



The Behavioral Health System for Future Generations (BHSFG) Commission proposes the following recommendation for consideration: **Development and deployment of a Comprehensive Crisis Worker Curriculum and Certification Course**.

## **Problem Statement**

Workforce stability and capability, when underdeveloped, leads to substantial gaps in a health system's capacity to respond to crises. Certification programs have been shown to increase worker retention by enhancing workers' sense of competence and belonging, in addition to formalizing the crisis professional career track.

The proposed certification program would position the workforce to effectively respond to the increasing demand for highly trained behavioral health crisis professionals. The proposed curriculum fills gaps in the existing training for crisis workers, which as currently constituted leads to less effective crisis intervention services and missed opportunities for valuable early intervention and support for individuals experiencing crises. There is a need for the development and deployment of a comprehensive Crisis Worker Curriculum and Certification Course to address this pressing issue.

The lack of a structured curriculum and certification program for crisis workers may give rise to the following critical challenges:

- 1. **Inconsistent Crisis Response:** Without a standardized training framework, crisis workers often lack the knowledge and skills necessary to provide consistent, evidence-based care. This inconsistency may lead to suboptimal crisis interventions and negatively impact the well-being of individuals in crisis.
- 2. Limited Access to Diverse Training: Many individuals who work in crisis response roles receive ad-hoc, non-standardized training, which may not adequately prepare them for the complex and dynamic nature of crisis situations. This limited access to training hinders the development of a workforce well prepared for diverse crisis situations.
- 3. Lack of Standard Processes and Procedures: There is a lack of clear guidelines describing best practices for crisis workers to follow, which has the potential to result in ineffective de-escalation techniques and missed opportunities for early intervention. These gaps can have severe consequences for individuals in crisis and the community as a whole.
- 4. **Risk to Individuals and Communities:** Robust crisis services, bolstered by standardized training and certification processes, can contribute to harm reduction for individuals interfacing with the crisis system. This increases positive outcomes for communities affected by crises. A well-trained and knowledgeable workforce is crucial to mitigating risks and ensuring the safety of all stakeholders.





5. **Legal and Ethical Concerns:** The absence of standardized training can lead to potential challenges for agencies and individual crisis workers. A comprehensive curriculum and certification program can help establish clear guidelines for ethical and legal crisis response.

A Crisis Worker Curriculum and Certification Course would address these issues and ensure the highest quality of care for individuals in behavioral health crises. Such a program would establish a standardized framework for training, equip crisis workers with necessary skills and knowledge, and ensure consistency in crisis response. The curriculum would incorporate well-researched "gold standards" for interacting with various populations at risk of interacting with the crisis system, including but not limited to adults and children with behavioral health conditions and/or developmental disabilities, veterans, and tribal populations. This standardized workforce will provide quality crisis services, improving the wellbeing and safety of individuals in crisis.

## Data and Information Sources

A robust crisis response system is necessary to best respond to individuals in crisis and to alleviate the overburdened state-run health care and emergency response systems that are less equipped to respond to behavioral health crises. Montana's results from the 2023 Mental Health Statistics Improvement Program's (MHSIP) Adult Client Satisfaction Survey show high satisfaction ratings for crisis services:

- 82% positive Mobile Crisis Response services;
- 74% positive Crisis Receiving and Stabilization facilities, which is 22% higher than crisis services received in an ER; and
- 63% positive 988 call center services, which is 7% higher than crisis response services received through 911 call centers.

These results support the assertion that a specialized crisis care service delivery system is well-received by Montanans. This system requires committed resources to sustain and increase its effectiveness.

The crisis response system needs to be properly prepared to serve the unique populations they encounter and should have resources to help standardize care. Represented below is a breakdown of the number of separate providers or programs that currently provide Crisis Now services in Montana:





Crisis Service Type	Number of Separate Providers/Programs
988 Call Center	3
Mobile Crisis Response Program	8
Crisis Receiving and Stabilization	4
Total:	15

Each of Montana's 15 crisis service providers have varying training standards and requirements which leads to inconsistent training curricula across the crisis system continuum and an inability (on the part of DPHHS) to track training efficacy across service types and regions. It should be noted that:

- Certain trainings, such as the academy offered through Crisis Intervention Team programs that some crisis service providers utilize, are not readily available in each community and occur infrequently.
- There are no established means to provide a consistent education across crisis service provider types and no platform to guide service collaboration.
- Other states, such as Utah, have seen positive impacts to their crisis workforce through the implementation of a crisis certification program.

## Recommendation

It is recommended that the Department contract with a vendor experienced in curriculum development to develop and host a Crisis Worker Certification Course that will be available for providers delivering crisis services across the state, including rural communities. Eligible vendor entities will be defined in the contracting process. The certification course will ensure trainees understand specific knowledge areas such as basic suicidology, intervention strategies, and community resources.

The selected vendor will collaborate with crisis provider stakeholders and the Department throughout the project term to leverage and expand upon existing efforts. The project will include:

- o Curriculum identification, development, and continuous improvements:
  - Identification: There are numerous local and national best practice trainings available to crisis workers. The contractor will identify existing trainings that will be used to meet the certification standards, to be built on evidence-based practices.





- Development: Montana-specific information will not be available through existing trainings or educational resources and will need to be developed by the contractor.
- Continuous Improvement: As new research emerges and information becomes outdated, the contractor will update course curriculum.
- Course platform development, deployment, and maintenance:
  - Development and Deployment: To best serve the rural and frontier areas of the state, the certification course will be hosted on a virtual platform. The contractor will build the course curriculum on this virtual platform to ensure user-friendliness and scalability.
  - Maintenance: The virtual platform will require ongoing operational and technical support which is not explicitly funded by this NTI.

Place in Continuum
--------------------

Adult BH Crisis DD Crisis Forensic Crisis Children BH Crisis BHSFG Priority Alignment

Comprehensive statewide crisis system

**Projected Cost** 

Maximum of \$500,000





Impact				
Outcomes and Outputs	Implementation Activities and Milestones			
Target outputs include:	1. Contractor selected and funding issued through applicable			
<ol> <li>All MT MCR staff are trained in this curriculum within one year of curriculum launch.</li> </ol>	procurement vehicle. 2. In collaboration with the Department, contractor develops			
2. People receiving crisis support report 10% higher satisfaction with	course and publishes for public use.			
<ul> <li>services as evidenced by MHSIP.</li> <li>3. Crisis workforce possesses increased worker knowledge and ability to respond to crises, as measured via survey comparing trained crisis workers against those who have not yet received training.</li> </ul>	<ol> <li>The Department facilitates a tiered wave of enrollment from providers, prioritizing staff currently employed by 988 call centers, mobile crisis response programs, and crisis receiving and stabilization facilities before making it available to others interested.</li> <li>Collect progress updates.</li> </ol>			

Supporting Material: <b>Exai</b>	<b>nple</b> Program Bud	dget*	
	Potential Number of Contracts	Funding Distribution	Project Budget
Curriculum development costs	1	One-time	Up to \$500,000
Total			\$500,000

\*For **example** purposes only.

Supporting Material: **Example** Program Criteria\*

The contracted entity must provide a project proposal that includes, but is not limited to, the following:

- Project scope and deliverables;
- Budget;
- Timeline; and
- Plan for outreach and collaboration with subject matter experts.

\*For **example** purposes only.





## Oversight and Program Management

BHDD staff will oversee contract management and monitoring of contractor deliverables.

DPHHS will verify that the contractor collaborates with subject matter experts within DPHHS and from the greater stakeholder community to best develop an effective curriculum. DPHHS will ensure that the contractor leverages existing national best practice materials and other existing crisis trainings and resources to meet the unique needs of crisis workers in Montana.