

Evidence-Based Practice Institute

Fiscal year 2024 annual report

Engrossed Substitute Senate Bill 5950; Section 215(31); Chapter 376; Laws of 2024

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Acknowledgements

Evidence-Based Practice Institute/CoLab for Community & Behavioral Health Policy team

Sarah Cusworth Walker, PhD, Director
Georganna Sedlar, PhD, Associate Teaching Professor
Maggie Fenwood Hughes, MS, MSW EBPI associate director
Noah Gubner, PhD, Research Scientist
Winslow Lewis, BA, Program Operations Specialist
Rachel Porter, BA, Communications Manager
Alya Azman, MPH, Research Analyst
Jean Hernandez, BA, Program Assistant
Anna Duncan, MPH, Program Operations Specialist

Mission

Our mission is to improve the mental health and well-being of children. We accomplish this mission by collaborating with our policy and practice partners to conduct research syntheses, co-develop policies and programs, and build organizational capacity.



Division of Behavioral Health and Recovery
P.O. Box 45330
Olympia, WA 98504-5330
Phone: (360) 725-1632
Fax: (360) 725-1632
hca.wa.gov



University of Washington
Department of Psychiatry & Behavioral Sciences
Evidence-Based Practice Institute
CoLab for Community & Behavioral Health Policy

1959 NE Pacific St ,Ste BB1538, P.O. Box 356560
Seattle, WA, 98195
Email: ebpi2536@uw.edu
ebp.institute
uwcolab.org

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Executive summary

The Health Care Authority (HCA) is submitting this report to the Legislature as required by Engrossed Substitute Senate Bill (ESSB) 5950; Section 215(31); Chapter 376; Laws of 2024:

“\$446,000 of the general fund—state appropriation for fiscal year 2024, \$446,000 of the general fund—state appropriation for fiscal year 2025, and \$178,000 of the general fund—federal appropriation are provided solely for the University of Washington's evidence-based practice institute which supports the identification, evaluation, and implementation of evidence-based or promising practices. The institute must work with the authority to develop a plan to seek private, federal, or other grant funding in order to reduce the need for state general funds. The authority must collect information from the institute on the use of these funds and submit a report to the office of financial management and the appropriate fiscal committees of the legislature by December 1st of each year of the biennium.”

In 2024, the Legislature required that HCA collaborate with the University of Washington's Evidence-Based Practice Institute (EBPI) to advance the scope of work and seek funding to reduce the need for state general funds. This report will outline the work that has been done in state fiscal year (SFY) 2024. The University of Washington's EBPI is housed in the [CoLab for Community and Behavioral Health Policy](#).

Key activities in collaboration with EBPI include:

- Furthered the Leadership Initiative for Quality to support the scale up of high-quality child and youth mental health services.
- Continued statewide initiative to expand culturally responsive care for children and families in Washington; CARE (Culturally Affirming & Responsive Mental Health) for Kids & Families.
- Concluded a quarterly workgroup of system partners with the goal of supporting behavioral health workforce development in Washington State.
- Conducted three policy-relevant evidence reviews:
 1. A review of the most up to date clinical guidance for children's behavioral health treatment to inform the EBPI reporting guide update for SFY 2024.
 2. Another to inform a policy codesign project on youth mental health promotion and substance use prevention models.
 3. A third to provide an in-depth review of workforce roles and competencies in Washington state to expand behavioral healthcare via non-licensed career pathways as part of the CARE project.
- Sponsored a webinar to provide technical education on configuring electronic health record (EHR) systems for evidence-based practices (EBP) reporting, co-hosted a webinar with Harborview Behavioral Health Institute to promote TeleBehavioral Health Service Delivery Guides, and presented on the EBPI reporting guide best practices to Child-Parent Psychotherapy training group.
- Further promoted and distributed a free resource on supervising clinical mental health providers including a collaboration with Northwest Mental Health Technology Transfer Center (NW MHTTC) to host a webinar and learning collaborative from this effort.

- Began efforts to identify service gaps and resources for families awaiting connection to the youth-serving behavioral health system in Washington State, co-created with parents and youth with lived experience receiving mental and behavioral health services.

Additional funding

ESSB 5950; Section 215(31); Chapter 376; Laws of 2024; directs HCA to fund EBPI and requires HCA and EBPI to develop a plan to seek additional funds to support the Institute's scope of work. In 2024, EBPI is seeking funds from the following sources to evaluate and further expand programs:

CoLab/EBPI continues to review grant opportunities and consult with managed care organizations (MCOs) for funding contracts. The following contracts were awarded:

- **Department of Children, Youth and Families (DCYF) – Imagining New Future for Youth Wellness Policy event support**
 - \$15,000
 - Funding to support the execution of an event to bring together diverse voices from across Washington State including arts and youth-serving organizations, youth, researchers, and policymakers. Panelists and presenters showcased the role of arts in building youth wellness as well as creativity-based methods for more inclusive policy making.
- **Washington State Legislature – Expanding Culturally Responsive Care**
 - \$800,000
 - Years two–three of legislative proviso funding for the CARE for Kids & Families project. The goal is to outline a vision for a community behavioral health system in Washington State that is more culturally responsive, equitable, and effective in the services it provides to children and families.
- **National Institute of Drug Abuse (NIDA) R34 Policy Codesign**
 - \$400,000
 - This is a 3-year project (2023–2026) that aims to examine the acceptability of a method to co-create adolescent substance use prevention policies (policy codesign), measure changes in social network growth, cohesion, and bridging activities among multiple sectors central to behavioral health policy implementation and examine the perceived replicability of Policy Codesign among well-established behavioral health policy intermediaries.
- **Washington State Legislature – Expanding Culturally Responsive Care**
 - \$400,000
 - Year 1 of legislative proviso funding for the CARE for Kids & Families project. The goal is to outline a vision for a community behavioral health system in Washington State that is more culturally responsive, equitable, and effective in the services it provides to children and families.
- **HCA – Leadership for Quality**
 - \$202,000
 - The goal of this work is to increase the capacity of mental, behavioral, and physical care leaders (directors, managers) overseeing integrated care services to develop and

implement change management strategies to increase mental health and SUD services access and quality.

- **HCA – Telehealth Proviso**
 - \$205,000 subcontract from Behavioral Health Institute
 - The goal of this work is to review current and emerging data and research and make recommendations regarding best practices for virtual behavioral health services to children from prenatal stages through age 25.
- **HCA – Substance Abuse and Mental Health Services Administration (SAMHSA) System of Care**
 - \$180,000 subcontract from Behavioral Health Institute
 - The goal is to develop training for the mobile crisis response teams that provide immediate help and brief support (up to eight weeks) for families until the family and youth can get into longer-term treatment. The clinical framework will be informed by Dialectical Behavior Therapy, Parent Management Training, and other EBP and crisis-intervention frameworks for high acuity youth in Washington State. This behavioral health intervention will be embedded into the broader Washington State Mobile Response and Stabilization Services (MRSS) plan in Pierce and Spokane counties, with the aim that it will eventually be deployed statewide. This project is funded through HCA’s Substance Abuse and Mental Health Services Administration System of Care Grant SM086163.
- **Amerigroup – Integrated Care Collaboration 2023**
 - \$150,000
 - The goal of this work is to support Amerigroup of Washington State’s efforts to support pediatric integrated care in Washington State. The services will support implementation in Spokane County.
- **Robert Wood Johnson Foundation Systems for Action Grant – Achieving Reach in Youth Behavioral Health and Wellness through Catchment-Area Community Governance**
 - \$100,000
 - The goal of this study is to evaluate the feasibility of the Youth Wellness Hub as a hyper-local community governance model for integrating delivery and financing systems for youth behavioral health and wellness services. The Youth Wellness Hub combines three social policy tools that are separately promising or well-supported in the research literature: community governance; public health education campaigns; and service network coordination through fiscal blending. The study uses a mixed-methods approach to assess feasibility of the model as
- **Seattle Children’s Hospital – Innovation Opportunity for Mental Health Services**
 - \$65,000
 - The goal of this project is to use a system codesign process to identify innovative areas for capacity building for mental health services at Seattle Children’s Hospital.
- **Amerigroup – Integrated Care Collaboration 2022**
 - \$52,097

- The goal of this work is to support Amerigroup of Washington State's efforts to support pediatric integrated care in Washington State. The services will support implementation in Spokane County.
- **DCYF – Your Money Matters Mentoring Co-Designed Curriculum**
 - \$15,000
 - Partner with Your Money Matters Mentoring (YMMM) to co-design and revise a curriculum informed by evidence-based mentoring principles and integrated elements of culturally and community centered approaches for improving financial literacy and financial well-being.
- **Tacoma-Pierce County Health Department – Equity Policy Codesign Evaluation**
 - \$48,645
 - The goal of this work is to conduct an evaluation of the policy codesign project on the codesign process. The evaluation will assess the acceptability and feasibility of the policy codesign process as a design method to address health inequities. This evaluation will focus on the design phase of codesign.
- **Amerigroup – Grays Harbor Systems Codesign**
 - \$10,000
 - This project is assessing the acceptability and feasibility of "System Codesign" process as a tailored implementation method for tackling complex behavioral healthcare issues. Our team is piloting this approach with a rural Washington community, Grays Harbor County, which has a high prevalence of behavioral health needs. The proposed design workgroup will leverage cross-system participation from behavioral health, law enforcement, faith-based organizations, schools, and individuals from the broader community.

Key activities in SFY 2024

Leadership Initiative for Quality

EBPI/CoLab continued the Leadership Initiative for Quality, which launched in fiscal year 2021, to improve access to quality behavioral health care for all Washingtonian children. It is a multi-layered, three-pronged strategy focused on supervisors, embedded clinical expertise, and expanding culturally responsive care through curriculum development and organizational change. The three prongs are:

- Supervisory tools for quality
- Embedded Clinical Coaching (ECC)
- CARE (Culturally Affirming & Responsive Mental Health) for Kids & Families

Supervisory tools for quality

The supervisory tools for quality prong of the initiative recognizes the integral role clinical supervisors play in supporting behavioral health clinicians' use of effective practices in community mental health agencies. The initiative aims to improve delivery of quality and effective behavioral health services, ultimately strengthening outcomes for economically and racially marginalized children and adolescents. During this fiscal year, EBPI/CoLab Supervisory Advisory Team members, Naomi Leong, LMHC, and Minu Ranna-Stewart, LICSW partnered with the Northwest Mental Health Technology Transfer Center (NW MHTTC) to promote this resource.

This collaboration included a webinar and participation in a learning community for supporting supervisors, that will further promote the supervision guide and provide technical assistance via consultation to those who are interested in implementing it. The webinar took place on March 29, 2024, and transitioned to a four-week learning community. The webinar highlighted key points from the "Supervising Clinical Mental Health Providers" guide published by the CoLab/EBPI and informed by community providers, behavioral health leaders, and systems partners.

MHTTC shared evaluation survey data with EBPI/CoLab from 172 respondents who rated the webinar very highly (1.6 average with 1 being most positive on a scale of 1-5). Respondents appreciated the practical examples and focused on real world scenarios. They also recognized and appreciated the focus on intersectionality in the supervision context regarding race and gender identity. Additionally, participants noted that they appreciated the discussion around self-care and trauma-informed supervision practices. As of June 2024, the guide has been downloaded 676 times and the online webpage with the guide information has been viewed 3,473,920 times. The guide has also been distributed as a PDF to organizations when appropriate.

On June 7, 2024, Dr. Georganna Sedlar, co-author of the Supervision Guide, participated in an invited panel session entitled "Sowing Seeds of Supervision for Growth" at the Integrated Care Conference: Cultivating Integrated Care within the Behavioral Health Ecosystem, sponsored by the Safety-Net Hospital Assessment and the UW School of Medicine Integrated Care Training Program. This session presented an overview of clinical supervision with a focus on professional growth within integrated care settings. The panelists shared best practice strategies while leaning into the collective wisdom of the audience to address challenging scenarios. The Supervision Guide was discussed and made available to participants to enhance supervision practice. Analytics showed that the Supervision Guide had 48 views and 12 downloads on the day of the conference.

Embedded clinical coaching (ECC)

ECC is an effort to embed clinical coaching resources within a certified provider agency to train staff in delivering EBP to build internal capacity rather than relying on an external entity to provide training. Using an ECC framework, EBPI/CoLab promoted the development of quality care expertise within behavioral health agencies to reduce the cost and improve the speed of clinical workforce training.

This year, EBPI/CoLab continued to actively develop an ECC model to support the uptake, sustainability, and clinical effectiveness of providing EBP in public behavioral health organizations. The model in development included asynchronous training for new clinicians and an embedded peer consultation structure.

EBPI/CoLab developed an asynchronous training curriculum in collaboration with Laura Merchant, previous Director of Harborview Abuse and Trauma Center and CBT+ Learning Collaborative, and Sean Wright, Clinical Program Director for Lutheran Community Services Northwest. CBT stands for cognitive behavioral therapy. This is a training regimen that combines a number of CBT training components in addition to consultations ensuring fidelity to the model. This group has adapted the CBT+ synchronous training into an eight-module online program consisting of slide content, interactive activities, quizzes, videos, and reflection questions.

Once clinicians complete this asynchronous training, they will join a peer consultation group where they will meet regularly with teammates and discuss successes and challenges that come with applying the tools learned through the asynchronous training. These peer consultation groups will be led by a lead peer consultant, a clinician within the organization that has attended ten peer consultation sessions over the course of at least six months and completed additional training requirements.

To ensure the lead peer consultant is sufficiently supported within this role, EBPI/CoLab and CBT+ have developed a peer consultation guide detailing how to organize sessions, facilitation tips to use during consultation, and attestation requirements for participating organizations.

Additionally, EBPI/CoLab and the CBT+ team have developed an evaluation plan for an initial pilot phase of this project ongoing as of June 2024 that has drawn interest from five provider organizations. Once developed and fully implemented, the goal of this model is to increase internal organizational CBT+ expertise and reduce administrative burden related to providers bringing in external training organizations for staff skill development.

CARE (Culturally Affirming & Responsive Mental Health) for Kids & Families

Per ESSB 5950; Section 215(31); Chapter 376; Laws of 2024; EBPI is tasked with working with HCA to seek private, federal, or other grant funding to reduce the need for state general funds.

For the 2024 and 2025 fiscal years, EBPI/CoLab received additional funding through the Washington State Legislature to continue development of the CARE (Culturally Affirming & Responsive Mental Health) for Kids & Families initiative. The initiative aims to increase culturally responsive children's behavioral health services through strengthening the lived experience behavioral health workforce and creating a culturally responsive care curriculum for statewide implementation in Medicaid-serving organizations. The CARE

project is a community-informed, participatory policy codesign process that includes partnerships with 50+ organizations statewide.

Although the CARE project is funded separately from the EBPI contract, EBPI/CoLab continues to explore how learnings from CARE intersect with and inform broader children’s behavioral health work done by EBPI/CoLab and vice versa. Both scopes of work aim to integrate research evidence, community lived expertise, and public health policy to implement meaningful, culturally responsive change across Washington’s publicly funded children’s behavioral health system. The CARE project gathered information from providers, clinical experts, and community members on critical children’s behavioral health topics, including:

- Integrating evidence-informed practice and culturally responsive care.
- Understanding and supporting the lived experience behavioral health provider role.
- Identifying different models of care provision.
- Developing culturally responsive curriculum.

In SFY 2024 the CARE project moved into a new phase of development with a project director and formation of a subcommittee structure to lead on three main efforts: workforce training, expanding behavioral health workforce roles, and organizational change support.

Via competitive solicitation, Deconstructing the Mental Health System was selected as the training organization to lead training curriculum development and piloting efforts. Subcommittee leads were identified to support the training development efforts and expanded workforce roles and have made significant progress in developing a curriculum for piloting and formalizing the workforce role and/or service which has been designated as a “wellbeing specialist/services.” CoLab/EBPI also supported an in-depth analysis of existing reimbursement schemes in Washington State to further inform the sustainability of such workforce roles. Implementation partners continue to be involved and kept up to date on project progress as part of the advisory team. This includes several regional-based organizations and Accountable Communities of Health in the North Sound, Central and Eastern regions of Washington, as well as King County via the Harborview Behavioral Health Institute.

Outreach for CARE included:

- **CARE Newsletter** that goes out to nearly 1,000 individuals across the state who have requested regular updates about CARE.
- **CARE Community Sounding Board**, which consists of a group of over 100 members from across the state who respond to prompts and provide input from the public to help drive the design process.
- **Partner spotlights** that feature partner organizations contributing to CARE. These include:
 - Deconstructing the Mental Health System
 - New Americans Alliance for Policy & Research
 - SPARK Peer Learning Center
- **Social posts and newsletters** that reach thousands of Washington residents. These include:
 - 3,500+ website visitors
 - 981 newsletter subscribers
 - 198 public survey responses

- 105 Sounding Board members
- 23 Project Amplifiers reaching hundreds of additional contacts

Statewide trainings and webinars

EBPI/CoLab hosted and co-hosted several webinars in SFY 2024. Below is a summary of the webinars that took place:

- **Configuring Electronic Health Records Systems to Report EBPs**
A Live Demos for Youth Serving Behavioral Health Organizations in Washington State October 18, 2023. This webinar shares insights from publicly funded, youth-serving behavioral health agencies on how to streamline EBP documentation in three EHR systems: Credible, EPIC, and Evolve Netsmart. The session includes a practical walk-through demonstration followed by panel discussion Q&A. [Watch a recording of the session.](#)
- **Co-designing Opioid Overdose Prevention Strategies**
CoLab/EBPI hosted a webinar on November 9, 2023, as part of the Codesign Beyond Pandemics series. Speakers Toban Shadlyn, RISD Center for Complexity, Dana Pearlman, Dana Pearlman LLC, Sue Grinnell, Population Health Innovation Lab, and Kate Sellen, Health Design Studio, OCAD, shared their experiences on developing cross-expertise collaborations in digital environments for opioid overdose prevention system planning. CoLab Director Sarah Cusworth Walker facilitated the presentation.
- **TeleBehavioral Health: Brief Guides for Service Delivery to Elementary, Middle, and High School Youth and Youth with Suicidality Across Traditional and Non-traditional settings**
CoLab/EBPI co-hosted this webinar with partners at Harborview BHI on December 15, 2023. This included a review of recently released guides, discussion, and Q&A. [Watch recording of the webinar.](#)
- **Child-Parent Psychotherapy (CPP) Community Based Implementation Meeting; EBP reporting guide webinar**
CoLab/EBPI participated in two separate webinar offerings via the Barnard Center Child-Parent Psychotherapy learning collaborative to provide technical guidance to participants on how to document and report EBPs.

EBP reporting guides

In the past year, the EBP reporting guide had 1,015 page-views. EBPI/CoLab published the updated [2024 Reporting Guide for Research and Evidence-Based Practices in Children’s Mental Health](#). The 2024 guide includes an updated list of active training entities in the appendix and minor updates to reflect most up to clinical guidelines.

EBPI/CoLab continues to evaluate new applicants for reporting guide training entities and improve internal policies around eligible trainer processes to ensure that the guide continues to adapt to the current landscape of community mental health. EBPI/CoLab met with two providers, Raymond Gregson and the Big Homie Program, to discuss their interest in becoming an approved trainer and provide resources and options for that pathway.

Data reports of EBP reporting across Washington State mental health agencies

EBPI/CoLab continues to provide direct technical assistance support for child serving agencies in Washington State to support capacity building for high-quality mental health care and reporting of EBPs through routine billing data. CoLab/EBPI provided direct assistance to two school-serving agencies (Cowlitz County Kelso School District and NW Regional Education District) to provide education and guidance on EBP reporting.

EBPI/CoLab continued producing concise reports of EBP use in children’s mental health systems across the state of Washington. Reports are provided publicly on the EBPI/CoLab website and through a mass-emailing listserv which includes various system partners such as providers, payors, community behavioral health agencies, governmental and academic institutions, among others. The data shared shows the prevalence of EBP reporting by county and the number of EBPs reported by treatment family. This provides an overview of the concentration of which regions are reporting and which treatments are being used most often. The EBP quarterly data report mass listserv communications have an average 60 percent open rate.

EBPI/CoLab continues to further strengthen and build relationship with MCO contacts through attending the Joint MCO Training Workgroup on a quarterly basis, holding individual monthly meetings with MCO partners, and providing individual technical assistance to review MCO annual reports to HCA on EBP reporting performance. CoLab/EBPI met with representatives from Amerigroup (Wellpoint), Molina, Community Health Plan, Coordinated Care, and United Healthcare to review their reports, discuss support needed, and plans for how to promote and track the use and reporting of EBPs by their providers. CoLab/EBPI is also participating in a newly formed cross MCO working group specifically related to EBP training and reporting, led by United Healthcare. Below are additional details related to contact and support provided to MCOs.

Tailored evidence reviews

EBPI/CoLab conducted evidence syntheses including systematic and rapid evidence reviews on the following topics:

1. [Exploratory research grants](#) known as the R34 systematic review mechanism by the National Institute for Mental Health
2. Clinical guidelines review
3. Expanding the public behavioral health workforce through community expertise
4. CARE scoping review
5. Telebehavioral health policy analysis

R34 systematic review

EBPI/CoLab conducted systematic literature review on adolescent and youth mental health promotion and substance use prevention models. The review sought to identify target models that have been implemented in real world settings (e.g. within a larger system or community), incorporate involvement with the community, and are not solely led or funded by academic research teams.

A total of 486 articles were identified in the search and screened for title and abstract review. A total of 75 articles were pulled for full text review. From the identified articles, six case studies were selected to highlight successful and unsuccessful models as well as report on the evidence for their effectiveness, why they worked or did not, or what would need to be in place for the model to work. These case studies are being adapted into an interactive toolkit that will be used in a larger policy codesign project to identify what model (or components of different models) resonate with community team members.

Clinical guidelines review

EBPI/CoLab completed an evidence review to update the 2024 reporting guide with any new or updated clinical guidelines on children's mental health treatment. A rapid evidence review was conducted to identify changes in clinical guidelines recommendations for children's mental health care (CMHC) published in the last 4 years (with a focus on psychotherapy). This information was used to inform updates to the 2024 Reporting Guide for research and EBP in CMHC. The reporting guide provides instructions for how to report research or EBP for children's public mental health care (under 18 years of age) in Washington State. [View additional details on the process and the results.](#)

Expanding the public behavioral health workforce through community expertise: promising community health worker models for children and adolescents in the U.S.

This rapid evidence review was conducted by a CoLab/EBPI staff member in which they evaluated community health worker-delivered mental and behavioral health interventions for children and adolescents in the United States.

Six intervention models were reviewed to assess study design characteristics, intervention core components, delivery models, workforce training, and implications for implementation and scale up. Most of the included interventions showed improved psychosocial outcomes for children and adolescents. The six interventions also shared core components, including:

- Caregiver engagement, strengthening the quality of the child-caregiver relationship.
- Flexible delivery.
- Strong partnerships with community organizations.
- Reliance on community health workers already embedded within communities.

The findings of this review provide support for community health worker-delivered interventions as effective, culturally grounded, scalable models that can rapidly grow the child mental health workforce nationwide. Possible pathways for program implementation, scale-up, generalizability, and funding mechanisms are discussed.

CARE scoping review

The CARE scoping review explored the literature on therapeutic interventions currently being delivered globally via nonspecialist providers in community- or home-based settings to support child and adolescent mental health. Early in SFY 2024 this review was finalized and submitted for publication. It is currently under peer review.

Telebehavioral health policy analysis

As a partner effort to the separately funded prenatal-25 telemental health best practices proviso, EBPI/CoLab conducted a policy analysis of distributed telehealth networks to guide business decisions for expanding telemental health in Washington State. Early in SFY 2024, the policy analysis report was disseminated to relevant partners and networks.

Family support for child and youth mental health needs

Over the course of SFY 2024, EBPI/CoLab has worked with system partners and people in Washington with lived experience to identify challenges and potential solutions to preservice engagement support for youth and caregivers in Washington State. Meetings with system partners (peer support organizations, HCA officials, and teen health advocates) lead to the development of a problem statement that informs the direction of this initiative:

“Youth and/or their caregivers seeking resources (defined as brochures, websites, videos, different things that can provide information) tend to have a difficult time finding resources that are trust-worthy, accessible, and relevant to the specific challenge they’re experiencing.”

Through conversations with partners and an expansive online search, EBPI/CoLab found that there are many websites, brochures, and books meant to support families through the early stages of mental health challenges. The issues around trustworthiness, accessibility, and relevance mentioned in the problem statement were apparent in this search, as we saw an overwhelming number of resources that used technical language and/or lacked a reputable source. The type of person that EBPI/CoLab aims to support through this project is somebody who has yet to achieve that connection to services, and thus feels alone and confused while attempting to navigate this incredibly complicated system to get support for themselves or their children.

In February 2024, EBPI/CoLab recruited ten people (six caregivers and four young adults) from across Washington State to participate in a focus group meant to inform the direction of this initiative. EBPI/CoLab held a focus group in March 2024, where participants were presented with the problem statement, asked if it resonated with them and their lived experience, and offered a potential solution: a directory for family-approved resources on a range of mental health topics. The group did not reach broad agreement on this proposal being the most effective way to address issues related to caregivers and youth finding resources that help address mental health challenges experienced by youth in Washington State.

Without this broad agreement in place, EBPI/CoLab decided to invite the focus group participants to participate in semi-structured interviews to understand their preferences for this initiative in more detail. Nine out of ten focus group attendees participated in these interviews in May of 2024. EBPI/CoLab qualitatively coded the transcripts of these interviews and identified common themes across the preferences participants have for this product. These themes informed the development of two solutions both involving the evaluation of an existing resource hub meant to support youth and caregivers in Washington State. Participants are currently weighing in on these options via a survey which will be used to develop next steps for this project beyond SFY 2024.

Scaling EBPs in mobile response and stabilization services (MRSS)

EBPI/CoLab is working with Dr. Kyrill Gurtovenko, head of dialectal behavioral therapy (DBT) programming at Seattle Children’s Hospital, to identify DBT-informed practices that could be applied to crisis and stabilization situations involving youth and their caregivers. While DBT is a popular and effective treatment regimen, it is costly and time consuming to train staff to implement that full regimen. Using identified components of DBT in specific instances reduces burden and cost of that training. EBPI/CoLab received funding via a SAMHSA System of Care grant and continues to work with HCA to identify additional funding opportunities to implement effective components of evidence-based interventions such as DBT.

EBPI/CoLab and Dr. Gurtovenko have facilitated eight integrated training and consultation sessions with three Washington community mental health providers over SFY 2024. The training component of these sessions is focused on teaching youth and caregiver’s emotion regulation tools they can use to help prevent future crises from occurring. Additionally, EBPI/CoLab and Dr. Gurtovenko are developing asynchronous modules for clinicians and caregivers to interact with that will demonstrate DBT-informed emotion-regulation tools for youth experiencing mental health challenges.

Conclusion

In the SFY 2024, EBPI/CoLab continued to seek funding, develop initiatives, support policies, and build partnerships to promote evidence-based behavioral health services for Washington State children and families.

EBPI/CoLab submitted grant proposals to diversify its portfolio of service funding and has continued its partnership with HCA to promote and track the use of evidence and research-based interventions for youth receiving publicly funded mental health services in Washington.

EBPI/CoLab continued the Leadership Initiative for Quality to improve access to quality behavioral health care for all Washingtonian children through a multi-layered, three-pronged strategy focused on supervisors, embedded clinical expertise, and expanding culturally responsive care through curriculum development and organizational change.

EBPI/CoLab embarked on a new initiative on family support for child and youth mental health to inform a self-guided resource for service connection.

Lastly, EBPI/CoLab released the updated 2024 Reporting Guide including updated clinical guidance, continued to provide technical assistance support to agencies, produced rapid evidence reviews, and supported multifaceted efforts to improve processes around the use of EBP and reporting in children's behavioral health care.

EBPI/CoLab continues to work toward improving and strengthening the mental health and well-being of children through its three pillars of quality care: evidence-informed, culturally relevant, and client-centered.