

Subject: Evidence-Based Practices

Requirements

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1. **Programs Affected:** All CCBHC Demonstration participants.
2. **Background and Purpose:** Community Mental Health Centers (CMHCs) designated by the Alabama Department of Mental Health (ADMH) as Certified Community Behavioral Health Clinics (CCBHCs) must provide evidence-based practices (EBPs) in accordance with SAMHSA CCBHC Certification Criteria, either directly or via a Designated Collaborating Organization (DCO) partnership. ***This bulletin describes how evidence-based treatment will be provided to CCBHC participants.***
3. **SAMHSA CCBHC Criteria Authority**

Per CCBHC Criterion 4.f.1:

- 3.1. The CCBHC or the DCO must provide evidence-based services using best practices for treating mental health and substance use disorders across the lifespan with tailored approaches for adults, children, and families.
- 3.2. SUD treatment and services shall be provided as described in the American Society for Addiction Medicine (ASAM) Levels 1 and 2.1 and include treatment of tobacco use disorders.
- 3.3. Where specialist providers are not available to provide direct care to a particular person receiving CCBHC services, or specialist care is not practically available, the CCBHC professional staff may consult with specialized service providers for highly specialized treatment needs.
- 3.4. For people receiving services with potentially harmful substance use, the CCBHC is strongly encouraged to engage the person receiving services with motivational techniques and harm reduction strategies to promote safety and/or reduce substance use.

Per CCBHC Criterion 4.f.2:

- 3.5. Treatments are provided that are appropriate for the phase of life and development of the person receiving services, specifically considering what is appropriate for distinct groups for whom life stage and functioning may affect treatment:
 - Children
 - Adolescents
 - Transition-age youth
 - Older adults
- 3.6. When treating children and adolescents, CCBHCs must provide evidenced-based services that are developmentally appropriate, youth-guided, and family/caregiver-driven.
- 3.7. When treating older adults, the desires and functioning of the individual person receiving services are considered, and appropriate evidence-based treatments are provided.
- 3.8. When treating individuals with developmental or other cognitive disabilities, level of functioning is considered, and appropriate evidence-based treatments are provided.
- 3.9. These treatments are delivered by staff with specific training in treating the segment of the population being served. CCBHCs are encouraged to use evidence-based strategies such as measurement-based care (MBC) to improve service outcomes.

4. ADMH Evidence-Based Practices Requirements

4.1. The table below outlines the EBPs that were approved by the ADMH and will be required for Alabama CCBHCs:

Evidence-Based Practice	Purpose
<i>Motivational interviewing</i>	Support care engagement and outcomes
<i>Cognitive Behavioral Therapy (CBT)</i>	Intervention for a variety of MH/SUD needs
<i>Integrated treatment for COD</i>	Intervention for those with COD
<i>Medication Assisted Treatment</i>	To combat overdose and SUD rates all CCBHCs will be required to provide FDA-approved MAT, including buprenorphine and naltrexone, either directly or via a DCO relationship. They must also facilitate access to methadone if not a certified OTP through a referral arrangement.
<i>Trauma-focused CBT</i>	Intervention for trauma survivors
<i>Individualized placement support, supported employment, & linkage to supportive housing</i>	Address employment and safe/stable housing needs
<i>Assertive Community Treatment (ACT)</i>	Support for individuals with SMI who need home-based wraparound supports
<i>Certified Peer Specialists- Adult/Youth/Parent</i>	Support effective engagement in care and sustained recovery

4.2. To support CCBHCs in developing EBP capacity, ADMH has published a list of recommended training modules, available to CMHC staff members at all levels at no cost to them via our contract with Relias Learning Management System:

Training	Recommended Attendees
<i>Introduction to Motivational Interviewing</i>	All Direct Care Staff
<i>Use of Motivational Interviewing in Clinical Practice and Recovery</i>	All Clinicians
<i>Best Practices for Interviewing Patients</i>	All Clinicians
<i>Shared Decision Making in Behavioral Health</i>	All Clinicians
<i>Introduction to Cognitive Behavioral Therapy</i>	All Clinicians
<i>Cognitive Behavioral Treatment of SUD</i>	All SUD Clinicians including QSAP II and those trained in MI & SUD
<i>CBT Skills</i>	All Clinicians and some Direct Care Staff
<i>Implementation of Trauma-Informed Systems</i>	All Administrative Staff
<i>Introduction to Trauma-Informed Care (TIC)</i>	All Staff
<i>How BH Disorders are Impacted by Trauma</i>	All Direct Care Staff
<i>TIC for Non-Clinical Staff</i>	All Non-Clinical Staff
<i>TIC Delivery - Clinicians & Peer Support Specialists</i>	All Direct Care Staff
<i>Influence of Trauma on Substance Use</i>	All SUD Clinicians including QSAP II and those trained in MI & SUD

4.3. AL CCBHCs are encouraged to identify and implement other EBPs that align with the needs identified in their needs assessment, as well as to use evidence-based strategies such as measurement-based care to improve service outcomes.

Disclaimer: The information contained in this implementation bulletin is for general information purposes only. For more details on the specific subject area covered in this bulletin, please refer to the Certified Community Behavioral Health Clinic (CCBHC) Certification Updated March 2023.

¹ <https://www.samhsa.gov/sites/default/files/ccbhc-criteria-2023.pdf>