

WORKING WELL TOGETHER



Jump Start

Client*, Family and Parent/Caregiver Employment Technical Assistance Center

• *Preparing* • *Recruiting* • *Hiring* • *Training* • *Supporting* • *Retaining*

Client, Family and Parent/Caregiver Mental Health Employment

A SURVEY OF CHALLENGES AND SOLUTIONS

PURPOSE The Mental Health Services Act (MHSA) calls for greater involvement of clients, families and parents/caregivers from culturally diverse communities in paid employment within the public mental health services system. Many counties (and contract agencies) face challenges in preparing, recruiting, hiring, training, supporting and retaining individuals with client, family and parent/caregiver experience in paid employment.

In order to address these challenges using statewide strategies, the Working Well Together collaborative consisting of the California Network of Mental Health Clients (CNMHC), the National Alliance on Mental Illness (NAMI)-California, United Advocates for Children and Families (UACF), and the California Institute for Mental Health (CiMH) is implementing *Jump Start*, a client, family and parent/caregiver employment technical assistance center. WWT is interested in learning more about the challenges and solutions the public mental health system faces in the field of client, family and parent/caregiver employment.

This survey is designed to identify (1) ongoing challenges in this area of workforce development and (2) issues where solutions (accomplishments) have been identified and implemented. Results from this survey will guide Jump Start's technical assistance, education and training. We intend to share solutions and best practices widely with those developing their client, family and parent/caregiver work force.

DIRECTIONS Please complete this survey and return it by *Monday, November 3, 2008*, ATTN: Lucha Olguin, via email to lolguin@cimh.org, fax at 916.556.3483 or mail to 2125 19th Street, 2nd Floor, Sacramento, CA 95818. WWT will be collecting, analyzing and summarizing the data. *As a token of appreciation, we will send you a summary of the survey results.*

Who should complete this survey?

• *Clients* • *Families* • *Parents/Caregivers* • *Employers*
• *County Staff* • *Community Based Organizations* • *Workforce Developers*

* The term *client* in this survey represents persons who also identify as consumers, former patients or survivors.

OPTIONAL Please tell us about yourself and those you serve to help guide future Jump Start outreach and planning efforts.

Section 1: What describes your identity? (Please check all that apply)

Ethnic Background:	<input type="checkbox"/> African American	<input type="checkbox"/> Asian
	<input type="checkbox"/> Caucasian/White	<input type="checkbox"/> Latino Specify: _____
	<input type="checkbox"/> Native American Tribe: _____	<input type="checkbox"/> Pacific Islander
	<input type="checkbox"/> Self Identify: _____	
Primary Language(s): _____		
Sexual Orientation:	<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Bisexual
	<input type="checkbox"/> Lesbian	<input type="checkbox"/> Gay
	<input type="checkbox"/> Questioning	
Gender:	<input type="checkbox"/> Female	<input type="checkbox"/> Male
	<input type="checkbox"/> Transgender/MTF	<input type="checkbox"/> Transgender/FTM
	<input type="checkbox"/> Questioning	
Audience Type:	<input type="checkbox"/> Client	<input type="checkbox"/> Family Member
	<input type="checkbox"/> Parent/Caregiver	<input type="checkbox"/> Self Identify _____
	<input type="checkbox"/> Employer (government or community based organization)	
Other information you believe is important for us to know: _____		

Section 2: Which ethnic/cultural/linguistic communities are you funded to work with? (Please check all that apply)

Ethnic Background:	<input type="checkbox"/> African American	<input type="checkbox"/> Asian
	<input type="checkbox"/> Caucasian/White	<input type="checkbox"/> Latino Specify: _____
	<input type="checkbox"/> Native American Tribe: _____	<input type="checkbox"/> Pacific Islander
	<input type="checkbox"/> Self Identify: _____	
Primary Language(s): _____		
Sexual Orientation:	<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Bisexual
	<input type="checkbox"/> Lesbian	<input type="checkbox"/> Gay
	<input type="checkbox"/> Questioning	
Gender:	<input type="checkbox"/> Female	<input type="checkbox"/> Male
	<input type="checkbox"/> Transgender/MTF	<input type="checkbox"/> Transgender/FTM
	<input type="checkbox"/> Questioning	
Audience Type:	<input type="checkbox"/> Client	<input type="checkbox"/> Family Member
	<input type="checkbox"/> Parent/Caregiver	<input type="checkbox"/> Self Identify _____
	<input type="checkbox"/> Employer (government or community based organization)	
Other information you believe is important for us to know: _____		

Section 3: Other Information

Other information you believe is important for us to know about the communities you serve (i.e. economic factors, ages, spirituality, abilities, size of county, special needs, etc.):

WORKFORCE DEVELOPMENT ISSUES

	<i>Current Status</i>			
	<input checked="" type="checkbox"/> If a Challenge	<input checked="" type="checkbox"/> If Solution Found	<input checked="" type="checkbox"/> If Unknown	<input checked="" type="checkbox"/> If N/A
I. Workforce Preparation				
a). Linking with an educational or vocational program(s) designed to prepare clients, family and parents/caregivers for employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Recruitment & Hiring				
a). Engagement and outreach to clients, families, parents/caregivers from racial/ethnic/cultural specific communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b). Engagement and outreach to LGBTQ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c). Getting job descriptions for clients, families, parents/caregivers in specifically designated positions approved and posted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d). Job qualification statements (e.g., clients, families, parents/caregivers experience required, desired or preferred)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e). Human Resources (HR) communication with potential applicants regarding specific job requirements and/or benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f). Human Resources (HR) communication with applicants during application process regarding specific job requirements and/or benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g). Human Resources (HR) ability to speak with client, family, parent/caregiver employees whose first language is NOT English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h). Having to interview everyone on an existing <i>hiring</i> (or, eligibility) <i>list</i> , if a pre-existing job description is used for a new position	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i). Traditional degree requirements for non-traditional positions (e.g., bachelor's in a social science)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j). Hiring as a county employee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k). Advertising and outreach efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l). Historical disparities within the mental health system prevent the development of community partnerships and relationships necessary for effective recruitment of culturally diverse client, family and parent/caregiver employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m). Other: Specify _____				

(ISSUES continued)

	Current Status			
	<input type="checkbox"/> If a Challenge	<input checked="" type="checkbox"/> If Solution Found	<input type="checkbox"/> If Unknown	<input checked="" type="checkbox"/> If N/A
III. Current Workforce Attitudes, Resistance				
a). Some people think it is inappropriate to employ individuals with client, family and parent/caregiver experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b). Some co-workers would be uncomfortable (fear of job loss, confidentiality issues, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c). Some co-workers and managers do not acknowledge the benefit of employees with client, family and parent/caregiver experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d). Some clinicians fear having clients as fellow employees could jeopardize their licensure (e.g., boundary issues, inappropriate contact, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e). Some managers appear to employ few clients, families and/or parents/caregivers and only to please reviewers and/or auditors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f). Some managers and co-workers do not acknowledge the potential for reducing disparities as a result of hiring culturally diverse clients, families and parents/caregivers (improvement in access, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g). Historical mistrust between the mental health system and racial, ethnic and cultural communities, including LGBTQ, impacts the organizational environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h). Other: Specify _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. Jobs, Careers				
a). Soliciting input from clients, families, parents/caregivers in creating specifically designated positions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b). Stigma within mental health agencies prevents useful identification and descriptions of job roles for clients, families, parents/caregivers staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c). Stigma within mental health agencies prevents development of career ladders that acknowledge and value clients, families and parents/caregivers experience and expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d). Historical policies, practices, and/or funding patterns are a barrier to creating client, family, parent/caregiver job opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e). Structuring jobs (e.g., outreach, peer support, orientation/ training of new employees) for individuals with clients, families and parents/caregivers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f). Limited career advancement opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g). Other: Specify _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

V. Pay & Benefits				
a). Ease of hiring into full-time positions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b). Hiring as “independent contractors”	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c). Paying stipends to maintain SSI (or, related benefits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d). Ease of hiring into flexible positions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e). Adequate benefits counseling exists in multiple languages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f). Ease of providing health benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(ISSUES continued)

	<i>Current Status</i>			
	<input type="checkbox"/> If a Challenge	<input type="checkbox"/> If Solution Found	<input type="checkbox"/> If Unknown	<input type="checkbox"/> If N/A
VI. Orientation, Training and Supervision				
a). Pre-employment training or orientation to job duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b). Pre-employment training on Federal Equal Employment Opportunity laws, state employment laws and ADA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c). Orientation and initial training needs are unclear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d). Peer, family, and parent/caregiver training programs are non-existent or not well developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e). On-going training to improve job performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f). Working collaboratively with Department of Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g). Supervisors have the ability to supervise a client, family, parent/caregiver employee and recognize their skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h). Preparing co-workers by offering education about organizational culture and its impact on stigma and discrimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i). Other: Specify _____				

VII. Support and Accommodations				
a). Preparing co-workers to be welcoming and helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b). Providing supports required by a person's work assignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c). Making reasonable accommodations attributable to a person's disability (e.g., initial interviews; on-the-job)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d). Helping resolve organizational tension related to employment of past or present clients within the service system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e). Providing transitional support and information regarding re-entry to services if needed upon client, family, parent/caregiver resignation or termination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f). Sponsoring peer support groups for all employees to support employee empowerment within mental health organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i). Other: Specify _____				

VIII. Other, Miscellaneous				

IX. Four Final Questions

1) Would your county be willing to share the steps taken to resolve any issues or problems in any area?

Yes, without reservation Yes, under the following conditions: _____

No _____

County: _____

2) If “Yes” (willing to share solutions), please identify one matter or topic:

Issue(s) _____

3) Would your county be willing to participate in a time-limited work group sponsored by the WWT that investigates best practices in client, family and parent/caregiver employment, as well as strategies to document and assess these practices? (Work groups will be conducted as teleconferences to reduce travel obligations.)

Yes, without reservation Yes, under the following conditions: _____

No _____

4) Which kind of technical assistance, education or training would be *most beneficial* for your county to help with employment of individuals with client, family and parent/caregiver experience?

Person who filled out this Survey (Optional)

Name: _____

Title: _____

County: _____

Contact information for future communications on the topic:

Phone Number: _____

Email Address: _____