



IMPLEMENTING ADMINISTRATIVE EVIDENCE BASED PRACTICES: LESSONS FROM SIX LOCAL HEALTH DEPARTMENTS

Administrative evidence based practices (A-EBPs) are agency level structures and activities positively associated with performance measures. A-EBPs have been shown to be effective in boosting performance and contributing to accreditation efforts, ultimately leading to improved population health. This qualitative study aimed to examine contextual conditions and differences in local health department (LHD) characteristics that influence implementation of A-EBPs, through 35 telephone interviews with directors and staff from 6 LHDs—3 of high and 3 of low capacity.

A-EBP DOMAINS



Workforce Development: (training, access to technical assistance)

“We can go to [a specific] conference, but anything else, we do on our own. It hasn’t always been like that, but it has the last several years.”

Leadership: (background, values, expectations, decision making)

“It’s important enough to administration that they have the time to do the research and to attend the academic classes or the trainings and things that they need to keep us current on best practices.”



Organizational Climate and Culture: (information access, support of innovation, learning)

“There are some up and coming individuals who have different ideas and different ways of doing things, but I can’t say at this point that it’s extremely well-received.”



Financial Practices: (allocation and expenditures of resources)



“There’s always a gap [between what we would like to have and what’s available]. As long as we’re on board and we recognize those challenges, we do the best we can to meet all those goals.”

Relationships and Partnerships: (interorganizational relationships, vision and mission)

“You have to have the community partners. Because if it’s community, then that means that you don’t do it by yourself.”



KEY FINDINGS

- High-capacity LHDs were more likely to mention strong leadership, partnerships, workforce development activities, financial flexibility, and an organizational culture supportive of evidence-based decision making.
- Communicative leadership helps to build organizational resiliency to setbacks.
- Strong /diverse partnerships, especially those with universities and academic institutions, increase availability of resources, knowledge, and expertise.
- Financial constraints affect both high- and low-capacity LHDs, but high-capacity LHDs seemed to be more optimistic about future outcomes.

IMPLICATIONS

- **Enhancing leadership skills** to foster more flexible environments supportive of innovation may increase capacity in LHDs.
- Policy makers and researchers should strive to offer **more easily accessible trainings, resources, and technical assistance** to improve A-EBP use.
- **Investments in A-EBPs** have the potential to increase readiness for national accreditation, improve overall LHD performance, and improve health outcomes in communities.
- **Further research** should be done to enhance resources in these five A-EBP domains.