

State Departments
MHSAs Progress Report*
Fiscal Year 10-11
Reporting Period: July 1 – December 31

Department Office of Statewide Health Planning & Development (OSHPD)

1. **Identify 2-3 highlights for this reporting period**

- 1) Shortage Designation Program (SDP) conducted Mini Health Professional Shortage Area (HPSA) workshop on September 29, 2010 with California Primary Care Association (CPCA) via Webinar. There were 14 attendees representing various counties and stakeholders.
- 2) SDP provided over 200 instances of technical assistance via email and telephone to various stakeholders and assisted with the creation of Medical Services Study Areas (MSSA) special request maps.

2. Please list all the goals/objectives/activities/deliverables for this reporting period as listed in the MOU work plan and provide an update.

Goal 1 - Continue efforts to obtain Mental Health Professional Shortage Area (MHPSA) designations statewide					
Objectives 1a Explain the process of creating and submitting various types of MHPSA applications to potential applicants. Review and analyze applications once received.					
	Due Date	Status on achieving objective, activities and deliverables (insert links)	Identify outstanding policy and program issues	Identify activities being coordinated with the local mental health system and other partners	Upcoming events/opportunities/resources anticipated during the next six months
Major activities/deliverables: 1. Increased outreach by conducting additional TA workshops. Conducted Mini workshop with California Primary Care Association.	Ongoing	Completed workshop: One via webinar/ conference call.			Conducting 2 HPSA Technical Assistance (TA) workshops in March. Conducting one TA workshop in October 2011.

*Progress report information will be posted on the DMH webpage at http://www.dmh.ca.gov/Prop_63/MHSA/State_Interagency_Partners.asp

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<p>2. Received 15 Mental Health HPSA applications.</p>	<p>June 2011</p>	<p>Completed 5 applications. 1 application was withdrawn by applicant.</p>	<p>3 applications are currently in progress which may include 1 or more of the following: Mapping and completing provider survey. 6 applications have not been assigned to staff.</p>	<p>Mailed copies of all MHPSA applications to the California Department of Mental Health, County Health Department, and the County Health Officers for their comments.</p>	<p>Continue analyzing MSSAs and make recommendations for designation based on federal guidelines.</p>
<p>3. Updated HPSA application templates and PowerPoint training materials available to stakeholders, including Public County Mental Health Departments, Community Based Organizations, Community Health Centers, and Rural Health Clinics.</p>	<p>Ongoing</p>	<p>Completed</p>		<p>Provide materials to various stakeholders in an effort to assist them with completion of their HPSA applications. This includes members of CMHDA.</p>	<p>Continue providing training materials and templates as requested and highlight their benefit during workshops and trainings.</p>
<p>4. Recommended 179 mental health clinics for eligibility for federal funds</p>	<p>Ongoing</p>	<p>Completed</p>		<p>Applications are received, reviewed, and recommended to the Feds on an on-going basis. OSHPD staff works with the applicant, which may involve Mental Health clinic staff, administrators, mental health providers, etc.</p>	<p>OSHPD will hold two conference calls to overview the Recruitment and Retention Assistance application process during the next reporting period.</p>
<p>5. Marketing and outreach to organizations and associations to alert them of opportunities for providers to participate in SLRP.</p>	<p>Ongoing</p>	<p>Through e-mails, newsletters, and conferences, over 77,000 providers were targeted.</p>		<p>Marketing materials were distributed to California Primary Care Association, Rural Health Policy Council, California Department of Health Care Services, California State Rural Health Association, and California Association of Marriage and Family Therapists members</p>	<p>Continue marketing and outreach to organizations and associations to alert them of recruitment and retention opportunities, such as SLRP.</p>

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6. Develop and publish updated Mental HPSA map.	3/1/2011			Provided copy of Mental HPSA map to partners, including DMH and post to web site.	Update the Mental HPSA map in October 2010.
7. Updating Dashboard database with Claritas 2007 which contains demographic and poverty level data available to stakeholders.	6/30/2011	Ongoing	Conducting quality review of data information	Provide updated information to mental health stakeholders, including County Mental Health Directors Association (CMHDA) members.	Continue providing Dashboard information as requested and highlight the function of this information during workshops and trainings.
8. Updating non-designated MHPSA spreadsheet which shows potential Mental HPSA areas with Claritas 2007 data. Identified 209 potential Pro-Active Health Professional Shortage Areas.	4/1/2011	Ongoing		Update spreadsheet when Health Resources and Services Administration approve recommended shortage areas.	Identifying highest need areas in California using the 200% poverty level and population to provider ratio and contacting the county Mental Health Departments and Health Officers to pro-actively process MHPSAs.
9.					

Submit electronic copies of reports by July 31, 2010 to:
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