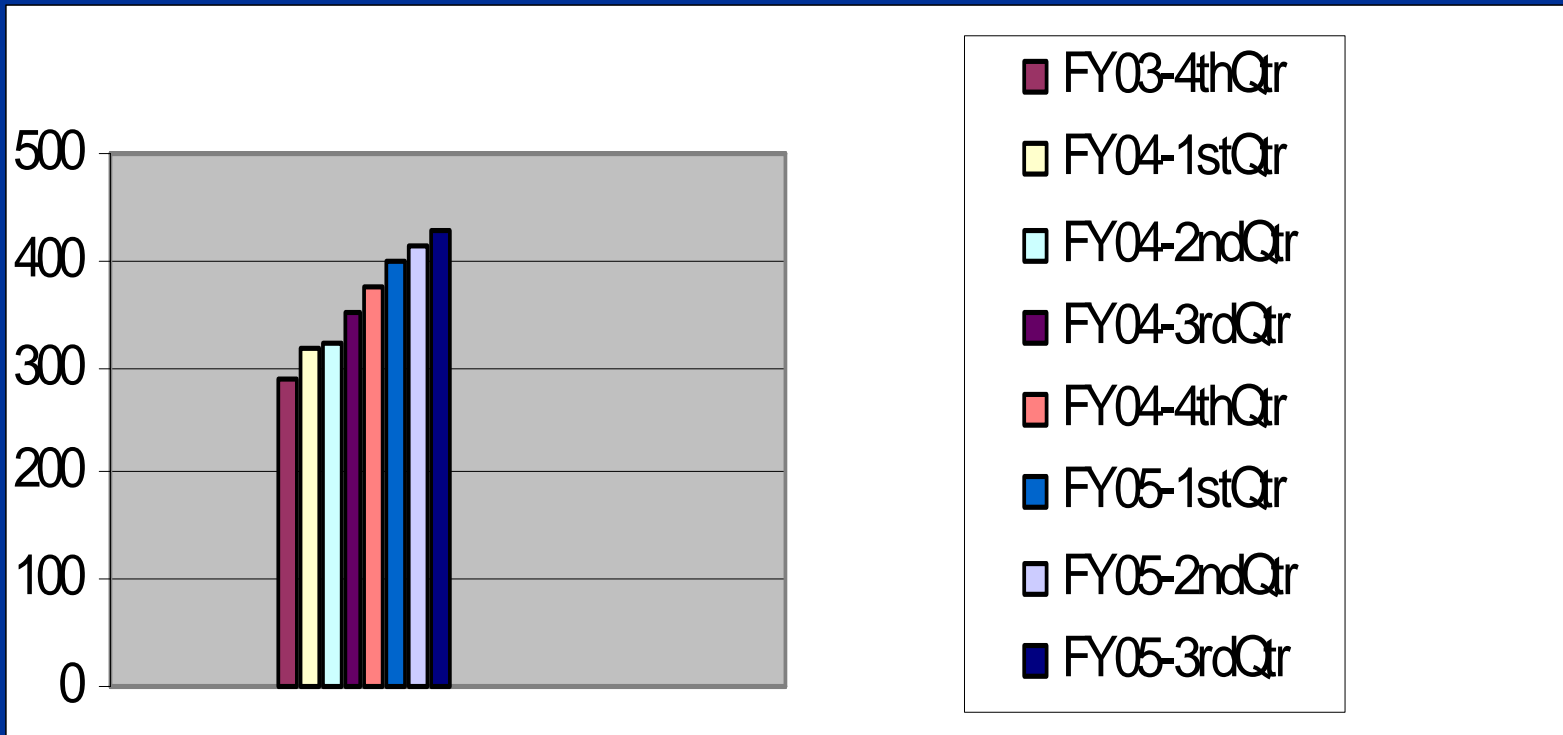


# Initial Outcomes Reported To Legislature

- # of 6-month pre-PACT hospital days= 1844
- # of 6-months post-PACT hospital days= 135
- An estimated cost savings of over \$675,000 for the first 32 consumers with 6 months in PACT



# 8 Quarter Growth – Number of Persons Receiving PACT



# Reasons for Success - Leadership

- Articulated the EBP as part of overall strategy for a recovery based system & framed outcomes within context of overall organizational goals
- Strategically selected and utilized a broad based group of stakeholders (Implementation Committees)
- Identified existing strengths of the state agency to leverage success for new program
- Stayed the course – rolled on past naysayers and detractors

# Reasons for Success – Preparation

- Became informed about successes and challenges experienced by others
- Identified and utilized external experts as consultants, mentors, and guides
- Invested in a dedicated staff with expertise, credibility, and passion
- Developed infrastructure for frequent monitoring, technical assistance, and decision support.

# Reasons for Success – Posture

- Framed program as model not pilot program
- Clearly articulated for whom program was designed – did not over promise
- Focused on proven outcomes as reason to adhere to fidelity
- Assured a data capacity for performance improvement, outcomes monitoring and cost analysis

# Reasons for Success – Marketing

- Provided periodic reports to public and funders in straightforward and meaningful manner
- Protected program integrity and projected ownership of the program
- Seized opportunities to parley successes into additional resources for expansion
- Developed methodology and partnership to financially sustain the program.

# Implication for Additional Recovery Focused Services

- Systems of Care
- Wrap Around Training
- Strengths Based Case Management
- Recovery Support Specialists
- Psychosocial Rehab – no more day “treatment”
- Mental Health Courts and Crisis Intervention Teams
- Trauma Focused Care and Cognitive Behavioral Therapy
- Day Care Consultation
- Supported Employment

# Change Agent Chutzpah

- Operate from a sense of purpose and passion. (Support of leadership is essential).
- Build a team that connects with purpose and passion. No time for lone wolves.
- Flatten the organization for reporting and problem solving. Get in – get out – get going.
- Select people with relevant skills and high energy.
- Use an action-feedback model. Avoid bogging down with the “usual” procedures.

# Exceptional Skills – Exciting Work– Essential Outcomes

- Managers that can operate with simultaneous skills sets is essential
  - Political skills
  - People skills
  - System skills
  - Business skills
- Constant interplay of applying the science within the practice and crafting strategies within political, systemic, and business contexts.

The task is not to see if a practice works. Rather it is to implement it in a fashion so it will work.

People in need of services deserve the best. They need the benefit of effective services now.

# So what did we learn?



Just do it!

Be an Army of one  
and be all you can be!



You can do it.  
We can help!

# Contact Information

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