Members Present:
Donald Manning (for Peter Buckley); Eve Byrd; Cindy Darden; James DeGroot; Margaret Evans; Richard Harrison; Anita Huft; Jan Ligon; Garry McGiboney; Steve Miller; Mary Lou Rahn; David Sofferin; Cayce Kump

Center for Health Workforce Planning and Analysis (CHWPA) staff present:
Kristi Fuller; Ben Robinson.

Guest(s): Suzan Bryceland

Meeting Commencement and Opening Remarks:
Ben Robinson opened the meeting by thanking Richard Harrison and the Department of Juvenile Justice for hosting the meeting and thanking everyone for agreeing to serve on the task force. He noted that the task force is not an ad hoc committee but is anticipated to be a standing committee of the University System of Georgia Center for Health Workforce Planning and Analysis (CHWPA).

Individual Introductions:
Members of the task force introduced themselves.

Introduction to the Center for Health Workforce:
Ben Robinson gave a presentation providing an overview of the purpose and structure of the Center for Health Workforce Planning and Analysis (CHWPA) and outlined the progress the CHWPA has made to date.

Role of the Task Force:
• Outline Purpose and Charge
• Scope of Effort
• Meeting Frequency
  It was decided that the task force will meet quarterly, with the next meeting date set for October 21, 2009 at the DJJ Offices and the following meeting to potentially be held on January 20 or 21, 2009.

Examining Existing Behavioral Health Workforce Data
Kristi Fuller gave a presentation on existing behavioral health workforce data.

Focus of Future Work
There was discussion regarding the professions that Center staff are including in their work thus far (Psychologists, Psychiatrists, Health Service Technicians, Social Workers, Counselors, Certified Peer Specialists, Nurses, and Faith Based Counselors) and the potential to include other areas in the work of the BHTF. BHTF members stated the importance of looking at the workforce at all levels—not
maintaining a focus strictly on the highly trained professions, but also considering positions such as the HST. Center staff discussed the flexibility to address applicable professions as determined by the group and requested that BHTF members provide information to Center staff regarding professions that need to be examined.

Suggested Areas of Focus and Future Work of the BHTF
The BHTF discussed some of the areas that the members thought needed to be addressed within the behavioral health workforce, and suggested some strategies for moving forward. The ideas discussed include:

- Seek opportunities to educate/train Behavioral Health Analysts
- Strengthen the dialogue between practice and academia
- Evaluate and potentially update academic and clinical training to ensure that future employees are appropriately trained
- Expand training sites, internships and post-doc sites as applicable
- Analyze licensure requirement changes in the state and seek opportunities to negate challenges i.e. provide career ladder options and assistance to those already working in the system without a license
- Seek opportunities to reduce the challenges of hiring licensed Master’s degree prepared professionals—particularly due to shortages in rural areas
- Evaluate strategies for making the state attractive to health professionals
- Research strategies for providing a benefit to supervisors of persons seeking licensure i.e. providing adjunct faculty positions similar to Oregon and others, implementing a credit system similar to Florida and others
- Explore potential expanded utilization of telemedicine
- Evaluate the potential of creating a standard curriculum for Health Service Technicians (HSTs)
- Examine needs and strategies for re-training of existing workforce
- Address shortages in specialty areas across professions, particularly Child and Adolescent & Geriatrics
- Research need for leadership/management training within existing workforce, particularly for nurses
- Investigate need to address LPN workforce

Submitted by:
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Board of Regents of the University System of Georgia