Welcome and Introductions

Amy M. Atkinson, Executive Director, Virginia Commission on Youth

Ms. Atkinson welcomed the members of the Advisory Group to the meeting. She informed the members that this meeting was the final meeting for the study year. The findings and recommendations that emerged from the August 13 Advisory Group meeting, as well as other recommendations compiled and developed by staff would be discussed today. She stated that the recommendations would then be revised to incorporate suggestions received at this meeting. After a public comment period, the recommendations would be shared with the members of the Commission on Youth scheduled for Monday December 7 at 10:00 a.m. Ms. Atkinson reminded the members of the Advisory Group that this meeting was open to the public and everyone was invited to attend. At this meeting, the recommendations would be voted on by the members of the Commission.

Ms. Atkinson informed the members of the Advisory Group that they would receive the timeline for public comment period via email and that Ms. Hamaker would ensure that the recommendations discussed today would be reviewed and approved by the Advisory Group prior to the public comment period. She thanked everyone for their continued participation and assistance with this very important initiative.

Update on Status of Collection, 4th Edition

Leah Hamaker, Legislative Policy Analyst

Ms. Hamaker shared the status of the Collection with the Advisory Group. Throughout the summer and fall, commission staff had been working closely with Michael Southam-Gerow and his students with the Virginia Commonwealth University (VCU) School of Psychology and Pediatrics in the review and update of the Collection. In the initial review, staff had identified
edits and asked VCU to make these revisions prior to the Advisory Group’s review. Members of the Advisory Group asked when the sections would be shared. Ms. Hamaker stated that the sections would be emailed to the Advisory Group as soon as the revisions were complete. The Advisory Group requested that certain elements be included in the *Collection, 4th Edition*. The suggestions made by the Advisory Group are listed below.

- A stand-alone section discussing evidence-based treatments (EBTs) as well as the benefits and challenges of employing them;
- Discussion of the expense and staffing requirements with EBTs;
- Inclusion in the Trauma section information regarding the high prevalence of substance-abuse as a co-occurring disorder;
- Inclusion of information on the Child and Adolescent Needs and Strengths (CANS) assessment instrument into the frequently-used terms acronyms.

The Advisory Group reiterated the importance of inclusion of promising practices. Simply because a treatment was not at the level of an EBT, it ought not to be excluded. Moreover, it was crucial that families and providers become partners in the treatment process and this Collection update should continue to emphasize this as a best-practice. The Advisory Group asked that that, to the extent possible, that the terms "research-based," "proven" and "best practices" be incorporated in the Collection update. The Advisory Group members would provide Commission staff with these accepted terms which were commonly-employed by mental health providers and experts. Staff thanked the Advisory Group for their assistance with this task.

**Presentation of Draft Findings and Recommendations**

*Advisory Group Discussion*

Ms. Hamaker provided the Advisory Group an opportunity to comment on the Commission’s recommendations.

*Note: The Advisory Group offered suggestions and refinements to the draft recommendations. All of the suggestions were incorporated in the final recommendations. The Advisory Group comments are in blue.*

**Finding – Continuing Statewide Dissemination Efforts**

**Recommendation 1**

By letter, request all agencies in the Secretariat of Health and Human Resources, the Secretariat of Public Safety, and the Secretariat of Education, post the *Collection, 4th Edition* to their respective web sites to cost-effectively and efficiently facilitate access to this information.

The Advisory Group suggested that the Virginia Department of Health, local health departments and local social service agencies also be informed of the *Collection, 4th Edition*.

**Recommendation 2**

By letter, contact local mental health providers as well as local juvenile justice officials to inform them of the *Collection, 4th Edition* and how it may be accessed. Such contact will be via the Virginia Association of Community Services Boards and the State and Local Advisory Team through the State Executive Council, and through the Department of Criminal Justice Services.

The Advisory Group requested that “mental health” be changed to “behavioral health” and that other stakeholder organization and planning teams, such as the Federation of Families, with other consumer groups, be included in this recommendation.
Recommendation 3
By letter, request that the Children’s Services System Transformation include information on the *Collection 4th Edition* and how it may be accessed.

The Advisory Group suggested that this recommendation also include appropriate conferences and trainings.

Recommendation 4
By letter, request that the Intensive Care Coordinator Network through the Children’s Services System Transformation include information on the *Collection, 4th Edition* and how it can be accessed.

The Advisory Group suggested that the Department of Behavioral Health and Developmental Services and the Children’s Services System Transformation be included with this recommendation.

The Advisory Group also suggested that the Commission include impacted provider associations, such as the Virginia Coalition of Private Provider Associations, the Virginia Medical Society, the Psychiatric Society of Virginia, the Virginia Academy of Pediatrics and others in these recommendations.

Ms. Hamaker suggested adding three recommendations to address provider associations, family advocacy organizations and suggested including the Advisory Group also. The Advisory Group concurred with this approach.

Finding – Encouraging the use of evidence-based treatments

Recommendation 5
By letter, request that the Secretary of Health and Human Resources, the Department of Juvenile Justice, the Department of Education, and the Department of Criminal Justice Services continue to encourage the use of the evidence-based treatments in programming and development of any future projects.

The Advisory Group suggested that “proven practices” be used in lieu of “evidence-based treatments”. It was also noted that this recommendation be applied for all recommendations which reference evidence-based treatments.

Recommendation 6
By letter, request the Department of Behavioral Health and Developmental Services, the Office of Comprehensive Services, and other impacted agencies include information regarding evidence-based treatment modalities and practices for children, including juvenile offenders, in upcoming conferences or training, as applicable.

The Advisory Group suggested that workforce development efforts be included in this recommendation.

Finding – School-based Dissemination of the *Collection, 4th Edition*

Recommendation 7
By letter, request that the Department of Education inform school divisions of the *Collection, 4th Edition* so that it may be utilized by guidance offices, school-based health offices, and school special education services.
The Advisory Group suggested that school nurses and parent organizations be added to this recommendation.

Finding – Inclusion of Best Practices in Undergraduate and Post-Graduate Curricula
Recommendation 8
By letter, contact Virginia’s State Council of Higher Education, the Virginia Community College System and the Council of Southwestern Education to encourage the evaluation of existing course-offerings to ensure that they are in line with what is needed in the field and include information on evidence-based practices in all courses pertaining to the delivery of children’s behavioral health and developmental services.

The Advisory Group stated that this was also a national issue. The Advisory Group suggested that practicums and internships be added to this recommendation.

Finding – Future Biennial Updates
Recommendation 9
Include in the Commission’s workplan for the Collection, 5th Edition consideration of the “practice elements approach” which encourages the utilization evidence-based practices and encourages the individualization of treatments based on the strengths and needs of the client.

The Advisory Group felt that this recommendation was a good idea but asked that all approaches that encourage the utilization of proven practices be included in the discussion.

Recommendation 10
Include in the Commission’s workplan for the Collection, 5th Edition discussion whether using evidence-based treatments should be mandatory, evaluating the pros and cons of differential reimbursement, and assessing instances when the Commonwealth reimburses for treatments that are not proven to be effective.

The Advisory Group expressed concern with this approach. They requested that the Commission tread cautiously while addressing this topic. Staff informed the Advisory Group that several of the Commission members had repeatedly asked staff why the Commonwealth continued to pay for treatments that did not work. This recommendation would allow the Advisory Group to discuss this topic during the next biennial update. The Advisory Group asked that all capacity and funding issues relating to these topics also be addressed during the biennial review.

The meeting adjourned. Ms. Atkinson thanked the Advisory Group for their participation. She reminded the members that staff would email the revised recommendations to the Advisory Group once the revisions and suggestions were incorporated.

The Advisory Group meeting adjourned at approximately 11:50 a.m.