State Health Improvement Plan and Progress Report

ACTION PHASE

Date Updated: 6/16/2015

 This document is being submitted as: ☐ Initial Program Plan ☐ Revised Program Plan ☐X Midyear Progress Report ☐ Annual Progress Report

Priority: X☐ Mental Health   ☐ Healthy Behaviors

Strategy: Enhance the behavioral health workforce

Description: Workforce development is an ongoing initiative and consists of two broad categories including 1) continuing education of those providing behavioral health related services and 2) preparatory education for individuals interested in working within behavioral health at all levels inclusive of middle and high school career and technical education (CTE) health science programs, associate degree programs at community college, 4-year college programs, graduate and post-graduate disciplines. All of these will be addressed in detail as the State Health Improvement Plan (SHIP) evolves. This initial plan is intended to be a feasible 'fledgling step' toward collaborative efforts that may not have occurred before in Delaware; thus, this plan represents an exciting opportunity toward long-term and sustaining enhancement of the behavioral health workforce.

For purposes of the initial strategy objectives relative to workforce development the committee has focused on six (6) objectives with eight (8) longer term activities (three years or more) and 23 short term activities (one-two years) identified. As noted, the identified responsible person/agency may, in fact, be a suggested entity dependent on future or anticipated funding. Should the funding not become available, other responsible person/agencies will need to be chosen. Additionally, workforce development initiatives should be continually adjusted based on new initiatives, research findings, and administrative foci. This fits well with the Mobilizing for Action through Planning and Partnerships (MAPP) format used to develop and continue the SHIP.

It is critical to note that longer term objectives are developed from a broader perspective and may require longer time and more resources to achieve. The shorter term objectives have been culled with great deliberation by the committee to realistic and achievable components. It is understood that they may not be the most critical steps but are, rather, feasible to undertake within the scope of a first step strategy and are important steps toward addressing the goal: To improve access to mental health and substance abuse services and supports, including prevention, early intervention, and treatment for all Delawareans.

In addition to the printed Delaware SHIP resources, a list of the source documents that were used to develop this initial strategy is included at the end of the plan. A reference page with theoretical and operational (when applicable) definitions and a glossary has been added to this document.

The dedicated committee members provided expertise, insight, and significant professional discourse to arrive at a written plan by consensus include,

in alphabetical order and including a workforce affiliation, the following individuals:

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Note: The Action Plan must include consideration of the social determinants of health, causes of higher health risks and poorer health outcomes of specific populations, health inequities and policy changes needed to accomplish the identified health objectives.

Objective SMART format	Activities	Responsible Person or Agency	Timeline	Evaluation Measures	Accomplishments
Objective One: Conduct a needs assessment of current behavioral health/mental health and substance abuse providers in Delaware (target: current and future workforce)	Study the current Delaware workforce using models from West Virginia, Colorado, Texas, and others, as examples, to determine the current state of services, gaps in service, gaps in knowledge, barriers,	SHIP DHSS	2018	Data detailing the system's Strengths, Weaknesses, Opportunities, and Barriers for further development	In 2015 DSAMH T.O. conducted a partial needs assessment using a convenience sample from persons who attend SUD workshops. Findings are attached to this update as addendum.

	and opportunities which exist in behavioral health and substance abuse.				
Objective Two: Increase access to training resources related to behavioral healthcare; main focus on Alcohol and other Drug (AOD) related topics due to severity of substance use issues in DE and reports for a need of certified providers as well as providers who are using Evidence Based Practices (EBPs) and/or Evidence Informed Practices and who are aware of newer treatment approaches; provide access to training in models of integrated behavioral and physical health care consistent with SHIP and Affordable Care Act (ACA)	Study the features of similar entities that have been created throughout the US – other SHIPs

Assess continuing education offerings and other workforce development initiatives within DE agencies, in other DE statewide health related plans and forums, colleges and universities, and professional associations to (1) develop consistency of behavioral health related training and (2) share/maximize resources while avoiding duplication, and (3) coordinate efforts | Strategy #2 members

Strategy #2 committee started this through discussion; to be continued by SHIP committees | December 2014 for preliminary data and ongoing from subsequent strategy committees

2015 and ongoing | List of workforce development ideas garnered from other SHIPs and integrated into DE strategies

Initiatives are listed through SHIP and SHIP partners contribute regularly through SHIP meetings and eventually through electronic repository | In 2014 Strategy #2 committee members accessed multiple SHIP plans from throughout the U.S. as indicated in the reference section of this document. Some of the ideas garnered through those plans are informing Delaware practices, e.g. SBIRT initiatives are in progress. |
| (target: current workforce) | Map locations of offerings to assess geographical gaps to include representation in all three (3) | SHIP Committee initially and through electronic repository eventually | 2015 and ongoing | Identified training resources are available proportionate to provider populations in all three (3) | |

	counties including east and west Sussex County			counties.	
		SHIP	2015 and ongoing		
	Assess offerings via other sources that could provide continuing education, certificates or college credits, e.g., Massive Open Online Courses (MOOCs)			Initiatives are listed through SHIP and SHIP partners contribute regularly through SHIP meetings and eventually through electronic repository	
		SHIP as it develops and as SHIP garners funding	2018		
	Create a central electronic repository for information about mental and behavioral healthcare training, Clearinghouse development, and/or website links.			Electronic repository is available, accessible by all Delawareans, and all training is posted by entities who are offering educational opportunities	
		SHIP as it develops and garners funding	2018		
	Obtain and disseminate evidence-based and/or evidence-informed guidelines for behavioral health disease management, specifically depression to begin with, to primary care providers to improve early diagnostic evaluation, treatment, care coordination, and follow-up support of individuals			Guidelines are developed and disseminated	
		Add Medical Society	2018 for electronic		DSAMH met with

	Coordinate with Medical Society of Delaware (MSD) and other organizations to create and implement continuing education on depression for physicians, nurses, and other health professionals	of Delaware to SHIP structure and include in electronic repository	repository 2015 & ongoing for initial coordination of efforts	MSD is part of electronic repository MSD is integral part of SHIP	MSD; MSD is participating in the larger State Health Inititiative In June 2015 MSD partnered with Christiana Care to provide SUD training to anyone interested
	Create learning opportunities (MOOCs, webinars, etc.) on the Business of Health Care, which covers the aspects of health care financing, managed care, Accountable Care Organizations (ACOs) etc.	DHHS (Medicaid) MSD or Managed Care Organizations (MCOs) Insurance Commission Licensing boards IHEs	2015 and ongoing	Learning opportunities are available # of enrollees	
	Implement Smart Moves/Smart Choices Prescription Drug Abuse Prevention Program in K-12 Delaware schools.	Division of Public Health (DPH), Department of Education (DOE)	2015 and ongoing	Pre and Post Evaluations	
	Train health educators and school nurses in Smart Moves/Smart Choices	DPH DOE	2015 and ongoing	Number of health educators trained Number of school nurses trained	
	Implement state-wide	DHSS	2015 and ongoing. New cohort will start		

Project Extension for Community Healthcare Outcomes (Project ECHO) which is an online professional learning community that will improve the chronic pain expertise among primary care providers and stimulate collaboration among a multidisciplinary team.	Medical Society of Delaware (MSD) Prescription Drug Action Committee (PDAC)	in March 2015	Pre and post test evaluations	
Advocate change with state licensing boards (psychology, social work, counseling, etc.) to require providers to participate in training on integrated care.	SHIP Delaware Board of Professional Regulations Independent Licensing Certification Boards e.g. Delaware Certification Board	2018	Requirement developed and enforced for license renewal and for certifications, as applicable	
Partner with Central East Addiction Technology Transfer Center (CE-ATTC) to bring addiction training on Medication Assisted Treatment, HIV/Psychiatry, and other Alcohol and other Drug (AOD) topics to Delaware programs.	CE-ATTC SHIP DHSS MSD PA/Mid-Atlantic HIV Consortium at Christiana Care	2015 and ongoing	Partnerships established Number of training programs offered Number of participants in programs	CE-ATTC partnership re-established CE-ATTC/DSAMH plans to provide no cost 2 –day conference in 2015 on AOD that includes CEUs
Create a Summer	Delaware Professional Counselors	2015	Number of professionals attending	June 2015 DPCA and Wilmington

	Seminar and other series for mental health professionals that address skills and knowledge based training in common core subject areas in the field of mental health.	Association Wilmington University Clinical Mental Health Counseling program NAMI DSAMH Mental Health Association Veterans Administration		Evaluation of workshops Credentialing of presenters	University has plans to offer a summer training on substance use disorders
Objective Three: Increase number of middle and high school students interested in careers in mental and behavioral health. (target: future workforce)	Develop Public Health and Allied Health Programs of Study (POS) to include comprehensive middle and high schools that include behavioral health curricula ("Break the Silence", suicide prevention and Mental Health First Aid certification), early work and college options.	Participating middle and high schools Institutions of Higher Education (IHEs) Business and industry leaders Department of Education CTE-Health Sciences National Alliance for Mental Illness (NAMI) Mental Health First Aid Certified Instructors National Council on Behavioral Healthcare	Pilot 2015-2016 school year and ongoing	Number of partnerships with Institutions of Higher Education (IHE) and employers from business and industry offering early work and college options for students Number of Local Education Agencies (LEAs) successfully implementing Allied Health and Public Health pathways Number of students enrolled in Allied Health/Public Health	

			pathways	
			Number of LEAs successfully meeting Perkins targets	
			LEA success in pathway compliance monitoring	
			Number of students successfully completing early work and college options	
			Number of students completing Mental Health First Aid certification	
	Develop career fairs on behavioral health (mental health, physical health, etc.) at middle and high school levels	Individual schools consider kick-off for pathways program combined with career fairs	2016 and ongoing	Analyze Department of Labor data relative to number of persons employed in behavioral health and demographics	
			Number of schools providing career fairs	
	Increase partnerships with Institutes of Higher Education to offer dual enrollment for high school students, e.g.	Develop partnership between the following: Department of Education High schools	Implementation in 2015 and 2016; state-wide 2017	Number of Delaware high school students who graduate with completed college credits	

	Introduction to Psychology, Medical Terminology, A & P. Partner with Nemours Health & Prevention Services (NHPS) and DOE to expand their Health Literacy curriculum to be available in all DE high school and middle school health curriculum.	Charter schools Technical schools Universities Community colleges NHPS and DOE	2015 and ongoing	Number of high schools and middle schools with the Health Literacy curriculum offered to students Number of students who complete the Health Literacy Curriculum	
Objective Four: Increase number of college undergraduates who are interested in and prepared for a career in the behavioral healthcare field. (target: future workforce)	Encourage implementation of "Stop Out" (Jeffreys, 2004) at all programs to increase the number of students who complete degrees	All IHEs in Delaware	2015 and ongoing	Number of students participating in "Stop-Out option. Number of Institutes of Higher Education programs of study that implement "Stop Out"	
	Develop career fairs on mental and behavioral health for all post-secondary institutions	IHE and SHIP to partner with behavioral health providers	2015 and ongoing	Number of schools providing career fairs Number of participants attending Number of providers participating	
	Create opportunities for informational interviews in	All IHEs	2015 and expand to additional IHE ongoing	Schools track number of information interviews.	

	behavioral health and incorporate as part of a curricula or pre-internship assignments.			
	Identify opportunities for experiential learning such as internships and Co-ops in mental health	IHEs Providers of behavioral healthcare	2015 and ongoing	Track number of students in IHEs in Delaware successfully completing experiential learning, e.g., co-ops, and internships
	Assess current course offerings in mental and behavioral health (e.g., health psychology, addictive behaviors, crisis intervention AND the basic sciences for persons entering behavioral health to include but not be limited to: Microbiology, Chemistry, Biology, Anatomy and Physiology, Pharmacology, Genetics, Neurobiology)	IHEs SHIP when funding available	2015 and ongoing	Survey or assessment findings available Strategy team identified to develop objectives and identify responsible parties
	Develop new courses	SHIP partners IHEs	2015 and ongoing	Number new courses offered

	and programs and expand programs currently offered Review articulation agreements between Delaware IHEs to ensure seamless transition for students with credits in behavioral health courses between IHEs	IHEs	2015 and ongoing	Number of programs Number of articulation agreements	
Objective Five: Influence graduate schools curriculum to reflect SHIP initiatives and current needs based on data (target: current and future workforce)	Identify current graduate programs/curriculum and assess for gaps and current state of practice in DE	IHEs and SHIP when funding available	2018	Findings available Assessment completed New strategy committee established to create a plan and identify responsible parties	
	Include integrated care in curricula	IHEs	2018	Integrated care is part of all behavioral health curricula for Delaware IHE's	
	Promote certifications and other learning opportunities to prepare behavioral health professionals for the Patient Centered Medical Home model and other areas of integrated	SHIP IHEs for certification programs National Association of Social Workers, Delaware Certification Board American Psychological	2015 and ongoing	Number of professional staff certified in the provision of integrated care	

	care.	Association, etc. Division of Professional Regulations including but not limited to: Delaware Board of Nursing Psychology Licensed Practitioners of Mental Health, etc.			
Objective Six: Promote the need for and the development of a Delaware medical school.

(target: future workforce) | Support the negotiations and discussions amongst the Delaware Health Science Alliance (DHSA) members about the creation of a Delaware-based medical school | DHSA, SHIP | 2018 | Medical school for Delaware implemented | |

ADDENDUM – DSAMH Training Office 2015 – Data Analysis

The workforce development needs of our stakeholders were obtained by gleaning information from a variety of local, regional, and national sources. These sources included key informants discussions, survey results, a review of media resources, and feedback from workshop participants. The information was refined to reflect findings.

Local sources of information included an on-line survey conducted in March, 2015, with 470 respondents, an analysis of responses from 672 participant reaction sheets from workshops held between 01/2014 and 02/2015, and through discussions with key informants done in meetings with state and national organizations such as the Central East Addiction Technology Transfer Center, the National Association of Case Managers, Attention Deficit Disorder Association, Autism Delaware, etc..

X=Denotes an item of national priority

TREATMENT MODALITES (222)

       X=Motivational Interviewing (129)
       X=Cognitive behavioral Therapy (40)
       X=Dialectical Behavioral Therapy (18)
       X=Mindfulness (16)
       X=Miscellaneous [EMDR, Behavior Analysis, MET, SBIRT, EFT] (19)

COUNSELING SKILLS (176)

Basic Counseling Skills (47)
Counseling for particular age groups or cultural background, those with specific diagnoses, etc. (25)
Addressing ambivalence, stages of change, therapeutic alliance, etc. (13)

X=SUBSTANCE USE CONDITIONS (125)

X=Opioid (13)
X= SBIRT (2)

CO-OCCURRING-DUAL DIAGNOSES (121)

MH & SUD ONLY (59)
MH/SUD w/ Autism-Developmental Disability (27)

TRAUMA (109)

CRIMINAL JUSTICE (97)

Employment (24)
Services for the Incarcerated (9)
Re-entry/Reintegration (8)

YOUTH (87)

CULTURAL COMPETENCY (69)

PROVIDE SERVICES IN AN INTEGRATED CARE SETTING (66)
MH/SUD w/ Medical/Physical Health (35)

X=ETHICS (56)

MENTAL HEALTH CONDITIONS (specific diagnoses, e.g., schizophrenia, bi-polar, personality disorders, etc.) (46)

DOMESTIC VIOLENCE/ABUSE (sexual, child, elder) (44)

FAMILY ISSUES (43)

X=DSM 5-ICD 10 (40)

CONNECTINNG TO/LOCATING/ACCESSING SERVICES (37)

HOMELESS/HOUSING (31)
Homeless Services/Resources for (13) Housing Services/Resources for (13)

PHARMACOLOGY-MEDICATIONS (28)

X=CLINICAL SUPERVISION (24)

GAMBLING (20)

CRISIS (Counseling, intervention) (18)

CASE MANAGEMENT (15)

HIPAA (13)

AGING (12)

GROUPS (12)

GRIEF/END OF LIFE (11)

SUICIDE PREVENTION (10)

Of interest, training on "counseling skills," especially basic counseling skills, was the most commonly- cited area of need in workforce development. Approximately 38.2% of survey respondents cited counseling skills as a need, including over 10% citing basic counseling skills. The need for education on the integration of physical/medical and behavioral healthcare is an important area of service delivery and second-most commonly cited. Training on the broad category of "substance use" (SUD) was the third most-commonly cited area of interest. Trauma-Informed Care, or trauma services for specific populations (youth, women, veterans) were the fourth-most cited area of training need. Training on skill proficiency related to service delivery to individuals with criminal justice involvement was commonly referenced. Ethics training was requested and the demand has been strong enough to support an evening track of ethics being offered at the Summer Institute for a number of years. Clinical supervision is critical need that has been cited by local key informants, so this need should get some attention. Educational offerings should be eligible for continuing education credits or CEU's. Suicide prevention was not mentioned commonly by survey or workshop respondents, but is a vital area for training. While both survey respondents and workshop participants occasionally cited the subject of tobacco use within the behavioral health community, there was not a significant call for training in this area. However, nationally there has been a fair amount of efforts and attention to this issue. Finally, screening, brief intervention and referral to treatment (SBIRT) was infrequently mentioned, it is an important area for skill development, and an awareness of its importance need to be addressed.

Which length of training are you most likely to attend? (check all that apply)
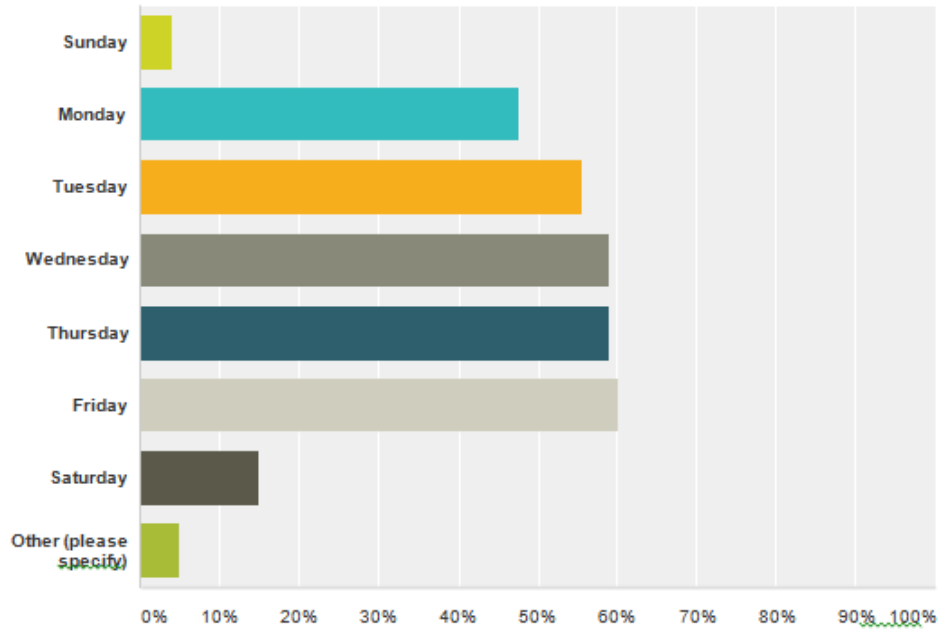
Answered: 470   Skipped: 0
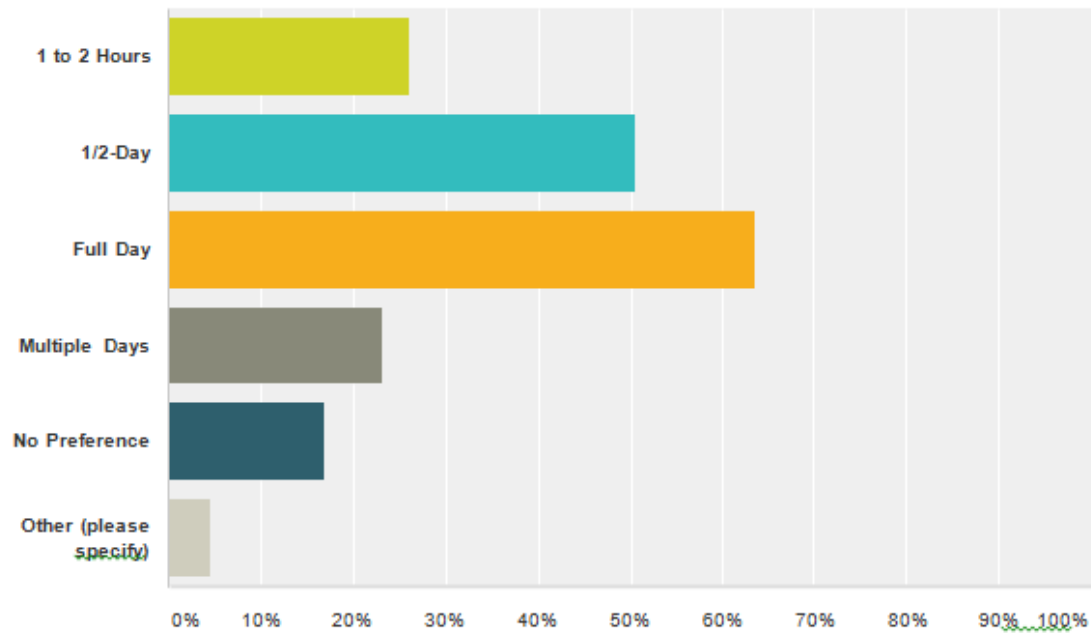
Answer Choices	Responses	
1 to 2 Hours	26.17%	123
1/2-Day	50.43%	237
Full Day	63.62%	299
Multiple Days	23.19%	109
No Preference	16.81%	79
Other (please specify)	4.68%	22
Total Respondents: 470		

# Which days of the week do you prefer to attend training? (check all that apply)

Answered: 470   Skipped: 0

Answer Choices	Responses	
Sunday	4.04%	19
Monday	47.66%	224
Tuesday	55.74%	262
Wednesday	59.15%	278
Thursday	59.15%	278
Friday	60.21%	283
Saturday	15.11%	71
Other (please specify)	5.11%	24
Total Respondents: 470		

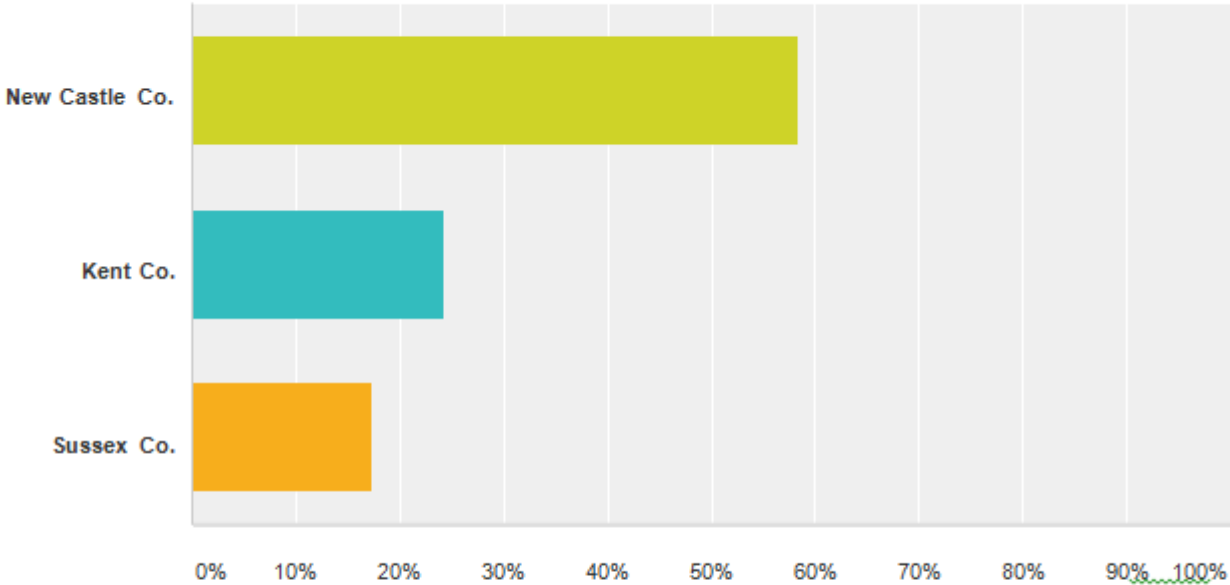# What type of training do you prefer?(check all that apply)

Answered: 470   Skipped: 0
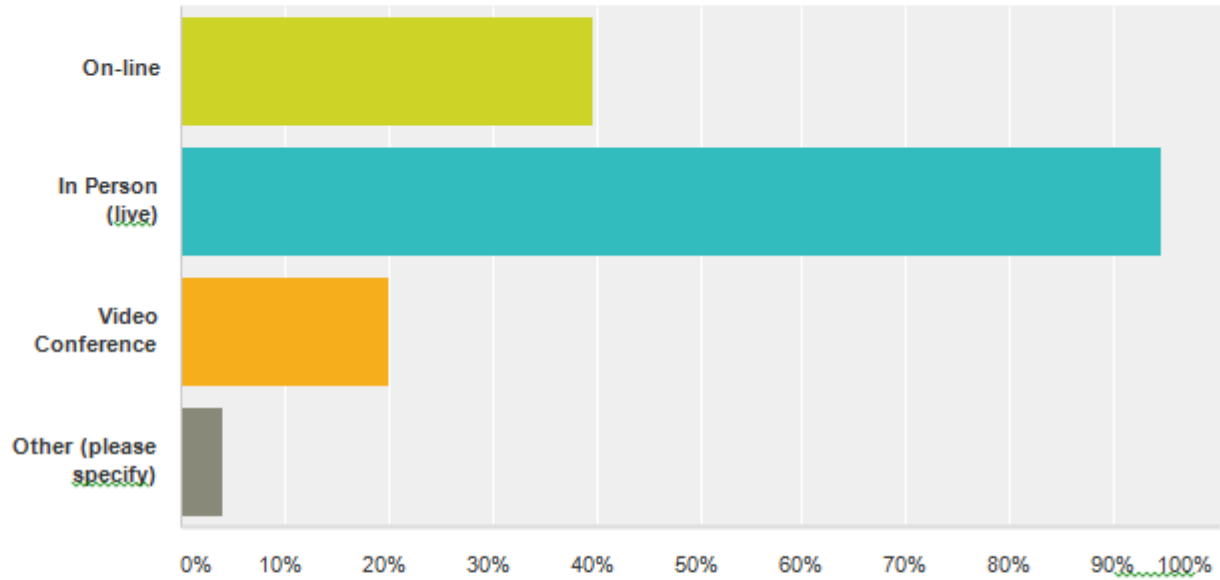
Answer Choices	Responses	
On-line	39.79%	187
In Person (live)	94.47%	444
Video Conference	20.00%	94
Other (please specify)	4.26%	20
Total Respondents: 470		

Which location (by county) are you most likely to attend?

Answered: 470   Skipped: 0

Answer Choices		
New Castle Co.	58.51%	275
Kent Co.	24.26%	114
Sussex Co.	17.23%	81
Total Responses 470		