Community Health Association of Mountain/Plains State (CHAMPS)
BHW’s Behavioral Health Workforce Development Program
Overview

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Vision: Healthy Communities, Healthy People
Behavioral Health Workforce Development Programs

- Graduate Psychology Education Program
- Addiction Medicine Fellowship Program
- Integrated Substance Use Disorder Training Program (ISTP)
- Behavioral Health Workforce Education and Training Program
- Opioid Workforce Expansion Programs – Professionals and Paraprofessionals
- Opioid-Impacted Family Support Program
- SUD Treatment and Recovery Loan Repayment Program

Coming Summer 2021
Behavioral Health Workforce Education and Training (BHWET) Program

Aims:
✓ Growing the behavioral health workforce
✓ Increasing its capacity
✓ Improving the distribution of providers
✓ Promoting integration of service delivery

Impact:
► Over 18,000 students graduated and entered the behavioral health workforce between 2014 and 2020
► 6,787 new paraprofessionals are working as community health workers, peer educators, and substance use/addiction workers
► Projected to eliminate over 40% of the anticipated shortfall of behavioral health providers by 2025

BHWET Outputs

BEHAVIORAL HEALTH PROFESSIONS 2014-2020

- Psychologist: 454
- Psychiatrist: 47
- Occupational Therapist: 34
- Counselors: 2,489
- Marriage and Family Therapist: 318
- MH Nurse Practitioners: 797
- Social Workers: 7,726

Key Training Settings

- Medically Underserved Community
- Primary Care Setting
- Rural Area

HRSA Health Workforce
BHWET Training Models

A BHWET Professional grantee provides its interns didactic seminars and a required training rotation focused on integrated care. By preparing interns with these didactics, they have a more informed approach with their interventions when meeting with patients.

A BHWET Paraprofessional grantee incorporates innovative models of care and training components into their program. These elements include 1) providing additional training in all aspects of behavioral health; and 2) introducing the career path of P/CHWs as Behavioral Health Community Navigators, Clinical Trial Navigators, Telehealth Community Navigation.
Graduate Psychology Education (GPE)

- Increases the number of trained doctoral health psychology students, interns, and post-doctoral residents
- Fosters an integrated and interprofessional approach to addressing access to care with specialized training in the provision of OUD prevention and treatment services
- Supports faculty development of health psychology
GPE Outputs

Number of Psychology Trainees

Key Training Settings

- Medically Underserved Communities
- Primary Care Setting
- Rural

GPE Training Model

A GPE grantee uses a training model that enhances telehealth knowledge and capacity in their partnering GPE sites. The grantee uses tele-behavioral health to expand access to care for underserved populations, utilize doctoral trainees to support piloting or expanding the reach of services, and explore mechanisms for reimbursement that can help to sustain the model beyond the period of GPE funding.
Opioid Workforce Expansion Programs (OWEFPs)

- **Professionals**
- **Paraprofessionals**

Training focuses on OUD and other SUDs

High-need, high-demand areas

Loan Repayment options post graduation
OWEP Outputs 2019–2020

Number of Students Trained

Number of Faculty Trained
OWEP Professional

Key Training Settings

Medically Underserved Community
Primary Care Setting
Rural Area
Other
OWEP Training Models

An **OWEP Professional** grantee uses the following evidence-based training models: motivational interviewing, cognitive behavioral therapy (CBT), dialectical behavioral therapy (DBT), Question, Persuade, Refer (QPR)-suicide prevention, CBT for psychosis, person-centered and strength-based approach, trauma informed care, MAT, Telehealth, Risk Behavior in Youth, Child and Family Team Meeting.

An **OWEP Paraprofessional** grantee uses a Trauma Informed Care (TIC) training model to train Chemical Dependency Paraprofessionals to provide direct care to those with OUD and other SUDs.
Opioid-Impacted Family Support Program (OIFSP)

Grants to institutions to provide tuition and stipend support

Training in high-need, high-demand areas

Expand education and training

Integrated care teams

Partnership with Department of Labor
OIFSP Apprenticeships

Pre-Service (Level I)
6–12 months

Didactic training
Field placement

Tuition, fees, supplies = $3,000†
Stipend = $5,000†

Registered Apprenticeship (Level II)
12-month minimum

Stipend = $7,500 / year†
up to four years

†For full-time trainees. Pro-rated for part-time.
An OIFSP grantee has incorporated the SAMHSA integrated healthcare model into their program. The SAMHSA integrated healthcare model consists of:

(1) Interpersonal Communication;
(2) Collaboration & Teamwork;
(3) Screening & Assessment;
(4) Care Planning & Care Coordination;
(5) Intervention with families;
(6) Cultural Competence & Adaptation;
(7) Systems Oriented Practice;
(8) Practice Based Learning & Quality Improvement; and
(9) Informatics.
Addiction Medicine Fellowship (AMF) Program

- Expands the number of fellows at Addiction Medicine and Addiction Psychiatry fellowship programs trained as addiction medicine specialists
- Integrates primary care with mental health and substance use disorder prevention and treatment
- Emphasis on community based training
- Improves access to OUD and other SUD care
- Offers loan repayment incentive
An AMF training program includes delivering didactic training with complementary reflective components that expose fellows to: the continuum of addiction care; integrated care models; health equity in underserved communities; and basic science underpinning of addiction medicine and principles of clinical practice and research.
Additional Behavioral Health Programs

- Integrated Substance Use Disorder Training Program (ISTP)
- The SUD Treatment and Recovery Loan Repayment Program (STAR LRP)
- NHSC Substance Use Disorder Workforce Loan Repayment Program (SUD Workforce LRP)
- NHSC Rural Community Loan Repayment Program (Rural Community LRP)
Open discussion
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