STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES

DIVERSITY, EQUITY, AND INCLUSION

… a newsletter to address cultural issues that enable us to effectively work in cross cultural situations.

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Over the next several meetings, the CCESJC will be working on developing strategies to ensure that the Core Treatment Model (CTM) aligns with the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. The National CLAS Standards are a set of 15 action steps intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health care organizations to implement culturally and linguistically appropriate services. At the next CCESJC meeting on February 10, 2020, the committee will review the CLAS standards, develop a work group process, and sign-up volunteers for the workgroup. Please take a few moments before the next CCESJC to review the CTM and CLAS Standards to come prepared for this important conversation**.**

Substance Use Disorder Treatment RBA Framework (DRAFT)

Population	Adults/Youth with Substance Use Disorders – Mild, Moderate, Severe		
Performance Measure *"Better Off"*	Increase functioning and Decreased impairment *As measured by the ASAM/CalOMS/TPS/Discharge Codes/Alcohol and Drug Screening*		
	Treatment Services	**Providers**	**Clinical Standards**
Core Treatment Model *Strategies to Increase Functioning & Decrease Impairment*	Medication Services* Physical Health Review Medical Necessity Assessment/Diagnosis Withdrawal Management	Physician/Extender* Mental Health Clinicians	TBD
	Assessment Observation Services (W/M only) Individual Counseling Group Counseling Care/Service Coordination Recovery Services	Mental Health Clinicians Behavioral Health Specialist Clinical Service Technicians	TBD
	Substance Use Assistance Engagement	Community Clerical Aid Volunteers	TBD
Performance Measures *"How well we provide services"*	Alcohol and Drug screening / Client & Provider Engagement / Access to Services / Medi-Cal Key Indicators / Provider Clinical Skill / Appropriate Level of Care Placement & Interventions / Treatment Longevity		

Mental Health Treatment RBA Framework (DRAFT)

Population	Adults/Children with SMI/SED with functional impairment		
Performance Measure *"Better Off"*	Increase functioning / Decreased impairment *As measured by the LOCUS/CANS/DCR/Perception Surveys*		
	Treatment Services	**Providers**	**Clinical Standards**
Core Treatment Model *Strategies to Increase Functioning & Decrease Impairment*	**Medication Services** Medication prescription, administration, and monitoring.	Psychiatrist Registered Nurse Other prescribers	TBD
	Clinical Services • Assessment* • Crisis Prevention/Intervention • 1:1 & Group Clinical Intervention • *Rehabilitation* • Care & Services Coordination	Mental Health Clinicians* Behavioral Health Specialist Clinical Service Technicians	TBD
	Family, Peer and Community Support	Behavioral Health Specialist Behavioral Health Advocate Clinical Service Technician Community Clerical Aid	TBD
Performance Measures *"How well we provide services"*	Client & Provider Engagement / Access to Services / Medi-Cal Key Indicators / Provider Clinical Skill / Appropriate Level of Care Placement & Interventions		

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to:

Principal Standard:

1. Provide 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.

Governance, Leadership, and Workforce:

2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.

3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.

4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

Communication and Language Assistance:

5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.

6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.

7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.

8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Engagement, Continuous Improvement, and Accountability:

9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.

10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.

11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.

15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

If you have questions or suggestions regarding Cultural Competence, please e-mail:
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Diversity, Equity, And Inclusion