

Transformation Workgroup #7

Workforce Development

April 10, 2006

1:00pm to 4:30pm

Convener: Michael Hoge

Major Topics/Discussion Points:

- The following initiatives in other states were presented/discussed:
 - <http://networkofcare.org>-- a website designed to provide access to individuals seeking information about the mental health system in California. A similar site is being developed for use in CT.
 - Question—Who in CT is organizing/overseeing networkofcare.org?
 - The Greater Bay Area Mental Health Education Workforce Collaborative- its purpose is to provide a linkage between public mh system and the education system, both public and private- www.mhewc.org
 - Mental Health Workforce and Education Exchange—a website launched by the Bay Area Collaborative-- www.mhwee.org outlines workforce resources for career seekers, consumers, educators, employers, students
 - Alaska Behavioral Health Workforce Initiative- a similar state collaborative between the public behavioral health and education sectors. This initiative emphasizes the concept of career ladder—for this to be a viable career for folks, there need to be sequential steps to allow you to keep moving—including ability to get training/education, along with credit/certification
- Discussion of how to develop peer specialist roles within Departments. We need to think of ways to get resources behind initiatives to bring on a new volume of workers in field who are also persons in recovery
 - A question emerged re: the locus of strategic planning for consumer-related initiatives in CT? On April 24th from 11am to 2pm, a group of consumers will be meeting to address the consumer perspective on the transformation process.
 - There is a website under construction to help consumers become more involved in transformation efforts.
- Brief Presentations and Open Discussion of Focus Groups—Each presenter offered two recommendations to group for consideration
- Presentation on literature review of Supervision issues in the workforce
 - Question—Can we make a connection with the Medicaid Rehab Option? We are in the process of converting more contracts to fee-for-service, which may make things more difficult in terms of reimbursement for supervision.

- Discussion about standards and accountability around supervision. Are there ways of streamlining other non-reimbursable processes, such as running more efficient meetings, combining meetings, etc., in order to carve out time for clinical supervision
- There is a survey being conducted by the Co-Occurring work group of all DMHAS-funded programs examining supervision
- Themes emerging around supervision: 1-identification of supervisor competencies; 2-training of supervisors; 3- establishment of standards/quality assurance; 4- cost issue
- Discussion about the term “clinical supervision”, considering other terms such as precepting, mentoring, developmental supervision. What we are talking about is an opportunity for people to reflect and to build competencies around strengths-based supervision - the concept of supervision covers many different types of activities
- Distinction made between leadership skills versus competent program management and supervision.
- Discussion about certification, such as USPRA certification, requirements for reimbursement/rehab option.
- Maria gave update on Review of Connecticut Reports
- Manny gave update on Workforce Initiatives in Other States
- Transformation Updates:
 - Work has moved forward on planning a day-long workforce retreat focused on children, youth, and families. This will occur on May 12th
 - There is a form and procedure in place for consumer/family member stipends for participation in the planning process. Individuals are eligible for stipend if they are not otherwise reimbursed for their time.
 - We have until early June to finalize report to Oversight Committee
 - Idea to have some recommendations that are immediate as well as a recommendation for continued planning and implementation structures to address workforce issues over time.

Barriers/Problems Identified:

- There isn't enough work being done for persons in recovery to have a pathway back to work—is this being addressed in another Workgroup?
- Concern about family member needs not being as addressed as they should be
 - 39 focus groups have been conducted to date—Susan Smith, DCF, has helped to link up with family advocacy organizations

Ideas/Recommendations:

- Explore how current resources, such as Pass Plans, can help persons in recovery to use own resources to gain employment
- It's important that we include a support piece for consumers that go into the workforce

- Look at innovative ways to access reimbursement for including collateral supports

Transformation Activities in Connecticut Discussed in the Meeting:

- DOIT (Department of Information and Technology) has assembled group to look at Enterprise Solution—statewide learning management system that would look at both instructor-led training and also serve as platform for developing and delivering web-based training.
- There are efforts underway to look at existing data to describe what current workforce looks like; i.e., demographics, reasons for leaving workforce, job codes/classification.

Next Meeting Agenda:

- Output from the meeting with representatives from Higher Education
- Reports from focus groups with persons in recovery and any additional focus groups.
- List of needs/recommendations generated from focus groups will be split into two areas: retention/recruitment and education/training.
- Goal of next meeting is to try to come to some general consensus about how to present ideas and what priorities would be
- Discussion criteria for inclusion of recommendations in final recommendations

Next Meetings:

May 1st, 2-4:30pm in Page Hall, Room 212-213

May 22nd, 2-4:30pm in Page Hall, Room 212-213