

PART IV: REQUIRED EXHIBITS

EXHIBIT 1: WORKFORCE FACE SHEET

**MENTAL HEALTH SERVICES ACT (MHSA) WORKFORCE EDUCATION AND TRAINING COMPONENT
THREE-YEAR PROGRAM AND EXPENDITURE PLAN, Fiscal Years 2006-07, 2007-08, 2008-09**

County: Merced

Date: 2/27/2008

This County's Workforce Education and Training component of the Three-Year Program and Expenditure Plan addresses the shortage of qualified individuals who provide services in this County's Public Mental Health System. This includes community based organizations and individuals in solo or small group practices who provide publicly-funded mental health services to the degree they comprise this County's Public Mental Health System workforce. This Workforce Education and Training component is consistent with and supportive of the vision, values, mission, goals, objectives and proposed actions of California's MHSA Workforce Education and Training Five-Year Strategic Plan (Five-Year Plan), and this County's current MHSA Community Services and Supports component. Actions to be funded in this Workforce Education and Training component supplement state administered workforce programs. The combined Actions of California's Five-Year Plan and this County's Workforce Education and Training component together address this County's workforce needs as indicated in Exhibits 3 through 6.

Funds do not supplant existing workforce development and/or education and training activities. Funds will be used to modify and/or expand existing programs and services to fully meet the fundamental principles contained in the Act.

All proposed education, training and workforce development programs and activities contribute to developing and maintaining a culturally competent workforce, to include individuals with client and family member experience that are capable of providing client- and family-driven services that promote wellness, recovery, and resiliency, leading to measurable, values-driven outcomes. This Workforce Education and Training component has been developed with stakeholders and public participation. All input has been considered, with adjustments made, as appropriate.

Progress and outcomes of education and training programs and activities listed in this Workforce Education and Training component will be reported and shared on an annual basis, with appropriate adjustments made. An updated assessment of this county's workforce needs will be provided as part of the development of each subsequent Workforce Education and Training component.

County Mental Health Director

Printed Name: Frank Whitman, LCSW, MPA

Signature:

Street Address (or, PO Box): 480 E. 13th St., P.O. Box 2087

City, Merced ZIP Code: 95344

Phone #: (209) 381-6813 Fax #: (209) 725-3761

E-mail address: FWhitman@co.merced.ca.us

Contact Name: Stephanie Diaz Phone #: (209) 381-6858 Fax #: (209) 725-3761 E-mail: Stephanie.Diaz@co.merced.ca.us

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EXHIBIT 2: STAKEHOLDER PARTICIPATION SUMMARY

Counties are to provide a short summary of their planning process, to include identifying stakeholder entities involved and the nature of the planning process; for example, description of the use of focus groups, planning meetings, teleconferences, electronic communication, use of regional partnerships.

Merced County Department of Mental Health (MCDMH) conducted five community focus groups/planning meetings over a four month period in order to educate and obtain input regarding the MHP Workforce Education and Training Program component. In addition, MCDMH staff, consumer and family members and various agency stakeholders attended three Regional Partnership meetings in Turlock and Modesto facilitated by Toni Tullys, Project Director, Regional Workforce Development.

Representatives from the following agencies and community attended our focus groups/planning meetings. They provided the guidance and input that will be the foundation for our plan. The agencies and stakeholders who attended these meetings were: Human Services Agency (HSA); Merced County office of Education; Merced County Department of Workforce Investment; Merced County Probation Department; Challenge Family Resource Center; Patient's Right Advocate; Merced County Department of Public Health; Merced Lao Family; UC Merced, Merced College; Turning Point; Atwater Elementary School District/Winton School District; Healthy House; Merced County Mental Health Board member; National Alliance for the Mentally Ill (NAMI); Merced County Department of Mental Health Staff; consumers; and family members of consumers.

The groups explored the employment needs for the Mental Health Program (MHP), the need for new professional staff, training and education opportunities for existing staff, and the need to incorporate the employment, education and training of consumers and family members of consumers as a priority in our plan. The group went through the Workforce Education and Training Program plan guidelines and requirements. The group looked at the five funding categories and actions that are allowed under each category.

The group identified the following as requirements for our plan. They identified the need to fund a full time Workforce Education and Training Coordinator. In addition, they looked at the need to set aside money to fund Regional Workforce Development activities if needed. However, they recommended that any money allocated for Regional Workforce Development activities be allocated on a formula based on a county's total allocation. After funding a Workforce Education and Training Coordinator, the remainder of the money should be allocated in the following manner. Forty (40) percent should be allocated to the Training and Technical Assistance category and the Mental Health Career Pathway Programs category. They did not recommend any funding to the Residency, Internship Program category. Their final recommendation was to allocate sixty (60) percent to the Financial Incentive Program category. The only actions recommended for allocation were for stipends, scholarships and grants. They did not recommend any loan forgiveness actions. The group charged the MHP with designing each action funded under the recommended funding categories of the plan and to bring the completed plan back to the group for approval and/or changes.

A complete draft of the Workforce Education and Training Plan that included all exhibits was posted for public review and comment on January 12, 2008. An electronic copy was posted on the County's website: www.co.merced.ca.us/mentalhealth. Stakeholder Committee members were sent notice informing them of the start of the 30-day review. The general public was notified by public notice posted in two newspapers throughout Merced County and flyers were distributed in English, Spanish, and Hmong to various public locations in Merced County including Los Banos and Livingston. Public review and comment closed with a public hearing at the Mental Health Board Meeting on February 21, 2008. During the 30-day public review and comment period, feedback from stakeholders was received which included written and verbal comments. It was noted that funding action #7 utilized approximately 50% of Workforce Education and Training funds instead of the recommended 60% by the Stakeholder Committee. Once the WET Plan was written, some of the designated funding areas were appropriately addressed in the Training and Technical Assistance category. It was affirmed that the WET Plan covers all of the designated funding areas recommended by the Stakeholder Committee.

By using the full amount of Merced County's planning estimate, Merced County Department of Mental Health is proposing to implement this Workforce Development Plan.

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

I. By Occupational Category - page 1

Major Group and Positions (1)	Estimated # FTE authorized (2)	Position hard to fill? 1=Yes; 0=No (3)	# FTE estimated to meet need in addition to # FTE authorized (4)	Race/ethnicity of FTEs currently in the workforce -- Col. (11)						
				White/Caucasian (5)	Hispanic/Latino (6)	African-American/Black (7)	Asian/Pacific Islander (8)	Native American (9)	Multi Race or Other (10)	# FTE filled (5)+(6)+ (7)+(8)+ (9)+(10) (11)
A. Unlicensed Mental Health Direct Service Staff:										
County (employees, independent contractors, volunteers):										
Mental Health Rehabilitation Specialist	0.0	1	4.0							
Case Manager/Service Coordinator	0.0	0	14.0							
Employment Services Staff.....	0.0	0	0.0							
Housing Services Staff	0.0	0	2.0							
Consumer Support Staff	9.0	0	3.0							
Family Member Support Staff	2.0	0	2.0							
Benefits/Eligibility Specialist	0.0	0	2.0							
Other <i>Unlicensed</i> MH Direct Service Staff	21.0	0	4.0							
<i>Sub-total, A (County)</i>	32.0	1	31.0	9.0	8.0	6.0	4.0	0	1.0	28.0
All Other (CBOs, CBO sub-contractors, network providers and volunteers):										
Mental Health Rehabilitation Specialist	0.0	0	0.0							
Case Manager/Service Coordinator	6.0	1	12.0							
Employment Services Staff.....	0.0	0	0.0							
Housing Services Staff	2.0	1	3.0							
Consumer Support Staff	2.0	1	1.0							
Family Member Support Staff	0.0	0	0.0							
Benefits/Eligibility Specialist	0.0	0	0.0							
Other <i>Unlicensed</i> MH Direct Service Staff	2.5	1	14.0							
<i>Sub-total, A (All Other)</i>	12.5	4	30.0	1.0	4.5	0	5.0	0	1.0	11.5
Total, A (County & All Other):	44.5	4	61.0	10.0	12.5	6.0	9.0	0	2.0	39.5

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

I. By Occupational Category - page 2

Major Group and Positions (1)	Esti- mated # FTE author- ized (2)	Position hard to fill? 1=Yes; 0=No (3)	# FTE estimated to meet need in addition to # FTE authorized (4)	Race/ethnicity of FTEs currently in the workforce -- Col. (11)						# FTE filled (5)+(6)+ (7)+(8)+ (9)+(10) (11)
				White/ Cau- casian (5)	His- panic/ Latino (6)	African- Ameri- can/ Black (7)	Asian/ Pacific Islander (8)	Native Ameri- can (9)	Multi Race or Other (10)	
B. Licensed Mental Health Staff (direct service):										
County (employees, independent contractors, volunteers):										
Psychiatrist, general.....	10.0	1	2.0							
Psychiatrist, child/adolescent.....	1.0	1	2.0							
Psychiatrist, geriatric.....	0.0	1	1.0							
Psychiatric or Family Nurse Practitioner.....	1.0	1	2.0							
Clinical Nurse Specialist.....	0.0	0	0.0							
Licensed Psychiatric Technician.....	6.0	1	2.0							
Licensed Clinical Psychologist.....	0.0	0	1.0							
Psychologist, registered intern (or waived).....	0.0	0	0.0							
Licensed Clinical Social Worker (LCSW).....	8.0	1	4.0							
MSW, registered intern (or waived).....	7.0	1	0.0							
Marriage and Family Therapist (MFT).....	7.0	1	2.0							
MFT registered intern (or waived).....	0.0	0	0.0							
Other <i>Licensed</i> MH Staff (direct service).....	11.0	0	0.0							
<i>Sub-total, B (County)</i>	51.0	8	16.0	28.0	11.0	6.0	3.0	0	0	48.0
All Other (CBOs, CBO sub-contractors, network providers and volunteers):										
Psychiatrist, general.....	0.0	0	0.0							
Psychiatrist, child/adolescent.....	.10	1	.20							
Psychiatrist, geriatric.....	0.0	0	0.0							
Psychiatric or Family Nurse Practitioner.....	0.0	0	0.0							
Clinical Nurse Specialist.....	0.0	0	0.0							
Licensed Psychiatric Technician.....	0.0	0	0.0							
Licensed Clinical Psychologist.....	.10	1	.20							
Psychologist, registered intern (or waived).....	0.0	0	0.0							
Licensed Clinical Social Worker (LCSW).....	0.0	0	0.0							
MSW, registered intern (or waived).....	.5	1	1.0							
Marriage and Family Therapist (MFT).....	.5	1	1.0							
MFT registered intern (or waived).....	1.0	1	2.0							
Other <i>Licensed</i> MH Staff (direct service).....	0.0	0	0.0							
<i>Sub-total, B (All Other)</i>	2.20	5	4.40	1.6	.5	0	0	0	.10	2.2
Total, B (County & All Other):	53.20	11	20.40	29.6	11.5	6.0	3.0	0	.10	50.2

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

I. By Occupational Category - page 3

Major Group and Positions (1)	Esti- mated # FTE author- ized (2)	Position hard to fill? 1=Yes' 0=No (3)	# FTE estimated to meet need in addition to # FTE authorized (4)	Race/ethnicity of FTEs currently in the workforce -- Col. (11)						
				White/ Cau- casian (5)	His- panic/ Latino (6)	African- Ameri- can/ Black (7)	Asian/ Pacific Islander (8)	Native Ameri- can (9)	Multi Race or Other (10)	# FTE filled (5)+(6)+ (7)+(8)+ (9)+(10) (11)
C. Other Health Care Staff (direct service):										
County (employees, independent contractors, volunteers):										
Physician	0.0	0	0.0							
Registered Nurse	10.0	1	3.0							
Licensed Vocational Nurse	0.0	0	0.0							
Physician Assistant	0.0	0	0.0							
Occupational Therapist	0.0	0	0.0							
Other Therapist (e.g., physical, recreation, art, dance).....	0.0	0	0.0							
Other Health Care Staff (direct service, to include traditional cultural healers).....	0.0	0	0.0							
<i>Sub-total, C (County)</i>	10.0	1	3.0	9.0	1.0	0	0	0	0	10.0
All Other (CBOs, CBO sub-contractors, network providers and volunteers):										
Physician	0.0	0	0.0							
Registered Nurse	0.0	0	0.0							
Licensed Vocational Nurse	0.0	0	0.0							
Physician Assistant	0.0	0	0.0							
Occupational Therapist	0.0	0	0.0							
Other Therapist (e.g., physical, recreation, art, dance).....	0.0	0	0.0							
Other Health Care Staff (direct service, to include traditional cultural healers).....	0.0	0	0.0							
<i>Sub-total, C (All Other)</i>	0.0	0	0.0	0	0	0	0	0	0	0
Total, C (County & All Other):	10.0	1	3.0	9.0	1.0	0	0	0	0	10.0

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

I. By Occupational Category - page 4

Major Group and Positions (1)	Estimated # FTE authorized (2)	Position hard to fill? 1=Yes; 0=No (3)	# FTE estimated to meet need in addition to # FTE authorized (4)	Race/ethnicity of FTEs currently in the workforce -- Col. (11)						
				White/Caucasian (5)	Hispanic/Latino (6)	African-American/Black (7)	Asian/Pacific Islander (8)	Native American (9)	Multi Race or Other (10)	# FTE filled (5)+(6)+(7)+(8)+(9)+(10) (11)
D. Managerial and Supervisory:										
County (employees, independent contractors, volunteers):										
CEO or manager above direct supervisor.....	1.0	1	0.0							
Supervising psychiatrist (or other physician)	1.0	1	0.0							
Licensed supervising clinician.....	7.0	1	3.0							
Other managers and supervisors.....	10.0	0	1.0							
<i>Sub-total, D (County)</i>	19.0	3	4.0	10.0	3.0	0	2.0	0	0	15.0
All Other (CBOs, CBO sub-contractors, network providers and volunteers):										
CEO or manager above direct supervisor.....	1.5	1	1.0							
Supervising psychiatrist (or other physician)	0.0	0	0.0							
Licensed supervising clinician.....	.5	1	1.0							
Other managers and supervisors.....	2.0	0	2.0							
<i>Sub-total, D (All Other)</i>	4.0	2	4.0	3.0	1.0	0	0	0	0	4.0
Total, D (County & All Other):	23.0	5	8.0	13.0	4.0	0	2.0	0	0	19.0
E. Support Staff (non-direct service):										
County (employees, independent contractors, volunteers):										
Analysts, tech support, quality assurance.....	12.0	0	2.0							
Education, training, research	4.0	0	0.0							
Clerical, secretary, administrative assistants	15.0	0	9.0							
Other support staff (non-direct services).....	21.0	0	7.0							
<i>Sub-total, E (County)</i>	52.0	0	18.0	30.0	11.0	5.0	2.0	0	0	48.0
All Other (CBOs, CBO sub-contractors, network providers and volunteers):										
Analysts, tech support, quality assurance.....	.5	0	.5							
Education, training, research	0.0	0	0.0							
Clerical, secretary, administrative assistants	3.0	1	4.0							
Other support staff (non-direct services).....	.5	0	.5							
<i>Sub-total, E (All Other)</i>	4.0	1	5.0	1.8	1.2	0	1.0	0	0	4.0
Total, E (County & All Other):	56.0	1	23.0	31.8	12.2	5.0	3.0	0	0	52.0

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

I. By Occupational Category - page 5

**GRAND TOTAL WORKFORCE
(A+B+C+D+E)**

Major Group and Positions (1)	Esti- mated # FTE author- ized (2)	Position hard to fill? 1=Yes; 0=No (3)	# FTE estimated to meet need in addition to # FTE authorized (4)	Race/ethnicity of FTEs currently in the workforce -- Col. (11)						# FTE filled (5)+(6)+ (7)+(8)+ (9)+(10) (11)
				White/ Cau- casian (5)	Hispanic/ Latino (6)	African- Ameri- can/ Black (7)	Asian/ Pacific Islander (8)	Native Ameri- can (9)	Multi Race or Other (10)	
County (employees, independent contractors, volunteers) (A+B+C+D+E)	164.0	13.0	72.0	86.0	34.0	17.0	11.0	0	1.0	149.0
All Other (CBOs, CBO sub-contractors, network providers and volunteers) (A+B+C+D+E)	22.7	12.0	43.4	7.4	7.2	0	6.0	0	1.1	21.7
GRAND TOTAL WORKFORCE (County & All Other) (A+B+C+D+E)	186.7	25.0	115.4	93.4	41.12	17.0	17.0	0	2.1	170.62

F. TOTAL PUBLIC MENTAL HEALTH POPULATION

(1)	(2)	(3)	(4)	Race/ethnicity of individuals planned to be served -- Col. (11)						All individuals (5)+(6)+ (7)+(8)+ (9)+(10) (11)
				White/ Cau- casian (5)	Hispanic/ Latino (6)	African- Ameri- can/ Black (7)	Asian/ Pacific Islander (8)	Native Ameri- can (9)	Multi Race or Other (10)	
F. TOTAL PUBLIC MH POPULATION	Leave Col. 2, 3, & 4 blank			1,471	1,361	366	384	27	214	3,823

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

II. Positions Specifically Designated for Individuals with Consumer and Family Member Experience:

Major Group and Positions (1)	Estimated # FTE authorized and to be filled by clients or family members (2)	Position hard to fill with clients or family members? (1=Yes; 0=No) (3)	# additional client or family member FTEs estimated to meet need (4)
A. <i>Unlicensed</i> Mental Health Direct Service Staff:	0.0	0.0	0.0
Consumer Support Staff.....	3.0	1.0	3.0
Family Member Support Staff	2.0	0.0	0.0
Other <i>Unlicensed</i> MH Direct Service Staff	2.0	1.0	1.0
Sub-Total, A:	7.0	2.0	4.0
B. <i>Licensed</i> Mental Health Staff (direct service)	0.0	0.0	0.0
C. Other Health Care Staff (direct service)	0.0	0.0	0.0
D. Managerial and Supervisory	2.0	0.0	0.0
E. Support Staff (non-direct services).....	1.0	0.0	0.0
GRAND TOTAL (A+B+C+D+E)	10.0	2.0	4.0

III. LANGUAGE PROFICIENCY

For languages other than English, please list (1) the major ones in your county/city, (2) the estimated number of public mental health workforce members currently proficient in the language, (3) the number of additional individuals needed to be proficient, and (4) the total need (2)+(3):

Language, other than English (1)	Number who are proficient (2)	Additional number who need to be proficient (3)	TOTAL (2)+(3) (4)
1. Spanish _____	Direct Service Staff <u> 19.0 </u> Others <u> 9.25 </u>	Direct Service Staff <u> 35.0 </u> Others <u> 1.0 </u>	Direct Service Staff <u> 54.0 </u> Others <u> 10.25 </u>
2. Hmong _____	Direct Service Staff <u> 7.0 </u> Others _____	Direct Service Staff <u> 3.5 </u> Others _____	Direct Service Staff <u> 10.5 </u> Others _____
3. Mien _____	Direct Service Staff <u> 2.0 </u> Others _____	Direct Service Staff <u> 4.0 </u> Others _____	Direct Service Staff <u> 6.0 </u> Others _____
4. Punjabi _____	Direct Service Staff _____ Others _____	Direct Service Staff _____ Others _____	Direct Service Staff _____ Others _____
5. Portuguese _____	Direct Service Staff <u> .5 </u> Others _____	Direct Service Staff _____ Others _____	Direct Service Staff <u> .5 </u> Others _____
6. American Sign _____	Direct Service Staff _____ Others _____	Direct Service Staff <u> .5 </u> Others _____	Direct Service Staff <u> .5 </u> Others _____

EXHIBIT 3: WORKFORCE NEEDS ASSESSMENT

IV. REMARKS: Provide a brief listing of any significant shortfalls that have surfaced in the analysis of data provided in sections I, II, and/or III. Include any sub-sets of shortfalls or disparities that are not apparent in the categories listed, such as sub-sets within occupations, racial/ethnic groups, special populations, and unserved or underserved communities.

Merced County is designated as a Mental Health Professional Shortage Area. The demand for bilingual, bicultural services far exceed the services being provided by the current County workforce. Merced County Mental Health recognizes the demand for services; however, budget constraints do not allow the hiring of adequate staff to meet the needs of Merced County residents at this time

The following comments were provided by the participants of the Workforce Needs Assessment.

A. Shortages by occupational category:

There is a shortage of bilingual/bicultural staff at all levels, particularly in our threshold languages (Hmong & Spanish).

There is a shortage of Licensed Supervising Clinicians.

Small labor pool; education but little experience; funding inadequate.

It is more of a funding shortfall than a staff shortfall.

We have a shortage of Black/African American direct service staff in some programs.

B. Comparability of workforce, by race/ethnicity, to target population receiving public mental health services:

Shortage of bilingual/bicultural staff compared to client population.

100% of our staff meets the race/ethnicity needs of our clients.

We have 90% Hispanic staff, 5% Vietnamese staff, 5% Caucasian staff.

We have 30% Hispanic staff which is under the target population.

C. Positions designated for individuals with consumer and/or family member experience:

We need for a program targeted for clients and/or family members to enter the Mental Health workforce as direct service staff.

We are trying to fill one new position.

It is more of a funding shortfall than a staff shortfall.

None in Merced under this contract; we have a mentor position for First 5.

D. Language proficiency:

Shortfall for certification of language proficiency. There is the need for a DMH certified bilingual testing process.

We serve mainly Southeast Asian-Hmong, Lao, and Mien.

Disconnect between language proficiency and applicants plus applicants with appropriate experience.

We have difficulty recruiting bilingual (English/Spanish) staff.

We need more staff that is bilingual, bi-cultural in Southeast Asian languages.

E. Other, miscellaneous:

Little to no labor pool for this field (Other Health Care Staff, Managerial & Supervisory, Support Staff) in Merced County.

Expansion of services are precluded due to fiscal constraints.

EXHIBIT 4: WORK DETAIL

A. WORKFORCE STAFFING SUPPORT

Action #1 – Title: Workforce Education and Training Coordination

Description: Using early implementation dollars, a WET Coordinator was hired in November 2007. This position is in charge of coordinating the implementation of Education and Training strategies identified in Merced County by performing tasks such as conducting an assessment of staff, consumers, youth and family members training needs, developing and implementing a strategic training plan for the Merced County Public Mental Health System, and participating both at a state and regional level to ensure coordination of training and to maximize training opportunities.

Objectives

- 1. Completion and analysis of Workforce Needs Assessment.**
- 2. Completion and analysis of Training Needs Assessment within the public mental health programs directly operated and contract providers.**
- 3. Completion and analysis of Training Needs Assessment with consumers and family members who may be potential hires within the public mental health system (or who are capable of providing consumer and family driven services).**
- 4. Submission of the WET plan.**
- 5. Coordination and/or implementation of training for public Mental Health system to include mental health staff, contract providers, and consumers and family members based on the principles of wellness, recovery and resiliency, cultural competence, consumer/family driven mental health services, integrated services, and community collaboration.**
- 6. Completion and monitoring of contracts with entities providing Workforce Education and Training programs and services.**
- 7. Participation in and support of state and regional education and training efforts to ensure coordination and reduce duplication of services.**
- 8. Participation in local initiatives which expand opportunities and fiscal support for workforce development, i.e. community colleges, ROP, Vocational Rehab, etc.**
- 9. As needed, assist in the development of courses with adult education, Merced County Office of Education, Merced College, and/or Merced County Workforce Development that would provide skill development/education that supports the principles of MHSA.**
- 10. Coordinate and provide oversight to all Workforce Education and Training activities and programs.**
- 11. Provide annual updates to WET plan and evaluate effectiveness of services and trainings provided.**

EXHIBIT 4: WORK DETAIL

A. WORKFORCE STAFFING SUPPORT-- *Continued*

Budget justification: This is a full time Middle Management position. Funding for Year 2 (FY 2007-08) is \$64,750 and funding for year 3 (FY 2008-09) \$114,950.00, represents the full third year funding. The cost of this position includes salary and benefits according to the County’s Salary schedules for a Middle Management position. Benefits included in this figure include MCERA, social security, flex benefits, workers compensation, health insurance, disability insurance, and special benefits. Travel and training, general office supplies and overhead are included.

Budgeted Amount:	FY 2006-07: \$ <u>300.00</u>	FY 2007-08: \$ <u>64,750</u>	FY 2008-09: \$ <u>114,950</u>
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EXHIBIT 4: WORK DETAIL

B. TRAINING AND TECHNICAL ASSISTANCE

Action #2 – Title: Spanish Language Training

Description: Approximately 50% of Merced County population is Hispanic; it is also an underserved and un-served population in our Mental Health system. In an effort to better serve this population and the community, staff at Merced County Mental Health and contract providers have recognized a need to interact with Spanish speaking consumers in their language. Merced County Department of Mental Health and contract providers have had a difficult time in hiring and retaining bilingual staff. The need for current staff to be linguistically capable to provide direct services to the Hispanic population in their primary language was identified as a priority in terms of staff development at the Stakeholder meetings and in the Workforce Needs Assessment. A linguistically and culturally competent program is a necessity in order to provide an integrated service experience for consumers and family members promoting wellness, recovery and resiliency. Currently, the Department has assigned several Hispanic staff members to provide outreach to the rural, ethnic populations at migrant camps and migrant education and faith based organizations. These staff members also assumed responsibility for educating other MCDMH staff in team meetings regarding cultural issues and techniques and strategies for engaging the Hispanic consumer. Increasing the number of Spanish speaking Mental Health staff will assist in providing a consumer/family driven Mental Health system and empowers collaboration with the Spanish speaking community.

Objectives:

- 1. Offer Spanish speaking language classes to all Mental Health staff, volunteers, and contract providers.**
- 2. Select and contract with an agency or instructor to provide the classes.**
- 3. Offer individual computer or audio based Spanish language training aides for Mental Health staff not able to attend formalized training opportunities.**

Budget justification: Dollars used in this action will pay for training contracts, facility, copying of materials, and computer/audio based Spanish language training packages.

Budgeted Amount:	FY 2006-07: \$ _____	FY 2007-08: \$6,000 _____	FY 2008-09: \$12,000 _____
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EXHIBIT 4: WORK DETAIL

B. TRAINING AND TECHNICAL ASSISTANCE -- *Continued*

Action #3 – Title: Staff Development

Description: This action will address education and training for all individuals who provide or support services in the Public Mental Health System. A survey process will be completed by the WET Coordinator and training needs will be identified. It will be the responsibility of the WET training subcommittee and the WET Coordinator to identify training providers for specific training topics identified through the survey process. This is education and training that contributes to developing and maintaining a culturally competent workforce, to include consumers and family members, who are capable of providing consumer and family-driven services that promote wellness, recovery and resilience and lead to measurable, values-driven outcomes. Training will be made available to Mental Health staff, contract providers, consumers and family members and community partners. All training providers will be knowledgeable of the fundamental principals of MHSA and will integrate them throughout the training as specified through any contractual agreements entered into by Merced County.

Objectives:

1. The WET subcommittee, which will include consumers and family members, will identify effective, evidenced-based models for each topic area. A training needs survey will be given to staff, contractors, consumers and family members. The WET Coordinator, along with the WET training subcommittee, will identify appropriate trainers, resources, and the most cost effective manner in which to provide these trainings.
2. Provide annual trainings and ongoing consultations to develop staff competencies designed to meet current consumer needs.
3. Incorporate into each training specific cultural, gender, economic and spiritual issues which need to be addressed to better serve the diverse population of Merced County.

Budget justification: Dollars used in this action item will pay for training contracts, facility, copying of materials, equipment, and registration and license fees.

Budgeted Amount:	FY 2006-07: \$ _____	FY 2007-08: \$ 5,000 _____	FY 2008-09: \$115,000 _____
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EXHIBIT 4: WORK DETAIL

B. TRAINING AND TECHNICAL ASSISTANCE -- *Continued*

Action #4 – Title: **E-Learning Contract**

Description: E-Learning will be an invaluable resource that will allow us to develop, deliver and manage educational opportunities and distance learning for staff, consumers and family members, and community based organizations. While no specific provider has been selected for e-learning, initial demonstrations with potential contractors are being conducted. Staff, consumers and family members will be involved in the selection process. Funding will be used for access to the course catalog and to customize courses to meet the specific, diverse needs of our community.

Objectives:

- 1. Select and contract with an e-learning provider by September 2008.**
- 2. Provide greater ease for staff, community providers, consumers and family members to access training and educational courses which meet license requirements and/or provide career path development, as well as rehabilitation and consumer employment courses.**
- 3. Provide a community access portal for consumers and family members and key stakeholders to meet their training and information needs.**
- 4. Increase quality and availability of diverse training offerings while reducing cost.**
- 5. Provide compliance and quality control for legal requirements by linking to the County’s existing education and licensing tracking system.**

Budget justification: Dollars used in this action item will pay for the on-going cost of course catalog use and required equipment needed to provide access to consumers and family members.

Budgeted Amount:	FY 2006-07: \$ _____	FY 2007-08: \$10,000 _____	FY 2008-09: \$45,000 _____
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EXHIBIT 4: WORK DETAIL

C. MENTAL HEALTH CAREER PATHWAYS

Action #5— Title: Clinical Social Worker/Marriage and Family Therapist Internship Program

Description: Currently, Merced County Mental Health uses clinical licensed Mental Health Program Manager staff to supervise graduate student interns. The need to develop future licensed clinical staff is critical. This action is designed to expand the internship program by allocating funds to a licensed clinical professional dedicated to providing oversight and supervision hours to graduate student interns in field placement with Merced County Department of Mental Health. The WET Coordinator will collaborate with this provider in coordination and recruitment efforts.

Objectives:

- 1. Provide 2 internship slots annually for graduate level MSW/MFT students.**
- 2. Develop a plan to increase recruitment efforts that outreach to under-represented racial/ethnic, cultural or linguistic groups in the workforce by maintaining a working relationship with CSU, Stanislaus.**
- 3. Implement supervision structure to ensure supervision of interns and pre-licensed candidates.**

Budget justification: Funds will be set aside for internships and to contract for clinical supervision hours.

Budgeted Amount:	FY 2006-07: \$ _____	FY 2007-08: \$ _____	FY 2008-09: \$ 28,000 _____
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EXHIBIT 4: WORK DETAIL

C. MENTAL HEALTH CAREER PATHWAY PROGRAMS -- *Continued*

Action #6 – Title: Psychosocial Rehabilitation Certification Program

Description: To address identified shortages in occupations, skill sets, and individuals with unique cultural and linguistic competence at Merced County Mental Health and organizations providing services in the Public Mental Health System. The curriculum will be modeled after that developed by the California Association of Social Rehabilitation Agencies (CASRA), and could lead to a certification as a psychosocial rehabilitation professional. The program will be designed to market and outreach to consumers, family members, individuals from underrepresented racial/ethnic and cultural groups, community mental health providers, and Mental Health staff. MHPA funded staff would include trainers, employment service personnel and staff time in public mental health settings to provide supervision of work experience. The program will be a combination of curriculum based on principles of psychosocial rehabilitation and work experience.

Objectives:

- 1. Purchase the CASRA Psychosocial Rehabilitation Practitioner Curriculum along with necessary class-specific resource materials to provide training for 12 students.**
- 2. Provide academic and financial support for 50% of the students to obtain certification as a Certified Psychiatric Rehabilitation Practitioner through the US Psychiatric Rehabilitation Association. Financial support will cover the cost of the USPRA Certified Psychiatric Rehabilitation Practitioner application fee.**
- 3. Increase the number of Merced County Mental Health employees with CASRA certification by 50%.**

Budget justification: Dollars used in this action item covers the cost of the CASRA Psychosocial Rehabilitation Practitioner Curriculum, the cost of class-specific resource materials, other training costs including trainer, facility, copying of materials, and translation and interpretation services for non-English speaking trainees, and costs for USPRA certification.

Budgeted Amount:	FY 2006-07: \$ _____	FY 2007-08: \$ 3,500. _____	FY 2008-09: \$ 9,500 _____
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EXHIBIT 4: WORK DETAIL

E. FINANCIAL INCENTIVE PROGRAMS

Action #7 – Title: Stipends and/or Scholarships and Grants

Description: This action addresses the Mental Health workforce shortages and diversity needs, as well as increasing consumer and family member participation in the workplace by offering stipends and incentives to those individuals interested in pursuing education in delivering mental health care in Merced County. Through the Workforce Needs Assessment and the Stakeholder meetings, it was determined that Merced County is in need of licensed, certified, professional direct service staff to deliver compassionate, safe, timely and effective mental health care to all individuals and their families who are in need. There is a critical need for Psychiatric Nurse Practitioners, Psychiatric Staff Nurses, Mental Health Clinicians and Certified Mental Health workers who are bi-cultural and bilingual.

Providing grant money to consumers and family members to enhance their knowledge base as community members could provide a way to transition into a career pathway.

Objectives:

1. Provide stipends/and or scholarships each year to individuals wishing to pursue higher education in Mental Health service.
2. Establish an application process that would determine eligible individuals for a stipend, scholarship, or grant.
3. Establish a process with key stakeholders for reviewing applications and recommendations for stipends, scholarships or grants.
4. Provide accountability and support to the individuals approved to receive stipends, scholarships, or grants.
5. Allocate funds for consumers and family members to attend relevant trainings or conferences each year.

Budget justification: Funds will be set aside for stipends, scholarships, and grants as well as funding for .25 FTE Staff Services Analyst. Future Workforce Education and Training allocations will be used to enhance this action item.

Budgeted Amount:	FY 2006-07: \$ _____	FY 2007-08: \$18,000 _____	FY 2008-09: \$ 220,000 _____
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EXHIBIT 5: ACTION MATRIX

Please list the titles of *ACTIONS* described in Exhibit 4, and check the appropriate boxes (✓) that apply.

Actions (as numbered in Exhibit 4, above)	Promotes wellness, recovery, and resilience	Promotes culturally competent service delivery	Promotes meaningful inclusion of clients/family members	Promotes an integrated service experience for clients and their family members	Promotes community collaboration	Staff support (infrastructure for workforce development)	Resolves occupational shortages	Expands postsecondary education capacity	Loan forgiveness, scholarships, and stipends	Regional partnerships	Distance learning	Career pathway programs	Employment of clients and family members within MH system
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
Action #_1 WET Coordination	X	X	X	X	X	X	X	X	X	X	X	X	X
Action #_2 Spanish Language Training:	X	X	X	X	X	X	X						
Action #_3 Staff Development	X	X	X	X	X	X							
Action #_4 E-Learning Contract	X	X	X	X	X	X		X			X	X	X
Action #_5 Internship Program	X	X	X	X	X	X	X	X				X	X
Action #_6 Psychosocial Rehabilitation Certification Program	X	X	X	X	X	X	X	X				X	X
Action #_7 Stipends and/or Scholarships and Grants	X	X	X	X	X	X	X	X	X			X	X
Action #_:													
Action #_:													
Action #_:													

EXHIBIT 6: BUDGET SUMMARY

Fiscal Year: 2006-07			
Activity	Funds Approved Prior to Plan Approval (A)	Balance of Funds Requested (B)	Total Funds Requested (A + B)
A. Workforce Staffing Support:			\$300.00
B. Training and Technical Assistance			
C. Mental Health Career Pathway Programs			
D. Residency, Internship Programs			
E. Financial Incentive Programs			
GRAND TOTAL FUNDS REQUESTED for FY 2006-07			\$300.00

Fiscal Year: 2007-08			
Activity	Funds Approved Prior to Plan Approval (A)	Balance of Funds Requested (B)	Total Funds Requested (A + B)
A. Workforce Staffing Support:		\$64,750	\$64,750
B. Training and Technical Assistance		\$21,000	\$21,000
C. Mental Health Career Pathway Programs		\$ 3,500	\$ 3,500
D. Residency, Internship Programs			
E. Financial Incentive Programs		\$ 18,000	\$ 18,000
GRAND TOTAL FUNDS REQUESTED for FY 2007-08			\$107,250

Fiscal Year: 2008-09			
Activity	Funds Approved Prior to Plan Approval (A)	Balance of Funds Requested (B)	Total Funds Requested (A + B)
A. Workforce Staffing Support:		\$114,950	\$114,950
B. Training and Technical Assistance		\$172,000	\$172,000
C. Mental Health Career Pathway Programs		\$37,500	\$37,500
D. Residency, Internship Programs			
E. Financial Incentive Programs		\$220,000	\$220,000
GRAND TOTAL FUNDS REQUESTED for FY 2008-09			\$544,450