

# The Impact of COVID-19 on Organizational Readiness to Implement MATCH

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## Research Aim

To understand the impact of the COVID-19 pandemic on the organizational readiness of community mental health centers (CMHCs) to implement the Modular Approach to Therapy for Children (MATCH), a CBT-based evidence-based practice (EBP), through the Learning Collaborative (LC) model.

## Background

- Organizational readiness for implementation may impact successful EBP implementation within CMHCs.
- The  $R=MC^2$  heuristic defines organizational readiness = an organization's **motivation** to implement an EBP x **general capacities** x **EBP-specific capacities**.
- Organizational readiness changes over time in response to the implementation context.
- The COVID-19 pandemic has introduced a novel implementation context that may impact organizational readiness.

## Method

- Respondents:** 252 senior leaders, clinicians, and related team members from 28 CMHCs across five state-sponsored LCs. Three LCs were impacted by the COVID-19 pandemic for at least one quarter.
- Predictors:**
  - COVID-19:** Whether the Readiness Diagnostic Scale (RDS) was administered during a quarter impacted by the COVID-19 pandemic.
  - Time:** The number of days since the start date of the LC to the date of RDS administration.
- Outcomes:** RDS domains and subdomains defined by the CMHC's a) **motivation** to implement MATCH, b) **general capacities**, and c) **MATCH-specific capacities**. The RDS was administered quarterly, with higher scores indicative of stronger readiness and capacity.
- Analysis:** Multi-level model controlling for time.

## Results

- Completing the RDS during a COVID-19 quarter significantly predicted stronger:
  - Motivation** ( $b = 0.46, t(27) = 2.76, p = .008$ ), driven by significantly stronger **compatibility** ( $b = 0.49, t(27) = 2.64, p = .011$ ). A COVID-19 x Time interaction revealed **compatibility** developed significantly slower during COVID-19 quarters ( $b = -0.01, t(27) = -2.32, p = .023$ ).
  - General capacities** ( $b = 0.39, t(27) = 2.72, p = .009$ ), driven by significantly stronger **structure** ( $b = 0.55, t(27) = 3.07, p = .003$ ), **organizational innovativeness** ( $b = 0.46, t(27) = 2.50, p = .017$ ), and **leadership** ( $b = 0.35, t(27) = 2.24, p = .032$ ).
  - Resource utilization** ( $b = 1.02, t(27) = 2.25, p = .031$ ), a subdomain of **MATCH-specific capacities**.

## The impact of COVID-19 on CMHCs:

Abrupt Transition to Telehealth



Revenue Losses



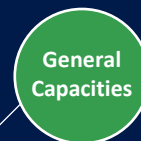
Increased Demand for Services



During the COVID-19 pandemic, CMHCs reported significantly stronger **general capacities** and **motivation** to implement MATCH.



**Compatibility:**  
Degree to which MATCH fits into existing values and norms



**Structure:**  
How the organization functions day-to-day



**Organizational Innovativeness:**  
General receptiveness to organizational change



**Leadership:**  
If leaders support organizational activities



**Resource Utilization:**  
How resources are devoted to support MATCH

## Means

RDS Domains & Subdomains	Non-COVID-19 Quarter M (SD)	COVID-19 Quarter M (SD)
<b>Motivation*</b>	<b>5.08 (0.39)</b>	<b>5.49 (0.49)</b>
Relative Advantage	5.10 (0.58)	5.45 (0.71)
Compatibility*	5.81 (0.44)	6.12 (0.49)
Complexity	4.60 (0.60)	4.91 (0.80)
Triability	5.26 (0.51)	5.58 (0.55)
Observability	4.51 (0.55)	5.11 (0.63)
Priority	5.12 (0.48)	5.26 (0.92)
<b>General Capacities*</b>	<b>5.58 (0.37)</b>	<b>5.95 (0.47)</b>
Culture	6.08 (0.29)	6.25 (0.38)
Climate	5.14 (0.44)	5.54 (0.60)
Structure*	5.47 (0.49)	5.94 (0.51)
Organizational Innovativeness*	5.69 (0.43)	6.05 (0.55)
Resource Utilization	4.97 (0.60)	5.51 (0.72)
Leadership*	5.92 (0.39)	6.18 (0.54)
Staff Capacity	5.56 (0.49)	5.93 (0.66)
Process Capacities	5.76 (0.45)	6.10 (0.46)
<b>MATCH-Specific Capacities</b>	<b>5.51 (0.49)</b>	<b>5.83 (0.58)</b>
Knowledge and Skills	5.84 (0.66)	6.12 (0.56)
Program Champion	5.70 (0.59)	6.00 (0.59)
Implementation Climate Supports	5.55 (0.51)	5.71 (0.74)
Inter-organizational Relationships	5.20 (0.67)	5.19 (1.24)
Structure	5.68 (0.57)	5.81 (0.74)
Resource Utilization*	4.65 (0.71)	4.94 (0.92)
Leadership	5.81 (0.48)	5.84 (0.69)

\*Domains and subdomains with significant differences due to COVID-19.

## Implications

- Pandemic-related stresses on CMHCs and the families they serve may have motivated CMHCs to see a stronger compatibility of MATCH within their community.
- Anecdotally, CMHCs report that MATCH's modular approach has helped providers navigate pandemic-related client struggles, such as increased anxiety about COVID-19 or depression due to isolation, while maintaining a focus on primary treatment goals.
- CMHCs may have needed to strengthen their overall organizational structure, increase their openness to change, and establish effective leadership to guide their organization through the pandemic.
- Anecdotally, CMHC leadership sought guidance from Judge Baker Children's Center to support team members as they transitioned to providing MATCH via telehealth.
- Overall, the results suggest that organizational readiness to implement MATCH may be impacted by broader contextual factors, such as the COVID-19 pandemic.
- [Click here](#) for further information or to contact the research team.