



Health and Human Services Workforce Planning Behavioral Health Career Ladder Advisory Committee

March 2023

Agenda

Welcome/Introductions/Meeting Goals

Recap

- Committee Charge and Focus
- Process To Date

Review of Potential Tactics for building incentives and program opportunities for skill development and career advancement for working adults.

Prioritization Exercise: Where should we prioritize our implementation efforts?

Next Steps

	Feb	Creating Pathways for Working	
		Adults Part I	Today's
	Mar	Creating Pathways for Working	Focus
		Adults Part II	
5	Apr	Career and Technical	
-		Education/Youth Strategies	
	Мау	Pre-Employment Training	
~	Jun	Occupational licensing	
е		requirements	



Charge: Career Ladders Advisory Committees

Review requirements and resources for jobs and career advancement and identify and address system barriers that limit access to education, employment, and career advancement.



Recap Planning Process

- 1) Validate the problem/identified barriers (Jan mtg)
- 2) Validated core strategies (Feb mtg)
- 3) For each core strategy identify potential tactics
 - During the Feb/Mar meeting, we are focusing on Pathways for Working Adults
- 4) Prioritize areas for implementation
- 5) Identify key partners
- 6) Form implementation groups



Potential Tactics Identified To Date

#	Potential Tactic	Known Examples/Precedent
1.	Work with the RI Certification Board, state agencies, and provider organizations to formalize the training and credentialing of case managers.	RI - Case Manager Career Ladder (TPC), (RI), CCRI Case Management Certificate
2.	Tie wage increases to competency development and certification.	RI - TPC Case Manager Career Ladder, Wage Scale Valuing (House of Hope)
3.	Provide resources for housing and childcare to behavioral health workers (through grants to BH organizations)	OR
4.	Redesign behavioral health academic programs to increase students' success by providing wrap around supports including: child care, housing, mentoring, tutoring, technology, strong advisement, and ability to earn while learning.	OR



Potential Tactics Identified To Date

#	Potential Tactic	Known Examples/Precedent
5.	Award academic credit for prior learning, credentials, experience, and competency development.	IN, ME
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.	RI-TPC/RIC



Brief Check In: Any Glaring Omissions?

When you consider the tactics identified to date, do you think we are missing anything that could effectively build incentives and program opportunities for skill development and career advancement to help working adults in behavioral health, and especially workers of color, progress through career pathways towards licensed behavioral health professions?



Prioritization Group Exercise

#	Potential Tactic		Impact			Feasibility		
		L	М	н		L	м	н
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)							



Where should we prioritize our implementation efforts?



Thank You and Next Meeting Date

- Next Meeting: Monday April 3, 2:30 to 4:00 Virks Training Room
- Reminder: Health and Human Services Career Day Saturday April 1, 9:00 - 4:00
 @ RI Nursing Education Center

 Reminder: Healthcare Workforce Planning and Implementation Initiative Update. March 20, 2:00-3:00 via Zoom.





Appendix



Appendix: Recap of Challenges and Barriers

- Lack of structured career pathways supporting advancement in the field.
- Challenges for entry level workers who want to obtain licensure in the field.
 - Lack of financial incentives for advancement.
 - Higher education requirements, and the expense associated with earning a degree are formidable barriers.
 - Lack of paid internships for entry level workers.
 - Criminal records eliminate people from consideration.
- It is difficult for workers to build skills/participate in training when "on the clock."
- Need for more skilled and culturally competent supervisors and mentors to support entry level and early career workers.
- Lack of awareness/understanding among prospective workers of BH roles and opportunities.
- High turnover and burnout
 - Reimbursement and wages
 - Workers have experienced trauma themselves.
- Systemic racism and implicit bias in the workplace and educational programs.



For Reference: Other Aligned/Related Tactics

- Career and Technical Education (Focus of April Meeting)
- Invest in pre-employment training for behavioral health roles (Focus of May meeting)
- Review occupational licensing requirements and identify and address requirements or practices that unnecessarily screen out qualified candidates, such as testing **(Focus of June meeting)**
- Provide loan forgiveness to BIPOC students who agree to work in Rhode Island. (Aligned Initiative)
- Incentivize behavioral health organizations to increase their capacity to provide clinical supervision to students and new graduates. (Aligned Initiative)



Health Workforce Planning Initiative Goals and Aims *note: the Career Ladders Advisory Committee's scope is in green

GOAL#1: Diversify the Workforce/Address Structural Racism	GOAL#2: Adequate Pipeline	GOAL#3: Increase Retention
Aim #1: Improve access to behavioral health education for BIPOC students.	Aim #1: Establish clear programmatic pathways and supports that allow progression from entry-level behavioral health positions towards licensed behavioral health professionals.	Aim #1: Reduce burnout among behavioral health workers/providers.
Aim #2: Improve educational outcomes for BIPOC behavioral health students	Aim #2: Reduce barriers to entry to licensing and employment while maintaining healthcare quality and public safety and address the unique barriers faced by certain populations including but not limited to: individuals with criminal backgrounds and foreign-educated professionals.	Aim #2: Retain behavioral health workers/providers in Rhode Island.
	Aim #3: Expand the capacity of RI's educational institutions to enroll and graduate behavioral health providers (clinical placements)	Aim #3: Retain behavioral health workers/providers in healthcare.



GOAL#1: Diversify the Workforce/Address Structural Racism

Aim #1: Improve access to behavioral health education for BIPOC students. Aim # 2: Improve educational outcomes for BIPOC behavioral health students.

Related/Aligned Strategy A: Create incentives to obtain behavioral health education such as loan repayment and scholarships, prioritizing BIPOC students.

Strategy B. Examine and address implicit bias in admissions **Strategy A.** Provide supports to reduce barriers to program retention and completion. Aim # 1: Establish clear programmatic pathways and supports that allow progression from entry-level behavioral health positions towards licensed behavioral health professions.

Strategy A. Build incentives and program opportunities for skill development and career advancement that help <u>working</u> <u>adults</u> in behavioral health and related healthcare support roles, and especially workers of color, progress through career pathways towards licensed behavioral health professions.

Strategy B. Establish BH Career and Technical School, and other youth focused programming, to prepare H.S. students for behavioral health careers.

Strategy C. Train entry-level job seekers for behavioral health roles to meet demand and reduce barriers to licensing and employment.

GOAL# 2: Adequate Pipeline

Aim # 2: Reduce barriers to entry to licensing and employment while maintaining healthcare quality and public safety and address the unique barriers faced by certain populations including but not limited: individuals with criminal backgrounds and foreign-educated professionals.

Strategy A.Eliminate unnecessary occupational licensing requirements and focus on requirements that are needed for health and safety and address the unique barriers faced by individuals with criminal backgrounds and foreign-education professionals.

Strategy B. Improve methods for screening an applicant's criminal record in both employment and educational settings.

Related/Aligned Strategy C: Provide training and career counseling, as well as financial support for books, classes, exams, and other wraparound social services to support re-credentialing of foreign-educated health professionals.



Goal 2: Adequate Pipeline

Aim #1: Establish clear programmatic pathways and supports that allow progression from entry-level behavioral health positions towards licensed behavioral health professions.

Strategies	Tactics and Partners (to be developed by the Career Ladders Advisory Commit			
	State	Education Partners	Employers	
A. Build incentives and program opportunities for skill development and career advancement that help BIPOC <u>working adults</u> in behavioral health and related healthcare support roles move through career pathways towards licensed behavioral health professions.	Related/Aligned Initiative: Promote behavioral health careers and job resources among students, job seekers, and incumbent workers. (Caring Careers) Invest in programs that create more opportunities for people to obtain further education or training, increase student success, and recognize prior learning. Facilitate discussions with employers to identify additional "rungs" on the ladder/lattice tied to compensation. Help formalize "Case Management" role to bridge workers from unlicensed to licensed behavioral health professionals	 Redesign training and education programs create more opportunities for people to obtain further education or training while working: Flexible schedules/Shorter programs Earn while you learn Completion incentives Redesign programs to increase students' success by providing: Wrap around supports such as child care and housing. Mentoring, tutoring, linguistic, technology and other support for students. Strong advisement 	Support creation of apprenticeship programs. Create workplace policies that allow incumbent workers to obtain further education and training with compensation. Train and incentivize team leads, supervisors to support newer staff to build skills and acquire required hours for certification and licensure	



Goal 2: Adequate Pipeline

Aim #1 (CONT'D): Establish a clear programmatic pathway and supports that allow progression from entry-level behavioral health positions towards licensed behavioral health professions.

Strategies	Tactics and Partners (to be developed by the Career Ladders Advisory Committees)				
	State	Education Partners	Employers		
B. Establish behavioral health Career and Technical School and other youth focused programming to prepare H.S. students for behavioral health careers.	Currently	being worked on by CTE Committee??			
C. Train entry-level job seekers for behavioral health roles to meet demand and reduce barriers to licensing and employment.	Continue to invest in pre-employment training for behavioral health roles.	Redesign training and education programs so that people can obtain training while working. Provide wrap-around supports including child care.			



Addition Tactics Relevant to Goals 1 & 3

Strategy 2.1.A Build incentives and program opportunities for skill development and career advancement that help BIPOC <u>working adults</u> in behavioral health and related healthcare support roles move through career pathways towards licensed behavioral health professions.

#	Potential Tactic	Relevant Examples
	Recruit and retain faculty to to rapidly expand seat capacity and train the next generation of BH Workers. (Goal 2 Aim 3-Out of Scope?)	<u>CA, CT,</u>
	Provide Tuition Assistance/Free Tuition to BIPOC students pursuing Behavioral Health Degrees in RI who agree to work in RI. (Goal 1 Aim 1-Aligned Initiative)	<u>CA, CT, CO, HI</u>
	Provide loan forgiveness to BIPOC students who agree to work in Rhode Island. (Goal 1 Aim 1-Aligned Initiative)	<u>CA</u> , <u>CT</u> , IL, IN, IA, ME, NY, NJ, OH, OK, OR, many others.
	Increase and formalize entry level Behavioral Health Programming in RI utilizing "paraprofessional" rungs on the career ladder (ie. Mental Health Behavioral Aide-MN, Mental Health and Rehabilitation Technician"-ME, Behavioral Health Aide, AK). (Goal 2 Aim 1, Strategy	AZ, GA, <u>ME, MN</u> , Alaska
	3 re: Entry Level Programming)	I I RHODE ISLAND
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