Office of Governor
TINA KOTEK

Behavioral Health Talent Council

Retention and Recruitment
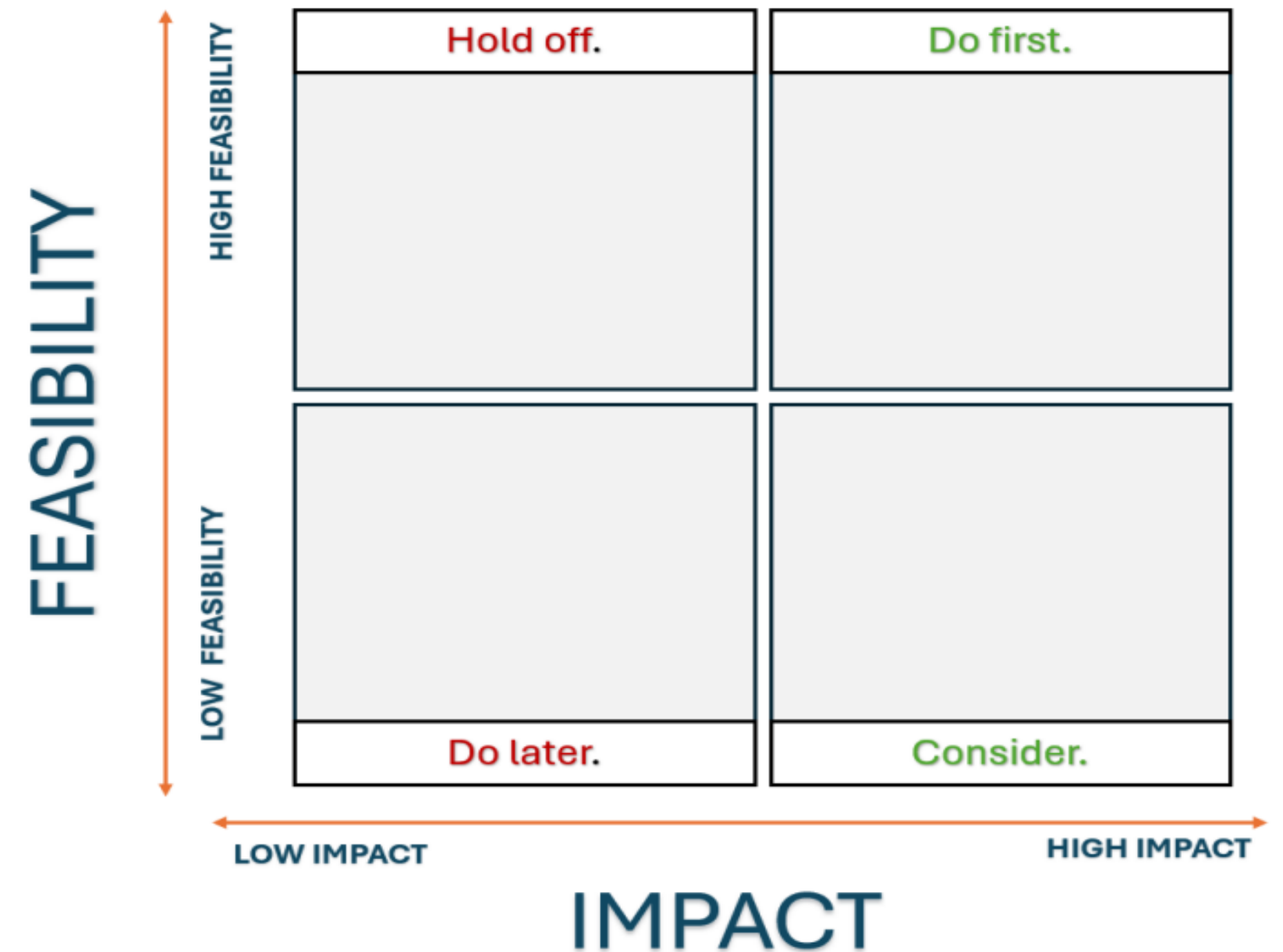
Prioritization Framework Approach

- **Prioritization Framework**

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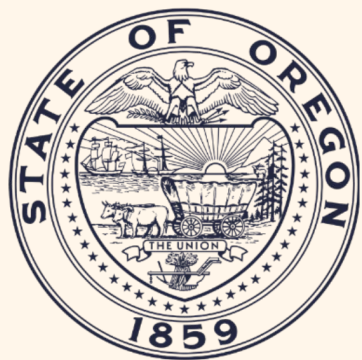   - Do later: low feasibility/ low impact

Do First Recommendations

"Bucket"	#	Recommendation	Justification for Priority
Supporting workforce	7C	Establish best practices for supporting workers and supervisors	High impact if challenges with licensing boards are addressed
	8D	Create programming within organizations that have supportive services, mentorship, and wraparound support built in for staff	High feasibility and impact; especially relevant for BH Peers
Admin Burden	7C(ii)	Review and simplify administrative burdens placed on BH providers and supervisors to strike a balance between ensuring high-quality patient care without over-burdening providers	Widely supported; balances care quality and workload
	7D(ii)	Address the administrative burden on care providers and supervisors; rethink, revise, and simplify reporting, billing, and current redundancies in process and protocols	Key issue in subcommittee discussions; may require legislation
Cultural Representation in the Field	8	Infuse principles of equity and inclusion to diversify and expand the talent pipeline	Supported in principle by HB 2235 Workgroup; applicable to all workplans

Do Next Recommendations

"Bucket"	#	Recommendation	Justification for Priority
Culturally responsive workforce	8E(ii)	Increase the share of providers who are multilingual and represent populations that are underserved, underrepresented and under-resourced	High feasibility and high impact. CLSS organization and equity-centered workgroups like the HB 2235 Workgroup continue to advocate for greater cultural and linguistic representation, responsiveness and training within Oregon's behavioral health workforce. Work needs to be woven in throughout.
	8G	Use data to intentionally form initiatives focused on increasing workforce diversity.	
	8B	Identify, reduce barriers for BIPOC Individuals seeking a career in BH.	
	8A	Create programming within organizations that have supportive services, mentorship, and wraparound support built in for staff	
Incentives	7E(ii)	Fund students in predesignated areas/fields that are experiencing shortages and pair this with a two year working commitment (e.g., CA title IV-E program focused on child welfare)	Could pair with Rec. 7C(iii) to prioritize internships leading to employment. Ohio's "Great Minds" Fellowship is a model—provides stipends to students interning at Community Mental Health Centers and supports continued employment. See p. 65 of Jan. 2025 HB 2235 report.
	8C	Increase opportunities for the workforce to learn evidence based practices, professional boundaries and safety, professional writing and digital literacy skills, resilience and self-care, cultural humility, and team based care skills	Medium-impact; recognize education doesn't always translate into retention.
	4D	Offer region-specific BH career roadmaps to encourage a grow-you-own approach for Tribal, rural, and frontier communities	Low feasibility; contingent on funding and the need to create this project.

Do Next Recommendations, con'd

"Bucket"	#	Recommendation	Justification for Priority
Compensation	6	Address inequities between community-based and private practice providers.	Identified as highest priority (HB 2235, p. 48; voted 1/17). Widely supported in discussions. Despite lower federal feasibility, it offers the greatest impact for attracting and retaining workforce.
	6A	Develop progressive reimbursement rates and billable services, which currently undervalue community-based health care as well as client needs and outcomes and fail to support culturally responsive care	
	8F	Develop clear career pathways that are supported, well compensated, and sustainable to attract, retain a diverse workforce.	
	6B	Explore and fund financial incentives for specialized workforce roles (e.g., position/job role, region, underserved communities) that align with union regulations and are equitable	
Cost of education	3G	Support financial aid, scholarships, tuition reimbursement, and loan forgiveness programs	High impact and medium feasibility absent additional funds; critical debt relief strategy
	3H	Explore alternative options to cumbersome and confusing loan forgiveness programs	High retention strategy; feasible with existing programs
	7	Expand funding and resources for education and professional development	Voted high priority; critical for workforce development
	7A	Expand tuition reimbursement programs; subsidize training opportunities and certification costs	Medium-high feasibility; reduces access barriers
Collaboration	7D	Foster collaboration across agencies and stakeholders	Seems high feasibility, not quite as impactful. Ensuring investments are complementary and not duplicating efforts.

Hold Off Recommendations

"Bucket"	#	Recommendation	Justification
Culturally responsive workforce	8E(i)	Increase access to in person and virtual BH resources in rural areas with culturally competent providers	Overly broad and it is unclear how many rural providers are already doing this with existing funding
Supporting Workforce	7C(iii)	Fund work based learning experiences (internships, residency, apprenticeships)	Low feasibility absent additional funds.
	7C(i)	Subsidize clinical supervision	Low feasibility absent additional funds.
Compensation	7B	Subsidize housing, relocation, and childcare costs, particularly in rural areas and within underserved communities	Less of an impact than direct compensation; would require additional funds.

Do Later Recommendations

"Bucket"	#	Recommendation	Justification for Priority
Compensation	6C	Redefine and provide the resources to community mental health work as a sustainable career choice rather than a stepping stone to private practice	Impact unknown; media consumption habits have changed. Not compensation based.
Supporting workers	7C (iv)	Pair acute clients with appropriately trained providers	Low feasibility; high impact.
	7C (v)	Reduce staff-to-client ratio	Feasibility complicated by fidelity models and high-acuity patients.
Incentives	2	Craft a set of statewide initiatives to provide early career exploration, appropriate work-based learning experiences, and career guidance based on individual interest, skills, and career fit.	Impact unknown; feasibility medium. Three school districts already do this.

Questions for Discussion

- Q&A

Stakeholder Engagement Plan Overview

Retention and Recruitment: We have created an extensive list of stakeholders and will continue to refine how and when we engage specific stakeholders depending on the implementation plan and the recommendation we are trying to implement. There are currently two workforce workgroups which have obvious overlap and we will engage them early in the process.

Stakeholder Engagement Starters:

HB 2235 BH Workforce and HB 4092 Admin Burden – Retention and Recruitment will invite these two workgroups to come to share their recommendations and gather insights that can help inform council strategies, avoid duplication and elevate shared priorities.