

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

**Workforce Development Annual Report**

**May 31, 2021**

# Table of Contents

Introduction ..... 4

Background..... 5

    Final Contempt Settlement Agreement Requirements for Workforce Development ..... 6

Final Implementation Plan – Forensic Workforce Report on Education and Training  
Recommendations ..... 8

Hire Workforce Development Specialists ..... 9

Participate in Workgroups..... 10

    Preliminary Workforce Participation Plan for Fiscal Year 2022..... 12

Conduct Training Needs Survey/Gap Analysis ..... 12

    Additional assessment of training needs ..... 13

Develop a Training Plan ..... 13

Develop and Coordinate Training, Standardized Manuals, and Guidelines ..... 15

    Preliminary Training, Standardization, and Guidelines Development and Coordination Plans  
    for Fiscal Year 2022 ..... 16

Collaborate with Community-based Organizational Workforce Development Staff ..... 17

    Preliminary Community-based Organizational Workforce Development Staff Collaboration  
    Plans for Fiscal Year 2022 ..... 17

Evaluate Training Programs ..... 18

    Preliminary Training Program Evaluation Plans for Fiscal Year 2022. .... 18

Recommendations on Specific Workforce Development Steps to Support Trueblood Agreement  
Success..... 18

    Increase awareness of our work and develop networks. .... 18

    Create working relationships with potential collaborators..... 18

    Further develop and deploy training materials..... 19

    Enhance engagement and interactivity of online training. .... 19

    Increase training opportunities and support of jail staff. .... 20

    Enhanced external-facing websites. .... 20

Summary of Work..... 21

Appendix A – Washington State Forensic Mental Health Workforce: Assessing the Need and  
Target Areas for Training, Certification and Possible Degree Programs..... 23

Appendix B – Master Training Plan..... 24

Appendix C – The Intersection of Behavioral Health and the Law.....25  
Appendix D – Forensic Career Pathway Brochures.....26

## Introduction

This report is responsive to the requirement that the Department of Social and Health Services submit an annual report each year by June 1 to describe progress in meeting specific expectations concerning workforce development activities pursuant to the Trueblood Contempt Settlement Agreement (hereafter “Settlement Agreement”). This is the second such annual report. The requirements stemming from the Settlement Agreement are listed below.

*The department is responsible for providing workforce development for DSHS staff and providing limited training resources to the forensic mental health community. Workforce development, evaluation, and support will be implemented as part of the statewide effort, and central to this initiative are requirements (a)(I)-(IV) and (b) as listed below.*

- a. *Hire or contract workforce development specialists assigned to the functional areas of community, inpatient, and law enforcement. Duties include:*
  - I. *Participate in workgroups*
  - II. *Conduct training needs survey/gap analysis*
  - III. *Develop master training plan(s)*
  - IV. *Develop and coordinate training including standardized manuals and guidelines*
  - V. *Collaborate with community-based organizational workforce development staff*
  - VI. *Evaluate training programs.*
  
- b. *Prepare an annual report on (a) above that includes recommendations about specific workforce development steps needed to ensure success of the Trueblood agreement. Distribute the report to Executive Committee, key and interested legislators.*

In the workforce development report that follows, the requirements listed above are utilized as a framework for progressing systematically through DSHS’ workforce development program to date. A section follows on each workforce development duty, (a)(I)-(a)(VI) that discusses program activities in each task area. After discussion of each task area, the report includes recommendations regarding specific workforce development steps needed that, if implemented, could help ensure success of the Settlement Agreement. This annual report is due on June 1 each year throughout the duration of the Settlement Agreement.

## Background

All criminal defendants have the constitutional right to assist in their own defense. If a court believes a mental disability 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.

If the court, after an evaluation opines the defendant competent, agrees with that finding, the defendant is returned to stand trial. However, if the court rules in agreement with the evaluation indicating the person is not competent but restorable, the court will 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.

As a result of this case, the state has been ordered 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. Trueblood applies to individuals who are detained in city and county jails awaiting a competency evaluation or restoration services. Many of the programs created as a result of Trueblood also target individuals who have previously received competency evaluation and restoration services who 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 challenges makes it more likely that people will be able to get the treatment they need when they need it, and as a result, people experiencing mental illness would be less likely to become entwined in the criminal court system. One goal of the programs covered in this report includes providing variable levels of care to prevent overuse of the highest and most intensive level of care.

On Dec. 11, 2018, the Court approved the Settlement Agreement related to the contempt findings in this case. The Settlement Agreement is designed to move the state closer to compliance with the court injunction. It includes a plan for phasing in programs and services. In each phase, the state will focus 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. Currently, the Settlement Agreement is in Phase 1:

- 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. Region(s) to be determined

The goals envisioned by the Trueblood Taskforce are shaping behavioral health transformation underway in the state of Washington. One stipulated element of that transformation, as part of the Settlement Agreement, is workforce development. The focus of this report details how the workforce development program is contributing to the goals of compliance with the Court's orders and diversion of potential class members.

### Final Contempt Settlement Agreement Requirements for Workforce Development

Workforce development 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 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 involved partners.

The Settlement Agreement and subsequent legislative funding has provided for 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:

#### *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) In-patient, 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 as 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<sup>1</sup>.

This second annual report will describe progress to date in meeting these requirements and also discuss strategies for continued progress over the coming year.

## Final Implementation Plan – Forensic Workforce Report on Education and Training Recommendations

In addition to the annual workforce development tasks and reporting requirements described in

<sup>1</sup>A.B., by and through Trueblood, et al., v. DSHS, et al., No. 14-cv-01178-MJP. Amended Comprehensive Settlement Agreement. Amended Joint Motion for Preliminary Approval of Settlement Agreement Attachment A - Case 2:14-cv-01178-MJP Document 599-1 Filed 10/25/18 Page 34 of 54.

(a)(1)-(6) and (b) in the previous section, the Settlement Agreement and final implementation plan require an additional report titled Washington State Forensic Mental Health Workforce: Assessing the Need and Target Areas for Training, Certification, and Possible Degree Programs (hereafter Forensic Workforce Report) due at the end of Phase 1 in July 2021. That Forensic Workforce Report has now been provided (see Appendix A). That report satisfies the requirements which are described in (c)(I)-(III) and (d)(I)-(II) below:

- c. *Assess the need for and appropriate target areas of training, certification and possible degree programs. Include:*
  - I. *Existing training, certification, and degree programs in WA for relevant professions*
  - II. *Programs for relevant professions in other states*
  - III. *Statewide staffing needs for all programs covered by this agreement for a period of ten years*
- d. *Prepare a Forensic Workforce Report on c. above that is distributed to the appropriate legislative committees and includes:*
  - I. *High, medium, and low cost recommendations*
  - II. *Long, medium, and short-term recommendations for future actions regarding training and certification programs*

## **Hire Workforce Development Specialists**

The department is required to seek funding to hire workforce development specialists. Specialists are assigned to the following functional areas: community, inpatient, and/or law enforcement. Each area may be further delineated as listed below:

- (1) *Community, including crisis response, homeless, in-home, residential, and clinic-based services*
- (2) *Inpatient, including residential treatment facilities (RTFs), private hospitals, and state hospitals*
- (3) *Law enforcement and corrections, including jails and prisons<sup>2</sup>*

During its 2019 session, the legislature appropriated and subsequently allotted \$653,000 to fund four positions dedicated to workforce development activities. Beginning in May 2019 (Q4 of Fiscal Year 2019) and continuing through Q2 of FY 2020, the workforce development administrator in DSHS hired four full-time equivalent workforce development specialists and distributed their assignments among the community, inpatient, and law enforcement and corrections functional areas.

The workforce development administrator also oversees the Jail Technical Assistance (JTA) program. There is significant overlap between the training and technical assistance offered to jails and the overall forensic workforce or professional development responsibilities of the workforce development specialists. The four DSHS workforce development specialists share responsibilities across both the JTA and Workforce Development (WFD) programs. Throughout this report, the reader will notice references to jail technical assistance or JTA. Operationally, jail technical assistance is conceptualized as part of workforce development's functional area number three (law enforcement and corrections, including jails and prisons) listed above, due to the overlap between these two areas. As settlement activities expand into Phase 2 and beyond, it seems likely that the need for workforce development staff within DSHS will grow.

## Participate in Workgroups

In an effort to assess workforce needs in the field of forensic behavioral health, the workforce development team is participating in both internal and external workforce development workgroups, as described below. These workgroups address a number of topics to include identified barriers to the development and/or retention of the behavioral health workforce (e.g., background checks for potential employees, competency-based training, and licensing reciprocity). Additionally, the workforce development team participates in:

- ✓ The Washington State Health Care Authority Stakeholders Enhanced Peer Curriculum Workgroup. The WFD team worked jointly with HCA to create an enhanced peer curriculum for peers working within teams serving Trueblood class members and potential class members. Stakeholder feedback was gathered via a workgroup with peer support specialists during the draft phase. Responses from Disability Rights Washington were also incorporated during the review process. Some of the topics covered in the curriculum and accompanying manual include an overview of the forensic mental health system in Washington, common behavioral health conditions, diversion, competency to stand trial, competency restoration services, civil commitment, trauma informed care, and crisis de-escalation. The curriculum and manual were completed and training was initiated prior to the June 1, 2020 deadline.

---

<sup>2</sup> A.B., by and through TRUEBLOOD, et al., v. DSHS, et al., No. 14-cv-01178-MJP. Amended Comprehensive Settlement Agreement. Amended Joint Motion for Preliminary Approval of Settlement Agreement Attachment A - Case 2:14-cv-01178-MJP Document 599-1 Filed 10/25/18 Page 33 of 54.

OFMHS' WFD continues to incorporate peer voices and solicit peer perspectives through regular monthly meetings with HCA's peer support administrator and peer program specialist.

- ✓ Best Practices for Behavioral Health in a Jail Setting Workgroup. The jail technical assistance team worked in collaboration with a number of entities to create a guidebook of best practices for behavioral health services in a jail setting and working with persons with mental illness. The initial workgroup convened on May 24, 2019, and included representation from Disability Rights Washington, the Washington Association of Sheriffs and Police Chiefs, the Washington State Office of the Attorney General, the HCA's enhanced peer services program administrator, and representatives from city and county jails both within and outside of Phase 1 regions. The guidebook addresses the topics of pre- and post-booking diversion, identification of need for and access to treatment, involuntary administration of medication, transition planning and continuity of care, and use of segregation as well as additional subject matter. The guidebook was completed on May 13, 2020, prior to the June 1, 2020 deadline. Related trainings began in September 2019 and continue monthly as additional topics are covered.
- ✓ The King County Competency Continuum Workgroup. This workgroup includes a diverse group of stakeholders in King County who work with Trueblood class members. This workgroup includes representatives from service provider organizations, the Seattle Police Department, jails, diversion programs, attorneys, judges, Tribes, the Downtown Emergency Services Center, and others.
- ✓ The Workforce Training and Education Coordinating Board. The Workforce Board conducted an assessment of Washington's behavioral health workforce to address shortages in behavioral health professions in the state. Five barriers were identified and a workgroup was formed to develop recommendations on these workforce barriers. The five topic areas are reimbursement and incentives for supervision of interns and trainees; supervision requirements; competency-based training; licensing reciprocity or the feasibility of an interstate licensing compact, or both; and background checks, including barriers to work related to an applicant's criminal history or substance use. DSHS workforce development staff are ongoing participants in this workgroup.
- ✓ Trauma-informed Approaches Training and Curriculum Development Workgroup. DSHS is partnering with HCA on a joint venture to develop a series of online training modules regarding the effective application of trauma-informed approaches to work with mental health patients who are involved in the criminal court system. This work stems from a grant award, and will result in a contracted provider producing four

online training modules that will become available at no cost to our own staff and any interested community partners. These trainings should be available via the workforce development website by fall 2021.

### Preliminary Workforce Participation Plan for Fiscal Year 2022

The team will continue to collaborate with other workforce development entities and will seek opportunities for participation in additional relevant workgroups as they are identified. DSHS workforce development staff have met with their HCA counterparts to identify areas of intersection, share information, discuss potential opportunities, and to expand contacts and connections with external stakeholders. Both parties have agreed to continue this mutually beneficial collaboration and coordination. Workforce development staff will also continue outreach to external stakeholders to engage in developing increased insight into the forensic mental health workforce needs in the varied communities throughout Washington. Some of the intensive work done in this regard during 2020 and 2021 is reflected in the aforementioned Forensic Workforce Report.

### **Conduct Training Needs Survey/Gap Analysis**

As noted in last year's Annual Report, the workforce development team collaborated with Groundswell Services, Inc., to compile information, data, and facilitate resource connections between Groundswell and key stakeholders within the state's forensic system to produce a report on Washington's forensic workforce. The March 2020 report identified a number of training-related gaps for the forensic workforce in Washington state. The Groundswell report noted that among candidates eligible for certain disciplines and bachelor's-level positions, a lack of familiarity with mental illness and with criminal court involved individuals may leave them wary of working in the forensic system. However, disciplines that are more familiar with mental illness may also have misconceptions about people involved with the criminal court system, perceiving them as exceedingly difficult to treat or uniformly violent.

Groundswell also noted that across almost all disciplines (other than forensic psychologists), candidates for positions in hospitals, residential treatment facilities for competency restoration, and community programs have little exposure or training involving forensic populations. Thus, many trainees are not prepared to work effectively with a forensic population. They do not understand the forensic system, the laws that influence treatment and disposition, the clinical conditions common to forensic settings (including severe mental illness, personality disorder, and malingering), and the more stringent boundaries typically necessary in forensic settings. This is also true for bachelor's-level staff and peer specialists.

During FY 2021, DSHS has taken action to address training gaps noted in the 2020 analysis:

- Suicide prevention. Trainings on this topic have now been provided twice through jail

technical assistance webinars. This topic is also now a standard component of OFMHS new employee orientation.

- Crisis de-escalation/intervention. Training on this topic has been provided twice through jail technical assistance webinars and is also a routine component of DSHS/OFMHS new employee orientation.
- Mental health education. This topic is now a standard component of OFMHS new employee orientation. Additionally, former workforce development administrator Jim Vess delivered a training to King County attorneys (in partnership with Nicole Tingelstad, Seattle Municipal Court MH Court attorney, and Dr. Wayne Winters, a DSHS forensic evaluator) titled “Competency Evaluations 101: Practicalities of Raising Competency and the Evaluation” on July 14, 2020. Dr. Jim Vess also presented at the Washington State Co-Occurring Disorders and Treatment conference on Oct. 6, 2020. His presentation included orientation to the work of the Office of Forensic Mental Health in general and also provided specific information about the department’s workforce development efforts.
- Trauma-informed care. As noted above, by fall 2021, four training modules on this topic will be available to state employed staff and any other interested parties online at no cost, through a partnership between DSHS and HCA. Additionally, workforce development staff are members of a steering committee leading an intensive effort to embed trauma\_ informed principles into all DSHS forensic mental health facilities.

### Additional assessment of training needs

The previously mentioned Forensic Workforce Report describes findings from additional and more recent interviews regarding workforce training needs.

## **Develop a Training Plan**

A substantive accomplishment during FY 2021 has been the creation of a “Master Training Plan” (see Appendix B). This master training plan details the career pathways within forensic mental health and the training needs for success in those careers. The plan also provides a conceptual outline of 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. The master training plan describes strategies for how DSHS, and its relatively new workforce development team, can fit into this complex system and strategically add value to the development of a skilled and robust forensic mental health workforce.

Additionally, two guidebooks have been created for the workforce and are available on the OFMHS website. The first is [\*Best Practices for Behavioral Health Services in Jail Settings\*](#). This guidebook is approximately 60 pages and includes best practice guidance on a number of topics relevant to persons with mental illness who are involved or may become involved in the criminal court system. Topics include, but are not limited to, use of restrictive housing, involuntary administration of medication, quality management, identification of need and access to treatment, and continuity of care. The guidebook has served as the foundational source for training offerings to jail staff and other relevant audiences in FY 2020, and it will continue to serve as a foundational source for future trainings in the upcoming year.

A second guidebook has been developed, titled *The Intersection of Behavioral Health and the Law* (see Appendix C). This guidebook was created through a collaborative effort between DSHS and HCA and is approximately 90 pages. It serves as a workforce training resource that addresses the history, rules, laws, services, and practices pertaining to the forensic mental health setting. The guidebook is a foundational source of training for peer support specialists. During FY 2020, the 12 modules from this guidebook were each presented through YouTube sessions as part of the training for peer support specialists working with the forensic population. This foundational training addresses the widespread need for “forensic literacy” that is noted by Groundswell and others. On Aug. 20, 2020, a DSHS workforce development specialist spoke at the Peer Pathways 2020 Conference regarding the intersection of behavioral health and the law. DSHS intends to continue and expand use of this training for a wider range of disciplines in the forensic mental health workforce in FY 2022.

In addition to the aforementioned trainings and guidebooks, an email address for training requests and technical assistance for jails has been created. The target audience for the email request system is persons who work in jails (e.g., custody staff, administrators, behavioral health). As of February 2021, the team received and responded to more than 25 requests for assistance received via this request system. Requestors include jail commanders, jail psychiatrists, custody staff, HCA staff, DSHS staff and attorneys. The mailbox is monitored regularly for technical assistance and training requests; responses typically go out the same day. Any training requests will be considered for development on a case-by-case basis for the upcoming FY 2022.

In addition, DSHS continues to provide monthly jail technical assistance webinars that are available to jail staff statewide, including tribal, city and county jails. Trainings address a range of topics related to:

- Pre- and post-booking options
- Identification of need and access to treatment
- Guidelines for administration of involuntary medication
- Continuity of care

- Use of segregation
- Release planning
- Crisis de-escalation

Thus far during FY 2020, the following topics have been addressed through the monthly jail technical assistance webinars:

- Competency Evaluation and Process: July 29, 2020
- Mood Disorders: Aug. 27, 2020
- Personality Disorders: Sept. 23, 2020
- Psychopathy: Oct. 28, 2020
- Quality Management: Nov. 30, 2020
- De-escalation: Dec. 15, 2020
- Videoconferencing and Competency Evaluations: Jan. 27, 2021
- Suicide Awareness in Jail Settings: Feb. 23, 2021
- Expedited Triage Process: March 30, 2021
- Outpatient Community Restoration Program Overview: April 13, 2021

Upcoming trainings for the remainder of FY 2020:

- Peer Support: Stories of Recovery: May 20, 2021
- Pre- and Post-booking Diversion: June 29, 2021

As of May 2021, limitations to onsite trainings remain in place due to the COVID-19 pandemic. While awaiting the lifting of restrictions, the team continues to evaluate training needs and update the training plan as appropriate. This includes the identification and sequencing of training topics for the monthly webinars, while researching ways to make webinars and online trainings more interactive and effective. Another focus is to adapt the foundational training developed in the *Intersection of Behavioral Health and the Law* curriculum, developed in part to address training needs for enhanced peer specialists, to target other disciplines and positions in the forensic workforce.

## Develop and Coordinate Training, Standardized Manuals, and Guidelines

A course catalog has been developed, which outlines available training topics, including a brief

summary of the topic, training objectives, and details about the training format (e.g., in-person, self-directed, or webinar). As the workforce development team continues to expand training offerings, they will be added to the catalog for reference. In an effort to provide exemplary training, the team maintains a master instructor contact list for external subject matter experts. This list acts as a resource for professional consultation, peer review, and to solicit instructors when needed. Depending on budget constraints, OFMHS may be able to contract with one or more of the expert trainers on the list for training opportunities.

During FY 2020, workforce development staff coordinated with HCA's Outpatient Competency Restoration Program (OCRCP) administrator to provide training on the Breaking Barriers program to contracted providers. The Breaking Barriers CORE<sup>3</sup> curriculum instructor and patient workbooks have been reviewed by a workgroup that consisted of residential treatment facility and state hospital staff who implement the Breaking Barriers program.

This standardized training is provided to staff who facilitate any aspect of the Breaking Barriers program to patients who are ordered into competency restoration. DSHS headquarters master instructors were trained on April 21, 2020. OCRCP master instructors and subject matter experts were then trained, which enabled OCRCP staff to be fully trained and operational by July 1, 2020. With Phase 2 of the Settlement Agreement beginning July 1, 2021, a similar approach will be taken to ensure that new OCRCP providers within King County receive this training in the Breaking Barriers model for competency restoration treatment.

### Preliminary Training, Standardization, and Guidelines Development and Coordination Plans for Fiscal Year 2022

Preliminary plans for FY 2022 involve the adaptation of training materials developed during FY 2020 for additional audiences, extension of training into additional topics identified as important by various stakeholders, and the development of enhanced online resources targeting jail staff and other elements of the forensic workforce. DSHS workforce development staff are currently coordinating with King County Jail leadership to identify specific training needs to help their team better understand the forensic mental health system, and how their work interfaces with other system partners. Our goal is to both design and deliver this customized training during FY 2022.

As noted in the separately provided Forensic Workforce Report, substantive work has been done during FY 2020 to build connections with colleges, universities and community colleges. This has included discussions with social work and mental health counseling programs, law and justice programs, and psychology programs. DSHS workforce development staff also spoke with the

<sup>3</sup> C.O.R.E. is a social skills training component within the Breaking Barriers treatment curriculum designed to aide client's restoration to competency. The acronym refers to: (C)ourtroom knowledge and understanding; (O)ptimal symptom management; (R)elaxation and coping skills; and (E)ffective communication with attorneys and other court staff.

Washington Student Achievement Council and Clinical Placements Northwest regarding the field of forensic mental health. This initial groundwork has helped build relationships and opened pathways for ongoing collaborations. Additional work is needed to determine what is possible in terms of classroom teaching or training opportunities, training placements or rotations, fellowships, or other forms of collaboration that may serve the goals of forensic workforce development.

## **Collaborate with Community-based Organizational Workforce Development Staff**

Collaboration with community-based organizational workforce development staff is ongoing. Initial efforts include outreach to some county behavioral health staff as well as Washington Workforce Development Councils within the Trueblood Phase 1 counties, communication and collaboration with HCA workforce development staff.

During FY 2022, as King County becomes engaged in implementation of the Settlement Agreement, DSHS workforce development staff will engage with the Workforce Development Council of Seattle-King County in an effort to build a collaborative relationship with that organization. However, during FY 2020, the DSHS workforce development team learned that the Workforce Development Councils tend to have limited understanding of the forensic mental health workforce or its specific needs. Staff within these councils were not well positioned to provide guidance or support regarding forensic mental health workforce development interests, as their interests are of a far broader nature. However, they did offer contact information for partners within King County whom DSHS will be reaching out to during FY22. Additionally, during FY 2022 DSHS workforce development staff will participate in a King County Competency Continuum Workgroup that is specifically focused on serving persons with both serious mental illness and criminal involvement. This workgroup is a multidisciplinary group with representatives who work in law enforcement, courts, housing, and behavioral health treatment. Through participation in this workgroup DSHS, hopes to learn more about King County's specific workforce development needs regarding forensic mental health, and find ways to possibly be of assistance.

### Preliminary Community-based Organizational Workforce Development Staff Collaboration Plans for Fiscal Year 2022

Relationship building and collaboration between DSHS workforce development staff and community-based organizations is progressing via the intensive outreach and information gathering that has been done during FY 2020 as part of preparing the Forensic Workforce Report. Workforce development staff have interviewed a wide range of system partners to learn about workforce needs and education and training programs. Interviewees have included behavioral health providers, law enforcement, jails, community colleges, and universities. These discussions during FY 2020 have not only produced valuable insights that have been incorporated into the Forensic Workforce Report,

they have also helped DSHS begin to build collaborative relationships with a wide range of partners for DSHS to engage with in FY 2022 and beyond.

## Evaluate Training Programs

During FY 2020, workforce development staff began conducting evaluations of its new employee orientation for OFMHS staff. The initial evaluation occurs during a series of training curriculum reviews, which vet training curricula against standards, laws, rules, and best practices. The next evaluative intersection occurs when course participants are given surveys to provide feedback on the training. The surveys are reviewed by the department's workforce development administrator. The feedback from the course reviews informs future training.

Preliminary Training Program Evaluation Plans for Fiscal Year 2022. The standard training evaluation process described above will continue for trainings developed and delivered by OFMHS staff. During FY 2022, workforce development staff will begin to apply this system for evaluation of training to the monthly jail technical assistance webinar trainings.

## Recommendations on Specific Workforce Development Steps to Support Trueblood Agreement Success

Some of the recommendations offered at this stage in the growth of the DSHS workforce development program are broad, reflecting the need to build awareness of the program with other relevant organizations and establish additional working relationships with these entities. Other recommendations are more specifically focused and build on work that has been completed to date.

Increase awareness of our work and develop networks. As noted, during FY 2021 DSHS workforce development staff have begun discussions with a wide range of colleges, universities and community colleges, as well as employers. These conversations have already increased awareness of the forensic workforce and its needs. The workforce development program should continue to work to increase awareness with stakeholders across the state, including service delivery systems such as jails, state hospitals, community service organizations serving the criminal court involved population, as well as organizations such as universities, community colleges, and other training programs that could train workers for roles in the forensic workforce. The goal is to raise awareness of potential workers and the programs that train them regarding career opportunities in the field of forensic mental health, and to motivate potential workers to pursue these opportunities.

Create working relationships with potential collaborators. Establish additional relationships with potential partners involved in the training, recruitment, retention, and professional development of positions needed for the forensic workforce in Washington. This requires identification of potential

intra- and possibly interstate partners. As mentioned above, fruitful partnerships have been developed during FY 2020 via the interviews that were conducted to inform the Forensic Workforce Report. As potential partners are identified, focused outreach efforts should be used to further cultivate these valuable partnerships.

Further develop and deploy training materials. A more specific recommendation that builds upon work already completed is to adapt the curriculum from the *Intersection of Behavioral Health and the Law* training. This training provides the kind of foundational “forensic literacy” that Groundswell strongly encouraged be developed. This training has already been utilized by HCA to train peer support specialists working with the forensic population. However, this training could be beneficially applied to a broader range of relevant disciplines and forensic workforce roles. As noted in the Forensic Workforce Report, there is a widespread lack of forensic mental health information currently embedded into the education and training of virtually all health care professionals such as nurses, psychiatrists, psychologists, master’s- level clinicians, bachelor’s-level staff, crisis intervention specialists, and community workers. DSHS should make the *Intersection of Behavioral Health and the Law* widely available and at no cost. Learners should be provided the opportunity to study one, several, or all 12 modules within this training. Further, DSHS should consider the possibility of providing some type of certificate in basic forensic literacy to learners who complete all 12 modules of this training.

Content adapted from this foundational training can serve two purposes. One is to increase the awareness of the fundamentals of forensic mental health to professionals currently working in these fields. The other purpose is to expose those in schools and training programs to the field of forensic mental health in order to create interest and encourage potential future members of the workforce to seek opportunities in a relevant career path. During FY 2020, DSHS workforce development staff developed a set of brochures designed to provide information about and stimulate interest in career opportunities within the field of forensic mental health (please see Appendix B). Opportunities during FY 2022 could include presenting as guest lecturers in nursing schools, MSW programs or psychology programs. If COVID-19 restrictions ease, there may also be opportunities to attend and/or present at conferences, or provide information booths at conferences and job fairs.

Enhance engagement and interactivity of online training. A notable challenge that has been highlighted by the restrictions imposed during the COVID-19 crisis is the limited engagement and interactivity of our webinars and other online training offerings. Significant progress has been made in recent years in creating more effective online learning experiences, and during FY 2020 DSHS began utilizing newer online methods of training delivery such as Articulate software and YouTube videos. While it is anticipated that some training functions will return to a live presentation format following the lifting of COVID-19 restrictions, recognition exists that online learning will be a key component in our future training efforts. Creating effective content and processes for online learning will be crucial to workforce development success. It is recommended that additional training and IT

resources are obtained for the DSHS workforce development team in order to support improvements in the online resources we are striving to provide to the community, inpatient, and law enforcement workforce.

Increase training opportunities and support of jail staff. During FY 2020, given the impact of the COVID-19 virus, jail technical assistance efforts have been principally focused on the delivery of monthly webinars that address topics of interest to jail staff. These monthly webinars will continue during FY 2022 and are available to jail staff statewide, including city, county, and tribal jails.

DSHS workforce development staff are actively engaged with King County Jail administrative leadership, mental health staff, and nursing staff to identify training needs for jail staff working with persons who have serious mental illness and are involved in the criminal court system. During FY 2022, DSHS will provide training to King County Jail staff to address their identified needs. Additionally, DSHS will participate in the King County Competency Continuum Workgroup in order to learn more about King County workforce needs specific to the implementation of the activities within the Settlement Agreement.

The department recommends building upon the bank of current resources by providing additional materials that are implementation ready. For example, through conversations with our workforce partners, it is evident that many would benefit from materials that could be downloaded and implemented, such as screening instruments, discharge planning templates, and many other relevant templates, tools, and instruments. Additionally, many would benefit from established model policies and procedures developed by other jurisdictions that have addressed the needs of the incarcerated mentally ill population.

Enhanced external-facing websites. The forensic workforce development and jail technical assistance teams have dedicated pages on the DSHS website. This includes a [website](#) that contains resources for jail technical assistance. Some of the resources include the Washington legal system guide to forensic mental health services, a guide on medication management in correctional settings, screening and assessment in corrections, suicide prevention and risk management resources, substance use disorder treatment and management resources, and transition planning and continuity of care resources.

It is recommended that these online materials be substantially expanded and enhanced as a resource, both for the forensic workforce in general and for the jail staff in particular. Training and reference materials developed within the department could be organized and made available through the DSHS website, as could relevant materials developed by other jurisdictions. For example, the Los Angeles County jail system has been actively addressing a number of relevant issues in the care and disposition of the mentally ill population. Resources like these that have been developed by colleagues in other jurisdictions could be obtained, reviewed, and made available as needed by

various forensic workforce groups in Washington. Such materials could include screening forms, training materials, and established policies and procedures for addressing the needs of the incarcerated mentally ill. This would also address the aforementioned need for jail staff and other partners to have readily accessible materials to implement while minimizing their need for independent internal development.

## Summary of Work

This report describes the work completed by the DSHS workforce development team during FY 2020 and provides preliminary plans for FY 2022.

During FY 2020, the DSHS team of workforce development staff has:

- ✓ Developed two substantial training manuals, a 59-page guidebook *Best Practices for Behavioral Health in Jail Settings*, and a 90-page manual titled *The Intersection of Behavioral Health and the Law*.
- ✓ Developed the Master Training Plan, which describes training opportunities and strategies for addressing training needs of the forensic workforce. This plan identifies possible intersections and collaboration opportunities with system partners.
- ✓ Made further progress in the development and deployment of standardized training curriculum for the Breaking Barriers program used in competency restoration treatment. Versions of this training have been adapted for use in the state hospitals, residential treatment facilities, and for Outpatient Competency Restoration Programs.
- ✓ Developed and delivered training on a range of forensic mental health topics. These include screening and assessment processes in jails; crisis de-escalation in custody settings; transition planning and continuity of care; pre- and post-booking diversion; triage consultation and expedited admission; use of video conferencing for telehealth; and also the use of restrictive housing within jails. Upcoming trainings currently under development or identified for development include substance use disorder treatment and withdrawal management in jails; suicide risk, assessment and management in jails; involuntary administration of medication; competency evaluation; and competency restoration.

While this important groundwork has now been completed and significant workforce development training resources have been produced, several areas have been identified as priorities for the next stage of the team's work. One priority for the next fiscal year is the expansion and refinement of trainings already developed in order to target additional workforce audiences. In particular, as

discussed above, there is significant potential for expanding the use of *The Intersection of Behavioral Health and the Law* to meet the widespread need for foundational forensic literacy.

A primary goal for next year is to develop more targeted plans for enhancing the state's workforce in support of the Settlement Agreement. There are two broad elements to this effort. First is to identify and pursue ways to encourage more people to pursue careers in the field of forensic mental health in Washington, including raising awareness, stimulating interest, and creating training opportunities and career pathways into the types of positions required for success in meeting the objectives of Trueblood.

The other broad element of workforce development involves increasing the knowledge, skill, and effectiveness of the existing workers in this field, as well as the effectiveness of the entities they work for (e.g., jails, law enforcement agencies, treatment facilities, and community service organizations that serve Trueblood class members). Both of these elements will serve to guide the efforts of the workforce development team during the coming year.

## Appendix A – Washington State Forensic Mental Health Workforce: Assessing the Need and Target Areas for Training, Certification and Possible Degree Programs

## Appendix B – Master Training Plan

## Appendix C – The Intersection of Behavioral Health and the Law

## Appendix D – Forensic Career Pathway Brochures

