Foundations as Partners in Meeting California’s Public Behavioral Health Care Workforce Needs

California Mental Health Planning Council
Workforce Education and Training Summit

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We believe all Californians can be healthy and safe

**Our mission:**
Improve the lives of all Californians, particularly the underserved, by making health care accessible, effective, and affordable, and by ending domestic violence.

**About us:**

**Total Grantmaking since 2002:**
Over $383 million

**2016 Grantmaking:**
$29.6 million, 422 grants

**Independent Board:**
9 Trustees, 5 from Blue Shield of California

**Total Number of Staff:** 24

**Source of Funding:**
Annual contributions from Blue Shield of California
gaps in access to behavioral health

Importance of behavioral health-related services vs. availability (among low-income Californians)

- Substance abuse services: Highly important 76% vs. Available 42%
- Social service referrals: Highly important 61% vs. Available 28%
- Behavioral health counseling: Highly important 76% vs. Available 52%
over $5M invested to date

Community Engagement and Equity
Local Collaboration & Care Integration
State Policy & Financing Opportunities

Align accountability and measurement
the time is now!
**Funding Overview**

**Waiver Programs**
- PRIME
- GPP*
- DTI
- DSHP
- WPC
- TOTAL

**Initial Federal Funding**
- $3.732b
- $236m**
- $375m
- $375m
- $1.5b
- $6.218b

*GPP funding on this chart does not include the DSH component of the funding. Projecting DSH cuts, DSH funding over the 5 years is estimated to be $10.830b TF / $5.915b FF.

**For GPP, initial federal funding only accounts for FY 11 GPP funding as later years may be affected by uncompensated care assessments.
Continuing Authorities

- Medi-Cal Managed Care
- Community-Based Adult Services
  + Health Homes 2703
  + FQHC Payment Reform Pilot
  + Continuum of Care Reform
- Drug Medi-Cal Organized Delivery System
- Coordinated Care Initiative (CCI), including CalMediConnect
- Low Income Pregnant Women, 109%-138% FPL

workforce will be key to success
skills and capacities needed

Empathy & Equity

Teams, Technology, Data

Beyond the Walls and Across Systems
workforce development opportunities

1. State and regional workforce planning with integration lens

2. Multi-sector training in equity, empathy and trauma

3. Community optimization of physicians and specialists through partnerships, training and technology

4. Cross-training with community health workers and peers; mental health and substance use counselors

5. Educational pipeline, ladders, and lattices for people of color
foundations as partners
California Behavioral Health Funders
Research Findings and Perspectives from the Field

December 12, 2016
Current and Emerging Issues and Priorities Related to Behavioral Health

Percentage of Respondents Citing Current/Emerging Issue

- BH Integration: 64%
- Workforce: 59%
- TIC: 59%
- Children and Youth: 55%
- Community Supports: 50%
- Prevention, Wellness, Resiliency: 45%
- Schools and Behavioral Health: 45%
- Substance Use: 45%
- Cultural Competence: 41%
- Financing and Payment Reform: 36%
- Social Determinants of Health: 36%
- BH Outside of Health Care: 36%
- Health Equity: 36%
- ACEs: 32%
- Data and Measurement: 27%
- SBIRT: 18%
Possible Topics for Further Discussion

Based on our analysis of the interviews and survey responses, these five areas emerged as possible topics for future work:

• Social determinants of health, equity, and grassroots work in communities
• Workforce development and training
• BH systems integration and reform
• Children & youth and trauma-informed care
• Policy and advocacy
Important Themes
thank you!

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