

Regional Partnership Resource Guide



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Introduction

This Regional Partnership (RP) Resource Guide provides an overview of the Mental Health Services Act (MHSA) Workforce Education and Training (WET) programs that fall under the rubric of "Serving Individuals" for delivery at the regional level. These programs correspond with the 2020-2025 WET Five-Year Plan (WET Plan). This Resource Guide describes how these programs operated in the first 10 years of the WET Program through state-issued grants to local entities, and their reconfiguration as RP grants under the new WET Plan.

The significant shift embodied in the WET Plan is empowering Regional Partnerships (RP) to administer these programs to accomplish three important outcomes:

- Ensure funds are distributed throughout the state.
- Determine what workforce program(s) best meet local needs.
- At the individual level, build on the success of pipeline and scholarships to foster these participants' receipt of, for example, stipend and loan repayment awards leading to career development into and within the public mental health system (PMHS).

Background

The MHSA established the WET RPs. The former Department of Mental Health, in consultation with the California Mental Health Directors Association (now the County Behavioral Health Directors Association (CBHDA) created five RPs and designated the counties within each RP.

The five RPs are:

- **1. Superior** (Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Tehama, and Trinity counties)
- 2. Central (Alpine, Amador, Calaveras, El Dorado, Fresno, Inyo, Kings, Madera, Mariposa, Merced, Mono, Placer, Sacramento, San Juaquin, Stanislaus, Sutter, Tulare, Tuolumne, Yolo, and Yuba counties)
- **3. Greater Bay Area** (Alameda, Contra Costa, Marin, Monterey, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, and Sonoma counties, and the City of Berkeley)
- **4. Southern** (Imperial, Kern, Orange, Riverside, San Bernardino, San Diego, San Luis Obispo, Santa Barbara, and Ventura counties, and the Tri-City (Pomona, Claremont, and La Verne) area of Los Angeles County)
- **5. Los Angeles**: (Los Angeles County)

The WET Plan outlines the programs under the domain of the RPs. These include pipeline approaches, scholarships, stipends, loan repayment, and retention strategies. OSHPD will contract with each of the RPs to implement one or more of these programs.

Purpose

The 2020-2025 MHSA WET Five-Year Plan (WET Plan) provides for RPs to administer the "Supporting Individuals" component. This document provides guidance to the five RPs as they design and implement their chosen WET programs in the counties of their respective regions.

The WET Plan specifies five program categories:

- 1. Pipeline Program
- 2. Undergraduate Scholarship Program
- 3. Graduate Stipend Program
- 4. Loan Repayment Program
- 5. Retention Program

RPs can choose to implement any or all of these programs. This Resource Guide provides descriptions of past programs, best practices gleaned from focus groups during the WET planning process, and things to consider when designing these programs.

Past WET Programs

OSHPD administered numerous WET programs in the past. The programs relating to the new RP program are described below and can serve as a reference in designing new programs.

Pipeline Grants

OSHPD administered three unique pipeline programs designed to engage in recruitment and outreach activities to increase interest in PMHS careers in students from elementary and secondary school through higher education.

Pipeline Grant Program

The Pipeline Grant Program provided funds to organizations to carry out a wide range of pipeline strategies. These strategies served as the basis for the more detailed description of what constitutes pipeline programs that appear below.

Mini-Grants Program

The Mini-Grants program provides up to \$15,000 to local organizations to promote mental/behavioral health careers to students, particularly those that encouraged unrepresented or underrepresented and economically and educationally disadvantaged students to pursue careers in mental/behavioral health. This program is still in operation.

CalSEARCH Program

This program granted up to \$250,000 to organizations that subsidized mental/behavioral health students performing internships, rotations, shadowing, and related experiences in the Public Mental Health System (PMHS).

Stipends Program

Through contracts with educational institution, universities provided stipends to clinical graduate students who plan to work in the PMHS. Stipends for Psychiatric Mental Health Nurse Practitioners (PMHNPs) and masters level clinical graduate students were up to \$18,500 per recipient, while clinical psychologists (PhD/PsyD) could receive up to \$20,772. The \$18,500 figure was based on the amount paid to Title IV(e) child welfare social work students to avoid financial incentives for one program over the over.

The four degrees supported with stipends were:

- 1. PMHNPs
- 2. Clinical Psychologists
- 3. Marriage and Family Therapists
- 4. Social Workers

In exchange for a stipend, students agree to work in a PMHS setting for 12 or more months after graduation. The program also required that grantees request and submit demographic information from stipend recipients.

Mental Health Loan Assumption Program (MHLAP) Program

OSHPD, through its Health Professions Educational Foundation, administered MHLAP. MHLAP rules limit loan repayments up to six cycles of a maximum of \$10,000 in loan repayment after completing a 12-month service obligation in the PMHS. Awardees were mental health professionals selected by individual counties as working in a hard-to-fill or hard-to-retain position. Recipients could receive the funds after they completed the 12-month service obligation.

Retention Program

OSHPD awarded community-based organizations (CBOs) and county programs funds to carry out evidence-based and community-identified practice programs to increase the continued employment of PMHS personnel identified as high priority by county behavioral health agencies.

Below are evidence-based and community-identified pipeline models and retention strategies for consideration by RPs as they set out to select and design their WET programs.

Current WET Programs

One of the most significant changes to the organization of WET grant programs is the shift from OSHPD-administered grant programs to locally administered programs that address the most pressing PMHS workforce development needs. While OSHPD strived to fund programs across the state, there were no applicants from some parts of the state. In addition, there was no way to link programs across the workforce pipeline spectrum (from pipeline to scholarship and stipends to loan repayment and retention).

The new paradigm is for communities—particularly rural and frontier areas—to grow your own PMHS workforce by attracting young people to behavioral health careers and support them along each step in their educational and training pathway leading to a PMHS career.

The new WET Plan framework calls on WET RPs to administer these programs in each geographic area of the state. Recognizing the limited amount of available funding, however, OSHPD is permitting each RP to select which program components they need most in the region.

Pipeline Models

RPs are encouraged to design pipeline programs using best practices. The following are some models that have proven to be effective. RPs may choose to implement any of these models or adapt them to best meet their unique regional needs.

- 1. Academic Support: Develop curriculum strategies to convey current and emerging behavioral healthcare topics to the identified target population with the aim of introducing program participants to and preparing them for PMHS careers. Emerging topics include mental health and criminal justice, mental health and substance use integration, value-based payment models, whole health outcomes and quality improvement, population health, etc.
- 2. Career Development: Provide target populations paid opportunities to gain experience in the PMHS through activities, such as career shadowing, to

introduce program participants to and prepare them for PMHS careers. Work with PMHS mental/behavioral health management and leaders in county and contract CBOs to provide paid jobs and volunteer experience. The experience should place an emphasis on MHSA values development, outcome-driven clinical skill development, and leadership development for the target population.

- **3. Mentorship and Career Counseling**: Engage the proposed target population via paid mentorship programs or career counseling with the aim of introducing program participants to and preparing them for PMHS careers.
- 4. Grow-Your-Own Model: Implement a Grow-Your-Own-Model program to engage the target population through career awareness and outreach with the aim of introducing participants to and preparing them for PMHS careers. The Grow-Your-Own-Model is a process of ongoing career development that includes strategies linking behavioral health knowledge and career readiness throughout a participant's academic career.
- 5. Financial Assistance Strategies: Implement financial assistance strategies, such as stipends, scholarships, housing support, and child-care assistance to provide participants with support while they explore or prepare for PMHS careers. Target outreach to populations that represent the diverse and multicultural communities served by PMHS.
- **6. Career Transitions Model**: Target populations consisting of individuals leaving a career and interested in transitioning to PMHS as a second career. Design strategies to introduce the target population to PMHS, identify and mentor their transferrable skills, and create career ladders appropriate for a population entering PMHS with skills acquired from another field.

Key Features of Comprehensive Local Pipeline Programs

- 1. Program activities consistent with the MHSA values and priorities, including wellness, recovery and resiliency principles, behavioral health integration, and the delivery of culturally and linguistically relevant services/training.
- 2. Recruitment and outreach activities to obtain program participants. Use a variety of communication strategies and modalities to engage the greatest diversity of participants.
- 3. Target populations may include individuals in the following: grades K-12, adult education, regional occupational programs, colleges (including community colleges), and universities. Outreach tools could include presentations, behavioral health career symposia or other career events,

personal outreach, information sharing sessions, and social media, such as Facebook and Twitter.

- 4. Recruitment and outreach activities to enlist behavioral health management and leaders in the county PMHS or in CBOs to participate in pipeline activities. Identify transferable skills and outreach to other fields to ensure effective leadership philosophies and practices from other disciplines emerge in PMHS.
- 5. Services consistent with the needs of the target population. Introduce future service providers to population health strategies such as risk stratification, meaningful use of data, and value-based care that emphasizes outcomes, the client and provider experience, and reduction of preventable costs.

Individual-Level Programs

When designing the individual-level WET programs (scholarship, stipend, and loan repayment), consider these three main areas:

- Applicant eligibility
- Terms of the agreement
- Non-completion of the agreement

Below is an examination of each of the three individual-level programs.

RPs will refer individuals interested in these programs to OSHPD's Central Application, where individuals seeking a WET scholarship, stipend, or loan repayment award will apply. OSHPD will collect the data and forward it to the appropriate RP, based on the applicant's location and/or intended service placement or employment location.

Scholarship Program

This program provides scholarships to undergraduate students in exchange for service learning received in a PMHS agency. The funding level may depend on the student's academic aspirations (including certificate, associate degree, and bachelor's degree), pre-placement training and education received, lived experience, and/or other possible factors. This component is especially valuable to expanding the knowledge and skills of non-licensed personnel through training and education opportunities.

Considerations

Establishing Applicant Eligibility Criteria

Factors to consider when determining the merits of a prospective applicant and the success of the intervention include:

- Enrollment status
 - Those enrolled but have not begun their program may or may not be eligible
- Major/concentration
- Degree sought
- Year in educational program
- Career goals
- Full/part-time status
- GPA
- Cultural diversity
- Current PMHS employment
- Lived/raised in a rural area (determined through high school)
- Language(s) spoken
- Lived experience
- Veteran status
- Geographic area applicant plans to work in
- Previous participation in a pipeline program
- County applicant lives in/attends school in
- Length of mental health service to which the applicant is willing to commit

Terms of the Agreement

- Consider amounts of \$1,000 to \$2,500 per semester.
- Should it be uniform (i.e., everyone gets the same amount) or variable based on the list of factors above)?
- Should the award amount increase for subsequent awards (e.g., \$1,000 for the first semester, \$2,000 for the second semester)?
- Should applicants agree to complete their coursework/degree or certificate before receiving the scholarship?
- What will scholarship recipients agree to do (e.g., work in community mental health service during school, work in PMHS after graduation)?
 - o If they agree to work in mental health in exchange for a scholarship, for how long/how many hours per week?
- What other commitments do you want them to make?
 - Do you want them to commit to completing an annual survey (e.g., OSHPD's annual evaluation/follow-up survey) in exchange for the scholarship?

- Do you want to use this agreement to promote other programs the applicant could apply to (e.g., stipends, loan repayment)?
- When should RPs disburse the award (e.g., up-front, in installments, after completion of terms of the agreement)?
- Consider making the awardee responsible for identifying their own service placement opportunities.

Non-Completion of Agreement

- What happens if an awardee fails to complete the terms of the agreement (e.g., fail to secure employment in mental health) after the award disbursement?
 - How will RPs collect the repayment if the awardee is required to pay back the money (e.g., one-time payment, payment plan, lien on awardee's income)?
- If they initially fail to complete the terms of the agreement, could they get an extension?
- Are there any circumstances in which they could fail to complete the terms of the agreement but retain the award (e.g., death, disability, unemployment)?

Stipend Program

Similar to the previous WET Stipend program, this program provides funding for post-graduate clinical master and doctoral education service performed in a local PMHS agency. RPs will select students in advance of their final year of education and provide funds in exchange for a 12-month service commitment, giving priority to applicants who previously received a scholarship.

Considerations

Applicant Eligibility and Evaluation

- Consider awarding applicants in the final year of their education.
- Factors to consider in determining who gets an award.
 - Enrollment status: consider only awarding current students
 - Full/part-time status
 - Discipline/concentration
 - Degree sought
 - Year in program
 - Career goals
 - o GPA
 - Cultural diversity
 - Lived/raised in a rural area (determined through high school)
 - Language(s) spoken
 - Lived experience

- Veteran status
- o Geographic area applicant plans to work in
- o Previous participation in a pipeline program and/or scholarship
- o County applicant lives in/attends school in
- Length of mental health service to which the applicant is willing to commit

Terms of the Agreement

- Amount to award
 - Consider awarding \$20,000 to \$30,000 per year for full-time equivalent service commitment.
 - Consider if you want to offer different amounts for different disciplines.
 - Should the award amount it be uniform (i.e., everyone gets the same amount) or variable based on the list of factors above?
- What will stipend recipients agree to do (e.g., work in PMHS)?
 - If they agree to work in the PMHS in exchange for a stipend, for how long (and at what time-base)?
 - Consider one year full-time
- What other commitments do you want them to make?
 - Consider having the applicant agree to complete their degree/program.
 - Consider requiring the applicant to commit to completing OSHPD's stipend annual evaluation/follow-up survey as a condition of receiving funds.
 - Do you want them to commit to completing an additional follow-up survey for your own records?
- Do you want to use this agreement to promote other programs the applicant could apply to (e.g., loan repayment)?
- How should RPs disburse awards (e.g., up-front, in installments, after completion of terms of agreement)?

Non-Completion of Agreement

- What happens if an awardee fails to complete the terms of the agreement (e.g., don't complete their degree, don't work in PMHS) after the award disbursement?
 - O How will RPs collect the repayment if the awardee is required to pay back the money (e.g., one-time payment, payment plan, lien on awardee's income)?
- If an awardee initially fails to complete the terms of the agreement, will you offer them an extension?

 Are there any circumstances in which an awardee could fail to complete the terms of the agreement but retain the award (e.g., death, disability, unemployment)?

Loan Repayment Program

Provides educational loan repayment assistance to PMHS professionals identified at the local level as serving in high need positions. Consider giving priority to applicants who previously received a scholarship and/or stipend to reinforce their commitment to the PMHS. The amount awarded could be based on educational attainment, the level of unmet need in the community served, and years of service in a local PMHS agency.

Considerations

Applicant Eligibility and Evaluation

- Who is eligible for an award?
 - Only current PMHS employees
- How many years should an applicant be eligible to receive funds?
- Factors to consider in determining who gets an award.
 - o Profession
 - Career goals
 - Full/part-time employment
 - Cultural diversity
 - Lived/raised in a rural area (determined through high school)
 - Language(s) spoken
 - Lived experience
 - Veteran status
 - Geographic area applicant works in
 - Previous participation in a pipeline program, scholarship, and/or stipend
 - County applicant lives in/attends school in
 - Length of mental health service to which the applicant is willing to commit

Terms of the Agreement

- Consider \$10,000 to \$50,000, dependent on profession and geographic need.
- Consider if awards should be uniform (i.e., everyone gets the same amount) or be variable (based on years of continued service and/or the list of factors above)?

- Should you graduate payments (i.e., increase with each year of service)?
 - Consider disbursing award funds each year of after service completion, as was the practice of the MHLAP program.
- What will loan repayment recipients agree to do?
 - If they agree to start or continue to work in the PMHS in exchange for loan repayment, for how long and at what time-base?
- What other commitments do you want them to make?
 - Do you want them to commit to completing an annual survey (e.g., OSHPD's annual evaluation/follow-up survey) in exchange for the loan repayment?
- Preclude applicants to receive an award if they are currently receiving funds from another program?

Retention Strategies

The aim of retention strategies is for counties to promote developing and instituting systemic changes and opportunities that increase the likelihood that staff will remain in the PMHS workforce. The following are examples of different approaches that RPs can consider when developing retention programs.

1. Enhance Workers' Day-to-Day Experiences

- a. Provide fair and adequate compensation and benefits.
- b. Offer financial incentives for retention.
- c. Institute variable and flexible work schedules and formats.
- d. Institute personnel policies that explicitly support/promote employee worklife balance by addressing schedules, commuting, travel and other work requirements.
- e. Streamline bureaucratic requirements to minimize worker burden (i.e., reduce paperwork).
- f. Alleviate burdensome caseloads (i.e., reduce caseload size, modify structure of case work).
- g. Create staff wellness programs like workplace fitness programs.

2. Enhance and Support Staff Development

- a. Engage with workers at all levels to develop personalized career growth pathways.
- b. Ensure worker opportunities to pursue licensure, higher education, and career advancement.
- c. Fund and/or provide paid time for both on and off-site continued professional development.
- d. Provide specialized trainings relevant to the specific consumers and communities served.

- e. Provide ongoing trainings on issues such as trauma-informed therapy and vicarious trauma.
- f. Create peer learning cohorts/communities that facilitate staff connections and networking, and enable workers to identify and pursue specific professional development goals.

3. Strengthen Management and Supervision of Workers

- a. Recruit, hire and retain directors and supervisors with direct service experience "in the trenches".
- b. Train and guide supervisors to ensure they offer high quality supervision that includes mentorship, reflective coaching, professional guidance, and debriefing opportunities.
- c. Provide reflective coaching on the effects of vicarious trauma and work-related stressors.
- d. Provide professional guidance that complements and supports worker training.
- e. Provide structured opportunities for workers to debrief after stressful events.
- f. Institute ongoing employee recognition practices (colleague-nominated employee of the month celebrations, awards for outstanding service to consumers, etc.).

4. Enhance Organizational Climate and Culture

- a. Develop policies and practices that identify and emphasize shared mission/meaning of work.
- b. Develop policies and practices that align with workers' training in the recovery model.
- c. Enable workers to engage in prevention/early intervention, rather than only crisis management.
- d. Offer regular opportunities for workers to provide input on workplace policies and practices.
- e. Offer regular opportunities for workers to share stories, victories, challenges, and strategies.
- f. Institute regular staff social activities/gatherings/retreats to build/support collegial relationships.

Questions

Please email OSPHD at MHSA.WET@oshpd.ca.gov.