

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU – QUALITY IMPROVEMENT DIVISION
UNDERSERVED CULTURAL COMMUNITIES (UsCC)
LEADERSHIP, COORDINATION, AND ACCOUNTABILITY STRUCTURES**
Effective 11/1/2016

RULES AND AGREEMENTS FOR ALL UsCC SUBCOMMITTEES

The Underserved Cultural Communities (UsCC) subcommittees were established under the Mental Health Services Act (MHSA) for the purpose of increasing mental health access and reducing disparities for the UsCC communities that reside in the County of Los Angeles. The UsCC subcommittees work closely with community partners and consumers in order to increase the capacity of the public mental health system to develop culturally competent recovery oriented policies and services specific to the UsCC communities and serve as a stakeholder advisory group to the Director of Mental Health and the Department.

A set of principles and minimum expectations for voting membership is important for all UsCC subcommittees.

A. Principles:

1. Actively engage consumers and their family members;
2. Hold meetings open to the community;
3. Establish a balanced membership representing key stakeholder categories;
4. Use the unique cultural practices and organizational contexts of each UsCC community to determine membership structures, voting processes, meeting activities, and related processes that go beyond the recommendations in this document.¹

B. Voting Membership

1. Identify as being from one or more mental health stakeholder categories²
 - a. Consumer;
 - b. Family Member and/or Caregiver;
 - c. DMH Staff;
 - d. DMH Contract Agency Staff;
 - e. Community Members/Cultural Brokers;
 - f. Non Mental Health Community Based Organizations, which includes faith-based organizations.
2. Identify as representing one or more of the targeted DMH age groups
 - a. Children (Ages 0-15);

¹ For example, UsCC subcommittees may choose to use consensus methods and/or voting methods. Some may choose to involve consumers through special input sessions, rather than regular meetings.

² UsCC subcommittees need to make a final decision in the following areas: the number of participants per stakeholder category; quorum to conduct business; diversity of consumer perspective; who decides on the appointment and reinstatement of voting members; and additional stakeholder categories, if desired. Importantly, these decisions are the purview of the UsCC subcommittees.

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- b. TAY (Ages 16-25);
- c. Adult (Ages 26-59);
- d. Older Adults (Ages 60 and over);
- e. All Age Groups (Intergenerational).
- 3. Voting will take place either during scheduled UsCC subcommittee meetings or via email to obtain votes from at least 51% of the membership
- 4. Vote on pending subcommittee decisions and actions
- 5. Attend a minimum of 50% of the meetings per year
- 6. Commit one year to UsCC subcommittee membership when accepting voting privileges
- 7. Participate in decision-making processes and related efforts to accomplish subcommittee goals
- 8. At least one individual should be a Delegate/Alternate and/or a System Leadership Team member
- 9. Hold meetings on a quarterly basis, at minimum
- 10. Co-chairs and Delegates and/or Alternates serve two-year terms on the subcommittees

SUBCOMMITTEES	TERM OF OFFICE	CO-CHAIRS
ALL	Two-year term; Cannot serve more than one term in a row unless no one else is available	<ul style="list-style-type: none"> 1. One Community Member <ul style="list-style-type: none"> a. Elected by 51% members in subcommittee b. Understands mental health needs of UsCC community c. No real or perceived conflict of interest d. Can only chair one UsCC subcommittee at a time e. Prioritizes needs of UsCC community before personal/professional interests f. From UsCC community if possible 2. One DMH Staff Member <ul style="list-style-type: none"> a. Appointed by DMH b. Holds the position of a Supervisor or above, where possible c. Has some clinical background, where possible d. Commitment to specific UsCC community and the current needs and issues e. Credibility within DMH and respective UsCC community f. Understands mental health needs of the specific UsCC community g. Can only chair one UsCC subcommittee at a time h. Prioritizes needs of UsCC community before personal/professional interests

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COORDINATION AND ACCOUNTABILITY STRUCTURES

1. Meeting Frequency:
 - a. Planning meetings for the UsCC Leadership Committee—which include the UsCC subcommittee Co-Chairs and DMH Staff—shall be held bi-monthly, quarterly, or as needed;
 - b. Regular UsCC subcommittee meetings will occur on at least a quarterly basis, and more frequently if needed.
2. Accountability
 - a. UsCC Co-Chairs and DMH staff members are expected to attend all planning and subcommittee meetings
 - b. UsCC Co-Chairs and official members are expected to attend at least 50% of meetings per year to have voting rights
 - c. At least one UsCC Co-Chair should be present at each of the meetings. In the event that both co-chairs are unable to attend due to unavoidable circumstances, the co-chairs can designate a subcommittee member to co-chair the meeting on their behalf.
 - d. UsCC Co-Chairs, appointed DMH staff members and official members are expected to remain unbiased in their recommendations and decision making
 - e. Re-election for the position of an elected or voting member may be necessary in the event that the individual is: (a) not able to meet the duties of his or her post; (b) the individual would like to leave the group; and/or (c) the individual is no longer linked to his or her constituents
 - f. A re-election will require a 51% majority vote by voting members

ROLE OF UsCC Liaisons / Leads

1. Provide input to Co-Chairs in order to develop agendas.
2. Coordinate logistics for the meeting (translation, interpretation, location, meeting announcements and reminders).
3. Ensure meeting documentation for UsCC subcommittee meetings only.
4. Communicate key MHSA planning information to the group.
5. Communicate the UsCC subcommittee and UsCC Leadership Committees' goals and decisions to the Department.
6. Follow-up with issues, as needed.
7. Be knowledgeable of the needs of the UsCC communities.