



Placer County
Systems of Care Quality Improvement Committee

**Cultural and Linguistic Competence Committee Annual Update and
Report**

Fiscal Year 2018-2019

Committee Purpose

The purpose of the Cultural and Linguistic Competence Committee (CLCC) is to ensure the development of the necessary skills, knowledge, attitudes, behaviors and policies within Placer County's Systems of Care (SOC), in order to provide culturally responsive and effective care to members of diverse cultural groups.

Towards this goal, Placer County Systems of Care will engage representatives of diverse communities and consumer groups in a collaborative planning process that is informed by the diverse interests, expertise and needs of these groups.

Committee Function

In accordance with the California Department of Health Care Services (DHCS) Cultural Competence Plan requirements, the function of the CLCC shall be to:

- Identify unmet needs and mental health disparities in Placer County;
- Review all Systems of Care programs, services, and plans and respond and/or make recommendations with respect to cultural and linguistic competence needs and issues;
- Provide a bridge for communication and accountability between the county and diverse cultural groups and community partners;
- Participate in the development of and monitor the effectiveness an integrated CLC training plan for county staff and contractors;
- Participate in the overall planning and implementation of services, including review of MHSa plans and client developed programs;
- Provide reports to Quality Assurance/Quality Improvement programs;
- Provide recommendations directly to the executive level; and
- Prepare an annual report of committee activities

Composition and Structure

The membership of CLCC shall reflect the communities served by Placer County System of Care; including county management level and line staff, clients and family members from diverse cultural groups, providers, and community partners.

The CLCC will be co-chaired by a Systems of Care staff person and a community representative, with agenda preparation and meeting facilitation responsibilities being shared between county staff and community representatives. The SOC Co-Chair will be appointed by SOC Leadership, while the Community Co-Chair will be elected by the community representatives of the CLCC on an annual basis.

In order to facilitate an integrated role of the CLCC into Systems of Care planning, leadership and quality assurance processes:

- The CLCC shall designate a member to represent this committee on SOC planning, leadership and quality assurance committees (including but not limited to the SOC Leadership Committees, Quality Improvement Committee, SOC Staff Development, Workforce Education and Training (WET), and the Mental Health, Alcohol and Drug Board);
- Representatives will provide reports of relevant SOC committee activities on a monthly basis through a standing CLCC agenda item;
- Items needing CLCC attention and review will be brought to the general meeting and sub-committees as needed to prepare recommendations;
- The CLCC shall also provide reports to the Campaign for Community Wellness, SMART Policy Board, Mental Health Director, the Board of Supervisors, and other decision-making groups within the Systems of Care as deemed appropriate.

Current/Active CLC Members (unless noted):

Twylla Abrahamson	CSOC Director, Co-Chair
Marie Osborne	ASOC Assistant Director, Co-Chair
Chris Pawlak	SOC QI Manager, Co-Chair
Katherine Ferry	Consumer Advocate, MHA Consumer Affairs Supervisor, Co-Chair - discontinued
Connie Falconer	ASOC Admin. Clerk, CLCC Support
Jennifer Cook	SOC Training Coordinator, CSOC MHSA Manager
Leslie Medina	CSOC Mental Health Manager
Jainell Gaitan	ASOC Supervisor, and ASOC Cultural Competence Lead
Andrea Salazar	Youth Empowerment Support, Youth Representative
Patricia Garcia	Youth Empowerment Support Supervisor, Youth and Latina Representative
Jessica Luna-Miranda	Whole Person Learning
Michele Irwin	Placer Independent Resource Services, Community Representative
Beth Goncalves	Turning Point, Community Representative
Elisa Herrera	Latino Leadership Council, Program Development - Latino Representative
Natalie Sherrell	Sierra College TAY Representative
Letty Woodworth	Advocates for Mentally Ill Housing, Community Representative

Jennifer Hagar	Advocates for Mentally Ill Housing, Community Representative - discontinued
Debbie Bowen-Billings	CSOC Analyst, CLCC Support - discontinued
Lisa Boch	Placer Faith Communities, Community Representative – discontinued
Anno Nakai	Sierra Native Alliance Executive Director - Native Representative – discontinued
Loren Nakai	Sierra Native Alliance, Program Manager - Native Representative – discontinued
Kory Annonio	Health Educator, Coalition for Placer Youth, TAY Representative – discontinued
Kyrie Harlow	Youth Empowerment Support Coordinator, Youth Representative - discontinued
Paul Cecchetti	Uplift Family Services, Community Representative - discontinued
Ariel Lovett	Community Recovery Resources, Community Representative – discontinued

CLC Committee Goals and Accomplishments

Goal:

Ensure Access to Services telephone lines are providing linguistically appropriate services to callers.

Action Items/Steps:

Maintain a minimum of 36 combined test calls are made to the Adult Intake Services and Family and Children's Services (Access to Services) telephone lines annually to ensure that staff provides linguistically appropriate services to callers, and are utilizing the Telelanguage Translation Line Service, other provider, and/or TTY.

Goal met and continuing. The QM team with assistance from the MHADB members, MHA, and other volunteers completes calls each month and reported to DHCS quarterly. 41 test calls were made during the fiscal year.

Maintain a minimum of 8 non-English test calls on an annual basis.

Goal partially met and continuing. There was a total of 4 test calls made in languages other than English (French, Hmong, and Spanish). Additionally, 2 were completed using a TTY machine.

Improve documentation of test calls being logged and including all elements from 38% to a minimum of 60% through annual training for 24/7 access lines that focus on gathering, offering and recording all pertinent information.

Goal met. Improved to a combined 70% for the elements. Training occurred twice for AIS and once for FACS.

Goal:

Monitor the three-year training plan as part of the CLC Plan requirements, taking into account fiscal challenges, to continue to improve cultural competence and experiences of SOC staff through trainings.

Action Items/Steps:

Facilitate a minimum of two trainings targeted to increase understanding and responsiveness to diverse cultures as identified by the SOC staff development committee.

Goal met and continuing. Trainings held were eight Cultural Competency Webinars (February, March, and April 2019), LGBTQ – Awareness, Sensitivity, and Competency

(August 2018), Peer Workforce Summit (January 2019), Poverty Simulation (March and June 2019), and Indigenous Psychology (May 2019).

Continue tracking each staff's training attendance to ensure that each staff member (all levels) participates in a minimum of training that includes CLC components within the year at a 90% target.

Goal in progress and continuing with the implementation of the new Placer Learns electronic training portal to consolidate and report out this metric.

Conduct a minimum of six Wellness Recovery Action Plan (WRAP) workshops open to active SOC clients and the community.

Goal partially met. Six classes WRAP classes were planned, but only five were completed due to lack of attendee interest.

Goal:

Assess bilingual staff and interpreter skills and provide training.

Action Items/Steps:

Provide annual training for staff regarding use of interpreters, including use of Language line, accessing TTY for hard of hearing/deaf individuals through e-Learning trainings of Beneficiary Rights and Documentation and Billings. Maintain a minimum of 95% attendance.

Goal not met. Interpreter and Translation Training completion was 86%. Placer County transitioned to a new electronic training portal, as well as a new financial system (WorkDay) that will change how users will access its translation and interpreter vendor. An updated training will be released in FY19/20 through the new Placer Learns system. The Beneficiary Rights training was administered timely.

Goal:

Continue to create opportunities for consumer advocates, family advocates, Consumer Navigators and Peer Advocates to attend and feel welcomed at SOC meetings, including QIC, CCW, CLC, leadership meetings, etc.

Action Items/Steps:

Continue to ensure participation of consumers in performance improvement projects such as the System Improvement Project (SIP) for CWS, and Performance Improvement Project (PIP) for Mental Health.

Goal Met. Consumer participation was recorded for the Collaborative Documentation PIP (ended December 2019). One consumer participated through the entire 2-year period. The teams continue to offer opportunities for consumer participation.

Continue to include Consumer/Family member participation (whenever possible) on employee hiring interview panels. FY16/17 baseline was 3x. FY17/18 was 11x. Goal for FY18/19 will be a minimum of 10 x or 40% of interview panels.

Goal Met. There were 32 eligible interviews and a consumer participated in the interview panel 22 of the 32 interviews (69%) for ASOC. There were 8 interview panels for CSOC with 100% consumer/family member participation.

Continue to provide opportunity for the Consumer Liaison and/or the Consumer Council to review and provide feedback on letter templates, brochures and any other document that may be used to distribute information to consumers.

Goal met and continuing. Placer County continues to submit informing materials to the Consumer Council for review. Documents include letter templates, ROIs, handbooks, and pamphlets.

Goal: Track staff participation in trainings and presentations.

Action Items/Steps:

Continue to monitor required internal trainings in E-learning to ensure 90% SOC compliance depending on target audience for the following: Compliance Training (all staff-FY17/18 was at 92%), Beneficiary Protection Training (clinical and admin support staff-FY17/18 was at 96%), and MH Documentation and Billing Training (MH staff only-FY17/18 was at 91%) .

Goal partially met. Compliance participation was 95%, Beneficiary Protection was 96% and Mental Health Documentation and Billing was modified and revamped to focus on service codes. Though the Service Code training exceeded 90%, they began in July of 19/20.

Goal:

SOC Managers and Supervisors will create tools and guidelines for successfully integrating cultural curiosity and awareness as a system-wide practice.

Action Items/Steps:

Continue to sustain a training team to assist staff with integrating values and behaviors.

Goal met. The SOC Staff Development committee is represented by the Workforce Education and Training Coordinator, MHSA Coordinator, Quality Management, Ethnic Services Manager, Consumer Liaison Supervisor, and SOC Leadership.

Ongoing Monitoring of adherence to the CLAS Standards across for all Mental Health Organizational Providers.

Goal met. The Placer County QM team monitors and reports out quarterly during the Quarterly Quality Improvement Committee each organizational provider's report that includes adherence to CLAS standards.

Finalization of MH Documentation Manual that include Cultural Concepts of Distress. Make MH Documentation Available to all staff and contracted Provider by posting on Website.

Goal not met. The mental health documentation manual continues to be developed and is pending stakeholder feedback.

Goal:

SOC leadership will increase cultural diversity in policy making and governance processes through ongoing monitoring.

Action Items/Steps:

Quarterly meetings of the ASOC Consumer Council and monthly CSOC Community Leadership Meetings to create opportunities for consumers to give direct feedback to SOC leadership teams on areas of system operation and improvements. Consumer Council meetings to occur 3-4 times per year.

Goal Partially Met. CSOC Community Leadership continues to meet on a monthly basis and representatives also provide direct feedback to the CLC Committee. Quarterly meetings with the ASOC Consumer Council have not consistently occurred as the group has had a change in leadership and participants during the fiscal year.

Goal:

SOC Staff will integrate multi-cultural and multi-lingual communication strategies into a community-based model of care.

Action Items/Steps:

Continue to Integrate Native American/American Indian and Latino services Team into CSOC through maintaining a minimum 90% of appropriate referrals ending up on the correct service team. Continue to hold monthly meetings with Sierra Native Alliance (SNA) and quarterly

meetings with Latino Leadership Council (LLC) to ensure assignments to correct service teams and staff for multicultural/multilinguistic referrals and cases.

Goal partially met. CSOC continues to hold monthly meetings with SNA and LLC to coordinate consumer cultural and linguistic needs. Developing a standardized methodology to measure appropriate linkage to Native American and Latino services teams is in development. As a standard practice, workers consistently make referrals to SNA and ongoing tracking is made regarding LLC consumers that are shared with CSOC (both former and current mutual consumers) and continue to meet monthly.

Continue to participate and track state effort to link probation, child welfare, and mental health data bases to also link to CSI data to track data. This is an ongoing discussion, but there has not been any solidified at this time. The team continues to monitor and this goal will be amended for next fiscal year.

Goal not met. This goal is currently being considered for removal due to prolonged delayed with state and federal initiatives to link data.

Goal:

Human Resource Development: Expand the skills, experiences and composition of SOC human resources to better serve consumers from diverse cultures and communities

Action Items/Steps:

Require service delivery, supervisory and management staff to participate in a minimum of two culturally relevant trainings each year. One of the trainings may have culturally responsiveness included in the training.

Goal partially met. All SOC supervisor and management staff have not participated in a minimum of two culturally relevant trainings this fiscal year. However, Placer County has increased the number of eligible trainings this past fiscal year, to also include webinar-based trainings, and have substantial increased attendance compared to past years. This goal will be modified and continued into next fiscal year with the implementation of the Placer Learns training portal.

Continue to review and revise forms (e.g. intake, assessment, treatment plans, probation terms and conditions, FRCC referrals) for language translation and cultural needs and coordinate with EHR implementation as needed and/or issued by DHCS.

Goal met and continuing. During the past fiscal year, the Grievance Appeal Form (3/7/2019) and Change of Service Provider Form (3/7/2019) were updated.

Complete Back Translation for documents (forms/fliers) to ensure accuracy.

Goal met. Placer County continues to utilize certified bilingual employees when back-translating materials. Additionally, Placer County utilizes a vendor to translate written materials, who have their own multi-point backtranslation business practice in place.

Explore and potentially modify Progress Note to include additional information related to cultural barriers and services provided.

Goal not met. This is a continued discussion.

Continue to monitor the SOC use of Interpreters to ensure that beneficiaries receive services in their preferred language. During FY17/18 519 of 67,911 progress notes (<1%) indicated the use of an interpreter.

Goal met and continuing. During FY 18/19, there were 687 progress notes completed in the SOC using an interpreter of 63,835 progress notes completed in the same FY (1.08%) There were 4,506 distinct individuals with 84 requiring interpreter services (2%). Not all individuals who requested interpreters did so on a routine basis.

Conduct a minimum of one training on Cultural competence or humility intended for all SOC staff, contracted providers, and community partners.

Goal met. Placer County held eight Cultural Competency webinar-based trainings for all SOC staff, community partners, and contracted providers in February, March, and April 2019. Each webinar was approximately 2.5 hours long.

Goal:

Client Sensitivity Training is an annual required training for all staff.

Action Items/Steps:

Provide annual opportunities for Client Sensitivity Training or activities two times a year. May be implemented by Speaker's Bureau activities and trainings, outside trainings, Director's Forums, community events, etc.

Goal met. There were 41 presentations by the Speakers' Bureau conducted.

Goal:

Monitor service sites and waiting areas to be ensure they remain welcoming of diverse populations

Action Items/Steps:

Convene a workgroup of Supervising Administrative staff, CLC Committee members, and family and youth advocates to assess to monitor the "welcoming nature" of site location waiting areas.

Goal met. This goal will not be continuing into the next fiscal year.

Goal:

SOC Managers will work in partnership with community-based organizations to support the development of best practices for community advocacy services.

Action Items/Steps:

Ongoing monitoring of the submission of Program Outcome tools from Organizational providers and report out results annually.

Goal partially met. Organizational providers continue to submit quarterly and annual outcomes. However, during this past fiscal year some providers have had difficulty submitting reports with all the required elements. This goal will be modified going into the next fiscal year with the expansion of Drug Medi-Cal Organized Delivery System providers.

Goal:

Contract providers will be culturally competent.

Action Items/Steps:

Track and review quarterly reports for MHSA/MHP contractors and SOC Contractors for monitoring of recruitment, training and retention of a culturally and linguistically competent staff.

Goal partially met. Placer County QM continues to monitor submission of organizational providers' quarterly reports to the quarterly Quality Improvement Committee. Some providers have had difficulty submitting their reports with all the required elements. This goal will continue into the next fiscal year with additional technical assistance offered to providers.

Ongoing monitoring of Network Providers attendance and/or completion of a cultural specific or competence training. Increase from 40% (from FY 17/18) to 75%.

Goal partially met and continuing. Though Placer County has significantly increased the number of cultural specific trainings offered this past fiscal year, some individual network providers have had difficulty completing cultural competence training in the fiscal year. With the implementation of the new Placer Learns training portal, Placer is hoping to bring more web-based opportunities to providers who cannot attend in person.

Respectfully Submitted,

Chris Pawlak, MFT
SOC Quality Improvement Manager
Co-Chair, Cultural Linguistic Competence Committee
Placer County Health and Human Services