



July 27, 2022

Direct Care Working Group Scope of Practice Testimony

Members of the Direct Care Working Group, thank you for the opportunity to offer testimony today regarding scope of practice concepts.

My name is Mark Mecum and I am the CEO of the Ohio Children's Alliance. Founded in 1973 as Ohio's first statewide child advocacy organization, the Ohio Children's Alliance provides leadership for Ohio's at-risk children, families, and community agencies through direct care service programs and our diverse membership comprised of over 80 foster care and behavioral health agencies across the state.

Our agencies strengthen families with evidence-based programming, treat kids with complex behavioral health issues, keep kids safe in foster care, and so much more. They are preparing Ohio's next class of foster care alumni for bright futures through the *Bridges* program. They are at the center of our state's new OhioRISE program, as care management and treatment providers. And, from a higher level, they are at the center of Ohio's family health care and social service delivery system.

As in other health and human services fields, our providers have become even more essential as a result of the COVID-19 pandemic, and at the same time, are more scarce.

We recently released a [Workforce Shortage Crisis Report](#) which highlights the cracks that have been newly formed and exacerbated by the pandemic as well as what needs to be done to fix them.

The report highlights some alarming statistics. The pandemic has aggravated already-strained sectors with some agencies down **over 1/3 of their staff** pre-pandemic. Clinicians are reported to be the largest vacancy for agencies with **67%** of agencies reporting this as their highest need. Other noticeable vacancies are in areas including residential treatment direct care staff and case managers.

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There are several scope of practice solutions that can be employed to address shortages in these areas. When we speak about scope of practice, we believe that this not only encapsulates the expansion of duties that direct care providers can perform, but the expansion of eligible providers in specific fields. This can be done by breaking barriers to licensure and supporting career ladders.

We are grateful for the collaboration of our state partners in increasing licensure opportunities and roles of our direct care service workers.

Recently, the Governor signed two pieces of legislation, HB 4 and SB 239, which would allow for the expansion of foster care agency staff. Specifically, HB 4 allows more foster care agency workers to perform foster and adoptive Home Assessor duties and SB 239 expands the pathways to become a part of a treatment foster care team. This legislation ultimately ensures that children can find safe and stable homes sooner, and receive the care that they need.

We are also aware of efforts being considered by ODJFS to minimize duplicative documentation requirements and allow for continuous licensure. These efforts will help to ensure workforce retention by taking some of the administrative burden off of direct care roles.

There are several recommendations we would like to put forward which build on the good work that the state is already doing, and they are narrowed to the following areas:

- Deemed Status
- Licensure Reciprocity
- Trainee Status Extension
- Psychologist Scope of Practice
- Supporting Career Ladders Through Power Ohio

Deemed Status

We continue to support the elimination of red tape requirements, and advocate for what is called “deemed status” for ODJFS licensed child welfare agencies.

Through deemed status, nationally-accredited child welfare agencies are recognized by ODJFS as complying with the state licensing regulations that overlap with their national accreditation requirements. While language was

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codified 15 years ago permitting agencies to utilize deemed status in Ohio, it is not regularly authorized, if ever, by ODJFS staff. Creating a stronger deemed status arrangement would cut down on duplicative oversight and policy reviews conducted by state staff, which also entail many hours of preparation and implementation work by the child welfare agencies. It would also free up time and resources at child welfare agencies to do more direct service work and eliminate unnecessary bureaucracy from the scope of practice of direct care professionals. This opportunity is even more critical today due to a new federal law, the Family First Prevention Services Act, which requires more child welfare agencies to possess national accreditation. Therefore the opportunity for deemed status has grown, yet the actual practice of the state government allowing these arrangements continues to be scarce.

Licensure Reciprocity

Licensure reciprocity is an important tool in expanding the direct service workforce. There are two bills currently moving through the State Legislature, House Bill 203 and Senate Bill 131, which would reform occupational licensing and remove regulations for many occupation types, including those in the child welfare and behavioral health fields.

Enacting licensure reciprocity will make it easier for individuals to practice in Ohio by recognizing that individuals do not lose their skills when they cross state lines. Given our workforce crisis, Ohio-based employers need more viable strategies to attract workforce from across state borders, such as Cincinnati-based organizations attracting professionals who reside in Northern Kentucky and are licensed by Kentucky but not yet Ohio.

Trainee Status Extension

When newly-graduated social work and counselor students take their licensure exams, there are several barriers that they and their current/future employers face. Scheduling the exam can take up to two months, after which applicants must wait to receive results and their certificate of licensure. One agency reported that a staff person had been informed that they passed their licensure exam but still had to wait four months to receive their official certificate. During this time, the aspiring social workers and counselors were hampering in their employment by lacking the full scope of practice, or preventing from being hired altogether.

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Our community-based agencies report that it would make a significant, positive difference if these professionals could perform the services within the scope of practice of the license they applied for once their exam is completed. This concept could be operationalized by allowing the state social work and counselor trainee status to extend six months beyond graduation, which would provide time for the exam and certification process to be finalized. Extending this status to them would make them more marketable to employers, and would allow employers to continue, or begin, to bill insurance for their services.

Psychologist Scope of Practice

In Ohio, psychologists possessing a Master's Degree must work under the supervision of a psychologist with a PhD. This requirement exacerbates a dire shortage of child and family psychologists and we ask that it be revisited. It is the experience of our agencies that psychologists with a Master's Degree are capable of practicing a scope of work independent of a supervising PhD psychologist, and therefore perhaps a new scope of work should be reviewed and considered in order to maximize the contributions Master's prepared psychologists can have in our communities.

Supporting Career Ladders Through PowerOhio

POWER is an acronym for *Powering Optimal Wages and Encouraging Retention*. PowerOhio currently provides funds to early childhood professionals in order to increase these trained professionals' skills and retention.

We would like to see PowerOhio expand to the child welfare and behavioral health sector. The expanded program could leverage the OCCRRA Ohio Professional Registry (OPR) system and the courses and endorsement would align with Ohio's Trauma Informed Care Certificate (TICC).

Once a professional earns a certificate, they could begin the Associate or Bachelor Degree during the Certificate Retention Period. Professionals could receive payments while completing their Associate or Bachelor degree in the following coursework: Social Work, Counseling, Psychology (others may be added).

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This state-supported program would help to increase the number of licensed professionals at ODJFS and OhioMHAS agencies and support upward career mobility.

While Ohio's children and families struggle to cope with the impacts of COVID-19, they need our help more than ever before. Our community mental health and foster care agencies are responding as forcefully as they can, but the demand for services is far out-pacing Ohio's supply. Dynamic solutions are needed to combat the workforce shortage crisis facing the behavioral health and children services sectors.

The Ohio Children's Alliance seeks to create a better path forward for Ohio's kids and their caregivers. We need to resolve the workforce crisis in front of us to support community agencies and empower children and families to thrive.

To increase the connection between capable individuals and opportunities in the field, we request that state leaders assess scope of practice concepts and open pathways for eligible candidates to fill much-needed roles.

Thank you again for the opportunity to provide testimony on the direct care workforce scope of practice. I am happy to take any questions you may have.

Sincerely,



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