

Office of Statewide
Health Planning and
Development


**Mental Health Services Act (MHSA)
Workforce Education and Training (WET)
Background and Overview**

MHSA WET Five-Year Plan Community Forums

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Office of Statewide Health
Planning & Development

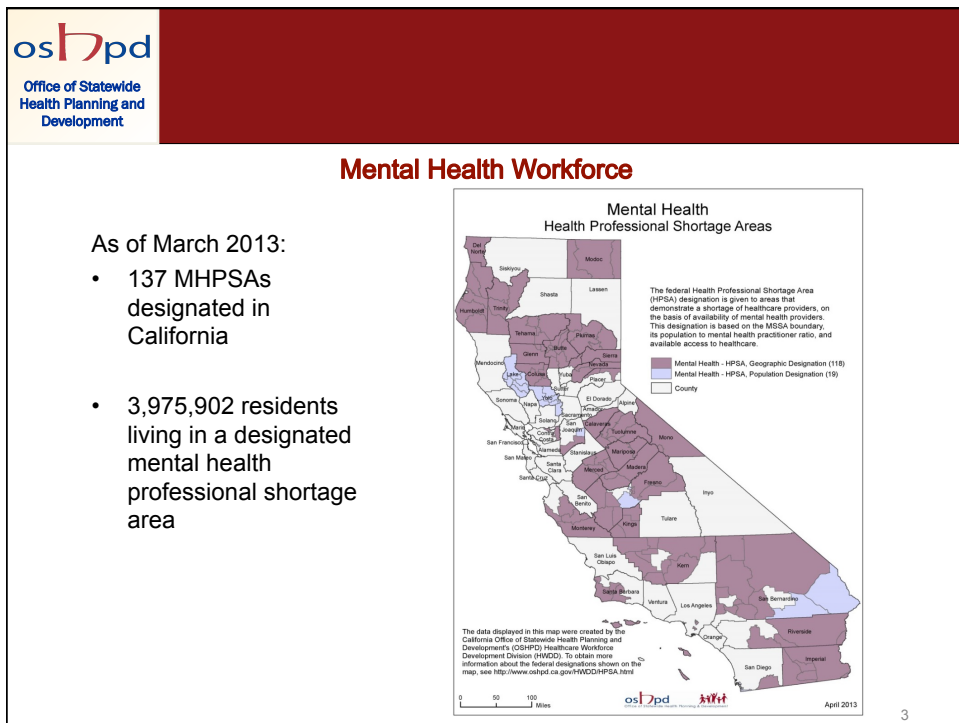
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**The Office of Statewide Health Planning and Development
(OSHPD) Role in Health Workforce Development**

- Has administered health workforce development programs and provided grant funding to address health workforce diversity, supply and distribution issues since the late 1970s
- Administers programs which endeavor to implement the vision of “Access to Safe, Quality Healthcare Environments that Meet California’s Diverse and Dynamic Needs”
- Promotes a diverse and competent health workforce

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Mental Health Services Act Workforce Education and Training (WET)

Mental Health Services Act (MHSA) [Prop 63 passed in November 2004]

- Imposes a one percent tax on personal income in excess of \$1 million to support the public mental health system (PMHS) via prevention, early intervention and services.
- Historically underfunded, the PMHS suffers from a shortage of mental health providers in addition to mal-distribution, lack of diversity, and under-representation of practitioners with client experience.
- To address the mental health provider issues, the MHSA included a component for Mental Health Workforce Education and Training (WET) programs.

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Mental Health Services Act Workforce Education and Training (WET)

Five-Year Workforce Education and Training Development Plan

- Developed in 2008 by the Department of Mental Health (DMH)
- Provided a framework for the advancement and development of mental health workforce education and training programs at the County, Regional, and State levels.
- Specifically, the Five-Year Plan provided the vision, values, mission, measurable goals and objectives, proposed actions and strategies, funding principles, and performance indicators for the use of MHSA WET funds.
- The Five-Year Plan developed by DMH was approved by the California Mental Health Planning Council in 2008 and covers the period from April 2008 to April 2013.

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Workforce Education and Training (WET) Five-Year Plan 2008-2013 State Administered Programs

Stipend Programs: increases the number of licensed mental health professionals in the Public Mental Health System (PMHS) and incorporates MHSA principles into graduate level curriculum.

***Mental Health Loan Assumption Program (MHLAP):** offers loan repayment of up to \$10,000 to mental health providers in hard-to-fill and/or hard-to-retain positions in the PMHS in exchange for a 12-month service obligation.

***Song-Brown Residency Program for Physician Assistants in Mental Health:** funds Physician Assistants (PA) programs that add a mental health track so that PAs can sign mental health treatment plans, transmit orders for psychotropic medications on behalf of supervising psychiatrist, and prescribe and administer psychotropic medications.

Psychiatric Residency Program: trains psychiatric residents in the PMHS, working with the populations prioritized by that community.

Client and Family Member Statewide Technical Assistance Center: promotes the employment of mental health clients and family members in the mental health system.

***Shortage Designation:** reviews and recommends Primary Care, Dental, and Mental Health Professional Shortage Area (HPSA) and Medically Underserved Area/Medically Underserved Population (MUA/MUP) applications to HRSA's Shortage Designation Branch.

Regional Partnerships: represents Bay Area counties, Central Valley counties, Southern counties, Los Angeles County, and Superior Region counties; includes representation from mental health, community agencies, educational/training entities, consumers, family members, and other partners to plan and implement programs that build and improve local workforce education and training strategies.

* = Administered by OSHPD prior to July 1, 2012 transfer


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Mental Health Services Act Workforce Education and Training (WET) Summary of 10-Year Expenditures and Spending Projections June 30, 2012

	10-Year Funding Amounts	Expenditures to Date	Amounts Remaining to be Allocated
1) Local Programs	\$210 Million	\$210 Million	\$0
Regional Partnerships	\$27 Million	\$18 Million	\$9 Million
2) State-Administered Programs			
Assigned from DMH to OSHPD			
Stipend Programs	\$100 Million	\$45.48 Million	\$54.52 Million
Psychiatric Residency Programs	\$13.5 Million	\$3.215 Million	\$10.285 Million
Statewide Technical Assistance Center	\$8 Million	\$3.76 Million	\$4.24 Million
OSHPD			
MH Loan Assumption Program	\$75 Million	\$23.54 Million	\$51.46 Million
PA (Song-Brown) Program	\$5 Million	\$1.7 Million	\$3.3 Million
3) Uncommitted Funds	\$6 Million	\$0	\$6 Million
Total Expenditures	\$444.5 Million	\$305.695 Million	\$138.805 Million


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Workforce Education and Training Five-Year Plan, 2014-2019

- In July 2012, following the elimination of DMH, the MHSA WET programs were transferred to OSHPD. OSHPD is also accountable for the development of the next Five-Year Plan.
- Will provide the vision, values, mission, measureable goals and objectives, proposed actions and strategies, funding principles, and performance indicators for the use of remaining MHSA WET funds for the period from April 2014 to April 2019.
- Will be accompanied by a five-year budget that will allocate remaining State MHSA WET program funding for the next five years.
- This five-year budget will allow the opportunity to provide changes to the funds remaining from the prior ten-year budget developed in 2008. Per WIC Section 5820 (e), the Five-Year Plan requires final approval from the California Mental Health Planning Council (CMHPC) by April 2014.

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Workforce Education and Training Five-Year Plan, 2014-2019

Five-Year Plan must include:

- A. Expansion plans for the capacity of postsecondary education to meet the needs of identified mental health occupational shortages.
- B. Expansion plans for the loan forgiveness and scholarship programs offered in return for a commitment to employment in California's public mental health system and make loan forgiveness programs available to current employees of the mental health system who want to obtain Associate of Arts, Bachelor of Arts, master's degrees, or doctoral degrees.
- C. Creation of a stipend program modeled after the federal Title IV-E program for persons enrolled in academic institutions who want to be employed in the mental health system.
- D. Establishment of regional partnerships between the mental health system and the educational system to expand outreach to multicultural communities, increases the diversity of the mental health workforce, to reduce the stigma associated with mental illness, and to promote the use of web-based technologies, and distance learning techniques.

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Workforce Education and Training Five-Year Plan, 2014-2019

Five-Year Plan must include (con't):

- E. Strategies to recruit high school students for mental health occupations, increasing the prevalence of mental health occupations in high school career development programs such as health science academies, adult schools, and regional occupation centers and programs, and increasing the number of human service academies.
- F. Curriculum to train and retrain staff to provide services in accordance with the provisions and principles of Part 3 (commencing with Section 5800), Part 3.2 (commencing with Section 5830), Part 3.6 (commencing with Section 5840), and Part 4 (commencing with Section 5850) of this division.
- G. Promotion of the employment of mental health consumers and family members in the mental health system.
- H. Promotion of the meaningful inclusion of mental health consumers and family members and incorporating their viewpoint and experiences in the training and education programs in subdivisions (a) through (f).

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Workforce Education and Training Five-Year Plan, 2014-2019 (cont)

Five-Year Plan must include (con't):

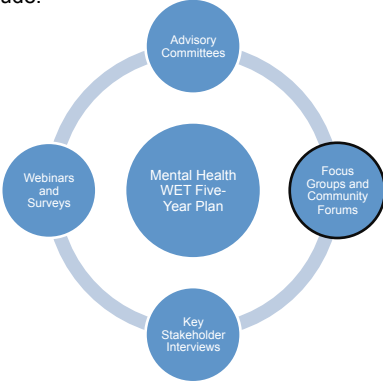
- I. Promotion of meaningful inclusion of diverse, racial, and ethnic community members who are under represented in the mental health provider network.
- J. Promotion of the inclusion of cultural competency in the training and education programs in subdivisions (a) through (f).

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WET Five-Year Plan Development Stakeholder Engagement

To ensure the development of a comprehensive plan, OSHPD is employing a robust stakeholder process to engage diverse stakeholder groups through different strategies that include:



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WET Five-Year Plan Stakeholder Engagement

- The establishment of WET Advisory Committee and WET Five-Year Plan Advisory Sub-Committee
- Focus groups and community forums
- Key stakeholder interviews
- Webinars and surveys

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Action	Date
WET Advisory Committee Meeting	December 3, 2012
Begin Evaluation of Current WET Programs	January 2, 2013
WET Advisory Committee Meeting	January 29, 2013
WET Five-Year Plan Advisory Sub-Committee Meeting	February 27, 2013
Begin Phase 1 Stakeholder Engagement Process (community forums, focus groups, surveys, interviews)	March 4, 2013
WET Advisory Committee Meeting	June 20, 2013
Needs Assessment Begins	July 1, 2013
Mental Health Career Pathways Sub-Committee	July 1, 2013
Finalize First Draft of WET Five-Year Plan	July 24, 2013
WET Five-Year Plan Advisory Sub-Committee Meeting	August 8, 2013
WET Advisory Committee Meeting	September 5, 2013
Finalize First Draft of Five-Year Plan	September 20, 2013
Contractor Provides Statewide Needs Assessment Data	September 25, 2013
Begin Phase 2 of Stakeholder Engagement Process (key stakeholder forums, surveys, interviews, etc.)	September 30, 2013
WET Five-Year-Plan Advisory Sub-Committee Meeting	November 13, 2013
Government Partners Meeting	December 4, 2013
WET Advisory Committee Meeting	December 18, 2013
Planning Council Meeting to Review WET Five-Year Plan	January 2014
WET Five-Year Plan Submitted to Administration for Approval	March 2014
Finalize and Submit Five-Year Plan to Legislature	April 1, 2014

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Definitions

Diversity: Includes dimensions of race, ethnicity, gender, sexual orientation, socio-economic status, age, physical and/or mental abilities, and/or other pertinent characteristics.

Public Mental Health System: Publicly-funded mental health programs/services and entities that are administered, in whole or in part, by the State Departments or County. It does not include programs and/or services administered, in whole or in part by federal, state, county or private correctional entities or programs or services provided in correctional facilities. Title 9, CCR, Section 3200.253

Public Mental Health Workforce: Current and prospective department and/or County personnel, County contractors, volunteers, and staff in community-based organizations, who work or will work in the Public Mental Health System. Title 9, CCR, 3200.254

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Stipends

- Stipends of \$18,500 are available for graduate students in Social Work, Marriage and Family Therapy, Clinical Psychology, and Psychiatric Mental Health Nurse Practitioner who commit to working in the public mental health system for a 12-month period upon graduation
- A total of 21 California schools participate by providing stipends and developing curricula that promotes the MHSA values of wellness, recovery and resilience
 - Since July 2011, the California Psychology Internship Council (stipend contractor) offers its curriculum online free of charge. While many people view the courses, as of June 2012, 268 people had taken the examinations at the end of each module.

Applications			
Fiscal Year	Awarded	Under-Represented	Speak a Language In Addition to English
2005-06	173	53%	*
2006-07	184	58%	59%
2007-08	183	58%	51%
2008-09	265	60%	52%
2009-10	326	58%	61%
2010-11	337	65%	58%
2011-12	360	67%	59%
2012-13	385	TBD	TBD
Total	2,213		

*Data for language capacity is not available for FY 2005-06.


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Mental Health Loan Assumption Program (MHLAP)

- Provides qualified applicants with up to \$10,000 in educational loan repayments in exchange for service in the community public mental health system. Qualified applicants are individuals who work or volunteer in hard-to-fill/hard-to-retain positions in the public mental health system.
- MHLAP application includes questions pertaining to cultural and linguistic competency:
 - Racial/ethnic identification
 - Proficiency in a language other than English
 - Lived experience
 - Paid or unpaid work in the public mental health system serving a particular racial/ethnic, cultural, geographic, faith-based, socio-economic, gender identified, sexual oriented or linguistic population or community
 - How they used the strengths and forms of healing unique to an individual's racial/ethnic, cultural, geographic, socio-economic, gender identified, sexual oriented or linguistic population or community when providing services of support
 - Ability to provide sensitive and welcoming services. For example: "Give an example of how you have participated in treatment interventions and outreach services to engage and retain individuals of diverse racial/ethnic, LGBTQ, cultural or linguistic population."
- From Fiscal Year 2008-09 to 2011-12 applicants were:
 - 70% from underserved backgrounds
 - 60% spoke at least one language in addition to English

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MHLAP

Applications					
Fiscal Year	Counties	Received	\$ Requested	Awarded	\$ Awarded
2008-09	43	1,236	\$15,047,225	288	\$2,285,277
2009-10	52	1,498	\$9,226,619	309	\$2,469,239
2010-11	50	1,009	\$9,899,700	474	\$4,523,757
2011-12	55	1,659	\$41,242,028	661	\$365,680
2012-13	53	1,823	\$17,968,954	1109	\$9,383,649
Total		7,225	\$93,384,527	2841	\$19,027,602

Applicants		
Fiscal Year	Speak a Language In Addition to English	Consumer or Family Member
2008-09	68%	29%
2009-10	63%	35%
2010-11	59%	35%
2011-12	60%	53%
2012-13	48%	TBD

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Song-Brown Physician Assistant Residency Programs

- Adds a mental health track to the Song-Brown Residency Program for Physician Assistants to address the shortage of individuals who can oversee psychiatric treatment plans and administer psychotropic medications.
- Programs are evaluated, in part, on whether they can demonstrate:
 - An understanding of community collaboration
 - Cultural competence
 - An understanding of what client and family-driven services are
 - An understanding of wellness, recovery, and resiliency
 - An ability to provide an integrated service experience for clients and their families
- One of the goals is to ensure that PA students perform their rotations in rural and underserved communities including the public mental health workforce

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Song-Brown Physician Assistant Residency Programs

- From FY 2008-09 to FY 2012-13, grants of \$15,000 to \$167,000 were awarded to six PA programs and have enabled 1,382 PA students to be trained in MHSA principles and perform 6,046 hours of mental health rotations
- The following six programs revised their PA programs to include the values and principles of the Mental Health Services Act:
 - Keck School of Medicine-USC
 - Moreno Valley College
 - Samuel Merritt University
 - San Joaquin Valley College
 - Touro University
 - University of California, Davis
- The above PA programs partnered with the following County Departments of Health and Mental Health to ensure that PA students provide integrated care:
 - Fresno County Department of Behavioral Health
 - Fresno County Health Department
 - Riverside County Department of Mental Health
 - Sacramento County Department of Behavioral Health Services
 - Stanislaus County Health Services Agency

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Psychiatric Residency Programs

- Trains psychiatric residents in the PMHS, working with the populations prioritized by that community.
- From FY 2008-09 to FY 2011-12, there were two psychiatric programs that supported 25 psychiatric residency rotations at the University of California, Davis and the University of California, Los Angeles-Kern to ensure that psychiatric residents receive training in the County public mental health system, working with the populations prioritized by that community. The psychiatric residents are encouraged to continue working in the California public mental health system after their rotations end.
- Revised the curricula in the two aforementioned psychiatric residency programs to include the values and principles of the Mental Health Services Act:
 - Community collaboration
 - Cultural competence
 - Client/Family-driven mental health system
 - Wellness/Recovery and Resilience focus
 - Integrated service experience for clients and their families
- Partnered with County Departments of Mental Health and Community-Based Organizations to ensure that residents perform their rotations in the County Public Mental Health System. Among them:
 - Sacramento County Mental Health Services
 - Kern County Mental Health Services
 - UC Davis Medical Center
 - West Kern Clinic (Wasco)

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Statewide Technical Assistance Center

- The Statewide Technical Assistance Center (known as Working Well Together) provides leadership, training, and technical assistance to public mental health agencies regarding the recruitment, hiring, retention and support of current and prospective employees who have personal experience with receiving public mental health services. Some of Working Well Together's accomplishments include but are not limited to:
 - Disability Calculator 101, a tool that assists employees with disabilities understand how to gain employment without losing benefits
 - A reference manual of Americans with Disability Act Assistance Centers where consumers and their families can gain information about the most current policies on working with disabilities
 - Providing peer training programs which provide consumers with the tools to enter and re-enter the workplace
 - Providing technical assistance to counties' Human Resources departments by helping them develop policies and procedures on working with consumers and family members as fellow employees
 - Developing and publicizing a sample lesson plan for teachers to interest students in a mental health career

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Shortage Designation Program

Since FY 2011-12, OSHPD has partnered with local communities to increase the number of underserved communities federally designated as Mental Health Professional Shortage Areas (HPSA). OSHPD streamlined the Mental Health HPSA designation process utilizing existing data available at the state level to develop a pro-active approach. These designations enable communities to draw down additional federal and state resources such as clinics ability to recruit National Health Service Corps providers, clinic's eligibility for Rural Health Clinic Certification, Federally Qualified Health Center Look-Alike certification, and New Start/Expansion Program as well as eligibility for federal and state grants, and financial assistance opportunities.

OSHPD staff processes Mental HPSA applications in a conventional and pro-active fashion. MHSA funds enable OSHPD to pro-actively prepare applications for Mental HPSA designations and allow the State to maximize opportunities to receive federal funding in those underserved communities.

As of March 2013, there are 137 MHPSAs designated in California and 3,975,902 residents living in a designated mental health professional shortage area.

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Regional Partnerships

- Ongoing forum for geographically proximate communities to develop and implement strategies that recruit, retain, and increase the number of individuals employed or participating in California's public mental health system. Regional partnerships' accomplishments reflect identified regional needs such as:
 - The Superior Region established the first two accredited distributed (distance) learning schools of social work (Bachelors of Social Work to Masters of Social Work programs in the United States at CSU Chico and CSU Humboldt. These programs are supplemented by a mentoring component.
 - The Greater Bay Area Mental Health & Education Workforce Collaborative developed a three-year work plan; funded the start-up of a new MSW program at Cal State Monterey; launched a new Psychosocial Rehabilitation program at Contra Costa College; developed curriculum workshops for MFT educators; developed high school mental health professional pathways programs; offered a consumer and family member employment conference; convened community college human service programs; and launched a new website.
 - The Central Region trained over 50 Mental Health First Aid instructors; supported the development of a rural-focused MSW program through CSU Sacramento and an online Psychiatric Nurse Practitioner program through CSU Fresno; and held the 2012 Transition Age Youth (TAY) UnConvention.
 - The Southern Region contracted with the University of Southern California to develop cultural competency training with practitioners; is working with Loma Linda University on developing core competencies; developed a resource booklet for high school activity fairs; created a document mapping all the mental health certificates and degree programs in Southern California; and launched a new website.
 - The Los Angeles (LA) Region is partnering with local universities for training and research on services to children and youth, transition-age youth, adults and older adults; evaluating LA County's Prevention and Early Intervention Evidence-Based Practices implementation; and expanding the role of peers to become health navigators for people with severe and persistent mental illness.

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