

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU – QUALITY IMPROVEMENT DIVISION**

**LGBTQI2-S UsCC SUBCOMMITTEE
MINUTES**

1:00 p.m. – 3:00 p.m.
550 S. Vermont Ave. 9th Floor Conference Room
Los Angeles, CA 90005

Date: July 7, 2016

Present: Kelly Wilkerson, Bryan Mershon, Andres Magana, Sermed Alkass, Jamie Julian, Julian Hernandez, Lia Evans, William Tanner, Riku Matsuda, Persephone Gonzalez, Marissa Lee, Nick Ryan, Kim Wedner, Natalia Garcia

Co-chairs: Kim Peterson, M.A. and Marta Alquijay, Ph.D. (not in attendance)

Agenda Items	Comments/Discussion/Recommendations/ Conclusions	Action Item	Person(s) Responsible
Welcome & Introductions	Attendee introductions		
Review of minutes	March minutes reviewed and approved with no changes		
UsCC Graduate Recruitment Program Presentation	<ul style="list-style-type: none"> • Presentation of UsCC Graduate Recruitment Program by Mira Kim and Juan Mata <p><u>Questions</u></p> <ul style="list-style-type: none"> • Can it be any County? Only LA County. • Do they have to be a participant on one of the subcommittees or just someone who identifies with the specific ethnic population? They do not have to be a member of any subcommittee. • How many slots? 14 in total, 2 for each of the UsCC groups, as well as 2 for the deaf/hard of hearing community. • What if an applicant identifies as multiple things (i.e. gay, deaf, and Latino)? That person could apply for more than one of the slots; it would be targeted to the population that they want to serve. • Can current DMH employees apply? No because you have to go to graduate school full time and a lot of the clinics cannot accommodate that schedule for their employees. There are other financial incentive programs for current employees, such as tuition reimbursement. This program is intended for people not currently working in the public mental health system. • If someone wanted to pursue a Master’s Degree in occupational therapy, would that count? No, it is only for those interested in pursuing their MSW, MFT, or LPCC. • Will the award amount be based on the cost of tuition? No, it is a set amount of \$18,500 per year. • Would the 14 participants be involved in a cohort where they could be a support for one another? We plan to do an orientation for the group and then from there we would be open to 		

	<p>continuing ongoing support.</p> <ul style="list-style-type: none"> • Where will the internships be held? Any of the contracted clinics. We are currently looking for agencies that are able to provide internships. We are hoping the internships will start this winter. • What is the deadline to apply for this program? We are working on the website where people can apply. We will also have flyers soon. • Kelly to send flyer to subcommittee once received from WET. 		
<p>LGBTQI2-S Mental Health Conference-Group Discussion</p>	<p><u>Discussion of topics</u></p> <p>Topics:</p> <ul style="list-style-type: none"> ○ Housing-obstacles and issues related to housing ○ Barriers to resources based on consumer's identity ○ Educating people about the population ○ If I was an LGBTQ client, and I knew that my social worker was going to a conference, what would I want the conference to talk about ○ What would the client need so the treatment is more effective for that particular person ○ Are our clinics a safe place for people to come to ○ Impact of oppression on mental health ○ Orlando ○ Trauma-informed treatment ○ Micro aggressions and trauma the LGBTQI2-S community experiences ○ Intersectionality piece between ethnicity and religion and gender and sexual orientation ○ Best practices/models ○ Customer service training for front office staff and security guards ○ What can people walk away with ○ Reserve seats for staff members from all clinics (i.e. one psychiatrist , therapist, front office staff, and security guard from each clinic) ○ Foster and probation TAY ○ Transgender issues and needs ○ Sermed Alkass-TAY Systems of Care is working on an RFS for LGBTQI2-S training for non-clinical front office staff and clinical staff with regards to standards of care. One element of this will be developing toolkits to define standards of care for the LGBTQI2-S community. This is a DMH priority. <p>Recommendations from subcommittee:</p> <ul style="list-style-type: none"> ○ Conduct focus groups made up of consumers to ask what their issues and concerns would be, and what they want clinicians to learn about ○ Edgy Conference (Penny Lane)-how will this conference differ from that one-Julian Hernandez to reach out to Penny Lane to gather more information regarding the Edgy Conference 		

	<ul style="list-style-type: none"> ○ Revisit responses from survey to see where the greatest needs are-QID to follow up on survey report to share with subcommittee at next meeting <p><u>Discussion of dates/location:</u></p> <ul style="list-style-type: none"> ● Tentatively planned for May or June of 2018 (June is National Pride month) ● Possible location would be the California Endowment (capacity 300) ● Recommendation from subcommittee to not have it in June since there will be lots of events going on <p><u>Questions</u></p> <ul style="list-style-type: none"> ● Who is the target audience for the conference? Everyone: service providers (clinicians, case managers, community workers), consumers, community members. There will be CEUs offered as well. California Endowment can hold up to 300 people. ● Would it be styled like some of the Hope and Recovery conferences? Yes, there would be breakout workshops similar to other conferences. Would it be called Hope and Recovery? No, we will be discussing themes today to come up with a name for the conference. ● Is part of the idea to find out from the community what the need is? Yes, and that will be something we discuss more once we start the conference planning, such as having presentations that are specific to the needs of the community. ● For IBHIS, is gender identity going to be addressed, such as assigned sex at birth and current gender identity? Recommendation from subcommittee that Paul Arns and Jennifer Hallman come and talk to subcommittee regarding this and also that DMH look at policies related to gender identity, in particular with regards to billing. ● Recommendation for an advocacy point or a direction of advocacy for the subcommittee-concerns related to DMH having an EHRS that was not designed with the LGBTQI2-S community in mind (i.e. clinicians cannot refer to a client as “he” in progress notes if the biological sex is defined as “female” in IBHIS). Move towards best practices. ● Recommendation that decision makers from DMH attend the conference to highlight the importance of these issues. ● Recommendation to ask Unions to participate in the conference. ● Kelly to email LGBTQI2-S glossary to subcommittee and final summary from RISE project. ● Kelly and Mirtala to share survey report with subcommittee at next meeting in order to identify training needs identified in the survey, as well as gaps in training based on TAY training and RISE training. 		
<p>UsCC Rules and Agreements-Group Discussion</p>	<p><u>Group discussion/Questions</u></p> <ul style="list-style-type: none"> ● How is “credibility within DMH” defined? The person has to be in good standing with DMH. ● What is meant by “understands the mental health needs of the community”? This can be defined by experience, or the person has provided services to that population. ● Is it possible to require the co-chair to have had clinical experience? We can list that as a 		

	<p>preference.</p> <ul style="list-style-type: none"> • What is meant by “no real or perceived conflict of interest”? How is that determined? This is regarding the financial element of the capacity building projects and the voting for projects. If the co-chair, or any member of the subcommittee, is proposing a specific project, then they would recuse themselves from the voting. • How is community member defined? As a non-DMH employee. • Do you have to be a member of the particular UsCC community to be a member or a co-chair? To join the subcommittee you just have to have an interest in that community. To be a co-chair, you would need to have experience working with that community. • As a subcommittee, would you prefer that there are specific rules and agreements related to co-chairs for this subcommittee, or more general guidelines for all the groups? General is fine. • Can you be a DMH employee and chair more than one subcommittee? Only one at a time. Recommendation from subcommittee to add that as a specific guideline. • Recommendation to add “from our community preferred” into the standard guidelines for all groups. • Recommendation to add guideline that at least one co-chair should be present at subcommittee meetings at least 75% of the time. • Recommendation to change the guideline for DMH co-chair from Program Head to Program Manager. 		
<p>Announcements</p>	<ul style="list-style-type: none"> • Co-chairs are up for reelection in July. If anyone wants to nominate themselves or someone else, we can discuss at the next meeting. • Question regarding term limits. Recommendation from subcommittee to have term limits (i.e. serve a term, take off a term). Will discuss more at next meeting. • Update on Speak Your Mind Academy-Project awarded by ISD to Star View. • Suggestion that someone from UsCC unit come to Transgender Service Provider Network meeting to talk about the UsCC subcommittee. • Individuals have to show ID downstairs to come up and that can be challenging when your ID does not match your identify. Recommendation that someone from subcommittee meet individuals downstairs. 		
<p>Next meetings</p>	<p>August 4th, September 6th</p>		

Respectfully Submitted