Evidence-Based Treatment
Methodologies Defined

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Disclosure Statement

I, Sheila Weix, MSN, RN, CARN, do not have any relevant financial interest or other relationship(s) with a commercial entity producing health-care related product and/or services.

Objectives

Understand the meaning of “evidence based practice” (EBP) as it pertains to clinical implementation and fidelity
Develop the language necessary to accurately describe different types of clinical practice based on level of evidence and fidelity
Appreciate the training and review required to implement specific evidence-based practices in substance use disorder treatment with fidelity
The integration of clinical expertise, patient values and the best research evidence into the decision making process for the patient.

Addiction treatment:
- Demonstrated positive outcomes in ≥ 1 studies
- Results of research published in peer-reviewed journal or comprehensive evaluation report
- Sufficient documentation (manuals, etc.) to facilitate dissemination
  [National Registry of Evidence Based Programs and Practices](http://guides.mclibrary.duke.edu/c.php?g=158201&p=1036021)

What is EBP?
- Efficacy: the benefits of a particular intervention or treatment when delivered under ideal, highly controlled conditions (research lab, low case loads, highly educated clinicians, intensive training and ongoing supervision)
- Effectiveness: what happens when an intervention or treatment is used in the real world where cost often comes into play

But there's more…
- Efficacy: the benefits of a particular intervention or treatment when delivered under ideal, highly controlled conditions (research lab, low case loads, highly educated clinicians, intensive training and ongoing supervision)
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Other elements
- Fidelity: implementation with adherence to content and practice as designed with ongoing monitoring and documentation of fidelity (recording, observation, etc.)
- Flexibility: changing content or practice to meet/address either client needs or agency needs
Other related ideas

- **Practice Guidelines**: developed to assist clinician decision-making in specific situations. Developed through consensus by panels of experts
- **ASAM Criteria**
- **Best Practices**: used for guiding treatment program planning and instituting processes for dissemination of EBP into clinical settings. *Treatment Improvement Protocols (TIPs)*

What’s happening in the real world?

- Your experiences with EBP...

Barriers to EBP Implementation

- Agency resistance
- Staff resistance
- Client resistance
- Lack of resources: staff, money and time
- Bottom line: EBP implementation needs to include awareness of organizational and community capacity and explicit strategies to address barriers
- Development of the Addiction Technology Transfer Centers
Effective EBP Implementation

- Select an EBP that meets the identified needs and characteristics of the person or population to be served
- Determine a realistic plan for implementation of the EBP: time and resources for training and ongoing support
- Make a conscious, critical decision about what can be done and sustained
- Consider Evidence-Informed if EBP is not feasible

What else makes treatment effective?

- The people providing treatment:
  - Therapeutic alliance
  - Enhancing + expectations
  - Inspiring and supporting hope
  - Being “present” with deep understanding

What are the tasks of all treatment?

- Enhancing and maintaining motivation
- Teaching new coping skills
- Changing conditioned responses
- Enhancing social supports
- Improving interpersonal functioning
- Developing understanding of social norms
- Enhancing self-efficacy

McGovern & Carroll, p.9
So what can we do in the real world if the barriers seem overwhelming?

- Focus on learning evidence-based skills focused on:
  - Improving impulse control
  - Reducing craving
  - Promoting an adaptive social environment
  
  - UDT
  - Pharmacology
  - Motivational Interviewing
  - Coping skills and relapse prevention
  - Couples & family counseling

Glasner-Edwards & Rawson, p.10

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How?

- Does require openness to change
- Willingness to learn
- Interest in better outcomes
- Using all of one’s knowledge and skills
- Collaboration
- Commitment to professional development
- Willingness to provide the best possible care to the people we serve
- Utilization of what IS available: web-based training, etc.

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Conclusion

- EBP implementation with fidelity does present major challenges in the real-world, but resources exist to make it possible

- We must work to bring addiction treatment research into clinical practice even if we do so in small doses…the people we serve DESERVE it!

Questions?
References


