

Increasing Access to Behavioral Health for Minors

Implementation of Behavioral Health 360 (BH360):

A personalized, robust parent portal for caregivers navigating Behavioral Health challenges with their children

Substitute House Bill 1800; Section 2(3); Chapter 134; Laws of 2022

November 01, 2022

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Acknowledgements

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Executive summary

In 2022, the Washington State Legislature passed [House Bill \(HB\) 1800](#), increasing access to behavioral health for minors, HCA contracted with Washington State Community Connections to bring together a group of stakeholders to design, further define, and implement an online parent portal, called Behavioral Health 360 (BH360). The purpose of this portal is to help parents and caregivers¹ navigate and connect to community services for their child, children, and/or youth (i.e., minors) who need behavioral health services.

The requirements from legislation include:

- a) The stakeholder engagement conducted under this section.
- b) The design and further definition of the parent portal, now being called Behavioral Health 360 (BH360).
- c) Other relevant information about successfully implementing the parent portal, including needed legislative changes or support.

Work to date includes:

- Stakeholder engagement with family caregivers, providers, and community organizations
- Input from philanthropists focused on behavioral health initiatives
- Strategic partnerships to lead the work moving forward
- Presentations to community members and key stakeholders in WA Behavioral Health services on the BH360 platform.
- Development of a proof-of-concept site for the parent portal, now being called [BH360Connected.com](#)

As we look ahead:

- Growing the parent portal, now being called BH360: The team working on the project is developing content to include up to 13 different behavioral health challenge areas and culturally responsive resources statewide. They are also working to establish community partnerships with local behavioral health organizations and refine a resource mapping model to include in-person entry points to BH360. The technical build will include pulling in provider lists across public and private sectors, a parent profile to store documents, screening questions, personalized resources, and more.
- Ongoing stakeholder engagement and feedback: the team working on the project will engage and work closely with a culturally diverse group of parents to co-design the BH360 platform, including how we communicate educational content and what kinds of organizations are involved in our partnership model. We will compensate all participants.

This report details efforts in fulfilling this legislation, which includes working with the organizations collaboratively to deliver the parent portal, now being called Behavioral Health 360 (BH360).

¹ In this report, we use “caregiver” and “parent” interchangeably; these terms mean the same thing.

Background

The behavioral health system is difficult to navigate for families of minors, especially for Black, Indigenous and other Persons of Color (BIPOC). Furthermore, data is increasingly pointing to increases in mental health challenges for youth and children as a result of the global pandemic. Parents, especially BIPOC are finding it difficult to navigate a system that can be both complex and unresponsive to their multicultural needs.

The COVID-19 pandemic has highlighted the criticality of behavioral health supports in the United States, particularly for children and adolescents. Moreover, the pandemic has exacerbated existing disparities in mental health services; marginalized young people continue to be at a heightened risk for mental health difficulties later in life. Furthermore, there is a significant shortage of children’s mental health providers and resources available. Caregivers are struggling to find effective and culturally responsive services within their communities that focus on behavioral health.

As part of HB 1800, RPrime Foundation, in partnership with Washington State Community Connectors, is developing a caregiver-focused web platform—called **Behavioral Health 360, or BH360**. This online resource will provide comprehensive support for caregivers in need of navigating behavioral health resources for their youth and family. Using a tiered approach, BH360 will help caregivers navigate behavioral health resources whether they are new to the journey or well versed in state supports. For families potentially new to the behavioral health journey, they will have the ability to complete a behavioral health screener, designed using evidence-based assessment tools, to identify early indications of potential problem areas that may be affecting their child. Upon completion of the screening, caregivers receive personalized information, including psychoeducation related to the indicated problem areas, resource mapping that connects families and children to evidence-based local resources, and access to virtual community forums, where they can engage and learn from families with similar lived experience. Moreover, for caregivers who are further along in their behavioral health journey with their child(ren), BH360 provides content on understanding their legislative rights and relevant policies for their path.

The problem

BH360 is being developed in response to the growing demand for behavioral health supports for youth and families and the ongoing issue of access to providers and critical services. The BH360 team is using a four-fold approach to address and solve the issue:

1. The number of children in need of behavioral health support is rising, while provider shortages make it increasingly difficult to find care.
2. People with marginalized identities, such as Black, Indigenous, and People of Color (BIPOC) and LGBTQ+ (lesbian, gay, bisexual, transgender, queer or questioning, and more) face the most significant challenges, while resources for them are furthest from reach.
3. Rates of suicide and state dependency are worsening in part due to the lack of on-demand access to effective and culturally competent care, including early identification of behavioral health conditions.

4. Our existing systems intended to assist with early identification for behavioral health needs for youth and teens are disparate and disconnected (schools, pediatricians, justice system, etc.). This creates an onus on the parent or caregiver, who doesn't inherently embody a wealth of behavioral health knowledge, to put together the pieces and take early action.

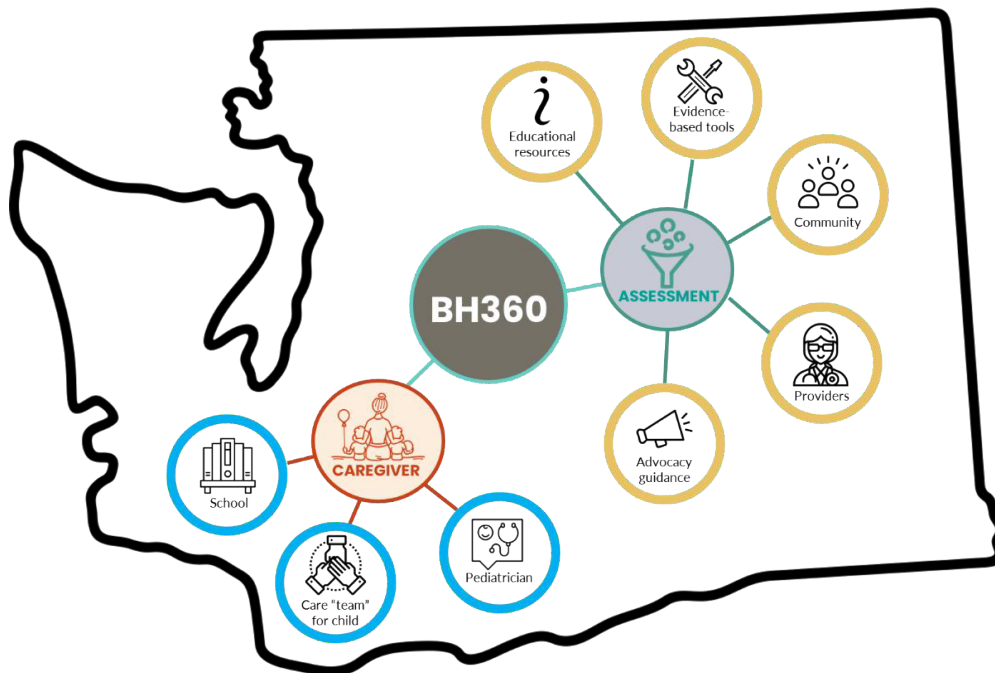
See Appendix A for further details.

The vision

BH360 will help families find personalized behavioral health resources by building a culturally responsive web platform. The objective of the platform is to support families across the state of Washington and most importantly, **meet them where they are**. To successfully do so, BH360 will partner with community-based organizations providing behavioral health supports and services to youth with a focus on underserved populations. These partnerships are intended to connect families with a plethora of resources that support a youth's journey towards wellness. Such resources include access to listings of public and private providers in or nearby their community (filter-able by areas of specialty and insurance accepted), caregiver-specific resources (e.g., parenting classes), youth-specific resources (e.g., mentorship programs), and community resources (e.g., food banks).

To effectively match the right resources and information with a family's respective needs, caregivers are given an option to engage in a screening tool that is a series of questions on observed behaviors of their child(ren). This screening tool, developed using evidence-based tools, will narrow what type of information, resources, and supports are the most relevant given the family's needs. The graphic below shows how the screening tool links family caregivers with medical and behavioral health providers, educational and community resources, evidence-based tools, and advocacy partners. BH360 is a resource portal that helps families navigate and prioritize their care coordination.

Image 1: BH360 screening tool links people to services and supports



The BH360 screening tool

Primary features

Information

- Screening tools narrow the search toward appropriate youth behavioral health problem areas and earlier intervention.
- Education and resources provided to caregivers will be personalized to better support minors in need and will increase caregiver's capacity to support their youth in accessing evidence-based behavioral resources.
- All content will be evidenced-based and vetted by mental health professionals.
- Information will be tailored by behavioral health topic area and help caregivers understand and utilize suggested resources.

Advocacy

- Families will be supported in becoming advocates for the mental health needs of their children by increasing their behavioral health knowledge (e.g., learning about their youth's problem area(s)) and learning new skills to champion for their child(ren)'s support within their community systems (e.g., learn advocacy skills for within the school system).
- Families are supported in understanding their caregiver rights.

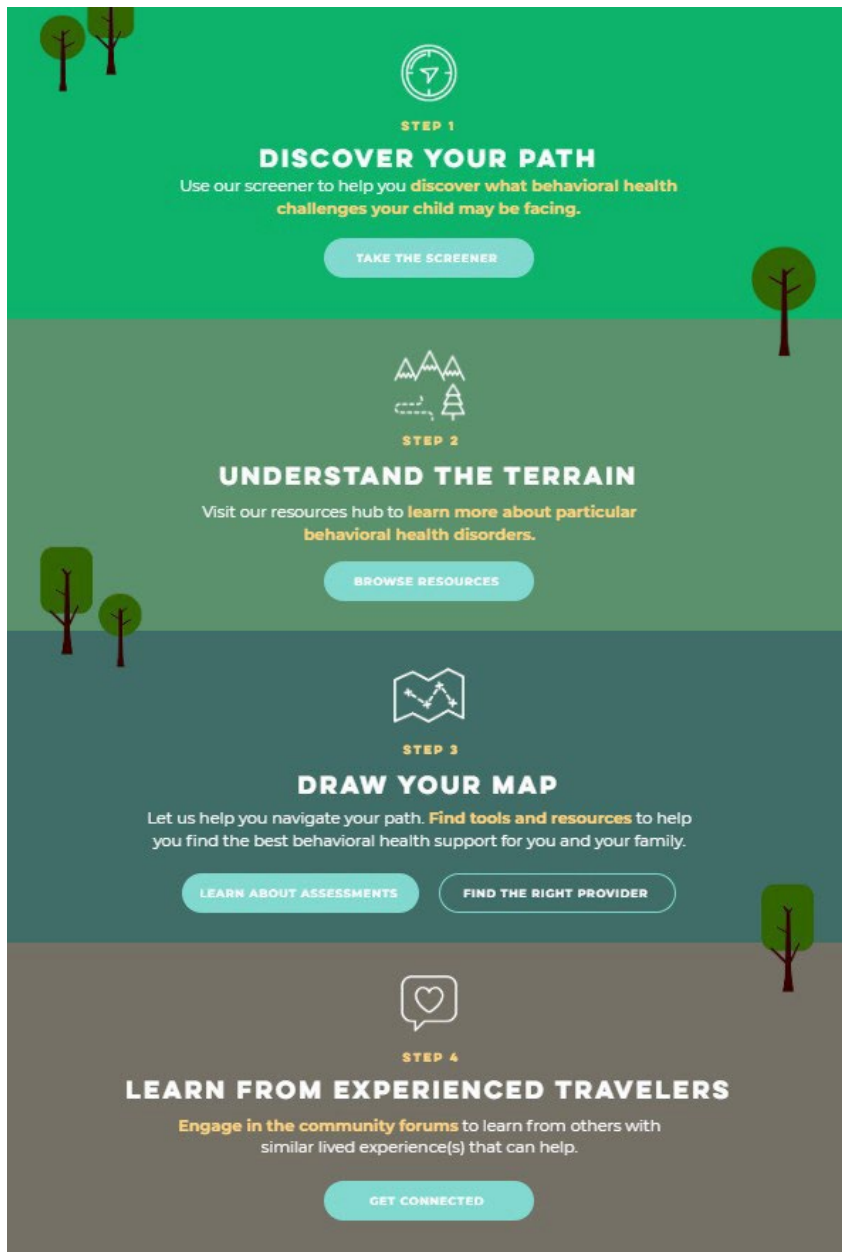
Provider locator

- Ability to search for local providers (both in the public and private sector) across a spectrum of needs.
- Filters narrow the search based on insurance, location, and specialized need (e.g., age, diagnosis, cultural preference).

Community

- Forums connect people on similar behavioral health journey "paths" (e.g., caregivers of youth with depression can connect with one another or caregivers of youth who have been hospitalized can communicate via online forums).
- Screening tools and search capabilities connect families to community resources (e.g., school-based programs, support groups, and social determinants of health resources like food banks, public library classes, etc.).

Image 2: BH360 supports caregivers at all intersections of the behavioral health journey



This image is a screenshot of BH360, currently in a prototype state. This shows how BH360 helps guide caregivers (parents) along their respective behavioral health wellness journey.

Parents can first “discover their path” using the screening tools to help narrow what information will be most impactful, given their circumstances and child’s observed behaviors.

From there, the parent can better “understand the terrain” by accessing helpful information about behavioral health problem areas.

With this baseline of information, the parent can begin to “draw their map” by way of using advocacy guidance, connecting to local resources with specific cultural relevance, and searching for providers in their area.

Lastly, the parent can “learn from experienced travelers” through online community forums tailored for behavioral health concerns and/or family need (e.g., forums for single parents, foster parents,

Impact

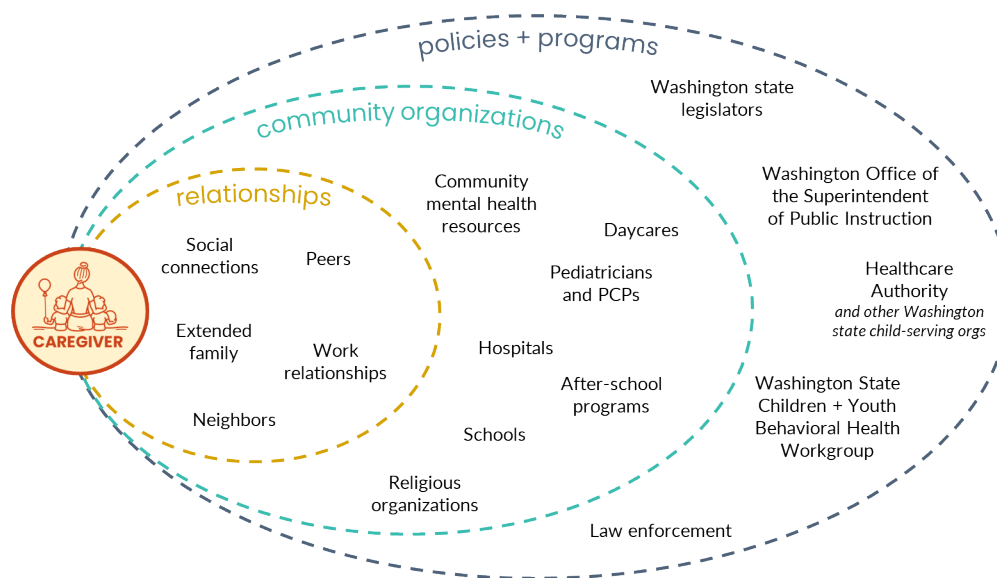
As caregivers become more effective at navigating their children’s behavioral health wellness journey, the health and safety of children and youth will improve. Healthier mental health outcomes will lead to thriving communities. Public health and safety will improve across Washington State. Earlier identification and intervention will have demonstrated return on investment for Washington State, alleviating burden on our crisis systems and emergency rooms.

Given that our design for BH360 is developed using an ecological model of health, we believe that this approach to youth and family behavioral health will positively impact families on multiple levels. As caregivers’ knowledge of their child’s behavioral health increases and their access to effective

interventions expands, literature seems to suggest that youth treatment outcomes will improve⁹. As youth and family treatment outcomes improve, the social, cultural, and communal environments that a youth is apart of will also improve¹⁰. Moreover, given that ecological models understand that there are multiple and interacting determinants of health behaviors, it is believed that as BH360 helps identify areas of need within communities, the state of Washington will be able to better create targeted prevention strategies that positively impact youth behavioral health at the system level¹¹.BH360 will:

- Enable caregivers to connect to relationships that can help inform their unique care pathway.
- Provide caregivers navigational tools to support their child’s needs within the broader community.
- Shed light on policy and program changes required to support more equitable access to behavioral health care and resources across the state.

Image 3: linking caregivers to resources



Three interconnected ovals show how BH360 links a caregiver to resources that support relationships, community organizations, and state policies and programs. The smallest oval represents relationships and is closest to the caregiver. Included are social connections, extended family, peers, work relationships, and neighbors.

The middle oval for community organizations includes community health resources, daycares, pediatricians and primary care providers, hospitals, after-school programs, schools, and religious organizations.

The largest outer oval for policies and programs includes Washington State legislators, the state’s Office of Superintendent of Public Instruction, HCA, Washington State’s Children and Youth Behavioral Health Work Group, and law enforcement.

See Appendix B for more information.

Work to date

Work began in February 2021 with a small private grant. The work to date has included the development of a prototype of the BH360 platform, with a focus on depression resources and information. The grant provided was a total \$100,000 and continued contributions from RPrime Foundation of about \$150,000 have included ongoing engagement with a pediatric clinical psychologist, a consultant with a focus on racial justice and engagement with underserved populations, and an executive to help progress the work and seek potential partnerships for ongoing support.

Key activities include:

- Stakeholder engagement with family caregivers, providers, and community organizations
- Input from philanthropists focused on behavioral health initiatives
- Strategic partnerships to lead the work moving forward
- Presentations to community members and key stakeholders in WA Behavioral Health services on the BH360 platform
- Development of a proof-of-concept site called BH360Connected.com

See Appendix C for more details.

Work ahead

- **Growing BH360:** HCA is working on developing content to include up to 13 different behavioral health challenge areas and culturally responsive resources statewide. We are also working to establish community partnerships with local behavioral health organizations and refine a resource mapping model to include in-person entry points to BH360. The technical build will include pulling in provider lists across public and private sectors, a parent profile to store documents, screening questions, personalized resources, and more.
- **Ongoing stakeholder engagement and feedback:** HCA will engage and work closely with a culturally diverse group of parents to co-design the BH360 platform, including how we communicate educational content and what kinds of organizations are involved in our partnership model. We will compensate all participants.

See Appendix D for more details.

Funding needs

We are pursuing a public-private mixed funding model to ensure we can complete a comprehensive build of the platform and ultimately launch an impactful resource to families across the state. **The total amount requested (from both tables below) is \$2.5 million.**

Table 1: total investment requested

We are requesting that the state contribute just under half of our total budgetary needs to deliver the platform. The state funded activities would include a landscaping exercise in Kent and Spokane to further evaluate what is required to support a radical partnership model on BH360 with organizations delivering Behavioral Health services for the community, the development of additional psycho-educational content, and the technical build of the platform itself, including integration with 211.

Total investment requested \$955,000	
Landscaping efforts in Kent and Spokane	\$300,000
Content development costs (50% of total cost)	\$300,000
Technical build costs (50% of total cost)	\$355,000
Total:	\$955,000 (~40% of total project budget)

Table 2: total additional funding requested

We will seek additional funding through private funders to cover the remaining budget to deliver BH360. This will include funding to compensate families that participate in our efforts, half of the costs for developing the content areas and the technical build, and the program oversight functions. We plan to approach philanthropists invested in supporting youth Behavioral Health services in Washington state.

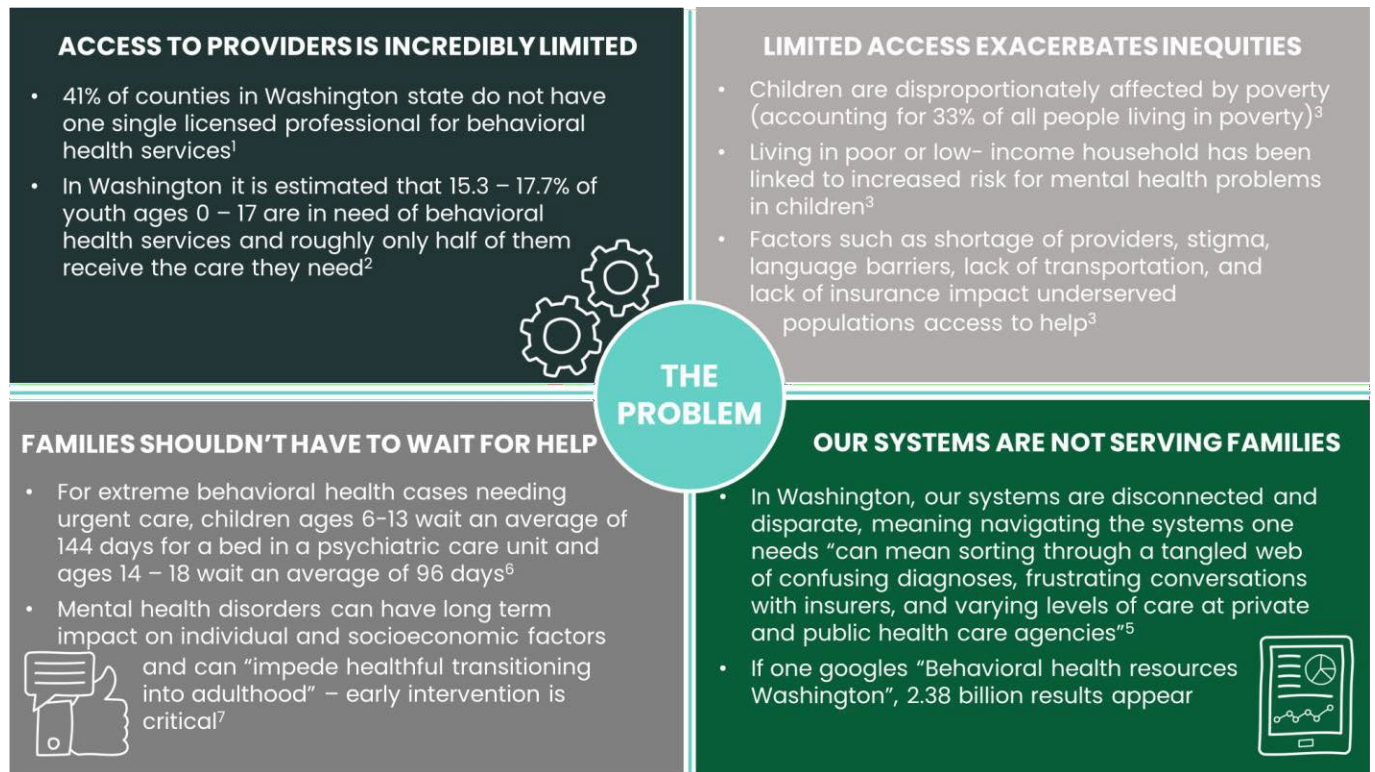
Total additional funding requested: \$1,470,000	
Parent compensation/incentives for participation	\$55,000
Content development costs (50% of total cost)	\$300,000
Technical build costs (50% of total costs)	\$355,000
Program oversight and coordination	\$760,000
Total:	\$1,470,000 (~60% of total project budget)

Conclusion

HCA looks forward to continued partnership to support this new and innovative work to increase access to behavioral health for minors.

Appendix A

Image 4: defining the problem



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Appendix B

The way we think about **measuring impact** of delivering the BH360 online platform are as follows:

Table 3: measuring impact

Audience	Impact objective	Measurement
Individuals (families)	<ul style="list-style-type: none"> • Increase client engagement with BH360. • Decrease wait time for families to access curated resources and community connection. • Increase caregiver knowledge and confidence in navigating of their child’s behavioral health wellness journey. 	<ul style="list-style-type: none"> • Engagement: number of unique users, number of registered users with profiles, diversity of user profiles. • Increase in the number of “interventions” (e.g., resources, community forum engagement) that a family accesses (virtual resources). • Interview/survey responses capturing caregivers’ knowledge/attitudes of resource navigation; increased BH360 screener utilization.
Providers/ behavioral health resources	<ul style="list-style-type: none"> • Increase family engagement access to community behavioral health resources • Increase family advocacy skills. • Decrease wait time for families to access local behavioral resources. 	<ul style="list-style-type: none"> • Increase in the number of “interventions” (e.g., provider connections, community resource group connections) that a family accesses in their community. • Increase in BH360 advocacy resource downloads (e.g., finding the right provider) and utilization; survey responses related to their experience. • Reduce the average wait time for a family to receive behavioral health supports.
Communities	<ul style="list-style-type: none"> • Increase community resource mapping and partnerships (particularly for marginalized communities). • Identify community leaders to help increase local connections and support systems. • Increase BH360 virtual community connections. 	<ul style="list-style-type: none"> • Establish partnerships with local community organizations; develop resource database that is curated and vetted by experts and community (measured by number of partnerships). • Establish partnerships with local community leaders (measured by number of partnerships). • Increase number of community forum posts; number of different types of community forums.

**Washington
State**

- Ability to highlight system gaps for areas needing more resources to support family need.
- Provide data and insights surfacing areas of need across Washington to support a more proactive state for behavioral health needs.
- Survey responses on efficacy of resources accessed.
- High prevalence of diagnoses across communities in specific age groups.
- High prevalence of behavioral health needs with low presence of resources.

Appendix C

Work includes the following key activities:

- Frequent **gathering of stakeholders** to review and provide input on the vision, design, and ultimate implementation of the BH360 platform. Stakeholders include family organizations, parents/caregivers, legislators, HCA Staff, the website development team from RPrime and other community representatives who are interested in attending.
- **Outreach and engagement from active community providers and leaders** in the behavioral health space to gather feedback and support of the BH360 platform. This includes Jennifer Magnani with UW Mental Health Navigator team; Drs. Sarah Kopelovich, Maria Monroe-DeVita, and Akansha Vaswani-Bye; Dr. Jurgen Unutzer; Dr. Bob Hilt; and others.
- **Engagement and feedback from active caregivers** currently navigating or having previously suffered traumatic experiences with behavioral health challenges and their children in Washington State: Jerri Clark, Sarah Chesemore, Peggy Dolane, Janice Schutz, Jean Ross, and others. (A subset of these parents has been meeting for over two years in anticipation of building this web-based platform to help caregivers in need.)
- **Strategic funding and feedback discussions with philanthropists** in the behavioral health space in Washington to explore a mix of private and public funding for the platform: Katherine Switz, Kathy Surace-Smith, Nick MacPhee, Lisa Mennet, and others.
- **Strategic partnerships** with Dr. Priya McLennan, a clinical pediatric psychologist who specializes in assessments and supports innovative solutions for families; and Jackie St. Louis, a therapist, coach, and consultant focused on equity, social justice, intercultural competence, and community development.
- **Ongoing discussions with local organizations** that can form partnerships with BH360 to enhance capabilities across the state to include entry points for families in pre-existing solutions, such as Help Me Grow, WA; Healthy Steps; Primary Care Providers; PAL line; Community Mental Health resources; and others
- **Presentations on the BH360 platform**, which have garnered great interest, enthusiasm, and support for the vision of helping communities across Washington State: Washington State Mental Health Summit (May 17, 2022), Youth and Young Adult Continuum of Care (June 30, 2022), Department of Health Community Network (July 14, 2022).
- **Development of a proof-of-concept site** for BH360 that dives deep on depression resources that are available at <https://www.bh360connected.com>.

Appendix D

Our work ahead lies in three key workstreams:

1. Development of the BH360 ecosystem:

- a. **Objective:** to provide families with increased access to behavioral health supports and to highlight policy and program changes required to support more equitable access to behavioral health care and resources across the state.
- b. **Focused Efforts of Platform Development:** To achieve the intended impact of the BH360 platform, we will work with the most impacted communities to gain deep understanding of their cultural needs to ensure that they are reflected in our tools, resources and collaborations.
- c. **Action to take:** deep partnership with two communities in Washington State; one at the county-level and one at the community-level. These communities will help map local resources, connect with organizations that can serve as an entry point for families into the platform, and develop resources and site navigation that allow for multicultural perspectives. As we aim to support marginalized communities, we intend to work with Spokane County and the city of Kent to support families in areas that have high racial diversity and increased poverty levels, relative to other areas of the state.

2. Development and technical build of the BH360 content:

- a. **Objective:** develop culturally responsive content and community forums that help families navigate BH360 and resources in their area in the most effective and impactful way possible.
- b. **Action to take:** leverage our learnings from Spokane County and city of Kent to inform the development of our content across these identified areas: anxiety, attention difficulties, disruptive behaviors, eating difficulties, elimination, mania, psychosis, substance abuse, suicidality, trauma, racial trauma, LGBTQ+, as well as any other areas identified. We will develop the additional content areas as follows:
 - i. Advocacy (understanding one's rights)
 - ii. Screening questions (to help to narrow potential behavioral health problem areas)
 - iii. Developing an online caregiver profile that allows caregivers to store key information and documentation to support their child's behavioral health journey in a HIPPA-compliant environment
 - iv. Developing surveys that help determine the efficacy of the platform's delivery and resources accessed

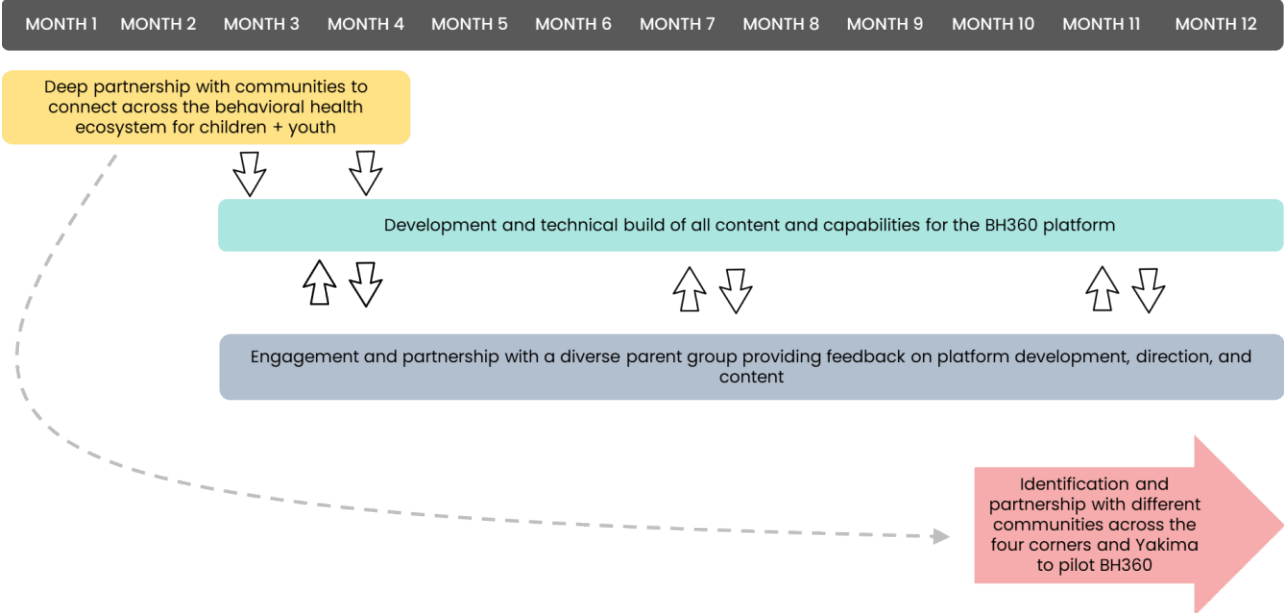
3. Ongoing caregiver feedback on the BH360 content, delivery, and vision:

- a. **Objective:** engage with caregivers and receive feedback from families on the ongoing development of the BH360 content and resources.
- b. **Action to take:** identify and engage multicultural families/communities to participate in providing feedback on the ongoing development of the BH360 content and capabilities. BH360 intends to engage with caregivers/families through multicultural group

workshops, where caregivers are compensated for their time and their valued contribution to the development of the platform. Given BH360’s aim to collaborate and connect families with community organizations, the BH360 team intends to identify leaders across different communities to participate as key stakeholders in a steering committee that will help direct and review platform direction. This will ensure that we have robust and diverse discussion with those leaders; enhancing our ability to deliver an impactful, respectful, and culturally responsive tool for all families in need.

The timeline below shows the outlined workstreams:

Image 5: workstream timeline



This timeline will sufficiently build out content for BH360 in readiness for pilots to occur in a handful of communities across the state. The first focus area is impact for ages 0-14. Subsequent phases of work will expand capability of our system, enhance data insights for the state, and extend the age groups of focus to include ages 0-25.