Organizational Structures to Support Evidence Based Practices

Three Models

Utah UTACCS
Technical Assistance Center for Children's Services

The primary Goal of UTACCS

Develop a statewide technical assistance plan to assist the behavioral health community in improving outcomes.

What are the core objectives of UTACCS?

- Increase awareness of and access to evidence-based practices (EBPs)
- To identify and promote the use of specific evidence based behavioral interventions
- Assist communities in selection and implementation of EBP
- To develop partnerships and affiliations with EBP-BP developers and link EBP/expertise to MH/SA treatment providers
- Participate in EBP program and policy development & recommendations

TA CENTER ROLE

Communicator/Disseminator
Educator
Advocate
Broker
Researcher
Collaborator
Evaluator
UTACCS MISSION

- To link evidence-based practices and programs to systems of care to improve outcomes in child and adolescent behavioral health care.
- To facilitate access to, implementation of, and fidelity to evidence-based treatment modalities.
- To assist in the transformation of the behavioral health care system of Utah through research, education, training, coaching, advocacy, and policy promotion.

STAKEHOLDERS

- Utah Child and Adolescent Network (UT CAN)
- Division of Substance Abuse & Mental Health (DSAMH)
- Division of Child and Family Services (DCFS)
- Juvenile Justice System (JJS)
- Division of Services for People w/ Disabilities (DSPD)
- University of Utah/Social Research Institute (SRI)
- Children, Adolescents, and Families

UTACCS HISTORY

- SAMHSA State Infrastructure Grant (SIG)
- UTACCS - located at the University of Utah, 7 grantees: 6 states/1 Native American tribe
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- College of Social Work
- UTACCS HISTORY

- Networking
- National EBP Conferences
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- RESEARCH

- GET TO KNOW STAKEHOLDERS - conferences, seminars, trainings, focus groups, advisory boards
- RESEARCH - literature reviews; identify existing EBPs – 1)
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- DEVELOPMENT OF EBP RESOURCES

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- TA CONSULTATION - facilitate development of a SA Tx program for Native American adolescents
- UTACCS HISTORY

- 2nd year of a 3 year grant
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UTACCS Direction?

Multiple Stakeholders with Multiple Expectations

POPULATION OF COMMON INTEREST

OVERLAP –
- DCFS - Division of Child and Family Services
- DSPD - Division of Services for People with Disabilities
- JJS - Juvenile Justice System
- SA/MH - Division of Substance Abuse and Mental Health

LESSONS & CHALLENGES

- Network - establish relationships
- Learn from experience of EBP pioneers
- For EBP acceptance and sustainability
  - Stakeholder readiness/buy-in
  - Implementation with fidelity
    - “As anyone knows who has worked in the field, implementation of new practice is the biggest challenge of all.”
  - Identify a population of common interest
  - Establish advisory board

TEAMWORK

"Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has."
Margaret Mead

UTACCS

Location: Utah Technical Assistance Center for Children’s Services
Social Research Institute, College of Social Work
University of Utah
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The Center for Effective Interventions
Promoting Evidence-Based Therapeutic Services for Families, Children and Youth

CEI History
- Began with a state/federal grant to promote evidence-based programs in Colorado, starting with MST (2000)
- Currently completely self-supporting through fees for services
- Two organizational progressions:
  - Developing, training and supporting MST teams in adjoining states
  - Relationship building with other program developers - FFT & MTFC, BSFT

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<thead>
<tr>
<th>State</th>
<th>Initiator</th>
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<tbody>
<tr>
<td>Colorado</td>
<td>Providers</td>
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<tr>
<td>New Mexico</td>
<td>Children, Youth &amp; Families</td>
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<tr>
<td>Texas</td>
<td>Providers &amp; State</td>
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<td>Arizona</td>
<td>Providers</td>
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<td>Oklahoma</td>
<td>University &amp; Juvenile Justice</td>
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CEI as EBP Purveyor
- Multiple state involvement (CO, NM, OK, TX, AZ)
- With one exception, no formal relationship with any state agencies
- Currently supporting 38 MST teams in 20 agencies
- Multiple Program Developer focus (MST, FFT, MTFC, BSFT)

CEI as EBP Purveyor
- Technical Assistance to Provider Agencies in EBP Implementation
  - Education of options for selected population
  - Front-end education of all aspects of developer expectations
  - Explanation of initial and ongoing costs
  - Ongoing discussions regarding due diligence and fidelity monitoring

CEI as EBP Purveyor
- Support for new nature of purveyor relationship
  - More than achieving front-end credential/license
  - Unprecedented ongoing (intrusive?) expectations requirement
  - Data measurement & due diligence management via regular organizational calls
  - Less defined areas of more general technical assistance such as hiring tool kits

21st Annual RTC Conference
Presented in Tampa, February 2008
Policy Development Role

- Start-Up Assistance (Mini-Grants)
- Advocacy for Funding
  - Blended Funding vs. Silos
  - State Medicaid Plans
- Alternatives to Out-of-Home Placement Dollars
- Outcome-Based Accountability

Lessons Learned

- EBP implementation requires vision of agency & community stakeholders
- Organizational development & change management
- Change requires time given organizational dynamics and community education
- Commitment of community support for delineated protocol
  - Willingness to implement with fidelity - i.e. relinquishing clinical lead, support for EBP case direction
  - Ongoing support for families once case is closed vs. re-referral to public sector

Benefits of IPO

- IPO Strives to implement chosen EBP with fidelity while being aware of
  - State system organizational awareness
  - Local issues
    - Recruitment challenges
    - Distance
    - Community Resources
    - Cultural Relevance

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Organizational Structure

- Initial funding 2001: Federal Block Grant through the Ohio Department of Mental Health
- Located with a County Mental Health/Substance Abuse Authority
- Planning for relocation to a University setting
## History and Background

- ODMH identified key Evidence Based Practices it wanted to see disseminated in the state (IDDT, TMAP, MST...)
- Created Coordinating Centers of Excellence (CCOE) as the vehicle for dissemination
- Allocated Federal Block Grant funds to support the development of infrastructure
- Incubator model
- Funded a research study to follow implementation

## Stakeholders and Investors

- State Government
- Local providers of services
- Intersystem collaboratives and stakeholders
- ‘Outsource’ option for some endeavors

## Mission and Vision

- Increase awareness and knowledge of EBP in behavioral health, for youth and families
- Increase access to EBPs
- Assist communities with identifying, developing and implementing EBPs
- Identify shared outcomes across youth serving systems
- Inform state and federal policy discussion

## Implementation of EBPs and Best Practices

- MST: creating statewide network
- MST Network Partner
- Intensive Home-based Treatment
- Integrated Co-occurring Treatment
- Developing relationship with Functional Family Therapy
- Resilience
- Transition Age Youth
- Considering other engagements

## Related Roles

- Technical assistance to communities and state on program and policy development related to youth and families behavioral health needs
- Developing a research and evaluation capacity to assist entities with outcomes and evaluation activities
- ‘Developer’ of intervention

## Policy Role

- Influencing discussion related to home and community based care
- Participation and leadership on state level Task Forces
- Expert consultation on various state initiatives related to best practices
- Leadership role in identifying best practices and implementation
- Involved in budget discussions related to ‘going to scale’
Lessons and Challenges

- Keep on educating about EBPs
- More focus on helping communities and providers build necessary infrastructure
- Integration within a System of Care
- Needs and data based decisions and choices
- Identifying shared outcomes from stakeholders
- Caution about ‘over promise’
- Legislative and advocacy strategies
- Family and consumer engagement earlier and more consistently
- Administrative, organizational, and fiscal issues

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