

Annapolis suggestions as related to specific action steps

Goal 1

Objective 1: Action 1, 2, 3:

A. Create a *comprehensive behavioral health resource workgroup*.

This group should have representatives from all major public and private state agencies, organizations and non-profits who are resource providers in mental health and substance abuse, across the life span.

This group should only exist to have specific objectives to implement comprehensive goals across the state.

Other community organizations should be added to ensure resources for specific diverse populations (including but not limited to: ethnic minorities, lgbt communities, rural and urban specific communities).

B. Create a *comprehensive behavioral health resource center* (physical locations and web-based).

This center will contain info including about mental health/substance abuse for adult consumers, youth consumers, family members, community advocates, and interested community members.

Objective 3: Action 3

C. Use the *comprehensive behavioral health resource workgroup* (See Objective 1, bullet A).

Objective 3: Action 5

D. Create a *comprehensive behavioral health workforce workgroup*.

This group would have representatives from all current behavioral health workforce job classifications: in adult and children's services and providers.

This group would include representation for paraprofessional and professional jobs.

E. Create a comprehensive & standardized care structure or structure of peer support for all behavioral health workers.

The behavioral health workforce workgroup would use gold standards as well as current peer support systems in place across the state to implement a comprehensive peer support system with processes specific to the needs of various job classifications. (Example: System of Care, care coordinator and family support provider peer meetings, Quarterly children's program directors meeting, etc)

Objective 4: Action 1

- F. Expand the workforce career ladder by making comprehensive changes to qualification requirements within various job classifications in behavioral health.

For specific jobs, qualifications should be expanded to include equivalent years of consumer experience/advocacy (and/or paraprofessional training certificates) in substitute for certain post secondary degrees.

Technical assistance would come from the *comprehensive behavioral health resource workgroup* (listed in Obj. 1, A).

Objective 5: Action 1

- G. Mandate into state law that the Regents for Higher Education accreditation process in all majors related to the behavioral health field, specific curriculum development members (i.e. *behavioral health experts*- consumers, family members, youth, and advocacy or agency representatives) must be included to keep school accreditation.

All post secondary majors related to behavioral health must have curriculum that was developed with the input of at least two outside behavioral health experts. These experts would work with school deans, department chairs and individual professors.

Technical assistance to the Regents and all Oklahoma post secondary schools would come from the *comprehensive behavioral health resource workgroup* (listed in Obj.1, A).

Objective 5: Action 3

- H. Mandate into state law that for all state agencies and all entities (public and private) receiving state funds, related to behavioral health, boards of directors must instate consumers, family members and youth representatives (i.e. *behavioral health experts*) into the program development of all agency sponsored training.

Objective 5: Action 5

- I. Mandate licensure requirements, for behavioral health workers that at least 2 continuing education hours must come from a consumer led training course.

Technical assistance will come from the *comprehensive behavioral health resource workgroup* (listed in Obj. 1, A).

Goal 2

Objective 1: Action 4

- J. Create a comprehensive community based monitoring group (see Obj. 1,A) and a *comprehensive community action toolkit* using the *comprehensive behavioral health resource workgroup*.

Objective 3: Action 2

- K. Endorse the comprehensive community action toolkit (See Goal 2, Obj. 1).