

**Title of Presentation:** Creating an Empirically-Oriented Culture Facilitates Statewide Interest in Training in EBPs and Research on Implementation

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Local and state participation in monitoring outcomes has established an empirically-oriented culture among providers that has helped build an infrastructure for supporting training and research in evidence-based practices. Since 1996, a collaborative relationship between the Michigan Department of Community Health, Community Mental Health Service Providers, and a university evaluator has permitted ongoing collection of client outcomes for the state and for individual providers, with a database on more than 17,000 children and adolescents. The goal of collecting data on client outcomes has been to encourage providers to genuinely engage in a self-scrutinizing process in which they strive to improve services. Stakeholder review of data, which included information on attrition and outcomes by client types, generated widespread interest in training in cognitive behavioral treatment of depression (CBT) and in parent management training for serious behavioral problems (PMT). Experts in these areas were contacted. Two groups of researchers joined our collaborative effort: Drs. Asarnow and Rae for CBT and Drs. Forgatch and Patterson from the Oregon Social Learning Center for PMT. Both groups of researchers were willing to: (a) train mental health workers from across the state, (b) provide in-depth, ongoing supervision for a minimum of 6 months post initial workshops, (c) cooperate with collection of data on trainee participation, client outcome, and agency organizational factors, (d) assist the state in setting up an infrastructure so that the state and local providers can subsequently be self-sustaining, and (e) collaborate on writing grants to study implementation issues.

Process and outcome data on the CBT training will be presented as well as lessons learned. A state roll-out of the first phase of PMT began in May, 2005, with full roll-out in October, 2005. For the PMT training, we added the requirement that a sophisticated fidelity measure be incorporated. The infrastructure that has been developed, in light of lessons learned and stakeholder input, will be presented as well as the evaluation design for evaluating PMT training. The evaluation will include examination of implementation issues that have practical implications for statewide efforts. These include exploring the predictors of treatment fidelity (e.g., trainee characteristics, organizational characteristics, compliance with training activities), determining whether treatment fidelity predicts client outcome, and examining the predictors of training completion and the duration of time to reach competency (i.e., achieve satisfactory fidelity scores such that the trainee meets criteria for certification).

### **Selected References**

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