

**Healthcare Workforce Development Division**

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Summary of OSHPD WET Evaluations

During the development of the Workforce Education and Training (WET) Five-Year Plan 2014-2019, the Office of Statewide Health Planning and Development (OSHPD) via a contract with Resource Development Associates (RDA) conducted a large-scale analysis of California's public mental health workforce needs. The findings from this large-scale analysis offer a foundation for existing and future efforts by OSHPD and its partners to improve and build upon the public mental health workforce. The findings are presented via six distinct reports that were published in September 2014 which include:

Report 1-MHSA WET Program Evaluation

This report details findings from evaluations assessing the breadth and effectiveness of current state-administered WET programs. For the first WET Five-Year Plan, programs included: 1) Stipend Programs; 2) the Mental Health Loan Assumption Program; 3) the Song-Brown Residency Program for Physician Assistants in Mental Health; 4) the Psychiatric Residency Program; 5) WET Regional Partnerships; and 6) the Client and Family Member Statewide Technical Assistance Center (Working Well Together).

Report 2-Analysis of Stakeholder Feedback on Public Mental Health Workforce Needs

This report provides analysis of direct feedback from stakeholders regarding California's public mental health workforce needs and perspectives on how to improve public mental health workforce education, training, recruitment and retention. The data reflected in this report is from a series of statewide stakeholder engagement activities conducted by OSHPD in 2013 during the WET Five-Year Plan 2014-2019 development process. Stakeholders included representatives from counties, community-based organizations, educators, consumers and family members, direct service providers, healthcare administrators, and other mental health policy makers.

Report 3-Analysis of County-Reported Public Mental Health Workforce Needs

This report documents public mental health workforce needs as identified by the state's county mental health departments which includes county strategies used to fill those needs, and county feedback on statewide WET programs to develop their mental health workforce. Information from OSHPD-led direct assessments of the state's county health departments, conducted in Summer and Fall 2013, serve as the foundation for this report.

Report 4-Analysis of Mental Health Workforce Supply

This report offers an in-depth account of the current distribution of mental health providers across California. The information presented in this report groups the state's mental health workforce into five classes of providers: 1) licensed, prescribing occupations; 2) licensed, non-prescribing, nursing occupations; 3) licensed, non-

prescribing, clinical occupations; 4) alcohol and other drugs counseling providers; and 5) non-licensed professionals. Furthermore, provider-to-population ratios offer a picture of the relative concentrations of providers across California's counties and allow for comparisons of workforce distributions over the entire state. This report also provides workforce projections, stratified by the five classes of providers, across the next five years (2014-2019) in order to provide estimates of the projected growth and distribution of mental health professionals across the state.

Report 5-Educational Training of Mental Health Professionals

This report describes the state's current capacity to educate and train mental health professionals. This report details the current educational pipelines that could produce mental health professionals who could potentially join the state's public mental health systems. California's postsecondary educational institutions offer many opportunities for individuals interested in pursuing careers in the provision of mental health-related services to obtain the necessary education and training. The capacity of these institutions is a critical component in a larger strategy to build and improve California's public mental health workforce.

Report 6-Public Mental Health Services Demand/Users.

This report documents the current volume and distribution of public mental health services throughout California, which serves as a proxy for the state's current demand for public mental health services. The information presented in this report groups the public mental health services provided across the state into nine categories: 1) case management, 2) crisis intervention, 3) crisis stabilization, 4) day treatment, 5) inpatient services, 6) medication support, 7) mental health services, 8) residential services, and 9) therapeutic behavioral services. Similar to Report 4, *Analysis of Mental Health Workforce Supply*, services-to-population ratios are used to focus on the relative concentrations of services across California's counties and allow for appropriate comparisons of the distribution of services across the state. Additionally, this report projects the availability of public mental health services, stratified by the nine services types, across the next five years (2014-2019) in order to provide estimates of the projected growth and distribution of demand for public mental health services across California.

All reports can be found in the reports and resources tab of OSHPD's WET webpage: <http://www.oshpd.ca.gov/HWDD/WET.html>

Comprehensive Assessment of Consumer Family Member, and Parent/Caregiver Workforce

In March 2015, OSHPD awarded \$400,000 to the University of California, San Diego Health Services Research Center to develop, collect, aggregate, and analyze data on the consumer, family member, and parent/caregiver (CFP/C) workforce in the PMHS. The contractor will develop and conduct a comprehensive quantitative and qualitative assessment that gathers information on the following elements:

A. Identifying and analyzing:

- Number and demographics of CFP/Cs employed within the PMHS across counties including both county and CBOs.
- Different types of positions and the environments that the CFP/C workforce are employed in and the different types of functions they serve in those positions across counties and the nation.
- Quantity and type of assistance PMHS employers provide to CFP/C workforce including but not limited to: reasonable accommodations, benefits planning, employer-paid benefits, and/or career advancement/professional development opportunities.
- Number of PMHS employers that receive reimbursement and analyzing the type of funding they receive for services provided by their CFP/C workforce.
- Current career tracks/ladders for CFP/C workforce across counties and the nation.

B. Identifying and analyzing desirable or minimum qualifications for:

- CFP/C workforce across counties and the nation.
- CFP/C workforce educators/trainers across the state and nation.
- Individuals supervising CFP/C workforce across counties and the nation.

C. Identifying and analyzing:

- Core competencies used for CFP/C workforce across counties and the nation.
- Curricula for training CFP/C workforce across the state and nation.
- Competency exams, if any, used for CFP/C positions across counties and the nation.

Contract activities are scheduled to begin in April 2015 and be completed by April 2016