PRIME

Planning Realistic Implementation and Maintenance by Educators

Quick Guide

A Brief Introduction to PRIME

See the PRIME Manual for Additional
Information, Guides, and Materials
www.PRIMEimplementation.com

What is PRIME?

- PRIME (Planning Realistic Implementation and Maintenance by Educators) is a multi-tiered system of implementation supports developed to promote educators' implementation of evidence-based interventions.
- Research findings indicate that PRIME Implementation Supports can increase educator's delivery of evidence-based interventions, result in subsequent improvement in student outcomes, are feasible within an indirect service delivery model and were described as valuable and helpful by educators.

What is Treatment Integrity?

- Treatment integrity is the extent to which an intervention is implemented as planned.
- Researchers describe treatment integrity as a multi-dimensional construct including:
    - o *Adherence* (what intervention components were delivered),
    - o *Quality* (how well intervention components were delivered), and
    - o *Exposure* (for how long the student received the intervention).

Why is it Important to Evaluate and Support Educators' Treatment Integrity?

- *To maximize student outcomes.* Interventions implemented with a high level of treatment integrity are most likely to produce efficient and effective changes in student outcomes. However, studies show that most implementers struggle to consistently deliver interventions as planned without additional support.

- *To evaluate if an intervention has been effective.* Evaluating treatment integrity is necessary to determine whether the intervention is responsible for changes in student outcomes. Collecting treatment integrity data is particularly important within multi-tiered frameworks as it helps to ensure interventions are provided as designed across the tiers and decisions to increase or decrease supports are appropriate.

- *To document your work.* Documenting treatment integrity data provides a record of any adaptions to an intervention or any problems with implementation. Increasingly educators are expected to

document treatment integrity data to demonstrate that students received interventions to which they were entitled.

How was PRIME developed?

- PRIME was developed based on the HAPA (Health Action Process Approach), a theory of adult behavior change from the health psychology literature.
- HAPA describes a two-phase process of how adults engage in behavior change.
    - o First, adults must intend to change their behavior (Motivational Phase). This involves perception of a problem that needs to be addressed; outcome expectancies, beliefs about the positive and negative outcomes of alternative behaviors; and action self-efficacy, one's confidence in being capable of performing a difficult or novel behavior.
    - o Then, adults must initiate and maintain the new behavior (Volitional Phase). New behaviors are promoted by planning, as completed through Action and Coping Planning, as well as adequate maintenance and recovery self-efficacy, one's confidence in being capable to implement over time and after disruption, respectively.
- Research in health psychology has demonstrated that Action and Coping Planning can facilitate initiation of a new behavior, and that individuals with higher levels of self-efficacy are more likely to sustain the behavior.

How does PRIME use the HAPA model?

- Implementation of the majority of school-based interventions requires adults to commit to behavior change, so promoting high levels of treatment integrity can be thought of as an adult behavior change process.
- PRIME addresses treatment integrity from the development of an intention to implement to maintenance of the implementation behaviors.
- The PRIME Implementation Supports use Implementation Planning, which combines Action and Coping Planning from the HAPA model.
- The Implementation Beliefs Assessment includes items that address the variables described in the HAPA model. Based on this assessment and other PRIME data sources, consultants can pro-

vide targeted implementation support to address specific areas of difficulty per the HAPA model.

Who Can Implement PRIME?

- School-based or outside consultants (e.g., school psychologists, social workers) who support implementers to provide evidence-based interventions to students within an indirect problem-solving approach can use PRIME.
- Consultants using PRIME should also have expertise in:
    o Using an indirect service delivery approach,
    o Selecting appropriate evidence-based interventions,
    o Implementing evidence-based interventions, and
    o Conducting intervention evaluation.

What are the PRIME Implementation Supports?

Tier 1 Implementation Supports
Proactive and feasible strategies to be used with all implementers. They can be delivered before implementation begins to promote high levels of intervention implementation or during ongoing implementation.

- *Direct Training* (Chapter 3)
    o Aims to increase the implementer's preparation for and confidence regarding implementation by teaching him or her how to deliver the intervention with high levels of treatment integrity.
    o A Direct Training session consists of didactic training on intervention steps, followed by modeling, practice, and feedback with the implementer.
- *Implementation Planning* (Chapter 4)
    o Aims to increase preparation for implementation.
    o Implementation Planning involves logistical planning for each intervention step as well as identifying and problem-solving potential barriers to implementation.

Tier 2 Implementation Supports
Strategies designed to increase intervention implementation knowledge, fluency, and/or motivation for select implementers who struggle to implement adequately after Tier 1 supports.

- *Role Play* (Chapter 10)
    - o Incorporates modeling and practice of several intervention implementation scenarios outside of the implementation context.
- *Participant Modeling* (Chapter 11)
    - o Involves reviewing intervention steps and then modeling, guided practice, and independent practice within the implementation context.
- *Raising Awareness* (Chapter 12)
    - o A talking strategy that focuses on the implementer's perception of the intervention, its effectiveness, and implementation.
- *Motivational Consulting* (Chapter 13)
    - o Involves reviewing the student intervention goals and using Motivational Interviewing techniques such as change talk and positive regard to increase the implementer's motivation to increase their implementation across time.

Tier 3 Implementation Support
A strategy designed for implementers who struggle to deliver an intervention and whose treatment integrity does not improve following less intensive implementation supports.
- *Performance Feedback* (Chapter 14)
    - o Involves a meeting between the consultant and implementer to discuss treatment integrity and progress monitoring. In addition, the consultant reviews difficult implementation steps and collaboratively problem solves to address challenges to implementation.
    - o Performance Feedback can be delivered only once, but more than likely it may be deemed necessary on an ongoing basis.

What Data Sources Inform PRIME Implementation Support Selection?
Treatment Integrity (Chapter 5)
- Treatment integrity data indicate the extent to which an intervention is implemented as planned.
- Treatment integrity data can be used alongside progress-monitoring data to ensure the intervention is implemented as designed and, as such, it is appropriate to make decisions about the intervention.

- Treatment integrity data can be used to evaluate the effectiveness of PRIME Implementation Supports.

Progress Monitoring (Chapter 6)

- Progress-monitoring data indicate how the student is progressing toward the goals of the intervention.
- Progress-monitoring data should be collected prior to the intervention to establish a baseline as well as regularly collected during intervention implementation.
- Progress-monitoring data, alongside treatment integrity data, are critical to evaluate the intervention.

Implementation Beliefs Assessment (Chapter 7)

- The Implementation Beliefs Assessment (IBA) is a self-report measure to indicate an implementer's perceptions of the intervention and his or her ability to implement the intervention.
- Research results suggest that implementers who have low outcome expectations and/or self-efficacy have difficulty starting to implement and maintaining implementation over time.
- Within the PRIME model, IBA data are used, alongside treatment integrity data, to target appropriate PRIME Implementation Supports.

How do I use PRIME within Indirect Service Delivery?

Problem Identification

- The consultant and implementer define the specific problem to be addressed, collect initial baseline progress monitoring data and develop an intervention goal.

Problem Analysis

- The consultant will identify an intervention for the implementer to use to address the problem and reach the intervention goal.
- PRIME activities involved during this phase:
  - o The consultant will need to identify or develop a treatment integrity measure and create a data collection and review plan. A plan to continue to deliver the progress-monitoring measure and regularly provide the IBA will also need to be established.
  - o The consultant can provide Tier 1 Implementation Support(s) to facilitate high initial levels of treatment integrity. To appropriately provide an Implementation Support, the consultant can review the General Strategy Guide that includes

suggestions for preparation, delivery, and follow up (see Appendix E). The consultant should also review the appropriate PRIME Manual chapter, use the PRIME Implementation Support protocol to guide the meeting, and complete the Implementation Support treatment integrity measure after the meeting. The protocols and treatment integrity measures are included in the appendices.

Intervention Implementation
- The implementer delivers the intervention to support the student.
- PRIME activities involved during this phase:
    - o Treatment integrity, progress monitoring, and IBA data collection will occur per the identified data collection plan.
    - o These data can then be graphed, interpreted, and used to make decisions (see Chapters 8 and 9).
    - o Document these data on the PRIME Intervention Implementation Tracking Form (Appendix D) and the Data-Based Decision Worksheet (Appendix I).
    - o During this phase, data may indicate that additional PRIME Implementation Supports are needed to help the implementer deliver the intervention with adequate treatment integrity (See Chapter 9 to learn more about data-based decision making and identifying an appropriate implementation support).

Intervention Evaluation
- The consultant and implementer review goal attainment, treatment integrity data, and plan effectiveness. At this time, it may be appropriate to change, modify, or fade the intervention depending on the student's progress and intervention process.