

## Children and Youth Behavioral Health Work Group (CYBHWG) – Workforce & Rates (W&R) Subgroup

December 6, 2023

### Glossary of Terms

CBHA: Community Behavioral Health Agency

CBT: Cognitive Behavioral Therapy

CCBHC: Certified Community Behavioral Health Clinic

CMH: Community Mental Health

CYBHWG: Children and Youth Behavioral Health Work Group

DOH: Washington State Department of Health

HCA: Health Care Authority

RCW: Revised Code of Washington

SUDP: Substance-use disorder professional

WAC: Washington Code

WISe: Wraparound with Intensive Services

YYACC: Youth and Young Adult Continuum of Care Subgroup

### Meeting Agenda

- Discuss updates on priority recommendations and support items
- Discuss updates on key issue areas
- Discuss next steps for session and advocacy

### Discussion Summary

1. Updates on priority recommendations and statements of support

#### *Recommendation updates*

- a. WISe administrative complexities

- i. This recommendation was combined with the YYACC subgroup's recommendation on intensive services for youth with complex needs. *It is still in the process of refinement.*
- ii. Issue leads are considering removing the directive to change the WAC and exclusively pursuing a directive for a stakeholder task force.
  1. As it's written currently, this requires a report out to the legislature in a year.
  2. The deliverables of the task force should include:

- a. A recommendation for funding these programs at a level that will enable them to meet the demand for these services and achieve intended outcomes;
  - b. An integration plan between these and other related programs that will ensure individuals transition seamlessly between programs as their needs change; and
  - c. A plan for reducing the administrative burden placed on providers of intensive services.
- b. House Bill 1724 stipend program
  - i. Representative Bateman is serving as legislative point person.
  - ii. A draft bill is being reviewed by the Department of Health (DOH).
- c. Conditional scholarships
  - i. Representative Eslick is serving as legislative point person.
  - ii. A bill to change the RCW and allow Washington Health Corps Behavioral Health Program monies to be used for conditional scholarships, is in the works.
- d. CCBHC bridge funding
  - i. Ongoing work to determine specific budget ask. Actively communicating with CCBHCs to determine their needs.
- e. Public access to behavioral health data
  - i. The Health Workforce Council – coordinated and staffed by the workforce board, which pulls together a range of stakeholders across government, labor, educational institutions, employers, professional associations, etc.
    - 1. The council has been going through a strategic prioritization process, reflecting on 2023 and looking to a 3–5-year plan for recommendations.
    - 2. The Council serves as a policy advisory group.
    - 3. Health workforce data was the first ranking priority that came out of the process. The Council will be assembling a data subcommittee going forward.
    - 4. The Council is considering focusing on implementation of [House Bill 1503](#) and pairing DOH data with labor and industries and employment data, utilizing a cross-sector approach to workforce data.
    - 5. Will most likely culminate as a directive as well as a budget ask to staff analytics folks.
  - ii. Since the effort of the Council is very similar to that put forward by the subgroup, there are conversations to combine efforts and let the Council take the lead.

*Statement of support updates*

CYBHWG voted on 11/17 to advance the full slate of support items proposed by subgroups and appointed WG members. *\*statements with an asterisk were those that were proposed by the W&R Subgroup as recommendations for the 2024 session but did not advance under CYBHWG.*

- f. Evaluation of loan repayment programs\*

- i. As part of supporting the investments made in loan repayment programs in Washington, it is recommended the Legislature require an evaluation of the Washington Health Corps' portfolio of loan repayment programs to understand outcomes.
  - ii. *See: update on behavioral health data recommendation.* This support item is in discussion to be included within the work of the administrative data taskforce by the Workforce Council.
    - 1. Talking to the Student Achievement Council on alternatives to collecting more data going forward if it isn't a possibility to fund a retrospective study.
- g. "well-being specialist" designation\*
  - i. Recommending that the legislature direct the healthcare authority to conduct an analysis of the best workforce designation for "well-being" specialists.
  - ii. No update. In conversation with HCA on collaboration and clarifying if it needs any legislative action.
  - iii. The goal remains to identify a workforce designation that is Medicaid billable, by 2025.
- h. Training and Supporting Providers to Meet the Clinical Needs of their Clients
  - i. The CBT+ Initiative is a University of Washington and WA State partnership to train CMH providers with BA and MA-level clinicians in the common elements and cross-cutting aspects of CBT for anxiety, depression, behavior problems, and trauma-related issues.
  - ii. In addition to the yearly \$250k of state funding, an additional \$250k is needed per year to
    - 1. Maintain/expand training given rising costs in past 3-5 years;
    - 2. Support and expand our BIPOC supervisor group and DEI activities; and
    - 3. Continue growing CBT+ leaders within CMH organizations.
  - iii. Still in discussion with elected officials on moving forward the initiative.
- i. Occupational Therapists (OTs) in Community Behavioral Health Agencies (CBHAs)
  - i. Support \$2 million for Workforce grants supporting occupational therapy services in community behavioral health.
  - ii. [Senate Bill 5228](#), passed in 2023, provides MCO payment for Occupational Therapy (OT) services in outpatient behavioral health. Due to previous lack of funding, BH agencies are unfamiliar with OT services. WA Occupational Therapy Association proposes \$2 million for the HCA to fund grants for behavioral health agencies, in partnership with OT higher education programs, to design and implement OT services over a two-year period. The grants include a requirement to provide fieldwork supervision for OT students and OT Assistant students to grow the workforce available to serve BH clients in the future.
- j. Social Worker Compact
  - i. Representative Leavitt is serving as legislative point person.
  - ii. Last year four compacts were passed: the speech and audiology compact, mental health counseling compact, dental and dental hygienist compact, and nursing compact. This year the legislature is hoping to pursue a social worker compact and physician's assistant compact. The Compact allows eligible licensed social workers to practice in all

states that join the compact via a multistate social work license and will make more clinical social workers available in WA State.

- k. Reducing barriers to credentialing
    - i. Per the passage of [House Bill 1724](#) in 2023, the bill that focused on increasing the trained behavioral health workforce, the DOH embarked upon a stakeholder process “to identify changes to statutes and rules that would remove barriers to entering and remaining in the [behavioral] health care workforce and to streamline and shorten the credentialing process.” It is anticipated that a number of the recommendations that were generated through the stakeholder process will be included in a bill in 2024.
    - ii. Representative Bateman is serving as the legislative point person and is working on incorporating some of the recommendations from the stakeholder process. No bill has been made public yet.
  - l. Credentialing Improvements per DOH decision package
    - i. Support the DOH Decision Package related to credentialing: According to the DOH decision package, credentialing timelines for health care providers have increased and individuals are experiencing lengthy delays in obtaining their credential to practice. This is exacerbating the dire health care workforce shortage.
    - ii. Waiting to see what comes out of the governor’s budget, which impacts what state agencies can work on. It is slated to be released next week (12/11)
  - m. Amend [Senate Bill 5120](#) to allow youth-servicing in 23-hour crisis care centers
    - i. Propose amending SB 5120, passed in 2023 to create 23-hour crisis relief centers for adult populations, to add youth to its service model. Currently youth are allowed to be served by a similar but less complete model of services broadly characterized as *crisis outreach, observation, and intervention services*. The model currently available for youth provides loose guidance around the types of services that could be offered but has no significant standards or requirements and thus is a poor alternative to what a 5120 model would provide. Amending 5120 will enhance the state's continuum of care through filling a critical youth services gap, and including the following important provisions for youth-specific crisis relief centers:
      - 1. Must allow walk-in services and first responder drop offs, and accepting those with behavioral health crises of all acuties;
      - 2. May provide services beyond 23 hours, 59 minutes for people with a plan to transition to another care setting as a part of an established aftercare plan and/or awaiting evaluation of an involuntary treatment admission; and
      - 3. Must provide access to a prescriber and basic medical care.
    - ii. \*This recommendation was elevated in both the W&R and YYACC subgroups and was refined following the meetings by a multi-stakeholder team to address concerns raised.
2. Updates on key issues
- a. Apprenticeships
    - i. There are three apprenticeship pathways: behavioral health tech, peer counselor, and substance-use disorder professional (SUDP).

- ii. The program launched October 2022, and has since had 2 BH tech cohorts, 3 peer counselor cohorts, and 5 SUDP cohorts.
    - iii. There are currently 24 active apprenticeship sites throughout the state.
      - 1. A concerted effort into expanding rural sites
    - iv. The training fund is now contracted with Seattle Children's initiative to do a program evaluation.
      - 1. Only have initial data to date, but have learned so far that apprentices need more support – childcare and other supports – to help them stay in and succeed. The training fund is working to bring in partners for additional supports, as well as working with different state & county entities to increase program funding and slots.
  - b. The Ballmer Group behavioral health conditional scholarships
    - i. For 2024, UofW will have about 176 remaining 'slots' for scholarship awards, since not all students who receive a scholarship receive the full \$51,500.
    - ii. New accredited social work programs at Heritage University and PLU, and an accredited Rehabilitation Counseling program at Western University.
    - iii. Geographic and racial diversity focus around apprenticeships and workforce pipelines.
    - iv. The program provides professional support for students and post-graduation supports for students who graduated in the past one-to-two years, particularly with licensure processes.
  - c. Well-being specialists
    - i. UWCoLab starting curriculum development for the well-being specialists
    - ii. Launching a mini video series so folks can see examples of individuals essentially doing this role in the existing workforce and typically through peer certification pathways but carving out the benefit of direct psychosocial support roles.
    - iii. Aim to have pilots by Summer 2024.
3. Timeline and next steps
- a. The governor's budget is to be released next week, 12/11.
  - b. Session check-in calls are scheduled bi-weekly, January-March, Wednesdays 10:30AM-11:00 AM beginning January 3, 2024.
  - c. Behavioral Health Catalyst will be producing one-page info sheets for W&R and the larger CYBHWG, to be sent out to the subgroup ahead of 1/3/24.

**Next Meeting: January 3, 10:30 AM-11:00 AM**