Behavioral Health Workforce Pipeline Development Plan

Nevada Health Care Workforce and Pipeline Development Workgroup

2023

With support from

Nevada's Division of Public and Behavioral Health, DHHS
Center for Public Health Excellence, School of Public Health, UNR
High Sierra AHEC







Nevada Health Care Workforce and Pipeline Development Workgroup

Background

The Nevada Health Care Workforce and Pipeline Development Workgroup aims to improve, grow, and diversify Nevada's public health, behavioral health, and primary care workforces and workforce pipelines to ensure the state has a workforce capable of meeting current and future health care needs.

It brings together stakeholders representing public health, behavioral health, primary care, traditional workforce development, K-12 and higher education, minority health and equity, and community-based organizations throughout the state to:

- 1. Enhance education and awareness of workforce development initiatives in Nevada, connect non-traditional partners, identify opportunities for cross-sector collaboration, and maximize resources statewide;
- 2. Identify and map workforce pipeline development initiatives in K-12 education, higher education, and the current workforce; and
- 3. Create and implement workforce pipeline development plans for public health, behavioral health, and primary care.

The Workgroup established three subcommittees—one each for public health, behavioral health, and primary care—to focus on workforce pipeline development within its specific subsector of the health care workforce.

Throughout 2022, the Workgroup and its subcommittees met monthly to pursue the goals above and develop subsector-specific plans to improve the workforce.

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Behavioral Health Workforce Pipeline Development Plan

This Behavioral Health Workforce Pipeline Development Plan was developed by the Behavioral Health Subcommittee of the Nevada Health Care Workforce and Pipeline Development Workgroup. The Subcommittee is comprised of representatives of a variety of sectors, including individuals from the following organizations and agencies:

- Career Services and Workforce Development, University of Nevada, Las Vegas
- Center for the Application of Substance Abuse Technologies
- Clark County District Attorney
- Clark Regional Behavioral Health Policy Board
- College of Education and Human Development.
- Community Chest INC.
- Division of Public and Behavioral Health
- Department of Education, Office of Safe and Respectful Learning Environments
- Department of Employment, Training and Rehabilitation
- Department of Health and Human Services
- Healthy Communities Coalition

- Nevada Rural Hospital Partners
- Nevada Speech Language Hearing Association
- Office of Safe and Respectful Learning Environment, Department of Education
- Rural Regional Behavioral Health Policy Board
- Sierra Nevada Health Center
- Southern Regional Behavioral Health Policy Board
- School of Public Health, University of Nevada, Las Vegas
- Behavioral Health Coalition and Behavioral Health Sciences, University of Nevada, Las Vegas
- Washoe County Regional Behavioral Health Policy Board

The Plan identifies a clear vision for the behavioral health workforce in Nevada, as well as specific goals, objectives, and strategies to work toward the vision. Among these are efforts to establish and implement a variety of workforce development initiatives, support and advocate for legislation, and leverage available resources to improve the behavioral health workforce across the state.

Strategies are divided into three categories: short-term (0-3 months), medium-term (3-12 months), and long-term (12-24 months).

The Behavioral Health Workforce Pipeline Development Plan is a living document that will be revised by the Behavioral Health Subcommittee to include new workforce development activities and reflect changes in existing strategies as appropriate.

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Vision

To provide an accessible, clear, transparent, and efficient pathway and system for all interested individuals to pursue and achieve careers goals in the field of behavioral health.

Goals, Objectives and Strategies

Goal 1: Facilitate the expansion of the behavioral health (BH) workforce in Nevada by improving access to and advancement within behavioral health career pathways.

Objective 1: Increase Nevada's behavioral health professional recruitment, education, training, and retention efforts by implementing the following strategies.

Short Term (0-3 months)

- Support <u>Assembly Bill 37</u>, the Rural Regional Behavioral Health Policy Board's bill to create the Behavioral Health Workforce Development Center of Nevada, during the 2023 Legislative Session.
- Identify current programs throughout Nevada to inform high school and undergraduate students about career opportunities in behavioral health (such as High Sierra AHEC, INBRE Tribal Academy of Health and Science, including Nevada HOSA, CTE, NEPRIS)
- Identify existing partnerships for internship opportunities for students statewide.
- Identify professional mentoring programs.

Medium Term (3-12 months)

- Identify and expand accessible, affordable training opportunities for the existing
 - BH workforce such as online training for CEUs and certificates.
- Establish new and expand existing partnerships for programs to inform high school and undergraduate students about career opportunities in behavioral health statewide.
- Establish new and expand existing partnerships to increase quality internship opportunities for students.
- Expand AHEC's student ambassador programs.

Long Term (12-24 months)

 Expand networking opportunities for existing BH professionals by organizing conferences and meet-ups.

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- Expand or develop professional mentoring programs.
- Advocate for policies that improve the BH workforce before state and local policymakers on an ongoing basis.

Objective 2: Provide a clear understanding of the behavioral health career pipeline and what is required to enter and advance through it by implementing the following strategies.

Short Term Strategies (0-3 months):

- Develop career pipeline pathways infographic for behavioral health professionals. (look at existing reports)
- Distribute the pipeline pathways infographic regularly through partners, including those working in K-12, vocational training, institutions of higher education, community-based organizations, and other behavioral health employers.

Medium Term Strategies (3-12 months):

Update infographics regularly to reflect latest information. (Reference:
 <u>https://med.unr.edu/statewide/reports-and-publications/heath-care-careers-in-nevada-manual</u>)

Objective 3: Increase financial assistance and awareness of financial assistance available at all stages of the behavioral health pipeline by implementing the following strategies.

Short Term (0-3 months)

- Engage with entities that provide scholarships and other financial assistance to educate prospective students about existing financial assistance to help pursue BH careers.
- Promote existing loan repayment programs through the <u>Nevada Primary Care Office</u> and <u>Nevada Health Service Corps</u>.to students and the existing workforce.

Medium Term (3-12 months)

 Explore opportunities to increase and/or provide financial assistance to complete certificate programs such as addiction specialist and other behavioral and mental health certifications.

Long Term (12-24 months)

• Establish partnerships for ongoing, long-term funding for BH-related programs, including education training and professional development.

Objective 4: Join available interstate compacts for behavioral health professionals by implementing the following strategies.

Short Term (0-3 months)

- Identify existing or new interstate compacts.
- Identify and create a list of stakeholders to engage in advocating to join compacts.

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• Identify and engage stakeholders and legislators to advance interstate compacts.

Medium Term (3-12 months)

- Present to legislators and BH boards regarding opportunities to join available interstate compacts.
- Engage with legislators to draft BDRs to join available interstate compacts.

Long Term (12-24 months)

 Present and advance BDRs to pass legislation to join new interstate compacts to enhance the behavioral health workforce in Nevada as they become available in the future.

Objective 5: Continue the existing Workforce Workgroup and Behavioral Health Subcommittee and expand membership to include non-traditional partners such as transportation and housing by implementing the following strategies.

Short Term Strategies (0-3 months)

- Maintain and expand current Behavioral Health Subcommittee to function beyond current funding (June 2023).
- Identify and create a list of traditional and non-traditional partners to invite to participate in the BH Subcommittee.

Medium Term Strategies (3-12 months)

- Present to behavioral health licensing boards about advantages of adopting licensing best practices, such as those in nearby states.
- Recruit identified non-traditional partners.

Long Term Strategies (12-24 months)

- Explore funding for the Workforce Workgroup's Behavioral Health Subcommittee organization, coordination, and facilitation.
- Identify infrastructure needs to increase capacity.

<u>Goal 2:</u> Support bill draft requests (BDRs) and help pass legislation to expand the BH workforce, funding to improve the workforce, and workforce infrastructure in Nevada.

Objective 1: Identify and support BDRs and legislation related to improving the behavioral health workforce in Nevada by implementing the following strategies.

Short Term Strategies (0-3 months)

• Support the following BDRs during the 2023 Legislative Session:

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- SB 117, which relates to community health workers, sponsored by Joint Interim Standing Committee on HHS
- AB 37, which creates the Behavioral Health Workforce Development Center of Nevada, sponsored by the Rural RBHPB
- AB 69, which relates to loan repayment for BH professionals, sponsored by the Washoe RBHPB
- Research amendments to improve these bills.
- Present to the Workforce Workgroup regarding these BDRs
- Develop a list of stakeholders to engage in support of current and future BDRs.
- Engage with stakeholders to develop support for current and future BDRs.
- Develop a list of policy challenges and options to improve BH workforce development including, but not limited to, barriers to obtaining a license in Nevada, reimbursement rates, and scope of practice for LSWs.

Medium Term Strategies (3-12 months)

- Monitor new BDRs between now and the 2023 Legislative Session and throughout the Session.
- Develop a marketing/outreach strategy to inform and engage legislators about the importance of enhancing the BH workforce through the legislative process.
- Identify potential organizations and legislators willing to sponsor bills to remove barriers to obtaining licensure.

Long Term Strategies (12-24 months)

- Collaborate with legislators, other policymakers, and organizations to develop new legislation to support of the BH workforce.
- Support legislation to increase Medicaid reimbursement for behavioral health professionals.

Objective 2: Engage with the sponsors of the bills outlined above to determine the best way to support their legislation through the legislative process.

Short Term Strategies (0-3 months)

- Invite bill sponsors to participate in the BH Subcommittee, and offer assistance/support with bills.
- Notify behavioral health stakeholders interested in workforce development when bill
 hearings are scheduled to increase support at bill hearings, coordinate specific
 messaging, and/or convey bill sponsors' requests for support.

Medium Term Strategies (3-12 months)

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 Attend bill hearings and provide support by testifying at committee meetings or providing public comment.

<u>Goal 3:</u> Increase the number of community members who can response to mental health crisis in Nevada.

Objective 1: Increase the number of people from the general public and BH professionals who know how to respond to a mental health crisis by implementing the following strategies.

Short Term Strategies (0-3 months)

- Contact the Nevada Office of Suicide Prevention and other partners to develop a list of free trainings.
- Explore opportunities to collaborate with existing programs providing Signs of Suicide (SOS) training for K-12 and undergraduate students.
- Explore and identify mental health assistance programs for BH professionals.
- Identify and engage community coalitions, members and organizations that are doing mental health work.

Medium Term Strategies (3-12 months)

- Explore opportunities to make affordable or free Mental Health First Aid training available to BH providers, students and staff in K-12 and institutions of higher education, and government agencies (similar to CPR training).
- Enhance awareness among the general public about the mental health crisis in Nevada and how to get help, such as calling 988.
- Enhance awareness among the general public about the availability of free trainings such as Mental Health First Aid and suicide prevention programs.
- Enhance awareness of the 988 hotline for behavioral health needs and the Division of Child and Family Service's Mobile Crisis Response Team.

Objective 2: Share information about entry-level opportunities in behavioral health by implementing the following strategies.

Short Term Strategies (0-3 months)

- Enhance use of NEPRIS by getting a commitment from BH providers to do NEPRIS talks consistently throughout the year.
- Aid in the dissemination of information regarding High Sierra AHEC's community health worker (CHW) training for high school students.

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Medium Term Strategies (3-12 months)

 Develop a statewide marketing strategy to share information with K-12 students about entry level opportunities in BH.

Objective 3: Increase the number of CHWs and peer recovery support specialists (PRSS) working in BH by implementing the following strategies.

Short Term Strategies (0-3 months)

Support BDR 333 as described in Goal 2.

Medium Term Strategies (3-12 months):

- Develop a toolkit/guide on how to use CHWs and PRSS within organizations to support needs and improve behavioral health services.
- Distribute the toolkit to providers, BH organizations, and educational institutions.

Long Term Strategies (12-24 months)

- Improve retention rates among non-clinically licensed behavioral health professionals by implementing strategies defined in Goal 1.
- Improve retention rates among CHWs and PRSS by offering opportunities to upskill, gain additional degrees, and advance through the BH pipeline.

<u>Goal 4:</u> Reduce barriers to and enhance opportunities for behavioral health students and early-career professionals to obtain work experience and required supervised training in rural Nevada.

Objective 1: Increase the number of supervisees behavioral health supervisors can supervise at one time by implementing the following strategies

Short Term Strategies (0-3 months)

- Identify barriers to obtaining supervision licenses for different types of supervisors.
- Identify stakeholders, BH boards to advocate for policy change regarding increasing the number of supervisees per supervisor.
- Engage with stakeholders and BH professional licensing boards to discuss supervision barriers to workforce development.

Medium Term Strategies (3-12 months)

- Present to Regional Behavioral Health Policy Boards regarding challenges with supervisor capacity, the impact on the workforce, and potential solutions.
- Explore potential policy changes to help remove barriers to increase supervision capacities.

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Long Term Strategies (12-24 months)

- Engage with legislators, other policymakers, and organizations to introduce legislation for consideration regarding supervision limits.
- Support efforts to pass identified legislation by using stakeholder networks.

Objective 2: Broaden the definition of "acceptable" licenses that can supervise different types of behavioral health professionals (i.e., psychology, SW, MFT and CPC) by implementing the following strategies.

Short Term Strategies (0-3 months)

- Explore current barriers to licensure for supervision to identify possible solutions or initial steps.
- Identify stakeholders, BH professional licensing boards to advocate for policy change regarding expansion of acceptable licenses.

Medium Term Strategies (3-12 months)

• Explore potential policy changes to remove barriers to broadening licensure qualifications for supervision.

Long Term Strategies (12-24 months)

- Engage with legislators and organizations to introduce legislation for consideration regarding this issue.
- Support efforts to pass identified legislation by using stakeholder networks.

Objective 3: Create and/or expand BH apprenticeships in rural Nevada by implementing the following strategies.

Short Term Strategies (0-3 months)

- Identify current apprenticeship programs in rural Nevada.
- Identify organizations willing to participate in or expand apprenticeship programs in rural Nevada.
- Engage with stakeholders and organizations to develop new apprenticeship programs.

Medium Term Strategies (3-12 months)

Develop new BH apprenticeship programs in rural Nevada.

Long Term Strategies (12-24 months)

 Seek funding for apprenticeship programs in rural Nevada by supporting the efforts described in Goal 2.

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Acknowledgements

Support for the Nevada Health Care Workforce and Pipeline Development Workgroup is provided by High Sierra AHEC and the Center for Public Health Excellence within the School of Public Health at the University of Nevada Reno (UNR) through funding from the Division of Public and Behavioral Health of Nevada's Department of Health and Human Services.

High Sierra Area Health Education Center (AHEC) is a 501c3 public health non-profit organization, affiliated with the University of Nevada, Reno School of Medicine, dedicated to recruiting, developing, and strengthening the future healthcare workforce of Nevada. It is committed to providing equitable and comprehensive opportunities; engaging in outreach that exposes young people from groups underrepresented in the healthcare workforce to role models and mentors; further inspiring their pursuit and tangibility of a healthcare career. High Sierra AHEC's nationally recognized programs target first-generation, low-income, and rural students in a six-county area, including Carson, Churchill, Douglas, Lyon, Storey, and Washoe Counties.

The Center for Public Health Excellence, UNR School of Public Health works to improve the health of all Nevadans by leading efforts to grow and diversify the public health workforce; facilitating and formalizing partnerships between public health agencies and institutions of higher education; working with public health authorities to improve quality and performance; and raising awareness among policymakers about the importance of public health and key policy challenges.

For More Information

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