

School-based Behavioral Health and Suicide Prevention Subcommittee

Of the Child and Youth Behavioral Health Work Group

May Meeting – 5.15.24



Washington Office of Superintendent of
PUBLIC INSTRUCTION



Vision

All students prepared for post-secondary pathways, careers, and civic engagement.

Mission

Transform K–12 education to a system that is centered on closing opportunity gaps and is characterized by high expectations for all students and educators. We achieve this by developing equity-based policies and supports that empower educators, families, and communities.

Values

- Ensuring Equity
- Collaboration and Service
- Achieving Excellence through Continuous Improvement
- Focus on the Whole Child



Washington Office of Superintendent of
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Equity Statement

Each student, family, and community possesses strengths and cultural knowledge that benefits their peers, educators, and schools.

Ensuring educational equity:

- Goes beyond equality; it requires education leaders to examine the ways current policies and practices result in disparate outcomes for our students of color, students living in poverty, students receiving special education and English Learner services, students who identify as LGBTQ+, and highly mobile student populations.
- Requires education leaders to develop an understanding of historical contexts; engage students, families, and community representatives as partners in decision-making; and actively dismantle systemic barriers, replacing them with policies and practices that ensure all students have access to the instruction and support they need to succeed in our schools.



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Tribal Land Acknowledgment



ONE Logo
by Roger Fernandes
(Lower Elwha Klallam Tribe)

We start today with a land, water, and people acknowledgement. OSPI is here in Olympia, on the traditional territories of the Coast Salish people, specifically the Squaxin Island peoples. We say their name out loud because they are still here today despite the attempted erasure of their language, culture, and bodies. We, as OSPI and the SBBHSP Subcommittee, honor the past, present and future caretakers of these lands and dedicate our work to honor this place they call home. We strive to do so by respecting and affirming tribal sovereignty and culture, working with our tribal governments through the state in government-to-government partnership, and lifting tribal voice in the work of supporting student physical, social, and emotional well-being. We invite you to share the names of the first peoples on whose traditional lands you are joining us from today in the chat.

Agenda: May 15th, 2024

#	Agenda Items	Time	Lead
1.	Welcome	3:00 p.m.	Rep. My-Linh Thai & Christian Stark Co-Chairs
2.	Defining School-based Behavioral Health Revisited	3:10 p.m.	<ul style="list-style-type: none"> Reviewing feedback from last month's discussion
3.	Healthy Youth Survey 2023 Results Discussion	3:30 PM	Matthew Frizzell , Director of Student Information – Program Support, OSPI
4.	School-based Behavioral Health Workforce: Findings from the Sentinel Network	4:10 PM	Ben Stubbs , Washington's Health Workforce Sentinel Network Renee Fullerton , Workforce Training & Education Coordinating Board
5.	Public Comment	4:50 p.m.	
6.	Announcements & Next Meeting	4:55 p.m.	Christian Stark , OSPI
7.	Meeting Adjourned	4:00 p.m.	

Group Agreements

Share airtime; make sure all voices have the opportunity to be heard

Stay engaged

Speak your truth

Expect and accept non-closure

Listen with the intent to learn and understand

Assume positive intentions

Disagree respectfully

Clarify and define acronyms

Take care of yourself and take care of others

Ask for clarification

Listen harder when you disagree

Avoid using the phrase "committed suicide," instead refer to it as a cause of death

Person first language

Respect, but don't expect, the sharing of lived experience

Are these still reflective of us as a group?

Is there something missing?

Is there something that needs to be added or adjusted?





Welcome Members and Guests

Co-Chairs



Representative My-Linh Thai

Christian Stark, OSPI



Members: Youth & Young Adults w/ Lived Experience



Eliasib Alvarado

Hanna Baker

Keira Gregson

Payton Frank

Pradyu Kandala

Rowan Guerrero

Taanvi Arekapudi

Zoe Barnett



Members: Parents, Guardians, & Family Members with Lived Experience



Arnie Martinez

Byron Smith

Danielle Ouellette

Marcella Taylor

Richelle Madigan

Shawnda Hicks

Valerie Denney

Yahaira Nava



School, District, & Educational Service District Staff

Alice Amaya

Pasco School
District

Brooke Fox

Frank Wagner
Elementary

David Crump

Spokane Public
Schools

Devyna Aguon

Renton School
District

Jeannie M Dodd

Burlington Edison
School District

Jodie DesBiens

Northwest
Educational Service
District 189

Joe Neigel

Monroe School
District

Joseph Soliz

Granger School
District

Mabel Thackeray

Quillayute Valley
School District

Megan Howard

Olympia
Educational Service
District 114

Michelle Sorensen

Richland School
District

Tabby Stokes

Vancouver Public
Schools



Members: Health Care Providers & Community-based Organizations



Britnee Harvey Shine Light on Depression/Erika's Lighthouse

Brook Vejo Beacon Health Options

Nolita Reynolds Catholic Community Services

Phyllis M. Cavens, MD Child and Adolescent Clinic

Sinuon Hem Asia Pacific Cultural Center



Members: Local Government/Coalition, Managed Care, and Higher Education



Daniel Smith Community Healthplan of
Washington

Delaney Knottnerus King County, Department of
Community and Human Services, Behavioral
Health and Recovery

Gina Cabiddu Kids Mental Health Washington

Renee' Schoening Whitworth University



Members: Advocacy & Other Professional Staff



Chetan Soni Washington Youth Alliance & Youth/Young Adult

Elise D Petosa Washington Association of School Social Workers

Erin Dury Washington School-Based Health Alliance

Jill Patnode Kaiser Permanente

Megan Reibel & Rafaela Steen Forefront Suicide Prevention

Nigar Suleman WA State PTA

Rayann Silva University of Washington School Mental Health Assessment Research & Training (SMART) Center



State Agency Staff Supporting the Subcommittee

Office of
Superintendent of
Public Instruction
(OSPI)

Health Care
Authority (HCA)

Office of the
Insurance
Commissioner
(OIC)

Department of
Health (DOH)

Department of
Children, Youth, &
Families (DCYF)

Department of
Social & Health
Services (DSHS)

WA State School
Directors'
Association
(WSSDA)



Defining School-based Behavioral Health



- What does comprehensive SBBH include?
- Who is involved? Who plays a role?
- What does it look like?
- What does it feel like?
- What is it not?



What should it **not** be?

Siloed

Inequitable

One size fits
all

Reactive

Harmful

Burdensome

Isolating

Discouraging

Overwhelming

Punitive



Core Components of Comprehensive SBBH

Accessibility & Equity

- Supports that students and their families **know** how to access
- Supports that are accessibility to **all** students in all parts of the state, regardless of location, race & ethnicity, gender & sexuality, etc.

Preventative vs. Reactive Approaches

- Need to shift from reactive measures to **funded** preventative strategies that are consistent & start as early as preschool

Empowerment, Self-Advocacy, & Agency

- Empowering youth **to advocate for their needs and the needs of their peers**
- Focus on teaching students, and the adults that serve them, how to identify need access the support necessary to meet those needs (**mental health literacy!**)



Core Components of Comprehensive SBBH

Collaboration and Individualization

- Care that reflects the individual and is trauma-informed; every student doesn't need every support
- Provided integrated and coordinated supports across tiers of student need – Multi-Tiered Systems of Support (MTSS)
- Clear role definitions and collaborative agreements between school staff and community partners

Cultural Responsiveness and Inclusion

- Culturally responsive care that recognizes culture is a central part of effective care
- Ensuring that all students feel a sense of belonging and safety in the school environment



Core Components of Comprehensive SBBH

Staff Training & Support

- How are we caring for the adults that are caring for the students?
- Ensure that staff know what to do and are embedded in a system where supports are easy to access & manage

Funding & Resource Allocation

- Adequate, consistent funding that allows schools to build support structures that with enough capacity to meet identified needs



Who plays a role? Everyone!

Starts with students. Effects everyone.

Comprehensive means collaboration between **all** school staff, community partners, education service districts, parents and families, and students themselves!

- We **should individualize** who sits at the table to support each student.
- Environmental systems and cultural changes should work **in tandem with schools, homes, and communities, especially parents and families.**
- Schools are microcosms to issues/challenges that the community is dealing with

Clear role definition for adults in the support system, accounting for individual strengths, relationship-building with students, and professional scope of staff.

- Multi-tiered Systems of Support (MTSS) as a base component underlining supports
- MTSS – how we organize the adults in the system



What should it **feel** like?

- The flow of improvement should be **steady**.
- A feeling of **safety** is crucial, and everyone should feel that they belong.
- **Belonging** precedes achievement in school. School climate is necessary to meet the behavioral health needs of all students.
- **Inclusion**
- Supportive and **responsive to student need** and **agency**
- **Accessible, consistent, coordinated, empathetic** communities of care.
- **Intentional relationships** and skill building.
- Connective, Welcoming, **Hopeful**, and Inspiring.
- Caring, healthy environment **where relationships and dignity are centered**.

Supportive
Empowering
Inclusive
Safe
Normalizing
Connective
Hopeful
Communicative
Responsive
Compassionate



Purpose of the SBBHSP Subcommittee

To advise the CYBHWG on creating and maintaining an integrated system of care through a tiered support framework for preschool through twelfth grade school systems defined by the office of the superintendent of public instruction and behavioral health care systems that can:

- Rapidly **identify** students in need of care and effectively link these students to appropriate services
- Provide age-appropriate **education** on behavioral health and other universal supports for social-emotional wellness for all students, and
- **Improve** both education and behavioral health **outcomes** for students.

The school-based behavioral health and suicide prevention advisory group shall consider the broader behavioral health issues impacting children, youth, and families, while focusing on the issues that are unique to children and families that interface with schools. The work group co-chairs may invite non-workgroup members to participate as advisory group members.



What does the group *actually* do?

Bring people together

Monthly meetings with youth & family members, school and community behavioral health staff, advocacy, technical assistance, & other professional staff

Share information

- Highlight promising practices, share relevant data and information on system supports, and identify ongoing gaps in the system

Recommend policy changes

- Create annual recommendations to the CYBHWG for improving school-based behavioral health supports for P-12 students and their families in Washington



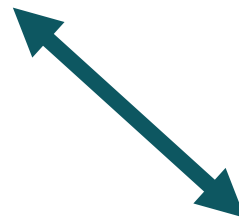
2024 SBBHSP Timeline

2024 Monthly Meeting Dates:

- Wednesday, April 17th
- Wednesday, May 15th
- Wednesday, June 26th
- Wednesday, July 17th
- Wednesday, August 21st
- Wednesday, September 11th
- Wednesday, October 9th
- Wednesday, November 6th
- Wednesday, December 11th

Recommendations Timeline:

- *August 28th* – Subgroups' **draft recommendations due**
- *September 5th* – Subgroups present draft recommendations
- *October 1st* – Subgroups' **final recommendations due**
- *October 14th* – Subgroups present & discuss final recommendations
- *November 4th* – Subgroups' **statements of support due**



*Meetings scheduled
from **3-5pm***



2024 Legislative Recommendations

Funding for school districts: Provide funding to school districts to plan, coordinate, and provide school-based supports that address the emergent student mental health crisis.

Mental health training: Provide funding to school districts to provide culturally-responsive mental health & suicide prevention training for school staff and student families.

Designating a lead agency: Designate a statewide leadership authority for student behavioral health and well-being, with a mandate and the funding to ensure student access to comprehensive behavioral health services in school and interconnected community settings.

Access to student mental health education: Fund a state position to serve as a mental health curriculum lead responsive for reviewing, disseminating, and cataloging high-quality mental health literacy curriculum for the P-12 education system.



Mental Health Literacy Position!

The State Legislature allocated \$150,000 to OSPI for FY25 to hire a mental health instruction implementation coordination to facilitate the additional of mental health education curriculum in schools, through:

- Working with Educational Service Districts to **build awareness of learning benefits** and **resources availability**
- Providing training and support to school staff in the implementation of mental health education and **integration into existing health standards**
- Facilitating office website updates to reflect available mental health instruction resources and support data
- Facilitating the addition of mental health literacy components to state learning standards and updates social emotional learning standards to reflect differentiation between the two programs & the grade appropriate nature of each program.

Please share the job opportunity with folks in your networks!



Youth & Parent Leads

Introducing two new lead opportunities!

- Youth & Young Adult Lead
- Parent/Guardian/Family member Lead

Requirements:

- Attend monthly (1 hour) planning meeting w/ the SBBHSP team
- Attend regular monthly SBBHSP meetings

Role: Essentially, work with SBBHSP staff to lead coordination & engagement with our members with lived experience!

Interested?: Please send a short email to christian.stark@k12.wa.us explaining, in 2-3 sentences, why you are interested in serving in one of the two lead roles by **Wednesday, May 29th**.



Workforce Workshops – Register Today!

The SBBHSP Subcommittee is hosting a series of workshops to engage SBBHSP members, and the broader community the group represents, on topics related to school-based behavioral health workforce.

- Workshop #1: **Tuesday, May 28th | 2-3pm** – [Register Here](#)
- Workshop #2: **Wednesday, June 5th | 3-4pm** – [Register Here](#)
- Workshop #3: **Thursday, June 13th | 9-10am** – [Register Here](#)
- Members with Lived Experience Workshop: **Tuesday, June 11th | 3-4pm** - [Register Here](#)
 - *All three of the workshops above are also open for youth/youth adults and parents/guardians and family members!*

At the end of the series of workshops, we will work with those of you that participate to share findings:

- To the Workforce & Rates Subgroup: **Wednesday, June 21st | 10-11am**
- To the SBBHSP Subcommittee: **Wednesday, June 26th | 3-5pm**



Workforce Workshops – Register Today!

Guiding Questions:

- What are the workforce and/or rates issues in your area related to school-based, or school-coordinated behavioral health supports?
- What are the biggest areas of need across the state right now related to SBBH workforce? Both in schools at with community providers serving students in coordination with schools.
- What existing programs & initiatives are active in WA to address school BH workforce?
- What recommendations could enhance, expand, or continue impactful existing programs?
- What recommendations could we advance to create new programs/initiatives to fill existing gaps & remove barriers?
- **For our youth members**, how does staffing impact the supports you or peers are able to access in you school?
- **For parents/guardians and family members**, how does staffing and behavioral health workforce impact the supports available to your children at their school, or in coordination with their school?



Community Engagement Partnerships

Looking to partner with representatives from under-represented communities and other communities that are disproportionately represented in data around behavioral health need across the state, including (but not limited to),

- Community-based organizations that support:
 - LGBTQIA+ students
 - Students of color
 - Students with disabilities
 - Students in migratory working families
- Tribes and other organizations that serve native students to inform how our work empowers Tribal voice and addresses the needs of Native students





Health Youth Survey 2023 Results Discussion

Matthew Frizzell, *Director of Student Information – Program Support,*
OSPI



Healthy Youth Survey Data

Matthew Frizzell

Activator

Survey

- Did you know HYS stood for Healthy Youth Survey before today?
- Have you taken the Health Youth Survey before while in school?
- Have you used HYS data in the past year?

Chat

- If you used the HYS in the past year, how did you use it?

Agenda



HYS DATA
PRESENTATION



SENSE-MAKING



EXPLORING THE DATA



HYS Data Presentation

HYS State Data Dashboard - Depression

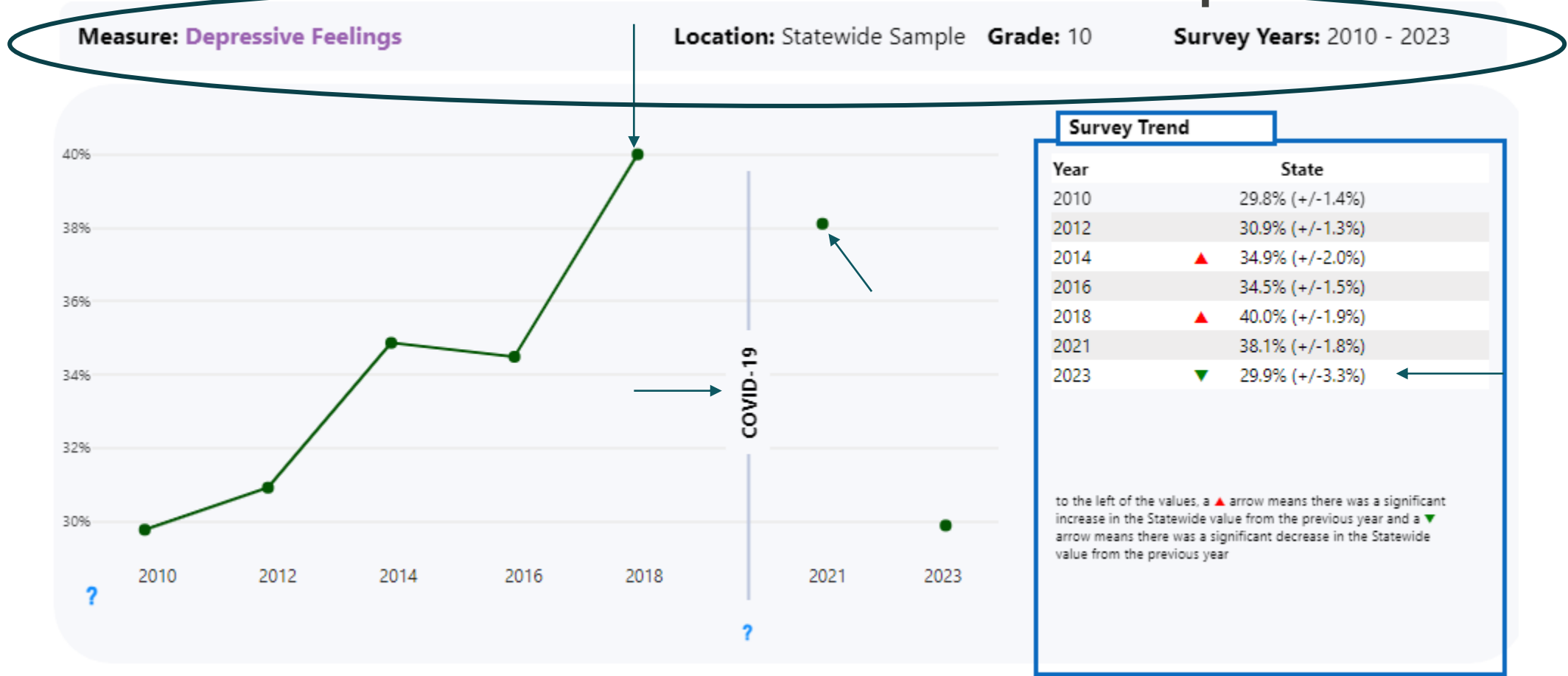


Figure reads: In 2010, fewer than 30% of 10th grade students responded "Yes" to the question: "During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?"

SOURCE: askhys.net state data dashboard, extracted May 10, 2024



HYS State Data Dashboard – Suicide

Contemplation of Suicide

Measure: Plan to Attempt Suicide

Location: Statewide Sample

NOTE
Y axis
varies

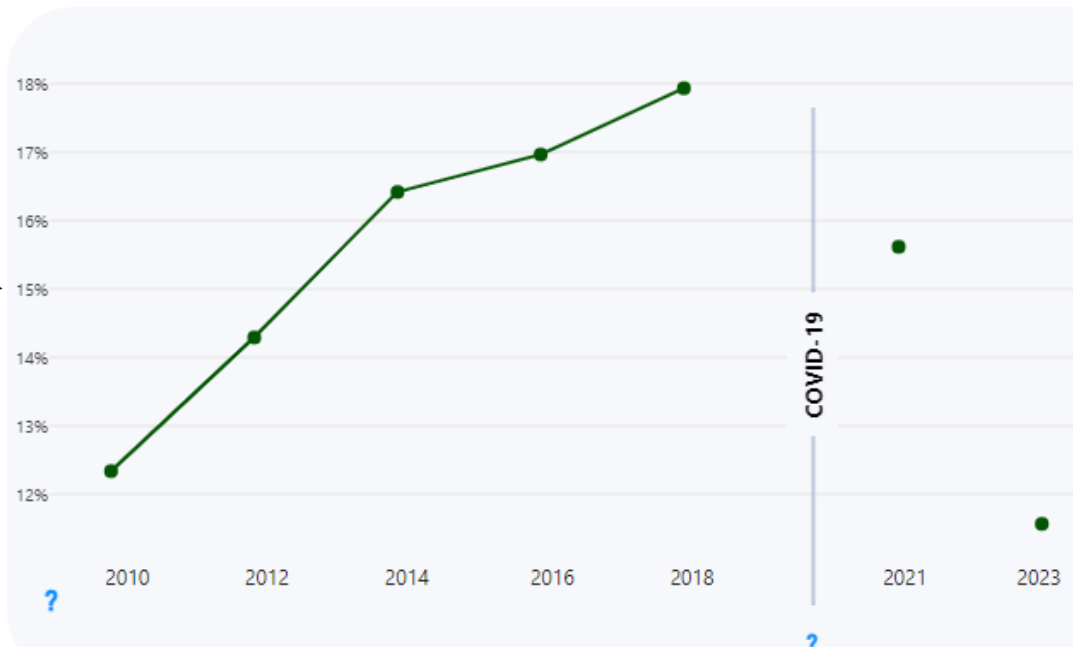


Figure reads: In 2010, over 12% of 10th grade students responded “Yes” to the question: “During the past 12 months, did you ever seriously consider attempting suicide?”
SOURCE: askhys.net state data dashboard, extracted May 10, 2024

Attempted Suicide

Measure: Contemplation of Suicide

Location: Statewide Sample

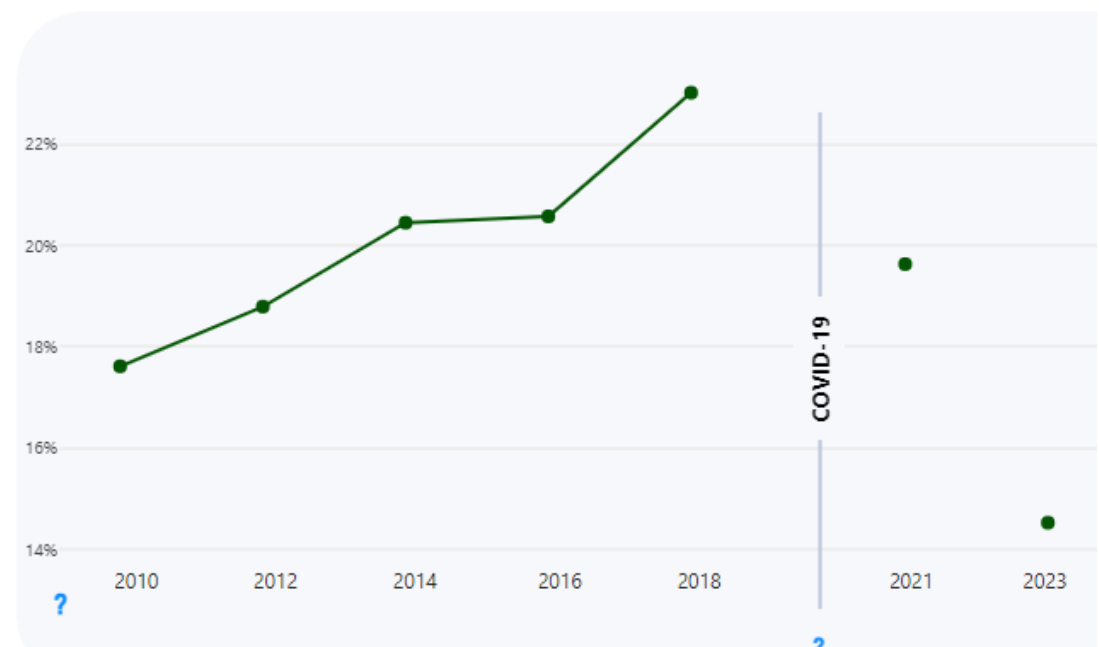


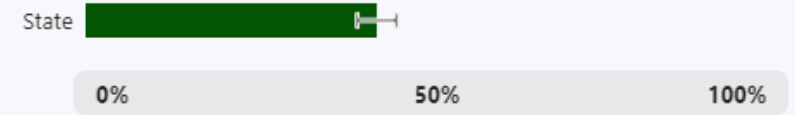
Figure reads: In 2010, over 17% of 10th grade students responded “Yes” to the questions: “During the past 12 months, did you ever seriously consider attempting suicide?”
-AND-
“During the past 12 months, did you make a plan about how you would attempt suicide?”
SOURCE: askhys.net state data dashboard, extracted May 10, 2024

6 Select Breakout Category

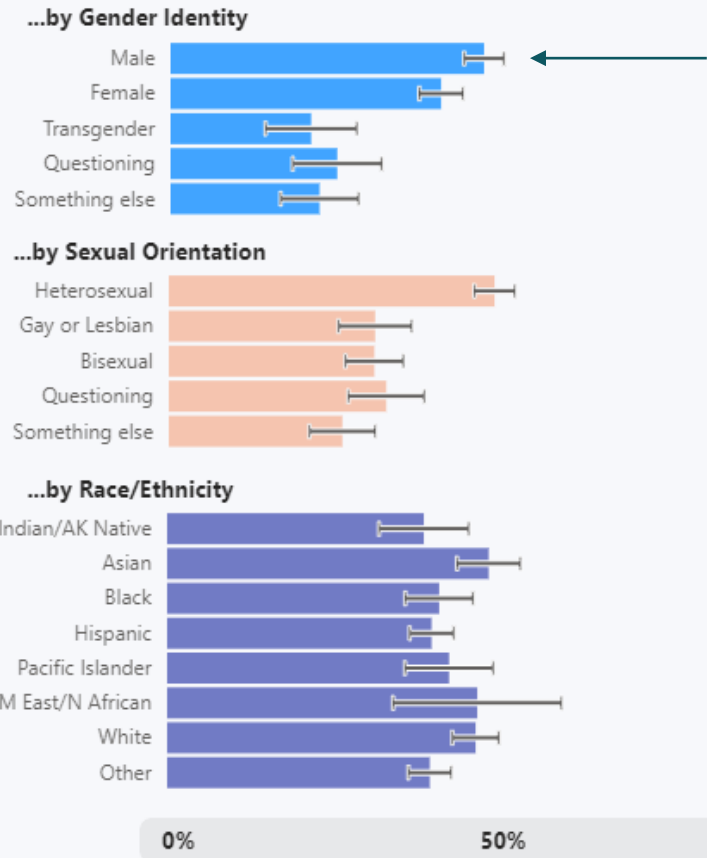
- Demographics**
- Risk Factors
- Disability
- Living Situation

Demographics	
by Gender Identity	
	State
Male	47.8% (± 3.0%)
Female	41.2% (± 3.3%)
Transgender	21.4% (± 7.0%)
Questioning	25.4% (± 6.8%)
Something else	22.7% (± 5.9%)
by Sexual Orientation	
	State
Heterosexual	48.4% (± 3.0%)
Gay or Lesbian	30.6% (± 5.4%)
Bisexual	30.5% (± 4.3%)
Questioning	32.3% (± 5.6%)
Something else	25.8% (± 4.9%)
by Race/Ethnicity	
	State
Am Indian/AK Native	37.3% (± 6.5%)
Asian	46.8% (± 4.6%)
Black	39.6% (± 4.9%)
Hispanic	38.5% (± 3.2%)
Pacific Islander	41.0% (± 6.4%)
M East/N African	45.1% (± 12.2%)
White	44.9% (± 3.4%)
Other	38.2% (± 3.1%)

% Highly Hopeful in State Sample:



% Highly Hopeful:



HYS State Data Dashboard – Hope Scale

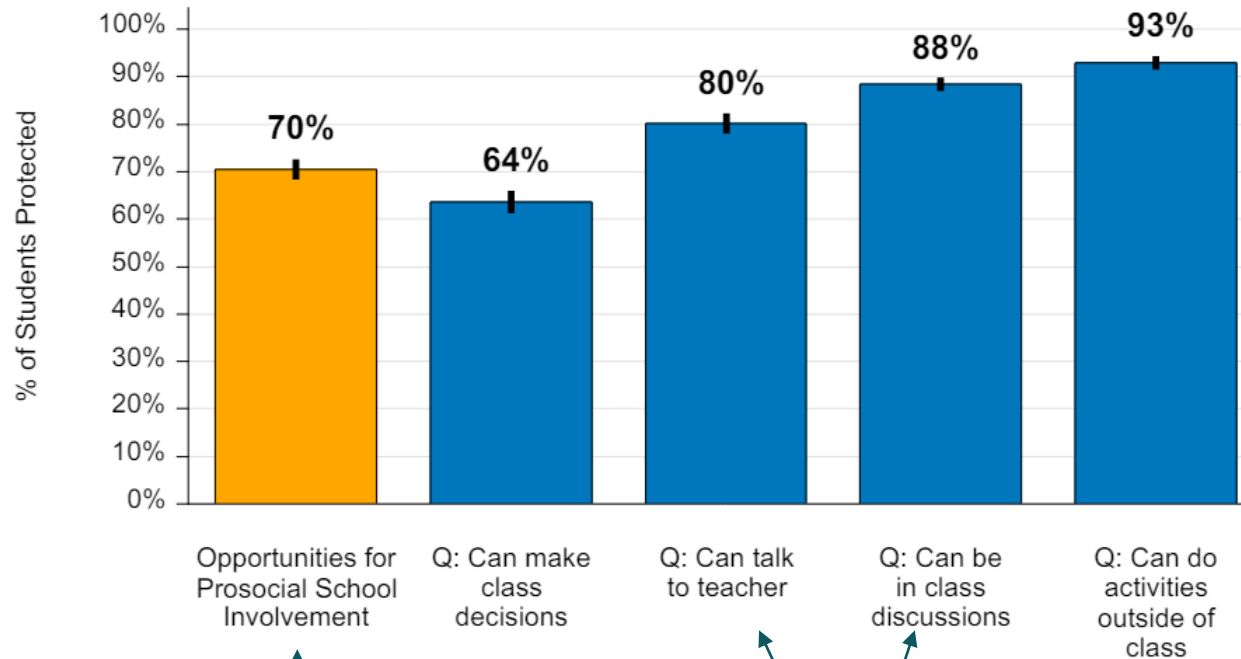
Hope Scale is calculated from student responses to the following prompts:

- I can think of many ways to get the things in life that are most important to me.
- I am doing just as well as other kids my age.
- When I have a problem, I can come up with lots of ways to solve it.
- I think the things I have done in the past will help me in the future

Figure reads: In 2023, 47.8% of 10th students who identify as male were highly hopeful; this is statistically significantly higher than the percent of who identify as female, transgender, questioning, or with another gender identity. SOURCE: askhys.net state data dashboard, extracted May 10, 2024

HYS Fact Sheet – School Protective Factors

Protective Factor: Opportunities for Prosocial School Involvement
with Component Questions (Q:)
Grade 10, 2023



HYS Fact Sheet – School Protective Factors

Statewide Relationship between Opportunities for Prosocial School Involvement and Demographics, Grade 10, 2023

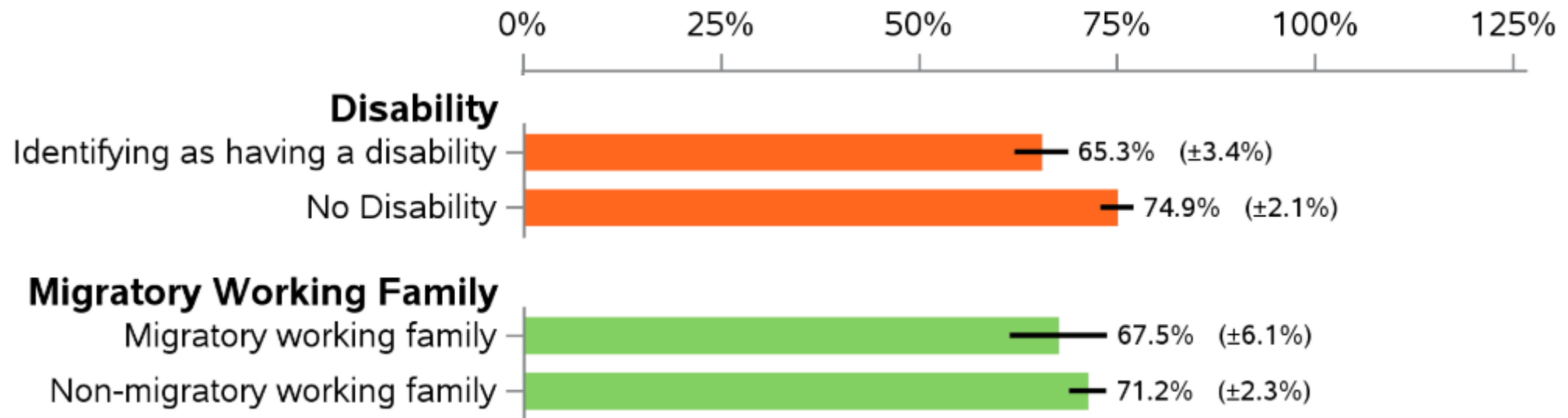


Figure reads: In 2023, 65.3% of 10th grade students who identified as having a disability had opportunities for prosocial school involvement. This percentage is statistically significantly smaller than the opportunities for prosocial school involvement for students who did not identify as having a disability.

SOURCE: askhys.net state data dashboard, extracted May 10, 2024



Washington State
Healthy Youth Survey Online Analysis - 2023

Statewide - Grade 8

Mothers Education Status and School Risk Factor: Academic Failure

		School Risk Factor: Academic Failure		
		above cutoff point - high risk	below cutoff point - low risk	Total
Mothers Education Status	high school or less	52.3% ± 3.7% 447	47.7% ± 3.7% 407	100.0% 854
	more than high school	29.8% ± 2.6% 573	70.2% ± 2.6% 1,351	100.0% 1,924
	don't know/doesn't apply	49.8% ± 3.5% 603	50.2% ± 3.5% 608	100.0% 1,211
	Total	40.7% ± 2.7% 1,623	59.3% ± 2.7% 2,366	100.0% 3,989

HYS Q x Q – School Risk Factors

Figure reads: Fifty two percent of 10th grade students who reported their mothers' education status was high school or less were identified as high risk for academic failure; this is not statistically different from students who reported the same education status for their mother and were identified for low risk.

Variable questions:

- How far did your mother get in school? [G17]
- School Risk Factor: Academic Failure [RISK31P]

Cell contents:

- Percentage (row)
- 95% Confidence Interval
- # of Respondents

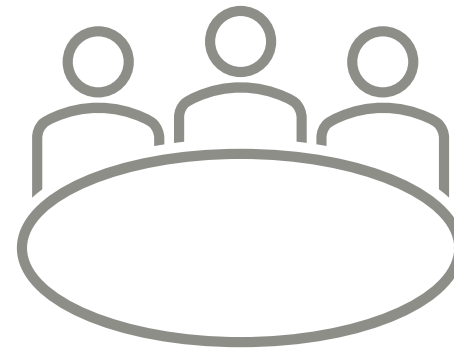




Sense-Making

Four Questions

1. What is one thing that confirmed my world view?
2. What is one thing that challenged my world view?
3. What is one question I have about the data I've seen?
4. How can this data connect to the projects I work on and the policy topics the SBBHSP works on?





Exploring the Data

Exploring HYS Data Outputs

HYS Access

- Public
 - State
 - ESD
 - County

- Login Required
 - District
 - School

Today's Exploration

- Grade 10
 - Statewide
 - Anxiety
-
- Frequency Reports
 - Fact Sheets
 - Data Dashboard



Questions





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School-based Behavioral Health Workforce: *Findings from the Sentinel Network*

Ben Stubbs, *WA's Health Workforce Sentinel Network*

Renee Fullerton, *Workforce Training & Education Coordinating Board*

The Washington Health Workforce Sentinel Network

Recent Findings from K-12 Schools

Children and Youth Behavioral Health Work Group
School-based Behavioral Health and Suicide Prevention Subcommittee
May 15, 2025

Renee Fullerton
Health Workforce Council
Workforce Training and Education Coordinating Board

Ben Stubbs
University of Washington
Center for Health Workforce Studies



Washington's Health Workforce Sentinel Network
Leadership and Funding

Partnership between

- Washington Workforce Training & Education Coordinating Board
- University of Washington Center for Health Workforce Studies

Ongoing funding provided by the Washington State Legislature



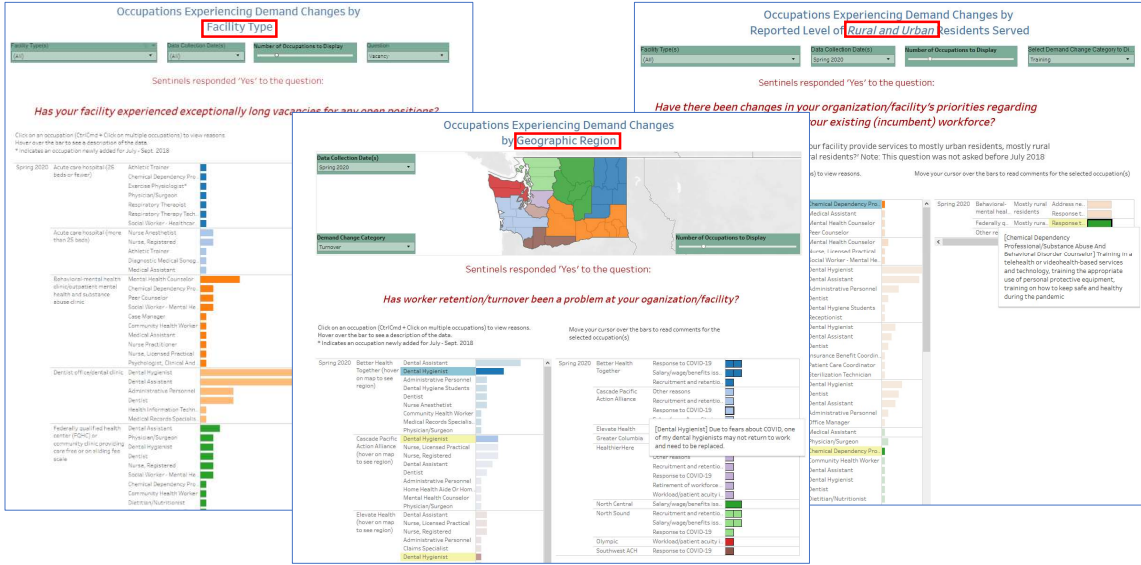
Purpose

Since 2016, the Health Workforce Sentinel Network has supported efficient and effective health workforce preparation and deployment by:

- **Identifying emerging signals** of changes in health workforce demand.
- Tracking and identifying **trends over time**.
- **Rapidly disseminating information** to education, training and policy partners who can respond to findings.



All Findings are Available on the Dashboards



Findings briefs summarize responses for selected facility types

The screenshot displays the website header for Washington's Health Workforce Sentinel Network. The header includes a search icon, the organization's name, contact information (phone number and email), and a navigation menu with links for HOME, ABOUT, JOIN, FINDINGS, and TEAM. Below the header, the main content area is titled "Findings Briefs" and is divided into two sections: "FALL 2023" and "SPRING 2023". Each section contains a grid of buttons representing different facility types. In the "FALL 2023" section, the "K - 12 SCHOOLS" button is highlighted with a red border. The "SPRING 2023" section contains a smaller set of buttons.

Washington's Health Workforce
SENTINEL NETWORK

(206) 543-9797
healthworkforce@wasentinelnetwork.org

HOME ABOUT JOIN FINDINGS TEAM

Findings Briefs

FALL 2023

- ASSISTED LIVING FACILITIES
- BEHAVIORAL HEALTH CLINICS
- COMMUNITY HEALTH CENTERS
- DENTAL OFFICES
- HIGHER EDUCATION/RESEARCH
- K - 12 SCHOOLS**
- LARGE HOSPITALS
- NURSING HOMES/SKILLED NURSING FACILITIES
- NURSING OCCUPATIONS
- PHARMACIES
- PRIMARY CARE CLINICS
- RURAL HEALTH CLINICS
- RURAL HEALTH WORKFORCE
- SMALL HOSPITALS

SPRING 2023

- ASSISTED LIVING FACILITIES
- BEHAVIORAL HEALTH CLINICS
- DENTAL OFFICES
- NURSING HOMES/SKILLED NURSING FACILITIES
- RURAL HEALTH CLINICS
- SMALL HOSPITALS

Sentinel Network workforce demand questions

Recently (in the past 6 months):

- Occupations experiencing exceptionally long **vacancies**
 - Occupations with exceptional **turnover**
 - **New occupations** that they did not previously employ
 - **New roles** for existing employees
 - Changes in **orientation/onboarding procedures** for new employees
 - Changes in **training priorities** for existing employees
 - Does your facility serve **urban, rural or a mix** of urban and rural clients?
- With a focus on qualitative input about which, how, and reasons why***
- Since 2020, 4-5 supplementary questions about topics of current interest

Washington's Health Workforce Sentinel Network

The Questionnaire Casts a Wide Net

Facility Types

Over 30 facility types across many health care settings (schools, hospitals, long term care, behavioral health, community health, home health, ambulatory care, oral health, higher education and more)

Occupations

Over 80 occupations based on Bureau of Labor Statistics "Healthcare" occupation codes

Geography

All areas of the state, with an attempt to capture responses from organizations primarily serving rural patients/clients



Designed with a focus on organizations that provide medical, behavioral health, oral health. As such, the occupation titles and licensing/credentialing questions may not apply to schools

Sentinel Network workforce demand questions

Counselors & Social Workers

- * Substance Use Disorder Professional
- * Marriage and Family Therapist
- * **Mental Health Counselor**
- * Peer Counselor
- * **Child, Family and School Social Worker**
- * Healthcare Social Worker
- * Mental Health and Substance Abuse Social Worker
- * Community Health Worker
- * **Bachelor's - Prepared Counselor (all types)**
- * Substance Use Disorder Prevention Specialist

Nurses/Nursing

- * **Registered Nurse (RN)**
- * Nurse Anesthetist
- * Nurse Midwife
- * **Nurse Practitioner (NP)**
- * **Licensed Practical Nurse**
- * Nursing Assistant-Certified

Physicians/Surgeons

...

Healthcare Diagnosing or Treating Practitioners (not MDs, DOs or nurses)

- * Audiologist
- * Chiropractor
- * Dentist
- * Dietitian
- * Optometrist
- * Pharmacist
- * Physician Assistant
- * Podiatrist
- * **Occupational Therapist**
- * **Physical Therapist**
- * Radiation Therapist
- * Recreational Therapist
- * Respiratory Therapist
- * **Speech-Language Pathologist**
- * Exercise Physiologist
- * Acupuncturist
- * Dental Hygienist

Psychologists

- * Psychologist, Clinical and Counseling
- * **Psychologist, School**

Health Technologists and Technicians

- * Athletic Trainer
- * Cardiovascular Technologist or Technician
- * Diagnostic Medical Sonographer
- * Dietetic Technician
- * Emergency Medical Technician
- * Genetic Counselor
- * Health Information Technologists and Medical Registrar
- * Hearing Aid Specialist
- * Magnetic Resonance Imaging Technologist
- * Medical and Clinical Laboratory Technician
- * Medical and Clinical Laboratory Technologist
- * Medical Dosimetrist
- * Medical Records Specialist
- * Nuclear Medicine Technologist
- * Ophthalmic Medical Technician
- * Optician, Dispensing
- * Orthotist and Prosthetist
- * Paramedic
- * Pharmacy Technician
- * Psychiatric Technician
- * Radiologic Technologist and Technician (not including Diagnostic Medical Sonographer or MRI Technologist)
- * Respiratory Therapy Technician
- * Surgical Assistant
- * Surgical Technologist

Healthcare Support Occupations

- * Dental Assistant
- * Home Health Aide/Home Care Aide
- * Massage Therapist
- * Medical Assistant
- * Medical Equipment Preparer
- * Medical Transcriptionist
- * **Occupational Therapy Aide**
- * **Occupational Therapy Assistant**
- * Orderly
- * Personal Care Aide
- * Pharmacy Aide
- * Phlebotomist
- * **Physical Therapist Aide**
- * **Physical Therapist Assistant**
- * Psychiatric Aide

Other Occupations

- * Administrator/ Director
- * Environmental Services
- * Human Resources Personnel
- * Cook/Food Services
- * Office Staff/ Front Desk Staff/ Scheduler

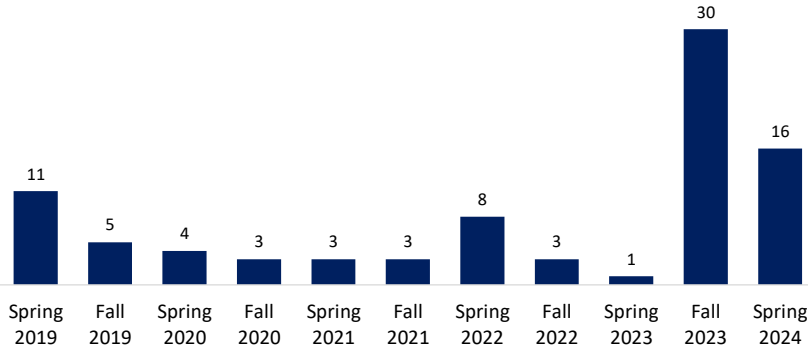
Write-in occupations not shown here

Example of how design of Sentinel Network allows for school responses, but may make interpretation a little more challenging

Findings from K – 12 schools

Themes from statewide responses

Sentinel Network Responses, K-12 Schools



Fall 2023 and Spring 2024 responses from:

- **School districts**
- Educational Service Districts (ESDs)
- Individual schools
- Community organizations working in schools



ESD = Educational Service Districts

Occupations experiencing exceptionally long vacancies K -12 Schools

Rank	Spring 2019 (N = 11)	Fall 2019 – Fall 2021	Spring 2022 (N = 8)	Fall 2022 & Spring 2023	Fall 2023 (N = 30)
1	Registered nurse	There were not enough responses during these time periods to rank occupations	Registered nurse	There were not enough responses during these time periods to rank occupations	Registered nurse
2	Licensed Practical nurse		Licensed practical nurse		School psychologist
	School psychologist		Occupational therapist		
3	Dental hygienist		School psychologist		Mental health counselor
	Nurse practitioner				
	Speech language therapist	Multiple occupations cited at the same frequency	Speech language therapist		

↑ Most cited

K – 12 Schools

Reasons for staffing difficulties (Fall 2023 and Spring 2024):

Pay and benefits

“We have had significant challenges in retaining school counselors. Some of this is that larger school districts pay more.”

“Significantly lower wages [in schools] in comparison to other nursing jobs.”

“Nursing and mental health are lacking a high enough pay due to the 180 school day calendar. The daily pay rate is comparable, but the yearly salary is not.”

K – 12 Schools

Reasons for staffing difficulties (Fall 2023 and Spring 2024):

Funding

“Funding for mental health has changed resulting in less time our partner agency is able to serve students. It was cut from a full day to a half day.”

“I have fewer resources to draw on with the end of COVID money. I can't give a school [substitute staff] when nurses are out because I don't have them any more.”

“With a mostly grant funded team, our behavioral health services are not significantly impacted by fluctuations in the budget. The School District's total cost for an 8.0 FTE team is equivalent to 1.7FTE.”

FTE = Full time equivalent, a measure how many employees working a full-time schedule are needed by a company (or school)

K – 12 Schools

Reasons for staffing difficulties (Fall 2023 and Spring 2024):

Different roles/credentials in schools compared with other settings

“Clinical (hospital) nurses are unfamiliar and/or uncomfortable with difference responsibilities and scope of practice [in schools].”

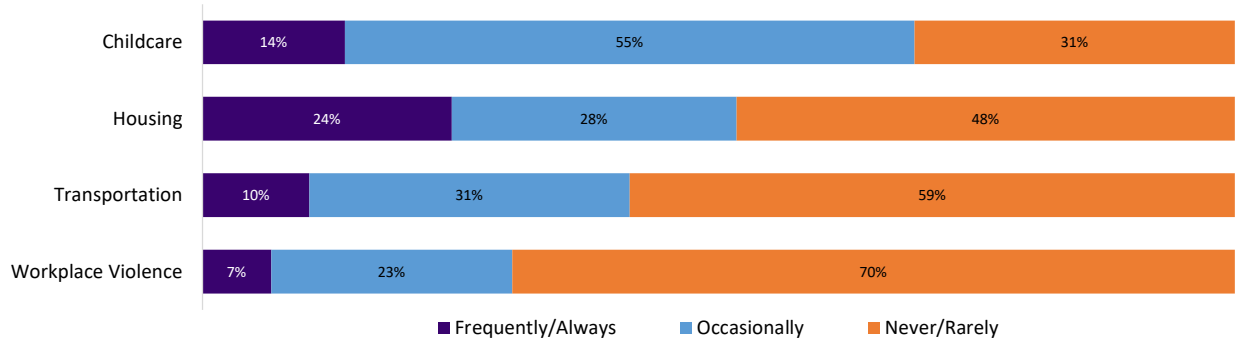
“We are looking for 1:1 care nurses (LPNs) for multi handicapped students, we are hearing that the pay offered in schools is drastically below the areas prevailing wage for this licensure.”

“Universities need to offer a combined LMHC and LICSW with an ESA from OSPI in counseling or social work. Also, OSPI could offer a mental health counselor ESA for all mental health degrees currently available with a master's degree.”

LPN = Licensed Practical Nurse. LMHC = Licensed Mental Health Counselor. LICSW = Licensed Social Worker. ESA = Educational Staff Associate – certification needed to work in Washington schools. OSPI = Washington Office of Superintendent of Public Instruction

K – 12 Schools - Fall 2023

To what extent have **childcare, housing, transportation, and/or workplace violence** affected your ability to recruit and retain staff in the past year?



“We have utilized training and professional development to better equip our staff to safely work with students that have a history of unsafe behaviors. Additional staff that are trained would provide further relief for current staff.”

“Our district’s on-site daycares (providing services to teen parents) are looking at the possibility of opening this up as an option for our staff when there are vacancies.”

Findings from behavioral health organizations

Can use Sentinel Network to understand needs of employers in BH settings

Occupations experiencing exceptionally long vacancies

Behavioral Health Facilities*

Top occupations cited as having exceptionally long vacancies by date of reporting							
Rank	Spring 2020	Fall 2020	Spring 2021	Fall 2021	Spring 2022	Fall 2022	Spring 2023
1	Mental Health Counselor	Mental Health Counselor	Mental Health Counselor	Mental Health Counselor	Mental Health Counselor	Mental Health Counselor	Mental Health Counselor
2	Chemical dependency professional (SUDP)**	Chemical dependency professional (SUDP)**	Substance use disorder professional	Substance use disorder professional	Substance use disorder professional	SUDP	Substance use disorder professional
						Registered Nurse	
						Peer Counselor	
3	Social Worker	Social Worker (Mental Health/SUDP)	Psychiatrist	Social Worker (Mental Health/SUDP)	Social Worker (Mental Health/SUDP)	Social Worker (Mental Health/SUDP)	Registered Nurse
			Social Worker				
4	Peer counselor	Registered Nurse	Peer counselor	Peer counselor	Marriage & family therapist	Marriage & family therapist	Marriage & family therapist

↑ Most cited

*Includes behavioral/mental health, substance use disorder clinics, residential treatment facilities, designated crisis responder services, mobile crisis outreach teams, and other residential and out-of-facility behavioral health services.

**Occupation title changed to Substance Use Disorder Professional (SUDP).

Findings briefs are a good resource for comparisons

The screenshot displays the website for Washington's Health Workforce Sentinel Network. The header includes a search icon, the organization's name, contact information, and a navigation menu. The main content area is titled 'Findings Briefs' and is divided into two sections: 'FALL 2023' and 'SPRING 2023'. Each section contains a grid of category buttons. In both sections, the 'BEHAVIORAL HEALTH CLINICS' button is highlighted with a red border.

Washington's Health Workforce
SENTINEL NETWORK
(206) 543-9797
healthworkforce@wasentinelnetwork.org

HOME ABOUT JOIN FINDINGS TEAM

Findings Briefs

FALL 2023

- ASSISTED LIVING FACILITIES
- BEHAVIORAL HEALTH CLINICS**
- COMMUNITY HEALTH CENTERS
- DENTAL OFFICES
- HIGHER EDUCATION/RESEARCH
- K - 12 SCHOOLS
- LARGE HOSPITALS
- NURSING HOMES/SKILLED NURSING FACILITIES
- NURSING OCCUPATIONS
- PHARMACIES
- PRIMARY CARE CLINICS
- RURAL HEALTH CLINICS
- RURAL HEALTH WORKFORCE
- SMALL HOSPITALS

SPRING 2023

- ASSISTED LIVING FACILITIES
- BEHAVIORAL HEALTH CLINICS**
- DENTAL OFFICES
- NURSING HOMES/SKILLED NURSING FACILITIES
- RURAL HEALTH CLINICS
- SMALL HOSPITALS

Key challenges reported by behavioral health organizations

- *Administrative burden*
 - *Reporting requirements*
 - *Licensing and supervision requirements*
- *Burnout and increased patient need*
- *Private practice vs. community health settings*
 - *Wage competition*
 - *Perception of different workloads*
- *Preference for remote work and flexible scheduling*

Are there similarities/differences in the school setting?

Opportunities for future collaboration

- *Tutorials on how to use data dashboards*
- *Include questions on a topics of interest (that apply to other settings)*
- *Devise a “module” – set of questions specific to schools*
- *Feedback on how we can improve and better meet your needs*

Thank you!

wa.sentinelnetwork.org

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Upcoming Opportunities!

Register for a workforce workshop

- Tuesday, May 28th | 2-3pm – [Register Here](#)
- Wednesday, June 5th | 3-4pm – [Register Here](#)
- Thursday, June 13th | 9-10am – [Register Here](#)

Members with Lived Experience Workshop:

- Tuesday, June 11th | 3-4pm - [Register Here](#)

Apply to be a Lead!

- Youth & Young Adult Lead
- Parent/Guardian/Family member Lead

Please email Christian with interest by **Wed, May 29th**.

Community engagement:

- Connect with us about partnering to host a community engagement opportunity with your community or organization, or another one that you know of!



Take the HCA Survey!



The Health Care Authority (HCA) is conducting an important survey about HCA's existing School Based Services (SBS) programs.

Their vendor, ForHealth Consulting at the University of Massachusetts Chan Medical School, will use the survey results to inform initial recommendations to improve SBS in Washington State.

The survey will ask for ideas and recommendations to improve SBS Medicaid reimbursement opportunities and reduce administrative burdens.

At the end of the survey, respondents will be asked for their contact information (optional), if they're interested in participating in a live feedback session, and if they're willing to be contacted individually with follow-up questions.

The survey closes Friday, May 24th.



Next meeting

Wednesday, June 26th, 2024

3-5pm



We'd love your feedback!

Link: <https://survey.alchemer.com/s3/7818364/May-2024-SBBHSP>

The survey is anonymous, and you are welcome to answer as many, or as few, questions as you'd like

- Responses welcome from members, state agency reps, and public participants!



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