

MHSA WET Five-Year Plan: Summarizing County-Reported Mental Health Workforce Needs

December 2013



Office of Statewide Health
Planning & Development

Prepared by: Resource Development Associates

Funded by Proposition 63- The Mental Health Services Act via contract with OSHPD





Acknowledgements

We wish to express our appreciation to all organizations and individuals who contributed to the creation of the OSHPD MHSA WET county-reported mental health workforce needs assessment. In particular, thank you to the OSHPD MHSA WET Five-Year Plan team: Lupe Alonzo-Diaz, Linda Onstad-Adkins, Michael Wimberly, Inna Tysoe, Sergio Aguilar, and Elvira Chairez.



Table of Contents

Acknowledgements 2
Table of Contents 3
List of Tables 6
List of Figures 7
Background of MHSA WET Program & Five-Year Plan 10
MHSA Regions & County Sizes 11
MHSA Regions 11
County Sizes 11
Data Sources & Methodology 12
California Institute for Mental Health Statewide Technical Assistance Center – Working Well Together 15
Methodology 15
California Institute for Mental Health – Other Programs 15
Methodology 15
OSHPD-Led Community Forums 15
Limitations 16
Integrated Postsecondary Education Data System 16
Limitations 16
Methodology 17
Client & Service Information 17
Limitations 18
Methodology 18
California Department of Health Care Services – Research and Analytic Studies Branch 18
Limitations 18
Methodology 19
Other Data Sources 19
Datasets to Be Obtained 19
Department of Consumer Affairs & Licensure Boards 19
OSHPD Healthcare Workforce Clearinghouse 19
California Postsecondary Education Commission 20
Client & Service Information 20
Tools to Be Administered by RDA 20
RDA’s Online Survey of County Mental Health Departments & Key Contractors 20
Educational Information Survey 20
Profile of Public Mental Health Users 21
Overall Trends 22
Trends by Race/Ethnicity 24
Trends by Age 27
Trends by Gender 29
Threshold Languages by Region 30



Workforce Needs.....	31
Workforce Shortages	31
Overall Trends	31
Trends by Region.....	34
Workforce Shortage Trends by Size.....	39
Hard-to-Fill, Hard-to-Retain Positions.....	45
Overall Trends	45
Trends by Region.....	46
Trends by County Size.....	50
Declining Needs or Needs Met	54
Trends by Region.....	56
Trends by Size.....	60
Diversity Needs	61
Sources and Limitations.....	61
Summary of Needs	62
Diversity Needs by Region.....	66
Language Needs.....	73
Sources & Limitations	73
Trends by Region.....	75
Trends by Size.....	80
Positions for Consumer and/or Family Members.....	82
Sources and Limitations.....	82
Projected Workforce Availability	85
Overall Trends	87
Trends of Educational Institutions	87
Trends of Degree/Certificate Programs.....	94
Trends of Graduates	103
Trends of Graduates by Mental Health Program Type.....	111
Trends of Psychology Graduates	111
Trends of Nursing Graduates.....	114
Trends of Social Work Graduates	117
Trends of Substance Abuse/Addiction Counseling Graduates	120
Trends of Marriage and Family Therapy Graduates	123
Trends of Physician Assistant Graduates.....	126
Workforce Availability Summary.....	128
Participation in Statewide WET Programs	129
Sources and Limitations.....	129
Stipend Programs.....	130
Physician Assistants Residency Program.....	132
Psychiatric Residency Program Use.....	135
Working Well Together (WWT) Participation	137
Qualitative Feedback	139
Mental Health Loan Assumption Program Participation	139



Qualitative Feedback141

Additional Recommendations for Statewide WET Programs..... 142

Synthesis of Findings 142

User Populations of the Public Mental Health System142

Public Mental Health Workforce Needs and Education/Training Programs.....143

Statewide WET Programs145

Appendices 147

Appendix 1: OSHPD’s 2013 County-Reported Workforce Needs Assessment Form ...147

Appendix 2: Counties, Regions, Sizes, and Available Data154

Appendix 3: Occupational Categorizations157

Appendix 4: Training Programs159

Appendix 5: Classification of Instructional Programs (CIP) Codes Pertinent to Mental Health-Related Occupations.....165

Appendix 6: Categories of Educational Programs.....167

Appendix 7: Distribution of California’s Public Mental Health System Users.....168

Appendix 8: Postsecondary Educational Institutions with Mental Health-Related Programs170



List of Tables

Table 1: MHPA Regions by County Size.....12

Table 2: Counts of California Public Mental Health System Users by MHPA Region and Race/Ethnicity.....25

Table 3: Counts of California Public Mental Health System Users by County Size and Race/Ethnicity.....26

Table 4: Threshold Languages by MHPA Region.....31

Table 5: Counties, Regions, Sizes, and Available Data.....154

Table 6: Professions Categorizations.....157

Table 7: OSHPD-Designated Languages.....158

Table 8: OSHPD-Designated Diversity Categories.....158

Table 9: CIP Codes of Mental Health-Related Programs165

Table 10: Grouped Categories of Educational Programs167

Table 11: Counts of California Public Mental Health System Users by MHPA Region and Race/Ethnicity.....168

Table 12: Counts of California Public Mental Health System Users by County Size and Race/Ethnicity.....168

Table 13: Counts of California Public Mental Health System Users by MHPA Region and Age Group.....168

Table 14: Counts of California Public Mental Health System Users by County Size and Age Group.....169

Table 15: Counts of California Public Mental Health System Users by MHPA Region and Gender.....169

Table 16: Counts of California Public Mental Health System Users by County Size and Gender.....169

Table 17: Educational Institutions with Mental Health-Related Programs.....170

Table 18: Educational Institutions with Psychology Programs.....183

Table 19: Educational Institutions with Social Work Programs187

Table 20: Educational Institutions with Physician Assistant Programs.....189

Table 21: Educational Institutions with Substance Use Counseling Programs190

Table 22: Educational Institutions with Marriage & Family Therapy Programs193

Table 23: Educational Institutions with Nursing Programs.....195



List of Figures

Figure 1: California MHSA Regions..... 11

Figure 2: California County Sizes Distribution (n=59) 12

Figure 3: Percentage of Total Users by MHSA Region (n=703,931) 22

Figure 4: Percentage of Total Users by County Size (n=703,931)..... 23

Figure 5: Total Percentage of Users by Race/Ethnicity (n=703,931) 24

Figure 6: Total Percentage of Users by Race/Ethnicity and MHSA Region (n=703,931) 25

Figure 7: Total Percentage of Users by Race/Ethnicity and County Size (n=703,931) 26

Figure 8: Total Percentage of Users by Age (n=703,931)..... 27

Figure 9: Total Percentage of Users by Age and MHSA Region (n=703,931) 28

Figure 10: Total Percentage of Users by Age and County Size (n=703,931)..... 28

Figure 11: Total Percentage of Users by Gender (n=703,931) 29

Figure 12: Total Percentage of Users by Gender by MHSA Region (n=703,931) 29

Figure 13: Total Percentage of Users by Gender, per County Size (n=703,931) 30

Figure 14: Statewide Trends in Workforce Shortages (n=295) 33

Figure 15: Bay Area Region Workforce Shortages (n=60)..... 34

Figure 16: MHSA Central Region Workforce Shortages (n=98)..... 36

Figure 17: Southern Region Workforce Shortages (n=46)..... 37

Figure 18: Superior Region Workforce Shortages (n=47)..... 38

Figure 19: Overall Workforce Shortages by County Size..... 40

Figure 20: Small Counties Workforce Shortages (n=101)..... 42

Figure 21: Medium Counties Workforce Shortages (n=98)..... 43

Figure 22: Large Counties Workforce Shortages (n=105) 44

Figure 23: Overall Hard-to-Fill, Hard-to-Retain Positions (n=197) 45

Figure 24: MHSA Bay Area Region Hard-to-Fill, Hard-to-Retain Positions (n=37)..... 46

Figure 25: MHSA Central Region Hard-to-Fill, Hard-to-Retain Positions (n=70)..... 47

Figure 26: MHSA Southern Region Hard-to-Fill, Hard-to-Retain Positions (n=40)..... 48

Figure 27: MHSA Superior Region Hard-to-Fill, Hard-to-Retain Positions (n=21) 49

Figure 28: Overall Hard-to-Fill, Hard-to-Retain Positions by County Size (n=197)..... 50

Figure 29: Small Counties Hard-to-Fill, Hard-to-Retain Positions (n=67)..... 51

Figure 30: Medium Counties Hard-to-Fill, Hard-to-Retain Positions (n=72) 52

Figure 31: Large Counties Hard-to-Fill, Hard-to-Retain Positions (n=81)..... 53

Figure 32: Overall Declining Needs or Needs Met (n=205) 55

Figure 33: Bay Area Region Declining Workforce Needs/Needs Met Overall (n=36)..... 56

Figure 34: Central Region Declining Needs/Needs Met Overall (n=81) 57

Figure 35: Central Region Declining Needs/Needs Met (n=19) 58

Figure 36: MHSA Southern Region Declining Needs/Needs Met Overall (n=19)..... 58

Figure 37: MHSA Southern Region Declining Needs/Needs Met (n=11) 59

Figure 38: Superior Region Declining Needs/Needs Met, Overall (n=34) 60

Figure 39: Overall Reported Declining Needs by County Size (n=30) 61

Figure 40: Summary of Overall Diversity Needs (n=205)..... 62

Figure 41: Composition of Race/Ethnicity Diversity Needs (n=71)..... 63



Figure 42: Gender Composition of Diversity Needs (n=19)64

Figure 43: Overall Physical/Mental Ability Needs (n=13)64

Figure 44: Age Composition of Diversity Needs (n=17).....65

Figure 45: Bay Area Region Diversity Needs (n=69)66

Figure 46: Bay Area Region Race/Ethnicity Needs (n=16)67

Figure 47: MHSA Central Region Overall Diversity Needs (n=87)67

Figure 48: Central Region Race/Ethnicity Needs (n=21)68

Figure 49: Central Region Age Needs (n=12)69

Figure 50: Southern Region Overall Diversity Needs69

Figure 51: Southern Region Race/Ethnicity Needs (n=14)71

Figure 52: Superior Region Overall Diversity Needs (n=24)71

Figure 53: MHSA Superior Region Race/Ethnicity Needs (n=12)72

Figure 54: Overall Language Needs (n=171)74

Figure 55: Overall Language Needs by MHSA Region (n=171)75

Figure 56: Bay Area Region Language Needs (n=39).....76

Figure 57: Central Region Language Needs (n=44)77

Figure 58: Southern Region Language Needs (n=23)78

Figure 59: MHSA Superior Region Language Needs (n=14)79

Figure 60: Language Needs of Small Counties (n=40).....80

Figure 61: Language Needs of Medium Counties (n=41)81

Figure 62: Language Needs of Large Counties (n=64).....81

Figure 63: Role Type of Consumer and/or Family Member Positions (n=240).....83

Figure 64: Consumer and/or Family Member Positions by Employment Type (n=205)84

Figure 65: Designation Status of Consumer and/or Family Positions (n=92)85

Figure 66: Educational Institutions Statewide87

Figure 67: Educational Institutions by County88

Figure 68: Educational Institutions by MHSA Region89

Figure 69: Bay Area Region Educational Institutions.....90

Figure 70: Central Region Educational Institutions.....91

Figure 71: Los Angeles Educational Institutions.....92

Figure 72: Southern Region Educational Institutions.....93

Figure 73: Superior Region Educational Institutions.....94

Figure 74: Number of Programs Statewide95

Figure 75: Degree/Certificate Programs by County96

Figure 76: Degree/Certificate Programs by MHSA Region.....97

Figure 77: Bay Area Educational Programs98

Figure 78: Central Region Educational Programs99

Figure 79: Los Angeles Educational Programs.....100

Figure 80: Southern Region Educational Programs101

Figure 81: Superior Region Educational Programs102

Figure 82: Number of Graduates by County.....103

Figure 83: Number of Graduates by MHSA Region.....104

Figure 84: Number of Graduates Statewide105



Figure 85: Bay Area Region Graduates106

Figure 86: Central Region Graduates.....107

Figure 87: Los Angeles Graduates.....108

Figure 88: Southern Region Graduates.....109

Figure 89: Superior Region Graduates.....110

Figure 90: Psychology Graduates by County111

Figure 91: Psychology Graduates by MSHA Region112

Figure 92: Psychology Graduates Statewide.....113

Figure 93: Nursing Graduates by County114

Figure 94: Nursing Graduates by MSHA Region115

Figure 95: Nursing Graduates Statewide.....116

Figure 96: Social Work Graduates by County117

Figure 97: Social Work Graduates by MHSA Region118

Figure 98: Social Work Graduates Statewide119

Figure 99: Substance Abuse/Addiction Counseling Graduates by County.....120

Figure 100: Substance Abuse/Addiction Counseling Graduates by MHSA Region121

Figure 101: Substance Abuse/Addiction Counseling Graduates Statewide122

Figure 102: Marriage and Family Therapy Graduates by County123

Figure 103: Marriage and Family Therapy Graduates by MHSA Region124

Figure 104: MFT Graduates Statewide125

Figure 105: Physician Assistant Graduates by County126

Figure 106: Physician Assistant Graduates by MHSA Region.....127

Figure 107: Physician Assistant Graduates Statewide128

Figure 108: Participation in Statewide WET Programs by County Size130

Figure 109: Overall Stipend Program Participation (n=41)131

Figure 110: Stipend Program Participation by MHSA Region.....131

Figure 111: Stipend Program Participation by County Size132

Figure 112: Physician Assistant Residency Program Overall Participation (n=41).....133

Figure 113: Participation in Physician Assistant Residency Program by MHSA Region (n=5).133

Figure 114: Physician Assistant Residency Program Participation Rate by County Size (n=5)134

Figure 115: Overall Psychiatric Residency Program Participation (n=41).....135

Figure 116: Psychiatric Residency Participation Rate by MHSA Region (n=8)136

Figure 117: Psychiatric Residency Participation Rate by County Size (n=8)136

Figure 118: Overall Use of Working Well Together Programs (n=41).....137

Figure 119: Working Well Together Participation Rate by MHSA Region (n=13).....138

Figure 120: Working Well Together Participation Rate by County Size (n=13)139

Figure 121: Overall MHLAP Participation (n=41).....140

Figure 122: MHLAP Participation Rates, by MHSA Region (n=10).....140

Figure 123: MHLAP Participation Rates, by County Size (n=10)141



Background of MHSA WET Program & Five-Year Plan

The Mental Health Services Act (Proposition 63) was passed by voters in 2004 to transform the public mental health system and to expand service delivery to better meet the diverse and changing needs of California residents in a more compassionate, culturally competent manner. To achieve this, MHSA included a Workforce Education and Training (WET) component. WET was established to create a core of professionals that would support a transformation of the public mental health system into a more integrated, accessible, and recovery-oriented system of care. Historically, California has suffered from a lack of funding, limited training and graduate education programs, an under-representation of ethnic and cultural groups in public mental health careers, as well as a systemic stigmatism against individuals with mental health challenges that greatly inhibits their ability to obtain training and employment in the mental health field. Through WET funding, great strides have been made in implementing programs that support the training, recruitment, hiring, and retention of public mental health workers.

The transfer of MHSA funding oversight to OSHPD coincided with the completion of the first five-year WET funding cycle (April 2008 to April 2013).¹ The California Department of Mental Health assembled the initial MHSA Five-Year WET Development Plan (2008-2013) after the collection of two tools from county mental health programs: (1) the 2008 Workforce Needs Assessment, which identifies each county's shortages across occupational categories; and (2) the Community Services and Supports component of county mental health programs' Three-Year Program and Expenditure Plans, which describes potential new MHSA workforce positions, stated needs and challenges, and cultural diversity and language proficiency issues.

The development of the new WET five-year plan (2014-2019) provides the opportunity to refine the vision, values, and goals that guide the distribution of funds based on lessons to date. OSHPD has already begun a robust stakeholder engagement process to gather feedback from mental health experts, current local mental health workers, consumers and their family members, and other stakeholders on the unique workforce challenges faced by localities across California. Initial data presented by the WET Career Pathways Sub-Committee indicates that a significant shortage of mental health workers still plagues the State. To strategically deploy funds and create sustainable training and education pathways, a greater understanding of how the distribution of mental health workers across the state aligns with the current and projected prevalence rates and service of individuals living with Serious Mental Illness (SMI) and Serious Emotional Disturbance (SED) is necessary. An assessment of the WET component will also contextualize the data within the larger framework of changing legislation, the impacts of the Affordable Care Act, Medi-Cal billing practices, and other relevant factors.

¹ <http://www.oshpd.ca.gov/LawsRegs/MHSAWET.html>

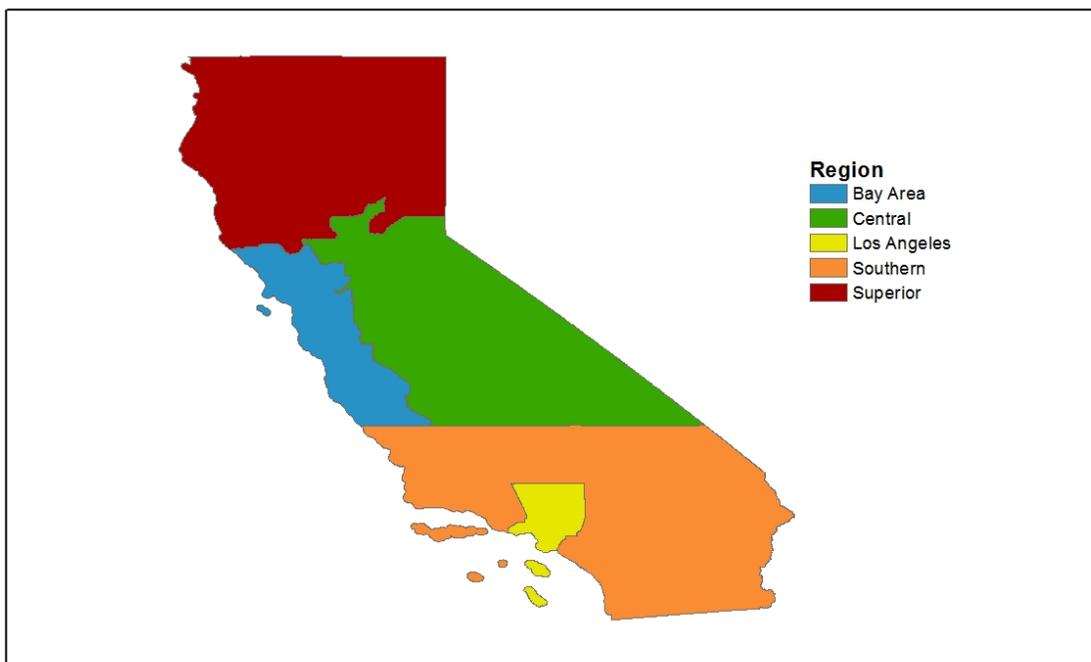
MHSA Regions & County Sizes

This report will present the data through three different analytical cross-sections: (1) across all counties in California as an aggregate; (2) by MHSA Region; and (3) in cohorts based on county size.

MHSA Regions

The MHSA program divides California’s counties into five regions: Bay Area, Central, Los Angeles, Southern, and Superior. The MHSA Los Angeles Region includes only Los Angeles County. Below is a figure showing the geographic distribution and boundaries of the five MHSA Regions.

Figure 1: California MHSA Regions



County Sizes

This report will also present an analysis of cohorts based on county size; these cohorts are determined by 2010 total population for each county: large counties are those with >800,000 persons; medium counties have 200,000-800,000 residents; and small counties are those with <200,000 persons. In 2010, one-half of California’s counties had populations under 200,000 persons.

Figure 2: California County Sizes Distribution (n=59)

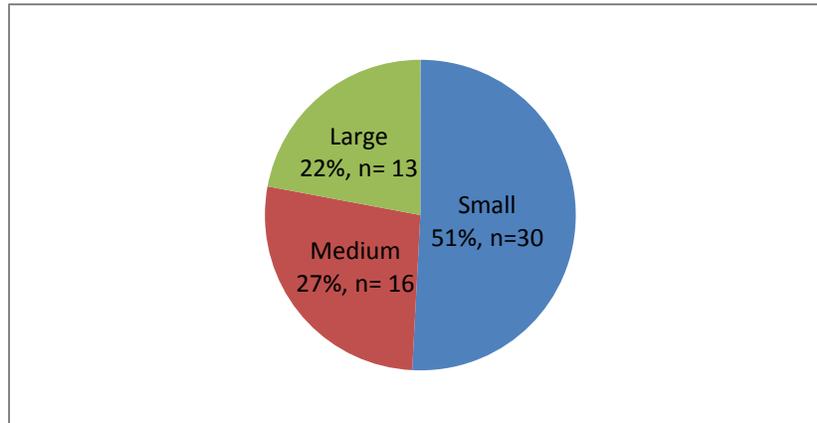


Table 1: MHSA Regions by County Size.

MHSA Region	Small	n	Medium	n	Large	N
Bay Area	40%	3	33%	6	27%	9
Central	60%	11	33%	6	7%	2
Los Angeles	--	--	--	--	100%	1
Southern	25%	1	31%	3	44%	6
Superior	92%	15	8%	1	--	--
Grand Total	51%	30	27%	16	22%	13

The table above shows the distribution of county sizes across each MHSA Region. Both MHSA Central and Superior Regions are predominantly comprised of small counties. Both MHSA Bay Area and Southern Regions have more equal quantities of each-sized counties. The MHSA Los Angeles Region is made up of one very large county with a population of 9.96 million². The last row in the table notes the distribution of county sizes across the state – one-half of California’s counties are small, and the remaining are split between medium and large counties.

Data Sources & Methodology

This needs assessment report includes findings from the research and syntheses of information from various data sources. California’s public mental health workforce is extremely diverse in occupational designations, professional competencies, and geographic locations. Analyses of data from various sources allow for the identification of the current workforce make-up and highlight the points of improvement moving forward. The following data sources were examined in preparation for this report.

- MHSA County-Reported Needs Workforce Assessment
- MHSA County Annual Updates
- Statewide Technical Assistance Center – Working Well Together

² <http://quickfacts.census.gov/qfd/states/06/0644000.html>



- California Institute for Mental Health Data
- OSHPD-Led Community Forums
- Integrated Postsecondary Education Data System
- Client & Service Information
- California Department of Health Care Services – Research and Analytic Studies Branch

MHSA County-Reported Needs Workforce Assessment

In mid-2013, the OSHPD WET program asked the California counties' MHSA program staff to complete their own County-Reported Needs Workforce Assessment. This report provides a summary of the workforce needs as identified in all of the County-Reported Needs Workforce Assessments, including workforce shortages by occupational category, workforce demands that have been met and/or declined, hard-to-fill and hard-to-retain positions, diversity needs, language needs, and current opportunities for Consumer and/or Family Members in the workforce. The County-Reported Needs Assessments provides county-level participation data in the five statewide WET programs: Stipends, Mental Health Loan Assumption Program, Song-Brown Physician Assistant Residency Program, the Psychiatric Residency Program, and Working Well Together. As with the workforce analysis, RDA analyzed each set of data (1) at the state level as a whole; (2) by MHSA Region; and in addition, by county size cohort based on the 2012 Census Bureau population sizes and MHSA designated size thresholds.³ See Appendix 2 for a complete list of counties by region and by county size.

Limitations

A primary limitation of this data source is that only 41 of the 59 California counties and municipalities submitted the Workforce Needs Assessment. Secondly, among those that did submit the Assessment, reporting styles differed in thoroughness and consistency. As such, RDA undertook a number of measures to synthesize county responses while retaining as much of the diversity in responses as possible. Third, counties reported their workforce needs in the Assessment, but did not provide descriptions of their current workforce.

Methodology

County-Reported Needs Assessment responses were transcribed from individual reports into a single spreadsheet, capturing virtually all of the responses. The methods for analyzing the data are discussed in this section and briefly re-introduced in the relevant sections where the data is used.

OSHPD Occupational Categories

Several of the questions in the Needs Assessment asked county respondents to utilize a list of OSHPD designated occupational categories (see Appendix 3 for the complete list). However, counties frequently diverged from the list. For example, when asked to provide a list of the

³ http://www.mhsoac.ca.gov/Evaluations/docs/Eval_PriorityIndicators_SmallCountiesList.pdf
<http://quickfacts.census.gov/qfd/index.html>



county's top seven workforce shortages in order of highest need, counties often listed multiple positions in one rank. In this example, if a county wrote next to Highest Need 1, "Child Psychiatrist, Geriatric Psychiatrist, and Licensed Clinical Social Worker," all three of these positions were classified as a first highest need, and thus the total response count exceeds 41 (the number of Needs Assessments returned to OSHPD).

A second frequent issue was that while the OSHPD list of occupational categories was extensive, counties often used variations of the occupational categories that were slightly ambiguous. For example, OSHPD provided two nurse designations: (1) Clinical Nurse Specialist, and (2) Psychiatric Mental Health Nurse Practitioner. Counties frequently cited "Registered Nurse," or "Mental Health Nurse," or simply "Nurse." After consulting experts in mental health professions and reviewing previous approaches to these designations, RDA chose to group all "Nurse Practitioner" listings under the Psychiatric Mental Health Nurse Practitioner category; and all other nurse designations (without the specific practitioner capacity) as a new category "Nurse, Other."

Another common aspect of the data was that counties frequently included diversity classifications in responses to occupational categories. For example, in listing a workforce shortage, "Bilingual Psychiatrist" or "Spanish-speaking Psychiatrist" was a common response. RDA created categories for Bilingual and Spanish to track how frequently counties cited these as specific needs.

In some instances, County-reported responses did not appear to answer the listed question, suggesting a misinterpretation. For example, one county listed the same set of five positions for the highest need positions and declining demand positions. In cases such as these, RDA excluded the answers for the analysis of these questions.

MHSA County Annual Updates

The MHSA County Annual Updates are a required component of the MHSA Community Planning Process. Counties' Annual Updates offered significant variability in formatting, content, purpose, and style of presentation. In the past, counties received checklists and suggested guidelines for completing the Annual Updates. In March 2011, AB100 changed the format of the Annual Update by shifting the report formatting responsibilities to the individual counties and no longer provided guidelines for what information needed to be included in the Annual Updates.

Limitations

The absence of clear directions in counties' completion of their Annual Updates introduced ambiguity in the interpretation of the data. For example, if a county did not list the specific WET programs in which it participated, that could be interpreted as the county not partaking in any WET programs.



Methodology

As a result of variation in completing the Annual Updates, these documents could not be relied upon as a consistent source of data regarding workforce needs.

California Institute for Mental Health Statewide Technical Assistance Center – Working Well Together

California's Working Well Together Technical Assistance Center (WWT), administered by the the California Institute for Mental Health (CIMH), supports the vision of MHSA, particularly in the training and support of sustained development of client, family member and parent/caregiver employment within every level of the public mental health workforce. WWT provides training and technical assistance for consumers and family members to enter or continue in the mental health workforce, as well as training and technical assistance for Counties and Systems in how to incorporate more consumer and family member positions into their organizations. WWT provides a centralized set of resources about client and family member involvement. Additionally, WWT provides information on the current MHSA-related trainings, technical assistance, and support available to the counties.

Methodology

RDA examined the Learning, Trainings, and Tools sections of CIMH's Working Well Together website, and catalogued the available trainings and technical assistance by subject and type.

California Institute for Mental Health – Other Programs

CIMH also offers e-learning platforms specifically targeted to WET program staff and Consumer and/or Family Members. For staff, these courses can contribute to the Continuing Education Credits required to maintain licensure status.

See Appendix 4 for a list of CIMH's WWT and other training programs.

Methodology

The available e-learning courses, webinars, and presentations have been catalogued to provide a more extensive list of available training and technical assistance available to the state's mental health workforce.

OSHPD-Led Community Forums

Throughout January-July 2013, OSHPD led a series of focus groups and surveys engaging over 600 stakeholders across the state. OSHPD closely catalogued feedback from those focus groups, categorized by county and type of stakeholder, and identified the most important trends discussed by their stakeholders.



Limitations

OSHPD-led Community Forums were held in 14 of California's 58 counties. The data from the OSHPD Community Forums will be discussed in an upcoming deliverable.

Integrated Postsecondary Education Data System

The Integrated Postsecondary Education Data System (IPEDS) is a source for data on colleges, universities, and technical and vocational postsecondary institutions in the United States that participate in the federal student financial aid programs.⁴ IPEDS is a system of interrelated surveys conducted by the U.S. Department's National Center for Education Statistics. The most recently available IPEDS data is from 2012.⁵ In this report, IPEDS data is used to catalog all of the mental health-related degrees and certificates conferred by all of California's postsecondary institutions.⁶

Limitations

While IPEDS data provides information regarding graduation rates, four limitations affect the use of this data to develop a complete understanding of the education system and its impact on the public mental health workforce. First, IPEDS data does not include current enrollment rates or program capacities at postsecondary institutions. Current enrollment and program capacity data will be collected directly from the California institutions conferring degrees or certificates that are pertinent to the provision of public mental health services. Findings from this data collection effort will be summarized for OSHPD planning purposes and will be presented as part of Deliverable #4 (Final Document Summarizing County-Reported Mental Health Assessments).

Second, entry of service providers into the public mental health workforce cannot be determined by the IPEDS data, as it does not contain the types and locations of organizations where graduates are employed after attaining their degree or certificate.

Third, IPEDS data does not designate the sub-specialties of "Medicine" pursued by graduates. Psychiatry is a medicine sub-specialty that is of high importance in the field of mental health; however, the IPEDS data does not specify Doctor of Medicine (MD) or Doctor of Osteopathy (DO) graduates in psychiatry. Rather, psychiatry graduates are only noted if their educational institutions report their participation in psychiatry residencies. In the 2012 IPEDS data used for this report, no graduates of the various psychiatry programs were reported; therefore, psychiatry as an educational program will not be discussed in this report.

Finally, only those institutions that participate in the federal student financial aid programs report data to IPEDS. Therefore, the graduation data presented in this report does not include all graduations throughout the state.

⁴ Integrated Postsecondary Education Data System: <http://nces.ed.gov/ipeds/>

⁵ <http://nces.ed.gov/ipeds/datacenter/DataFiles.aspx>

⁶ http://nces.ed.gov/ipeds/datacenter/data/C2012_A.zip



Methodology

The IPEDS source dataset included graduation information for all reporting postsecondary institutions across the United States. From the California educational institutions, RDA selected degrees and certificate programs that are pertinent to the provision of public mental health services. IPEDS data uses Classification of Instructional Programs (CIP) codes to provide the taxonomic scheme for tracking and reporting fields of study and program completion. See Appendix 5 for a list of all CIP codes used in this report.

From this set, RDA selected graduates with conferred degrees or certificates related to the provision of mental health services. Most degree or certificate recipients were students with more than an Associate's or Bachelor's degree, such as a Masters in Social Work or Doctorate in Clinical Psychology. Of the students who received an Associate's/Bachelor's degree or lower and were included in these analyses, their programs were in one of the following disciplines: substance abuse/addiction counseling, psychiatric/mental health services technician, or nursing (Associate's/Bachelor's-level degree).

After the selection of the above-mentioned criteria, RDA produced the total counts of each type of degree/certificate conferred in California in 2012, stratified by the California county in which the conferring institution is located, and stratified by the California MHSA region in which the conferring institution is located.

Client & Service Information

Demographic information about the public mental health system user population is important in understanding the diversity of client needs across the state. The Client & Service Information (CSI) reporting system collects client-level service utilization data about California's county mental health programs. Data is reported monthly to California's Department of Health Care Services (DHCS), the department that houses the CSI reporting system, by county mental health programs. For this report, RDA was not able to obtain raw CSI data for analysis. RDA is in the process of requesting multiple years of CSI data from DHCS, which will be included in its Deliverable #4: Final Document Summarizing County-Reported Assessments.

In the interim, RDA reviewed the county-level reports that the California Mental Health Services Oversight & Accountability Commission (MHSOAC) published from their previous work with the UCLA Center for Healthier Children, Youth and Families – Evaluation, Management, Training.⁷ The UCLA-EMT Evaluation Team conducted analyses of FY2008/2009 and FY2009/2010 CSI data, as well as analyses with other data sources, and produced county-level reports assessing MHSA's impact on mental health service consumers and the community mental health system. Reports were produced for each California county with a population over 200,000 persons; all remaining "small" counties were grouped together and results were compiled into one report. For this report, the pertinent CSI client demographic variables are: race/ethnicity, age, gender, and primary spoken language.

⁷ <http://www.mhsoac.ca.gov/Evaluations/CSS-Outcomes.aspx>



Limitations

Without the capability of analyzing CSI data directly, RDA's reliance on the UCLA-EMT Team's reports as secondary data sources limits the quality and breadth of information that can be extracted. Three limitations are of note: (1) The UCLA-EMT Team only provided public mental health user demographics information by race/ethnicity, age groups, and gender. Data on the primary spoken languages of clients, another important demographic variable when examining the public mental health client population, was not presented. (2) Only data from FY2008/2009 and FY2009/2010 was presented. More current data is preferred and necessary in order to provide more accurate information in this report. (3) The UCLA-EMT Team presented data in the form of charts with percentages and counts noted. This presentation does not allow for additional data manipulations and cross-tabulations.

Methodology

From the reports generated by the UCLA-EMT Team, RDA recorded all of the counts and percentages for each demographic variable presented on (race/ethnicity, age groups, gender), for each county and all small counties combined. This data was found under the header of "Priority Indicator 5: Demographic Profile of Consumers Served" in all of the reports. From this catalog, RDA is able to view the demographic data by MHSA Region and county size.

California Department of Health Care Services – Research and Analytic Studies Branch

RDA used the California Department of Health Care Services (DHCS) Research and Analytic Studies Branch's (RASB) designations of "Threshold Languages" to identify the language priorities for each county because clients' spoken language information was not available in the UCLA-EMT Team's reports.⁸ Threshold languages are those non-English languages that are spoken at a high proportional rate within geographic regions of the state and should be prioritized when delivering mental health services to populations in those regions. It is important to understand the predominant language needs in each county in order to plan for a culturally relevant workforce with appropriate language capacity reflective of the populations being served.

Limitations

RDA used the most recent DHCS RASB threshold language designations released in 2011.

8

http://www.dhcs.ca.gov/dataandstats/statistics/Documents/RASB_Issue_Brief_Annual_Threshold_Language_Report.pdf



Methodology

The threshold languages for each California county were noted by RDA. The threshold languages identified across each MHSA Region were then compiled and rank-ordered by region according to the number of counties identifying the threshold language in that region.

Other Data Sources

Datasets to Be Obtained

This report is intended as an initial analysis of CA mental health workforce needs to guide additional planning and evaluation. Various data sources were not available in time for analysis as part of this report. RDA will continue to work with the appropriate organizations and personnel to obtain these data sources, and will present findings from these analyses in the subsequent report. Data requests still in process include the following sources:

- Department of Consumer Affairs & Licensure Boards
- OSHPD Healthcare Workforce Clearinghouse
- California Postsecondary Education Commission
- Client & Service Information

Department of Consumer Affairs & Licensure Boards

California's Department of Consumer Affairs (DCA) oversees various licensure boards for mental health occupations, including many occupations engaged in the provision of public mental health services. For example, the Board of Behavioral Services oversees the licensure of licensed clinical social workers and marriage and family therapists, amongst other behavioral health occupations, across the state. OSHPD is currently assisting RDA with the release of this data from DCA. With information from pertinent licensure boards, this data will lead to a summary of the number of licensed mental health workers in California, by license type and occupational category. Particularly, this data highlights the current licensed mental health workforce at the state, region, and County levels by license type. Additionally, maps that visually represent the licensed mental health workforce by license type for each MHSA region and county can be produced.

OSHPD Healthcare Workforce Clearinghouse

The OSHPD Healthcare Workforce Clearinghouse distributes information on the educational and employment trends for healthcare occupations in the state. Information from the Healthcare Workforce Clearinghouse will supplement data from the Department of Consumer Affairs and various occupational licensure boards on current and projected public mental health workforce availabilities. OSHPD WET program staff is facilitating the release of this data.



California Postsecondary Education Commission

The California Postsecondary Education Commission (CPEC) has aggregated and longitudinal data from postsecondary institutions in California that would provide information regarding enrollment rates, graduation rates, and program capacities across the state. Unfortunately, CPEC was closed in 2011. The most recent set of CPEC data is from 2007. OSHPD is currently assisting RDA with the release of CPEC's 2007 dataset to RDA. While not recent, this data will help to provide a foundation for further analyses of the training available to public mental health professionals, as well as provide reference points in the projection of future enrollment rates, graduation rates, and program capacities.

Client & Service Information

As previously noted, the Client & Service Information (CSI) reporting system collects client-level service utilization data about California's county mental health programs. For this report, RDA was not able to obtain CSI data, so it conducted a secondary data review of the UCLA-EMT Team's analyses of FY2009/2010 CSI data. RDA is in the process of requesting multiple years of CSI data from DHCS.

Tools to Be Administered by RDA

RDA's Online Survey of County Mental Health Departments & Key Contractors

In order to further understand the hard-to-fill and hard-to-retain positions, RDA will conduct an online survey of county mental health departments and key contractors to document the factors that influence hard-to-fill and hard-to-retain positions, reasons people leave positions, and how vacancies are addressed. Sample survey questions may include:

- Where do people go when they leave employment at your agency?
- How do you manage staff vacancies?
- Why do people report leaving employment at your agency?

The survey results will be reported in Deliverable #4: Final Document Summarizing County-Reported Needs Assessment.

Educational Information Survey

RDA will develop and administer an online survey to all postsecondary educational institutions in California to learn about current enrollment rates, graduation rates, and program capacities to supplement the 2010 IPEDS data used in this report. This survey will help to provide a more accurate depiction of the projected future workforce availability in the state.

This survey will consist of a brief online instrument. RDA will solicit the assistance of the various mental health professional boards in distributing the URL for the online survey to all relevant institutions. This data collection will provide up-to-date information on current enrollment rates, graduation rates, and program capacities.



Profile of Public Mental Health Users

There is a notable variety in users of the California public mental health system based on geographic location, race/ethnicity, age, and gender. A thorough understanding of the diversity of populations and needs across the state will enable OSHPD to foster a public mental health workforce that meets those needs. This section of the report describes the user population of California's public mental health system. This information provides a user profile backdrop that complements the information presented in latter parts of this report regarding the county-identified workforce needs and statewide-WET programs.

Across California, the majority of users of the public mental health system are located in the southern parts of the state (Los Angeles and Southern regions) and in large counties (total populations greater than 800,000). Whites comprise over one third of users; Hispanics/Latinos and Blacks make up nearly two fifths of the user population. In the overall California population, Whites comprise 41% of the population, while Hispanics/Latinos represent 37% and Blacks comprise 6% of the state's population.⁹ The age distribution of users across the state is very consistent, with adults accounting for one half of the user population across all MHSA regions and county sizes. Additionally, the gender distribution is essentially split between females and males throughout the state.

The following figures are produced from data collected in FY2009/2010 by the California Department of Health Care Services' Client & Service Information (CSI) reporting system. Notable points of interpretation are included after each figure.

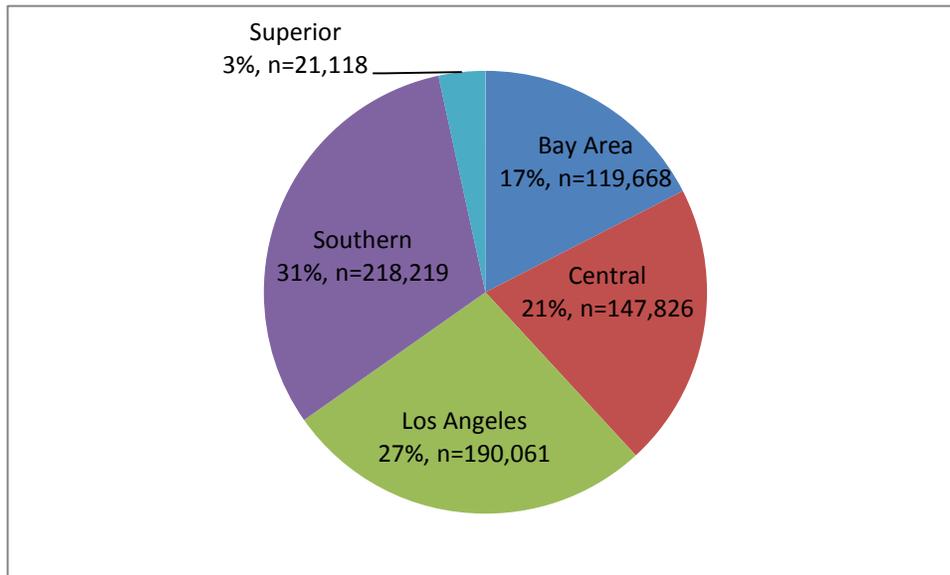
9

http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_09_1YR_DP5&prodType=table

Overall Trends

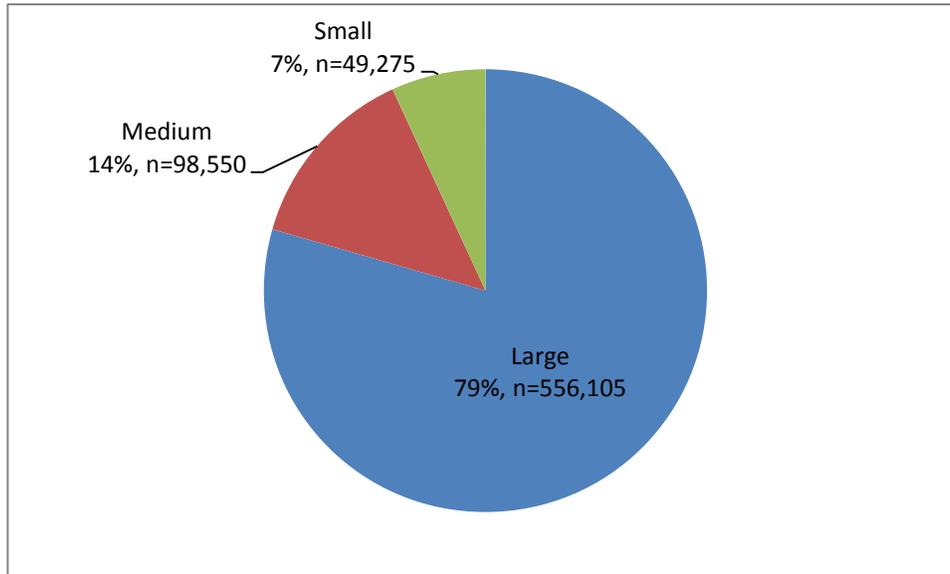
Users of the California public mental health system are located throughout the state. The figures below show the distributions of users by MHPA geographic region and county size cohorts.

Figure 3: Percentage of Total Users by MHPA Region (n=703,931)



Across California, nearly 60% of the public mental health system users were from the southern part of the state, with 31% from the Southern Region (excluding Los Angeles County) and fully 27% from the Los Angeles Region alone. Approximately 20% of users were from the Central Region, followed by 17% from the Bay Area Region. Users from the Superior Region comprised 3% of the total.

Figure 4: Percentage of Total Users by County Size (n=703,931)

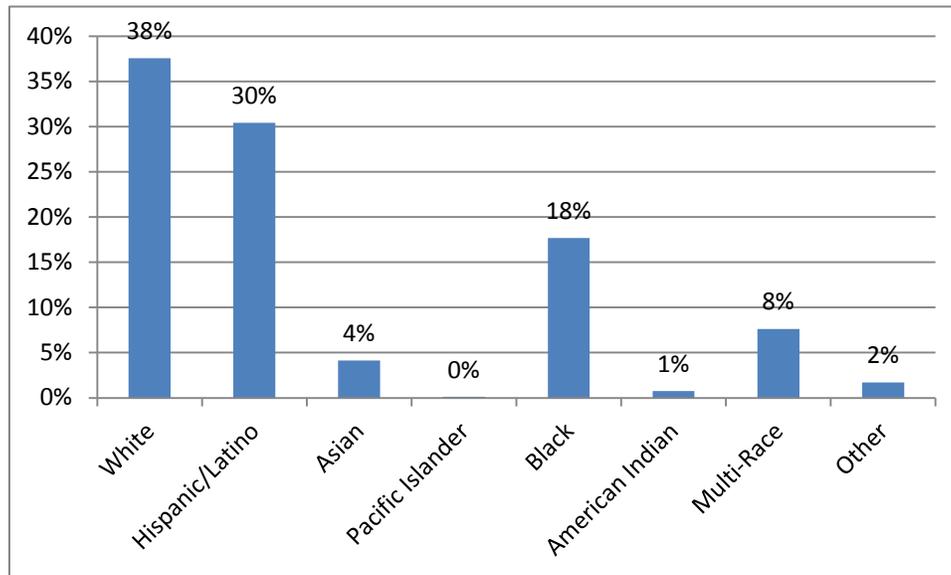


Looking at public mental health system users by county size, nearly 80% (n=559,427) of public mental health system users were from large counties, defined as counties with total populations over 800,000 persons. Fourteen percent of users were from medium-sized counties, and 7% were from small counties.

Trends by Race/Ethnicity

Users of California’s public mental health system are comprised of diverse races/ethnicities. The figures below show the distribution of users by race/ethnicity across MHSA regions and county sizes.

Figure 5: Total Percentage of Users by Race/Ethnicity (n=703,931)



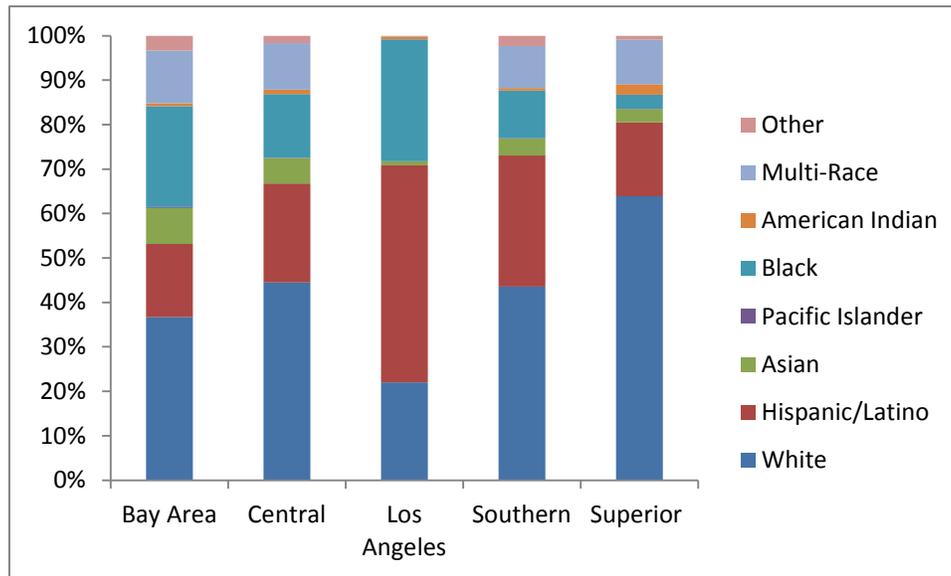
White, Black, and Hispanic/Latino users comprised the largest proportions of public mental health system users. Over one third (38%) of all users identified as White, which closely mirrored the overall White population of California (41%).¹⁰ Hispanic/Latino users comprised the second largest group (30%), which was lower than the overall California Latino population of 37%. Black individuals (18%) comprised the next largest user group, which is considerably larger than the overall population of Blacks in California (6%). Those identifying as multi-racial accounted for 8% of all users, while only 2% of the overall California population was mixed race. Four percent of users were Asian, although Asians comprise 12% of the overall California population. One percent of users were American Indian users, and less than 1% of users were Pacific Islanders. In the overall California population, American Indians and Pacific Islanders each represent less than 1% of the total California population.

See Appendix 7 for the distributional counts of all California public mental health system users in FY2009-2010. These counts are categorized by MHSA Region, county size, race/ethnicity, age group, and gender. The visual representations in the following figures regarding trends by race/ethnicity, age, and gender are produced from the raw counts data in Appendix 7.

¹⁰

http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_09_1YR_DP5&prodType=table

Figure 6: Total Percentage of Users by Race/Ethnicity and MHSA Region (n=703,931)



The table below includes the specific data that is visually represented in the figure above.

Table 2: Counts of California Public Mental Health System Users by MHSA Region and Race/Ethnicity

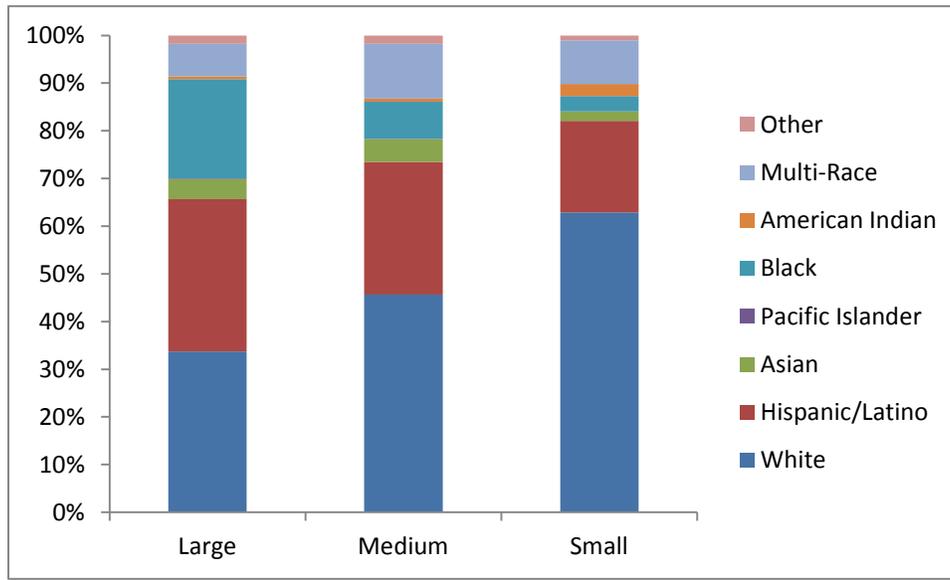
MHSA Region	White	Hispanic/Latino	Asian	Pacific Islander	Black	American Indian	Multi-Race	Other
Bay Area	41,485	18,549	9,167	252	25,665	700	13,417	3,768
Central	57,593	28,845	7,358	156	18,448	1,328	13,574	2,143
Los Angeles	37,719	83,839	1,543	-	47,149	1,029	171	171
Southern	90,520	61,165	7,847	392	22,127	1,203	19,633	4,772
Superior	15,216	3,942	718	24	747	566	2,374	219

The racial and ethnic breakdown of public mental health system users differed by MHSA region, though White, Black, and Hispanic/Latino users still accounted for the largest groups within each region. White users accounted for the greatest proportion of users in all regions except the Los Angeles Region. White users made up over 50% of those served in the Superior Region—the only region with more than half of all users coming from a specific racial or ethnic group. The Los Angeles Region demonstrated a notably lower proportion of White users and a higher proportion of Hispanic/Latino users, who made up over 40% of all users in this region. The highest proportions of Black users were found in the Bay Area and Los Angeles regions, where over 20% of public mental health system users identified as Black. Individuals identifying as Multi-Race accounted for approximately 10% of users in all regions except Los Angeles, which did not show a sizable proportion of mixed-race users. Asian users made up less than 10% of users in all regions, with the highest proportions occurring in the Bay Area and Central regions.



The Superior Region saw the highest proportion of American Indian individuals across all regions, though this population made up a very small proportion of all users. Pacific Islanders also made up a small proportion of users in all regions, with the highest proportions served in the Superior and Southern regions.

Figure 7: Total Percentage of Users by Race/Ethnicity and County Size (n=703,931)



The table below includes the specific data that is visually represented in the figure above.

Table 3: Counts of California Public Mental Health System Users by County Size and Race/Ethnicity

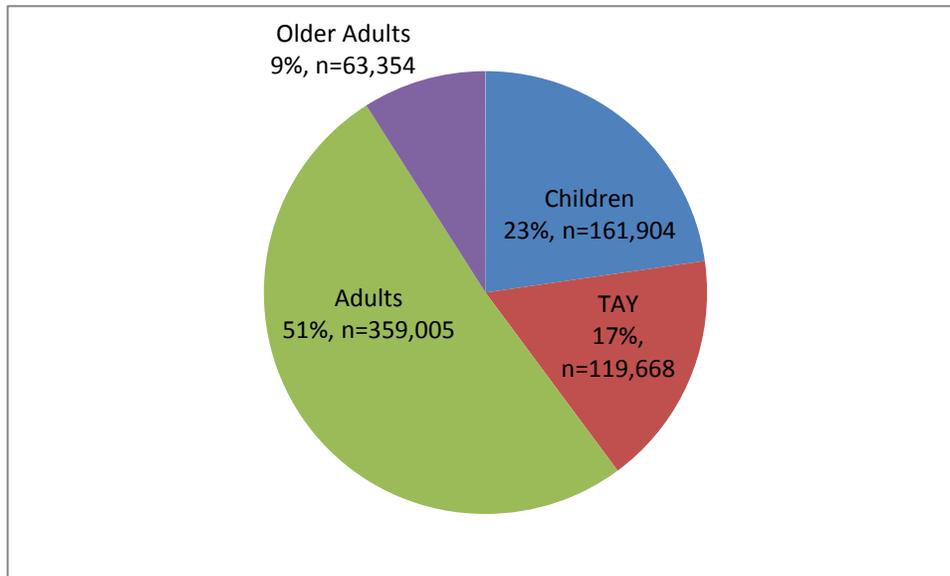
MHSA Region	White	Hispanic/Latino	Asian	Pacific Islander	Black	American Indian	Multi-Race	Other
Large	171,047	162,064	21,392	676	105,639	3,036	34,370	9,021
Medium	41,075	24,992	4,323	100	6,951	582	10,351	1,568
Small	30,411	9,283	919	48	1,547	1,209	4,448	483

Looking at race and ethnicity by county size, the proportion of White public mental health system users was lowest in large counties and highest in small counties—increasing from approximately one third of the user population in large counties to two thirds of the user population in small counties. An opposite trend was seen for the Hispanic/Latino, Black, and Asian user populations, which were higher in large counties and lower in small counties. Small counties served higher proportions of American Indian users. No discernible trend was seen for users identifying as Multi-Race, Pacific Islander, or another race.

Trends by Age

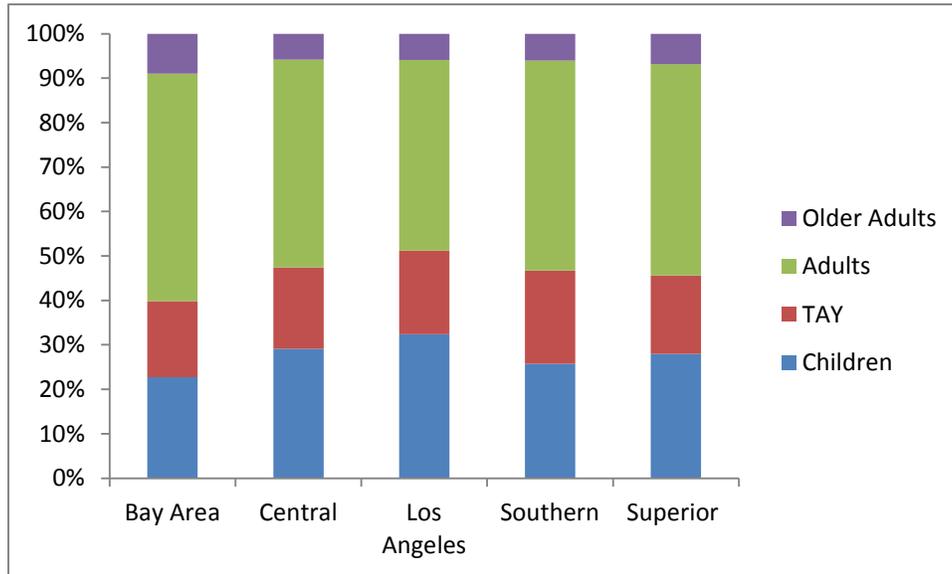
This section looks at users of the public mental health system by age group. The age groups used in this analysis correspond with groupings used for MHPA program planning and are as follows: Children (ages 1-15), Transition-Age Youth (ages 16-24), Adults (ages 25-59), and Older Adults (above age 60).

Figure 8: Total Percentage of Users by Age (n=703,931)



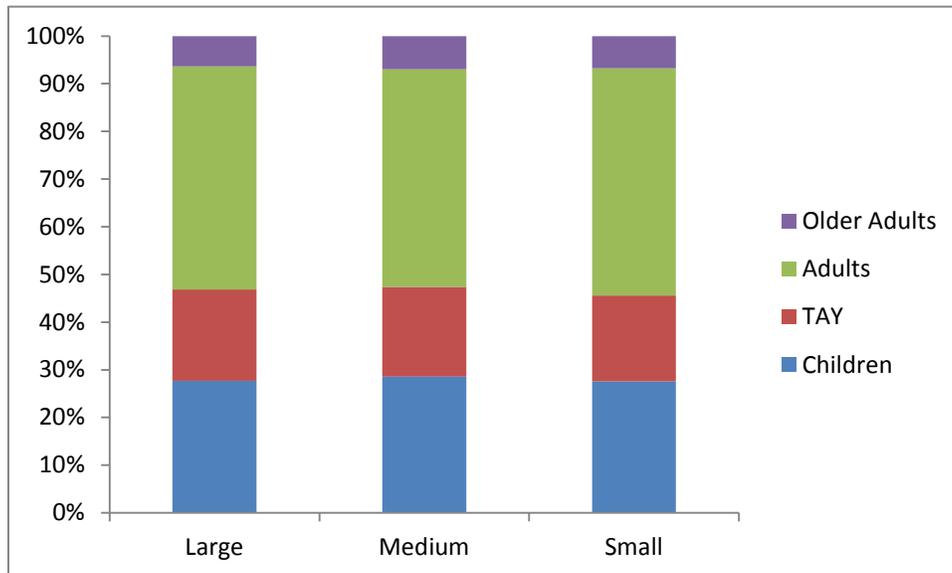
Adults made up just over half (51%) of all individuals accessing public mental health services. Nearly one quarter (23%) of users were children, followed by 17% in the Transitional-Age Youth group. Older adults accounted for 9% of the user population.

Figure 9: Total Percentage of Users by Age and MHSA Region (n=703,931)



The age distribution was relatively similar across all regions, with adults and children accounting for the majority of public mental health system users, followed by TAY users and older adult users. The Bay Area Region had the highest proportions of adult users and the lowest proportion of children, while the Los Angeles Region had the lowest proportions of adult users and the highest proportion of children. The highest proportion of older adult users was found in the Bay Area Region, while the highest proportion of TAY users were from the Southern Region.

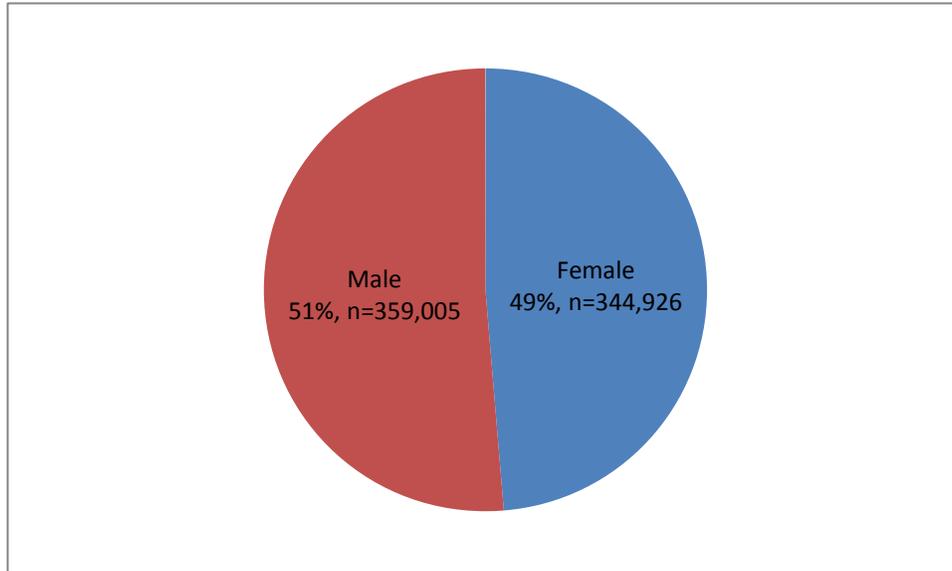
Figure 10: Total Percentage of Users by Age and County Size (n=703,931)



There was essentially no variation in the distribution of ages of public mental health users when grouped by county size.

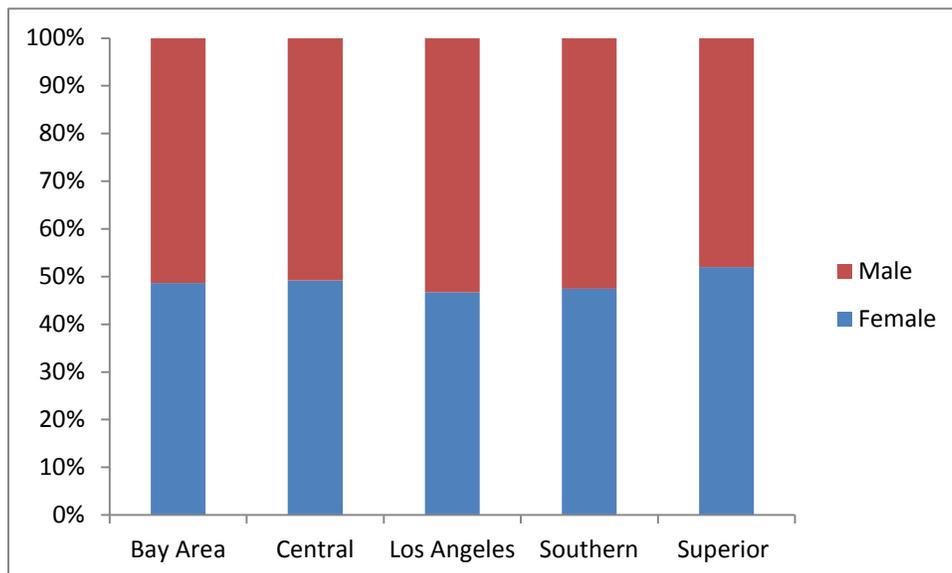
Trends by Gender

Figure 11: Total Percentage of Users by Gender (n=703,931)



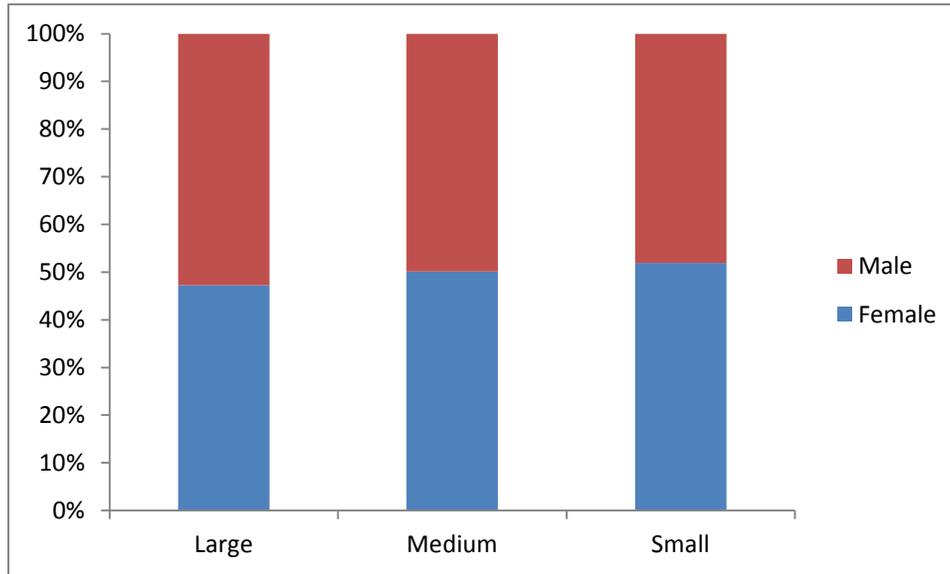
The percentages of male and female users were nearly equal across regions and county size, with males making up 51% of all users and females making up 49% of users.

Figure 12: Total Percentage of Users by Gender by MHSR Region (n=703,931)



Males and females were nearly equally represented in all regions. The Superior Region was the only region with slightly more female public mental health users than male users.

Figure 13: Total Percentage of Users by Gender, per County Size (n=703,931)



Public mental health system users were also nearly equally represented in small, medium, and large counties. A slight majority of public mental health users from small counties were female, while a slight majority of users from large counties were male.

Threshold Languages by Region

This section describes the MHSA threshold languages, those non-English languages that are spoken at a high proportional rate within geographic regions of the state and should be prioritized when delivering mental health services to populations in those regions. The following table presents the threshold languages in each region, ranked in decreasing order of number of counties (indicated in parentheses) having designated a particular threshold language. As the MHSA Los Angeles Region includes only Los Angeles County, its threshold languages are listed in decreasing order of the percentage of speakers of each non-English language that its population speaks. As the table shows, Spanish was the most commonly identified threshold language across all MHSA regions. Spanish was generally followed by a set of Asian languages including Cantonese, Cambodian, Hmong, Korean, Mandarin, Tagalog, and Vietnamese. Other threshold languages included Arabic, Armenian, Farsi, and Russian.



Table 4: Threshold Languages by MHSA Region

Bay Area Region (12 counties)	Central Region (20 counties)	Los Angeles Region (1 county)	Southern Region (10 counties)	Superior Region (15 counties)
Spanish (9)	Spanish (16)	Spanish	Spanish (9)	Spanish (11)
Vietnamese (3)	Hmong (3)	Armenian	Vietnamese (2)	
Cantonese (2)	Russian (2)	Cantonese	Arabic (1)	
Mandarin (2)	Cambodian (1)	Vietnamese	Farsi (1)	
Tagalog (2)	Cantonese (1)	Korean	Tagalog (1)	
Russian (1)	Vietnamese (1)	Mandarin		
		Tagalog		
		Farsi		
		Russian		
		Cambodian		
		Arabic		
		Other Chinese		

Workforce Needs

Workforce Shortages

The reports on workforce shortages below are derived from the County-Reported Needs Assessment section on Existing and Future Mental/Behavioral Health Workforce Shortages. Counties were prompted to list the top seven mental/behavioral workforce shortages in their county, ranked in the order of highest need. The highest need position was analyzed separately, while the needs ranked two through seven were grouped under the category “Other Needs.” Counties were asked to draw from the list of occupational categories provided by OSHPD, but as discussed in the Methodology section above, RDA also added categories such as Bilingual, Nurse, Other, and Spanish, in order to account for common additional responses.

Overall Trends

The chart below depicts the total count of the times any county reported a position as a workforce shortage, and specifies whether the position was reported as a “Highest Need” or “Other Need.” Overall, Psychiatrists, Licensed Clinical Social Workers (LCSWs), and Marriage and Family Therapists (MFTs) were the most commonly reported workforce needs. Psychiatrists far outpaced any other reported statewide need, with counties reporting a need for psychiatrists (without specifying an age group), child/adolescent psychiatrists, and geriatric psychiatrists a total of 67 times. Psychiatrists were also most frequently ranked as the highest need position, cited a total of 43 times across these three categories.

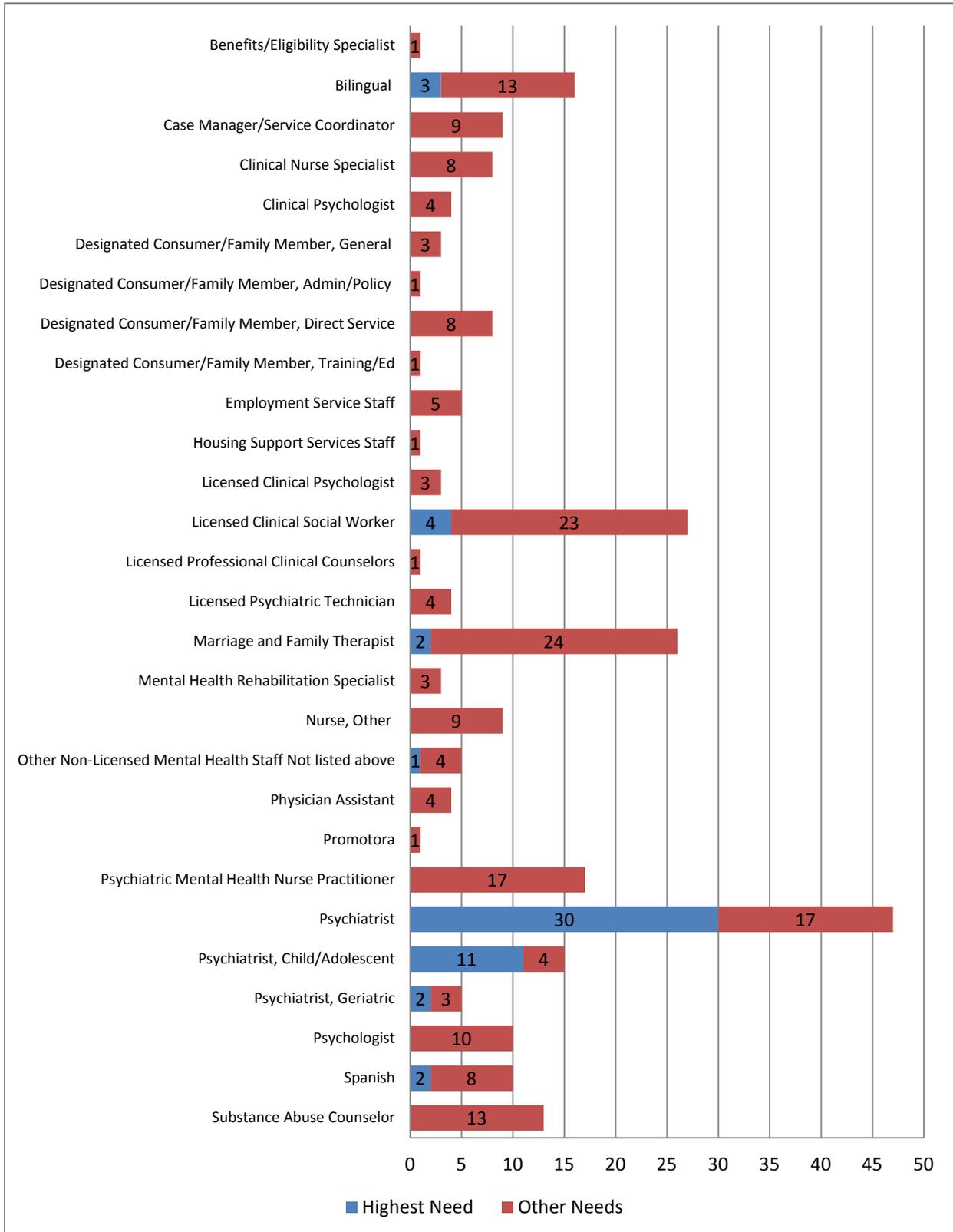


A “second tier” of shortages was represented by LCSWs and MFTs, each cited over 25 times, with several counties indicating these as their highest need. Psychologists, Clinical Psychologists, and Licensed Clinical Psychologists were also cited a total of 17 times. Psychiatric Mental Health Nurse Practitioners and Substance Abuse Counselors were each cited at least 10 times, though not as highest need positions.

Needs for bilingual (language not specified) and Spanish-speaking mental health workers were also each reported at least 10 times, with several counties indicating this as their highest need. Designated Consumer and/or Family Member positions were cited as shortages a total of 13 times, with the most frequently-reported position type as direct services.

The least-cited positions included Benefits/Eligibility Specialists, Housing Support Services Staff, Licensed Professional Clinical Counselors, and Promotoras.

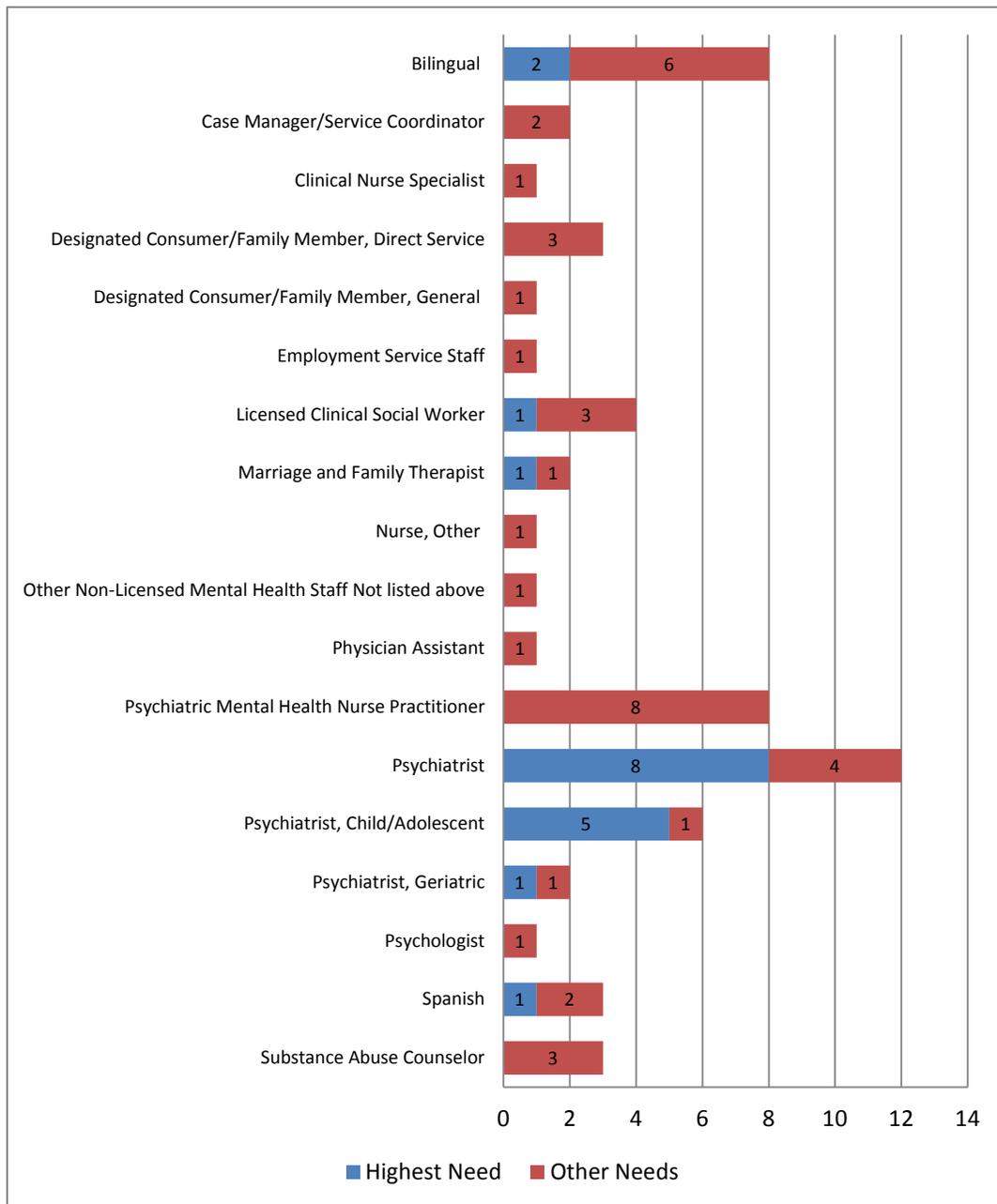
Figure 14: Statewide Trends in Workforce Shortages (n=295)



Trends by Region

In the following section, workforce shortages are analyzed by region. While Psychiatrists were consistently the highest frequency and highest need position across regions, there were nuances at the “second tier” of demands, and among the lower-ranked positions. Diversity needs for bilingual and Spanish-speaking staff and needs for Designated Consumer and/or Family Member position also differed by region.

Figure 15: Bay Area Region Workforce Shortages (n=60)





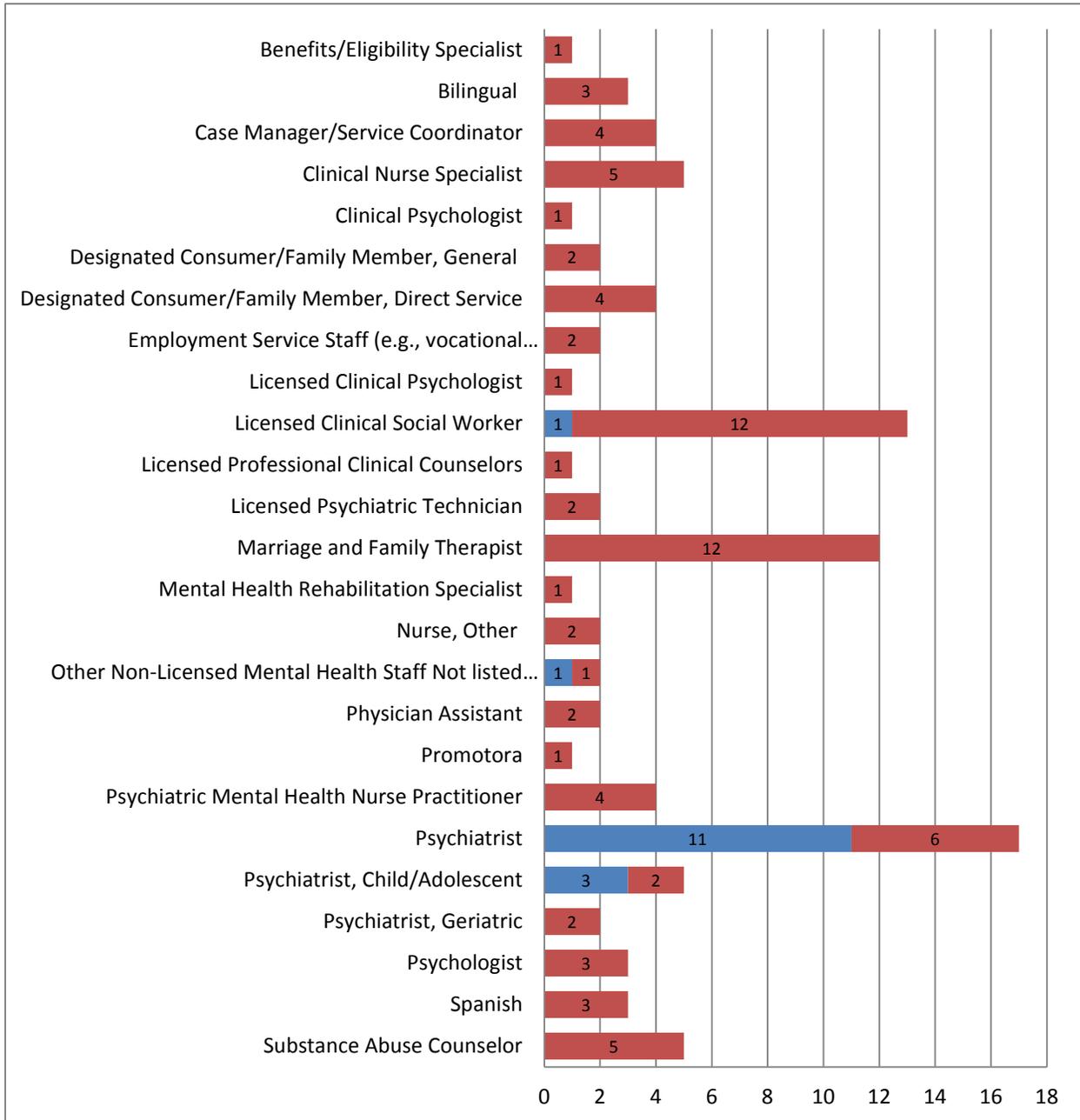
Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

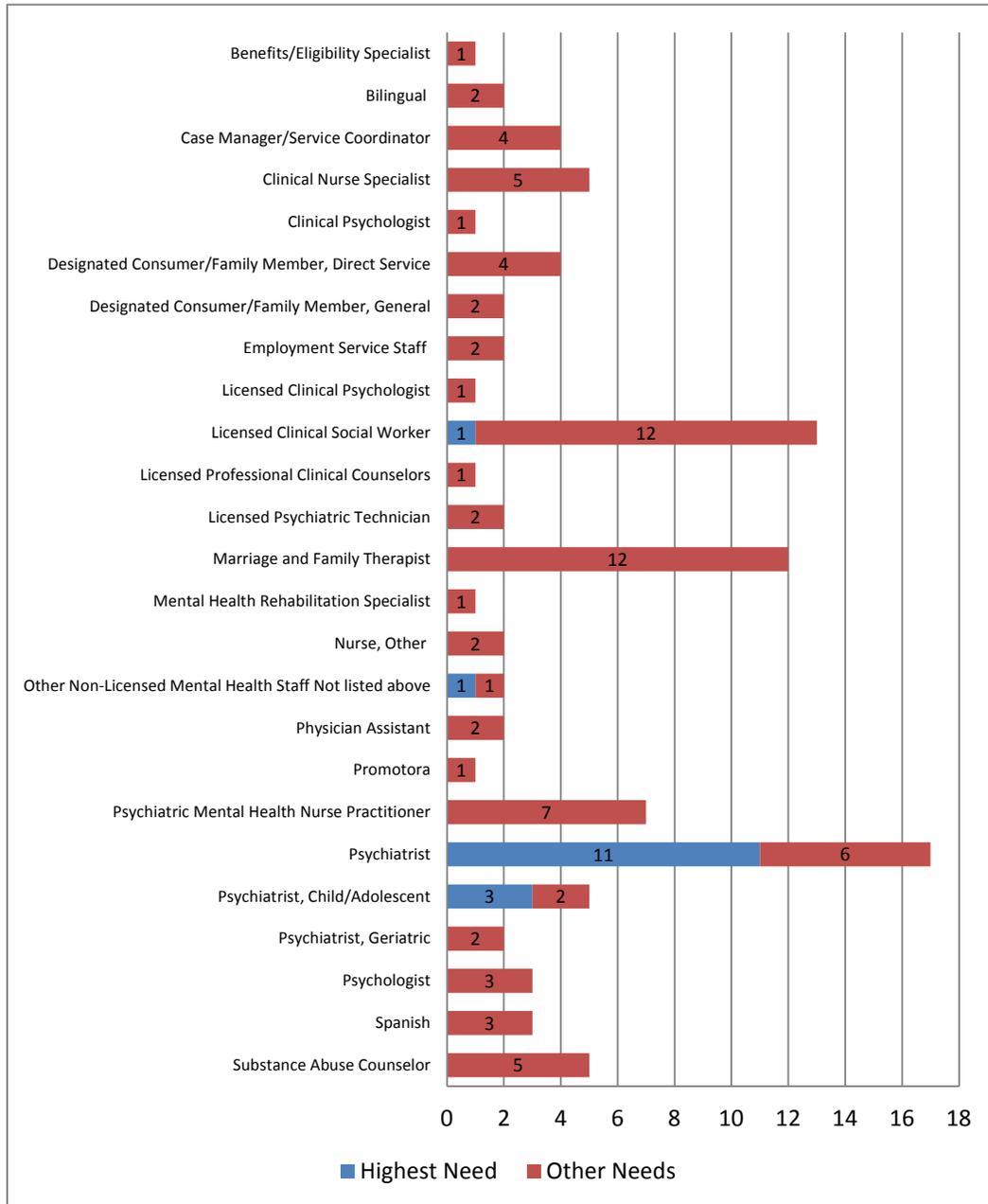
In the chart above, workforce shortages reported by Bay Area Region counties are depicted by highest and other needs. Similar to the statewide trend, Bay Area counties identified Psychiatrists and Child/Adolescent Psychiatrists as their highest need workforce shortages. Also reflective of statewide trends, LCSWs and MFTs fell within a second tier of commonly-reported shortages. Bilingual and Spanish-speaking also made up a large proportion of reported needs in this region.

Figure 16: MHS Central Region Workforce Shortages (n=98)



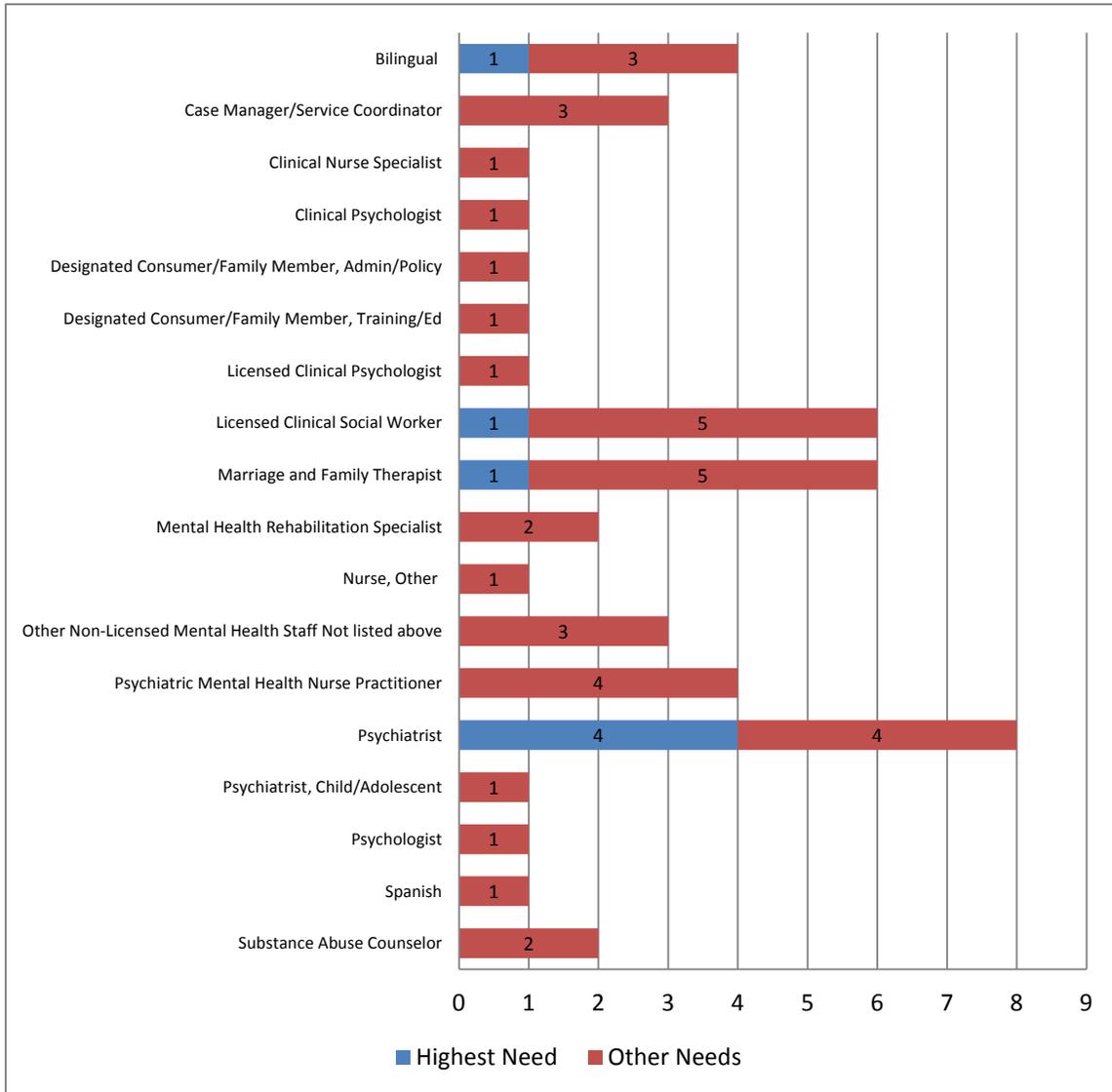
In the MHS Central Region, again Psychiatrists and Child/Adolescent Psychiatrists constituted the highest need and most frequently cited workforce shortages, followed by LCSWs, MFTs, Psychiatric Mental Health Nurse Practitioners, and Psychologists (including Clinical and Licensed Clinical Psychologists). Designated Consumer and/or Family Member positions in the Direct Service and General categories were also reported with some frequency, as were Substance Abuse Counselors, Clinical Nurse Specialists, bilingual and Spanish-speaking staff, and Case Managers/Service Coordinators.

Figure 17: Southern Region Workforce Shortages (n=46)



In the MHA Southern Region, workforce shortages reflected statewide trends but with some variation. Psychiatrists were still cited with the greatest frequency, while Psychologists (including Clinical and Licensed Clinical Psychologists) and MFTs were cited at higher frequencies than LCSWs. Similar to other regions, bilingual and specifically Spanish-speaking staff were an identified need.

Figure 18: Superior Region Workforce Shortages (n=47)



MHSA Superior Region workforce shortages were relatively consistent with the statewide “tiers” of need established above: Psychiatrists were both the highest need and most frequently cited shortages, followed by LCSWs, MFTs, and Psychiatric Mental Health Nurse Practitioners. Child/Adolescent Psychiatrists, however, were not reported as a highest need shortage. Bilingual and Spanish-speaking needs made up a large proportion of needs in this region.

Conclusions: Workforce Shortages by MHA Region

Across regions, many of the cited workforce shortages were consistent. Psychiatrists (without a specified age group) were always the greatest overall need and the most frequently cited highest need. Child/Adolescent psychiatrists generally represented the other “highest need” classifications.



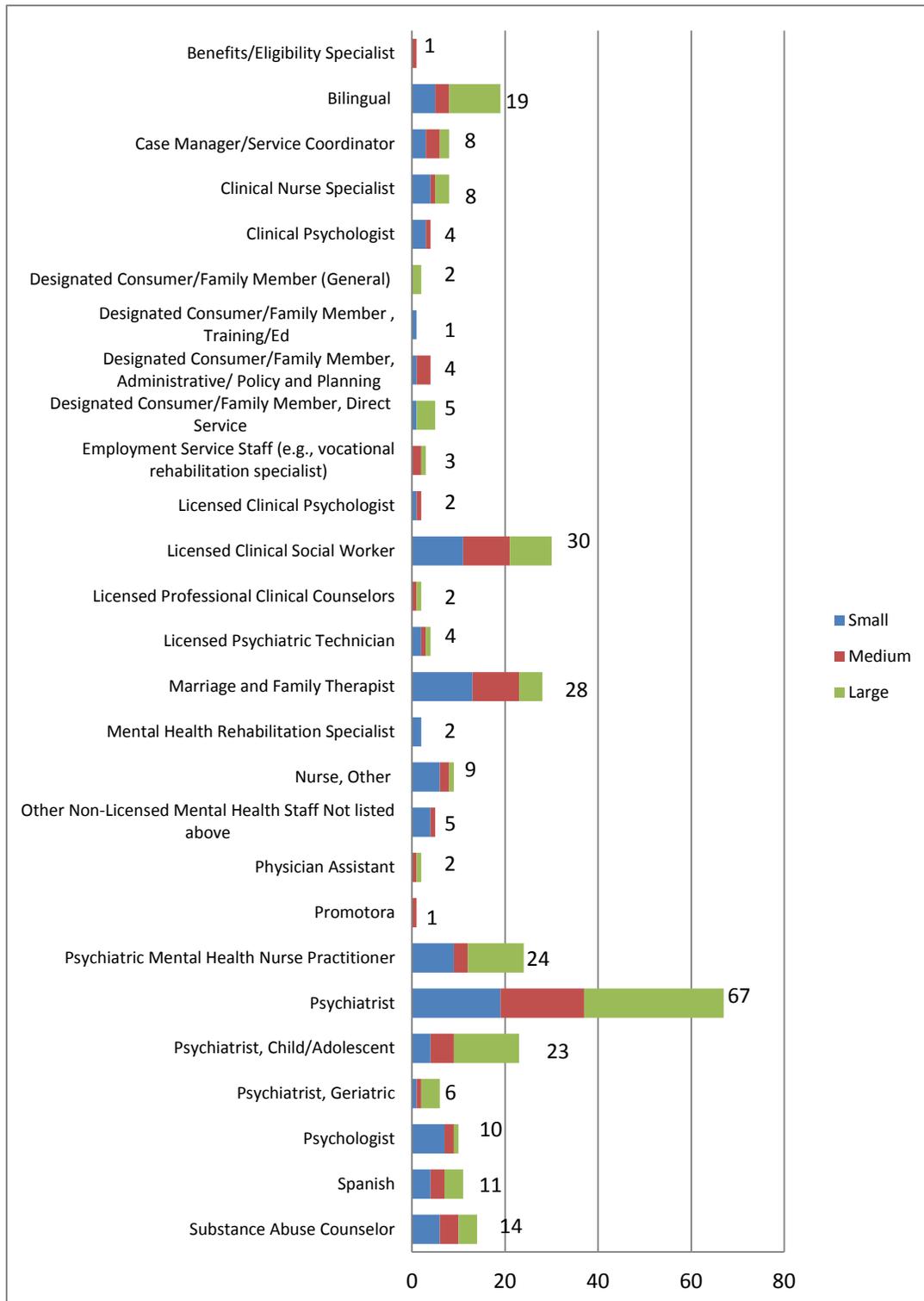
Apart from psychiatrists, LCSWs, MFTs, Substance Abuse Counselors, and Psychiatric Mental Health Nurse Practitioners were among the more frequently cited workforce shortages.

Diversity shortages (Bilingual or Spanish needs) were cited in the MHSA Bay Area and Superior Regions, much more so than in the MHSA Central or Southern Regions. Designated Consumer and/or Family Member positions were only cited in some regions. When cited, direct service or general needs were more common than the other types of designated consumer and/or family member types of positions.

Workforce Shortage Trends by Size

Workforce shortages by county size are depicted in the figure below. Small counties are represented by blue, medium counties by red, and large counties by green. For ease of comprehension, demands by highest need or other needs have been collapsed in this chart into overall counts, and no distinction is made by need rank.

Figure 19: Overall Workforce Shortages by County Size





Office of Statewide Health Planning & Development

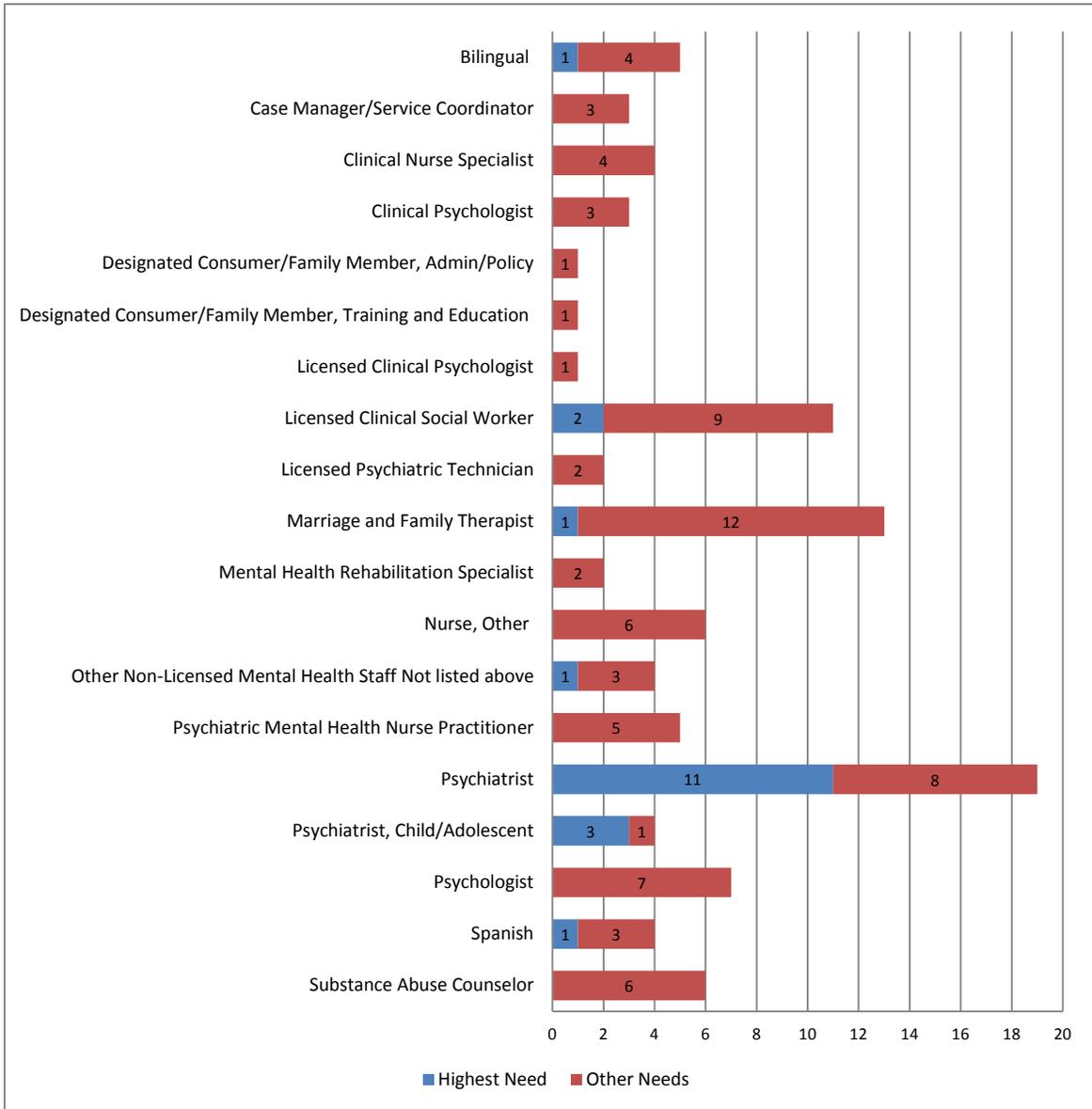
WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Need for psychiatrists was reported by small, medium, and large counties at fairly even frequency, with a somewhat higher number of large counties reporting this need. MFTs and LCSWs were also relatively evenly split across county sizes, although a higher number of small counties and a lower number of large counties reported a need for MFTs. Needs were also relatively evenly split by county size for Substance Abuse Counselors, Spanish-speaking staff, and Case Managers/Service Coordinators.

A greater number of large counties reported needs for bilingual staff, Child/Adolescent Psychiatrists and Psychiatric Mental Health Nurse Practitioners. More small counties listed needs for Psychologists, including Clinical and Licensed Clinical Psychologists. Among the less frequently cited workforce shortages, reported needs also varied by county size for the Designated Consumer and/or Family Member positions.

Figure 20: Small Counties Workforce Shortages (n=101)

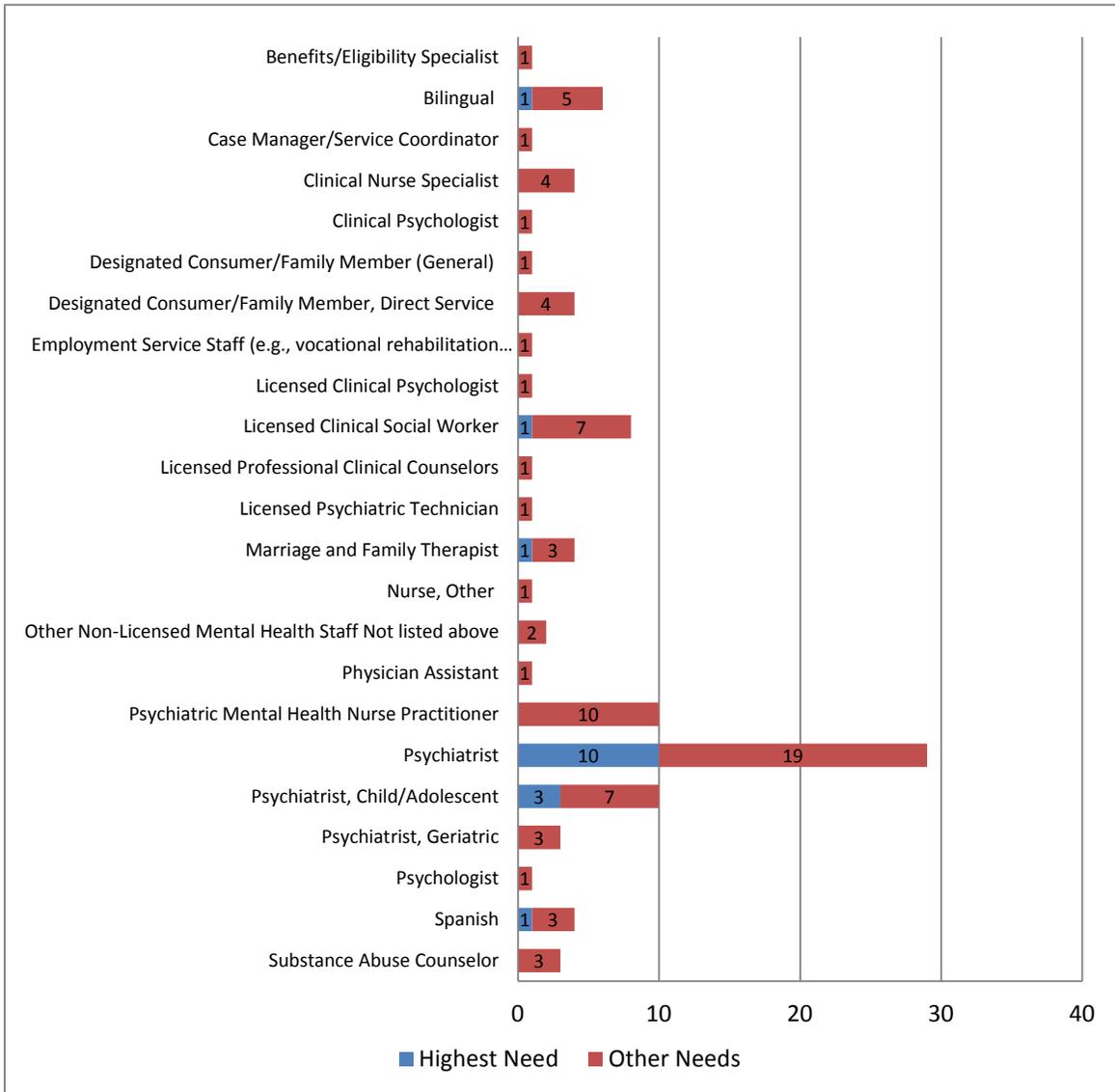


The figure above depicts the counts of reported workforce shortages of small counties, delineated by highest need and other needs. The overall demand for psychiatrists is consistent with the statewide trend, but small counties reported MFTs and LCSWs at higher frequencies than the statewide averages.

Nurses and Substance Abuse Counselors are in mid-level demand. Psychiatric Mental Health Nurse Practitioners were cited as a workforce shortage five times, Clinical Nurse Specialists four times, and Other nurses (including any mention of a Registered Nurse, Nurse, or Licensed Vocational Nurse) were cited six times. Combined, Nurses were mentioned for a total of 15 times, which place them just a few counts behind general Psychiatrists.

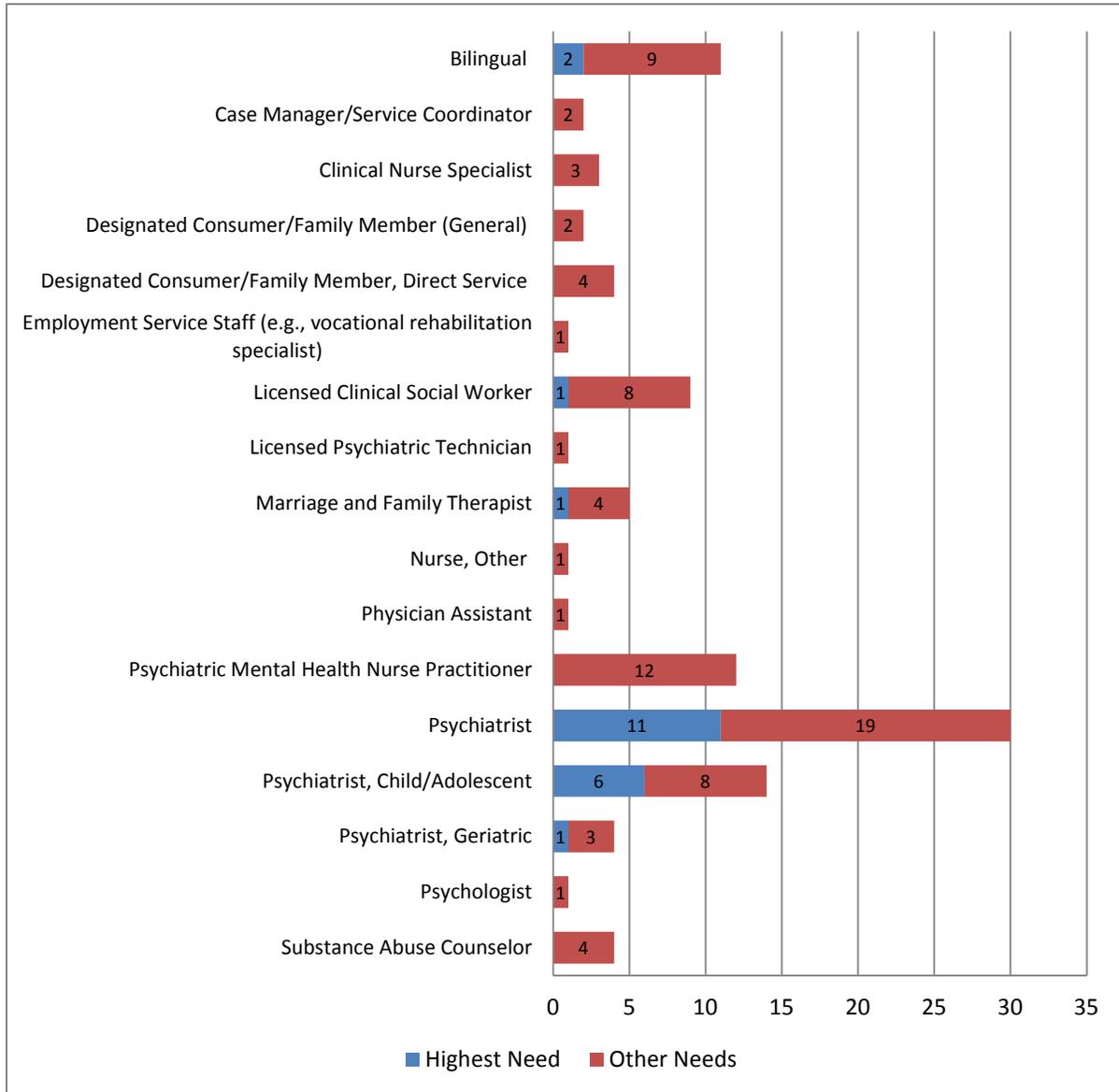
Bilingual and Spanish workforce shortages were also high for small counties, representing a combined 11 counts.

Figure 21: Medium Counties Workforce Shortages (n=98)



Medium counties cited Psychiatrists at a greater frequency than the statewide average. Shortage reports for LCSWs, MFTs, and Nurses were lower than the statewide trend. Needs reports for Bilingual or Spanish shortages were also considerably lower than both the statewide trend and for small counties.

Figure 22: Large Counties Workforce Shortages (n=105)



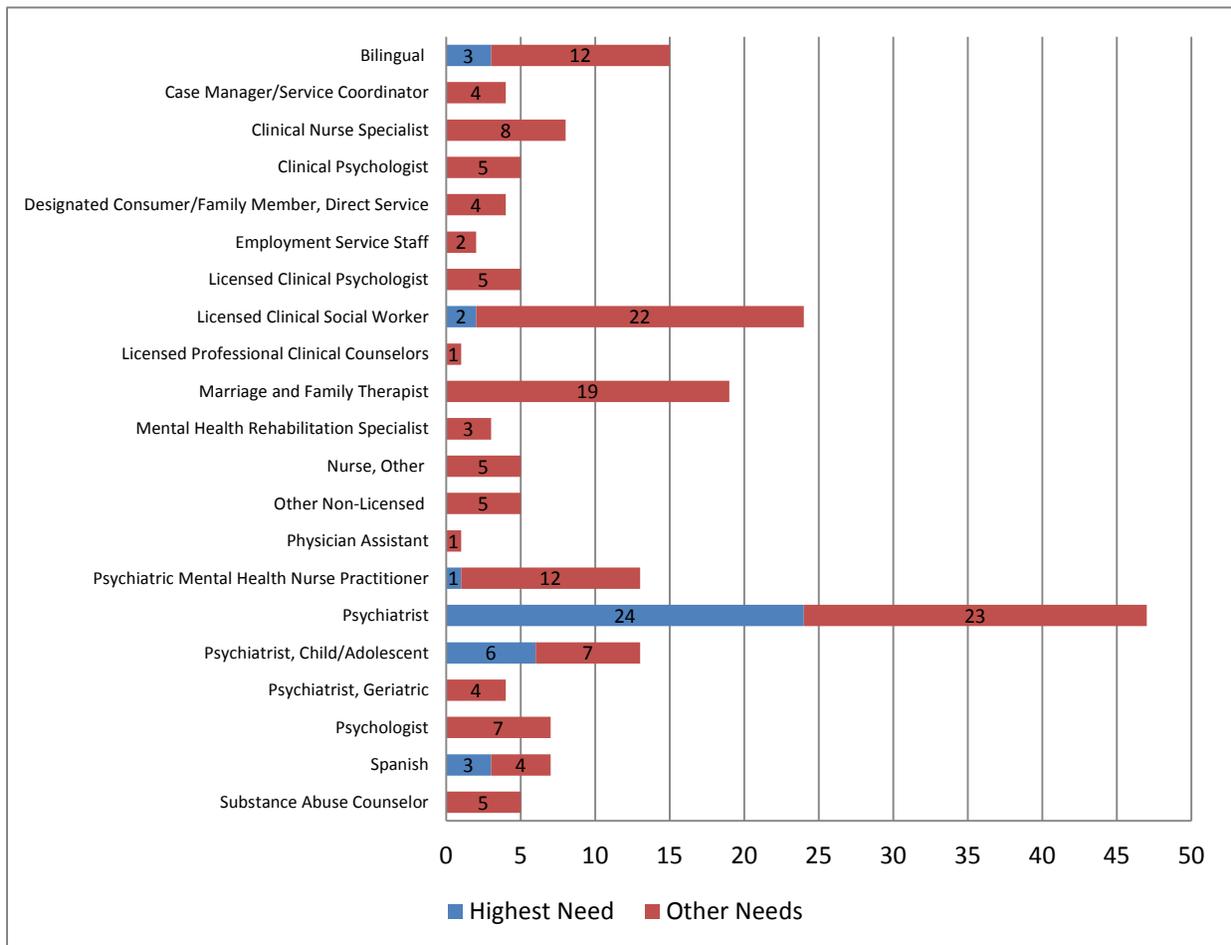
Large counties also reported psychiatrists as their greatest workforce shortage, both in frequency and as their highest need. Child and Adolescent Psychiatrists ranked highly as well, and represented both highest need and other needs. LCSWs, MFTs, Substance Abuse Counselors, and Geriatric Psychiatrists constituted medium-level demands for large counties. Bilingual shortages were cited frequently and as a highest need.

Hard-to-Fill, Hard-to-Retain Positions

Data on Hard-to-Fill and Hard-to-Retain Positions comes from the Hard-to-Fill, Hard-to-Retain Positions section of the County-Reported Needs Assessments. Counties were asked to list their top seven mental/behavioral health workforce positions that were hard to fill or retain in order of highest need. As in other sections, needs 2-7 were grouped under a category of “other needs” while the highest need position remained separated.

Overall Trends

Figure 23: Overall Hard-to-Fill, Hard-to-Retain Positions (n=197)



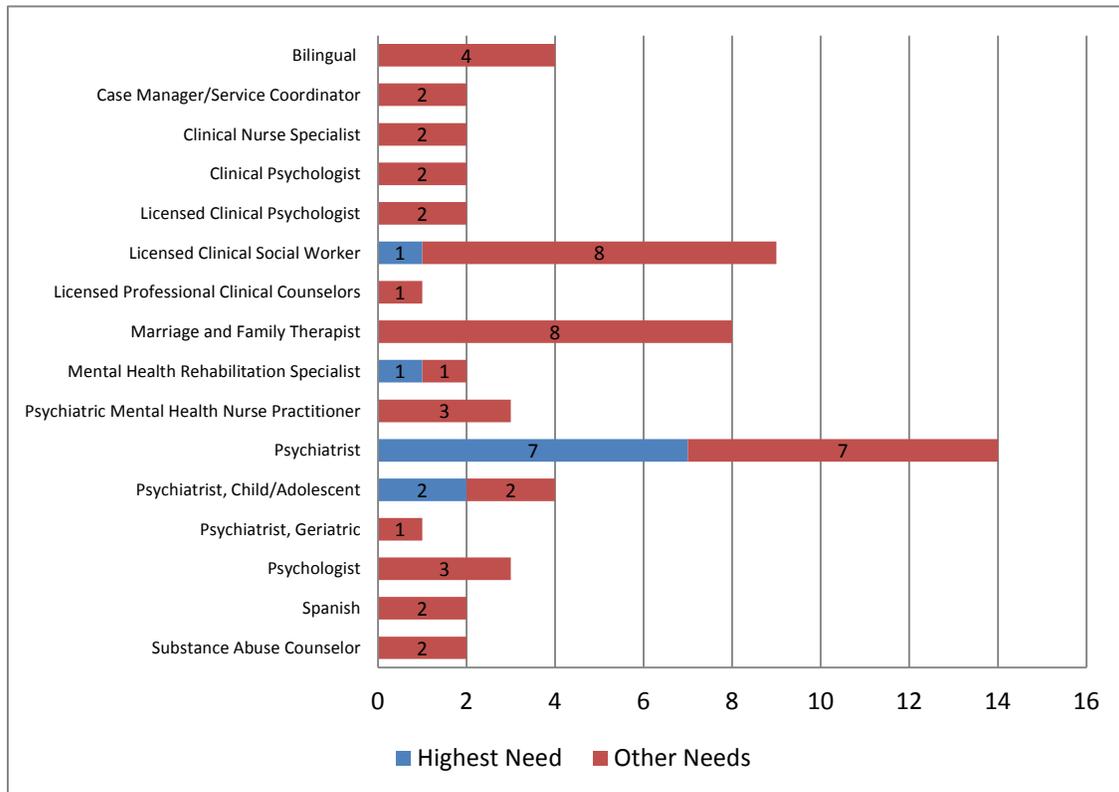
Overall, hard-to-fill and hard-to-retain positions reflected the needs identified in the workforce shortage section of the Needs Assessment. As with workforce needs, Psychiatrists (including non-specified age groups, Child/Adolescent Psychiatrists, and Geriatric Psychiatrists) constituted the majority of hard-to-fill, hard-to-retain positions—ranked 64 times overall and as “highest need” 30 times. LCSWs (24 counts), MFTs (19 counts), and bilingual and Spanish-speaking staff (together accounting for 22 counts) constituted the next most commonly mentioned hard-to-fill, hard-to-retain positions. Psychiatric Mental Health Nurse Practitioners



were mentioned 13 times, and Clinical Nurse Specialists and Other Nurses together totaled 13 counts. The only Designated Consumer and/or Family Member positions cited as hard to fill or retain were direct service positions, cited four times.

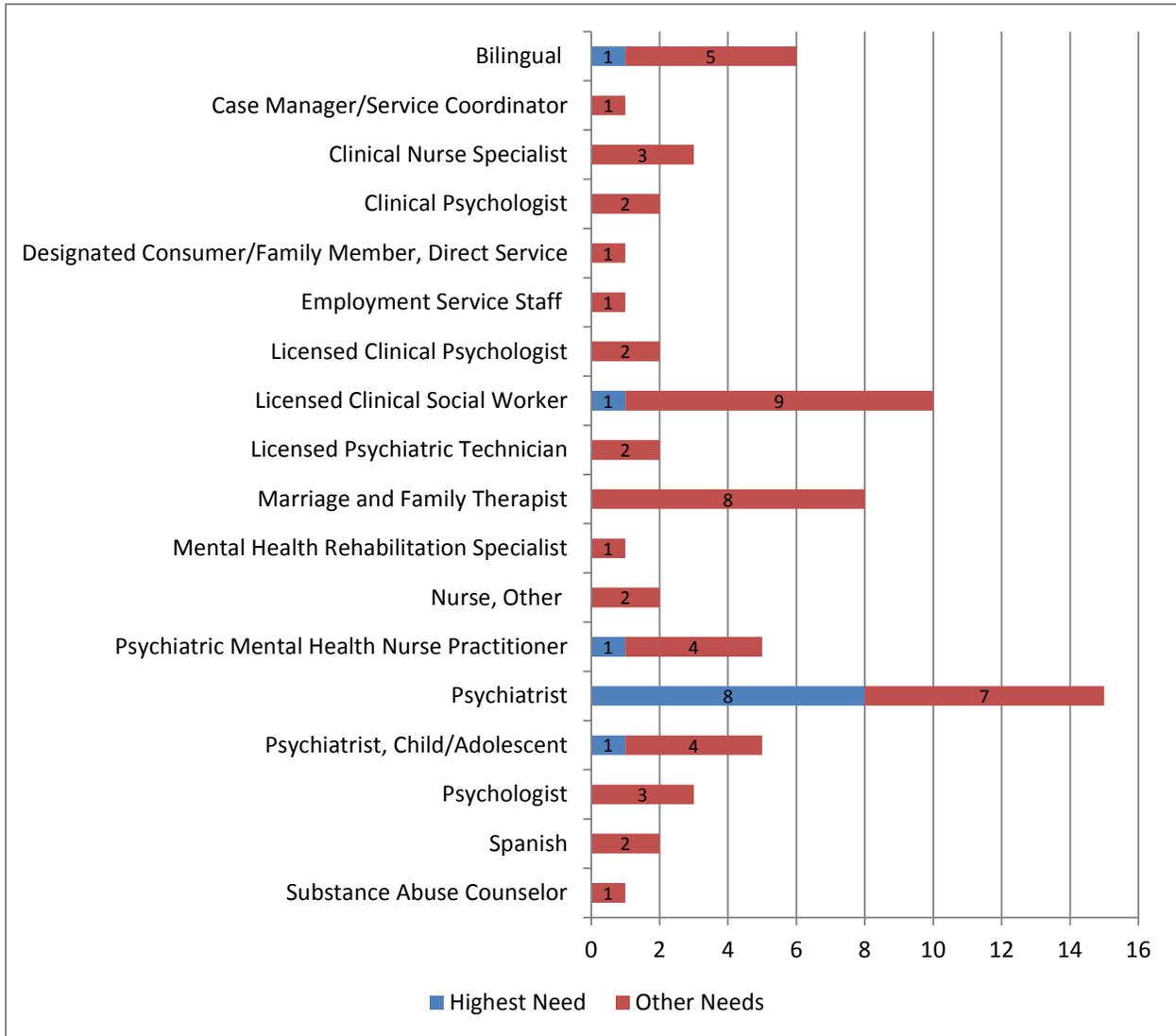
Trends by Region

Figure 24: MHSA Bay Area Region Hard-to-Fill, Hard-to-Retain Positions (n=37)



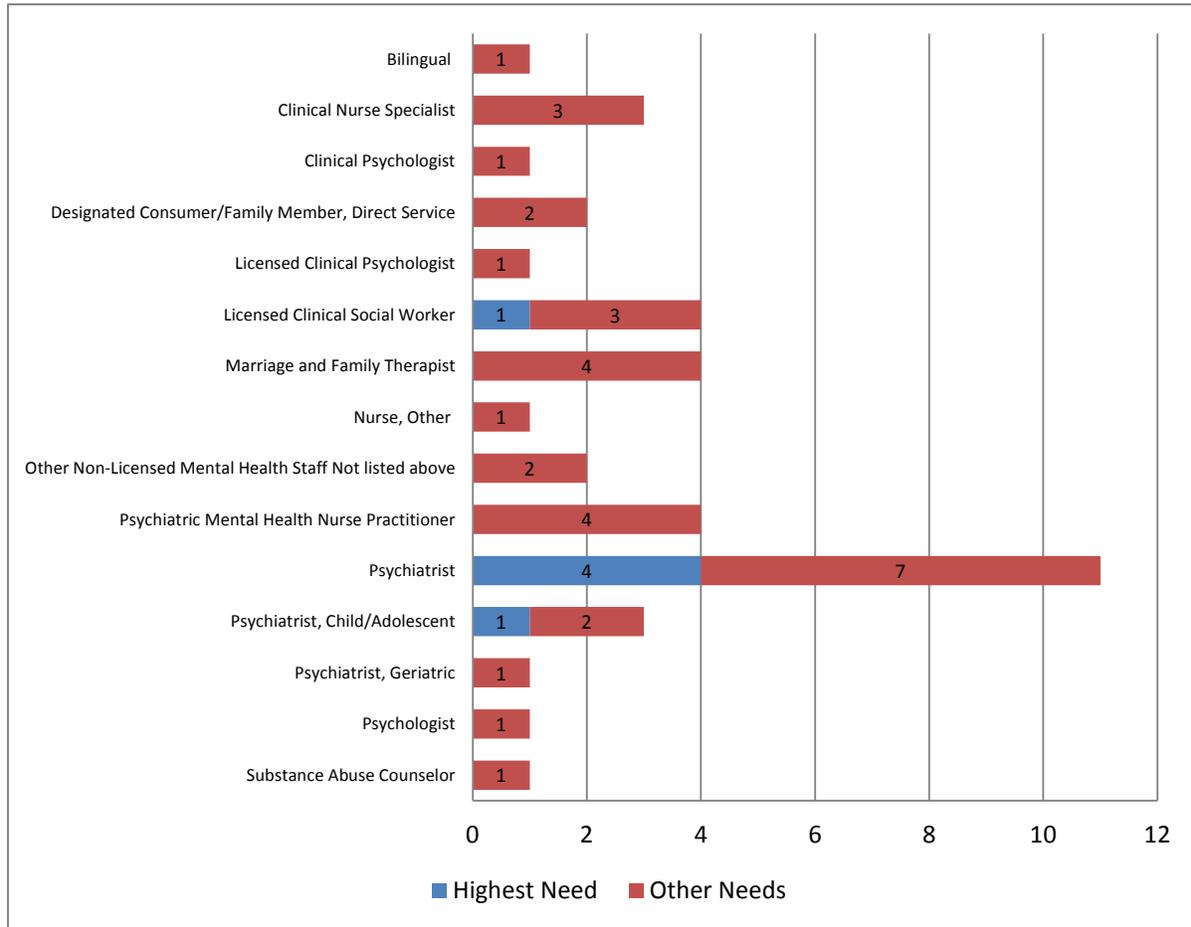
MHSA Bay Area Region hard-to-fill, hard-to-retain positions were generally reflective of the overall statewide trends, with psychiatrists, LCSWs, and MFTs listed with the highest frequency. No MHSA Bay Area Region counties cited Consumer and/or Family Member positions as being among the hardest-to-fill or retain.

Figure 25: MESA Central Region Hard-to-Fill, Hard-to-Retain Positions (n=70)



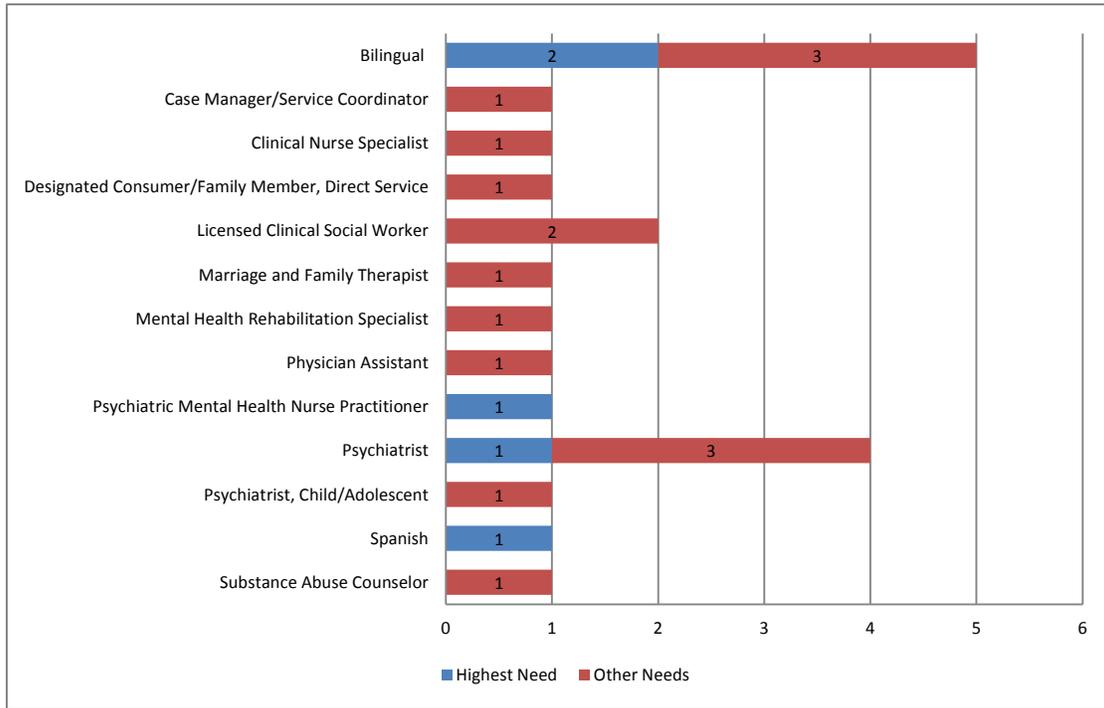
Almost all of the Central Region hard-to-fill, hard-to-retain positions correspond to statewide averages and frequencies, with psychiatrists, LCSWs, and MFTs being listed with the highest frequency.

Figure 26: MHA Southern Region Hard-to-Fill, Hard-to-Retain Positions (n=40)



Southern Region counties also listed psychiatrists as the highest need and highest frequency hard-to-fill, hard-to-retain position. LCSWs, MFTs, and Psychiatric Mental Health Nurse Practitioners were listed with the next highest frequency. Interestingly, Spanish-speaking positions were not mentioned as hard-to-fill, hard-to-retain positions in the Southern Region, though bilingual staff in general were listed.

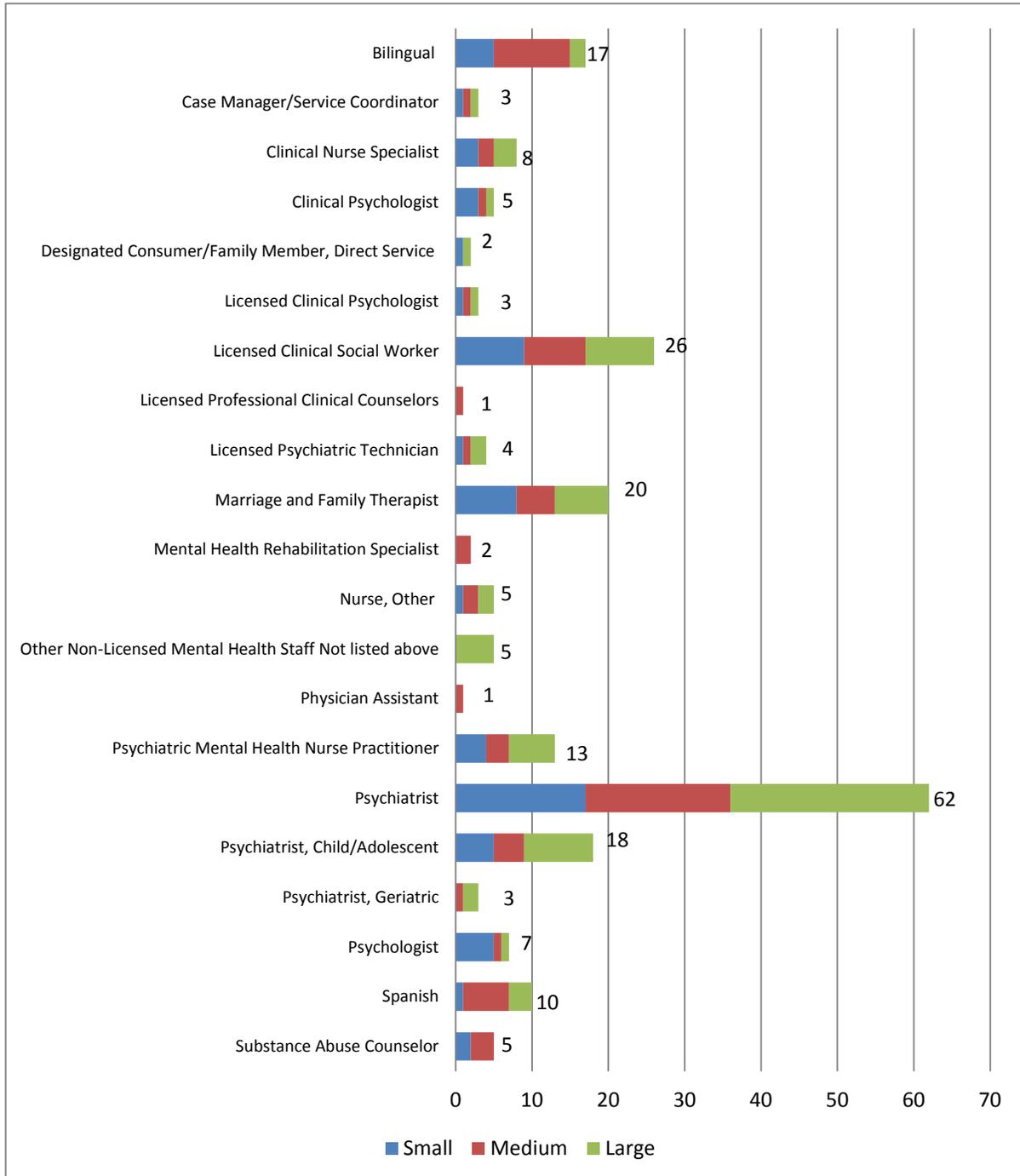
Figure 27: MHSA Superior Region Hard-to-Fill, Hard-to-Retain Positions (n=21)



As an interesting departure from any of the other regions, Superior Region counties reported bilingual positions as the most frequent and highest need hard-to-fill and hard-to-retain type of position. Psychiatrists constituted the next most commonly mentioned hard-to-fill, hard-to-retain position, followed by LCSWs. Positions that were commonly reported by other regions as second tier most common needs were not reported at the same rate in the Superior Region; MFTs, Substance Abuse Counselors, Child/Adolescent Psychiatrists, and the remaining positions in the chart above were only reported once each.

Trends by County Size

Figure 28: Overall Hard-to-Fill, Hard-to-Retain Positions by County Size (n=197)

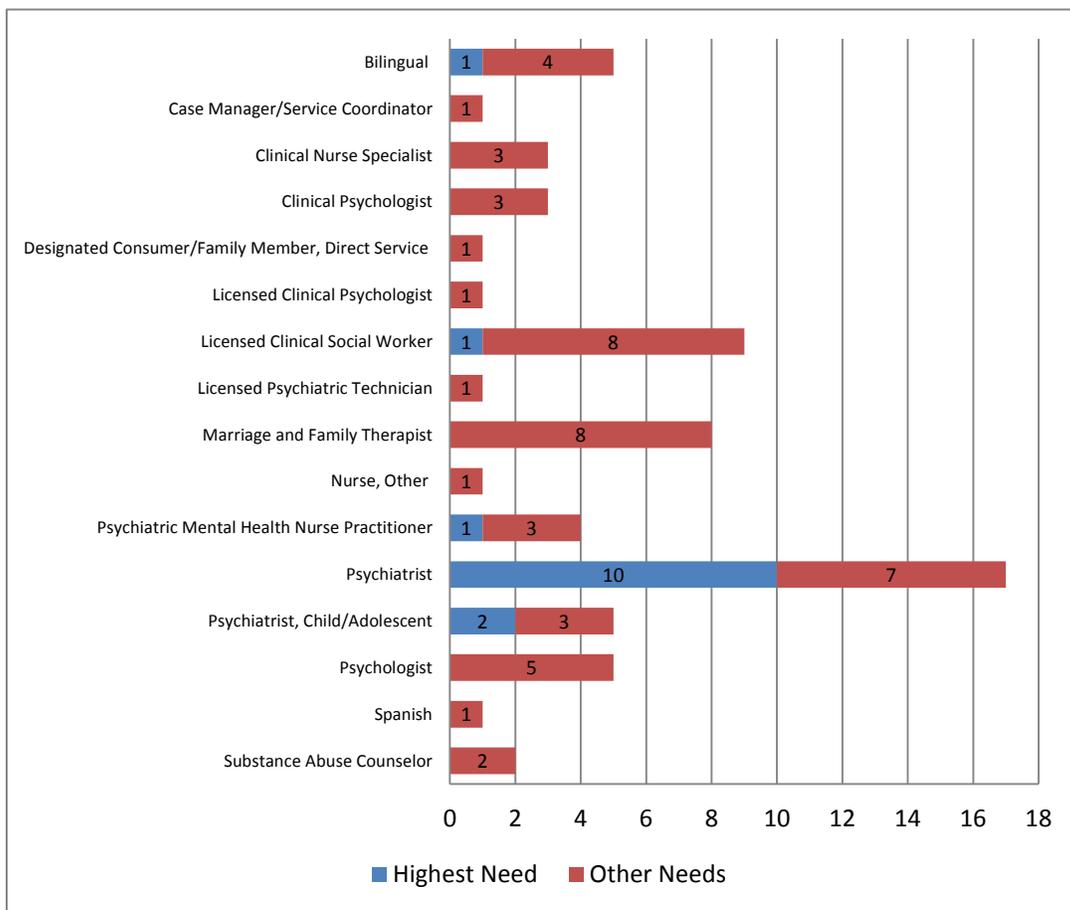


The chart above depicts reported counts of hard-to-fill and hard-to-retain positions by county size. Reported need of psychiatrists appeared to be relatively similar by county size, with a somewhat higher number of large counties reporting Psychiatrists as a hard-to-fill, hard-to-retain

position. Similar numbers of small, medium, and large counties listed LCSWs, MFTs, Licensed Clinical Psychologists, and Case Managers/Service Coordinators as hard-to-fill, hard-to-retain positions.

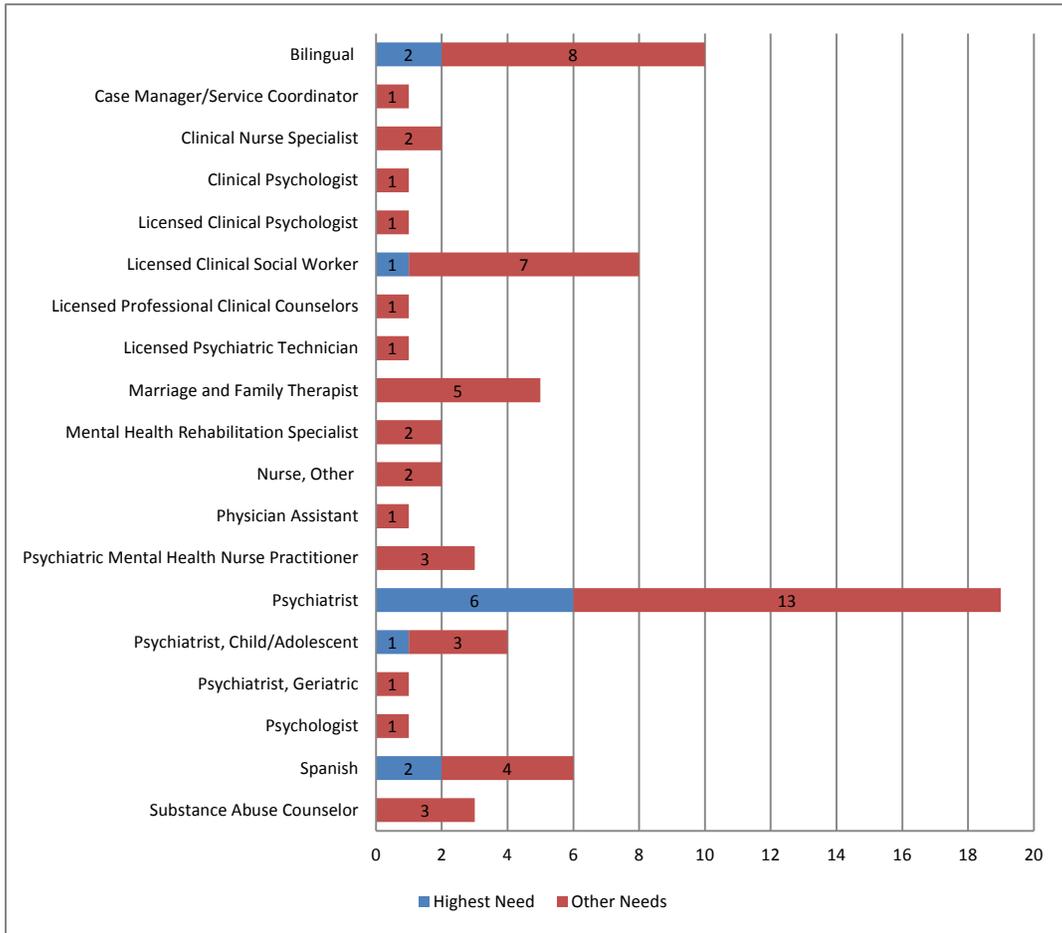
A higher number of large counties reported Child/Adolescent and Geriatric Psychiatrists, as well as other non-licensed mental health staff, as hard-to-fill, hard-to-retain positions. A higher number of medium counties reported that bilingual and Spanish-speaking positions, Substance Abuse Counselors and Mental Health Rehabilitation Specialists were hard to fill or hard to retain. Higher numbers of small counties reported that Psychologists and Clinical Psychologists were hard to fill or retain.

Figure 29: Small Counties Hard-to-Fill, Hard-to-Retain Positions (n=67)



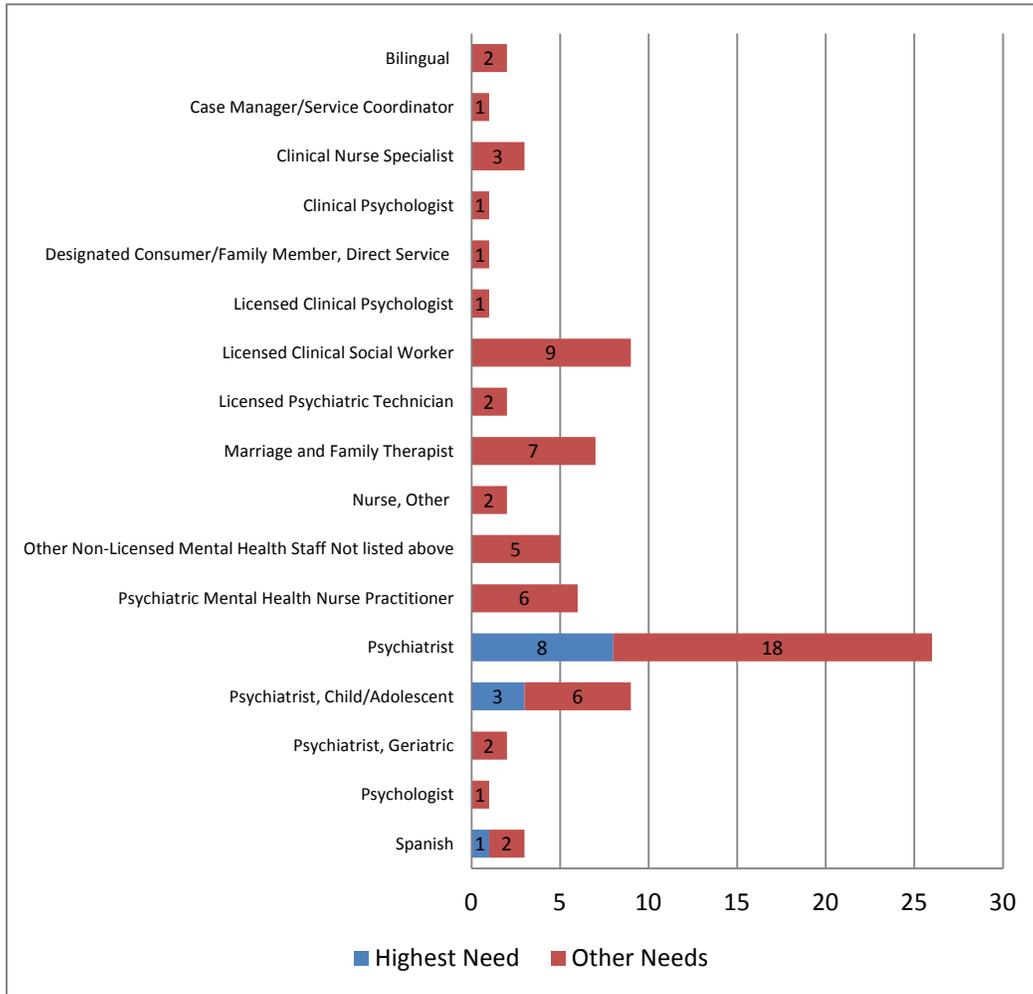
Small counties consistently reported Psychiatrists as their highest need hard-to-fill, hard-to-retain position. Child/Adolescent Psychiatrists, Psychiatric Mental Health Nurse Practitioners, and Bilingual providers were cited among the other highest need positions. By count alone, Psychiatrists, Licensed Clinical Social Workers, Marriage and Family Therapists, and Psychologists were among the top five most frequently cited hard-to-fill, hard-to-retain positions for small counties.

Figure 30: Medium Counties Hard-to-Fill, Hard-to-Retain Positions (n=72)



In medium counties, Psychiatrists were again listed as a hard-to-fill, hard-to-retain position at the greatest frequency and with the highest need. LCSWs and Child/Adolescent Psychiatrists were also among the highest need positions. Interestingly, diversity needs were particularly common among medium counties, with both Spanish and Bilingual cited as hard-to-fill, hard-to-retain positions and highest needs.

Figure 31: Large Counties Hard-to-Fill, Hard-to-Retain Positions (n=81)



Like most of the rest of the state, large counties reported Psychiatrists, Child/Adolescent Psychiatrists, and Licensed Clinical Social Workers at the highest frequencies and needs. Interestingly, lower numbers of large counties cited Spanish and Bilingual positions as hard to fill or retain compared to medium and small counties.

Conclusions: Hard-to-Fill, Hard-to-Retain Positions by County Size

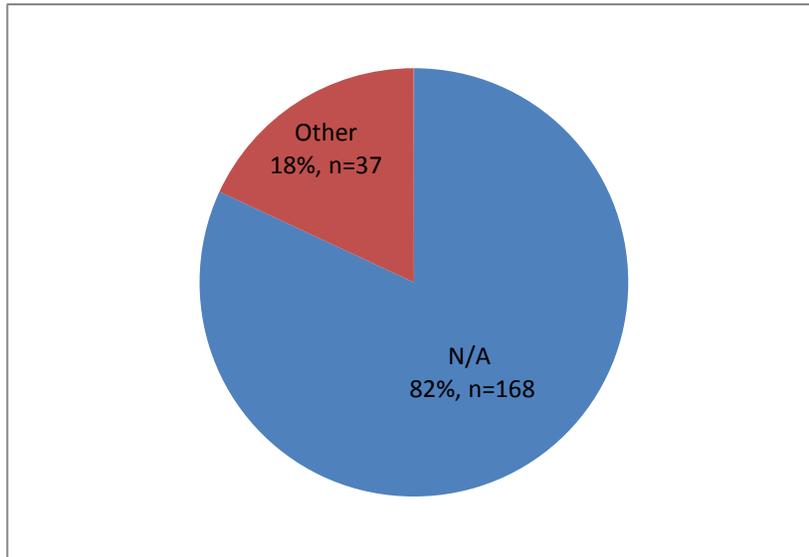
Across county sizes, psychiatrists were consistently reported as the highest need and most frequent hard-to-fill, hard-to-retain position. However, diversity demand differed among counties of different sizes. Both small and medium counties reported Spanish and Bilingual demands at much greater frequency than large counties, with medium counties having the highest frequency of Bilingual demand.



Declining Needs or Needs Met

Specific data on counties' declining needs or demands with regard to staffing derive from the County-Reported Needs Assessment section, "Mental/Behavioral Workforce Demands Met." Counties were asked to list the top five occupational categories declining in need and/or demand, starting with the position with the lowest need. The following figures represent counties' self-reported data on their declining needs and/or demands by region and county size.

Figure 32: Overall Declining Needs or Needs Met (n=205)



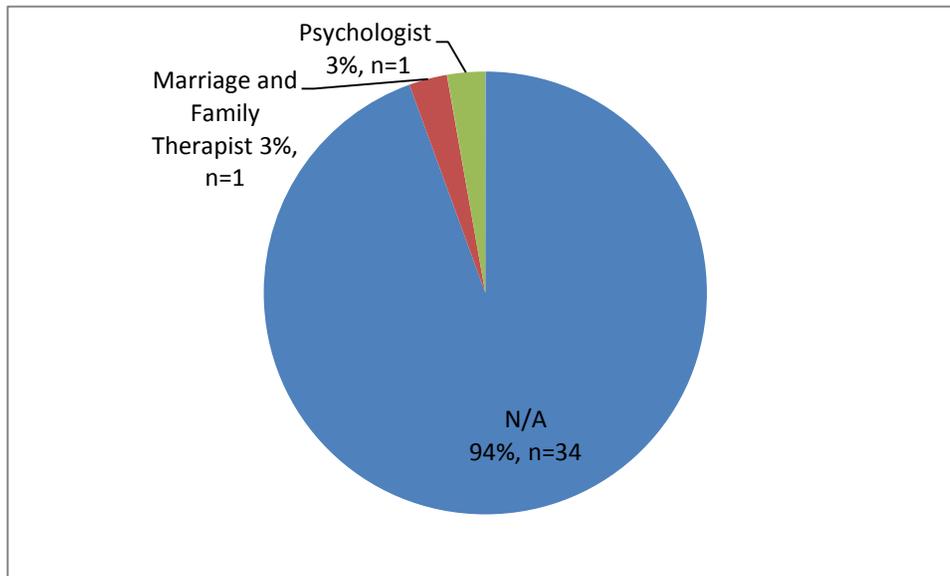
Over 80% of counties reported that declining needs or needs met were “N/A,” or not applicable, suggesting that they perceived no declining or met needs. Eighteen percent of counties identified declining or met needs. Because the proportion of counties reporting “N/A” was so high, “N/A” responses are specifically presented and described in the sections below.

Trends by Region

All MHA regions reported frequently that declining needs or needs met were not applicable, except for the Southern region. The declining needs or needs met that were reported across regions are detailed below.

Bay Area Region

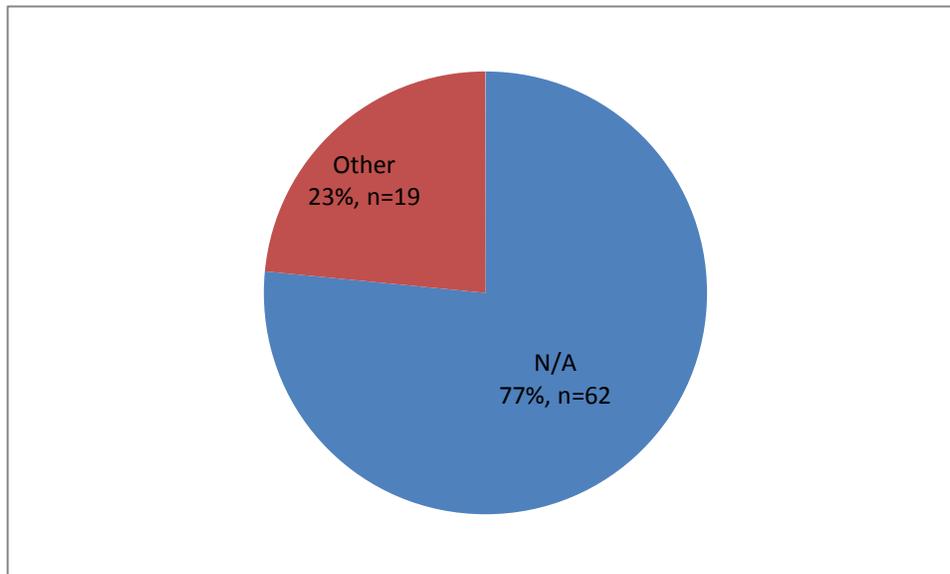
Figure 33: Bay Area Region Declining Workforce Needs/Needs Met Overall (n=36)



Counties in the Bay Area Region responded “N/A” at the highest rate in the state (along with the Superior Region). Ninety-four percent of Bay Area Region counties said there were no applicable responses to declining needs. Three of the remaining six percent of counties responded “Psychologist” and the last 3% cited Marriage and Family Therapists.

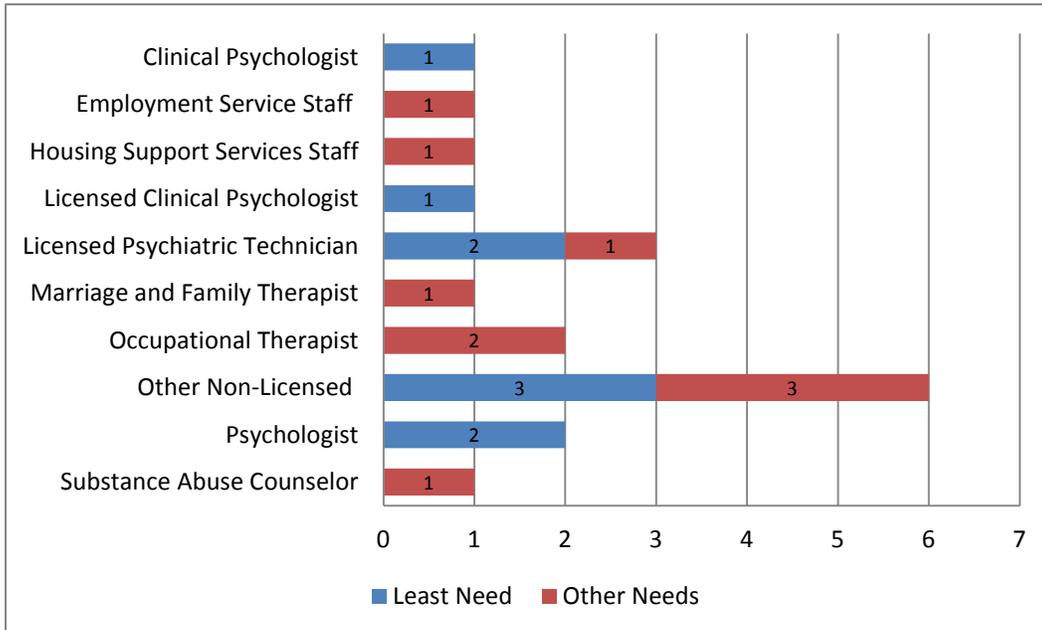
Central Region

Figure 34: Central Region Declining Needs/Needs Met Overall (n=81)



Over three quarters of Central Region counties reported no declining needs or needs met. Among the 23% of responses that listed an occupational category, the distribution is shown in the following graph. Non-licensed positions constituted the least need and most frequently cited declining need. Many of the other declining needs or needs met were administrative or support staff roles, such as the housing support staff and employment services staff (one count each).

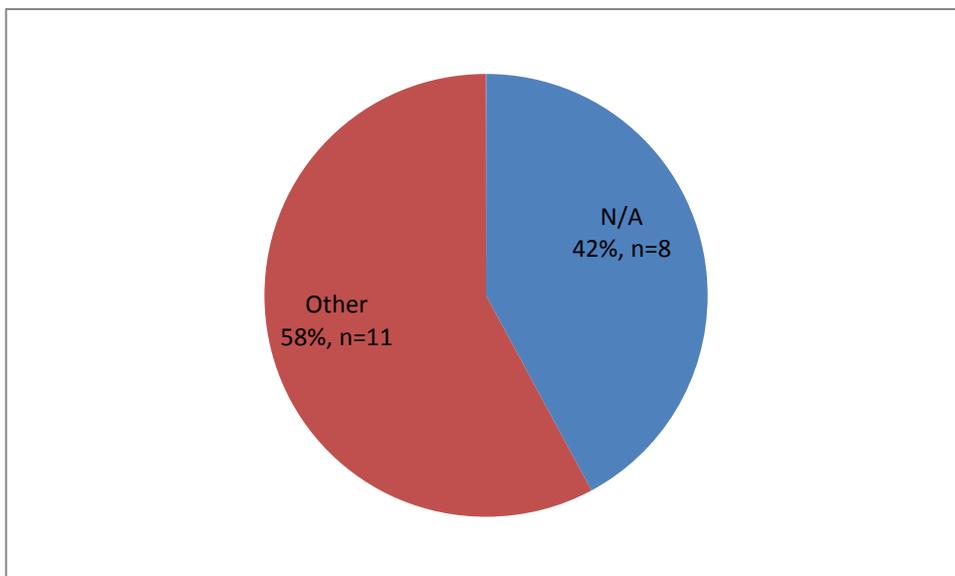
Figure 35: Central Region Declining Needs/Needs Met (n=19)



Psychologists and licensed psychiatric technicians were also cited as positions of least need in the Central Region

Southern Region

Figure 36: MHSA Southern Region Declining Needs/Needs Met Overall (n=19)

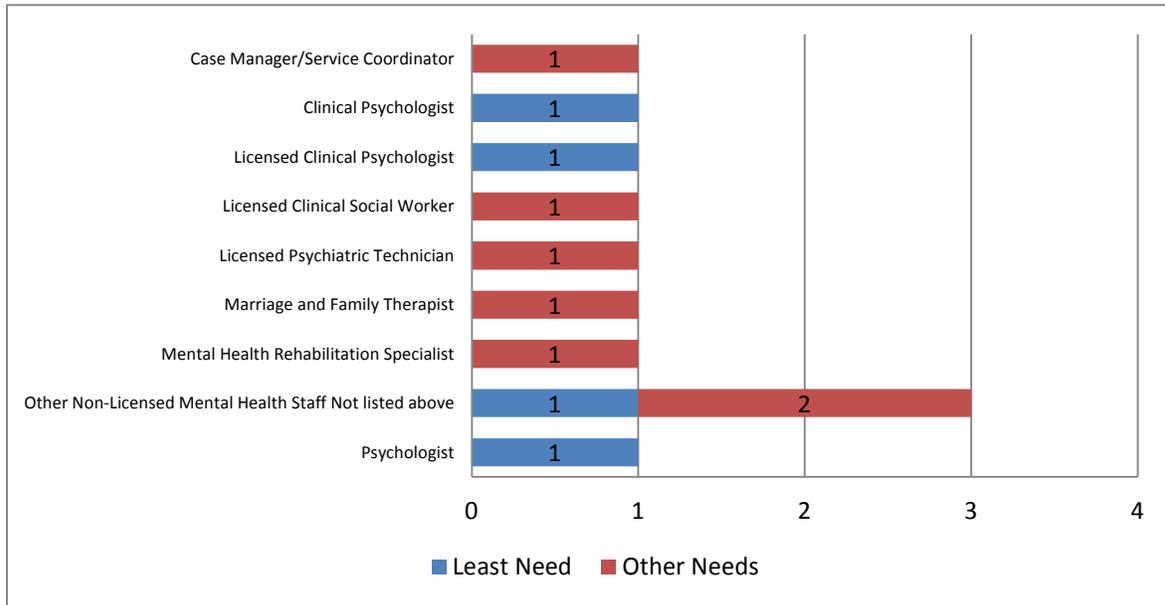


Counties in the MHSA Southern Region, contrary to most other regions and the statewide overall rates, noted the majority of identified declining needs or needs met. While still a large



proportion of the answers were “N/A” or left blank, the 56% of responses that were given are delineated in the figure below.

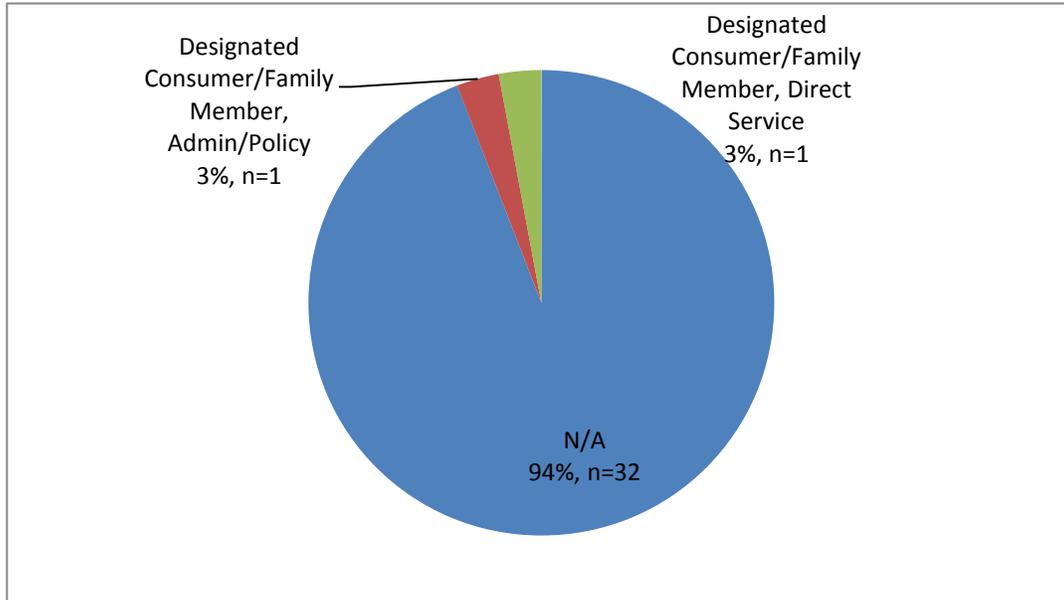
Figure 37: MHSA Southern Region Declining Needs/Needs Met (n=11)



Among the declining needs or met needs, non-licensed staff constituted the greatest frequency, albeit still a low frequency of three times. Clinical Psychologists, Licensed Clinical Psychologists, and Psychologists account for a total of three out of the total twelve cited declining needs in the MHSA Southern Region.

Superior Region

Figure 38: Superior Region Declining Needs/Needs Met, Overall (n=34)



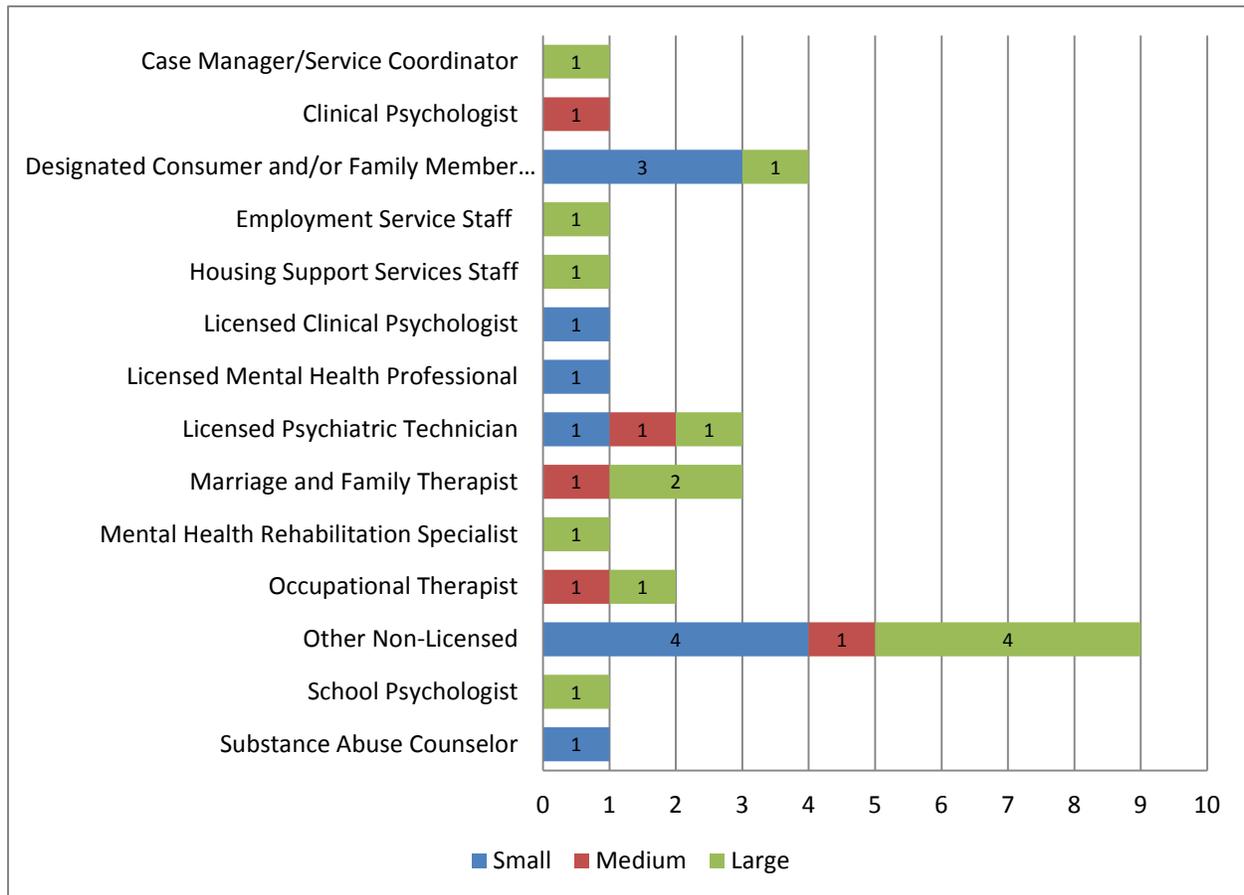
The MHSAs Superior Region reported that there were no applicable declining needs 94% of the time. Among the few reported declining needs that they cited, 3% of their responses were for Designated Consumer and/or Family positions, Administrative and Policy positions; and the final 3% of declining needs were identified as Designated and/or Consumer Family Member positions, Direct Service.

The MHSAs Superior Region reported that there were no applicable declining needs 94% of the time. One county, representing 3% of the region, identified Designated Consumer and/or Family positions, Administrative and Policy positions and Designated and/or Consumer Family Member positions, Direct Service as declining need positions.

Trends by Size

Sorted by county size, small counties reported no declining needs with the greatest frequency (78 times of a total of 90). Medium counties reported no declining needs at the second greatest frequency (49 times of a total of 55). While large counties reported no declining needs at the least frequency, that number, 40 of a total of 54 times, still indicates limited decline in needs. The figure below details this information.

Figure 39: Overall Reported Declining Needs by County Size (n=30)



Diversity Needs

Sources and Limitations

Data on diversity needs comes from the County-Reported Needs Assessment, where counties were presented with an open-ended question that asked them to list their top seven mental/behavioral health workforce diversity needs in order of importance.

Diversity needs were also a topic of discussion in the OSHPD-led Community Forums and to some extent in the County Annual Updates. The Community Forums data will be analyzed in an upcoming document. In the County Annual Updates, counties reported on diversity needs primarily through discussing programs they had created to address diversity needs. For example, one county reported on a Hispanic/Latino Wellness Center initiative, acknowledging Hispanic/Latino cultural needs in that county and discussing the county’s plan to address those needs. However, this type of reporting was not consistently reported across County Annual Updates. Some counties discussed similar cultural initiatives, while other counties did not list current or upcoming programs at all. Moreover, such reports do not thoroughly assess diversity

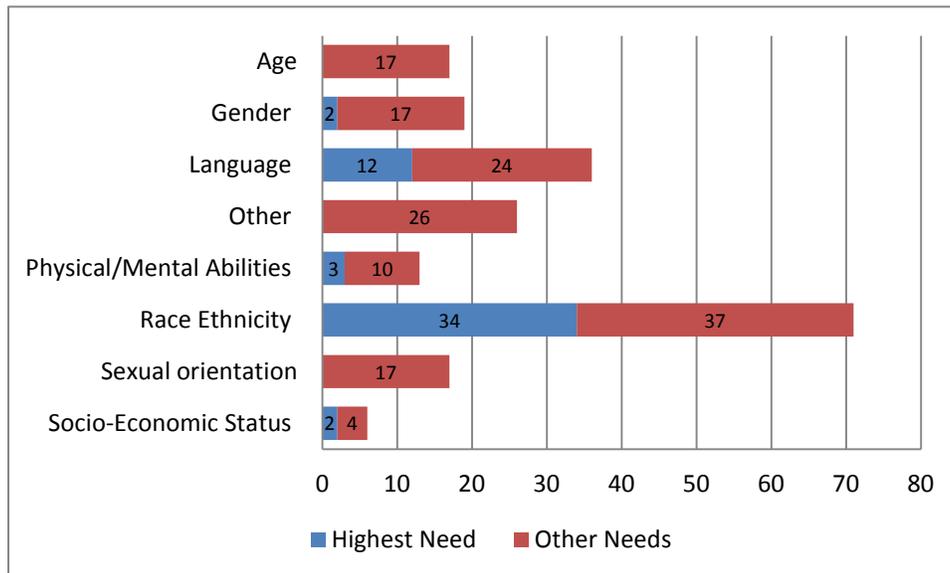
“needs,” but rather explain programs related to diversity needs. For these reasons, the report below focuses on the data from the County-Reported Needs Assessment.

Even within the County-Reported Needs Assessment, counties responded to the “Diversity Needs” prompt with broad variation. Some respondents listed a category of needs such as “race/ethnicity,” while the most common response was a specific listing of the county’s staffing needs around a particular race/ethnicity, such as “African American.” For ease of interpretation, the following analysis first groups needs by the overarching categories of age, gender, language, physical/mental abilities, race/ethnicity, sexual orientation, socio-economic status, and other needs. Subsequent charts break the composition of each of those categories down by sub-category.

While the County-Reported Needs Assessment contained a designated section to report Language Needs, many counties reported language needs within the Diversity Need section. Those counts are reported in the aggregate below, but detailed analysis of language needs is reserved for the Language Needs section.

Summary of Needs

Figure 40: Summary of Overall Diversity Needs (n=205)



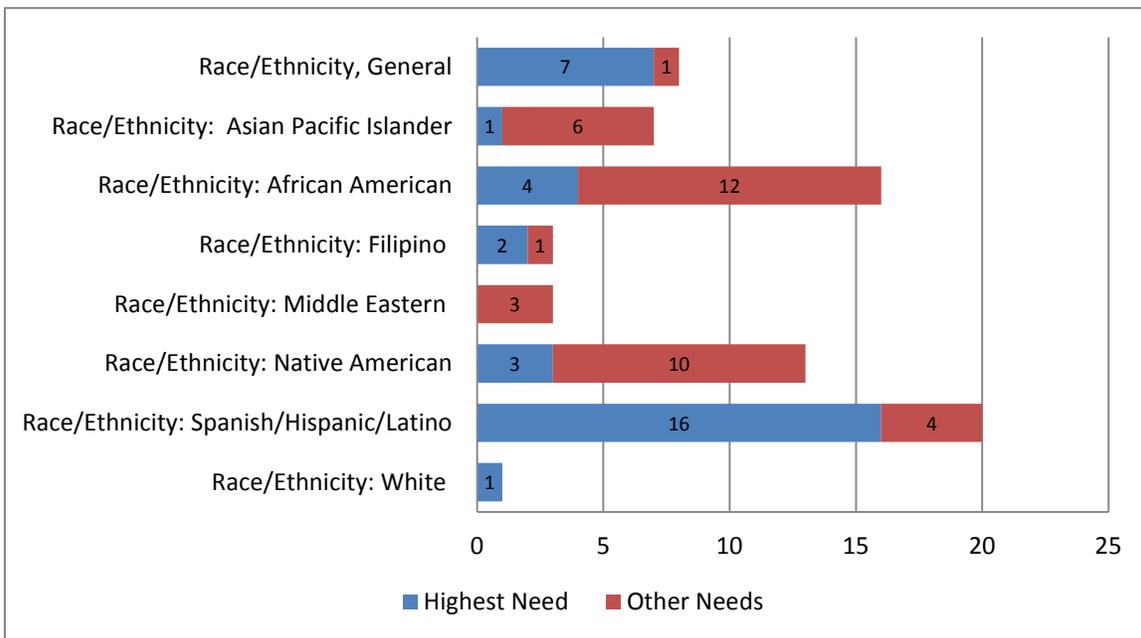
The above chart depicts the frequencies with which counties cited responses in each of the above-mentioned categories. Values represent the number of times that category or a sub-category was reported. As counties were instructed to list their top seven needs, the blue shading represents the number of times a category was ranked as a county’s *number one* need, while the red shading represents the number of times a category was included in rankings two through seven. Because the above categories represent a collection of individual subcategories, categories may include more than one response from a particular county.

Race/ethnicity captured the highest frequency of highest need classifications (n=34), followed by language as the second most frequently cited highest need (n=12). While age represented the overall most frequently cited diversity need, no counties listed age as their highest need.

“Other” diversity needs were commonly listed and included: lived experiences (e.g., mental health consumers or family members, rural issues, young children (0-5 years), homeless, veterans, immigrant communities, and newly emerging refugee communities—particularly Iraqi and Afghani refugees.

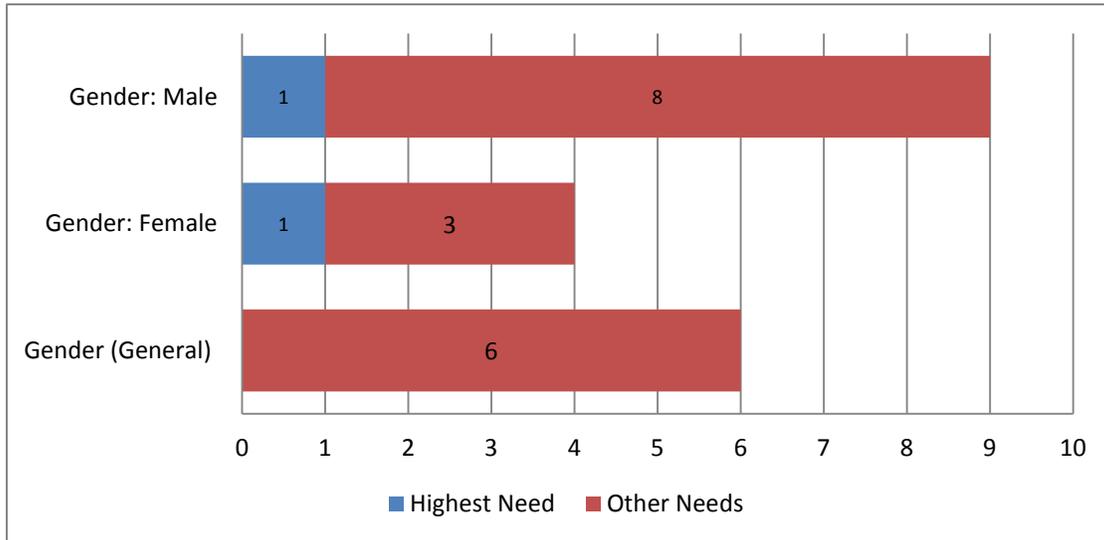
The following charts depict the breakdown of responses included within each overarching category.

Figure 41: Composition of Race/Ethnicity Diversity Needs (n=71)



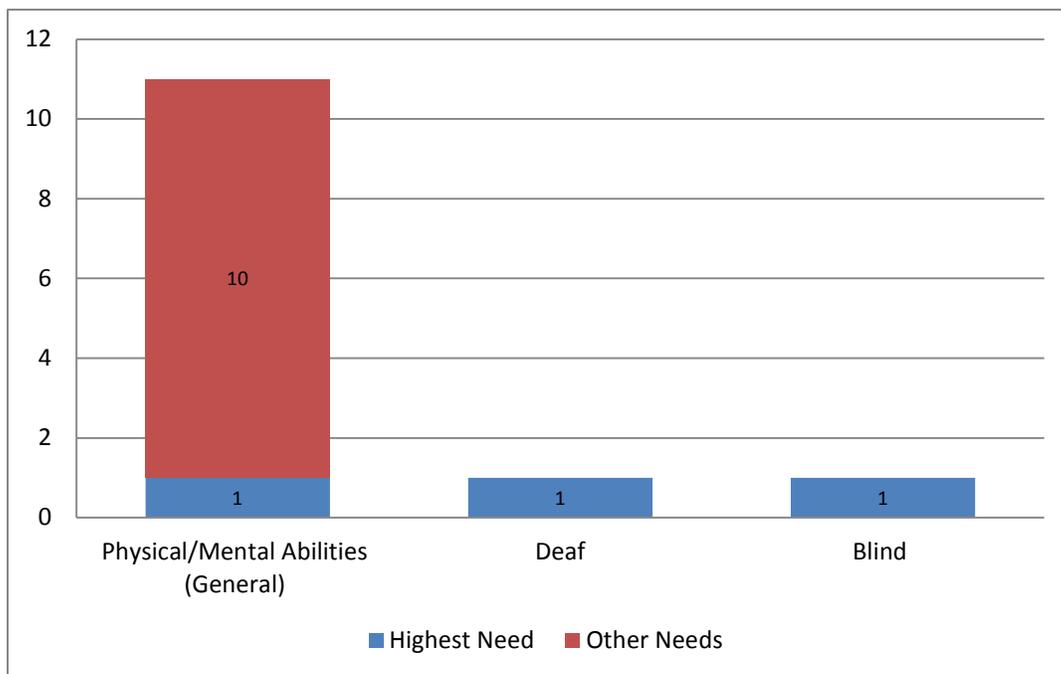
Among the counties reporting needs related to race/ethnicity, staffing needs related to the Hispanic or Latino population were the most frequently cited. Hispanic/Latino needs were cited 20 times and were identified as a highest need 16 times. African American diversity needs were also among the most common at a total of 16 counts. Asian Pacific Islanders were the next most commonly cited need (seven), and specific needs for Filipinos were listed three times.

Figure 42: Gender Composition of Diversity Needs (n=19)



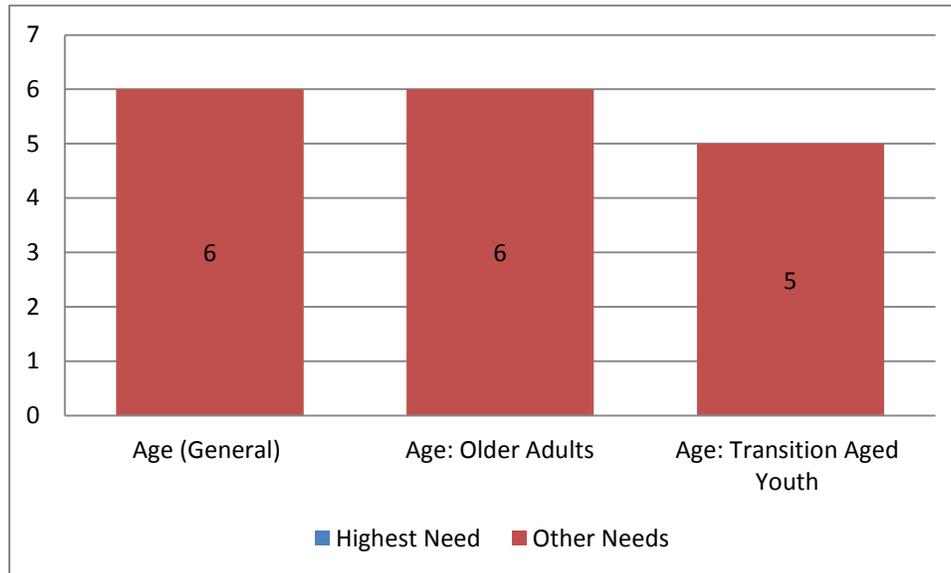
The figure above displays the composition of the gender diversity needs reported across the state. Gender was cited as an overall need (with no specification of the type of gender) six times. Of those counties that listed a need related to a specific gender, males were cited with greater frequency (nine times) than were females (four times).

Figure 43. Overall Physical/Mental Ability Needs (n=13)



Staffing needs related to physical or mental disabilities in general were mentioned 11 times. Specific citations of needs related to deaf or hard of hearing and blind populations were each made only once as a highest need.

Figure 44: Age Composition of Diversity Needs (n=17)



Staffing needs related to age in general (with no specification of age group) were mentioned six times. Staffing needs related to older adults were also listed six times. Needs related to Transition Age Youth (TAY) were cited a total of five times. Notably, none of the age diversity needs was categorized as a highest need classification.

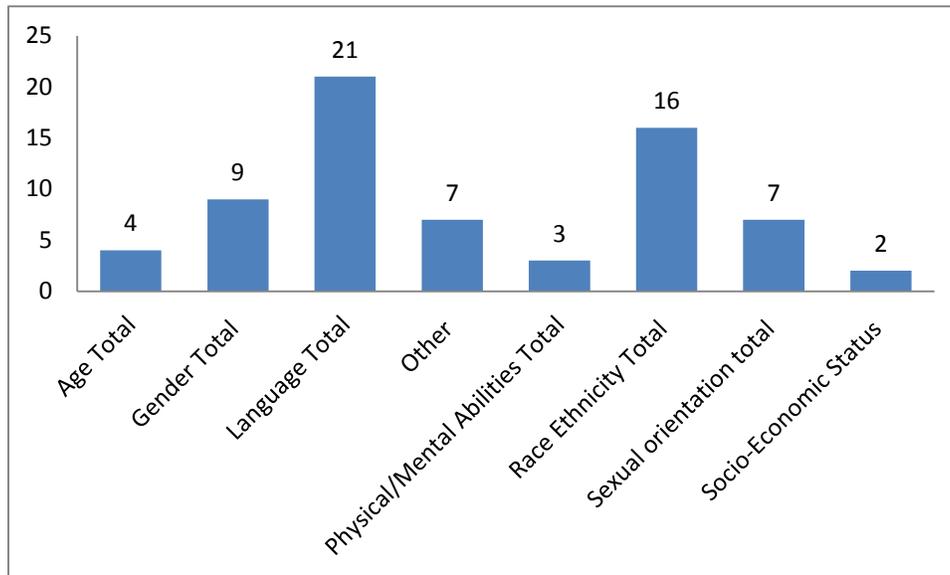


Diversity Needs by Region

The following charts depict staffing diversity needs by MHSa region.

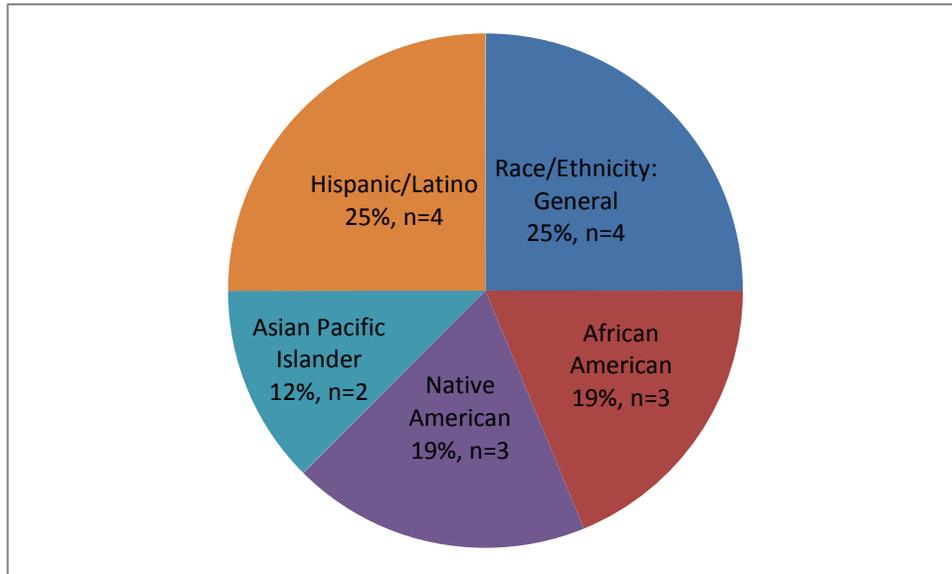
Bay Area Region

Figure 45: Bay Area Region Diversity Needs (n=69)



Counties in the Bay Area Region reported race/ethnicity diversity needs more than any other need. There was substantial variation in the race/ethnicity needs specified by different counties, as shown below. Counties in this region tended not to specify a particular age group when citing age-related staffing needs, with just one county specifying a staffing need related to Transition Aged Youth. Gender-related responses referred either to gender in general or to males. Needs related to socio-economic status were not specified, nor were needs related to physical and/or mental abilities.

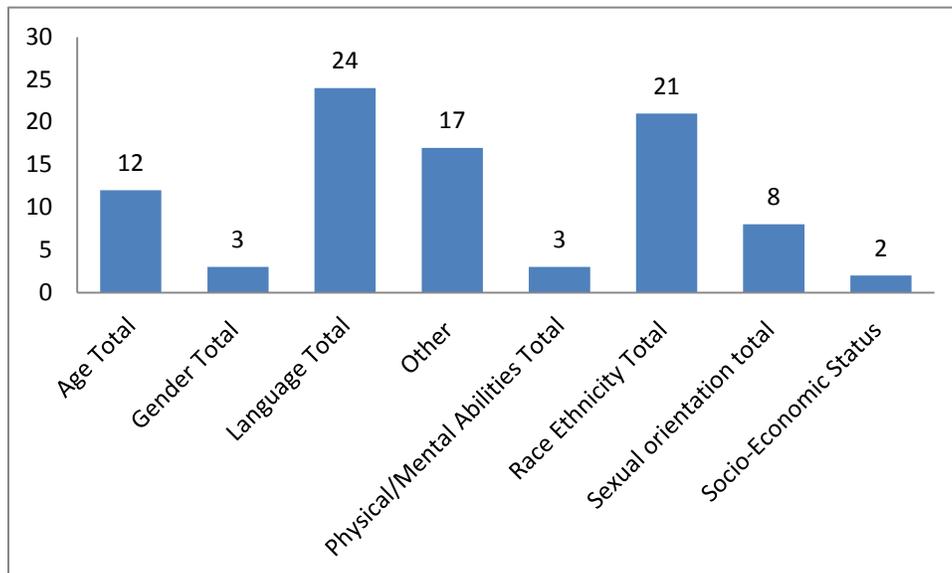
Figure 46: Bay Area Region Race/Ethnicity Needs (n=16)



The figure above depicts the specific racial or ethnic groups reported as a diversity need by Bay Area counties. General race/ethnicity needs accounted for 25% of race/ethnicity needs. Specified race/ethnicity needs in the Bay Area Region reported Hispanic/Latino needs (25%), followed by African American (19%), Native American (19%), and Asian (including Asian Pacific Islander) (12%).

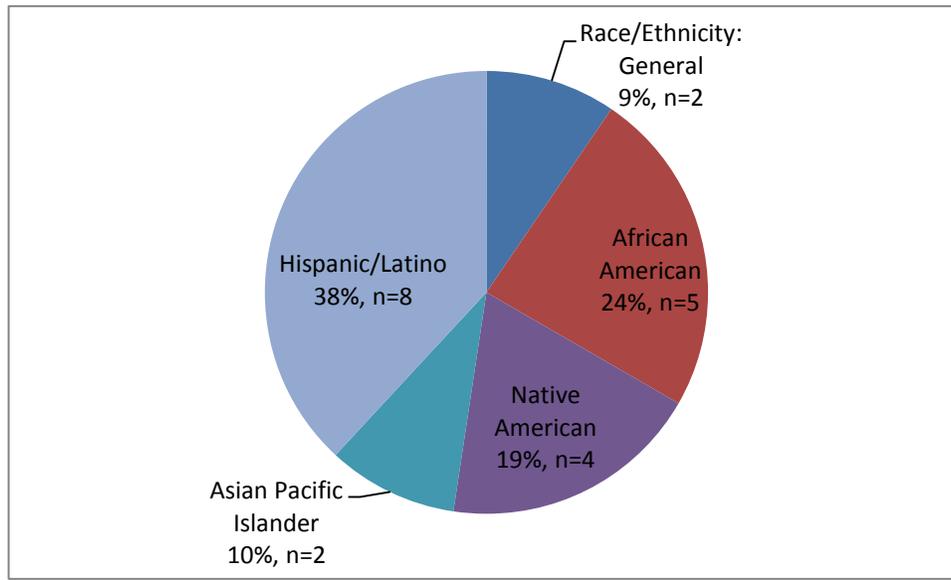
Central Region

Figure 47: MHSA Central Region Overall Diversity Needs (n=87)



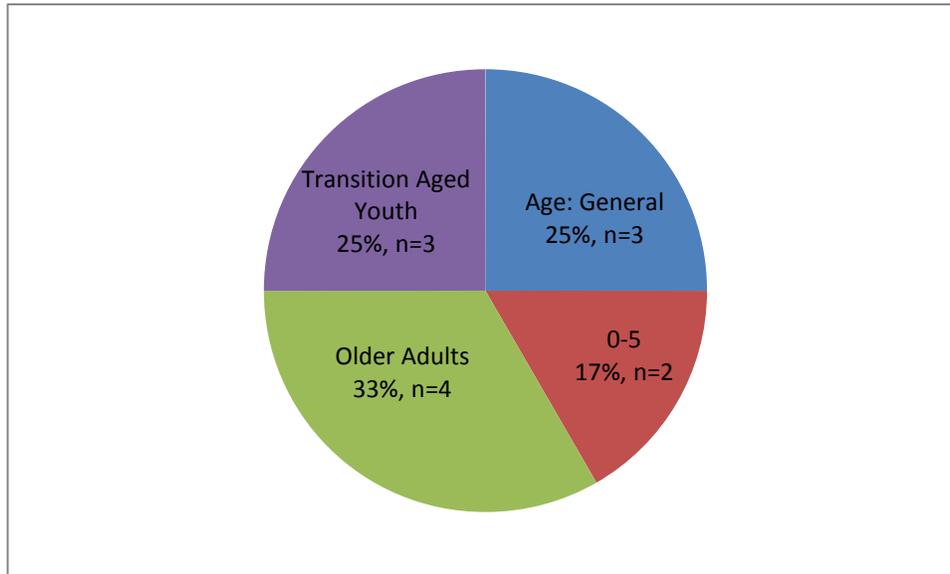
Language was the most commonly reported diversity need reported in the central region (n=24). This was followed by needs related to race/ethnicity, cited 21 times. Needs related to age were reported twelve times, sexual orientation were eight times, gender and physical/mental abilities three times each, and socio-economic status two times.

Figure 48: Central Region Race/Ethnicity Needs (n=21)



Of the race/ethnicity needs reported in the Central Region, a need for Hispanic/Latino staff was reported with the highest frequency at 38% of total race/ethnicity needs (eight counts). African Americans were the second most frequently cited population (five counts), followed by Native Americans (five counts). Asian Pacific Islanders and general race/ethnicity were each reported two times.

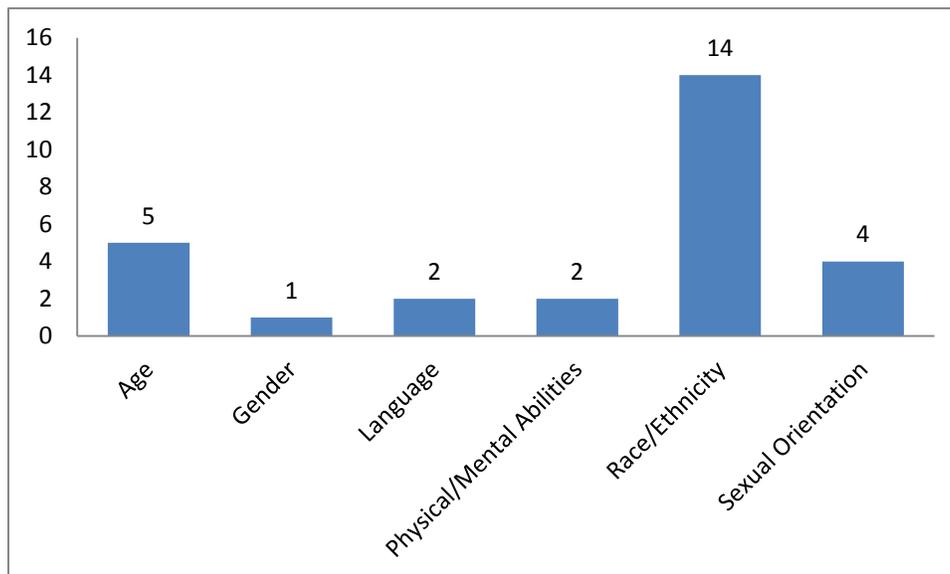
Figure 49: Central Region Age Needs (n=12)



Central region counties referred to Older Adults 33% of the time. The next highest percentages referred to Transition Age Youth and age, general, 25% of the time. Counties reported early childhood needs, or 0-5 years, 17% of the time.

Southern Region

Figure 50: Southern Region Overall Diversity Needs



Southern Region counties reported race and ethnicity needs as the most common diversity need. The composition of reported needs related to race/ethnicity is outlined below. Among the age-related needs reported, counties listed either “age” in general or “age, transition age youth”



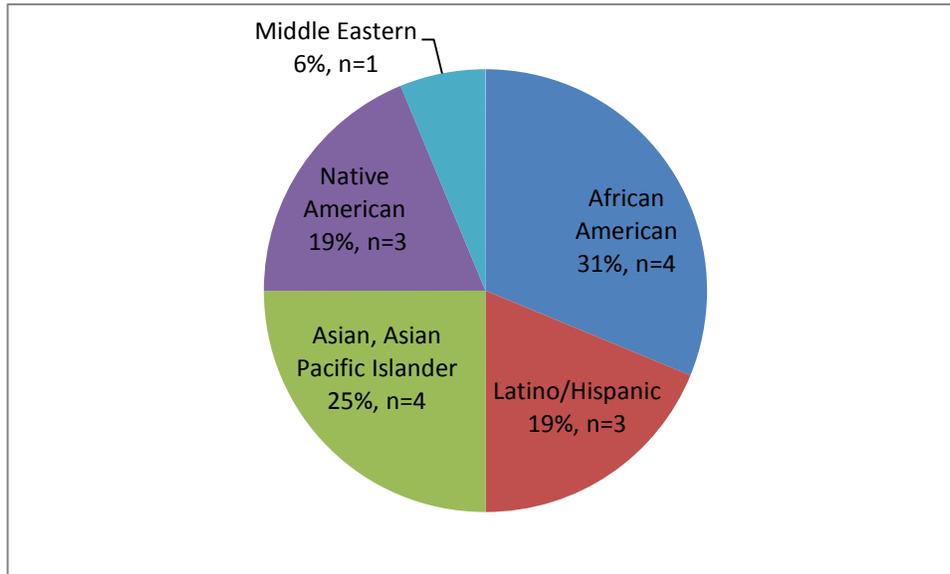
Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

(two counts). Needs related to physical or mental abilities included deaf and hard of hearing (n=2) and visually impaired (n=1). Gender was exclusively reported as “gender”. Needs related to sexual orientation, reported a total of four times, referred either to sexual orientation in general, or when specified, always to LGBTQI (Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Intersex) communities.

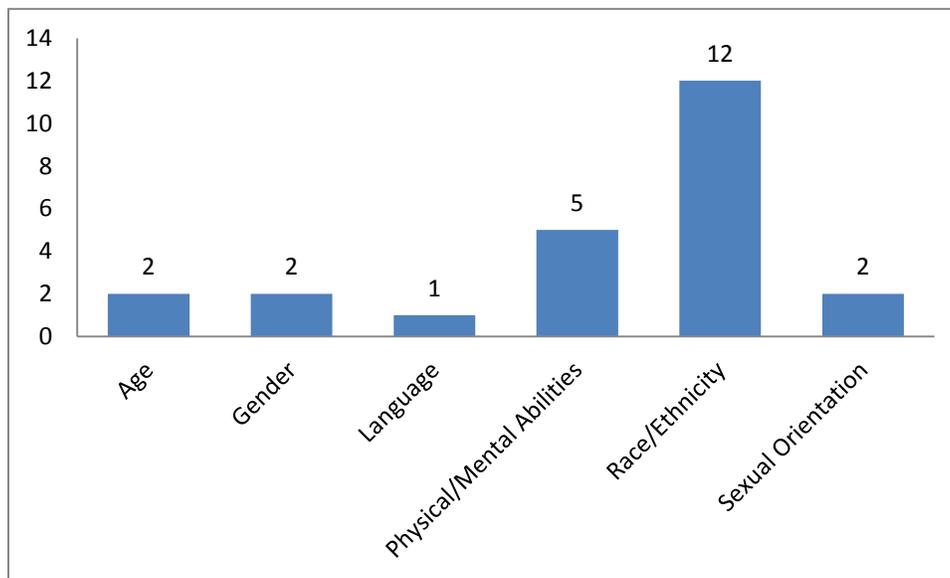
Figure 51: Southern Region Race/Ethnicity Needs (n=14)



Counties in the Southern Region reported African Americans as the most common race/ethnicity need (n=5), closely followed by Asian and Asian Pacific Islanders (n=4). Needs related to Latinos and Native Americans were each reported three times, and the Middle Eastern population was reported once.

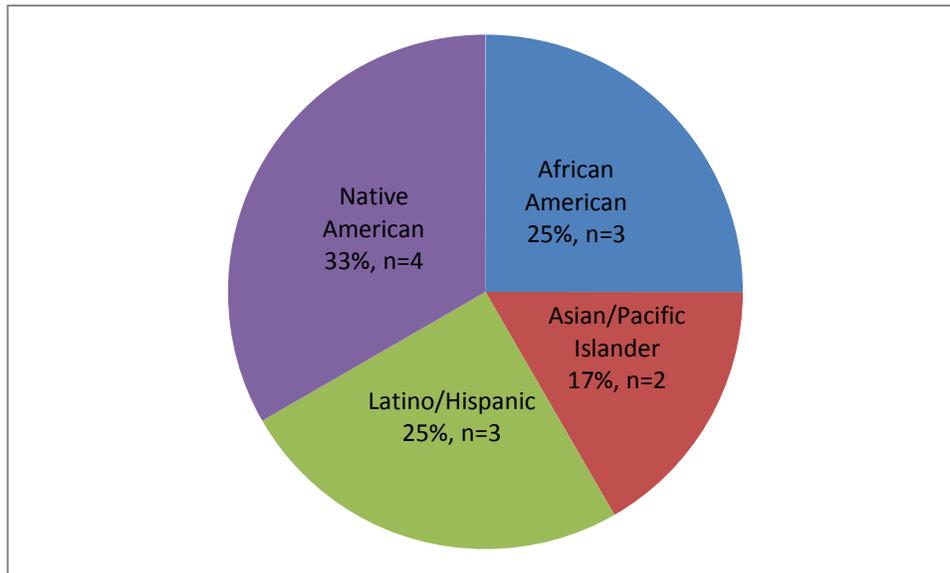
Superior Region

Figure 52: Superior Region Overall Diversity Needs (n=24)



In the Superior Region, race/ethnicity needs were reported with the greatest frequency—at least three times more frequently than other needs, including physical/mental abilities (n=5), age (n=2), gender (n=2), sexual orientation (n=2) or language (n=1).

Figure 53: MHS Superior Region Race/Ethnicity Needs (n=12)



Among Superior Region counties that specified needs related to particular racial/ethnic groups, one third of counties (33%) mentioned Native Americans. This was followed by African American and Latino/Hispanic needs at 25% each, and Asian/Asian Pacific Islander needs at 17%.

Summary

Overall, diversity needs across almost all regions showed demand for specific racial and ethnic backgrounds, as well as age experience needs. Latinos and African Americans were the overall most highly rated needs, but the “second tier” of needs for Native Americans, Asian and Asian Pacific Islanders, and Middle Eastern diversity needs was not far behind in frequency. The racial/ethnic categories listed by counties in the Superior Region were unique from the other California regions. Whereas in most other regions, Latino/Hispanic and African Americans and needs constituted the bulk of reports, in the Superior Region, Native Americans were cited at the highest frequency (33%). Asians and Asian Pacific Islanders were cited 17% of the time.

Age constituted the most frequent demand, despite never being ranked as a highest need. Counties consistently cited staffing needs related to older adults and Transition Aged Youth. This data complements the frequently reported need for Child and Adolescent Psychiatrists in the Workforce Shortages and Hard-to-Fill, Hard-to-Retain sections of this report.



A few counties cited socio-economic status as a need. Likewise, sexual orientation (which when specified almost always referred to LGBTQI communities), was infrequently cited as a diversity need and was never cited as a highest need.

Language Needs

Sources & Limitations

Counties were asked directly in the County-Reported Needs Assessment to list their workforce language needs. This data is analyzed below by overall statewide language needs, trends by MHSR region, and trends by county size.

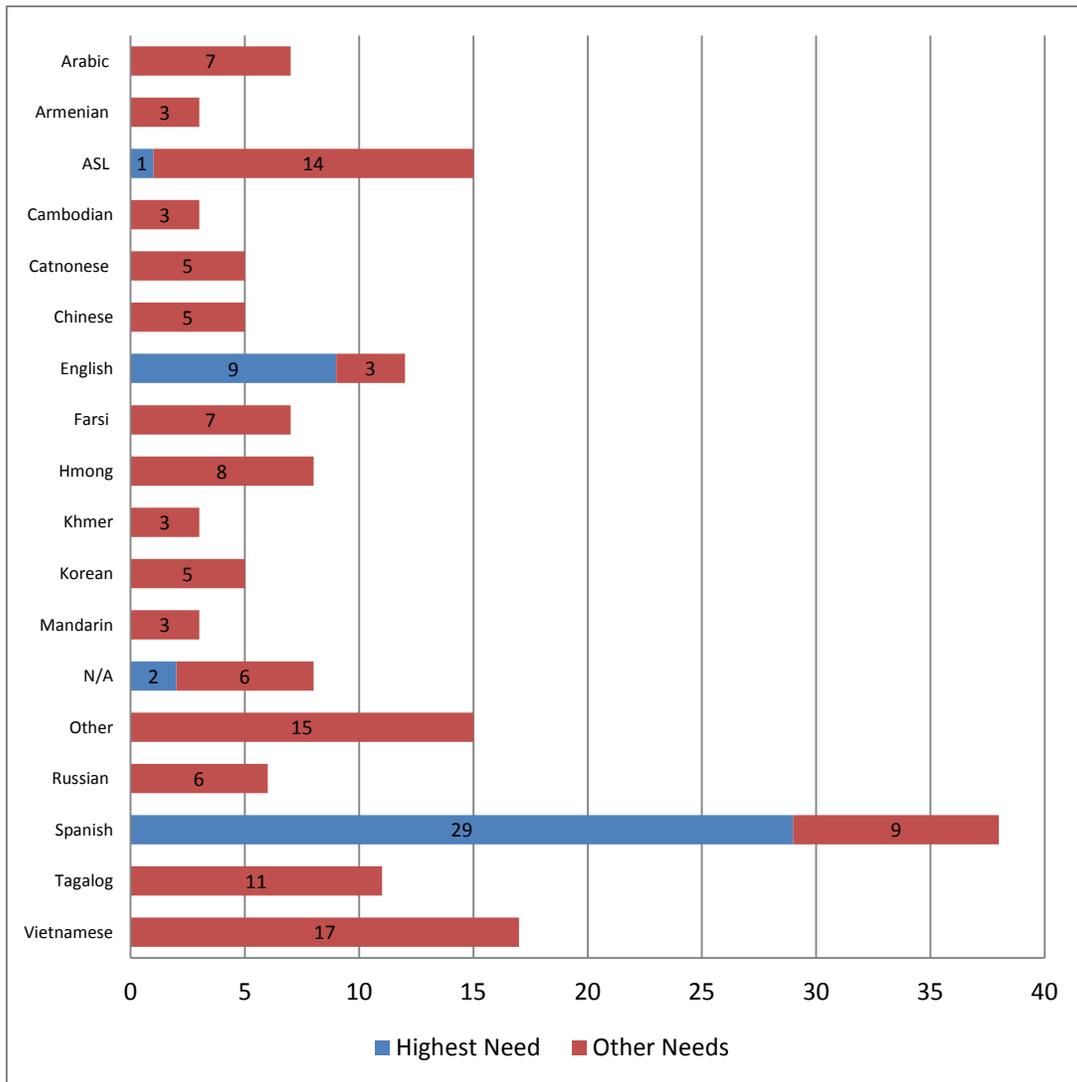
Other data sources explore language needs, including the Community Forums and to some extent the County Annual Updates. Counties were not specifically prompted to report on language needs within the Annual Updates, but some counties reported on language recruitment and training programs. These reports speak to some counties' identification of specific language needs and progress on those needs. However, the lack of consistency in reporting on language-related needs or initiatives precludes analysis here. Community Forums data also provided limited information of counties' language needs.

Using the County-Reported Needs Assessment data, statewide language needs are depicted in the chart below. As in earlier sections, the blue shading represents counties listing a particular language as the *number one* need, while red shading represents instances where a language was listed but not as the highest need.

Spanish was by far the highest and most frequently cited need, surpassing the second most frequently cited language need (Vietnamese) by over 20 counts. In addition to Vietnamese, Sign Language (ASL) was also frequently cited (15 counts). Interestingly, English was also cited with some frequency.¹¹

¹¹ Suggesting either that counties listed out their consumers' most frequently used languages, or perhaps there is an influx of non-English speakers into the mental health workforce. Any of these trends could be explored in the ensuing phases of the project.

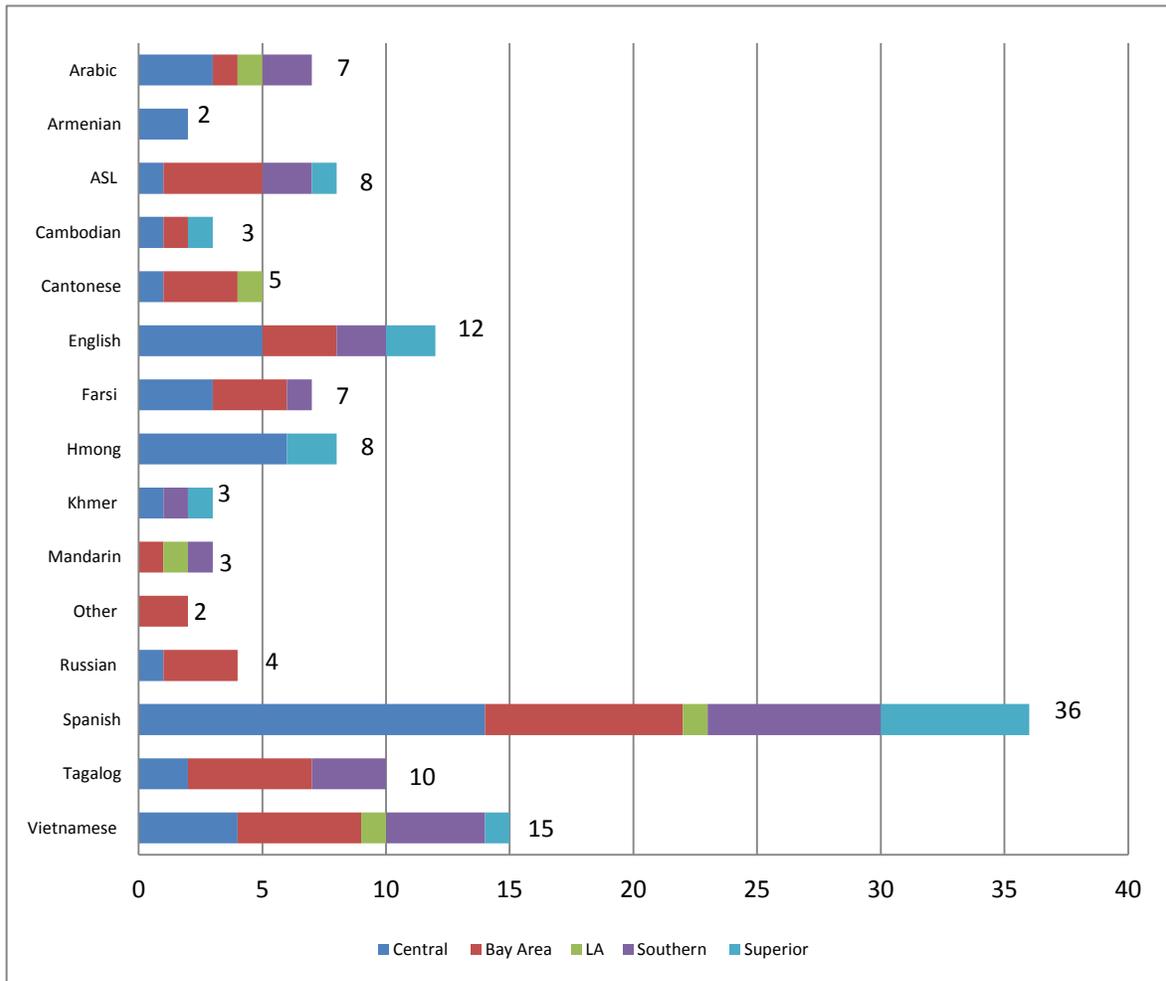
Figure 54: Overall Language Needs (n=171)



Trends by Region

Language needs have many similarities and differences across MHSAs regions, as detailed in the figures below.

Figure 55: Overall Language Needs by MHSAs Region (n=171)

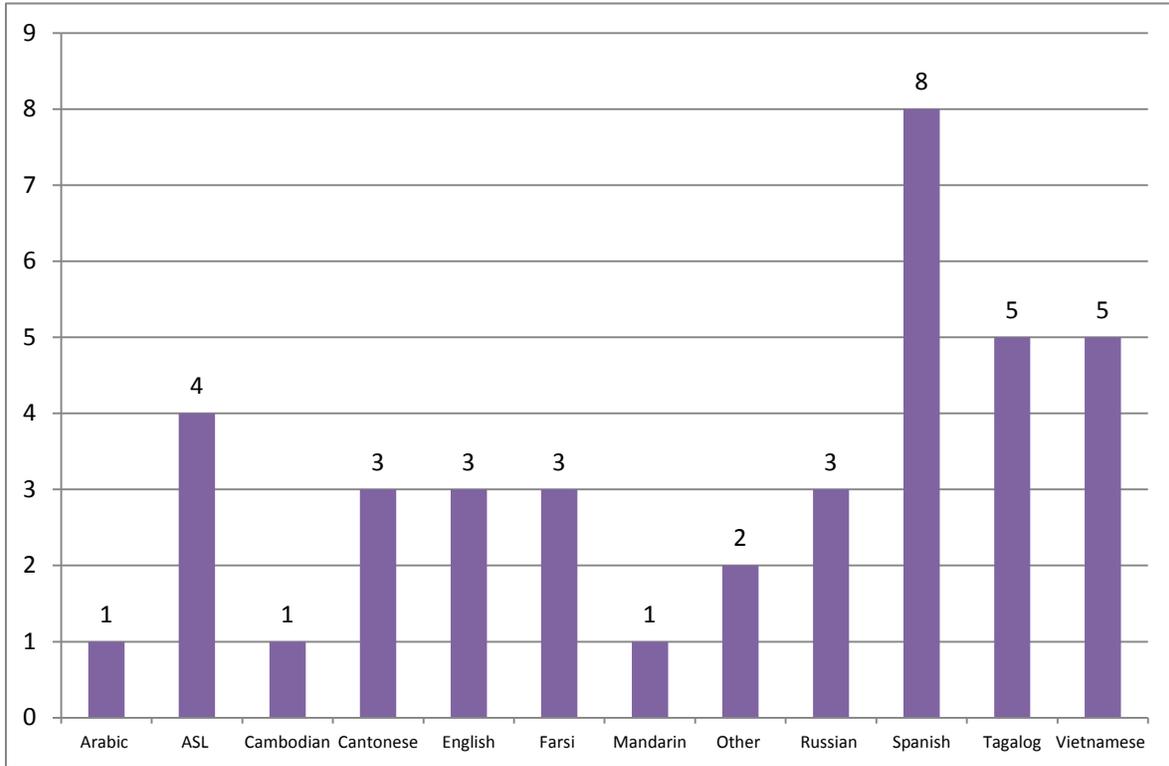


The figure above depicts counts of language needs by MHSAs region. Across all regions, Spanish was the most frequently cited need.



Bay Area Region

Figure 56: Bay Area Region Language Needs (n=39)

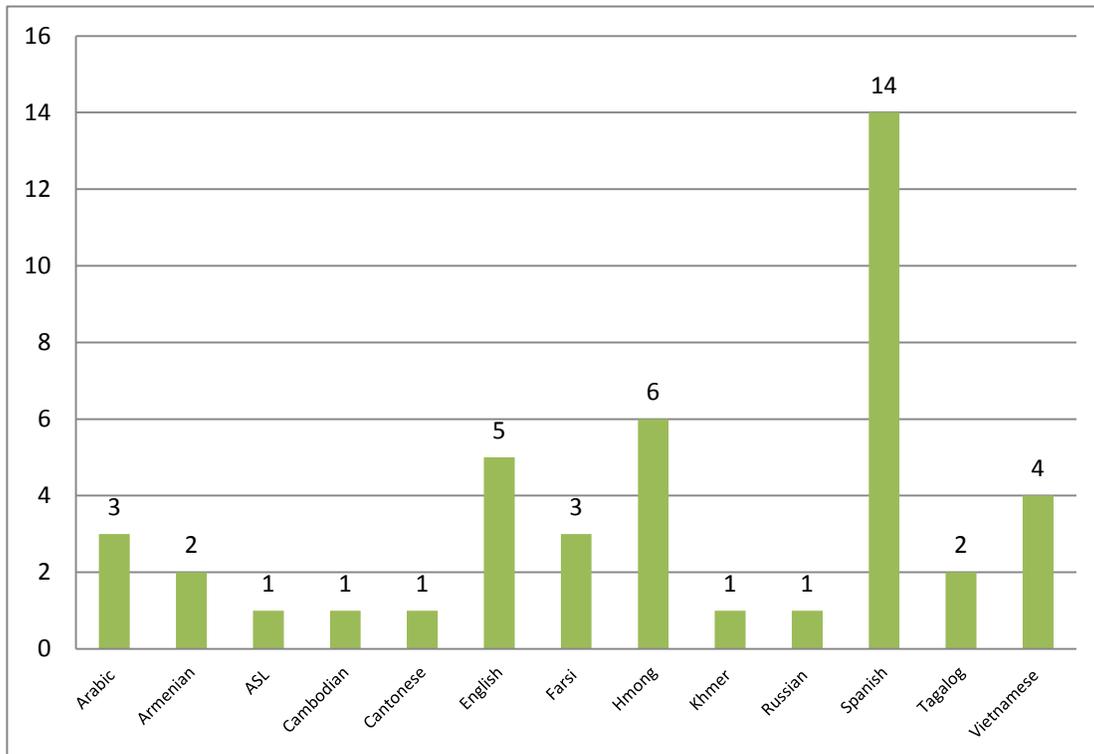


Spanish was the most frequently cited language need in the Bay Area Region, reported eight times. This was followed by Tagalog and Vietnamese, each reported five times. ASL was reported four times, while remaining languages were reported three times or fewer.



Central Region

Figure 57: Central Region Language Needs (n=44)

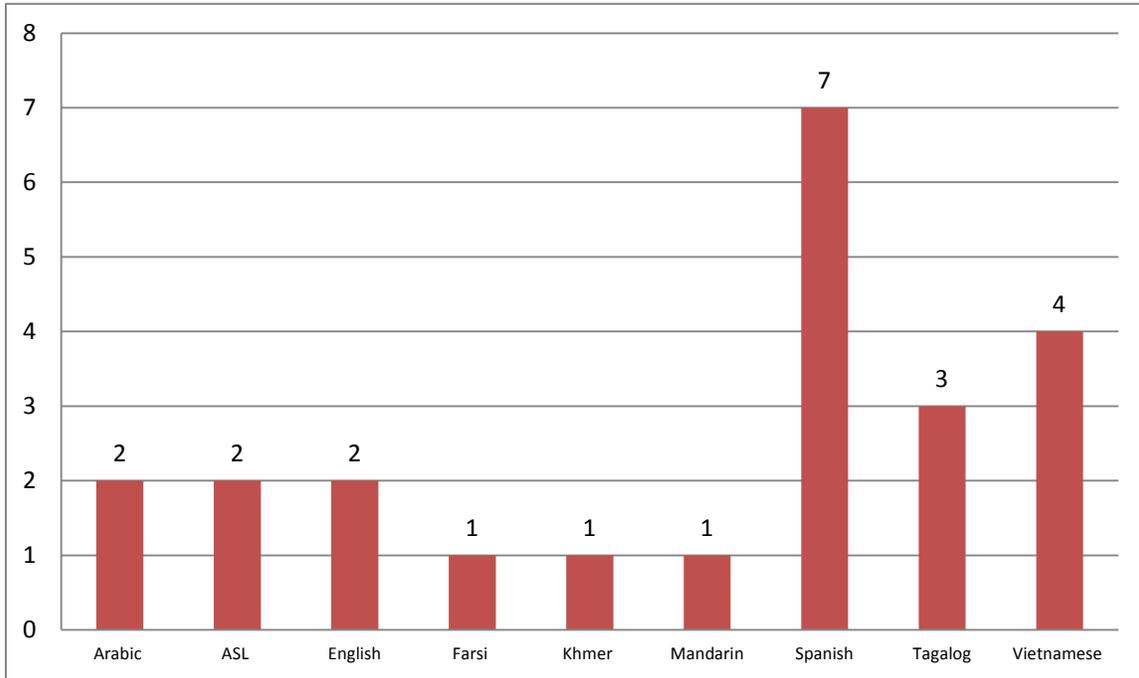


Counties in the Central Region most frequently cited Spanish as a language need, with Hmong, English, and Vietnamese reported as other common need languages. Arabic and Farsi were also cited, representing some of the Middle Eastern language needs. ASL, Cambodian, Cantonese, Khmer, and Russian were each cited once.



Southern Region

Figure 58: Southern Region Language Needs (n=23)

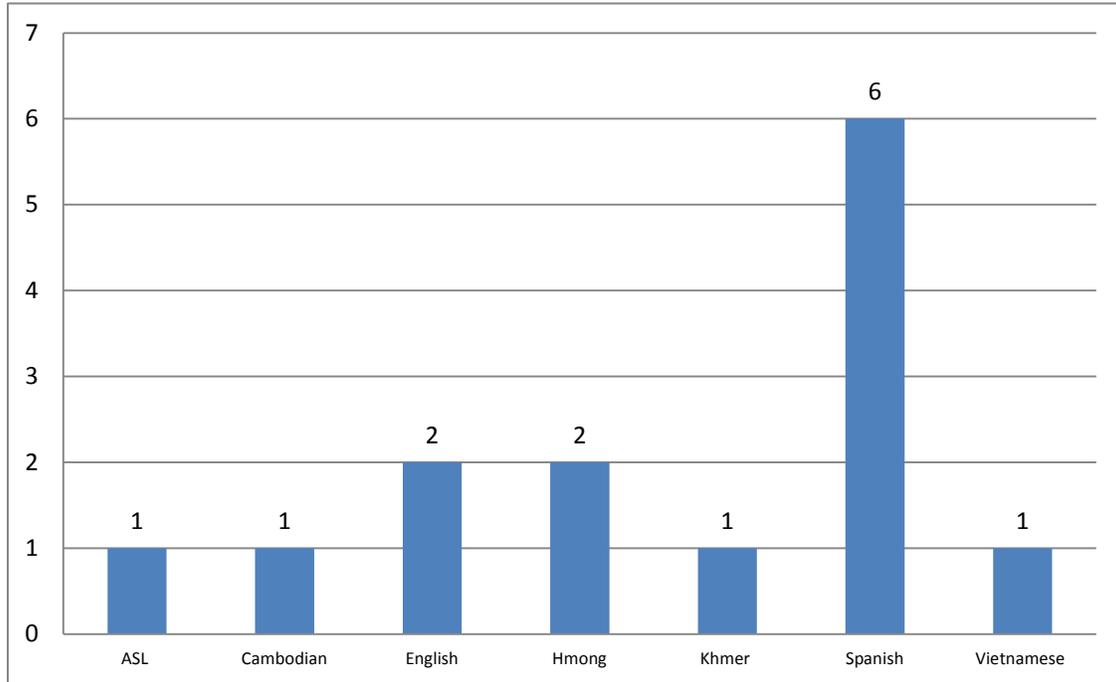


Spanish constituted the most commonly reported language need in the Southern Region. Vietnamese and Tagalog were cited at the second highest needs, while Arabic, ASL, English were each cited twice.



Superior Region

Figure 59: MHSA Superior Region Language Needs (n=14)

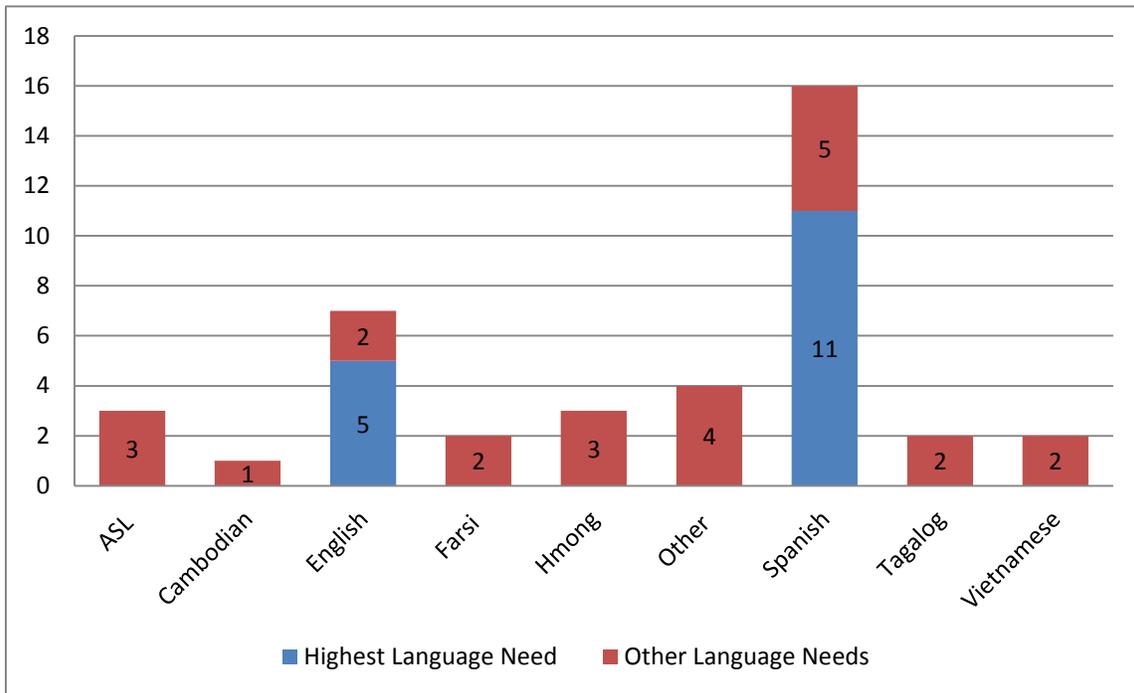


In the Superior Region, counties were consistent with the California trend of Spanish appearing as the highest frequency need. English and Hmong then represented the second most frequently cited language needs, followed by ASL, Cambodian, Khmer, and Vietnamese. Interestingly, with the exception of Spanish and English, the MHSA Superior Region counties cited exclusively Southeast Asian languages.

Trends by Size

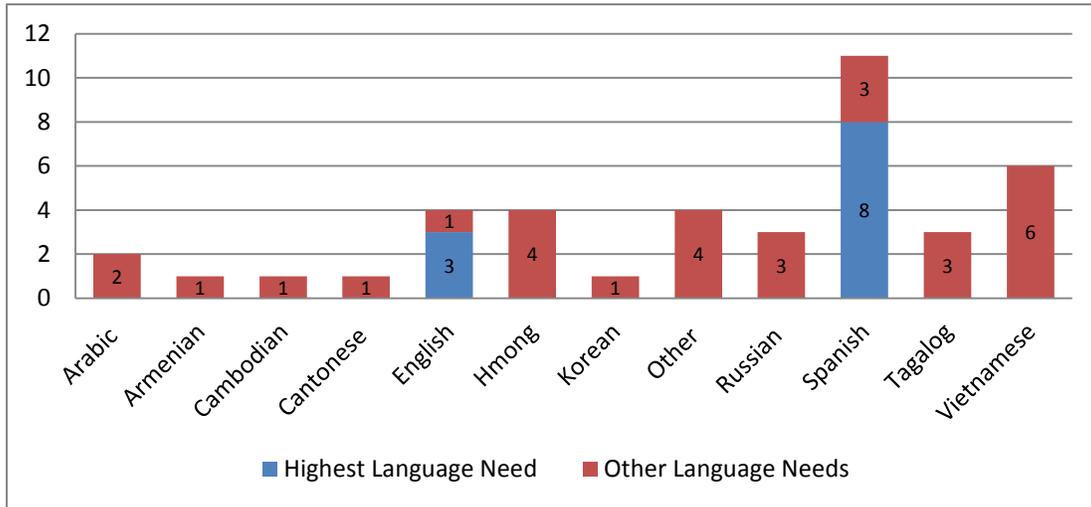
The following charts present reported language needs according to county size. As in previous sections, blue shading represents highest-need reports, while red shading represents reports other than highest need. Across all county sizes, Spanish was the most commonly cited need.

Figure 60: Language Needs of Small Counties (n=40)



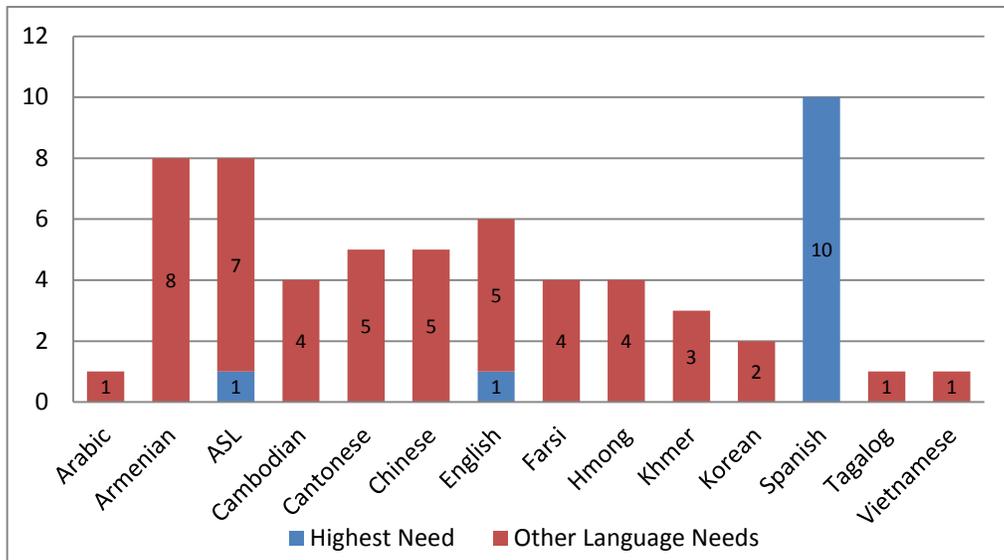
Among small counties, Spanish and English were cited as the highest language needs. Sign Language, Hmong, and Other languages were cited second most frequently, while Tagalog, Vietnamese, Farsi, and Cambodian represented other needs.

Figure 61: Language Needs of Medium Counties (n=41)



Among medium counties, both Spanish and English were again cited as the highest need languages. Vietnamese, Tagalog, Russian, Hmong, and Arabic were reported in the mid-range frequency among other needs. Armenian, Cambodian, Cantonese, and Korean were each reported once among other needs.

Figure 62: Language Needs of Large Counties (n=64)



Spanish was the highest and most frequently reported need in large counties, cited 10 times. ASL and Armenian were also commonly reported (8 times), followed by Chinese, English, Cambodian, Farsi, and Hmong. Khmer, Korean, Arabic, Tagalog, and Vietnamese were each mentioned three times or fewer.



Summary

Spanish language needs are in highest demand across the state. Spanish was consistently identified as a language need when stratifying the counties by both MSHA regions and the various county sizes.

Positions for Consumer and/or Family Members

Sources and Limitations

The County-Reported Needs Assessment, County Annual Updates, and Community Forums provide feedback and information on opportunities for consumer and/or family members. This analysis focuses on the County-Reported Needs Assessment, and a subsequent deliverable will explore the data collected in Community Forums. The County Annual Updates provided very different types of information on Consumer and/or Family member opportunities, making a systematic analysis virtually impossible. Some counties chose to provide qualitative stories of how consumers and/or family members are currently being integrated into county employment, others chose to share the challenges and barriers to integrating consumer and/or family members, and some did not report on this topic at all. As a result of the wide variation in data reporting in the County Annual Updates, the information in the Annual Updates is not analyzed in this report. The focus instead is on the data in the County Reported Needs Assessment, as outlined below.

In the County-Reported Needs Assessment, counties were prompted to provide descriptions of any currently designated positions and specific roles for consumer and/or family member positions. Counties were also asked to provide a description of future roles that consumers and/or family members could fulfill in their county.

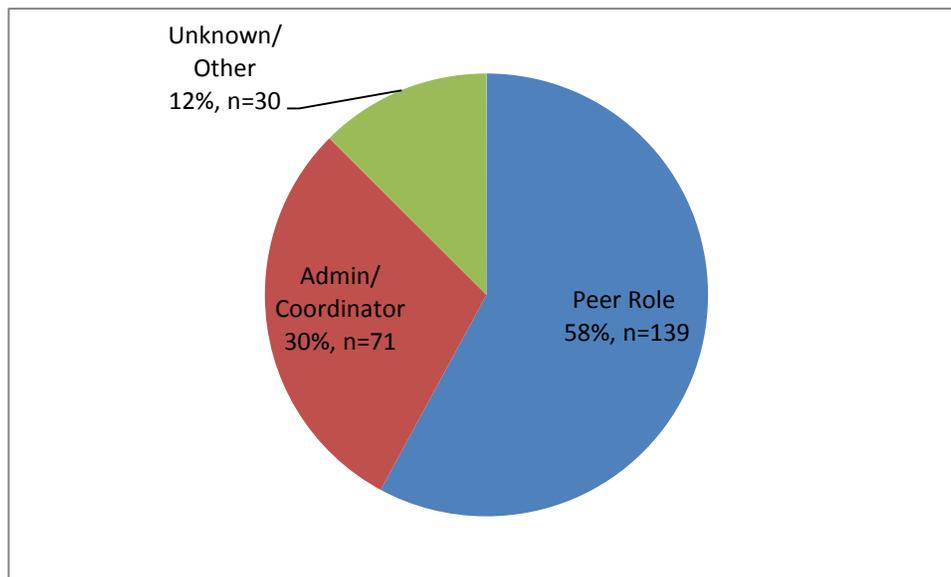
Counties responded in a variety of forms. Some responded in list form with titles only, so an answer may look like “Peer Specialist,” or “Mental Health Specialist.” Some included descriptions along with titles, such as the location of the position (e.g., Wellness Centers, Behavioral Health department).

In order to proceed with the data, RDA constructed the following set of rules to consistently assess counties’ diverse set of responses. First, if the reported title was ambiguous, such as Mental Health Specialist, and without a description, the position was classified as a Peer. This decision was based on the Annual Update descriptions of how consumer and/or family members are most typically engaged as specialists. Second, when counties did disclose job descriptions, position descriptions often diverged from the OSHPD classifications of Designated Consumer and/or Family Member Position types (Direct Service Provider, Training and Education, Advocacy, and Administrative/Policy and Planning). Position descriptions appeared to fall into two categories, representing direct service and administration roles. For the purpose of analysis we thus condensed the OSHPD categories into two classifications: “Peer,” which indicates any type of support, training, or coordination of peer programs; and “Administrative/Clerical,” which refers to non-service positions.

Counties also varied in how they quantified the types and number of positions available, with only some specifying an exact number of available positions available. Given the differences in how data were reported, two separate analyses are presented below—one set with the quantified data, and one set with the unspecified data. The latter is meant to provide a sense of counties where there were positions available, but where it would be methodologically unsound to assign an exact number of positions.

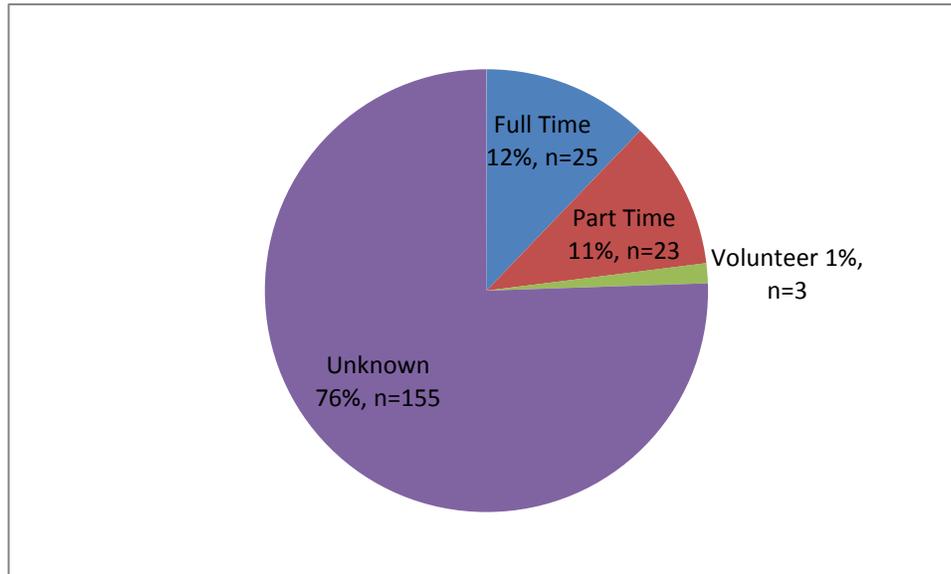
Finally, some counties reported certain positions filled by consumers and/or family members that were not included in the designated list of positions. To understand the extent to which consumers and/or family members were represented in designated versus non-designated positions in the county, RDA has analyzed those separately as well. Since the prompt asked for designated positions, they are assumed designated unless otherwise specified.

Figure 63: Role Type of Consumer and/or Family Member Positions (n=240)



As the chart above shows, a majority of the available consumer and/or family member positions were Peer positions (58%). Peer positions included any peer support, peer specialist, peer advocate, parent advocate, cultural specialist, or other service-related position. Another 30% of consumer and/or family positions were categorized as Administrative or Clerical. These positions included office support, technical support, transportation support, or administrative roles such as receptionists. The remaining 12% of consumer and/or family member positions were classified as “Other or Unknown.” RDA used this categorization when counties reported that they had designated consumer and/or family positions but did not specify any other information.

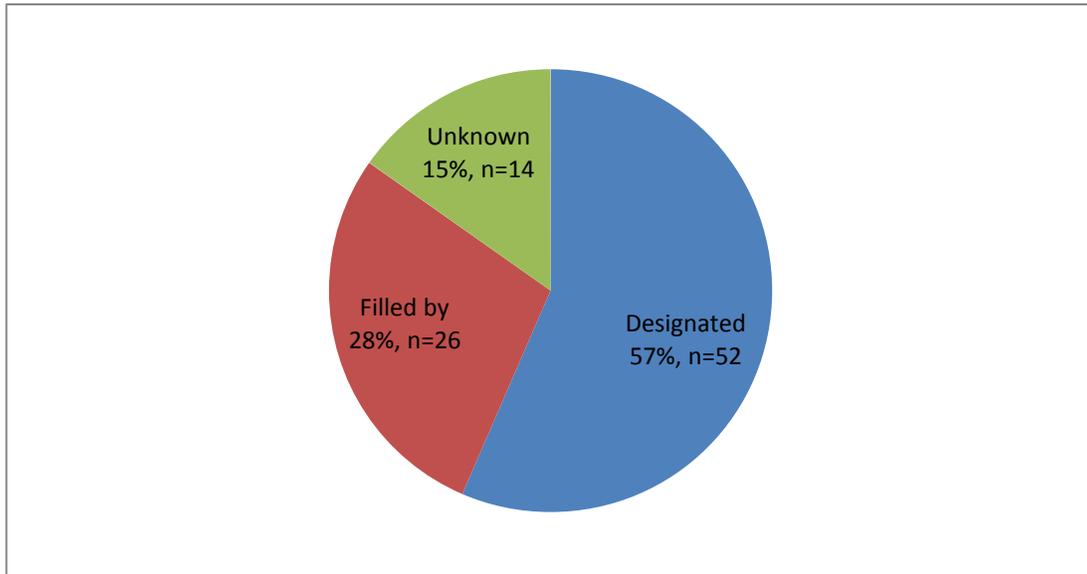
Figure 64: Consumer and/or Family Member Positions by Employment Type (n=205)



The strong majority of listings for Consumer and/or Family Member positions did not specify the employment type, whether full time, part-time, or volunteer, of the position. Among the times that it was designated, 12% of the overall consumer and/or family member opportunities were listed as full time, 11% as part time, and 1% as volunteer positions.

Twenty-five percent of responding counties discussed the importance of a peer certification program in the Statewide Recommendations section of the County-Reported Needs Assessments. For example, one county wrote, “Having a California State standard, so that the credential is applicable across counties and represents the same core knowledge, would benefit this process, and avoid duplication of efforts or a smattering of credentials that may or may not have county reciprocity. The qualifications to test for certification should include a period of mentored practice, similar to the supervision requirement of licensed therapists. Upon development of such certification, training standards could also be developed as well as the related supports to encourage peers to study and become certified.” Another county wrote, “Develop state wide certification for Peer Support Specialists which would provide standards for qualifications, training, and billing capability.”

Figure 65: Designation Status of Consumer and/or Family Positions (n=92)



Many counties noted that they did not have positions specifically designated as Consumer and/or Family Member positions, but that they did have consumers and/or family members currently working in the county or in a county agency. Those distributions are captured here. Fifty-seven percent of the Consumer and/or Family Member positions listed were specifically designated by counties for consumer and/or family members. Twenty-eight percent of the positions listed were not explicitly designated as Consumer and/or Family Member positions, but were being filled by consumers/family members at the time of data collection. 15% of listed consumers and/or family member positions were unknown.

Unknown includes instances where counties reported, “Our wellness center hires peers,” – but without any specific designations of the number or type. Unknown also includes other instances, “We have plans to hire more peers in the future,” or when county listed “peer specialists” without a specific number. Since the calculations rely on percentages of the total, assigning numbers to those “unknowns” would have skewed the data.

Projected Workforce Availability

Across California, there are numerous educational institutions that confer degrees and certificates in mental health-related programs. Graduates from these programs represent prospects for entering the public mental health workforce, and are thus warrant examination when analyzing workforce needs and resources. Below are maps of California indicating: (1) the geographic distribution of educational programs conferring mental health-related degrees and certificates; (2) the geographic distribution of program graduates across the state; and (3) the distribution of graduates by mental health program type. The geographic locations of graduates’



degree or certificate-conferring educational institutions serve as the bases for populating all of the maps below, and geographic data are presented both by MHSAs region and by county.

See Appendix 8 for tables with lists and counts of all postsecondary educational institutions in the IPEDS 2012 dataset that have mental health-related programs. The numbers of graduates from each educational institution across the various types of mental health programs are also included in these tables.

The IPEDS data source comes with a set of limitations. In brief, those limitations are: (1) IPEDS data does not include current enrollment rates or program capacities at postsecondary institutions; (2) the entry of service providers into the public mental health workforce cannot be determined by the IPEDS data; (3) IPEDS data does not designate the sub-specialties of “Medicine” pursued by graduates; and (4) IPEDS data only includes those postsecondary educational institutions that participate in federal student financial aid programs. Please refer to the IPEDS description in the Data Sources & Methodology section of this report for more detailed descriptions of limitations with the IPEDS data source.

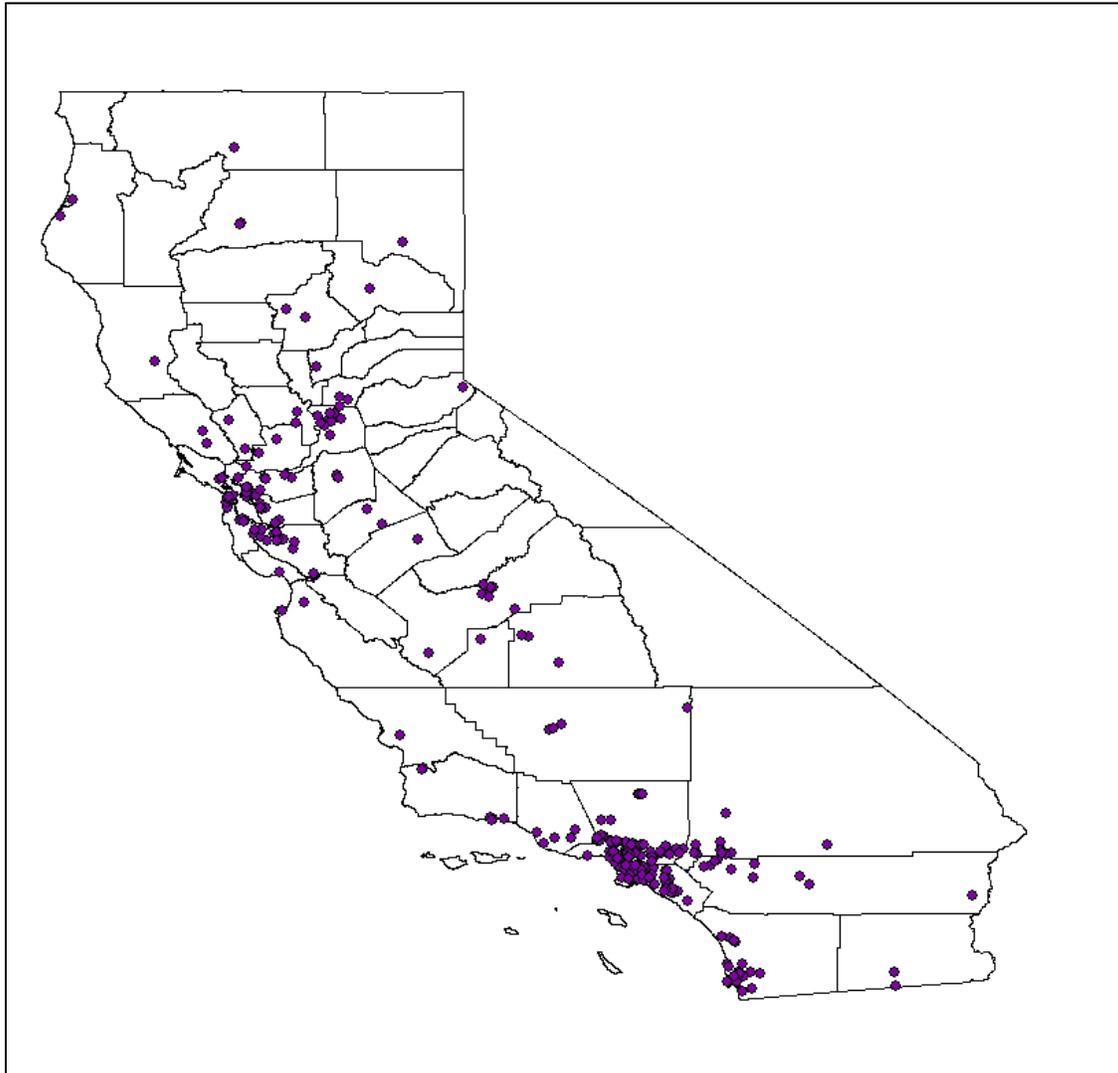
The color shading of counties in the figures below is based on one-fourth divisions of the respective data. The highest value of the respective data is divided into fourths. Divisions were then created from those one-fourth cutoff values. Counties in the highest fourth are in the darkest shade of blue; counties in the third-highest fourth are in the next darkest shade of blue; and so on. Counties that either did not have any educational institutions reporting data to IPEDS or did not have educational institutions conferring the mental health-related degrees/certificates that were selected for in these analyses are labeled as “Not Available.”

The color shading of regions in the figures below is based on rank-ordering of the regions by frequency of the respective data. The MHSAs Region with the highest value for the respective data is in the darkest shade of blue; the region with the next highest value for the respective data is the next darkest shade of blue; and so on. Each region’s data is the sum of data from all of the counties in that MHSAs region.

Overall Trends

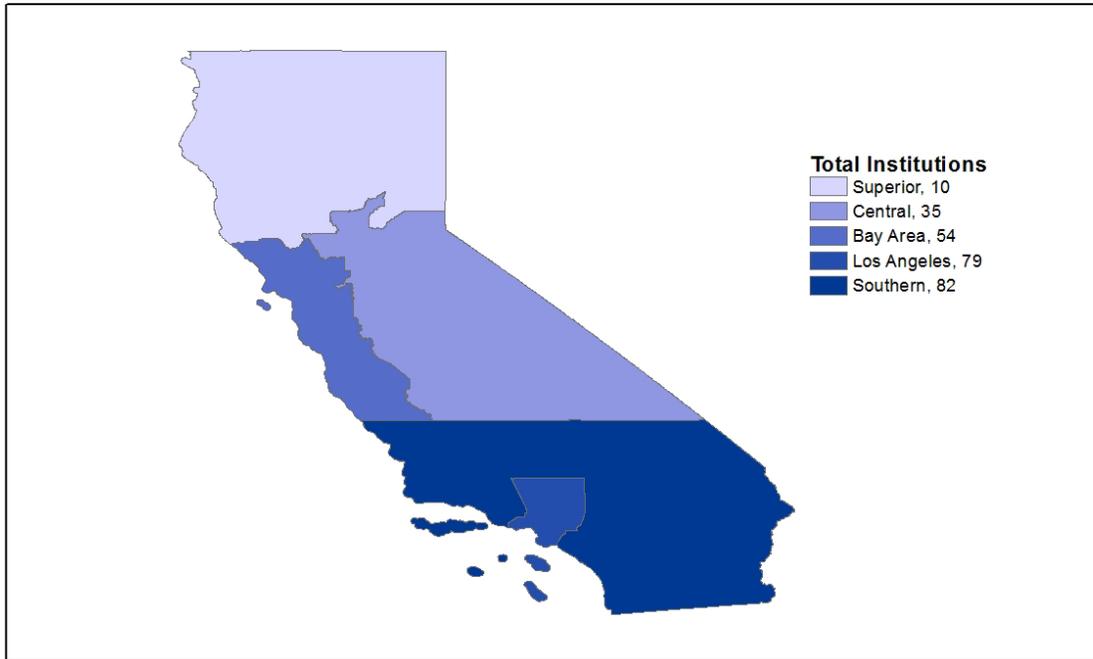
Trends of Educational Institutions

Figure 66: Educational Institutions Statewide



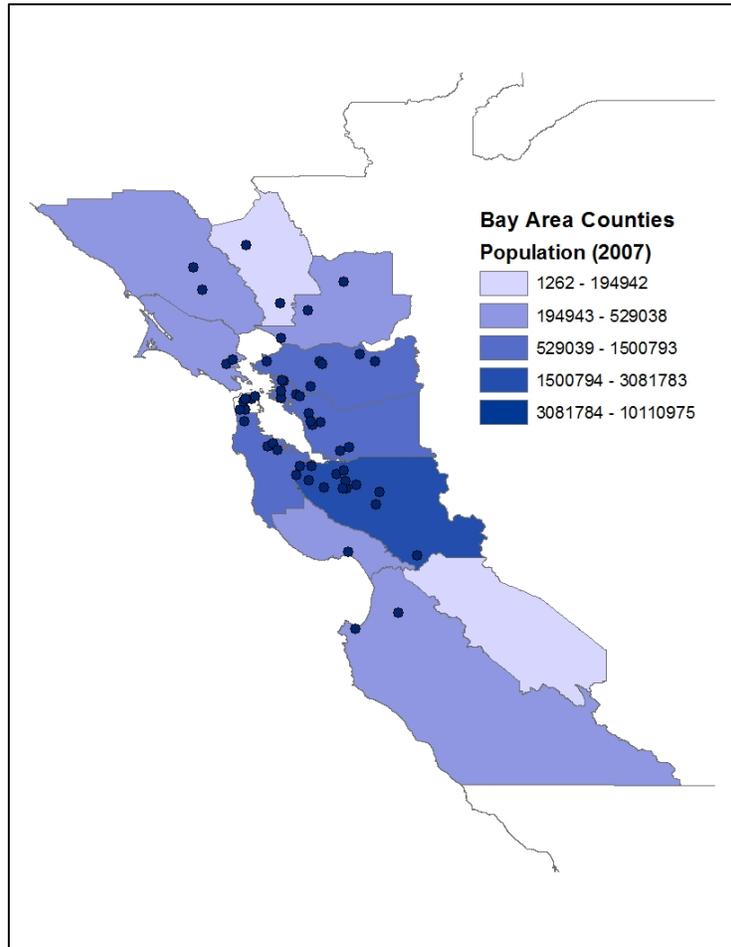
The map above shows the geographic distribution of postsecondary educational institutions with mental health-related programs across California. Large concentrations of educational institutions are located in the Bay Area, Central, and Los Angeles regions.

Figure 68: Educational Institutions by MHSR Region



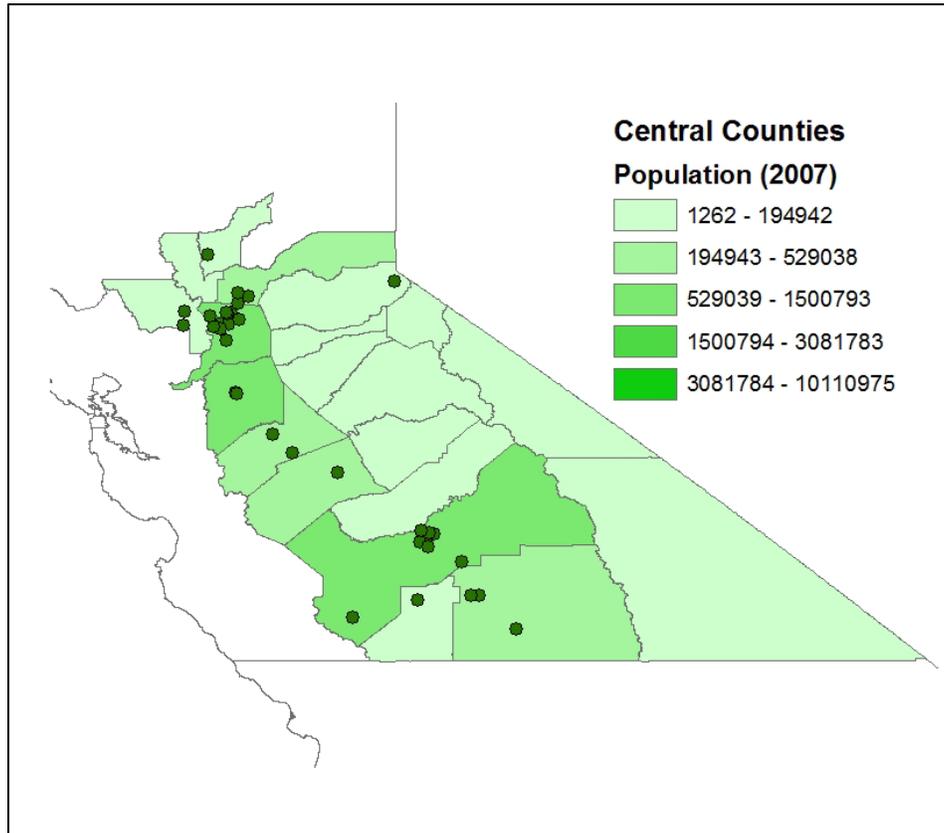
When looking at the number of educational institutions by region, the MHSR Southern Region had the highest number of educational institutions conferring mental health-related degrees and certificates (n=82). The Los Angeles Region was a close second, with 79 educational institutions. The numbers of institutions in the remaining regions were far lower, with 54 institutions reported in the Bay Area Region, 35 in the Central Region, and 10 in the Superior Region.

Figure 69: Bay Area Region Educational Institutions



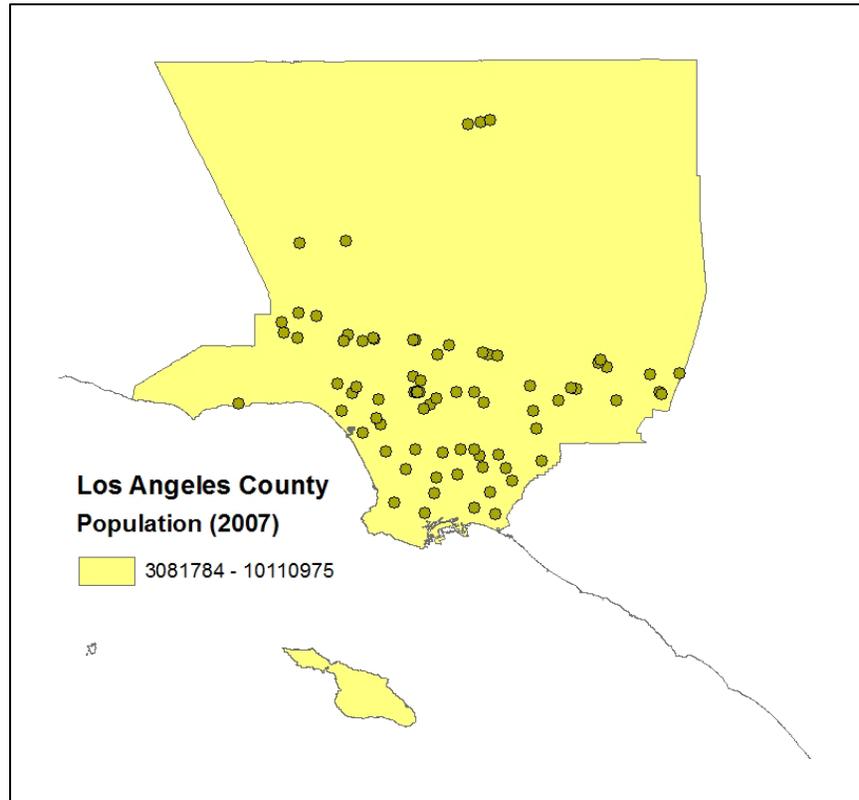
The map above shows the geographic distribution of postsecondary educational institutions with mental health-related programs across the Bay Area region. Additionally, the map shows the density of the each county in the Bay Area region. The more densely populated counties contain the higher number of educational institutions.

Figure 70: Central Region Educational Institutions



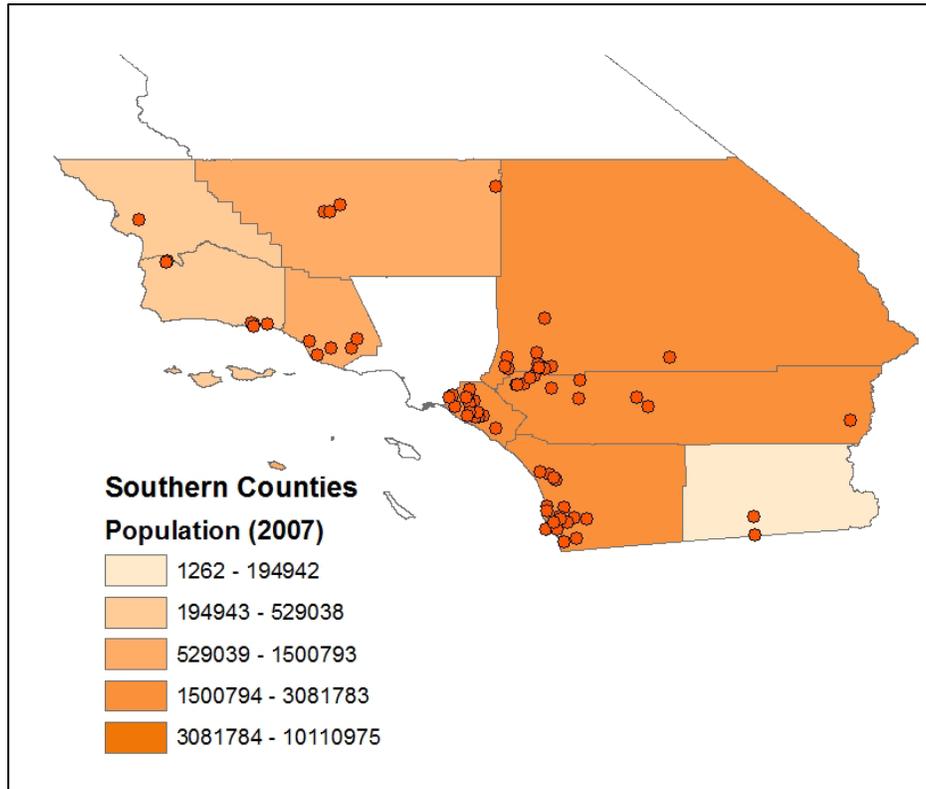
The map above shows the geographic distribution of postsecondary educational institutions with mental health-related programs across the Central region. Additionally, the map shows the density of the each county in the Central region. The more densely populated counties contain the higher number of educational institutions. All but one of the region’s educational institutions are located in the western side of the region.

Figure 71: Los Angeles Educational Institutions



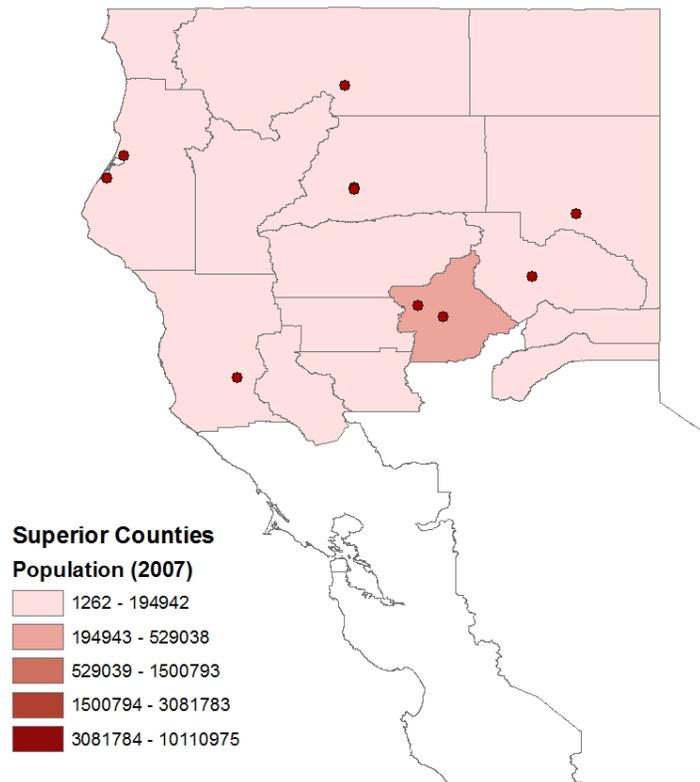
The map above shows the geographic distribution of postsecondary educational institutions with mental health-related programs across the Los Angeles region. Most of the educational institutions are located in the southern part of Los Angeles County.

Figure 72: Southern Region Educational Institutions



The map above shows the geographic distribution of postsecondary educational institutions with mental health-related programs across the Southern region. Additionally, the map shows the density of the each county in the Southern region. The more densely populated counties contain the higher number of educational institutions. The majority of the region’s educational institutions are located on the western side of the region.

Figure 73: Superior Region Educational Institutions

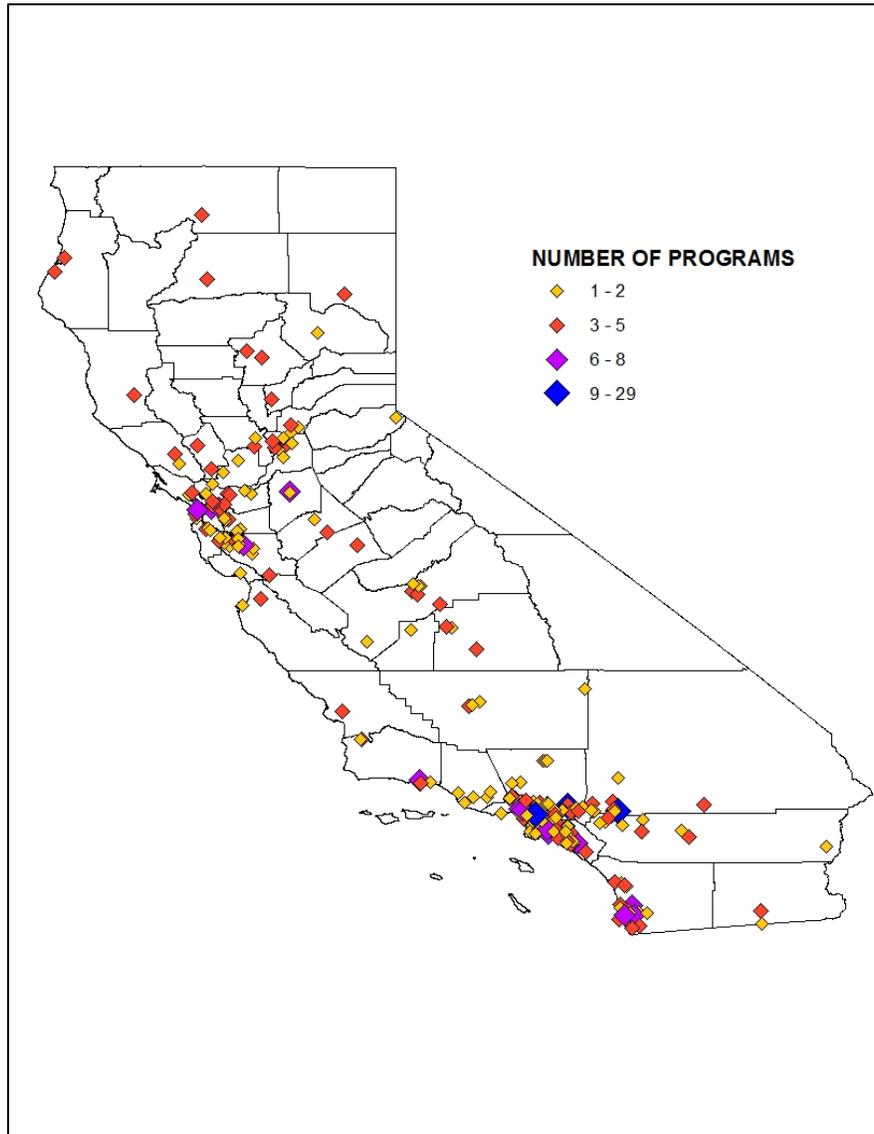


The map above shows the geographic distribution of postsecondary educational institutions with mental health-related programs across the Superior region. Additionally, the map shows the density of the each county in the Superior region. There is a low number of educational institutions in the Superior region.

Trends of Degree/Certificate Programs

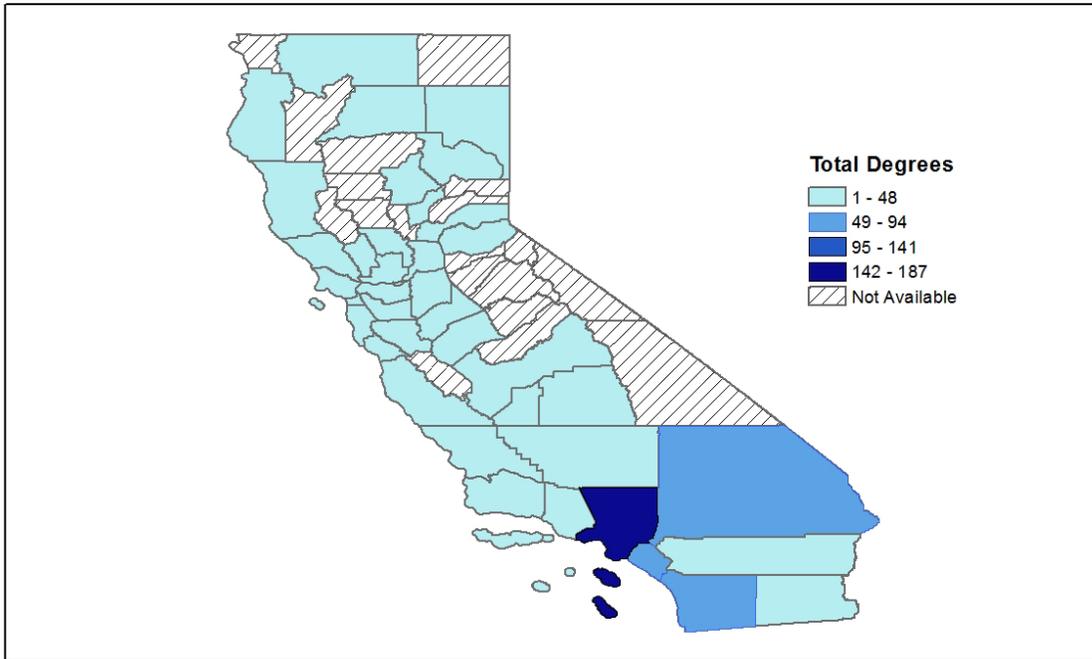
Data on degree and certificate programs differ from data on educational institutions, as educational institutions may have more than one degree or certificate program.

Figure 74: Number of Programs Statewide



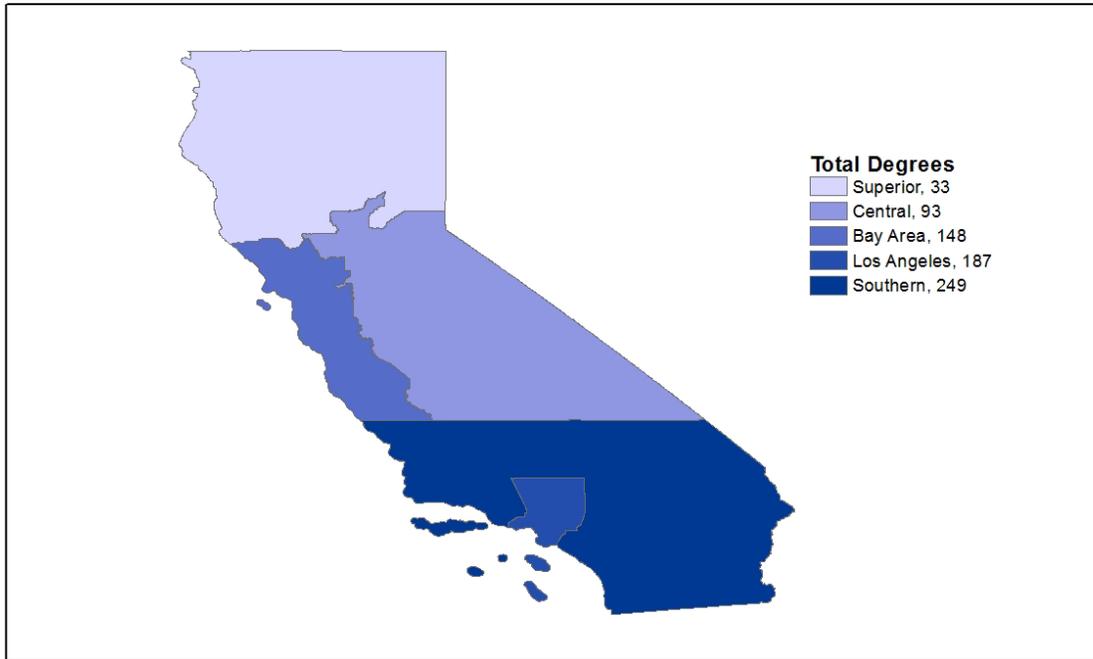
The map above shows the geographic distribution and volume of postsecondary mental health-related programs across the state. Each point on the map represents one postsecondary educational institution. The color and size of each point signifies the number of mental health-related programs that each educational institution has. As noted before, the concentration of the state's mental health-related programs are located in the Bay Area, Central, and Los Angeles regions.

Figure 75: Degree/Certificate Programs by County



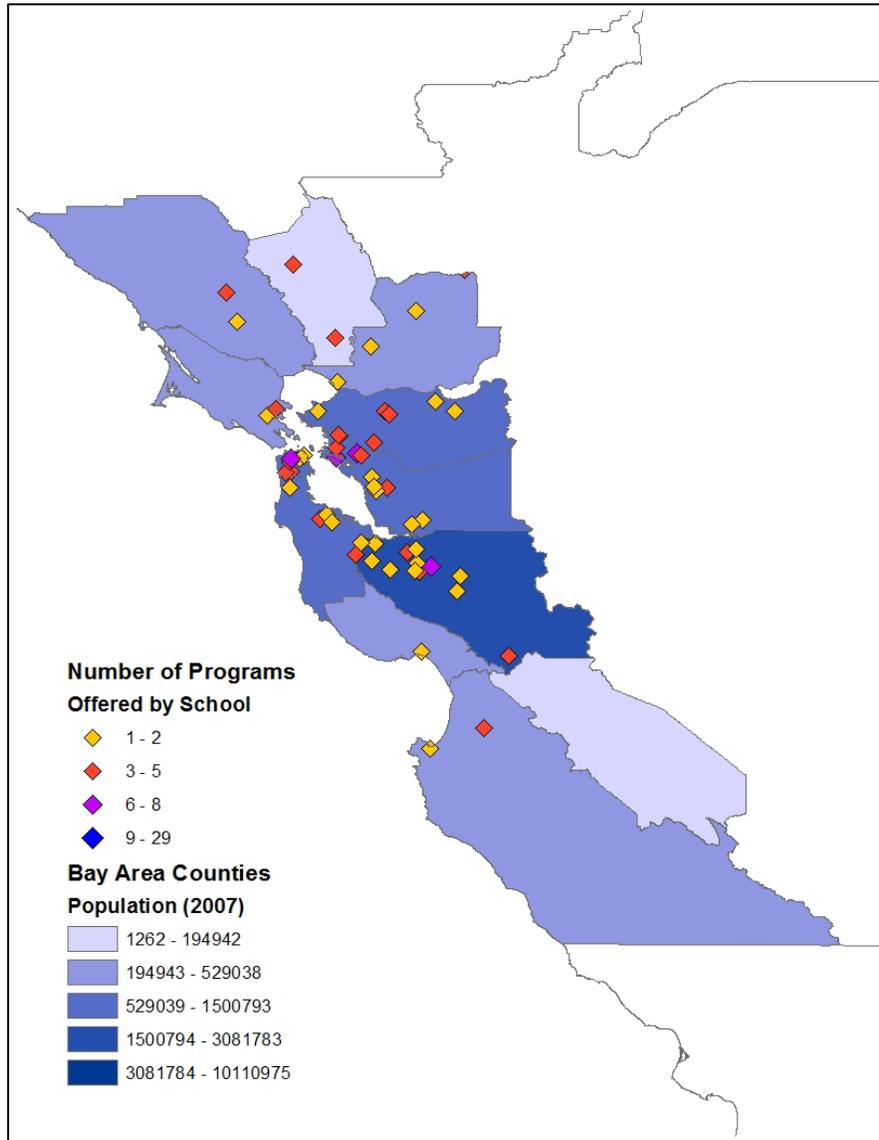
Data on degree and certificate programs by county was similar to data on educational institutions, in that Los Angeles County reported far higher numbers of programs compared to other counties. No county fell into the second highest category (95-141 programs), while three counties in the Southern Region reported having between 49 and 94 programs. All remaining counties reported between one and 48 mental health-related degree or certificate programs.

Figure 76: Degree/Certificate Programs by MHS Region



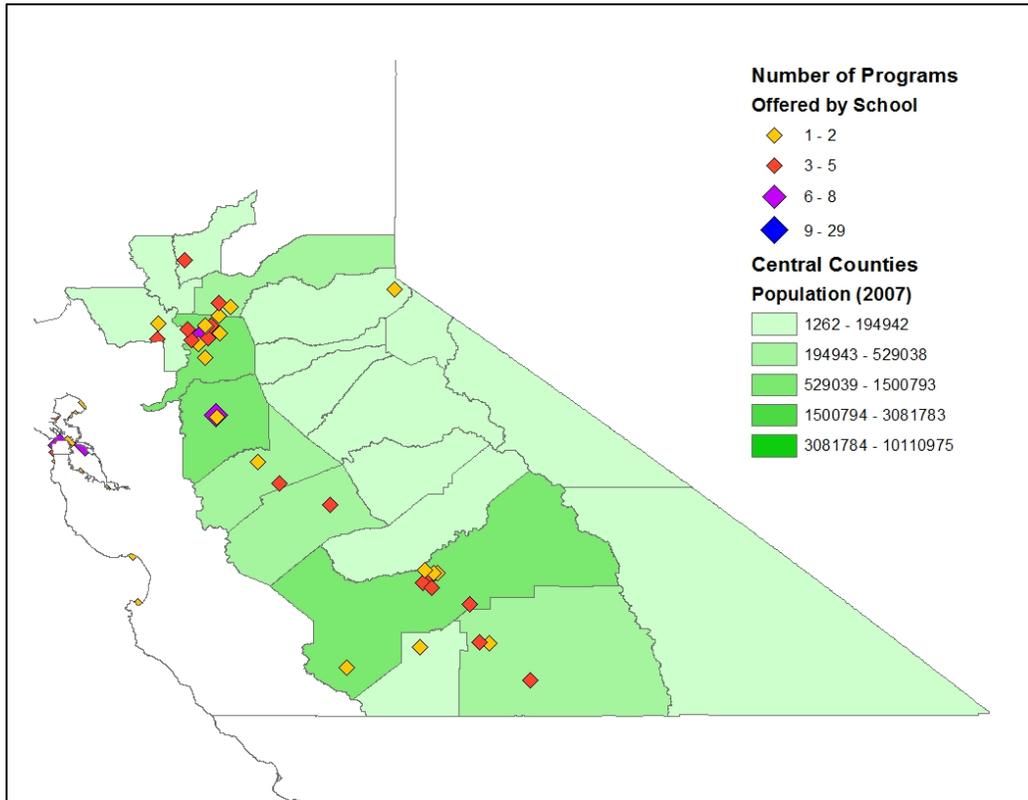
Data on degree or certificate programs by MHS region also followed the pattern found for educational institutions, with the Southern Region reporting the highest number of programs conferring mental health-related degrees or certificates (n=249), followed by the Los Angeles Region (n=187), the Bay Area Region (n=148), the Central Region (n=93), and the Superior Region (n=33).

Figure 77: Bay Area Educational Programs



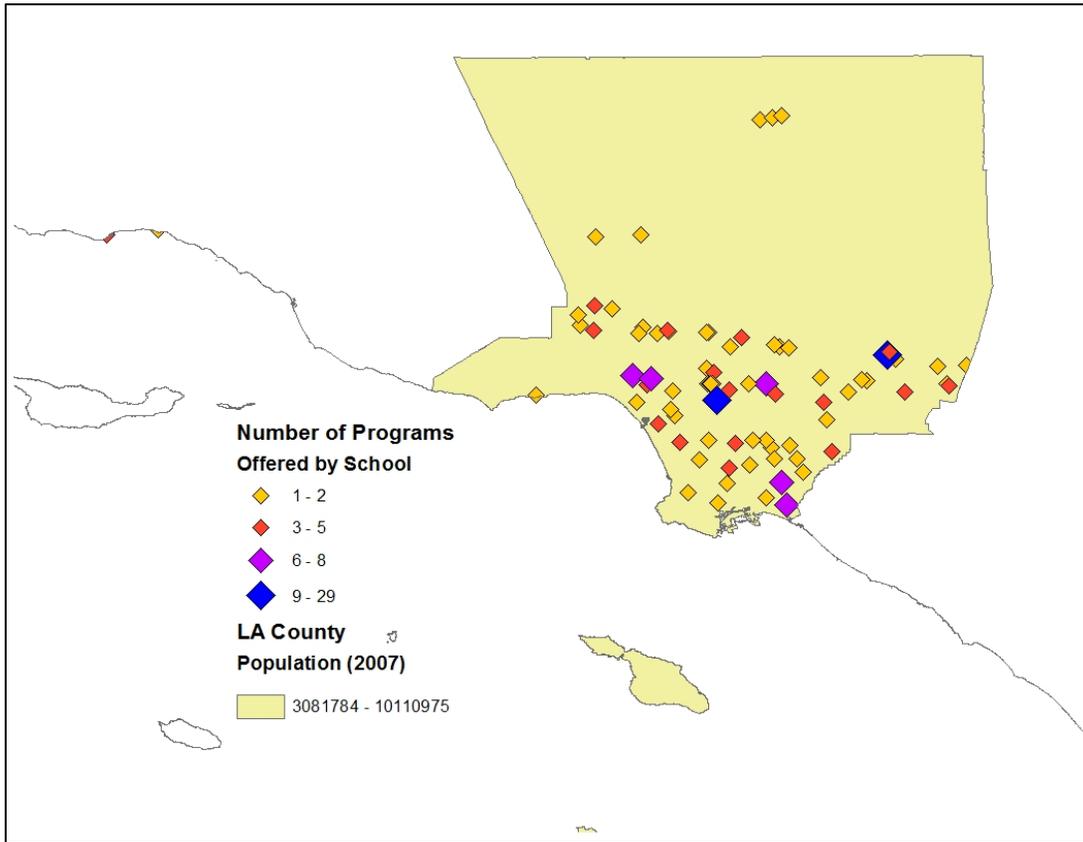
The map above shows the geographic distribution and volume of postsecondary mental health-related programs across the Bay Area region. Additionally, the map shows the density of the each county in the Bay Area region. The more densely populated counties contain the higher number of mental health-related programs.

Figure 78: Central Region Educational Programs



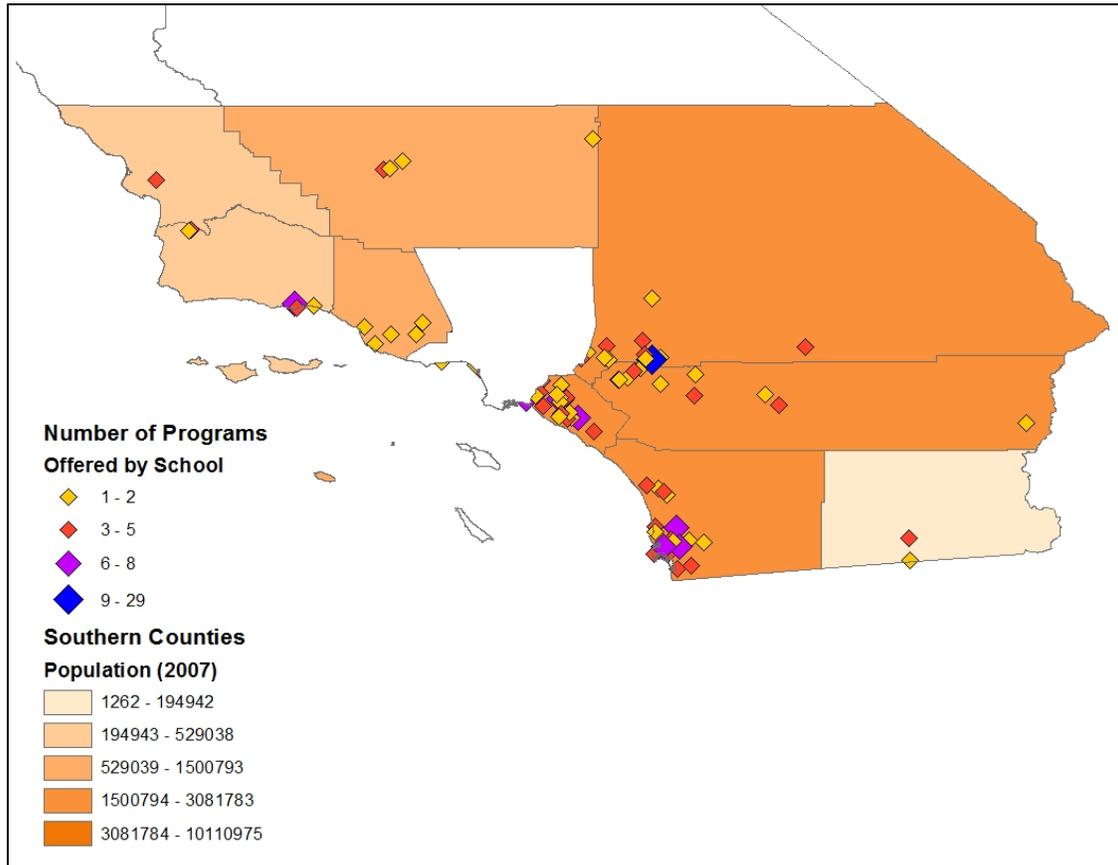
The map above shows the geographic distribution and volume of postsecondary mental health-related programs across the Central region. Additionally, the map shows the density of the each county in the Central region. The more densely populated counties contain the higher number of mental health-related programs. The majority of the region's programs are located on the western side of the region.

Figure 79: Los Angeles Educational Programs



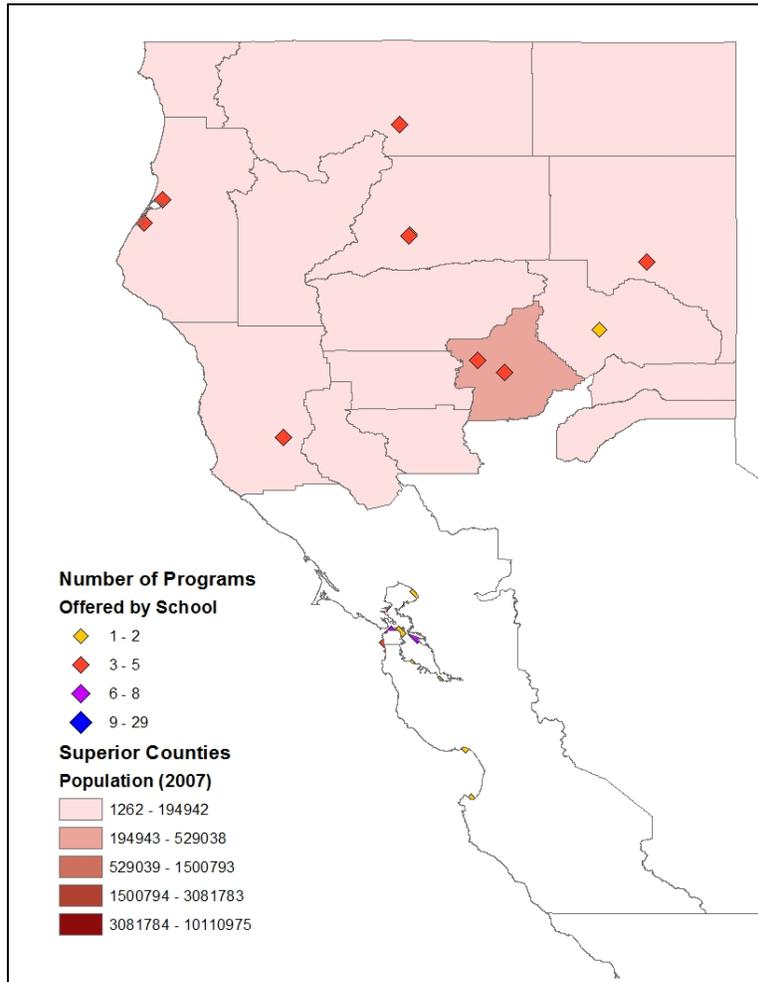
The map above shows the geographic distribution and volume of postsecondary mental health-related programs across the Los Angeles region. The majority of the region's programs are located on the southern side of the region.

Figure 80: Southern Region Educational Programs



The map above shows the geographic distribution and volume of postsecondary mental health-related programs across the Southern region. Additionally, the map shows the density of the each county in the Southern region. The more densely populated counties contain the higher number of mental health-related programs. The majority of the region’s programs are located on the western side of the region.

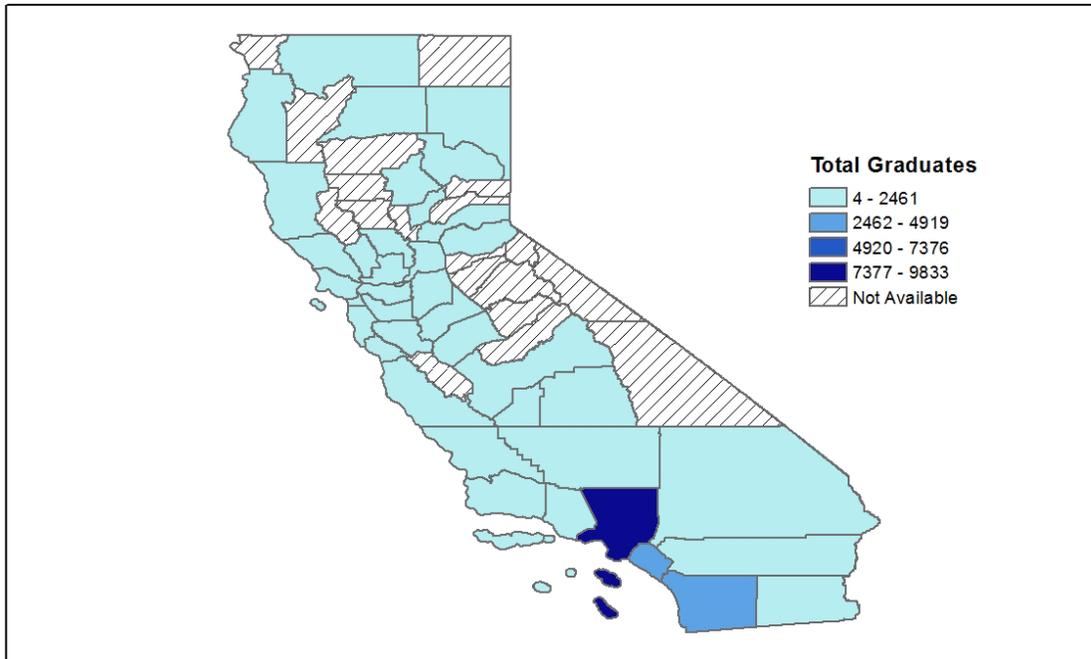
Figure 81: Superior Region Educational Programs



The map above shows the geographic distribution and volume of postsecondary mental health-related programs across the Superior region. Additionally, the map shows the density of the each county in the Superior region. There is a low number of mental health-related programs in the Superior region.

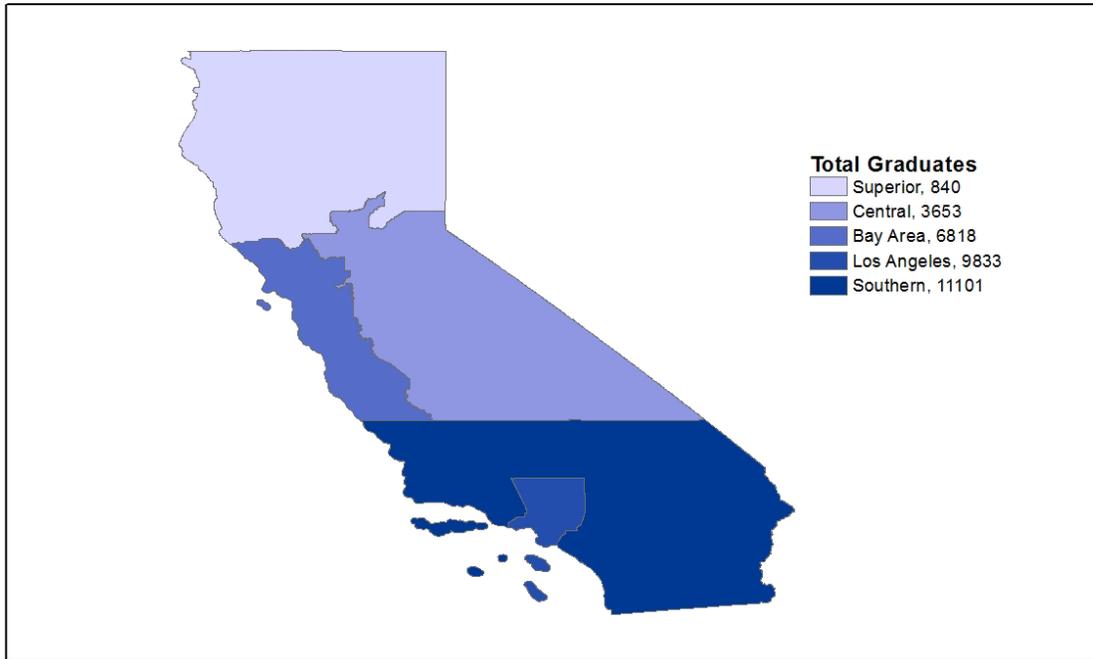
Trends of Graduates

Figure 82: Number of Graduates by County



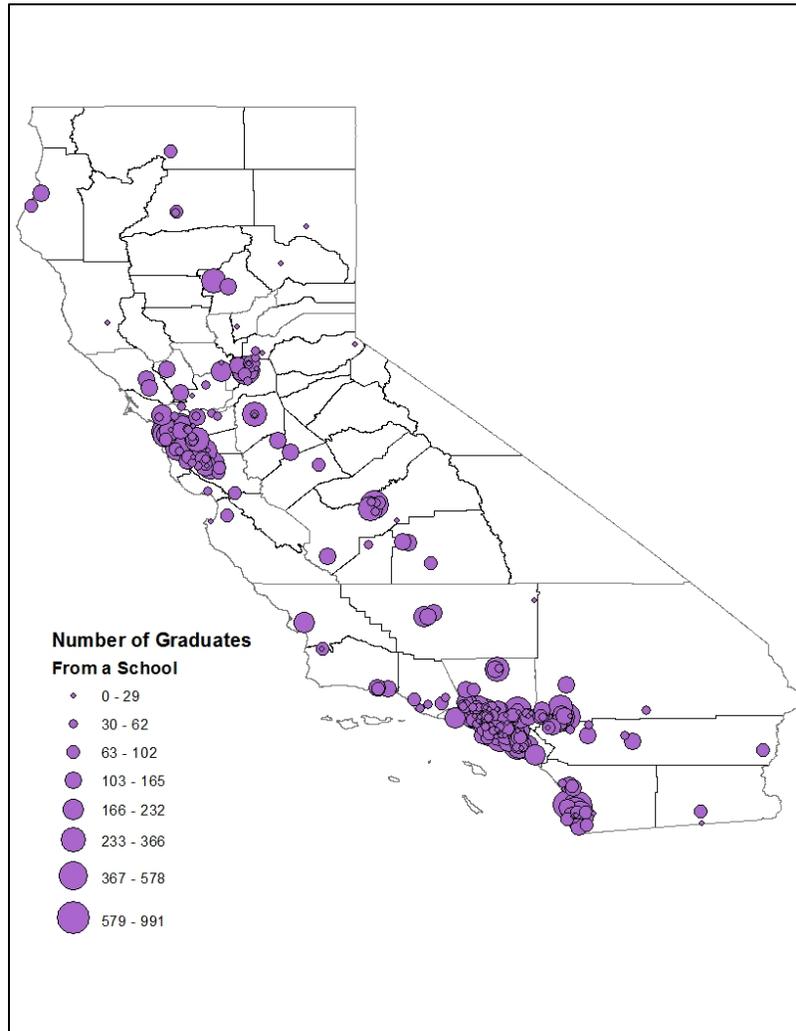
Similar to data on educational institutions and degree/certificate programs, Los Angeles County also reported the highest number of graduates with mental health-related degrees or certificates (n=9,833). Two counties in the Southern Region reported between 2,462 and 4,919 graduates, while all remaining counties reported between four and 2,461 graduates.

Figure 83: Number of Graduates by MHS Region



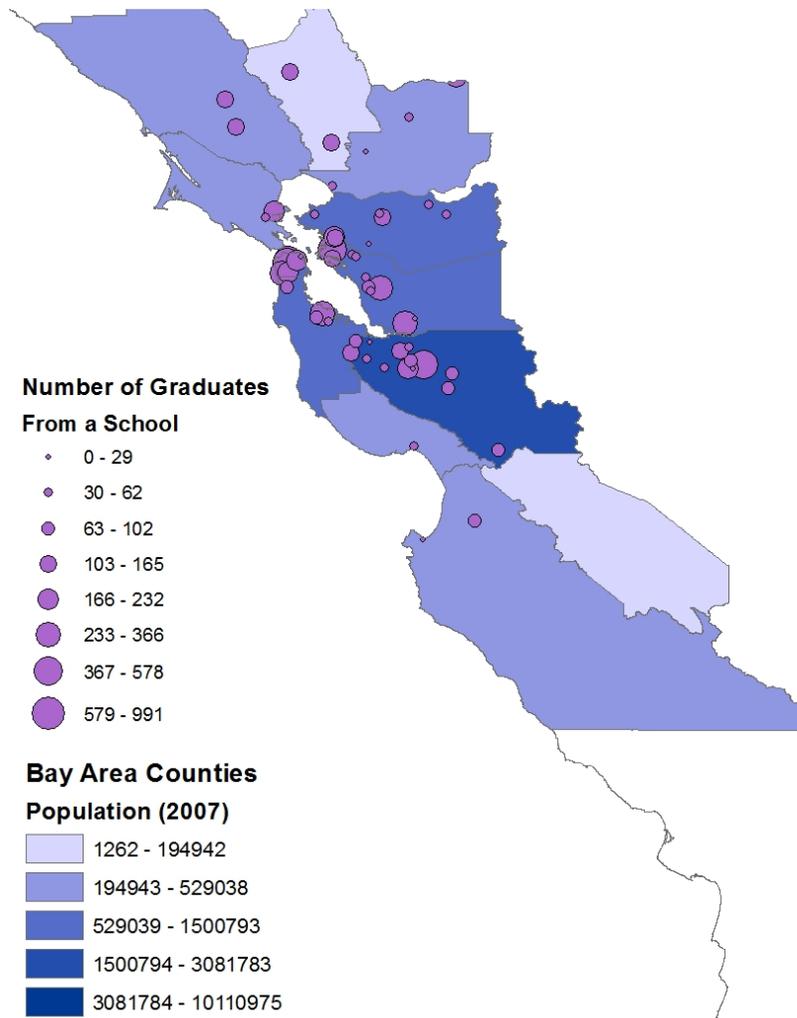
As with data on educational institutions and degree/certificate programs, the MHS Southern Region had the highest number of graduates with mental health-related degrees or certificates (n=11,101), followed by the Los Angeles Region (n=9,833), the Bay Area Region (n=6,818), and the Central Region (n=3,553). At 840 graduates, the Superior Region reported far fewer graduates compared to other regions.

Figure 84: Number of Graduates Statewide



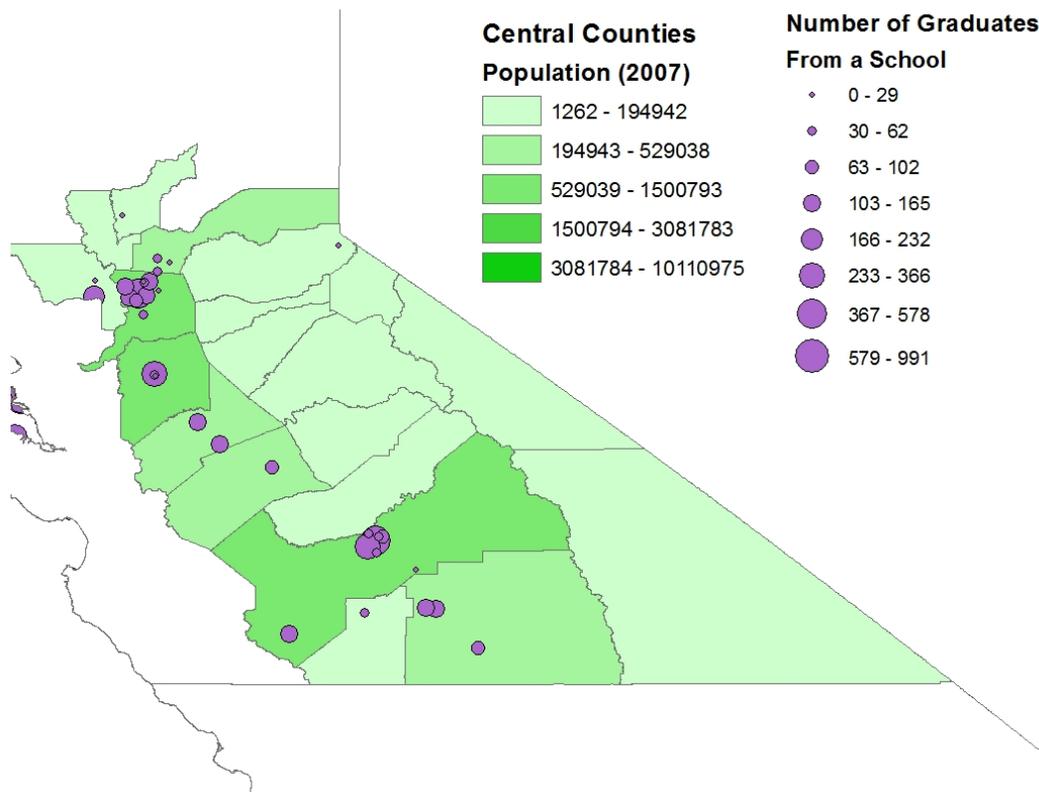
The map above shows the geographic distribution and volume of graduates from postsecondary mental health-related programs across the state. Each point on the map represents a postsecondary educational institution with at least one mental health-related program. The size of each point represents the number of graduates from each educational institution across all of its mental health-related programs. The majority of California's graduates are located in the Bay Area, Los Angeles, and Southern regions.

Figure 85: Bay Area Region Graduates



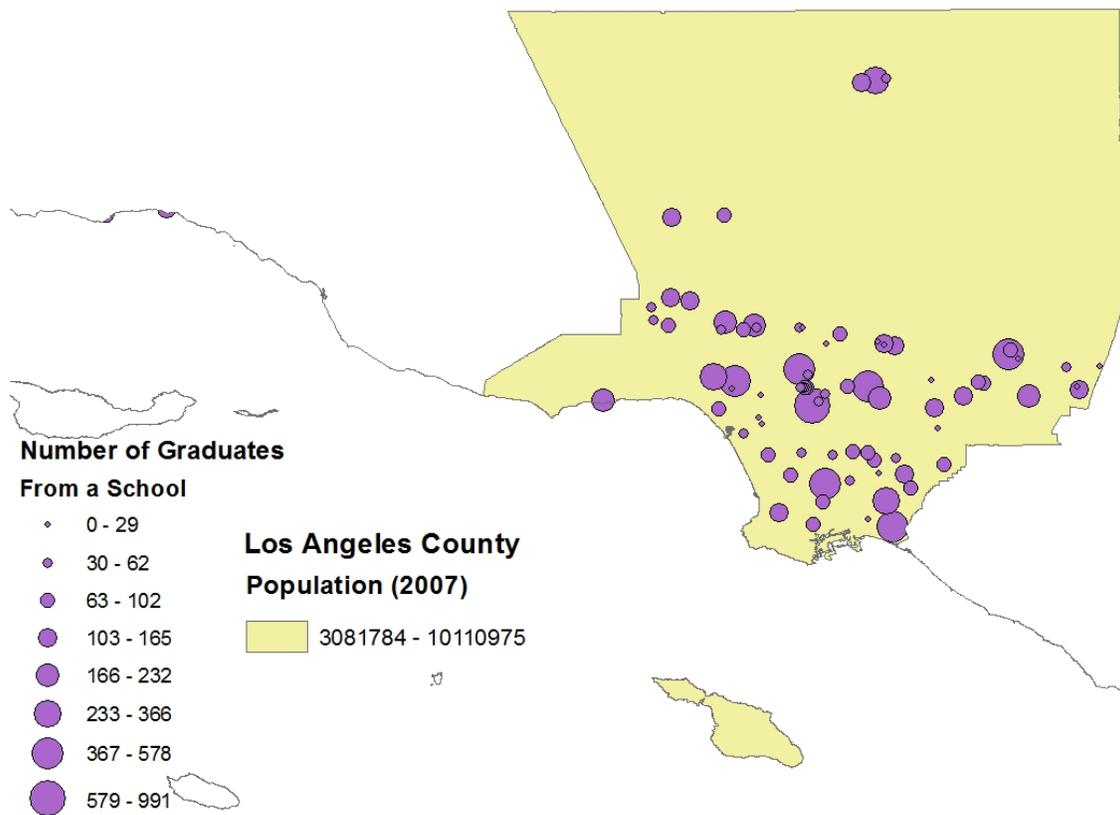
The map above shows the distribution of graduates in schools in the Bay Area region. The map shows a concentration of graduates in the central Bay Area region, with virtually no schools located in the “outer” regions of the Bay Area further north, south, or inland.

Figure 86: Central Region Graduates



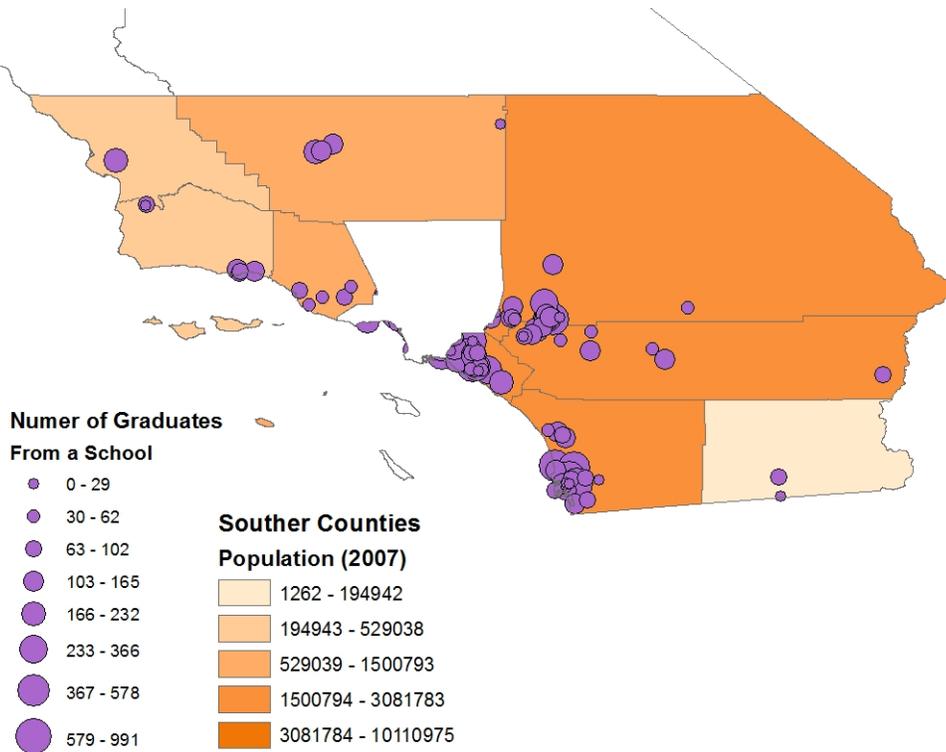
The map above shows the distribution of graduates in schools in the Central Region. Graduates are concentrated around Sacramento and Davis, with some other schools producing graduates in the 166-232 graduate range. Areas with higher concentrations of graduates are also areas of higher population size, as is indicated by the darker shades of green.

Figure 87: Los Angeles Graduates



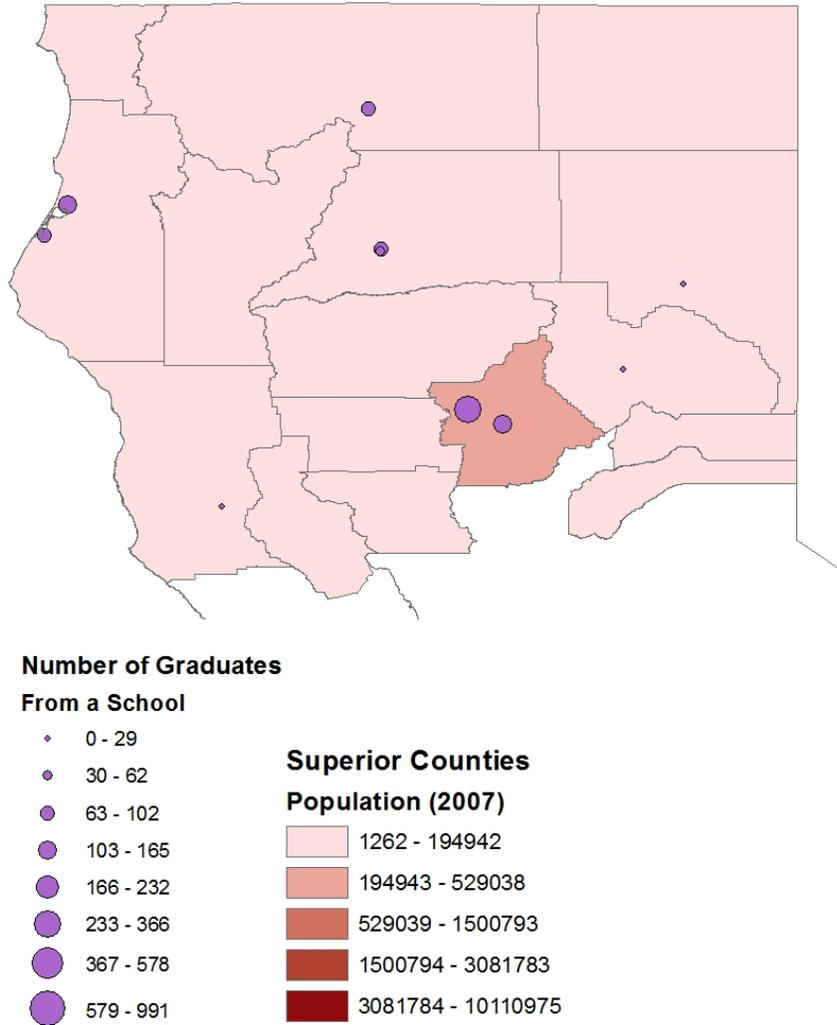
The map above shows the distribution of graduates from schools in Los Angeles. There are a high number of schools in Los Angeles producing the highest range of graduates (579-991).

Figure 88: Southern Region Graduates



Graduates in the Southern Region appear to be most concentrated along the coastline, with the highest concentrations of graduates produced just south of Los Angeles and in San Diego county.

Figure 89: Superior Region Graduates

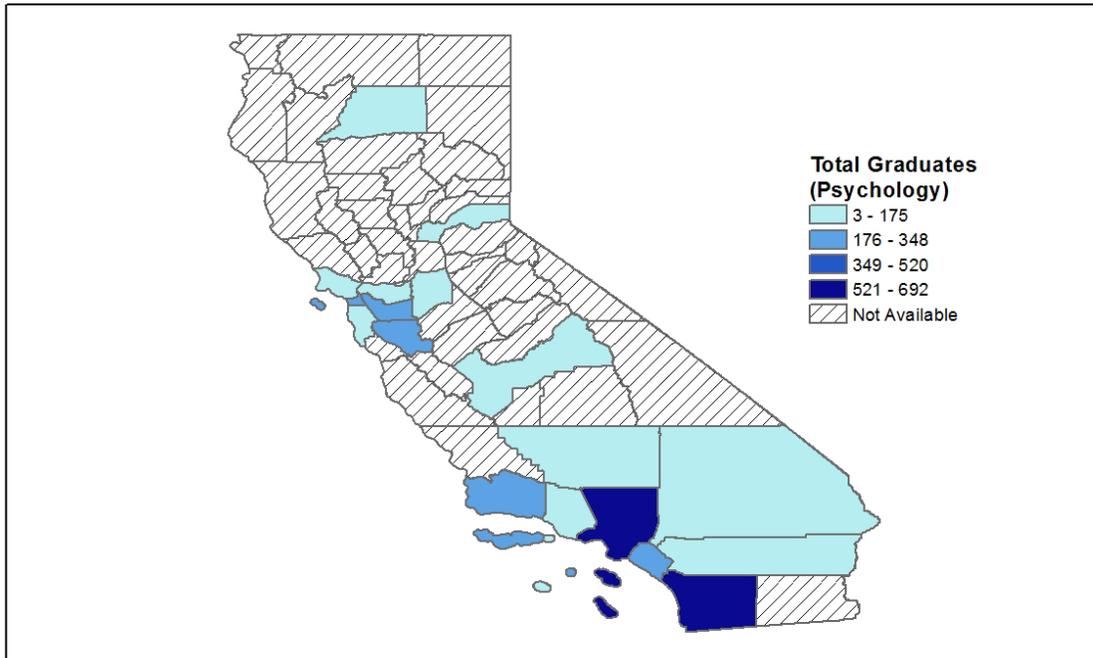


The map above shows the distribution of graduates per school and the overall population of counties within the Superior Region. All the counties in the Superior Region have the lowest population range (1,262-194,942). The map above shows that with the few schools located in the Superior Region, the number of graduates per school varies from a small count of 0-29 up to 579-991 graduates.

Trends of Graduates by Mental Health Program Type

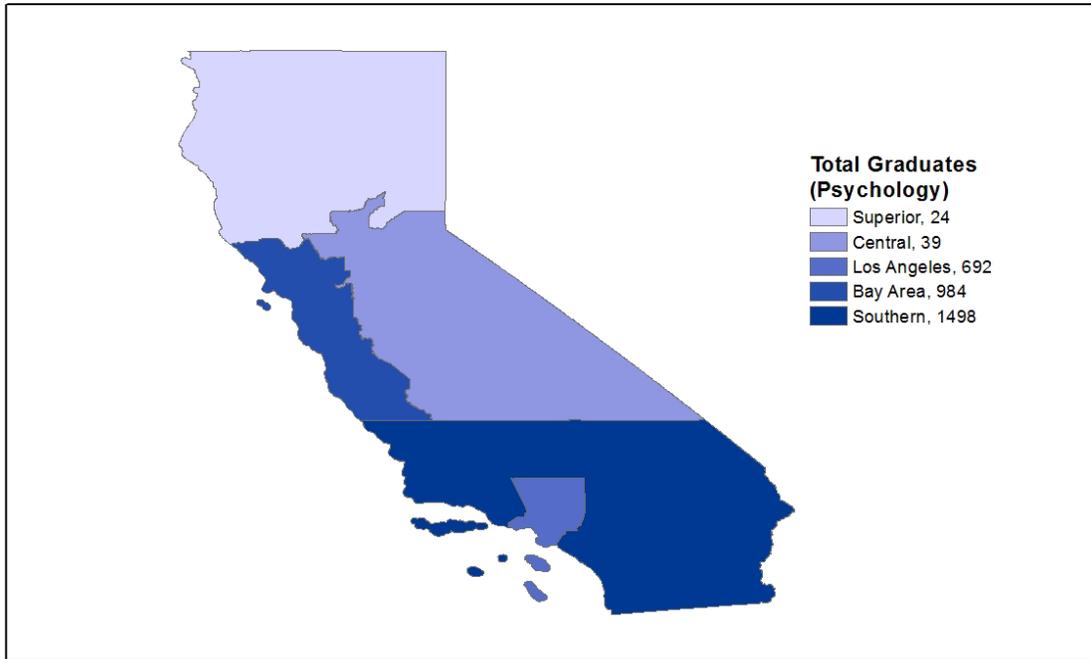
Trends of Psychology Graduates

Figure 90: Psychology Graduates by County



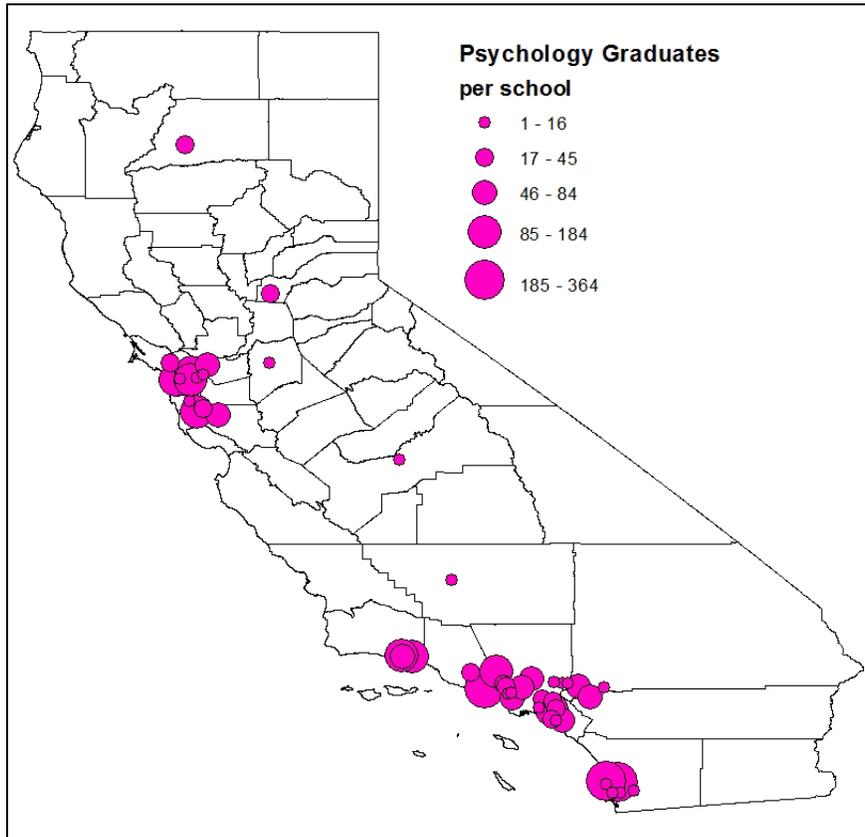
Los Angeles and San Diego Counties had the highest number of graduates with degrees in a pertinent field of psychology (N = 692 and 688, respectively). Six counties had a total of 176-348 graduates with degrees in a pertinent field of psychology. Eleven counties had a total of 3-175 graduates. See Appendix 5 for a list of all of the mental-health related programs that had graduates in the IPEDS 2012 dataset used by RDA for this report, as well as for all of the CIP programs that were grouped together into program categories for this report.

Figure 91: Psychology Graduates by MSHA Region



The MSHA Southern Region had the highest number of graduates with degrees in a pertinent field of psychology (N = 1,498). The southern part of the state was where the highest number of psychology graduates was located. The Bay Area Region had the second highest number of graduates with degrees in a pertinent field of psychology (N=984), followed by Los Angeles (N=692). The Central and Superior Regions had significantly less numbers of graduates with pertinent degrees (N=39 and N=24, respectively).

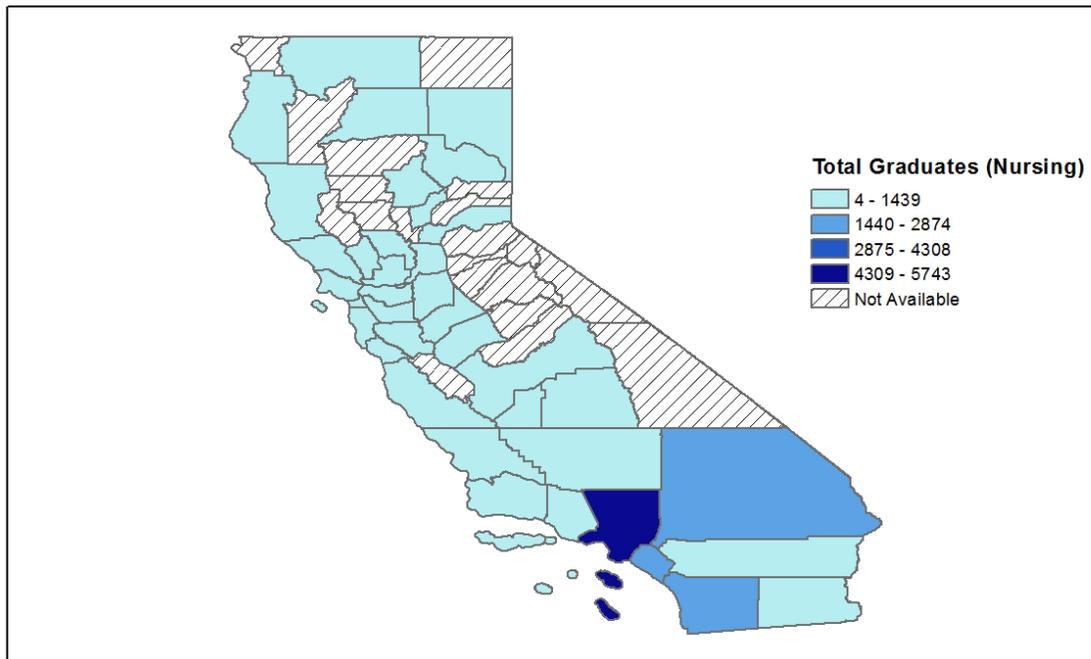
Figure 92: Psychology Graduates Statewide



The map above shows the geographic distribution and volume of graduates in Psychology across California. The majority of the state's psychology graduates are concentrated in the Bay Area, Los Angeles, and Southern regions.

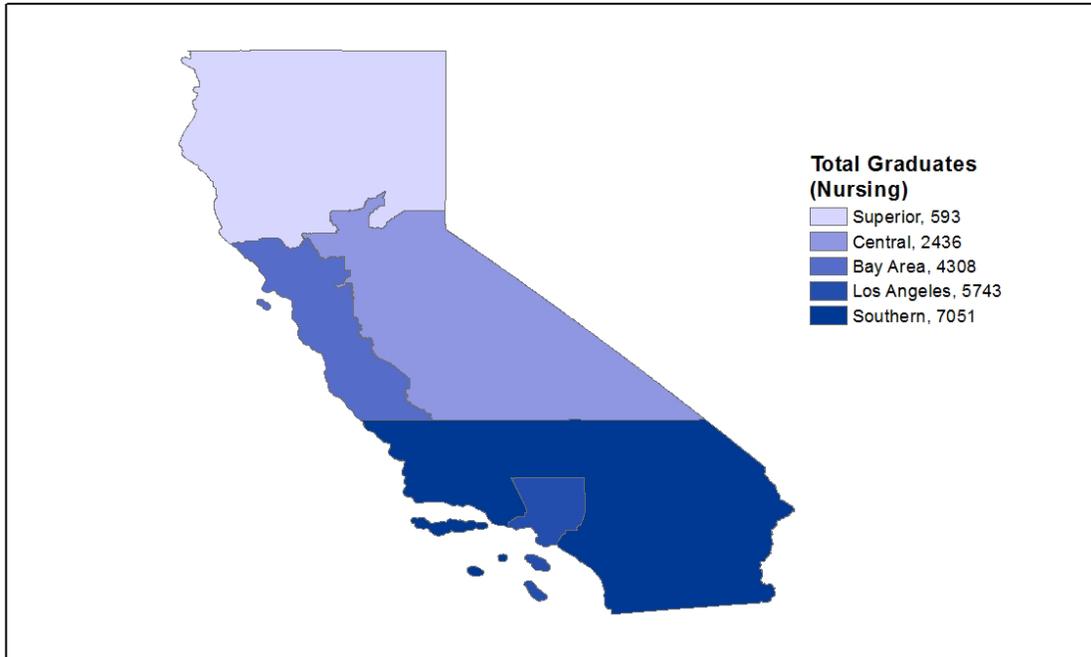
Trends of Nursing Graduates

Figure 93: Nursing Graduates by County



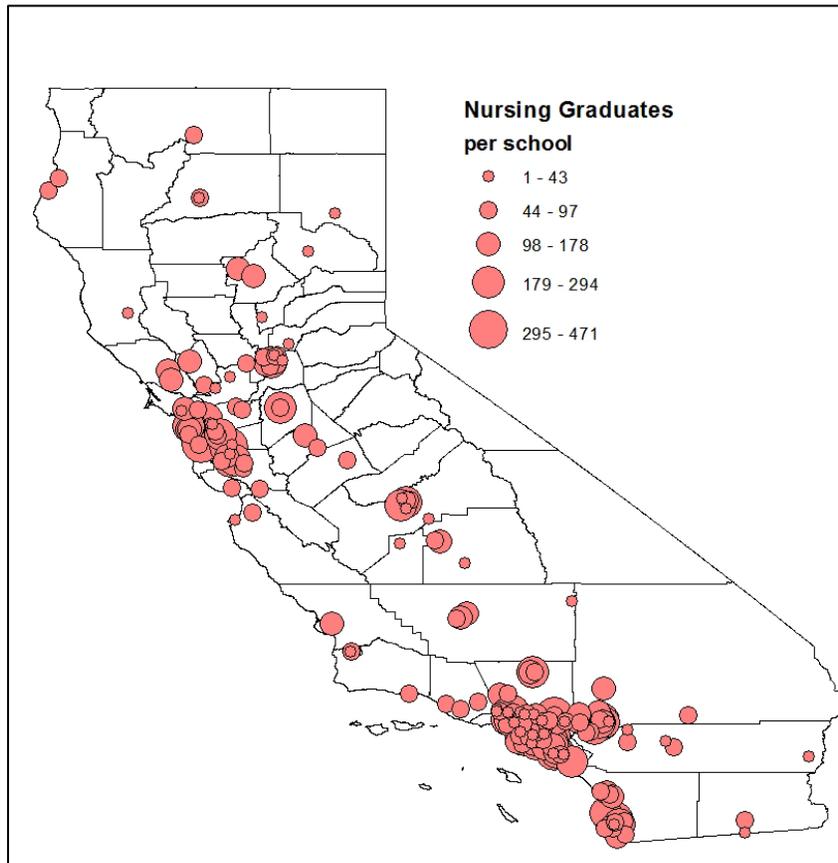
Los Angeles County had the highest number of graduates with degrees in a pertinent field of nursing (N = 5,743). Three counties fell into the category of 1,440-2,874 total graduates with degrees pertinent to the field of nursing. Most of the remaining counties had between 4 and 1,439 nursing graduates. The nursing discipline includes a large variety of sub-specialties. For this report, only nursing programs pertinent to the provision of mental health services were analyzed. See Appendix 6 for a list of all of the mental-health related programs that had graduates in the IPEDS 2012 dataset used by RDA for this report, as well as how the programs are grouped in this section of the report.

Figure 94: Nursing Graduates by MSHA Region



The MSHA Southern Region had the highest number of graduates with degrees in nursing (N = 7,051). Los Angeles represent the second highest number of graduates with degrees in nursing (N=5,743), followed by the Bay Area (N=4,308). The Central Region had a total of 2,346 graduates with degrees in nursing. Finally the Superior Region had 593 graduates with degrees in nursing. The gap between the highest (Southern Region) and lowest (Central Region) degrees is 6,458 nurses per region.

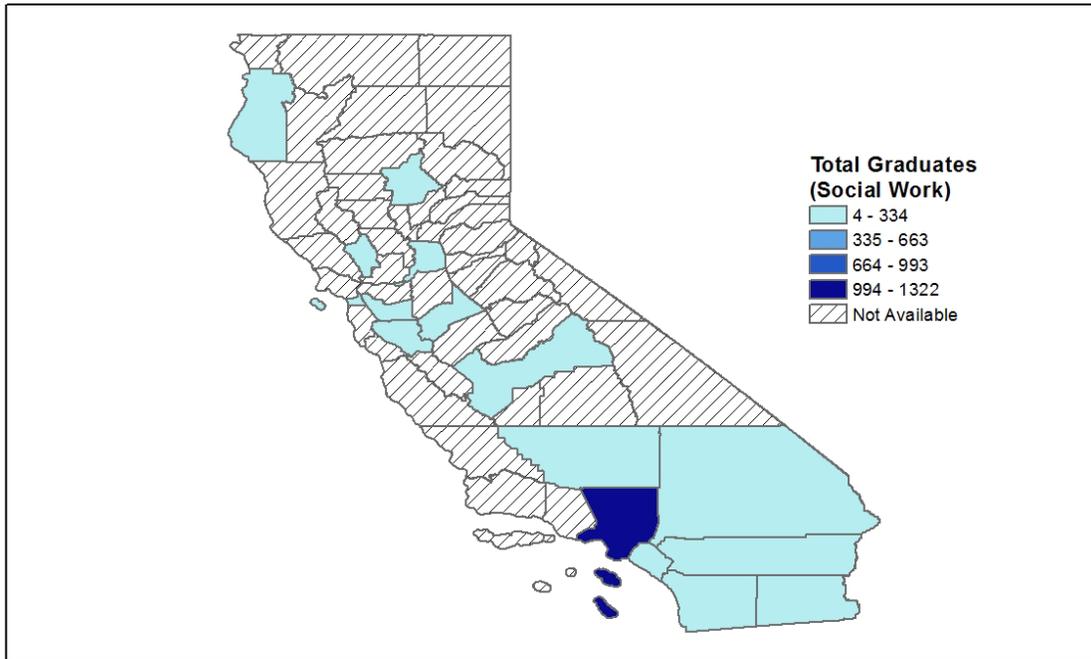
Figure 95: Nursing Graduates Statewide



The map above shows the geographic distribution and volume of graduates in nursing programs across California. The majority of the state’s nursing graduates are located in the Bay Area, Los Angeles, and Southern regions.

Trends of Social Work Graduates

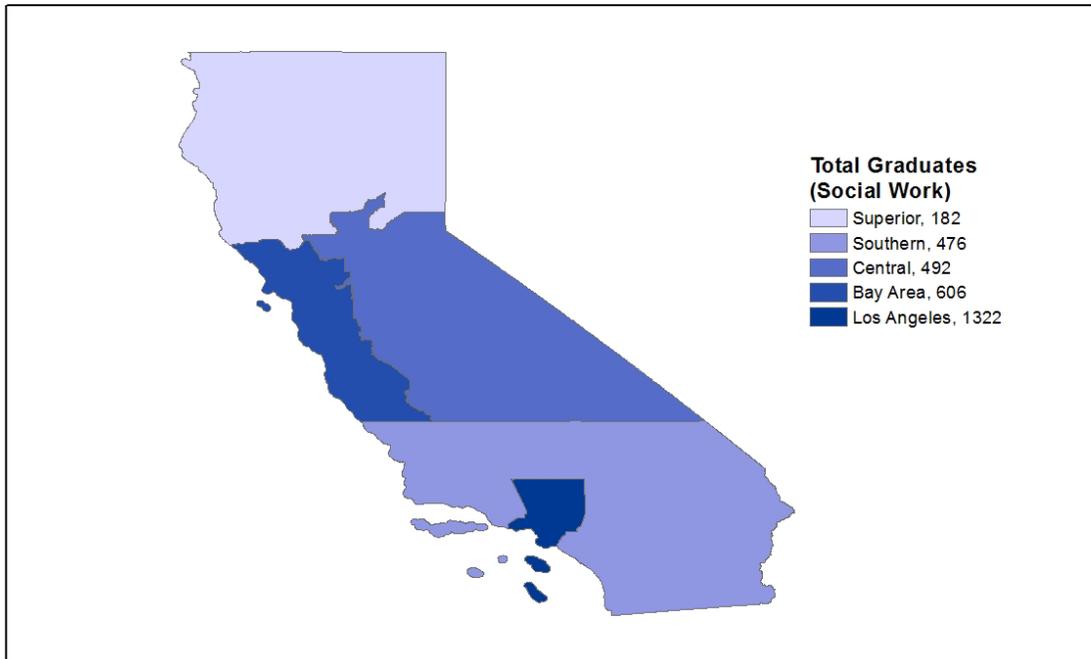
Figure 96: Social Work Graduates by County



Los Angeles County had the highest number of graduates with degrees in social work (N = 1,322). All of the remaining counties had between 4 and 334 social work graduates.

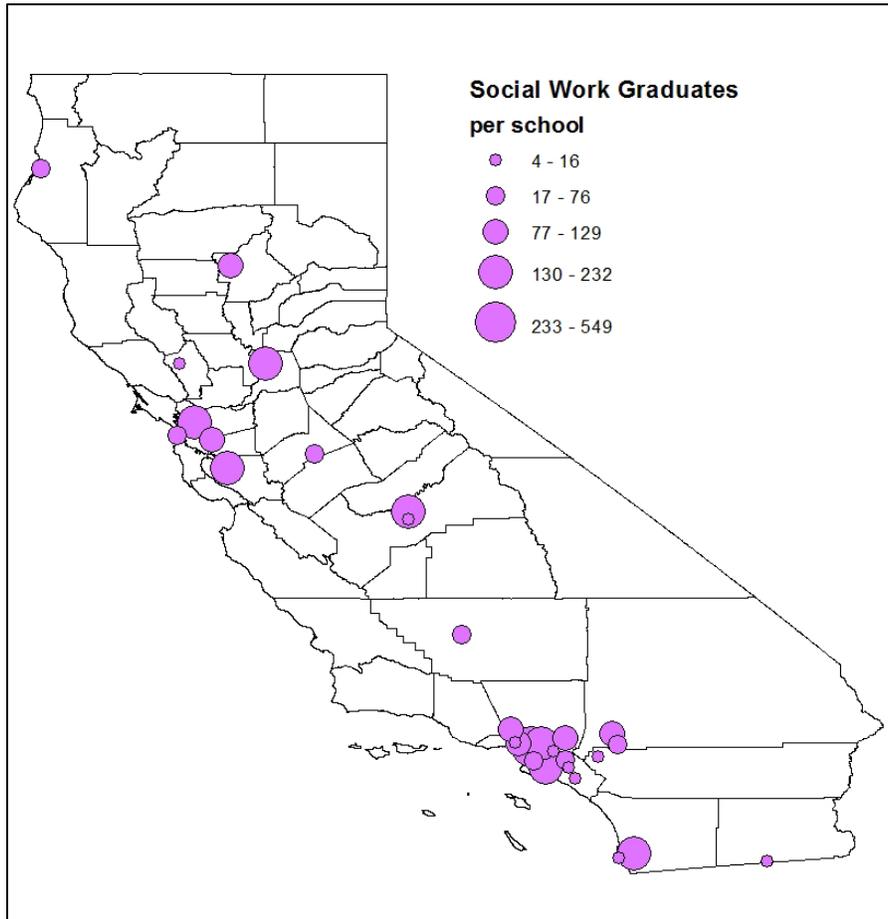
It is noted that there are a large amount of counties without data available on their social work programs. IPEDS data reporting is not mandatory for all postsecondary educational institutions. As such, the IPEDS data analyzed for this report may not include all social work programs throughout the state.

Figure 97: Social Work Graduates by MHSA Region



While the MHSA Los Angeles Region had the highest number of graduates with degrees in a social work (N = 1,322), the MHSA Bay Area and Central Regions also had a very large number of social work graduates (N = 1,098 combined). The Superior Region had the least number of graduates in social work (N=182). The gap between the highest (Los Angeles Region) and lowest (Superior Region) is 1,140 graduates.

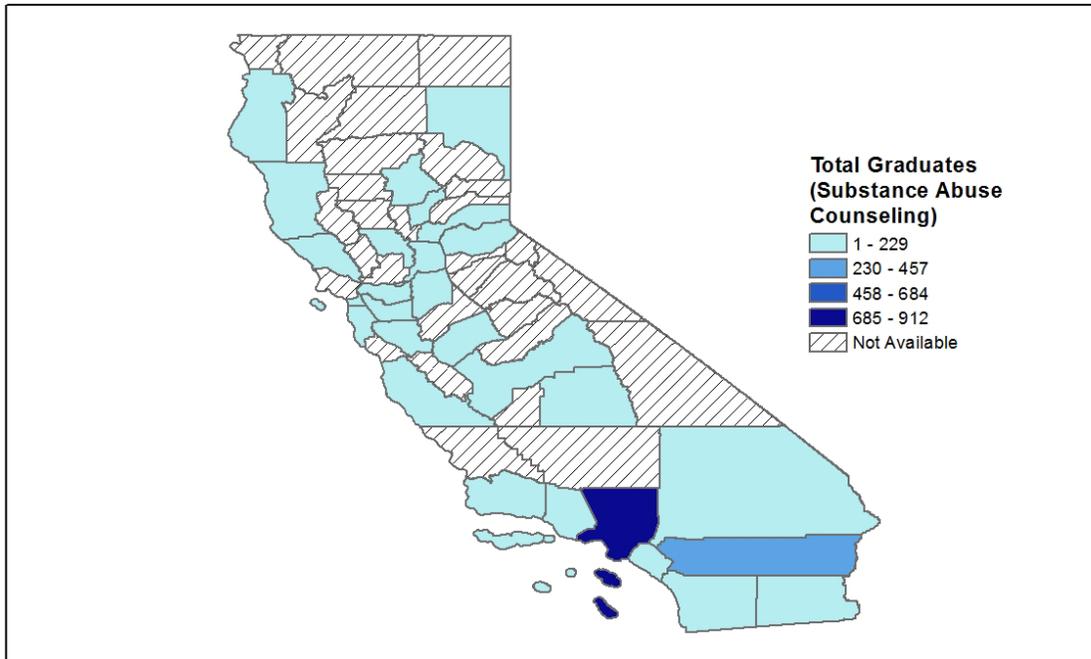
Figure 98: Social Work Graduates Statewide



The map above shows the geographic distribution and volume of graduates in social work programs across California. The majority of the state's social work graduates are located in the Bay Area and Los Angeles regions.

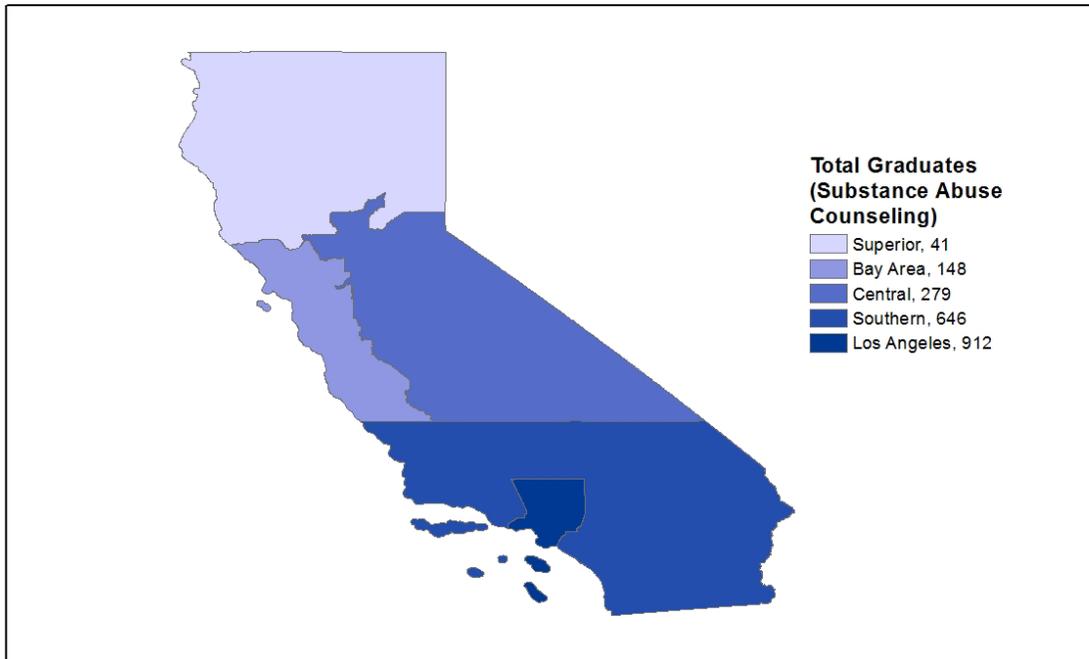
Trends of Substance Abuse/Addiction Counseling Graduates

Figure 99: Substance Abuse/Addiction Counseling Graduates by County



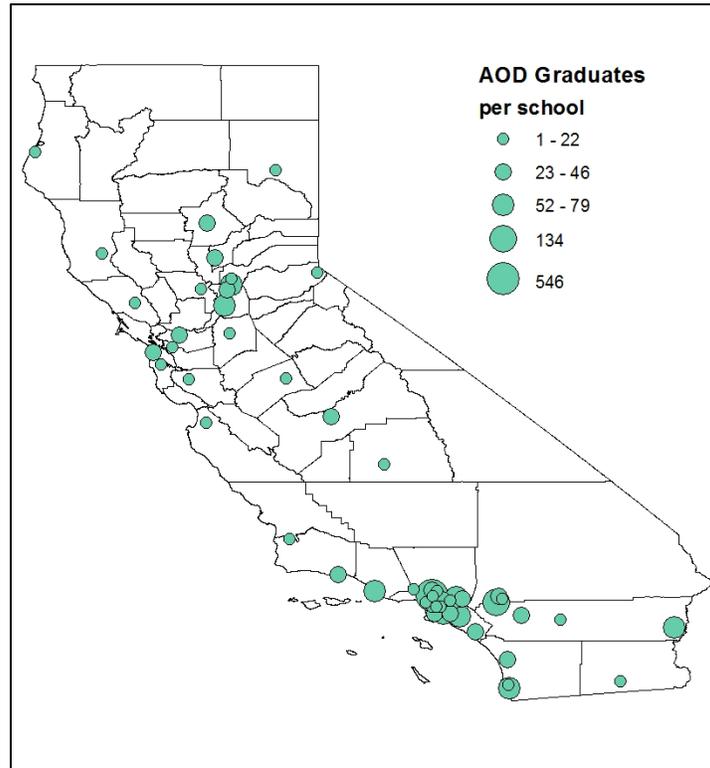
Los Angeles County had the highest number of graduates with degrees or certificates in substance abuse and addiction counseling (N = 912). Riverside County had between 230 and 457 graduates with degrees or certificates in substance abuse and addiction counseling. All of the remaining counties with reported data had between one and 229 substance abuse/addiction counseling graduates.

Figure 100: Substance Abuse/Addiction Counseling Graduates by MHSR Region



The MHSR Los Angeles and Southern Regions had the highest numbers of graduates with degrees or certificates in substance abuse/addiction counseling (N = 1,558 combined). Los Angeles alone accounted for 912 graduates with degrees or certificates in substance abuse counseling, which represented the highest number of any MHSR region. The Southern Region had a total of 646 graduates, followed by the Central Region (N= 279), the Bay Area Region (N= 148), and finally the Superior Region (N= 41). The gap between the region with the highest number of graduates (Los Angeles) and lowest number of graduates (Superior) was 871 graduates.

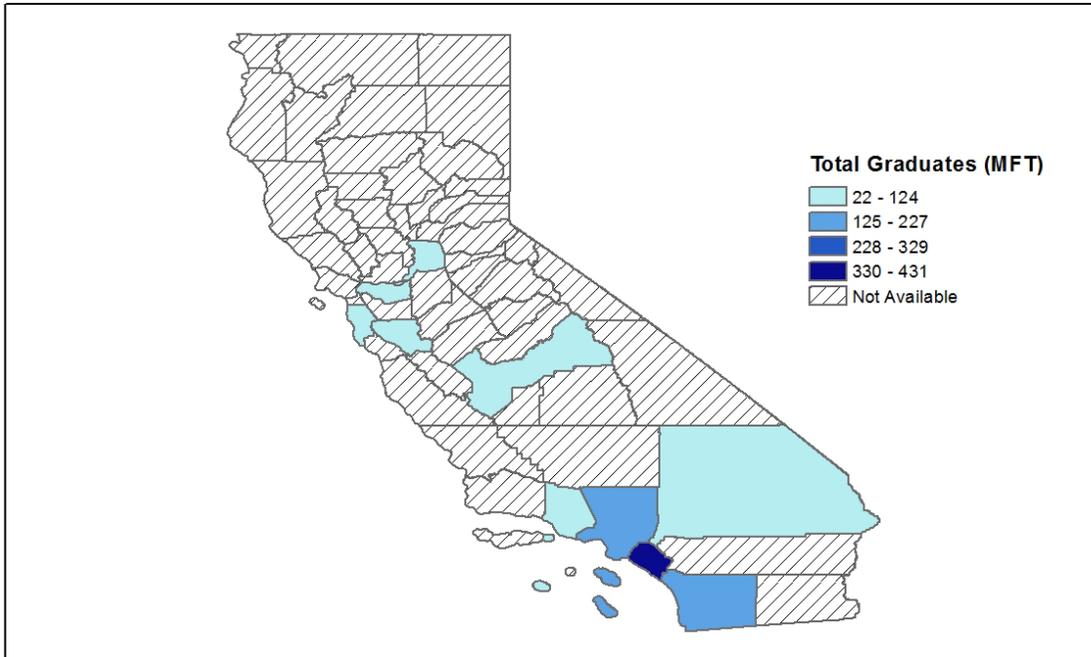
Figure 101: Substance Abuse/Addiction Counseling Graduates Statewide



The map above shows the geographic distribution and volume of graduates in substance abuse/addiction counseling programs across California. The majority of the state's AOD graduates are located in the Central, Los Angeles, and Southern regions.

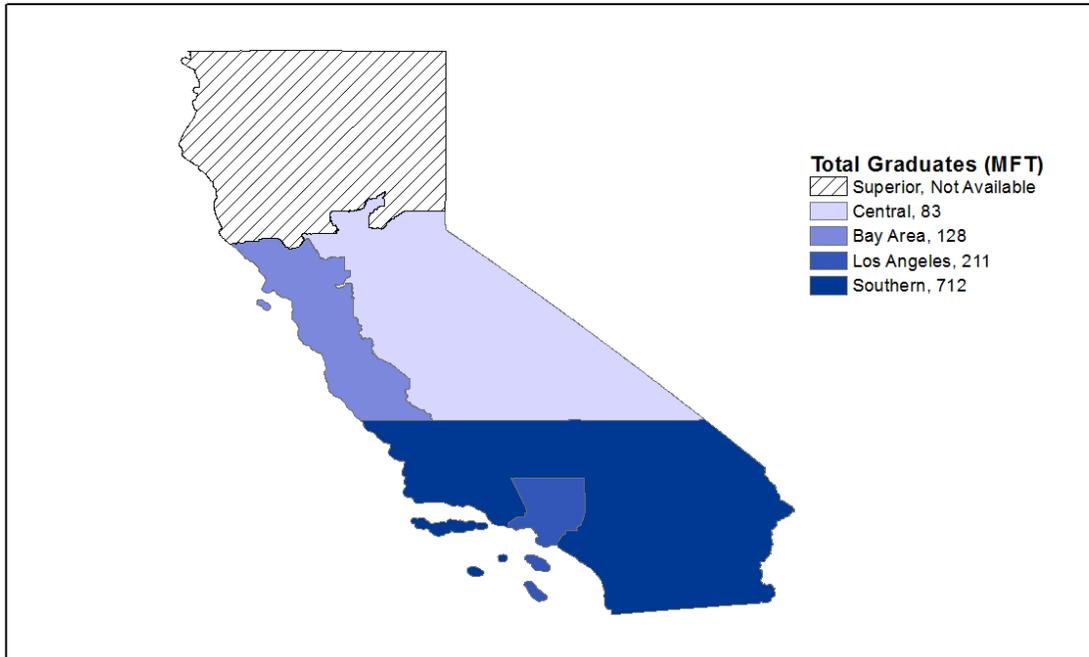
Trends of Marriage and Family Therapy Graduates

Figure 102: Marriage and Family Therapy Graduates by County



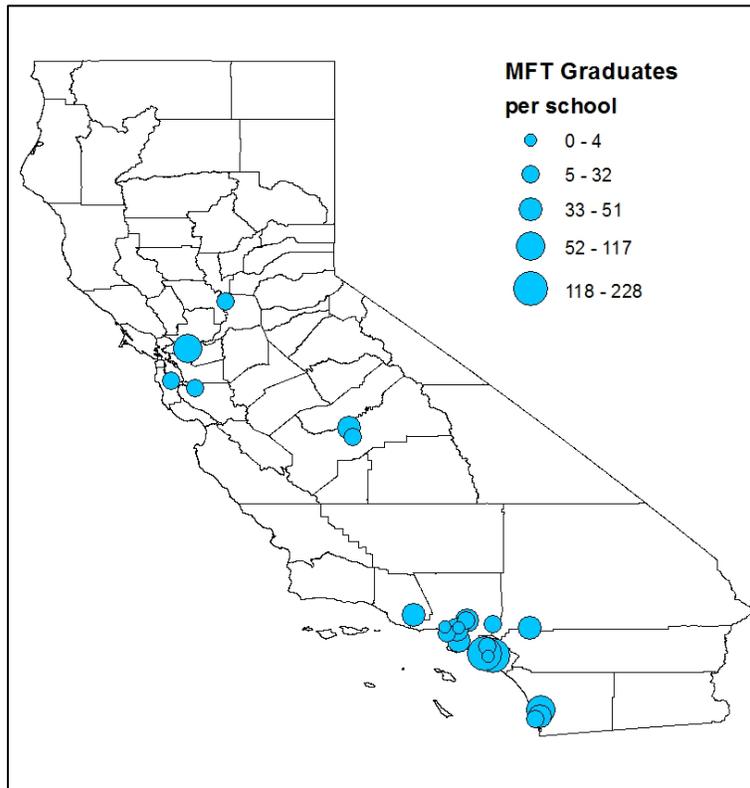
Orange County had the highest number of graduates with degrees or certificates in marriage and family therapy (N= 431). Los Angeles and San Diego Counties each had between 125 and 227 total marriage and family therapy graduates. The remaining counties had between 22 and 124 marriage and family therapy graduates. Compared to the previously noted mental health degree programs, marriage and family therapy programs are found in a small set of counties (N = 10).

Figure 103: Marriage and Family Therapy Graduates by MHSR Region



The MHSR Los Angeles and Southern Regions had the highest numbers of graduates with degrees or certificates in marriage and family therapy (N= 923 combined). The Southern Region alone accounts for 712 graduates with degrees or certificates in marriage and family therapy. The Bay Area Region had a total of 128 graduates, followed by the Central Region with a total of 83 graduates. There was no available data for the MHSR Superior Region.

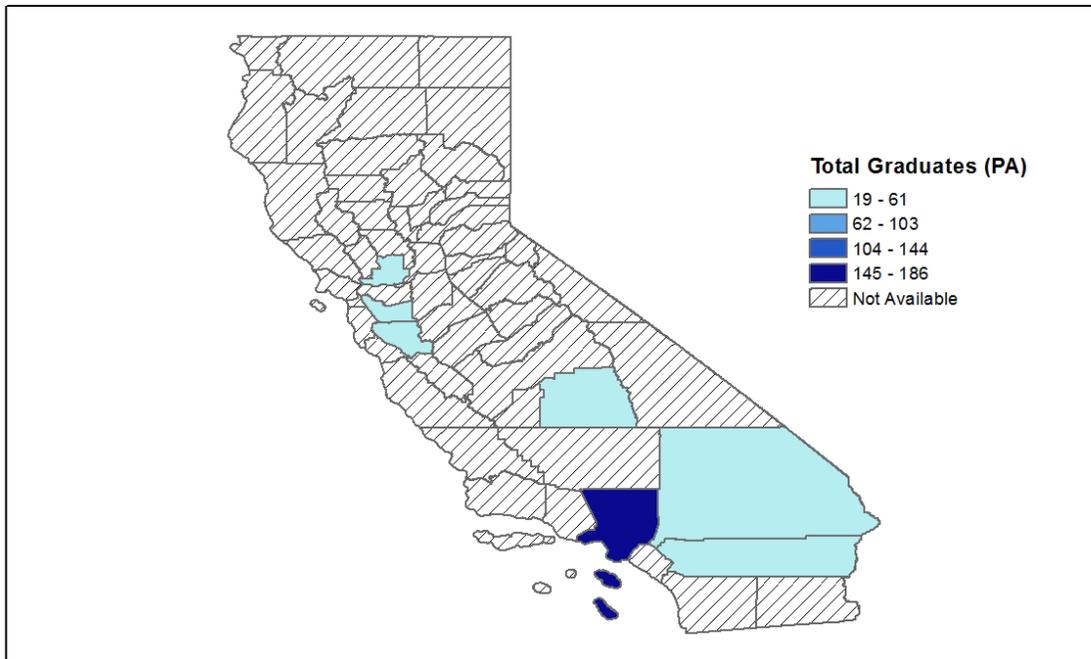
Figure 104: MFT Graduates Statewide



The map above shows the geographic distribution and volume of graduates in marriage and family therapy programs across California. The majority of the state's marriage and family therapy graduates are located in the Bay Area, Los Angeles, and Southern regions.

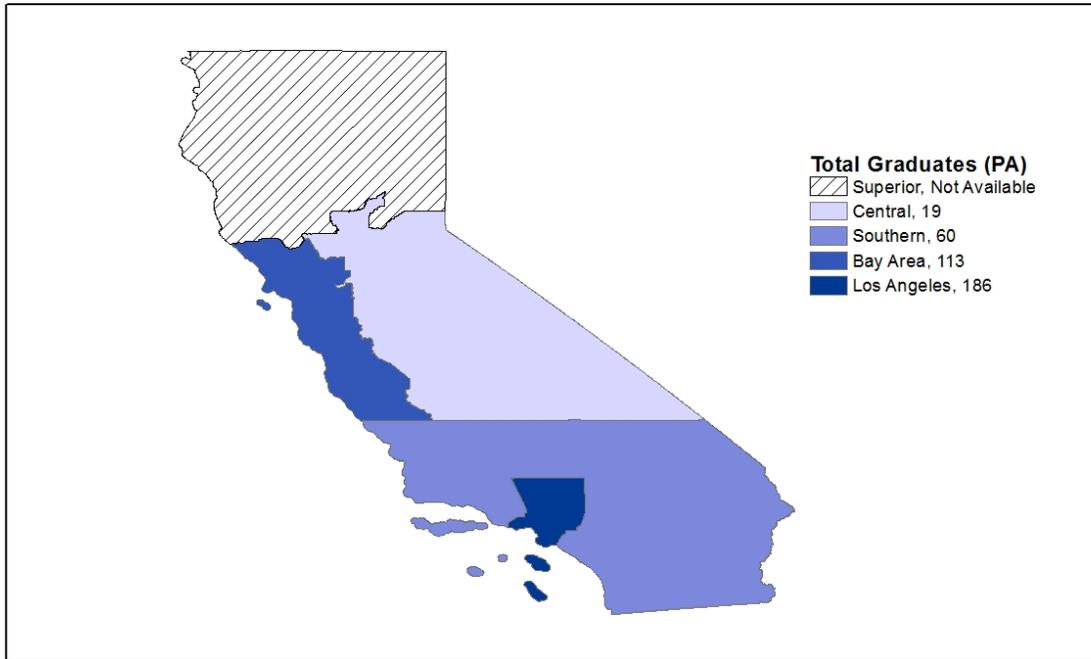
Trends of Physician Assistant Graduates

Figure 105: Physician Assistant Graduates by County



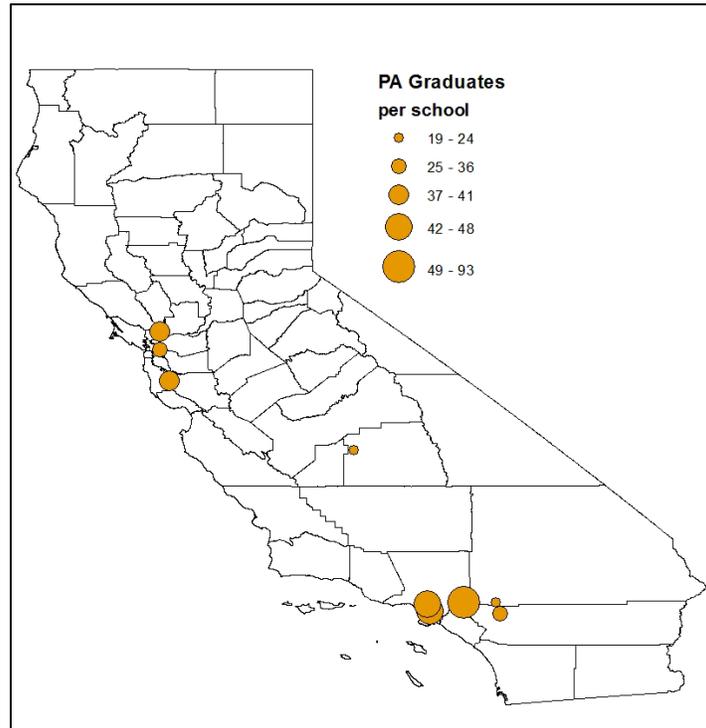
Los Angeles County had the highest number of graduates with physician assistant degrees or certificates (N= 186). The remaining counties had between 19 and 61 physician assistant graduates. Compared to most of the previously noted mental health degree programs, physician assistant programs are found in a small set of counties (N= 7).

Figure 106: Physician Assistant Graduates by MHSA Region



The MHSA Los Angeles and Southern Regions had the highest numbers of graduates with physician assistant degrees or certificates (N= 246 combined). The MHSA Superior Region did not have any physician assistant graduates. The Bay Area region had the third highest number of graduates with physician assistant degrees or certificates (N= 113) while the Southern Region had 60 such graduates, and Central Region had just 19 graduates. There was no available data in the Superior Region.

Figure 107: Physician Assistant Graduates Statewide



The map above shows the geographic distribution and volume of graduates in physician assistant programs across California. The majority of the state’s physician assistant graduates are located in the Bay Area and Los Angeles regions.

Workforce Availability Summary

Across the state, most of the educational institutions conferring mental health-related degrees and certificates were located in the MHSAs Los Angeles and Southern Regions. As such, most of California’s graduates from programs conferring mental health-related degrees and certificates were also from the southern portion of the state. The MHSAs Superior Region reported the lowest number of educational institutions, thus producing the lowest number of graduates who could potentially enter the state’s public mental health workforce. When examined by educational program across the state, graduates from all six types of programs area were also predominantly concentrated in the MHSAs Los Angeles and Southern Regions; variability in geographic distribution of graduates from each type of program was quite minimal.



Participation in Statewide WET Programs

Sources and Limitations

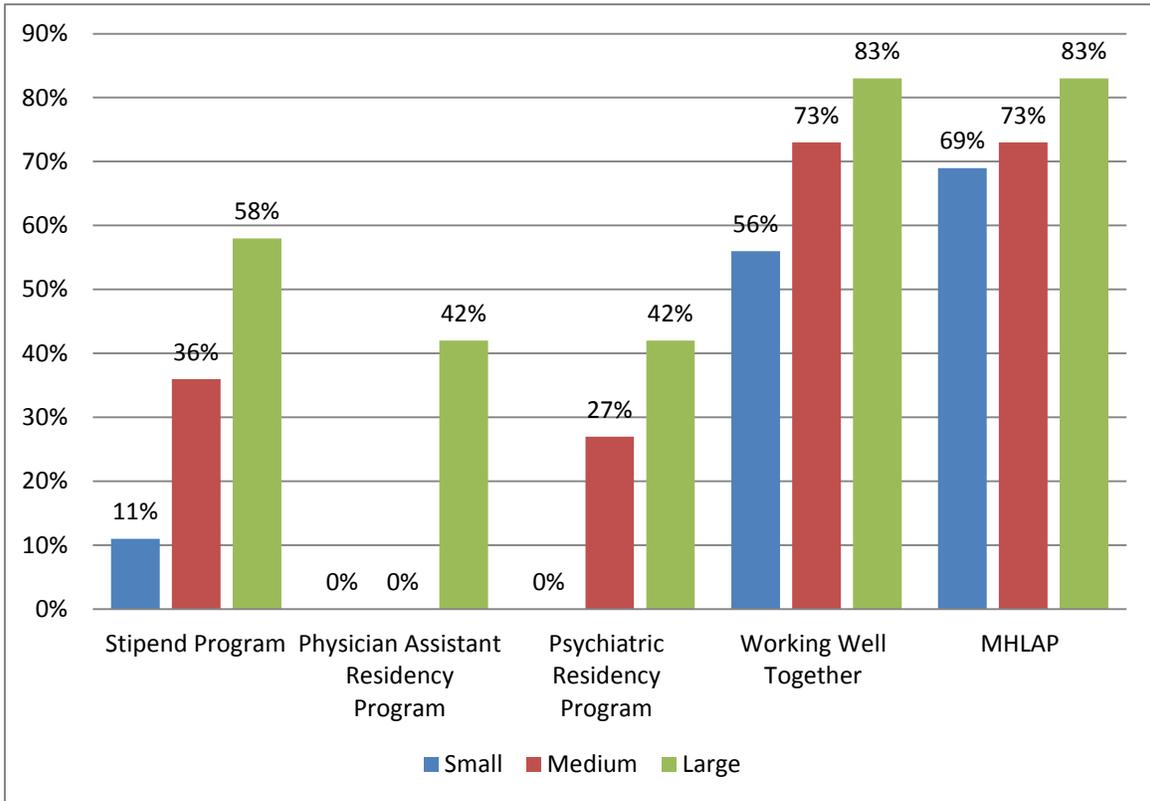
There are five statewide WET programs explored in this section of the report: the Stipend Program, the Mental Health Loan Assumption Program (MHLAP), Working Well Together, Psychiatric Residency Program, and Physician Assistant Residency Program. These programs and participation in these programs are discussed in the County-Reported Needs Assessment, the County Annual Updates, and the OSHPD-led Community Forums. The Community Forums data will be analyzed in an upcoming deliverable. Again, wide variation in the content of the Annual Updates prohibited substantive analysis. Some counties were detailed in their participation in these programs, with some counties even reporting the number of awardees and participants in each program. Other counties did not mention these programs in the Annual Updates. For this reason, the Annual Updates are not analyzed here. Instead, below we provide an analysis of reported participation in the five statewide WET programs using data from the County-Reported Needs Assessment.

Counties were designated as participants if they explicitly stated they participated or they had awardees from the county, or if their qualitative feedback showed that they were active participants in the application process for any of the programs. Counties were designated as “non-participants” if their qualitative feedback explicitly stated that they do not use the program, or if these sections were left blank.

The figures below first present an overview of participation in the five programs by region and county size, followed by an examination of participation in each individual program by region and county size.¹²

¹² Los Angeles is both a county and an MHSA region; therefore, participation rates for Los Angeles will appear as either 100% or 0%.

Figure 108: Participation in Statewide WET Programs by County Size



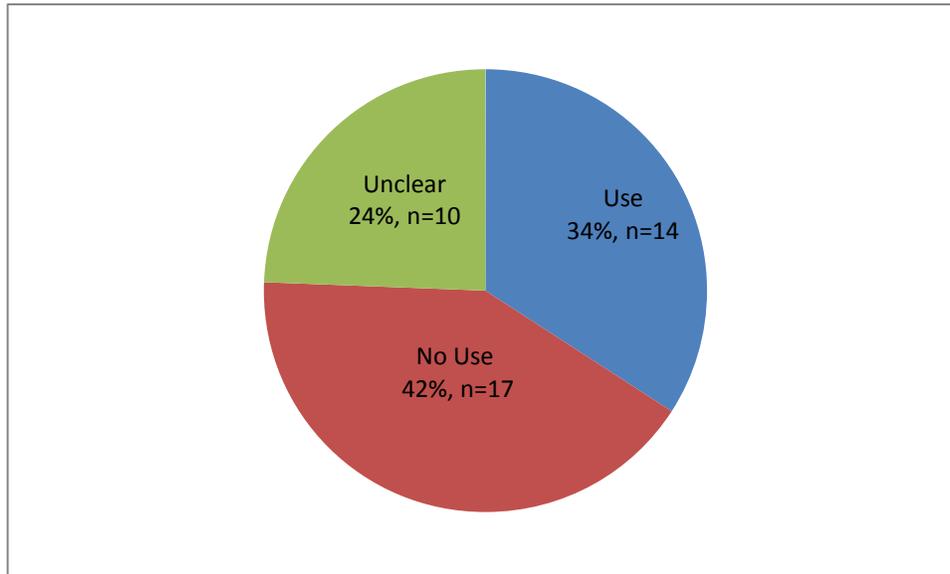
Overall, the analysis showed a strong relationship between county size and participation in these programs, as depicted in the above graph. Large counties participated the most, followed by medium counties, and small counties participated the least or not at all. These patterns are most evident for the programs that require University and student engagement: the Stipend program, Psychiatric Residency Program, and Physician Assistant Residency Program.

Stipend Programs

The statewide Stipend Program is available for graduate students studying Clinical Psychology, Marriage and Family Therapy, Psychiatric Mental Health Nurse Practice, and Social Work. In exchange for the stipend, students must commit to at least one year of work as an MFT Intern, MSW, or Nurse Practitioner in the public mental health system after graduation.

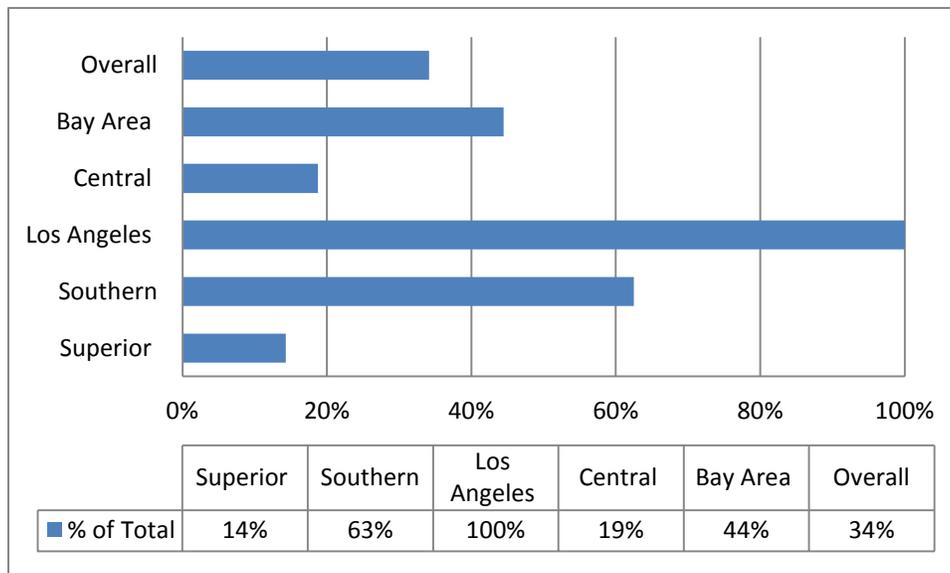
Data on stipend participation was drawn from the County Reported needs Assessment, where counties were asked to comment on their current use of the Stipend program and to provide any comments and recommendations. Blank responses were interpreted as non-participation in the program.

Figure 109: Overall Stipend Program Participation (n=41)



As shown in the figure above, 34% percent of counties responded that they were participating in the stipend program. Forty-two percent of counties responded that they were not participating in the stipend program or left this section blank. At times respondents commented on the stipend program, but did not make clear whether their county was in fact participating in the program. In such cases, responses regarding participation were logged as “unclear,” which was the case for 24% of counties.

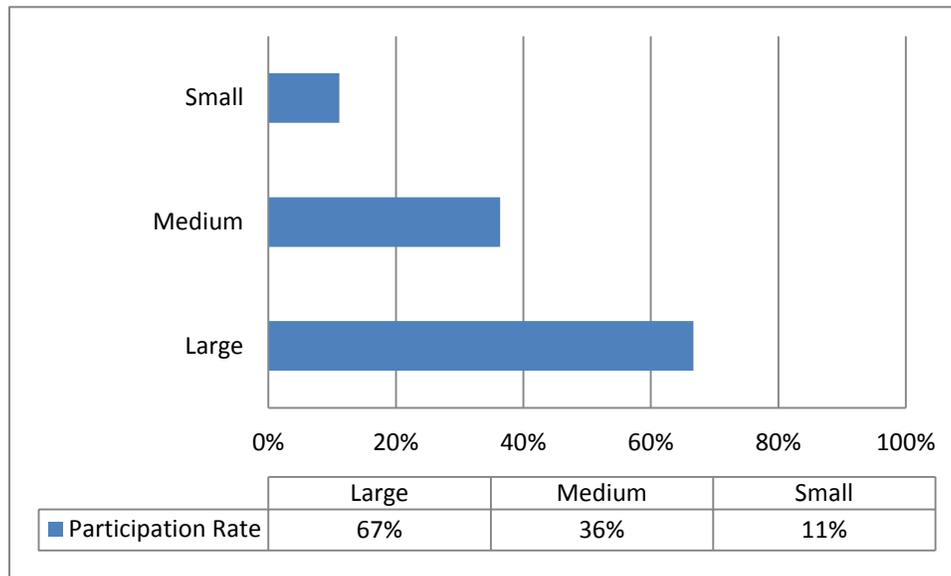
Figure 110: Stipend Program Participation by MHSR Region



The Los Angeles and Southern regions demonstrated the highest proportions of counties taking part in the stipend program. Over 60% of counties in the Southern regions reported participating

in the program. This was followed by over 40% of Bay Area counties, 19% of counties in the Central Region, and 14% of counties in the Superior region.

Figure 111: Stipend Program Participation by County Size



As the chart above depicts, rates of participation in the stipend program increased with county size. Only 11% of small counties reported participating in the stipend program, while 36% of medium counties and 67% of large counties participated.

Physician Assistants Residency Program

The Physician Assistant Residency Program added a specific mental health track to a healthcare-wide Song-Brown Physician Assistant Residency Program. The program is meant to enhance the mental health workforce, especially to strengthen the number of individuals who can oversee psychiatric treatment plans and administer medication to mental health patients. Physician Assistant residency programs that train second-year residents to specialize in mental health are eligible to apply for augmented funding.

Only 12% of counties (five counties) reported participation in the Physician Assistant Residency Program, making it the least utilized statewide WET program.

Figure 112: Physician Assistant Residency Program Overall Participation (n=41)

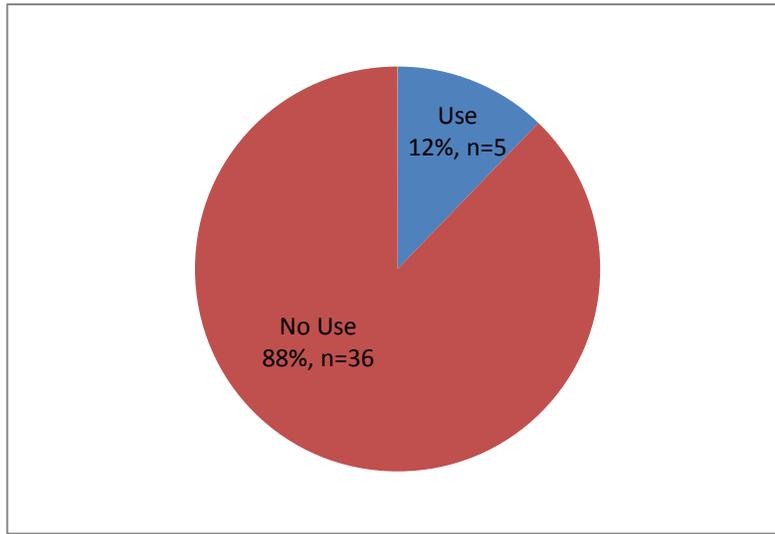
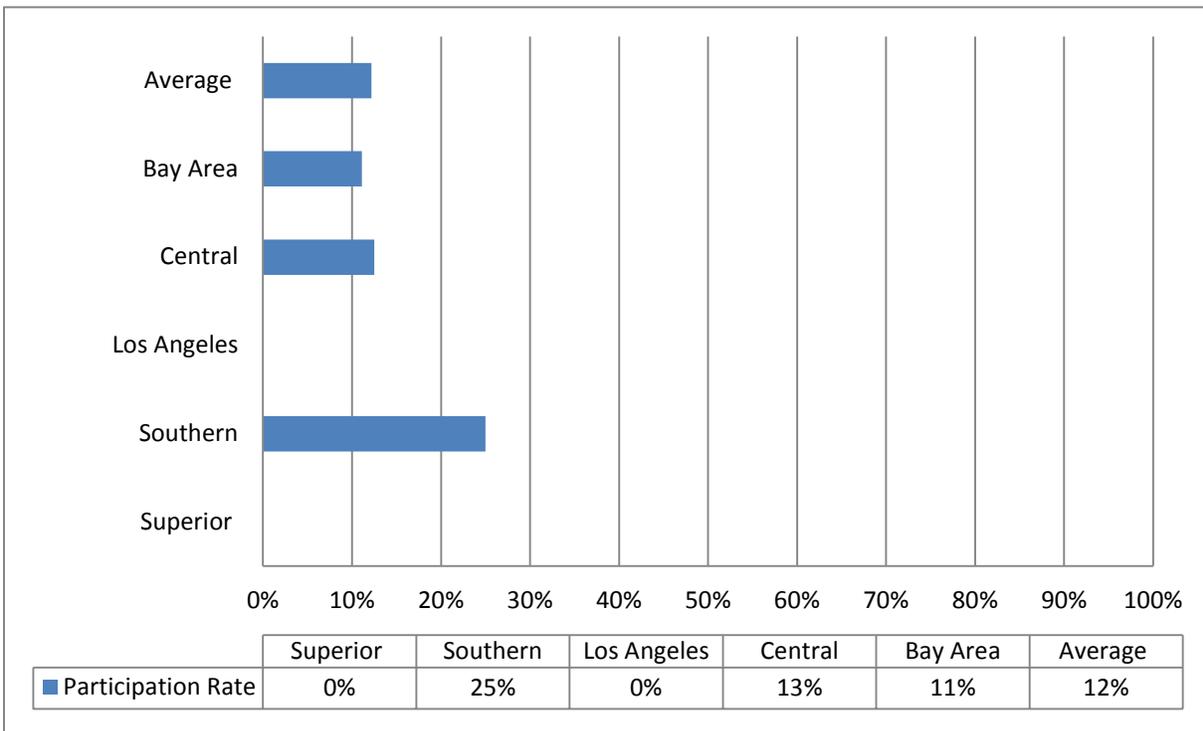


Figure 113: Participation in Physician Assistant Residency Program by MHSA Region (n=5)

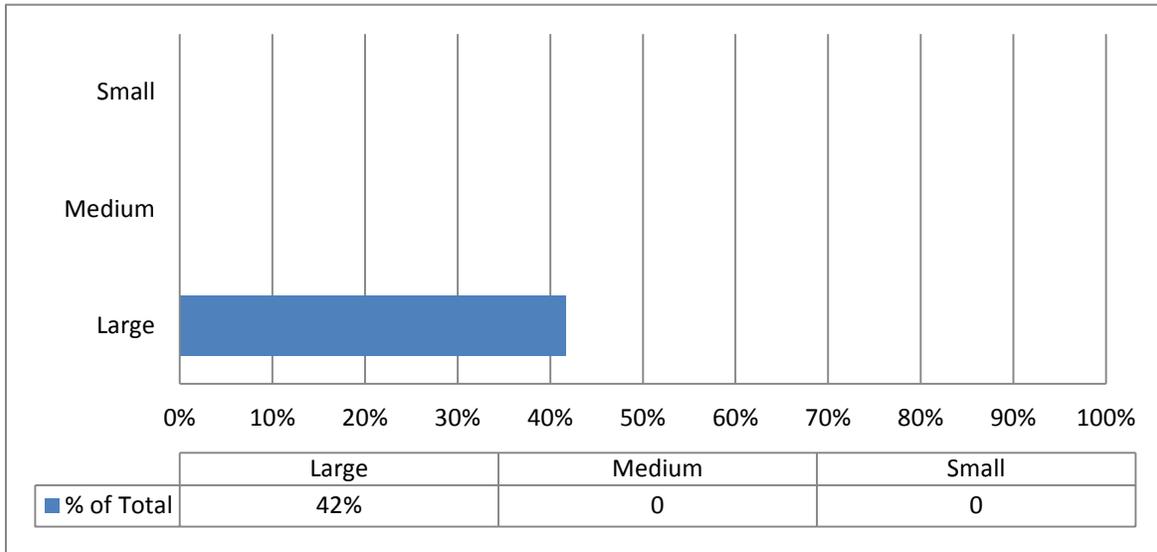


The graph above illustrates participation in the Physician Assistant Residency Program rate by MHSA region. A total of five counties reported participation in the Physician Assistant Residency Program. Twenty-five percent of the Southern Region counties (two counties) participated, constituting the largest regional participation rate for this program. Thirteen percent of MHSA



Central Region counties (two counties) participated, and 11% of counties in the Bay Area Region participated in the Physician Assistant Residency Program. Similar to the Psychiatric Residency program, there was no participation reported from the Los Angeles or Superior Regions.

Figure 114: Physician Assistant Residency Program Participation Rate by County Size (n=5)

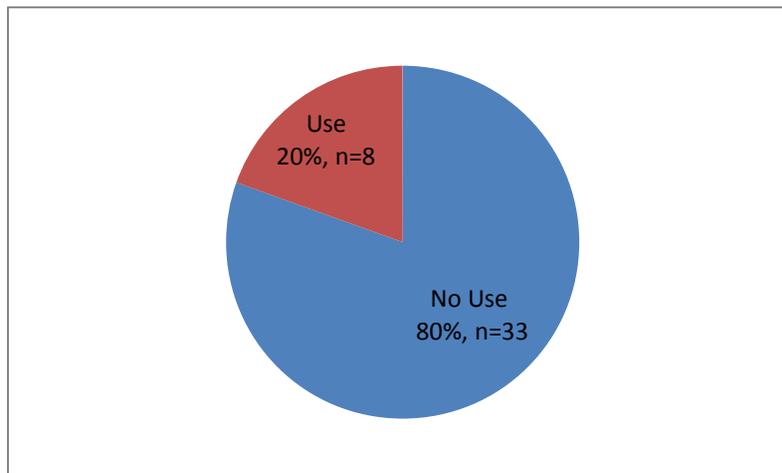


All of counties participating in the Physician Assistant Residency program were large counties, which translates to 42% of all MHSAs large counties.

Psychiatric Residency Program Use

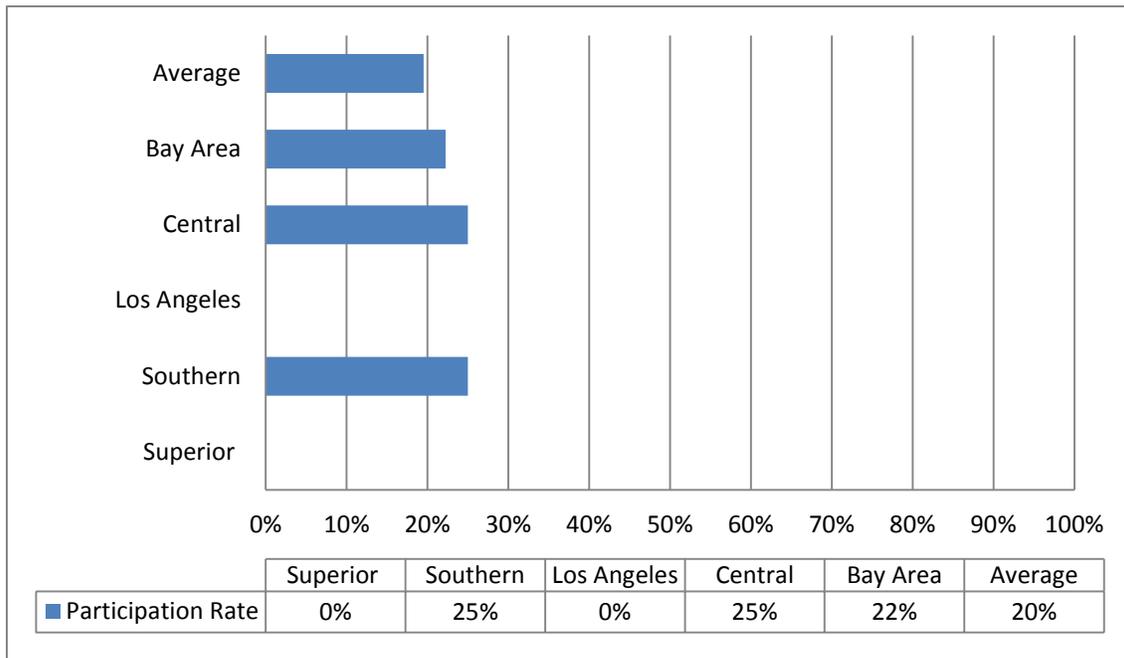
The Psychiatric Residency Program trains psychiatric residency students in the public mental health system and specifically prepares them to work with the community's most needed demographics. The psychiatric residency programs ensure that the psychiatric residents receive training in the public mental health system, working with the populations prioritized by that community. Further, the psychiatric residents are encouraged to continue working in the California public mental health system after their rotations end.

Figure 115: Overall Psychiatric Residency Program Participation (n=41)



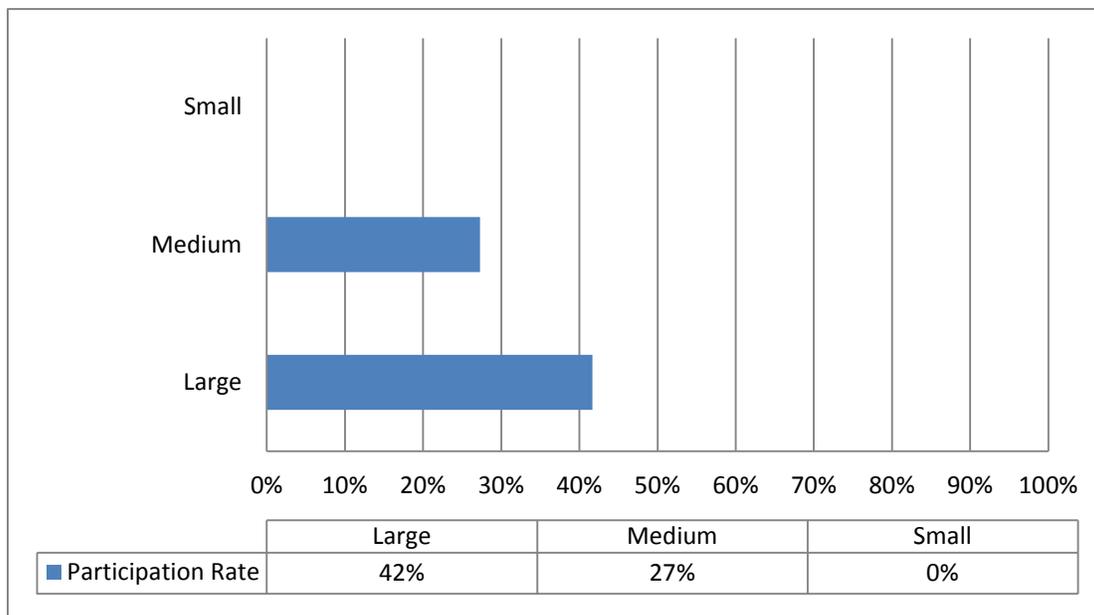
Overall, only 20% of counties (eight counties) reported using the statewide Psychiatric Residency Program.

Figure 116: Psychiatric Residency Participation Rate by MHSA Region (n=8)



The graph above depicts participation in the psychiatric residency program by region. One quarter (25%) of counties in the Central and Southern regions reported participating in the program, followed by 22% of counties in the Bay Area region. In both the Los Angeles and Superior regions, there were no counties reporting participation in the program.

Figure 117: Psychiatric Residency Participation Rate by County Size (n=8)

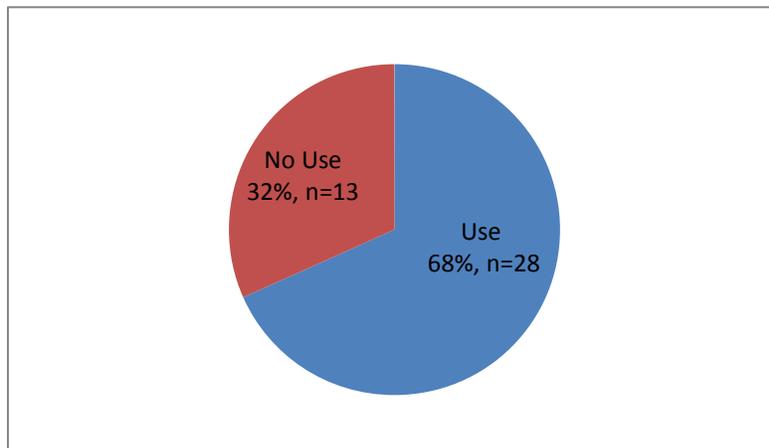


As with the stipend program, participation in this statewide program appears to be related to county size, as no small counties participated, 27% of medium counties participated, and 42% of large counties participated.

Working Well Together (WWT) Participation

The California Statewide Technical Assistance Center, more commonly known as Working Well Together (WWT), is a resource for training and technical assistance to California’s public mental health agencies regarding “recruitment, hiring, retention, and support of current and future employees with personal experience receiving public mental health.” See Appendix 4 for a complete list of WWT Trainings, along with an inventory of the California Institute of Mental Health trainings, which are frequently co-advertised or co-organized. County participation in WWT was determined by county responses in the County-Reported Workforce Needs Assessment. Counties were asked to provide a description of their use of the program and any recommendations to enhance the program.

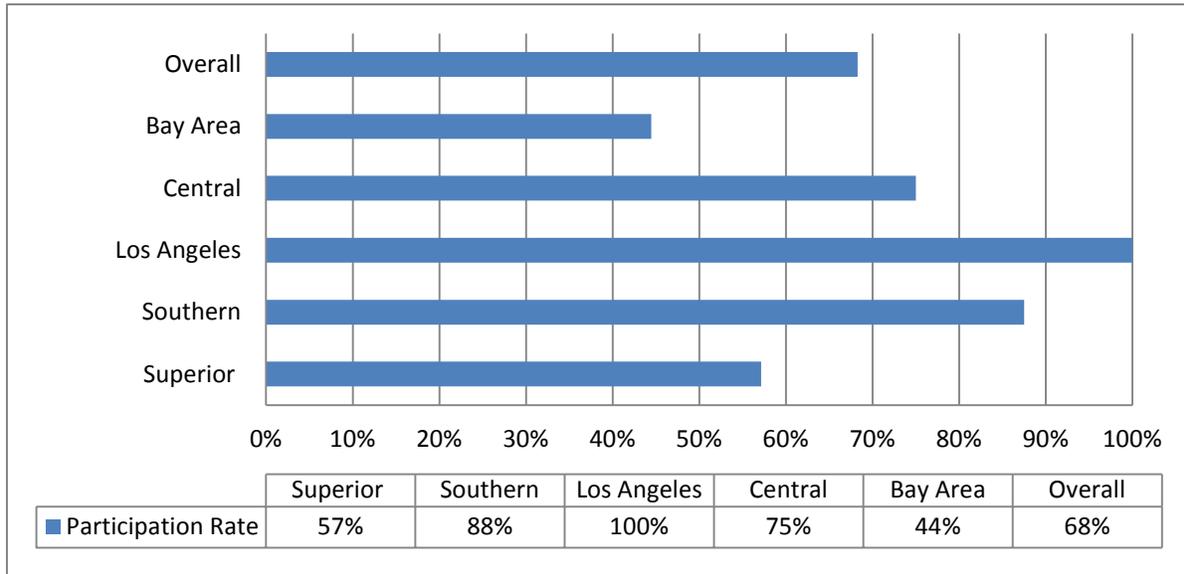
Figure 118: Overall Use of Working Well Together Programs (n=41)



Over two thirds of counties reported previous and/or continuing use of the statewide WWT Programs (68% of counties). Of these, nine counties reported that consumer and/or family member providers participated in those trainings.

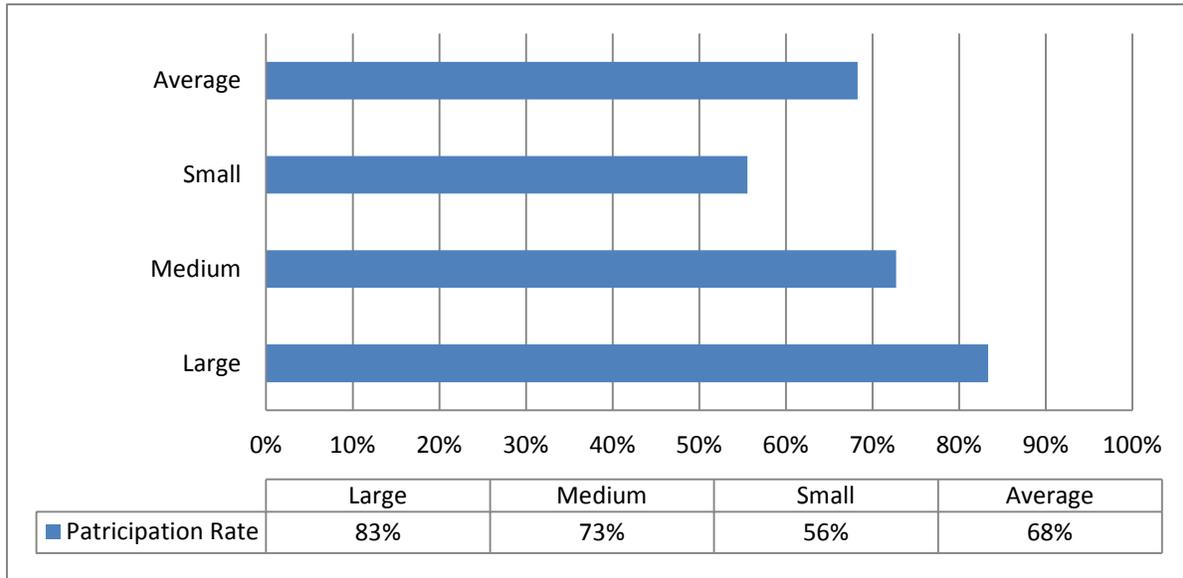


Figure 119: Working Well Together Participation Rate by MHSa Region (n=13)



Looking at WWT participation by region, Los Angeles County reported participating in the program, as did 88% of Southern counties. This was followed by 75% of counties in the Central Region, 57% of Superior Region counties, and 44% of Bay Area Region counties.

Figure 120: Working Well Together Participation Rate by County Size (n=13)



Again, as seen in previous sections, participation rates for WWT appeared to be related to county size. Large counties participated at the highest rate (83% of large counties), followed by 73% of medium counties, and 56% of small counties.

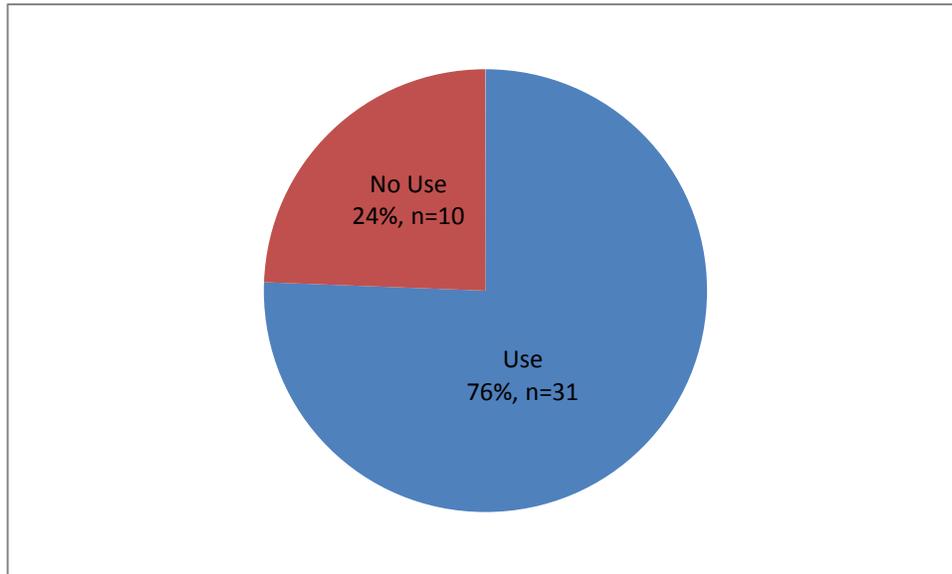
Qualitative Feedback

Counties provided qualitative feedback and suggestions for WWT trainings that were largely positive. As an example, some counties thanked specific WWT staff for their help and engagement. Among the areas of improvement, counties suggested that WWT include more regionally-based trainings, as well as improving the program’s website and overall marketing. Counties also noted that the WWT staff and programs tended to focus more heavily on improving peer support and training for consumers and/or family members, and could benefit from enhancing training related to operations and administration of public mental health services.

Mental Health Loan Assumption Program Participation

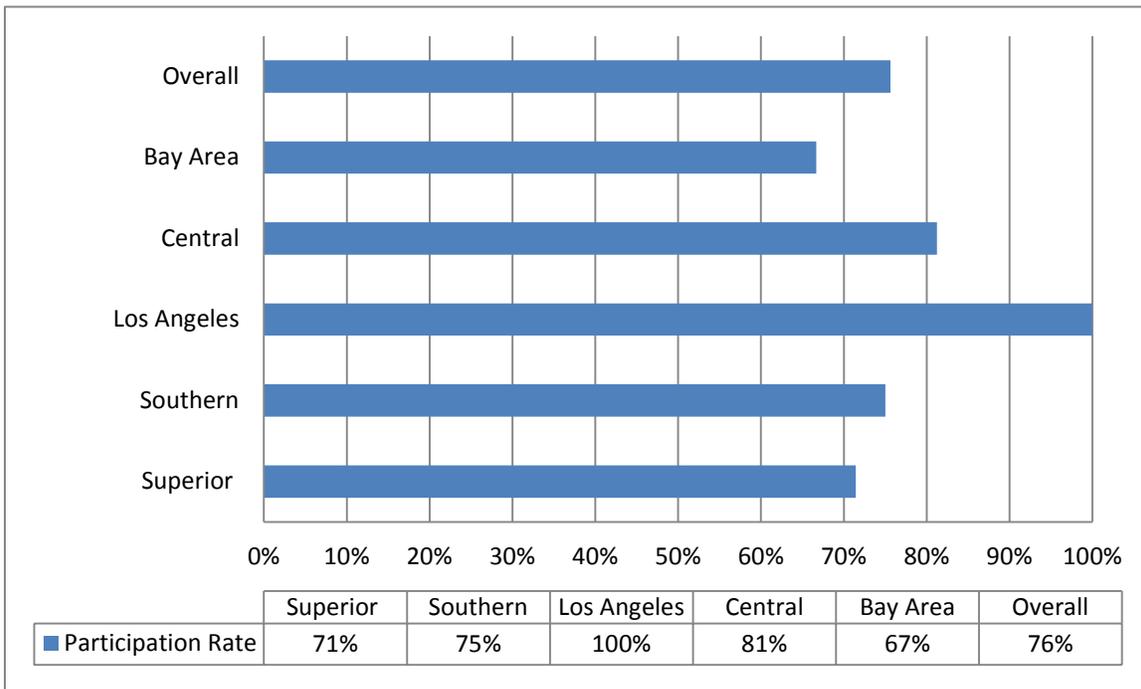
The Mental Health Loan Assumption Program (MHLAP) provides loan repayments to public mental health workers in hard-to-fill, hard-to-retain positions.

Figure 121: Overall MHLAP Participation (n=41)



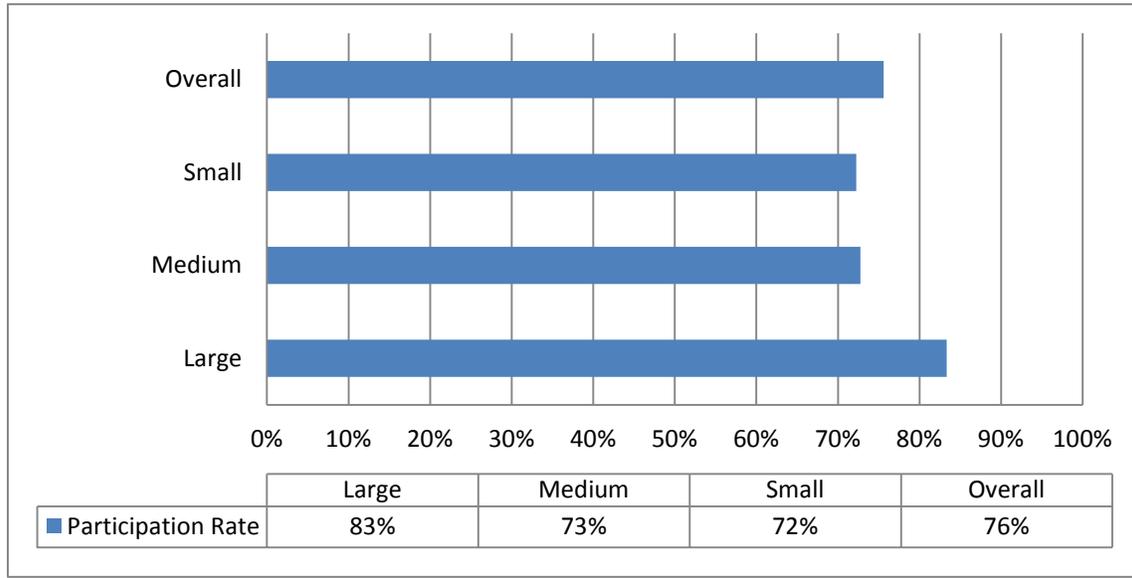
MHLAP had an overall participation rate of 76%, representing 31 counties. Along with the Working Well Together technical assistance program, MHLAP had the highest engagement rate of all statewide WET programs. Its participation rate exceeds the next highest used program by over 20%.

Figure 122: MHLAP Participation Rates, by MHS Region (n=10)



In all regions, over 60% of counties participated in MHLAP. In addition to the full participation of the Los Angeles Region, over 80% of counties in the Central Region participated in the MHLAP, followed by three quarters of the counties in the Southern Region and over 70% of counties in the Superior Region. Two thirds (67%) of Bay Area counties participated in the program.

Figure 123: MHLAP Participation Rates, by County Size (n=10)



When looking at participation by county size, participation followed a similar trend as seen in other sections, with larger counties participating at a higher rate. Eighty-three percent of large counties participated in MHLAP, followed by 73% percent of medium counties and 72% of small counties.

Qualitative Feedback

Qualitative feedback reflected the popularity of MHLAP across regions and size cohorts. Most counties commented that MHLAP had been very useful, and recommendations usually ran along the lines of requesting maintenance or expansion of the program. Counties also consistently highlighted MHLAP participation in their Annual Updates, and many counties were able to cite the exact number of county staff who had applied for and received MHLAP awards in the past year.

The most frequent suggestions from participating counties included targeting administrative and leadership staff at county mental health departments and improving information about MHLAP on brochures and in emails.

Additional Recommendations for Statewide WET Programs

Counties were given an opportunity in the Needs Assessment to provide any other comments or recommendations for statewide WET programs. Most of those comments have been integrated into the analyses above, but an additional area that did not have any specific section is the issue of succession planning.

Succession planning was the most commonly requested need, across counties and regions. Counties discussed an aging and soon-to-rotate workforce, especially in their highest ranking leadership positions. Providing counties with succession planning resources and guides should be a consideration for future endeavors.

Other comments focused on the continued need for more training. Although counties reported high levels of engagement with county and regionally-based training programs in the Annual Updates and in the Needs Assessments, many emphasized the need for continued training for cultural competency. Many statewide programs, such as WWT and the Regional partnerships, have laid a strong foundation for training, as is evidenced by the detailed descriptions of trainings and training engagement in the Annual Updates. However, counties still feel the need for trainings in cultural competency and leadership development.

Another area of need is data analysis and evaluation. Counties that noted this request acknowledged that the need for evaluation reports and continual program monitoring requires a workforce that understands data, technology, and evaluation as a whole. Training data analysts to work in the public mental health workforce could be of help to those counties.

Synthesis of Findings

The distribution of California's public mental health user population, workforce needs, graduation rates from mental health-related programs, and statewide WET programs presents many interesting points of note. Examination of the data by MHSA Region and/or county size provides cross-sections of the data that can be compared across topic areas. Cross-cutting findings contribute to increased understanding of California's public mental health workforce and identification of particular areas of need that can be targeted for further exploration. Several key findings emerged from this county-reported needs assessment across three categories: (1) user populations of the public mental health system; (2) public mental health workforce needs and education/training programs; and (3) statewide WET programs.

User Populations of the Public Mental Health System

- ***Users of the public mental health system are predominantly located in the southern part of the state, more likely to be of a minority race/ethnicity, and more likely to be adults.*** Nearly 60% of the public mental health system users reside in the MHSA Los Angeles and Southern Regions. Slightly less than two-thirds of the user



population is of a non-White race/ethnicity. And, one-half of the users are adults (ages 25-59).

Public Mental Health Workforce Needs and Education/Training Programs

- **Counties' identification of their workforce shortages is consistent with their hard-to-fill, hard-to-retain positions.** Across MHSA Regions and county sizes, psychiatrists were noted as the highest workforce shortage, followed by child/adolescent psychiatrists, licensed clinical social workers, persons with bilingual capabilities, and marriage and family therapists, respectively. The near identical trend was found across MHSA regions and county sizes for the hard-to-fill, hard-to-retain positions for each county: psychiatrists were noted most frequently, followed by child/adolescent psychiatrists, persons with bilingual/Spanish capabilities, licensed clinical social workers, and marriage and family therapists. The consistency of counties' workforce shortages and their hard-to-fill, hard-to-retain positions is expected – the assumption is that hard-to-fill, hard-to-retain positions are difficult to hire for and keep filled. Therefore, if those positions are not filled, a shortage is created due to the necessity and absence of those types of personnel. This logical trend has proven true in California's public mental health workforce.
- **Psychiatrists are of highest need in the public mental health system, but educational graduation information regarding psychiatrists has not been available.** For this report, information regarding the attainment of degrees or certificates by psychiatrists was not obtainable – the IPEDS data source did not include information on any psychiatrists completing their residency programs in 2012. While the IPEDS data source is not inclusive of all graduation information in the state, the absence of information regarding students in psychiatry is perhaps indicative of the difficulty in fully understanding the licensing, credentialing, and employment of psychiatrists in the state. The elusiveness of information regarding psychiatry may be a signal of the difficulty in recruiting psychiatrists to work in the public mental health sector, thus leading psychiatrists to be the largest workforce shortage and hardest-to-fill, hardest-to-retain position.
- **The Superior Region, small counties, and medium counties identified persons with bilingual capabilities as workforce shortages and hard-to-fill, hard-to-retain positions more often than any other MHSA region or large counties.** The Superior Region, small counties, and medium counties are also the counties with the lowest proportions of users from minority populations. Therefore, the identification of bilingual capabilities by these counties is notable. Even though these counties' public mental health system user populations are predominantly White, they still recognize the importance of bilingual capabilities in their service providers. This demonstrates counties' understanding of the importance of providing culturally competent services for traditionally unserved/underserved populations, one of MHSA's guiding principles.



- **Most counties did not identify any declining workforce needs or needs met, except for the Southern Region counties.** Most counties are not experiencing declining workforce needs; therefore, it can be assumed that their current workforce needs are not being met. The Southern Region's high presence of declining needs coincides with the fact that most of the educational institutions producing graduates with mental health-related degrees/certificates are located in that same region. If the graduates from the Southern Region enter the public mental health system in the same region and not elsewhere in the state, it can be inferred that they are contributing reduced workforce needs.
- **Of those counties that identified declining workforce needs or needs met, non-licensed mental health staff members were most frequently noted.** Licensed mental health professionals are in higher demand than non-licensed mental health staff, thus signifying the importance of training and licensing individuals in mental health-related occupations. Licensed mental health professionals provide levels of service and expertise that are higher and more technical than non-licensed professionals. This more advanced level of service is in higher demand by the counties.
- **Workforce race/ethnicity diversity needs identified by the counties coincide with the race/ethnicity compositions of the public mental health user populations across the state's MHSA Regions.** The Bay Area and Central regions identified Hispanic/Latino diversity as the highest workforce race/ethnicity need – this coincides with the relatively low proportions of Hispanic/Latino users in those MHSA regions, thus suggesting the importance of assembling a workforce that can outreach to and meet the language needs of Hispanic/Latino populations. The Superior Region identified Native American diversity as its highest workforce race/ethnicity need – this corresponds with the Superior Region's highest proportion of Native American users compared to other MHSA regions. Lastly, the Southern Region (including Los Angeles County) identified Black diversity as its highest workforce race/ethnicity need – this aligns with the Southern/Los Angeles Region having the highest proportion of Black users compared to all other MHSA regions.
- **Workforce language diversity needs identified by the counties are reflective of the race/ethnicity compositions of the public mental health user populations across the state's MHSA Regions.** The Superior Region identified the lowest variety of workforce language needs – this coincides with the very large White population in that Region. Minority (non-White) populations, and their corresponding language needs, comprise one-third of the Superior Region's public mental health system user population. Across all other MHSA regions, minority populations constitute more than 55% of their user populations.
- **The Southern Region (including Los Angeles County) has a workforce that is largely meeting the language needs of its Hispanic/Latino public mental health system user population.** The Southern Region (including Los Angeles County) has the

largest proportion and number of Hispanic/Latino public mental health system users, compared to the other MHSAs regions. However, only two counties in the Southern Region identified language as a workforce diversity need – this coincides with this Region's identification of bilingual workforce shortages and hard-to-fill, hard-to-retain positions least frequently compared with all other regions. While it cannot be stated that the Southern/Los Angeles Region is meeting the language needs of its Hispanic/Latino public mental health system user population, it can be inferred that its workforce has made great progress in bridging this gap.

- **Counties' designated positions for consumers and/or family members are largely reserved for peer and administrative/clerical positions, not provider/professional positions, and do not come with set wages.** Nearly 90% of positions designated for consumers and/or family members are peer-based or administrative/clerical in nature. Twenty-three percent of positions have clear wages set, meaning they are full- or part-time positions; therefore, 77% percent of positions do not have clear wages set, meaning they are volunteer or other non-paid positions. Counties' professional service provider workforce populations are largely not comprised of individuals identifying as consumers or family members. In order to create a workforce that includes individuals with backgrounds similar to its consumers, significant funding and efforts are necessary to aid in the education and training of consumers and family members to become professional service providers in the public mental health user system.

Statewide WET Programs

- **Statewide-WET programs are mostly being utilized by large counties.** Across the board, statewide-WET programs are being utilized by a majority of the state's large counties, followed by medium counties, and much less frequently by small counties. In particular, small counties rarely used the Stipend Program and did not use the Psychiatric and Physician Assistant Residency Stipend Programs. Accordingly, counties from the Superior Region (which is comprised mostly of small counties) participated the least in the Stipend Program and not at all in the Psychiatric and Physician Assistant Residency Stipend Programs. Qualitative feedback across programs showed that small and rural counties struggle to build partnerships with universities, recruit students into workforce training programs, and utilize statewide resources for their current staff. To this end, Working Well Together has developed specific trainings and resources for small counties.
- **The WET Stipend Program's participation across the MHSAs regions reflects the state's distribution of graduates with mental health-related degrees or certificates.** The MHSAs Southern and Los Angeles Regions have the highest number of graduates with mental health-related degrees or certificates – this corresponds with these Regions also having the highest participation rates in the Stipend Program. The remaining MHSAs regions' relative quantity of graduates also coincides with the rate of participation by



those counties in the Stipend Program; in decreasing order from Bay Area, Central, to Superior regions.

- **The WET Psychiatric Residency Stipend Program is underutilized compared to the counties' desire for psychiatrists.** Only 20% of counties use the Psychiatric Residency Stipend Program; however, psychiatrists were uniformly identified as the largest workforce shortage and hardest-to-fill, hardest-to-retain positions. This discrepancy coincides with the lack of psychiatric residency graduates in the IPEDS data analyzed for this report. The disconnect between counties' immense need for psychiatrists and their participation in the Psychiatric Residency Stipend Program is a major point for further exploration.
- **The WET Physician Assistant Residency Stipend Program is being utilized in few counties throughout the state, but is consistent with the low rate of physician assistant graduates being produced across the state.** The Physician Assistant Residency Stipend Program is being used in between 11-25% of counties in the Bay Area, Central, and Southern regions; it is not being used in the Los Angeles and Superior regions. Physician assistant graduates are being produced in low numbers throughout the state, thus potentially explaining the low rates of usage of the Physician Assistant Residency Stipend Program.
- **Los Angeles County has the highest number of graduates with mental health-related degrees or certificates, but it does not participate in the WET Psychiatric and Physician Assistant Residency Stipend Programs.** Los Angeles County does not use the Psychiatric Residency Stipend Program, but it has the highest number of graduates with mental health-related degrees or certificates. Additionally, Los Angeles County produces the most physician assistant graduates, but the county does not participate in the Physician Assistant Residency Stipend Program. The discrepancy in Los Angeles County between the large number of mental health-related graduates and physician assistants it produces and its non-participation in the Psychiatric and Physician Assistant Residency Stipend Programs is major point for further exploration.
- **The WET Mental Health Loan Assumption Program (MHLAP) is utilized by most counties, especially the large ones.** 76% of counties are using the MHLAP. All of the counties not utilizing the MHLAP did not know about the program. Targeting the advertisement of MHLAP to the appropriate leadership and administrative staff members in the non-participating counties would be an effective strategy, particularly given that all other counties who have heard of the program are also participating in it.



Appendices

Appendix 1: OSHPD's 2013 County-Reported Workforce Needs Assessment Form

California's Public Mental/Behavioral Health Workforce Needs Assessment

Due July 28, 2013

The Office of Statewide Health Planning and Development (OSHPD) is developing the next Mental Health Workforce Education and Training (WET) Five-Year Plan 2014-2019. To develop a comprehensive plan that meets local and regional needs, OSHPD is requesting information from counties that identifies their mental/behavioral health workforce needs. This need assessment will help inform the next WET Five-Year Plan and its funding priorities. Please fill out the following needs assessment for your County by July 28, 2013 and submit to OSHPD.MHSAWET@oshpd.ca.gov . If you have any questions on how to fill out the form please contact Sergio Aguilar at (916) 326-3699 or Sergio.Aguilar@oshpd.ca.gov

Survey completed by (name, title or position): _____

Contact Information (email and phone number): _____

County: _____

GENERAL

Existing and Future Mental/Behavioral Health Workforce Shortages (Provide the top 7 mental/behavioral health workforce shortages in your county in order starting with highest need by using sample occupational categories outlined in Appendix 1 below):

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.



Mental/Behavioral Health Workforce Demands Met (Does your county have occupational categories that are declining in need and/or demand? Provide the top 5 mental/behavioral health workforce occupational categories in your county that are declining in needs starting with the least need by using sample occupational categories outlined in Appendix 1 below):

- 1.
- 2.
- 3.
- 4.
- 5.

Mental/Behavioral Health Workforce Hard-to-Fill Hard-to-Retain Positions (Provide the top 7 mental/behavioral health workforce hard-to-fill, hard-to-retain positions in your county in order starting with highest need)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Mental/Behavioral Health Workforce Diversity (Provide the top 7 mental/behavioral health workforce diversity needs in your county in order starting with highest need using sample categories outlined in Appendix 1 below):

- 1.
- 2.



- 3.
- 4.
- 5.
- 6.
- 7.

Language Proficiency (Provide the top 7 mental/behavioral health workforce language proficiency needs in your county in order starting with highest need using sample languages outlined in Appendix 1 below):

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Consumer and/or Family Member Designated Positions: (Provide a description of currently designated positions and specific roles for consumer and/or family member positions, if any. Provide a description of future roles consumers and/or family members could have in your county, if any.)

STATEWIDE WET PROGRAMS

Stipends (Provide the top 5 mental/behavioral health workforce occupational categories that should have a statewide WET stipend program in order starting with highest need by using



sample occupational categories outlined in Appendix 1 below):

- 1.
- 2.
- 3.
- 4.
- 5.

Stipends (Provide a description of your counties use of and recommendations to enhance this program)

Mental Health Loan Assumption (MHLAP) (Provide the top 5 mental/behavioral health workforce occupational categories that should be eligible for MHLAP in order starting with highest need by using sample occupational categories outlined in Appendix 1 below):

- 1.
- 2.
- 3.
- 4.
- 5.

MHLAP (Provide a description of your counties use of and recommendations to enhance this program)



Residency Program for Physician Assistants (Provide a description of your counties use of and recommendations to enhance this program)

Psychiatric Residency Program (Provide a description of your counties use of and recommendations to enhance this program)

Working Well Together (Provide a description of your counties use of and recommendations to enhance this program)

Regional Partnerships (Provide a description of your counties use of and recommendations to enhance this program)



Statewide WET Programs (What other mental health workforce development programs should be included in the statewide WET Program?)

Statewide WET Programs (Other comments not referenced above)

OTHER

Other miscellaneous: (Provide a description of any other critical mental/behavioral health workforce needs not identified in the sections above including but not limited to supervisor needs, succession planning needs, needs for individuals with lived experience):



Appendix 1- Definitions

Mental/Behavioral Health Workforce Occupational Categories: *Unlicensed Mental Health Professional:* Benefits/Eligibility Specialist; Case Manager/Service Coordinator; Designated Consumer and/or Family Member Position, Direct Service Provider (e.g. peer specialist, peer navigators, community support workers; Designated Consumer and/or Family Member Position, Training and Education (e.g. speakers bureaus, recovery educators, peer provider training staff); Designated Consumer and/or Family Member Position, Administrative/ Policy and Planning (e.g. consumer relations managers, clerical, IT support); Designated Consumer and/or Family Member Position, Advocacy (e.g. peer advocates, patient rights advocates, community organizers,); Employment Service Staff (e.g., vocational rehabilitation specialist); Housing Support Services Staff; Mental Health Rehabilitation Specialist; Promotora; Substance Abuse Counselor (alcohol and other drug abuse counselor); Other Non-Licensed Mental Health Staff Not listed above; *Licensed Mental Health Professional:* Clinical Nurse Specialist; Clinical Psychologist; Licensed Clinical Psychologist; Licensed Clinical Social Worker; Licensed Professional Clinical Counselors; Licensed Psychiatric Technician; Marriage and Family Therapist; Occupational Therapist; Physician Assistant; Psychologist; Psychiatrist; Psychiatrist, Child/Adolescent; Psychiatrist, Geriatric; Psychiatric Mental Health Nurse Practitioner; School Psychologist.

Diversity: Includes dimensions of race/ethnicity, gender, sexual orientation, socio-economic status, age, physical and/or mental abilities, and/or other pertinent characteristics.

Language: English; Spanish; Vietnamese; Chinese; Cantonese; Mandarin; Tagalog; Korean; Cambodian; Russian; Armenian; Khmer; Farsi; Arabic; Hmong; and Sign Language.



Appendix 2: Counties, Regions, Sizes, and Available Data

Table 5: Counties, Regions, Sizes, and Available Data

County	Region	County Size	Needs Assessment	Annual Update	Community Forum
Alameda	Bay Area	Large	Needs Assessment		Community Forum
Alpine	Central	Small		Annual Update	
Amador	Central	Small	Needs Assessment		
Berkeley City ¹³	Bay Area	Small		Annual Update	
Butte	Superior	Medium	Needs Assessment	Annual Update	Community Forum
Calaveras	Central	Small	Needs Assessment	Annual Update	
Colusa	Superior	Small			
Contra Costa	Bay Area	Large	Needs Assessment		
Del Norte	Superior	Small		Annual Update	
El Dorado	Central	Small	Needs Assessment		
Fresno	Central	Large	Needs Assessment	Annual Update	
Glenn	Superior	Small		Annual Update	
Humboldt	Superior	Small		Annual Update	Community Forum
Imperial	Southern	Small	Needs Assessment	Annual Update	
Inyo	Central	Small	Needs Assessment		
Kern	Southern	Large	Needs Assessment	Annual Update	
Kings	Central	Small	Needs Assessment	Annual Update	
Lake	Superior	Small	Needs Assessment	Annual Update	
Lassen	Superior	Small	Needs Assessment		
Los Angeles	Los Angeles	Large	Needs Assessment	Annual Update	Community Forum
Madera	Central	Small	Needs Assessment		
Marin	Bay Area	Medium	Needs Assessment	Annual Update	

¹³ The City of Berkeley and the Tri-City Region are MHA municipalities, not counties.



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Mariposa	Central	Small	Needs Assessment	Annual Update	
Mendocino	Superior	Small	Needs Assessment		
Merced	Central	Medium		Annual Update	
Modoc	Superior	Small			
Mono	Central	Small			
Monterey	Bay Area	Medium		Annual Update	
Napa	Bay Area	Small	Needs Assessment	Annual Update	Community Forum
Nevada	Superior	Small		Annual Update	
Orange	Southern	Large	Needs Assessment		Community Forum
Placer	Central	Medium	Needs Assessment	Annual Update	
Plumas	Superior	Small		Annual Update	
Riverside	Southern	Large	Needs Assessment	Annual Update	
Sacramento	Central	Large	Needs Assessment	Annual Update	Community Forum
San Benito	Bay Area	Small	Needs Assessment	Annual Update	
San Bernardino	Southern	Large	Needs Assessment	Annual Update	Community Forum
San Diego	Southern	Large	Needs Assessment	Annual Update	Community Forum
San Francisco	Bay Area	Large	Needs Assessment		
San Joaquin	Central	Medium	Needs Assessment	Annual Update	
San Luis Obispo	Southern	Medium		Annual Update	
San Mateo	Bay Area	Medium	Needs Assessment		
Santa Barbara	Southern	Medium		Annual Update	
Santa Clara	Bay Area	Large			
Santa Cruz	Bay Area	Medium	Needs Assessment	Annual Update	
Shasta	Superior	Small	Needs Assessment	Annual Update	Community Forum
Sierra	Superior	Small			
Siskiyou	Superior	Small	Needs Assessment		



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Solano	Bay Area	Medium	Needs Assessment		
Sonoma	Bay Area	Medium			
Stanislaus	Central	Medium	Needs Assessment	Annual Update	Community Forum
Sutter-Yuba	Central	Small	Needs Assessment		
Tehama	Superior	Small		Annual Update	
Tri City¹⁴	Southern	Medium	Needs Assessment	Annual Update	
Trinity	Superior	Small	Needs Assessment	Annual Update	
Tulare	Central	Medium	Needs Assessment	Annual Update	Community Forum
Tuolumne	Central	Small	Needs Assessment		
Ventura	Southern	Large	Needs Assessment	Annual Update	Community Forum
Yolo	Central	Medium	Needs Assessment		

¹⁴ The City of Berkeley and the Tri-City Region are MHSAs municipalities, not counties.



Appendix 3: Occupational Categorizations

Table 6: Professions Categorizations

OSHPD Occupational Categories
Benefits/Eligibility Specialist
Bilingual
Case Manager/Service Coordinator
Clinical Nurse Specialist
Clinical Psychologist
Designated Consumer/Family Member, Admin/Policy
Designated Consumer/Family Member, Direct Service
Designated Consumer/Family Member, General
Designated Consumer/Family Member, Training/Education
Employment Service Staff
Housing Support Services Staff
Licensed Clinical Psychologist
Licensed Clinical Social Worker
Licensed Professional Clinical Counselors
Licensed Psychiatric Technician
Marriage and Family Therapist
Mental Health Rehabilitation Specialist
Nurse, Other
Occupational Therapist
Other Non-Licensed Mental Health Staff Not listed above
Physician Assistant
Promotora
Psychiatric Mental Health Nurse Practitioner
Psychiatrist
Psychiatrist, Child/Adolescent
Psychiatrist, Geriatric
Psychologist
School Psychologist
Spanish
Substance Abuse Counselor



Table 7: OSHPD-Designated Languages

OSHPD Designated Languages
Arabic
Armenian
ASL
Cambodian
Cantonese
Chinese
English
Farsi
Hmong
Khmer
Korean
Mandarin
Other
Spanish
Tagalog
Vietnamese

Table 8: OSHPD-Designated Diversity Categories

Any Element of:
Race/Ethnicity
Age
Gender
Language
Physical/Mental Abilities
Sexual Orientation

Appendix 4: Training Programs

Programs	Type	Sponsored By
ADA Disability and Business Technical Assistance Centers	Employee Accommodations and Supportive Resources	Working Well Together
California Department of Rehabilitation	Employee Accommodations and Supportive Resources	Working Well Together
Center for Psychiatric Rehabilitation, Boston University	Employee Accommodations and Supportive Resources	Working Well Together
Disability Management Employer Coalition	Employee Accommodations and Supportive Resources	Working Well Together
Employee Accommodations & Supportive Resources	Employee Accommodations and Supportive Resources	Working Well Together
Employment and Disability Institute, Cornell University	Employee Accommodations and Supportive Resources	Working Well Together
Family Village	Employee Accommodations and Supportive Resources	Working Well Together
Independent Living Research Utilization	Employee Accommodations and Supportive Resources	Working Well Together
Job Accommodation Network	Employee Accommodations and Supportive Resources	Working Well Together
Mary Ellen Copeland D Wellness Recovery Action Plan	Employee Accommodations and Supportive Resources	Working Well Together
Mental Health Association - California	Employee Accommodations and Supportive Resources	Working Well Together
National Depressive & Manic-Depressive Association	Employee Accommodations and Supportive Resources	Working Well Together
Network of Care for Behavioral Health	Employee Accommodations and Supportive Resources	Working Well Together
Partnership For Workplace Mental Health	Employee Accommodations and Supportive Resources	Working Well Together



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

People With Disabilities Foundation (PWDF)	Employee Accommodations and Supportive Resources	Working Well Together
San Mateo Family Emergency Brochure	Employee Accommodations and Supportive Resources	Working Well Together
Clean Up Your Past To Have A Future	Past Training	Working Well Together
Motivational Interviewing	Past Trainings	Working Well Together
Understanding Client Culture: An Experiential Workshop	Past Trainings	Working Well Together
Behavioral Health and Superintendent of Schools ROP Collaborative	Recruiting, Hiring, and Workforce Retention	Working Well Together
California Mental Health Cooperative Programs	Recruiting, Hiring, and Workforce Retention	Working Well Together
Consumer and Family Members Employment Readiness/Hiring/Retention Programs Inventory and Analysis	Recruiting, Hiring, and Workforce Retention	Working Well Together
Developing a Supportive Work Environment	Recruiting, Hiring, and Workforce Retention	Working Well Together
Disability Benefits 101	Recruiting, Hiring, and Workforce Retention	Working Well Together
Effectively Managing Employees with Disabilities	Recruiting, Hiring, and Workforce Retention	Working Well Together
Increasing Diversity and Cultural Competence in Public Mental Health Workforce	Recruiting, Hiring, and Workforce Retention	Working Well Together
Partnership for Workplace Mental Health	Recruiting, Hiring, and Workforce Retention	Working Well Together
Peer Specialist Scoring Templates	Recruiting, Hiring, and Workforce Retention	Working Well Together
Recruitment and Retention Checklist and Guidelines	Recruiting, Hiring, and Workforce Retention	Working Well Together
What a Difference a Friend Makes	Stigma and Discrimination Resources	Working Well Together



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

The Shaken Tree: Families Living with Mental Illness	Stigma and Discrimination Resources	Working Well Together
Stigma & Discrimination Resources	Stigma and Discrimination Resources	Working Well Together
Open Minds Open Doors	Stigma and Discrimination Resources	Working Well Together
Mental Health Services Act Oversight & Accountability Commission	Stigma and Discrimination Resources	Working Well Together
Lesson Plan: Understanding Behavioral Health	Stigma and Discrimination Resources	Working Well Together
Family Diversity Projects, Inc.	Stigma and Discrimination Resources	Working Well Together
Beat The Stigma & Discrimination	Stigma and Discrimination Resources	Working Well Together
Overcoming Stigma and Discrimination In The Behavioral Health Workplace (e-Learning)	Stigma Reduction	Working Well Together
Consumer and Family Member Employment-Stanislaus County	Training the Mental Health Workforce	Working Well Together
Development of Curriculum for Parent Advocates and Parent Partners	Training the Mental Health Workforce	Working Well Together
Lesson Plan: Careers in Behavioral Health	Training the Mental Health Workforce	Working Well Together
Lived Experience Workforce Development Mission Statement	Training the Mental Health Workforce	Working Well Together
Making the Connection-Best Now Bilingual Peer Training	Training the Mental Health Workforce	Working Well Together
National Mental Health Consumers' Self-Help Clearinghouse	Training the Mental Health Workforce	Working Well Together
Peer Training Programs: Consumer Providers = Recovery In Action	Training the Mental Health Workforce	Working Well Together
San Diego MHSE WET Program Summary	Training the Mental Health Workforce	Working Well Together



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

SPIRIT Course List	Training the Mental Health Workforce	Working Well Together
Consumers In The Mental Health Workforce (e-Learning)	WWT Developed Curriculum	Working Well Together
Hiring Consumer and Family Members into the Public Mental Health Workforce	WWT Developed Curriculum	Working Well Together
Preparing the Workforce: Employing Consumers and Family Members as Employees in the Mental Health Workforce	WWT Developed Curriculum	Working Well Together
Retention and Support of Consumer and Family Member Staff Training (WWT non e-Learning Curriculum)	WWT Developed Curriculum	Working Well Together
Supporting Lived Experience	WWT Developed Curriculum	Working Well Together
in the Workforce:		Working Well Together
A New Needs Paradigm		Working Well Together
Training Individuals Who Identify as Consumers and Family Members for Employment in Public Mental Health (WWT non e-Learning Curriculum)	WWT Developed Curriculum	Working Well Together
Creating A Successful County WRAP Program	WWT Webinar Series	Working Well Together
Getting Answers to Questions About Juvenile Justice, CPS, and Special Education	WWT Webinar Series	Working Well Together
WWT Webinar Series: Empowering Community Wellness	WWT Webinar Series	Working Well Together
WWT: Overcoming Stigma and Discrimination in the Behavioral Health Workplace	Elearning	CIMH
An Introduction to Mental Health Services Act Prevention Program Evaluation	Elearning	CIMH
WWT: Consumers in the Mental Health Workforce	Elearning	CIMH
Prevention and Early Intervention (PEI) Essentials and Culturally Relevant Program Development	Elearning	CIMH



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Ethnic, Racial and Cultural Considerations When Integrating Consumers and Family Members into the Public Mental Health Workforce	Elearning	CIMH
"Integrating Primary Care, Mental Health, and Substance Use Services"	Webinar	CIMH
Recovery Perspectives in Wellness Models	Small county webinar series	CIMH
Wellness Centers: Models and Programming	Small county webinar series	CIMH
Employees with Lived Experience within County Systems	Small county webinar series	CIMH
Sustainability and Funding Streams	Small county webinar series	CIMH
Behavioral Health Technology Landscape	Health Information Technology Webinar Series for Small Counties	CIMH
Creating a Successful MHSA Technology Component Proposal	Health Information Technology Webinar Series for Small Counties	CIMH
AB3632 Presentation for Small Counties	Health Information Technology Webinar Series for Small Counties	CIMH
Outcomes-Based Training Plan (OBTP)	Health Information Technology Webinar Series for Small Counties	CIMH
General Introduction to the Innovation Component of the MHSA	Local Mental Health Boards and Commissions Webcasts	CIMH
Co-Occurring Disorders: Integrated Dual Diagnosis Treatment	Local Mental Health Boards and Commissions Webcasts	CIMH
Advanced Mental Health Board 101	Local Mental Health Boards and Commissions Webcasts	CIMH
Mental Health Board 101	Local Mental Health Boards and Commissions Webcasts	CIMH
Orientation to Webinars for Novices: 5:00 PM		CIMH
MHSA Housing Coordinator Call	Local Mental Health Boards and Commissions Webcasts	CIMH
AB 109 Basic Webinar	Local Mental Health Boards and Commissions Webcasts	CIMH
Community Capacity-Building Strategies in Placer and Stanislaus Counties		CIMH



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

County Strategies for People without Coverage and other Vulnerable Populations		CIMH
Work as a Priority Series - Gary Shaheen	AB 2034 Employment Webcast Trainings	CIMH
Assisting People with Criminal Records to Get Jobs Series - Roberta Meyers Peoples	AB 2034 Employment Webcast Trainings	CIMH
Job Development Series - Mindy Oppenheim	AB 2034 Employment Webcast Trainings	CIMH
Values Driven Evidence-Based Practices 101	Evidence-Based Practices Webcast Trainings for Consumer & Family Members	CIMH
Cultural Competence and Evidence-Based Practices	Evidence-Based Practices Webcast Trainings for Consumer & Family Members	CIMH
Children's Evidence-Based Practices	Evidence-Based Practices Webcast Trainings for Consumer & Family Members	CIMH
Adult Evidence-Based Practices	Evidence-Based Practices Webcast Trainings for Consumer & Family Members	CIMH
Older Adults Evidence-Based Practices	Evidence-Based Practices Webcast Trainings for Consumer & Family Members	CIMH
Research-informed Programs and Services for Older Adults	PEI	CIMH
Disparities in Mental Health Access Webcast	PEI	CIMH
Children and Youth at Risk for School Failure	PEI	CIMH
Underserved Cultural Populations	PEI	CIMH
Individuals Experiencing Onset of Serious Psychiatric Illness	PEI	CIMH
Children and Youth at Risk of or Experiencing Juvenile Involvement	PEI	CIMH
Trauma Exposed Individuals/Psycho-Social Impact of Trauma	PEI	CIMH
Suicide Prevention	PEI	CIMH
Prevention and Early Intervention (PEI) Guidelines Webcast	PEI	CIMH

Appendix 5: Classification of Instructional Programs (CIP) Codes Pertinent to Mental Health-Related Occupations

The following table lists the CIP codes that RDA selected as pertinent to mental health-related occupations. The full list of CIP codes used by the IPEDS system can be found online.¹⁵ The table below also notes which programs had graduates in the 2012 IPEDS data.

Table 9: CIP Codes of Mental Health-Related Programs

CIP Code	Program Description	Graduates in 2012
34.0104	Addiction Prevention and Treatment	
42.2801	Clinical Psychology	X
42.2802	Community Psychology	
42.2803	Counseling Psychology	X
42.2805	School Psychology	X
42.2807	Clinical Child Psychology	
42.2809	Geropsychology	
42.2810	Health/Medical Psychology	X
42.2811	Family Psychology	
42.2813	Applied Psychology	X
42.2899	Clinical, Counseling and Applied Psychology, Other	X
44.0701	Social Work	X
44.0702	Youth Services/Administration	
44.0799	Social Work, Other	
51.0912	Physician Assistant	X
51.1201	Medicine	X
51.1501	Substance Abuse/Addiction Counseling	X
51.1502	Psychiatric/Mental Health Services Technician	X
51.1503	Clinical/Medical Social Work	X
51.1504	Community Health Services/Liaison/Counseling	
51.1505	Marriage and Family Therapy/Counseling	X
51.1507	Psychoanalysis and Psychotherapy	
51.1508	Mental Health Counseling/Counselor	X
51.1599	Mental and Social Health Services and Allied Professionals, Other	X
51.2306	Occupational Therapy/Therapist	X
51.3801	Registered Nursing/Registered Nurse	X
51.3803	Adult Health Nurse/Nursing	X
51.3805	Family Practice Nurse/Nursing	X
51.3806	Maternal/Child Health and Neonatal Nurse/Nursing	

¹⁵ <http://nces.ed.gov/ipeds/cipcode/browse.aspx?y=55>



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

51.3809	Pediatric Nurse/Nursing	X
51.3810	Psychiatric/Mental Health Nurse/Nursing	X
51.3811	Public Health/Community Nurse/Nursing	X
51.3813	Clinical Nurse Specialist	X
51.3815	Occupational and Environmental Health Nursing	
51.3819	Palliative Care Nursing	
51.3820	Clinical Nurse Leader	X
51.3821	Geriatric Nurse/Nursing	
51.3822	Women's Health Nurse/Nursing	
51.3899	Registered Nursing, Nursing Administration, Nursing Outreach and Clinical Nursing, Other	X
51.3901	Licensed Practical/Vocational Nurse Training	X
60.0428	Psychiatry Residency Program	
60.0501	Addiction Psychiatry Residency Program	
60.0507	Child and Adolescent Psychiatry Residency Program	
60.0521	Geriatric Psychiatry Residency Program	



Appendix 6: Categories of Educational Programs

In this report’s analyses of the geographic distributions of graduates from various mental health-related programs, certain educational programs were grouped together to allow for simpler presentations. Below are the programs (by CIP designated names; see Appendix 5) that were grouped into each overall educational program category used above in this report.

Table 10: Grouped Categories of Educational Programs

Psychology	Nursing	Social Work	Substance Abuse Counseling	Marriage and Family Therapy	Physician Assistant
<ul style="list-style-type: none"> • Clinical Psychology • Counseling Psychology • School Psychology • Health/Medical Psychology • Applied Psychology • Clinical, Counseling and Applied Psychology, Other 	<ul style="list-style-type: none"> • Registered Nursing/Registered Nurse • Adult Health Nurse/Nursing • Family Practice Nurse/Nursing • Pediatric Nurse/Nursing • Psychiatric/Mental Health Nurse/Nursing • Public Health/Community Nurse/Nursing • Clinical Nurse Specialist • Clinical Nurse Leader • Registered Nursing, Nursing Administration, Nursing Research and Clinical Nursing, Other • Licensed Practical/Vocational Nurse Training 	<ul style="list-style-type: none"> • Social Work 	<ul style="list-style-type: none"> • Substance Abuse / Addiction Counseling 	<ul style="list-style-type: none"> • Marriage and Family Therapy / Counseling 	<ul style="list-style-type: none"> • Physician Assistant



Appendix 7: Distribution of California’s Public Mental Health System Users

The following tables detail the distributional counts of California’s public mental health system users in FY2009/2010. The counts are organized by MHSR Region, county size, race/ethnicity, age groups, and gender.

Table 11: Counts of California Public Mental Health System Users by MHSR Region and Race/Ethnicity

MHSR Region	White	Hispanic/Latino	Asian	Pacific Islander	Black	American Indian	Multi-Race	Other
Bay Area	41,485	18,549	9,167	252	25,665	700	13,417	3,768
Central	57,593	28,845	7,358	156	18,448	1,328	13,574	2,143
Los Angeles	37,719	83,839	1,543	-	47,149	1,029	171	171
Southern	90,520	61,165	7,847	392	22,127	1,203	19,633	4,772
Superior	15,216	3,942	718	24	747	566	2,374	219

Table 12: Counts of California Public Mental Health System Users by County Size and Race/Ethnicity

MHSR Region	White	Hispanic/Latino	Asian	Pacific Islander	Black	American Indian	Multi-Race	Other
Large	171,047	162,064	21,392	676	105,639	3,036	34,370	9,021
Medium	41,075	24,992	4,323	100	6,951	582	10,351	1,568
Small	30,411	9,283	919	48	1,547	1,209	4,448	483

Table 13: Counts of California Public Mental Health System Users by MHSR Region and Age Group

MHSR Region	Children	TAY	Adults	Older Adults
Bay Area	27,885	21,026	62,816	11,064
Central	42,437	26,727	68,152	8,485
Los Angeles	61,720	35,813	81,722	11,239
Southern	56,798	46,207	104,166	13,286
Superior	6,706	4,232	11,418	1,631



Table 14: Counts of California Public Mental Health System Users by County Size and Age Group

MHSA Region	Children	TAY	Adults	Older Adults
Large	154,765	107,156	261,402	35,736
Medium	27,437	18,147	43,858	6,681
Small	13,344	8,703	23,014	3,288

Table 15: Counts of California Public Mental Health System Users by MHSA Region and Gender

MHSA Region	Female	Male
Bay Area	59,662	62,899
Central	71,715	74,050
Los Angeles	88,938	101,507
Southern	104,422	115,752
Superior	12,471	11,510

Table 16: Counts of California Public Mental Health System Users by County Size and Gender

MHSA Region	Female	Male
Large	264,040	294,607
Medium	48,075	47,856
Small	25,093	23,255



Appendix 8: Postsecondary Educational Institutions with Mental Health-Related Programs

The following tables list all of the California postsecondary educational institutions that have mental health-related programs. These institutions were found in the IPEDS 2012 dataset used to develop findings for this report. The following tables also include the numbers of programs and graduates from each educational institution, across all disciplines and for each particular discipline.

Table 17: Educational Institutions with Mental Health-Related Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Programs	Number of Graduates
Advanced College	13180 Paramount Blvd.	South Gate	California	90280	Los Angeles County	1	73
Allan Hancock College	800 South College Drive	Santa Maria	California	93454-6399	Santa Barbara County	5	82
Alliant International University	10455 Pomerado Road	San Diego	California	92131-1799	San Diego County	6	481
American River College	4700 College Oak Dr	Sacramento	California	95841-4286	Sacramento County	3	107
American University of Health Sciences	1600 East Hill St	Signal Hill	California	90755-3612	Los Angeles County	1	27
Angeles College	3440 Wilshire Blvd Ste 310	Los Angeles	California	90010	Los Angeles County	1	62
Angeles Institute	11688 SOUTH STREET, SUITE 205	ARTESIA	California	90701-6610	Los Angeles County	1	82
Antelope Valley College	3041 West Ave K	Lancaster	California	93536-5426	Los Angeles County	2	113
Antioch University-Los Angeles	400 Corporate Pointe	Culver City	California	90230-7615	Los Angeles County	1	11
Antioch University-Santa Barbara	602 Anacapa Street	Santa Barbara	California	93101	Santa Barbara County	1	63
Argosy University-Inland Empire	3401 Centre Lake Drive, Suite 200	Ontario	California	91761	San Bernardino County	5	81
Argosy University-Los Angeles	5230 Pacific Concourse, Suite 200	Los Angeles	California	90045	Los Angeles County	5	76
Argosy University-Orange County	601 South Lewis Street	Orange	California	92868	Orange County	6	110

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Argosy University-San Diego	1615 Murray Canyon Road, Suite 100	San Diego	California	92108	San Diego County	5	0
Argosy University-San Francisco Bay Area	1005 Atlantic Avenue	Alameda	California	94501	Alameda County	6	135
Azusa Pacific Online University	511 W Citrus Edge St	Glendora	California	91740	Los Angeles County	1	0
Azusa Pacific University	901 E Alostia	Azusa	California	91702-7000	Los Angeles County	9	421
Bakersfield College	1801 Panorama Dr	Bakersfield	California	93305-1299	Kern County	2	154
Beaumont Adult School	1575 Cherry Ave	Beaumont	California	92223	Riverside County	1	42
Biola University	13800 Biola Ave	La Mirada	California	90639-0001	Los Angeles County	3	82
Blake Austin College	611 Orange Dr Ste K	Vacaville	California	95687	Solano County	1	36
Brandman University	16355 Laguna Canyon Road	Irvine	California	92618	Orange County	6	303
Butte College	3536 Butte Campus Drive	Oroville	California	95965-8399	Butte County	5	139
Cabrillo College	6500 Soquel Dr	Aptos	California	95003	Santa Cruz County	1	56
California Baptist University	8432 Magnolia Ave	Riverside	California	92504-3297	Riverside County	2	142
California Career College	7003 Owensmouth Avenue	Canoga Park	California	91303-2006	Los Angeles County	1	37
California College-San Diego	2820 Camino Del Rio South, Suite 300	San Diego	California	92108-3824	San Diego County	1	0
California Institute of Integral Studies	1453 Mission Street	San Francisco	California	94103	San Francisco County	2	184
California Lutheran University	60 W Olsen Rd	Thousand Oaks	California	91360-2787	Ventura County	2	77
California Nurses Educational Institute	5200 E. Ramon Rd. Suite I-1	Palm Springs	California	92264	Riverside County	2	43
California State University-Bakersfield	9001 Stockdale Hwy	Bakersfield	California	93311-1099	Kern County	4	182
California State University-Channel Islands	One University Dr	Camarillo	California	93012	Ventura County	1	49

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

California State University-Chico	First and Normal Sts	Chico	California	95929-0150	Butte County	5	251
California State University-Dominguez Hills	1000 E Victoria St	Carson	California	90747-0005	Los Angeles County	5	543
California State University-East Bay	25800 Carlos Bee Blvd	Hayward	California	94542	Alameda County	4	285
California State University-Fresno	5241 N Maple Ave	Fresno	California	93740	Fresno County	5	426
California State University-Fullerton	800 N State College Blvd	Fullerton	California	92831-3599	Orange County	3	306
California State University-Long Beach	1250 Bellflower Blvd	Long Beach	California	90840-0115	Los Angeles County	6	506
California State University-Los Angeles	5151 State University Dr	Los Angeles	California	90032	Los Angeles County	6	436
California State University-Northridge	18111 Nordhoff St	Northridge	California	91330	Los Angeles County	2	160
California State University-Sacramento	6000 J St	Sacramento	California	95819-2694	Sacramento County	6	416
California State University-San Bernardino	5500 University Pky	San Bernardino	California	92407-2397	San Bernardino County	4	262
California State University-San Marcos	333 S Twin Oaks Valley Rd	San Marcos	California	92096-0001	San Diego County	1	136
California State University-Stanislaus	One University Circle	Turlock	California	95382-0299	Stanislaus County	3	159
Career Care Institute	43770 Fifteenth St W Ste 115	Lancaster	California	93534	Los Angeles County	1	275
Career Colleges of America	5612 E Imperial Hwy	South Gate	California	90280	Los Angeles County	2	66
Career Development Institute	1830 S Robertson Blvd	Los Angeles	California	90035	Los Angeles County	1	2

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Career Networks Institute	702 W Town and Country Rd	Orange	California	92868-4710	Orange County	3	111
Carrington College California-Antioch	2157 Country Hills Drive	Antioch	California	94509	Contra Costa County	1	46
Carrington College California-Sacramento	8909 Folsom Blvd	Sacramento	California	95826	Sacramento County	4	134
Carrington College California-San Jose	6201 San Ignacio Ave.	San Jose	California	95119	Santa Clara County	2	71
Carrington College California-San Leandro	15555 E. 14th Street, Suite 500	San Leandro	California	94578-1977	Alameda County	2	47
Casa Loma College-Van Nuys	6725 Kester Ave	Van Nuys	California	91405	Los Angeles County	1	219
CBD College	3699 Wilshire Blvd., Fourth Floor	Los Angeles	California	90010	Los Angeles County	2	47
Central Nursing College	3550 Wilshire Blvd Ste 830	Los Angeles	California	90010	Los Angeles County	1	57
Cerritos College	11110 Alondra Blvd	Norwalk	California	90650-6298	Los Angeles County	1	105
Cerro Coso Community College	3000 College Heights Blvd	Ridgecrest	California	93555-9571	Kern County	2	17
CES College	401 S. Glenoaks Blvd. Suite 211	Burbank	California	91502-2750	Los Angeles County	1	16
Chabot College	25555 Hesperian Blvd	Hayward	California	94545	Alameda County	1	50
Chaffey College	5885 Haven Ave	Rancho Cucamonga	California	91737-3002	San Bernardino County	3	119
Chapman University	One University Dr.	Orange	California	92866	Orange County	4	63
Charles A. Jones Career and Education Center	5451 Lemon Hill Ave	Sacramento	California	95824-1529	Sacramento County	1	84
Charles R Drew University of Medicine and Science	1731 E 120th St	Los Angeles	California	90059	Los Angeles County	3	50
Charter College-Canyon Country	27125 Sierra Hwy Ste 329	Canyon Country	California	91351	Los Angeles County	1	63
Citrus College	1000 W	Glendora	California	91741-	Los Angeles	3	90



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

	Foothill Blvd			1899	County		
City College of San Francisco	50 Phelan Ave	San Francisco	California	94112-1898	San Francisco County	3	187
Clovis Adult Education	1452 David E Cook Way	Clovis	California	93611	Fresno County	1	82
College of Marin	835 College Ave	Kentfield	California	94904-2590	Marin County	1	40
College of San Mateo	1700 W Hillsdale Blvd	San Mateo	California	94402-3784	San Mateo County	4	72
College of the Canyons	26455 Rockwell Canyon Rd	Santa Clarita	California	91355-1899	Los Angeles County	1	108
College of the Desert	43-500 Monterey Ave	Palm Desert	California	92260	Riverside County	3	116
College of the Redwoods	7351 Tompkins Hill Rd	Eureka	California	95501-9300	Humboldt County	4	85
College of the Sequoias	915 S Mooney Blvd	Visalia	California	93277-2214	Tulare County	1	136
College of the Siskiyous	800 College Ave	Weed	California	96094-2899	Siskiyou County	3	89
Colton-Redlands-Yucaipa Regional Occupational Program	1214 Indiana Ct	Redlands	California	92374	San Bernardino County	1	0
Concorde Career College-San Bernardino	201 East Airport Drive, Suite A	San Bernardino	California	92408-3403	San Bernardino County	1	111
Concordia University-Irvine	1530 Concordia West	Irvine	California	92612-3203	Orange County	1	49
Contra Costa College	2600 Mission Bell Dr	San Pablo	California	94806-3195	Contra Costa County	1	54
Copper Mountain Community College	6162 Rotary Way	Joshua Tree	California	92252	San Bernardino County	3	57
Cuesta College	Highway 1	San Luis Obispo	California	93403-8106	San Luis Obispo County	5	192
Cypress College	9200 Valley View	Cypress	California	90630-5897	Orange County	4	168
De Anza College	21250 Stevens Creek Blvd.	Cupertino	California	95014	Santa Clara County	1	59
Diablo Valley College	321 Golf Club Rd	Pleasant Hill	California	94523	Contra Costa County	3	45
Dominican University of California	50 Acacia Ave	San Rafael	California	94901-2298	Marin County	4	172
Downey Adult School	12340 Woodruff Ave	Downey	California	90241	Los Angeles County	1	57

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

East Los Angeles College	1301 Avenida Cesar Chavez	Monterey Park	California	91754-6099	Los Angeles County	4	224
El Camino College-Compton Center	1111 East Artesia Blvd.	Compton	California	90221-5393	Los Angeles County	1	45
El Camino Community College District	16007 Crenshaw Blvd	Torrance	California	90506	Los Angeles County	1	63
Evergreen Valley College	3095 Yerba Buena Rd	San Jose	California	95135-1598	Santa Clara County	1	68
Feather River Community College District	570 Golden Eagle Ave	Quincy	California	95971-9124	Plumas County	2	4
Fielding Graduate University	2112 Santa Barbara St	Santa Barbara	California	93105-3538	Santa Barbara County	6	129
Foothill College	12345 El Monte Rd	Los Altos Hills	California	94022	Santa Clara County	1	41
Four-D College	1020 East Washington Street	Colton	California	92324	San Bernardino County	1	222
Franklin Career College	1274 Slater Cir	Ontario	California	91761	San Bernardino County	1	54
Fresno City College	1101 E. University Ave	Fresno	California	93741	Fresno County	3	254
Fresno Pacific University	1717 S Chestnut Ave	Fresno	California	93702-4709	Fresno County	5	44
Fuller Theological Seminary in California	135 N Oakland Ave	Pasadena	California	91182	Los Angeles County	4	135
Gavilan College	5055 Santa Teresa Blvd	Gilroy	California	95020	Santa Clara County	4	67
Glendale Community College	1500 N Verdugo Rd	Glendale	California	91208-2894	Los Angeles County	3	100
Golden Gate University-San Francisco	536 Mission Street	San Francisco	California	94105-2968	San Francisco County	1	5
Golden West College	15744 Goldenwest St.	Huntington Beach	California	92647-2710	Orange County	3	174
Grossmont College	8800 Grossmont College Dr	El Cajon	California	92020-1799	San Diego County	1	85
Gurnick Academy of Medical Arts	2121 S El Camino Real Bldg C 200	San Mateo	California	94403	San Mateo County	2	356
Hacienda La Puente Adult Education	14101 E. Nelson Ave	La Puente	California	91746-0002	Los Angeles County	2	127
Hartnell College	411 Central Avenue	Salinas	California	93901	Monterey County	4	73



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Holy Names University	3500 Mountain Blvd	Oakland	California	94619-1699	Alameda County	7	52
Homestead Schools	23800 Hawthorne Blvd.	Torrance	California	90505	Los Angeles County	1	133
Hope International University	2500 E Nutwood Ave	Fullerton	California	92831-3199	Orange County	1	28
Humboldt State University	1 Harpst Street	Arcata	California	95521-8299	Humboldt County	3	110
ICDC College	5422 Sunset Blvd.	Los Angeles	California	90027	Los Angeles County	2	546
Imperial Valley College	380 E. Aten Road	Imperial	California	92251-0158	Imperial County	5	66
InfoTech Career College	8527 Alondra Blvd, #174	Paramount	California	90723-5258	Los Angeles County	1	0
Institute of Technology Inc	564 W Herndon	Clovis	California	93612	Fresno County	1	58
InterCoast Colleges-Burbank	175 East Olive Avenue, 3rd Floor	Burbank	California	91502	Los Angeles County	2	36
InterCoast Colleges-Carson	One Civic Plaza-Ste 110	Carson	California	90745	Los Angeles County	2	63
InterCoast Colleges-Elk Grove	9355 E. Stockton	Elk Grove	California	95624	Sacramento County	2	57
InterCoast Colleges-Orange	3745 W. Chapman Avenue #100	Orange	California	92868	Orange County	2	80
InterCoast Colleges-Riverside	1989 Atlanta Ave	Riverside	California	92507	Riverside County	2	152
InterCoast Colleges-Roseville	1200 Melody Ln Ste 120	Roseville	California	92678	Placer County	1	61
InterCoast Colleges-West Covina	1400 W. West Covina Pkwy-2nd Floor	West Covina	California	91790	Los Angeles County	2	93
ITT Technical Institute-Rancho Cordova	10863 Gold Center Dr	Rancho Cordova	California	95670-6034	Sacramento County	1	0
John F Kennedy University	100 Ellinwood Way	Pleasant Hill	California	94523-4817	Contra Costa County	5	164
Kaplan College-North Hollywood	6180 Laurel Cyn Blvd Ste 101	North Hollywood	California	91606-3231	Los Angeles County	1	54
Kaplan College-Sacramento	4330 Watt Ave., Suite 400	Sacramento	California	95821	Sacramento County	1	48
Kaplan	9055 Balboa	San Diego	California	92123	San Diego	3	444



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

College-San Diego	Avenue				County		
Kaplan College-Stockton	722 W. March Ln	Stockton	California	95207	San Joaquin County	1	55
Kaplan College-Vista	2022 University Dr	Vista	California	92083-7736	San Diego County	2	155
La Sierra University	4500 Riverwalk Parkway	Riverside	California	92515-8247	Riverside County	1	10
Lake Tahoe Community College	One College Drive	South Lake Tahoe	California	96150	El Dorado County	2	5
Lassen Community College	Hwy 139	Susanville	California	96130	Lassen County	3	22
Loma Linda University	11139 Anderson Street	Loma Linda	California	92350	San Bernardino County	29	569
Long Beach City College	4901 E. Carson St.	Long Beach	California	90808-1706	Los Angeles County	7	346
Los Angeles City College	855 N Vermont Ave	Los Angeles	California	90029	Los Angeles County	3	51
Los Angeles County College of Nursing and Allied Health	1237 N. Mission Rd.	Los Angeles	California	90033-1084	Los Angeles County	1	70
Los Angeles Harbor College	1111 Figueroa Place	Wilmington	California	90744-2397	Los Angeles County	1	76
Los Angeles Pierce College	6201 Winnetka Ave	Woodland Hills	California	91371-0002	Los Angeles County	3	77
Los Angeles Southwest College	1600 W Imperial Hwy.	Los Angeles	California	90047-4899	Los Angeles County	2	45
Los Angeles Trade Technical College	400 W Washington Blvd	Los Angeles	California	90015-4181	Los Angeles County	1	45
Los Angeles Valley College	5800 Fulton Avenue	Valley Glen	California	91401-4096	Los Angeles County	1	81
Los Medanos College	2700 East Leland Road	Pittsburg	California	94565	Contra Costa County	2	57
Loyola Marymount University	One Lmu Drive	Los Angeles	California	90045-2659	Los Angeles County	3	38
Marian Health Careers Center	3325 Wilshire Blvd Ste 1010	Los Angeles	California	90010	Los Angeles County	1	77
Marian Health Careers Center-Van Nuys Campus	5900 Sepulveda Blvd Ste 101	Van Nuys	California	91411	Los Angeles County	1	40
Mendocino College	1000 Hensley Creek Road	Ukiah	California	95482	Mendocino County	3	23
Merced College	3600 M St	Merced	California	95348-2898	Merced County	4	68

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Merritt College	12500 Campus Dr	Oakland	California	94619-3196	Alameda County	4	48
MiraCosta College	One Barnard Drive	Oceanside	California	92056-3899	San Diego County	3	46
Mission College	3000 Mission College Blvd	Santa Clara	California	95054-1897	Santa Clara County	5	155
Modesto Junior College	435 College Ave	Modesto	California	95350-5800	Stanislaus County	2	150
Monterey Peninsula College	980 Fremont St	Monterey	California	93940-4799	Monterey County	1	24
Moorpark College	7075 Campus Rd	Moorpark	California	93021-1695	Ventura County	1	61
Moreno Valley College	16130 Lasselle St	Moreno Valley	California	92551	Riverside County	2	36
Mount St. Mary's College	12001 Chalon Rd	Los Angeles	California	90049-1599	Los Angeles County	8	297
Mt. San Antonio College	1100 N Grand Ave	Walnut	California	91789-1399	Los Angeles County	5	213
Mt. San Jacinto Community College District	1499 N. State St.	San Jacinto	California	92583-2399	Riverside County	5	129
Mueller College	123 Camino de la Reina, #100 North	San Diego	California	92108-3002	San Diego County	1	17
Napa Valley College	2277 Napa-Vallejo Hwy	Napa	California	94558-6236	Napa County	4	144
National University	11255 North Torrey Pines Road	La Jolla	California	92037-1011	San Diego County	5	578
NCP College of Nursing	21615 Hesperian Boulevard	Hayward	California	94541-7026	Alameda County	1	94
NCP College of Nursing	257 Longford Drive, Rm 5	South San Francisco	California	94080-1005	San Mateo County	1	33
North-West College-Glendale	221 North Brand	Glendale	California	91203	Los Angeles County	1	0
North-West College-Pasadena	530 E Union	Pasadena	California	91101	Los Angeles County	1	24
North-West College-Pomona	170 W Holt Ave	Pomona	California	91768	Los Angeles County	1	22
North-West College-Riverside	4550 La Sierra Ave	Riverside	California	92503	Riverside County	1	64
North-West College-West Covina	2121 W Garvey Ave	West Covina	California	91790	Los Angeles County	1	68
Notre Dame de Namur University	1500 Ralston Ave	Belmont	California	94002-1908	San Mateo County	2	37

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Ohlone Community College	43600 Mission Blvd	Fremont	California	94539-0390	Alameda County	1	29
Oxnard College	4000 S Rose Ave	Oxnard	California	93033-6699	Ventura County	2	54
Pacific College	3160 Red Hill Ave	Costa Mesa	California	92626	Orange County	3	138
Pacific Oaks College	55 Eureka Street	Pasadena	California	91103	Los Angeles County	1	18
Pacific Union College	One Angwin Ave	Angwin	California	94508-9707	Napa County	3	122
Pacific Graduate Institute	249 Lambert Rd	Carpinteria	California	93013	Santa Barbara County	2	154
Palladium Technical Academy	10503 Valley Blvd	El Monte	California	91731	Los Angeles County	1	0
Palo Alto University	1791 Arastradero Rd	Palo Alto	California	94304-1337	Santa Clara County	3	144
Palo Verde College	One College Drive	Blythe	California	92225	Riverside County	2	82
Palomar College	1140 W. Mission	San Marcos	California	92069-1487	San Diego County	3	78
Pasadena City College	1570 E Colorado Blvd.	Pasadena	California	91106-2003	Los Angeles County	2	136
Pepperdine University	24255 Pacific Coast Hwy	Malibu	California	90263	Los Angeles County	2	230
Phillips Graduate Institute	19900 Plummer Street	Chatsworth	California	91311	Los Angeles County	4	110
Pitzer College	1050 North Mills Avenue	Claremont	California	91711-6101	Los Angeles County	2	1
Point Loma Nazarene University	3900 Lomaland Dr	San Diego	California	92106-2899	San Diego County	4	65
Porterville College	100 E College Ave	Porterville	California	93257	Tulare County	3	75
Preferred College of Nursing-Los Angeles	3424 Wilshire Blvd Ste 1100	Los Angeles	California	90010	Los Angeles County	1	69
Reedley College	995 N Reed Ave	Reedley	California	93654	Fresno County	3	13
Rio Hondo College	3600 Workman Mill Rd	Whittier	California	90601-1616	Los Angeles County	4	119
Riverside City College	4800 Magnolia Avenue	Riverside	California	92506	Riverside County	3	232
Sacramento City College	3835 Freeport Blvd	Sacramento	California	95822-1386	Sacramento County	3	163
Saddleback College	28000 Marguerite Pky	Mission Viejo	California	92692-3635	Orange County	5	213
Saint Marys College of	1928 Saint Marys Road	Moraga	California	94556	Contra Costa	3	7



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

California					County		
Samuel Merritt University	3100 Telegraph Avenue	Oakland	California	94609	Alameda County	5	535
San Bernardino Valley College	701 South Mount Vernon Avenue	San Bernardino	California	92410-2798	San Bernardino County	4	157
San Diego City College	1313 Park Boulevard	San Diego	California	92101-4787	San Diego County	4	144
San Diego State University	5500 Campanile Dr	San Diego	California	92182	San Diego County	6	423
San Diego State University-Imperial Valley Campus	720 Heber Ave	Calexico	California	92231	Imperial County	2	17
San Francisco State University	1600 Holloway Ave	San Francisco	California	94132	San Francisco County	4	252
San Joaquin Delta College	5151 Pacific Ave	Stockton	California	95207	San Joaquin County	6	266
San Joaquin Valley College-Visalia	8400 W Mineral King Ave	Visalia	California	93291-9283	Tulare County	4	111
San Jose City College	2100 Moorpark Ave	San Jose	California	95128-2798	Santa Clara County	3	16
San Jose State University	1 Washington Sq	San Jose	California	95192-0001	Santa Clara County	7	502
Santa Ana College	1530 W. 17th Street	Santa Ana	California	92706-3398	Orange County	1	108
Santa Barbara Business College-Bakersfield	5300 California Avenue	Bakersfield	California	93309	Kern County	1	115
Santa Barbara Business College-Santa Maria	303 E Plaza Dr Ste 1	Santa Maria	California	93454	Santa Barbara County	1	13
Santa Barbara City College	721 Cliff Drive	Santa Barbara	California	93109-2394	Santa Barbara County	4	73
Santa Clara University	500 El Camino Real	Santa Clara	California	95053	Santa Clara County	1	63
Santa Monica College	1900 Pico Blvd	Santa Monica	California	90405-1628	Los Angeles County	1	64
Santa Rosa Junior College	1501 Mendocino Avenue	Santa Rosa	California	95401-4395	Sonoma County	5	158
Shasta College	11555 Old Oregon Trail	Redding	California	96003	Shasta County	2	72
Sierra College	5000 Rocklin Road	Rocklin	California	95677-3397	Placer County	1	27
Simpson	2211 College	Redding	California	96003-	Shasta	3	45



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

University	View Drive			8606	County		
Sofia University	1069 East Meadow Cr	Palo Alto	California	94303	Santa Clara County	2	18
Solano Community College	4000 Suisun Valley Rd	Fairfield	California	94534-3197	Solano County	1	27
Sonoma State University	1801 E Cotati Ave	Rohnert Park	California	94928-3609	Sonoma County	2	118
Southern California Seminary	2075 E. Madison Avenue	El Cajon	California	92019-1108	San Diego County	2	12
Southwestern College	900 Otay Lakes Rd	Chula Vista	California	91910-7299	San Diego County	3	85
St Francis Career College	3680 E. Imperial Highway, 5th Floor	Lynwood	California	90262	Los Angeles County	1	89
Stanbridge College	2041 Business Ctr Dr Ste 107	Irvine	California	92612	Orange County	2	250
Stanford University		Stanford	California	94305	Santa Clara County	1	75
Summit College	851 S. Cooley Dr	Colton	California	92324	San Bernardino County	1	366
The Chicago School of Professional Psychology at Irvine	4199 Campus Dr	Irvine	California	92612	Orange County	3	20
The Chicago School of Professional Psychology at Los Angeles	617 W 7th St	Los Angeles	California	90017	Los Angeles County	4	58
The Chicago School of Professional Psychology at Westwood	1145 Gayley Ave Ste 322	Los Angeles	California	90024	Los Angeles County	4	23
The Wright Institute	2728 Durant Ave	Berkeley	California	94704-1796	Alameda County	3	141
Touro University California	1310 Club Drive	Vallejo	California	94592	Solano County	1	39
Touro University Worldwide	10601 Calle Lee #179	Los Alamitos	California	90720	Orange County	1	0
Twin Rivers Adult School	3222 Winona Way	North Highlands	California	95660-5523	Sacramento County	1	9
United States University	830 Bay Boulevard	Chula Vista	California	91911	San Diego County	3	112
Unitek College	4670 Auto Mall Pkwy	Fremont	California	94538	Alameda County	2	306
University of Antelope Valley	44055 Sierra Highway	Lancaster	California	93534	Los Angeles County	2	56
University of California-	200 California Hall	Berkeley	California	94720	Alameda County	5	232

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Berkeley							
University of California-Davis	One Shields Avenue	Davis	California	95616-8678	Yolo County	3	200
University of California-Irvine	501 Aldrich Hall	Irvine	California	92697	Orange County	1	102
University of California-Los Angeles	405 Hilgard Ave	Los Angeles	California	90095-1405	Los Angeles County	6	453
University of California-San Diego	9500 Gilman Dr	La Jolla	California	92093	San Diego County	2	135
University of California-San Francisco	500 Parnassus Ave	San Francisco	California	94143-0244	San Francisco County	3	400
University of La Verne	1950 Third St	La Verne	California	91750-4401	Los Angeles County	2	36
University of Phoenix-Bay Area Campus	3590 N First St	San Jose	California	95134-1805	Santa Clara County	2	37
University of Phoenix-Central Valley Campus	45 Riverpark Place West	Fresno	California	93720-1552	Fresno County	2	58
University of Phoenix-Sacramento Valley Campus	2860 Gateway Oaks Drive	Sacramento	California	95833-4334	Sacramento County	4	108
University of Phoenix-San Diego Campus	9645 Granite Ridge Dive	San Diego	California	92123-2658	San Diego County	2	93
University of Phoenix-Southern California Campus	3100 Bristol Street	Costa Mesa	California	92626-3099	Orange County	4	508
University of San Diego	5998 Alcala Park	San Diego	California	92110-2492	San Diego County	7	108
University of San Francisco	2130 Fulton St	San Francisco	California	94117-1080	San Francisco County	8	442
University of Southern California	University Park	Los Angeles	California	90089	Los Angeles County	9	991
University of the Pacific	3601 Pacific Ave	Stockton	California	95211-0197	San Joaquin County	2	3
Valley College of Medical Careers	8399 Topanga Canyon Blvd Ste 200	West Hills	California	91304	Los Angeles County	1	38
Vanguard University of Southern California	55 Fair Dr	Costa Mesa	California	92626	Orange County	2	46
Ventura College	4667 Telegraph Rd	Ventura	California	93003-3872	Ventura County	1	84



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Victor Valley College	18422 Bear Valley Rd	Victorville	California	92395-5850	San Bernardino County	2	124
West Coast University-Los Angeles	12215 Victory Boulevard	North Hollywood	California	91606	Los Angeles County	3	188
West Coast University-Ontario	2855 E. Guasti Rd	Ontario	California	91761	San Bernardino County	2	150
West Coast University-Orange County	1477 S Manchester Ave	Anaheim	California	92802	Orange County	2	225
West Hills College Coalinga	300 Cherry Lane	Coalinga	California	93210	Fresno County	2	109
West Hills College Lemoore	555 College Avenue	Lemoore	California	93245	Kings County	1	35
West Los Angeles College	9000 Overland Avenue	Culver City	California	90230-3519	Los Angeles County	2	6
Western University of Health Sciences	309 E 2nd St	Pomona	California	91766-1854	Los Angeles County	3	165
WestMed College	3031 Tisch Way, 1st Floor, Ste 8PW	San Jose	California	95128-2541	Santa Clara County	1	198
Whittier College	13406 E Philadelphia Street	Whittier	California	90601	Los Angeles County	1	10
William Jessup University	333 Sunset Blvd.	Rocklin	California	95765-3707	Placer County	4	40
Woodland Community College	2300 E Gibson Rd	Woodland	California	95776	Yolo County	2	15
Yuba College	2088 N Beale Rd	Marysville	California	95901	Yuba County	5	28

Table 18: Educational Institutions with Psychology Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Alliant International University	10455 Pomerado Road	San Diego	California	92131-1799	San Diego County	364
Antioch University-Los Angeles	400 Corporate Pointe	Culver City	California	90230-7615	Los Angeles County	11
Antioch University-Santa	602 Anacapa Street	Santa Barbara	California	93101	Santa Barbara County	63



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Barbara						
Argosy University-Inland Empire	3401 Centre Lake Drive, Suite 200	Ontario	California	91761	San Bernardino County	81
Argosy University-Los Angeles	5230 Pacific Concourse, Suite 200	Los Angeles	California	90045	Los Angeles County	76
Argosy University-Orange County	601 South Lewis Street	Orange	California	92868	Orange County	110
Argosy University-San Diego	1615 Murray Canyon Road, Suite 100	San Diego	California	92108	San Diego County	0
Argosy University-San Francisco Bay Area	1005 Atlantic Avenue	Alameda	California	94501	Alameda County	135
Azusa Pacific Online University	511 W Citrus Edge St	Glendora	California	91740	Los Angeles County	0
Biola University	13800 Biola Ave	La Mirada	California	90639-0001	Los Angeles County	45
Brandman University	16355 Laguna Canyon Road	Irvine	California	92618	Orange County	56
California Baptist University	8432 Magnolia Ave	Riverside	California	92504-3297	Riverside County	77
California Institute of Integral Studies	1453 Mission Street	San Francisco	California	94103	San Francisco County	184
California Lutheran University	60 W Olsen Rd	Thousand Oaks	California	91360-2787	Ventura County	29
California State University-Bakersfield	9001 Stockdale Hwy	Bakersfield	California	93311-1099	Kern County	9
California State University-Fresno	5241 N Maple Ave	Fresno	California	93740	Fresno County	10
Chapman University	One University Dr.	Orange	California	92866	Orange County	27

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Dominican University of California	50 Acacia Ave	San Rafael	California	94901-2298	Marin County	30
Fielding Graduate University	2112 Santa Barbara St	Santa Barbara	California	93105-3538	Santa Barbara County	129
Fuller Theological Seminary in California	135 N Oakland Ave	Pasadena	California	91182	Los Angeles County	84
Golden Gate University-San Francisco	536 Mission Street	San Francisco	California	94105-2968	San Francisco County	5
Holy Names University	3500 Mountain Blvd	Oakland	California	94619-1699	Alameda County	12
Hope International University	2500 E Nutwood Ave	Fullerton	California	92831-3199	Orange County	28
John F Kennedy University	100 Ellinwood Way	Pleasant Hill	California	94523-4817	Contra Costa County	82
Loma Linda University	11139 Anderson Street	Loma Linda	California	92350	San Bernardino County	10
Loyola Marymount University	One Lmu Drive	Los Angeles	California	90045-2659	Los Angeles County	16
Mount St. Mary's College	12001 Chalon Rd	Los Angeles	California	90049-1599	Los Angeles County	27
National University	11255 North Torrey Pines Road	La Jolla	California	92037-1011	San Diego County	293
Notre Dame de Namur University	1500 Ralston Ave	Belmont	California	94002-1908	San Mateo County	15
Pacifica Graduate Institute	249 Lambert Rd	Carpinteria	California	93013	Santa Barbara County	154
Palo Alto University	1791 Arastradero Rd	Palo Alto	California	94304-1337	Santa Clara County	144
Pepperdine University	24255 Pacific Coast Hwy	Malibu	California	90263	Los Angeles County	230
Phillips Graduate Institute	19900 Plummer Street	Chatsworth	California	91311	Los Angeles County	110
Pitzer College	1050 North Mills Avenue	Claremont	California	91711-6101	Los Angeles County	1
Saint Marys	1928 Saint	Moraga	California	94556	Contra	7



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
College of California	Marys Road				Costa County	
San Diego State University	5500 Campanile Dr	San Diego	California	92182	San Diego County	10
Santa Clara University	500 El Camino Real	Santa Clara	California	95053	Santa Clara County	63
Simpson University	2211 College View Drive	Redding	California	96003-8606	Shasta County	24
Sofia University	1069 East Meadow Cr	Palo Alto	California	94303	Santa Clara County	18
Southern California Seminary	2075 E. Madison Avenue	El Cajon	California	92019-1108	San Diego County	12
The Chicago School of Professional Psychology at Irvine	4199 Campus Dr	Irvine	California	92612	Orange County	16
The Chicago School of Professional Psychology at Los Angeles	617 W 7th St	Los Angeles	California	90017	Los Angeles County	58
The Chicago School of Professional Psychology at Westwood	1145 Gayley Ave Ste 322	Los Angeles	California	90024	Los Angeles County	20
The Wright Institute	2728 Durant Ave	Berkeley	California	94704-1796	Alameda County	141
Touro University Worldwide	10601 Calle Lee #179	Los Alamitos	California	90720	Orange County	0
University of California-San Diego	9500 Gilman Dr	La Jolla	California	92093	San Diego County	10
University of La Verne	1950 Third St	La Verne	California	91750-4401	Los Angeles County	14
University of San Francisco	2130 Fulton St	San Francisco	California	94117-1080	San Francisco County	148
University of the Pacific	3601 Pacific Ave	Stockton	California	95211-0197	San Joaquin County	3
Vanguard University of Southern	55 Fair Dr	Costa Mesa	California	92626	Orange County	20



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
California						
William Jessup University	333 Sunset Blvd.	Rocklin	California	95765-3707	Placer County	26

Table 19: Educational Institutions with Social Work Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Azusa Pacific University	901 E Alostia	Azusa	California	91702-7000	Los Angeles County	95
Brandman University	16355 Laguna Canyon Road	Irvine	California	92618	Orange County	15
California State University-Bakersfield	9001 Stockdale Hwy	Bakersfield	California	93311-1099	Kern County	76
California State University-Chico	First and Normal Sts	Chico	California	95929-0150	Butte County	129
California State University-Dominguez Hills	1000 E Victoria St	Carson	California	90747-0005	Los Angeles County	45
California State University-East Bay	25800 Carlos Bee Blvd	Hayward	California	94542	Alameda County	99
California State University-Fresno	5241 N Maple Ave	Fresno	California	93740	Fresno County	203
California State University-Fullerton	800 N State College Blvd	Fullerton	California	92831-3599	Orange County	43
California State University-Long Beach	1250 Bellflower Blvd	Long Beach	California	90840-0115	Los Angeles County	216
California State University-Los Angeles	5151 State University Dr	Los Angeles	California	90032	Los Angeles County	195
California State	18111 Nordhoff St	Northridge	California	91330	Los Angeles	96



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
University-Northridge					County	
California State University-Sacramento	6000 J St	Sacramento	California	95819-2694	Sacramento County	209
California State University-San Bernardino	5500 University Pky	San Bernardino	California	92407-2397	San Bernardino County	114
California State University-Stanislaus	One University Circle	Turlock	California	95382-0299	Stanislaus County	68
Chapman University	One University Dr.	Orange	California	92866	Orange County	6
Fresno Pacific University	1717 S Chestnut Ave	Fresno	California	93702-4709	Fresno County	12
Humboldt State University	1 Harpst Street	Arcata	California	95521-8299	Humboldt County	53
La Sierra University	4500 Riverwalk Parkway	Riverside	California	92515-8247	Riverside County	10
Loma Linda University	11139 Anderson Street	Loma Linda	California	92350	San Bernardino County	40
Mount St. Mary's College	12001 Chalon Rd	Los Angeles	California	90049-1599	Los Angeles County	16
Pacific Union College	One Angwin Ave	Angwin	California	94508-9707	Napa County	7
Point Loma Nazarene University	3900 Lomaland Dr	San Diego	California	92106-2899	San Diego County	10
San Diego State University	5500 Campanile Dr	San Diego	California	92182	San Diego County	158
San Diego State University-Imperial Valley Campus	720 Heber Ave	Calexico	California	92231	Imperial County	4
San Francisco State University	1600 Holloway Ave	San Francisco	California	94132	San Francisco County	74
San Jose State University	1 Washington Sq	San Jose	California	95192-0001	Santa Clara County	194

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
University of California-Berkeley	200 California Hall	Berkeley	California	94720	Alameda County	232
University of California-Los Angeles	405 Hilgard Ave	Los Angeles	California	90095-1405	Los Angeles County	100
University of Southern California	University Park	Los Angeles	California	90089	Los Angeles County	549
Whittier College	13406 E Philadelphia Street	Whittier	California	90601	Los Angeles County	10

Table 20: Educational Institutions with Physician Assistant Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Charles R Drew University of Medicine and Science	1731 E 120th St	Los Angeles	California	90059	Los Angeles County	48
Foothill College	12345 El Monte Rd	Los Altos Hills	California	94022	Santa Clara County	41
Loma Linda University	11139 Anderson Street	Loma Linda	California	92350	San Bernardino County	24
Moreno Valley College	16130 Lasselle St	Moreno Valley	California	92551	Riverside County	36
Samuel Merritt University	3100 Telegraph Avenue	Oakland	California	94609	Alameda County	33
San Joaquin Valley College-Visalia	8400 W Mineral King Ave	Visalia	California	93291-9283	Tulare County	19
Touro University California	1310 Club Drive	Vallejo	California	94592	Solano County	39
University of Southern California	University Park	Los Angeles	California	90089	Los Angeles County	45
Western University of Health Sciences	309 E 2nd St	Pomona	California	91766-1854	Los Angeles County	93



Table 21: Educational Institutions with Substance Use Counseling Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Allan Hancock College	800 South College Drive	Santa Maria	California	93454-6399	Santa Barbara County	18
American River College	4700 College Oak Dr	Sacramento	California	95841-4286	Sacramento County	30
Butte College	3536 Butte Campus Drive	Oroville	California	95965-8399	Butte County	23
Career Colleges of America	5612 E Imperial Hwy	South Gate	California	90280	Los Angeles County	12
Charles R Drew University of Medicine and Science	1731 E 120th St	Los Angeles	California	90059	Los Angeles County	2
City College of San Francisco	50 Phelan Ave	San Francisco	California	94112-1898	San Francisco County	25
College of San Mateo	1700 W Hillsdale Blvd	San Mateo	California	94402-3784	San Mateo County	15
College of the Desert	43-500 Monterey Ave	Palm Desert	California	92260	Riverside County	19
College of the Redwoods	7351 Tompkins Hill Rd	Eureka	California	95501-9300	Humboldt County	13
Cypress College	9200 Valley View	Cypress	California	90630-5897	Orange County	31
Diablo Valley College	321 Golf Club Rd	Pleasant Hill	California	94523	Contra Costa County	45
East Los Angeles College	1301 Avenida Cesar Chavez	Monterey Park	California	91754-6099	Los Angeles County	41
Fresno City College	1101 E. University Ave	Fresno	California	93741	Fresno County	44
Glendale Community College	1500 N Verdugo Rd	Glendale	California	91208-2894	Los Angeles County	12
Hartnell College	411 Central Avenue	Salinas	California	93901	Monterey County	5
ICDC College	5422 Sunset Blvd.	Los Angeles	California	90027	Los Angeles County	546
Imperial	380 E.	Imperial	California	92251-	Imperial	8

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Valley College	Aten Road			0158	County	
InterCoast Colleges-Burbank	175 East Olive Avenue, 3rd Floor	Burbank	California	91502	Los Angeles County	33
InterCoast Colleges-Carson	One Civic Plaza-Ste 110	Carson	California	90745	Los Angeles County	46
InterCoast Colleges-Elk Grove	9355 E. Stockton	Elk Grove	California	95624	Sacramento County	52
InterCoast Colleges-Orange	3745 W. Chapman Avenue #100	Orange	California	92868	Orange County	63
InterCoast Colleges-Riverside	1989 Atlanta Ave	Riverside	California	92507	Riverside County	134
InterCoast Colleges-Roseville	1200 Melody Ln Ste 120	Roseville	California	92678	Placer County	61
InterCoast Colleges-West Covina	1400 W. West Covina Pkwy-2nd Floor	West Covina	California	91790	Los Angeles County	55
Lake Tahoe Community College	One College Drive	South Lake Tahoe	California	96150	El Dorado County	5
Lassen Community College	Hwy 139	Susanville	California	96130	Lassen County	1
Loma Linda University	11139 Anderson Street	Loma Linda	California	92350	San Bernardino County	6
Long Beach City College	4901 E. Carson St.	Long Beach	California	90808-1706	Los Angeles County	65
Los Angeles City College	855 N Vermont Ave	Los Angeles	California	90029	Los Angeles County	5
Los Angeles Pierce College	6201 Winnetka Ave	Woodland Hills	California	91371-0002	Los Angeles County	22
Los Angeles Southwest College	1600 W Imperial Hwy.	Los Angeles	California	90047-4899	Los Angeles County	8
Mendocino College	1000 Hensley Creek Road	Ukiah	California	95482	Mendocino County	4

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Merced College	3600 M St	Merced	California	95348-2898	Merced County	6
Merritt College	12500 Campus Dr	Oakland	California	94619-3196	Alameda County	22
Mt. San Antonio College	1100 N Grand Ave	Walnut	California	91789-1399	Los Angeles County	40
Mt. San Jacinto Community College District	1499 N. State St.	San Jacinto	California	92583-2399	Riverside County	39
Mueller College	123 Camino de la Reina, #100 North	San Diego	California	92108-3002	San Diego County	17
Oxnard College	4000 S Rose Ave	Oxnard	California	93033-6699	Ventura County	54
Palo Verde College	One College Drive	Blythe	California	92225	Riverside County	68
Palomar College	1140 W. Mission	San Marcos	California	92069-1487	San Diego County	28
Porterville College	100 E College Ave	Porterville	California	93257	Tulare County	10
Rio Hondo College	3600 Workman Mill Rd	Whittier	California	90601-1616	Los Angeles County	19
Saddleback College	28000 Marguerite Pky	Mission Viejo	California	92692-3635	Orange County	31
San Bernardino Valley College	701 South Mount Vernon Avenue	San Bernardino	California	92410-2798	San Bernardino County	25
San Diego City College	1313 Park Boulevard	San Diego	California	92101-4787	San Diego County	79
San Joaquin Delta College	5151 Pacific Ave	Stockton	California	95207	San Joaquin County	7
San Jose City College	2100 Moorpark Ave	San Jose	California	95128-2798	Santa Clara County	16
Santa Barbara City College	721 Cliff Drive	Santa Barbara	California	93109-2394	Santa Barbara County	26
Santa Rosa Junior College	1501 Mendocino Avenue	Santa Rosa	California	95401-4395	Sonoma County	20



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
West Los Angeles College	9000 Overland Avenue	Culver City	California	90230-3519	Los Angeles County	6
William Jessup University	333 Sunset Blvd.	Rocklin	California	95765-3707	Placer County	14
Woodland Community College	2300 E Gibson Rd	Woodland	California	95776	Yolo County	15
Yuba College	2088 N Beale Rd	Marysville	California	95901	Yuba County	35

Table 22: Educational Institutions with Marriage & Family Therapy Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Alliant International University	10455 Pomerado Road	San Diego	California	92131-1799	San Diego County	117
Brandman University	16355 Laguna Canyon Road	Irvine	California	92618	Orange County	228
California Lutheran University	60 W Olsen Rd	Thousand Oaks	California	91360-2787	Ventura County	48
California State University-Dominguez Hills	1000 E Victoria St	Carson	California	90747-0005	Los Angeles County	49
Chapman University	One University Dr.	Orange	California	92866	Orange County	30
Fresno Pacific University	1717 S Chestnut Ave	Fresno	California	93702-4709	Fresno County	18
Fuller Theological Seminary in California	135 N Oakland Ave	Pasadena	California	91182	Los Angeles County	51
John F Kennedy University	100 Ellinwood Way	Pleasant Hill	California	94523-4817	Contra Costa County	82
Loma Linda University	11139 Anderson Street	Loma Linda	California	92350	San Bernardino County	38
Loyola Marymount University	One Lmu Drive	Los Angeles	California	90045-2659	Los Angeles County	22
Notre Dame de Namur	1500 Ralston	Belmont	California	94002-1908	San Mateo County	22



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
University	Ave					
Pacific Oaks College	55 Eureka Street	Pasadena	California	91103	Los Angeles County	18
The Chicago School of Professional Psychology at Irvine	4199 Campus Dr	Irvine	California	92612	Orange County	4
The Chicago School of Professional Psychology at Los Angeles	617 W 7th St	Los Angeles	California	90017	Los Angeles County	0
The Chicago School of Professional Psychology at Westwood	1145 Gayley Ave Ste 322	Los Angeles	California	90024	Los Angeles County	3
University of La Verne	1950 Third St	La Verne	California	91750-4401	Los Angeles County	22
University of Phoenix-Bay Area Campus	3590 N First St	San Jose	California	95134-1805	Santa Clara County	24
University of Phoenix-Central Valley Campus	45 Riverpark Place West	Fresno	California	93720-1552	Fresno County	39
University of Phoenix-Sacramento Valley Campus	2860 Gateway Oaks Drive	Sacramento	California	95833-4334	Sacramento County	26
University of Phoenix-San Diego Campus	9645 Granite Ridge Dive	San Diego	California	92123-2658	San Diego County	46
University of Phoenix-Southern California Campus	3100 Bristol Street	Costa Mesa	California	92626-3099	Orange County	169
University of San Diego	5998 Alcalá Park	San Diego	California	92110-2492	San Diego County	32
University of Southern California	University Park	Los Angeles	California	90089	Los Angeles County	46



Table 23: Educational Institutions with Nursing Programs

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Advanced College	13180 Paramount Blvd.	South Gate	California	90280	Los Angeles County	73
Allan Hancock College	800 South College Drive	Santa Maria	California	93454-6399	Santa Barbara County	64
American River College	4700 College Oak Dr	Sacramento	California	95841-4286	Sacramento County	77
American University of Health Sciences	1600 East Hill St	Signal Hill	California	90755-3612	Los Angeles County	27
Angeles College	3440 Wilshire Blvd Ste 310	Los Angeles	California	90010	Los Angeles County	62
Angeles Institute	11688 SOUTH STREET, SUITE 205	ARTESIA	California	90701-6610	Los Angeles County	82
Antelope Valley College	3041 West Ave K	Lancaster	California	93536-5426	Los Angeles County	113
Azusa Pacific University	901 E Alostia	Azusa	California	91702-7000	Los Angeles County	326
Bakersfield College	1801 Panorama Dr	Bakersfield	California	93305-1299	Kern County	154
Beaumont Adult School	1575 Cherry Ave	Beaumont	California	92223	Riverside County	42
Biola University	13800 Biola Ave	La Mirada	California	90639-0001	Los Angeles County	37
Blake Austin College	611 Orange Dr Ste K	Vacaville	California	95687	Solano County	36
Brandman University	16355 Laguna Canyon Road	Irvine	California	92618	Orange County	4
Butte College	3536 Butte Campus Drive	Oroville	California	95965-8399	Butte County	116
Cabrillo College	6500 Soquel Dr	Aptos	California	95003	Santa Cruz County	56
California Baptist University	8432 Magnolia Ave	Riverside	California	92504-3297	Riverside County	65
California Career College	7003 Owensmouth Avenue	Canoga Park	California	91303-2006	Los Angeles County	37
California College-San Diego	2820 Camino Del Rio South, Suite 300	San Diego	California	92108-3824	San Diego County	0

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
California Nurses Educational Institute	5200 E. Ramon Rd. Suite I-1	Palm Springs	California	92264	Riverside County	43
California State University-Bakersfield	9001 Stockdale Hwy	Bakersfield	California	93311-1099	Kern County	97
California State University-Channel Islands	One University Dr	Camarillo	California	93012	Ventura County	49
California State University-Chico	First and Normal Sts	Chico	California	95929-0150	Butte County	122
California State University-Dominguez Hills	1000 E Victoria St	Carson	California	90747-0005	Los Angeles County	386
California State University-East Bay	25800 Carlos Bee Blvd	Hayward	California	94542	Alameda County	186
California State University-Fresno	5241 N Maple Ave	Fresno	California	93740	Fresno County	213
California State University-Fullerton	800 N State College Blvd	Fullerton	California	92831-3599	Orange County	263
California State University-Long Beach	1250 Bellflower Blvd	Long Beach	California	90840-0115	Los Angeles County	290
California State University-Los Angeles	5151 State University Dr	Los Angeles	California	90032	Los Angeles County	241
California State University-Northridge	18111 Nordhoff St	Northridge	California	91330	Los Angeles County	64
California State University-Sacramento	6000 J St	Sacramento	California	95819-2694	Sacramento County	207
California State University-San Bernardino	5500 University Pky	San Bernardino	California	92407-2397	San Bernardino County	148
California	333 S Twin	San Marcos	California	92096-	San Diego	136

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
State University-San Marcos	Oaks Valley Rd			0001	County	
California State University-Stanislaus	One University Circle	Turlock	California	95382-0299	Stanislaus County	91
Career Care Institute	43770 Fifteenth St W Ste 115	Lancaster	California	93534	Los Angeles County	275
Career Colleges of America	5612 E Imperial Hwy	South Gate	California	90280	Los Angeles County	54
Career Development Institute	1830 S Robertson Blvd	Los Angeles	California	90035	Los Angeles County	2
Career Networks Institute	702 W Town and Country Rd	Orange	California	92868-4710	Orange County	111
Carrington College California-Antioch	2157 Country Hills Drive	Antioch	California	94509	Contra Costa County	46
Carrington College California-Sacramento	8909 Folsom Blvd	Sacramento	California	95826	Sacramento County	134
Carrington College California-San Jose	6201 San Ignacio Ave.	San Jose	California	95119	Santa Clara County	71
Carrington College California-San Leandro	15555 E. 14th Street, Suite 500	San Leandro	California	94578-1977	Alameda County	47
Casa Loma College-Van Nuys	6725 Kester Ave	Van Nuys	California	91405	Los Angeles County	219
CBD College	3699 Wilshire Blvd., Fourth Floor	Los Angeles	California	90010	Los Angeles County	47
Central Nursing College	3550 Wilshire Blvd Ste 830	Los Angeles	California	90010	Los Angeles County	57
Cerritos College	11110 Alondra Blvd	Norwalk	California	90650-6298	Los Angeles County	105
Cerro Coso Community College	3000 College Heights Blvd	Ridgecrest	California	93555-9571	Kern County	17
CES College	401 S. Glenoaks Blvd. Suite 211	Burbank	California	91502-2750	Los Angeles County	16

**Office of Statewide Health Planning & Development**

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Chabot College	25555 Hesperian Blvd	Hayward	California	94545	Alameda County	50
Chaffey College	5885 Haven Ave	Rancho Cucamonga	California	91737-3002	San Bernardino County	119
Charles A. Jones Career and Education Center	5451 Lemon Hill Ave	Sacramento	California	95824-1529	Sacramento County	84
Charter College-Canyon Country	27125 Sierra Hwy Ste 329	Canyon Country	California	91351	Los Angeles County	63
Citrus College	1000 W Foothill Blvd	Glendora	California	91741-1899	Los Angeles County	90
City College of San Francisco	50 Phelan Ave	San Francisco	California	94112-1898	San Francisco County	162
Clovis Adult Education	1452 David E Cook Way	Clovis	California	93611	Fresno County	82
College of Marin	835 College Ave	Kentfield	California	94904-2590	Marin County	40
College of San Mateo	1700 W Hillsdale Blvd	San Mateo	California	94402-3784	San Mateo County	57
College of the Canyons	26455 Rockwell Canyon Rd	Santa Clarita	California	91355-1899	Los Angeles County	108
College of the Desert	43-500 Monterey Ave	Palm Desert	California	92260	Riverside County	97
College of the Redwoods	7351 Tompkins Hill Rd	Eureka	California	95501-9300	Humboldt County	72
College of the Sequoias	915 S Mooney Blvd	Visalia	California	93277-2214	Tulare County	136
College of the Siskiyous	800 College Ave	Weed	California	96094-2899	Siskiyou County	89
Colton-Redlands-Yucaipa Regional Occupational Program	1214 Indiana Ct	Redlands	California	92374	San Bernardino County	0
Concorde Career College-San Bernardino	201 East Airport Drive, Suite A	San Bernardino	California	92408-3403	San Bernardino County	111
Concordia University-Irvine	1530 Concordia West	Irvine	California	92612-3203	Orange County	49
Contra Costa	2600 Mission	San Pablo	California	94806-	Contra	54

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
College	Bell Dr			3195	Costa County	
Copper Mountain Community College	6162 Rotary Way	Joshua Tree	California	92252	San Bernardino County	57
Cuesta College	Highway 1	San Luis Obispo	California	93403-8106	San Luis Obispo County	116
Cypress College	9200 Valley View	Cypress	California	90630-5897	Orange County	69
De Anza College	21250 Stevens Creek Blvd.	Cupertino	California	95014	Santa Clara County	59
Dominican University of California	50 Acacia Ave	San Rafael	California	94901-2298	Marin County	115
Downey Adult School	12340 Woodruff Ave	Downey	California	90241	Los Angeles County	57
East Los Angeles College	1301 Avenida Cesar Chavez	Monterey Park	California	91754-6099	Los Angeles County	183
El Camino College-Compton Center	1111 East Artesia Blvd.	Compton	California	90221-5393	Los Angeles County	45
El Camino Community College District	16007 Crenshaw Blvd	Torrance	California	90506	Los Angeles County	63
Evergreen Valley College	3095 Yerba Buena Rd	San Jose	California	95135-1598	Santa Clara County	68
Feather River Community College District	570 Golden Eagle Ave	Quincy	California	95971-9124	Plumas County	4
Four-D College	1020 East Washington Street	Colton	California	92324	San Bernardino County	222
Franklin Career College	1274 Slater Cir	Ontario	California	91761	San Bernardino County	54
Fresno City College	1101 E. University Ave	Fresno	California	93741	Fresno County	210
Fresno Pacific University	1717 S Chestnut Ave	Fresno	California	93702-4709	Fresno County	14
Gavilan College	5055 Santa Teresa Blvd	Gilroy	California	95020	Santa Clara County	67
Glendale Community	1500 N Verdugo Rd	Glendale	California	91208-2894	Los Angeles	88

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
College					County	
Golden West College	15744 Goldenwest St.	Huntington Beach	California	92647-2710	Orange County	174
Grossmont College	8800 Grossmont College Dr	El Cajon	California	92020-1799	San Diego County	85
Gurnick Academy of Medical Arts	2121 S El Camino Real Bldg C 200	San Mateo	California	94403	San Mateo County	350
Hacienda La Puente Adult Education	14101 E. Nelson Ave	La Puente	California	91746-0002	Los Angeles County	78
Hartnell College	411 Central Avenue	Salinas	California	93901	Monterey County	68
Holy Names University	3500 Mountain Blvd	Oakland	California	94619-1699	Alameda County	40
Homestead Schools	23800 Hawthorne Blvd.	Torrance	California	90505	Los Angeles County	133
Humboldt State University	1 Harpst Street	Arcata	California	95521-8299	Humboldt County	57
Imperial Valley College	380 E. Aten Road	Imperial	California	92251-0158	Imperial County	58
InfoTech Career College	8527 Alondra Blvd, #174	Paramount	California	90723-5258	Los Angeles County	0
Institute of Technology Inc	564 W Herndon	Clovis	California	93612	Fresno County	58
ITT Technical Institute-Rancho Cordova	10863 Gold Center Dr	Rancho Cordova	California	95670-6034	Sacramento County	0
Kaplan College-North Hollywood	6180 Laurel Cyn Blvd Ste 101	North Hollywood	California	91606-3231	Los Angeles County	54
Kaplan College-Sacramento	4330 Watt Ave., Suite 400	Sacramento	California	95821	Sacramento County	48
Kaplan College-San Diego	9055 Balboa Avenue	San Diego	California	92123	San Diego County	444
Kaplan College-Stockton	722 W. March Ln	Stockton	California	95207	San Joaquin County	55
Kaplan College-Vista	2022 University Dr	Vista	California	92083-7736	San Diego County	155
Lassen Community College	Hwy 139	Susanville	California	96130	Lassen County	21
Loma Linda	11139	Loma Linda	California	92350	San	244

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
University	Anderson Street				Bernardino County	
Long Beach City College	4901 E. Carson St.	Long Beach	California	90808-1706	Los Angeles County	281
Los Angeles City College	855 N Vermont Ave	Los Angeles	California	90029	Los Angeles County	46
Los Angeles County College of Nursing and Allied Health	1237 N. Mission Rd.	Los Angeles	California	90033-1084	Los Angeles County	70
Los Angeles Harbor College	1111 Figueroa Place	Wilmington	California	90744-2397	Los Angeles County	76
Los Angeles Pierce College	6201 Winnetka Ave	Woodland Hills	California	91371-0002	Los Angeles County	55
Los Angeles Southwest College	1600 W Imperial Hwy.	Los Angeles	California	90047-4899	Los Angeles County	37
Los Angeles Trade Technical College	400 W Washington Blvd	Los Angeles	California	90015-4181	Los Angeles County	45
Los Angeles Valley College	5800 Fulton Avenue	Valley Glen	California	91401-4096	Los Angeles County	81
Los Medanos College	2700 East Leland Road	Pittsburg	California	94565	Contra Costa County	57
Marian Health Careers Center	3325 Wilshire Blvd Ste 1010	Los Angeles	California	90010	Los Angeles County	77
Marian Health Careers Center-Van Nuys Campus	5900 Sepulveda Blvd Ste 101	Van Nuys	California	91411	Los Angeles County	40
Mendocino College	1000 Hensley Creek Road	Ukiah	California	95482	Mendocino County	19
Merced College	3600 M St	Merced	California	95348-2898	Merced County	62
Merritt College	12500 Campus Dr	Oakland	California	94619-3196	Alameda County	26
MiraCosta College	One Barnard Drive	Oceanside	California	92056-3899	San Diego County	46
Mission College	3000 Mission College Blvd	Santa Clara	California	95054-1897	Santa Clara County	117
Modesto Junior College	435 College Ave	Modesto	California	95350-5800	Stanislaus County	150
Monterey	980 Fremont	Monterey	California	93940-	Monterey	24

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Peninsula College	St			4799	County	
Moorpark College	7075 Campus Rd	Moorpark	California	93021-1695	Ventura County	61
Mount St. Mary's College	12001 Chalon Rd	Los Angeles	California	90049-1599	Los Angeles County	254
Mt. San Antonio College	1100 N Grand Ave	Walnut	California	91789-1399	Los Angeles County	100
Mt. San Jacinto Community College District	1499 N. State St.	San Jacinto	California	92583-2399	Riverside County	90
Napa Valley College	2277 Napa-Vallejo Hwy	Napa	California	94558-6236	Napa County	82
National University	11255 North Torrey Pines Road	La Jolla	California	92037-1011	San Diego County	285
NCP College of Nursing	21615 Hesperian Boulevard	Hayward	California	94541-7026	Alameda County	94
NCP College of Nursing	257 Longford Drive, Rm 5	South San Francisco	California	94080-1005	San Mateo County	33
North-West College-Glendale	221 North Brand	Glendale	California	91203	Los Angeles County	0
North-West College-Pasadena	530 E Union	Pasadena	California	91101	Los Angeles County	24
North-West College-Pomona	170 W Holt Ave	Pomona	California	91768	Los Angeles County	22
North-West College-Riverside	4550 La Sierra Ave	Riverside	California	92503	Riverside County	64
North-West College-West Covina	2121 W Garvey Ave	West Covina	California	91790	Los Angeles County	68
Ohlone Community College	43600 Mission Blvd	Fremont	California	94539-0390	Alameda County	29
Pacific College	3160 Red Hill Ave	Costa Mesa	California	92626	Orange County	138
Pacific Union College	One Angwin Ave	Angwin	California	94508-9707	Napa County	115
Palladium Technical Academy	10503 Valley Blvd	El Monte	California	91731	Los Angeles County	0
Palo Verde College	One College Drive	Blythe	California	92225	Riverside County	14
Palomar College	1140 W. Mission	San Marcos	California	92069-1487	San Diego County	50
Pasadena	1570 E	Pasadena	California	91106-	Los	136

**Office of Statewide Health Planning & Development***WET Five Year Plan Assessment:**County-Reported Mental Health Workforce Needs Assessment*

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
City College	Colorado Blvd.			2003	Angeles County	
Point Loma Nazarene University	3900 Lomaland Dr	San Diego	California	92106-2899	San Diego County	55
Porterville College	100 E College Ave	Porterville	California	93257	Tulare County	18
Preferred College of Nursing-Los Angeles	3424 Wilshire Blvd Ste 1100	Los Angeles	California	90010	Los Angeles County	69
Reedley College	995 N Reed Ave	Reedley	California	93654	Fresno County	13
Rio Hondo College	3600 Workman Mill Rd	Whittier	California	90601-1616	Los Angeles County	100
Riverside City College	4800 Magnolia Avenue	Riverside	California	92506	Riverside County	232
Sacramento City College	3835 Freeport Blvd	Sacramento	California	95822-1386	Sacramento County	163
Saddleback College	28000 Marguerite Pky	Mission Viejo	California	92692-3635	Orange County	182
Samuel Merritt University	3100 Telegraph Avenue	Oakland	California	94609	Alameda County	471
San Bernardino Valley College	701 South Mount Vernon Avenue	San Bernardino	California	92410-2798	San Bernardino County	87
San Diego City College	1313 Park Boulevard	San Diego	California	92101-4787	San Diego County	65
San Diego State University	5500 Campanile Dr	San Diego	California	92182	San Diego County	255
San Diego State University-Imperial Valley Campus	720 Heber Ave	Calexico	California	92231	Imperial County	13
San Francisco State University	1600 Holloway Ave	San Francisco	California	94132	San Francisco County	178
San Joaquin Delta College	5151 Pacific Ave	Stockton	California	95207	San Joaquin County	222
San Joaquin Valley College-Visalia	8400 W Mineral King Ave	Visalia	California	93291-9283	Tulare County	92
San Jose	1	San Jose	California	95192-	Santa Clara	186



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
State University	Washington Sq			0001	County	
Santa Ana College	1530 W. 17th Street	Santa Ana	California	92706-3398	Orange County	108
Santa Barbara Business College-Bakersfield	5300 California Avenue	Bakersfield	California	93309	Kern County	115
Santa Barbara Business College-Santa Maria	303 E Plaza Dr Ste 1	Santa Maria	California	93454	Santa Barbara County	13
Santa Barbara City College	721 Cliff Drive	Santa Barbara	California	93109-2394	Santa Barbara County	47
Santa Monica College	1900 Pico Blvd	Santa Monica	California	90405-1628	Los Angeles County	64
Santa Rosa Junior College	1501 Mendocino Avenue	Santa Rosa	California	95401-4395	Sonoma County	138
Shasta College	11555 Old Oregon Trail	Redding	California	96003	Shasta County	72
Sierra College	5000 Rocklin Road	Rocklin	California	95677-3397	Placer County	27
Simpson University	2211 College View Drive	Redding	California	96003-8606	Shasta County	21
Solano Community College	4000 Suisun Valley Rd	Fairfield	California	94534-3197	Solano County	27
Sonoma State University	1801 E Cotati Ave	Rohnert Park	California	94928-3609	Sonoma County	118
Southwestern College	900 Otay Lakes Rd	Chula Vista	California	91910-7299	San Diego County	85
St Francis Career College	3680 E. Imperial Highway, 5th Floor	Lynwood	California	90262	Los Angeles County	89
Stanbridge College	2041 Business Ctr Dr Ste 107	Irvine	California	92612	Orange County	250
Summit College	851 S. Cooley Dr	Colton	California	92324	San Bernardino County	366
Twin Rivers Adult School	3222 Winona Way	North Highlands	California	95660-5523	Sacramento County	9
United States University	830 Bay Boulevard	Chula Vista	California	91911	San Diego County	112
Unitek College	4670 Auto Mall Pkwy	Fremont	California	94538	Alameda County	306
University of Antelope	44055 Sierra Highway	Lancaster	California	93534	Los Angeles	56



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
Valley					County	
University of California-Davis	One Shields Avenue	Davis	California	95616-8678	Yolo County	94
University of California-Los Angeles	405 Hilgard Ave	Los Angeles	California	90095-1405	Los Angeles County	180
University of California-San Francisco	500 Parnassus Ave	San Francisco	California	94143-0244	San Francisco County	230
University of Phoenix-Bay Area Campus	3590 N First St	San Jose	California	95134-1805	Santa Clara County	13
University of Phoenix-Central Valley Campus	45 Riverpark Place West	Fresno	California	93720-1552	Fresno County	19
University of Phoenix-Sacramento Valley Campus	2860 Gateway Oaks Drive	Sacramento	California	95833-4334	Sacramento County	82
University of Phoenix-San Diego Campus	9645 Granite Ridge Dive	San Diego	California	92123-2658	San Diego County	47
University of Phoenix-Southern California Campus	3100 Bristol Street	Costa Mesa	California	92626-3099	Orange County	339
University of San Diego	5998 Alcalá Park	San Diego	California	92110-2492	San Diego County	76
University of San Francisco	2130 Fulton St	San Francisco	California	94117-1080	San Francisco County	294
Valley College of Medical Careers	8399 Topanga Canyon Blvd Ste 200	West Hills	California	91304	Los Angeles County	38
Vanguard University of Southern California	55 Fair Dr	Costa Mesa	California	92626	Orange County	26
Ventura College	4667 Telegraph Rd	Ventura	California	93003-3872	Ventura County	84
Victor Valley College	18422 Bear Valley Rd	Victorville	California	92395-5850	San Bernardino County	124
West Coast University-Los Angeles	12215 Victory Boulevard	North Hollywood	California	91606	Los Angeles County	188
West Coast	2855 E.	Ontario	California	91761	San	150



Office of Statewide Health Planning & Development

WET Five Year Plan Assessment:

County-Reported Mental Health Workforce Needs Assessment

Institution Name	Street Address	City	State	ZIP Code	County	Number of Graduates
University-Ontario	Guasti Rd				Bernardino County	
West Coast University-Orange County	1477 S Manchester Ave	Anaheim	California	92802	Orange County	225
West Hills College Lemoore	555 College Avenue	Lemoore	California	93245	Kings County	35
Western University of Health Sciences	309 E 2nd St	Pomona	California	91766-1854	Los Angeles County	72
WestMed College	3031 Tisch Way, 1st Floor, Ste 8PW	San Jose	California	95128-2541	Santa Clara County	198
Yuba College	2088 N Beale Rd	Marysville	California	95901	Yuba County	41