



HealthForce Minnesota

Healthcare Workforce Commission

October 4, 2016

HealthForce⁺ Minnesota
Transforming education. Advancing practice.

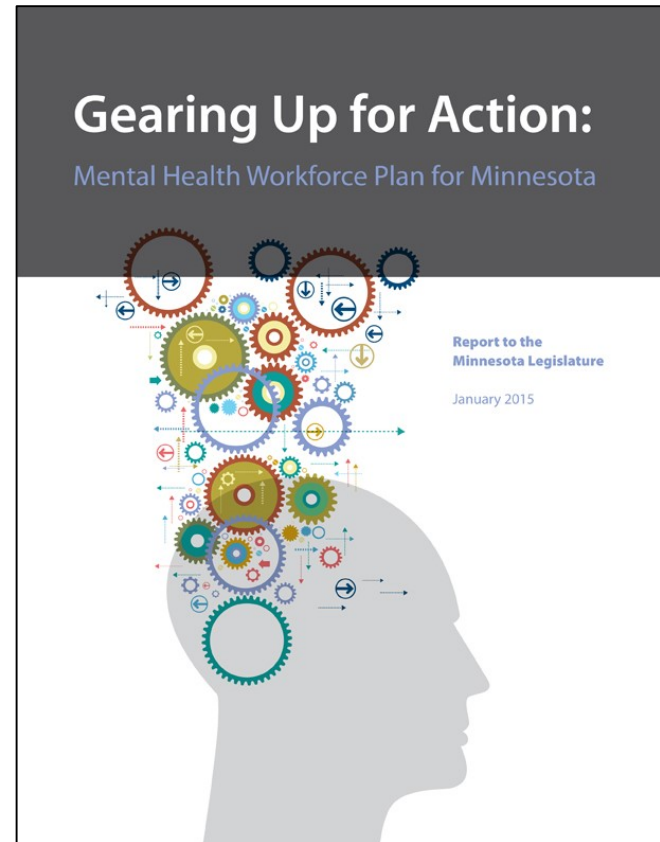
Minnesota State Centers of Excellence

- Created in 2005 as an initiative of the Governor with funding of \$5 million per year
- Initially, four centers were designated through a competitive process
- There are now eight centers in six industries:
 - *Health care*
 - *Manufacturing and engineering*
 - *Information technology*
 - *Agriculture*
 - *Energy*
 - *Transportation*



Mental Health Workforce Development Plan

- Steering Committee (37 members) created and convened monthly
- 20 regional forums held throughout MN
- Summit held May 2014
- 24 consensus-based recommendations
- 10 recommendations completed or in progress



Recommendations

- Recruitment (3)
- Education and Training (15)
- Placement after program completion (2)
- Retention (3)
- Assessment (1)

Recruitment

Recommendation 1: Expose middle and high school students to mental health careers

- a. Mental Health career exploration included in School-Linked Mental Health grants
- b. Scrubs Camps to be offered in 6 middle schools and 9 high schools in 2016
- c. High School Career Fairs - ongoing
- d. **Indians in Psychology Doctoral Education Program Summer Institute**
- e. Clearinghouse of culturally-specific MH professionals



Recruitment

Recommendation 2: Authorize funding to support Project Lead the Way's biomedical science curriculum

Not funded to date

Recommendation 3: Improve collection and dissemination of mental health workforce data at all levels

Significant progress including:

- MDH ORHPC grant to link to SLEDS
- Revisions to workforce surveys and process
- Meetings with licensing boards to improve collection processes



Education and Training

Recommendation 4: Ensure access to and affordability of supervisory hours

a-d. Licensing boards met and expressed interest in continuing to meet and possibly develop standardized requirements

e. Creation of supervision training institute to provide free supervisory training throughout MN

f. Tax incentives for mental health professionals' preceptorships

Recommendation 5: Require third-party payers to reimburse for supervision/internships in the same way that Medical Assistance does so that services provided by trainees under supervision are reimbursed

Legislation introduced but not passed

Education and Training

Recommendation 6: The MN Private College Council, HealthForce MN, and the Office of Rural Health and Primary Care will co-convene a discussion with representatives from MN's higher education institutions to assess the availability of higher-level mental health degree programs in rural areas of the state

Subcommittee met for 6 months to discuss MH program expansion in greater MN. Faculty shortage was identified. Social work online programs are filling some gaps. Clinical sites are difficult to find. Will continue to meet.

Winona State University developing a Psychiatric Nurse Practitioner post-graduate certificate program. Program will be predominantly online with students doing clinicals in their home communities. Expected start date of Summer 2017 with 12 students.



Education and Training

Recommendation 7: Increase by four the number of psychiatric residency and fellowship slots in Minnesota over the next two years

ORHPC administers \$1.5 mil in grants per year to primary care residency programs. Psychiatric residency programs are eligible and are prioritized for funding. In the first year of the program, one psychiatric residency program applied and was funded.

2 additional psychiatric residency slots created in FY 2016.

Recommendation 8: Expand/replicate Diversity Social Work Advancement Program to additional mental health disciplines and practice locations

DSWAP received continued funding.

DHS funded a number of Adult and Children's mental health initiatives to build workforce infrastructure in diverse communities

Education and Training

Recommendation 9: Expand capacity to train Certified Peer Specialists throughout the state with a particular emphasis on recruitment from communities of color

- a. Determine which classes currently offered through MnSCU could lead to certification
- b. Determine what class(es) must be developed and how to integrate key components from Recovery Innovations
- c. Assess readiness of mental health providers to hire peers and what can be done to increase number of peers hired

DHS Report submitted to legislature in Feb. 2016

Education and Training

Recommendation 10: Support efforts to expand and broaden mental health telemedicine, including using the technology in training programs, grants and funding to expand telemedicine capacity throughout the state. Commercial health plans should be required to cover services delivered via tele-health technology.

\$773,000 appropriated to support efforts to expand and broaden telemedicine, including mental health telemedicine



Education and Training

Recommendation 11: Improve and expand cultural competency (awareness) training. Establish cultural competence (awareness) as a core behavioral health education and training requirement for all licensure/certification disciplines.

- a. Integrate evidence-based cultural competence curriculum into all education, training and supervision
- b. Provide resources and incentivize training sites to incorporate cultural competency training and in their curricula
- c. Establish a statewide behavioral health cultural competence taskforce and network of resources
- d. Engage consumers of color and their families in workforce development, training and advocacy

Education and Training

Recommendation 11, cont.

- e. Review nationally developed standards and best practices and use them to develop a training package for provider organizations
- f. Assess all mental health education and training programs in the state as to their cultural competence training to develop benchmarks

Recommendation 12: Develop a faculty fellowship model to engage faculty in newest understanding and treatment of mental illness in both children, youth, adults and older adults

No progress to date.



Education and Training

Recommendation 13: Charge the Dept. of Human Services with establishing criteria and a payment mechanism to incentive mental health settings committed to providing students with a practicum experience that features evidence-based treatment interventions

No progress to date

Recommendation 14: Increase exposure to psychiatric/mental health experiences for nursing and medical school students and increase continuing education offerings for licensed nurses and physicians.

No known progress to date

Recommendation 13: Charge the Dept. of Human Services with establishing criteria and a payment mechanism to incentive mental health settings committed to providing students with a practicum experience that features evidence-based treatment interventions

No progress to date

Education and Training

Recommendation 16: Provide support so that all psychology internships at state institutions are accredited by the APA.

No progress to date

Recommendation 17: MN Dept. of Health will evaluate Medical Education and Research Costs (MERC) funding to identify changes needed to support mental health workforce development and will add LMFT and LPCC

MERC funding increased; LMFT and LPCC not added

Recommendation 18: Promote a team-based healthcare delivery model for mental health treatment

UMN received HRSA grant to improve student readiness to provide integrated interprofessional health care to persons with mental illness and complex medical needs

Placement after Program Completion

Recommendation 19: Add mental health professionals to the eligibility requirements for the MN Health Professionals Loan Forgiveness program and increase funding by \$750K per year; add requirement that 50% of additional funding be made to mental health professionals from diverse ethnic and/or cultural backgrounds

Increase of \$5.262M over biennium.

10 mental health professionals received loan forgiveness in FY16 round.

33 mental health professionals received loan forgiveness in FY17.

Recommendation 20: Continue funding of the Foreign Trained Health Care Professionals grant program

Funding continued



Retention

Recommendation 21: Identify gaps in the educational, certification, or licensing systems that impede career movement from entry-level, paraprofessional positions to terminal degrees and licensure as an independent professional. Identify the special challenges of and barriers to incorporating persons in recovery and persons of diverse cultural background into traditional career ladders. Develop strategies, curricula, certifications to support these pathways.

Two-year psych tech competencies developed and funding available for through PIPELINE initiative for dual training/apprenticeship

Behavioral Health Aide II online program now offered at Minnesota State Community and Technical College

Courses and programs identified

Retention

Recommendation 22: Examine ways technology can be used to streamline paperwork and ensure necessary data capture.

No progress to date

Recommendation 23: Increase reimbursement rates

DHS rate study



Assessment

Recommendation 24: Assess the recommendations made in the mental health workforce state plan by July 2017 to determine progress being made on implementation and evaluate outcomes of the above recommendations.

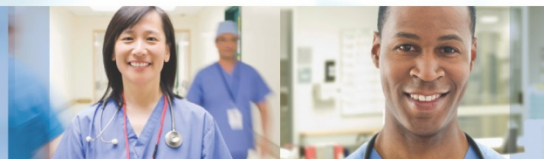
Steering Committee continues to meet

Stakeholders continue to further the recommendations where possible

Progress

1	Pipeline	Green	13	Clinical \$	Red
2	PLTW	Red	14	MH Student Exper.	Yellow
3	Data	Green	15	ACGME/APA	Red
4	Supervision	Yellow	16	APA Internships	Red
5	Supervision \$	Red	17	MERC	Yellow
6	Rural Educ.	Green	18	Team-based care	Yellow
7	Residencies	Yellow	19	Loan Forgiveness	Green
8	DWAP	Green	20	Foreign Trained	Green
9	Peer Training	Green	21	Career Ladders	Green
10	Telemedicine	Green	22	Paperwork	Red
11	Cultural Educ.	Yellow	23	Reimbursement	Yellow
12	Faculty Fellowship	Red	24	Assessment	Green





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