Workforce Initiatives

April 20, 2018
Outline

• Workforce Overview
• FY18/19 Strategy Review
• Impact of Reform on Workforce
• Providing a Skilled Workforce
• Path forward
Mission

In 2004, the Trust, the Department of Health and Social Services, and the University of Alaska established Alaska’s Behavioral Health Initiative to help ensure a stable, capable, culturally competent workforce to serve Trust beneficiaries, their families and communities.
Engaged Partners

Public Partners
- Department of Health & Social Services
- Division of Behavioral Health
- Division of Senior & Disabilities Services
- Division of Public Health
- Department of Labor & Workforce Development
- Department of Education & Early Development
- University of Alaska
- UAA College of Health
- AK Center for Rural Health & Health Workforce
- Area Health Education Center
- Alaska Workforce Investment Board

* Other Industry Leaders

Advisory Boards
- Alaska Mental Health Board
- Alaska Board on Alcoholism & Drug Abuse
- Governor’s Council on Disabilities & Special Education
- Alaska Commission on Aging

Private Partners
- Alaska State Hospital & Nursing Home Association
- Alaska Association on Developmental Disabilities
- AK Commission for Behavioral Health Certification
- Regional Alcohol & Drug Abuse Training Program
- Alaska Native Tribal Health Consortium
- Alaska Behavioral Health Association
- Alaska Native Health Board
- Alaska Brain Injury Network
- Primary Care Association

Private Partners
Advisory Boards
the Trust
Public Partners
Advisory Boards
Progress on Workforce is Essential to Achieving a Healthy System of Care

Systems Changes

• *Coordinated, concerted action* to ensure an integrated, comprehensive mental health program

• Innovative measures to anticipate, address, and sustain the program’s workforce needs

• Ongoing evaluation and monitoring to ensure beneficiary access to a quality workforce
Trust workforce capacity

Medicaid Reform & Redesign

Criminal Justice Reform & Reinvestment

BEE

Housing & LTSS

SAPT

Disability Justice

Workforce

Who: Data, Evaluation and Planning Officers

Responsible for: Ensuring data is used in planning and monitoring impact of efforts

Policy, Systems Change, Program Management & Partnerships

Who: Program Officer

Responsible for: Oversight & coordination of Trust workforce initiatives and policy
System Initiatives & Changes

- Medicaid Expansion
  - Increased enrollment and demand for services: 41,278 new enrollees to date
  - Transition from grant to Medicaid funds
  - New and expanded services-OPIOIDS
  - API
  - Increased demand for qualified addiction providers
  - Call for evidence-based practice fidelity
  - Rigorous assessment and evaluation
  - 1115 BH Waiver/Administrative Service Organization

- Behavioral Health Access Initiative
  - Demand for new treatment practices and models
  - Creation of pre-trial diversion system
  - Expansion of re-entry supports
  - Alaska Justice Information Center

- Criminal Justice Reform & Reinvestment
  - Person-directed care
  - Mandated trainings through Conflict Free Case Management and 1915 c/k
  - Assisted Living Home Acuity Rate project
  - Transition from grant to Medicaid funds
  - New Federal Requirements

- Home & Community Based Services Reform
  - Transitions to paying for value not volume
  - Removal of grantee requirement
  - Primary Care Case Management & Health Homes
  - Primary and Behavioral Health Care Integration
  - Coordinated Care Demonstration Project

- Care Improvement Initiatives
  - Emergency Care Initiative

- Data Analytics & Information Technology
  - Sharing of clinical data to improve care
  - Use of population health data analytics
  - New data systems
Ongoing Workforce Needs

- Medicaid Expansion
  - Expected to generate $1.1B in federal revenue and lead to 4,000 new jobs. Ability to recruit and retain a qualified workforce will be essential.
  - Requires inter-disciplinary workforce competencies as new services areas and team-based approaches are developed and care is expanded in addictions, primary care, and other settings.

- Behavioral Health Access Initiative
  - Requires a paradigm shift among current workers, as well as development of a new workforce with competency in behavioral health, team-based care, and use of data to reduce incarceration and recidivism. Forensic capacity needed.

- Criminal Justice Reform & Reinvestment
  - Requires a workforce capable of delivering quality person-centered services and supports in the community.

- Care Improvement Initiatives
  - Requires new skills and team-based approaches to integrate behavioral health services into primary care and emergency services and leverage data to improve population health and reduce cost of care.

- Home & Community Based Services Reform

- Data Analytics & Information Technology
  - Requires new skills to implement information technology, integrate into workflows, and leverage data to improve quality of care at all levels.
<table>
<thead>
<tr>
<th>Strategy</th>
<th>Description</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADRD Workforce (HLTSS)</td>
<td>Resources to developing the capacity, competencies and workforce capabilities for serving beneficiaries with Alzheimer’s disease and related dementia through targeted trainings for assisted living homes, skilled nursing homes and other supported housing providers.</td>
<td>50,000</td>
</tr>
<tr>
<td>Housing/Assisted Living Targeted Capacity Dev. (HLTSS)</td>
<td>Training to all supported housing providers to support the goals of maintaining housing and preventing homelessness for Trust beneficiaries in the community by increasing capacity of providers to house individuals with intense behavioral health needs.</td>
<td>$100,000</td>
</tr>
<tr>
<td>Supported Employment Provider Training (BEE)</td>
<td>Training for service organizations designed to build workforce skills to provide employment services for Trust beneficiaries.</td>
<td>65,000</td>
</tr>
<tr>
<td>Peer Support Workforce (BEE)</td>
<td>Peer support workforce initiative capacity building</td>
<td>55,000</td>
</tr>
<tr>
<td>Job Center liaison in correctional facility (BEE)</td>
<td>The Recidivism Reduction Coordinator (aka Job Center Liaison) serves as a bridge between the Departments of Labor and Workforce Development (DOLWD) and Corrections (DOC) to reduce barriers to employment for justice involved beneficiaries.</td>
<td>125,000</td>
</tr>
<tr>
<td>Self-sufficiency training (BEE)</td>
<td>Financial training for beneficiaries who lack economic stability and face financial obstacles related to poverty, low-income and marginalization.</td>
<td>50,000</td>
</tr>
<tr>
<td>Dept. of Corrections Training (DJ)</td>
<td>Training for DOC staff on issues related to Trust beneficiaries</td>
<td>25,000</td>
</tr>
<tr>
<td>Therapeutic court staff training (DJ)</td>
<td>Statewide training for therapeutic court teams on the core principles and elements of therapeutic courts and the disorders experience by Trust beneficiaries and associated treatments.</td>
<td>15,000</td>
</tr>
<tr>
<td>Specialized skills and service training on serving justice involved beneficiaries (DJ)</td>
<td>Training for professionals working with justice involved beneficiaries to enhance competencies and further disability justice initiatives and strategies.</td>
<td>72,500</td>
</tr>
<tr>
<td>Emergency Response- Crisis Intervention training (DJ)</td>
<td>Enhanced training for police and other first responders to engage and respond appropriately to beneficiaries in mental health crisis.</td>
<td>75,000</td>
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<tr>
<td>Total</td>
<td></td>
<td>$632,500</td>
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</tbody>
</table>
For decades, health care has usually generated the largest number of new jobs in Anchorage, including 2017. Some of the 800 jobs the industry added last year were due to Medicaid expansion. DOLWD Jan. 2018

- Advisory boards, stakeholders and associations continue to prioritize workforce
- Continued leadership is needed to anticipate and move the workforce strategies to support reform
- College of Health is restructuring its 15 academic and research units
- AK Primary Care Association & Regional Alcohol & Drug Abuse Training Program implemented registered apprenticeships, eg. Community Health Workers, Certified Billing & Coding Specialists; BH Technicians
- System is moving toward paying for outcomes, eg. graduated payment based on performance
## Existing Workforce Strategies

<table>
<thead>
<tr>
<th>Infrastructure</th>
<th>Approved FY18</th>
<th>Leveraged FY18</th>
<th>Approved FY19</th>
<th>Leveraged FY19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinated Leadership</td>
<td>$146.1</td>
<td>$30.0</td>
<td>$146.0 (will not be expended)</td>
<td>0</td>
</tr>
<tr>
<td>Alaska Training Cooperative</td>
<td>$984.0</td>
<td>$438.5</td>
<td>$984.0</td>
<td>$438.5</td>
</tr>
<tr>
<td>SHARP I Loan Repayment &amp; Incentive Program</td>
<td>$200.0</td>
<td>$1,000.0</td>
<td>$200.0</td>
<td>$1,000.0</td>
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<tr>
<td>Alaska Psychology Internship Consortium</td>
<td>$59.0</td>
<td>$517.2</td>
<td>$59.0</td>
<td>$612.0</td>
</tr>
<tr>
<td>Area Health Education Centers (Grow Your Own)</td>
<td>$55.0</td>
<td>$150.0</td>
<td>$55.0</td>
<td>$150.0</td>
</tr>
<tr>
<td>Workforce Data Monitoring</td>
<td>$75.0</td>
<td></td>
<td>$75.0</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,523.1</strong></td>
<td><strong>$2,135.7</strong></td>
<td><strong>$1,373.0</strong></td>
<td><strong>$2,200.5</strong></td>
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</table>
## FY18/19 Strategies

<table>
<thead>
<tr>
<th>Engage and Prepare Alaska’s Youth for Health Careers</th>
<th>Training, Competencies &amp; Professional Development</th>
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<tbody>
<tr>
<td>• 124 youth have participated in the AHEC behavioral health camps since 2015</td>
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<tr>
<td>• 80% reported increased interest in behavioral health careers</td>
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<tr>
<td>• 97% reported increased knowledge in behavioral health</td>
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<td>• 100% of the participants certified in MHFA</td>
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<tr>
<td>• 35 past participants (ages 18+) have been included in the AHEC long-term tracking, of these: 26% enrolled in higher education and 67% of those enrolled in higher education are studying behavioral health occupations</td>
<td></td>
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<tr>
<td>• AKTC continues to address reform competency mandates</td>
<td></td>
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<tr>
<td>• Implement competencies and trainings for Medicaid reform and criminal justice reform.</td>
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<tr>
<td>• Pursue additional evidence-based trainings, such as moral reconation therapy, cognitive behavioral therapy, and SBIRT.</td>
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<tr>
<td>• Pursue partnerships with DHSS to expand access to trainings on Medicaid.</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Loan Repayment &amp; Incentives</th>
<th>In-State Doctoral Internships &amp; Clinical Placements</th>
</tr>
</thead>
<tbody>
<tr>
<td>• All practitioners must accept Medicaid, Medicare, federal health beneficiaries and the uninsured.</td>
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<tr>
<td>• Since inception, 254 participants = BH – 83 (32%); Dental – 37 (15%); Medical – 134 (53%)</td>
<td></td>
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<tr>
<td>• 7 regions served including frontier, rural, suburban &amp; urban sites w/ an additional 11 statewide providers</td>
<td></td>
</tr>
<tr>
<td>• Redesign will allow employers &amp; contributors to direct funds toward specific positions and take advantage of tax exempt status allowed by ACA.</td>
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<tr>
<td>• Since 2010, AK-PIC Interns filled 44 behavioral health positions in Alaska</td>
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<tr>
<td>• A total of 40 UAA-UAF doctoral students have applied for internship positions and 26 have filled AK-PIC slots</td>
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<tr>
<td>• 45 of the remaining AK-PIC positions have been filled by out of state applicants including 3 positions returning home to Alaska after studying outside</td>
<td></td>
</tr>
<tr>
<td>• Since 2010, 65% of the UAA/UAF psychology doctoral interns completed their in-state clinical placement training</td>
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The Trust’s investment has resulted in core foundation capacity meeting needs of reform.
“AKTC provides trainings on a variety of relevant topics. They are well organized, professional and meaningful in content. AKTC staff and the trainings they offer are a great asset to the field of Human Services. We have sent many care coordinator staff to AKTC trainings. Well educated care coordinators improve the quality of life for people with disabilities.” Rebecca Marinelli, Care Coordination Resource of Alaska

“We just know that a well-educated workforce is going to be one that promotes our society and builds our community so if we can grow our community by having them get education here and then become workers here and build businesses, operate childcare programs then we have a positive effective spiral for a wonderful community to live in and raise our families.” Patricia Merritt, Fairbanks Chamber Luncheon, Early Childhood Education, 2018

“Growing our own healthcare workforce is essential to combating existing recruitment and retention related issues, especially in our most rural and underserved communities. Our efforts must start young, continue to progress in both intensity and preparedness for post-secondary training, and provide incentives and opportunities to return home and remain lifelong Alaskans serving those very same communities as healthcare providers.” Gloria Burnett, Alaska AHEC

“The behavioral health service delivery system in Alaska is the subject of extraordinary transformation. The Trust, DHSS, DBH recognized the key importance of training and technical support services in achieving these goals and have already started focused efforts to help build capacity.” Tom Chard, ABHA

A competent workforce serves as the backbone to reform. Workforce demands will increase, not decrease, as we work to transform the system of care.
“Alaska’s system of service delivery is rapidly evolving and the challenges facing providers are at times overwhelming. It is encouraging to know that when providers ask “how are we going to do that?”, the Alaska Training Cooperative asks, “how can we help?”

Doug White, President, Alaska Association for Personal Care Supports, March 2018
# Alaska Training Cooperative

<table>
<thead>
<tr>
<th>Stats</th>
<th>FY2017</th>
<th>FY2018 (July-Feb)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unduplicated training participants</td>
<td>3,753</td>
<td>2,969</td>
</tr>
<tr>
<td>Provider Agencies</td>
<td>507</td>
<td>378</td>
</tr>
<tr>
<td>Communities</td>
<td>88</td>
<td>69</td>
</tr>
<tr>
<td>Training Events</td>
<td>256</td>
<td>159</td>
</tr>
<tr>
<td>Technical Assistance</td>
<td>88</td>
<td>31</td>
</tr>
<tr>
<td>Learning Management System users</td>
<td>5,026</td>
<td></td>
</tr>
</tbody>
</table>
Direct Support Professionals
DD Systems Collaborative

• DD Vision – Outreach Meetings / Full Lives
• Credentialing / Certification
  • Career ladders for DSPs to expand their knowledge, skills and values
  • Increased training requirements & technical assistance
  • “Ready to Work” Skilled DSPs
• Code of Ethics - National Alliance for Direct Support Professionals (NADSP)
  • Professionalization of the occupation
Peer Support Workforce

• Peer Workforce Certification – Jim McLaughlin
  • Levels of Certification – survey other states
  • Minimum qualifications (age; lived experience; engaged in recovery; education)

• Collaboration between Partners (Peers, Providers & State Staff) – Eliza Ellers
  • Models that work – Natural Path Peer Support & Wellness Curriculum

• Advocacy and Education – Susan Musante
  • Based on target audience (payers; DOC; Veterans...)
  • Barriers: Background check; supervision; billing)
Advancing Alaska’s Health Workforce Data Project

• Goal: Make timely health workforce data and analysis readily available to interested Alaskans

• Data Sources
  • Emsi – Employer postings on job search engines
  • DOLWD – Quarterly wage records & PFD data
  • Professional Licensure Data

• Anticipated Products:
  • Regular mini-reports for broad audience
  • On-line portal for users interested in “deeper dives”
  • “New Hires” test page – URL with SOC
Alaska Health Workforce Coalition

• Launched to develop a coordinated, cohesive, and effective approach to addressing workforce in Alaska

• Public-private partnership
  — Government, health industry, education, hospital association, behavioral health and clinics
  — Employers and industry drive state workforce development efforts and improve system efficiency through collaboration across sectors

• National Academy for State Health Policy
  — Research and case studies
  — Highlight cross-agency approaches
Providing a Skilled Workforce: Alaska’s Core Foundation

Trust supported system elements:
• Training, Competencies, Professional Development & Internships
• Enhanced competency for Reforms
• Support for Service
• Engaging Youth
• Healthcare workforce data
# 2017-2021 Action Agenda

<table>
<thead>
<tr>
<th>Occupational Priorities</th>
<th>System Change &amp; Capacity Building Initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Direct Support Professionals</td>
<td>• Engage &amp; Prepare Alaska’s Youth for Health Careers</td>
</tr>
<tr>
<td>• Behavioral Health Clinicians</td>
<td>• Training, Competencies &amp; Professional Development</td>
</tr>
<tr>
<td>• Peer Support Specialists</td>
<td>• Health Workforce Policies &amp; Infrastructure</td>
</tr>
<tr>
<td>• Nurses</td>
<td>• Health Workforce Recruitment &amp; Retention</td>
</tr>
<tr>
<td>• Primary Care Practitioners/Providers</td>
<td>• Health Workforce Data</td>
</tr>
<tr>
<td>• Physical Therapists</td>
<td></td>
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<tr>
<td>• Health Care Administrators</td>
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Path Forward

• Trust Program Officer – Workforce and expanded behavioral health capacity
• Fully harness the Trust’s investments in workforce to support Medicaid & Criminal Justice Reform
• Leverage reform efforts and the Comprehensive Mental Health Program Plan to realize results
• Enhanced partnership with additional UAA capacity and focus on behavioral health workforce needs
• Leverage partnerships of the Alaska Health Workforce Coalition to implement the 2017-2021 Action Agenda & Trust strategies
• Trust 2020-2021 Budget planning

Thank you!