Utilizing Health Information Technology to Improve Health Care Quality

Principal Investigator: Storch, Eric, Ph.D., M.S., M.Phil.
Organization: University of South Florida
Mechanism: PAR: HS08-270: Utilizing Health Information Technology (IT) to Improve Health Care Quality (R18)
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Summary: Childhood anxiety disorders affect a significant percentage of youth and cause substantial distress and impairment. Cognitive-behavioral therapy (CBT) and selective serotonin reuptake inhibitor (SSRI) monotherapies are effective and comparable treatments of childhood-onset anxiety disorders. While CBT lacks the side effects of SSRI therapy, there are practical concerns of dissemination due to the limited availability of trained clinicians; limited treatment center and therapist locations; travel expenses; and immediate treatment costs. Accordingly, there has been a growing body of research on the practicality and efficacy of computerized cognitive-behavioral therapy (CCBT).

This project is evaluating the feasibility and preliminary efficacy of disseminating a CCBT protocol to community mental health centers. An efficacious CCBT protocol could contribute to public health efforts to address the mental health needs of a large number of children diagnosed with anxiety disorders.

The project consists of a two-phase trial that evaluates the feasibility of implementing a patient-centered intervention in community mental health centers, followed by an efficacy trial. In Phase I, an open trial of CCBT that focuses on feasibility issues of providing this intervention in community mental health centers will be completed. The CCBT protocol will be tested in youth to determine its acceptability and feasibility. Assessment and treatment delivery protocols will be refined; feedback will be obtained from patients, families, therapists, and organizational consultants; and barriers will be identified and addressed in preparation for the Phase II trial.

In Phase II, a randomized controlled trial will: 1) compare CCBT to treatment-as-usual (TAU) in order to evaluate the acute efficacy of CCBT relative to TAU in youth with clinically significant anxiety disorders; 2) determine whether CCBT results in greater short-term treatment efficacy relative to TAU after treatments are withdrawn; 3) examine whether CCBT results in improved global functioning and reduced child and parent anxiety symptoms relative to TAU; and 4) examine whether CCBT is associated with greater satisfaction and consumer acceptability than TAU.

While this study is being coordinated by a research team at the University of South Florida Rothman Center for Neuropsychiatry, recruitment will take place at three community mental health centers that serve families of lower socioeconomic status throughout Florida.

Specific Aims:

- Assess CCBT for clarity, completeness, and feasibility in a pilot study of 18 children ages 7-13

years, with significant involvement from caregivers. **(Achieved)**

- Conduct a randomized controlled trial of 110 children to determine the efficacy of CCBT relative to TAU. **(Achieved)**
- Examine factors that may predict CCBT outcome. **(Ongoing)**

2012 Activities: During this period Dr. Storch held regularly scheduled weekly phone meetings with the University of South Florida research staff and investigators, site coordinators, and therapists to discuss various aspects of the research plan (e.g., manual development, protocol implementation, study issues). These calls included: 1) a call for the site therapists and lead therapy consultant to discuss treatment procedures, issues, and individual cases once recruitment begins; 2) a call for site coordinators and overall project coordinator to discuss concerns of implementing the study, recruitment, and participant tracking issues; 3) a call to facilitate discussion among all study team members; and 4) a monthly call held among study team members, site directors, and study consultants to discuss overall study progress and concerns.

The CCBT protocol was tested to determine its acceptability and feasibility. Assessment and treatment delivery protocols were refined; feedback was obtained from patients, families, therapists, and organizational consultants in the context of focus groups; and barriers were identified and addressed in preparation for the Phase II trial. Recruitment for the CCBT pilot was initiated at sites.

Two manuscripts were developed, one of which was revised and resubmitted. As last self-reported in the AHRQ Research Reporting System, project progress and activities are completely on track and spending is on target.

Preliminary Impact and Findings: The project has no findings to date.

Target Population: Chronic Care*, Mental Health/Depression, Pediatric*

Strategic Goal: Develop and disseminate health IT evidence and evidence-based tools to improve health care decisionmaking through the use of integrated data and knowledge management.

Business Goal: Implementation and Use

** This target population is one of AHRQ's priority populations.*