



Summer 2023 Advisory Board Meeting

JULY 14, 2023



Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

LAND & LABOR ACKNOWLEDGMENT

Based in Seattle, The University of Washington acknowledges the Coast Salish peoples of this land, the land which touches the shared waters of all tribes and bands within the Suquamish, Tulalip and Muckleshoot nations.

**May we always honor their spirit and heritage
while working for justice in these communities.**

We also acknowledge the unaddressed legacy of stolen labor and slavery, and we recognize our debt to exploited workers past and present.
This legacy remains and is a current reality for many today.

Agenda



Welcome

Updates

Cross-TTC Leadership Learning Collaborative

Current Projects

State Focus Group Meetings Sharing & Discussion

Upcoming Opportunities

Wrap-Up



Welcome

Join at menti.com use code 3125 2916

What is your favorite thing about Summer?

Waiting for responses ...



GO TO
menti.com

ENTER THE CODE
3125 2916

1

Press **ENTER** to stop scrolling



Updates

SAMHSA

Region 10 TTC Updates

Northwest MHTTC

Members





Coming Together to Rethink Behavioral Health: Integrating Practice, Reducing Stigma, and Achieving Outcomes

A Skagit County Leadership Learning Collaborative

July 11 & 12, 2023

The Vital Conditions



The **Vital Conditions** framework gives us a way to take *coordinated action* on the community factors that enable people to lead thriving lives.

The seven conditions are rooted in commonly held values – and can be described in plain language.

They're also interdependent. Progress on one vital condition naturally drives progress on others.

That makes it easier to develop solutions that address multiple problems at once.

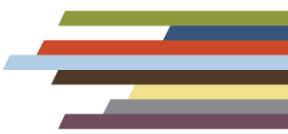
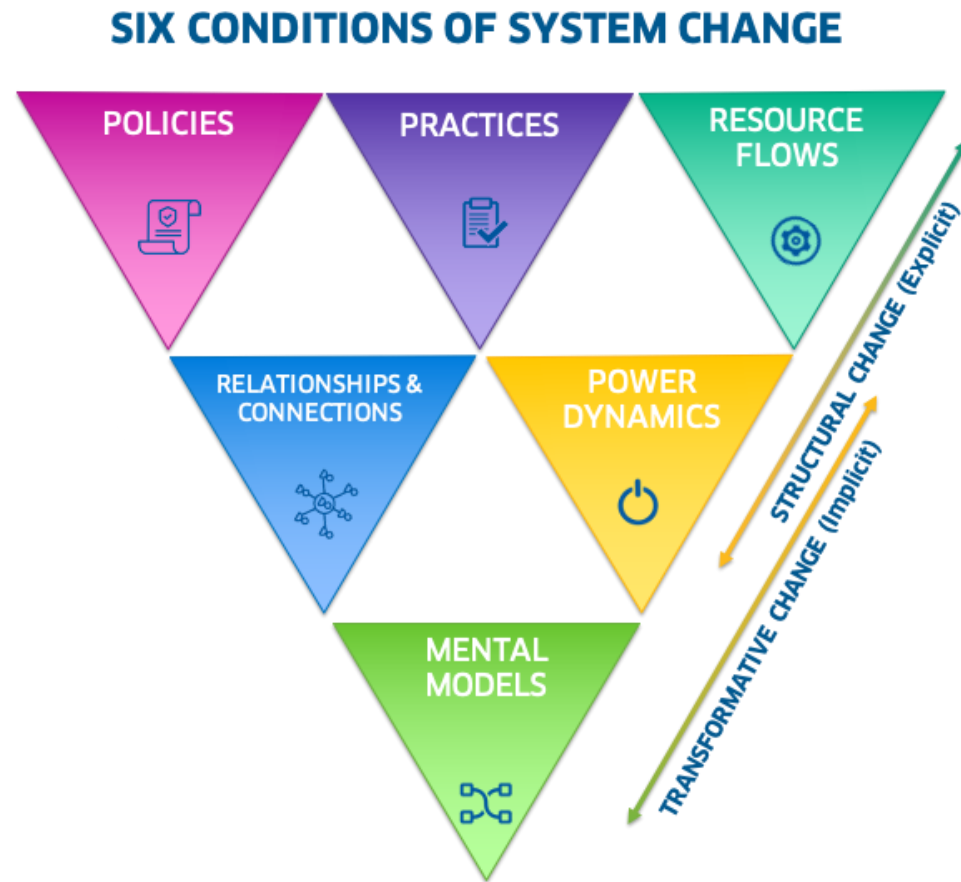


The Conditions of System Change

One reason why top-down efforts at system change tend to fail is that they don't address the things **that actually drive the system**.

Often, everyone's effort goes to changing the things that are easy to see – *the policies, practices, and resource flows*.

But the hidden factors that hold the problem in place remain untouched – *the relationships, power dynamics, and mental models*.



The Big Picture: Why we are here?



July 11&12

Understand an issue and the system(s) in which it lives.



July 12

Create a plan of action at 3 levels:

- individual
- organization
- system



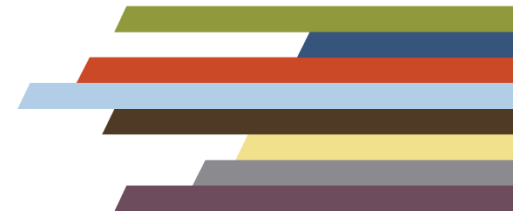
July-December

Learn and Refine as you we go

September Learning Session

Team forms to develop an Anti-Stigma Initiative

TTCs provide coaching and support





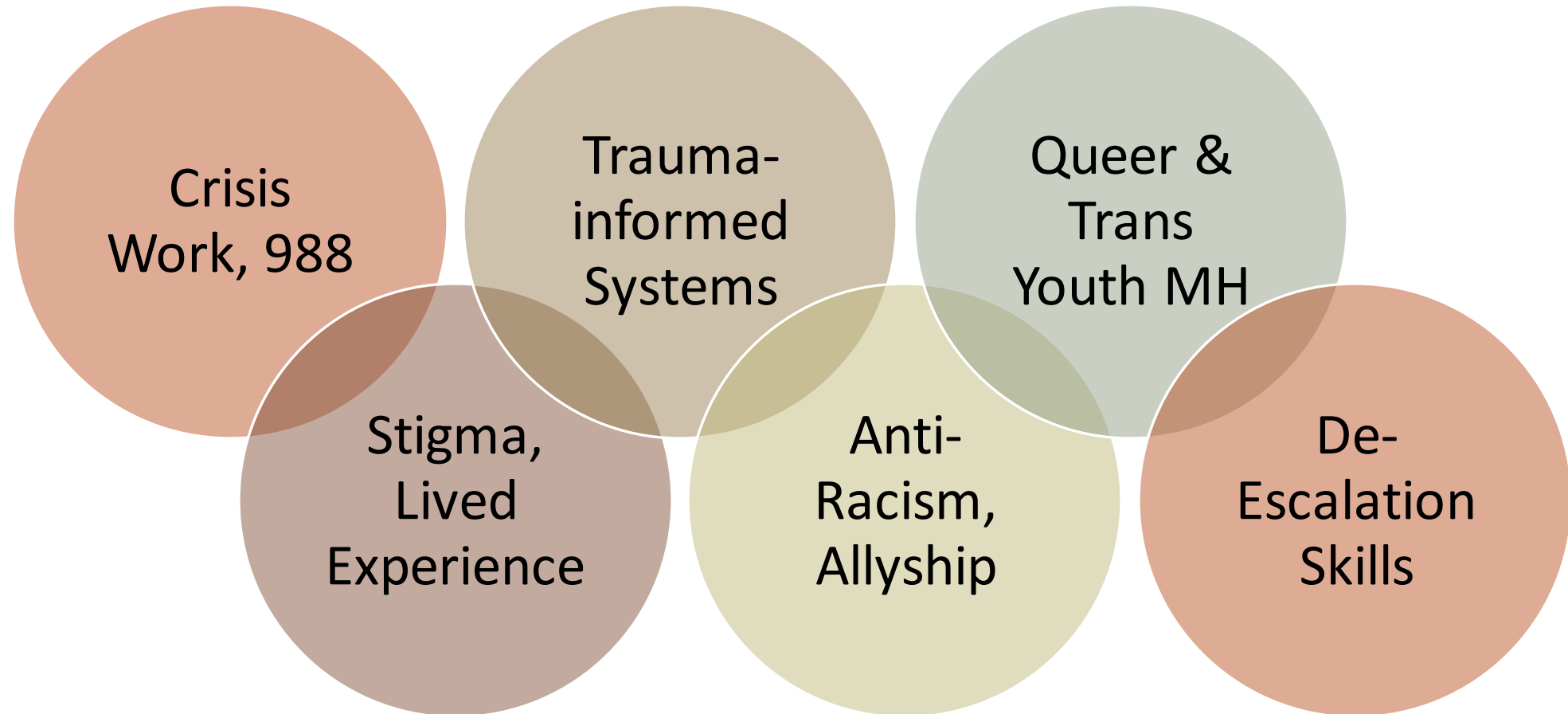
Current Projects Check-In



STRIDE: Implementing an evidence-based lifestyle intervention



Webinars



Learning Communities

Resilience

Trauma
Informed
Supervision

Examining
Bias &
Ideologies

Challenging
Stigma

Essentials
of Care:
Supporting
SMI

Cultural
Adaptations
of EBPs:
Treating
Hispanic &
Latinx
Communities

Making It Stick: A Practical Approach to Dissemination and Implementation

An Internal Learning Community
Open to All TTC Staff

Presented by: MHTTC Dissemination and Implementation
Working Group



Making it Stick: A Guide to Using Dissemination and Implementation Science in Planning High-Impact Training and Technical Assistance

- Based on live learning community for MHTTC Regional Centers

Session Recordings and Slide Decks

- *Session 1 - D&I Science: Where do we start?*
- *Session 2 - Rollout: How do we decide what to do?*
- *Session 3 - Working Session: How do we put what we've learned into practice?*



Washington Behavioral Healthcare
Conference sessions

Mental Health Institute: Older Adults track

Brief Narrative Therapy Intensive

Plans with Tribal/Native organizations

Mental Health Institute Audience Metrics

Intellectual and Developmental Disabilities Track	Co-Occurring Disorders Track	Social Justice and Inclusion Track
<ul style="list-style-type: none">• 28% BIPOC attendees• 29% LGBTQIA+ Attendees• 75% Metropolitan or Suburban• 18% Rural or Frontier Community• 5% Tribal Community	<ul style="list-style-type: none">• 29% BIPOC Attendees• 20% LGBTQIA+ Attendees• 81% Metropolitan or Suburban• 16% Rural or Frontier Community• 1% Tribal community	<ul style="list-style-type: none">• 43% BIPOC Attendees• 34% LGBTQIA+ Attendees• 79% Metropolitan or Suburban• 16% Rural or Frontier Community• 3% Tribal community

Quotes from learners

I valued sharing our thoughts and feelings, I felt less alone.

The warmth, relatability and authenticity of the instructor made it so easy to participate.

I felt truly connected with a community that got exactly how I am feeling!

Having experts sharing their experiences always makes webinars more interesting.

I gained insight how this impacts working relationships and ways to talk about this with our supervisors.

Pushing me to see things from various perspectives.

I have seen already the improvement in my client's relationship with their family and with themselves.

Impact of Equity-informed Trainings



Facilitated cultural pride and confidence among clinicians



Encouraged open-mindedness and cultural curiosity



Reduced burnout by encouraging therapist creativity and cultural flexibility



Provided models for shared decision making and collaborative practice with clients



Increased feelings of empowerment



Appreciation of community and connection with other providers



Learning from lived experiences and personal stories shared



Increased proficiency and comfort working with underserved communities



CREATE OPTIONS



HealthKnowledge

Home About Get Help How to Use How to Register My Courses

FREE ONLINE LEARNING & LOW-COST CONTINUING EDUCATION FOR HEALTHCARE PROVIDERS

A PODCAST FOR THE MENTAL HEALTH WORKFORCE

PUTTING IT TOGETHER

Northwest (MHS Region 10) MHTTC
Mental Health Technology Training Center
Health, Culture, Innovation and Quality Care for All



State Focus Group Meetings Sharing & Discussion

OUR QUESTIONS

*CHALLENGES AND
OPPORTUNITIES?*

- **WHO** should we train?
- **WHAT** should we train?
- **HOW** should we train?
- **WHERE** should we focus?



Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Who should we train?

First responders/Crisis staff

Community direct care workers

Professionals with different needs across career stages & levels

Focus on individuals and organizations

What should we train?

Practical, skills-based training

Diverse modalities

Tribal healthcare for non-tribal providers

Native perspectives

Rotating topics (mental health literacy, de-escalation, supervisor training, CODs, etc.)

Skills for Psychosis Care



Definite interest & priority



Consensus that training is required across all professions, including outside of the BH field



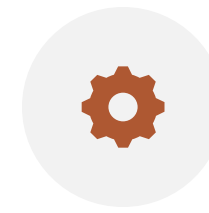
Professions that engage with people experiencing psychosis-related diagnoses require more training



Partnership: use available channels



Focus on all levels of workforce



Avoid "reinventing the wheel"



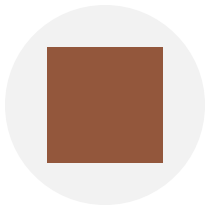
Building stronger relationships outside Washington



Find ways to maximize content



Balance formats, intensities and topics



Return to in-person



Training needs exist across all topics and professions



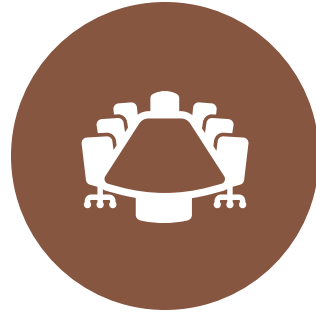
Keep longevity/sustainability of projects in mind

Suggestions

Reviews by Participants



WONDERFUL TO
CONNECT ACROSS
THE STATE



FEEL VERY
SUPPORTED BY
THE NORTHWEST
MHTTC



LIKE HEARING
WHAT PEOPLE ARE
EXPERIENCING IN
TRAINING

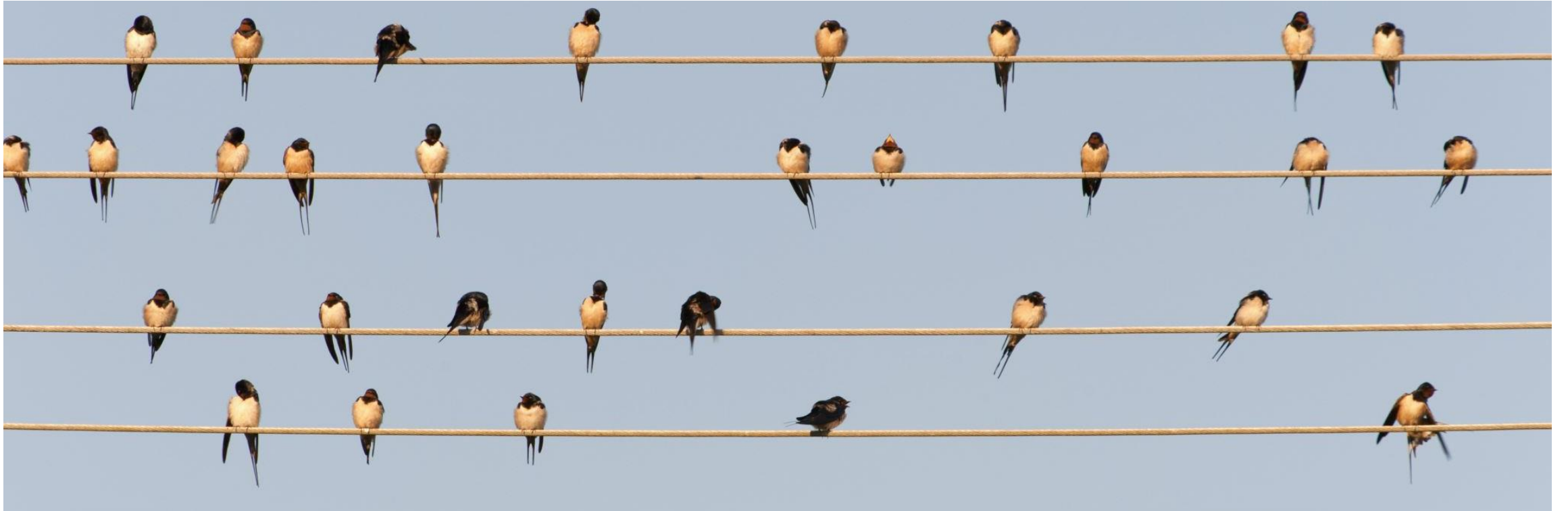


DIALOGUE &
SHARE RESOURCES



Does this resonate?

Other ideas?



Upcoming Opportunities



Integrated Care Training Program

UW PSYCHIATRY & BEHAVIORAL SCIENCES



Integrated Care Conference



What other priorities should we consider?

Year 6 Ideas

- Following up on successes
- Effectively disseminating resources
- Preparing for the future

Wrap-up & Farewell

PLEASE COMPLETE EVALUATION

TAKE CARE, BE SAFE & WELL

