

## SPP Endorses New Psychosocial Standards of Care in Pediatric Oncology

By Lori Wiener, Ph.D. and Anne Kazak, Ph.D.

T he Society of Pediatric Psychology's Executive Committee endorsed the Psychosocial Standards of Care in Childhood Cancer that were published in December 2105 (http://onlinelibrary.wiley.com/doi/10.1002/pbc.v62.S5/issuetoc). Many Division 54 members were active participants in the standards development over the past three years and will be instrumental in the dissemination and implementation of the standards.

The 15 standards were developed using a rigorous process that followed a congressional symposium and briefing on Capitol Hill in 2012, sponsored by the Mattie Miracle Cancer Foundation (MMCF). Peter and Vicki Brown, co-founders of the Mattie Miracle Cancer Foundation and parents of Mattie Brown, who died at age 7 of osteosarcoma, identified five leaders in psychosocial aspects of pediatric cancer to present research data at the briefing pertaining to the importance of universal services to address the psychosocial needs of children with cancer and their families (Anne E. Kazak (Chair), Robert B. Noll, Andrea Farkas Patenaude, Kenneth Tercyak, Lori Wiener). A panel of parents and survivors further emphasized the need for psychosocial care. It became evident in conversations with members of Congress and their staffs that any legal or government support for such universal psychosocial care would require clear, widely accepted, well-supported standards for the psychosocial support of children with cancer and their families. The Psychosocial Standards of Care Project for Childhood Cancer (PSCPCC) created the needed standards.

The methods for writing the standards began with a review of existing guideline development literature and an online survey administered to psychosocial experts across a range of clinical and geographic settings about essential psychosocial needs in pediatric cancer centers. The data suggested five distinct critical areas where standards were needed for satisfactory provision of psychosocial care for children with cancer: 1) Assessment of Child and Family Well-Being and Emotional Functioning; 2) Neurocognitive Status; 3) Psychotherapeutic Interventions; 4) School Functioning; and 5) Communication, Documentation, and Training of Psychosocial Services.

Two think tanks were held at the 2013 and 2014 meetings of the American Psychosocial Oncology Society. The purpose was to determine the standards' scope and to reach agreement about elements of essential, high-quality psychosocial care. Between these meetings, monthly teleconferences focused on organizing reviews of literature in these five areas. Twenty-five standards were drafted initially, but after careful review of the literature, only 15 held sufficient evidence to remain. These 15 standards underwent continuing appraisal of the literature and critique of the evidence with systematic literature searches, using PRISMA guidelines. Sixty-six authors were involved in the 15 papers. The Appraisal Guidelines for Research and Evaluation (AGREE II) were used to rate the evidence for their standard. In summarizing the evidence for each standard, the authors were required to appraise their body of evidence as a whole using the Assessment, Development, and Evaluation GRADE system. The GRADE system classifies the quality

of evidence in one of four levels — high, moderate, low, and very low. Each paper went through critical review by the PSCPCC leaders and then peer review by PBC.

Each of the 15 standards defines a minimum level of psychosocial care that all children with cancer and their families should receive. The standards are relatively broad and allow for individualization in terms of how they can be met. The standards have been well received and have been endorsed by the Association of Pediatric Oncology Social Workers, the Association of Pediatric Hematology and Oncology Nurses, the American Psychosocial Oncology Society, and the American Association of Child and Adolescent Psychiatry, in addition to SPP.

The PSCPCC will next address key issues related to standards implementation. We welcome your experiences and ideas as we move forward with this project. Please contact Lori Wiener at <a href="https://www.lwiener.gov">lwiener@mail.nih.gov</a> or Anne Kazak at <a href="mail.nih.gov">anne.kazak@nemours.org</a>.

## 2015 Diane Willis Award Outstanding JPP Article

The Diane Willis Award for Outstanding Article in the Journal of Pediatric Psychology honors Diane J. Willis, who served SPP as president and founding editor of JPP and the SPP newsletter. JPP articles are selected based on contribution and value to the field of pediatric psychology, demonstrating innovation and excellence in methodology and design, and providing an exemplar for others to model. To read these outstanding articles, log into JPP at http://jpepsy.oxfordjournals.org.

## **First Place**

Lennon, J. M., Murray, C. B., Bechtel, C. F., and Holmbeck, G. N. (2015). Resilience and DisrupVon in Observed Family Interactions in Youth With and Without Spina Bifida: An Eight-Year, Five-Wave Longitudinal Study. *Journal of Pediatric Psychology*, 40(9), 943–955. doi: 10.1093/jpepsy/jsv033

## **Honorable Mention**

Rohan, J. M., Drotar, D., Alderfer, M., Wetherington-Donewar, C., Ewing, L., Katz, E. R., and Muriel, A. (2015). Electronic Monitoring of Medica\on Adherence in Early Maintenance Phase Treatment for Pediatric Leukemia and Lymphoma: Iden\fying Pa]erns of Nonadherence. Journal of Pediatric Psychology, 40 (1), 75–84. doi:10.1093/jpepsy/jst093.

Hoffenkamp, H. N., Braeken, J., Hall, R. A. S., Tooten, A., Vingerhoets, A. J. J. M., and van Bakel, H. J. A. (2015) Parenting in Complex Conditions: Does Preterm Birth Provide a Context for the Development of Less Optimal Parental Behavior? *Journal of Pediatric Psychology*, 40(6), 559–571. doi: 10.1093/jpepsy/isv007.

Congratulations to all of the paper authors and a special thanks to Jan Wallander, Tonya Palermo, and Yelena Wu for serving on the review committee.