

# Barriers and facilitators of implementation of evidence-based interventions in children and young peoples mental health care

A systematic review

# Rationale

The review is part of the BRIDGE SIRG output to advance the topic of implementation of evidence-based practice in children and young peoples health care

There is literature on the barriers and facilitators in this topic, but no review with pragmatic suggestion for solutions and action

# The Process

A librarian helped to refine our search terms and run the searches (updated September 2021) and after title and abstract screening by two reviews 26 studies were included

We included all study designs and included text and opinion pieces due to the diversity of the literature, all included studies were assessed for quality and found to be of high or moderate quality.

We used the PARHiS framework in the review to map the barriers and facilitators and focus on the solutions within the literature . We used PAHRiS as it focuses on the enablers and barriers and organisational rather than individual change and has a very practical approach

# Overview of the findings

## Barriers

There were a lot of commonalities within the barriers and facilitators which are consistent with the literature.

### Organisational level barriers

lack of resources, time, funding, high service demand, readiness for change/innovation, lack of supervision, senior engagement, levels of knowledge around EBP, lack of measurability, strategy, leadership, guidance, clarity, evidence of positive benefits

### Clinicians level barriers

Perceptions of EBP's, resistant to change/innovation, lack of training, competing priorities, lack of information or lack of access to information, disparity between research and practice, inadequate knowledge of EBP's, lack of accountability/responsibility, lack of infrastructure support, lack of continuous training and staff turnover, loss of skill

# Overview of the findings facilitators

Organisational facilitators were largely found to be the reverse of the barriers:

Connectedness of organisational resources, relatively priority for workloads, share priority of the change/innovation, accessible and available funding, leadership investment and supervision for the innovation/change, flexibility and regulatory mandate

Clinical level facilitators were found to be the openness of the clinicians to the change/innovation, training, skills and positive mentality, Knowledge of EPB and their use, positive experience of others using the change/innovation, ongoing training and education

# Highlights & Implications

- There was a lack of cohesion and not one specific model or theory stuck out in the literature
- Factors relating to facilitation appear lacking in the literature and this is something which the PAHRiS framework marks as a key component to successful implementation, but we made a point to suggest pragmatic changes to the barriers in order to create facilitation
- It is also noted that there is a real lack of joined up thinking between research and practice, and organisational and clinicians