



## **Cultural and Linguistic Competence Committee**

### **2015 Charter**

#### **Purpose:**

To ensure that providing culturally competent services and reducing disparities are significant factors 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 the impact of the MHSA in the mental health of members of racial, ethnic and cultural communities across the state. Emphasize how the MHSA will reduce disparities and improve outcomes for these populations.
- Review and recommend how MHSOAC policies, programs, and contracts can be more culturally competent and address the reduction of mental health disparities.

#### **Guiding Principles:**

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

1. Cultural and linguistic competency.
2. Promotion of client/family/parent driven system across the lifespan.
3. Emphasis on the inclusion of all ages across the lifespan.
4. Reduction of stigma and discrimination.
5. Reduction of mental health disparities.
6. Fully informed via a robust stakeholder process.
7. Best Practices and continuous improvement.
8. Endorse and promote strategies that transform the mental health system, including systems and services integration.
  - a. Culturally responsive services that relate to individual's needs.
  - b. Promote wellness, resiliency and recovery.
9. Aims to reduce mental health disparities and seeks solutions for historically unserved and underserved communities in California.
10. Recognizes the importance of cultural communities and families of choice.

**Activities:**

1. Continue quarterly Community Forums to provide the Commission with an annual written Community Forum Report of potential policy, compliance, communication, and technical assistance implications.
  - a. Identify CLCC members and alternates to serve on the Community Forum Workgroup and identify replacements when necessary.
  - b. CLCC workgroup members will collaborate with the forum workgroup and MHSOAC staff to prepare and post a written summary report after each forum.
  - c. Review methods for synthesizing information collected from the Community Forum Workgroup and review collected information from the Community Forums for the purpose of quality improvement and evaluation.
  - d. Using the Community Forum Workgroup, expand workgroup activities to include facilitating outreach and conducting special focus groups for typically un-served, underserved and inappropriately served racial, ethnic, LGBTQ, and cultural groups in various communities throughout the State.
  - e. Encourage stakeholder contractors, community agencies and counties to facilitate attendance at the Forums.
2. Diversify the methods by which the MHSOAC receives input from cultural communities.
  - a. Expand and diversify participation in MHSOAC committees, stakeholder contracts, and MHSOAC meetings to the fullest extent to engage un-served, underserved and inappropriately served racial, ethnic, LGBTQ, and cultural groups from various communities throughout the state.
  - b. Determine strategies to expand and diversify participation in MHSOAC and Committee meetings to the fullest extent.
3. Monitor the California Department of Public Health's (CDPH) California Reducing Disparities Project.
  - a. Collaborate with the California MHSOAC Multicultural Coalition (CMMC) to identify their activities and analyze findings.
4. Continue cultural competence presentations to staff/Commissioners.
5. Communicate progress in reducing mental health disparities to build collaboration in access, quality and services.
6. Monitor the statewide collection of disparity data.
7. Provide input on MHSOAC evaluation efforts as needed.

8. Communicate lessons learned and best practices from evaluations to improve programs and policy as part of quality improvement feedback.
  - a. Conduct an organizational self-assessment of MHSOAC according to Culturally and Linguistically Appropriate Services (CLAS) standards and present findings to the Commission.

<b>Date</b>	January 2015
<b>Leadership</b>	Khatera Aslami, Chair; Tina Wooton, Vice-Chair;
<b>Staff</b>	Peter Best
<b>Composition</b>	<ol style="list-style-type: none"><li>1. Raja Mitry</li><li>2. JoAnn Johnson</li><li>3. Sharon Jones</li><li>4. Emma Oshagan</li><li>5. Jeannine Farrelly</li><li>6. Katherine Ferry</li><li>7. Reina Florez</li><li>8. Blia Cha</li><li>9. Dailene Connors</li><li>10. Charles Johnson</li><li>11. Crystal Rocha</li><li>12. Minola Clark-Manson</li><li>13. Gladys Lee</li><li>14. David Weikel</li><li>15. Posh Mikalson</li><li>16. Susan Manzi</li></ol>