Virginia Commission on Youth

SJR 358 – Update of the Collection of Evidence-based Treatment Modalities for Children and Adolescents with Mental Health Needs

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Virginia Commission on Youth
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Update of the Collection of Evidence-based Treatments (*Collection*)

- Pursuant to SJR 358 (2003), the Commission on Youth was to:
  - Seek the assistance of the Advisory Group, Secretary of Health and Human Resources, Secretary of Public Safety, and Secretary of Education in posting, maintaining and biennially updating the ***Collection.***
  - The ***Collection 3rd Edition*** was published in early 2008.

Rationale for Updating the *Collection*

- Provides an updated listing of evidence-based practices (EBPs) proven to be effective for youth with mental health disorders.
- Assists in prioritizing treatment options with limited governmental resources.
- Links treatments to results.

Rationale for Updating the *Collection*

- There have been more than 1,500 published clinical trials on outcomes of psychotherapies for youth and more than 500 different psychotherapies.

- This includes six meta-analyses discussing the effects of these treatments and more than 300 published clinical trials on the safety and efficacy of psychotropic medication.

Source: Hoagwood, K. (2004). *Fundamentals of Evidence-based Practices for Children: Context, Systems, and Practice.*

SJR 358 Advisory Group

- DMHMRSAS
- DSS
- DMAS
- DJJ
- DOE
- VDH
- Office of Comprehensive Services
- CSBs
- Commission on Youth
- Local CSA
- Advocacy Group Representatives
- One Child Psychiatrist
- Two Clinical Psychologists
- Parent Representatives

New members in 2007

- Virginia Tech University
- Virginia Commonwealth University
- Private Providers
- Area Health Education Centers (AHEC)

Collection 3rd Edition – New Information

- Reactive Attachment Disorder Section
- Anxiety Section completely revised
- New data on youth suicide
- New information on juvenile offenders
- Acknowledgment of the term “Intellectual Disability” in lieu of “Mental Retardation”
- Revised black-box warning on increased risk of suicidal symptoms in young adults aged 18 to 24 years
- Providers’ descriptions improved to better describe their qualifications/differences
- Virginia CSBs implementing EBPs

Collection 3rd Edition – New Information (cont.)

- Interpersonal psychotherapy for adjustment disorders
- Educational support and hypnosis promising treatments for anxiety
- New screening recommendations for Autism Spectrum Disorders (ASD)
- Sensory integration therapy for ASD
- Complementary and alternative medicine therapies for ASD
- Pharmacologic interventions for eating disorders

Dissemination of *Collection 3rd Edition*

- Posted to COY website
- Posted to LIS website
- Linked to child-serving agencies' websites
- Additional cost-effective dissemination approaches
  - Library of Virginia
  - Area Health Education Centers (AHEC)
  - CD-ROMs
  - Parent Resource Centers
  - Project Treat – DMHMRSAS

Biennial Update Preparation

- Advisory Group met April 1, 2008
- Consensus among Advisory Group members
  - *Collection* regularly-utilized resource
  - Research constantly evolving on best practices
  - Need to partner with private providers for utilization of evidence-based practices
  - Training continues to be an overarching issue
  - Link biennial update with training initiatives

Advisory Group Discussion

- Challenges to implementing EBPs
  - No “one best way” to implement
  - Limited resources
  - Definition of success a moving target
  - Pressures to hold providers accountable for outcomes
  - High turnover of workforce
  - Workforce training
  - Incentives misaligned

Advisory Group Discussion (cont.)

- Assessment not always an integral part of service delivery
- Need for a tracking system across child-serving agencies
- Standardization of outcomes
- Differentiating program outcomes v. youth outcomes
- At the local level, difficult to locate EBP services/providers

Advisory Group Discussion (cont.)

- Conference increased desire for more training
- Idea for training - "*Start where you are*"
  - Importance of assessing existing practices
  - How to measure existing services
  - Measurement techniques

Training on EBPs

- During the 2008 General Assembly Session, SB 479 (Hanger) was passed which requires the Office of Comprehensive Services to conduct an annual workshop to train on best practices and evidence-based practices.
- There is no system-wide, ongoing training initiative to support the expansion of evidence-based practices.

Upcoming Activities

- Schedule additional Advisory Group meetings.
- Investigate partnerships with state agencies, universities and other organizations for the next biennial update.
- Review other states' initiatives regarding the utilization, dissemination and training on EBPs.
- Investigate partnering with Office of Comprehensive Services to link the training workshops on evidence-based treatments, as mandated by SB 479, with the biennial update of the *Collection.*
- Develop plan for next biennial update of the *Collection.*

EBPs – Issues for Consideration

- Still no evidence available for certain disorders
- Need for flexibility to address exceptions
- Need for mechanism to incorporate findings from new evidence
- Delay in savings
- Adoption of EBPs by providers is usually slow
- Public input necessary for buy-in
- Evidence-based medicine should be the standard of care

Source: National Conference of State Legislatures, 2004