



Children and Youth Behavioral Health Work Group – Prenatal through Five Relational Health (P5RH) Subgroup

April 7, 2025

Glossary of Terms

CYBHWG: Children and Youth Behavioral Health Work Group

DEI: Diversity, Equity, and Inclusion

ECEAP: Early Childhood Education and Assistance Program

HHS: Health and Human Services

WSA: Washington State Association of Head Start and ECEAP

Meeting Topics

Acknowledging the current state of 2025 P5RH developments

Washington Thriving: Updates & Cohesion

P5RH Subgroup 2025-2026 Goals

Group Discussion: Emerging Recommendations and Top Priorities for P5 Input to Washington Thriving

Next Steps & Wrap

Discussion Summary

Acknowledging the current state of 2025 P5RH developments

1. Katy Warren (Washington State Association (WSA) of Head Start & Early Childhood Education and Assistance Program (ECEAP)) discussed the current state of 2025 P5RH developments, including the following:
 - a. The Region X Head Start office, which oversees Head Start programs in Washington, Oregon, Idaho, and Alaska, operates under the Office of Head Start (OHS), a part of the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS). Last week, the Region X HHS Office was abruptly closed.
 - i. The main responsibilities of the regional Head Start Office include grant oversight and funding distribution, program monitoring and compliance including child safety, and providing training and technical assistance. Out of the more than 70 Head Start grantees in Region X, about 1/3 of them are supposed to have their grants renewed by July 1st.
 - ii. Discussion included the following concerns:
 1. The closure of the regional Health and Human Services office and its impacts on Head Start Programs, including lack of clarity about interpretation of the federal law in how to address child safety concerns.
 - iii. The impacts to funding and grant cycles.
 - iv. The challenges of rewriting grants to meet new diversity, equity and inclusion (DEI) requirements which involve the removal of specific terms and phrases.



- v. A [federal analysis](#) and [local article](#) related to the current administration's efforts to undermine programs.
 - vi. The challenge of continuing to meet performance standards and missions, while removing references to terms such as "race," "ethnicity," "immigration," and more.
 - vii. Ways to activate lawmakers, community members and system partners around this topic.
- b. Subgroup leads discussed the importance of the prenatal through age five community in the current environment, including the following:
- i. Emphasis on the cross-sector work of the P5RH Subgroup.
 - ii. Uncertainty across state agencies and community-based organizations.
 - iii. Planning for the safety of staff and families that are being served, particularly immigrant, english as a second language (ESL), queer, and other vulnerable populations in the context of the current climate.
 - iv. The importance of building a shared language across the P5 space and this behavioral health work.

Washington Thriving: Updates & Cohesion

1. Dana Boggess (Behavioral Health Catalyst) discussed Washington Thriving and its relationship with the Children and Youth Behavioral Health Work Group (CYBHWG), including the following (see slides for more detailed information):
 - a. A review of Washington Thriving – the effort to develop a statewide prenatal-through-age-25 behavioral health strategic plan, due to the Legislature on November 1st.
 - b. Current context around the constrained fiscal environment, and federal and local administration and policy changes.
 - c. The proposed approach for the CYBHWG's priority this year – to provide input to and approval of the P-25 Strategic Plan.
 - d. An overview of the Strategic Plan framework, including the services and supports that will be provided, and drivers and enablers of the system.
 - e. The need for a digestible and actionable strategic plan that includes input from the P5 (and the other CYBHWG) subgroups.

P5RH Subgroup 2025-2026 Goals

1. Subgroup leads and support staff reviewed the goals of the P5RH Subgroup, including the following (see slides for more detailed information):
 - a. The preliminary session goals:
 - i. Identifying and narrowing the P5RH subgroup scope to focus on the highest priorities
 - ii. Identifying opportunities for expanded community engagement to inform the development of inputs to Washington Thriving
 - b. The goals for the year:
 - i. Contributing 1-3 key P-5 issues critical to the P-25 Strategic Plan
 - ii. Identifying other continuing and urgent issues to be considered as overarching recommendations or support items of the CYBHWG
 - c. An overview of the 2025 subgroup process and timeline.



- d. Key themes emerging for P-5 specific Strategic Plan recommendations, including:
 - i. Early interventions
 - ii. Perinatal preventive supports and intervention
 - iii. Education and promotion
 - iv. Coordination
- e. Input that has been received to-date from preliminary subgroup sessions regarding overarching P-5 considerations, including:
 - i. Building on existing work
 - ii. Consistency in language and universal screening
 - iii. Barriers to access
 - iv. Mental health and inclusivity
 - v. Overarching system drivers
- f. Emerging recommendations within the key themes for the P5RH Subgroup.

Group Discussion: Emerging Recommendations and Top Priorities for P5 Input to Washington Thriving

1. Subgroup members participated in breakout rooms to discuss the emerging recommendations and top priorities for the P5RH subgroup this year. The discussion groups highlighted the following key themes from their conversations:
 - a. Workforce challenges, including lack of career pathways, compensation and supportive workforce environments
 - b. P5 messaging
 - c. The need for continued iteration and clarification of the themes or “buckets” for recommendations
 - d. The intersection and importance of vital conditions (such as food and housing security, etc.)
 - e. Continued focus on prevention throughout the continuum, emphasizing whole-family initiatives and its particular importance in early childhood
 - f. The importance of focused community-embedded roles, such as doulas, peer supports, home-visitors and navigators
 - g. The need for consistent parent support and assessments across all age groups
 - h. Substance Use Disorder (SUD) prevention strategies

Next Steps & Wrap

1. The subgroup leads and support staff will summarize the top priorities from today’s discussion to bring to the upcoming CYBHWG meeting.
2. Next P5RH Subgroup meeting: May 7th, 10AM-12PM



Overarching considerations for Washington Thriving

April 7, 2025

Building on Existing Work

- How do we ensure that our work builds on past efforts in the state rather than reinventing the wheel?
 - How do we align with the great work and information already gathered to continue taking coordinated action?

Consistency in Language & Universal Screening

- How do we establish consistent and shared language?
 - What does "Early Intervention" mean in this broad continuum?
- In Washington, there is no universal screening—how can we ensure everyone is on the same page?

Barriers to Access

- Spoken language
- Immigration
- Political environment
- Stigma

Mental Health & Inclusivity

- The words we use when discussing mental health support are crucial to ensuring children and families feel safe.
- How do different categories intertwine, and how do we define them?
- Ensuring that evidence-based practices are inclusive of people with disabilities—physical, mental, and learning-related.
- Continuing to uplift and include caregivers and recognize their role, particularly in the prenatal-to-five space. How is caregiver emotional well being incorporated into every theme, ensuring this an integrated approach to family wellbeing?

OVERARCHING SYSTEM DRIVERS

- **Strategic Plan Alignment:**
Understanding how our strategic plan integrates with other state initiatives, such as the Early Learning Coordination Plan and the 10-year plan to dismantle poverty.
- **Addressing Pandemic Disruptions:**
Exploring how responses to pandemic-related technology shifts and other developmental disruptions fit within our broader strategy.
- **Funding & Financial Sustainability:**
 - Seeking creative approaches to funding streams and long-term financial stability.



- Identifying opportunities within the prenatal-to-age-5 space to build a more robust funding system, centralizing adequate, sustainable and varied (but coordinated) reimbursement, with explicit examples included for:
 - ESIT (Early Support for Infants and Toddlers)
 - Mental Health Consultations
- Centering health equity support for tribal families and youth and parity in payment models - include fee-for-service in rates/payment structures
- **Encouraging Innovation/Dynamism:**
 - Identifying opportunities for continuous learning and improvement in serving children and families.
 - Addressing the increasing prevalence of neurological differences among children.
 - Adapting to evolving environments and needs.



Discussing Emerging P5RH Recommendations

Emergent Theme 1: Implement comprehensive early intervention strategies (e.g. home visiting, parenting support, MH consultation, and two-gen approaches).

Notes:

- Acknowledging and appreciating the prioritization of early interventions within WA Thriving. Emphasizing viewing early intervention as a trajectory...
 - what does support look like at each of these “levels”?
- **Alignment with MHAYC:**
 - Exploring potential interest and support for a recommendation that aligns with MHAYC initiatives.
 - Specific rec versus a starting point for a vision
 - Publicly available resources regarding MHAYC implementation and ongoing needs:
 - MHAYC webpage
 - 2023 Community Presentation
 - 2022 Community Presentation
 - IECMH Statewide Tour Report
 - Specific section on mental health assessment
 - Presentation
- Where is the identification of the needs?
 - Is there appropriate screening?
- How can we make sure this is aligned with work that has already been done? How are we making sure we are finding language that aligns/connects the entire system?
 - Does the language make sense for the workforce and populations we are referring to?
- Who from the workforce is missing?
 - Perinatal folks
 - OBGYN
 - Family Practice

EMERGENT THEME 2: Support pregnant & birthing parents with BH knowledge, prevention screenings, & interventions delivered in healthcare, public health, and community settings - to set up kids and their families for success. This includes whole-family supports for pregnant & parenting individuals experiencing SUD.



Notes

- Screening *both* parents in P-5 stage if possible.
 - Identify triggers for screening
 - Identify barriers for parents in being screened or providing good data in screening
- Cross-training, standardized to help caregivers, community health worker, caregivers, home visitors, etc. identify need for mental and behavioral health intervention
 - More in-depth training, involve more stakeholders in development
 - Delineation between perinatal mental health and infant and early childhood mental health - how they interact, how they are different, how to refer for each
- Licensed mental health provider is not always the best first step, parents often are more comfortable or open to peer and/or community support.
 - How to better connect those who are providing referrals with these alternative mental health care providers
 - May be more cost effective in a resource-limited political environment?

EMERGENT THEME 3: Invest in comprehensive P-5 programs & education that promote positive child development, healthy parenting practices, & the prevention of ACEs/trauma

Notes

- Recognition of the importance of ACEs (Adverse Childhood Experiences).
- Focus on the importance of caregivers needs to be successful, healthy and well - their BH/MH & community supports, and emphasizing positive childhood experiences, avoiding relying on a deficit-based perspective (ACEs/trauma)
- Promotion of positive childhood experiences
- Acknowledging the generational transmission of ACEs
- Leverage the capacity and knowledge of community-based partners already working on ACEs prevention, resilience, and promotion of positive childhood experiences

EMERGENT THEME 4: Create a coordinated P-5 system that includes universal, varied, and multiple access points that starts prenatally & focuses on parent-child dyad.

Notes

- **Parent-Child Communication & Coordination:**
 - Current language structures may feel restrictive.



- Emphasizing caregiving relationships that include family and community-based support.
- **A coordinated P-5 system:**
 - Coordination between ESIT and DDA as a priority - school system , primary care, and DDA - coordination across and among systems
 - Adjust 'coordination' language to include **developmentally appropriate services** and children's caregiving relationships within and outside of the parent-child dyad - **inclusive of families/caregivers and community relationships**
- Addressing barriers to access
 - Spoken language, court involvement, immigration, community stigma, political environment (policy changes, DEI)
 - Words chosen to discuss mental health supports: relational health? Emotional well-being support?
- Medical complexity impact and how medical system discusses/shares about this (?bias)
 - Relational health within functional activities of daily living, feeding impact

Other

- **Different state EC/IECMH Priorities**
 - [Pg. 103 crosswalk](#); Christine Cole's interpretation of the key buckets
 - Strong, diverse workforce (regardless of discipline/ sector)
 - How do we bridge/ coordinate around our efforts to improve shared language and support tiered learning for foundations through specialty topics - what for whom
 - Equitable access across the continuum of services (regardless of discipline/ sector & inclusive of identification/ referral)
 - How do we ensure folks know the importance of early life, what services are available, and where/how to access
 - Informed by families/communities/ grounded in equity
 - How do we weave into all other priorities rather than a standalone
 - Investment in high quality care informed by data (of varying forms)
 - Ensure sustainability
 - Understanding where our investments are to inform where we go
 - Coordinated/ aligned systems & policies
 - Bridging across systems/ sectors & create transparency & true collaboration
 - These are likely true across all ages, though there's existing commitments from the field for these priorities
 - Gap - how to be coordinated in taking action on these & ensuring collaboration/ coordination
 - Potential solution to have clear roles, responsibilities, and accountabilities



- Different than other ages because of spanning across adult & child serving sectors which has unique complexities/ nuances
- Gap - shared language to help bring folks along
- Gap - ensure that there is investment upstream and for P5 alongside crisis/ older ages

EMERGENT THEME 5: Enhance providers' skill & capacity in recognizing developmental delays & BH symptoms at early ages and in ways that are culturally appropriate.

Note: We acknowledge that supporting our current and future workforce is of high priority to P5RH and all other subgroups of the CYBHWG. Your input is critical to developing a right-fit and comprehensive approach, though it is outside of our scope to elevate as a top priority of focus for this subgroup. Your leads and support staff will relay all feedback herein to the Workforce & Rates (W&R) Subgroup and WA Thriving team, throughout the cycle for consideration. If you would like to be added to the W&R mailing list, please contact cybhwg@hca.wa.gov.

- **Workforce Sustainability & Well-being:**
 - Emphasize THRIVING of workforce alongside provider skill & capacity.
 - Addressing concerns about the workforce's ability to sustain this work in both the short and long term.
 - Exploring ways to cultivate sustainability while mitigating burnout within organizational structures and workplace culture.

If we all care about full, equitable access for children and families, this is the bucket we should start from; if we all care about these things why does it feel like there's a divide between "Early learning" and the mental health/physical well being of children and families



P5RH Subgroup 2025 Kickoff

March 26, 2025



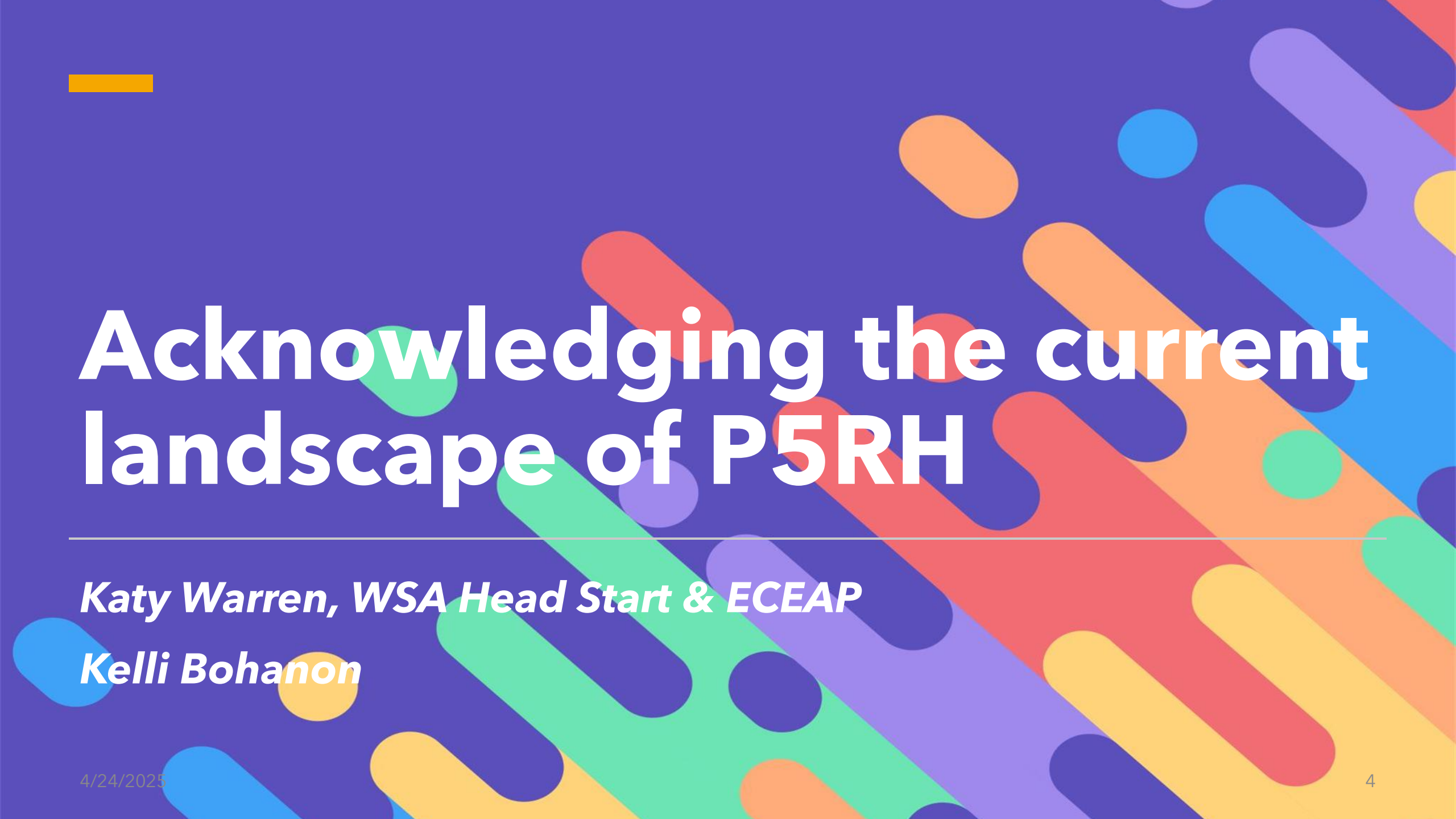
Agenda

10:30 AM - 10:40 AM		Welcome, Connection & Agenda
10:40 AM - 10:50 AM	Acknowledging the current state of 2025 P5RH developments	<ol style="list-style-type: none">1. Early childhood education2. P5RH workforce & families
10:50 AM - 11:00 AM	Washington Thriving updates & cohesion	<ol style="list-style-type: none">1. Washington Thriving P-25 Strategic Plan Updates & Opportunities for P5RHS Input
11:00 AM - 11:10 AM	P5RH Subgroup 2025-2026 Goals	<ol style="list-style-type: none">1. 25-26 Goals & Process2. Preview of emerging Washington Thriving P5RH recommendations3. Reflecting P5RHS input to-date on emerging recommendations
11:10 AM - 11:30 AM	Breakout discussions	<ol style="list-style-type: none">1. Emerging recommendations2. Top priorities for P5RHS input to Washington Thriving
11:30 AM - 11:50 AM	Large group discussion	<ol style="list-style-type: none">1. Discuss key insights from breakouts
11:50 AM - 12:00 PM	Next Steps & Wrap	

Welcome & Introductions

- **Please take 5 minutes to join a breakout room and enjoy connection!**
- Feel free to share -
 - Your name
 - Where you are calling in from
 - What organization you are affiliated with and/or role(s)/interests you hold that bring you here today





Acknowledging the current landscape of P5RH

Katy Warren, WSA Head Start & ECEAP

Kelli Bohanon

Washington Thriving: Updates & Cohesion



What is Washington Thriving?



- The effort to develop a statewide **Prenatal-through-Age-25 Behavioral Health Strategic Plan**, due to Legislature November 1st
- Initiated in response to a recommendation from the Children and Youth Behavioral Health Work Group (CYBHWG) to address the ongoing statewide crisis in behavioral health among children, youth, young adults and their parents and caregivers
- Aims to affect transformational change across the system by:
 - Outlining a vision for how this array of supports and services can be accessed in or through a range of settings including clinics, schools, and community settings
 - Providing an actionable roadmap to ensure equitable access at every stage of development to high-quality, developmentally-appropriate and culturally-attuned supports and services

Context

- Constrained state fiscal environment limits appetite for individual recommendations
- Uncertainty around impacts of federal changes (on funding, on specific programs, on specific communities)
- Governor's transition team has indicated support for the CYBHWG and Washington Thriving to inform direction on behavioral health
- CYBHWG members expressed a desire for future recommendations to be more cohesive and less numerous

CYBHWG priority this year: Provide input to and approve P-25 Strategic Plan

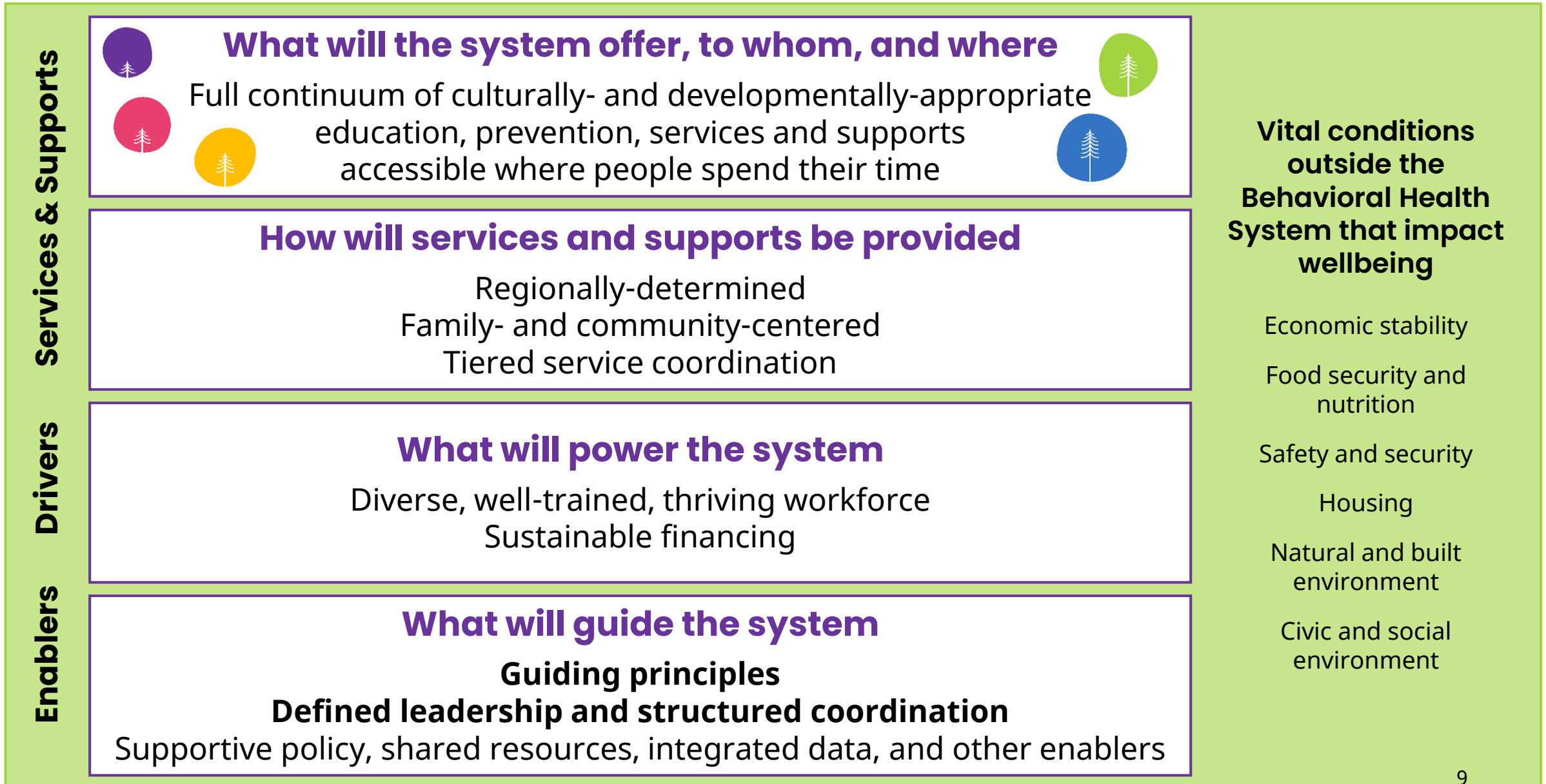
Proposed approach for 2025


- CYBHWG's primary recommendation will be for the Legislature to adopt and resource the Strategic Plan as the guiding framework for P-25 behavioral health in Washington
- CYBHWG will dedicate at least half of its meeting time to the Strategic Plan this year
- CYBHWG subgroups will focus their effort this year on providing input and recommendations to the Strategic Plan elements in their domain
- CYBHWG will hold a consensus vote in October to approve submitting the Strategic Plan
- Hold space for timely, emergent overarching recommendations and for preserving and protecting legacy CYBHWG recommendations that are not otherwise being championed

Washington Thriving Advisory Group is the key body influencing direction of P-25 Strategic Plan.

CYBHWG is the sponsor and ultimate decision-maker.

The Strategic Plan will address these areas



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P5RH input to Washington Thriving

Why We Are Here

Goals for the preliminary sessions & kickoff:

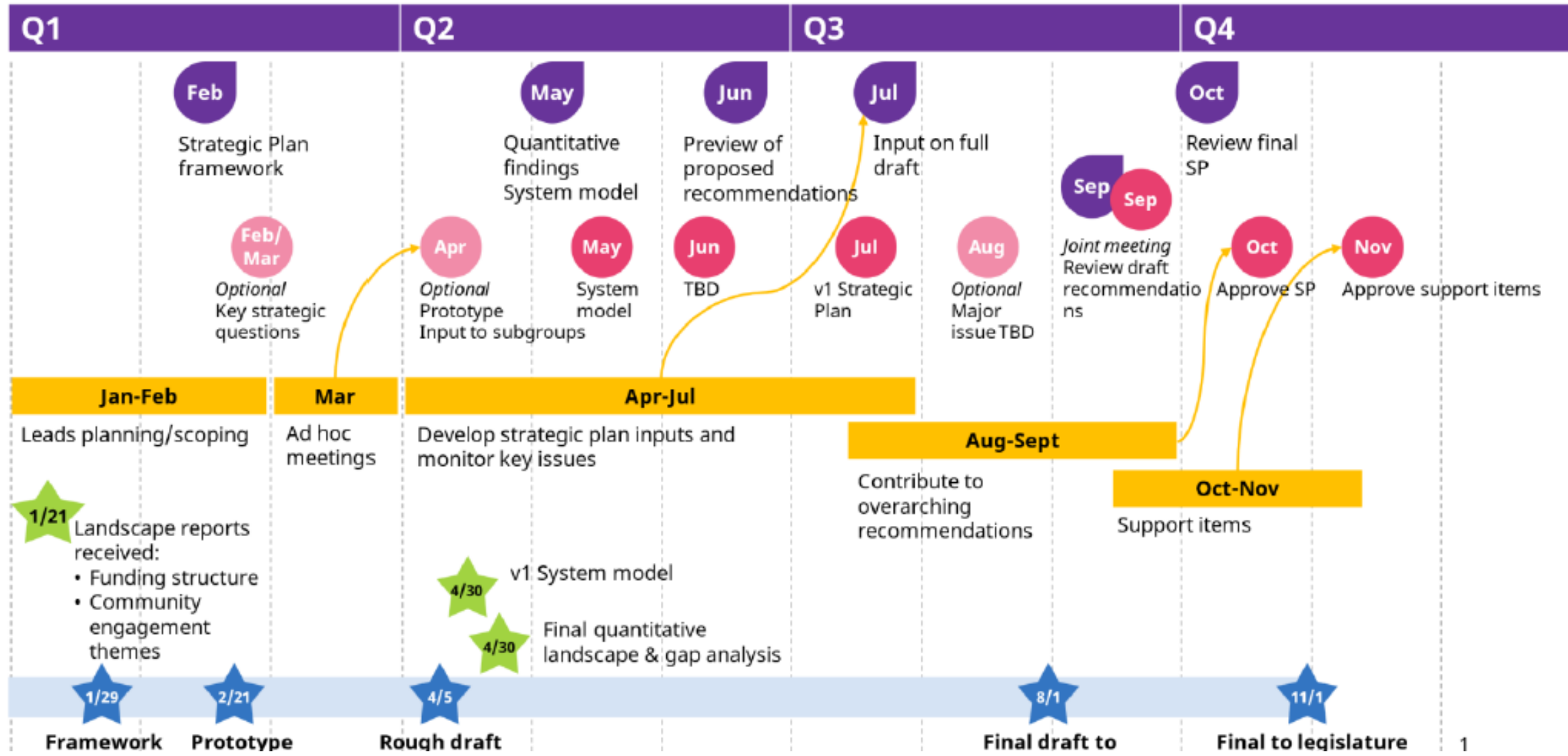
Identify & narrow the P5RH Subgroup scope to focus on our highest priorities

Identify opportunities for expanded community engagement to best inform the development of inputs to WA Thriving

Goals for the year:

Contribute to 1-3 key P-5 issues critical to the P-25 Strategic Plan
Identify other continuing and/or urgent P-5 issues not championed by others to be considered as Overarching recommendations or Support Items of the CYBHWG

2025 Overview



Key themes emerging for P-5 specific Strategic Plan recommendations

Early interventions	Implement comprehensive early intervention strategies (e.g. home visiting, parenting support, MH consultation, and two-gen approaches, inclusive of IDEA part C).
Perinatal preventive supports & intervention	Support pregnant & birthing parents with BH knowledge, prevention screenings, & interventions delivered in healthcare, public health, and community settings - to set up kids and their families for success. This includes whole-family supports for pregnant & parenting individuals experiencing SUD.
Education and promotion	Invest in comprehensive P-5 programs & education that promote positive child development, healthy parenting practices, & the prevention of Adverse Childhood Experiences (ACEs)/trauma
Coordination	Create a coordinated P-5 system that includes universal, varied, and multiple access points that starts prenatally & focuses on parent-child dyad.

Services & Supports
Full continuum of culturally- and developmentally-appropriate education, prevention, services and supports accessible where people spend their time

Drivers
Diverse, well-trained, thriving workforce; Sustainable financing



Enablers

Guiding principles; Defined leadership and structured coordination; Supportive policy, shared resources, integrated data, and other enablers

Build on Existing Work

- Align with past and ongoing state initiatives
- Avoid duplication, support coordinated action

Consistency in Language & Universal Screening

- Define shared terminology (e.g., “Early Intervention”)
- Address the absence of universal screening

Barriers to Access

- Language, immigration, stigma, political factors

Mental Health & Inclusivity

- Use inclusive, safe language around mental health
- Integrate caregiver emotional well-being
- Include people with diverse abilities

Overarching System Drivers

- **Strategic Alignment:** Connect with statewide plans (e.g., ELCP, poverty reduction)
- **Pandemic Recovery:** Address disruptions in development and tech
- **Funding Models:** Build sustainable, equitable funding (e.g., ESIT, MH consults, tribal equity)
- **Innovation & Responsiveness:** Support learning systems, address neurodiversity

**Input To-Date:
Overarching P-5
Considerations**

1 Early Intervention Strategies

- Layered supports: home visits, MH consultation, two-gen models
- Align with MHAYC
- Inclusive language, workforce representation (OBGYNs, perinatal care, etc.)

2 Perinatal Support for Pregnant & Birthing Parents

- Integrate BH education, screenings, interventions across settings
- Prioritize peer/community supports
- Clarify referral pathways and training

3 Education & Promotion

- Promote positive childhood experiences
- Support caregiver well-being
- Leverage community capacity, avoid ACEs deficit framing

4 Build a Coordinated P-5 System

- Universal, diverse access points starting prenatally
- Cross-system coordination (ESIT, DDA, schools, primary care)
- Use developmentally appropriate and relational language

**Input To-Date: P-5
Emerging
Recommendations**

Cross-Cutting System & Workforce Priorities

- Workforce sustainability & wellness
- Align systems, improve equity & access
- Define clear roles, shared language, and upstream investments

Let's Discuss

General Qs

1. What are our hopes for filling the gaps?
 - What's missing?
 - What do we need to better understand?
 - How is this impacted by shifting social/political landscapes?
2. Is it in the scope of our subgroup to make the appropriate inferences?
 - Do we feel fully equipped to provide guidance with our standard participation?
 - Who else should be called-in; and, at what stage of the process?

P5RH-Specific Qs

1. How does your personal and/or professional experience with the P-5 system shape your mental model of an effective system, particular to [theme]?
2. Have there been successful strategies in your organization or that you've interacted with that you think should be adopted more broadly?
3. What are your biggest concerns about barriers to maintaining a relational system of care for parenting individuals, kids ages 0-5, and their families (give 1-3)?
4. What do you think is the most important measure of success of implementing an effective, equitable and relational P-5 system of care?
5. Do you have any experience in or ideas about how P-5 relational care can increase access for underserved communities?

Early interventions

- Implement comprehensive early intervention strategies (e.g. home visiting, parenting support, MH consultation, and two-gen approaches).

Perinatal preventive supports & intervention

- Support pregnant & birthing parents with BH knowledge, prevention screenings, & interventions delivered in healthcare, public health, and community settings - to set up kids and their families for success. This includes whole-family supports for pregnant & parenting individuals experiencing SUD.

Education and promotion

- Invest in comprehensive P-5 programs & education that promote positive child development, healthy parenting practices, & the prevention of Adverse Childhood Experiences (ACEs)/trauma

Coordination

- Create a coordinated P-5 system that includes universal, varied, and multiple access points that starts prenatally & focuses on parent-child dyad.

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BREAKOUTS

Look-Ahead

P5RHS / WA Thriving Office Hours

As desired throughout

CYBHWG Meeting (member-only)

April 15

P5RHS Survey for additional input

WA Thriving Discussion Group:
Youth & Young Adults

April 21st 4-5:30pm

WA Thriving Discussion Group:
System Partners

April 24th 11:30am-1pm

WA Thriving Discussion Group:
Parents & Caregivers

April 24th 2-3:30pm

WA Thriving Advisory
Group Meeting

May 1st 12-3pm

P5RHS Meeting

May 7 10AM – 12PM

CYBHWG Meeting (hybrid)

May 15 9AM - 2PM

P5RHS Meeting

June 11

10AM – 11:30 AM

CYBHWG Meeting

June 18

1:00-4:00 PM

P5RHS Meeting

June 25

10AM – 11:30 AM

P5RHS Meeting

July 9

10AM – 11:30 AM

CYBHWG Meeting

July 15

1:00-4:00PM

P5RHS Meeting

July 22

10AM – 11:30AM