

ARIZONA DEPARTMENT OF HEALTH SERVICES



DIVISION OF BEHAVIORAL HEALTH

**CULTURAL COMPETENCE EFFECTIVENESS REPORT FOR
2008-2009 FISCAL YEAR PLAN OVERVIEW**

AND

**DIVISION OF BEHAVIORAL HEALTH
2009-2010 CULTURAL COMPETENCY PLAN**

**Arizona Department of Health Services
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Preface

The Division of Behavioral Health has achieved several meaningful goals in regards to planning, designing and implementing diverse initiatives to promote the inclusion of cultural values, and traditions in all the levels of care provided statewide. DBHS Understands that respect and value the diversity is the key to offer services that are more effective and guide the Mental health care programs in prevention, treatment, access to care and quality of care towards a complete cultural competent system of care.

The mental health services are more often successful when are provided attending special needs of the diverse population served. In the past, DBHS had been devoting its efforts in developing the foundation of a comprehensive Cultural Competence program that involves the state contractor's as well as stakeholders, community members, services providers, community based organizations etc, and focusing in leading initiatives that have had an important impact on how the Behavioral Health services are provided in general.

We observe how often the managed care setting is unaware of how tradition, cultural beliefs, diverse cultures, races; ethnicity can be vital elements in quality of care and effectiveness of services provided. That is why after navigating the path of "educate" the system, it is time to focus efforts in apply new initiatives and programs to provide a comprehensive range of inclusive and high quality services for all the underserved/underrepresented minorities already identified for the Arizona geographical region, remarkably: African Americans, Hispanics, Native Americans/Alaska Natives, and Asian Pacific Islander Americans.

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Introduction

The Diversity and Inclusion area advises the Division of Behavioral Health on ways to improve the health of racial and ethnic minority populations, and on the planning, development and implementation of goals and program activities in within the Regional Behavioral Health Authorities and providers.

The DBHS vision for culturally competent care is:

- Care that given with understanding of and respect for the consumer's health-related beliefs and cultural values
- Staff that respect health related beliefs, interpersonal styles, and attitudes and behaviors of the consumers, families, and communities they serve
- Leadership from administrative, management and clinical operations that includes supportive environment, resources to successfully implement strategies and activities, assessments and processes that ensure a uniform and consistent response by all staff

Attending those principles, these are some of the activities developed by DBHS in regards to Cultural Competency and Diversity in past years:

- Implemented the Individual cultural competency assessment pilot
- Guide the RBHAS to develop an interpretation and translation written procedure for language testing of staff
- Implemented the use of data elements for Deaf and Hard of Hearing
- Conducted the First Annual DBHS Cultural Competency Conference held January 9, 2008
- Revised the DBHS Cultural Competency Curriculum for different audiences
- DBHS Provided support for other cultural competency training sessions throughout the state.
- Expansion of training available on diverse cultures
- Increased requirements in RBHA Network Plan to measure staff-language capacity
- Identified the current RBHAs marketing efforts that are focused population groups with behavioral health disparities
- Developed an English-Spanish Behavioral Health glossary
- Have an internal translator for developing and reviewing member material and maintain the DBHS webpage in Spanish
- Developed DBHS Annual Diversity Outcome Report on the outcomes for diverse populations served by DBHS
- Implemented the Arizona Commission for the Deaf and the Hard of Hearing Survey completed on-line by the RBHA providers and generated a report based on the findings (currently posted at DBHS webpage)
- Developed the first Cultural Competency Self Assessment.
- Developed and implemented the Providers Assessment on Cultural Competence

The State of Arizona continues to grow in diversity as the mental health care system, and the demographic changes over the next decade, urge the significance of addressing disparities in mental health care. DBHS distinguishes between four major categories to be broadly developed and focused for the 2009-2010 Cultural competency plan such as:

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- LEP: to ensure that RBHAS and providers are complying with Title VI prohibition against national origin discrimination affecting limited English proficient persons. In Arizona, that is experiencing a rapid growth in the Latino/Hispanic population, we put special attention on how language barriers can cause a negative impact in access to care and the delivery of quality of care services.
- **National Standards on Culturally and Linguistically Appropriate Services (CLAS):** More focus over the Implementation of all the 14 CLAS standards as a goal for 2011. Currently only 4 are federal mandates for recipients of federal funds. See the webpage [National Standards on Culturally and Linguistically Appropriate Services \(CLAS\) in Health Care \(Final Report\)](#) Office of Minority Health.
- Training including CLAS standards, Cultural Competency for all clinical and non-clinical staff (Ongoing activity), and LEP.
- Outreach: (Includes Marketing and communication initiatives)

PURPOSE

This Effectiveness annual report provides background on the importance of cultural competence in mental health care in Arizona, reviews the role and interest of the Federal and State government in cultural competence, and summarizes the Division of Behavioral Health Services (DBHS) 2008 Statewide Cultural Competency Plan and reviews the activities undertaken from July 1, 2008 – June 30, 2009.

It also recommends new activities for the fiscal year 2009-2010 to facilitate the implementation of the cultural competence objectives and goals.

Based on the review, the July 1, 2009 – June 30, 2010 plan has developed to reflect future implementation steps:

The 2008 - 2009 Cultural Competency Plan focused on increasing awareness to diverse populations and addressing disparities in DBHS behavioral health system. It includes activities that lead the Division to:

- Provide leadership to increase awareness and sensitivity to diverse populations and decrease behavioral health disparities
- Support RBHAS in increasing their capacity to provide culturally and linguistically responsive services to and decrease behavioral health disparities
- Increase the use of data to communicate value of services and improved diversity outcomes.

The plan also included two major activities that required the development of two reports. The reports analyzed our system for underserved groups. They are:

1. The Report of the Provider cultural competency activities report has been developed, still in a draft form, and here are some of the Highlights:
 - The category, which received the highest score, was CEO's Personal Leadership (88.0%), which indicates that providers have their main leaders support efforts to change (Draft Report Figure 1).

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- The overall average score for providers statewide is 78.4% (Draft Report Table 1).
- Some of the other categories with scores 80% and above are:
 - "Providing resources," (86.3%) indicates that providers are providing resources that support cultural competency efforts, such as, language and interpretation services and culture specific programs and services.
 - "Linguistic Competence," (84.3%), which looks at how providers address the language needs of the populations they serve
 - "Responsibility for Cultural Competence," (83.2%).
 - "Staff and Stakeholder Commitment," (80.1%).
 - The lowest score was given to Cultural Competence Advisory Committee (60.5%). All RBHAs have a Cultural Competence Advisory Committee that includes provider representation. An explanation for the lower score is that not all providers have their own committee.

2. The Diversity Report that reviewed data on individuals across our system statewide on the individuals receiving RBHA behavioral health services statewide by ethnicity, race and age. Still in draft form.

The 2008-2009 plan was very successful and included many accomplishments guided by DBHS that have assisted in improving the capacity of the T/RBHA system to develop appropriate strategies and programs that reflect their capacity to provide culturally and linguistically responsive services to and decrease behavioral health disparities.

A different approach as part of a new initiative was to create an internal Cultural Competency team to provide expertise and assistance from functional or business areas to draft the main Cultural Competency Plan. In addition, it will assist with consultation from their business area to the committee.

The DBHS Cultural Competency Advisory Committee is to provide their input for the design and development of the Cultural Competency plan and further to decide the implementation of the plan at the TRBHA level.

This Advisory Committee is composed of T/RBHA Cultural Competency Representatives/Experts, Tribal Liaisons, ADHS/DBHS representatives, RBHA providers, Stakeholders and Individual and Family Members. The purpose of this Committee is to present reports, plans, data and other input as necessary to complete the goals enunciated in the CC plan.

As part of the new Cultural Competence plan, DBHS is committed to compliance with the new initiatives and CMS regulations, the CMS in futures years could strengthen the Call letter language about requirements in a number of ways, some related to disparities, minorities or diverse populations. Given that SNP's serve the most vulnerable populations, more than an annual reassessment may be need it to ensure that the plan is providing all necessary services.

In fact, the plans could be required to demonstrate how they will serve people with Limited English Proficiency who are disproportionally represented in the dual eligible population.

In addition, and since models of care are what distinguish SNPs from other MA plans or delivery models, CMS could require plans to describe their MOCs in all plan marketing materials and make them publicly available. CMS could have included more detail in the call letter concerning the review and subsequent audit of MOCs to ensure that SNPs are providing the special services for which they were intended.

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The following is a short overview of the activities in the 2008-2009 Cultural Competency Plan

- **Objective 1. Provide leadership to increase awareness and sensitivity to diverse populations and decrease Behavioral Health disparities.**

Goals: 1.1 and 1.2 *Develop a work group to explore the feasibility of a conference or meeting on the importance of providing culturally and linguistically responsive services and increase awareness of disparities and to Development of a conference or meeting highlighting the importance of providing culturally responsive services and increase awareness of disparities.*

- The workgroup has explored the opportunity of a Cultural Competence conference (s), and great variety of topics were discussed, attending to the actual budget constrictions it was decided that the conference (s) will depend of next year budget allocations and the possibility of apply for some grants will be inserted into the new 2009-2010 plan.
- The DBHS Prevention area is working to submit the application for a grant with the Lilly Foundation
- DBHS is still interested in pursuing this endeavor and will be including this goal in the 2009-2010 plan. Due to budget constraints, DBHS has been reviewing alternative funding sources such as grants, stipends, and partnerships to obtain this goal.

Goals 1.3 and 1.4 *Develop Marketing Workgroup and Develop awareness marketing strategy as one strategy to increase knowledge of services available to members and potential members of diverse populations.*

The behavioral health marketing and communication plan has been in existence among the T/RBHAS for a few years already and been developed through public health campaigns, collaborative partnerships and strategic communications.

The Awareness Campaign strategy was to include in the TRBHAS internal Marketing plan the Diversity initiatives to increase knowledge of services available to members and potential members of underserved populations. Among others, the TRBHAS included items such as:

- Updates of the TRBHAs member handbooks, developing of print material and web-based marketing materials for members such as: brochures, newsletters, flyers, promotional items, slide guides, presentations, and participation in health fairs, events, Artist shows, presentations expositions and festivals among others.
- Information disseminated includes but it is not exclusive of topics such as e.g. supporting enrollment, treatment, prevention, clinical information, peer support, inspirational materials, and many others, created in languages other than English and alternative formats.

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- All the TRBHAs had participated in health fairs, etc, disseminating their information to minorities and underserved populations e.g. Exposition for recovery, Magellan Forums, Community Mental Health Arts Show, people of Color festival, etc.
- All the above mentioned were targeted specifically for minorities and underserved communities identified at the GSA 's of each TRBHA.

MAGELLAN

- Magellan's marketing strategies focus around grassroots and in person efforts and a heavier emphasis on earned rather and paid media. Magellan has identified the following target audiences for all marketing/outreach efforts and activities:
 - Service recipients, Family members, Service Providers, Community stakeholders (includes faith-based organizations, neighborhood groups, community service agencies such as YMCA's and community centers, and advocacy organizations such as NAMI and MHAA)
 - Educational system (schools, school nurses, educators, principals, administrators, psychologists, psychiatrists and districts)
 - First responders (hospitals, fire fighters, police, and emergency medical technicians)
 - County and State Elected Officials
 - Provider Network Organizations (PNOs) and Qualified Service Providers (QSPs)
 - County and State Governments
 - County and State agencies (ADJC, ADES/CPS and AHCCCS, ADES/DDD, ADES/RSA)
 - Primary care physicians/practitioners
- Magellan of Arizona TRBHA has developed exclusively the forums with extensive participation among diverse communities. These forums have been conducted at the media level, spreading the services thorough radio stations in specific shows such as: "Hogar Dulce Hogar" and " How are we doing" and paying advertisements at the Arizona Republic, Native Scene, Arizona Together, la Prensa Hispana, La Voz and The New Times.
- Magellan has leading also initiatives such as the Community developer's presentations and outreach activities across Maricopa County with special emphasis on diverse populations as: African Americans, Elderly, Asian/Pacific islander, Native American, Hispanic/Latino, Youth and Families etc.
- Placed a paid advertisement in the Black Board of Director's Project banquet program to promote Magellan's services to the African American population

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- Paid advertisements for the "How are we doing?" forum in the Arizona Republic, Native Scene, Arizona Together, La Prensa Hispana, La Voz and the New Times

CPSA

- CPSA has developed their (AV) Audiovisual library designed as an empowerment tool for members and families. (The presentations are available at the CPSA webpage)
- The Wellness Messenger, a quarterly newsletter designed to educate members and their families regarding healthy lifestyle choices
- CPSA supports educational and fundraising events hosted by other organizations championing specific racial and ethnic groups including Tucson Urban League; Amistades, Inc.; League of United Latin American Citizens (LULAC); Southern Arizona Center Against Sexual Assault; Pima Council on Aging; La Frontera's International Mariachi Conference; Boys and Girls Club of Pima and Santa Cruz counties; Tucson Interfaith HIV/AIDS Network; Pima County & City of Tucson Health Fair; El Rio Health Center; Chicanos Por La Causa; Tucson Planning Council for the Homeless; Arizona Women's Conference; NAACP; Arizona Coalition to End Homelessness; Southern Arizona AIDS Foundation; and Intermountain's annual holiday project to benefit children living on the Tohono O'odham reservation.
- CPSA also has extensive material published at their website in other languages and alternative formats, an innovative CPSA brochure that supports enrollment and treatment, is available in all CPSA reception areas and distributed at health fairs. In addition, The "Wellness Messenger" is a quarterly newsletter designed to educate members and their families regarding healthy lifestyle choices.
- CPSA was a sponsor of the 11th Annual Thanksgiving in the Barrio dinner, an event focused primarily on those less fortunate members of our community living on the Southside of town. Approximately 2,000 people attended. The main goal was to Increase visibility on the predominantly Hispanic community.
- As part of the Cultural Diversity Advisory Committee (CDAC), CPSA's Cultural Diversity Specialist participated in the Annual Gospel Rescue Mission's Thanksgiving Street Banquet. Activities: 106 monolingual Spanish or limited-English-proficient community members were surveyed to assess their perception of barriers to accessing behavioral health services around the issue of language.
- CPSA had a table/display at the 71st Annual Tohono O'odham Nation Rodeo & Fair. This event is the highlight of the Tohono O'odham Nation every year and draws tribal members from all over the reservation as well as non-tribal members. CPSA and Network materials as well as general health topics were displayed and available to attendees

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- CPSA's Director of Workforce Development staffed a table at the "2008 Diabetes Health Fair," an event hosted by the Tohono O'odham Nation. Goal accomplished: Over 2,500 people attended the day-long health fair. This helped to increase the impact of CPSA in the Tohono O'odham Nation community.
- On CPSA's Cultural Diversity Specialist participated as an exhibitor at Festival Familiar, a health fair geared towards Spanish-speaking families. CPSA's information booth contained handouts regarding a variety of behavioral health-related topics. Approximately 1,000 people attended the event.
- CPSA was a sponsor of the NAACP-Tucson Chapter's Annual Freedom Fund Banquet and 10 individuals represented CPSA at the event. Individuals in the community who have worked diligently to continue the legacy of NAACP were honored with community service awards.

Cenpatico

- Has done an excellent job at the outreach level, developing presentations and delivering marketing material for the Quechan tribal members, to the youth Advisory Council, to the Cocopah Indian tribe, to students at the Arizona Western College, and helping the homeless population in Yuma, who live along the river, by delivering personal hygiene products and access to care information.
- Cenpatico has presented to Sheriff's dept on the need of mental/behavioral/SA treatment for inmates, and Presentations to each of the tribal councils regarding services available and getting permission from the council to provide crisis, prevention and/or treatment services on the reservation per their request. The goal was to ensure tribal members eligible for services know what is available and the tribe allows Cenpatico to provide those services on the reservation.
- Cenpatico identified key communities to target for outreach to the Hispanic and African American populations. **Hispanic: Eloy, Coolidge, Casa Grande. African American: Randolph, Coolidge (Desert Beach community), Eloy...primarily identified through outreach and networking with various agencies who serve our populations.**
- Brochures and newsletters were available at outreach events in both English and Spanish.
- Conducted Outreach at monolingual Spanish and African American communities providing information on how to access care, Meth presentations, etc.
- Monthly meetings were held with the tribal council at Ak-Chin and San Carlos Reservations. Protocols discussed on how to provide crisis service

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(i.e. contact tribal police for escort to residence on the reservation), Ak Chin requested some behavioral health topics to be presented by guest speakers, and San Carlos requested some specific to suicide.

- Monthly health education presentations offered at both Ak-Chin and San Carlos Communities. About 3 at San Carlos, 6 at Ak Chin. Participation varied from 15 to 30 depending on the presentation topic and tribe. Ak Chin was monthly, San Carlos as requested. They feel much more connected to services by understanding what Cenpatico provides and how to access services.
- Participated in an SMI health fair at the Tohono Oo'dham community. The tribes feel much more connected when we can participate in their events on their land and bring our information to them with staff to answer questions for them. We have a booth that makes it easy for folks to walk up and get free pens and magnets while collecting information without having to identify themselves. This event was well attended for the community.

NARBHA

- NARBHA has developed successfully the Brochure for NARBHA network of care website available also in Spanish. Two PSAs were developed as well, regarding suicide intervention in White Mountain Apache and Navajo for radio broadcast. NARBHA was given free recording time from local radio station to continue with the project.
- NARBHA has updated the welcome sign and sent out to provider agencies to include Spanish, Navajo, Hopi, Tewa, Hualapai, and English languages. In addition, information on interpreter/translator services was added to include ASL and resources for persons with variant grades or visual impairments.
- An updated welcome sign has been sent to the Provider Agencies to include Spanish, Navajo, Hopi, Tewa, Hualapai, and English languages. In addition, information on interpreter/ translator services was added to include American Sign Language and resources for persons with visual impairment .
- A comprehensive media campaign for the NARBHA network of care launched on August 2008 and Radio advertising PSAs reaching the Navajo Reservation on Public Radio.

Goal 1.5 Explore development of formatted and scripted talking points for use in radio and available to all T/RBHAs to use as marketing strategy to increase knowledge and information on behavioral health services to members and potential members from diverse groups.

- The work group has developed of formatted and scripted talking points for use in radio and available to all T/RBHAs to use as another strategy to increase knowledge and information of behavioral health services to

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members and potential members. The following are samples of the talking points discussed:

What can someone get help with, when enrolled in behavioral health services?

Behavioral health services may include evaluation and management of depression, ADHS or ADD, bipolar disorder, personality disorders, serious mental illness (SMI), alcohol or substance abuse, community and school-based prevention services, and others.

Assistance may include:

- Counseling to help deal with feelings.
- Case management to help coordinate services.
- Treatment plans to help achieve specific goals.
- Transportation to and from treatment related appointments.
- Interpreter and translation services at no charge to the patient.

Crisis Line:

If a person is experiencing a personal, emotional, or mental health problem, there is immediate help available 24 hours, 7 days a week by calling [Crisis Line name and Number goes here]

What can a person expect when they call the crisis line?

(This could be a question for the speaker if in open talk radio)

The first appointment:

The person can bring a family member or friend to the first appointment for support. This first appointment may last up to two hours. During this appointment, there will be basic paperwork (name, address, phone, social security, insurance information if available, etc...) and questions about the person's behavioral health needs, medical history, and types of medications taken.

After the first appointment:

- Each person is assigned a case manager to help coordinate his/her services and care.

The RBHA MAGELLAN is currently working with diverse radio stations and has developed already most of the talking points that were discussed.

MAGELLAN

- Spanish radio outreach on "Hogar Dulce Hogar" talk, news and information show KDIR 740 AM to publicize "How are we doing?" community forum, access to RBHA services.
- Participate in KNUV 1190 AM Community Health Forum (Spanish-language radio)
- The M quarterly newsletter – available in English and Spanish, printed and distributed along Arizona Together Newspaper and posted on MagellanofArizona.com website.
- Crisis Cards – available double sided with English on one side and the following languages on the reverse: Spanish, Chinese, Korean and Vietnamese.

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- Magellan of Arizona brochure – printed in English and Spanish, distributed at all community outreach activities/events and presentations.
- Community Developer Presentation – Power Point presentation used to educate community about mental/behavioral health and substance abuse services, DBHS, RBHA, PNOs and QSPs.
- Magellan Fact Sheets – printed in English, Spanish, Chinese, Korean, Vietnamese, distributed at community outreach activities/events and presentations.
- La Voz two page spread – printed in and distributed in La Voz newspaper (May 2009) highlighting mental/behavioral health and substance abuse issues and services.
- Prensa Hispana full page spread – printed in and distributed in Prensa Hispana newspaper (May 2009) highlighting mental/behavioral health and substance abuse issues and services.
- Quarterly “How are we doing?” forums - held in February and May 2009. Interpreters are available to help Spanish-speaking community members understand the information presented as well as offer comments/feedback.
- “One in four” campaign – educational campaign launched in partnership with DBHS, NAMI and the Mental Health Awareness Coalition to educate the community about mental/behavioral health and substance abuse issues. Campaign ran from February 14 through the end of Mental Health Awareness Month in May 2009. The Campaign included a website: www.OneinFour.info and www.UnoenCuatro.info.
- Hispanic Town Halls – as part of Mental Health Awareness Month Magellan collaborated with Chicanos Por La Causa (CPLC) to conduct targeted town halls to reach and educate Maricopa’s Spanish speaking community about mental/behavioral health and substance abuse issues, services and programs. A series of three town halls were held in Tempe, south-west Phoenix and Avondale.
- Candlelight Celebration and “Through Our Eyes” Photo Exhibit – Magellan participated in the Mental Health Awareness Coalition’s Candlelight Celebration on May 1, 2009 held in the heart of Phoenix’s First Friday Art Walk. The Celebration included informational tables/booths, a slide show of the “Through Our Eyes” photo exhibit – presentation of what recovery means to service recipients depicted through photographs of every day activities/events, (service recipients took all photos). Magellan also commissioned additional photos of youth, service recipients and family members who are in recovery.

- Fact sheets translated into Spanish, Korean, Chinese and Vietnamese.

Goal 1.6 Develop format for T/RBHAs quarterly cultural competency plan update and schedule to submit to Advisory Committee (See attachment 1)

- Increase the contractually required quarterly reporting of progress by RBHAs in activities on the DBHS cultural competency plan and their own plan.

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- The template was distributed to the TRBHAS and has been used for reporting of the quarterly updates. Each RBHA representative has to submit a short narrative progress report on a monthly basis to the person in charge by email or presenting it to the Advisory Committee Meeting.
- This report will inform the DBHS Cultural Competency Advisory Committee of the progress of the TRBHA and the information is being included in the monthly meeting minutes. The report is due two days prior to the committee meeting.

Goal 1.7 Introduce the use of a screening tool and referral process for use by prevention providers with youth with behavioral health and substance abuse problem and referral to increase access to treatment for minority groups.

This allows us to increase prevention activities by prevention providers for use with youth to increase access to treatment for minority groups.

The screening tool has been developed and printed (see attachment 2). The next step is to develop training (s) for the implementation, as well as, the distribution process; these two items will be included at the DBHS 2009-2010 CC plan.

Among with the screening tool the form Early intervention was developed and translated into Spanish, now available in PDF format and can be completed electronically. This form is used to track the referral and the screening, DBHS prevention area is expected to have data by the end of August, and the analysis of the data will be included in our CC plan 2009-2010.

Goal 1.8 Increase the number of youth screened in behavioral health and substance abuse who are participating within prevention programs to identify the potential need for behavioral health and substance abuse treatment services

Even though the screening data is pending DBHS and the TRBHAs have developed and implementing the following culturally targeted prevention programs.

The Office of Individual & Family Affairs from DBHS has coordinated a statewide youth leadership conference and promoted a variety of outreach activities and support to youth and young adults.

PREVENTION

NATIVE AMERICAN INITIATIVES

- Hualapai (Received services via NARBHA)
NARBHA provided ongoing technical assistance to Hualapai related to substance abuse prevention and suicide prevention
- Northern Arizona Native American Suicide Prevention and Awareness Coalition, also known as MBrace Life (sponsored by NARBHA)
Involves an annual conference on Native American suicide prevention
- San Carlos Apache Nation (Receives services via CPSA and Cenpatico)

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- Developed a new strategic plans for suicide and substance abuse prevention
- Tohono O'Odham Nation (Receives services via CPSA)
 - Youth from TO participated in Youth Educated for Success
- Ak-Chin Indian Community (Receives services via Cenpatico)
 - Continued implementation of afterschool youth leadership program
- Hopi Nation (Receives services via NARBHA)
 - Participated in MBrace Life
- Ft. McDowell (via Magellan)
 - Established new substance abuse prevention coalition
 - Active participation in the statewide workforce development committee

LATINO INITIATIVES

Campeños Sin Fronteras (Yuma)

- Suicide Prevention
- Cross border collaboration
- Involvement in Yuma county substance abuse prevention coalition

Chicanos Por La Causa (Phoenix)

- Excellencia Coalition in Phoenix.
- Implementation of Hasta Aquí! campaign on underage drinking.

Valle del Sol (Phoenix)

- Development of a substance abuse coalition

Scottsdale prevention institute (Scottsdale)

- Promotoras
- Coalition for substance abuse prevention

Luz Social Services (Tucson)

- Parent support and education
- Community development

Pinal Hispanic Council (Pinal County)

- Community development

AFRICAN AMERICAN INITIATIVES

Tanner Community Development Corporation:

- Forming a coalition to assess substance abuse prevention and suicide prevention needs of the African American community in South Phoenix. This coalition includes active representation from faith-based communities and other stakeholders such as the African American veterans association.

REFUGEE INITIATIVES

Terros (Phoenix)

- Parent support and education

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- La Frontera (Tucson)
- Parent support and education
 - Youth leadership development

HOMELESS INITIATIVES

- Community Bridges (Maricopa County)
- Parent support and education
 - Life skills training
 - Training in suicide prevention

GAY, LESBIAN, BISEXUAL, TRANSGENDER INITIATIVES

- Southern Arizona AIDS Foundation (Tucson)
- Youth leadership development
 - Life skills training
 - Training in suicide prevention

OLDER ADULT INITIATIVES

- Pinal Gila Council for Senior Citizens (Pinal and Gila Counties)
- Peer leadership development
 - Community based life skills training
 - Community development
 - Training in suicide prevention
 - Received a special grant from SAMHSA to help with the program evaluation

PERSONS WITH DISABILITIES INITIATIVES

- SMILE (Yuma and La Paz Counties)
- Life skills education and support for adults with physical and neurological disabilities.

- YMCA (Maricopa County)
- Developed a county wide coalition to conduct an assessment of need for substance abuse prevention among persons with physical and neurological disabilities. Membership includes a variety of key stakeholders such as representation from the local disabled veterans group.
 - Conducted peer led life skills education and support for adults with physical and neurological disabilities.

The T/RBHAS had implemented other initiatives such as:

Cenpatico

- Established Youth Advisory Councils in each GSA (2 and 4) to develop strategies for enrollment and engagement
- Family Fun Night in GSA 2 at Marcus Pool: The entire community was invited to attend with prizes and information on the Youth Advisory Council, how to join and how to obtain services

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- Submitted proposal for youth conference and additional community events for SIG funding to DBHS, but additional funding was denied.
- Presentations to schools and coalitions on services available and how to access services
- Distributions of our Access to Care brochures to the Latino Family Involvement Center

NARBHA:

- Prevention Programs – offered in both Spanish & English populations (Parenting AZ, Prescott Family Resource Center); (Project Resiliency - a Flagstaff based program for Hispanic population to learn the 40 developmental assets); Reconnecting Youth (a program specific to Native American Youth).

MAGELLAN:

- MY Fest 2009 promotion – Magellan recorded a Spanish invitation to MY Fest 2009, which aired on local Spanish language radio station two days prior to the April 11 event.
- MY Fest 2009 – Youth led music, art and entertainment festival held Saturday, April 11, 2009. MY Fest promotion was targeted at youth and families throughout Maricopa County. Event promoted in English and Spanish via flyers, emails and media partnerships.
- Creation of bilingual (English – Spanish) promotora training curriculum to incorporate Promotoras in outreach efforts.
- Development of Latino Initiative Outreach plan to be piloted in zip code 85254

CPSA:

- One GSA 5 Children's Network has a Spanish Speaking treatment team made of bilingual and bicultural case managers, clinical liaisons and doctors intended to serve monolingual Spanish speaking children and their families.
- GSA 5 children's Network has a team dedicated to providing services to the Native American youth on the Tohono O'odham Nation.

- **Objective 2: Support RBHAs in increasing their capacity to provide culturally and linguistically responsive services to and decrease behavioral health disparities.**

Goal 2.1 Quarterly report on usage of interpretation by RBHAs and their providers

The quarterly reports has been gathered by each RBHA, and reported to the CC advisory committee meetings.

Goal 2.2 Review and analyze the use of interpretation in regions and 2.13 RBHA analysis and report on the interpretation usage in their region

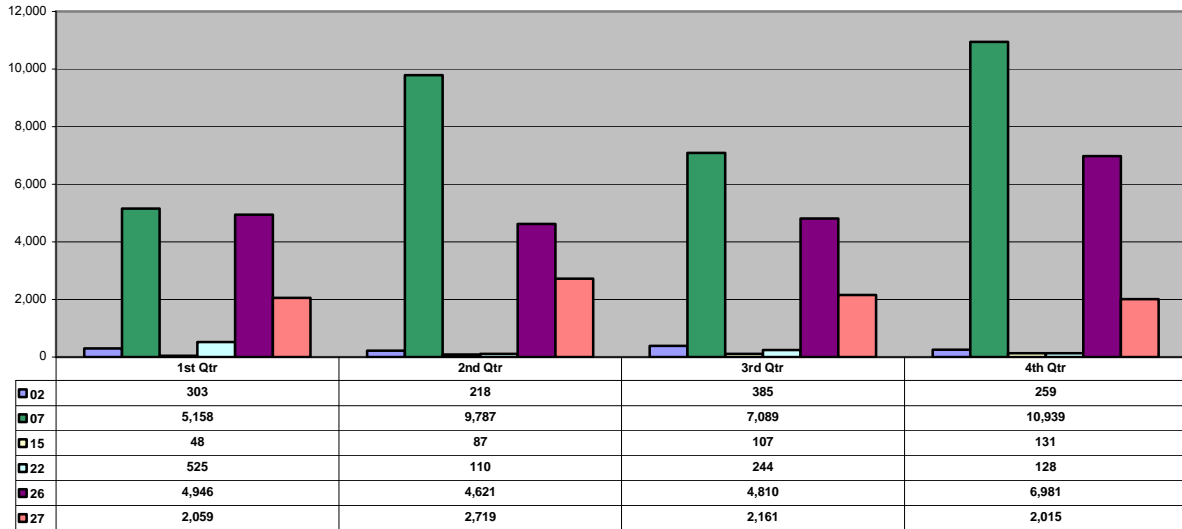
REPORT ANALYSIS:

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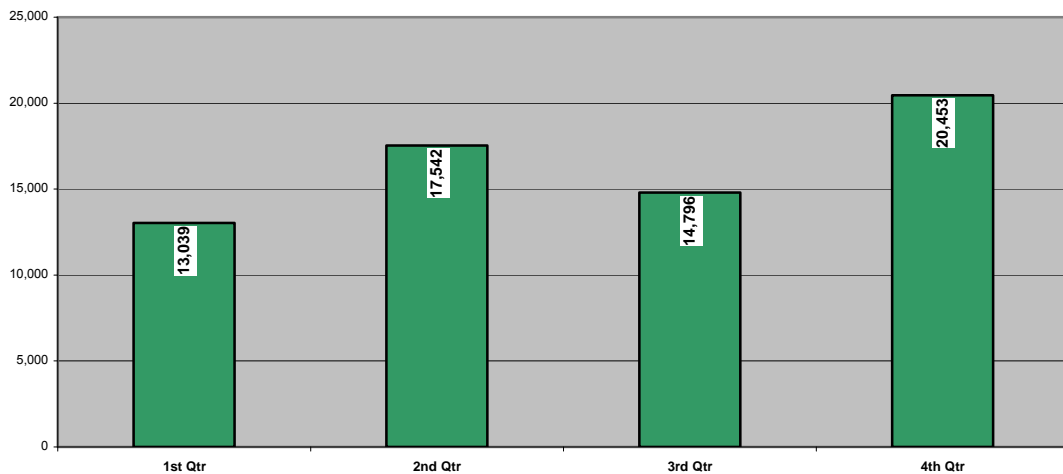
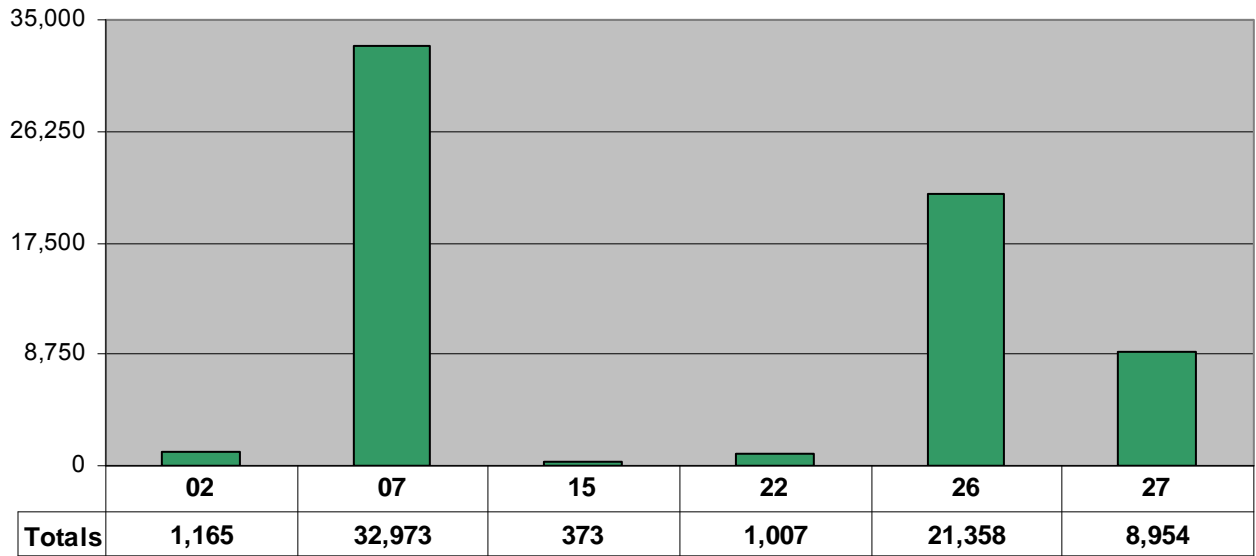
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	FY09
02	303	218	385	259	1,165
07	5,158	9,787	7,089	10,939	32,973
15	48	87	107	131	373
22	525	110	244	128	1,007
26	4,946	4,621	4,810	6,981	21,358
27	2,059	2,719	2,161	2,015	8,954
Total	13,039	17,542	14,796	20,453	65,830

CBHS 02 and 22
 Magellan 07
 NARBHA 15
 CPSA 26 and 27

* Data gathered from the ADHS CIS system on July 21, 2009.
 All encounters are add records. Void records were not included.



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2.3 Identify the specific elements for training content of staff on diverse cultures and 2.5 Identify content experts for various trainings that can be used statewide to increase awareness of other cultures and 2.6 Develop curriculum or method or opportunities for trainers on diverse groups listed above for staff to attend. such as:

- **Deaf and the Hard of Hearing.**
- **GLBTQ**
- **Native American**
- **Asia and Pacific Islanders**
- **African American**
- **Hispanic/Latino**
- **Blind and Visually impaired**

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List of training content elements

NARBHA

- Two trainings delivered on the Culture of the Deaf and Hard of Hearing occurred in February and March. Content expert identified for capacity building of resources for Hispanic/Latino communities in Region
- NARBHA provides Bring Your Own Lunch Trainings on these specific topics annually for the past 3 years; at least 3 times per year. NARBHA plans to continue this activity
- NARBHA has developed and implemented a curriculum or training on Native American Tribal Governments to inform staff on how to be responsive Native American culture and protocols, such training has been previously reviewed and approved by DBHS.
- The first training was held in December 2008 and this module has been incorporated into the Essential Learning module and administered to all administrative and clinical staff as new hires.
- NARBHA sponsored training on the Provision of 638 services with IHS, DBHS, AHCCCS and approximately 30 participants from six Tribes, along with NARBHA staff.
- NARBHA held the two trainings of a three-part series on "Cultural Competence and the Hard of Hearing Community" which was well attended in Prescott, and Kingman and Flagstaff via telemedicine.
- Deaf and Hard of Hearing Populations - Michele Michaels - Hard of Hearing Specialist - Arizona Commission for the deaf and the hard of hearing
- Counseling Latino Populations - Blanca Obregon - Licensed professional counselor
- Gender Variance, Expression and Identity - Kim Pearson - Executive Director Trans Youth Family Allies, Inc.
- Compulsive Gambling Marc Zuch - Chemical Dependency Counselor Northern Arizona Healthcare
- Supporting Non-Verbal Clients in their Communication - Katherine Mahosky - Institute for Human Development/NAU
- NARBHA has conducted also Cultural Competency Brown Bag Trainings, 3-4 times per year/2 hours each.

CPSA

- CPSA provided various trainings on cultural concepts for the current reporting period. All trainings are intended to increase participant understanding of their own culture as well as other cultures. Target populations have included the elderly, Native American and LGBTQ.
- The training plan incorporates the following topics and/or programs
 - (1) Uncovering Perceptions of Diversity (formerly Exploring Cultural Awareness),
 - (2) Documenting Culture,
 - (3) Specialized topics (i.e. LGBTQ, hearing impaired, homeless populations, refugees, specific ethnic/minority groups). Such as:
 - Trauma on American Indian People
 - Uncovering Perceptions of Diversity
 - Specialized Training Topic (*LEP and Spanish Speaking Clients*).

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- Documenting Culture
- Working with Older Adults
- Uncovering Perceptions of Diversity
- Substance Use and Older Adults
- Documenting Culture
- Uncovering Perceptions of Diversity
- Specialized Training Topic (Tentatively Homeless Populations in Southern AZ)
- Specialized Training Topic (Understanding Racism)
- Documenting Culture

Training contents such as:

- Diagnostic elements for older adults
- Common cultural norms of older adults
- Strategies for working with older adults
- The prevalence of substance abuse disorders amongst the elderly
- Diagnostic elements for LGBTQ identified
- Working effectively with the diverse LGBTQ identified
- Learning about the Transgendered community
- The importance of storytelling in native culture
- Understanding the role of behavioral health within the Tohono O'odham communities
- Unlocking the Secret Chamber: Implications of Historical Trauma on American Indian People
- Assessment/Differential Diagnosis for Older Adults – Elderly Diagnostic elements for older adults - Linda S. Durst, MD, Mindy J. Fain, MD
- Understanding the Culture of Older Adults – Elderly - Common cultural norms of older adults - Anne E. Morrison, MPA
- Strategies for Working with Older Adults – Elderly - Strategies for working with older adults - Donna Carender, MSG
- Substance Use Disorders and Aging – Elderly - The prevalence of substance abuse disorders amongst the elderly - Bill Burnett
- Therapeutic Assessment & Interventions for the LGBTQ Population – LGBTQ - Diagnostic elements for LGBTQ identified - Laurel Header Milden, MA, LISAC, CPS, Stephen Nicholas, MSW.

MAGELLAN

Has developed an extensive training program in which are included topics as:

- Native Americans of the Southwest
- HIV/AIDS Update
- Ethics
- Specific Seminars to Address Adult and Youth System
- Gay Families who Adopt and Foster

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- GLBTQ Youth and Diverse Ethnic Groups
- Grandparents Raising Grandchildren
- Domestic Violence
- Single Dad's Raising Families
- Muslim Community
- Refugee Community
- Dealing With Clients with Schizophrenia
- Teen Drug Prevention
- Culture of Poverty
- Young Adults (age 18 – 25)
- More on Native Americans
- Do's and Don'ts About Different Cultures
- Refugees (who are they, why are they here, what are their needs)
- System Issues Discussion

The topics and presenters were the product of an extensive brainstorming of the Internal Magellan Cultural Competency Advisory Committee as well as the QI Cultural Competency Committee. Topics and presenters were delivered as bi-monthly brown bag seminars and they are as follows

- Deaf Culture - Arizona Commission for the Deaf and hard of hearing/Beca Bailey
- Transition from combat to home - National Guard Michael A Stanisch, SSG, AZARNG & Ryan Morrissay, LT
- Elderly Issues in Mental Health - Area Agency on Aging, region I/Bianca McDermott & Haven Senior Horizons Outpatient, Melissa Flint, Psy D.
- The Talking Circle as a treatment tool - Native American Connections/Yvonne Fortier & Hedy Emery
- Asian Americans and barriers to Mental Health - Asian Pacific Community in Action/ Emma Ditsworth
- GLBTQ population and barriers to mental health - RRR/Nicholas Love

CENPATICO currently have 17 TOTs

CENPATICO has worked very conscientiously in developing and implementing a comprehensive training as follows:

- Meet and Greet Pointers:
- Signs of Respect/Disrespect:
- Health beliefs and view on Behavioral Health Services:
This would provide some insight on traditional healing customs, the importance of home and herbal remedies, etc.
- Family Roles:
- Most important in their life:
- Communication:
- Perception/Importance of Time
- Meth Presentation - Maria Aguire WACOG (Somerton) Ines Pampara Methamphetamine & "How to Access Services" brochures. SAPT flyers Staff conducted a Spanish Meth presentation to WACOG parents
- Teri Lambert AWC Elizabeth Jackson General information on mental health topics such as schizophrenia, depression, and bipolar disorder.

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- Crisis cards, "How To Access Care" brochures. Information on the dangers of substances such as methamphetamines, marijuana, tobacco, cocaine, alcohol, OTC's, and prescription medication.
- Staff attended the Community Health Fair hosted by and at AWC. There were approximately 200 community members and college students in attendance.
- WACOG - Orange Grove Somerton - Maria Luis Ortiz Ines Pampara Methamphetamine & "How to Access Services" brochures. Crisis cards & SAPT flyers Staff conducted a Spanish Meth presentation to Headstart parents. Ten parents attended
- Pre-Summit Cook-out Sheriff's Office - Elizabeth Jackson "How to Access Care" brochures, crisis cards, general information on the effects of various substances.
- Staff attended the Pre-Summit Cook-out held at Carver Park and hosted by the Yuma County Meth Nucleus Group. Various local community agencies provided information regarding services available. There were approximately 150 persons in attendance.
- Cocopah Wellness Expo Elizabeth Jackson How To Access Care Brochures, Stress balls, stress cards, Crisis Cards, general information on mental health and substance abuse issues targeting both adults and children/adolescents. Staff attended the Cocopah Wellness Expo along with Sheina Yellowhair. There were approximately 150-200 attendees.
- Adriana Mares Cocopah Social Services Elizabeth Jackson Staff attended meeting with Cocopah Social Services Director Adriana Mares and Cenpatico Tribal Liaison Sheina Yellowhair to discuss networking barrier concerns brought up by CIA staff. After discussion it was confirmed that a meeting will be scheduled with Cenpatico, Cocopah Social Services, and CIA staff
- Quechan Social Services Elizabeth Jackson and Sheina Yellowhair Meeting held with Quechan social services staff. Reviewed barriers of tribal members being California residents. It was decided to conduct monthly collaboration meetings
- David Harper CRIT Diabetes Program Elizabeth Jackson Pamphlets regarding effects of methamphetamine use Staff conducted a PowerPoint presentation on the effects of methamphetamine use during the CRIT Youth Summer Program. There were approximately 40 youth in attendance
- San Luis High School Miguel Contreras Ines Pampara How to Access Services brochures & Crisis cards Staff met with Miguel Contreras, Counseling Director and discussed the crisis hotline and how to access services.

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- Fernando Padilla Community Center - San Luis, AZ Matha Ines Pampara: Methamphetamine & "How to Access Services" brochures. Crisis cards & SAPT flyers Staff attended the San Luis Community event. There were approximatley 1,200 attendees and the majority were Hispanics and migrant workers.
- Sunset Community Clinic in San Luis: Ines Pampara "How to Access Services" brochures and Crisis Hotline cards. Provided attendees with brochure listing of CENPATICO providers, and encouraged the attendees to please feel free to call with any questions and/or concerns. Larger population "Hispanics" and migrant workers

Goal 2.4 Explore the possibility of using video/training and other methods for training for diverse cultures

NARBHA

First training held in December 2008 and Native American culture and protocols module has been incorporated into the Essential Learning module all administrative and clinical staff receive as new hires.

Has developed various trainings via E-learning.

MAGELLAN

Has available an E-learning tool to accomplish with all the DBHS requirements and it is posted into their website: <https://magellan.learn.com/learncenter>

CPSA:

CPSA has completed and posted the Language Protocol E-Learning Module intended to assist Network staff to understand CLAS Standard Language Access Services requirements.

CENPATICO was assigned by the committee to develop and implement training through GoToWebinar, the following is a description of the webinar tool

GoToWebinar has the following functions:

GoToWebinar™ features make it simple for you to set up, conduct and analyze Webinars yourself – no need to pay for additional event-management services.

Feature

Benefit



**Automated
Registration
Templates**

Using your Webinar description, GoToWebinar will craft your email invitations, confirmations and reminders for you – or you can customize them to fit your needs.

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Total Audio Service

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Host and attend meetings on your Mac® as well as on your PC.



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Monitor Webinar attendance, interest and satisfaction using at-a-glance Dashboard charts.



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Sharing**

Broadcast a view of either your desktop or a specific application to Webinar attendees.



Polling & Surveys

Get audience feedback by launching polls and surveys.



**One-Click
Webinar Entry**

By simply clicking the link in the confirmation email, attendees can enter your Webinar in seconds.



**Text Question
& Answer**

Attendees can ask questions and give feedback to Webinar presenters in real time.



**On-Demand
Reporting with**


Get a ranked list of qualified attendees that you can import into your CRM system for follow-up.

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Interest Rating

DBHS and the RBHAS are currently working on the development of trainings using the video and more innovative methods to reach more people using technology.

Goal 2.7 Explore revisions to the individual person cultural competency assessment.

This item was discussed by DBHS and the Cultural Experts from the TRBHAS and decided that will be develop it in the Cultural competency plan 2009-2010. The tool has been posted into the DBHS webpage and it is available for all the RBHAS and providers at the following location: [ADHS/DBHS Personal Cultural Competency Self-Assessment](#) 

Goal 2.8 Development of curriculum or training on Native American Tribal Governments to inform staff on how to be responsive Native American culture and protocols. See attachment 3

The curriculum was developed and implemented by NARBHA and CPSA, CENPATICO and MAGELLAN and all have incorporated it successfully into their training contents, the attachment 4 is a sample of the NARBHA and MAGELLAN ´s curriculums.

Goal 2.9 Identify the existing culturally appropriate strategies and programs currently available through each RBHA for each of the following ethnic and racial groups

Native American

Hispanic

African American

DBHS has various programs and initiatives the set and example for the TRBHAS to follow, one of them is what the Office of Individual & Family Affairs has organized, developed and implemented.

The OIFA was created in 2006 to advance empowerment of individuals, family members and youth in the recovery process and to ensure that their voice is heard and included in all major decisions pertaining to Arizona’s behavioral health system. Its presence ensures that individuals, family members and youth are equal partners at all levels in initiating and sustaining improvements in Arizona’s behavioral health system. OIFA is staffed by peers and family members who are also behavioral health professionals. promotes recovery, resiliency and wellness for individuals having mental health and substance use challenges and their families, as well as a strengths-based, recovery-oriented statewide system of behavioral health care for Arizona.

The OIFA/DBHS Accomplishments related to reduce disparities and outreach underserved/minorities over the past 12 months include:

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- Hosted a summit of culturally and geographically diverse peers, family members and behavioral health professionals to provide guidance to OIFA on prioritizing its statewide focus.
- Led a diverse delegation in the development of a statewide Family-Driven Care system focus, which includes a statewide policy, provider procedures, contract language and a practice improvement protocol.
- Led agencies that provide Peer Support Training in the development of key elements which are required in all peer support training curriculum to be state-certified and meet CMS requirements.
- Coordinated activities of the Arizona Stigma Reduction Committee in raising public awareness to reduce stigma related to behavioral health and promote social inclusion throughout the state, including English and Spanish language materials and community presentations.
- Coordinated a statewide youth leadership conference and promoted a variety of outreach activities and support to youth and young adults.
- Conducted outreach to minority groups, including Latino, elderly and LGBTQ.
- An Advisory Council, rich in cultural and geographical diversity, is being established to provide ongoing guidance to the Office.
- Creation of web pages on the ADHS/DBHS website for the Office and Arizona Stigma Reduction Committee activities and information.
- Creation of an online communication tool, *Arizona Happenings*, and maintenance of a related listserv to inform service recipients, family members and the behavioral health community of activities, accomplishments, issues and events occurring at the federal, state and local levels.
- Hold informal *Let's Talk* forums in statewide communities as a means of grassroots level communication between service recipients, family members and the behavioral health community with Division leadership.

A lot of new initiatives and programs have been designed and implemented by the TRBHAS in pursuit of this goal, such as the marketing – communication strategies, youth outreach, minorities outreach, various trainings and presentations, and has been broadly cited above on this report.

Goal 2.10 Increase the number of culturally appropriate strategies and programs currently available through each RBHA/provider to improve number of behavioral health recipients accessing behavioral health services for each of the following ethnic and racial groups

Native American

Hispanic

African American

Please see all the initiatives/programs and strategies described on the Bi-annual [Diversity Penetration Report](#). See [attachment 4](#). As DBHS had explained broadly on this effectiveness review most of the initiatives, plans and strategies that the RBHAS had been working and increasing their efforts to improve the number of Behavioral Health Services for all the minorities or underserved communities identified within their GSA 's.

Here are some of the samples:

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MAGELLAN:

Is currently working with ADHS to coordinate efforts for the South Mountain Village Wellness Coalition and Project LAUNCH/Tapestry, these is a brief description of the project, for the complete presentation **See attachment 5.**

During the Fall and summer of 2008: Based on the needs of the community, feedback from stakeholders and current data, Magellan of Arizona reached out to Hispanic community in zip code 85040. Magellan invited key community leaders and agencies to join outreach effort.

A steering Committee was formed and begun to meet to identify outreach and education tactics/vehicles and to develop outreach and education plan.

Vision: Raising awareness of behavioral health and access to services to foster healthy individuals, families and communities in a safe environment.

Mission: The South Mountain Village Wellness Coalition will be community driven and focused, utilizing culturally appropriate outreach to promote easy access to services and to empower the community to have a vested interest in their own well being.

- Coordinating outreach with the Mexican Consulate which could provide other Valley-wide opportunities, and creating strategy for Hispanic Heritage Month (9/15 – 10/15). The meeting/presentation scheduled for 7/30 resulted in Magellan promoting their contact info in their newsletter.

CPSA

The latest issue of [*The Wellness Messenger*](#) was published this week.

Backburner: Communications continues work on a tri-fold brochure about the Criminal Justice Team's goals and services.

NARBHA

The NARBHA Web site now has a link on the left nav bar – a Mexican flag – that will take a user to the entire Web site in Spanish.

- Looking into translating parts of the Member Handbook including crisis/emergency, translation/interpreter services, grievance and appeals and general information, into Hopi and other native languages.
- Creating an abbreviated version of the Network of Care site into native languages is also being researched. Some of these will need to be recorded since they are not written languages.
- Working with the Hopi Foundation on an event in October that will address veteran and trauma. Working with the Native American Suicide Coalition on the MBrace Life Conference at the end of September at the Lodge at Cliff Castle.

CENPATICO

On 8/4, Horizon Health Services is holding an open house event in Yuma. One TV station (KYMA) and a radio station are scheduled to attend and interview Terry. A reporter from *The Yuma Sun* is also expected to be there.

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- Currently, a hard copy list of natural supports from all communities is included in packet for providers. Cenpatico is working to convert this information into an online database which will also be made available to the general public via their Web site.
- Still working on posting the recorded presentation from Show Low Police Chief Smythe about parental education for drug prevention on YouTube, linking to the Facebook page.

For community network teams, Cenpatico is posting their events on their Facebook page and sending out announcements on Twitter.

Pursuing a training/Webinar opportunity on transgender cultural competency. Developing cultural competency training addressing diversity awareness for different populations. This training will be offered via Webinar. The Hispanic/Latino and Native American modules are in draft form. Culture of Poverty and African Americans are in development.

Goal 2.11 Increase the number of culturally appropriate strategies and programs currently available through each RBHA/provider to improve engagement and retention of behavioral health recipients receiving behavioral health services for each of the following ethnic and racial groups

Native American

Hispanic

African American

Please see all the initiatives/programs and strategies described on the Bi-Annual [Diversity Penetration Report. See attachment 4](#)

outreach
effectiveness

The engagement and retention has been linked directly to the RBHAS marketing and initiatives, as well as the prevention programs. Throughout in the s report you will find various samples of how DBHS had lead and collaborate with the RBHAS to focus more activities to accomplish this goal

Goal 2.12 RBHA to develop interpretation and translation policy and language testing criteria

- The draft for a written procedure for Interpretation and translation testing of staff in languages other than English, including a stipend for the bilingual tested staff to ensure the quality of interpretation and translation services provided by internal staff, was already submitted by all the RBHAs.

Goal 2.14 RBHA /provider to complete the cultural competency organizational assessment and 2.16 RBHA analysis and report of provider cultural competency organizational assessment

The Cultural Competency Activities Assessment (CC Assessment) was conducted with the ADHS/DBHS providers online using an internet survey provider (<http://www.surveymonkey.com>). The survey was developed by the National

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Goal 3.1 DBHS Diversity Report placed on the DBHS Webpage at the following location [Diversity Report - July 2006 to June 2007](#) and at the RBHA web sites

- DBHS and all the RBHAS have the Diversity Report posted at the websites.
- The new Diversity Report July 2008 to December 2008 has been posted at the following location <http://www.azdhs.gov/bhs/annualrpt.htm>

This report will serve as a baseline of enrollment and penetration rates for the different racial/ethnic groups included. Although diversity initiatives by ADHS/DBHS and contractors will encompass populations from other minority groups and subgroups such as youth, elderly, women, deaf and hard of hearing, lesbian/gay/bisexual/transgender, the blind and the disabled, this report in the short run will be limited to data for racial/ethnic and age groups only. Future developments will attempt to expand measurements of broader audiences as data collection and systems are improved. In the mean time, this report will be used to provide bi-annual updates as ADHS/DBHS continues its journey to reduce minority health disparities in the behavioral health system of Arizona. [See attachment 4](#)

Goal 3.2 Deaf or Hard of Hearing Survey of Providers placed on DBHS and T/RBHA web sites

In 2007, the Deaf and Hard of Hearing Survey of Providers (Attachment A) was conducted for the first time. Regional Behavioral Health Authorities (RBHAs) required their providers that conduct intake and enrollment to participate and complete the survey. CPSA had all six, Cenpatico eighteen and NARBHA included seven of its providers. Magellan took a broader approach and included enrollment providers as well as others providers for a total of eighty five. A total of 125 participating providers completed the survey via internet between October 2007 and May 2008.

The Deaf and the Hard of Hearing Survey of Providers report has been placed on the DBHS Webpage at the following location [Deaf and/or Hard of Hearing Survey of Providers – October 2007 to May 2008](#)

Goal 3.3 RBHA cultural competency organizational assessment placed on Web site

The following is the location of the DBHS Cultural Competence Organizational Assessment Protocol and the tool.

[ADHS/DBHS Cultural Competency Organizational Assessment Protocol](#)

Attachment 1

RBHA Cultural Competence Progress Report

Each RBHA representative will submit the following short narrative progress report on a monthly basis to Norma Garcia-Torres by email email@address.gov

The report will inform the DBHS Cultural Competency Advisory Committee of the progress of the RBHA and the information will be included in our monthly meeting minutes. The report is due two days prior to the committee meeting.

T/RBHA:	
Submitted by:	
Month:	

Progress on Cultural Competence Plan

- XXXX is participating in Marketing Workgroup.
- XXXX submitted report on usage of interpretation by RBHA's and Providers.
- XXXX res ubmitted list of content experts identified to train on various cultures, including Native American trainings.
- Cultural strategies and programs reported through XXXX's Marketing Report and Bi-Annual Diversity Report.
- XXXX developed and implemented a bilingual proficiency policy.
- XXXX and the Networks completed the Organizational Assessment.
- XXXX and the Networks are in compliance with the DBHS Cultural Competency training.
- XXXX has placed the Organizational Assessment results on the XXXX website.

Accomplishments/Special Announcements

- XXXX staff are in 100% compliance with the DBHS Cultural Competency training.
- XXXX has created an internal Spanish document reviewer position to ensure the accuracy of the Spanish translations we receive from our vendor.
- XXXX has completed and posted the Language Protocol E-Learning Module intended to assist Network staff to understand CLAS Standard Language Access Services requirements.

Technical Assistance Requested

- None at this time

Feedback from DBHS Cultural Competence Committee

