Mathematica
Progress Together

Scaling an Intervention: Recommendations and Resources

A Guide for Funders and Grantmakers

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Karen Needels, Scott Richman, Nan Maxwell, and Mary Anne Anderson

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Abstract

Successfully scaling effective interventions can help funders and their grantee organizations improve lives for large numbers of individuals and communities. AmeriCorps recognizes this potential and, in 2016, funded Mathematica to undertake the Scaling Evidence-Based Models (SEBM) project to gain insights about which of the interventions it funded showed evidence of effectiveness and might be ready to scale. By undertaking this project, AmeriCorps sought uniformity, strategic learning, and a focused vision to evaluate the range of existing evidence frameworks and metrics for determining what constitutes an effective intervention as applicable to its programs. The project was also designed to generate practical knowledge about how AmeriCorps could foster the successful scaling of effective interventions by helping to identify which interventions work and how they can work for more people. Analysis undertaken as part of the project identified interventions with the strongest evidence of effectiveness and provided AmeriCorps with an understanding of why other interventions did not meet criteria for rigorous research. The project also identified the extent to which organizations described intervention and organization conditions needed for scaling readiness and which organizations did not provide information specific enough to assess readiness. AmeriCorps commissioned this guide to disseminate the knowledge gained from the SEBM project and provide practical recommendations for how funders, including governmental agencies and philanthropic organizations, should think about and plan for scaling. Furthermore, this guide highlights for funders how they might better understand evidence of intervention effectiveness and readiness for organization and intervention scaling by undertaking a systematic process to assess scaling readiness of the interventions they fund. Resources that funders and their grantee organizations can use to help prepare for scaling are also listed in this guide.

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I. Background and Overview of the Guide

AmeriCorps was established as a federal agency in 1993 with a mission to improve lives, strengthen communities, and foster civic engagement through service and volunteering.[1] The agency achieves this mission through the AmeriCorps State and National program and three AmeriCorps Seniors programs (RSVP, Senior Companions, and Foster Grandparent); the Social Innovation Fund (SIF) also provided funding to innovative community-based programs from 2010 to 2016.[2]

Since their inception, AmeriCorps programs have used performance measures to demonstrate progress toward meeting program and agency goals and objectives. As of 2005, federal regulations governing AmeriCorps programs required AmeriCorps grantees to conduct evaluations of their programs.[3] Following the signing of the Edward M. Kennedy Serve America Act in 2009, AmeriCorps began to more intentionally document and assess the evidence behind the interventions that it funded. The legislation called for the implementation of SIF, which was then one of a few tiered evidence grantmaking initiatives at the federal level. In 2010, AmeriCorps adopted a tiered evidence framework and more intentionally integrated the use of evidence into its grantmaking process (U.S. Government Accountability Office 2016). Using the framework, AmeriCorps sponsored third-party systematic evidence reviews and targeted its funding to identifying evidence-based solutions and bringing those solutions to more people and communities in need across the country with the help of national service.

AmeriCorps continued seeking more uniformity, strategic learning, and a focused vision to evaluate the range of existing evidence frameworks and metrics for determining what constitutes an effective intervention as applicable to its programs. In 2016, it commissioned Mathematica to conduct the Scaling Evidence-Based Models (SEBM) project to identify AmeriCorps-supported interventions with the strongest evidence and to ground and deepen the agency's understanding of scaling practices. Through this project, the agency sought to leverage its investments by ensuring that its most effective interventions could be scaled to engage more people and communities across the country. The project also generated practical knowledge about how AmeriCorps can support and foster scaling of evidence-based interventions as well as support its grantees to more thoughtfully engage in scaling practices to ensure success. Figure I.1 depicts the phases of the SEBM project, along with the activities that took place and the products that resulted from each phase.

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[1] Prior to September 29, 2020, AmeriCorps operated under the name Corporation for National and Community Service.

[2] Because the three AmeriCorps Seniors programs (RSVP, Senior Companions, and Foster Grandparent) were not part of the project that generated this guide, we do not discuss these programs. AmeriCorps (2016) provides a more detailed description of AmeriCorps' programs.

[3] AmeriCorps State and National grantees that receive an average annual grant of $500,000 or more must conduct an independent evaluation; grantees that receive less than $500,000 must conduct an internal evaluation. All evaluations must cover at least one year of AmeriCorps-funded service activity. For more information, see https://www.nationalservice.gov/pdf/06_1128_ac_sn_evaluation_faqs.pdf.

Figure I.1 Phases, activities, and products for the Scaling Evidence-Based Models project
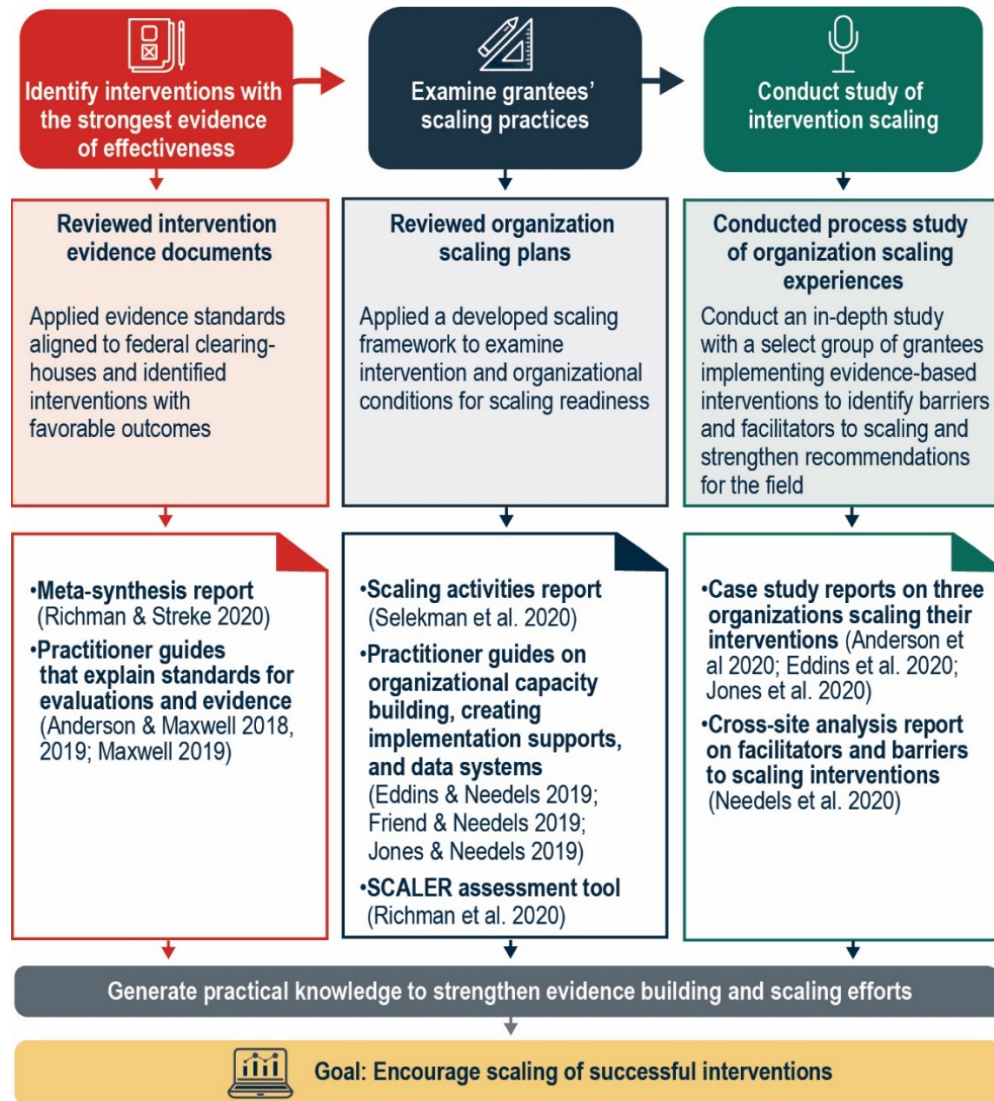
As part of the SEBM project, Mathematica designed and implemented the Scaling Programs with Research Evidence and Effectiveness (SPREE) process, which provides a comprehensive methodology for AmeriCorps and other funders to use when they want to help organizations scale effective interventions (Maxwell and Richman 2019). Mathematica applied the SPREE process to the State and National grantees 2015–2019 and SIF 2010–2014 interventions funded by AmeriCorps, conducting a two-part annual review of AmeriCorps-funded interventions. The first part assessed evidence about whether the interventions demonstrated impacts by improving desired participant outcomes; the second part assessed whether grantees were ready to scale interventions that were ready to be scaled. The review identified interventions with the strongest evidence of effectiveness and provided AmeriCorps with an understanding of why other interventions did not meet criteria for rigorous research. The project also identified the extent to which organizations described intervention and organization conditions needed for scaling readiness and which organizations did not provide information specific enough to assess readiness (Richman and Streke 2020; Selekman et al. 2020).

The SEBM project also included an in-depth process study that collected rich information from three AmeriCorps-funded grantees and their partners about their experiences in scaling evidence-based interventions. The process study generated insights about the approaches that grantees and their partners took to scaling, as well as the challenges and facilitators they faced with different facets of scaling (Anderson et al. 2020; Eddins et al. 2020; Jones et al. 2020; Needels et al. 2020).

To improve scaling readiness and build upon the lessons learned from the process study, AmeriCorps commissioned this guide to disseminate the knowledge gained from the SEBM project. This guide provides recommendations that funders can use to identify which of the interventions they fund are effective, enhance their knowledge base on scaling those interventions, and help them pursue scaling. A wide range of grantmakers, including governmental agencies and philanthropic funders, can use this guide to learn how to systematically review evidence of effectiveness of the interventions they fund, as well as assess how ready their grantees or funded organizations might be for scaling activities.

A. Scaling Programs with Research Evidence and Effectiveness (SPREE) Process

To deepen AmeriCorps' knowledge base on scaling evidence-based interventions, Mathematica designed and implemented the SPREE process under the SEBM project. The SPREE process provides a comprehensive methodology for funders to use when they want to help organizations scale effective interventions (Maxwell and Richman 2019). SPREE was grounded in rigorous research standards for evidence of effectiveness and implementation science research that identified how organizations might scale interventions so they improve desired outcomes for a larger number of participants (Miller et al. 2006; National Implementation Research Network [NIRN] 2018). SPREE was further informed and refined by the lessons learned when applying the SPREE process to a group of organizations that scaled interventions using funding received from AmeriCorps.

The SPREE process has two distinct parts (Figure I.2):

1. **Effective intervention.** The first part ensures that the intervention to be scaled is likely to produce desired outcomes and is therefore worthy of being scaled. It is the base for preparing for scaling. For the SEBM project, the first part—the blue portion of Figure I.2—was designed to identify AmeriCorps-funded interventions with evidence of effectiveness, which we defined as those that met the project's effectiveness standards and produced favorable findings on the majority of targeted outcomes among participants receiving the intervention. We often refer to interventions that have provided evidence of effectiveness as interventions that work. For more information about the standards used to determine whether interventions had evidence of effectiveness, see Richman and Streke (2020).

2. **Readiness to scale.** The second part of the process—the green portion of the Figure I.2—is intended to ensure that the effective intervention and the organization implementing it are ready to scale. The SPREE process specifies five conditions that should be present for an intervention and organization to be ready to scale. Having these five conditions in place before scaling helps foster fidelity during and after scaling, which helps ensure that the intervention achieves at least the same positive outcomes for participants as it did before scaling. The SPREE process is important for guiding scaling because both fidelity and effectiveness often deteriorate as participants, personnel, and resources increase (Larson et al. 2017). The first three conditions of the SPREE process indicate that an intervention is ready to scale, and the last two indicate the organization is ready to scale it.

Figure I.2. Scaling Programs with Research Evidence and Effectiveness (SPREE) process
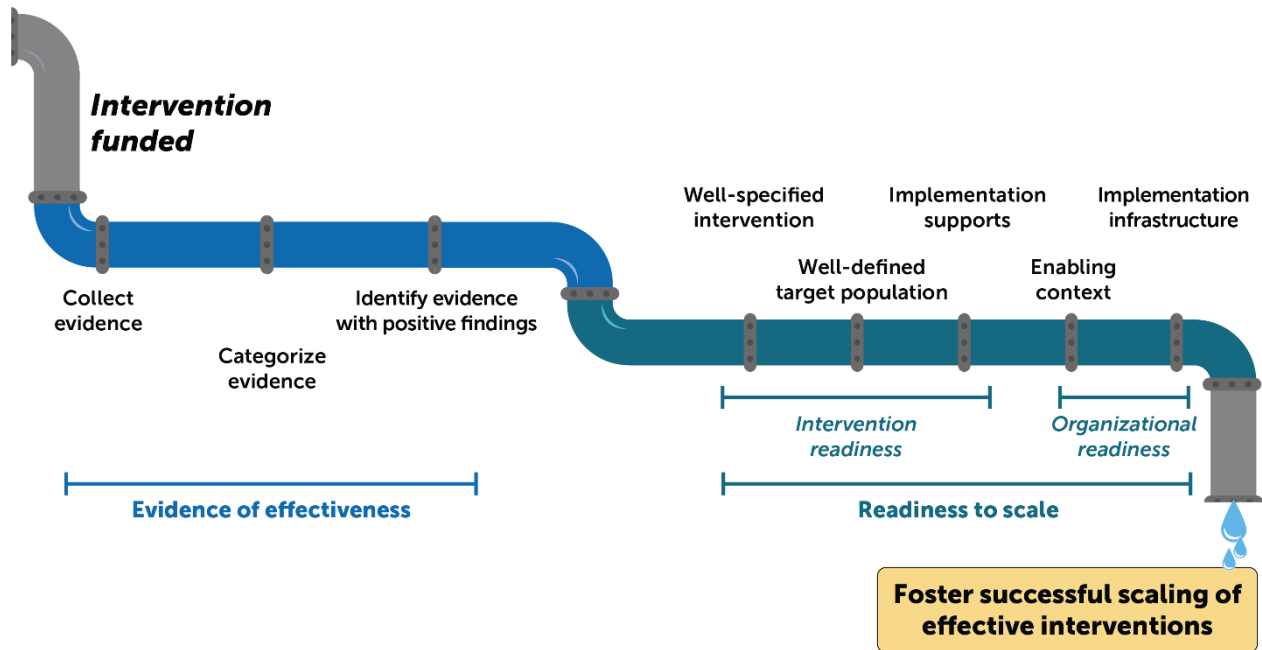
Succinctly, the SPREE process provides a framework that funders can use to understand whether the interventions and organizations they fund demonstrate the conditions for successful scaling—meaning positive outcomes for a large number of people—are in place. The conditions for successful scaling include both offering an effective intervention *and* having the procedures and processes in place to ensure that it can be implemented as intended after scaling (Figure I.3). If either part is missing from the formula, funders' goals of improving outcomes for a larger number of people may not be achieved.

Figure I.3. Improving outcomes for more people

Source: Adapted from Bertram et al. (2001).

B. Purpose of this guide

Drawing on the knowledge generated from applying the SPREE process to assessing AmeriCorps' funded organizations and interventions during the SEBM project, this guide provides five key recommendations that will help funders identify which of their funded interventions are effective, enhance their knowledge base on scaling them, and pursue scaling. Recommendations are as follows:

1. Identify or build evidence of effectiveness for the intervention

2. Prepare to scale: Ensure the intervention is ready for scaling

3. Prepare to scale: Ensure the organization is ready to scale the intervention

4. Prepare to scale: Anticipate and plan for challenges

5. Support the intervention and organization during scaling

For each recommendation, the guide frames the issue and describes what might need to be done to implement the recommendation. Examples from the experiences of AmeriCorps grantees show how the issues have played out in the field. We also provide specific examples of what funders can do to help support these recommendations. For each recommendation, we also list resources developed by this project to help funders and their grantee organizations build evidence that their interventions are effective, get ready to scale, and address challenges and support scaled interventions.

Although recommendations are general and can apply to different types of scaling, some resources might need to be tailored based on the type of scaling that is relevant for a funder and its grantee organization (Fixsen et al. 2005). The SEBM project has focused on three types of scaling: (1) expansion, (2) replication, and (3) adaptation. Expansion extends the intervention to more people in the same target population in the same location.

Considerations as you read this guide

- The recommendations and resources contained in this guide were developed with a focus on AmeriCorps grantees' use when scaling their interventions; however, they may also be useful to a broader audience of funders.

- The recommendations and resources are based on successful scaling principles that have emerged from research.

- When tailoring resources, grantees should ensure that the general principles in which the resources are grounded are still applicable and relevant.

Successful expansion requires the intervention and the organization to serve a larger number of participants than before with the same service quality and in a manner demonstrating fidelity to the intervention model's design. Replication extends the intervention to the same target population, but in a new location. Successful replication requires the intervention and the organization to maintain service quality and fidelity to the intervention in the new location. Adaptation extends the intervention to a new target population. Successful adaption requires the organization to change the intervention in a way that maintains beneficial outcomes for the population being served.

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II. Recommendation 1: Identify or Build Evidence of Effectiveness for the Intervention

Before an intervention is scaled to reach a larger number of people, funders should first determine if the intervention has demonstrated effectiveness for the population it initially targets. Funding the scaling of an intervention is of value only if the intervention has been shown to improve participants' outcomes. Although funders and their grantee organizations might desire to scale an intervention based on observed improvements in participants' outcomes, funders and grantees should confirm that the improvements are due to the intervention and not other factors. By either reviewing evidence produced by third-party evaluators and unbiased sources, or helping grantee organizations conduct their own rigorous evaluations, funders should seek to establish which interventions produce beneficial outcomes for their target populations before scaling those interventions.

A. What needs to happen

Whether seeking to identify or build evidence for their intervention's effectiveness, funders can use research and data to obtain a thorough understanding of how the intervention operates, identify what improvements are needed to make it effective, and show how it affects the participants being served. Five steps can guide how funders should approach this issue:

- **Make sure grantee organizations have defined their interventions.** Research and evaluation can help funders and their grantee organizations continuously improve interventions in addition to providing evidence of its effectiveness. A well-articulated theory of change is central to this effort because it defines an intervention and builds an understanding of how intervention activities change participant behaviors in ways that improve outcomes. It provides a road map that identifies the human, financial, and physical resources (inputs) required to implement the

Building evidence: The experience of one AmeriCorps grantee

Parent Possible, an AmeriCorps grantee, has participated in the design and evaluation of a possible adaptation to Home Instruction for Parents of Preschool Youngsters (HIPPY), a home visiting intervention for parents of young children. Parent Possible and the intervention developer, HIPPY USA, recently began pilot testing an adaptation of the intervention called HIPPY for Friends, Families, and Neighbors in two sites in Colorado.

Although HIPPY is typically delivered to parents of young children, under this adaptation, home visitors delivered HIPPY activities to nonrelative home-based childcare providers, as well as friends and family members who provide care for children while their parents are working. Typically, home visitors met with caregivers who watch two or three children in their homes and shared activities that the caregivers could perform with the children in their care. Home visitors delivered 15 activities in 30 weeks, offering one activity every other week (as opposed to 30 activities weekly, as the evidence-based HIPPY curriculum requires).

Parent Possible personnel reported some early implementation successes and challenges in piloting this adaptation. For example, one site made additional modifications to this adaptation of HIPPY, by meeting with caregivers as a group rather than one on one. This facilitated connections among the caregivers, which caregivers found to be beneficial, according to grantee personnel. If HIPPY USA chooses to disseminate this adaptation more broadly, a grantee personnel member said that the grantee might make recommendations to HIPPY USA to incorporate a networking aspect into the adaptation for the caregivers.

intervention's critical components (activities) that result in services provided (outputs) that ultimately increase the desired outcomes. Funders might want to require including a theory of change framework in its solicitations for funding and review the framework to ensure the components are well-defined and the overall theory of change appears to be sound.

- **Build the groundwork for the evaluation.** A funder can help build research evidence and use it to make decisions if the funder has a culture of measurement, learning, and evaluation in place. Such a culture requires leadership, management, and staff to develop a common understanding about the value of measurement and evaluation in decision making and to agree on what constitutes evidence of an effective intervention (Austin and Claassen 2008a). Having such a culture also strengthens grantees. Although some grantees might have an established culture of learning that includes measurement and evaluation, others might require a cultural change to accommodate evidence-based decision making. Funders can provide grantee organizations with funding or other support to help them understand how evaluations can be used for improvement as well as decide whether to continue an intervention (Austin and Claassen 2008b).

- **Devote resources for grantee organizations to conduct evaluations.** Evaluations require financial and personnel resources. Although there may be trade-offs between dedicating the funds necessary for an evaluation and providing resources for implementation, using information from an evaluation—ideally, conducted by an unbiased, third-party evaluator—for data-driven decision making increases the likelihood that the funder's goals are achieved for producing beneficial outcomes for program participants. Recognizing that evaluations take financial, personnel, and other resources (such as subcontracts to third-party evaluators), funders should seek to devote sufficient resources to support organizations in conducting evaluations.

- **Promote or encourage use of rigorous evaluation methods.** Most interventions have testimonies from participants stating how the intervention changed their lives, but such anecdotal evidence does not provide convincing evidence that the intervention caused those changes. To demonstrate that the intervention caused improvements in participants' outcomes, evaluation research must meet industry standards for rigor and objectivity. Rigorous research studies that establish causal impact provide the strongest evidence about whether a program improved the outcomes that it intended to improve.

How can funders help build evidence of effectiveness?

Funders have a vested interest in ensuring that interventions are likely to help participants improve their outcomes. When funders make decisions about which applications for funding they will support, they could ensure that adequate weight is placed upon whether or not the funding applicant demonstrates that the intervention to be implemented or scaled has evidence of effectiveness. To foster knowledge about interventions with evidence of effectiveness, funding announcements could highlight clearinghouses that provide information about effective interventions, such as the U.S. Department of Education's What Works Clearinghouse (WWC), the U.S. Department of Labor's Clearinghouse for Labor Evaluation and Research (CLEAR), the U.S. Department of Health and Human Services' Home Visiting Evidence of Effectiveness (HomVEE) project and Pathways to Work Evidence Clearinghouse, and the Pew Charitable Trusts' Results First Clearinghouse Database. Funders also could consider dedicating portions of their funding to support the building of evidence about effectiveness, if they do not already do so.

Funders can develop and provide information, resources, and guidelines to help organizations understand the standards for producing such rigorous research.

- **Facilitate continuation of the cycle, as needed.** If an evaluation does not demonstrate that the intervention is effective, the theory of change can help the funder and grantee organization identify why that might be the case and how the intervention can be improved. After making changes to improve the intervention, funders should again engage in supporting evaluations to establish intervention effectiveness. Research and evaluation can be viewed as part of an ongoing, cyclical process of service delivery, assessment, and adjustment to ensure that resources are used effectively in efforts to improve participants' lives.

B.   Resources from the SEBM project

The SEBM project developed five resources to help funders and their grantee organizations engage in research and evaluation to continuously improve interventions and demonstrate their effectiveness:

"Evidence of Effectiveness in AmeriCorps-Funded Interventions" (Richman et al. 2020). This report summarizes three years of Mathematica assessments of AmeriCorps' State and National and SIF grants to identify which AmeriCorps-funded interventions had demonstrated evidence of effectiveness, defined by industry standards for evaluation rigor and objectivity.

"How to Fully Describe an Intervention" (Maxwell 2019). This practitioner's guide was designed to help organizations thoroughly describe their intervention and communicate the following to potential funders or stakeholders: (1) the intervention model as it was designed, (2) the intervention as it is implemented, and (3) the parts of the intervention and the population that were evaluated and its effectiveness.

"What Makes for a Well-Designed, Well-Implemented Impact Study" (Anderson and Maxwell 2019). This practitioner's guide was designed to help organizations ensure that their evaluators produce high quality impact studies that provide evidence about whether an intervention is effective and whether it is worth scaling to reach more people.

"Baseline Equivalence: What It Is and Why It Is Needed" (Anderson and Maxwell 2018). This practitioner's guide was designed to help organizations work with researchers to design an impact study with baseline equivalence—that is, a study with two groups of individuals that are (from a statistical perspective) identical to each other except that one group, a treatment group, can receive the intervention, whereas the other group, a comparison group, cannot.

"Making the Most of Data" (Friend and Needels 2019). This practitioner's guide highlights issues for organizations to consider when using, collecting, and managing their data.

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III. Recommendation 2: Ensure the Intervention is Ready to Scale

Implementation science literature points to three conditions that an intervention must have to enable it to be scaled with fidelity—that is, with strong correspondence between the intervention as intended and as implemented. First, the intervention needs to have its core activities clearly specified so they can be implemented in a manner that will achieve beneficial impacts on participants' outcomes that are at least as large as those identified through prior rigorous research about the intervention's effectiveness. This first condition—specificity of the intervention activities—should be accompanied by a clear description of the target population to be served by the intervention (the second condition) and by the supports needed to ensure that the intervention is implemented with fidelity (the third condition).

A. What needs to happen

Funders should critically assess whether an intervention is ready for scaling before scaling it. Doing so can help with strategic planning, such as making funding decisions or understanding what additional supports and resources grantee organizations may need to prepare for scaling. Specifically, they should ascertain whether the grantee organization's intervention is well-specified, has a well-defined target population, and has adequate implementation supports in place.

The intervention must be well-specified. This includes having a clear understanding of the following:

- **The content of the intervention**—that is, the services or activities that make up the intervention (Blase and Fixsen 2013). Clear specification of the core elements of an intervention can boost the likelihood of success with scaling efforts (Bauman et al. 1991; Dale et al. 2002; Winter and Szulanski 2001). The specification of the intervention's content could follow naturally from the development of the theory of change (see Recommendation 1), which guides how activities are structured to change participants' behaviors and, ultimately, their outcomes.

- **How different intervention services will be delivered,** such as through face-to-face or electronic communications. There could be differences in the effects of a service based on how it is delivered

> ### Specifying and monitoring an intervention: The experience of an AmeriCorps grantee
>
> The Child Abuse Prevention Council (CAPC), an AmeriCorps grantee, is part of a countywide collaborative network of partners (called the Collaborative) that implemented the Birth and Beyond (B&B) intervention at nine local Family Resource Centers (FRCs) in Sacramento, California. B&B has the overarching goal of educating and supporting parents in order to reduce their risk of child maltreatment and consists of home visits or group classes in parenting education, crisis intervention services, and enhanced services to support families. The Collaborative formed a Policy and Procedure Subcommittee that had the responsibility of creating a standard program manual that defined the intervention components and set the standards and procedures for implementing B&B with fidelity. The Subcommittee revisits the manual every year and makes updates accordingly.
>
> B&B's implementation fidelity is monitored with a comprehensive system where FRC supervisors conduct joint visits with home visitors, observe group classes, and perform quality assurance calls with a sample of families. Supervisors then share evaluative feedback with frontline personnel. Individual FRCs also perform additional monitoring, such as reviewing individual cases or reviewing paperwork.

(that is, its mode of delivery). For example, participants might better absorb information presented when an intervention service is conducted in a one-on-one setting, rather than with a group. This, in turn, could influence the extent to which the participants incorporate the information into their future decision making.

- **The intensity with which services are to be delivered**, including for how many minutes or hours participants are to receive each service, the frequency with which they do so, and over what total time period they are to receive it. For example, an intervention might specify that participants are to receive a one-hour service twice a week over a period of six months, starting right after the participants' enrollment in the intervention.

- **Workforce needs**, including which personnel will deliver each service, qualifications needed for serving in that role, and other details such as participant caseloads for each of the personnel providing the service. The specification of the needs should include anyone involved in the implementation of the intervention's services, regardless of whether they are paid personnel or volunteers, and regardless of their organizational affiliation.

- **Setting for service delivery,** including the location and venue. The location describes the geographic region and indicates whether the setting is rural or urban. The venue describes the place where activities occur, such as the service provider's office facilities, a community center, the participants' homes, or a school. The services for an intervention may take place in different venues; use of each venue could involve different logistical, administrative, financial, or other considerations—such as the cost of renting space, the time personnel would need to spend traveling to and from the space, and the effect of the space on participants' ability to access services.

- **Intervention completion criteria**, including the requirements for being considered a participant in the intervention. The criteria also should specify under what conditions a participant is considered to have completed the intervention, such as having achieved one or more milestones or having been in the program for a certain length of time.

The intervention must have a well-defined target population. This is critical to intervention readiness for scaling because needs vary across populations, and the intervention should be designed to serve the needs of a specific population (U.S. Centers for Disease Control and Prevention n.d.; Community Tool

> ### How can funders foster an intervention's readiness for scaling?
>
> Funders can take concrete steps to determine whether the interventions they fund are ready to be scaled to help support their grantees as they prepare to scale their interventions. To identify the extent to which an intervention is ready to scale, funders could use the Scaling Checklist: Assessing your Level of Evidence and Readiness (SCALER), which was developed for the SEBM project. The SCALER is a scaling planning tool that can help to identify the strengths, weaknesses, and gaps of the interventions that practitioners hope to scale, as well as identify potential ways to strengthen the intervention as needed. Funders of intervention services could support efforts to foster an intervention's readiness for scaling in a variety of ways, including encouraging (or requiring) use of the SCALER by funded practitioners. Based on the SCALER results, both funders and practitioners could determine whether it is feasible to try to strengthen an intervention (such as through the provision of technical assistance). However, the results might suggest that resources and efforts could be better spent pursuing the use of a completely different intervention.

Box n.d.). Defining the target population involves being clear about (1) attributes that are essential for people to be selected for participation in the intervention and (2) attributes that disqualify people from participating (Garg 2016; McElroy and Ladner 2014).

The intervention must have supports in place to scale with fidelity. These six types of supports help organizations implement and scale an intervention with fidelity: (1) implementation monitoring, (2) performance monitoring, (3) continuous quality improvement (CQI) processes, (4) personnel training, (5) communication systems, and (6) data systems. As a funder, requiring or recommending that grantee organizations have these supports in place can help ensure that the intervention retains fidelity to its model over time and delivers the beneficial outcomes for participants when it is scaled (Breitenstein et al. 2010; Fixsen et al. 2005). Having a complete and operational description for each implementation support, including a clear, comprehensive specification of its goals and purposes and the details of each key activity or task within it, can ensure that grantee personnel are conducting activities in a consistent way. Effective documentation of implementation support policies and procedures coupled with effective communication of them to personnel can help make sure supports are carried out completely and consistently. For grantee organizations, this documentation and communication can be especially important when there is turnover in personnel. Periodically reviewing implementation support policies and procedures and revising them as needed can be useful as well, to ensure that there is faithful adherence to them and to identify necessary changes.

B.   Resources from the SEBM project

The SEBM project developed four resources to help funders and their grantee organizations ensure that an intervention is ready to scale:

"Planned Scaling Activities of AmeriCorps-Funded Organizations" (Selekman et al. 2020). This document presents a framework that identifies five conditions necessary to successfully scale an intervention, including the three that are related to intervention readiness and are the focus of this recommendation.

"How to Structure Implementation Supports" (Eddins and Needels 2019). This practitioner's guide was designed to help organizations set up implementation supports in a way that facilitates implementing an intervention with fidelity.

"Making the Most of Data" (Friend and Needels 2019). This practitioner's guide was designed to help organizations enhance their data collection capabilities and make the most of the valuable data they collect. It highlights factors that organizations should consider when assessing whether an existing data system is meeting their needs, and it provides guidance for obtaining a system or modifying an existing one to meet those needs.

"Scaling Checklists: Assessing your Level of Evidence and Readiness (SCALER)" (Richman et al. 2020). In addition to providing background information that can help practitioners understand what is necessary for successful scaling, this document consists of a series of checklists that practitioners can use to identify the strengths, weaknesses, and gaps of the interventions they hope to scale. It also includes references to practical resources that will help practitioners identify potential ways to shore up the weaknesses and fill the gaps, so that their interventions are ready for scaling.

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IV. Recommendation 3: Ensure the Organization is Ready to Scale the Intervention

Successful scaling of an intervention requires both a suitable intervention that is ready to be scaled (as described within Recommendation 2) and an organization with the capacity to successfully implement it. Taking the intervention from plans and descriptions to on-the-ground reality requires personnel and other resources. Implementation science literature points to two conditions that an organization must have to ensure that it will be able to scale an intervention. The organization must have both an implementation infrastructure and a context that enable successful scaling.

A. What needs to happen

Just as funders should ensure that interventions they are supporting are ready to scale, they need to critically assess whether grantee organizations or those applying for funding are likely to be successful when implementing or scaling an intervention. Using information solicited from grantee (and potential grantee) organizations through responses to grant or funding announcements, funders should look for organizations that have the following in place:

- **An implementation infrastructure** that can provide the resources necessary to deliver, support, and manage the intervention (Bernfeld 2006; Fixsen et al. 2009; Klingner et al. 2003). Key components include sufficient funding, materials, physical space, and workforce, as well as an appropriate human resources system. The infrastructure should be able to support all aspects of intervention delivery—even the activities that do not pertain directly to engagement with participants. Identifying resources to conduct activities that are related directly to delivering services, which are likely

Using partnerships to build an implementation infrastructure: The experience of an AmeriCorps grantee

To help sites implement Home Instruction for Parents of Preschool Youngsters (HIPPY)—a home visiting intervention for parents of young children—in Colorado, AmeriCorps grantee Parent Possible and HIPPY USA, the intervention developer, provide materials both physically and virtually. HIPPY USA provides the curriculum and training documents for home visitors and coordinators to facilitate intervention scaling. Since HIPPY USA requires sites to use its materials for service delivery, grantee and local agency personnel acquire the materials by purchasing copies or printing electronic versions from HIPPY USA's online resource library. Personnel can also follow guidance provided in the online resource library to prepare curriculum packets for each home visitor to use with their families. Parent Possible coordinates the orders of materials—for each family, typically 15 to 30 packets of activities; a set of 9 children's books; and a set of 20 manipulative shapes—from HIPPY USA for local agencies to use.

Parent Possible has also adapted some of the intervention materials based on local circumstances. For example, because some home visitors are primarily Spanish speaking, materials on training and data collection have also been translated into Spanish by the grantee. As a result, some local agencies do not use the original, English-language materials.

to be clearly spelled out in the intervention description, could be straightforward. Other activities, such as indirect support and management tasks, might not be fully specified by the intervention description; therefore, a funder might have to require a clear description of whether resources are in place that are necessary behind the scenes for effective service delivery. Similarly, materials and physical space should include those necessary for direct service delivery to participants and those to

be used to monitor and manage service delivery. Space might be necessary for holding meetings to train personnel, communicate about policies and procedures, and monitor service delivery. Space also might be needed to store materials when they are not in use. Furthermore, the human resource system will need to be able to handle the selection, training, and supervision of all personnel, from frontline to managers.

- **An enabling context,** which means there is a culture that supports innovation, learning, and improvement for an intervention. The relevant culture includes the organization that is leading the scaling efforts, its partner organizations (including funders), and other stakeholders in the community, such as political leaders, advocacy groups, and community members. An enabling context could arise as a result of an organization's past efforts to address challenges that arose with intervention implementation (National Implementation Research Network n.d.). Regardless of the way in which this culture comes about, however, it is important for an organization's structures, roles, and functions to facilitate service delivery and beneficial impacts on participant outcomes. It is likely that, when operating in an enabling context, personnel implementing an intervention would feel supported by their organizational leaders, and they would describe their environment as collegial and collaborative.

> **How can funders foster organizational readiness for scaling?**
>
> The actions funders could take to ensure that an organization is ready to scale an intervention overlap to some extent with those that will foster an intervention's readiness to be scaled. For example, funders could encourage or require practitioners to use the SCALER, which was described as part of Recommendation 2. Resources and efforts could be directed at the aspects of organizational infrastructure that are identified as needing improvement. Additional actions could be taken to foster collaboration by organizations and other stakeholders within a community to identify and work toward a shared vision.

Furthermore, other organizations and stakeholders can influence whether scaling is enabled or hindered. Funders might want to carefully examine the partnerships that grantee organizations maintain or pursue while scaling an intervention. Two or more organizations can constructively partner to implement an intervention by leveraging each other's organizational strengths and resources. However, problems might arise if the organizations' missions and priorities are not well-aligned. Furthermore, organizations that are implementing an intervention can benefit immensely from the support of external stakeholders, who might provide funding, publicity, volunteers, or other resources. That support should not be taken for granted, however, because the priorities of those stakeholders might change over time. Concerted effort to retain, and even boost, stakeholder enthusiasm for the organization and its intervention could be valuable for the long-run success of an intervention.

B. Resources from the SEBM project

The SEBM project developed three resources to help funders and their grantee organizations ensure that they are ready to scale interventions:

"Planned Scaling Activities of AmeriCorps-Funded Organizations" (Selekman et al. 2020). This document presents a framework that identifies five conditions necessary to successfully scale an intervention, including the two that are related to organizational readiness and are the focus of this recommendation.

"Scaling Evidence-Based Interventions: Insights from the Experiences of Three Grantees" (Needels et al. 2019). Based on a cross-site analysis of information primarily from site visits to three AmeriCorps-funded grantees, this report presents insights into the approaches that grantees and their partners took to scaling their interventions, and the organizational and implementation aspects of how they scaled.

"Build Organizational Capacity to Implement an Intervention" (Jones and Needels 2019). This practitioner's guide was designed to help organizations build their capacity to be ready to implement their desired intervention effectively. The guide describes the specific components of the implementation infrastructure and the enabling context that an organization needs to implement a planned or current intervention. It also explains how organizations can develop those components based on reviewing the details of an intervention, and it provides a hypothetical example of the process.

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V. Recommendation 4: Anticipate and Plan for Challenges

Despite the best efforts of personnel at an organization that is scaling an intervention, challenges that risk the success of scaling are likely to arise because of factors outside of their control. The potential challenges are numerous, but common challenges with scaling could include turnover among personnel, changes in partnership arrangements, barriers to participant recruitment and enrollment, or fluctuations in funding. Although the details of the challenges that arise will be difficult to predict in advance, it may be beneficial for funders to help grantee organizations anticipate and plan for challenges to avoid or mitigate their effects.

A. What needs to happen

Because of the distinctiveness of both the challenges that could arise during scaling and the resources that could be offered to tackle them, there is no one-size-fits-all approach for identifying and planning for challenges. However, it stands to reason that personnel at organizations that strive to prepare for challenges will be better positioned when challenges arise if they are willing to learn from the experiences of others and use resources that are available to them. Funders can encourage grantee organizations to conduct these types of learning activities. Organizations might use these activities to supplement their own experiences successfully tackling past challenges—an important feature of the enabling context that fosters an organization's preparedness to scale an intervention (see Recommendation 3). To anticipate and plan for challenges, funders might facilitate the following activities for their grantee organizations:

> **Having a data system in place to help identify implementation issues: The experience of one AmeriCorps grantee**
>
> United Ways of Iowa (UWI), an AmeriCorps grantee, implemented the Reading Corps intervention in Iowa. Reading Corps is a standardized literacy intervention that provides 20 minutes of one-on-one, in-school reading tutoring each school day for students enrolled in pre-K through 3rd grade to help them achieve reading proficiency. Reading and Math, Inc. licenses Reading Corps to other organizations, such as UWI, to replicate it in other locations. UWI draws upon the existing resources that Reading and Math, Inc. provides, such as its training and technical assistance, data system, and intervention materials.
>
> For example, UWI used the data system built and managed by Reading and Math, Inc. UWI personnel found the system easy to operate and used it to track students' weekly progress assessments and other implementation processes, such as tutor caseloads and student-specific amounts of tutoring received. Using this existing resource helped UWI identify and address implementation-related issues. For example, UWI reported using the intervention data system to identify that some internal coaches (who oversee tutors at their schools) were not regularly observing tutors but were instead observing tutors several times in a short period of time.

- **Learn from the experiences of others.** Organizations that have successfully scaled interventions with evidence of effectiveness have already encountered and tackled challenges, and they have insights about how to weigh trade-offs when making decisions about issues that are likely to arise during other scaling situations. Funders can facilitate such learning through offering peer learning exchanges (such as site visits, or connecting grantees that funders know are having similar challenges) or hosting cross-grantee forums where organizations have opportunities to talk with one another (see the box on next page for more details). The SEBM project's process study explored the experiences of three AmeriCorps-funded organizations when they scaled interventions, including the

challenges they faced and how they addressed them. For example, the organizations had to determine how many and what types of personnel should be in place as program implementation ramped up at new sites, balancing between (1) having enough personnel at the new sites to implement the intervention effectively and (2) avoiding having to support idle personnel as the kinks in procedures at the new site are being worked out. In addition, when one of these organizations adapted an intervention to serve a new target population with distinctive linguistic and cultural needs, its managers identified behind-the-scenes challenges, such as the need for training materials for personnel who were not fluent in English. These examples can provide rich illustrations of the trade-offs to consider when scaling, including adapting implementation supports, such as training, communication, and supervision.

How can funders help address scaling-related challenges?

Funders can help their grantees develop plans to avoid or mitigate the effects of challenges. For example, they could support cross-grantee forums where grantees can learn from each other, also known as communities of practice. Such forums could enable organizations to share their experiences implementing and scaling interventions, including the challenges they faced, their strategies to overcome them, and the lessons they learned to reduce future risks. An intervention developer also might have an interest in facilitating this type of communication among organizations scaling its intervention. In addition, these types of forums can be used to share innovative ideas, which can ultimately lead to improvements in interventions and/or the implementation of them, so that participants' outcomes are improved.

- **Draw on existing resources.** Funders can share a number of resources with their grantee organizations to help them learn about other organizations' experiences implementing and scaling interventions. If an organization is scaling an intervention that has been produced by an external developer, the developer may already have resources that could be used for guidance about common challenges and potential solutions. In fact, the external developer likely would want to ensure that the implementation and scaling of its intervention go as smoothly as possible. Regardless of whether the intervention was externally developed or home grown, resources such as the clearinghouses for research (see Recommendation 1) could be valuable for helping practitioners identify and plan for challenges that will arise with scaling. For example, the WWC makes practice guides available to help educators address challenges in their classrooms and schools (see https://ies.ed.gov/ncee/wwc/PracticeGuides). The guides are based on practitioners' experiences, reviews of research, and the expert opinions of a panel of nationally recognized experts.

B. Resources from the SEBM project

The SEBM project developed four documents that provide insights about the implementation experiences of three AmeriCorps-funded grantees. The first document presents findings from a cross-site analysis of information drawn primarily from site visits to these grantees, focusing on how the grantees and their partners approached scaling their interventions. Each of the other three documents focuses in depth on one of the three grantees, drawing on both the information used for the cross-site analysis and information gathered through telephone calls with grantee and partner personnel about a year after the site visits were conducted. The grantee-specific documents focus on progress toward scaling since the site visits, changes

to the interventions that occurred during the additional scaling efforts, challenges that arose, and strategies to address the challenges.

"Scaling Evidence-Based Interventions: Insights from the Experiences of Three Grantees" (Needels et al. 2020). This report focuses on the approaches that the three grantees included in the SEBM project's process study took while scaling, and their experiences during scaling. Although the report focused on these three grantees, its insights might be more broadly applicable to a range of interventions and organizations, as well as implementation through methods other than scaling.

"Scaling the Home Instruction for Parents of Preschool Youngsters (HIPPY) Intervention: Insights from the Experiences of Parent Possible" (Anderson et al. 2020). This report presents a case study of one of three grantees in the SEBM project process study: Parent Possible. This grantee implemented in Colorado the HIPPY intervention, a home visiting intervention that seeks to engage the parents of young children with activities designed to improve children's development in reading, math, science, motor, and language skills.

"Scaling the Birth and Beyond (B&B) Intervention: Insights from the Experiences of the Child Abuse Prevention Council (CAPC)" (Eddins et al. 2020). This report presents a case study of one of three grantees in the SEBM project process study: CAPC. This grantee implemented in Sacramento, California, the B&B intervention, an evidence-based parenting education and support intervention designed to reduce child maltreatment.

"Scaling the Reading Corps Intervention: Insights from the Experiences of United Ways of Iowa" (Jones et al. 2020). This report presents a case study of one of three grantees in the SEBM project process study: United Ways of Iowa. This grantee implemented in Iowa the Reading Corps intervention, a standardized literacy intervention that provides one-on-one tutoring to students enrolled in pre-K through 3rd grade to help them achieve reading proficiency.

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VI. Recommendation 5: Support the Intervention and Organization During Scaling

Preparing to scale, which involves establishing the evidence of effectiveness for an intervention and ensuring that both the intervention and the organization scaling it are ready to scale, involve a considerable amount of time, resources, and devotion. Even after scaling readiness is established, the necessary work for scaling the intervention is only beginning.

A.   What needs to happen

Even when funders and their grantee organizations take all the necessary steps to anticipate challenges and develop plans accordingly, many internal and external challenges can arise during scaling. How funders and their grantee organizations navigate these challenges can impact whether they scale their interventions successfully. Both the intervention and the organization scaling it must have supports in place to help maintain their scaling efforts and achieve the ultimate goal of generating beneficial impacts on participants. Although these supports can take on different forms and can be specific to the individual needs of an organization, scaling support should include buy-in, communication, and processes to monitor how well scaling is going. To help support the intervention and organization during the scaling process, funders might seek to do the following:

> **Leadership providing support and vision for scaling: The experience of one AmeriCorps grantee**
>
> The way in which the Birth and Beyond (B&B) intervention was scaled in Sacramento, California, to support local parents and reduce their risk of child maltreatment was shaped by the leadership at the Child Abuse Prevention Council (CAPC) and other network partner organizations (called the Collaborative). Grantee and frontline personnel reported how the Collaborative leadership not only strongly supported the need to adhere to the B&B intervention model and implement it with fidelity, but also recognized the need to add new components to it to secure the funding and political support needed for scaling. For example, Collaborative leaders were described as being a major catalyst for incorporating an additional evidence-based approach into B&B's home visitation services. Had this change not been made, the Collaborative may have needed to close one of its nine operating sites due to funding changes. Instead, this decision made by the Collaborative leadership helped to maintain their scaling efforts with the B&B intervention.

- **Help grantee organizations maintain support from their leadership, partners, and workforce members**. Scaling an intervention does not occur in a vacuum. It relies on the people involved in the scaling process—from the frontline personnel who are delivering the intervention services to the implementation teams who oversee the training and monitoring of the workforce, along with organization leaders and partners who help provide the guidance and support for the scaling to realize its objectives. Although specific individuals within an organization or partners can change over time, a strong commitment to scaling the intervention must remain. Maintaining strong buy-in from each of these key groups of stakeholders makes the difference in whether scaling efforts are sustained, and funders might want to periodically check in on or discuss with grantee personnel whether buy-in is being maintained. For example, low engagement from frontline personnel can impact whether the scaled intervention is being implemented with fidelity, and low commitment from organization leaders could result in the organization shifting its priorities.

- **Participate in continuous monitoring to understand how scaling is unfolding.** Scaling an intervention—whether it is an organization serving more individuals in a preexisting setting or operating in new settings—requires an adherence to the intervention model for which research has demonstrated evidence of effectiveness. An extensive monitoring system with defined schedules and personnel roles provide the temperature gauges that can help organizations assess the extent to which they are maintaining fidelity to the intervention model during the scaling process. Funders can offer grantees technical assistance on how to monitor implementation fidelity as well as review performance monitoring metrics with grantees on a regular basis. If organizations are making adaptations to their interventions as they scale, such as adding new services or modifying existing ones in an attempt to better serve their target population or deliver services to new populations, consistent monitoring can help determine if these changes are being implemented as intended. A monitoring system can also foster continuous quality improvement with an intervention's implementation, which can help sustain successful scaling efforts.

- **Ensure organizations use a data system that continues to meet an organization's needs when scaling.** Data systems are a vital component for tracking and measuring the intervention's implementation as an organization scales it. During the scaling process, these data systems act as the central repository of information that can help monitor progress toward performance milestones, identify areas needing continuous quality improvement, collect program evaluation data, and help report summary information to funders. However, the functionality that an organization may need from its data system might change over time as an intervention is scaled, and opportunities and challenges can arise while the organization addresses its changing needs. Making enhancements to an existing data system or selecting a new data system while scaling can help organizations capture new data, streamline internal processes, or improve upon access to the data to support its use at a larger scale, which can facilitate the intervention's scaling. Funders can provide guidance on data systems to use, as well as resources and supports for how to get the most out of a data system's capabilities. When considering data system changes, organizations will need to take into account the additional training and support that workforce members will need for using the data system, the in-house expertise and resources needed to make the changes, and the potential for any disruptions in how the organization monitors the intervention's implementation during the data system transition.

> **How can funders support organizations during scaling?**
>
> Funders are in a unique position to support the successful scaling of interventions by providing focused guidance to their funded organizations. Many funders require organizations to submit annual or semiannual reports on their progress and challenges; they also use regular meetings (for example, on a monthly or semimonthly basis) for status updates. These points of contact with organizations that are scaling interventions can be leveraged by funders to systematically identify areas where the organizations need greater supports as they scale (for example, technical assistance on measuring and monitoring intervention implementation fidelity, tip sheets on communication system best practices). Providing trainings to program officers overseeing funded grants on the essential elements for successfully scaling an intervention will enable those officers to provide in-depth support to grantees. For example, if organizations are using the SCALER to prepare for scaling their interventions, program officers can be trained on this tool to help them monitor their portfolio of grantees on the various intervention and organization conditions needed to scale an intervention.

- **Commit to evaluations to understand current scaling and facilitate future scaling efforts.** The ultimate aim for scaling an intervention is to maintain the level of effectiveness the intervention has on participant outcomes. Embracing the importance of and conducting an evaluation of an organization's scaling efforts can help the funder and the organization know if they are achieving this objective. Funders and their grantee organizations can also use evaluations to test intervention adaptations, which they might pursue because of an interest in serving a new target population or otherwise modifying the intervention because they believe doing so could help bolster participant outcomes. When pursuing adaptations, funders and their grantee organizations should evaluate the adapted intervention to understand if it is still maintaining the same beneficial effects for its participants. Evaluations can also help funders and their grantees identify new ways for serving existing or new target populations and help build a larger body of evidence that demonstrates the intervention's effectiveness. Funders can provide resources and time for organizations to conduct evaluations, and organizations may find that commitment to evaluation can facilitate future scaling because the generation of new, rigorous evidence can lead to additional scaling of the intervention. In addition to demonstrating that the intervention works, positive results from scaling an intervention can enhance the organization's visibility, increase community buy-in to participate in the intervention, and generate new funding for the intervention. Negative results can help funders and grantee personnel diagnose problems and adapt their efforts so that, ultimately, they are more effective at helping participants to have better outcomes.

B. Resources from the SEBM project

The SEBM project developed four resources that can help organizations understand what supports are needed for the intervention and within the organization to help maintain the organization's scaling efforts. These resources have already been mentioned in previous sections and are listed again here:

"Scaling the Home Instruction for Parents of Preschool Youngsters (HIPPY) Intervention: Insights from the Experiences of Parent Possible" (Anderson et al. 2020). This report presents a case study of one of three grantees in the SEBM project process study: Parent Possible. This grantee implemented in Colorado the HIPPY intervention, a home visiting intervention that seeks to engage the parents of young children with activities designed to improve children's development in reading, math, science, motor, and language skills. The report describes the intervention and organization supports that facilitated Parent Possible's scaling of the HIPPY intervention, and barriers that were experienced.

"Scaling the Birth and Beyond (B&B) Intervention: Insights from the Experiences of the Child Abuse Prevention Council (CAPC)" (Eddins et al. 2020). This report presents a case study of one of three grantees in the SEBM project process study: CAPC. This grantee implemented in Sacramento, California, the B&B intervention, an evidence-based parenting education and support intervention designed to reduce child maltreatment. The report describes the intervention and organization supports that facilitated CAPC's scaling of the B&B intervention, and barriers that were experienced.

"Scaling the Reading Corps Intervention: Insights from the Experiences of United Ways of Iowa" (Jones et al. 2020). This report presents a case study of one of three grantees in the SEBM project process study: United Ways of Iowa. This grantee implemented in Iowa the Reading Corps intervention, a standardized literacy intervention that provides one-on-one tutoring to students enrolled in pre-K through 3rd grade to help them achieve reading proficiency. The report describes the intervention and organization supports that facilitated United Ways of Iowa's scaling of the Reading Corps intervention and barriers that were experienced.

"Making the Most of Data" (Friend and Needels 2019). This guide was designed to help organizations enhance their data collection capabilities and make the most of the valuable data they collect. It highlights factors that organizations should consider when assessing whether an existing data system is meeting needs, and it provides guidance for obtaining a system or modifying an existing one to meet those needs.

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