Massachusetts Department of Mental Health Cultural & Linguistic Competence Action Plan FY'14

PURPOSE STATEMENT: The purpose of the Cultural & Linguistic Competence¹ Action Plan (CLC Action Plan) is to operationalize the Department's mission on culturally and linguistically competent care that is person-centered and trauma-informed. The Plan ensures that the mental health system based on recovery, resiliency, partnership and consumer choice is attentive to the needs and effective care of culturally and linguistically diverse populations, including at-risk immigrants and refugees. The Action Plan incorporates the Department's Strategic Plan, System for Reviewing Performance and Health Care Reform’s National Stakeholder Strategy² to improve access, quality of care and outcomes.

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<tr>
<td>Community Partnerships</td>
<td>Partner with multicultural communities, mental health providers, community organizations and state agencies in the planning, development and implementation of culturally &amp; linguistically effective programs to support the Department’s Community First Initiative for adults and children with serious mental health challenges.</td>
<td>MHS EOHHS OMCA</td>
<td>(A.1) The Office of Multicultural Affairs (OMCA) will participate in the planning and implementation of community initiatives to promote prevention and treatment of mental illness and increase access to culturally and linguistically competent care.</td>
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1. Cultural and Linguistic competence is the integration and transformation of knowledge, information and data about individuals and groups of people into specific clinical standards, skills, service approaches, techniques and marketing.

- Boston Mental Health Conference “Many Faces of Mental Health: Sharing our Stories”, focuses on mental health across life-span for Boston residents and includes caregivers, veterans and their families
- 3 Psychological First Aid training for immigrant and refugee providers
- 3 Community Forums on Mental Health and Overall Wellness for immigrant and refugee communities and providers
- Community dialogues and outreach for immigrants and refugees
- Early Childhood Mental Health, Race to the Top

³=LINK CBHI-Children’s Behavioral Health Initiative, CO-Commissioner’s Office; CCAT-Cultural Competence Action Team; CPS-Clinical Professional Services; DMH-Department of Mental Health; EOHHS-Executive Office of Health & Human Services; MAC-Multicultural Advisory Committee; MHS Mental Health Services; MHIS-Mental Health Information System; OMCA-Office of Multicultural Affairs; QM-Quality Management; SPC-State Mental Health Planning Council
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| Community Partnerships | programs that match the individual's culture and increase the quality and appropriateness of health care and outcomes. (Davis, 1997) | OMCA | (A.2) OMCA will network among cultural communities, consumers and family organizations to develop partnership initiatives:  
- Diverse Family Partners Outreach (Parent Professional Advocacy League)  
- Community Voice Task Force (Transformation Center)  
- Peer Diversity (Northeast Recovery Learning Community)  
- Listening Session (Statewide Immigrant & Refugee Mental Health Network)  
- Asian Mental Health Forum (Asian American Mental Health Coalition) |
<p>| | 2. Enhanced Cultural and Linguistic Appropriate Services (CLAS) standards (OMH, 2013) | MHS MAC CO | |
| | 3. Health and Human Services Strategic Action Plan to Reduce Racial and Ethnic Health Disparities and National Stakeholder Strategy for Achieving Health Equity (2010), &quot;Health Disparities&quot; reported in the Patient Protection and Affordable Care Act, President's New Freedom Commission on Mental Health (2003), Unequal Treatment, Institute of Medicine (2002), and Mental Health: Culture, Race and Ethnicity, A Supplement to Mental Health: A Report of the Surgeon General (2001); Disparities conceptualized in areas of prevalence, incidence, services, treatment, rehabilitation, recovery, prevention, participation, outcomes, acceptable norms, personal choice, and racial causation. | OMCA MHS MAC | (A.3) Partner with DMH providers, multicultural community based organizations to identify and meet the recovery and community support needs of diverse clients and families. |</p>
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<td><strong>Leadership</strong></td>
<td><strong>GOAL</strong> Promote leadership in cultural competence and linguistic competence, recovery and resiliency in and outside of DMH to reduce mental health disparities.</td>
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<td><strong>Objective A.</strong> Develop leadership role of the Multicultural Advisory Committee to support the DMH mission of cultural and linguistic competent care to promote recovery.</td>
<td>OMCA MAC CBHI SPC CO</td>
<td>(A.1) Multicultural Advisory Committee (MAC) participates in advisory committees of the Department, community based organizations and stakeholder groups to plan overall and specific cultural and linguistic competence strategies to reduce disparities.</td>
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<td><strong>Objective B.</strong> Increase the leadership role of the Cultural Competence Action Team (CCAT) to promote cultural and linguistic competence in DMH Areas on Community First: “Recovery Through Partnership”</td>
<td>OMCA MHS CCAT QM MHIS</td>
<td>(B) Provide information and support to CCAT representatives to be informational &amp; technical leaders for their Areas with the goal of addressing unmet needs of clients.</td>
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- Multicultural Subcommittee, State Mental Health Planning Council
- Statewide Immigrant & Refugee Mental Health Network
- Transformation Center
- Parent Professional Advocacy League
- Transcom

(A.2) Provide ongoing informational support to MAC members participating in advisories

- customized Area’s client service enrollment reports with Area’s population census
- current disparities information and strategies to increase access to care
- evidence-based and community-driven best practices for diverse populations
- connect community leaders, human and social services providers to Areas
- Identify Area or Site needs and develop an action plan to increase accessibility and availability of recovery and community support services
- Joint meetings with Multicultural Advisory Committee to increase Area’s multicultural community network

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<td>Services</td>
<td>GOAL Strengthen culturally and linguistically competent services throughout the entire DMH service delivery system and Children’s Behavioral Health Initiative.</td>
<td>QM OMCA CPS MHS CO MHIS</td>
<td>(A.1) Review Department's regulations and develop policy recommendations on the standards of cultural and linguistic competence as an integral part of client care. (A.2) Identify disparities by race, ethnicity, language and age groups on DMH service eligibility and service enrollment. (A.3) Partner with Quality Management and the Performance and Contract Monitoring Team to derive measurable outcomes to reduce disparities using the Mental Health Planning Logic Model for Culturally and Linguistically Diverse Populations that include: • Accessibility • Availability • Appropriateness of Care • Quality and Satisfaction (A.4) Develop a performance enhancement plan for contract amendment based on measurable outcomes. (A.5) Integrate Enhanced Cultural and Linguistic Appropriate Services (CLAS) standards into all service procurement. (A.6) Sample cultural and linguistic diverse clients in Consumer Satisfaction Project.</td>
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(A.1) Review Department's regulations and develop policy recommendations on the standards of cultural and linguistic competence as an integral part of client care.

(A.2) Identify disparities by race, ethnicity, language and age groups on DMH service eligibility and service enrollment.

(A.3) Partner with Quality Management and the Performance and Contract Monitoring Team to derive measurable outcomes to reduce disparities using the Mental Health Planning Logic Model for Culturally and Linguistically Diverse Populations that include:

- Accessibility
- Availability
- Appropriateness of Care
- Quality and Satisfaction

(A.4) Develop a performance enhancement plan for contract amendment based on measurable outcomes.

(A.5) Integrate Enhanced Cultural and Linguistic Appropriate Services (CLAS) standards into all service procurement.

(A.6) Sample cultural and linguistic diverse clients in Consumer Satisfaction Project.
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<td>Services</td>
<td>Equitable and quality care to meet the needs of un-served or underserved transition age youth and young adults</td>
<td>OMCA MHS</td>
<td>Competent Organizations for Community Service Agencies (CSAs).</td>
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<td>Objective C.</td>
<td>Enhance interpreter and translation services.</td>
<td>OMCA MHS</td>
<td>(B.2) Develop Community of Practice Toolkit to guide the facilitation of CSA affinity groups across Massachusetts.</td>
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<td>(B.3) Address the needs and preferences of culturally diverse transition age youth and young adults and their families.</td>
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<td>- Customize social marketing and outreach strategies</td>
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<td>- Engage stakeholders input on service design</td>
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<td>- Reinforce continuous community engagement and partnerships</td>
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<td>(C.1) Implement the statewide Department’s Language Access Plan.</td>
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<td>- Monitor statewide accessibility of language assistance, collect and analyze data for one of the Department’s EHS indicators, the percentage of requests fulfilled for interpreter services for DMH state-operated services</td>
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<td>- Evaluate the specific language make-up of DMH client population in comparison to the Massachusetts Census, interpreters utilization, identify language groups not being served or underserved and increase language diversity</td>
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<td>- Develop and disseminate utilization reports by language, facilities, Areas and services</td>
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<td>- Provide translation for the Consumer Satisfaction Project for the University of Massachusetts Medical School Center of Excellence</td>
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<td>(C.2) Evaluate and further improve Statewide Interpreter and Translation Services.</td>
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<td>- Plan a Worcester Recovery Center and Hospital’s Interpreter and Translation Services pilot</td>
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<td>- Develop service request protocol and tracking system</td>
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<td>- Provide joint training for staff and interpreters</td>
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|               | **Objective D.** Provide statewide cultural competence consultations to support Community First. | **OMCA** | (D) Provide consultation to DMH direct care staff and providers.  
- Cultural consultation  
- Clinical compatibility consultation on assessment, formulation and treatment planning  
- Information and referral  
- Trauma screening, and trauma informed care |

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<td>Training and Education</td>
<td><strong>GOAL</strong> Integrate mental health disparities, cultural and linguistic competence into staff training, staff development and educational activities. <strong>Objective A</strong>. Enhance current and future training with health disparities and equity, cultural and linguistic competence topics. <strong>Objective B</strong>. Enhance community mental health literacy.</td>
<td>OMCA</td>
<td>(A.1) Provide the Clinical Competence in Working with Culturally and Linguistically Diverse Clients training to DMH sites and providers. (A.2) Provide technical assistance on developing cultural and linguistic competence operations to providers. (A.3) Develop Embracing Diversity and Cultural and Linguistic Competence Module for Gathering and Inspiring Future Talents (GIFT): A Curriculum for Transition Age Group. (A.4) Provide community forums on the promotion of mental health and overall wellness for immigrant and refugee community, providers, clergy, public safety officers. (A.5) Develop the promotion of suicide prevention and intervention. (B) Promote mental health literacy and education through ongoing community forums and outreach activities that are guided by the community in their development and implementation.  - Wellness Campaign: Prevention Works &amp; Treatment is Effective  - Emergency preparedness training for immigrants and refugees providers, clergy and safety officers</td>
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<td><strong>Goal</strong> Use of analyses on population census, service applicants, client enrollment and service utilization, client satisfaction and outcomes to inform policy, research, program development, clinical practice and workforce development to ensure equitable care and reduce mental health disparities.</td>
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<td><strong>Objective A.</strong> Improve collection of demographic information about DMH clients and service applicants.</td>
<td>OMCA CPS MHS MAC CCAT CO MHIS</td>
<td>(A.1) Develop a policy recommendation on the collection and reporting of client’s race, ethnicity including sub-population and language data.</td>
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<td><strong>Objective B.</strong> Develop knowledge base of behavioral health disparities concerning racial, ethnic, and cultural populations.</td>
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<td>(A.2) Provide data collection training to ensure accuracy.</td>
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<td><strong>Objective C.</strong> Incorporate the unique needs of racial, ethnic and cultural population research through collaboration with the DMH funded Research Centers for Excellence and CBH Research and Training.</td>
<td>OMCA CPS</td>
<td>(A.3) Update all population demographics with more recent American Community Survey.</td>
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- (B.1) Conduct a literature review of evidence-based treatment of depression for multicultural population to inform policy and practice.
- (B.2) Conduct data collection and analysis on transition age youth and young adults on race, ethnicity and LGBT for SAMHSA’s STAY Together grant.
- (C.1) Jointly identify multicultural & disparities research topics with the multicultural researchers of the Centers of Excellence.
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<td>Information</td>
<td><strong>GOAL</strong> Promote communication and information dissemination on issues of health and mental health disparities and cultural and linguistic competent practices.</td>
<td>OMC</td>
<td><strong>(A.1)</strong> Disseminate Cultural and Linguistic Competence Action Plan, strategies and resource information in DMH Intranet and Internet.</td>
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<td><strong>Objective A.</strong> Disseminate information on DMH cultural and linguistic competence actions and resource information.</td>
<td>CPS MAC SPC CO</td>
<td><strong>(A.2)</strong> Update the Multicultural Resource Population Resource Directory with new web-links to other resource directories and websites.</td>
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<td><strong>Objective B.</strong> Contribute lessons learned on Health Disparities in Affordable Care Act implication for mental health care, cultural and linguistic competence strategies to reduce disparities to external organizations.</td>
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<td><strong>(A.3)</strong> Disseminate relevant information on a regular basis to all staff, Area’s diversity committees, MAC, State Planning Council.</td>
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<td><strong>(B)</strong> Contribute knowledge and lessons learned to:</td>
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<td><strong>(A.4)</strong> Provide ongoing informational exchange as part of MAC meetings for DMH staff and participating community based organizations.</td>
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<td>• State Health and Human Services Agencies</td>
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<td>• Legal, health and human and social services providers</td>
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<td></td>
<td>• Advocacy groups for adult, children, families, and racial and ethnic communities</td>
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<td>• Office of Behavioral Health Equity, Substance Abuse Mental Health Services Administration,</td>
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<td>• Center for Mental Health Services</td>
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<td>• National State Cultural and Linguistic Competence Affinity Group (National Association for State Mental Health Program Directors &amp; NAMI)</td>
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<td>• National racial and ethnic mental health associations</td>
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<td>• Massachusetts professional organizations</td>
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The Multicultural Advisory Committee provides regular input and guidance for the Department’s cultural competence activities. Members include community-based providers, researchers, policy makers, clients and family members, gatekeepers, and stakeholders who understand the needs of the racial and ethnic diversity in communities.

Cultural Competence Action Team consists of Department of Mental Health staff. The staff participation enables the team to take the entire departmental operations into consideration when developing an annual Cultural and Linguistic Competence Action Plan.

Community First: "Recovery Through Partnership" is the guiding principle that supports the DMH Community First Initiative for adults, children, adolescents and families with serious mental illness and serious emotional disturbance. DMH champions people’s right to live as independently as possible in the community and it is DMH's responsibility to support recovery and success of individuals with the lived experience of serious mental illness.

**DMH Vision**

Mental health is an essential part of health care. The Massachusetts Department of Mental Health, as the State Mental Health Authority, promotes mental health through early intervention, treatment, education, policy and regulation so that all residents of the Commonwealth may live full and productive lives.

**Mission Statement**

The Department of Mental Health, as the State Mental Health Authority, assures and provides access to services and supports to meet the mental health needs of individuals of all ages, enabling them to live, work and participate in their communities. The Department establishes standards to ensure effective and culturally competent care to promote recovery. The Department sets policy, promotes self-determination, protects human rights and supports mental health training and research. This critical mission is accomplished by working in partnership with other state agencies, individuals, families, providers and communities.