

CONFERENCE ABSTRACT

Getting Started - Getting Better

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Conor Owens¹, Mary Hegarty², Karen Heavey³, Phil Jennings²

1: Midland Area Parenting Partnership, Ireland;

2: Public Health, Health Service executive, Ireland;

3: Health and Wellbeing Health Service Executive, Ireland

An introduction: (comprising context and problem statement) Midland Area Parenting Partnership (MAPP) Triple P initiative is the first population-based intervention in Ireland to demonstrate that a parenting programme significantly impacted on prevalence of children's socio-emotional and behavioural problems.

Short description of practice change implemented: Effectiveness relates to integration of Triple P Positive Parenting Programme evidence, local implementation plan and the enabling environment. These 3 elements benefited from planned and systematic practice change.

Aim and theory of change: The aims of this initiative were to determine whether a reduction could be achieved in the prevalence rate of children showing socio-emotional and behavioural problems and to develop an implementation guide.

The theory of change, hypothesised that the combination of inputs (access to communication approaches, evidence based programme, high quality training accreditation and mentoring for practitioners, internal and external partnerships and resources) and effective implementation would achieve wide ranging gains for children and parents within the population.

Targeted population and stakeholders: The target population was parents of children aged 3-7.

The MAPP partnership comprised statutory, voluntary and community sector organisations

Timeline: The evaluation was completed over a 2.5 year. The Implementation Guide was developed upon this experience and the expansion into 2 new counties.

Highlights: (innovation, Impact and outcomes) Innovation in the present study included the use of a locally developed implementation framework and a core team consisting of multidisciplinary staff from partner organisations who reoriented their work. The evaluation showed a significant reduction in the prevalence rates of socio-emotional and behavioural problems over time. A guide was developed to facilitate the intentional, explicit and systematic implementation of the MAPP approach in other areas.

Comments on sustainability: The elements of this model which promote sustainability are:

The use of a core delivery team.

Routine focus on the enabling environment &

Routine gathering and use of implementation and outcome data.

Comments on transferability: The local evidence of effectiveness combined with the implementation guide support transferability, in addition the outcomes need to be sufficiently valued by local parents and partner organisations. MAPP has expanded into 4 counties and delivers to parents with children 15 years of age and younger.

Conclusions: (comprising key findings) This work demonstrated that a partnership approach to universal parenting when implemented well can result in significant reduction in prevalence rates for socio-emotional and behavioural problems.

Discussions: The relationship between the evidence-based programme, implementation plan and enabling environment are the active ingredients needed to achieve better outcomes. The implementation structure was a key determinant in achieving the positive results for partners, practitioners and families, and the partnership was key to establishing and maintaining the enabling environment

Lessons learned: The partnership fostered the enabling environment and the core team becomes the key driver for the implementation. A key element for the successful integrated planning was the devolving of authority to the core team for developing and progressing the implementation. A strong focus on implementation contributed to the population effect.

Keywords: implementation; partnership; enabling environment; core team
