



Overview

- **Definitions:**

- **HRSA:** Health Resources & Services Administration
- **BHWET:** Behavioral Health Workforce Education and Training
- **FORHP:** Federal Office of Rural Health Policy
- **HPSA:** Health Professional Shortage Area

- **Period of Performance:**

- **Year 1:** September 1, 2021 – June 30, 2022 (Final year for Great Lakes)
- **Year 2:** July 1, 2022 – June 30, 2023
- **Year 3:** July 1, 2023 – June 30, 2024
- **Year 4:** July 1, 2024 – June 30, 2025

- We will apply for a no-cost extension at the end of year 4 that will go from July 1, 2025 – June 30, 2026

- Sites will need to be prepared to not have grant funding for the final month of that final year.



Overview

- **Project Co-Director, Clinical Training: Dustin Brown, Psy.D.**
 - Comprehensive ongoing oversight of Clinical Training
 - Implementation of outcome data
 - Oversight of supervisor and intern training
 - Reviews site progression over time
 - Ensures fidelity of training at sites
- **Project Co-Director, Operations: Angela King, Psy.D.**
 - Comprehensive ongoing oversight of the day to day operations
 - Ensuring grant compliance
 - Planning didactic training
 - Collecting outcome data
 - Reviewing resource management and budget
- **Project Coordinator: Katherine Dixon**
 - Performs general administrative responsibilities to support the smooth and effective operation of the program.



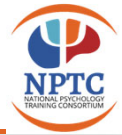
Eligibility

- Accredited professional training programs that are establishing or expanding internships in psychology including such programs with a focus on:
 - Child and adolescent mental health
 - Trauma
 - Transitional-age youth.
- Accredited internship programs of health service psychology for the development and implementation of interdisciplinary training of psychology graduate students for providing behavioral health services, including:
 - Trauma-informed care
 - Substance use disorder prevention and treatment services
 - Development of faculty in health service psychology.



Purpose

- The purpose of the BHWET Program for Professionals is to increase the supply of behavioral health professionals while also improving distribution of quality behavioral health workforce and thereby increasing access to behavioral health services. A special focus is placed on the knowledge and understanding of children, adolescents, and transitional-aged youth at risk for behavioral health disorders.



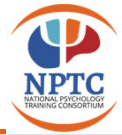
Program Requirements

- Experiential sites are located in HPSA areas with scores of 16 or higher or within geographical areas considered rural by FORHP.
- Enhance didactic and experiential training activities that develop trainee competencies in behavioral health as well as its integration into primary care for the development and implementation of interdisciplinary training (i.e. **two or more health disciplines**);
- Create or enhance current, evidence-based interprofessional training programs for faculty and field site supervisors;
- Include **technology integration** by providing options for distance learning and developing didactic and experiential training activities that address strategies for providing telehealth services and increasing digital health literacy;



Program Requirements cont.

- Establish relationships with community-based partners to provide experiential training, career development, and job placement services that assist students in obtaining employment following graduation from the program;
- Demonstrate any internship program prioritizes cultural and linguistic competency;
- Use an evidence based continuous monitoring tool to evaluate program objectives and make adjustments as needed to improve program outputs and outcomes over the four-year project period;
- Collect specified program and performance data, and disseminate findings to appropriate audiences. Participate in program evaluations during and upon completion of the project period.



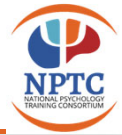
Additional Areas of Focus

- **Health Center Collaboration** – HRSA-Supported Health Centers provide culturally competent, comprehensive primary care services in an integrated setting to communities in high need and high demand areas. Collaborate with these centers to develop experiential training opportunities and leverage partnerships for future employment opportunities for graduates.
- **Violence Prevention** –Address the role that intimate partner violence and youth violence play in the behavioral health outcomes of individuals in high need and high demand areas by incorporating plans for didactic and experiential training that recognizes and supports victims through an understanding of trauma-informed care. Behavioral health service delivery will ideally also include the provision of culturally and linguistically appropriate care for racial and ethnic minority populations within the community.
- **Loan Repayment Programs** – To reduce financial burdens that students and trainees may face, applicants can connect graduates with HRSA-sponsored loan repayment programs such as the NHSC SUD Workforce Loan Repayment Program or the NHSC Rural Community Loan Repayment Program.



Finances

- Sites will invoice for the following amounts monthly:
 - *Intern Pay*
 - *EHR Fees*
 - *Supervisor Fees*
 - *Health Insurance Fees*
- BHWET will reimburse sites up to \$28,352 for intern pay. Both sites are paying \$35,000 and cannot use federal funding for the difference in pay.
- Interns will not be able to be paid through federal funds past the 12 month mark (in the event of an extension).
- If any intern leaves the program prematurely, the money paid up to that point using federal funds would need to be returned to HRSA.



NPTC Work Plan

- **Work plan items related to sites:**
 - 60% of all intern client contact with individuals with substance use disorders, history of trauma, or residing in underserved/rural areas (tracked on their NPTC timesheet).
 - Interns utilize outcomes screening (PHQ9, GAD7, etc.) on all clients.
 - Complete baseline and follow-up integration readiness assessment.
 - 60% of all client contact with individuals/groups outlined by APA SOA as diverse.
 - **Gather baseline data for populations served prior to implementation.**
 - Continuously collect and analyze service data on population, diversity, and health indicators.
 - Identify and resolve sustainability barriers to post-grant continuation.



Didactic Training

- IHC Interns will complete 12 additional full-day didactics in essentials of primary care/integrated health and substance abuse interventions.
- All trainings will be virtual and are typically scheduled the second Wednesday of each month (dates subject to change).



Points of Contact

- Points of contact will complete integration readiness assessments each year and assist with paperwork throughout the project.
 - **Burrell**
 - Kristen Thompson (Bothwell Family Health, Truman Lake, and OBGYN)
 - Chelsea Gilliam (MSU Cares, CoxHealth)
 - **Compass Health**
 - Jennifer Voss (Wentzville)
 - Whitney Hines (Columbia-Worley)
 - Lida Santiago (Butler)
 - Tosha Larson (Nevada)
- If a site location or POC changes over the course of the project, please inform Katherine so the updates can be made.



Questions?

