

Summary

Merced County Behavioral Health and Recovery Services Cultural Humility, Health Equity & Social Justice Committee

January 21, 2021
10:05 am – 11:00 am
Behavioral Health & Recovery Services
via Teleconference

Present:

Sabrina Abong, Trechann Barber-Jacinto, Alyssa Castro, Vong Chang, Jose Chavez-Diaz, Fernando Granados, Christopher Jensen, Sharon Jones, Dwayne Kawakami, Cindy Mattox, Marilyn Mochel, Nancy Motion, Ismael Munoz, Maria Orozco, Nancy Reding, Cara Rupp, Anna Santos, Ralph Silva Rodriguez, Sonia Suria, Ker Thao, Cari Urquiza, Belle Vallador, Griselda Vazquez, Siouxouyee Vue, Wayne Yang

Presentation and Discussion:

All Members

I. Check-in/Conocimiento

Sharon asked that those in attendance email Maria Orozco to confirm their attendance.

II. Approval of Minutes

The approval of minutes for December 17, 2020, was motioned/seconded (Nancy Reding/Sabrina Abong) and carried.

III. Building a Culture of Humility – Forum Update

Sharon provided an update on cultural humility forums. Two forums have taken place so far. Common themes have included discussions on the meaning of humility, discussions on ethnocentricity and not feeling safe in interactions with others. Sharon encouraged individuals within the committee to attend upcoming virtual forums.

Trechann Barber-Jacinto, BHRS, shared that part of having humility takes awareness and insight, as well as an environment that is safe, where one feels comfortable. Trechann said she is glad BHRS is spearheading these forums and asked what the goal of the forums is. Sharon said the goal of these forums is to foster a culture of lifelong learning and critical self-reflection.

IV. Department Mission & Philosophy

Sharon Jones shared the department mission: “Merced County Behavioral Health and Recovery Services is committed to empowering our diverse community, with hope, recovery, and wellness by providing comprehensive, holistic care.” Sharon said that in order to provide holistic care, we have to let the clients and families we work with be the experts and understand who we are serving and learn from them. Sharon shared the department vision: “Inspiring hope and recovery for those we serve as the premiere provider for quality whole person care.” Sharon noted the importance of implementing holistic tools to inspire hope and recovery.

Sharon also shared the code of conduct, which states, “Maintenance of high ethical and moral standards is the fundamental basis for effective government. Public confidence in government is endangered when ethical standards falter; therefore, all Merced County employees must act with the highest degree of integrity, impartiality, and devotion to the public interest.” Sharon emphasized the importance of remaining humble to staying aligned to our mission, vision, and code of ethics.

Alyssa Castro commented that she was happy to see the mission and vision statement.

V. Total Estimated and Projected Population for Merced County

Sharon Jones shared the total estimated population of Merced County. Currently there are an estimated 287,420 residents in Merced County. Sharon noted the different racial and ethnic groups within the county, as noted by the U.S. Census data. She noted the importance meeting the needs of these particular population groups when it comes to planning.

Wayne Yang had a question from the Hlub Hmong Center said he is glad to see the data presented and asked if it would be possible to see the data aggregated to reflect the Hmong communities in Merced County. Sharon shared that one of the recommendations BHRS received during a recent external review was to work on aggregating the data to better reflect the Hmong community, and that BHRS will be striving to collect more culturally specific data.

Christopher Jensen, BHRS, highlighted the importance of collecting feedback from focus groups, key informant interviews, and wisdom holder interviews, where the story can be conveyed versus relying on data, which often does not accurately reflect small counties.

VI. Cultural Competence Criterion

Sharon shared the criterion as defined by the state for the Cultural Competence Plan. There are a total of eight criterion including:

- Commitment to cultural competence
- Updated assessment of service needs
- Strategies and efforts for reducing racial, ethnic, cultural, and linguistic mental health disparities
- Client/family member/community committees
- Integration of the committee within the county mental health system
- Culturally competent training activities
- County's commitment to growing a multicultural workforce: hiring and retaining culturally and linguistically competent staff
- Language capacity
- Adaptation of services

Sharon noted the importance of keeping clients and family members at the heart of the department and adapting services to meet consumers' needs.

Trechann Barber-Jacinto, BHRS, said that per the SUD Drug Medi-Cal Organized Delivery System (ODS), there was a recommendation to have a more comprehensive reflection of how SUD is reflected in this plan. She noticed that the criterion specifically apply to mental health systems. She asked if it would be possible to change the criterion to incorporate SUD. Sharon said that we are unable to change the specific criterion, as they are set by the state and codified in the Welfare and Institutions Code, but the plan can be enhanced to be more inclusive of SUD. Some feedback and additions have already been received from SUD staff. Trechann said it is interesting that the state would like us to take a cultural humility approach, but there is still some segregation between the two when we are trying to bridge to become one. She would like to see some modifications to the criterion to reflect ODS. Sharon believes the state is gradually working being more inclusive, but an updated criterion has not yet been developed.

Nancy Reding said she would like to point out that the state does not mention gender identity in the criterion, which she would like to see incorporated.

Marilyn Mochel thanked Sharon for sharing the department's mission and vision and suggested that the committee review it because it would be important to incorporate something about equity, providing cultural responsive care, being responsive to individuals' cultural health beliefs and practices, and using culturally responsive approaches, so we can link the department to the plan. She asked if this group can make a recommendation to update the mission and vision statement.

VII. Draft Cultural Competence Plan

Christopher Jensen, BHRS asked if the committee was going to review the cultural competence plan under this agenda item. Sharon said she placed the agenda item on the agenda because the plan has been sent to everyone for reviewing and if anyone has any feedback to send the feedback via email, as some individuals already have. Feedback during the meeting is also acceptable. Christopher said he appreciates that, but he would like to see a review of the plan by the committee and more active participation by the committee when forming the plan.

Sharon said a special meeting would be needed to go line by line through the plan. In lieu of this, the draft plan was shared via email with the Cultural Humility Committee, other BHRS committees, the Director, leadership and executive staff, and feedback was received via email. The feedback and additional documents that were collected were reviewed and incorporated into the draft. Christopher said his concern is that the committee is not looking at the plan as a committee. He feels the committee should be reviewing the feedback. Sharon said the report will be shared with the committee to talk about the recommendations once the feedback received has been incorporated. Sharon said it has become a huge plan and some of the elements of the plan are set by the state's criterion. She appreciates the feedback. Christopher said that he appreciates there was some data on Merced County and asked that the committee review the department penetration rate data in future meetings so the committee can know if BHRS services are actually providing services in specific communities and if they are not, that it is that reflected in the efforts outlined in the plan. Sharon shared the penetration rates listed in the draft plan. She noted the penetration rates are collected from the most recent EQRO report. Christopher did review the penetration rates and said it looks like we are serving twice the ration of white beneficiaries and only about the third of the Hispanic population that qualify for Medi-Cal. He said this is something the committee could benefit from going over. Sharon said that the Strengthening Families Program, Cultural Broker programs, and collaborations with Golden Valley Health Centers and Livingston Community Health are all actions created to better serve cultural populations and address stigma within the Latinx community. Based on the penetration rates we know that there are still disparities in this community. Sharon reported that there have also been disparities reported within the African American Community, the feedback we have received is that this particular community is inappropriately served. The plan is a snapshot, but we try to capture the best things we are doing as the state requires. Christopher said the committee would be a really good opportunity to leverage the interests of those that attend to contribute to the plan. Sharon said the plan is open to everyone's contribution and agreed that there is a need to "close the loop" to better incorporate the feedback received and report it to the committee.

VIII. Substance Use Division Report

Sharon shared that, in an effort to promote integration and make SUD services more visible, there will be a standing agenda item for SUD on the Cultural Humility Committee agenda. Sharon would like to have other divisions report on what they are doing in terms of cultural competence, as well.

Cara Rupp, SUD, appreciates the addition of SUD on the agenda and allowing them to provide feedback on the plan. She will be present during future meetings along with Christopher to provide the SUD perspective.

Fernando Granados suggested adding a standing agenda item for consumers to provide updates.

IX. Program Reports and Updates

Siouxwyyee Vue from Hlub Hmong Center reported that they have hired a new Program Assistant, Wayne Yang. He will be working closely with Hlub Hmong Center specifically in the area of social media and other special projects.

They have also formed a Hmong Education Champion Team, which will focus on Hmong academic success. They developed three specific priorities to focus on this year, which are to collect ethnic specific data, to hold schools accountable to celebrate cultural diversity in schools, learn how to advocate and be an active citizen. They are holding Hmong Education Champion meetings every first Thursday of the month from 4:00 PM – 5:00 PM, as well as bi-weekly Hmong Parent Champion Meetings for parents who want to create change within the communities, which are held bi-weekly on Tuesdays from 6:00 PM – 7:30 PM. Flyers will be shared with the committee.

X. Possibilities and Success Stories

There were no reports under this agenda item.

XI. Next Steps

Sharon said she will be committed to closing the loop to ensure that everyone's voices are heard when collecting feedback.

The cultural competence plan is still in draft form and we are still collecting feedback. If anyone would like to contribute feedback, please email Sharon Jones. The plan will be sent out in its final version.

XII. Adjourn

Meeting adjourned at 11:04 AM.



