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Behavioral Health Talent Council

Licensing and Credentialing

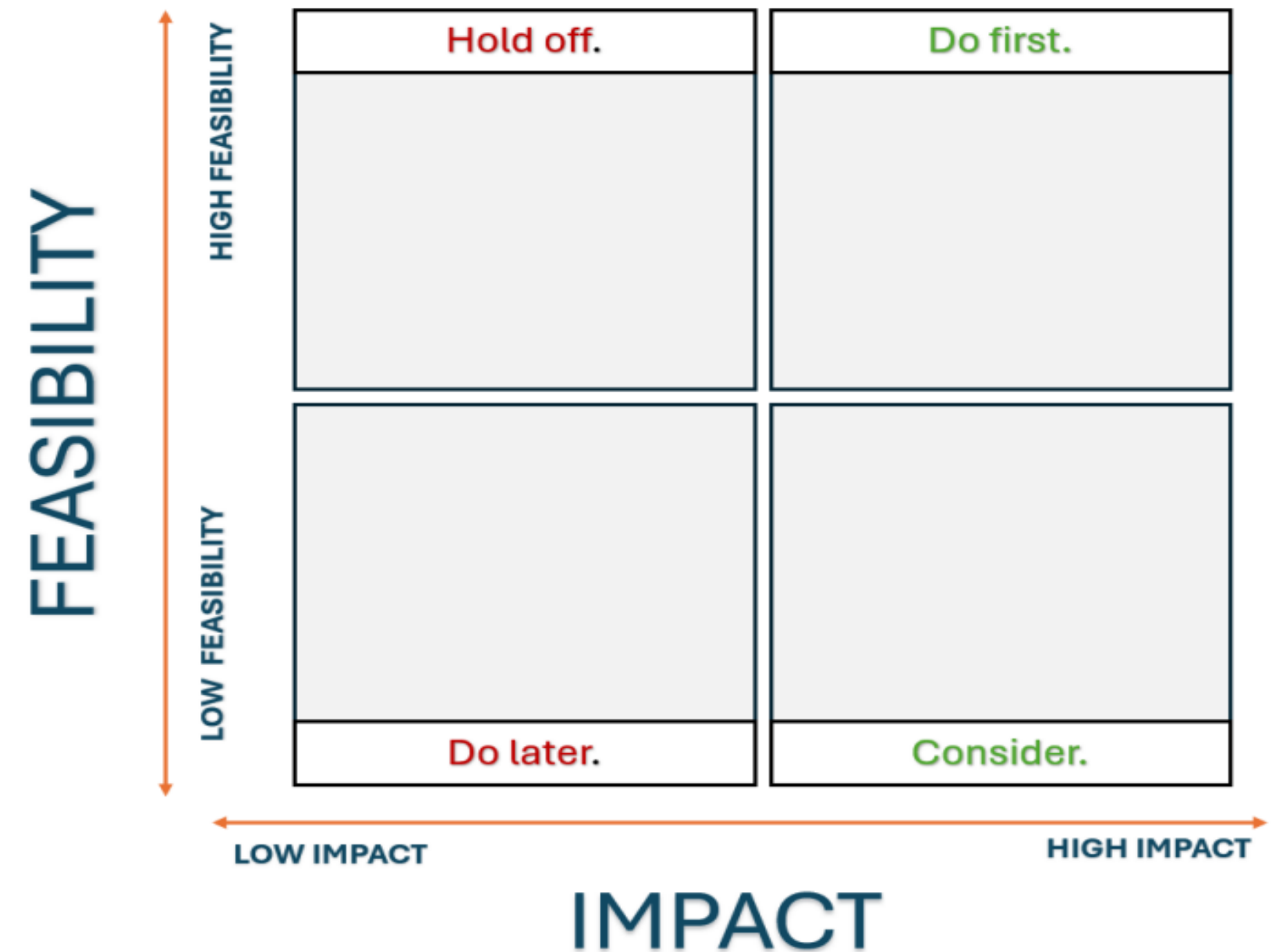
Prioritization Framework Approach



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• Prioritization Framework

- High Impact
 - Do first: high feasibility/ high impact
 - Consider: low feasibility/ high impact
- Low Impact
 - Hold off: high feasibility/ low impact
 - Do later: low feasibility/ low impact



Do First Recommendations



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Information Gathering

- Analyze which credentials offer limited career mobility and which provide broader opportunities to better inform investments intended to bolster the BH workforce (3D)
- Research best practices from other states and apply them to Oregon's situation while honoring and preserving a local and responsive quality of care (4C(i))

Pathways into the Profession

- Add tiered pathways into BH jobs that support education and employment together as one, not separately (7E(i))
- Promote BH technician roles as a pathway for younger demographics into the BH workforce (2E)
- Communicate how Associate of Applied Science degrees from BH workforce and allied professional Career and Technical Education programs in community colleges are a viable pathway (3B(ii))

Simplifying and Streamlining

- Work to create a crosswalk of BH credential and licensure requirements and standard coursework in relevant fields (4C(ii))
- Streamline and standardize licensure processes and requirements (4C)
- Make data readily available for others to access and analyze, for us across stakeholders (9D)
- Enhance IPEDS and BH data processes/protocols to consistently capture primary, relevant, and current data (9A)

Do Second (Consider) Recommendations



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- Provide funding for micro-credentials (3I)
 - Budget constraints make it less feasible to “fund”
 - Still, the Subcommittee would like to address micro-credentials within the context of “streamlining and standardizing licensure process and requirements” in efforts to support wider access and their meaningful application

Do third (Hold Off) Recommendations



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- Fund a large, primary data collection initiative that leverages an annual longitudinal survey to establish benchmarks and assess where legislative and regulatory initiatives are effectively improving the workforce (9C)

Do Later Recommendations



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- Create a state data center overseen by a data methodologist (9)
- Explore national initiatives such as the National Center for Interstate Compacts, the Social Work Licensure Compact, as well as the National Mental Health Workforce Collaborative (4C(iii))



Questions for Discussion

- How are we defining Behavioral Health technician and to what extent should we align this definition with those used by other states?

- How can we align surveys and consolidate existing open data so they can be effectively leveraged for quality improvement and policymaking?



Stakeholder Engagement Plan Update

■ We have begun identifying stakeholders: This in-progress list includes educational institutions with degrees related to behavioral health, organizations representing consumers/individuals receiving services, and licensing boards.

■ Finalizing an engagement plan is a top priority for upcoming Subcommittee meetings.
