



IDAHO DEPARTMENT OF
HEALTH & WELFARE

IDAHO BEHAVIORAL HEALTH WORKFORCE PLAN 2022–2024



July 1, 2022

This Behavioral Health Workforce Plan was developed by the Idaho Department of Health and Welfare in accordance with the [Idaho Behavioral Health Council's Strategic Action Plan](#). To learn more about the Idaho Behavioral Health Council and their work, please visit behavioralhealthcouncil.idaho.gov.



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Idaho Code § 39-3123 designates the Idaho Department of Health and Welfare (IDHW) as the State of Idaho Behavioral Health Authority (BHA). Under the BHA designation, the IDHW's Division of Behavioral Health (DBH) is responsible for oversight of the behavioral health system in the State of Idaho. The division is committed to fulfilling this role in a collaborative manner that recognizes behavioral health as a chronic health condition affecting all segments of our society. The mission of DBH is to lead a collaborative behavioral health care system in Idaho with a vision for people to receive the behavioral health services they need, when they need them.

Health Professional Shortage Areas (HPSAs) are federal designations that indicate geographic areas or populations with a deficit in primary care, dental, and mental health professionals. Currently, 100 percent of Idaho has a mental health HPSA designation. Visit the Idaho Department of Health and Welfare's information on [Mental Health PSAs](#) to view a map of geographic and population HPSAs.

The Substance Abuse and Mental Health Services Administration (SAMHSA) defines "behavioral health care" as the promotion of mental health, resilience and wellbeing; the treatment of mental and substance use disorders; and the support of those who experience and/or are in recovery from these conditions, along with their families and communities. Behavioral health conditions and the behavioral health field have historically been financed, authorized, structured, researched, and regulated differently than other health conditions. As we learn more about the physical impacts of traumatic experiences and behavioral health conditions, and the behavioral impacts of physical health conditions, we will need to view behavioral health as we do any other health issue.

For the purposes of this plan, the behavioral health workforce includes the professions listed below:

- Psychiatrists
- Psychologists
- Social Workers
- Advanced Practice Psychiatric Nurses
- Marriage and Family Therapists
- Certified Prevention Specialists
- Family Support Partners
- Paraprofessionals in psychiatric rehabilitation and addiction recovery fields (e.g., case managers, homeless outreach specialists, or parent aides)
- Addiction Counselors
- Mental Health/Professional Counselors
- Psychiatric Rehabilitation Specialists
- Psychiatric Aides and Technicians
- Peer Support Specialists
- Recovery Coaches
- Nurses

As indicated in the previous version of the Behavioral Health Workforce Plan, there is a continued need for an overarching, long-term strategy to address the behavioral health workforce. The need for an effective workforce is universal across every segment of our economy. In today's post-COVID 19 world, competition for workers is at an all-time high, and many broader community-level interventions could have a tremendous impact on the behavioral health workforce. The establishment of an entity dedicated to developing and retaining a behavioral health workforce could ensure continuity and accountability. This body could serve not only as the place to coordinate this work, but could also collaborate with an academic institution to continue analysis and establish longer-term tactics.

This plan presents goals, performance measures, and tasks for building Idaho's behavioral health workforce. The graphic shown below is a visual representation of the goal categories.



GOAL 1

GOAL 1— PROMOTION

Increase awareness and recruitment of individuals to behavioral health careers

Promotional activities for behavioral health careers are intended to raise awareness of the field in Idaho’s current and future workforce. Programs targeting youth are needed to build familiarity, understanding and excitement for a strong behavioral health workforce in future years. For heightened impact, these activities can be targeted towards special populations, such as at-risk youth, tribal populations and

rural populations. Reducing existing stigma regarding behavioral health consumers and behavioral health professionals while promoting behavioral healthcare as a natural and fundamental part of overall healthcare can have significant impact to the future workforce.



OBJECTIVE 1.1

Establish partnerships to improve recruitment and awareness of opportunities in behavioral health careers through targeted media and public engagement campaigns.

Objective Summary

Fostering excitement about behavioral health careers is best accomplished through collaborations across systems. Government agencies, universities, private companies, and other stakeholders can achieve optimized results by partnering to achieve this objective. This also can include Area Health Education Centers (AHEC). Learn more:

- [Southwest Idaho AHEC](#)
- [North Idaho AHEC](#)
- [Southeast Idaho AHEC](#)

GOAL 1— PROMOTION

Increase awareness and recruitment of individuals to behavioral health careers

Performance Measures

We will know we have been successful in our work towards Objective 4.2 when:

- By January 2023, a partnership with Idaho's AHECs is formed.
- By December 2023, three targeted behavioral health educational events occur.
- By June 2023, a partnership with a private marketing firm is established.
- By December 2023, specific materials are created and distributed, aimed at reduction of stigma, and promotion of loan repayment programs.

Tasks

1.1.1 Establish a memorandum of understanding (MOU) with AHECs.

1.1.2 Support the development of AHEC events targeting behavioral health careers.

1.1.3 Establish a contract with a marketing firm.

1.1.4 Design and publish materials.

GOAL 2

GOAL 2 — EDUCATION

Increase training and education opportunities for behavioral health professionals

Effective behavioral health systems of care utilize a wide range of professionals to optimize effectiveness and efficiency. From psychiatrists to peer-level providers, every member of the service team plays a vital role in supporting their clients. High-quality education and training are imperative to the success of behavioral health systems of care.



OBJECTIVE 2.1

Establish and operate a Recovery Coach Academy.

Objective Summary

The Idaho Department of Health and Welfare will contract with a community partner to establish and operate the Recovery Coach Academy. Recovery coaches serve as a personal guide and mentor for people seeking recovery or who are in recovery from substance use disorders. They also help to remove barriers and obstacles in order to link the recovering person to the recovery community. The Idaho Department of Health and Welfare supports using recovery coaching as an integral and valuable part of the recovery process. Recovery coaching services are a valuable resource to a behavioral health system of care because they provide peer advocacy and support for individuals navigating recovery, including reintegration into their communities. While an individual is learning new skills in treatment or therapy, a recovery coach can assist by reinforcing those skills in real world situations and guiding the individual to make positive choices to maintain their sobriety and independence.

Performance Measures

We will know we have been successful in our work towards Objective 2.1 when:

- Year One
 - By August 2023, at least 100 people complete Recovery Coach training.
 - By August 2023, at least 100 people complete Ethics of Recovery Coach training.
 - By August 2023, at least 50 people complete Recovery Coach Supervisor training.
- Year Two
 - By August 2024, at least 75 recovery coaches from year one become certified.
 - By August 2024, an additional 100 people complete Recovery Coach training.
 - By August 2024, an additional 100 people complete Ethics for Recovery Coach training.
 - By August 2024, an additional 50 people complete Recovery Coach Supervisor training.

A circular logo with a white background and a green border. Inside the circle, the word "GOAL" is written in green at the top, and the number "2" is written in green in the center.

GOAL 2

GOAL 2 — EDUCATION

Increase training and education opportunities for behavioral health professionals

Tasks

2.1.1 Establish a contract with a community partner to operate the Recovery Coach Academy.

2.1.2 Conduct contract monitoring and provide technical assistance to ensure successful delivery of training events.

OBJECTIVE 2.2

Establish funding for targeted scholarships through collaboration with the Idaho Workforce Council (IdahoLaunch.com) for Peer Support Specialists, Family Support Partners, and Certified Prevention Specialists.

Objective Summary

A partnership with the Idaho Workforce Council's online career and training research hub — idaholaunch.com — will provide the opportunity for aspiring behavioral health professionals to apply for funding to help support their career goals.

Performance Measures

We will know we have been successful in our work towards Objective 2.2 when:

- By July 2023, 2 Peer Support Specialist training entities are enrolled with Idaholaunch.com.
- By July 2023, 2 Family Support Partner training entities are enrolled with Idaho.launch.com.
- By July 2023, 2 Prevention Specialist training entities are enrolled with Idaho.launch.com.

Tasks

2.2.1 Promote opportunities to participate in Idaholaunch.com to existing training entities.

2.2.2 Collaborate with Idaholaunch.com to support the enrollment of training entities.

2.2.3 Establish a system to collect feedback and participant input from both trainers and scholarship recipients.

GOAL 3

GOAL 3 — CREDENTIALING

Improve efficiency and effectiveness of credentialing processes across behavioral health careers

Credentialing in the behavioral health field serves an important function of public protection. Finding the right mixture of thorough oversight and reasonable access to employment opportunities for behavioral health professionals is a constant, evolving challenge. For this version of the plan, the focus will be on individual credentialing, although additional, longer-term projects regarding facility credentials still remain.



OBJECTIVE 3.1

Pursue opportunities to improve Substance Use Disorder (SUD) credentialing processes.

Objective Summary

Substance Use Disorder credentialing is an area with an opportunity for improvement based on the expansion of national credentialing options and the continued need for consistency in workforce oversight. This is a complex issue that will require collaboration across behavioral health systems and disciplines along with potential legislative activity.

Performance Measures

We will know we have been successful in our work towards Objective 3.1 when:

- By June 2023, Recovery Coach Supervisor training requirements are analyzed and amended to improve efficiency and effectiveness.
- By December 2022, a multi-agency SUD Credentialing task force is established to identify a two year plan for the future direction of all SUD Credentialing in Idaho.

Tasks

3.1.1 Analyze current Recovery Coach Supervisor training requirements.

3.1.2 Amend current Recovery Coach Supervisor training requirements.

3.1.3 Convene stakeholder meeting to identify potential members of the SUD Credentialing task force.

3.1.4 Initiate and conduct work group activities.

GOAL 4

GOAL 4 — EMPLOYMENT

Increase behavioral health employment opportunities and system improvements

Supporting the individuals that make up Idaho's behavioral health workforce as they begin their careers is fundamental to building a comprehensive system of care. To achieve this, a variety of investment strategies can be effective. Establishing competitive provider reimbursement rates is fundamental to ensuring that Idaho attracts high quality behavioral health

Service providers. Building infrastructure that allows for behavioral health services to be provided virtually can also keep Idaho engaged with contemporary practices. Rewarding professionals who are willing to commit to working in the behavioral health field by facilitating their participation in loan repayment programs can also heighten interest and participation.



OBJECTIVE 4.1

Conduct comprehensive reviews of provider rates within the Medicaid funded behavioral health network

Objective Summary

The Division of Medicaid conducts provider rate reviews to evaluate the need for provider rate increases. Since behavioral health providers are reimbursed directly by the Idaho Behavioral Health Plan contractor, the division coordinates with the contractor to effectuate any rate adjustments as part of the behavioral health provider network. Provider rate adjustments are subject to legislative approval per Idaho Statute 56-265.

Performance Measures

We will know we have succeeded in our work towards Objective 4.2 when:

- The provider rates for all behavioral health providers are reviewed as part of the yearly rate review process Medicaid uses to determine rate adequacy and productivity.

Tasks

4.1.1 Review provider rates for all behavioral health providers as part of the rate review process. Adjustments made to rates are contractually obligated to be reflected in the Idaho Behavioral Health Plan contract.

OBJECTIVE 4.2**Establish privacy spaces for telehealth services in libraries across Idaho.****Objective Summary**

The Idaho Department of Health and Welfare will collaborate with the Idaho Commission for Libraries to provide at least 25 rural Idaho libraries with privacy rooms or spaces to be utilized for telehealth services. Funding has been identified through the American Rescue Plan Act of 2021. Local library patrons will be able to reserve the space using an online library system, or by booking directly with the libraries themselves. Patrons can utilize their own phone or tablet to have access to their providers, or they may utilize a library's equipment to sign into their telehealth appointments. The Division of Behavioral Health will work with each library to provide HIPAA and de-escalation training for library staff to ensure confidentiality and safety for all patrons.

Performance Measures

We will know we have succeeded in our work towards Objective 4.2 when:

- There are 25 telehealth privacy booths installed and available for use across Idaho.

Tasks

4.2.1 Collaborate with Idaho Commission for Libraries to publicize opportunities.

4.2.2 Establish a procurement process, including an application process, eligibility criteria, and conditions for participation.

4.2.3 Implement program.

- Facilities: select sites, purchase equipment, deliver, and setup.
- Personnel: training in behavioral healthcare basics, including HIPPA and appointment system.

OBJECTIVE 4.3**Increase opportunities for participation in loan repayment programs.****Objective Summary**

Many people enter behavioral health employment with substantial student loan debt. Loan repayment programs are an effective instrument to support the behavioral health workforce. The U.S. Health Resources & Services Administration operates multiple loan repayment programs intended to support the healthcare workforce, including mental health and substance use disorder providers. Other funding opportunities, including opioid settlement funds, may also be used.

National Health Service Corps

The National Health Service Corps (NHSC) is a federal program under the U.S. Department of Health and Human Services that strives to ensure healthcare access for all individuals, prevent disease and illness, and care for at-risk and under served populations. To reward individuals and sites who join the program in improving access to primary care in rural and under served areas of the country, the NHSC offers loan repayment and scholarship incentives; assistance in site recruitment and retention; and education, training, and networking opportunities.

The Idaho Department of Health and Welfare, Division of Public Health's Primary Care Office (PCO) offers technical assistance to sites applying to become or to continue being an NHSC site in Idaho. Go to <https://healthandwelfare.idaho.gov/providers/rural-health-and-underserved-areas/recruitment-and-retention> for additional information.

To combat the nation's opioid crisis, HRSA recently launched the NHSC Substance Use Disorder Workforce Loan Repayment Program (SUD Workforce LRP). The program supports the recruitment and retention of health professionals in underserved areas to expand access to SUD treatment and prevent overdose deaths. Additional information is available at <https://nhsc.hrsa.gov/loan-repayment/nhsc-sud-workforce-loan-repayment-program>.

GOAL 4

GOAL 4 — EMPLOYMENT

Increase behavioral health employment opportunities and system improvements

State Loan Repayment Program

The State Loan Repayment Program is a multi-discipline, state-based loan repayment program for nurses, clinicians, and physicians working in federally-designated Health Professional Shortage Areas. Loan repayment is provided through a federal grant. Participating sites must implement a sliding fee scale for low-income and uninsured patients and accept Medicare and Medicaid. Recipients may receive loan repayment awards up to \$25,000 per year. A service obligation is required and full-time practitioners are required to fulfill a two-year service obligation. Sites must submit annual reports during the funding period. See <https://healthandwelfare.idaho.gov/providers/rural-health-and-underserved-areas/loan-repayment-and-grants>.

Public Service Loan Forgiveness Program

If you are employed by a U.S. federal, state, tribal government, or not-for-profit organization, you might be eligible for the Public Service Loan Forgiveness Program (PSLF). On October 6, 2021, the U.S. Department of Education announced a temporary period during which borrowers may receive credit for payments that previously did not qualify for PSLF or TEPSLF. Learn more about this limited PSLF waiver:

- <https://studentaid.gov/announcements-events/pslf-limited-waiver>
- <https://studentaid.gov/manage-loans/forgiveness-cancellation/public-service>

Idaho Opioid Treatment Loan Repayment Program

Idaho has an opportunity to utilize opioid settlement funds to support the behavioral health workforce. It could be particularly impactful to establish a program to specifically support behavioral health professionals who are providing substance use disorder treatment, especially at the residential level of care, as those professionals are currently ineligible for most of the loan repayment programs previously mentioned. This program is dependent on the Idaho Behavioral Health Council's recommendations regarding the state directed opioid fund.

Performance Measures

We will know we have been successful in our work towards Objective 4.3 when the measures for all four programs have been met.

National Health Service Corps

- By 2024, the number of National Health Service Corps Mental Health Clinic sites has increased by 7.
- By 2024, the number of National Health Service Corps Substance Use Disorder sites has increased by 7.

State Loan Repayment Program

- By 2024, the number of state Loan Repayment Program participants has increased by 14.



GOAL 4 — EMPLOYMENT

Increase behavioral health employment opportunities and system improvements

Public Service Loan Forgiveness Program

- By September 2022, the Idaho Department of Health and Welfare has produced 3 communications promoting the temporary PSLF waiver.

Idaho Opioid Treatment Loan Repayment Program

- By 2024, an Idaho Opioid Treatment Loan Repayment Program is established and operated by the Idaho Department of Health & Welfare.
- By 2024, the Idaho Opioid Treatment Loan Repayment Program has at least 20 participants.

Tasks

National Health Service Corps

4.3.1 Provide outreach and education about NHSC site certification opportunities and benefits for both mental health and substance use disorder providers.

4.3.2 Provide technical assistance to providers applying to HRSA to become NHSC approved sites for both mental health and substance use disorder programs.

State Loan Repayment Program

4.3.3 Provide outreach and education about State Loan Repayment Program opportunities and benefits.

Public Service Loan Forgiveness Program

4.3.4 Create 3 communications that promote the temporary PSLF waiver.

Idaho Opioid Treatment Loan Repayment Program

4.3.5 Collaborate with the Idaho Behavioral Health Council and Idaho's 3 branches of government to establish the Idaho Opioid Treatment Loan Repayment Program.

4.3.6 Promote and operate the Idaho Opioid Treatment Loan Repayment Program.

GOAL 5

GOAL 5 — RETENTION

Retaining the workforce through quality and effectiveness

The best way to build an effective and skilled workforce is to retain the existing workforce. When we lose experienced workers there is a drain of knowledge and expertise. Ongoing training, professional development, and supervision are vital to the retention of our existing behavioral health workforce. This training can build competencies, comradery, and motivation, which all can increase individuals' desire to stay in a profession.



OBJECTIVE 5.1

Establish and operate a Behavioral Health Center of Excellence

Objective Summary

The Idaho Department of Health and Welfare’s Division of Behavioral Health will establish and operate a Behavioral Health Center of Excellence (CoE) to support and expand best practices throughout Idaho’s behavioral healthcare system. This will be accomplished through training, coaching, mentoring and fidelity monitoring. The CoE’s partnership with Idaho’s behavioral healthcare providers will transform the state’s system of care to one that is data driven, responsive, and experiences improved outcomes.

The CoE will work directly with the Idaho Behavioral Health Plan’s (IBHP) contractor and network providers, as well as other elements of the behavioral health system in Idaho, to implement, promote, and expand the use of effective, evidence-based practices throughout Idaho.

The primary functions of the CoE are to:

- Provide training and technical assistance.
- Help programs achieve high fidelity to identified models and improve quality.
- Measure and report statewide outcomes on a quarterly and annual basis.
- Implement standards, operating manuals, administrative codes, etc.
- Educate and advise state and local policy makers.

GOAL 5

GOAL 5 — RETENTION

Retaining the workforce through quality and effectiveness

The Idaho Behavioral Health CoE will initially support 6 programs and will have the ability to expand or contract as needed:

1. Assertive Community Treatment (ACT)/Mental Health Court (MHC)
2. Parenting with Love and Limits (PLL)
3. Wraparound Intensive Services (WInS)
4. Early Severe Mental Illness (ESMI)
5. Crisis System (Mobile Crisis)
6. Child and Adolescent Needs and Strengths (CANS)

Performance Measures

We will know we have been successful in our work towards objective 5.1 when:

- 6 CoE programs are established and operating according to the tasks listed below.

Tasks

5.1.1 Establish Assertive Community Treatment (ACT)/Mental Health Court (MHC) Program.

- By October 2022, the CoE will hire:
 - 1 program manager.
 - 8 program specialists (2 statewide, 2 in the North Hub, 2 in the East Hub, and 2 in the Southwest Hub).
 - 1 program specialist with a nursing background.
 - 1 program specialist with a peer/recovery support background.
- By April 2023, at least 7 ACT teams (1 located in each region) will be trained and fully supported (through coaching and mentoring). These 7 ACT teams will also be ready to serve individuals experiencing first episode psychosis in their respective regions.
- By October 2023, these 7 ACT teams will have a combined capacity to deliver high fidelity ACT services to 500 individuals.
- By April 2024, a minimum of 500 individuals will receive ACT services.
- By April 2024, CoE ACT/MHC Program Specialists will also support these ACT teams by conducting fidelity reviews and developing individualized coaching plans to assist these teams in achieving higher levels of fidelity.
- By April 2024, CoE staff will provide training, coaching, and technical assistance specific to ACT teams serving mental health courts.

GOAL 5

GOAL 5 — RETENTION

Retaining the workforce through quality and effectiveness

5.1.2 Establish Parenting with Love and Limits (PLL) Program.

- By October 2022, the CoE will hire:
 - 1 PLL program manager.
 - 3 PLL program specialists (1 based in each DBH hub).
- DBH is negotiating a contract with the Savannah Family Institute, proprietor of Parenting with Love and Limits to:
 - Train all 4 PLL CoE staff as PLL trainers.
 - Train 3 program specialists as PLL Consultants prior to April 2023.
 - Train PLL consultants to the PLL fidelity tools, including video session rating scales, Paper and Pen fidelity tools, and interpretation of data elements.
 - Include all provider certification fees.
- By April 2023, CoE PLL staff will be prepared to train and support (through coaching and mentoring), at least 7 new PLL teams. Teams consist of 1 PLL therapist and 1 co-therapist. There will be at least 1 team in each region.
- By April 2024, PLL Program Specialists will train and actively support at least 14 PLL therapists and co-therapists across the state (2 teams in each hub), serving at least 44 families in each hub.

5.1.3 Establish Wraparound Intensive Services (WInS) Program.

- By October 2022, the CoE will hire:
 - 1 program manager.
 - 2 program supervisors.
 - 13 Wraparound program specialists (3 in the North Hub, 4 in the East Hub, and 6 in the Southwest Hub).
- By April 2024, at least 30 Wraparound Facilitators will be trained and supported (through coaching and mentoring) across the state and will serve at least 300 Idaho youth and their families.
- By April 2024, CoE Wraparound Program Specialists will measure fidelity within the provider network by using identified fidelity instruments.
- CoE Wraparound Program Specialists will continue to provide limited Wraparound in their respective hubs while network providers are being trained to fully provide Wraparound for a full caseload of 10 youth and families.
- By April 2024, CoE Wraparound Program Specialists will coach up to 10 Wraparound Facilitators each to increase the capacity of Wraparound Facilitators to 130, and youth and family served at any given time to 1,300.

GOAL 5

GOAL 5 — RETENTION

Retaining the workforce through quality and effectiveness

5.1.4 Establish Early Severe Mental Illness (ESMI) Program.

- By October 2022, the CoE will hire a team to develop curriculum for statewide ESMI program and training. This team will consist of:
 - 1 program supervisor.
 - 4 program specialists (1 statewide, 1 in the North Hub, 1 in the East Hub, and 1 in the Southwest Hub).
 - 1 program specialist with a nursing background.
 - 1 program specialist with a peer/recovery support background.
- By April 2024, at least 4 ESMI teams (located in Region 3, 4, 6, 7) will be trained and fully supported (through coaching and mentoring). These 4 ESMI teams will be ready to serve individuals experiencing first episode psychosis in their respective regions.
- By April 2025, an additional 3 ESMI Teams (located in Region 1, 2, and 5) will be trained and fully supported through coaching and mentoring. These 3 ESMI teams will be ready to serve individuals experiencing first episode psychosis in their respective regions.
- CoE ESMI Program Specialists will also support these 7 teams by conducting fidelity reviews and developing individualized coaching plans to assist these teams in achieving higher levels of fidelity.
- It is estimated that these ESMI teams will be able to identify and serve 49-53 **new** individuals annually (statewide estimate).

5.1.5 Establish Crisis System (Mobile Crisis) Program.

- By October 2022, the CoE will hire:
 - 1 program manager.
 - 8 program specialists (2 in the North Hub, 2 in the East Hub, and 4 in the Southwest Hub).
 - 1 program specialist with a peer/recovery support background.
- By October 2023, community based Mobile Response Teams (MRTs) will provide (at a minimum) crisis response services Monday through Friday from 8:00 am until 6:00 pm Mountain Time.
- By April 2024, MRTs will provide crisis response services 24 hours a day, 7 days a week.
- CoE Crisis Program Specialists will also support these Mobile Response Teams by providing trainings, coaching, mentoring, and by conducting fidelity reviews and developing individualized coaching plans.

GOAL 5

GOAL 5 — RETENTION

Retaining the workforce through quality and effectiveness

5.1.6 Establish a Child and Adolescent Needs and Strengths (CANS) Program.

- By October 2022, the CoE will hire:
 - 1 program manager.
 - 4 program specialists (1 in the North Hub, 1 in the East Hub, 1 in the Southwest Hub, and 1 statewide).
- IDHW will maintain its contractual access to 3 levels of CANS training (CANS Certification, CANS in Practice, and CANS in Supervision).
- By April 2023, all CANS CoE staff will be trained as trainers in all 3 CANS trainings.
- By April 2023, CANS CoE staff will be prepared to schedule all 3 CANS trainings to support the provider network, where there are currently 3,065 certified CANS users.
- By April 2023, CANS CoE staff will be prepared and ready to launch ongoing training, mentoring, and coaching for the current 3,065 users.

OBJECTIVE 5.2

Leverage existing partnerships with SAMHSA-funded Technology Transfer Centers to increase community providers' access to low/no cost continuing education.

Objective Summary

Technology Transfer Centers provide training and technical assistance in evidence-based practices. Their target workforce includes: behavioral health and primary care providers, school and social service staff, and anyone whose work has the potential to improve behavioral health outcomes for individuals with or at risk of developing serious mental health issues. These dynamic resource centers are grant funded by SAMHSA and located at the University of Washington but are charged with leading workforce development activities across all of SAMHSA Region 10 (Washington, Oregon, Idaho and Alaska), including rural areas. To learn more visit:

- [Northwest Mental health Technology Transfer Center \(NW-MHTTC\)](#)
- [Northwest Addiction Technology Transfer Center \(NW-ATTC\)](#)
- [Northwest Prevention Technology Transfer Center \(NW-PTTC\)](#)



GOAL
5

GOAL 5 — RETENTION

Retaining the workforce through quality and effectiveness

Performance Measures

We will know we have been successful in our work towards Objective 5.2 when:

- By December 2022, 5 Idaho Behavioral Health Professionals are participating in Advisory Board activities for the Northwest Addiction Technology Transfer Center.
- By December 2022, 5 Idaho Behavioral Health Professionals are participating in Advisory Board activities for the Northwest Mental Health Technology Transfer Center.
- By December 2022, 5 Idaho Behavioral Health Professionals are participating in Advisory Board activities for the Northwest Addiction Technology Transfer Center.
- By December 2023, at least 1 Idaho specific training is developed in collaboration with each Technology Transfer Center, focused on the unique needs of Idaho's rural population and its behavioral health providers.

Tasks

5.2.1 Collaborate with each Technology Transfer Center's leadership to ensure Idaho representation on each Advisory Board.

5.2.2 Collaborate with each Technology Transfer Center's leadership to develop curricula.

5.2.3 Deliver trainings to Idaho behavioral health providers.