



REPORT TO THE LEGISLATURE

Workforce Development Annual Report

Cassie Cordell Trueblood, et al., v. Washington State Department
of Social and Health Services, et al.
Case No. C14-1178 MJP

December 5, 2025

Contents

Introduction	3
Background	3
Final Contempt Settlement Agreement requirements for workforce development.....	4
2a. Hire workforce development specialists.....	6
2b. (1) Participation in workgroups	7
Preliminary plans for participation in workgroups for fiscal year (FY) 2026	10
2b. (2) Conduct training needs survey/gap analysis	11
Preliminary plans for conducting training needs survey/gaps analysis in FY 2026	11
2b. (3) Develop a training plan	12
Preliminary plans for training plan additions for FY 2026.....	12
2b. (4) Develop and coordinate training, standardized manuals, and guidelines.....	13
Preliminary plans for developing trainings, manuals, and guidelines for fiscal year 2026	16
2b. (5) Collaborate with community-based organizational workforce development staff.....	16
Preliminary community-based workforce development staff collaboration plans for fiscal year 2026.....	18
2b. (6) Evaluate training programs.....	18
Preliminary training program evaluation plans for fiscal year 2026	18
2b. (7) Additional activities impacting the workforce.....	19
2f. - g. Forensic workforce report on education and training recommendations.....	20
Recommendations on specific steps to support Trueblood Agreement success	21
Summary	24

Introduction

The Department of Social and Health Services is required to submit an annual report each year by December 5 to describe progress in meeting specific expectations concerning workforce development activities pursuant to the Trueblood Contempt Settlement Agreement (hereafter “Settlement Agreement”). This sixth annual report details how the Workforce Development Program is contributing to the goals of compliance with the Court’s orders and providing support for the behavioral health workforce.

Background

All criminal defendants have the constitutional right to assist in their own defense. If a court believes a disability due to a mental health condition may prevent a defendant from assisting in their own defense, the court puts the criminal case on hold while an evaluation is completed to determine the defendant’s competency. After an evaluation, the court may determine the defendant competent to stand trial, resulting in a continuation of the criminal proceeding. If the court determines the defendant is not competent to stand trial, the court may order the defendant to receive mental health treatment to restore competency.

In April 2015, a federal court found that the Department of Social and Health Services was taking too long to provide these competency evaluation and restoration services in Trueblood *et al. v. Washington State DSHS*.

As a result of the permanent injunction entered in this case and subsequent appeals, the state is required to provide court-ordered in-jail competency evaluations within 14 days and inpatient competency evaluation and restoration services within seven days of receipt of a court order. The Trueblood injunction applies to people who are detained in city and county jails awaiting competency evaluation or restoration services. Many of the programs created because of the Trueblood lawsuit also target people who have previously received competency evaluation and restoration services and are released and at risk for re-arrest or re-institutionalization.

Implementing programs that train first responders and the forensic workforce in recognizing and responding to mental health symptoms increases the likelihood that people will receive services and treatment when they are needed. Providing timely services and treatment can divert people experiencing mental health challenges from the criminal court system.

On Dec. 11, 2018, the Court approved a comprehensive Contempt Settlement Agreement, which was designed to move the state closer to compliance with the court injunction. It included a plan for phasing in programs and services. In each phase, the state has focused its efforts within specifically identified and agreed-upon geographic regions. The Settlement Agreement includes three phases of two years each and can be expanded to include additional phases.

Phases run parallel to the legislative biennia, beginning with the 2019-2021 biennium. As of fall 2025, the Settlement Agreement is in Phase 4:

- Phase 1: July 1, 2019-June 30, 2021. Pierce County, Southwest, and Spokane County regions.
- Phase 2: July 1, 2021-June 30, 2023. Phase 1 regions continue and add King County region.
- Phase 3: July 1, 2023-June 30, 2025. Phase 1 and 2 regions continue and add Clallam, Jefferson, Kitsap counties (the Salish region), and Mason, and Thurston counties (the Thurston/Mason region).
- Phase 4: July 1, 2025-June 30, 2027. Phase 1, 2, and 3 regions continue and work to bolster programming within the existing phased regions.

Final Contempt Settlement Agreement Requirements for Workforce Development

Workforce development (WFD) involves initiatives that educate and train people to create, sustain, and retain a viable workforce that meets the needs of current and future business (e.g., services) needs. The DSHS Office of Forensic Mental Health Services (OFMHS) implements and oversees a forensic mental health services workforce development program to address workforce needs to successfully implement the initiatives within the Settlement Agreement. In addition to providing relevant training for its own staff, DSHS also provides training to jail staff, the courts, attorneys, and other partners.

The Settlement Agreement requires DSHS to employ workforce development specialists who focus on workforce development activities in the following areas as specified on pages 33-35 of the Settlement Agreement:

III. SUBSTANTIVE ELEMENTS

E. Workforce Development

2. Workforce Development; Degree and Certification Programs
 - a. The State will seek funding to hire, or contract with, workforce development specialists. The positions will be assigned to specific workforce functional areas to include:
 - (1) Community, including crisis response, homeless, in-home, residential, and clinic-based services.
 - (2) Inpatient, including residential treatment facilities, private hospitals, and state hospitals.
 - (3) Law enforcement and corrections, including jails and prisons.

- b. Workforce development specialists may conduct or manage the following duties:
 - (1) Participate in workforce development workgroups with stakeholders such as state hospitals, community healthcare organizations, law enforcement, and jails.
 - (2) Conduct training needs surveys/gaps analysis.
 - (3) Assist in the development of a master training plan(s)
 - (4) Develop and coordinate training, including standardized training manuals and guidelines.
 - (5) Collaborate with other community-based, organizational workforce development staff.
 - (6) Conduct training program(s) evaluations; and
 - (7) Other duties as assigned at the sole and exclusive discretion of the State.
- c. The functions and duties outlined in this subsection may be implemented with direct hiring, contracting, or any combination thereof.
- d. The workforce development specialists may collaborate with other workforce development efforts (for example, the workforce development efforts of the Economic Services Administration), as appropriate.
- e. The State will produce a report annually describing the activities of the workforce development specialists outlined in this subsection and making recommendations about the specific workforce development steps necessary to ensure success of this Agreement. The State will distribute this report to key and interested legislators. This report will also be distributed to the Executive Committee, and that Committee shall consider whether to adopt those recommendations for possible inclusion in future Phases of the Agreement. The annual schedule for this report shall be set to align with the Phased approach of this Agreement, and to allow for consideration of the Executive Committee's recommendations in the established state budget process.
- f. The State will assess the need and target areas for training programs, certification programs, and possible degree programs. The State may collaborate with colleges, including community and technical colleges, and universities to accomplish this task, but shall also have discretion to accomplish this task through other means. This assessment shall include, but not be limited to, the following elements:
 - (1) Existing training, certifications, and degree programs in Washington for relevant professions; for example, nursing, psychiatry, psychology, counseling, law enforcement, or other professions determined at the discretion of the State.
 - (2) Programs for relevant professions in other states.
 - (3) Statewide staffing needs for all programs covered by this Agreement for a period of the subsequent ten years.

- g. Upon completion of the assessment in § III.E.2.f. above, the State shall produce a report regarding that assessment that may be shared with appropriate committees of the Legislature. The report will include:
 - (1) High, medium, and low-cost recommendations, and
 - (2) Long, medium, and short-term recommendations for future action regarding training and certification programs.
- h. While the State shall pursue the elements outlined this subsection in good faith, the State is not required to establish new degree or certification programs pursuant to this Agreement.
- i. In addition to the requirements outlined in § III.E.2.a-h. above, the State will make all reasonable efforts to fill the positions required to timely implement all Phases of this Agreement, as outlined in § IV.A. Reasonable efforts may include the use of incentives.¹

This report describes progress from July 1, 2024, to June 30, 2025, in meeting these requirements, and discusses strategies for continued progress over the coming year. The requirements listed above serve as a framework for progressing systematically through DSHS' workforce development program. A section follows on each workforce development duty that discusses program activities in each task area. The report includes recommendations regarding specific workforce development steps needed that, if implemented, could help ensure success of the Settlement Agreement.

2a. Hire workforce development specialists

The department is required to seek funding to hire workforce development specialists. Specialists are assigned to the following workforce functional areas: community, inpatient, and law enforcement. Funding was allocated in 2019 for positions dedicated to workforce development activities and DSHS hired four full-time equivalent workforce development specialists assigned to provide workforce development in the functional areas mentioned above as well as in jail technical assistance (JTA).

2b. (1) Participation in workgroups

The workforce development team participates in internal and external workgroups in the forensic mental health field. These workgroups address several critical topics impacting the development and/or retention of the workforce. The team's workgroup participation is listed below:

1. The King County Competency Continuum workgroup

This workgroup coordinates across state and local partners at the intersection of criminal courts, forensic mental health, and behavioral health service systems, regarding competency services and the people who receive them, to collaboratively improve this continuum. It includes a diverse group of stakeholders in King County who work with Trueblood class members such as representatives from service provider organizations, the Seattle Police Department, jails, diversion programs, attorneys, judges, tribes, and the Downtown Emergency Services Center. Through participation in this workgroup, DSHS continuously learns more about King County's specific workforce development needs regarding forensic mental health and identifies ways to support those efforts.

2. Hiring, Onboarding, and Staff Development Committee

This workgroup is led by OFMHS workforce development and focuses on collaborating with internal divisions such as IT and Human Resources to ensure OFMHS processes and procedures are aligned and meeting agency standards.

3. The Telehealth Governance Committee

The Telehealth Governance Committee was established to better meet the needs of expanding telehealth usage. The group is tasked with developing and expanding DSHS telehealth capabilities as well as supporting existing infrastructure used by DSHS. The expansion and strengthening of telehealth for applications such as healthcare appointments and forensic assessments provide an alternative method to in-person interactions. This often brings efficiencies pertaining to patient wait times, staff travel, service provider availability and scheduling challenges. Workforce development staff lead this committee, facilitating discussions around prioritization, goals, and future planning. WFD staff are also responsible for collecting and compiling data for the telehealth key performance indicators and the site status databases.

4. DSHS' E-learning Community of Practice

The e-learning community of practice is a place for e-learning developers throughout state government to share ideas, practice skills and seek guidance. It also provides an opportunity for any new developers to ask questions or get help navigating their project. Staff regularly participate with this group to keep pace with training best practices.

5. The DSHS Employer of Choice Workgroup

The workforce development team participated in the DSHS Employer of Choice meetings and workgroups to identify areas that could be improved and add value to DSHS as an employer of choice. This has led to positive enhancements in both the recruitment and retention of behavioral health staff.

6. The WSU Rural Jail Project Collaboration

The Rural Jail Project led by Washington State University is grant-funded by the Vera Institute of Corrections, which enables Washington State University to partner with rural counties, criminal justice leaders, and stakeholders to learn about their local systems, generate potential solutions, and to develop policies tailored to the specific local needs and resources of these communities. These rural-focused policy solutions are then brought to the attention of policymakers. Workforce development staff continue to meet regularly to discuss new developments, best practices, and challenges facing jails statewide.

7. The Washington Association of Sheriffs and Police Chiefs (WASPC) Jail Commanders Meeting

This meeting is hosted every other week by WASPC. It covers topics and facilitates discussions around issues relevant to jails in the state. Staff recruitment and retention is one such issue. Workforce development staff regularly attend and contribute to the discussions.

8. Washington Statewide Reentry Council

Workforce development staff participate in the Washington State Reentry Council meetings, gathering and sharing information about reentry as part of jail technical assistance. This role helps to inform varied partners of the council's efforts to expand services to jails.

9. Southwest Reentry provider meeting

Workforce Development is actively involved in these meetings, which facilitate networking and educational opportunities for organizations serving criminal court-involved adults in the State's Southwest region. They highlight critical community supports available to people upon release and beyond as well as city, county, and state level initiatives impacting the forensic system. The southwest reentry provider meeting unifies a broad array of systems that support people upon release. Meeting attendees include representatives from peer support organizations, faith-based support services, managed care organizations, courts, probation and legal system representatives, behavioral health treatment providers, employment services, housing and homelessness service providers, educational and vocational service providers, public health organizations, medical organizations, special populations providers (domestic violence, veterans, youth, intellectual and developmental disabilities), and other organizations.

10. Behavioral Health and Habilitation Administration (BHHA) Hiring Process Mapping Workgroup

The objective of the Hiring Process Mapping Workgroup is to collaboratively develop standardized and consistent hiring practices throughout BHHA and ensure all hiring processes follow policy and best practices. This workgroup is composed of representatives from each BHHA office/facility. OFMHS workforce development staff actively participate in the hiring process mapping, contributing valuable expertise.

11. OFMHS Telehealth Committee

This workgroup is led by OFMHS Workforce Development and focuses on gathering information from OFMHS staff including evaluators, navigators, and schedulers to facilitate the implementation of telehealth systems for evaluations of competency, and communication/coordination for navigator services. This group collaborates with internal divisions such as IT to ensure telehealth needs are met, best practices are followed, and standardization occurs.

12. DSHS Digital Access Plan Committee

Workforce development was a member of this workgroup facilitated by the DSHS Office of Equity, Diversity, Access, and Inclusion's Digital Accessibility Program to assist in creating the DSHS Digital Access Plan. The plan is intended to meet diverse needs and increase digital accessibility through inclusion for internal and external customers. It will also ensure DSHS adheres to legal requirements such as section 508 of the federal Rehabilitation Act, the State's WaTech USER-01 Accessibility Policy, and the U.S. Department of Justice's final rule (April 2024), which updates regulations within Title II of the Americans with Disabilities Act. Due to state budget cuts the workgroup has been discontinued but the team is looking for alternative forums to continue this important work.

13. Employee Engagement Survey workgroup

This BHHA workgroup is focused on improving future results for BHHA in three areas based on employee feedback from the 2024 DSHS Employee Engagement Survey, including organizational change management, involvement and belonging, and growth and development. The workgroup has developed action items in each category, and the workforce development team is taking the lead in implementing these within OFMHS. These initiatives are aimed at improving workplace culture and supporting staff within BHHA. This work aligns with the BHHA strategic goal: Be an Employer of Choice; success measure 4.2: Increase the percentage of positive responses on the DSHS Employee Engagement Survey question, "I feel supported during organizational change at this agency."

14. BHHA Recruiting, Managing, and Retaining Talent workgroup

This collaborative workgroup is part of DSHS' BHHA results map work and is specific to recruitment and retention efforts within BHHA. Workforce development staff collaborate with other BHHA staff in contributing subject matter expertise.

15. OFMHS Onboarding workgroup

This workgroup is led by WFD team members and strives to further refine and improve onboarding practices by implementing new and updated procedures. It is OFMHS' goal to enhance efforts by using a standardized approach to onboarding for each new employee through the development and use of the Onboarding Training Plan, as well as standardized training material and courses. This workgroup focuses on best practices with the goal of training and retaining quality employees by providing an environment that focuses on staff inclusion and wellness, integrity and accountability, respectful collaboration, diversity, and quality purpose-driven services.

16. BHHA New Employee Orientation Committee (NEO)

This committee is working toward standardizing NEO across the Behavioral Health and Habilitation Administration. Committee members are collecting information on what different BHHA facilities and offices need and reviewing the proposed blocks of instruction for priority order and policy alignment. Requirements and drivers are being consolidated and a with the goal of finding a common core that can be standardized across BHHA regardless of job class.

Preliminary plans for participation in workgroups for fiscal year (FY) 2026

As the team continues active participation in the workgroups discussed above, they have garnered appreciation for their insights, perspective, and broad knowledge base. They have also developed connections leading to deeper understanding and greater participation. During FY 2026, the team will continue to build relationships with groups and organizations that employ the behavioral health workforce and those having an impact on workforce recruitment and retention. The workforce development team anticipates seeking additional opportunities for participation in relevant workgroups, as they are identified, and continuing outreach to external stakeholders to develop increased insight into the forensic mental health workforce needs in the varied communities throughout Washington.

2b. (2) Conduct training needs survey/gap analysis

An additional survey developed and sent out by the workforce development team was delivered to behavioral health partners in the community during FY 2022. There were two questions. The first question, "What do you see as the most significant challenges to recruitment and retention of the behavioral health workforce in Washington?" highlighted the longstanding trends of staff being paid inadequate wages compared to cost of living and staff burnout ending careers prematurely. The second question, "What strategies have you employed, or have considered using, to recruit and retain the behavioral health workforce?" revealed a plethora of strategies that have been used, including but not limited to, offering internships and practicum opportunities, staff sign on and retention bonuses, and employing recruiting firms to assist with hiring. The Trueblood implementation plan for Phase 3 directed the workforce development team to share the results from the behavioral health workforce survey and conduct a follow up survey to identify current specific staffing challenges. WFD posted the initial survey [HYPERLINK "https://www.dshs.wa.gov/sites/default/files/BHSIA/FMHS/DSHS-template-BHWF-survey.pdf"](https://www.dshs.wa.gov/sites/default/files/BHSIA/FMHS/DSHS-template-BHWF-survey.pdf) results online and sent an updated survey to behavioral health providers throughout the state, including all Behavioral Health Administrative Service Organizations and Managed Care Organizations serving Washington state. Ninety-five responses were received, highlighting issues such as employee burnout, pay that is not on par with the cost of living, inadequate service reimbursement, and difficulties recruiting people to careers in behavioral health. The results of this survey have and will continue to guide workforce efforts such as targeted outreach and training for the coming year.

Focusing on the recruitment and retention of corrections staff, the jail technical assistance program surveyed jails statewide to identify related challenges and strategies. Using this information, JTA developed a [HYPERLINK "https://youtu.be/kKbAURXXZ5s"](https://youtu.be/kKbAURXXZ5s) recruitment and retention webinar where numerous jails participated and discussed the topic. In FY 2025 workforce development staff edited and posted the video on the external website. Following its learning events, JTA participants are surveyed about future topics of interest and provided an opportunity for feedback. Completed evaluations are reviewed and used to assess staff training needs and to enhance future learning events.

Also in FY 2025, WFD staff developed and deployed a provider survey to assess healthcare provider satisfaction for those practitioners serving residents in BHHA facilities via telehealth. This was the first such survey and respondents provided positive feedback regarding their use of the DSHS telehealth technology and overall experience.

Preliminary plans for conducting training needs survey/gaps analysis in FY 2026

During FY 2026, workforce development specialists will continue to assess training gaps through staff development and engagement surveys, information gathered through participation in workgroups, and through direct interviews and discussions. The team will also work toward addressing identified training needs through varied avenues, including committee work related to the recent Groundswell recommendations, OFMHS New Employee Orientation, JTA surveys, provider survey responses, through the development of trainings and materials, and by dissemination of content (via our internal and external websites and through webinars).

2b. (3) Develop a training plan

WFD developed a master training plan during FY 2021. The master training plan detailed the career pathways within forensic mental health and the training needed for the success of those career pathways. The plan also conceptually outlined how the DSHS workforce development training efforts fit into a broader set of training systems that are already in place and are operated by multiple system partners. It also described strategies for how DSHS and its workforce development team fit into this complex system and add value to the development of a skilled and robust forensic mental health workforce.

Working within this framework throughout FY 2025, staff continued facilitating New Employee Orientation for OFMHS staff, provided Breaking Barriers training for OCRP staff, and supported the monthly JTA training events. In this reporting period, the workforce development team also helped develop a NEO for OFMHS administrative assistants and created a new employee training plan template, which has been distributed to all OFMHS supervisors. These well-organized onboarding and training plans last six months to a year after hire and help both the new employee and the supervisor set goals and monitor progress. They provide new hires with the necessary information and tools to be productive and successful in their new role. They also aid in employee retention by promoting employee wellbeing and job satisfaction.

Preliminary plans for training plan additions for FY 2026

During fiscal year 2026, workforce development staff will continue to refer to the master training plan to guide their work. These efforts will include continuing to provide New Employee Orientation for OFMHS staff, supporting the monthly JTA training events, continuing to provide Breaking Barriers training, and developing plans to offer the “How Being Trauma-Informed Improves Criminal Justice System Responses” training to interested partners. Additionally, during FY 2026 workforce development staff will continue to manage the curriculum review committee to ensure standardization and quality of OFMHS trainings. The team will also continue to address training requests and questions sent to the training request mailbox.

2b. (4) Develop and coordinate training, standardized manuals, and guidelines

Workforce development maintains a master training list, which outlines available training topics, intended audience, training schedule, and details about the training format (e.g., in-person, self-directed, or webinar). The team regularly reviews this list for updates. The team also maintains a master instructor list of external subject matter experts. This list is a resource for professional consultation, peer review, and instructor solicitation.

WFD maintains two guidebooks for the workforce, which are available on the OFMHS website. The first is [Best Practices for Behavioral Health Services in Jail Settings](#). This guidebook includes best practices guidance on topics relevant to people with behavioral health conditions in the criminal court system. In addition to feedback and requests from webinar participants, the guidebook serves as a source for monthly jail technical assistance webinar trainings and will continue serving as a foundational source for future trainings this year. In FY 2024, the team initiated an effort to revise and update the guidebook, soliciting feedback from many different subject matter experts and partners. It has gone through a rigorous review and update, which has included reviews from OFMHS leadership, assistant Attorneys General, Disability Rights Washington, and DSHS's communication department. Workforce development is finalizing the revised edition and plans to review it on a five-year cycle.

The second guidebook, [The Intersection of Behavioral Health and the Law](#), was created through a collaborative effort between DSHS and HCA. It provides the history, rules, laws, services, and practices pertaining to forensic mental health settings. The guidebook is the foundational source for the online training series. This foundational training focuses on the strategic goal of addressing the widespread need for "forensic literacy" that is noted by Groundswell and others. The five-module online training series covers an overview of the Trueblood lawsuit, competency, competency evaluation, competency restoration, diversion, and continuity of care. These online training modules provide learners with a foundational understanding of our state's forensic mental health system, with a particular emphasis on competency to stand trial and factors related to the Trueblood lawsuit and Settlement Agreement. In FY 2025, the workforce development team continued the work of updating and revising both the guidebook and the training series. This work has expanded to include the creation of additional modules focused on the topics of civil commitment and NGRI, which will be included in both the written curriculum and online training series. The anticipated completion date for these is mid-year 2026.

In the previous reporting period, the team began updating and revising the OFMHS Hiring Guidebook to align with DSHS' current policies and best practices. Significant changes to the guidebook include incorporating a more user-friendly format for users to take notes, check off and/or assign tasks, saving the guide to specific positions being filled, and providing contact information for help in each section. Newly created supplemental job aids and forms were also added. In FY 2025, staff continued to review and update the guidebook as changes occurred and continued to work in tandem with the BHHA Hiring Process Mapping Workgroup, Human Resources hiring tools and resources, and IT services, to ensure alignment with all current policies that pertain to hiring. OFMHS' goal is to provide all applicants with exemplary customer service throughout the hiring process.

During FY 2025, WFD continued to coordinate with HCA's Outpatient Competency Restoration Program (OCRCP) staff to provide contracted providers training on the Breaking Barriers program. The standardized training uses the Breaking Barriers CORE curriculum instructor and patient workbooks and is provided to staff who facilitate any aspect of the Breaking Barriers program to patients who are ordered into competency restoration. In FY 2024, two additional workforce development staff were trained as master instructors and have subsequently provided this training. The training has also been recorded and is in the final editing stages to be offered as a prerequisite to an instructor-led question and answer session. The expected completion date is the end of this calendar year.

Other training projects staff undertook in FY 2025 were the development of online trainings, including one for the NGR team and about attorney client privilege. These trainings were uploaded into the state's Learning Center by workforce development staff who manage the Learning Center for OFMHS. This allows leadership to assign training and track completion. The team also worked on editing, adding closed captioning, and posting to the Learning Center three training courses on making Microsoft Word, Microsoft PowerPoint, and Adobe Pro PDF documents accessible by using the built-in accessibility features and screen readers.

In FY 2025, staff also completed an online organizational development training on equity, diversity, access, inclusion, and belonging, titled Building Belonging at BHHA: Creating a workplace culture to be our best. This training covered topics such as how to build a culture of belonging in the workplace, getting to know your colleagues in a professional and constructive way, and how to consider our differences to ultimately bring us together. This training is available to all BHHA employees.

In addition to these training courses, workforce development staff continue to provide the OFMHS New Employee Orientation. In FY 2025, OFMHS NEO expanded content on equity, diversity, access, inclusion and belonging (EDAIB) topics to include information on how to participate in the OFMHS EDAIB community of practice and how to access statewide business resource groups that support and advocate for specific demographic groups. During this reporting period, more than 71 employees were trained.

Lastly, DSHS offers monthly webinars for law enforcement and corrections staff by providing opportunities for information sharing, discussion, and education. This group is one of three workforce functional areas assigned to workforce development staff as required by the Settlement Agreement. Community and inpatient behavioral health service providers are the other two workforce functional areas. JTA provides the monthly webinars as part of its jail technical assistance programming and WFD staff contribute to these learning events by assisting with facilitation, developing and researching content, working with the Trueblood communications team, editing, and posting recorded materials. These events garner participation from a diverse group of partners, which includes law enforcement and corrections staff and spans the workforce functional areas of community and inpatient services. This audience includes representatives from jail leadership, mental health professionals, nurses, behavioral health navigators, certified peer counselors, legal system partners, diversion specialists, reentry specialists, case managers, transition specialists, designated crisis responders, therapists, community mental health, law enforcement, and educational partners. Some of the topics designed for this broad audience in FY 2025 include:

- Motivational Interviewing Basics, July 2024
- Not Guilty by Reason of Insanity, August 2024
- UW Psychiatric Consultation Line, September 2024
- Diversion Navigators, October 2024
- Statewide Reentry Council Expands Efforts to Jails, November 2024
- The Washington Rural Jails Project: Lessons from Rural Places and People, January 2025
- Olympic Health and Recovery Services: A Comprehensive Look at Programing for Thurston County Jail, February 2025
- Role of the Transition Coordinators, Clark County Jail Reentry Program, March 2025
- Who is WASPC? Washington Association of Sheriffs and Police Chiefs, April 2025
- The Human Dignity Model, WA State Reentry Council, May 2025
- Recovery Navigator Program Impacts Lives at the Asotin County Jail, June 2025

During this reporting period, learning event participation averaged 17 people per event. The largest event was a presentation from the Washington State Reentry Council which had 48 participants. Another well attended event was Transforming Lives in Jails by Using Human Dignity Models. JTA continues to reach out to the statewide network to solicit for topics, presenters and panel discussions. This fiscal year the program also switched to a new registration platform which has created a more efficient and informative process, improving participation in the events. WASPC is also showcasing the JTA events during their bi-weekly jail commander meetings. JTA's statewide distribution network list continues to expand to nearly 300 professionals. As members increase, JTA can share more information and collaborate with more partners around the state of Washington.

Preliminary plans for developing trainings, manuals, and guidelines for fiscal year 2026

Preliminary plans for FY 2026 involve completing the updates for Best Practices for Behavioral Health Services in Jail Settings and The Intersection of Behavioral Health and the Law to include communicating the updates and availability to partners and re-posting them on the website. Plans for FY 2026 also include completing the updates and additions to the virtual training series An Overview of Washington's Adult Forensic Mental Health System and the transcripts for the trainings related to evaluations for people with developmental and/or intellectual disabilities. Plans to review and update the Hiring and Onboarding guidebooks and associated SharePoint sites are underway. Additionally, Workforce Development Staff will continue to support various partners by addressing training needs as they are identified. They will also continue to add resources and links to the DSHS website relevant to community providers, inpatient providers, law enforcement and corrections, and other interested parties.

2b. (5) Collaborate with community-based organizational workforce development staff

Collaboration with community-based organizational workforce development staff is crucial to improving recruitment and retention of the forensic workforce. Through strong connections and engagement, staff better understand the needs and challenges that exist in different areas of the state. In FY 2025, DSHS workforce development staff collaborated with King County workforce partners, the Workforce Training and Education Coordinating Board's Behavioral Health Workforce group, groups supporting the certified peer counselor workforce, SWACH's HealthConnect supporting Community Health Workers, BHHA organizational development team, and regional behavioral health providers in Pierce County and Southwest Washington. Staff also continued to nurture connections and collaborated with relevant BHHA workforce development partners.

The King County Department of Community and Human Services Behavioral Workforce Learning Collaborative brings together educational, organizational, provider, and state and local government partners to address behavioral health workforce needs throughout the state and explore innovative strategies in support of this workforce. Workforce development staff actively participate in this collaborative work which provides an opportunity for members to learn from each other's successes, identify areas of need in regional workforce investments and best utilize funding while avoiding duplication of effort. This involvement assists the team in building relationships, sharing information, and enabling discussions around existing and emerging workforce issues.

Throughout FY 2025, staff actively participated in the Peer Support Advisory group, which supports the certified peer counselor workforce hosted by the Washington State Healthcare Authority. The certified peer counselor profession is in a fundamental transition since the passage of Senate Bill 5555, which establishes standards for the certified peer specialist profession. Changes include new certification and requirements for additional training and practicum hours, new examinations and formalizes supervision of certified peer specialists. The bill also allows certified peer specialists to offer services independently and outside the purview behavioral health organizations. Work in these groups has accelerated, due in part to the recent legislation. DSHS staff continue to contribute subject matter expertise and support.

The Health Care Authority's Peer Support Advisory Committee comprises community members who provide feedback and recommendations to the Health Care Authority's Division of Behavioral Health and Recovery (DBHR). This is in collaboration with the community to support and prepare the peer workforce for full healthcare integration; improve the fidelity, quality, and scope of peer support training and certification; promote peer leadership and opportunities; and advance the principles of recovery and recovery-oriented practices throughout the behavioral health delivery system. Through participation in this group, staff have made significant contributions in support of the peer workforce.

In FY 2025, workforce development staff also participated in the Southwest HealthConnect Cohort hosted by the Southwest Accountable Community of Health and the Trueblood Collaboration Taskforce/Providers of Southwest Washington workgroups. The HealthConnect collaboration brings together community-based workers allowing peer-to-peer support and continued education. Through HealthConnect Cohort meetings, the Southwest Washington region continues to strengthen the tools available to this group of workers, which improves access to health and education for community members and provides more effective support for underserved members of the community. The Trueblood Collaboration Taskforce brings together Trueblood stakeholders and behavioral health providers in the southwest region of the state to network, share resources, and collaborate in support of improving care and outcomes for Trueblood class members in the area. Workforce development staff have gained insights pertinent to the issues affecting the workforce in this region through engagement with these partners.

Another Trueblood related group that staff engaged with in FY 2025 is the Managed Care Organization/Health Care Authority /Forensic Navigator Collaboration, commonly referred to as the MCO/HCA/FN Collaboration. Trueblood stakeholders and providers in Pierce County come together to network, share resources, and collaborate in support of improving care and outcomes for Trueblood class members in this region. Through this engagement, workforce development staff gain insights pertinent to the issues affecting the workforce in this county.

Lastly, the team meets regularly with BHHA's Organization and Workforce Development team to coordinate efforts and share information. This collaboration provides opportunities for informative discussions around the work that we both engage in.

Preliminary community-based workforce development staff collaboration plans for fiscal year 2026

Preliminary plans for FY 2026 include ongoing relationship building and collaboration between DSHS workforce development staff and partner organizations to include those mentioned above via targeted outreach and participation in activities relevant to workforce development staff. WFD staff continue to leverage our connections from these collaborations to update the workforce development contact list to use for future targeted outreach.

2b. (6) Evaluate training programs

During FY 2025, staff continued to evaluate training provided as part of OFMHS NEO and jail technical assistance through an online training feedback survey. Staff continue to distribute the four new employee surveys developed last fiscal year, which are provided in a new employee's first year to identify things that are going well and things that may need improvement. The JTA and WFD programs also have dedicated mailboxes ([OFMHS training requests](#), [OFMHS new employee support](#), [OFMHS Learning Center help](#), and [jail technical assistance](#)) through which training assistance and questions can be submitted. All information gathered through these avenues is analyzed by workforce development staff to continuously improve training.

In this reporting period, WFD has submitted a proposal to create and implement an unpaid, for credit internship program for current university and college students. This internship program will support the work of the various teams within OFMHS and promote interest in the forensic mental health career field. The OFMHS internship program will offer time limited, unpaid/for credit internships to college and university students. The OFMHS internship program will create internship opportunities for students who are not in post-doctoral programs. Additionally, the internship program will help to address the unmet workforce needs of the forensic mental health workforce, expand and nourish relationships with colleges and universities in Washington state, provide students with hands-on experience working in the forensic mental health field, and help to diversify the OFMHS workforce by tapping into candidate pools that may not have considered a career in the forensic mental health field.

In FY 2025, staff also continued management of the state's Learning Center for OFMHS and the OFMHS SharePoint sites. This includes meeting regularly with Learning Center administrators to discuss changes, troubleshoot and present issues, and strategize new approaches to support users. It also includes end user support in fixing errors, providing assistance, and addressing questions via the [learning center help email box](#). Workforce development staff assist leadership by developing and running reports that track staff progress on assigned training and by uploading and replacing online training content. The team is also responsible for conducting accessibility audits of OFMHS training to ensure compliance with applicable policies and standards. In managing the OFMHS SharePoint sites, staff develop and revise material, design web pages, maintain links and other content, and respond to user and access requests.

Preliminary training program evaluation plans for fiscal year 2026

Workforce development staff will continue to use the standard training evaluation process described above for training developed and delivered by OFMHS staff. The team will also monitor training completion and offerings through its OFMHS Learning Center and SharePoint management activities.

2b. (7) Additional activities impacting the workforce

In addition to the work captured in the above sections of this report, in FY 2025, DSHS workforce development staff connected with educational institutions to discover opportunities for engagement, connect with students, and promote behavioral health careers. In October and November 2024, the team hosted five career fair booths, engaged with students and staff at four colleges and one local high school:

- Washington State University Tri-Cities in Richland
- Gonzaga University
- Central Washington University
- Napavine High School
- Clark College

Additionally, in FY 2025 OFMHS staff hosted a career booth at the American Psychological Association conference. This provided workforce development staff with an opportunity to engage with students and partners to showcase careers in forensic mental health services.

During this fiscal year, due to travel restrictions and other budgetary constraints, the team's ability to engage and collaborate with schools, jails, and other partners in person has been impacted. However, the use of virtual meetings and ongoing training events has enabled some continued engagement. Workforce development continues to explore opportunities to connect and build relationships.

Workforce development staff also continue to be centrally involved in providing guidance and technical assistance statewide with the BHHA telehealth governance committee. This committee focuses on telehealth policy, expanding the use of telehealth for competency evaluations, and providing ongoing support for relevant facilities. The BHHA telehealth governance committee has been successful in creating a community of knowledgeable practitioners and subject matter experts to facilitate the use of technology and the inherent benefits for forensic evaluations. The committee also fosters discussions around prioritization, goals, and future planning. WFD staff are responsible for collecting and compiling data for the telehealth key performance indicators and the site status databases. This committee was established to better meet the needs of expanding telehealth and is tasked with developing and expanding DSHS telehealth capabilities as well as supporting existing infrastructure used by DSHS. The expansion and strengthening of telehealth for applications such as healthcare appointments and forensic assessments provide an alternative method to in-person interactions. This often brings efficiencies pertaining to patient wait times, staff travel, service provider availability and scheduling challenges. The use of this technology for evaluations has helped improve the efficiency with which competency evaluations can be completed and supports OFMHS staff who work remotely, mitigates coverage issues during staff leave, and supports staff reassignment when needs change.

In the first half of 2025, telehealth accomplished several new milestones. In January, the telehealth installation in the Olympic Heritage Behavioral Health facility was completed. In February, the DSHS telehealth installations in the Chelan County Jail and the Skagit County Jail were completed. Staff are currently working with Pierce, Klickitat, Thurston, and Clark County Jails to install systems in their facilities.

Two of the BHHA telehealth committee key performance indicators that pertain to forensic evaluations are travel miles saved by using telehealth and an increase in evaluations via telehealth. In the first half of this calendar year, 64,527 miles were saved equating to time that evaluators could spend on evaluations instead of driving. Also, in the first half of calendar year 2025, 2,774 evaluations were completed through telehealth, a significant increase over the same time period in 2024. The telehealth committee and state IT staff continue to work with county partners to address various aspects of technology-related issues pertinent to telehealth implementation and sustainment.

2f. - g. Forensic workforce report on education and training recommendations

In (f) - (g) of the Final Contempt Settlement Agreement Requirements section, found in the first part of this report, workforce development was required to produce a report, which “assesses the need and target areas for training programs, certification programs, and possible degree programs”. Workforce development staff completed the report per the requirement in June 2025. The report is titled, [The Washington State Forensic Mental Health Workforce: Assessing the Need and Target Areas for Training, Certification, and Possible Degree Programs.](#)

Recommendations on specific steps to support Trueblood Agreement success

The Office of Forensic Mental Health Services workforce development team continues to serve as an integral component of the Trueblood Settlement Agreement effort. In addition to continuing the efforts described above, additional workforce development recommendations for future work in support of the Settlement Agreement include the following:

Continue to advance the use of telehealth evaluations: Over the past several years, workforce development staff played a central role in introducing and providing technical assistance for telehealth so that Competency to Stand Trial (CST) evaluations can be completed with people in jail via video teleconferencing. This methodology is clinically appropriate in most cases and creates opportunities for more timely completion of CST evaluations. Prior to 2019, this capacity existed in only three jails. Almost every CST evaluation done in a jail had to be completed in person, with the forensic evaluator traveling to the jail to conduct the interview. However, due in part to the leadership and effort of workforce development staff, more than 300 CST evaluations each month are now completed in jails via the use of telehealth. This has made a significant contribution to the key OFMHS goal of quickening the pace at which the evaluations are completed. In FY 2025, workforce development staff continues to lead the BHHA telehealth governance committee and the OFMHS telehealth committee. It is recommended that staff continue these efforts for FY 2026.

Further develop and deploy training materials. As noted in the Forensic Workforce Report, there is a widespread lack of forensic mental health information in the education and training of most health care professionals, including nurses, psychiatrists, psychologists, master's-level clinicians, bachelor's-level staff, crisis intervention specialists, and community workers. DSHS is working to improve this by developing a new civil commitment and NGR1 module for the [Overview of Washington State's Adult Forensic Mental Health System](#) as well as updating other trainings in the series. For FY 2026, it is recommended that workforce development staff complete this expansion of the series.

Another recommendation from last year was to work on developing an e-learning version of the Breaking Barriers curriculum for new OCRP staff. In FY 2025, the team worked with subject matter experts to update the six modules and revise the material. Staff also recorded the new material and created modules in the e-learning software. It is recommended that for FY 2026, the team complete the online training, including closed captioning and transcripts for the modules. Additionally, it is recommended that workforce development staff complete the written transcripts for the training on best practices for evaluations for people with developmental disabilities and/or intellectual disabilities.

Workforce Development has two certified trainers listed on the ["How Being Trauma-Informed Improves Criminal Justice System Responses"](#) trainer list and continues to develop plans to offer the training to interested partners. It is recommended that in FY 2026 staff finalize a training plan and connect with potential organizations that would like to host this training.

Continue to develop strategic relationships with partners in the legal system: In FY 2023, Groundswell conducted focus groups to gather the perspectives of prosecutors, defense counsel, and judges regarding the continuing increase in demand for pretrial competency services and to discuss potential strategies. This work resulted in a report and four recommendations from Groundswell. To review Groundswell's focus group findings, workforce development organized a workgroup to examine each of the recommendations. Last year's recommendation was for the workgroup to go through each of the four items and compile their suggested actions in a report to OFMHS leadership. Workforce development presented this report to leadership as well as giving a presentation to all OFMHS staff regarding the work that was accomplished and the action items resulting from the workgroup. The recommendations and the work of that group have been described earlier in this report. For FY 2026, it is recommended that workforce development staff continue to follow the subsequent work that is happening in the varied groups and continue to update leadership about the progress on the recommendations.

Another recommendation from last year was to visit innovative programs and services in other states such as Colorado and meet with the individuals implementing and managing them. OFMHS and HCA staff traveled to Colorado and met with state behavioral health administrators and program managers. The group was introduced to various programs and services to include mental health transitional living homes in Colorado, a jail-based restoration program, competency court, and transition specialists. This same group also met virtually with county behavioral health staff from Harris County, Texas and gathered information on their behavioral health programs and services to include outpatient competency restoration, Assertive Community Treatment and Forensic Assertive Community Treatment teams (ACT/FACT), jail-based restoration, CORE program (clinician officer remote evaluation), and reentry. For FY 2026, it is recommended that OFMHS collaborate with and learn from additional states with innovative approaches such as New Mexico.

Continue cultivating relationships with potential collaborators: It is recommended that staff continue building relationships with potential partners involved in the training, recruitment, retention, and professional development of positions needed for the forensic workforce in Washington. As potential partners are identified, staff will focus outreach efforts to further cultivate these valuable partnerships.

Increase awareness of our work and develop networks: In FY 2025, the team built connections with education entities and workforce partners in the state through in-person participation in career fairs and informational events. OFMHS continues this effort and will present information on forensic psychology to Seattle University students in March 2026. For FY 2026, it is recommended that workforce development staff develop and distribute a quarterly bulletin to inform community partners and engage potential employees. This publication will contain an optional survey, which will allow interested parties to suggest topics and promote events. This bulletin will enhance our engagement and retention efforts throughout the state and extend our reach to networks beyond Washington.

It is recommended that in FY 2026, the workforce development program continue work to increase awareness with stakeholders across the state, including service delivery systems such as state hospitals, jails, and community service organizations serving the criminal court system involved population, to raise awareness of potential workers regarding career opportunities in the field of forensic mental health, and to motivate potential workers to pursue these opportunities. An additional recommendation is that staff continue engaging with college students and reach out to high school career centers to participate in informational and career related events

Increase training opportunities and support of jail staff. Monthly virtual training events continued through FY 2025 as part of jail technical assistance. These events have grown to include a wide audience encompassing community behavioral health providers, legal partners, educational partners, peers, and more. It is recommended to continue this effort in support of the law enforcement and corrections functional area of workforce development. WFD intends to continue building connections and sharing information through encouraging diverse attendance at this forum.

During this reporting period, JTA continues to collaborate with WASPC, by participating in weekly jail commander meetings. WASPC has been instrumental in providing support to the program through opportunities to share information. During this FY, the JTA program also partnered with the Statewide Reentry Council as they have expanded their efforts to work with jails.

The legislature directed the Ruckelshaus Center to design a collaborative process with the goal of modernizing the state's jails. The Center is facilitating a task force with two dozen participating organizations, including individuals with lived and professional experience. The task force is exploring jail atmosphere, workforce retention, behavioral health, and systemic issues including the efficacy of diversion and reentry programs. The task force will report its findings and recommendations to the Legislature by December 31, 2025. The Deputy Director of OFMHS was appointed as the DSHS representative to serve on this task force, and JTA staff serve as a resource.

Enhance engagement and interactivity of online training. Creating effective content and processes for online learning is crucial to workforce development success. In FY 2025, staff continued to access online training for e-learning design and we worked on increasing access to training through implementing accessibility features and offering training in different modalities. Workforce Development is also refining the process for converting trainings into on-demand formats and should continue these efforts for FY 2026. It is also recommended that in FY 2026, workforce development staff continue to access available training and learning opportunities.

Update training materials and guidebooks. A recommendation from last year was to complete a review of the [Best Practices for Behavioral Health Services in Jail Settings](#) and [The Intersection of Behavioral Health and the Law](#). In this reporting period, the team completed an extensive review of both publications and solicited feedback from subject matter experts and other partners. The first guidebook is in the final review process and the second is in the process of being revised with an expected completion date during FY 2026. Following a previous recommendation to conduct regular reviews of all existing training for updates, the team continues to assess all published material on a prescribed schedule and should continue this practice.

Advance the DSHS effort to become an Employer of Choice. Recommendations in this area from last year were to continue to participate in the employer of choice workgroup and the employee engagement survey workgroup. The DSHS employer of choice workgroup has concluded their work and we continue to incorporate what was learned in future planning. Staff continue to participate in the employee engagement survey workgroup and have implemented last year's recommendation to create a spreadsheet to track the four-engagement metrics for OFMHS. The engagement metrics are:

1. share leadership stories at NEO;
2. increase opportunities for staff to connect with executive leadership once a quarter;
3. implement bi-annual in-person events; and
4. give kudos and acknowledge milestones at all staff meetings.

Tracking and reporting these metrics on a quarterly basis have begun. For FY 2026, workforce development should continue this work, develop an OFMHS internship program beyond the established forensic evaluator programs, and continue to engage and support the OFMHS EDAIB community of practice to enhance the positive and supportive work culture.

Summary

This report describes the work completed by the DSHS workforce development team during FY 2025, and it provides recommendations and preliminary plans for FY 2026. WFD supports the development of Washington state's forensic mental health workforce, and the successful implementation of the Trueblood Contempt Settlement Agreement.