



OREGON
HEALTH
AUTHORITY

October 16, 2024

HB 2235 Workgroup Meeting #18

Agenda

Start	Time	End	Topic
1:00	5	1:05	Welcome
1:05	5	1:10	Roll Call & Minutes Approval
1:10	10	1:20	Public Comment Period
1:20	10	1:30	CLSS/Peer Work Session Update
1:30	30	2:00	Recommendations
2:00	10	2:10	Break
2:10	40	2:50	Recommendations
2:50	5	2:55	Process Feedback
2:55	5	3:00	Wrap Up

Community Engagement Agreements

- We acknowledge that we bring our lived experiences into our conversations
- We strive to engage non-judgmentally, with respect, humility and inclusivity
- We try to stay open minded
- We work to make conversations accessible, and trauma informed
- We honor everyone's lived experiences and expertise
- We expect it to get messy at times. When it does, we will acknowledge ruptures and focus on repair.
- We show up with humility and a place of vulnerability

Roll Call and Minutes Approval



Public Comment

- Period is 10 minutes total
- Please keep comment to two minutes or less



CLSS/Peer Work Sessions Update

- Culturally and Linguistically Specific Services (CLSS) and peer recommendations special work sessions are complete.
 - Members reviewed original recommendations, discussed wordsmithing, and implied implications.

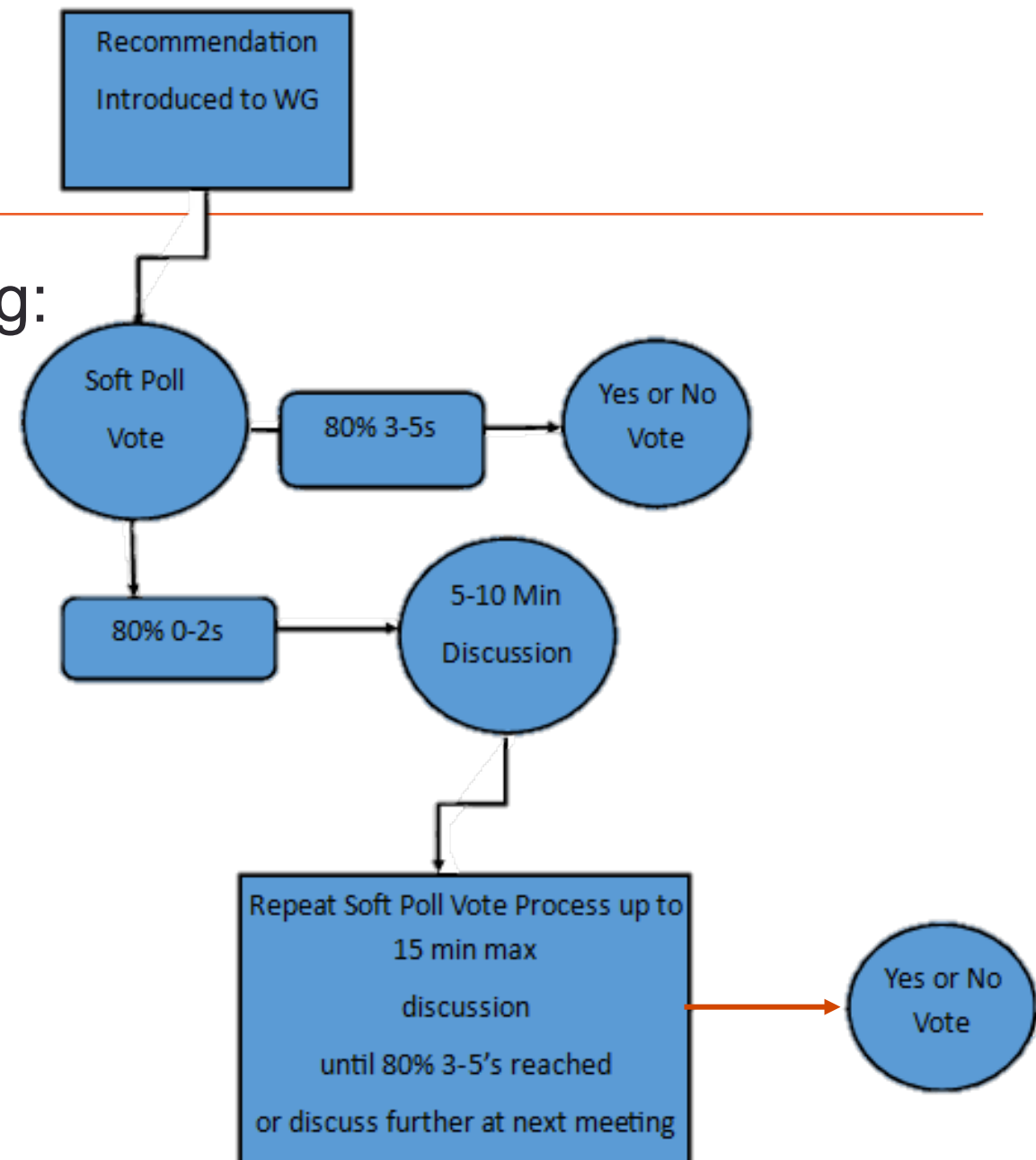
Recommendation

- Fund zero-cost, short-term training for BH programs at Community and Technical Colleges. (Kelli Bosak)
 - Additional information: BH Assistant, Tech, Peer Support, etc. Similar to existing OHA Behavioral Health Workforce Incentives scholarship (SHOI-Like) program. The recommendation could include adding stipulations and/or additional funds to the expected \$5M behavioral health scholarships investment for 2025-2027 biennium.

Soft Polling

Fist to Five simply means the following:

- 0 – Not ready to vote
- 1 – More questions than answers
- 2 – Have a lot of questions
- 3 – More answers than questions
- 4 – Almost ready to vote
- 5 – Ready to vote



Voting Time!

- Yes – this recommendation will be in the first report
 - No – this recommendation will not be in the first report
 - Abstain
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- Reminder: This is not the final wording of the report – we will be working with a report writer and you will have a chance to review and provide input to the draft report.

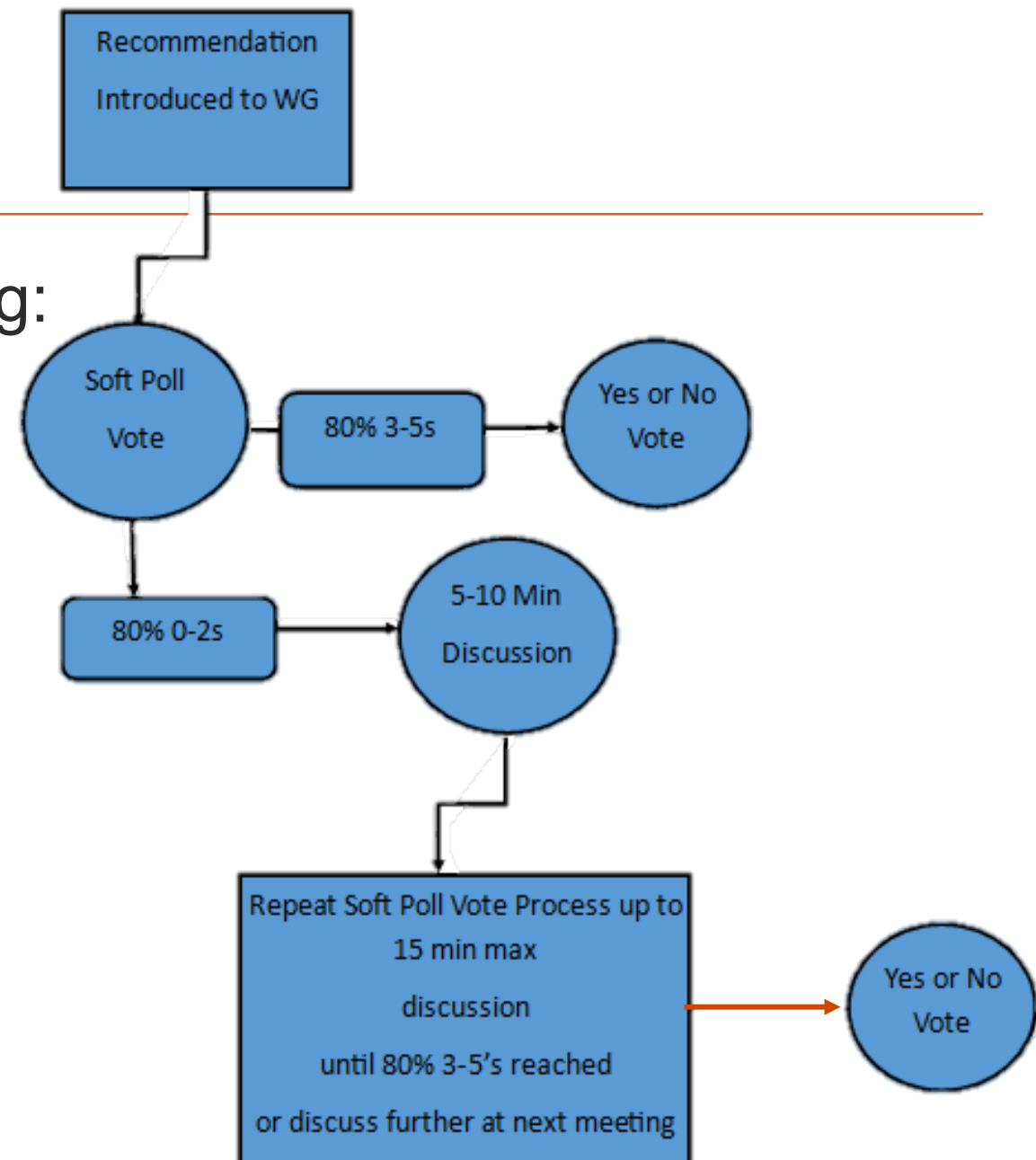
Recommendation

- A new (not existing) program that incentivizes trained providers in acute care settings (i.e., behavioral health inpatient facilities/units) that focuses on increasing pay, increasing safety, and employee wellness and that prioritizes providers who are culturally specific, linguistically specific, and providers who are a part of marginalized communities.

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10 Minute Break



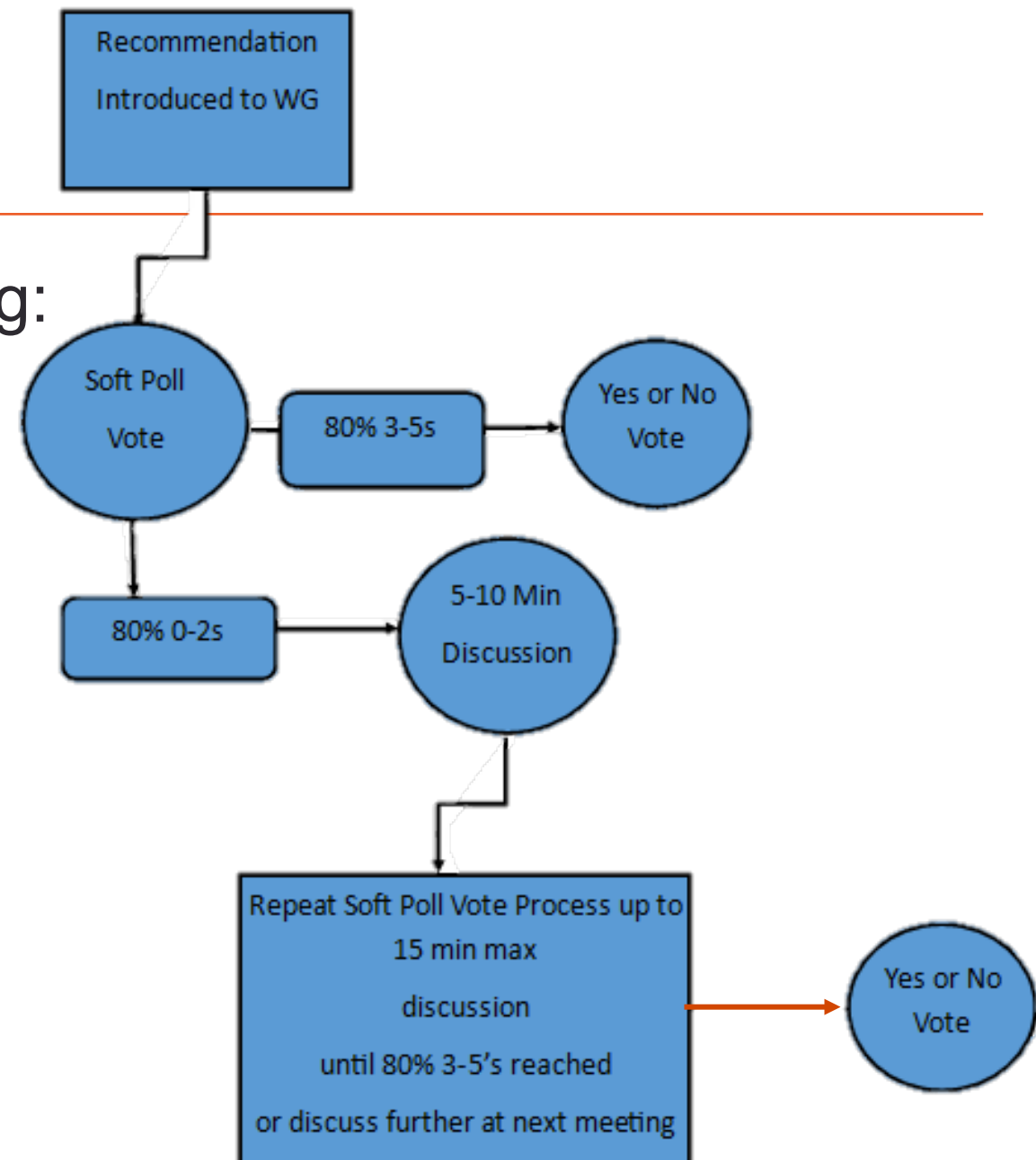
Recommendation

- OHA funding for psychological and physical safety needs improvements, equipment and training for BH staff. (Diane Benavides Wille)
 - Additional information: “The Tri-county Behavioral Health Association is just forming its safety committee, we got some funding from Care Oregon to bring in trainers to teach all staff members in the association Post Traumatic Stress Management as well as a full day training on post-traumatic stress management. Breakdown of Syntegix on badges that are given to staff and related processes for staff support. Debriefing incidents and using external partners to affirm staff involvement and processing the situation.”

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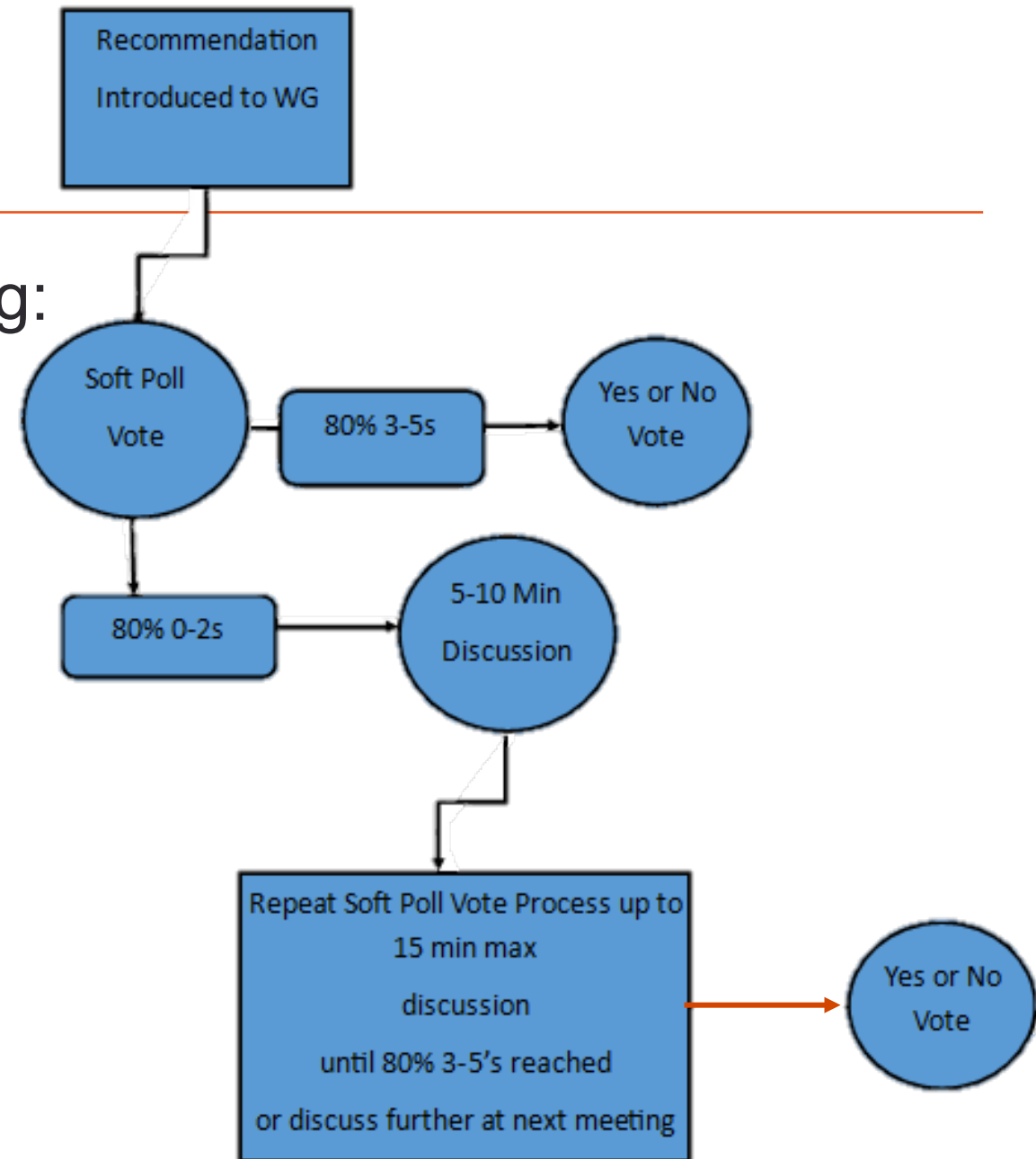
Recommendation

- Fund Regional BH Consortiums across Oregon that prioritize membership of publicly funded BH providers, including organizations that provide culturally and linguistically specific services. (Cheryl Cohen)
 - Additional information: additional funding can be set-aside for the HOWTO grant program for BH Consortiums (such as workforce boards) and other similar projects
 - Easy to implement due to existing program

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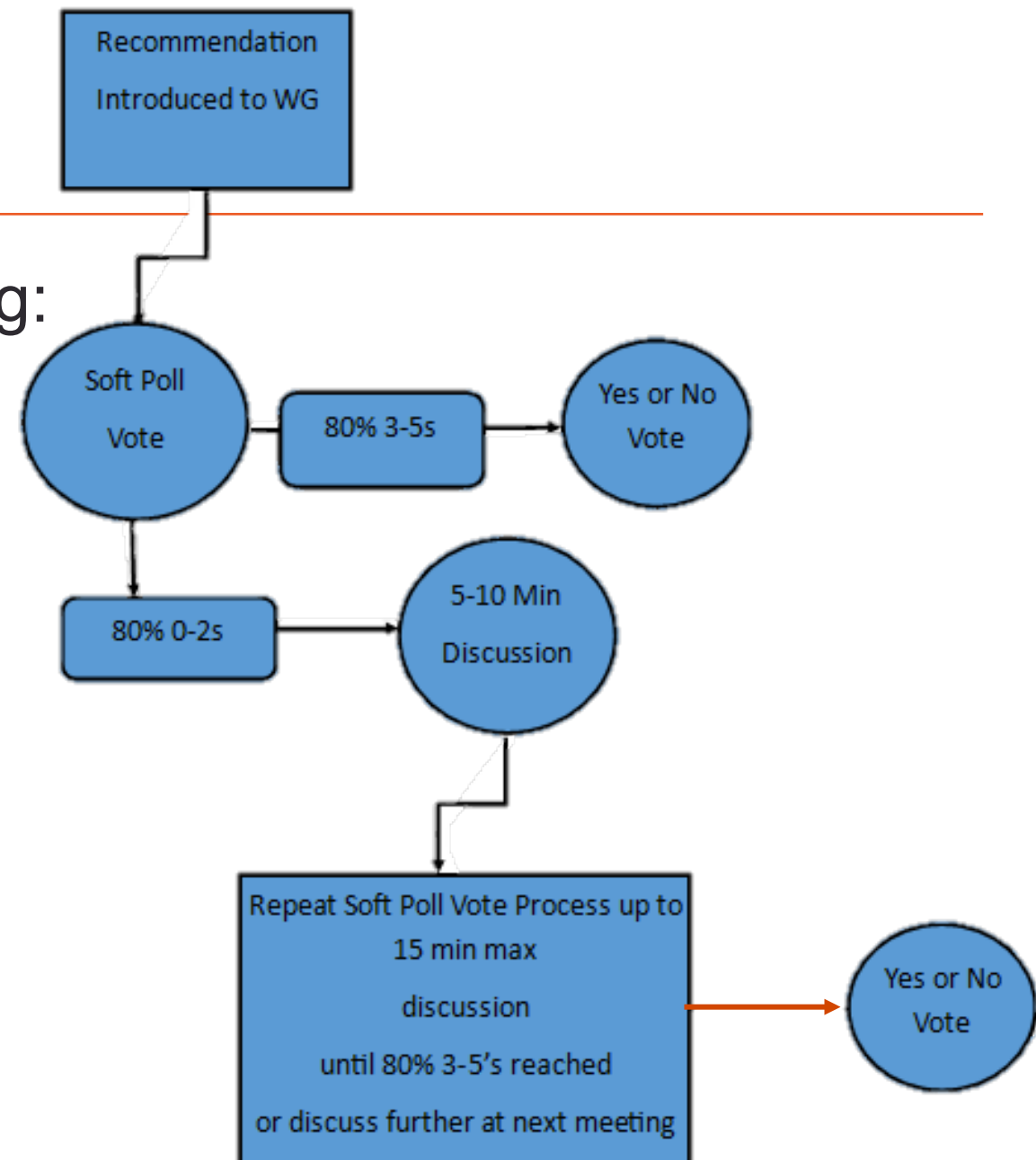
Recommendation

- Modify the existing Clinical Supervision Expansion Grant (CSEG) to include mentoring new clinicians/cohorts of clinicians pursuing licensure in the funding guidelines. This would work by allowing grant recipients to prioritize contracting with pre-existing supervisors in the Oregon community that have an established business or model. (Clark Hazel)
 - Additional information: include specific licensure types and providing specialized consultants for licensed supervisors.

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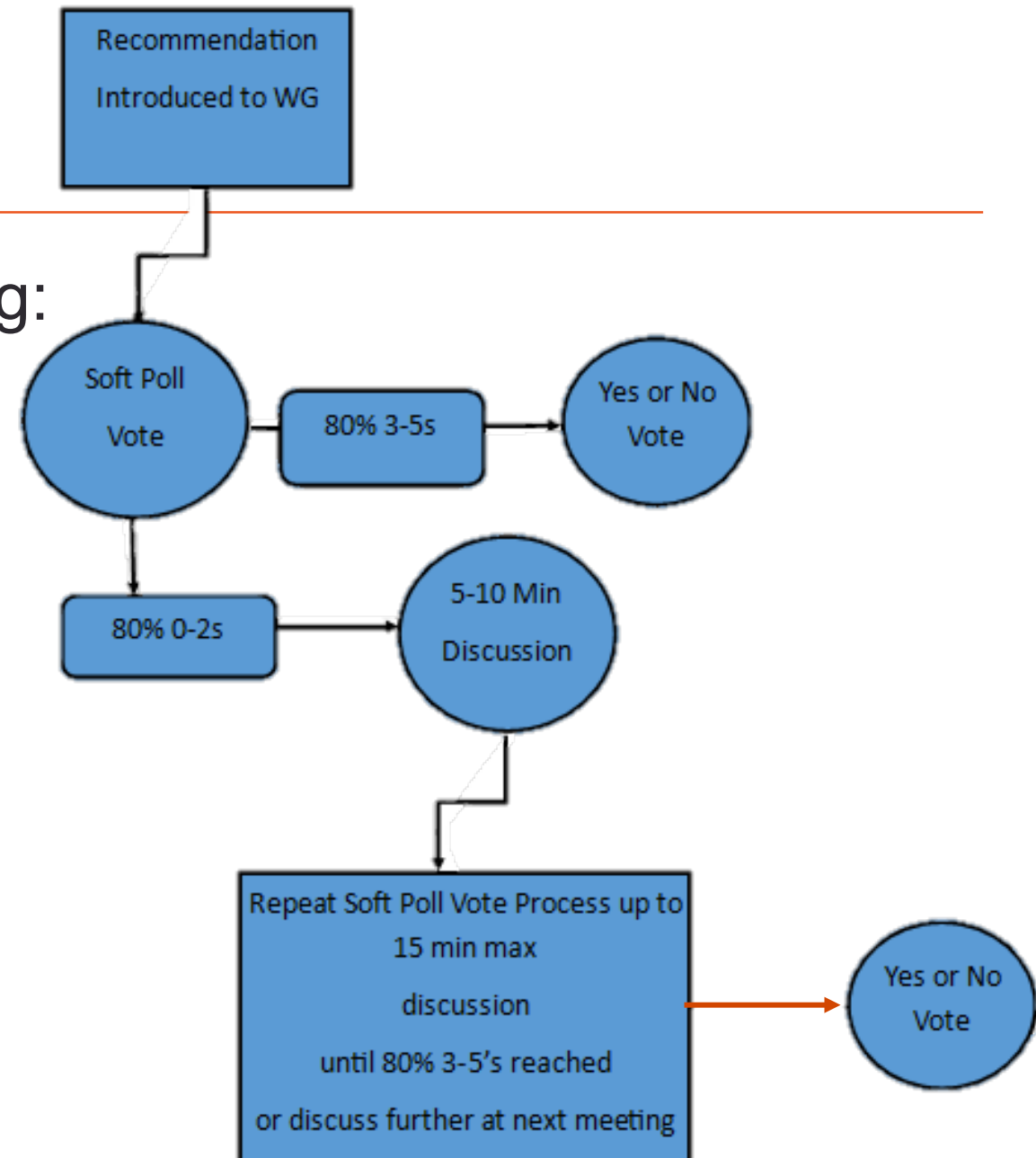
Recommendation

- Allocate funding to comprehensively cover operational, infrastructure, and administrative expenses—such as rent, technical assistance, accounting, utilities, salaries, and capacity building—while also providing capacity-building support through training, mentorship, and networking opportunities to enhance organizational resilience and sustainability for CLSS aligned and peer run organizations.

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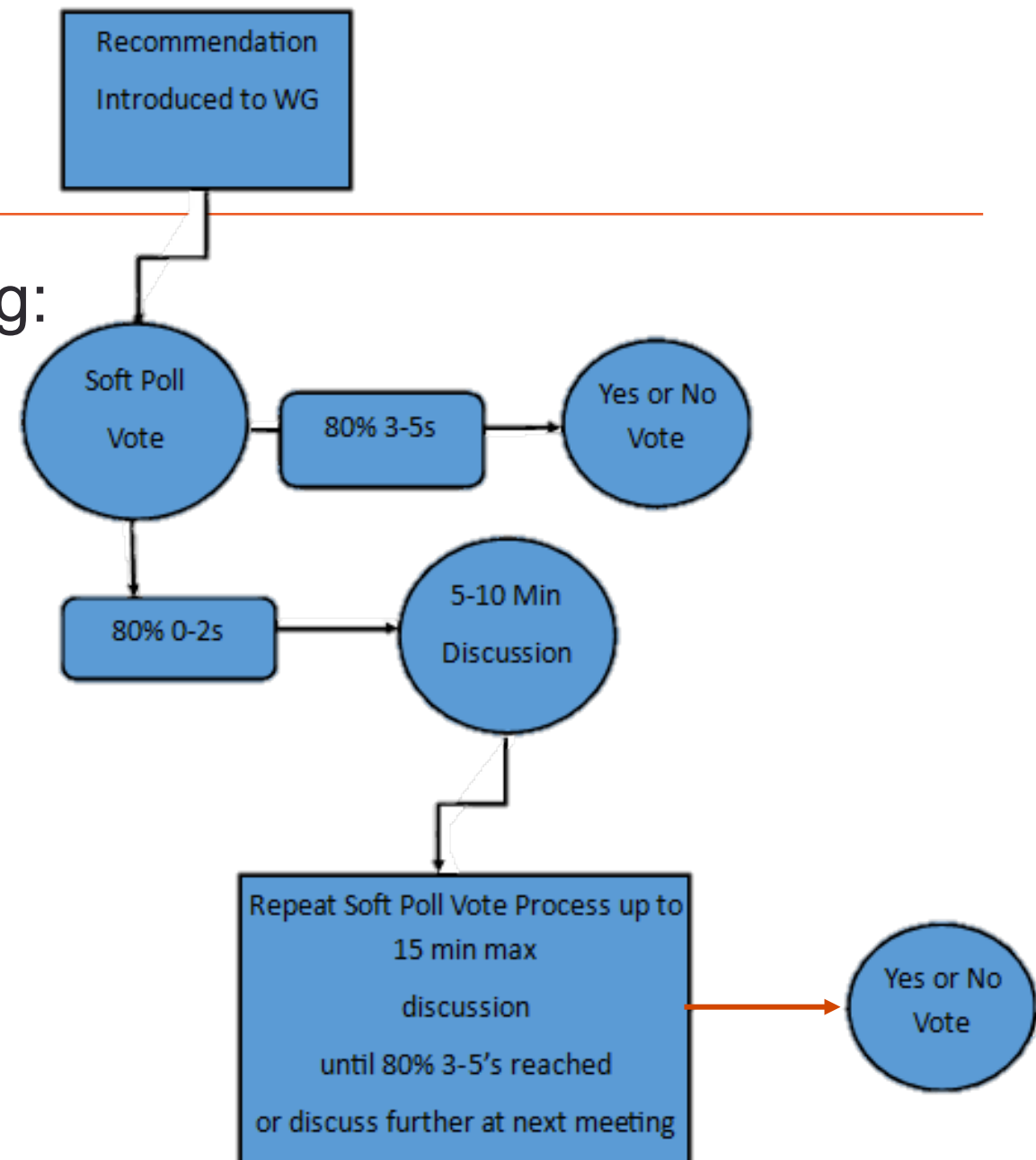
Recommendation

- OHA should use funding “set asides” and prioritization within all behavioral health workforce incentive programs (including loan forgiveness, stipends for continuing education, scholarships for higher education in relevant fields, and bonuses for those who commit to working in underserved areas) to attract and retain individuals in peer services, culturally specific, linguistically specific, and OHA approved CLSS roles. This approach helps mitigate disparities and supports workforce development.

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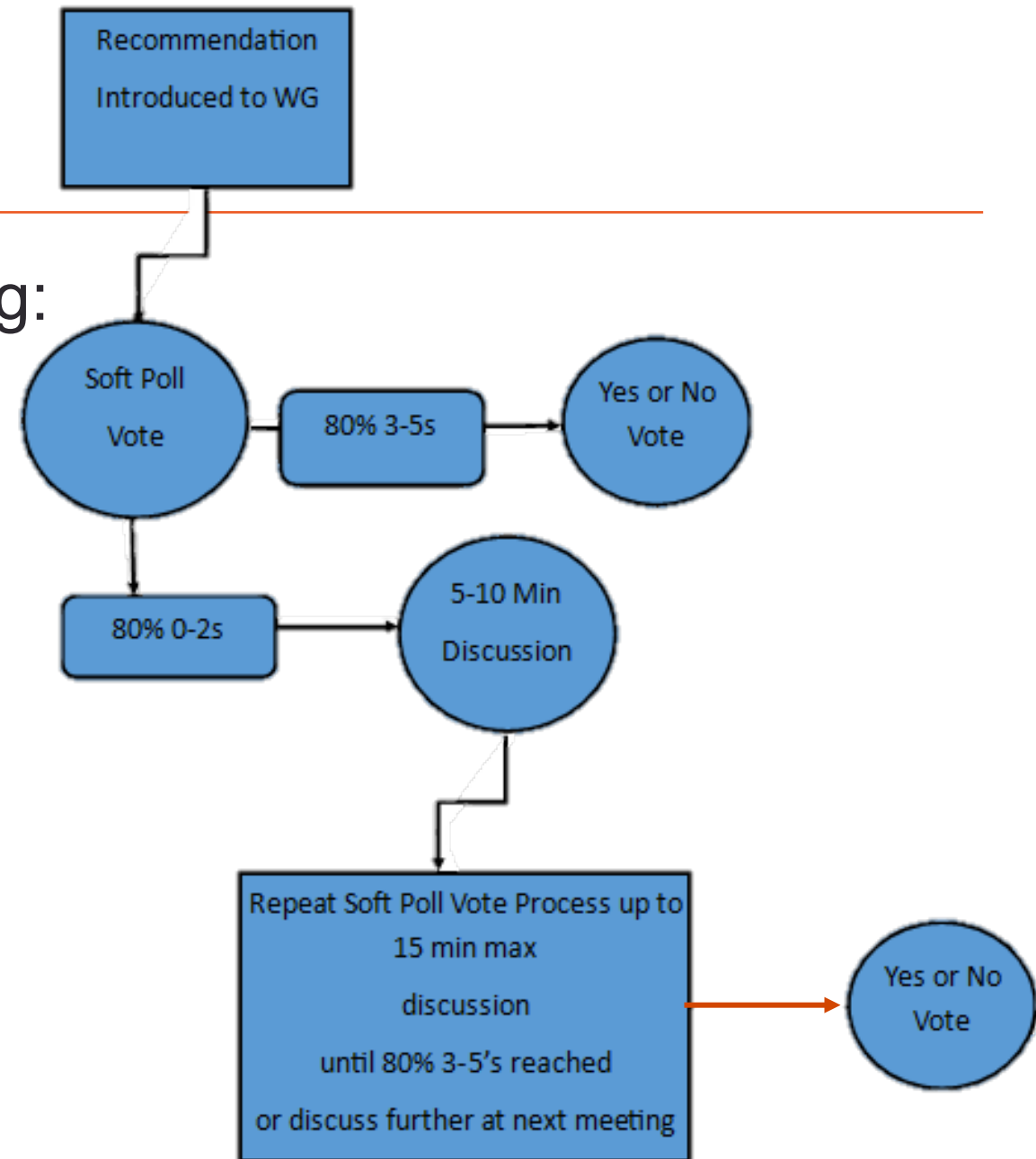
Recommendation: Program Evaluation

- **Recommendation:** OHA to adopt a program evaluation process of behavioral health workforce incentive programs with outcomes that are publicized regularly. This process is to use the least number of state resources as possible and is not to exceed 1% of a grant programs source budget. The measuring of administrative burden on incentive program applicants and recipients is to be a component of each evaluation.
- **Problem:** Behavioral Health Workforce Incentive grants are relatively new (2022), and a formal evaluation process was not created. OHA needs to commit resources so that the impacts, successes and improvements can be reported which will help legislators support decisions about continuing funding for programs.
- **Intended Outcome:** Continual funding for programs that have a direct positive impacts on recruiting/retaining the workforce and expanding those programs.

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Process Feedback

- This is a space for workgroup members to provide feedback about voting process, recommendations, and previous matters.



Thank you!

Next meeting Wednesday, November 6, 1-3pm

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Kelli Taylor (they/them) at HB2235.Workgroup@oha.oregon.gov or 971-273-8155 (voice/text). We accept all relay calls.

Behavioral Health Division
Behavioral Health Workforce Incentives
HB 2235 Workgroup

Website: <https://www.oregon.gov/oha/HSD/AMH/Pages/HB-2235-Workgroup.aspx>

Email: HB2235.Workgroup@oha.oregon.gov

