Poll Question

What type of BH/MH agency do you work in?

A) State-level department
B) County system
C) Community-based organization
D) School or University
E) Other
Poll Question

What is your position type?

A) Agency Director
B) Management/Supervision
C) Direct service
D) Administration
E) Other
Poll Question

How familiar are you with the CEBC

A) Very familiar
B) A little bit
C) Not at all
Learning Objectives

Participants will be able to:

• Describe how the CEBC evaluates research evidence,

• Effectively identify trauma interventions for children, youth, and parents using the CEBC website,

• Define the Exploration Phase of implementation and apply practical steps to navigating this phase.
Welcome to the CEBC: California Evidence-Based Clearinghouse for Child Welfare

The mission of the California Evidence-Based Clearinghouse for Child Welfare (CEBC) is to advance the effective implementation of evidence-based practices for children and families involved with the child welfare system.

- **View Programs**
  - Search database of child welfare-related programs.
  - Description and information on research evidence for specific programs.

- **Select and Implement Programs**
  - Guidance on how to make critical decisions regarding selecting and implementing programs.
  - Tools and materials to provide support for choosing, implementing, and sustaining a program.
CEBC Mission

To advance the effective implementation of evidence-based practices (EBPs) for children and families involved with the child welfare system

- Program Registry
- Selecting & Implementing Programs
45+ topics are clustered in the following areas:

- Anger Management, Domestic Violence, and Substance Abuse
- Behavior Management and Parent Training
- Core Child Welfare Services
- Engagement and Parent Partnering Programs
- Mental Health
- Prevention and Early Intervention
- Support Services for Youth in CWS
Guide to CEBC for Mental Health Agencies:

http://www.cebc4cw.org/home/using-the-cebc/
CEBC Team

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CEBC Advisory Committee

- California DSS - Child and Family Services Division
- County Child Welfare Departments
- County Welfare Directors Association of California
- California Child Welfare Training Organizations
- Public & Private Community Partners
- National Child Welfare Consultants
The CEBC Scientific Panel

- Richard P. Barth, PhD - University of Maryland
- Lucy Berliner, MSW - Harborview Clinic for Sexual Assault & Traumatic Stress
- Lauren Brookman-Frazee - University of California, San Diego
- Stan Huey, Jr., PhD - University of Southern California
- Laurel Leslie, MD, MPH - Tufts University School of Medicine
- Benjamin E. Saunders, PhD - Medical University South Carolina
- Haluk Soydan, PhD - University of Southern California
- Shannon Dorsey - University of Washington

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Implementation Science Panel

- **Greg Aarons, PhD** - University of California, San Diego
- **Lauren Brookman-Frazee, PhD** - University of California, San Diego
- **Patti Chamberlain, PhD** - Oregon Social Learning Center
- **Larry Palinkas, PhD** - University of Southern California, School of Social Work
- **Sonja Schoenwald, PhD** - Medical University of South Carolina
- **Shannon Dorsey** - University of Washington

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Why EBP Now?

• A growing body of scientific knowledge allows us to take a closer look at practices.

• Increased interest in outcomes and accountability by funders.

• Increased interest in consistent application of quality services.

• Past missteps in spreading untested “best practices” that turned out not to be as effective as advertised.

• Continuing focus on safety and effectiveness of interventions.

• Impact of EBPs on worker retention and satisfaction.
CEBC’s Definition of EBP

- Programs that can be replicated with a manual and/or training
- Must be implemented with fidelity to achieve intended results
- Programs have varying levels of supporting research evidence
Important Concepts

Randomized Controlled Trial

Peer-Reviewed
The CEBC Scientific Rating Scale

WELL-SUPPORTED | | CONCERNING

1 2 3

Supported  Promising  No Effect

4 5

NR

Not Able To Be Rated

- Has no research, or
- Research doesn’t fit scale criteria

NOTE: NOT ALL PROGRAMS LISTED ON THE CEBC HAVE RESEARCH STUDIES
Important Considerations

• Look at the program’s research & reference section
  – Programs rated a 3 may have multiple RCTs but no follow-up
  – Programs rated NR may have research that’s non-peer reviewed

• Critically examine the components of the EBP itself
  – 1s or 2s have strong supporting research evidence but may not be a good fit for your organization
  – More on this later....
Total = 433 programs as of March 2018
Strengths & Limitations

- Rating scale is **clear cut**
- Numbering system is **easy to follow**
- May **miss high quality research and null studies** by relying on published, peer-reviewed research
CEBC vs. Other Registries

• CEBC requires published, peer reviewed research
• CEBC requires post-intervention follow-up for top levels
• Focus on CWS specific programs

CEBC’s Guide to Comparing Clearinghouses:
http://www.cebc4cw.org/files/CEBCGuideToComparingClearinghousesForEvidence-BasedPrograms.pdf
Partner Activity

Face back-to-back with your partner

I will read a true/false question out loud

Use your arms to make a “T” for True or “X” for False

Then quickly turn around to show your answer
True or False

If a program is listed on the CEBC it means that the program is “evidence-based”
True or False

The CEBC only rates programs with studies published in peer-reviewed journals
True or False

A treatment can have multiple RCTs showing positive results, but still receive an NR on the CEBC
A similar agency to your own has been successful using EMDR. That means EMDR is guaranteed to work for your agency.
True or False

The CEBC requires treatments rated a 1 or a 2 to have a post-intervention follow-up.
Selecting & Implementing Evidence-Based Practices
Question

What types of problems can agencies encounter when starting up an EBP?
More info on the EPIS Framework:
http://www.cebc4cw.org/implementing-programs/tools/epis/
Why Careful Selection Matters

- The success and sustainability of an EBP begins with selecting the right one.
- Negative consequences of adopting an inappropriate EBP.
Why Careful Selection Matters

Adopting a new program isn’t always the answer:

1) Changes to internal processes
2) Expand existing effective programs that need more capacity
3) Develop an evidence base for an existing program that seems promising
Golden Poppy Therapeutic Services

Small CBO outpatient clinic:
- 20 Staff total (5 - 7 therapists)
- Serves children & families
- Primary referrals from community
  • County BH, schools, etc.

Scenario #1: Not offering trauma treatments for children & youth. Considering adopting a trauma program.

Scenario #2: TF-CBT is provided, but outcomes are poor and many clients are dissatisfied with services
The Exploration Phase Tasks

- Form an Implementation Team
Implementation Teams

- Ensures purposeful, proactive, and effective implementation
- Membership evolves throughout implementation phases

Golden Poppy’s Team:
- Senior level administration
- Staff Supervisor/Manager
- Staff therapist
- Staff case manager
- Client representation
The Exploration Phase Tasks

- Form an Implementation Team
- Conduct a Needs Assessment
Conducting a Needs Assessment

Use data to examine the issues:

• Existing organizational data sources

• Collect new data as needed
  – Surveys
  – Focus groups
  – Chart reviews
Identifying & Clarifying the Problem Areas

Identify key aspects

- Target population demographics
  - Ages
- Assessment data
  - Type of traumatic experience
  - Trauma symptoms
  - Other co-occurring problems
- Services already access

Conduct root cause analysis as needed
Why are mental health services currently in place not meeting the need?

They are not trauma focused.

There is not an assessment process in place to identify trauma symptoms or history.

Children are not being referred for trauma, but are referred for external bx problems or depression.

There is not a screening in place, and caseworkers are not looking for trauma.
Scenario #2: Organizational-Level Assessment

- **People**
  - Direct service workers who report feeling burnt
  - Minimal admin & leadership involvement
  - Clients with trauma histories

- **Policies**
  - Complete workforce is not trained on TIC (receptionist, HR, assistants, interns, etc.)
  - Multiple competing responsibilities
  - High caseloads
  - TF-CBT fidelity data is not collected

- **Practices**
  - Screening/assessment data is collected & monitored
  - TF-CBT provided

- **Environment**
  - Non-child friendly environment (décor, reception)
  - Lack of collaboration among staff
  - High staff turnover

- **Poor client outcomes**

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The Exploration Phase Tasks

- Form an Implementation Team
- Conduct a Needs Assessment
- Identify Potential Solutions
Scenario #1:

1) Identifies research-supported trauma screening tools:
   - NCTSN Measures Review Database
     - [https://tinyurl.com/ydxkm5sb](https://tinyurl.com/ydxkm5sb)
   - CEBC measurement tools
     - [https://tinyurl.com/787lt86](https://tinyurl.com/787lt86)

2) Creates a detailed implementation plan for supporting the use of the new screening tool:
   - CEBC webinars on screening & assessment:
     - [https://tinyurl.com/y8zkffwn](https://tinyurl.com/y8zkffwn)
     - [https://tinyurl.com/yb5f2dg5](https://tinyurl.com/yb5f2dg5)
Scenario #2

- Golden Poppy contacts TF-CBT Developer for consulting on fidelity monitoring & coaching services.

- Golden Poppy also decides to look into trauma informed care training for their organization.
CEBC Trauma Treatments

Client-Level Interventions
Interventions designed to help an individual process a trauma or multiple traumas they have experienced and learn how to cope with feelings associated with the experience.

System-Level Programs
Programs for service providers and agencies designed to create a therapeutic environment that is more conducive for clients who have experienced trauma and their families, reducing the risk of re-traumatization by service providers and agencies.

http://www.cebc4cw.org/search/topic-areas/trauma-treatment-child-adolescent/
Child Trauma Treatments

1 - Well-Supported by Research (3 programs)
• EMDR
• Trauma Focused Cognitive Behavior Therapy
• Prolonged Exposure Therapy for Adolescents

2 –Supported by Research Evidence (1 programs)
• Child-Parent Psychotherapy

3 – Promising Programs (17 Programs)

NR – Not able to be Rated (17 Programs)
Systems-Level Programs

3 – Promising Programs (*1 program*)
Sanctuary model

NR – Not able to be Rated (*6 programs*)
ARC
Child Welfare Trauma Training Toolkit
Restorative Approach
Risking Connection
Think Trauma
Trauma Systems Therapy

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The Exploration Phase Tasks

- Form an Implementation Team
- Conduct a Needs Assessment
- Identify Potential Solutions
- Determine Program Fit
Scenario #1: Tool Fit

• Tool Selection Considerations
  – Length/time to complete
  – Cost
  – Translations and cultural appropriateness
  – Informants
  – Age range
  – Scales and scores provided
  – Research support
Scenario #2: Program Fit

- Ease of Use
- External Compatibility
- Financial Considerations/Relative Advantage
- Internal Compatibility
- Knowledge Requirements
- Match of Skill Set
- Observability of Benefits
- Reinvention/Adaptability
- Risk
- Training/Support
- Trialability

Greenhalgh et al., 2004.

Detailed info on each domain:
Example: Internal Compatibility

Key Questions:

• How does this practice fit with the norms, values, and beliefs of the workforce?
• Will it require radical change in thinking or process?
• How much change will be required of existing workforce?
Example: Financial Considerations/Relative Advantage

Key Questions

• What financial resources to fund the practice exist, both in the short and long term?

• What is the cost for initial and ongoing training and consultation?

• Does the practice have a clear advantage for the organization, in terms of efficiency or cost efficiency, compared to what is currently being done?
Working with Program Developers

- Working with Program Developers
  - Questions about research
  - Implementation requirements
  - Someone you can collaborate with?

- Developer contact information available in the CEBC program registry
Create a Written Summary

• Document how the team came to its decision
• Create a plan with next steps
• Secure leadership buy-in
  – Overlap with Preparation Phase
More info on the EPIS Framework:
http://www.cebc4cw.org/implementing-programs/tools/epis/
The CEBC Selection & Implementation Guide

- Detailed information on each implementation phase
- Extensive technical assistance materials
- Relevant real world examples

Download at: http://www.cebc4cw.org/implementing-programs/guide/