

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

May 28, 2025

### **Glossary of Terms**

CCBHC: Certified Community Behavioral Health Clinic

CHW: Community Health Worker

CYBHWG: Children and Youth Behavioral Health Work Group

DCYF: Department of Children, Youth and Families DSHS: Department of Social and Health Services

ECEAP: Early Childhood Education and Assistance Program

HCA: Health Care Authority

IECMH-C: Infant and Early Childhood Mental Health Consultation

MCO: Managed Care Organization PAL: Partnership Access Line

WSAC: Washington Student Achievement Council

#### **Meeting Topics**

Washington Thriving process and timeline + W&R progress to date Breakout Group Whiteboarding Session- Priority Areas Next steps & close

### **Discussion Summary**

#### Washington Thriving process and timeline + W&R progress to date

Renee Fullerton- Workforce Training and Education Coordinating Board, Hugh Ewart- Adduna Health Partner

- 1. The Workforce & Rates Subgroup is in the development phase of recommendations to provide Washington Thriving for the Strategic Plan.
- 2. The three main priorities have been identified: pathways to the workforce, administrative burden, and retention combined with financial sustainability and compensation.
  - a. Each priority area is being developed separately with the understanding that all areas are interconnected and will ultimately be tied together with the drafting of the recommendations for the Strategic Plan.
  - b. Breakout groups utilized a digital whiteboard to capture ideas and connect topics.

#### **Breakout Group Whiteboarding Session- Priority Areas**

Breakout rooms discussed the intersections of challenges and solutions within the topic areas of Pathways to the Workforce, Administrative Burden, Retention + Compensation and Financial Stability.

- 1. Themes from the Pathways conversation included:
  - a. Increasing exposure to BH career pathways in K-12
    - i. Raising Mental Health awareness in the educational system.



- ii. Expand BH apprenticeships and build curriculum across the state to make pathways more accessible
- iii. Educate on the different roles in BH, Increase peer support opportunities.
- b. How to create core competencies that translate across populations.
- c. Need for formalizing continuity across levels of workforce.
- 2. Themes from Retention and Reimbursement conversation included:
  - a. Supervision
    - i. Professional consulting support (e.g. Partnership Access Lines for BH clinicians)
  - b. Capacity and Staffing
    - i. Supportive Work Environment
      - 1. Workforce Wellbeing
  - c. Financial Sustainability and Capacity
- 3. Themes from the Administrative Burden discussion group:
  - a. Licensure
    - i. Multiple, siloed processes
    - ii. Testing
  - b. Training Requirements
    - i. Specialty Certifications for certain populations
      - 1. Inconsistent across specialties
      - 2. Attestation is required by both Health Care Authority and Washington Administrative Code
      - 3. Supervision is not readily available in all work environments.
  - c. Medicaid and provider contract requirements
    - i. Duplicative paperwork
    - ii. Extensive documentation required
  - d. Intensive services and audit requirements
    - i. Intakes are burdensome and redundant across entities
    - ii. Complex behaviors and diagnoses needing higher levels of care require extended documentation
  - e. Intake and documentation requirements
    - i. Siloed Information
    - ii. No universal Electronic Health Record keeping
    - iii. Red tape and bureaucracy create barriers to entry
      - 1. This has significant impacts of timely response during crises

#### Next steps & close

- 1. Volunteers are needed for the recommendation drafting process after the June 10<sup>th</sup> meeting. If you're interested in assisting, please email info@bycatalyst.org, hugh.ewart@addunahealth.com, and renee.fullerton@wtb.wa.gov.
- 2. The subgroup will next meet on Wednesday, June 10<sup>th</sup> from 10-11:30am. *If you are not already on the W&R mailing list and would like to be added, you can email cybhwg@hca.wa.gov indicating your preference.*

# Workforce & Rates Subgroup Meeting

May 28, 2025

# Proposed plan for today

- Recap of our 2025 Workforce and Rates workplan
- 60 minutes of concentrated conversation on emerging subgroup priorities
  - Pathways to the workforce
  - Administrative burden
  - Retention, financial sustainability and compensation
- Reconvene all together to discuss takeaways and align on next steps

# This year is different

- State budget deficit
- Pending federal cuts



There isn't a lot of money to go around Medicaid rates will go down before they go up

Strategic Plan due Nov 1



Opportunity to build a shared understanding of workforce challenges and to lay out pathways for addressing them over the next 5-10 years

 Legislative recommendations for the 2026 session



High bar for recommendations that will require budget allocations

The CYBHWG will want to link any 2026 recommendations it puts forward into the (still emerging) framework of the Strategic Plan

# RECAP: What is Washington Thriving seeking from us?

- Synthesized write-up(s) of anything we collectively want the Strategic Plan to consider or address
- At the May 14 meeting, group conversation indicated support for W&R developing:
  - i. Proposed strategic change(s)/improvement(s) for resolving key system-level challenge(s) or filling major gap(s), this will likely involve some short narrative but not a "cohesive, foundational narrative"

# RECAP: How will what we provide be used?

- Will inform the language the Strategic Plan uses and assertions made related to workforce
- Will inform the "Strategic Starting Point(s)" that the Strategic Plan puts forward related to workforce
- Will be the basis of more detailed "issue brief(s)" that will dive deeper than the aggregated Strategic Plan can

We will have opportunities to review and give feedback on how this all shows up in the Strategic Plan

# Proposed path forward

- Agree on topic area priorities to propose a solution and roadmap (May-July)
- Use in-meeting time for breakout discussions and group
- Use asynchronous time and volunteers in-between meetings to formulate proposed actions via email

# We have 6 meetings over 3 months:

- May 14
- May 28
- June 10
- June 26
- July 9
- July 23

## How we will use our time

Meeting	Discussion
May 14	Discussed priority areas – Conclusion: all three groups feel important to engage in strategy development and will continue
May 28	<ul><li>Priority area work continues</li><li>Identify if we have enough content to start draft narrative</li></ul>
June 10	<ul><li>Review draft narrative</li><li>Work on chosen issues</li></ul>
June 26	<ul><li>Review draft write-up(s)</li><li>Work on chosen issues</li></ul>
July 9	<ul><li>Review draft write-ups</li><li>Begin discussing 2026 priorities</li></ul>
July 23	<ul> <li>Review and align on final write-up(s) to submit by July 25</li> <li>Continue discussion on 2026 priorities</li> </ul>

### What we've heard so far

- The core problems: Underinvestment and system complexity
- The core goal: Simplify, sustain, add value, increase efficiencies, and retain workforce and progress
- The core areas
  - 1. Pathways to the workforce
  - 2. Administrative burden
  - 3. Retention, financial sustainability and compensation

# For reference

### Foundational narrative

- To make the economics work:
  - Simplify regulations and requirements
  - Incentivize good practice
  - Cover the cost of care
  - Modernize systems
- To sustain workforce wellbeing:
  - X
  - X
  - X
- To fill geographic gaps:
  - X

- To build a pipeline of new talent:
- To diversify the workforce, :
  - X
  - X
  - X
  - X
- To ensure those with the highest needs get treated by experienced providers:
  - X

# Washington Thriving's process

PHASE 1: VISIONING

PHASE 2: ASSESSING CURRENT LANDSCAPE

Exploring (open processes)

PHASE 3: IDENTIFYING STRATEGIC PRIORITIES

WE (narrowing choices
ARE
HERE

PHASE 4: MOVING TO ACTION

NOVEMBER 2025 STRATEGIC PLAN TO LEGISLATURE

### Phase 1 questions:

What's the vision?

What is the ideal continuum of care?

#### **Phase 2 questions:**

Does WA have the right services and supports?

Does capacity for each meet the need?

### **Phase 3 questions:**

What are the gaps, and how can we fill them?

What are the key levers for change with the greatest promise?

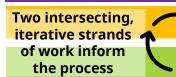
### **Phase 4 questions:**

How do learnings inform the strategy?

What are the shortand long-term wins?

How will we know we're on the right track?

**IMPLEMENTATION** 



PEOPLE CENTERED ACTIVITIES - COMMUNITY ENGAGEMENT AND FEEDBACK

### 2025 Washington Thriving Workplan

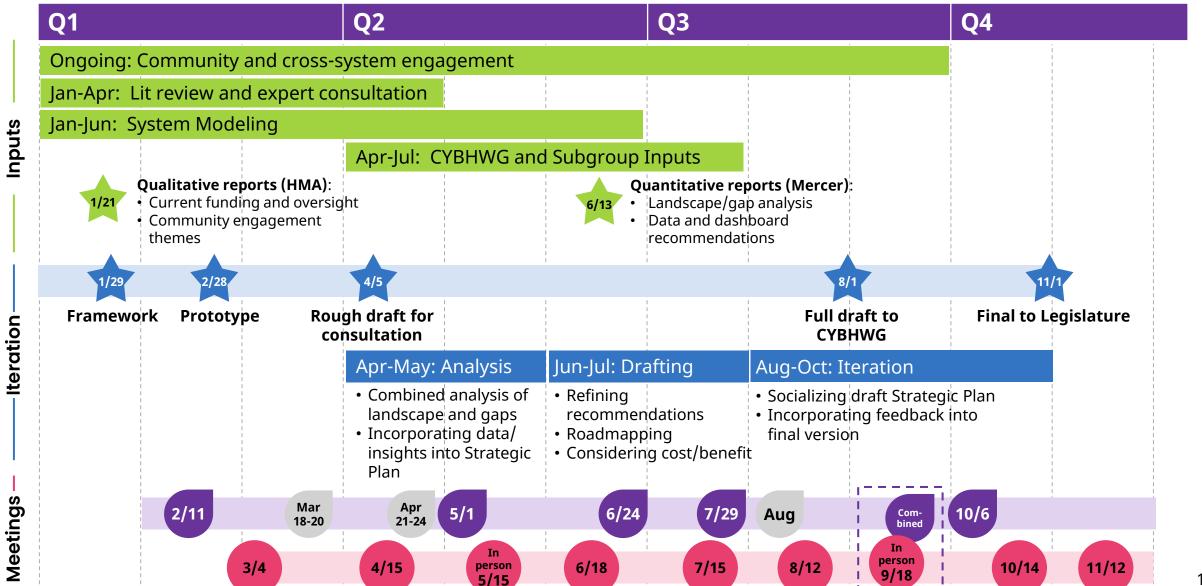








Disc. Group Meeting



### **W&R Timeline**

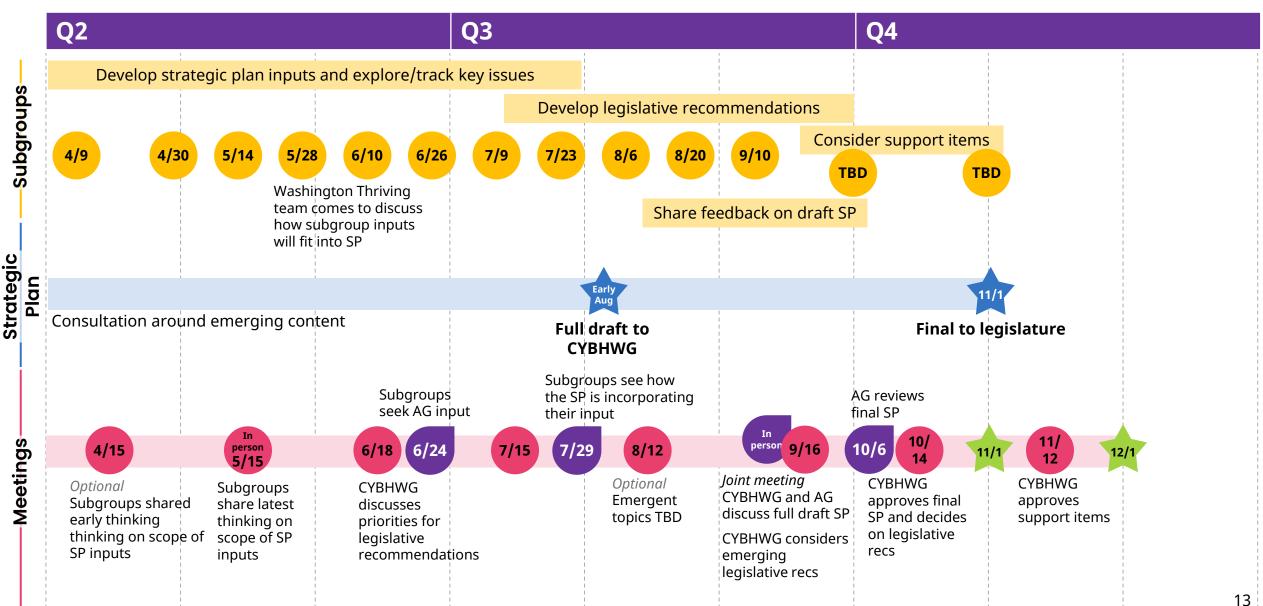












# **Building toward a System of Care**

A future where every pregnant person, baby, child, youth, and young adult in Washington is thriving, supported by their families, caregivers, and communities.

Washington's Prenatal-through-Age-25 Behavioral Health System:

Every Washingtonian understands how behavioral health affects well-being and recognizes when young people need

Funding, providers and systems work together so that services are seamless, accessible, and adapt to changing needs.

Behavioral health services and supports:

- Holistically address mental health, substance use, developmental, physical health, and co-occurring needs.
- Connect into people's communities where they spend time.
- Are available when needed.
- Are available for all developmental stages, all cultures and languages, in all parts of the state.



Is informed by children, youth, caregivers and families



Ensures that all doors lead to support



Offers services to meet the individual needs of children, youth, families and caregivers



Is equitable, anti-racist, and culturally and linguistically responsive



Changes in response to new information



Invests in prevention and well-being



Includes families, caregivers and communities as key contributors to well-being

## System of Care Guiding Principles:

The System of Care follows important beliefs about how to help kids and families:

**Family-Centered**: Families are partners in creating plans, not just told what to do

**Youth-Guided**: Young people have a say in their own care

**Community-Based**: Wherever possible, help is provided close to home, not just in faraway facilities

**Culturally Respectful**: Care respects each family's culture, language, and traditions

**Strengths-Based**: Focus on what's going well, not just problems

**Early Intervention**: Getting help early before problems get bigger

# A modular set of Strategic Plan materials

### **Executive Summary**

# Comprehensive long-form document

### **Supporting issue briefs**

### **Companion website**

Legislators Executive leadership CYBHWG, Advisory Group, system partners

Those who want to learn more about specific areas of interest

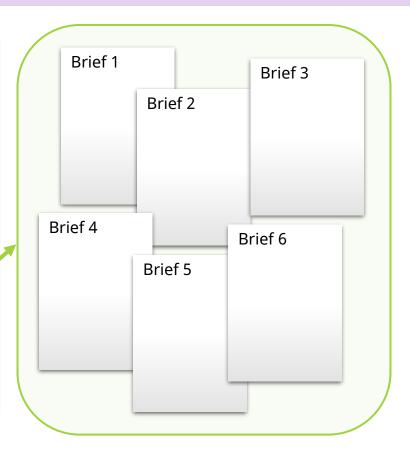
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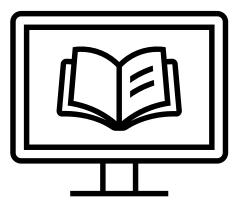


#### **Three Priorities:**

- 1. Strengthen the behavioral health system infrastructure
- 2. Expand comprehensive offerings
- 3. Embed core values

**Washington State** Prenatal-through-Age-25 Behavioral Health Strategic Plan Introduction **Current State** III. Broad Vision IV. Strategic Recommendations A ~~~~ B ~~~ C ~~~~ V. Next Steps VI. Conclusion





Engaging interface presenting nested levels of detail

Interactive navigation to allow folks to dive deeper into areas of interest including:

- Issue briefs
- More detailed roadmaps
- References

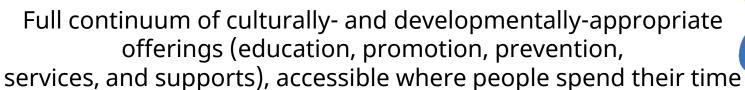
### The Strategic Plan will likely be structured as follows

P-25 BH STRATEGIC PLAN SECTIONS	INCLUDES
Section 1: Introduction	<ul> <li>Executive summary &amp; letter from co-chairs</li> <li>Washington State context &amp; legislative charge</li> <li>Summary of plan structure</li> <li>Methods &amp; approach (high level)</li> </ul>
Section 2: Current State	<ul> <li>Summaries of:</li> <li>current landscape (supply &amp; demand of supports and services)</li> <li>bright spots in Washington's system</li> <li>gaps, barriers, &amp; challenges</li> </ul>
Section 3: Broad Vision for Washington's P-25 BH System of Care	<ul><li>Washington Thriving's purpose &amp; vision</li><li>System of Care framing</li></ul>
Section 4: Strategic Recommendations (deep vision for P-25 BH System of Care)	<ul> <li>3 interconnected priorities</li> <li>Paints the picture of the breadth of system intervention</li> <li>14 (8, 3, 3) recommended strategic starting points</li> </ul>
Section 5: Next Steps	<ul> <li>Implementation roadmap</li> <li>Strategic financing considerations</li> <li>Measuring success over time – indicators &amp; data dashboard proposal</li> <li>Implementation lessons &amp; success factors</li> </ul>
Section 6: Conclusion	
Annexes	<ul> <li>Activities undertaken in SP planning process</li> <li>Inputs to SP</li> <li>Register of involved parties with heat maps/disaggregation</li> <li>Backlog of specific recommendations</li> <li>Bibliography, relevant literature references</li> <li>Definitions &amp; acronyms</li> </ul>

### The Strategic Plan will address these areas

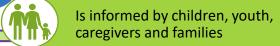


### What will the system offer and where





### **Guiding principles**





Regionally-led
Youth-, family-, and community-centered
Tiered service coordination



Ensures that all doors lead to support



Offers services to meet the individual needs of children, youth, families and caregivers



Is equitable, anti-racist, and culturally and linguistically responsive



Changes in response to new information



Invests in prevention and well-being



Includes families, caregivers and communities as key contributors to well-being

### What will power the system

Diverse, well-trained, thriving workforce Sustainable financing

### What will guide the system

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

Vital Conditions outside of the formal Behavioral Health System that impact wellbeing

(e.g. economic stability, food security & nutrition, safety & security, education, housing, natural & built environment, civic & social engagement)

# VISION: A FUTURE WHERE EVERY YOUNG WASHINGTONIAN IS THRIVING SUPPORTED BY THEIR FAMILIES, CAREGIVERS, AND COMMUNITIES

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#### STRATEGIC RECOMMENDATIONS FOR WASHINGTON'S P-25 BEHAVIORAL HEALTH SYSTEM

# I. STRONG SYSTEM INFRASTRUCTURE

What guides and powers the system

- A. Leadership Structures
- B. Coordination Playbook
- C. Data Systems
- D. Payment Models
- E. Integrated Funding
- F. Upstream & Community
- G. Workforce Retention
- H. Workforce Pipeline

# II. COMPREHENSIVE OFFERINGS

What the system will offer, where, and how offerings will be provided

- A. Developmental Milestones
- B. Supportive Ecosystem
- C. Fill Biggest Gaps

# III. EMBEDDED PRINCIPLES

What core values frame and unify the system

- A. Collective Learning
- B. Culturally Responsive, Healing-Centered, Strengths Based Starts
- C. Meaningful Partnerships

### **WASHINGTON'S SYSTEM OF CARE**

# **Topline priorities**



- **1. Strengthening system infrastructure** through coordinated leadership, workforce development, sustainable financing, and community-responsive practices that create a cohesive, navigable system.
- **2. Expanding comprehensive offerings** across all developmental stages and levels of care to ensure the right help is available at the right time in the right setting for every pregnant person, infant, child, youth, caregiver and family.
- **3. Embedding core values** that guide how the system is structured, how services are delivered, and how young people, caregivers, and families experience care.

### Three interconnected priorities with (14) high level recommendations that create the framework for systemic rather than piecemeal change. Within each of these, the Strategic Plan will identify one or more Strategic Starting Points.

Governance

#### I. Transform the Maze into Pathways: Build Foundational Infrastructure

- A. Establish leadership structures to reduce system fragmentation
- B. Create a playbook with clear expectations for working together
- C. Build integrated data systems that all the system to see itself
- D. Adapt payment models and reimbursement structures
- E. Integrate funding from multiple sources to invest meaningfully across the system
- F. Fuel upstream, community-first solutions
- G. Create behavioral health careers worth staying for
- H. Ignite the behavioral health talent trajectory from classroom to career

### II. Expand Support for Every Age, Stage, & Level of Need: Build Out Comprehensive Suite of Offerings

- A. Concentrate support at developmental milestones when impact is greatest
- B. Create one seamless supportive ecosystem around the young person and their caregivers/family
- C. Strategically fill the most critical service gaps first

### III. Get the "How" Right: Convert Key Guiding Principles that Center People into Everyday Practice

- A. Ensure adaptive, collective learning processes that power progress
- B. Operationalize culturally responsive, strengths-based, and trauma-informed assessment practices
- C. Invest meaningfully in sustainable youth, family, and community partnerships

### Detail being built out for each Recommendation:

- **Problem Definition:** outlines the core issue being addressed + illustrated impact
- **Strategic Solution:** Proposes the central recommendation
- Transformative Potential: explains broader systemic benefits that would result
- Alignment with State-Level Priorities: demonstrates how the recommendation directly supports and operationalizes existing WA State initiatives and priorities
- Learning from Others: provides evidence-based support for the recommendation by examining successful models from elsewhere
- Leveraging Washington's Assets: identifies existing WA-specific assets that can be incorporated into implementation
- Implementation Options: outlines practical approaches to putting the recommendation into action
- Funding Considerations: addresses financial aspects of developing and implementing the recommendation
- **Key Success Factors:** identifies critical operational elements that determine success