Assessing Implementation Fidelity of the Guiding Good Choices Program in a Virtual Environment

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Virtual delivery can enhance reach

- Most houses in the US have internet and a computer or device
- Offering interventions online can:
  - enhance reach and thereby, public health impact
  - reduce barriers to attendance
  - reduce costs for organizations
Implementation Fidelity

• The degree to which an intervention is delivered as intended
• High implementation fidelity is associated with better program outcomes***
• Many programs shifted to online delivery during the COVID-19 pandemic
• Few studies have examined implementation fidelity when a program was adapted for virtual delivery
Methods

- Staff in the three healthcare systems received extensive training on GGC
- Two interventionists delivered the program via Zoom – sometimes third
- 45 groups delivered across two years (cohorts) during the COVID-19 pandemic
# Implementation Fidelity Constructs

<table>
<thead>
<tr>
<th>Construct</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance</td>
<td>How much of the intervention did participants receive?</td>
</tr>
<tr>
<td>Dosage</td>
<td>How much of the intervention was delivered?</td>
</tr>
<tr>
<td>Adherence</td>
<td>How much of the core components were covered?</td>
</tr>
<tr>
<td>Quality of Delivery</td>
<td>How competent and effective were providers in delivering the material?</td>
</tr>
<tr>
<td>Participant Engagement</td>
<td>How active and engaged were participants?</td>
</tr>
</tbody>
</table>
Mixed Methods

Observations only occurred for sessions 2, 3, and 5
Attendance

- 485 families enrolled in GGC
- 292 families (60.2% of enrolled) attended at least one session
- Among attendees, families attended (on average) 3.5 out of 6 sessions
- 53.1% of families attended the majority of the program (4+ sessions)
- Attendance declined as the program went on

Percent of Attendees at Each Session

<table>
<thead>
<tr>
<th>Session Number</th>
<th>0%</th>
<th>10%</th>
<th>20%</th>
<th>30%</th>
<th>40%</th>
<th>50%</th>
<th>60%</th>
<th>70%</th>
<th>80%</th>
<th>90%</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intro</td>
<td>72%</td>
<td>75%</td>
<td>62%</td>
<td>54%</td>
<td>49%</td>
<td>43%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NIH Collaboratory
Rethinking Clinical Trials®
Health Care Systems Research Collaboratory
Dosage

Sessions delivered: 86%
Occurred weekly: 93%
Adequate duration: 96%
Adherence

Objectives: 99%
Activities: 96%
Objectives - Observer: 98%
Quality of Delivery

<table>
<thead>
<tr>
<th>Quality</th>
<th>Quality - Observer</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.7</td>
<td>4.6</td>
</tr>
</tbody>
</table>
Participant Engagement

**Engagement**
- 4.0

**Engagement - Observer**
- 4.5

Family Meeting Completion
- 49%
## Interventionist Perspectives on Fidelity

<table>
<thead>
<tr>
<th>Dosage &amp; Attendance</th>
<th>Adherence</th>
<th>Delivery Quality</th>
<th>Participant Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-hr. sessions big time commitment</td>
<td>Sometimes modified activities — skipped videos or breakout rooms — but generally not core material</td>
<td>Improved over time</td>
<td>Parent bonding and engagement</td>
</tr>
<tr>
<td>Attendance drop off</td>
<td>Material condensed due to time</td>
<td>Valued practice and ongoing support</td>
<td>Parent retention and youth engagement</td>
</tr>
</tbody>
</table>

Two hours... was more than most people were comfortable committing to.

...If we’re running low on time, I’ll just give the examples... instead of asking [them to provide examples] and... waiting for responses.

I felt like we got better as we went along, and we were just so much better by the end.

[One of the biggest strengths is] probably parents talking to each other because a lot of them, especially during COVID, they just stopped connecting with other people socially.

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Fall 2022 semi-structured focus group with 7 interventionists plus 1 semi-structured interview
Key Takeaways

• GGC can be delivered with high fidelity virtually in a primary care setting
• Similar levels of fidelity when compared to previous studies of GGC delivered in-person
• Training and ongoing support are important
• Fostering bonding and engagement in an online environment
  • Specific examples to foster bonding and engagement: Breakout rooms, activities
• Strategies to improve participation and retention
  • Still see impact
  • Look at in person attendance
Thank you!

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