



COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU - QUALITY IMPROVEMENT DIVISION CULTURAL COMPETENCY UNIT

CULTURAL COMPETENCE PLAN UPDATE - CY 2016

Criterion 4

Client/Family Member/Community Committee: Integration of the Committee within the County Mental Health System

February 2017

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The CCC serves as an advisory group for the infusion of cultural competency in all County of Los Angeles Department of Mental Health (LACDMH) operations, service planning, delivery and evaluation. Administratively, the CCC is housed within the Program Support Bureau (PSB) - Quality Improvement Division (QID) - Cultural Competency Unit (CCU). Comprised of 101 members, the CCC membership includes the cultural perspectives of consumers, family members, advocates, directly operated providers, contract providers, and community-based organizations. In addition to promoting participation of consumers, family members and community members, the CCC considers the expertise from the Service Areas' clinical programs and administrative programs, front line staff, and management to be essential for the mission of the Committee as well as the impact that it hopes to have in our current system of care.

CCC Mission Statement

"Increase cultural awareness, sensitivity, and responsiveness in the County of Los Angeles Department of Mental Health's response to the needs of diverse cultural populations to foster hope, wellness, resilience, and recovery in our communities."

Leadership

The CCC is led by two Co-Chairs elected annually by members of the Committee. The roles and responsibilities of the Co-Chairs include:

- Facilitate all meetings
- Engagement of members in Committee discussions
- Collaborate with the CCU in the development of meeting agendas
- Appoint ad-hoc subcommittees as needed
- Communicate the focus of the CCC activities and recommendations to diverse LACDMH entities
- Co-Chair is a member of LACDMH's System Leadership Team meetings and holds appointed seat for the CCC

The LACDMH Ethnic Services Manager (ESM) monitors all activities pertaining to the CCC and provides technical support. The ESM is also the supervisor for the CCU and is a member of the Departmental Countywide Quality Improvement Council (QIC). This structure facilitates communication and collaboration for attaining the goals as set forth in the Departmental QI Work Plan and the Cultural Competency Plan to reduce disparities, increase capacity, and improve the quality and availability of services. Additionally, relevant CCC decisions and activities are reported to the membership at each Departmental QIC meeting.

For Calendar Year (CY) 2016, the CCC leadership was composed of:

- CCC Co-Chairs (LACDMH rand Community representatives)
- LACDMH PSB Deputy Director
- LACDMH Ethnic Services Manager

The CCC Co-Chairs and the ESM meet on a monthly basis with the PSB Deputy Director to discuss CCC activities and projects. The CCC Co-Chairs are also members of the Underserved Ethnic Populations (UsCC) Leadership Group.

Membership

The membership of the CCC is culturally and linguistically diverse. Every year, the ESM gathers demographical information on the CCC membership. For CY 2016, the CCC membership reached 101 members, of which 35 are males and 66 are females. The CCC members described their racial/ethnic identity as follows:

- African American
- American Indian
- Armenian
- API, Chinese
- Eastern European
- German
- Korean
- White,
- Mexican American
- Chinese Latino
- Spaniard/Latino/American Indian
- American Indian/Chicano." These descriptors translate into eleven ethnic/racial/biracial/multiracial groups represented within the CCC.

Additionally, the following six languages are represented in the CCC membership:

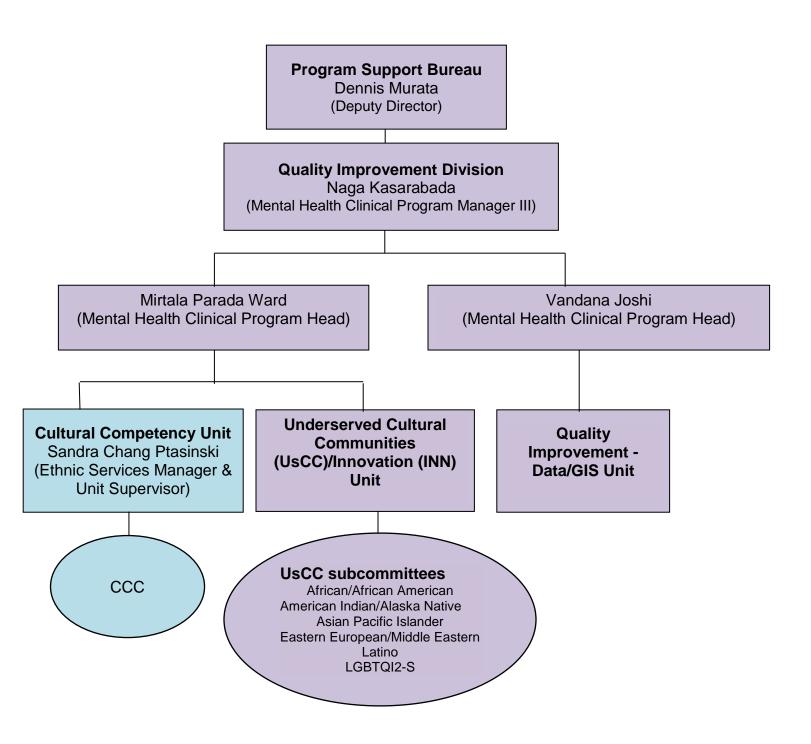
- English
- Cantonese
- German
- Korean
- Spanish
- Swahili.

Key words to guide the CCC in 2016

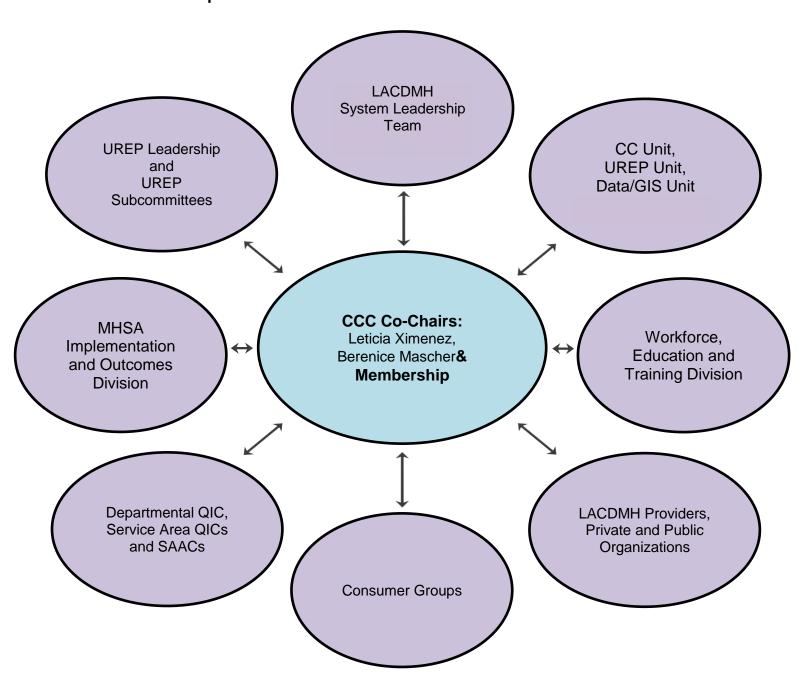
The CCC engaged in a reflective exercise on what the concept of "cultural competency" means to each member. Out of this exercise, the following four words were chosen by the CCC to frame its activities for 2016:

- Collaboration
- Community
- Equity
- Inclusion

Organizational Chart of the CCC



CCC Partnerships and Collaborations



CCC Goals and Objectives

At the end of each Calendar Year (CY), the Committee holds an annual retreat to review its goals, activities and accomplishments; vote on cultural competency objectives to be undertaken for the next year; and reinforce the collaborative team atmosphere among Committee members. Once the CCC identifies areas of organizational cultural competency to be addressed, it proceeds to operationalize its goals and objectives in the form of workgroups. Each CCC workgroup identifies two co-leads and determines their goals, projects, and meeting frequency. Throughout the CY, the co-leads from each workgroup provide updates to the Committee at large during the monthly meetings for purposes of receiving feedback.

- 1) For CY 2016, the Committee had three active workgroups. These include the following:
 - <u>Data and Forensic Diversion Workgroup</u>: The goals of this Workgroup are to advance the work products from CY 2015 by: 1) vetting a tool for LACDMH Juvenile Hall and Camp clinicians, which aims at exploring of the impact of cultural perspectives on the youth's perceptions of their mental health needs and conditions and 2) finding a general mechanism to highlight the importance of data collection and utilization at the Service Area level.
 - Outreach and Presentations Workgroup: The goal of this workgroup is to enhance the communication and collaborations among the CCC, Service Area Advisory Committees (SAAC) and the System Leadership Team via the SAAC liaison.
 - <u>The Cultural Competency Research Workgroup</u>: The goal of this workgroup is to find alternative definitions for the term "competency", and to develop a list of cultural tips that the LACDMH workforce can utilize when serving the ethnically diverse populations in the County of Los Angeles.

Annual Report of CCC

Evaluation of CCC goals and objectives

The CCC conducted an internal mid-year assessment of the 2016 Workgroups goals, objectives and activities. Each Workgroup made presentations to the Committee at large. Discussions and recommendations followed on how the CCC will implement the Workgroup products.

1) Data and Forensic Diversion Workgroup

Accomplishments include:

- Introduced the PowerPoint presentation "Using Data to Identify Community Cultural Needs" to the CCC, and collected completed pretests and posttests from the CCC membership to determine acquisition of knowledge
- Vetted the questionnaire "Cultural Formulation Index (CFI) Adaptation for Juvenile Justice Mental Health Pilot Project" with the CCC. This questionnaire

is being utilized for staff training by the Juvenile Justice Mental Health Program-Camp Assessment Unit.

Sample questionnaire items include:

- What are the most important aspects about your self-identity and cultural background?
- Is there anything about your background or self-identity that can make your situation better or worse?
- Sometimes people have various ways of coping with personal issues, situations and hardships like yours. What have you done to cope?
- Often, people look to help from many different sources, including different kinds of doctors, helpers, or healers. In the past, what kinds of support, help, advice and/or treatment have you sought to help you cope with personal issues and hardships?

2) The Outreach and Presentations Workgroup

Accomplishments include:

- Updating of packets containing basic information pertinent to cultural competency for the SAACs to incorporate the Culturally and Linguistically Appropriate Services (CLAS), 2016 SAAC Liaison roster, and LGBTQI2-S glossary
- Initiated collaborations with the SAACs to introduce the CCC PowerPoint presentation
- Development of a handout containing the CCC membership responses to the following question: What is the benefit of being part of the CCC? Sample CCC responses:
 - Have a voice, share life experience, and represent other Native Americans
 - Learning to understand the different cultures, not only people's backgrounds
 - Working on specific workgroup projects that highlight the importance of cultural competency
 - Being able to learn from the CCC and take this learning back to the community
 - The guidance that comes from the CCC presenters and the various topics that are discussed during meetings

3) <u>Cultural Competency Research Workgroup</u>

Accomplishments include:

- Selection of 200 articles and recent publications related to cultural competency
- Identification of strengths and weaknesses found in various definitions of cultural competency
- Development of a handout which organizes research findings under the following themes:
 - Cultural competency related terms and definitions

- Recent publications relevant to cultural competency
- References and tips for effective cross-cultural engagement
 This handout will be distributed at various LACDMH venues where CCC presentations are conducted.

Reviews and Recommendations to County Programs and Services

As an advisory group to the Department, the CCC provides feedback and recommendations to various Programs. The collective voice of the CCC is also represented at the SLT monthly meetings. This practice ensures that the voice and recommendations of the Committee are heard at these system wide decision-making meetings. The voice of the CCC is also strengthened by the Co-Chairs' participation in the UsCC Leadership Team. Together, the CCC and Underserved Cultural Communities (UsCC) subcommittees advocate for the needs of diverse underserved cultural groups and the elimination of mental health disparities.

The CCC also has an impact on the system of care by inviting and scheduling presentations from various LACDMH programs. These presentations take place during the monthly meetings. Feedback is either provided by the Committee at large or an adhoc workgroup, when the Committee deems that an in-depth project review is necessary. In CY 2016, the CCC was involved in reviewing and provided feedback for the following departmental, county and state level projects:

1) <u>LACDMH Parameter for Assessment and Treatment of Individuals with Co-Occurring Intellectual Disabilities (CID)</u>

In January 2016, the CCC heard a presentation on Parameter 4.18, which was created to address the challenges of providing culturally competent clinical assessment, treatment, linkage and care to individuals with CID across the lifespan. The Committee's recommendations about the Parameter include:

- Intellectual and physical disabilities and abilities are elements of culture
- Persons with CID, need to be given the opportunity to reach their physical, emotional, psychological, spiritual fullest potential
- Intellectual disabilities and capabilities vary in degree and persons with CID have the same rights as everyone else
- The lack of available services and trained staff is still a challenge
- There is much need for CID training countywide to increase sensitivity to persons with intellectual and physical disabilities
- The CCC also praised the development of parameters for the assessment and treatment of persons with intellectual disabilities

2) Countywide Community Mental Health Promoters Program

In March 2016, the CCC welcomed the SA 7 District Chief for a presentation on the Countywide Expansion of the Countywide Community Mental Health Promoters Program. This presentation informed the Committee that the expansion will target four additional UsCCs in specific languages selected by the UsCC subcommittees as follows: For American Indian/Alaska Native - English; African/African American - Somali; Asian Pacific Islanders - Tagalog; and Eastern European/Middle Easterner -

Armenian. The recommendation was made for CCC members to participate in focus groups to provide input on the training curriculum of the Countywide Community Mental Health Promoters.

3) Integrating a Cultural Competency Framework for a Screening, Brief Intervention & Referral to Treatment (SBIRT) Training

In April 2016, The SBIRT project was presented to the CCC as an evidence-based practice for the identification, prevention and reduction of substance use disorders in allied health care settings. The CCC provided the following specific feedback and recommendations:

- Incorporate spirituality and faith into the SBIRT practice.
- Develop a cultural competency framework for the SBIRT training
- Add definitions for technical terminology
- Keep in mind the beliefs and practices regarding substance use in various cultural communities

4) California Reducing Disparities Report (CRDP) Strategic Plan

In July 2016, the California Reducing Disparities Report (CRDP) Strategic Plan was released a second time by the California Department of Public Health Office of Health Equity (OHE).

- The CCC agreed to resubmit the detailed feedback and recommendations developed in response to the first release of the CRDP Strategic Plan in 2015.
- The CCC recommendations covered the following areas:
 - o CRDP Strategic Plan language revisions
 - Strategic plan rollout and distribution to the community
 - Increasing service accessibility
 - o Inclusion of traditional and nontraditional service providers
 - Inclusion of faith-based providers
 - Workforce development
 - CRDP Proposal evaluation

5) Cultural Competency in Chaplaincy Programs

In September 2016, the CCC had the opportunity to listen to a presentation from a Chaplain regarding the inclusion of cultural competency in chaplaincy services and training. The guest speaker shared with the Committee the many instances in which cultural diversity comes into play when families are experiencing serious illnesses and deaths within their family circles. The CCC received this presentation with interest and provided the following recommendations:

- For Chaplaincy Programs to recognize that mental health is deeply connected to spirituality
- The chaplaincy curriculum needs to include information on mental health conditions and the history of psychology
- For Chaplains to be mindful of the body, mind and spirit connection, and that culturally competent approaches are needed in working with hospitalized persons and their families

 For Chaplains to be mindful of terms that may be perceived as stigmatizing, such as "the dominant culture"

6) Three-Year MHSA Program and Expenditure Plan Update

In October 2016, the District Chief from the MHSA Outcomes and Implementation Division provided a presentation on the MHSA Three-Year Program and Expenditure Plan, FYs 2017-2020. The feedback from the CCC included:

- The Community Services and Supports (CSS) Work Plan Consolidation needs to specify the different types of housing covered
- Employment support services should have their own category with clear strategies, and be not be listed as a subcomponent of non-FSP services
- The CCC also requested information on the various workgroups currently working on the MHSA Three-Year Program and Expenditure Plan for further participation and feedback
- For client informing materials to be generated in order to assist consumers' understanding of the new service classifications

Goals of Cultural Competence Plans

1) Cultural Competence Plan Requirements (CCPR) Updates

The ESM provides a monthly update on various cultural competency initiatives at departmental and state levels, including the status of the CCPR release. During CY 2016, the Committee engaged in discussions regarding updates to the Criterion 4 of the CCPR, "Client/Family Member/Community Committee: Integration of the Committee within the County Mental Health System".

In particular, Criterion 4 of the CC Plan will include information on the group affiliations of the CCC membership. A template table was circulated for members to report group affiliations in which they act as cultural competency representatives.

2) The National Standards for Culturally and Linguistically Appropriate Services (CLAS) In August 2016, the ESM reviewed the 15 CLAS Standards with the CCC and provided several examples on how LACDMH has already implemented the CLAS, such as: Having a culturally and linguistically diverse stakeholder process, Service Area-based Outreach and Engagement Teams, the ACCESS Center, offering and extensive list of trainings related to cultural competency. The CCC membership was encouraged to assess and evaluate how their programs and agencies are implementing the CLAS Standards.

3) External Quality Review Organization (EQRO) Review

Cultural competence is one of the core areas of content for the annual EQRO Review. The CCC and CCU continue to play an active role by participating in sessions pertinent to the Cultural Competence Plan and mental health disparities. A detailed presentation regarding the CCU's projects and activities was delivered by the ESM during the 2016 EQRO Review. The CCC and UsCC subcommittee Co-

Chairs attended the EQRO session on disparities and answered follow-up questions from the reviewers.

Additionally, in July 2016, the ESM informed the CCC about the EQRO Review results specifying areas of strengths and areas for improvement related to cultural competency. The CCC expressed satisfaction in hearing that among the areas of strength noted by the reviewers figured: The inclusion of spirituality in mental health services and trainings, TAY supported employment and support services, expansion of Mobile Outreach Teams for homeless persons, service expansion for veterans and older adults, and the UsCC capacity-building projects.

4) Medi-Cal Systems Review Protocol Training

The QID managers attended a training regarding the 2016 Annual Review Protocol for "Consolidated Specialty Mental Health Services and Other Funded Services." The ESM brought information back to the CCC regarding protocol items pertinent to the Cultural Competence Plan and the Committee's goals and activities.

5) Cultural Competence (CC) Organizational Assessment

The ESM informed the CCC that a revision to the Organizational Assessment Statement of Work (SOW) had been made in order to include the feedback from various stakeholder and focus groups. The CCC will be contacted to provide the recommendations for the content of the CC Organizational Assessment once the consultant for this project is hired.

Human Resources Report

In February 2016, the ESM provided an update on the Human Resources Bureau report on the LACDMH bilingual certified employees by threshold language. This information is valuable to the CCC and CCU as inquiries are often received from Programs seeking assistance with language translation and interpretation services. The CCC was impressed to hear that LACDMH's workforce has 562 bilingual certified employees with capability for 22 different languages. The languages most represented in the workforce include: Spanish, Russian, Tagalog, Korean, Farsi and Mandarin.

Additionally, in October 2016, a representative from the Human Resources Bureau made a presentation to the CCC regarding bilingual compensation and current workforce linguistic capacity. The CCC was pleased to hear that in addition to covering the 13 threshold languages of the County of Los Angeles, 24 additional non-threshold languages are represented in the LACDMH workforce, inclusive of: Bulgarian, Catalan, Flemish, French, German, Greek, Hakka, Hebrew, Hindi, Italian, Japanese, Korean, Laotian, Nahuatl, Pangasinan, Portuguese, Samoan, Swedish, Taiwanese, Toi Shan, Turkish, Urdu, Visuyan and Yiddish. Feedback from the Committee:

• Presentation to include the percentages of LACDMH staff who speak the various languages listed in the PowerPoint

- For LACDMH to consider bilingual bonus differentials for bilingual employees who meet the certification standards all three aspects of the examination, namely speaking, reading and writing
- Language representation needs to be expanded to reflect the communities served by LACDMH
- The list of LACDMH workforce languages lacks representation of prominent communities in the County of Los Angeles, such as Eastern Africans
- Invest in the bilingual certification of employees who are proficient in the languages associated with the UsCC subcommittees

LACDMH Organizational Assessment

The CCC utilizes the strategic areas identified in the LACDMH Cultural Competence Organizational Assessment in planning its activities. The strategic areas include:

- Cultural Competent System of Care
- Funding
- Human Resources
- Policy
- Structure
- Training
- Treatment Outcome Measurement
- MHSA

Different presentations are scheduled throughout each CY to provide information and updates on various initiatives that fall under the cultural competence organizational assessment strategic areas.

- 1) To address the strategic areas of Culturally Competent System of Care, MHSA and Funding, the CCC has delegate representation at the LACDMH System Leadership Team (SLT) meetings. This allows the CCC to actually vote on departmental initiatives that are related to the cultural competency. Some examples include: Expansion in services for the homeless and wellness centers, MHSA 3- Year Program and Expenditure Plan, MHSA CSS Plan consolidation, housing support services and jail diversion services.
- 2) To address the strategic areas of *Human Resources and Training*, the ESM briefed the CCC on the number and languages of bilingual certified staff as well as the LACDMH Cultural Competence Training Plan, which was disseminated to all the SA QIC's.
- 3) To address the strategic area of *Structure*, cultural competency updates continue to be provided in all the monthly Service Area QIC meetings. Examples of updates done by ESM and CCC Co-Chairs include 2016 CCC workgroup activities, CCU projects, and statewide initiatives regarding cultural competence.

Training Plans

1) Mental Health and Spirituality Conference

During April and May 2016, the CCC developed a workshop for the Mental Health and Spirituality Conference via an ad-hoc workgroup. The workshop curriculum, presentation materials, and the role of the panel presenters were vetted by the Committee at large. The workshop was titled: "Beyond the Horizon: Shifting Cultural Perspectives" and it covered the following topics:

- Definitions of culture, cultural competency, and shifting cultural perspective
- The Cultural Competency Committee
- Research findings on the inclusion of spirituality in healthcare
- Panel presentation based on the following four questions:
 - o What does spirituality mean to you and to your culture?
 - o In your culture, how is mental health perceived and addressed?
 - How does your spirituality help you cope with the traumatic experiences in your life and support your recovery/healing?
 - How can mental health professionals and clergy be culturally sensitive and support your spirituality in providing services?

Overall, the CCC workshop was very well received. It was attended by consumers, family members, LACDMH staff, and faith-based leaders. The evaluations were positive and supportive of future conference presentations.

2) CCC presentation at the Mental Health Commission and SAAC Committee

In March 2016, the CCC was invited to present before the Mental Health Commission and the SAAC Committee. The presentation was delivered by the CCC Co-Chairs and ESM. The presentation included the CLAS definition of culture, definition of cultural competency, historical background on the CCC, demographical information, 2016 workgroups, and current activities. The presentation was well-received. Among the questions that rose was: "How is the work of the CCC reaching consumers?" The ESM made the recommendation that the Workgroups keep this question in mind when setting and documenting their goals, objectives and activities.

3) <u>Cultural Competence Trainings</u>

The CCC continues to regularly provide information on LACDMH trainings and conferences related to cultural competency that are available to service providers and community members. This information is documented in the CCC minutes, which in turn are distributed to all the SA QICs.

4) Cultural Competence 101 training

The CCC was informed about the Cultural Competency 101 training purpose, content, number of LACDMH staff trained, and recommendations on how to enhance the cultural competency of existing Programs to improve the quality of services, and video links as follows:

 Part 1: Basic definitions, regulations related to cultural competency, LACDMH strategies to reduce mental health disparities, and LACDMH demographical and client utilization data [Duration: 37 minutes] http://file.lacounty.gov/SDSInter/dmh/1010011_CulturalCompetenceVideov4p art1.wmv.wmv

Part 2: Cultural humility, client culture, stigma, elements of cultural competency in service delivery, and resources
[Duration: 31 minutes]
 http://file.lacounty.gov/SDSInter/dmh/1009914_CulturalCompetenceVideov3p
 art2.wmv

Part 3: Cultural competency scenarios and group discussion
 [Duration: 18.5 minutes]
 http://file.lacounty.gov/SDSInter/dmh/1009805_CulturalCompetenceVideov3p
 art3.wmv