

New Jersey Evidence Based Practices Initiative (NJ EBPI)

sponsored by

The NJ Department of Human Services, Division of Mental Health and Addiction Services, Substance Abuse and Mental Health Services Administration (SAMHSA)
State Opioid Response Grant



VICKI FRESOLONE

Manager, Integration and Care Management,
Division of Mental Health and Addiction Services

ANGIE JONES

NJ EBPI, Project Director, JBS International

MIKE SANTILLO

Executive Director, John Brooks Recovery Center

ANGELA ORTH

Service Area Director, Catholic Charities

Division of Mental Health & Addiction Services
wellnessrecoveryprevention



NJ EBPI Vision



Division of Mental Health & Addiction Services
wellnessrecoveryprevention



NJ EBPI Goals



To implement Evidence Based Care at chosen agencies through:

- Improved clinical staff's knowledge, competency, and utilization of Motivational Interviewing (MI) and Cognitive Behavioral Therapy (CBT).
- Implement and integrate MI and CBT into an agency's infrastructure.

NJ EBPI Background

- The EBPI is funded through the State Opioid Response (SOR) grant
- JBS, the Training/TA Vendor, was chosen through an RFP in October, 2019
- DMHAS released a Request for Letters of Intent (RLI) in December 2019 to choose agencies that would receive all of the services of the EBPI
- Four agencies with a total of seven sites completed the program:
 - Stress Care, Catholic Charities, John Brooks, Helping Hand

Scope of Work



CLINICIANS/ SUPERVISORS

- Training
- Coaching
- Fidelity Monitoring
- Supervisor Training and Coaching
- Train the Trainer

EXECUTIVE TEAMS

- Site Visit
- Weekly coaching on core implementation and sustainability elements
- Sustainability Planning

OTHER AGENCY STAFF

- Limited training on MI

The “Big 6”



**Employee
Recruitment
and
Orientation**



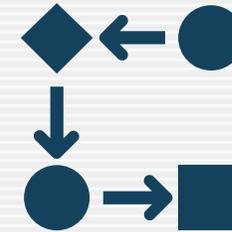
Supervision



**Workforce
Development**



**Policies &
Procedures**



Workflow



**Admissions
and
Termination**

Angie Jones

NJ EBPI Project Director, JBS International

Work Began



Kick-off meeting



**Clinical Knowledge
Assessment**



Readiness Assessment



Planning

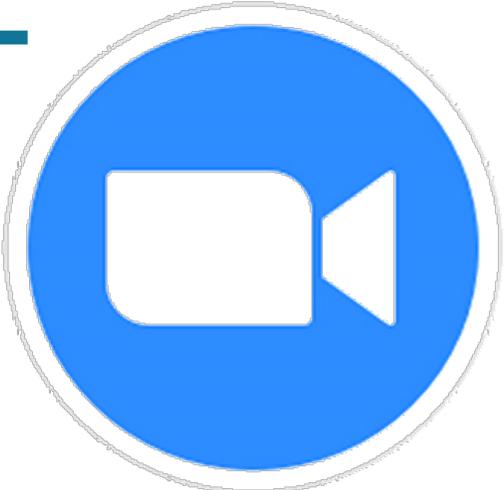
Then... COVID happened...



Work Continued! Virtual Journey



Project Overview



zoom



Project Overview



*Unduplicated

Challenges



No site visits

**Minimal
face-to-face**

Timeline

**Varying levels of initial
knowledge of MI and CBT**



**Despite challenges we
had positive results!**



Clinician Results

- **Trainings worked!**
 - Participants demonstrated statistically significant improvements on their overall knowledge of MI and CBT, and meaningful growth in their practical understanding of these modalities.
 - 87% of participants on average rated MI and CBT as effective in helping their clients achieve their treatment goals.
- **Coaching sessions worked!**
 - The likelihood of obtaining a certificate of proficiency in MI and CBT both increased as the number of coaching sessions attended increased.



Executive Leadership Results

- Executive TA helped maintain project focus.
 - Weekly TA meetings were a source of support and encouragement, and provided critical guidance related to policy and procedure development.
- Executive TA improved agency ability to implement and sustain EBPs.
 - Site executive leadership felt confident in their abilities to contribute to implementation efforts

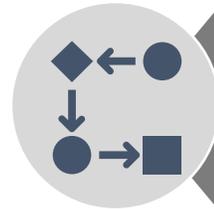
Big Six Results

All agencies addressed each of the “Big 6” areas.



Employee Recruitment and Orientation

More clear messaging during recruitment, modifications to interview format, additions to orientation training and onboarding



Workflow

Adaptations to EHRs to include MI and CBT



Supervision

More strengths-based approach, move from administrative to clinical supervision



Admission and Termination Procedures

Revamped admission package/ paperwork, changes to the screening and assessment process to reduce barriers



Workforce Development

Increased workforce skills, TOT to ensure MI and CBT continues



Policies and Procedures

New policies and procedures in multiple areas to ensure that the EBPs stick

Sustainability Planning

The work continues, but agencies were set up for success!



All agencies completed a sustainability plan to guide future efforts!



All plans address all areas of the Big 6.

What did the agencies tell us?

“

Our leadership team is working more effectively and efficiently together and we are engaging with each other more often as a result of the EBPI.

“

We have revamped our supervision to incorporate Motivational Interviewing and Cognitive Behavioral Therapy. This has helped clinicians to stay on track, and not lose focus on the latest crisis. For our agency, it was helpful that we were able to make these clinical changes agency-wide.

“

The clients are already benefiting from Motivational Interviewing, and the intentional transfer of skills from the therapists who completed the training. I can see the benefits in the counselors' notes and their work. Now they are being purposeful and intentional in their clinical work and their documentation.

“

As a result of the EBPI now we have clinicians who can train new staff and get them up to speed if they do not have experience in Motivational Interviewing and Cognitive Behavioral Therapy.

What did the agencies tell us?

“

I appreciated that the project was very systemic. I liked that we did this in a very methodical way and it was good to look at the whole big picture.

“

As a result of the EBPI we are working together better as an agency, our sites and programs are more aligned.

“

The weekly executive team meetings were great—as we were dealing with all these crises it was a good opportunity to take a deep breath, step back, and think about the mission and where we want to move forward. And to not forget the importance of focusing on EBPs and improving procedures and protocols to better service clients, in the long run, not just the immediate crisis we were dealing with.

Mike Santillo

Executive Director, John Brooks Recovery Center

Angela Orth

Service Area Director, Catholic Charities

DMHAS SOR EBPI Team

- Vicki Fresolone, Manager, Integration and Care Management
- Liz Conte, Manager, Workforce Development
- Marie Verna, Initiative Manager
- Carly Davis, Project Coordinator
- Amber Minnick, Training Coordinator

NEXT STEPS

Continuing the Program

Planning to continue the program for a Year 2 and Year 3

Next Cohort Selection

Will be choosing the next cohort of providers through an RLI

Measuring Outcomes

Outcome measures will include a client satisfaction survey to begin to measure the effect that the initiative has on clients

Questions



Contact Us

Please feel free to reach out if you have additional questions.

- Mike Santillo: Santillo.mike@jbrcnj.org
- Angela Orth: aorth@ccdom.org
- Vicki Fresolone: Vicki.Fresolone@dhs.nj.gov
- Marie Verna: Marie.Verna@dhs.nj.gov