

BH Career Ladders Advisory Committee

Monday, March 13, 2023

2:30 PM – 4:00 PM

Virks Training Room

Attendees: Ann Caretti, Katelyn Archetto, Silvio Napolitano, Sue Kershaw-Sczuroski, Melissa Campbell, Tonya Glantz, Rick Brooks, Aryana Huskey, Sandra Victorino, Kristin Lehoulier, Lynn Blais, Lawrence Miller, Mushi Calixte, Sue Pearlmutter, Charon Rose, Heather Gaydos, Ariane Famiglietti, Janet Spinelli, Michael Barnes, Jennifer Weston, Elena Nicolella, Jay Nimmagadda, (missing from list: several individuals at very back table - did not sign sign-in sheet, were new attendees to workgroups; unable to determine names)

2:30 - 2:40 pm - Welcome, Introductions, Meeting Goals

- Sandra Victorino welcomed the attendees to the meeting and walked through the agenda.
- Attendees introduced themselves.

2:40-2:45 pm -Process Recap

- Rick Brooks reviewed the process and progress to date, noting that we are currently focusing on developing career pathways for working adults. Rick also:
 - Reminded committee members that the committee's charge is to review requirements and resources for jobs and career advancement and identify and address system barriers that limit access to education, employment, and career advancement.
 - Reminded attendees to think big as we work to develop policy proposals for the coming one to two years.
 - Explained that next month we expect to focus on Career and Technical Education, followed by Licensure in May and Pre-Employment strategies in June.

2:45-3:05 Review of Potential Tactics for Building Incentive and Program Opportunities for Working Adults

- Kristin Lehoulier explained that we are looking to identify and prioritize the most impactful tactics to support working adults in the area of Behavioral Health, reminding participants that we want to think carefully and strategically about where we should be spending our energy and resources. Kristin continued to:
 - Explain that all of the potential tactics to be discussed have come out of prior committee meetings and discussions and walked through the list of potential tactics outlined in the table below.
 - Ask if those in attendance needed additional clarification and if there are any glaring omissions to the list.
 - Note that we are working to be as action oriented as possible. We are not trying to create a 5 year plan, but rather a 1-2 year list of priority activities. The list might not be exhaustive, but should include the most important actions that we would like to accomplish over the next few years.
- One attendee suggested that a tactic be added to the list that involved working with RIOPC to 1) learn what procedures and processes are already in place at institutes of higher education

concerning Prior Learning Assessments (PLA) 2) how institutions award credits based on prior experience and 3) working to standardize these processes across institutions.

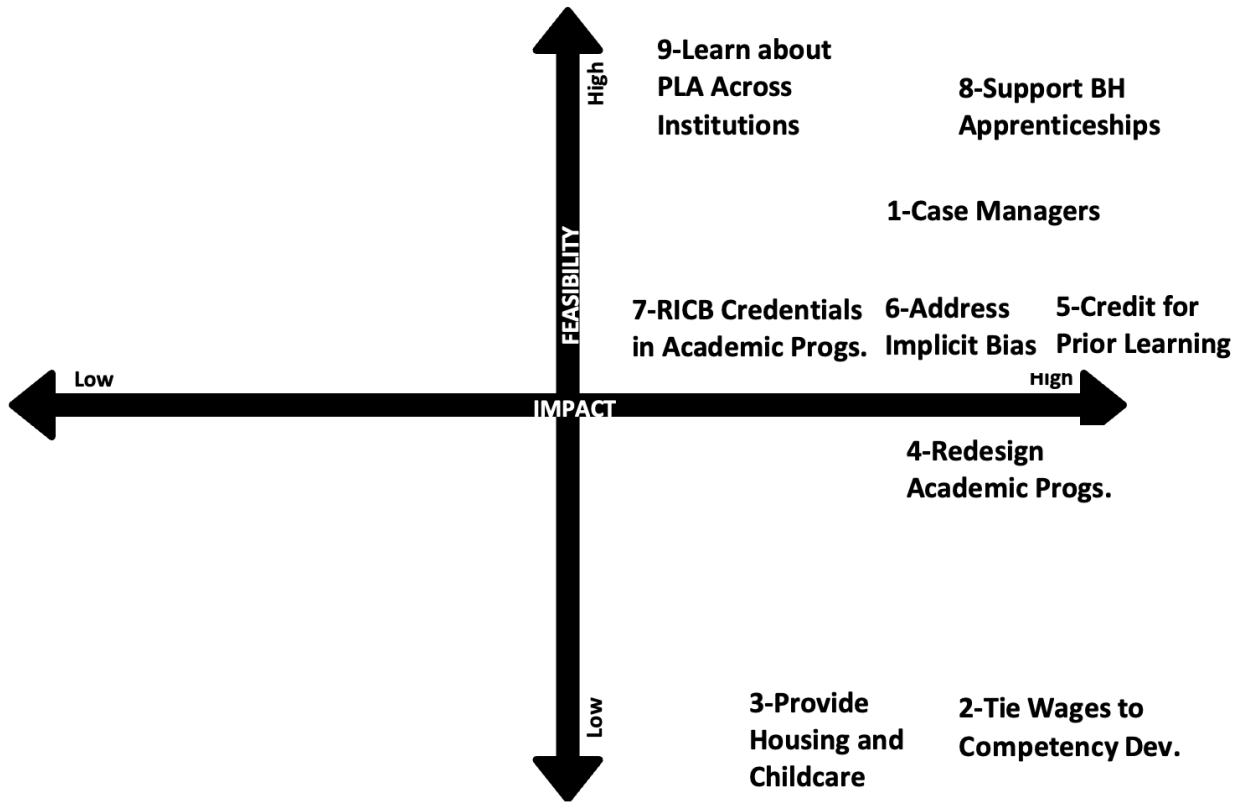
- Kristin added the above suggestion to the potential tactics as #9, resulting in the following list:

#	Potential Tactic	Impact			Feasibility		
		L	M	H	L	M	H
1.	Work with the RI Certification Board, state agencies, and provider organizations to formalize the training and credentialing of case managers.						
2.	Tie wage increases to competency development and certification.						
3.	Provide resources for housing and childcare to behavioral health workers (through grants to BH organizations)						
4.	Redesign behavioral health academic programs to increase students' success by providing wrap-around supports including childcare, housing, mentoring, tutoring, technology, strong advisement, and ability to earn while learning.						
5.	Award academic credit for prior learning, credentials, experience, and competency development.						
6.	Examine and address implicit bias in higher education and employer settings.						
7.	Work with the RI Certification Board to embed and align credentials (CADC, CAADC) into BH related academic programs.						
8.	Support creation of behavioral health apprenticeship programs.						
9.	Share/learn what procedures and processes are already in place at institutes of higher education						

	around awarding PLA credit and standardize across institutions.							
--	---	--	--	--	--	--	--	--

3:05-3:55 Prioritization Exercise

- Kristin divided the meeting up into three groups and explained that there was a poster sized list of tactics at each table with columns that attendees could use to rate both the impact and feasibility of each potential tactic (refer to the table above).
- Kristin explained that at each table, participants were to spend the first five minutes individually rating both the impact and feasibility of each tactic as low, medium, or high. Following the individual rating exercise, each group should look for areas where their ratings diverged, and explore why they didn't initially agree.
- Kristin asked a table how they rated Tactic 1 on both impact and feasibility, and then asked the other groups if they generally agreed or disagreed with the first group's assessment. If there was disagreement, the groups discussed the tactic until everybody in the room generally agreed on the potential impact and feasibility of all 9 of the tactics.
- As attendees discussed each tactic, Kristin would plot the tactic on a graph with the X axis representing impact and the y axis representing feasibility, which resulted in the following chart. Please refer to the table above to identify tactics by their corresponding number.



- At the end of the discussion, Kristin asked each participant to give three votes for the tactics that they would most like to see the initiative focus on over the next few years. The results of this exercise are below. This exercise took place at the very end of the meeting and not everybody participated.

#	Potential Tactic	# of Votes
1.	Work with the RI Certification Board, state agencies, and provider organizations to formalize the training and credentialing of case managers.	4
2.	Tie wage increases to competency development and certification.	3
3.	Provide resources for housing and childcare to behavioral health workers (through grants to BH organizations)	
5.	Award academic credit for prior learning, credentials, experience, and competency development.	2
8.	Support creation of behavioral health apprenticeship programs.	2
9.	Share/learn what procedures and processes are already in place at institutes of higher education around awarding PLA credit and standardize across institutions.	2
4.	Redesign behavioral health academic programs to increase students' success by providing wrap-around support including childcare, housing, mentoring, tutoring, technology, strong advisement, and ability to earn while learning.	1
6.	Examine and address implicit bias in higher education and employer settings.	
7.	Work with the RI Certification Board to embed and align credentials (CADC, CAADC) into BH related academic programs.	

3:55-4:00 Thank you and Next Steps

Rick thanked everybody for their thoughtful participation and adjourned the meeting.