

Governor's Behavioral Health Services Planning Council  
Vocational Subcommittee FY2020 Recommendations & FY2019 Report

**Vocational Subcommittee mission:**

To make recommendations to the Governor's Behavioral Health Services Planning Council to help identify barriers and create opportunities in order for persons with Severe and Persistent Mental Illness (SPMI) to gain competitive employment. The vision is to increase meaningful and community-integrated employment opportunities for populations served by KDADS.

Vocational Subcommittee Representatives and their organizations (if any) are listed below.

<b>Name</b>	<b>Organization</b>
Matthew Angell	Volunteer
Melissa Bogart Starkey	KDADS
Douglas D. Wallace	Sunflower Health Plan
Heather Elliott	Association of CMCHs of Kansas, Inc.
Beverly Baalman	COMCARE
Nicole Passafume	Valeo
Sarah Hussain	Center for Public Partnerships and Research at KU
Nancy Scott	Kansas Department of Health & Environment
Amy Dean	Department of Corrections
Sarah Godinez	Bert Nash
Stephanie West-Potter	Disability Rights Center
Stephanie Cline	United Health Care Plan
Diana Compton	Four County Mental Health
Stephanie Sanford	Self-Advocate Coalition of Kansas
Collin Oleniick	Self-Advocate Coalition of Kansas
Brad Linenkamp	KU

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The Vocational Subcommittee's FY2019 goals, status of the goals, and related notes are in the table below.

FY2019 Goals	In Process	Completed	No action
<p>1. Formulate a team of a facilitator, regional trainers, and managed care organizations that will support and ensure the facilitation and stability of evidenced based practices.</p> <p>NOTES:            KANCARE 2.0 contracts require MCOs to work on training and fidelity for Evidenced Based Practices with their provider network. The Governor's Behavioral Health Services Planning Council agreed to the creation of an Evidenced Based Practices Subcommittee to focus on the development of infrastructure for evidenced based practices and fidelity review.</p>	<b>X</b>		
<p>2. Vocational Rehabilitation Service and KDADS come together to create funding for peer support services to support evidenced based practices.</p> <p>NOTES:            Vocational Rehabilitation Services and KDADS has lacked capacity to provide staff to work on this goal.</p>			<b>X</b>
<p>3. The IPS Supported Employment model is the model of choice for the Kansas mental health system and should be made available at every Community Mental Health Center (CMHCs).</p> <p>NOTES:            Additional Funding streams have been created at a State Level to assist our CMHC and SUD provider agencies with the cost associated with IPS Supported Employment as an EBP. Billing options include a Medicaid Policy Change CPST Code, Operation Community Integration (OCI), First Episode Psychosis (Block Grant-SAMHSA), State General Fund contracts (SAMHSA-Systems of Care) and a KANCARE 2.0 1115 Demonstration Waiver.</p>		<b>X</b>	
<p>4. Training and collaboration opportunities will be available across the state, to address areas of consistency of services and proper mental health and vocational rehabilitation training for all providers of supported employment services.</p> <p>NOTES:            Vocational Rehabilitation Services and KDADS has lacked capacity to provide staff to work on this goal. In addition, funding was necessary to support training and was not received.</p>			<b>X</b>
<p>5. Increase engagement of stakeholders, consumers, families and employers.</p> <p>NOTES:            During FY2019, the Vocational Subcommittee recruited new representatives from an array of stakeholders including Self-Advocate Coalition of Kansas, consumers, managed care organizations (MCOs), Other state agencies (Kansas Department of Health &amp; Environment Working Healthy, Department of Corrections Mental Health &amp;</p>		<b>X</b>	

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Housing), Associations of Community Mental Health Centers of Kansas, Community Mental Health Centers, Disability Right's Center.			
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The Vocational Subcommittee's 2020 goals, recommendations and suggested actions are in the table below.

FY2020 Goals	Recommendations & Actions
<p>1. Kansas needs to formulate a team of a coordinator/champion, regional trainers, and managed care organizations that will support and ensure the facilitation and stability of integrated evidenced based practices i.e. IPS Supported Employment.</p>	<p>A. Hire a full-time dedicated position knowledgeable across disabilities as a Supported Employment Coordinator/Champion within the Behavioral Health Commission at KDADS to oversee the infrastructure at a state-level for supported employment. LOE 100% directed to focus on infrastructure and capacity of supported employment across the state.  <b>To achieve goal: Recommend the GBHSPC request legislative appropriated funding for Supported Employment Coordinator/Champion position.</b></p> <p>B. Hire two EBP regional trainers to begin to ensure evidenced based practices are current, implemented, consistent, and integrated within the CMHCs/SUD provider systems.  <b>To achieve goal: Recommend the GBHSPC request legislative appropriated funding for the EBP regional trainer positions.</b></p> <p>C. MCOs will collaborate with KDADS, KDHE, and Evidence Based Practices (EBP) Subcommittee to ensure that Kansas consumers are provided evidenced based programming/best practices as recommended by SAMHSA, Center for Medicaid Services, National Institute of Health, and National Institute of Corrections in a valued based manner.  <b>To achieve goal: Monthly meetings with KDADS, KDHE, MCOs to address recommendations brought forward by the EBP Subcommittee and create a blueprint for training and fidelity infrastructure across Kansas for EBP programming.</b></p>
<p>2. Build collaborative partnerships and increase integrated training opportunities across the BHS systems through the implementation of state and federal supported employment.</p>	<p>A. SOAR and KDHE Working Healthy Benefits Planners collaborate to build an infrastructure of benefits planning in Kansas. Provide collaboration and training opportunities (Work Incentives Practitioner) for all benefits planners to coordinate benefits across systems.  <b>To achieve goal: Recommend the GBHSPC request legislative appropriated funding to support training and coordination for all benefits planners across systems KDHE and KDADS.</b></p> <p>B. Collaborate with the Employment First Subcommittee specifically KDHE, DCF, Department of Labor, Department of Commerce regarding employment for persons with disabilities.  <b>To achieve goal: Invite representatives from the Employment First Subcommittee to attend the Vocational Subcommittee in an effort to share information about the work of each subcommittee.</b></p> <p>C. Collaborate with the federal government specifically with SAMHSA, Center for Medicaid Services, National Institute of Health, and National Institute of Corrections, HUD and the Social Security Administration.  <b>To achieve goal: Invite the directors of the Social Security Administration Work Incentives Program and the KDHE Work/Working Healthy Program to share information about their programs with the Vocational Subcommittee. Also, invite representatives from federal agencies to share updates with the Vocational Subcommittee.</b></p>