Implementation Planning Guide

For Organizations Integrating NTI Training

National Adoption Competency Mental Health Training Initiative
Advancing Practice for Permanency & Well-Being
# Table of Contents

**Implementation Planning Steps for Targeted Outcomes**

1. Assess the need for NTI in your organization .......................................................... 4
2. Invite leadership involvement & establish your planning team .............................. 5
3. Develop a customized “Implementation Plan” ..................................................... 6
4. Educate key stakeholders ..................................................................................... 7
5. Create a plan for participant expectations and engagement ................................. 9
6. Evaluate access options and technical integration .............................................. 10
7. Establish an effective “Transfer of Learning (TOL) Plan” .................................. 11
8. Identify agency aids to support training participants ......................................... 13
9. Develop a communication strategy to promote NTI ........................................ 14
10. Determine data needs for assessing NTI success ............................................ 15
11. Plan for sustainability and accountability ......................................................... 17

**Appendices**

- **Appendix A**: Implementation Guide Checklist .................................................. 20
- **Appendix B**: Helpful Resources and Tools ......................................................... 24
- **Appendix C**: Example Implementation Plans .................................................... 28
Acknowledgements

Thank you to the National Adoption Competency Mental Health Training Initiative (NTI) pilot sites, whose tireless efforts and experiences laid the foundation for the development of this Implementation Guide.

These include:

- **California**
- **Illinois**
- **Maine**
- **Minnesota**
- **Oklahoma**
- **South Carolina**
- **Tennessee**
- **Washington**
- **The Cherokee Nation**
- **National Indian Child Welfare (NICWA) Members**

*Special thanks to the field reviewers and others* who helped to enrich the content and provided a broadened user perspective. These include Sarah Gerstenzang, New York; Kristi Poole, Maine; Kelly King, Illinois; John Lukach, Minnesota; and Becky Sharp, South Carolina.

More than 20 professionals, scholars, and those with *lived experience* had a part in developing NTI.
Overview and Purpose for this Guide

The National Adoption Competency Mental Health Training Initiative (NTI) has created state-of-the-art, standardized, web-based trainings to build the capacity of child welfare and mental health professionals in all states, tribes, and territories to better understand and address the mental health challenges of children and youth and their foster, adoptive, and guardianship families.

Developed through a cooperative agreement with the Children’s Bureau, NTI’s goal is to effect nationwide system change to build the capacity and competency of child welfare and mental health professionals to improve permanency and well-being for children and youth in foster, adoptive, and guardianship families.

NTI’s aligned trainings provide the skills, strategies, and tools professionals need to:

→ Support children to heal from trauma and loss.
→ Provide parents with skills to parent more effectively.
→ Foster effective collaboration between child welfare and mental health professionals.
→ Improve outcomes for permanency, child well-being, and family stability.

This guide offers recommendations and suggestions for successful implementation, integration, and long-term sustainability of NTI within your state, tribe, territory, or organization. It is based on best practices from implementation science, which is widely discussed and researched in child welfare. It is also based on learnings from piloting NTI Trainings with child welfare and mental health professionals in nine state and tribal sites with nearly 10,000 participants across the country.

Sustainability is the process of perpetuating (keep going, keep in existence) your programming by integrating the important aspects into your organizational operations so that your stakeholders can continue to reap the benefits of NTI. It is useful to approach sustainability as the overall process of developing a highly effective workforce change.
Implementation Planning Steps for Targeted Outcomes

Implementation Planning can take many forms. In this section of the guide we have highlighted the primary steps in implementation planning. While we recognize that each organization’s implementation plan and process will be tailored to its needs and specific circumstances, we provide examples from our pilot experience. We also provide sample Implementation Plans and links to helpful resources throughout the guide and in the Appendix.

1. Assess the need for NTI in your organization

Completing a needs assessment is critical in evaluating if and how an initiative fits within your organizational context. Your first step in implementing and ensuring sustainability of NTI is to identify key leaders who can best answer these questions:

- What are the overarching goals for integrating NTI within your system?
- Who will make the decision to utilize the training?
- Which stakeholders will decision makers need to consult to get “buy-in”?
- Who will make resources available to implement the training?
- Do we have staff capacity to plan for implementation? Who will lead implementation of the training?
- Will the training require different people to implement different components?
- Who will ensure sustainability long-term?

Adapted from Frontiers in Public Health:

Two key tools to assist in your planning:

**NTI Needs Assessment.** All sites are encouraged to complete the NTI needs assessment, designed to help you evaluate the fit of NTI for your agency or system. The information provided in this assessment will be utilized by the NTI implementation team to assist you in planning for utilizing NTI in your organization. Complete the NTI needs assessment here and utilize it as you determine your organizational capacity to integrate NTI: https://www.surveymonkey.com/r/GWTYDFF

**The Hexagon Tool.** This is a tool from the National Implementation Research Network (NIRN). It can help identify the need for your organization as well as the root cause of
that need, identify potential options and their relevant information, evaluate fit and feasibility of the options, and finally, use the information gathered during the hexagon process to inform your implementation planning: https://implementation.fpg.unc.edu/resources/hexagon-exploration-tool

2. Invite leadership involvement & establish your planning team

Establish a Site Implementation Team (SIT) to support the implementation of NTI Training. The Site Implementation Team (SIT) will be the drivers of implementation and integration of NTI into your state/organizational system. These are the people who will determine the primary goals for integrating NTI into your training system.

Decisions regarding implementation of staff training are often complex and require input from multiple stakeholders. Buy-in of top leadership at the onset of planning is critical to integration of NTI within a system.

NTI has the potential to effect system change across the continuum of child welfare service delivery – from child protective services through post-permanency services – and impact permanency and well-being outcomes for children and families. The SIT will lead the effort to make NTI a reality for your agency and ensure that NTI will be adopted, utilized widely, and sustained long-term.

Because NTI is intended to effect system change, the SIT team should include a diverse group of key leaders from both the child welfare and mental health service systems – high-level decision makers as well as those involved in providing staff training. It can also be helpful to engage an NTI Implementation Specialist or an external consultant to manage the project during the initial stages of implementation. SIT members may include:

- Director of Child Welfare
- Director of Behavioral/Mental Health
- Program Managers
- Training Managers or Training Partners
- Community Partners (universities, provider and advocacy organizations, etc.)

“One of the priorities of our grant is to increase adoption competency in the state. NTI came along just at the right time. It was a very successful tool with good energy going on.”

Jan Permanency/Adoption Specialist (ret.), TN
Determine who will “own” the initiative.
An internal owner of the project is critical to the success of keeping the implementation tasks and timeline on track and ensuring the sustainability of NTI once it is fully implemented. This should be a person who can champion NTI within your system and support NTI ongoing.

3. Develop a customized Implementation Plan

Create an Implementation Plan to serve as a blueprint for implementation. This will be a living document to be re-evaluated and revised as needed. Possible elements of the plan include determining target users, enrollment/completion timeframes, Transfer of Learning (TOL) activities, data gathering and analysis, etc. Sample Implementation Plans developed by NTI pilot sites are provided in Appendix C.

NTI’s “Implementation Checklist” found in Appendix A can assist you and your team with planning.

Build Capacity for Cross-Promotion of Training. The intent of NTI is to bring a system-wide change through complementary trainings that helps build a shared language between the Mental Health and Child Welfare systems. The NTI Trainings will be more impactful if both child welfare professionals and mental health professionals serving the population of families involved in child welfare, adoption, and guardianship are trained.

Assure that your Implementation Plan includes how both child welfare professionals and the mental health professionals who serve families will access the training. This is extremely important in creating a shared language and understanding to advance permanency and well-being for children and families.
To realize that capacity, it is important to consider the following:

- **Determine who needs access to the training.** If you are targeting users across multiple public and private agencies, how will each access NTI?

- **If the organization is only integrating the NTI Training for Child Welfare Professionals,** how will mental health professionals serving your families access the NTI Training for Mental Health Professionals to assure real system change? How do you intend to engage your mental health stakeholders and cross-promote the training?

- **What are the anticipated challenges in coordinating services across child welfare and mental health systems?**

- **How will NTI be actively promoted to those who will access the training?**

- **Will the organization host its own “preferred provider list of MH training completers” for access/referral by professionals/parents?**

- **How will you encourage and direct the mental health professionals who complete the training to be a part of that list as well as the NTI National Directory of Trained Professionals on the NTI website for easy referrals and increased networking opportunities?**

- **What support do you need from NTI to develop strategies or materials to engage the mental health community?**

### 4. Educate key stakeholders

**Educate the full scope of key “leaders.”** This includes those who may not be on the Site Implementation Team (SIT) but are important to gain “buy in” for successful implementation of NTI. This could include traditional leaders who have decision-making authority but can also stretch beyond to include other natural leaders. For example, line workers who have strong credibility among their peers may help build excitement for the implementation of this training, use of best practices or new tools.
Think about who you will need to engage as champions to help you promote the initiative:

1. Who makes staff training decisions or policy regarding training requirements?

2. Who are the important agencies, community partners and others with a stake in ensuring a competent workforce who need to be involved?

3. Who are the natural leaders who have influence over staff and peers and can help champion the training?

Educate Stakeholders and the Broader Community:

Utilize information found at www.adoptionsupport.org/about-nti to educate key stakeholders.

Tools from our marketing package can also be used to educate the broader community.
5. Create a plan for participant expectations and engagement

Decision-making around participation in the training is a critical step. Essential questions and issues around participation and agency support include:

- **Establish expectations of supervisors.** Our pilot sites found that supervisors were better able to ensure staff completion and utilization of skills and tools when they, too, completed the training. Consider rolling out to supervisors first. With knowledge of the content and resources, they are better able to support the transfer of learning, and changing day-to-day practice.

- **Determine which positions within the organization will take the training.** Feedback from sites that have taken NTI indicate the training can be relevant for any staff on the child welfare continuum, from intake workers to post-adoption. On the mental health side, NTI is relevant for therapists and clinicians who work with children, adolescents and families in public, community or school-based settings, as well as private practice and private group agency settings.

- **Communicate training completion of new staff to their supervisors.** Supervisors can then reinforce knowledge, values, and skills learned through NTI to enhance practice from the beginning.

- **At what point in their employment will staff take NTI?** You will need to assess whether all new employees will take the training and, if so, when in their employment. There should also be a plan for how existing employees will gain access.

  "One of the things we learned in our implementations in Tennessee was that people were not necessarily pacing their participation in the training. They were waiting until the end and doing it all at once. And because there is so much content, it is really important to try to lay out, "We're going to do module one and two," then to take a break and discuss it, and then do additional modules. I think the pacing is really helpful in transferring learning."

  Jan
  Permanency/Adoption Specialist (ret.), TN
• **Is NTI required or voluntary?** Pilot results found that when required, organizations had a 75-90% completion rate, compared to voluntary participation, which found anywhere from 30-50% completion. Some sites have mandated NTI for all new staff or staff in specific positions but make it voluntary for others. Some organizations are adding a requirement for contract providers to complete NTI Training.

• **What are the progression and completion goals?** It is estimated that each module will take around 3-4 hours to complete, depending on how much time users spend reviewing the resources. It is recommended that all modules be completed in 3 to 6 months to maintain interest and motivation; however, this is not a requirement.

• **How will performance and process be tracked** regarding enrollment, completion, knowledge gain, and/or application to practice? This data can help inform needs for additional ongoing training or staff development. What is the learning management system’s capacity to provide data related to performance?

6. Evaluate access options and technical integration

The training can be accessed in three different ways, following each orange arrow below. Your organization will need to assess where the training files will best be located and how staff will access the training. Compare all three access options on the NTI website here.

→ **ACCESS OPTION #1:**

Integration of the training files into your organization’s learning management system (LMS).

- A “Host Site Agreement” will need to be signed and organizations will then have access to the training files.
- Review the File Transfer Requirements document (Click Here) to ensure the training is compatible with your Learning Management System.
- Review the technology requirements. Consider integration requirements. What do you need to ensure successful integration into an internal LMS?
→ **ACCESS OPTION #2:**
Through the federally-funded CapLEARN online training center.

If your organization doesn’t have an LMS or the LMS doesn’t have the capacity to host the training files, NTI Trainings are available free of charge on CapLEARN for access by individuals: [https://learn.childwelfare.gov](https://learn.childwelfare.gov).

→ **ACCESS OPTION #3:**
Through the Ideas@TheInsitute (C.A.S.E.) LMS.

Access may be available free with federal funding and organizations can contract for access with evaluation reporting. If your state or agency is interested, please contact Dawn Wilson at: wilson@adoptionsupport.org.

## 7. Establish an effective Transfer of Learning (TOL) Plan

In order to effect system change, training implementation should incorporate a plan for transfer of learning (TOL). NTI’s goal is to increase the capacity of child welfare and mental health systems to address the mental health needs of and improve permanency and well-being outcomes for children, youth and their families experiencing foster care, adoption, or guardianship. The process of TOL incorporates knowledge, skills, and values gleaned from the NTI Training into real life situations and everyday practice.

**Successful implementation of evidence into practice requires strategizing at multiple levels**—the participants, the organization, the system, the nature of the evidence, and the methods of transfer and implementation. NTI recommends establishing a Transfer of Learning (TOL) Plan prior to implementation of the training.

- **Identify specific roles and responsibilities** before, during, and after training. For example:

> “It is really important to me for the NTI Training to not just be something that happens at this time, but something that really changes how we serve kids and how we really take care of every need that they’ve got.”

*Bonni Program Manager, The Center for Child Welfare Training & Simulation*
1) **Prior to Training:** All supervisors will be provided an orientation to the goals and objectives for the learning by the training unit. Supervisors will utilize the *Coaching and Activity Guide for Supervisors* to assist with facilitating learning through each module. The document provides suggested activities while the supervisor ensures the TOL is connected to their specialist’s casework.

2) **During Training:** Supervisors will provide structured learning activities; i.e., Intentional Case Staffing, Field Observations, and Monthly Conferences.

3) **After Training:** Supervisors will observe for implementation of acquired knowledge and skills into practice, reinforce and educate as needed via the roles of the supervisory framework; i.e., Intentional Case Staffing, Field Observations, and Monthly Conferences.

- **Examples of TOL activities** include discussion of course content during case staffing, practicing skills in a group, etc.

- **NTI has developed a Transfer of Learning Guide for your continued use.** You can download the full PDF from the NTI website and share the link with your team. For more information on TOL supports for purchase through C.A.S.E., contact: [nti@adoptionsupport.org](mailto:nti@adoptionsupport.org).
8. Identify agency aids to support training participants

Consider the following ways to make this a successful training for everyone.

1) Protected time and space:
   Protected time to focus on the training content is especially important. However, just as critical and often overlooked, is the need for protected space. This may be a place outside of the office or workspace where users will have fewer distractions.
   
   - To minimize distractions consider reserving a conference room for staff as they do the training, and encourage them to turn off email and phone notifications while they are completing the training.

2) Incentives:
   Are incentives to complete the training available? Examples of incentives include recognition, pay bonus, time off, free lunch, or special privileges, such as jeans to work day.
   
   - Individuals or Groups? Are the incentives given to individual completers or to groups of completers who all meet their goals?

3) Reminders / Encouragers:
   Overloaded workforces will have difficulty prioritizing completion of an in-depth, self-directed training. Participants will need reminders to log into the training system and continue to progress. Things like calendar reminders, emails from the SIT leader, supervisors, system leadership, etc. can assist users in meeting progression and completion goals.
4) **Recognition:**
   Recognition can be an important motivator for users to complete NTI. Think of ways your agency can recognize and celebrate those who complete the training.

5) **Provider incentives:**
   To ensure that all your contract providers have a foundational level of knowledge and skill, you may consider embedding this NTI Training requirement in their contract or scope of work.

> "We have contracts where we have certified investigators who do home studies for either licensing or for adoptive home studies. And so, we’re looking at adding in this as a required core for them to be on those contracts and solicitations with us. So, I think there’s lots of opportunities there for building it into the system at many levels."  

*Becky*

*Program Manager (ret.), SC, DSS*

---

9. **Develop a communication strategy to promote NTI**

Develop a strategy to communicate the value and benefits of NTI for users.

**Know your audience:** Do they respond more positively to email or in-person discussion? Who should deliver the message (leadership, supervisors, and peer champions)? What type of messages will motivate them?

**Share and use the communication tools that we developed for NTI:**
Consider revising or developing training policies to support the use of NTI, especially for staff or providers who will be mandated to complete NTI.

10. Determine data needs for assessing NTI success

Have a plan in place for collecting and using accurate data. There are two types of data that are useful for supporting NTI. Consider how you can structure a process to obtain both of the following types: 1) Data to support NTI’s implementation, and 2) Outcome data for the purposes of evaluation of NTI.

1) Data needed to support implementation:
Data is used to understand how many people are using the training and how they are progressing. It can help the SIT understand if there are barriers to enrollment and if additional messages and support are needed to encourage participation and completion.
If your agency has a learning management system, it is likely that your organization has a method for tracking the completion of staff training. Completion of the training is determined by successfully passing all the module post-tests. How this is done for NTI will need to be determined before implementation.

If you are accessing the training through CapLEARN, obtaining user data at a management level will not be possible. In order to track user participation and completion, you need to have users provide the completion certificates to a designated person in your organization.

2) Outcome data:
   There are several ways to evaluate the outcomes related to NTI. The pilot of NTI included a rigorous evaluation that assessed:

   a) Knowledge gains
   b) Impact on practice (short- and long-term)
   c) Systems changes

Learn more about the Child Welfare pilot outcomes and Mental Health pilot outcomes and see the Evaluation Overview at the NTI website.

To gain access to these surveys and evaluation support, please contact the Center for Adoption Support and Education: info@adoptionsupport.org

“When we looked at the pre- and the post-scores and the gain in knowledge and the practice comments that came back from the feedback, it was a no-brainer to say, ‘Yes, we want to do this.’”

Becky
Program Manager (ret.), SC DSS
11. Plan for sustainability and accountability

What does System Change look like?

What systemic changes do you expect to see? What would tell you change has occurred?

- Practice changes. (Do you see changes in quality of supervision or worker notes, type of activities occurring on visits, the information workers share with families?)

- Sustainable changes to systemic structures, policy and processes. (Are there changes to intake forms, referral processes, who is included in team meetings, how collaboration occurs?)

- Communication. (Do you see changes in conversations between workers and parents/children, conversations supervisors are having with their workers?)

- Relationships. (Do you see changes in how workers collaborate with other disciplines, how workers relate to the children/families on their caseload?)

→ Is NTI embedded in policies or contracts? Determine with your leadership and SIT what policy or contract changes need to happen to ensure that all intended users complete NTI.

→ Review existing training requirements to reduce training burden on staff. One of our pilot sites conducted a crosswalk of existing trainings to look at redundancy and relevance of content. They used NTI to supplement outdated mandatory training.

→ Are other resources needed to sustain NTI long-term? This can include technology, staffing, the addition of “champions,” or educating new leadership who come on board to sustain the training.
Use the matrix below to elaborate on what is needed to make NTI sustainable in your state/organization.

**Column A:** Identify goals and activities in each of the specified areas that, if met, will increase the likelihood of long-term sustainability of NTI.

**Column B:** Identify who will complete activities to drive sustainability in that area.

**Column C:** Identify barriers/facilitators to sustainability.

**Column D:** Indicate what technical assistance and resources are needed.

<table>
<thead>
<tr>
<th>COLUMN A: Goal/Activity:</th>
<th>COLUMN B: Responsible party:</th>
<th>COLUMN C: Barriers/Facilitators</th>
<th>COLUMN D: Needed TA/resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy (e.g., training requirements, changes to training department)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplemental training materials to pair with curriculum</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staffing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervision/oversight/compliance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Implementation Specialists & Support to Reach Your Goals Successfully:

Implementation Specialists were instrumental in supporting the implementation and sustainability of NTI throughout the pilot phase. NTI Implementation Specialists continue to provide support to States, Tribes and Territories and interested organizations, and are available to assist with successful implementation and integration of NTI by:

- Providing guidance around the creation of the SIT
- Facilitating SIT meetings
- Planning kick-off or other launch events
- Hosting webinars or making presentations
- Providing links to marketing tools

For more information, implementation support or consultation, please send an email to: nti@adoptionsupport.org.

Thank you for implementing NTI and working toward true systemic change to advance practice for permanency and well-being for children and youth and their foster, adoptive, and guardianship families!

Sincerely,

*The NTI Team*
Appendix A: Implementation Guide Checklist
Implementation Checklist

Designed for States, Tribes and Territories
Integrating NTI Web-Based Training

STT:

Lead Person and Position:

Contact Info:
Integration of Trainings:

- Who will oversee/coordinate implementation?
- Which NTI trainings will be integrated?
- Where will NTI live and who will manage the uploading, etc.?
- Are there any new policies or procedures that need to be developed to support NTI?
- What supports from NTI are needed to broaden the support for NTI among leadership, other stakeholders, and potential champions?

Target Audience/Access to Training:

- Who is the target audience for each training?
- Is training mandatory vs. voluntary? Will staff who are not required have access to the training?
- Will private/contracted providers have access to NTI via your LMS?
- Will contracted providers be required to complete NTI as part of the contract?

Supports for Implementation:

- What, if any, incentives will be provided to staff to complete?
- Is there a recommended timeframe for completion?
How will training be messaged to staff and by whom?

What marketing/communication tools are needed?

What Transfer of Learning activities will be needed to support the application of NTI?

Does the organization have capacity to provide CEUs? If not, how will workers get credit?

Cross-Promotion of Curricula:

If only CW or MH training is being integrated by this system/organization, what is the capacity to cross-promote both curricula in the state/region/community?

The goal of NTI is to impact system change and access to adoption competent professionals for families. If the STT is only integrating CW, how will mental health professionals access NTI?

- How do you intend to engage your county/state MH systems/providers?

- Who do you identify as your key mental health stakeholders?

- How will this be actively promoted by the STT?

- What support do you need from NTI to develop strategies or materials to engage the MH community?

Will the organization host a “preferred provider list of MH completers” for access/referral by professionals/parents?
Appendix B:
Helpful Resources and Tools
Helpful Resources and Tools:

Implementation Science:

- National Implementation Research Network (NIRN)
- Child Welfare Information Gateway

Needs Assessment:

- **NTI Needs Assessment**: Complete and utilize it as you determine your organizational capacity to integrate NTI: [https://www.surveymonkey.com/r/GWTYDF](https://www.surveymonkey.com/r/GWTYDF)

- **The Hexagon Tool** by the National Implementation Research Network (NIRN) can also be used to assess fit: [https://implementation.fpg.unc.edu/resources/hexagon-exploration-tool](https://implementation.fpg.unc.edu/resources/hexagon-exploration-tool)

Education and Outreach:

- Utilize information found at [www.adoptionsupport.org/about-nti](http://www.adoptionsupport.org/about-nti) to educate key stakeholders.

- Use tools from our [https://adoptionsupport.org/nti/videos/](https://adoptionsupport.org/nti/videos/) to educate the broader community.

Implementation:


- Explore this NIRN module on the definition and creation of implementation teams: [https://implementation.fpg.unc.edu/module-3](https://implementation.fpg.unc.edu/module-3)
- Read “Tips for Implementation Teams” from the California Evidence-Based Clearinghouse:

- See an example from a child welfare implementation project, “The Permanency Innovations Initiative”:

- Read implementation science from federal sources: National Implementation Research Network (NIRN) - [https://nirn.fpg.unc.edu/](https://nirn.fpg.unc.edu/) and [Child Welfare Information Gateway](https://nirn.fpg.unc.edu/).

### NTI Integration and Transfer of Learning:

- Visit the NTI website for access and integration tips:
  [https://adoptionsupport.org/nti/access-and-integration/](https://adoptionsupport.org/nti/access-and-integration/)

- See NTI’s Transfer of Learning Guide to promote application:
  [https://adoptionsupport.org/nti/transfer-of-learning/](https://adoptionsupport.org/nti/transfer-of-learning/)

### Access Options and Technical Integration:


- Access the Federal CapLEARN online training center website:
  [https://learn.childwelfare.gov](https://learn.childwelfare.gov)

### Evaluation and NTI Pilot Outcomes:


NTI’s Communication Tools, Resources and Training Cross-Promotion:

Webinars: https://adoptionsupport.org/nti/webinars/

Videos: https://adoptionsupport.org/nti/videos/

Communication Tools (i.e., brochures, etc.): https://adoptionsupport.org/nti/nti-communication-tools/

Facebook: https://www.facebook.com/nti.case/

Twitter: https://twitter.com/NTI_CASE

National Directory of NTI Trained Professionals: See a searchable directory of mental health professionals who completed the NTI training: https://adoptionsupport.org/nti/trained-professionals/
Appendix C:
Example Implementation Plans

Planning for Your Implementation:

*Learning from Other Organizations*
Example Implementation Plan #1:
Child Welfare System Integration Scenario

Summary of Example Scenario:
After piloting NTI with a cohort of adoption focused child welfare staff this state system wanted to utilize NTI to train ALL child welfare staff within the first two years of their employment. Sustainability planning involves training all CW workers in NTI and maintaining a strong focus on transfer of learning (TOL). To ensure that all staff not only take the training but use it to change practice, they are first having supervisors complete NTI in order to better assist their staff with TOL. “Coaches” who are experienced adoption mental health professionals who can lead group coaching sessions with the child welfare staff are being hired as well.

Training to Be Integrated: NTI Training for Child Welfare Professionals, NTI Training for Child Welfare Supervisors, and/or NTI for Mental Health Professionals.

Key Target Audience: All Child Welfare Specialists and Supervisors will complete the training after the first year of employment and CORE training is completed.

NTI Access (i.e., Internal LMS, Contracted Provider, CapLEARN): Internal LMS with access for contractors and tribal child welfare.

Key Points of Contact and Champions: The NTI pilot users and pilot planning team are critical champions for the initiative and brought to the attention of leadership the applicability of NTI for all child welfare staff. The planning team also recognized the importance of TOL being built into sustainability of the training in order to impact practice. The child welfare system has a hands-on training team that has been thoughtfully planning for NTI integration and sustainability. The training team has been a key part of identifying how the training fits within existing training priorities.

Training Dimensions and Scheduled Rollout:
- NTI CW Training is composed of 8 modules. Each module takes approximately **2.5-3 hours** to complete online. Online learning encompasses approximately 20-23 hours for specialists and 23-26 hours for supervisors, and will comprise the required training for the agency for the upcoming fiscal year. Supervisors have additional readings for each module to support Transfer of Learning (TOL).
• Employees will complete a module and the TOL activities, followed by a month between beginning the next module in which the focus is reinforcement of learning into practice of previous modules. The first two weeks of the month are set aside to complete the module and the last two weeks are set aside to schedule and complete the TOL.

• All modules must be completed in order. When supervisors are out of the office (i.e., FMLA) and unable to complete the TOL, they shall resume their training schedule upon returning. A CW III or another supervisor can complete the TOL during short absences. Supervisors shall communicate with their immediate supervisor delays progressing through the training.

• New specialists are assigned the training via LMS when they become CW Specialist II. Specialists may participate in group learning activities while they wait to start the training or for modules they have yet to commence. Specialists must receive individual/group TOL activities related to the module they are completing even if they have participated previously with peers.

Prior to Training:

• The executive team will communicate the rationale for assigned training and commit resources for successful implementation.

• Supervisors will read the “NTI Transfer of Learning Guide,” which will provide the rationale for the TOL and expose supervisors to the TIP Sheets and NTI Supervisor Coaching and Activity Guide, a 10-minute read.

• Supervisors will review the “Transfer of Learning Group NTI Learning Guide.” Group TOL is expected to require 1 hour or less of staff time.

• All supervisors will be provided an orientation to the goals and objectives for the learning and the TOL group case learning guide by the training unit. Supervisors will utilize the “Supervisor Coaching and Activity Guide” for supervisors to assist with facilitating learning through each module.

• Supervisors will utilize each module’s TIP Sheet with their specialist. Supervisors will provide the TIP Sheet and Learning Objectives to specialists and reinforce in person; i.e., group format preferred and individual as needed.

During the Training:

• Supervisors will support time set aside for the completion of modules.

• Supervisors will ask specialists to reflect on the application of knowledge into practice.
Supervisors will provide support for implementation through structured learning framework activities; i.e., Intentional Case Staffing, Field Observations, and Monthly Conferences.

**After the Training:**

- Supervisors will utilize the Group Case Learning Guide to facilitate group learning experiences based on specialists’ current or past families.

- **Identified consultants will provide coaching sessions** following completion of the last NTI module via Zoom.

- Supervisors will observe for the implementation of acquired knowledge and skills into practice; reinforce and educate as needed via the roles of the supervisory framework.
Example Implementation Plan #2: Child Welfare and Mental Health Integration Scenario

Summary of Example Scenario:

*NTI Child Welfare and Mental Health Training will be offered statewide with plans underway to have NTI accessible via a university-based learning management system (LMS).*

____________________________________________________________________________________

**NTI Trainings to Be Integrated:** The NTI Implementation Team will incorporate and offer both the Child Welfare and the Mental Health training throughout the state.

**Lead Points of Contact for Initial NTI Integration:** Contract Manager, Training Manager, and Behavioral Health Manager from the Department of Human Services’ Child Safety & Permanency Division.

**NTI Access (i.e., Internal LMS, Contracted Provider, CapLEARN):** NTI is available to child welfare new hires through the child welfare training system. Until it is available on the internal systems, NTI will be accessed through C.A.S.E. LMS and/or CapLEARN. Plans are currently underway to partner with a major university to integrate NTI into an LMS.

**Planning for Leadership Engagement to Foster NTI Sustainability:** The Department of Human Services, Child Safety & Permanency Division, and the Behavioral Health Division are supportive of sustaining NTI. We are in discussion on how we plan to discuss this further for both Child Welfare and Behavioral Health. We continue working on a plan to continue the support and momentum.

**Continuation Planning for NTI as a Foundational Training (e.g., mandated, optional, deadlines):**

- NTI continues to be a requirement for new child protection workers. This expectation will continue.
• Each worker must complete the NTI Training by the end of the required Foundational training through the Child Welfare training system. The Supervisor Child Welfare Foundational training is being created and (was) piloted in fall 2019. **Key recommendation: It will be the leadership’s recommendation that NTI is completed as part of the overall training. This cannot be mandated, so will be recommended.**

• **Engagement of Mental Health Leadership and Community in NTI:** The Director of Behavioral Health at DHS is our advocate in this area. There are leaders within Behavioral Health who have indicated a high interest in learning more about how to support NTI Training for mental health professionals throughout the state.

• **NTI Target Audience, Access, and Professionals Required to Complete NTI:** The NTI Implementation team’s goal is to have all professionals involved with children within the child welfare and mental health systems do this training. We will begin with child protection workers within the county and tribal agencies, and community mental health professionals who work directly with children and families. Requests have been received from school mental health professionals and guardian ad litems.

• **Transfer of Learning Opportunities Planned to Support NTI Infusion:** Transfer of Learning opportunities are not planned at this time; requires additional discussion.

• **CEU Availability:** Those requiring CEUs will be directed to R. Cassidy Seminars.

• **Marketing and Messaging of NTI: Reaching Targeted Professionals:** Marketing and messaging target the child protection workers, as mandated. Monthly messages will be sent via listserves that are accessible through DHS. Agencies that are part of the NTI Implementation Team will market through their own sites.

• **Modification of Existing Policies or Trainings Support NTI Implementation:** The Department of Human Services’ Child Welfare Training System will be incorporating NTI Training into the Supervisor/Leadership training that is currently being developed. This “required” training will be for new child protection supervisors and workers.

• **Identified NTI Champions:** The NTI Implementation team is the champion for NTI. DHS staff facilitate this team.

---

**Next Critical Action Steps:**

• **Create a communication plan** to notify target users of NTI availability and requirements.

• **Create a tracking/monitoring plan** to ensure integration progress.

• **Develop a Transfer of Learning plan** to ensure that the knowledge, skills, and values learned are incorporated into day-to-day practice. Schedule quarterly meetings to review progress.
Example Implementation Plan #3:
Child Welfare and Mental Health Training for All Case Managers and Child/Adolescent Therapists

Summary of Example Scenario:
NTI Child Welfare and Mental Health Training will be integrated into both the Department of Social Services and the Department of Mental Health Learning Management Systems (LMS). NTI will be offered to all child welfare case managers and supervisors and all child/adolescent therapists.

Training to Be Integrated and Scheduled Rollout: NTI Trainings for Child Welfare Professionals/Supervisors will be integrated into the state Department of Social Services’ internal Learning Management System (LMS). NTI Training for Mental Health Professionals will be integrated into the state Department of Mental Health’s internal learning management system.

Key Target Audience: All Child Welfare case managers and supervisors across the continuum of child welfare services and all child/adolescent therapists in regional community and school-based settings will complete the training.

NTI Access Vehicle (i.e., Internal LMS, Contracted Provider, CapLEARN):
- DSS internal LMS and DMH internal LMS

Key Points of Contact/Champions:
- Child Welfare Director
- Director, DSS Staff Development and Training
- Director, Permanency Management
- Director, DMH Division of Child, Adolescents and Their Families
Training Dimensions and Scheduled Rollout: All current DSS staff will be required to complete NTI within 12 months. All new employees will be expected to complete NTI Training within their first 12 months of employment. The timeframe for DMH staff has not been determined yet.

Collaboration between Child Welfare and Mental Health Leadership and Community in NTI:

Background: This site was one of the original pilot sites for NTI. At the time of the pilot, DSS did not have an internal Learning Management System (LMS) and they were contracting with an external training partner. As a result of the success from the pilot and the impact on practice well beyond the original target audience (which was adoption workers), the decision was made to extend the training to staff across the child welfare continuum and to bring training in-house so that the agency would have more control over training. To lessen the training burden on staff, DSS made the decision to mandate NTI for all staff and chose to have NTI replace an existing 8-module training that is part of pre-service.

Findings and Decision to Mandate: Because of the findings from the pilot of NTI Training for Child Welfare Professionals, the Director of the DMH Division of Child, Adolescents and Their Families made the decision to mandate child and adolescent therapists employed in the regional community-based mental health centers (as well as those who were school-based) to complete the training as well. Additionally, DSS chose to host a state directory of mental health professionals who had completed NTI. This would serve as a preferred provider list for referrals.

Buy-in of Departments: There was buy-in from both child welfare and behavioral health from the beginning. Both systems now have their own Learning Management Systems and had the ability to integrate their respective trainings.

Access for Both Trainings: Both systems are also supporting an effort to integrate all three curricula into a third learning management system that is a partnership between DSS, DMH, and other agencies to provide access to trainings for private providers and resource parents in the state. These are individuals who don’t have access to the state-administered learning management systems. This effort is still underway.

Transfer of Learning Opportunities Planned to Support NTI Infusion: Transfer of Learning opportunities are not planned at this time; will require additional discussion. The site has discussed the desire to offer booster trainings for those already trained in NTI.

CEU Availability: Those requiring CEUs beyond NASW approved CEUs will be directed to R. Cassidy Seminars.
Modification of Existing Policies or Trainings to Support NTI Implementation: NTI will be a mandated training. Another required training was eliminated from the DSS training array to make room for NTI, creating additional burden on staff.

Sustainability Planning: Leadership Engagement to Foster NTI Sustainability:

• Prior to integrating NTI at DSS, this site decided to have NTI Training replace a previously required child welfare training, feeling that NTI was more relevant and comprehensive to the continuum of services.

• DSS leadership will message the training requirement to staff and track via LMS.

• Plans are still being determined for DMH.
NTI was funded through a cooperative agreement (#90CO1121) between the Children’s Bureau, Administration for Children and Families, US Department of Health and Human Services and the Center for Adoption Support and Education (C.A.S.E.).