

Alliance
Workforce Committee Meeting

Friday June 30, 2022

9:00 AM – 10:00 AM

Join Virtual Meeting:

<https://us02web.zoom.us/j/89796541408?pwd=OGpPRVArcDhTS1MzWml3YUhaZHV3dz09>

Meeting can also be joined by calling 6699009128,,89796541408#,,,,*651946#

Committee Members in Attendance: Co-Chair Don Erickson, Co-Chair Julie Scholz, Deb Darmata, Marielena McWhirter, Sarah Spafford, Stephanie Willard, Tanya Pritt

Committee Members not in Attendance: Fran Pearson, Jill Baker, John Seeley, Kirk Wolfe, Liz Thorne

Staff: Annette Marcus (AOCMHP), Jennifer Fraga (AOCMHP)

Guests: Erin Weldon, Gordon Clay

| Time | Agenda Item | Action | Notes |
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| 10:00 | Introductions, Announcements, Consent Agenda | | Welcome Erin – our new AFSP Oregon Director. |
| 10:05 | Next Steps for HB 2315 Expansion into Physical Health Providers | | <p>Today, we have to make decisions around our next steps for expanding our CEU requirement into the physical healthcare provider world.</p> <p>What we've learned:</p> <ul style="list-style-type: none"> -While boards could require providers to take a suicide prevention related CME course, that is not the best course to follow. For requirements we would need a legislative ask. -Expanding into physical healthcare is going to impact a lot of providers (more than 100,000). This is fantastic reach and also we have to think about doing it well from the beginning due to burnout, systems recovering from COVID while still working in it, and also wanting it to be meaningful and evidence-based as requested by providers. <p>Thoughts from today:</p> <ul style="list-style-type: none"> -Question: So what is going to be done by the Workforce Committee to reduce suicide in youth 5-24 and specifically 18-24 in the workforce while waiting the next two years for legislation? What |

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| | | | <p>about creating toolkits for the different segments in medical health to change their internal cultures in the meantime?</p> <ul style="list-style-type: none">-Not all practitioners are a part of a "Health System"-Question: what is our money like from oha to possibly develop a course like the pain management? If none, could that be a legislative ask?-I think that working with colleges and universities would be a tough one because it would involve working with various accreditation boards for various college / university programs. And I'm pretty sure that could not be legislated. I was thinking about that with social work programs alone. That may be more of a national reach and, if so, would be great to partner with AFSP on if possible. Yes Jenn - the lack of education about suicide in various graduate programs is where the problem starts. Solving that problem is monumental, perhaps next steps.-Concerns with involving / how to involve CCOs-Make this training part of onboarding. Have an onboarding system for all staff to complete. <p>Individual Training for License Renewal—individual and licensing boards responsible: Ask for full funding to stand up a system that would support & promote</p> |
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| | | | <p>training and a process for Approved Trainings to be added to model list</p> <ul style="list-style-type: none">-Would this be an incremental approach similar to SB 48 and then HB 2315?-No, would be more like WA state approach with realistic timeline <p>Next steps:</p> <ul style="list-style-type: none">-Fully lay out option listed above-Meet with Oregon Medical Association-Keep other pieces in mind for backups-Option 4 also received a lot of support |
| 11:00 | Adjourn | | New SB 48 report comes out in October. |

Follow-Up Tasks for HB 2315

Updated Rules from Jill, Plan for TSPC engagement,
Priorities for Jill:

RAC then co-create a scope of sequenced recommended trainings by role followed by RFP.

1. RFP development advice for training (Don, Stephanie, David)
Requested feedback from folks within 2 weeks on materials she sent to folks.
2. Co-create a scope of sequence of recommended trainings by role (Don, Cheryl C., Sarah)
Staff to-do to help bring this meeting together with Jill & Shanda. Should be concurrent with RAC.

3. Review Rules to Determine RAC Need (Annette, Jenn and Stephanie)
Rules around Traditional Healthcare workers (that OHA has control over) – these were updated but did not include suicide prevention. There needs to be a rules advisory council for this and Jill thinks she needs to ask for emergency rules process to make sure they are in effect in time.

Stephanie, Annette, Marielena, Jill to meet. Timeframe – Jill will get back to the group on a timeline. Guess is to meet within the next couple of weeks. Stephanie says between now and March 31st and not May works for her.

OAR 410 – Jill thinks these need a RAC

OAR 309-027 – Jill does not think that these need a RAC