Workforce Development Strategic Plan
Snohomish County Rural Opioid Response Project Consortium
Everett, WA
March 2020

Grantee Organization	Snohomish Health District	
Grant Number	G25RH33000	
Address	3020 Rucker Ave, Everett WA 98201	
Service Area	Snohomish County Census Tracts 537 and 538.01	
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Contributing Consortium Members and Stakeholders	AIDS Outreach Project/Snohomish County Syringe Exchange	Providence Medical Group
	Community Health Centers of Snohomish County	Sea Mar Community Health Center – Monroe Behavioral Health Clinic
	Town of Darrington	Snohomish County Department of Emergency Management
	Darrington Prevention and Intervention Community Coalition	Snohomish County Sheriff's Office
	Darrington School District	Snohomish Health District
	EvergreenHealth Monroe Recovery Center	Sno-Isle Libraries
	Ideal Option	City of Sultan
	Monroe Community Coalition	Sultan School District

Assessment Summary

Workforce gaps and needs were initially identified during the needs assessment process based on consortium member input and informal data collection from providers throughout the two communities of focus. Additionally, a consortium meeting was held during which members gave input on specific workforce challenges facing different sectors. This helped to refine the workforce development goals for our consortium, and was also an opportunity to hear from members who joined our work after (or were not able to participate in) the needs assessment process.

Relevant workforce gaps and needs identified in Gaps Analysis and subsequent meetings include:
- Gaps in our ability to track the use of PDMP
- Need for education and outreach to law enforcement and first responders to address stigma
- Not enough local capacity for youth mental health treatment
- Gaps in evidence-based prevention activities for youth
- Gaps in how equipped school staff feel to identify youth at risk for substance use and mental health issues, and to help students who they know are impacted by a family member's opioid use.
- Gaps exist in how trauma and adverse childhood experiences (ACEs) are addressed in the school setting
- Gaps in options for MAT in Darrington and Eastern Sky Valley
- Need for more skilled substance use dependency professionals (SUDPs) and mental health professionals (MHPs) in both communities
- Lack of peer recovery coaches at organizations in service area
- Lack of recovery communities or similar programs
- Lack of organizations that have roles like navigators, care coordinators or case managers, who can help people navigate treatment and recovery and the support services that make recovery successful

Evidence-based strategies and practices that we will utilize in our strategies:

- Botvin Life Skills Training (LST) curriculum - https://www.lifeskillstraining.com/
- PAX Good Behavior Game - https://www.goodbehaviorgame.org/
- Screening, Brief Intervention and Referral to Treatment (SBIRT)
- Motivational Interviewing (MI)
- Certified Peer Counselors (CPC)
- Academic Detailing

Problem Statement

The priority problems identified in the needs assessment and subsequent consortium work are:

- The lack of evidence-based strategies being utilized for youth substance misuse prevention, and SUD/OUD screening and treatment,
- The lack of post-treatment recovery services present in the form of peer supports, recovery communities, case managers, and service navigators, and
- The need for engagement with service providers of all types around topics such as stigma reduction, implicit bias, overdose prevention and response, and maximizing billing to improve the care available for people with SUD/OUD.

Goals

1. By May 31, 2023, the SCROR Project will increase community provider use of evidence-based strategies to prevent substance misuse and overdose, and treat SUD/OUD.
2. By May 31, 2023, the SCROR Project will improve community capacity to provide care for and support the recovery of people with SUD/OUD.

Workforce Objectives

By May 31, 2023, the SCROR Project Consortium will:

1. Increase the number of providers and other health and social service professionals who can utilize evidence-based strategies to effectively identify and treat SUD/OUD.
2. Increase the number of recovery supports, including peer counselors, navigators, case managers and community-based services.
3. Increase the number of school personnel (teachers, administrators and support staff) who understand risk factors for substance misuse and the importance of evidence-based prevention programming.
4. Increase engagement and training opportunities with law enforcement, first responders, providers, non-clinical staff and other stakeholders to ensure accessibility and financial sustainability of services.

Long-Term Outcome

The communities of Darrington and Sky Valley will have a skilled workforce that utilizes evidence-based strategies to prevent youth substance misuse, save lives from opioid overdose, and identify, treat and support the long-term recovery of individuals with SUD/OUD.

Long-Term Outcome Indicators

- Number of organizations (including schools) trained in and adopting evidence-based strategies, number of organizations creating roles for recovery supports (navigators, case managers, peer counselors)
- Number of new providers (medical and behavioral health) recruited to serve the communities of focus; number of providers completing SBIRT training, DATA waiver training, other professional development trainings

Abbreviations Used:

- AHEC – Area Health Education Center
- CPC – Certified Peer Counselor
- DBHR – Department of Behavioral Health and Recovery (Washington State Health Care Authority)
- EBP – Evidence-Based Program
- HCA – Washington State Health Care Authority
- LST – Botvin Life Skills Training
- MAC Group – Multi-agency Coordination Group
- NS BHASO – North Sound Behavioral Services Administration
- OSPI – Office of the Superintendent of Public Instruction (Washington State)
- PAX GBG – PAX Good Behavior Game
- SBIRT – Screening, Brief Intervention and Referral to Treatment model
- SHD – Snohomish Health District
- SnoCo HS - Snohomish County Human Services

Goals:

1. **By May 31, 2023, the SCROR Project will increase community provider knowledge and use of evidence-based strategies to prevent substance misuse and opioid overdose, and treat SUD/OUD.**

2. **By May 31, 2023, the SCROR Project will improve community capacity to provide care for and support the recovery of people with SUD/OUD.**

Objective 1 - By May 31, 2023, the SCROR Project will increase the number of providers and other health and social service professionals who can utilize evidence-based strategies to effectively identify and treat SUD/OUD.

Activities	Timeline		Who Is Responsible?	External Partners	Cost & Possible Funding Source	Track Progress (metrics/indicators)
	Start Date	End Date				
Train and mentor providers in adopting evidence-based practices for SUD/OUD screening and referral 1. Provide trainings in SBIRT for providers using HCA's online course 2. Offer training in MI for providers who want more experience 3. Mentoring by fellow providers	Immediate	Ongoing	- SHD - Providers	- WA HCA	- Training costs for MI	# of providers completing SBIRT training, # of certifications, # of clinics billing for SBIRT
Train providers in evidence-based treatment for SUD/OUD 1. Assess provider needs around MAT training 2. Identify providers who can be peer coaches/mentors 3. Offer or support MAT training at clinic sites or at SHD 4. Follow up with trained providers to assess use of MAT with patients	Immediate	Ongoing	- SHD - Providers	- SAMHSA	- Possible costs associated with creating and delivering assessment - Training costs - Leverage existing resources for MAT training	# of clinics/providers completing the assessment, # trainings held, # providers obtaining waivers, # providers offering MAT at follow up
Recruit and retain new clinical and behavioral health providers who are (or are willing to become) trained to provide evidence-based behavioral and pharmacotherapy	Immediate	Ongoing	- SHD, - Full consortium	- AHEC	- Professional development training costs	# of new providers using NHSC program, # of professional development

Activities	Timeline		Who Is Responsible?	External Partners	Cost & Possible Funding Source	Track Progress (metrics/indicators)
1. Identify NHSC-eligible sites and assist them in applying 2. Maximize NHSC loan forgiveness program to recruitment providers 3. Provide ongoing professional development opportunities(MAT certification, other topics) 4. Connect with local medical, MSW, RN programs around the potential of placing students in service areas for internships, practicum, clinical rotations, etc. 5. Identify mentors from existing provider workforce who can help new providers integrate fully into community to improve provider retention						opportunities offered, # of student sites identified,

Objective 2 - By May 31, 2023, the SCROR Project will increase the number of recovery supports, including peer counselors, navigators, case managers and community-based services.

Activities	Timeline		Who Is Responsible?	External Partners	Cost & Possible Funding Source	Track Progress (metrics/indicators)
	Start Date	End Date				
Create roles in relevant organizations to allow for expansion of peer and recovery support workforce (ED, jails, treatment centers, etc.) 1. Engage local organizations to determine interest and capacity to create these positions 2. Provide support as needed in creating positions and determining job duties, supervision needs, etc.	Immediate	Ongoing	- SHD - Recovery workgroup	- State and regional partners	- Wages and benefits for new positions	Engagement with organizations, number of roles created
Recruit staff to serve as navigators and case managers for people entering treatment and recovery at identified organizations	Year 1	Ongoing	- SHD - Recovery workgroup	- SnoCo HS - NS BHASO	- Leverage local, state and regional resources	Number of staff hired

Activities	Timeline Start Date	Timeline End Date	Who Is Responsible?	External Partners	Cost & Possible Funding Source	Track Progress (metrics/indicators)
Recruit, train, certify and support people in recovery from SUD/OUD to become Certified Peer Counselors	Year 1	Ongoing	- SHD - Recovery workgroup	- HCA - Peer Workforce Alliance	- Leverage existing state and regional resources	Number of CPCs hired and trained
Create recovery communities in both communities of focus 1. Engage faith community 2. Establish recovery community organizations	Year 1	Ongoing	- SHD - Recovery workgroup	- County faith stakeholder group	- Leverage faith community resources	Number of recovery groups created

Objective 3 - By May 31, 2023, the SCROR Project will increase the number of school personnel (teachers, administrators and support staff) who understand risk factors for substance misuse and the importance of evidence-based prevention programming.

Activities	Timeline Start Date	Timeline End Date	Who Is Responsible?	External Partners	Cost & Possible Funding Source	Track Progress (metrics/indicators)
Provide training on prevention science and the risk/protective factors for youth substance misuse, including education about ACES and trauma	Year 1	Ongoing	- SHD	- ESD 189	- Training costs - OSPI - CPWI coalition resources	Number of trainings held
Provide training on evidence-based prevention programming for schools 1. Identify local champions/trusted messengers 2. Provide training on both proposed EBPs	Year 1	Ongoing	- SHD	- Other schools currently implementing	- Training costs - OSPI - CPWI coalition resources	Local champions identified Number of trainings held
Expand the number of school sites implementing evidence-based prevention programming 1. LST (middle school) 2. PAX GBG (elementary school)	Year 2	Ongoing	- SHD, - Prevention workgroup - Coalitions - Districts	- DHBR	- Curriculum and training costs - OSPI funding for EBPs	Number of classrooms piloting program during school year

Objective 4 - By May 31, 2023, the SCROR Project will increase engagement and training opportunities with law enforcement, first responders, providers, non-clinical staff and other stakeholders to ensure accessibility and financial sustainability of services.

Activities	Timeline Start Date	Timeline End Date	Who Is Responsible?	External Partners	Cost & Possible Funding Source	Track Progress (metrics/indicators)

Strengthen collaboration with law enforcement and first responders to enhance their capability of providing emergency treatment to people with SUD/OUD 1. Assess need for and provide education to reduce stigma 2. Leverage work done to date around Narcan administration with Sheriff and local police; assess readiness for leave-behind program 3. Engage law enforcement and first responders to assess training needs around overdose response 4. Leverage law enforcement embedded social workers and diversion center model	Immediate	Ongoing	- SHD - Consortium workgroup	- MAC Group - Law enforcement embedded social worker program	- Leverage existing funding and resources	Assessment completion, engagement with law enforcement and first responders
Train clinic staff to optimize reimbursement for treatment encounters through proper billing across insurance types	Year 1	Year 2	SHD, providers	- Insurance organizations	- Training costs	Number of staff trained
Assess training needs of other providers around stigma reduction, implicit bias training, other topics; provide trainings	Year 1	Ongoing	SHD	- HCA	- Trainers (external) - Provider associations	Number of assessments completed, Number of trainings held