Change and Implementation in Practice



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Working With a Team to Select an Intervention That Meets Your Needs

To improve outcomes for children, families, and communities, it is important to think critically about the fit between a problem, intervention, and the intended outcome. This resource provides team-based activities, discussions, and prompts to identify and research existing programs, practices, and interventions and analyze options to find the best fit for the identified theory of change, outcomes, and populations. After completing these activities, your team will be ready to replicate, adapt, or design their own intervention.

This resource serves as a guide for completing the following three key steps to selecting an intervention (figure 1):

- Research possible interventions
- Assess fit and feasibility
- Make a decision

Figure 1: Intervention Selection Process



This resource presents each step sequentially; however, you may find that after you assess fit and feasibility your team must go back and conduct further research (figure 1). Likewise, you may find that the team is assessing fit and feasibility as you conduct research. No matter the order you take, make sure every step of the process is research informed. If your team feels like they're going in circles, take a pause to refine your questions and return to analyzing your data. Revisiting steps does not mean you have lost or wasted time—it simply means the team is doing its due diligence to select an appropriate, feasible, and community-informed intervention. Remember, it takes many resources to successfully implement an intervention. While slowing down can be frustrating and challenging for motivation, consider the time your team spends now as an investment in the future success of the intervention.

Before You Start

Increase your chances of success in intervention selection by assembling a team that represents a variety of roles and perspectives.

Before you start using this tool, ensure your team includes people who have the following experience:

- ✔ Have lived experience with the identified challenge or issue in child welfare
- ✓ Are demographically similar to the identified population
- ✓ Work directly with the identified population
- Live in the same geographic location as the identified population
 In addition to including people with lived experience, consider representation by role, perspective, and skills. As appropriate, invite individuals from the following areas to join the team:
 - ✓ Tribal representatives
 - ✓ Legal staff
 - ✓ IT/systems staff
 - ✓ Continuous quality improvement (CQI) and data staff
 - ✔ Agency leadership
 - ✓ Service providers (especially those who will implement the intervention)

When assembling your team, consider the specific needs of individuals with lived experience. People with lived experience in child welfare and community members can fulfill the same roles and decision-making responsibilities as staff members. Provide resources such as a glossary of commonly used terms and explanations of acronyms or jargon and offer transportation to meetings and access to translation services, as needed. Collaborate to ensure comprehensive support for all team members ahead of your work together.

Before you start researching interventions, make sure you have already assessed for readiness, explored the problem, and identified a theory of change.

To successfully select an intervention, the entire team needs to be able to clearly explain the following:

- The identified problem and its root cause(s)
- Populations impacted that will be served through the intervention
- Desired outcomes
- A theory of change with a clear pathway from the problem to the desired outcomes

If you have not yet completed the above activities, contact your <u>National Child Welfare Center for Innovation</u> and <u>Advancement (NCWCIA) navigator</u> for tailored support.

1: Research Possible Interventions

Before you consider implementing a new program, practice, or other intervention, review interventions currently being implemented in your jurisdiction. Adapting a program, practice, policy, or other intervention that already exists in your jurisdiction is typically more feasible than implementing a new intervention.

Activity: List Agency Interventions

Invite individuals involved in your State's Family First Prevention Services Act, Child and Family Services Review, Program Improvement Plan, and CQI work to this discussion, as they may have unique insights on ongoing programs, practices, policies, and interventions.

As a group, discuss the following questions:

- What programs, practices, policies, or interventions in our agency or community have been especially effective?
- What programs, practices, policies, or interventions in our agency or community center people with lived experience?
- What programs, practices, policies, or intervention in our agency or community align with our **theory of** change?
- What programs, practices, policies, or intervention in our agency or community already serve the identified population?
- Are there programs, practices, policies, or interventions in our agency or community that are not yet well defined or well supported but have potential to be adapted or strengthened?

As the group discusses existing interventions, list them in table 1 with any relevant notes or information, such as how the intervention has been received by the community, ongoing challenges and successes, and the role of people with lived experience in implementation and design. Even if the group does not think the program can be adapted, list it anyway. You will have an opportunity to assess fit and feasibility later.

Table 1: Ongoing Agency or Community Programs, Practices, Policies, or Interventions

Agency or Community Program, Practice, Policy, or Intervention	Notes

Activity: Research Additional Interventions

Now that the group has listed ongoing programs, practices, policies, and interventions, it is time to conduct independent research. Assign individuals or small teams the task of researching additional interventions that are not currently being implemented by your agency but that could address your identified problem.

To create this list of programs, practices, policies, and interventions, consult with community networks, peers, other jurisdictions, program developers, <u>Child Welfare Information Gateway</u>, or your NCWCIA navigator. The <u>Title IV-E Prevention Services Clearinghouse</u> has a wealth of information on researched programs and services. For additional research resources, visit pages 7 through 9.

Invite at least one CQI/data team member to support each small team, if possible. Each individual or small team should consider the following questions when conducting research:

- ◆ What programs are jurisdictions with **similar problems** implementing?
- ◆ What has shown to be **successful for this identified population**?
- ◆ What programs are communities with **similar demographics** implementing?
- ◆ What has shown to be **successful in similar jurisdictions**?
- ◆ What existing interventions align with our **theory of change**?Compile the list of interventions in table 2.

Table 2: Additional Programs, Practices, Policies, or Interventions

Program, Practice, Policy, or Intervention	Notes



Research Tip

Try using generative artificial intelligence (AI) to find interventions. The use of generative AI can provide more time to collaborate with your team. Customize the sample prompts below and paste them into a generative AI model approved by your agency (e.g., ChatGPT, Microsoft Copilot, Google Gemini). Generative AI should **not** replace human research or thought. Everything produced by generative AI needs to be fact checked and reviewed by a human. The output is a great starting point for team input. Collaborate with your IT department for support.

Sample Al Prompts

Copy, paste, and customize the prompts below to expand your research.

Act as a continuous quality improvement leader in child welfare. Create a list of interventions that align with [insert theory of change, population strengths and needs, goals, and values]. Prioritize highly ranked evidence-supported interventions. Create a table listing the pros and cons of each intervention.

Act as a child welfare policy and change management subject matter expert. You are selecting an intervention for a jurisdiction with [insert your identified population] to [inset your identified outcomes]. Find 3 to 10 evidence-supported, promising, or best practice interventions. Create a table listing the pros and cons of each intervention.

Act as a child welfare leader. You are selecting an intervention to [insert your identified outcome]. The jurisdiction is [insert key features of jurisdiction: e.g., rural, urban, demographics, community involvement]. Find 2 to 10 interventions implemented by similar jurisdictions. Create a table listing the pros and cons of each intervention.

When the individuals or small teams have completed research, come back together to share the findings with the team. Now that you have a robust list of interventions you can move on to assessing fit and feasibility.

2. Assess Fit and Feasibility

Now that you've compiled a list of interventions (in tables 1 and 2), it is time to assess which, if any, are a good fit for your identified problem, root cause, population, and theory of change to get to the desired outcome.

Figure 2: Replicate, Adapt, or Discard



Activity: Replicate, Adapt, or Discard

In small groups you will work together to answer the following questions for each intervention you've listed:

- ◆ Can this intervention be **replicated**?
- Can this intervention be adapted?
- ◆ Should this intervention be **discarded**?

Figure 2 describes the criteria that groups should use when discussing these categories.









At the end of this step, the team will have narrowed down the list and will be able to continue to assess fit for a smaller number of interventions. If you've discarded all the interventions from your list, return to the research phase to gather more interventions or consider designing a new intervention.

Agencies are typically most successful when they replicate or adapt an existing intervention. However, there are some cases where no existing intervention even comes close to meeting your needs, and you will need to design a new intervention from scratch. In these cases, it is necessary to design a new intervention. Designing an intervention from scratch takes significantly more resources than replicating or adapting an existing intervention.

Activity: Assess the Interventions

Split up into small groups and assign each group a subset of remaining interventions on the list. For each intervention, the small group will decide if it is feasible to replicate or adapt or if it should be discarded based on evidence, usability, supports, need, fit, and capacity (Metz & Louison, 2018). Each group will need to complete additional research to assess and recommend a course of action for each intervention. Refer to figure 3 to assess an intervention holistically and table 3 to focus on the specifics of each intervention.

EVIDENCE

CAPACITY

USABILITY

SUPPORTS

NEED

Figure 3: Intervention Assessment Tool

As you assess each intervention listed, ask the questions listed in table 3 (adapted from the National Implementation Research Network Hexagon Exploration Tool). Complete table 3 for each intervention your team is assessing.

Table 3: Intervention Assessment

Intervention:			
Research Questions	Notes		
Evidence			
 How <i>effective</i> is the intervention? Is there evidence that shows the intervention leads to the intended outcome? How often and for which populations? How many studies have evaluated the intervention? Does the <i>population</i> studied in the evaluations represent the intended population in your jurisdiction? Is the intervention effective even when not implemented with high <i>fidelity</i>? How closely have others been able to follow the intervention? How much does the intervention cost? Are the outcomes <i>cost effective</i>? 			
Usability			
 Is the intervention well defined? Can you observe the intervention in another jurisdiction? Can the intervention be adapted? 			
Supports			
Does the agency have the capacity to provide training, staffing, administrative support, expert assistance, coaching, and supervision?			
Need			
◆ Does the intervention address service or system gaps ?			
Are there overlaps between the intervention's population and the identified <i>population</i> ? If not, are there adaptations that could align the intervention to the identified population?			
Does the intervention support the population's needs and strengths?			
Were people with lived experience included in assessing needs? Does the intervention align with their perception of needs?			

Intervention:	
Research Questions	Notes
Fit	
Does the intervention align with community, regional, and State values, priorities, norms, and histories?	
• Were people with lived experience and members of the identified population included in determining the intervention's appropriateness and relevance?	
Does the intervention align with the agency's organizational structure?	
Will there be any negative impacts on other ongoing interventions and initiatives if implemented?	
Capacity	
Are there systems to ensure buy-in from practitioners, families, people with lived experience, and the community?	
♦ Is the agency able to sustain staffing, coaching, training, data analysis, performance assessment, and administration financially, structurally, and in a community-informed capacity?	
community-injurned capacity:	



After each individual or small team has assessed their interventions, it is time to analyze the findings using the following steps.

- Decide, as best you can with the information you have, if the intervention centers on people with lived experience. If the intervention will not center on people with lived experience, even with adaptations, discard the intervention.
- ◆ If the intervention will center on people with lived experience, start thinking through the upsides, downsides, and feasibility of replication or adaptation. If replication or adaptation is not possible or there are too many downsides, discard the intervention.
- If there is a possibility of replication or adaptation, bring the intervention back to share with the larger team.

 Record findings in table 4 and share with the larger team.

Table 4: Intervention Analysis

Does this intervention have the potential to be replicated? What are the upsides and downsides of replication? Is it feasible to replicate this intervention?

Does this intervention have the potential to be adapted? What are the upsides and downsides of adaptation? Is it feasible to adapt this intervention?

Should this intervention be considered or discarded by the team?



Research Tip

Try using generative AI to support your intervention analysis. The use of generative AI can provide more time to collaborate with your team. Customize the sample prompts below and paste them into a generative AI model approved by your agency (e.g., Chat GPT, Microsoft Co-Pilot, Google Gemini). Generative AI should **not** replace human research or thought. Everything produced by generative AI needs to be fact checked and reviewed by a human. The output is a great starting point for team input. Collaborate with your IT department for support.

Sample Al Prompts

Act as an expert in advancing community-informed practices in the field of child welfare. Analyze [name of intervention] and create a bulleted list of the ways in which the intervention will advance community-informed practices. Use language that non-experts in these fields will understand.

You are a child welfare professional who also has lived experience in child welfare. Analyze [name of intervention] and create a bulleted list of the ways in which the intervention centers people with lived experience. Use language that nonexperts in these fields will understand.

You are an expert in child welfare, change management, and intervention design. Analyze [name of intervention] and create a list of pros and cons for replicating or adapting the intervention for a jurisdiction with [insert jurisdictional demographics] aiming to [insert outcome] for [insert population] by [insert theory of change.] Use language that non-experts in these fields will understand.

There are many questions to consider for each intervention, so provide a suitable amount of time for each small group to conduct this research. It is unlikely that any one intervention will fully meet every criterion. It is up to each small group to decide if an intervention meets enough of the criteria to be considered for replication or adaptation.

Come together to present and discuss your findings from tables 3 and 4. Discuss each intervention and make a decision to potentially replicate, adapt, or discard. Record your decisions in table 5.

Consider the following questions to support your discussion:

- ◆ Which interventions are **most aligned to our identified root cause, outcomes, and theory of change**?
- ◆ Which interventions best **align with our values and guiding principles**?
- ◆ Are there any interventions that **DO NOT center people with lived experience**? Do they have potential to be adapted to center people with lived experience? If not, discard these interventions.
- ◆ Which interventions do we have **resources** (funding, staff, training, community partners) and **infrastructure** to implement?
- ◆ Which interventions do we have **capacity to evaluate**? If we don't have capacity to evaluate, do we have partners (such as universities) that can support evaluation efforts?
- ◆ What else do we need to know to decide?

Table 5: Assessing Fit and Feasibility

Intervention	Notes	Replicate? Adapt? Discard?

3. Consider Unintended Consequences

If you have a list of multiple interventions you are considering replicating or adapting, you need to consider unintended consequences in addition to the intended outcomes. Thinking through the effects of an intervention will help you predict potential unintended harm and identify additional positive outcomes for children, young people, families, and communities.



Activity: Ripple Effects Mapping

Ripple effects mapping (Chazdon et al. 2017; Nobels et al. 2022) is an activity that can be used to identify intended and unintended outcomes of an intervention. This activity will help your team find short-term and long-term effects of an intervention that may have not yet been studied or documented.

For each potential intervention: In groups of three to five people, start with one core component of the intervention in the far-left corner of a page and a timeline spanning 1 year beyond the end of the evaluation period. As a group, map potential impacts of the intervention, both good and bad. For each impact, consider the "ripple effects," or consequences. Keep people with lived experience front and center in your considerations. Repeat with at least three key components of the intervention. Review the example in figure 4 to see what this activity could look like in practice.

Once you have completed the ripple effects mapping, list all systems that are related to the ripple effects. Examples could include neighborhood safety, mental health system, legal professionals, extended families, and more. If you are considering adapting an intervention and want to mitigate unintended harms, you will need buy-in from partners in these sectors.

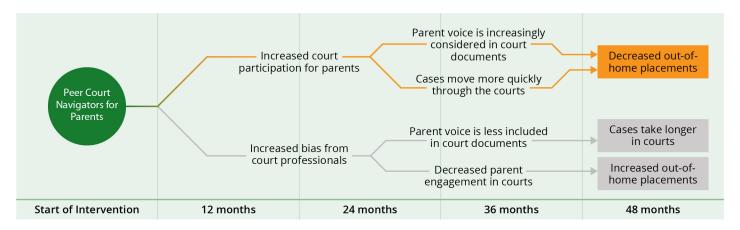


Figure 4: Intended and Unintended Outcomes Example

Come back together as a large group and present your findings. As a team, discuss the following questions about each of the interventions that are still on your list:

- ◆ What **surprised** you?
- What themes or patterns did you notice?
- What feels worrying?
- ◆ What feels **exciting**?

After reflecting on this activity, revisit table 5. Based on ripple mapping, are there any interventions you would now like to adapt or replicate or any interventions to discard from the list?

4. Decide on an Intervention to Try

Your team has worked hard and has done due diligence to research and compile a list of possible interventions. You then assessed fit and feasibility while centering people with lived experience. Now, it's time to decide on an intervention. While this is a big decision, you are not yet committed to any one intervention. Simply make the best decision with all the information your team has gathered.

Replicate

Your team should move forward by **replicating** an existing intervention as written if:

- ✓ The intervention centers people with lived experience.
- There is strong evidence that the intervention addresses your identified problem and leads to your identified outcome with the identified populations through your theory of change.
- ✓ Your agency has the supports and capacity necessary to implement and evaluate the intervention.

You are now ready to move forward to implementation and capacity building.

Adapt

Your team should move forward by **adapting** an existing intervention if:

- ✓ The intervention could be adapted to center people with lived experience.
- There is evidence that the intervention could be adapted to address your identified problem and lead to your identified outcome with the identified populations through your theory of change.
- ✓ Your agency has the supports and capacity necessary to implement and evaluate the adapted intervention

You are ready to begin the adaptation process.

Discard

Your team should return to conducting further research if you do not have any interventions that are suitable for replication or adaptation. If you are not confident that there will be any interventions appropriate for adaptation, explore the feasibility of designing your own intervention.

Conclusion

Congratulations! You have worked diligently to research interventions, assess fit and feasibility, and make an informed decision—all while centering people with lived experience. Remember that the work does not stop here. You can continue to assess best fit with your identified problem, outcome, populations, and theory of change as you move into implementation planning and capacity building. Remember, this is not always a linear process. Your team may have to go back and conduct more research or pivot based on unintended consequences, harms, or community feedback. Remember to stay aligned to your stated goals while centering people with lived experience to implement a successful intervention. At the end of this process, make sure to celebrate your progress with the team, agency, and community!

References

- Chazdon, S., Emery, M., Hansen, D., Higgins, L., & Sero, R. (2017). *A field guide to ripple effects mapping*. University of Minnesota Libraries Publishing.
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- Nobles, J., Wheeler, J., Dunleavy-Harris, K., Holmes, R., Inman-Ward, A., Potts, A., Hall, J., Redwood, S., Jago, R., & Foster, C. (2022). Ripple effects mapping: Capturing the wider impacts of systems change efforts in public health. *BMC Medical Research Methodology*, 22(1), 1–14.

Glossary

Adapt – Update an intervention from its original form to respond to the needs of the population being served or to the agency's context.

Alignment – When an intervention directly supports the theory of change, is appropriate to address specific challenges and leverage strengths of the identified population, and fits with the child welfare system and community context.

Fidelity – The degree to which interventions are implemented as intended by program developers.

Implementation – A specified set of activities designed to put into practice an activity, program, or intervention.

Intervention – Any specific practice, service, policy, strategy, program, practice model, or combination that is clearly defined, operationalized, and distinguishable.

Operationalize – Define an intervention or component so that it can be observed, measured, or assessed.

Outcomes – Desired change in conditions among people, organizations, or systems.

People with lived experience – Individuals with firsthand experience of the child welfare system as either a child or caregiver.

Population – The specific group of people affected by the problem and who would be helped by implementing an intervention and achieving the outcome.

Problem – What needs to change to meet agency priorities. Problems may reflect identified needs or opportunities for building on successes to improve agency of system functioning and outcomes.

Replicate – To copy or reproduce an intervention in the same way as it was developed.

Theory of change – Roadmap of the path from an identified problem, need, or opportunity to the desired outcomes.

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