

Oregon

ebp news

OREGON DEPT OF HUMAN SERVICES; ADDICTIONS & MENTAL HEALTH DIVISION

EBP : Evidence Based Practices

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Welcome: AMH Director Richard Harris

Richard L. Harris, formerly of Portland's Central City Concern, has joined AMH as Interim Assistant Director. He follows Bob Nikkel, who assumed the new DHS position of special assistant to the director for health services integration. Harris says there are many challenges, including preparing a workable budget that focuses on delivering the required services in the best possible way. "I'll be working with staff, providers and stakeholders to make sure every dollar is spent wisely and building consensus within DHS and all the other divisions to make the most of our resources," he says.

Harris will oversee AMH during the national recruitment to find his successor (the recruitment notice can be found at:

http://www.emp.state.or.us/jobs/statejobs/index.cfm?location_content=jobdisplay.cfm&ord=14763&system=new&type=N&lang=E&datasource=TS).

"Human salvation lies in the hands of the creatively maladjusted"

Martin Luther King, Jr.

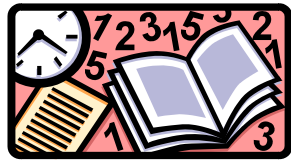


Focus On: Morrison Child and Family Services in Portland won SAMHSA's Science to Service Award for

implementation of The Incredible Years (IY), a prevention and intervention program for preschool children at risk for developing severe behavioral and aggression problems. Research on IY shows that parents become significantly more positive, nurturing, and engaged with their children and less harsh and critical (Webster-Stratton & Reid, 2005; Webster-Stratton, Reid, & Hammond, 2004); significant reductions in maternal depression and increases in maternal self-confidence, self-efficacy, and problem solving ability are also reported. Children become less aggressive and more cooperative.

IY even engages parents who are angry about having to take such a program, whose children have been removed from the home, and those with multiple stressors which make it difficult to focus on changing their parenting. For more: http://www.incredibleyears.com/Library/items/working-with-children-welfare-system_05.pdf





Peer Poll

Q: Some people say that manualized programs eliminate or reduce the practitioner's ability to apply their own individual skill or art to the process...what is your response?

A: Rick Cady, B.S., AMH Prevention Manager *"The art comes alive with the practitioner's grasping the content and determining the most exciting, creative way to teach the content."*

A: John Spence, Ph.D. NW Indian Training Associates *"The SB 267 mandate to require EBP for Oregon tribal A/D and mental health programs has been called "inappropriate" by several tribal professionals, noted by one as "the latest example of colonial oppression", and it has even been described as a violation of SB 770 - the government to government bill. Tribal traditional community healing approaches such as Talking Circles, Sweat Lodge Ceremonies, Cradle Boards, Canoe Journey, Run to the Rogue, Round Dance, Longhouse/Plankhouse, and many others cannot be manualized."*

A: Rita Sullivan, Ph.D., Director, OnTrack Addiction Recovery Programs & Services *"My experience is that using EBPs has built confidence in counselors by giving them tools and a proven approach to work with. The counselors find a way to enhance these prescriptive programs with the relational and other skills they bring. They do this while preserving fidelity by doing it at the end /beginning of the group, in one-on-ones, etc."*

A: Chris Farentinos, MD, MPH, CADC II, Director DePaul Outpatient Treatment Services
"The manuals are only as good as the counselors presenting them. Only a counselor with very good empathetic and group facilitation skills can deliver manualized treatment in a fashion that brings it alive, aligns it with the client stage of change, makes it relevant and all of that requires art and therapeutic skill. Manualized treatment, on the other hand, helps programs assure that there is a level of quality assurance, of coherency, and results."

Who Says There's No Art to EBP? Here's an EBP Haiku!



from evidence based
caterpillar to larvae
practiced butterfly

Now it's your turn...see how creative, and succinct, you can be! Send us your EBP haiku and you could be rewarded with a \$5 Starbuck's gift certificate.



If you have a question you'd like us to poll your colleagues on, email it to shawn.clark@state.or.us and we'll try to feature it in an upcoming issue.

Today, if you are not confused, you are not thinking clearly.
Irene Peter

"How do I stay on top of what's going on with EBPs in Oregon?"

Sign up to receive EBP-related emails at:

https://service.govdelivery.com/service/subscribe.html?code=ORDHS_98



EBPs in Substance Abuse Treatment for Women/Girls

Ann Uhler, President of the Women's Commission on Alcohol and Drug Abuse Issues of Oregon (WCADIO), interviewed ten women/girls programs across the state of Oregon about their use of EBPs. All programs were using at least two EBPs and some were using up to eight. A few highlights follow:

Programs: Seeking Safety was most commonly used, followed by Dialectic Behavior Therapy (DBT), Motivational Interviewing (MI), and Cognitive Behavior Therapy (CBT).

Selection: Three programs matched the intervention to the client population and then trained staff. Others selected their EBPs based on training that staff had received, or could easily receive.

Implementation: There was at least a three-month period of adjustment required to get other staff trained and to gain acceptance of manualized treatment. Programs with staff trainers on site or clinical champions found that implementation went fairly smoothly.

Sustainability: The need for continuous training and additional staff to help with fidelity monitoring were the biggest barriers for continued use of EBPs. Both of these needs demand more resources.

Staff: Most staff interviewed were enthusiastic about EBPs and expressed a desire to learn how various interventions interact with each other. They were also eager for new ideas to improve treatment to the models.



Newly Approved EBPs

Moral Reconciliation Therapy: is characterized as a systematic, cognitive-behavioral approach that utilizes a series of group and individual exercises and prescribed homework assignments designed to reduce substance abuse and criminal thinking and ideation. For more information: <http://www.moral-reconciliation-therapy.com/mrtsitemap.html>



Ch-ch-changes

More clients, less costs, happier staff?

Interested in getting people into treatment quicker, retaining them in treatment, reducing costs, improving staff morale and/or increasing revenue using existing agency resources? NIATx, the Network for the Improvement of Addiction Treatment, focuses on helping treatment agencies use process improvement techniques to achieve those results. Oregon, along with Massachusetts, Michigan, New York, and Washington, is taking part in NIATx 200.

In Oregon there are thirty-nine substance abuse treatment agencies participating in the NIATx 200, which is a research project to determine the most effective support for sustaining NIATx processes. Change project successes include:

- reduced wait times from 3-4 weeks to “same day”
- combined orientation and intake resulting in a reduction in days from 12 to 6 in days from call to intake, ultimately increasing in clients’ ability to keep appointments by 10%

Enthusiasm among participating agencies is high! Check out more NIATx lessons learned at: <https://www.niatx.net/Content/ContentPage.aspx?NID=2>

Change Leader Institute 2008

The Change Leader Institute helps leaders implementing change in their agencies by teaching change models and increasing skills in implementing change. The project is co-sponsored by Addictions and Mental Health (AMH) and the Northwest Frontier Addiction Technology Transfer Center (NFATTC).

Twelve people representing diverse backgrounds and cultures participated in the 2008 project, which involved five trainings. Each leader completed an individual change project, including implementation of evidence-based practices and other service improvements. AMH will conduct a follow-up survey to assess the outcomes of the project at the beginning of 2009.



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