

**WORKFORCE EDUCATION AND TRAINING (WET) CONSUMER AND FAMILY MEMBER EMPLOYMENT
ADVISORY COMMITTEE MEETING MINUTES**

December 3, 2014
400 R Street, Suite 317
Sacramento, CA 95811
1:00 PM to 4:30 PM

Staff in Attendance		
Linda Onstad-Adkins, Acting Deputy Director John Madriz Sergio Aguilar Brent Houser	Inna Tysoe Elvira Chairez Wes Salter	
Committee Members In Attendance or on Phone		
Lisa St George Jessica Cruz Tanya McCullom Deborah Van Dunk Donna Mathews Hector Ramirez	Anne Fitzgerald Kalia Mussetter Mavis Braxton Ruth Hollman	Angela Stocker Karin Lettau Kristen Dempsey Sandra Villano

Agenda Item Number	TOPIC	Discussion
1	Welcome and Introductions	<p>Ms. Onstad-Adkins welcomed and thanked everyone for joining the Workforce Education and Training (WET) Consumer and Family Member Employment Advisory Committee Meeting. The Office of Statewide Health Planning and Development (OSHPD) Staff and Committee members in the room and on the phone introduced themselves.</p> <p>Ms. Onstad-Adkins provided an overview of the agenda which included an update on WET Consumer and Family Member Employment activities, panel presentation on Peer Personnel Preparation activities. Followed by discussion on the Peer Personnel Preparation Program. Then a discussion on Consumer and Family Member workforce recruitment, education and placement activities. Before adjournment, the meeting would allow any members of the public to comment.</p>

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2	Update on WET Consumer and Family Member Employment Activities	<p>Ms. Onstad-Adkins introduced Mr. Madriz to give an update on the WET Consumer and Family Member Employment Activities. He gave a presentation on the WET Request For Applications (RFA) to be released in Fiscal Year 2014-15 and the WET existing Programs. He began by going over a handout, which can be found at the following link: http://oshpd.ca.gov/HWDD/2014/WET/CFM-Handout-WET-RFA-Updates.pdf</p> <p>Rather than go over all the RFAs, he focused on specifically, the Consumer and Family member programs. He talked about the different activities OSHPD is involved with starting with the Networks to Support Public Mental Health System (PMHS) Workforce with Lived Experience RFA. This RFA will fund organizations to work with consumers and family members within identified counties and CBOs by engaging the consumers and family members in activities that may include but not be limited to self-help support groups, mentoring, training on issues that may increase retention, and provide financial assistance. Next Mr. Madriz spoke about the Statewide Consumer and Family Member Workforce Support Network RFA. This RFA will fund an organization that will be responsible for engaging in statewide activities that aim to increase consumer and family member employment such as: developing co-learning collaborative, professional development opportunities, and financial support for consumer and family member workforce, and working with Local and Regional support networks. Next Mr. Madriz talked about the Consumer and Family Member Comprehensive Needs Assessment RFA which will fund a organization to engage in a quantitative and qualitative data-driven assessment of Consumer, Family Member, and Parent/Caregiver positions, education/training, and needs in the PMHS across counties.</p> <p>Mr. Madriz then transitioned to speaking about existing WET programs. He talked about the Consumer and Family Member Employment Local Organizational Support and Development Networks RFA that was released earlier this year, which will fund two organizations to engage in</p>
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		<p>activities that will enhance PMHS employer’s ability to employ, support, and train consumers and family members in their workforce. Two contractors were awarded in November 2014: Mental Health America of Northern California and United Advocates for Children and Families. A committee member asked when in December the Networks to Support Public Mental Health Workforce with Lived Experience RFA was going to be released, since it is only a few weeks before the holidays. Ms. Onstad-Adkins replied the exact date is to be determined, but OSHPD will take into account that it is the holidays so potential proposers will have sufficient time to submit an application.</p>
3	<p>Presentations on Peer Personnel Preparation Activities</p>	<p>Ms. Onstad-Adkins introduced Mr. Houser to go over some ground rules, he proceeded to provide instructions/ground rules for the committee and public members participating in the room and on the phone. He then introduced Mr. Aguilar.</p> <p>Mr. Aguilar provided some background on the Peer Personnel Preparation Program. This program came out of Senate Bill (SB) 82 and the Budget Act of 2013. He stated that earlier this year OSHPD funded four organizations for the Peer Personnel Preparation Program. There are \$2 million dollars allocated for this program on an annual basis. The program is meant to support Peer Personnel, including family members by providing training in one or more of the following elements: crisis management, suicide prevention, recovery planning, targeted case management or other related peer training and core functions. There are five major components included within the program: career pathways, recruitment and outreach, education program structure, training placement, and retraining and evaluation. The four contractors who presented their respective programs were: Mental Health Association of San Francisco (MHASF), National Alliance on Mental Illness (NAMI) San Diego, Recovery Opportunity Center (ROC) and Contra Costa County Behavioral Health.</p> <p>Terry Burns and Rachel Del Rossi gave a presentation for Mental Health Association of San Francisco. Rachel talked about their partnership with three counties in the Bay area, San</p>

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		<p>Francisco, Marin and Alameda. In those positions there are three training providers that run the classes for the Peer Professionals. She said they have provided follow-up support, placement and a host of other services. Terry started out talking about the creation of applications for membership into their program, PROPEL. PROPEL is the Bay Area Peer Professional Network. She stated that they went to both Alameda and San Francisco classes and generated a lot of enthusiasm for the program. She said 13 of the 14 students at San Francisco and 23 out of 25 students in Alameda signed on for membership in PROPEL. They also have been collaborating with the HARM Reduction Therapy Center and offered monthly groups for the students to access support, resources and whatever topics they would like help with. They have been working on a website, which lists all the training for supervisors and the student workers. They have a training map outlining the next six months of training. The first one is "Coming out Proud", Rachel said a lot of community partners are trained in Coming out Proud. It is a 6 hour workshop, which deals with issues of self-disclosure and making sure that people are comfortable with this. They are also working on a short web series intended for supervisors who are taking on some of the Peers so that they best understand how to support, work with and get the maximum value out of the Peer Personnel. They have set up one-on-one meetings with students that will be graduating to maintain contact and continue to develop their relationship. Ms. Del Rossi talked about a self needs assessment, in which students identify 3 out of the 10 training needs. They can also list needs they may have for themselves. Lastly, Rachel talked about the challenges of the students when they graduate from the program (i.e. in transition trying to figure out what they are going to do next, looking at the workforce, internship, volunteering, or more training). As that happens they have also started a 24-hour Peer-run warm line.</p> <p>Anita Fisher gave a presentation for National Alliance on Mental Illness (NAMI) San Diego. The PowerPoint can be found via the following link: http://oshpd.ca.gov/HWDD/2014/WET/NAMI-San-Diego-Handout.pdf. Anita talked about the training they have for family members. She talked about a two hour orientation for the family members. She also talked about the NAMI family-to-family course. It is a course for someone going into training to help them learn how to support their family members and the others that they will serve. She then talked about the family</p>
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		<p>roundtable one of their partners brought in. They offer a 90-hour training course for individuals that want to go into the family and youth area. The course includes classroom instruction and then placement and coaching. She also talked about two other programs that work with the adult area: Hope Connection and Home Outreach. Then she talked about another partner, Alliant University. They look at the course material to make sure it meets the requirement for potential college credits and possibly becoming a certified program.</p> <p>Lisa St George gave a presentation for Recovery Opportunity Center (ROC). The PowerPoint can be found via the following link: http://oshpd.ca.gov/HWDD/2014/WET/Recovery-Opportunity-Center-Handout.pdf. Lisa said that ROC has identified 13 counties to help reach a goal to train and employ 150 peer support providers. The goal is to support the underserved or unserved population. They have an 80 hour class course, required class participation, quizzes, and finals. Everyone in the course has to attend an ethnic boundaries training. Currently 65 individuals have been trained and 50 of those people are working or volunteering.</p> <p>A team from Contra Costa County Behavioral Health gave a presentation. The PowerPoint can be found via the following link: http://oshpd.ca.gov/HWDD/2014/WET/Contra-Costa-Behavioral-Health-Handout.pdf. Peer training was renamed in 2008 to the Service Provider Individualized Recovery Intensive Training (SPIRIT) program, and the program is in partnership with Contra Costa Community College. Through the college, students can get nine hours credit, which includes an internship for more experience on Peer support and job skills. The role for the SPIRIT program staff is to provide outreach and recruitment, job coaching, placement and the establishment of the training program for family partners. To date, the SPIRIT program has 101 total active participants, of which 29 are in internships and 24 are placed in behavioral health jobs (paid or volunteer). There are 13 current family partners to be re-trained and eight SPIRIT alumni who have engaged in re-training activities or career coaching. The newest class of recruits have 45 with six identified as family partners.</p>
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		<p>Mr. Aguilar asked if any of the Advisory Committee members have any questions.</p> <p>A committee member asked Rachel from San Francisco if the “warm line” is staffed with paid or volunteer positions. Rachel replied they are paid positions and within the next few years Mental Health Association of San Francisco will recruit more volunteers.</p> <p>A committee member asked if there is any consideration on preparation for the employers that will be taking on the consumers in terms of supervision. Recovery Opportunity Center replied back with, yes and said they have added this as a necessary component to their Peer Personnel Preparation program.</p> <p>A committee member asked the following question of all the contractors, “How many people have been placed in paid positions?”</p> <p>Recover Opportunity Center said they have 50, some were employed prior to the training.</p> <p>Mental Health Association of San Francisco said all of their participants are still enrolled in training but at this point have one placed in a paid position.</p> <p>NAMI San Diego stated that they are working with people who are already employed and are going through the training. Therefore they have not placed any individuals with this particular contract.</p> <p>Contra Costa said they placed 24 peers in behavioral health jobs, 20 of those are paid, and the other 4 are volunteer positions.</p> <p>A committee member asked two questions, first “is there a training readiness assessment that is done before people enter training?” and “are all the organizations tracking what specific knowledge skills and abilities are being gained by participants?”</p>
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		<p>Contra Costa replied to the question by saying that they have a multi-page application and they talk about their lived experiences, goals and any barriers to meet those goals. They have a five-person panel that selects the applicants. Out of 120 applications, Contra Costa takes 60 of the top scores and then conducts interviews. It is a rigorous standard to meet in order to join the Peer Personnel program that Contra Costa offers.</p>
4	<p>Discussion on Peer Personnel Preparation Program</p>	<p>Mr. Aguilar introduced agenda item number four, a discussion on the Peer Personnel Preparation program. There was a handout used in the discussion and can be found at the following link: http://oshpd.ca.gov/HWDD/2014/WET/WET-Consumer-Family-Member-Advisory-Committee-Dec-3-PPQ.pdf.</p> <p>First question: What are the three main training and education elements needed by Peer Personnel, including families, to carry out the duties as outlined in the Budget Act of 2013?</p> <p>A committee member replied with “they have 25 parent partners and you need to let them know what their role is, what their scope of practice and how best can they access their supervisor in order to gather further information.”</p> <p>A committee member followed up with scope of practice and the competencies required of the position. And then standardized core content based on the core competencies, code of ethics and ongoing support.</p> <p>A committee member replied “the ability to effectively document medical standards”.</p> <p>A committee member said what you really need is the intentional Peer support and self-help support groups.</p> <p>Another committee member said that the committee needs to address basic job skills such as interviewing, problem solving, punctuality, etc.</p>

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		<p>Another member said it is crucial that qualified Peers with long term recovery be a part of developing the curricula for Peer support specialist training.</p> <p>The second question posed by Mr. Aguilar was surrounding the program components. The current program components include: position and career pathway development; recruitment and outreach; educational program structure; training, placement and re-training; and evaluation. Mr. Aguilar asked if these were sufficient or excessive. Are there any other components that the Advisory Committee believes should be included in this program to successfully meet the intent as set forth in the Budget Act of 2013?</p> <p>A committee member replied that it was excessive, but there needs to be specific training and technical assistance to the county and community based organizations (CBO). Also there is a need for a commitment from the Director to employ a certain number of qualified individuals.</p> <p>A committee member thought that 100 percent employment and 100 percent training was too high, but they are trying to strive in every way to meet it, because the consequences are stringent. Also training for the leadership is very important.</p> <p>A committee member talked about coming up with a stigma-fighting team within each of the counties to eliminate the negative discriminatory actions and words towards mental health consumers. The workplace culture for peers is an important aspect of how well they do in their position or not and should be a point of emphasis.</p> <p>Mr. Aguilar asked what two components are most critical and should be required in the implementation of this program.</p> <p>A committee member stated that the importance of self-care and advocating for a work place that lives and breathes wellness, peer support and self-care are critical.</p>
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		<p>A committee member stated that they are all important, career pathways as well as evaluation.</p> <p>A committee member said that educational program structure is most important. The counties need to identify more people who are bilingual in English and at least one other county threshold language, to reflect the diverse communities.</p> <p>A committee member talked about career pathways, and making a commitment to create a supervisory job for a Peer supervising the entry level people coming into the PMHS.</p> <p>Mr. Aguilar asked the Advisory Committee what types of assurance do employers need to convince them that Peer Personnel, including families coming out of this program can successfully carry out the position's duties.</p> <p>A committee member expressed the need to measure or report on the knowledge, skills and abilities that people gain through a training program.</p> <p>A committee member stated that what employers want is a standardized minimum qualifications that are identified for these positions. Also a competency exam, paid internships, a code of ethics and a certification of the profession. A committee member echoed that a code of ethics and a statewide certification would make employers more secure in accepting peers in the workforce.</p> <p>The last question Mr. Aguilar posed was, what, if anything, does the Advisory Committee find hard to understand about the structure of the previous Request For Proposal (RFP)?</p> <p>A committee member stated that some Peer provider agencies, separate from the county, did not know about the process or how to engage with the people who are actually drafting proposals.</p> <p>A committee member commented that having to get consent from the Mental Health Directors and then the Director not having to commit, was quite complex. Additional collaboration between</p>
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		the counties and CBOs may be helpful for potential proposers.
5	Discussion on Consumer and Family Member Workforce Recruitment, Education and Placement	<p>Mr. Aguilar introduced Mr. Houser to move on to the discussion regarding Consumer and Family Member Workforce recruitment, education and placement. The document guiding the discussion can be found at the following link: http://oshpd.ca.gov/HWDD/2014/WET/WET-Consumer-Family-Member-Advisory-Committee-Dec-3-Potential-Recruitment.pdf.</p> <p>The discussion started with targeted recruitment efforts of diverse consumers, family members, parents/caregivers, and the following three questions were asked: 1) What is currently happening?; 2) What can be done to improve?; and 3) What are good measures to evaluate the effectiveness of the activity? These three questions will be asked for each activity type listed on the document.</p> <p>A committee member replied that recruitment is going on, but it can be challenging without the collaboration of organizations and counties to provide the outreach to let the people who seek services, know that there is recruitment going on.</p> <p>A committee member said there is good recruitment going on with individual agencies, but to improve it, it needs to be more of an organized effort.</p> <p>A committee member expressed the need to seek out bilingual candidates. Another area to improve is looking at people who have had prior employment, as it is very hard to work in PMHS having never had a job before.</p> <p>A committee member said to really recruit people from diverse communities, the counties need to provide wellness tools and classes in their threshold languages. Also, there is a need to make sure that Peers are not being held to things that are not required of other professionals within the mental health community. The way to measure the effectiveness is in the turn over (i.e. are people coming into the workforce and are they staying).</p>

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		<p>The discussion moved on with internship and shadowing opportunities for consumer, family member, parents/caregivers and the same three questions were posed to the group.</p> <p>A committee member expressed their concern with how the internships are done, there is a need to ensure the supervisor knows how to provide the kind of guidance and support that is needed for that person to be successful.</p> <p>A committee member added that there should not only be a focus on adding Peer Specialists, but there is a need to increase the Peer supervisors too.</p> <p>A committee member said a good way to measure effectiveness of internships would be looking at the evaluations from the intern's supervisors and even the people they have served.</p> <p>A committee member stated the importance of the internship program, and said what needs to be added is written expectations for the interns and the supervisors.</p> <p>The discussion transitioned into education and placement for consumers, family members, and parents/caregivers. Looking at methods to educate, curricula elements and the strategies to collaborate with Counties/CBOs and place after training and education. Focusing on the same three questions as before.</p> <p>A committee member talked about evidence-based, or skill-based practice and activities that have competencies that are demonstrated in testing and role play. Then added that a way to measure the effectiveness of training is by talking with the individuals and their employers. The thing that could be done to improve is to gain their trust so people are comfortable having them talking with their employers. Trust is a big factor and is something that needs to be worked on.</p> <p>A committee member mentioned that some training can be done through e-learning or webinars for topics such as ethics and boundaries. However, the one-on-one in person training and the</p>
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		<p>interaction with group, and mentorship relationship cannot be replaced. The way to measure is surveys and quizzes to see where they are and where they end up after the training.</p> <p>A committee member said that every Peer professional should attend self-help support groups so they can learn how they work.</p> <p>A committee member expressed the need to reach out to the Peers who have been in the workforce a long time and conduct surveys and interviews to find out what was the most important skills they had to learn to become competent workers.</p> <p>The last discussion continued with activities associated with financial assistance for consumers, family members, parents/caregivers attending education and training programs. The committee was asked the same three questions as the other activities.</p> <p>A committee member said there needs to be a level of minimum qualifications for these Peer Personnel programs such as a GED or community college coursework.</p> <p>A committee member stated that if the students get stipends and then they have to serve a certain amount of time to give back in their field, you will have a higher commitment level from them and get the people that really want to do this work.</p> <p>A committee member thought that if there was a way to distribute the money in increments after the students start to work that would add to their commitment.</p>
6	Public Comment	There were no public comments.
7	Adjournment	Mr. Madriz thanked the panel members for their presentations. He also thanked the committee members for their participation and feedback during the meeting.