

PLUMAS COUNTY BEHAVIORAL HEALTH

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CY2019 Update to the Plumas County Behavioral Health Cultural Competence Plan, 2017-2020

Plumas County Behavioral Health (PCBH) is committed to providing a culturally diverse network of community partners, therapists, and intervention case management staff. It is the Department's goal to give effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs. By requiring all staff, from leadership to front office personnel, to be routinely trained on specific topics and underserved populations, as well as the importance and impact of bringing the CLAS standards into our daily practice and service delivery, we ensure that all interactions are an opportunity to embrace and improve the quality of health care services for our community.

In 2019, PCBH staff received a number of trainings ranging from addressing unconscious bias to special populations. Administratively PCBH continued to maintain and grow policies, procedures, contracts and partnerships to uphold the implementation of the CLAS standards and monitored outcomes data for impact.

PCBH will maintain a written Cultural Competence Plan that describes how the linguistic and cultural needs of our consumers are met. It is the policy of PCBH to effectively provide services to recipients of all cultures, age, races, gender identities, sexual orientation, abilities, socio-economic status, languages, ethnic backgrounds, spiritual beliefs, and religions in a manner that recognizes, values, affirms, and respects the worth of the individual and protects and preserves the dignity of each person. PCBH adheres to equal employment opportunity policy and nondiscrimination practices.

Plumas County Behavioral Health's (PCBH) policy of Cultural Competency is embedded as a critical component in the planning and delivery of Behavioral Health services. In addition, the Cultural Competence Advisory Committee will serve as a multidisciplinary group to ensure this occurs.

1. Cultural Competence Committee (CCC)

Plumas County Behavioral Health formed its current Cultural Competence Committee (CCC) in June 2018. The committee's goals are to support the Department's commitment to providing equitable and respectful delivery of behavioral health services to all county Medi-Cal beneficiaries.

a. Meetings

The committee met most months during 2019, on the 4th Thursday of the month, including January 24, February 28, March 28, May 23, June 27, August 22, October 24, and November 21; it set new priorities for CY2019 and continued ongoing initiatives of training, reviewing implementation of CLAS standards, and finalizing a revised Cultural Competence policy and procedure document, aligning with the Department's CLAS standards and practices.

i. Training goals for 2020:

PCBH plans to bring back LGBTQ+ Stonewall presenter in June 2020 for full morning or afternoon devoted to this training. Second half of the day will be devoted to engaging with Transitional Age Youth.

Training on working with Spanish-speaking population and increasing outreach and engagement. Plumas Rural Services is working with Mental Health First Aid trainer to provide training in Spanish. Possible training for staff with this trainer and/or the Public Health community educator.

PCBH acknowledges that the SUD population is its own cultural subgroup. Department will commit resources to a separate training or summit and invite law enforcement and hospital partners; training will bring in people with lived experience from different cultural backgrounds. Other topics will include stigma reduction and recovery communities.

ii. CLAS Discussion

Members of CCC were assigned CLAS and Cultural Competence Criteria to review and bring back to CCC meeting. Discussion about individual CLAS and Criteria topics and how PCBH is or is not meeting goals. Each member of the group in attendance went over their assigned sections and reported on what PCBH is currently doing to meet those goals, if we are not meeting our goals, and what we could do to improve.

- PCBH needs to continue to work on relationship with Native American community.
- Prioritize Spanish speaking case manager during next hiring.
- Add a member with background in criminal justice system.
- Recommend adding LGBTQ+ symbol at offices/wellness centers to indicate PCBH as a safe space and look at adding "Preferred Name" line in Demographics form.
- Update PCBH brochure to include info on Veteran Services and Roundhouse Council. Translate into Spanish.
- Need materials for blind/deaf clients. Currently none. Need ASL interpreter.
- Services for Veterans is improving. Telehealth assessments for mental health are available for incarcerated veterans.
- During Committee discussion of CLAS, CCC reviewed trainings that happened in 2018 and what trainings are being planned for 2019.

iii. VA system can be very hard to navigate, which has caused delays in veterans receiving needed services. Discussed creating a process for how to contact the VA, along with specific contact persons, to help facilitate Plumas County veterans getting VA services.

While there is still a lack of VA services available in Plumas County, there are ongoing projects to help reduce/eliminate barriers to services, including the annual Veterans Stand Down event held in September and the Veterans' Collaborative meetings and activities. PCBH leverages Veteran staff time to participate in coordination of these Veteran activities and collaboration to increase access to services to this population.

- iv. The committee determined that focus should be identifying engaging, and not quick, “check the box” trainings. Planning a full day training that will focus on serving special populations with a date set for October 10, 2019, and targeted populations were focused on Veterans, Native Americans, LGBTQ+.
- v. The committee continued its discussions of integration of CLAS and CC Criteria. They reviewed CLAS one, seven, and twelve and looked at how PCBH addresses these in our Policies and Procedures and Cultural Competency Plan. CLAS 1 is covered by Cultural Competency Plan. PCBH Policy and Procedure 100.4 covers CLAS seven and twelve. At a subsequent meeting of the committee, other CC criteria were reviewed in an initial review of the prior Plan.
- vi. The committee held its March meeting in Greenville, and Roundhouse Council partner shared out a “Bag of Marbles” model, used by some generational trauma trainers that gives an example of how generational trauma affects Native families. This training is normally done within the Native American community but could benefit PCBH staff as well.
- vii. An invitation to was extended to a criminal justice partner to join the CCC. A recovery community stakeholder, a clean and sober PCBH client, has joined the CCC.
- viii. Alternative communications methods were reviewed and confirmation that TTY line is working. Forms are available in large print (18-point font) formats, however PCBH has not obtained forms in braille. Due to the frequency of changes to forms and limited use for braille forms, currently it would be better to find a source for getting forms printed in braille as needed.
- ix. CCC began review and discussion of the MHSA core principles, focusing on Principles #1 and #4:
 1. Consumer and Family Involvement: PCBH MHSA will plan to include curriculum and contracted service provider in 3-Year Plan that addresses family involvement, education, and support of the consumer. A consumer’s family member communicated an idea for an MHSA Innovation program.
 4. Integrated Services Delivery: As integrated as laws and funding streams allow; see 8 domains of SAMHSA’s Wellness Model.
- x. The Quality Assurance and Improvement Manager led a discussion concerning PCBH needing to develop a Cultural Competency Plan with objectives and goals that are measurable. The committee will focus on engaging special populations (Spanish speaking, LGBTQ+, Veterans, Native Americans, and Seniors).
 - How many are we currently seeing and what is the goal we want to increase to? Need to look at the penetration report.
 - Time frames will be based on Fiscal Year.
 - Need to apply for Medicare annually, even if denied.
 - VA kiosks in Wellness Centers could help engage Veterans and help lead to more community care contracts

- CCC discussed possibility of using MHSA funds to help provide services for veterans. MHSA already pays for Veteran Services case managers for outreach and engagement.
 - CCC will work to revise Plan. Need to estimate how much money from MHSA would be needed to provide additional Veterans services. Having more providers that are Veterans would help get more Veterans in the door.
- xi. Cultural Competency language will become a part of all boilerplate service and provider agreements. They will include articulation of annual trainings, along with how many hours of training is required. What are our target hours? It's been that we should require 16 hours of training annually.
 - xii. It is goal of the CCC to update the PCBH Demographics form. PCBH recently added "Preferred Name." Form will be updated so Race and Ethnicity questions match MHSA demographics categories. Sexual Orientation will be added to the form.
 - xiii. Veterans representative provided the CCC with periodic updates on the Plumas County Veterans' Collaborative work, Veterans Stand Down, and "mini trainings" presentation share-outs from attended State Veterans Services conference.
 - xiv. Plumas Rural Services' training coordinator recommended limiting Cultural Competency trainings to no more than two speakers per daylong training. Committee agreed and discussed having trainings twice per year. Plan for Spring training is to have speaker from Stonewall in Chico, CA return for additional training on LGBTQ+. Committee is searching for facilitator to train on outreach and engagement with Spanish speaking population.
 - xv. Future training priorities include SUD recovery community, addressing white privilege, and generational trauma experienced by Native American individuals and families.
 - xvi. *Roundhouse Council* committee member talked about holding a "Big Time" event that will be happening in Greenville in April 2020 and invited PCBH staff to attend. All residents of the community have been invited to the Big Time, which will be the first in Greenville since 2008. CCC discussed closing the office and having staff attend this event.
 - xvii. Client- and Family-Centric Peer Support: CCC discussed curriculum for training PCBH peer advocates, either in house or to contract out, to be able to teach families how to navigate systems of care (primary care, behavioral health, social services, schools, etc.) and to offer support through the process when needed.

b. Recruitment

The PCBH CCC has attempted to recruit non-staff members from its consumers who represent unserved and underserved populations, such as LGBTQ+ and from agency partners who provide services to these populations, including a representative from local tribal leadership. The Department has been unable to recruit new membership from family members of consumers.

Consumer member and some PCBH staff left CCC. Group discussed need to recruit more stakeholders to CCC. and ways to increase participation in CCC. Ideas included incentives, such as a lunch meeting with food provided. CCC discussed reducing frequency of meetings to increase participation. CCC will move to quarterly meetings beginning in January 2020.

Recruitment priorities for 2019 were identified as Veteran representative, Spanish-speaking consumer or service provider, LGBTQ+ and recovery community (SUD) members. In 2019, PCBH CCC lost its Veteran and LGBTQ+ representatives and gained a recovery community member.

2. Cultural Competence Training

In 2019, PCBH staff received multiple trainings, ranging from addressing implicit bias to special populations, such as working with Veterans and Native American individuals. PCBH conducted annual, ongoing Cultural Competency trainings in 2019. PCBH held a countywide training on working with special populations, including Veterans, youth and adults from the LGBTQ+ community, and engagement with underserved individuals from Plumas County Maidu tribe. The training evaluations received were very positive.

In early 2019, PCBH purchased and implemented use of the web-based *Relias* training and professional development program. Staff identified relevant cultural competence courses to add to all-staff training plans, including modules on engaging with youth and other Plumas County targeted populations.

The PCBH Quality Improvement Manager tracks cultural competency training of staff annually and notifies staff regarding training needs to stay in compliance with PCBH's Cultural Competency Plan and Compliance Plan.

The Quality Assurance Manager assures that at least one question directly related to cultural competency will be included on the annual Consumer Satisfaction Survey. The QI Manager assures the responses associated with this question as well as other relevant responses are used to inform the development and selection of annual trainings. Virtually all CEU approved trainings have a cultural competence component and the MHP only approves trainings that have CEU potential. The MHP will assure all non-CEU materials are reviewed and display awareness and sensitivity to culture and issues of disparity.

In July 2019, a CCC member attended the CCAPP Multi-Cultural Conference in Bakersfield and provided to the committee a review of the courses, along with educational materials to be shared out with clinical staff. It was noted that not all the cultural groups covered at the conference are represented in Plumas County.

The participant shared that the more useful aspects of the conference was being around treatment providers that worked in large communities (mostly from Bakersfield, Los Angeles, and San Francisco). Working in a county the size of Plumas has its own unique challenges, in that we don't have large populations of LGBTQ+ stakeholders; however, Plumas County has already implemented many of the recommendations provided by the LGBTQ+ presenter.

Cultural Competency materials from the conference were placed in PCBH Conference Room bookshelf for all staff to access, including:

- Counselor Magazine “Special Populations in Addiction Treatment”
- A Treatment Improvement Protocol: Improving Cultural Competence from SAMHSA
- Summary of Human Trafficking 101: Dispelling the Myths

Trainings on Suicide Prevention (ASIST) and Mental Health First Aid were provided to all AOD and Mental Health staff across the county on multiple occasions in 2019. Mental Health First Aid was also provided by a Spanish-speaking facilitator, specifically recruited to address the need for Spanish-language trainings.

In summer and fall of 2019, the Department focused considerable time and resources to address treatment and engagement trainings for all staff focusing on consumers living with substantial trauma. Working with CIBHS and the local training coordination contractor, Plumas Rural Services, PCBH was able to bring a trainer to Plumas County, who provided a full-day of Trauma Informed Care training on July 24, 2019 to the Department and its multiple agency partners, including community-based organizations, health and human services agencies, the school district, and law enforcement. Additionally, to increase available trauma-focused services, PCBH committed to certify all its licensed and intern clinical staff in EMDR, providing a 3-day training in Part I of EMDR on November 4-6, 2019.

3. Culturally and Linguistically Appropriate Services (CLAS) Standards and Practices

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During the 2019 Fall MHSA stakeholder community dinner meetings (October and November, 2019) in four Plumas County communities, the MHSA Coordinator presented a brief overview and discussion on the Department’s CLAS standards, with examples of how these are incorporated into PCBH clinical practice and provided attendees with the Department’s CLAS handout.