

# Integrated Dual Disorders Treatment Fidelity Scale and General Organizational Index (GOI) Training

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Julienne Giard, MSW  
DMHAS

First developed/presented by Rust Foster, 2009

# Overview of Training

- Fidelity
- Toolkit components
- Overview of scale
- The visit
  - Preparing, Data Sources, Coding
- GOI
- Report
- Practice

# What Is a Fidelity Scale?

- Tool used to measure the degree to which the practice as implemented by the agency faithfully follows the principles of that practice
- Evaluates critical principles and methods based on the critical components of the practice

# What is a Fidelity Scale?

- **Fidelity: Adherence to an evidence-based practice or model**
- **Fidelity scales: Objective ratings of adherence (e.g., IDDT Fidelity Scale)**

# **CAN WE USE FIDELITY SCALE METHODOLOGY FOR OBJECTIVE RATING?**

- **Site visit (yields data beyond self-report)**
- **Multiple sources: Chart, brochure & program manual review; Observation of clinical process, team meeting, &/or supervision session; Interview with agency director, clinicians & clients.**
- **Objective ratings on operational definitions using a 5-point scale**

# Uses for Fidelity Scales

- Method to assess the success in the initial implementation of the practice
  - Areas of strength
  - Areas requiring further development and attention
- Measure progress in implementation
- Help agencies assure they are offering the practice in the most effective manner
- Prevent “drift” from principles



# Uses for Fidelity Scales

- Measures adequacy of the implementation of IDDT programs.
- Differentiates between agencies that offer the practice faithful to the principles and those that do not (discriminate validity)
- Some fidelity scales effectively predict better outcomes (predictive validity)

# IDDT Fidelity Scale Toolkit

## Components

- Introduction
  - Overview of the Scale
  - What is rated?
  - Unit of analysis
  - How rating is done
- Preparing for a FS visit
- Fidelity Scale Item Protocol
- Cover Sheet
- Checklist of multiple sources
- Score Sheet
- Instructions for Scoring



# Overview of Scale

- 14 program specific items
- Each item rated on 5 point rating scale ranging from 1 (not implemented) to 5 (fully implemented)
- Scale rated on current behavior and activities **not planned or intended**
- The scale is appropriate for organizations serving clients with SMI and for assessing adherence to EBP at the program level or specialty team
- The FS usually takes a full day (5-7 hours) to complete

# Preparing for a Fidelity Scale Survey

- Create a timeline
- Establish a program contact person
- Identify staff whom you will need to interview
- Communicate the goals of the survey

# “Welcomed” Fidelity Assessments



- The agency/program clearly understands the purpose of the assessment
- The agency/program clearly understands who will receive the assessment report
- The agency/program is able to see the fidelity assessment as part of an ongoing quality improvement process for the agency

# “NOT Welcomed” Fidelity Assessments



- There is confusion about why the fidelity assessment is being used
- The agency staff feel that the quality of their individual work is being questioned
- The agency feels that this assessment is to make “researchers” happy
- There is no chance to have a discussion about the use of fidelity assessments

# Preparing for FS Visit

Make sure you answer the following:

- What is the purpose of the FS for this agency/program?
- Who will administer the FS?
- Who will see the results of the FS?
- How will the use of the FS be explained to agency/program staff?
- Particular agency/program concerns?

# Preparing for FS Visit

- Assemble the following information:
  - A copy of the agency/program brochure
  - A copy of the agency/program mission statement
  - Roster of staff who work with clients with co-occurring disorders (roles/FTE's); a table of organization for the program would be helpful
  - A copy of the substance use screening instrument used by the agency/program
  - A copy of the standardized assessment for clients with co-occurring disorders
  - Total number of clients served by the agency/program
  - Number of active clients receiving co-occurring services

# Preparing for FS Visit

- Number of active clients receiving specific dual disorders services (e.g. substance abuse counseling, DD group counseling, family interventions).
- Number of clients with dual disorders served in previous year
- Weekly schedule for counseling services including all groups
- Clinician training curriculum and schedule
- Current Quality Improvement Data
- Current Outcome data related to clients with dual disorders

# The IDDT Fidelity Scale

- Fidelity Scale Protocol: Explains how to rate each of the 14 FS items. The Protocol includes for each item:
  - Definition
  - Rationale
  - Data Sources and probe questions
  - Rating Decision Rules
    - Item Response Coding
    - IDDT FS Rating Table
    - IDDT FS Score Sheet



# Fidelity Scale Protocol

- The IDDT FS assessment evaluates services provided to:
  - Clients with DD and the clinicians who are responsible for their MH and SA treatment
  - The FS assessment focuses on whomever the program leader designates as the target population (fidelity versus penetration)

# Fidelity Scale Protocol: FS Item Definition and Rationale

- What does this item mean?
- Why is it a core principle?
- What is the research that supports the inclusion of this item in the FS?

# Fidelity Scale Protocol: Assessment Data Sources

- Reviewing documentation
- Agency demographic information
- Administrator interviews
- Practitioner and supervisor interviews
- Consumer interviews
- Team meetings, group treatment meetings
- Specialists interviews
- Prescribers
- Probe questions for each data source
- Rating based on integration of various data sources

# Data Source Interviews

- Program Leaders: Depending on level of assessment (agency/clinic/program or team) can include Executive Director, Supervisor of Clinical Services, Program Manager or Team Leader.
- Clinicians: Can include nurses, clinicians, case managers or other specialists. Should be done in a group with minimum of 5 staff (if program is smaller, then interview everyone)
- Consumers: Do in a group with minimum of 3 consumers preferably that have received IDDT services for at least 1 year.

# Fidelity Scale Visit

- Interviews (Use Interview Forms)
  - Meeting with leadership staff (45 minutes)
  - Meeting with clinicians and case managers (45 minutes)
  - SA specialist (30 minutes)
  - Meeting with prescriber(s) (20 minutes)
  - Meeting with consumers (45 hour)
- Observation of an COD treatment group (30 minutes)
- Review 5 randomly selected open COD charts, from different clinicians (1 hour)
- Additional optional components:
  - Observing Team Meeting (45 minutes)
  - Observing Clinical Supervision Meeting (45 minutes)

# Core Principles of IDDT Research-Based

- Integrated treatment
- Assertive outreach
- Comprehensive services
- Motivation based interventions
- Time unlimited services
- Reduction in negative consequences
- Multiple psychotherapeutic modalities

# IDDT Fidelity Scale

The 14-items are based on the IDDT core principles:

- 1a. Multidisciplinary Teams
- 1b. Integrated substance abuse specialist
2. Stage-wise Interventions
3. Access to comprehensive services
4. Time-unlimited services
5. Outreach
6. Motivational interventions
7. Substance abuse counseling
8. Group DD Treatment
9. Family DD Treatment
10. Participation in AA/NA self-help
11. Pharmacological Treatment
12. Interventions to promote health
13. Secondary interventions for SA treatment non-responders

# Core Principles of IDDT

- Principles cover three specific domains:
  - Structure (multidisciplinary team, integrated substance abuse specialist, access to comprehensive dual diagnosis services, and time-unlimited services)
  - Counseling Approach (stage-wise interventions, outreach, motivational interventions, and secondary interventions for substance abuse treatment non-responders)
  - Addiction/Integrated Treatment Items in the IDDT Model (substance abuse counseling, group dual diagnosis treatment, family psychoeducation on dual diagnosis, participation in alcohol & self-help groups, pharmacological treatment, and interventions to promote health)



# IDDT Fidelity Scale Items

## 1a) Multidisciplinary Teams

- Principle: Integration of Services
- Domain: Structure
- Data Sources: Administrative Leaders, Clinicians and Case Managers, Prescribers, Consumers, Charts, Team Meetings

## 1b) Integrated Substance Abuse Specialist

- Principle: Integration of Services
- Domain: Structure
- Data Sources: Leadership, Clinicians, Substance Abuse Specialists, Chart Review

# IDDT Fidelity Scale Items

## 2) Stage-wise treatment

- Principle: Motivation Based Interventions
- Domain: Counseling Approach
- Data Sources: Leadership, Clinician, Team Meeting, Observation of Group, Chart Review

## 3) Comprehensive Services

- Principle: Integration, Comprehensive Services
- Domain: Structure
- Data Sources: Leadership, Clinician, Ancillary Service Providers (SE, Housing), Chart Review

## 4) Time-Unlimited Services

- Principle: Time Unlimited Services (Long View of Recovery)
- Domain: Structure
- Data Sources: Leadership, Clinician, Ancillary Service Providers Chart Review

# IDDT Fidelity Scale Items

## 5) Outreach

- Principle: Assertive Outreach
- Domain: Counseling Approach
- Data Sources: Leadership, Clinician, Consumer, Chart Review

## 6) Motivational Interventions:

- Principle: Motivational Based interventions
- Domain: Counseling Approach
- Data Sources: Leadership, Clinician, Team Meeting, Observation of Group, Consumer, Chart Review

## 7) Substance Abuse Counseling

- Principle: Motivational Based interventions/stage-wise treatment/integration
- Domain: Addiction/Integrated Treatment
- Data Sources: Leadership, Clinician, Group Observation, Chart Review

# IDDT Fidelity Scale Items

## 8) Group Dual Disorders Treatment

- Principle: Multiple Modalities/Motivational Based Interventions/Integration
- Domain: Addiction/Integrated Treatment
- Data Sources: Leadership, Clinician, Consumer, Group Observation, Chart Review

## 9) Family Psycho-education on Dual Diagnosis

- Principle: Multiple modalities
- Domain: Addiction/Integrated Treatment
- Data Sources: Leadership, Clinician, Consumer, Chart Review

## 10) Participation in AA/NA Self-Help Groups

- Principle: Multiple Modalities; stage-wise interventions
- Domain: Addiction/Integrated Treatment
- Date Sources: Leadership, Clinician, Chart Review

# IDDT Fidelity Scale Items

## 11) Pharmacological Treatment

- Principle: Integration; Motivation Based Interventions; Reduction in Negative Consequences
- Domain: Addiction/Integrated Treatment -Data Sources: Clinician, Medication Prescriber, Chart Review

## 12) Interventions to Promote Health

- Principle: Reduction in Negative Consequences
- Domain: Addiction/Integrated Treatment -Data Sources: Leadership, Clinician, Consumer, Chart Review

## 13) Secondary Interventions for Non-Responders

- Principle: Multiple Modalities, Comprehensive Services
- Domain: Counseling Approach
- Data Sources: Leadership, Clinician, Chart Review

# Item Response Coding

- Try to resolve any discrepancies between data sources
- For many items coding requires both evidence of understanding and application
- Each item includes decision rules and cut off scores that help determine rating
- The standards used for establishing the anchors for fully implemented ratings determined through expert sources and empirical research

# Example of Fidelity Scale Scoring

## Stage-Wise Interventions (IDDT):

- A. Treatment consistent with each client's stage of recovery (engagement, motivation, action, relapse prevention)
  - 1) 20% of interventions are consistent with client's stage of recovery
  - 2) 21% - 40% of interventions are consistent
  - 3) 41% - 60% of interventions are consistent
  - 4) 61% - 79% of interventions are consistent
  - 5)  $\geq 80\%$  of interventions are consistent with client's stage of recovery

# The General Organizational Index

- The 12-item General Organizational Index (GOI) measures a set of general operating characteristics of an organization hypothesized to be related to its overall capacity to implement and sustain any evidence-based practice.
- Agencies that generally do an excellent job in implementing a practice have the GOI elements in place within the organization.
- GOI added to site Fidelity Scale surveys



# The General Organizational Index

- The index contains 10 broad principles regarding elements such as program philosophy, training, supervision, and program monitoring.
- The rationale for the use of the GOI is similar to the one given for fidelity scales.
- Clinical experience suggests that agencies that generally do an excellent job in implementing a practice have the GOI elements in place within the organization.
- Programs scoring high on the GOI are expected to be more effective in implementing an EBP and in achieving desired outcomes.

# The General Organizational Index

- The assessment philosophy for the GOI mirrors that for fidelity scales.
- The GOI contains simple-to-understand face-valid items that are rated on a 5-point response format, ranging from 1 equals no implementation to 5 equals full implementation.
- The response alternatives are behaviorally anchored, they identify concrete measurable elements of the practice.
- Using multiple sources of information make the most valid ratings. Typical sources of information include interviews with staff, observation of team meetings, review of charts, and observation of interventions.

# The General Organizational Index

G1 Program Philosophy

G2 Eligibility/Client Identification

G3 Penetration

G4 Assessment

G5 Individualized Treatment Plan

G6 Individualized Treatment

G7 Training

G8 Supervision

G9 Process Monitoring

G10 Outcome Monitoring

G11 Quality Assurance (QA)

G12 Client Choice Regarding Service Provision

# The Fidelity Scale Report

- Writing the Report
  - Overview of Agency
  - Overview of IDDT FS
  - Summary of Visit (who was interviewed, groups attended, etc.)
  - Rating by Item
    - Definition and Rationale
    - Rating
    - Decision rule for that rating
    - Narrative supporting rating
  - Summary and Recommendations
    - Highlight strengths and areas for improvement

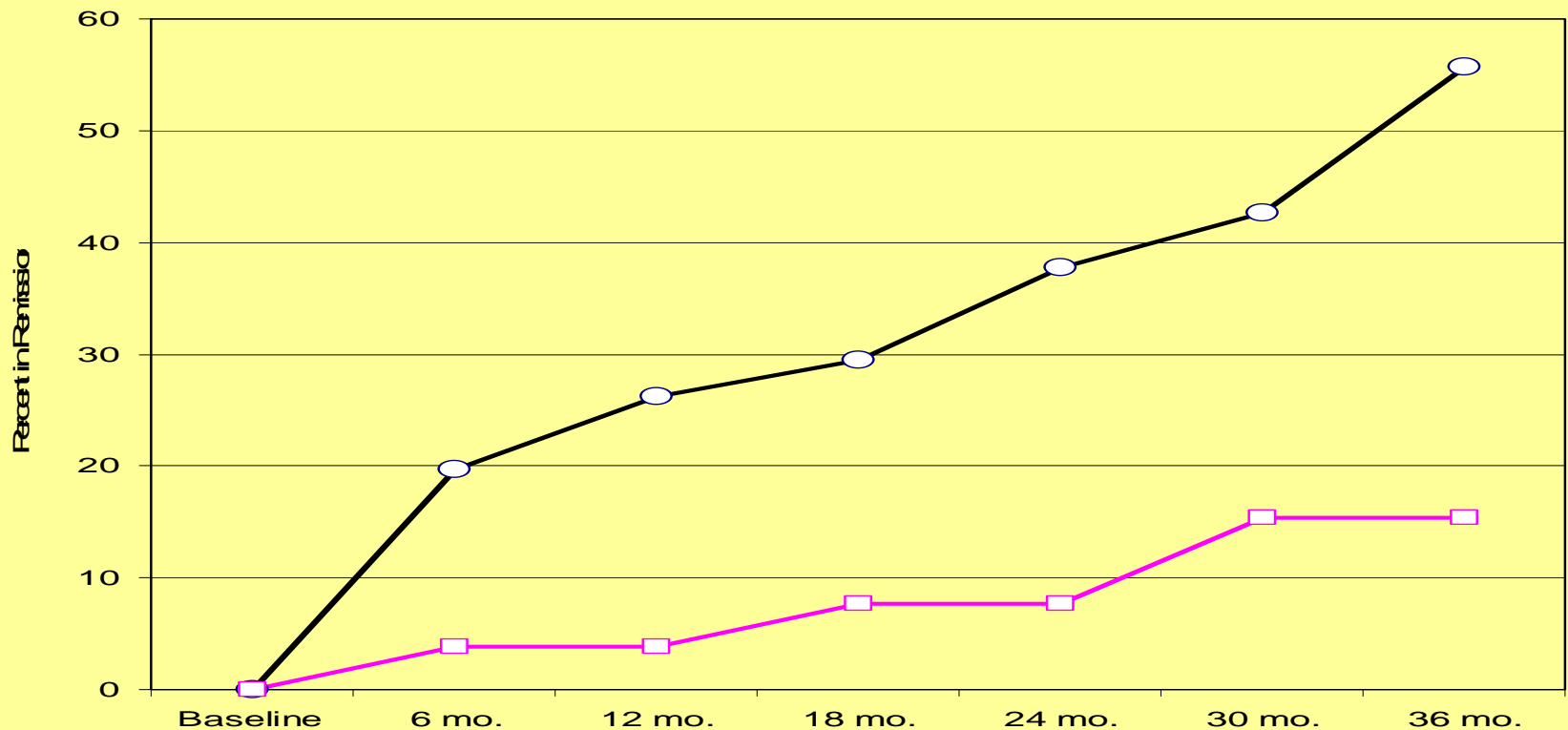
# The Fidelity Scale Report

- Who should receive the Report?
  - CEO/Executive Director
  - Steering Committee
  - Staff & Consumers
- How Should You Use The Report?
  - Implementation Process Assessment
  - Develop/Update the IDDT Implementation Plan
  - Include in Agency Quality Assurance plan
  - Target Focused Staff Training

# Fidelity to IDDT principles improves outcomes

McHugo et al, 1999

Figure 1. Percent of Participants in Stable Remission for High-Fidelity ACT Programs (E; n=61) vs. Low-Fidelity ACT Programs (G; n=26).



To Download the IDDT Fidelity Scale  
and GOI from the SAMHSA  
Implementation Toolkit Go To:

<http://store.samhsa.gov/product/SMA08-4367>