



Responsive Leadership Workshop

Behavioral Health Recruitment and Retention

Thursday, January 17, 2024 | 11:00-12:30 p.m. PT



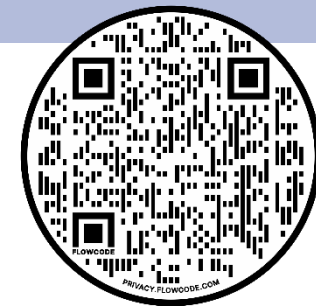
Indigenous Land Acknowledgement

- We respectfully acknowledge that we live and work in territories where indigenous nations and Tribal groups are traditional stewards of the land. Our California office resides in Tongva territory.
- Please join us in supporting efforts to affirm Tribal sovereignty across what is now known as California and in displaying respect, honor, and gratitude for all Indigenous people.

Whose land are you on?

Option 1: Enter your location at [Native Land CA](#)

Option 2: Access Native Land website via QR Code





Advocates for Human Potential, Inc. (AHP) Behavioral Health Recruitment and Retention (BHRR) Team



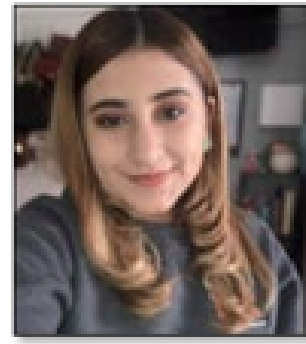
Susan Lange
Program Director
Workforce Innovations Lab



Kklara Moradian
BHRR Deputy Project Director
& Grantee Coach



Roxanne Brooks
Grantee Coach



Rosy Larios
Grantee Coach



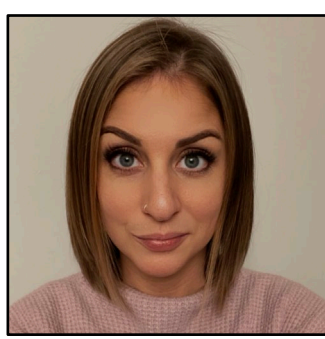
Sandra Gomez
Grantee Coach



Nate Pally
Grantee Coach



Erika Asuncion
2nd-Year M.S.W. Intern
Grantee Coach in Training



Cherice Cooley
Operations Specialist



Caitlin Storm
Quality
Assurance Coordinator



Kate Cox
Behavioral Health
Workforce Development
(BHWD)
Operations Manager



Kayla Halsey
BHWD Data &
Analyses
Manager

This project would not be possible without the many amazing people who work in the background but are not on this slide.

AHP Workforce Development (WFD) Subject Matter Expert (SME) Team



Susan Lange
*WFD SME &
Program Director*



Allen Fowler
*WFD SME &
Senior Writer*



Martina Durant
*WFD SME & Senior
Program Manager*



Sandra Gomez
*WFD SME & Senior
Program Associate*



Maurizio Martinez
*WFD SME &
Program Associate*

Agenda



Grantee Spotlight:
Community Solutions



Breakout Room Discussion



Large Group Debrief



Q&A



Grantee Spotlight:



Creating Opportunities • Changing Lives

Founded in 1972, Community Solutions (CS) seeks as its mission to create opportunities for positive change by promoting and supporting the full potential of individuals, the strengths of families, and the well-being of our community.

To achieve its mission, CS offers wellness and recovery-based behavioral health (BH) services; empowerment-based domestic violence (DV), human trafficking, and sexual assault services; and strength-based prevention and intervention services.

With offices in San Jose, Morgan Hill, Gilroy, and Hollister, CS provides care to over 7,000 children, families, and individuals per year in Santa Clara and San Benito Counties, all of whom endured some kind of trauma. CS thus trains all of its employees in trauma-informed care to ensure services, practices, interactions, and environments do not trigger trauma in clients, community members, vendors, donors, volunteers, and coworkers.

Leadership Development Initiative



Why Leadership Development Programs Fail

“Individuals [have] less power to change the system surrounding them than that system [has] to shape them.”¹

- System does not support changes in leadership behaviors and approaches (organizational design, managerial processes, etc.).
- Lacking sustained senior leaders' championship, role modeling, and sponsoring changes in leadership behavior.
- Focus on individual behaviors as the reason for failure to meet organizational goals rather than on policies and practice.

¹ Beer, M., Finnström, M., & Shrader, D. (2016, October). *Why leadership training fails—and what to do about it*. Harvard Business Review. <https://hbr.org/2016/10/why-leadership-training-fails-and-what-to-do-about-it>

Guiding Principles & Areas of Alignment

More than a training—a shift in leadership and management culture.

Tethered to strategic plan, mission, and vision.

Designed around adult learning principles.

Centers diversity, equity, and inclusion (DEI) and individual lived experience.

Inclusive of conscious leadership.

Broad definition of a leader.

Not driven by compliance.

Senior Leadership Activity: Pre-Mortem

Imagine it's 3 years from now...

and the agency leadership development initiative is a complete failure.



Why did it fail?

What regrets do we have?



Pre-Mortem Participant Feedback

- Exec Team didn't agree with the plan or model the changes. It wasn't really embodied at the top.
- Performance Management – Leaders not held accountable to lead in alignment with what we create > It needs to be built into the policies. (CS mission, vision, values)
- Lack of planning – jumped straight into implementing.
- Saw lip service and not authentic.
- Didn't consider the unique needs of BIMPOC and LGBTQ staff, as well as agency culture and services.
- We didn't define the model.
- We didn't define leadership values or agency values that aligned with each other.
- We didn't have shared definitions, success measures, and sustainability. Definitions of leadership, leadership training, what sustainability looks like, everyone is thinking differently.
- We didn't invest in a social/ecological approach – Starting with the individual and developing leadership skills by asking: What is my style, and what are some of the things that hinder my ability to fully step into a leadership role? Once comfortable how do I lead others, how do I lead an organization, how do I lead policy change?



Key Initiative: BIMPOC Leadership Development & Empowerment

Executive Sponsor: Melanie Daraio Business Owner: Perla Flores

FY23 Impact : BIMPOC leaders have access to the tools, training, mentoring, opportunities, and support they need to fully step into leadership roles.

Planned Strategies:

- Establish a BIMPOC Leadership Cohort within the STV Division
- Develop SOW with contractor to lead and complete project
- Launch initial cohort of BIMPOC leaders to be trained

Proposed Measures:

- BIMPOC Leadership Academy Program development completion
- BIMPOC Leadership Academy Pilot Plan completion



Key Initiative: Retain our Employees

Executive Sponsor: Erin O'Brien Business Owners: Elias Ehrheart & Sarah Bravo

FY23 Impact : Further develop managers' skills and ability to effectively lead and retain employees.

Planned Strategies:

- Rollout cascading Stay Interviews across agency
- Complete the set up of turnover rate data analysis in Paycor
- Develop an Employee Handbook
- Complete a management skills gap analysis and develop an annual training plan

Proposed Measures:

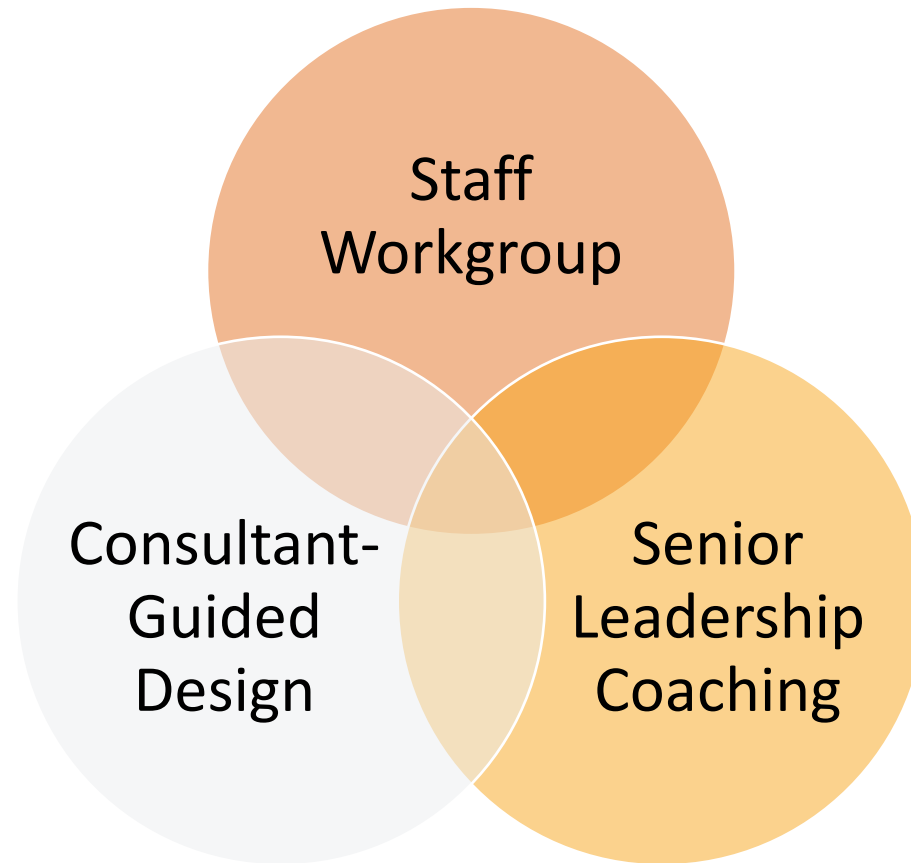
- Stay Interview rollout implemented
- Baseline turnover rate established
- Version 1.0 of Employee Handbook completed
- Leadership training plan completed – 3 workshops Implemented

Learnings and plans from
Black, Indigenous, migrant,
and people of color (BIMPOC)
Leadership efforts

Learnings and plans from
skills training efforts

Inclusive CS
Leadership
Program

Leadership Development Program: Design Strategy





Questions for Community Solutions?

Please enter questions in the Q&A box
and/or raise your hand.



Breakout Room Discussion



25 minutes



Breakout Room Reflection Questions

1. How does your organization currently view and value leadership development?
2. Can you think of one or two practices your organization can put in place to move toward a more inclusive, strengths-based, culturally responsive, and trauma-informed workplace?

Regional Assignments: SoCal (Los Angeles)

SoCal (Los Angeles)		
Unique ID	Org Name	County
BHRRSBH01	Bienestar Human Services Inc	Los Angeles County
BHRRSCS01	Chinatown Service Center	Los Angeles County
BHRRSCO01	Compatior Counseling Center	Los Angeles County
BHRRSDH01	Didi Hirsch Psychiatric Services dba Didi Hirsch Mental Health Services	Los Angeles County
BHRRSFA01	Five Acres	Los Angeles County
BHRRSFB01	Fred Brown Recovery Services	Los Angeles County
BHRRSGA01	Gateways Hospital And Mental Health Center	Los Angeles County
BHRRSHC01	Health Care Integrated School Based Health SBH	Los Angeles County
BHRRSHH01	Healthy Hearts Medical Association dba Health Care Integrated Services	Los Angeles County
BHRRSHH02	Healthy Hearts Medical Association dba Health Care Integrated Services	Los Angeles County
BHRRSHH03	Healthy Hearts Medical Association dba Health Care Integrated Services	Los Angeles County
BHRRSPA01	Parents Anonymous Inc	Los Angeles County
BHRRSPL01	Penny Lane Centers	Los Angeles County
BHRRSPH01	PHOENIX HOUSES OF CALIFORNIA INC	Los Angeles County
BHRRSSD01	Samuel Dixon Family Health Center Inc	Los Angeles County
BHRRSSD02	Samuel Dixon Family Health Center Inc	Los Angeles County
BHRRSSC01	Southern California Health And Rehabilitation Program	Los Angeles County
BHRRSSJ01	St Johns Community Health	Los Angeles County
BHRRSPC01	The People Concern	Los Angeles County
BHRRSVF01	The Village Family Services	Los Angeles County
BHRRSVE01	Venice Family Clinic	Los Angeles County

Regional Assignments: SoCal 2

Southern CA		
Unique ID	Org Name	County
BHRRSCI01	City Impact	Ventura County
BHRRSCC01	Community Clinics Health Network dba Health Quality Partners of Southern California	San Diego County
BHRRSCR01	County of Riverside Riverside University Health System Behavioral Health	Riverside County
BHRRSGH01	Grandmas House of Hope	Orange County
BHRRSHC02	Health Care Integrated School Based Health SBH	Riverside County
BHRRSHG01	Higher Ground Youth and Family Services	Orange County
BHRRSMS01	Marys Shelter DBA Marys Path	Orange County
BHRRSNC01	Norooz Clinic Foundation	Orange County
BHRRSNO01	North County Health Project Inc dba TrueCare	San Diego County
BHRRSOC01	Orange County Asian and Pacific Islander Community Alliance	Orange County
BHRRSPF01	Palomar Family Counseling Service	San Diego County
BHRRSPV01	Peer Voices of Orange County	Orange County
BHRRSSP01	Serve The People	Orange County
BHRRSHL01	The Happier Life Project	Riverside County
BHRRSPR01	The Purpose of Recovery	Orange County
BHRRSUC01	Unicare Community Health Center	San Bernardino County
BHRRSUP01	Union of Pan Asian Communities	San Diego County
BHRRSVI01	Vista Community Clinic	San Diego County
BHRRSVH01	Vista Hill Foundation	San Diego County
BHRRSWA01	Waymakers	Orange County

Regional Assignments: Bay Area/Mid-State

Bay Area Mid-State

Unique ID	Org Name	County
BHRRBAB01	Aspiranet Behavioral Health Division	San Mateo County
BHRRBAB02	Aspiranet Family and Community Division	San Mateo County
BHRRBAB03	Aspiranet Residential and Education Division	San Mateo County
BHRRBAB04	Aspiranet Resource Family Adoption and Foster Care Division	San Mateo County
BHRRBAB05	Aspiranet Transition Aged Youth Division	San Mateo County
BHRRBAB06	Aspiranet Wraparound and Intensive Home Based Services Division	San Mateo County
BHRRBCH01	Community Health for Asian Americans	Alameda County
BHRRBCS01	Community Solutions	Santa Clara County
BHRRBCU01	Cultivating Culturally Competent Clinicians Inc	Fresno County
BHRRBEB01	East Bay Agency for Children	Alameda County
BHRRBGF01	Gardner Family Health Network Inc DBA Gardner Health Services	Santa Clara County
BHRRBGR01	Greater Fresno Health Organization Inc	Fresno County
BHRRBHS01	Heart and Soul	San Mateo County
BHRRBIF01	Instituto Familiar de la Raza	San Francisco County
BHRRBJS01	Janus of Santa Cruz	Santa Cruz County
BHRRBKV01	Kings View	Fresno County
BHRRBLA01	La Clínica de La Raza	Alameda County
BHRRSLR01	LAGS Recovery Centers Inc	Santa Barbara County
BHRRBLC01	LGBTQ Collaborative	Stanislaus County
BHRRBLM01	LifeLong Medical Care	Alameda County
BHRRSMH01	Mental Health Association of Santa Barbara County DBA Mental Wellness Center	Santa Barbara County
BHRRBNS01	NAMI San Mateo County	San Mateo County
BHRRBPT01	Partnerships for Trauma Recovery	Alameda County
BHRRBRC01	Rebekah Childrens Services	Santa Clara County
BHRRSSB01	Santa Barbara Neighborhood Clinics	Santa Barbara County
BHRRBSC01	Schrank's Clubhouse	Tulare County
BHRRSTM01	Transitions Mental Health Association	San Luis Obispo County
BHRRBTR01	Tule River Indian Health Center	Tulare County

Regional Assignments: NorCal/Capital

NorCal & Capital		
Unique ID	Org Name	County
BHRRBAR01	Archway Recovery Services Inc	Solano County
BHRRCED01	El Dorado County Community Health Center	El Dorado County
BHRRCED02	El Dorado County Community Health Center Cameron Park Behavioral Health Site	El Dorado County
BHRRNGM01	Gateway Mountain Center	Nevada County
BHRRNMC01	Mendocino Community Health Center	Mendocino County
BHRRCON01	One New Heartbeat	Sacramento County
BHRRBPH01	Petaluma Health Center	Sonoma County
BHRRNRC01	Redwood Community Services Inc	Mendocino County
BHRRCSY01	Sacramento Youth Center	Sacramento County
BHRRCED03	STEPS Program at El Dorado Community Health Center	El Dorado County
BHRRBWC01	We Care Services for Children	Contra Costa County
BHRRNYT01	Yurok Tribe	Del Norte County



Breakout Room Reflection Questions

1. How does your organization currently view and value leadership development?
2. Can you think of one or two practices your organization can put in place to move toward a more inclusive, strengths-based, culturally responsive, and trauma-informed workplace?

Solutions to Workforce Wellness



Large Group Debrief Activity

Questions?

Please enter questions in the Q&A box and/or raise your hand.





Please fill out the attendance form and feedback survey in the chat to meet your requirements for today's event.

Upcoming Events and Important Reminders

Phase B Training and Technical Assistance – Quarter 3 of BHRR							
Q	Month	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hours of Live Grantee Attendance per Month
3	January	Webinar: Responsive Leadership: Creating Healing-Centered Workspaces (1 hour) 01/04/24 12-1 p.m.		Q2 Data Report and Q2 Invoice Due 01/15/24 Workshop: Responsive Leadership (1.5 hours) 01/17/24 11 a.m.-12:30 p.m.	Update Implementation Plan(s)		2.5 hours + 1:1 with GCs SMEs as needed
3	February	Webinar: Baselines and Benchmarks: Using Data to Craft a Workforce Plan (1 hour) 02/07/24 12-1 p.m.		Workshop: Using Data to Craft a Workplan (1.5 hours) 02/21/24 11 a.m.-12:30 p.m.	Update Implementation Plan(s)		2.5 hours + 1:1 with GCs SMEs as needed
3	March	Webinar: The Power of Partnership: A Path to Advocacy and Equity (1 hour) 03/06/24 12-1 p.m.		Workshop: Advocacy Roadmaps (1.5 hours) 03/19/24 11 a.m.-12:30 p.m.	End of Q3 – Update Implementation Plan(s) Reminder: Q3 Data Report and Q3 Invoice(s) Due 04/15/24		2.5 hours + 1:1 with GCs SMEs as needed

Note: This document is a tentative plan and is subject to change. You will receive notification about changes to this plan in advance via email and through communication from your GC. Please refer to this plan for a general guideline of what to expect in Quarter 3 (Q3) of BHRR. The BHRR Team may offer optional Open Office Hours if needed. Those dates will be communicated in advance.

Acronyms:

BHRR: Behavioral Health Recruitment and Retention

SME: Subject Matter Expert

GC: Grantee Coach

TA: Technical Assistance



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Thank you!

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