MHSOAC

Mental Health Services
Oversight and Accountability Commission

Draft

Cultural and Linguistic Competence Committee

2012 Charter

Purpose:

To ensure that the perspective and participation of individuals and families who are members of racial, ethnic, and cultural communities across the lifespan, is a significant factor in all MHSOAC decisions and recommendations.

Objectives:

- Review MHSOAC processes and recommend how the Commission can achieve meaningful participation from individuals from racial, ethnic and cultural communities as a significant factor in all of the Commission's decisions and recommendations.
- Organize and participate in activities and tasks that will produce learning related to cultural and linguistic competence and provide information to the Commission about how the MHSA is impacting members of racial, ethnic and cultural communities across the state, including reducing disparities and improving outcomes.

Guiding Principles:

Committee policy and strategy recommendations to the MHSOAC should reflect and strive to address the following priorities:

1. Culturally and linguistically competent
2. Promotes a client/family/parent driven system
3. Reduces stigma and discrimination
4. Fully informed via a robust stakeholder process
5. Best Practices and continuous improvement
6. Emphasizes the inclusion of all ages across the life-span
7. Aimed at reducing mental health disparities

Activities:

1. Research, produce and conduct the annual cultural and linguistic competence presentation for the MHSOAC and staff.
2. Obtain updated utilization data from the Department of Mental Health (DMH) for 2008-09 and 2009-10 to compare to baseline data for 2003-04. Additionally, there will be comparisons with data from 2007-08 to determine progress of reducing disparities in the Mental Health System. Share data with the Evaluation Committee.
3. In partnership with the CFLC, develop, organize and conduct quarterly community outreach forums..

4. Discuss feedback from the Culturally and Linguistically Appropriate Services (CLAS) presentation to the MHSOAC Commissioners and staff and establish lessons learned that will be used in the 2012 presentation to the Commission and staff.
5. Review and discuss CLAS Standards and determine applicability to MHSA activities.
    a. Determine whether the CLAS Standards can serve as a model for implementation of Oversight and Accountability Strategies
    b. Discuss recommendations regarding inclusion in the Logic Model (”Relevant Statute” Column)
    c. Determine whether the CLAS Standards can serve as a model to augment existing standards
6. Provide update to Commission about collaborative efforts focused on reducing disparities that are being pursued by various agencies including the California Mental Health Planning Council (CMHPC), the California Mental Health Directors Association’s (CMHDA’s) Ethnic Services and Social Justice Advisory Committees, CiMH’s Center for Multicultural Development, DMH’s Office of Multicultural Services and the MHSOAC’s CLCC. Provide recommendations related to collaboration as appropriate.
7. Participate in a workgroup convened by the MHSOAC Services Committee to provide input to develop and implement the Integrated Plan.
8. Participate on work group convened by Services Committee to develop PEI Statewide Reducing Disparities Project guidelines and present Strategic Plan summary findings to the Commission.
9. Identify training resources with demonstrated effectiveness in reducing mental health disparities (access, quality of services, outcomes) to contribute to T/TA

Date	January 2012
Leadership	Dr. Victor Carrion, Chair
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