- OUTREACH

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California Association of Psychiatric Technicians



Welcome.

California Association of Psychiatric Technicians

The California Association of Psychiatric Technicians is a non-profit corporation serving as the exclusive representative of all employees in Psychiatric Technician Bargaining Unit 18 in California State Civil Service. CAPT is also the professional association for approximately 11,000 state-licensed Psych Techs who work in California programs serving people with mental illnesses and developmental disabilities. CAPT is represented by Lyles, Wiesmann, Pizzotti and Associates, Inc. The *Outreach* is CAPT's official publication and is printed at least six times each year. A digital archive of the *Outreach* is maintained at www.psychtechs.net.



A children's basket ball court sits outside the Northern STAR 3 home in Vacaville. See full story on page 9.

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You may contact your state and chapter officers directly. Their contact information is

listed on page 4. Be sure to leave your name, work location, and phone number, as well as a short explanation of your issue.



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CAPT's Digital Magazine

If you are viewing the printed edition, point your smart device's camera over the provided QR code for additional content and user interactivity.



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Important Reminders

Rights of representation before the BVNPT

Active members have the right to full benefits of the Association. Among these rights is the right of representation in appeals of actions against the individual's Psychiatric Technician license or Certified Nurse Assistant certificate. If you find yourself in need of licensure or certification help, contact CAPT Headquarters right away at (800) 677-2278.

Do we have your email and home addresses?

We're building up our e-mail lists so we can get the news to you faster. If you do not think we have your current email or home address, please check with or send your address updates to Debi via email at loger@psychtechs.net. Also, you mustn't forget to update your mailing address with the BVNPT or if you are unlicensed, with the Department of Health Care Services. CAPT's contract with the state provides that BU 18 employees who are not CAPT members have the right to have their home address withheld from CAPT. A non-member may do this by making a written request to the State Controller's Office and CAPT. If you do this, you will no longer receive any information from CAPT.

Planning to retire soon?

Don't forget that CAPT offers its retired members insurance benefits similar to what it provides its active members. As a retired member, CAPT will continue to provide – \$5,000 in Accidental Death and Dismemberment coverage and \$5,000 in Life Insurance – without any age term.

Important: For your insurance to continue after your retirement – for only \$5 per month – you must contact CAPT Headquarters at (800) 677-2278 within 31 days of the last day in the month in which you retired. If you fail to do so, your policy will lapse and cannot be reinstated.

psychtechs.net

Check out our catastrophic leave list on our website. Keep abreast of what's happening! CAPT updates its website frequently, making sure you have current information on state, department, and CAPT news, at your facility and statewide.



The President's View

Honoring the achievements and struggles of worker-led movements

CAPT Brothers and Sisters,

Labor Day is a federal holiday celebrated on the first Monday in September. Labor Day celebrates and recognizes the American Labor Movement and the many achievements of workers in the United States. Labor unions first celebrated Labor Day in the late 19th century. Labor Day became a federal holiday in 1894.

Several labor unions and worker groups celebrated several dates in honor and recognition of the struggles and victories of worker-led movements. For example, in the United States and many countries worldwide, May 1 was celebrated as International Worker's Day and was tied with the struggle for the 8-hour work day and with the Haymarket Massacre in Chicago, Illinois.

More conservative-minded labor leaders sought to distance the labor movement from what they viewed as more radical elements of the labor movement and identified September. President Grover Cleavland identified the first Monday in September as the celebration of the American Labor Movement and or the American worker.

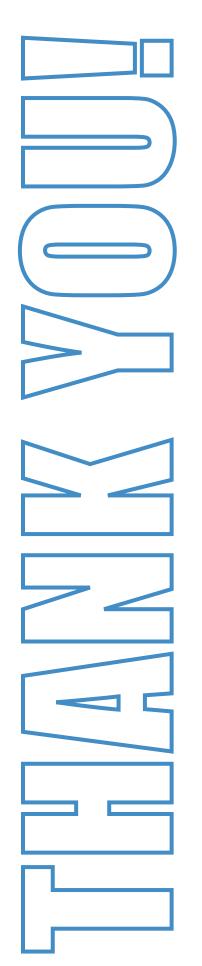
Whether you celebrate International Worker's Day (May 1) or Labor Day (1st Monday in September), the important thing is that you reflect and celebrate the achievements, struggles, and continued fight for working men and women not only in this country but throughout the world. For the record, I proudly celebrate both!

Solidarity forever!

Eric Soto CAPT State President (909) 214-4298

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Facebook



NATIONAL PSYCHIATRIC TECHNICIAN APPRECIATION DAY



Wednesday, August 2, 2023

CAPT celebrated the exceptional dedication and invaluable contributions of the Psychiatric Technician profession!

Psychiatric Technicians possess an extraordinary combination of talent, skill, and compassion. They selflessly serve and provide specialized care to those facing mental disorders or developmental challenges, offering comfort and support to those in need.

In California, there are nearly 11,000 licensed PTs, with an astounding 6,000 employed by the state, diligently tending to prison inmates, state hospital patients, and individuals with developmental disabilities.

PTs encounter extraordinary obstacles regularly. Despite these trials, they continue to rise above, displaying unwavering strength and dedication to their profession and the people they serve. For many, their work is concealed from public view, diligently working behind the scenes, providing care, healing, and hope to those who need it most.

Psychiatric Technicians are the unsung heroes of our society. Their labor of love is not driven by accolades but by an innate desire to make the world a better place, one person at a time.

To all the PTs out there, thank you for being a source of light to those in need and for your healing touch and boundless empathy.





CalPERS announces significant healthcare premium increases for 2024

The CalPERS Board of Administration narrowly approved new healthcare premiums for 2024, with an overall premium increase of 10.77 percent. This means that all employees covered by CalPERS health plans, including active employees and retirees, will experience higher premium costs.

The increased premiums will take effect on January 1, 2024. BU 18 employees will be responsible for 20% of that increase. In **Article 7.1 (A. 2.)**, our employer has agreed to pick up 80% of the 2023, 2024, and 2025 healthcare premium increases.

Premium Increases

Kaiser Permanente and the PPO plans are experiencing the highest increases in the Basic program. For the percentage premium change for each health plan between 2023 and 2024, please see the CalPERS **July 18 Media Release.**

The average premium increases are listed below:

- Basic (non-Medicare) plans will increase by 10.95% overall
- Basic Health Maintenance Organization (HMO) plans will have an average premium increase of 10.50%.
- Preferred Provider Organization (PPO) Basic plans will have an overall increase of 12.17%.
- Medicare plan premiums will rise by 9.55% overall.

Health Plan Expansions

CalPERS is providing members with more options to choose from, as they have approved several health plan expansions for 2024. These expansions will offer coverage in additional counties and give members more choices for their healthcare needs.

Health Net SmartCare

Health Net SmartCare has been removed from the CalPERS Health Program. Members of this program will need to select a new plan during the Open Enrollment Period.

Open Enrollment

Open Enrollment will be held from September 18 to October 13, 2023. During this period, CalPERS members can shop for different health plans and make changes if needed. They can compare plan monthly premiums and copays and search for primary care doctors and specialists through the Search Health Plans tool in their myCalPERS accounts.



CAPT-ASH wins on staffing minimums

DSH-A grants 9.4 greivance

The Atascadero Chapter is happy to report DSH-A granted its remedy for a grievance filed under Article 9.4 Staffing. The grievance called out staffing shortages experienced on June 30, 2023, resulting in a contract violation under Article 9.4 Staffing, which reads in part:

The minimum adequate level of unit staffing required by the Department of Public Health is 1:8 AM, 1:8 PM, 1:16 NOC or its 24-hour equivalent. Before additional changes are made from the above ratios to a 24-hour equivalent, the State will meet and confer with the Association concerning the impact of such changes.

The grievance filed by the Atascadero Chapter accurately demonstrated that on June 30, 2023, Unit 28, which had a census of 42 patients, operated with staffing levels below the licensing minimums. The specific requirements of 1:16 for staffing ratios during the NOC shift were not met, resulting in a violation of Article 9.4 Staffing.

In its response, DSH-A acknowledged our MOU language and the licensing minimums and affirmed staffing levels will stay within the established licensing minimums in the future.

Regarding the Contingency
Staffing Plan, the Atascadero
Chapter asked DSH-A to clarify
the definitions of "available"
and "licensed managers/supervisors." DSH-A acknowledged
the need for clarity in terminology. For the term "Available,"
DSH-A provided any supervisor
or manager from a Program or
identified Ancillary Department
who has volunteered to provide coverage.

For the terms "Licensed Managers/Supervisors," DSH-A provided the following classifications in addition to the assigned Program Officers of the Day (POD): Unit Supervisor, Nursing Coordinator, Program Director, Program Assistant, Supervising Registered Nurse, Supervising Rehabilitation Therapist, and Supervising Social Worker.

If you have any question or would like more information, please contact the Atascadero Chapter at captash@psychtechs.net or at (805) 460-6131.

CAPT tours two new STAR homes

Grand openings are set to take place soon

July 26 - 27, 2023

The Department of Developmental Services invited CAPT to tour and preview two newly built STAR homes, with the grand openings set to take place soon.

STAR homes fall under the umbrella of three regional programs—Northern, Central Valley, and Southern. STAR stands for Stabilization Training Assistance Reintegration.

"DDS started transitioning into the state-operated community crisis homes over the last several years in response to the individuals moving from developmental centers into community homes," explained Randy Tyer, president of the Integrated Community Chapter. "The community needed to have a Safety-Net system in place to assist those having behavioral difficulties while living in one of the many community living options."

On July 26th, CAPT representatives visited the new Central Valley STAR 2 home in Porterville. Among the attendees were Randy Tyer, President of the Integrated Community Chapter, along with Misty Tuckness, Vice President. Also present were Kara Johnson, President of the Porterville Chapter, and Ann Lyles, a Consultant from CAPT. The home is one of two STAR homes in the Central Valley. STAR 1 is a 5-bed crisis home for adolescents ages 12-17 and is temporarily located at the Porterville Developmental Center. Central Valley STAR 2 will be a 5-bed Community Crisis Home serving adults ages 18 and older.

The subsequent day, Randy, Misty, and Ann met again with state representatives to tour the Northern STAR 3 home in Vacaville. The STAR 3 home will serve children ages 7-12. The house is nestled high in the hills with surrounding views of the valley below. The original STAR 3 home had to be rebuilt because it fell prey to the 2020 wildfires that ravaged significant portions of Northern California. Consequently, the rebuild significantly delayed its opening. Fortunately, the STAR 3 home was not open for business when the



Central Valley STAR 2, Porterville



Northern STAR 3, Vacaville

fire burned through the property. The Northern STAR operates two other homes in Vacaville, STAR 1, a 5-bed serving adults ages 18 and older, and STAR 2, a 5-bed Children's home serving adolescents ages 12-17.

■ Continued, next page

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STAR's primary mission is to serve adolescents and adults with developmental disabilities who receive regional center services. These individuals require time-limited crisis stabilization services spanning up to 13 months. STAR homes are committed to delivering personalized support and crisis stabilization to their residents, enabling a smooth transition toward community living.

"There remains a significant need in the community for the state-operated facilities' level of treatment," explained Randy. "This short-term intensive treatment program provides the stabilization needed for those folks going through a rough patch."

The Integrated Community Chapter

Since the opening of the STAR homes, the integrated Community Chapter has been able to make the transition as well. Much like the unique population of those we serve in DDS, our chapter comprises individuals that work in state service in positions such as PT, SPT, PTA, PTI, and PLPT under BU 18 but are not typically employed by the larger formal institutions.

The membership of the ICC consists of those working at all the STAR locations and the state-employed BU 18 classifications that are a part of the Community State Staffing Program (CSSP) throughout northern and southern California.

Our chapter will continue to grow and evolve as more staff are hired into the STAR programs and become a part of CAPT. We continually tackle the unique challenges that stem from working in a community-based setting.

- Randy Tyer, ICC president





Central Valley STAR 2, Porterville







Northern STAR 3, Vacaville



Catastrophic Leave

Helping one another through Catastrophic Leave Donations

BU 18 MEMBER(S) CURRENTLY IN NEED OF C.L. DONATIONS:

None at this time

CAPT got the concept of Catastrophic Leave off the ground three decades ago; the program's been in our state Bargaining Unit 18 contract since 1989.

Article 6.9 of the CAPT contract gives stateemployed Psych Techs and related professionals the right to request leave donations from coworkers in cases of financial hardship due to injury or the prolonged illness of the state Bargaining Unit 18 member or his or her family member, or for parental or adoption leave purposes.

You can help state-employed coworkers by donating vacation, annual leave, personal leave, CTO and holiday credits. Simply contact your personnel office to fill out a Catastrophic Leave donation form. And don't forget: You can donate to state employees who work in different departments or facilities.

If you need help and have received department approval to get leave donations, contact CAPT to be included in our publications. You also may qualify for reduced union dues while you recuperate. Contact your chapter president to find out more.

Those requesting donations on our online and magazine lists will automatically be removed by the next *Outreach* publication date unless CAPT is informed of ongoing needs. If you still need to remain on our lists -- no problem! Just call Christine Caro at **(800)** 677-2278.

The Sacramento Bee wants to hear from you

The Sacramento Bee has a new state worker reporter!

With her background as a prominent figure in The Sacramento Bee's Equity Lab, where she spearheaded insightful economic mobility coverage, Maya Miller is now poised to take the reins as the driving force behind the paper's state worker reporting.

As The Bee's new State Worker Reporter, Maya will lead the charge in the paper's Capitol Bureau, providing unique coverage of the issues that matter most to you.

The Bee values your perspective and realizes the power of community engagement. It created an online form to gather your suggestions and feedback on state worker reporting. Your participation will help shape Maya's coverage, ensuring that the stories affecting our daily lives are brought into focus.

Click on the following link to access the form: "State workers and retirees: What do you want to see from Sac Bee's coverage?" Together, we can make a difference, ensuring that Maya's reporting resonates with the issues impacting us all.



CAPT-sponsored PTSD workers' comp presumption bill moves without a single 'NO' vote

Bill shifts the burden of proof from the employee to the employer

CAPT-sponsored <u>AB 1145</u> by <u>Assembly Member Maienschein</u> has passed through its house of origin and two Senate committees without a single 'NO' vote. On May 25, the Assembly approved AB 1145 76-0, sending the bill to

the <u>Senate Committee on Labor, Public Employment and Retirement,</u> where it was approved <u>5-0</u> on June 28. On September 1, the <u>Senate Committee on Appropriations</u> passed AB 1145 <u>5-0</u> to the Senate floor. The Senate has until September 14 to pass the bill to the governor.

AB 1145 would provide nursing staff in prisons, state hospitals, and developmental centers with the presumption that a psychological injury or PTSD occurred as a condition of employment, shifting the burden of proof from the employee to the employer for workers' compensation purposes.

The workers' compensation system generally approves our PTSD claims resulting from an assault. But unfortunately, the burden falls upon the Psych Tech to prove a PTSD injury resulted from a non-assaultive workplace incident. CAPT argued that the burden places an undue hardship on the victim of a workplace incident simply struggling to heal. Furthermore, the burden of proof is counterintuitive. The burden of proof isn't going to change the outcome. Instead, it neglects the obvious presumption, delays benefits, and impedes the victim's recovery and healing.

"The nursing professionals in these institutions endure trauma, behind lock and key, as a condition of employment," wrote CAPT in its position letter sponsoring AB 1145. "These nurses deserve to receive the benefits of workers' compensation without undue burden so they can heal from their psychological scars with dignity."





Call to Action

CAPT wants to hear from you if you have been denied a PTSD work-related claim or have experienced an additional hardship due to delayed benefits. Presenting the legislature with powerful illustrative examples of denied or delayed benefits would make a stronger case for AB 1145. Please get in touch with CAPT Consultant Coby Pizzotti at 1-(800)-677-2278 or at coby@psychtechs.net wiith your personal story.



Psych Tech Apprenticeship

Expect More

Department of State Hospitals-Napa, Napa Valley College, and the Joint Apprenticeship Committee

Fast-Track program, Napa State Hospital



The Psychiatric Technician Apprenticeship Program

Your Pathway to a Rewarding Career in Mental Health

Are you ready to embark on a unique journey that combines exceptional training, invaluable experience, and a promising career in mental health? The Psychiatric Technician Apprenticeship Program (PT Apprenticeship Program) carries the highest success rate out of more than 600 state-sanctioned apprenticeships and is one of only two nursing apprenticeship programs in the state.

The PT Apprenticeship Program, also known as the Fast-Track PT Program, brings together the Department of State Hospitals-Napa (DSH-Napa), Napa Valley College (NVC), and the Joint Apprenticeship Committee (JAC) to provide individuals with an opportunity to become a skilled psychiatric technician. The rigorous, highly competitive program allows students to be paid for 40 hours, 20 of which are spent in the classroom and 20 working at DSH-Napa. The program consists of 3000 hours of on-the-job training, including classroom instruction in mental health, developmental disabilities, and pharmacology.

The PT Apprenticeship Program is designed to equip participants with the necessary knowledge, skills, and practical experience to excel in the field of mental health. The program begins with an intensive two-and-one-half month training course on becoming a Certified Nursing Assistant (CNA). By passing the CNA board exam, you will transition seamlessly into the PT Apprenticeship Program, including invaluable on-the-job training at DSH-Napa. The entire program can be completed within 18 months and runs up to 21 months if more time is needed to meet the on-the-job training requirements.

What sets the Apprenticeship Program apart is its fast-paced nature and commitment to mentoring and cultivating future leaders in the mental health sector. With a remarkable 95% pass rate for the <u>Board of Vocational Nursing and Psychiatric Technicians</u> (BVNPT) Board Exam, the PT Apprenticeship Program consistently produces highly qualified professionals ready to make a difference in the lives of individuals in need.

Join the PT Apprenticeship Program to unlock a world of possibilities in the growing field of mental health. Take advantage of this exceptional opportunity to receive a top-notch education, hands-on experience, and the support you need to become a successful psychiatric technician. Discover a rewarding career that allows you to make a lasting impact on the lives of others while enjoying the stability and benefits of a state employee.



Get paid for 40 hours, 20 spent in the classroom and 20 working at Napa State Hospital.

The PTA program has a remarkable 95% pass rate for the Board of Vocational Nursing and Psychiatric Technicians Board Exam.

Salary and Benefits

As a PT Apprentice, you will be hired as a limited-term, full-time state employee, providing stability, security, and a range of outstanding benefits. While pursuing your studies full-time, you will also have the opportunity to work parttime and receive a competitive salary, comprehensive healthcare coverage, and other benefits covered under the Bargaining Unit 18 collective bargaining agreement between the California Association of Psychiatric Technicians and the State of California. This unique arrangement ensures you can focus on your education and training while gaining practical experience and financial independence.

Qualifications and Requirements

Applicants must be 17 or older and a high school graduate (G.E.D. or high school proficiency are acceptable).

The Psychiatric Technician Program at Napa Valley College (NVC) offers two pathways: the PT Apprenticeship Program and the Traditional NVC Psychiatric Technician (PT) Program. Both programs have similar requirements, with one key difference. The PT Apprenticeship Program does not have prerequisite classes; instead, it has co-requisite classes. These co-requisite classes are taken alongside the PT Apprenticeship Program core courses and include:

- Pharmacology
- Anatomy and Physiology
- Health and Nutrition
- Human Growth and Development

Classes may be a combination of in-person and distance learning, so computer skills are necessary for success in the program.



To continue in the PT Apprenticeship Program, apprentices must pass their CNA Board Exam and maintain a passing grade. Failure to do so will result in dismissal from the program and employment at DSH-Napa.

Immunizations must be kept current throughout the program. Apprentices must be prepared to receive the COVID vaccination, annual influenza vaccination, and any other required vaccinations by DSH-Napa, the clinical sites, and NVC.

Tuition and Fees

NVC has an agreement with the JAC that covers tuition fees. Additionally, if the CNA certificate was obtained while employed as an apprentice, the JAC will reimburse the apprentice for their CNA Board Exam and Live Scans. However, some out-of-pocket expenses students should know include books,

simulation programs, student fees, school supplies, uniforms, and additional live scan costs. The estimated cost for these expenses is \$2,000.

Felony Convictions

As healthcare providers, apprentices are subject to stringent background checks conducted by the Department of Justice (DOJ) and FBI. The California Department of Public Health CNA Board and BVNPT will not issue certificates or licenses to individuals with felony convictions. Felony convictions include but are not limited to illegal drug possession or trafficking, theft, negligence, assault and battery, and abuse. Some clinical sites may have stricter background requirements due to their population's age and dependent nature. Inability to attend clinical placements means an inability to continue with the PT Apprenticeship Program.



Psych Tech Apprentices, program instructors, and the SRN/Director of Nursing Education, June 7, 2023

Students and Alumni from the PT Apprenticeship Program

Q&A: Firsthand experiences and testimonials





PT Apprentice Q&As

How do you see this program preparing you for a successful career in the mental health field?



I have made many attempts to further my career. The Fast-Track PT Apprentice program is a magnificent opportunity. From day one, the instructors demonstrated extraordinary generosity in their time, care, and patience. We are all blessed and lucky to participate in such a solid leadership-building course.

— PT Apprentice Katrina Davis, Class of 2024

As a psychiatric technician apprentice, you will encounter diverse patient populations and a wide range of mental health conditions. How do you envision this career path aligning with your long-term professional goals and aspirations?



I enjoy that you start working the floors almost immediately. You begin working with the patients and staff and get a realistic look and feel for how the units run. Some of the most impactful moments will happen during this time, and there will be plenty of life-learning. This time will help mold you into the psych tech professional you can be. Take all the experiences, good and bad, and use them to drive yourself to improve and constantly improve. There will be so much opportunity waiting afterward.

Katharine Tribble, Psychiatric Technician, PT Apprenticeship Program Class of 2022

Where can I learn more?

Take your first step toward a future filled with purpose, growth, and fulfillment

Department of State Hospitals-Napa PT Apprenticeship Program

For more information about the PT Apprenticeship Program, please contact:

Barbara Frantela-Simbulan, SRN/Director of Nursing Education DSH-Napa Phone: (707) 253-5725 dshnshfasttrack@dsh.ca.gov

Napa Valley College PT Program

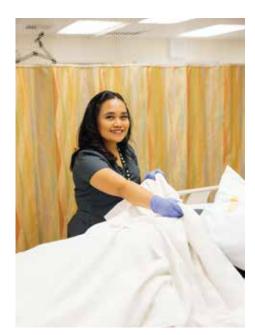
For the most up-to-date college requirements, please visit the NVC website under the Psychiatric Technician Program section.

















Psych Tech Apprenticeship Expect More

Fast-Track Program, Napa State Hospital

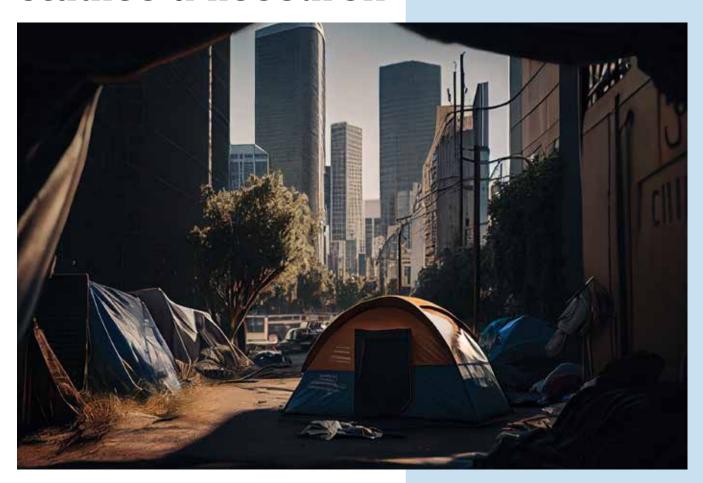


Produced by CAPT Headquarters
Photography by Zachary Stoever, DSH-S

CAPT is the professional association for approximately 11,000 state-licensed Psychiatric Technicians who work in California programs serving people with mental illnesses and developmental disabilities.

CAPT is also the elected union representative for Psychiatric Technicians and related professionals working in California state facilities.

Studies & Research



California's Homelessness Crisis Is Homegrown, Study Finds

By Angela Hart JUNE 20, 2023 KFF Health News

SACRAMENTO, Calif. — California's homelessness crisis is a homegrown problem that is deepening amid a shortage of affordable housing and emergency shelter, and it's often the brutal conditions of living on the street that trigger behavioral health problems, such as depression and anxiety, researchers found in a comprehensive study on homelessness.

The <u>new findings</u> by leading researchers at the University of California show that at least 90% of adults who are experiencing homelessness in the state became homeless while living in California due primarily to the dire lack of affordable housing.

"This idea that homeless people are rushing into California is just not true," said Margot Kushel, a physician who treats homeless people and the lead investigator of the study for the <u>UC-San Francisco Benioff Homelessness and Housing Initiative</u>.

"There's so much myth-making around this magnet theory that people who are homeless flock to California, but this is our own problem."

"These are our own policies," Kushel added, referring to the state and federal governments. "We did this to people."

An estimated 172,000 people are homeless in California, the largest homeless population of any state in the U.S. and 30% of the nation's total, even though California has just 12% of the population. Researchers believe the way the state measures homelessness, though important, represents an undercount because cities and counties tallying their homeless populations in just one day miss people who may be hidden and living in their cars, for instance.

The homelessness study went further than annual point-in-time counts by analyzing the experiences of 3,200 homeless adults age 18 and older from October 2021 to November 2022, then conducted in-depth interviews with some participants to gain a better understanding of the state's overall crisis.

California Health and Human Services Secretary Mark Ghaly, who asked for an analysis of the state's homelessness crisis, said the findings underscore where it must improve. The study could inform the state's approach to expanding its behavioral health system.

"As we drive toward addressing the health and housing needs of Californians experiencing homelessness, this study reinforces the importance of comprehensive and integrated supports," Ghaly said in a statement. "California is taking bold steps to address unmet needs for physical and behavioral health services, to create a range of housing options that are safe and stable, and to meet people where they are."

Democratic Gov. Gavin Newsom and state health officials are steering initiatives that include a 2024 ballot measure to expand treatment for mental health and addiction, including building more residential treatment facilities. Newsom is also leading a new program under the Community Assistance, Recovery and Empowerment Act, known as CARE courts, to move people into court-ordered treat-

ment. And the administration is seeking to add <u>rent</u> <u>payments</u> as a health care benefit available to low-income Californians on Medi-Cal.

Kushel said the findings point to the increasing demands for adequate mental health and addiction treatment — and more low-income housing. While some people reported heightened mental health and substance use problems before becoming homeless, the trauma of being on the streets, Kushel said, can lead to, or amplify, behavioral health conditions, including drug use and depression.

A staggering 82% of people experiencing homelessness said they had a mental health condition or substance use challenge in their lifetime. And 66% said they were currently experiencing mental health problems, such as depression, anxiety, hallucinations, or trouble remembering things.

"I think that speaks to the despair that people experience," Kushel said.

Sage Johnson, 28, was homeless in Los Angeles and lived for years in shelters before getting into low-income housing. Despite working graveyard shifts at Walgreens and other minimum-wage jobs at the time, she said, she couldn't find anything affordable and experienced heightened depression and anxiety while homeless.

"Being out there unmedicated, without therapy, you spiral out of control," Johnson said, who was among the formerly homeless who helped guide the research.

The report also found:

- Of California's adult homeless population, 75% became homeless in their county of residence. Nearly 40% reported being homeless for the first time.
- The median length of homelessness was 22 months. In the six months before becoming homeless, people had earned a median monthly income of \$960.
- Roughly 1 in 5 became homeless after leaving an institution such as jail. Most people, 78%, reported spending the most time homeless in the prior six months in unsheltered settings: 21% in a vehicle, 57% without a vehicle.

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- Before experiencing homelessness, 32% had a mortgage or rental lease agreement; roughly 50% did not.
- Researchers believe many unhoused people have encountered violence, contributing to the crisis: 72% reported physical violence in their lifetime and 24% said they had experienced sexual violence. Sexual violence was more common among women and transgender or nonbinary individuals.
- The homeless population is aging; 47% of all adults surveyed were 50 or older. And Black and Native Americans are disproportionately homeless. For example, just 6% of the state's population is Black, yet 26% of homeless people surveyed identified as Black.

The findings show the limits of California's unprecedented spending to combat its homelessness crisis. Newsom's administration has poured more than \$20 billion into the crisis since he took office in 2019, much of that distributed to local governments to provide services and build housing.

That's on top of billions the state is pouring into improving its mental health system and a \$12 billion social services-based initiative called CalAIM, which offers housing security deposits and sobering centers to help vulnerable populations, including homeless people.

But the study found that expanding health coverage and adding social services isn't serving all those in need. Specifically, 83% of homeless people surveyed said they had health insurance mostly through Medi-Cal, California's Medicaid program for low-income people. Yet more than half relied on the emergency room for care and nearly a quarter said they couldn't access the care they needed. A majority who said they were experiencing mental health problems either weren't being treated or got care through emergency rooms.

In some ways, the policies Newsom is steering may make the problem worse. For example, his administration has backed removing homeless encampments in exchange for shelter and services. But homeless people say those promises are often unmet.

Forced displacement, the report found, and confiscation of belongings when clearing encampments can hurt the state's ability to find housing for people, Kushel said.

"It sometimes feels like one part of government is working against the other part," she said. "We're frantically trying to get people their documents so they can move into housing, and then somebody else throws it all away. That's not helpful."

CalPERS Reports Preliminary 5.8% Investment Return for 2022-23 Fiscal Year

From CalPERS July 19, 2023

SACRAMENTO, Calif. – CalPERS reported a preliminary net return of 5.8% on its investments for the 12-month period ending June 30, 2023, the pension fund's leaders said Wednesday. Assets as of that date were valued at \$462.8 billion.

"Even with the economic challenges that still confront institutional investors, we have been able to maintain our focus on meeting the long-term retirement promises made to our members and their families," said CalPERS Chief Executive Officer Marcie Frost.

The preliminary 5.8% net investment return stands in contrast to the prior fiscal year, when global financial volatility led to the fund's first negative net return since the Great Recession.

When factoring in CalPERS' discount rate of 6.8% — comparable to an assumed annual rate of return — and the 2022-23 preliminary return of 5.8%, the estimated funded status now stands at 72%.

Public equity investments outpaced all other asset classes in the new investment report, with an estimated 14.1% return in FY 2022-23. These assets comprise about 45% of the Total Fund.



"The resiliency of the stock market—particularly since the start of the calendar year—has created a solid base for the investment team to implement innovative approaches in delivering added value for our members in the coming years," said CalPERS Chief Investment Officer Nicole Musicco.

Private debt, established as a unique asset class last year, outperformed the policy benchmark and reported a preliminary investment return of 6.5%.

The Total Fund's second largest component, fixed income assets, finished the fiscal year flat. And two asset classes – private equity and real estate – reported a negative return.

1 Year Return

Asset Class	Net Rate of Return (in percent)	Policy Benchmark (in percent)
PERF	5.8	5.5
Public Equity	14.1	14.1
Income	0	0
Private Equity*	-2.3	-5.9
Real Assets*	-3.1	-4
Private Debt*	6.5	3.7

^{*}Private market asset valuations lag one quarter and are as of March 31, 2023.

While a single year's investment returns are an important marker, long-term return rates provide a more comprehensive look at efforts to secure the future needs of public sector retirees. Total fund annualized returns for the five-year period ending June 30, 2023, stood at 6.1%, the 10-year period at 7.1%, the 20-year period at 7%, and the 30-year period at 7.5%.

The preliminary net return is an early snapshot of the CalPERS portfolio. The official Total Fund performance will undergo additional review over the next few months by outside experts, as well as by CalPERS investment and finance officials.

The ending value of the Public Employees' Retirement Fund (PERF) for FY 2022-23 will be based on additional factors beyond investment returns, including employer and employee contributions, monthly payments made to retirees, and various investment fees.

The final fiscal year performance returns will be used to set contribution levels for the State of California and school districts in the 2024-25 fiscal year and for contracting counties, cities, and special districts in the 2025-26 fiscal year.



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