Reviewer’s report

Title: Innovations in mental health services implementation: A report on state-level data from the National Evidence-Based Practices Project

Version: 1 Date: 30 December 2005

Reviewer: Richard Owen

Reviewer’s report:

General

This paper presents an innovative analysis of qualitative data from an important multi-state implementation project, the Evidence Based Practice (EBP) Project. The paper describes an analysis of data from interviews with state mental health and substance abuse treatment directors and with their staff. The interview data were collected to describe roles of state mental health/substance abuse authorities with regard to implementing EBPs and identify barriers and facilitators to implementation. This analysis classified implementation activities as innovative according to the definition of Greehalgh, and compared the number of innovation activities in the pre-implementation, implementation, and plans for sustainability phases, and among the 5 EBPs that were selected for implementation in each state.

The paper presents a wealth of data about approaches taken by these states to implement EBPs. The paper is clearly of great interest to the field of implementation science in general, and to those attempting to implement EBPs in mental health settings specifically.

While the paper is very interesting, I believe that its impact would be increased by some revisions that would clarify its importance to implementation science while retaining its utility to mental health administrators or managers and hands-on implementers.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

The paper is quite long; the introduction is unusually long and the results section contains many details and tables about implementation activities. I fear that the important points will be lost on readers as a result. While any part of the paper could be shortened, I believe the following revisions would improve the manuscript. Please note that no single recommendation here is “compulsory,” but what is needed is a more concise presentation of results rather than a listing of every result.

(1) Reduce the length of the description of the “foundation” (beginning on p. 4). A specific place to shorten is the text following the second bullet about evaluation of innovations in government. Give one or two examples, and give citations for the rest.

(2) Revise the results section – summarize results in text that are most important rather than presenting everything in tables. The text that is associated with Tables 2 and 3 summarizes all the information in them; while the information in the tables is interesting, I think that there is too much redundancy. Either delete the tables, or shorten the description of them in the text. Tables 4-6 are very interesting, but very long. I think the information contained therein may be most useful to mental health administrators and implementation scientists working in the mental health field. The text is good as is, but could the table be included as an appendix?

(3) If Table 2 remains in the manuscript, the author should mention that the total number of innovations for each EBP is affected by unequal distribution of the number of states implementing
each practice (e.g., 2 for ACT and 4 for IMR).

(4) On p. 24, the method for rank ordering of types and number of innovations is mentioned for the first time, and what is meant by “rank order” is defined here and in the footnote of the corresponding table (Table 7). This information should be introduced in the methods section, the results presented in the results section, and discussion presented in the discussion section. Currently, both methods and results (with a little discussion) are all in the discussion section (pp. 24-25). Also, the table and text are completely redundant. Either the table should be eliminated, or the text should simply refer to the table.

More information is needed about how the author applied the definition of innovation to the data. It seems to me that almost any activity that was undertaken as part of an effort to implement these EBPs would have the essential elements of Greenhalgh’s definition – the activity would be novel; it would be directed at improving outcomes, administrative efficiency, cost-effectiveness, or users’ experiences; and it would be implemented by planned and coordinated actions. The author should give more detail about the application of this definition. Are there implementation activities that the states undertook that weren’t innovative?

On p. 24, the author implies or states that her study assessed the effectiveness or success of implementation (see the last sentence in the second full paragraph on that page and the subsequent paragraph). The data presented don’t indicate that relationship building and financing innovations predict a greater likelihood of implementation success, nor that “multiple strategies are more effective than one.” The results are that the former types of innovations were most often employed, and that multiple strategies were used. There is no measurement of implementation success or effectiveness in this study. I think the implication of these results is that states such as the 8 states selected for the study, who are quite innovative, can and do employ many innovative approaches in the process of implementing EBPs, that approaches used vary somewhat across the phases of implementation, and across the EBPs themselves, and that relationship building and financing are the domains with the greatest number of innovative activities (the author does mention these implications). Further evaluation is necessary to determine which type(s) or combination of activities are most effective with regard to successful implementation.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

In the text on p. 11, the “Table 2” label is actually referring to Table 3. It seems that Tables 2 and 3 were switched.

Check for capitalization of EBPs – sometimes is EBPS (e.g., p. 27).

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Discretionary Revisions (which the author can choose to ignore)

Consider clarifying or expanding on the sentence on p. 9, “Protocols were informed by diffusion of innovations, implementation, organizational theory, EBP and healthcare delivery literatures.” This represents a huge amount of literature – did the research team review aspects of the literature while developing the protocols? I assume the author really means that members of the research team responsible for developing the protocols had expertise in these areas and were familiar with these bodies of literature.

I think that the description of the study, as a “combined retrospective and prospective cross-sectional and comparative investigation,” is awkward. It would be better to just describe the study methods as is done in the methods section without giving the design a complex label. The use of the word “prospective” is potentially misleading, when the author later states that “it was not
possible to assess longitudinal perspectives on implementation and sustainability."

The phrase on p. 4 (also on pp. 19 and 24), ‘EBP Project EBP’ is logical, but very awkward. Consider rewording the sentence on p. 4 – “Can innovations in EBP Project implementation be identified from activities…and plan for EBP sustainability?”

**What next?:** Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.