WORKFORCE EDUCATION AND TRAINING REGIONAL PARTNERSHIP
Semi-Annual Outcomes Progress Report Template
(Attachment 2)

<table>
<thead>
<tr>
<th>Region:</th>
<th>Central</th>
<th>Fiscal Sponsor:</th>
<th>Placer County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progress Report Time Period:</td>
<td>Jan - June, 2016</td>
<td>Regional Partnership Coordinator:</td>
<td>Gina Ehlert, M. Ed.</td>
</tr>
</tbody>
</table>

A. Revisions to Work Plan Activities:

(If the regional partnership has revised the work plan submitted to OSHPD for the time period of this report, please indicate those changes here or include as an attachment to this document.)

<table>
<thead>
<tr>
<th>Activity as Proposed in Work Plan</th>
<th>Revision to Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>QPR Online Training, Interpreter Training-for-Trainers, Training and Technical Assistance for counties to write cultural competency plans to new CLAS standards and Using Data in Public Mental Health Training. Has been added to next fiscal year’s work plan.</td>
<td>Did not complete some of the trainings originally planned in FY 15/16: omitted Interpreter Training for Trainers and pushed the remaining unfinished trainings out to the new Work Plan for FY 16/17. See Section B for details.</td>
</tr>
</tbody>
</table>
### B. Description of Activities and Outcomes

*(This section should describe the activities of the Regional Partnership to meet identified goals during the time period of this report and outcomes. Also include Key activity dates, status of activity and the WET Five-Year Plan 2014-2019 goals, objectives, and actions met with the activity.)*

Outcome should be reported only for activities during the time period of this progress report. Only report one (1) activity per row which are numbered below. Outcomes should be reported using the data elements approved by OSHPD. Where applicable and to the extent possible outcomes should include data on population served per activity to include: total number of participants, gender, race/ethnicity, sexual orientation, languages spoken, County of residence, age, consumer and/or family member experience, and profession. OSHPD prefers outcomes of demographic data to be reported by excel or other electronic means that facilitates analysis of information. To the extent possible and where applicable, include excel attachments with demographic data.

<table>
<thead>
<tr>
<th>Description of Activity Engaged in to Meet Work Plan Goals</th>
<th>Key Activity Dates</th>
<th>Status of Activity</th>
<th>WET Five-Year Plan 2014-2019 Goals, Objectives, and Actions met with Activity</th>
<th>Contract Funds Used for Activity (Identify if Funds Used are FY2008-14 Funds or FY2014-17 Funds)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Continued use of a Regional Coordinator</td>
<td>Continued from previous FY and ongoing.</td>
<td>In progress, will continue in FY 16/17.</td>
<td>Goal 3, Objective A, Action 1 and Action 2</td>
<td>FY 15/16 funds</td>
</tr>
</tbody>
</table>

**Outcomes:** In this six-month period, the Coordinator supported 10 monthly Regional meetings, 2 of which were face-to-face. The Partnership completed most work described on the FY 15/16 Work Plan and completed all reports requested which were submitted timely to OSHPD. In addition, the coordinator has facilitated over 14 sub-committee meetings associated with our projects. She has coordinated 5 training courses and 6 contracts: 1 for exploration of Regional efforts to contract psychiatrists and or psychiatric nurse practitioners, 1 for a Suicide Post-vention protocol with a focus on rural communities, 1 with UC Davis Extension – Center for Human Services for a Leadership training series, 2 for existing and continuing Roving Supervisors, and 1 new contract for a Roving Supervisors for the upcoming fiscal year. All projects received assistance from the coordinator to assure that programs were implemented, ran smoothly, and finished timely. Most importantly, the program outcomes, that allow the Partnership to determine success and to make programmatic changes for improvement were developed, tracked and reported by the coordinator.

| 2 Overseeing implementation of deliverables for a one-year contract to partially fund the development | Managed the one-year, four- | Development and | Goal 1, Objective D, | FY 2008-14 funds |

<table>
<thead>
<tr>
<th>Action</th>
<th>Outcome Area</th>
<th>Action Details</th>
<th>Expected Outcomes</th>
<th>Action 1 and Action 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Goal 1, Objective D, Action 1 and Action 3</td>
<td>The program is hybrid – provided primarily online, and occasionally on campus. Deliverable contract with CSU, Stanislaus for a hybrid MSW Program. Implementation was completed this fiscal year.</td>
<td>Outcomes: This program partially-funds the development of a Hybrid MSW Program in the Central Region. The contract began in July 2015, and the funds will be expended by the end of the fiscal year based on four deliverables agreed upon by the Partnership and CSU, Stanislaus. At least 2 students in the first 25-person cohort are employees from Central Region Counties. We will collect data on the program and report on outcomes, separately, after the data is received. After the contract period ends, discussions will continue to see if some modifications can be made to the summer block field placement component of the program, as many county departments are very challenged by placing students in this manner.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Goal 1, Objective A, Action 4; Goal 1, Objective D, Action 1</td>
<td>3 Online CASRA Program at Modesto Jr. College</td>
<td>Developed in previous years. MJC contract was extended to August 31, 2016. In progress, educating students from various counties in the region.</td>
<td>Goal 1, Objective A, Action 4; Goal 1, Objective D, Action 1 FY 2008-14 funds</td>
</tr>
<tr>
<td>3</td>
<td>Goal 1, Objective C, Action 1 and Action 3; Goal 1, Objective D, Action 6</td>
<td>Fund the continued contracting of existing Roving Supervisors, while expanding the roving clinical supervisor program to other partnering counties who have interest.</td>
<td>Developed in previous years. Two existing Roving Supervisors are continuing through June 30, 2016. One new Roving Supervisor was contracted effective June 1, 2016 to back-fill a retiring Supervisor. In progress. Many students from Roving Supervisors’ groups will have collected enough hours to take licensure exam in 2016.</td>
<td>Goal 1, Objective C, Action 1 and Action 3; Goal 1, Objective D, Action 6 FY 2008-14 funds</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
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</tbody>
</table>
**Outcomes:** During this period, nine individuals from the program have become Licensed Clinical Social Workers. Others have collected the required hours and are ready to take exams for licensure later this calendar year.

<table>
<thead>
<tr>
<th>5</th>
<th>Develop opportunities to partner with CalMHSA on regionally-focused topics of interest.</th>
<th>Suicide Community Response Protocol for Tahoe/Truckee Communities and replicable toolkit for other rural communities. And, a possibly Psychiatric Nurse Practitioner project.</th>
<th>Executed contracts for both programs. The “toolkit” will be a compilation of effective practices and guidance to be completed in August, 2016. The Psychiatric Nurse Practitioner project developed resources for counties to explore in recruiting and/or retaining either psychiatrists or Psychiatric Nurse Practitioners.</th>
<th>Goal 1, Objective C, Actions 1 and 3; Goal 1, Objective D, Action 3; Goal 2, Objective A, Action 2.</th>
<th>FY 2008-14 funds</th>
</tr>
</thead>
</table>

**Outcomes:** No outcomes for this program to date as the data collection will occur in the next fiscal year.

<p>| 6 | Fund and partially fund Mental Health First Aid Training of Instructors for counties in the region to grow or replenish instructors who have retired or | Planned, coordinated, and implemented 2 | Completed. Data on the evaluations, | Goal 1, Objective A, Action 1 and | FY 2008-14 funds |</p>
<table>
<thead>
<tr>
<th>Action 2; Goal 1, Objective B, Action 3; Goal 1, Objective D, Action 5; Goal 2, Objective C, Action 3; Goal 3, Objective C, Action 1 &amp; 2.</th>
<th>Action 3; Goal 1, Objective A, Action 1 and Action 2; Goal 1, Objective B, Action 2 and Action 3; Goal 2, Objective A, Action 2; Goal 2, Objective C, Action 3; Goal 3, Objective C, Action 1 and Action 2</th>
<th>FY 2008-14 funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcomes: Six individuals became certified as Adult Mental Health First Aid Instructors in August 2015 and 27 because certified as Youth Mental Health First Aid Instructors in December 2015. All new instructors have been invited to join the monthly support group meeting for instructors to improve training skills and strategies for marketing the program.</td>
<td></td>
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</tr>
<tr>
<td>7. Fund Motivational Interviewing Training for Peers</td>
<td>The 2nd training was completed in January, followed by two coaching sessions completed in February and March 2016. Both cohorts were invited to attend a final booster training in April 2016.</td>
<td>Collecting data for outcomes.</td>
</tr>
<tr>
<td>Outcomes: Forty-three peers attended the sessions, and several attended each of the following coaching sessions. Evaluation data is still being collected, and an electronic survey regarding the impact of the training will be disseminated 6 months after the final booster training.</td>
<td></td>
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<tr>
<td>8. Fund Co-Occurring Training for Clinical Staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Held two 2-day training sessions: January 28th and 29th, 2016 and February 8th and 9th, 2016.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collecting evaluation information for outcomes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal 1, Objective A, Action 1 and Action 2; Goal 1, Objective B, Action 2; Goal 2, Objective A, Action 2; Goal 2, Objective C, Action 3; Goal 3, Objective C, Action 1 and Action 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2008-14 funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outcomes: Fifty-six people attended the 2 sessions. Evaluation data is still being collected, and an electronic survey regarding the impact of the training will be disseminated 6 months after the final training.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Leadership Training Series for 60 participants in the Central Region through a contract with UC Davis Extension, Center for Human Services.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Held two cohorts of 30 participants to attend one day per month from January through June 2016. The training dates were: Jan 28-29 Feb 25-26 March 24-25 April 21-22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collecting evaluation data for outcomes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal 1, Objective A, Action 2; Goal 1, Objective B, Action 2; Goal 2, Objective A, Action 2; Goal 2,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2008-14 funds</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Outcomes: Sixty people attended the sessions. Evaluation data is still being collected, and an electronic survey regarding the impact of the training will be disseminated 6 months after the final training session.

<table>
<thead>
<tr>
<th></th>
<th>QPR Suicide Prevention Training Online</th>
<th>N/A</th>
<th>Postponed</th>
<th>N/A</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Outcomes:</strong> Postponed to next fiscal year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Development of Interpreter Training for Trainers Course</td>
<td>N/A</td>
<td>Canceled</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td><strong>Outcomes:</strong> Postponed to next fiscal year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Training and Technical Assistance for counties to write cultural competency plans to new CLAS standards</td>
<td>N/A</td>
<td>Postponed</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td><strong>Outcomes:</strong> Postponed to next fiscal year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Using Data in Public Mental Health Training</td>
<td>N/A</td>
<td>Postponed</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td><strong>Outcomes:</strong> Postponed to next fiscal year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Description of Activities Engaged in for Priority Elements *(Describe how the regional partnership addressed each of the elements outlined in this section)*

1. How did the Regional Partnership reach out to and include key stakeholder groups such as: state and local government partners, health systems, providers, educational institutions, faith-based organizations, training consortia, consumers, family members, local Workforce Investment Boards (WIBs), non-profit organizations, social service agencies, children networks, Transitional Age Youth (TAY) networks, aging networks, businesses, other community and system partners?

<table>
<thead>
<tr>
<th>Type of Stakeholder</th>
<th>Type of Outreach Conducted</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local law enforcement agencies, peer/consumer groups, educational institutions, health systems, providers, local Workforce Investment Boards (WIBs), non-profits, and social service agencies</td>
<td>Besides a regional email distribution list and public web page, the regional partnership encouraged each county behavioral health director, MHSA/WET Coordinator, and all participating stakeholders to reach out to local law enforcement agencies, peer/consumer groups, educational institutions, health systems, providers, local Workforce Investment Boards (WIBs), non-profits, and social service agencies to inform them of any training events or other regional opportunities.</td>
<td>In progress.</td>
</tr>
</tbody>
</table>
2. How did the Regional Partnership Include the stakeholder groups listed above in proposed activities?

<table>
<thead>
<tr>
<th>Type of Stakeholder</th>
<th>Activities Stakeholders Engaged In</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Law Enforcement Agencies</td>
<td>The partnership will encourage County Directors and County MHSA/WET Coordinators to reach out to their Local Law Enforcement Agencies to fill trainings or attend events that are relevant to them.</td>
<td>Ongoing for regular monthly meetings.</td>
</tr>
<tr>
<td>Peer/Consumer Groups</td>
<td>Besides invitation to all monthly meetings, the Partnership encouraged County Directors and County MHSA/WET Coordinators to reach out to local peers to attend the Motivational Interviewing for Peers training series in January, February, March and April, 2016.</td>
<td>Ongoing for regular meetings. Continuing outreach for more trainings in the next six-month period.</td>
</tr>
<tr>
<td>Educational Institutions</td>
<td>The Partnership worked with administrators at Modesto Junior College for the online CASRA classes and with administrators at California State Universities for a hybrid MSW program that was launched in August, 2015.</td>
<td>Contracts ended June 30, 2016. Ongoing efforts to continue outreach to educational institutions on behalf of consumers and family members in the Region will be made.</td>
</tr>
<tr>
<td>Category</td>
<td>Description</td>
<td>Status</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Health Systems</td>
<td>The Partnership will encourage County Directors and County MHSA/WET Coordinators to reach out to their local health systems to fill trainings or other events that are relevant to them.</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Providers</td>
<td>The Partnership will encourage County Directors and County MHSA/WET Coordinators to reach out to county providers to attend trainings and events that are relevant to them, e.g., the MI for Peers and Co-Occurring trainings held during this reporting period. The Partnership will also continue their Roving Supervisor program so county staff can become licensed providers.</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Local Workforce Investment Boards (WIBs)</td>
<td>The Partnership will reach out to statewide WIB staff as well as encourage County Directors and County MHSA/WET Coordinators to reach out to their local WIBs to possibly leverage additional funding for the regional partnership trainings to allow more participants.</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
The Partnership will encourage County Directors and County MHSA/WET Coordinators to reach out to non-profits in their counties to fill trainings, such as co-occurring substance use/mental health trainings and peer/consumer trainings, for providers and other community members.

The Partnership will encourage County Directors and County MHSA/WET Coordinators to reach out to social service agencies in their counties to attend co-occurring substance use/mental health trainings.

<table>
<thead>
<tr>
<th>Population “Group” Identified</th>
<th>Activities Engaged in to Support an Increase of the Population Group in the Public Mental Health System (PMHS) workforce</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consumers, family members, parents/caregivers</td>
<td>Besides inviting individuals to the monthly regional meetings, the Partnership engages consumers, family members, and parents/caregivers as sub-committee members, and</td>
<td>Ongoing.</td>
</tr>
<tr>
<td>Area</td>
<td>Activities</td>
<td>Status</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Culturally diverse communities</td>
<td>Besides inviting individuals to the monthly regional meetings, the Partnership engages culturally diverse communities as sub-committee members and participants in trainings, or by those who attend our training sessions and events.</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Rural</td>
<td>Besides inviting individuals to the monthly regional meetings, the Partnership engages rural communities in the following trainings/activities (or by those who are trained/supervised in or by): partnership sub-committees Roving Clinical Supervisors, Mental Health First Aid Instructor Training, Online CASRA Programs, Online MSW Program, and others.</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Underrepresented, Underserved, Unserved, and Inappropriately served populations in the PMHS</td>
<td>Besides inviting individuals to the monthly regional meetings, the Partnership engaged Underrepresented,</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
Underserved, Unserved, and Inappropriately served populations in the public mental health system in the following trainings/activities (or by those who are trained/supervised in or by): partnership sub-committees Roving Clinical Supervisors, Mental Health First Aid Instructor Training, Online CASRA Programs, Online MSW Program, and trainings.

4. Where there activities engaged in to support the leveraging of federal funding?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

D. Expenditures Report: (This section should include regional partnership expenditures for activities engaged in during the time period of this report. The expenditure categories should align with the proposed budget categories from the annual work plan. Include a 1-2 sentence budget narrative for each categorized expenditure. Be aware that there should be no commingling of funds. You should not include expenditure information for activities from the funds provided from 2008-09 through 2013-14. Expenditures reported should only include those from funds received between 2014-15 through 2016-17.

Approximately $600,000 of this budget will use funds provided by OSHPD in FY 2014/2015. They will cover the costs of:

- Hybrid MSW Program Development $50,000
- Online CASRA Program at MJC $76,000
- Roving Clinical Supervisors $209,739
- MHFA Trainings for Instructors/manuals $186,000
- 15% Admin Fee $78,260.85
- TOTAL $599,999.85

Originally, we were going to cover the costs of Collaboration with CalMHSA with these funds; however, we did not.
<table>
<thead>
<tr>
<th>Budget Item</th>
<th>Description</th>
<th>Budgeted Expenses for FY 15/16</th>
<th>Estimated Expenditures through June 30, 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff</td>
<td>1 contracted staff serving as Regional Coordinator to be hired through Contractor at a total cost of $90,000 for twelve months.</td>
<td>$ 90,000</td>
<td>$ 90,000</td>
</tr>
<tr>
<td>Support Staff</td>
<td>0.35 FTE contracted staff serving as support staff to the Regional Coordinator on a limited basis and .05 FTE for an Associate Director to manage this contract at a total cost of no more than $50,000 per year.</td>
<td>$ 50,000</td>
<td>$ 30,000</td>
</tr>
<tr>
<td>Operating Cost</td>
<td>To include supplies, communication, and travel for the coordinator. In addition, to include travel costs for directors and WET coordinators to attend 3 centralized meetings for planning and coordination of strategies as well as coordination with educational institutions</td>
<td>$ 700,000</td>
<td>$719,739</td>
</tr>
<tr>
<td>Hybrid MSW Program Development</td>
<td>$50,000</td>
<td>$ 34,000</td>
<td>$ 50,000</td>
</tr>
<tr>
<td>Online CASRA Program at MJC</td>
<td>$50,000</td>
<td>$ 76,000</td>
<td>$ 209,739</td>
</tr>
<tr>
<td>Roving Clinical Supervisors</td>
<td>$200,000</td>
<td>$ 40,000</td>
<td>$ 205,000</td>
</tr>
<tr>
<td>Collaboration with CalMHSA</td>
<td>$100,000</td>
<td>$ 0</td>
<td>$ 40,000</td>
</tr>
<tr>
<td>MHFA Trainings for Instructors/manuals</td>
<td>$200,000</td>
<td>$ 0</td>
<td>$ 205,000</td>
</tr>
<tr>
<td>Online QPR Training</td>
<td>$4000</td>
<td>$ 0</td>
<td>$ 0</td>
</tr>
<tr>
<td>Peer Training</td>
<td>$10,000</td>
<td>$ 20,000</td>
<td>$ 20,000</td>
</tr>
<tr>
<td>Co-Occurring Disorders Training</td>
<td>$10,000</td>
<td>$ 15,000</td>
<td>$ 15,000</td>
</tr>
<tr>
<td>UC Davis Leadership Program Training</td>
<td>$50,000</td>
<td>$ 60,000</td>
<td>$ 60,000</td>
</tr>
<tr>
<td>Interpreter Training for Trainers</td>
<td>$5,000</td>
<td>$ 0</td>
<td>$ 0</td>
</tr>
<tr>
<td>Training and TA for Cultural Comp Plans</td>
<td>$10,000</td>
<td>$ 0</td>
<td>$ 0</td>
</tr>
<tr>
<td>Using Data in Public Mental Health Training</td>
<td>$5,000</td>
<td>$ 0</td>
<td>$ 0</td>
</tr>
<tr>
<td>Administrative Overhead</td>
<td>15.0% administrative charge</td>
<td>$ 157,500</td>
<td>$125,960</td>
</tr>
<tr>
<td>Placer Admin</td>
<td>Placer Admin 5%</td>
<td>$ 52,500</td>
<td>$41,987</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>$1,050,000</td>
<td>$1,007,686</td>
</tr>
</tbody>
</table>
All information in this Work Plan is true and correct to the best of my knowledge.

Gina Ehlert, M. Ed.
Regional Partnership Coordinator

Signature

August 15, 2016
Date