Community Planning Process - MHSA Three-Year Plan PREVENTION AND EARLY INTERVENTION

WET CATEGORY 2: RESIDENCY AND INTERNSHIPS

GOAL: Augment the department's residency and internship opportunities.

A. PROGRAM, SERVICE, AND/OR INTERVENTION RECOMMENDATIONS

1. Improve or Expand Existing Programs (Exists Already)	1.	Improve or Ex	band Existing	Programs	(Exists Already)
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Existing Program	•		
Master's Level Interns	 The Department currently has a robust Student Intern training program with Master's level students placed throughout the county as part of their degree training requirements. In addition, intern placements have increased through a Board Motion. (Potentially expand # of interns and potential internship sites) 	Expand	1
Increase intern opportunities for Staff of color	 The Department's Internship program provides opportunities for students of color to practice and be exposed to the specialty public mental health system. (Potentially expand # of interns and potential internship sites) 	Expand	2
Residency Programs	 Residency opportunities are available in the public mental health system thru various agreements with educational institutions, some examples include UCLA, Charles Drew, Harbor, etc. Priority is given to those representing or serving un- or under- served communities. (Potentially expand # residents/cohort) 	Expand	4, 5, 6
Post-Doctoral Program	 At Harbor-UCLA, the Department operates an APA approved Post-Doctoral Program. (Potentially expand # of post-doctoral slots) 	Expand	5, 6

2. Add New Programs and/or Interventions (Does Not Exist)

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Program or Service Recommendation	DMH &/or Partner	CPT Recs
1. Proposed new program from Chief of Peer Services to offer peers paid (stipend) internship yearly, leading to potential employment.	Both	3

B. ACTION RECOMMENDATIONS: POLICY, PRACTICE, AND/OR ADVOCACY

- 1. Ensure trainings have a trauma informed approach for DMH staff.
- 2. DMH will continue to seek viable solutions to increase accessibility for DMH staff members with disabilities and/or accessibility challenges.

CPT RECOMMENDATIONS (through 10/27/23)

- 1. Increase the number of master's level staff who are clinically focused or interns in the system.
- 2. Increase intern opportunities for Staff of color for clients to relate/connect when receiving services.
- 3. Increase the amount of paid internships for peers in positions lacking staff (ex: shortage of social workers and case managers) to see if they are interested in that position or pursuing degree.
- 4. Increase in the recruitment of Black psychiatrists and interns for the BAH community.
- 5. Increase recruitment of BAH students in high school to encourage becoming psychologist and interns.
- 6. Provide incentives to attract Black psychiatrists and interns to provide services to the BAH communities.

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WET CATEGORY 3: FINANCIAL INCENTIVES

GOAL: Strengthen the available financial incentives for recruiting new and retaining current DMH staff.

A. PROGRAM, SERVICE, AND/OR INTERVENTION RECOMMENDATIONS

1.	Improve or	Expand	Existing	Programs	(Exists Already)
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Existing Program	Description	Expand/ Improve	CPT Recs
Stipend Program	ram MSW, MFT, Psychology, Psych Tech and PNP students with a stipend in exchange for one year commitment. (Improve outreach and advertisement/awareness)		2, 9, 10, 12, 13
Nurse Recruitment	 The Departments Chief of Nursing coordinates nurse recruitment efforts. (Targeted hiring fairs are ongoing) 	Improve	3
Increase financial incentives for new staff	 The Department, utilizing MHSA WET Regional Partnership (state) funding, is administering the Mental Health Loan Repayment Program. This opportunity offers financial incentives to first line staff. (Continuation and expansion will require County MHSA funding) 	Expand	4, 5, 6, 7, 8, 9, 10, 11, 13
Hiring Bilingual Staff	4. The Department already utilizes candidate lists of pre-tested bilingual individuals to ensure priority during hiring process in those areas where the need exist. (Targeted Hiring Fairs)	Move to HR	12, 13

2. Add New Programs and/or Interventions (Does Not Exist)

Program or Service Recommendation	DMH &/or Partner	CPT Recs
 Explore and report the possibility of expanding Financial Incentive programs to peripheral workforce, while maintaining priority on clinical first line staff. 	Both	1

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2.	Explore innovative efforts to recruit junior and high school students	Both	13
	into employment careers in the mental health system. This would		
	be a long-term project.		

B. ACTION RECOMMENDATIONS: POLICY, PRACTICE, AND/OR ADVOCACY

Description	CPT Recs
1. ADD	

CPT RECOMMENDATIONS (through 10/27/23)

- 1. Increase incentives available for peripheral workforce (i.e., pre-law, DHS, etc.) to increase connections of patient/client to needed services.
- 2. Increase the tuition assistance and/or reimbursement program to do financial planning.
- 3. Lack of nurses and other qualified workers available.
- 4. Increase financial incentives for new staff (e.g., student loan repayment incentive).
- 5. Offer more incentives and trainings for providers/staff with disabilities.
- 6. Strengthen the workforce retention system for DMH program and line staff.
- 7. Increase training for staff to apply to all of the available incentives and programs.
- 8. Increase financial incentives to keep staff in the system.
- Increase support or incentives for LGBTQIA2-S+ staff who are providing services, to protect them and support them, highlight for incoming staff as well, incentivize lived experience Increase financial incentives for those seeking to work in the MH field (i.e., MSW graduates to work with DMH).
- 10. Increase training incentives being offered, such as loan forgiveness for those at the bachelors level.
- 11. Increase employment opportunities for bilingual staff.
- 12. Provide financial support, scholarships, housing, tuition support, stipends, outreach to students while in high school to incentivize completing degrees.
- 13. Prioritize the recruitment of bilingual psychiatrists, especially child psychiatrists, and interns for the Latino community given the massive shortage compared to current and future projected need.