

Under-Represented Ethnic Populations (UREP)

LGBTQ Sub-Committee

Date: 8/5/2015 Time: 12:30PM - 2PM

Present: Mirtala Parada Ward, Debbie Innes-Gomberg, Anna Yaralyan, Marta A. Alquijay, Kathy Chantraphavej, Carl Highshaw, Eugenia Rodriguez, Phyllis Griddine, Lisa Gallegos, Darwin Rodriguez, Alkass Sermed, LaTina Jockson.

Agenda Items	Comments/Discussion/Recommendations/Conclusions
<p>Meeting Convened Review of Minutes</p> <p>I. Introductions:</p> <p>II. DMH Updates:</p>	<ul style="list-style-type: none"> - Introduction of Member • DMH EE/ME liaison Anna Yaralyan introduced DMH District Chief, Debbie Innes-Gomberg and informed the group that she will present on Innovations #2, Health Neighborhoods during today's UREP meeting. • Debbie Innes-Gomberg talked about the implementation of the Mental Health Service Act (MHSA) Innovation 2 (INN) Project and discussed the process of how agencies can apply for this solicitation. <ul style="list-style-type: none"> - Specifically she reported the following: <ul style="list-style-type: none"> o Department's mission, which is to strengthen the community's capacity for recovery and resilience and reduce trauma within these communities. o Department's vision, which is to improve the social and emotional wellbeing of the clients, families and entire communities and create

hope and wellness.

- A brief overview of the MHSA and its funding structure was provided. The MHSA was created for the purpose of the expansion of mental health services and programs within different underserved ethnic communities. Its programs serve different age groups, including children (0-15), transitional age youths (16-25), adults (26-59), and older adults (60 and older).
- Innovations 1 & 2 (INN) are one of the components of the MHSA plan.
- Debbie provided three different purposes of the INN 2:
 - Increase access to underserved groups,
 - Increase access to mental health services for the underserved groups,
 - Promote interagency or community collaboration related to mental health services.
- Building upon the learning of INN 1, DMH and its stakeholders approved a plan for INN 2, which is the creation and implementation of distinct Health Neighborhoods as a way to support people of different ages to create a collective will and help reduce the risk of trauma.
- INN 2 includes the development of Health Neighborhoods focused on building communities by identifying individuals at risk of experiencing trauma and addressing it by utilizing the assets and strengths of the community. It also will allow local communities to work together in ways that will ultimately lead to better mental health and reduction of trauma.
- Debbie reported that various types of community agencies which include Mental Health and Non-Mental Health providers' maybe funded for INN 2, Health Neighborhoods.

	<ul style="list-style-type: none"> - Debbie also reported that the Health Neighborhoods strategies include community based approaches for all different ages and will be provided to individuals residing in low-income neighborhoods. - Debbie added that the Health Neighborhoods Strategies also include community integration for individuals with a Mental Illness with recent incarcerations, veterans, the homeless population, and individuals diverted from the Criminal Justice System. For the older adult population, Health Neighborhoods Strategies include social centers to increase networking and socialization among this population. - Debbie discussed the social determinants of health and how that impacts impoverished communities in LA County. - DMH UREP Program Head Mirtala Parada Ward added that Health Neighborhood Strategies will also include the culturally competent Non-Traditional Self-Help Activities for families who experience intergenerational trauma. Non-Traditional services are important as they are responsive to clients cultural and linguistic needs based on their cultural identity. - Carl Highshaw inquired about the geographical areas where Health Neighborhoods strategies will be implemented, and how the community can access these services. - Debbie responded that Health Neighborhoods Strategies will be applied in specific defined health neighborhoods where different minority groups reside, including the LGBTQ population. Similar services and resources will be available to the LGBTQ group as in any other UREP group. - Debbie continued the INN 2 presentation by noting the following: - <u>The Department of Mental Health is seeking different agencies that have</u>
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already been conducting community work to serve as the lead agency. The Lead Agency will get on the master agreement list.

- The Lead Agency will identify the Health Neighborhoods that they want to work on. The Lead Agency will develop partnerships with different Community Based Organizations. The Lead Agency must have experience and achieve a level of social capital in a particular community and must be able to leverage resources.
- The overall purpose is to promote community inclusion, respect and empowerment and leadership within a Health Neighborhood.
- Debbie concluded that the contracts for the INN 2, Health Neighborhoods will be available by May – July 2016, and the services may begin after.
- LGBTQ group members thanked Debbie for the informative presentation and expressed that INN 2; Health Neighborhood Strategies will be effective in reducing trauma and overall unifying and empowering our communities.

- Marta Alguijay provided two possible name selections for the LGBTQ UREP subcommittee to choose from. First option was LGBTQ and the second was LGBTQ12S. Members decided to cast their vote via email to select one of these two options as a committee name.

- Mirtala provided a brief history of the survey:

- Mirtala reported that the LGBTQ Sub-group began from the Cultural Competency Committee (CCC). Group of individuals from CCC created a workgroup to understand the needs of the LGBTQ community. They decided to conduct a survey. A selected workforce will be given the survey to find out how

III. Committee Name Selection

IV. Survey

<p>V. Capacity Building Projects FY 2014-2015.</p>	<ul style="list-style-type: none"> - equipped they are to serve the LGBTQ community and their needs. - This project was the first project for the LGBTQ group and did not have any funding. The survey was going to be conducted via "Survey Monkey." The purpose was to survey the workforce and inform DMH of the outcome. For example, informing the department that many clinicians do not understand the needs of the LGBTQ group. - Mirtala reported that the LGBTQ group has worked hard on creating the survey. The survey has been completed. The next step is for the LACDMH Quality Improvement Division to collect the data and report the findings. - Mirtala provided a timeline for the survey. Originally the survey was going to be given to the contract providers and the DMH workforce in the month of May. However, given that May is near the end of a Fiscal Year and a busy time for providers, its distribution was extended to the month of July. - Vandana Joshi from the Quality Improvement Division will put the survey together. A glossary will be attached to the survey to provide definitions and explanations on terminology about the LGBTQ community which certain individuals might be unaware of. - Mirtala expressed hope that the survey will be launched within the coming two weeks. As soon as the survey is launched, LGBTQ members will be informed of its distribution via email. • Mirtala Parada Ward provided updates on the capacity building projects for the LGBTQ subcommittee for the FY 2014-2015. LGBTQ subgroup came up with two projects which went out for solicitation: <ul style="list-style-type: none"> - First project includes Clinical Mental Health Training for LGBTQ Youth. This
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project has been approved and Star View Behavioral Health Group in partnership with the Los Angeles LGBT Center received the bid. These two agencies will prepare the curriculum of the project. DMH staff will meet with the Vendor of the project to review deliverables of the project, come up with a timeline, and discuss the initial steps of the project.

- Specifically Mirtala reported the following information in regards to this project:

- o The project includes 2-Day Trainings for clinicians in Service Areas 2, 4, 6, 8.
- o This project will include CEU's.
- o Total timeline of the project is around 6 months.
- o The first month will be the development of the curriculum. The curriculum will be provided to DMH and DMH staff will work closely with the co-chairs to ensure that all the deliverables are there.
- o The second month will include the process of securing the training facilities. This will be 2-Day Trainings, for 6 hours each day, at Service Area 4, with the maximum attendance of 40 employees, they have to be clinicians and have CEU's.
- o The actual training will take place during the months of 3, 4, and 5.
- o The project summary will be due on the sixth month and will have the outcomes and the pre and post questionnaire attached to it

	<ul style="list-style-type: none"> ○ Project Consultant was given 5 basic deliverables to focus on and decided to focus on the Sexual Orientation, Gender Identity, and Gender Expression. ○ There are 14 sections that may fit into 6 units in a 2-Day Training which will be approximately from 9am to 5pm. The training will include breaks. ○ Other key aspects the training will focus on will be minority stress, intersection of identity, and other identification in regards to LGBTQ, and racial and ethnic minorities, and how all these aspects intersect within the Mental Health field. The trainings will include short term interventions. ○ Other aspects which the project may focus on maybe self-harm and suicidal ideation for LGBTQ youth. Also, LGBT affirmative treatment and factors that might effect LGBT client perception of the outcomes. Project Consult is looking into ways of fitting these additional factors into the deliverables of the trainings. <ul style="list-style-type: none"> - Mirtala reported that in general once a project gets awarded, DMH works aggressively with the consultant of the project to align DMH's vision, although DMH is open for feedback and recommendations from the project consultants. - Mirtala reported that this project will start October 1st, 2015, and is scheduled to end March 30th 2016. Originally the project was going to be completed in 4 months. However, taken in consideration the winter holidays, an addendum was created to add 2 more months on the project, making the overall timeline for completion total of 6 months. - Mirtala also talked about the second project titled, "Peer to Peer, Family to
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Family Support Groups." This project was not approved. It originally had two bidders and one of them dropped out.

- Lisa Gallegos provided an explanation for dropping out. She stated that the original bid was for \$50,000 which later was split between two projects, limiting the funds for the project. As a result, she felt that there were not enough funds to complete the project. Lisa expressed hopes that there will be future opportunities for the project to be funded, as she really believed in it.
- Mirtala provided information on how the UREP funds are utilized and the solicitation process:
 - o DMH Program Support Bureau Unit, UREP has no control on the way each sub-committee decides to spend the funds granted to them and the solicitation process. Each UREP comes up with a proposal of the project. It is up to each UREP group to decide how they want to utilize their funds. Some UREP committees may divide the funds and have three or four different projects and others may decide on a one large project. Bidders have the option of resubmitting their proposals if they do not get the bid the first time around.
 - o For the FY 2014-2015 LGBTQ UREP was funded \$50,000 as it was the most recent UREP group to be formed. This subgroup provided proposals for two projects. The solicitations for the projects are time sensitive, and have rigid deadlines.
 - o For the FY of 2015-2016 LGBTQ UREP is funded \$100,000. The subcommittee has a chance to provide new proposals for the Capacity Building Projects and it is up to the committee to decide how many proposals they want to sponsor.
 - o A meeting will be scheduled within the next three weeks to begin

brainstorming process for the Capacity Building Projects FY 2015-2016.

- Mirtala discussed the guidelines for the new Capacity Building Projects:
 - o Projects will not be repeated, but may be extended with different objective.
 - o After the projects are approved, DMH Program Support Bureau Unit, UREP is responsible for monitoring the project to ensure its proper implementation and completion.
- Mirtala and Anna thanked LGBTQ subcommittee members for participating in the meeting.
- Next LGBTQ subcommittee quarterly meeting might take place within the next 3 or 4 weeks...

Next Meeting

