Table B--4. SIMHC intervention EPOC taxonomy table, organizational components: structural interventions

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Study, YrArmStrategy | Changes in Scope and Nature of Benefits and Services | Presence and Organization of Quality Monitoring Mechanisms | Staff Organization | Othera |
| Bickman et al., 20112, lArm 1Feedback | **-** | Ongoing monitoring | **-** | **-** |
| Bickman et al., 20112, lArm 2Control | **-** | Ongoing monitoring | **-** | **-** |
| Carroll et al., 20133Arm 1Computer Decision Support Plus EHR Plus ADHD Guidelines |   | Prompts to record assessments and actions, specific to ADHD, so parent and teacher assessment forms were automatically stored by CHICA and recorded in system. CHICA printed a summary sheet with all subscores and interpretations from each assessment form. Interpretations were also made available as prompts on physician worksheet at subsequent follow-up visits. CHICA ADHD module also made treatment recommendations based on established guidelines. This included appropriate starting doses for medications and suggested medication changes if treatment goals were not metb | **-** | **-** |
| Carroll et al., 20133Arm 2Computer Decision Support Plus EHR |   | Prompts to record assessments and actions but not specific to ADHDa  | **-** | **-** |
| Epstein et al., 20114 Arm 1Internet portal access to EBP |   | 3, 6, 9, and 12 mths after training, study staff members contacted offices to prompt them to review their Internet portal practice report cards.After identifying underperforming practice behaviors, each practice identified an area to target and then created a plan-do-study-act cycle13 to address target behaviorb | Goal of modifying office flowa | **-** |
| Epstein et al., 20114Arm 2Waitlist control | **-** | **-** | **-** | **-** |

Table B-4. SIMHC intervention EPOC taxonomy table, organizational components: structural interventions (continued)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Study, YrArmStrategy | Changes in Scope and Nature of Benefits and Services | Presence and Organization of Quality Monitoring Mechanisms | Staff Organization | Othera |
| Glisson et al., 20108Arm 1MST+ARC | -- | MST quality assurance systemb | -- | -- |
| Glisson et al., 20108Arm 2MST | -- | MST quality assurance systemb | -- | -- |
| Glisson et al., 20108Arm 3ARC | -- | -- | -- | -- |
| Glisson et al., 20108Arm 4Control | -- | -- | -- | -- |
| Henggeler et al., 201310Arm 1Workshop enhanced with ongoing access to CM implementation resources (WSR) | **--** | Intensive Quality Assurance program based on intensive QA protocols used in MST programsb | **--** | **--** |
| Henggeler et al., 201310Arm 2 WSR plus computer assisted training for 6 mths following workshop (WSR+CAT) | **--** | **--** | **--** | **--** |
| Henggeler et al., 201310Arm 3WSR+CAT plus ongoing support from a CM expert for 12 mths following workshop (WSR+CAT+SS) | **--** | **--** | **--** | **--** |
| Wildman et al., 201216Arm 1Colocated Services | Intervention removed two of frequently cited barriers to treatment: availability and cost. All referred families were seen within 1 week of referral and services were provided without cost to family | **-** | **-** | Enhanced referrals, received number to call; choice of where they wanted to attend sectionb |

Table B-4. SIMHC intervention EPOC taxonomy table, organizational components: structural interventions (continued)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Study, YrArmStrategy | Changes in Scope and Nature of Benefits and Services | Presence and Organization of Quality Monitoring Mechanisms | Staff Organization | Othera |
| Wildman et al., 201216Arm 2Enhanced Referral | Intervention removed two of frequently cited barriers to treatment: availability and cost. All referred families were seen within 1 week of referral and services were provided without cost to family | **-** | **-** | **-** |

a Other categories to be agreed on in consultation with the EPOC editorial team

b Component differed across study arms

ADHD = attention deficit hyperactivity disorder; BHCP = Behavioral Healthcare Provider; CHICA = Child Health Improvement through Computer Automation; CP-BT = Coping Power—Basic Training; EPOC = Effective Practice and Organisation of Care; MMTP = Metabolic Monitoring Training Program; MST = Multisystemic therapy; mths = months; QA = quality assurance; SBIRT = Screening, Brief Intervention, and Referral to Treatment; SIMHC = Strategies To Improve Mental Health Care for Children and Adolescents; WSR = workshop and resources; WSR+CAT = workshop and resources plus computer assisted training; WSR+CAT+SS = workshop and resources plus computer assisted training plus biweekly telephone consultations between CM experts and supervisors for 12 months following the workshop;.