



# HEALTH AND HUMAN SERVICES AGENCY BEHAVIORAL HEALTH & RECOVERY SERVICES



## POLICY AND PROCEDURE

Service Area: Mendocino County Behavioral Health and Recovery Services

Subject: Mental Health Services Act Workforce Education and Training

Subject Matter  
Expert:

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Previous or  
Referenced

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### POLICY:

Mendocino County Health and Human Services Agency (HHSA) Behavioral Health and Recovery Services (BHRS) will support programs funded through the Mental Health Services Act (MHSA), also known as Proposition 63, which will be conducted in accordance with the California Department of Health Care Services guidelines and regulations for Mental Health Services Act Programs, Mental Health Services Oversight and Accountability Commission (MHSOAC), as well as all State and County guidelines that pertain to MHSA programs. Workforce Education and Training (WET) programs and activities shall address workforce shortages and deficits.

### **Definitions**

Community Program Planning (CPP) Process: The CPP Process is a process defined by California Codes of Regulations toward the development and review of MHSA programs. Community Planning Process utilizes community collaboration through clients, client family members, agencies, organizations, and other community members who work together to share information and resources in order to fulfill a shared vision and goals. The process is utilized to identify community issues related to mental illness resulting from lack of community services and supports, to identify issues related to implementation of Mental health services Act programs, to analyze the mental health

needs in the community, and to identify and reevaluate priorities and strategies to meet mental health needs. MHSA providers are expected to participate in the MHSA Community Program Planning processes.

Stakeholder Definition: Stakeholders are defined by the Department of Health Care Services (DHCS) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) as individuals or entities with an interest in mental health services in the State of California including but not limited to: individuals with serious mental illness, clients of MHSA programs, providers of mental health or related services, family members, educators, representatives of law enforcement, and other agencies or other community members that interact with individuals with mental illness (primary care providers, social service agencies, substance use treatment services, etc.), that have an interest in the mental health issues, consumers or their families, or an interest in Mental Health Services Act programs.

Client Definition: For the purposes of this Policy, the terms client, consumer, participant, beneficiary, person with serious mental illness, and person with lived experience can be used interchangeably. A client is an individual of any age who is or has received mental health services through an MHSA program.

### **PROCEDURE:**

- 1. Workforce Education and Training:** Programs shall be outlined in the Mental Health Services Act Three-Year Plan and Annual Updates. Input from stakeholders regarding programs will be collected through the Community Planning Process.
- 2. Workforce Needs Assessment:** A Workforce Needs assessment will be conducted by the Office of Statewide Health Planning and Development (OSHPD) Five-Year plan. Mendocino County will develop a workforce needs assessment for the County that will be influenced by the OSHPD statewide findings.
- 3. Workforce Education and Training Coordinator:** Mendocino County's Workforce Education and Training coordinator role shall be filled by their Mental Health Services Act Coordinator. The Workforce Education and Training Coordinator duties shall include:
  - a. Coordinating WET trainings and activities, including developing relationships and partnerships with community and regional workforce recruitment agencies.
  - b. Communicate with Department of Health Care Services regarding WET activities.
  - c. Educate the Public Mental Health System Workforce regarding expectations of community collaboration, cultural competence, client and

family driven services, principles of wellness, recovery and resilience focused care, and integrated service experiences for clients and their families.

- d. Develop strategies to increase the number of clients and family members of clients employed in the public mental health system.
- e. Conduct outreach and recruitment for individuals that share the ethnic, cultural, or linguistic characteristics of clients, family members of clients or others in the community with serious mental illness or serious emotional disturbance.
- f. Incorporate the input of clients and family members into WET activities, wherever possible using clients and family members as trainers.
- g. Incorporate the input of diverse ethnic populations, and whenever possible use individuals from diverse ethnic populations as trainers.

**4. WET Trainings Programs and Activities:** Programs, trainings, and activities shall be outlined in the Mental Health Services Act Three-Year Plan and Annual Updates. Input from stakeholders regarding programs will be collected through the Community Planning Process.

- a. WET activities shall be budgeted according with the Revenue and Expenditure Report.
- b. WET activities must include at least one of the following:
  - i. Training and Technical Assistance
  - ii. Mental Health Career Pathway Programs
  - iii. Residency and Internship Programs
  - iv. Financial Incentive programs
  - v. Workforce Staffing Support

**5. Mental Health Loan Assumption Program (MHLAP):** The WET Coordinator shall collaborate with the Office of Statewide Health Planning and Development (OSHDP) to identify individuals that qualify as working in the public mental health systems in an under filled profession, being of an underserved ethnic group, and/or speaking an underserved language that may qualify for Loan Assumption.

- a. Only loans held by educational lending institutions are eligible for MHLAP.

**REFERENCES:**

CCR, Title 9, Chapter 14, Sections 3810, 3820

Welfare and Institutions Code Sections 3320, 3810-3856, 5820, 5892

**ATTACHMENTS:**

None