

Mono County Behavioral Health

Cultural and Linguistic Competence Plan
Submitted December 2022 & Includes Goals for FY 2022-2023

Contents

Overview	3
Criterion 1: Commitment to Cultural and Linguistic Competence	4
Criterion 2: Updated Assessment of Service Needs	6
Criterion 3: Strategies and efforts for reducing racial, ethnic, cultural, and linguistic mental health disparities	12
Criterion 4: Client/Family Member/Community Committee: Integration of the Committee within the County Mental Health System	
Criterion 5: Culturally Competent Training Activities (FY 2020-2021)	24
Criterion 6: County's commitment to a growing multicultural workforce: hiring and retaining cultural a linguistically competent staff	
Criterion 7: Language Capacity	30
Criterion 8: Adaptation of Services	32

Name of County:	Mono
Name of County Mental Health Director:	Robin K. Roberts
Telephone Number:	760-924-1740
Email address:	rroberts@mono.ca.gov
Mailing Address:	PO Box 2619 Mammoth Lakes CA 93546
Physical Address:	1290 Tavern Road, 2nd Floor Mammoth Lakes CA 93546

Mono County Behavioral Health (MCBH)

Vision:

Our vision is to promote healthy living and improve the quality of life in our community.

Mission:

Our mission is to encourage healing, growth, and personal development through whole person care and community connectedness. Our services are strength based and client centered; we strive to create a safe environment and serve all with dignity, respect, and compassion.

Overview

Mono County Behavioral Health (MCBH) endeavors to deliver culturally, ethnically, and linguistically appropriate services to behavioral health clients and their families in a competent manner that is responsive to diverse cultural beliefs, practices, preferred languages, and reflects the health beliefs and practices of the communities we serve. This vision is reflected in our world view, informing materials, and client treatment plans. Integration of these values creates a forum for ensuring that we continually enhance our services to be culturally and linguistically relevant for our youth and adult clients and their families. Staff members continually discuss opportunities to promote and improve the delivery of culturally-sensitive and relevant services.

MCBH's vision and mission include providing understandable, equitable, effective and respectful services while recognizing the importance of developing services that exhibit cultural humility and are sensitive to customs, cultures, ethnic groups, persons with disabilities, consumers in recovery (from mental health or substance use), lesbian, gay, bisexual, transgender, questioning, intersex, and two-spirit (LGBTQI2-S) individuals, various age groups (Transition Age Youth - TAY: Older Adults), faith-based, physically disabled, and persons involved in the correctional system.

Fostering and developing a culturally and linguistically competent system requires ongoing training and education in which we continually learn from each other and entails the dedication, commitment and perseverance from leadership, staff, and the community.

The following Cultural and Linguistic Competence Plan (CLCP) signifies our continuing commitment to improving access to services, quality care, and improving outcomes. The CLCP addresses the requirements from the Department of Health Care Services (DHCS) for both Mental Health and Alcohol and Other Drug services, including the Cultural and Linguistic Standards (CLAS).

Criterion 1: Commitment to Cultural and Linguistic Competence

MCBH is committed to constantly improving services to meet the needs of culturally diverse individuals seeking and receiving services. A number of objectives were developed as a component of our Mental Health Services Act (MHSA) Plan and have been expanded as we have integrated Substance Use Disorder (SUD) Treatment Services into our program.

I. County mental health commitment to cultural competence

The practices outlined below help provide the framework for developing this CLCP. MCBH believes that these practices, which are also reflected in the Department's cultural competence policies, reflect the department's steps taken to fully incorporate the recognition and value of racial, ethnic, and cultural diversity and equity within the County Mental Health System.

- 1. Our mission is to encourage healing, growth, and personal development through whole person care and community connectedness. Our services are strength based and client centered; we strive to create a safe environment and serve all with dignity, respect, and compassion.
- 2. To expand the behavioral health workforce by recruiting, promoting, training, and supporting culturally and linguistically diverse leadership and workforce of staff, consumers, TAY, and family members that is responsive to our community needs.
- 3. To provide culturally and linguistically appropriate behavioral health services, and easy to understand informing materials in our threshold languages (Spanish and English), to the community, and to improve access for persons who are Hispanic/Latinx, Native/Indigenous, and other race/ethnicity groups; transitional age youth (TAY) and older adults; veterans; lesbian, gay, bisexual, transgender, questioning, intersex, and two-spirit (LGBTQI2-S) individuals; persons released from jail; homeless; additional cultures; and family members.
- 4. To deliver behavioral health services to clients and family members in their primary language whenever possible, including language assistance at no cost to the consumer.
- 5. To gather and sustain a robust cultural outreach committee including members from Mono County's diverse communities.
- 6. To offer cultural competence training programs for behavioral health staff and collaborative community partners.
- 7. To deliver behavioral health services in collaboration with other community organizations and co-locate services whenever possible, including in diverse community settings (e.g., churches,

- senior centers, schools, family resource centers, wellness center and other rural community locations).
- 8. To develop outreach and education activities focused on providing information about mental health services for groups and organizations known to serve the Hispanic/Latinx and Native communities in the least restrictive environment (e.g., Tribal Community, churches, etc.).
- 9. To promote the delivery of culturally competent services through the expansion of the behavioral health Quality Improvement Committee (QIC), the Cultural Outreach Committee (COC), and other committees in order to increase the proportion of persons who reflect the diversity of the county, for example expanding membership for persons who are Hispanic/Latinx, Native/Indigenous, TAY, LGBTQI2-S, older adults and veterans.
- 10. To collect and maintain accurate and reliable demographic and service-level data to monitor and evaluate the impact of services on health equity and outcomes.
- 11. To create and support a culturally safe environment to promote understanding, equity, and positive communication.

II. County recognition, value, and inclusion of racial ethnic, cultural, and linguistic diversity within the system

Mono County reflects less diversity than the larger counties or even neighboring counties in the central region. However, Mono recognizes the importance of creating systems, which include and target all cultural, ethnic and socio-economic groups.

As stated above, Mono County solicits input annually from the Cultural Outreach Committee (COC) to identify needs and develop goals and objectives that target the underserved ethnic populations in the community. In addition to identifying ethnic populations, the COC focuses on sub-populations in isolated rural areas as well as countywide. Since Mono County is not an ethnically diverse community, other identified populations allow the County to focus on other areas of culture that need to be addressed such as poverty, homelessness, Veterans, LGBTQ, Older Adults and Foster Youth.

III. County designated Ethnic Services Manager (ESM)

Mono County has designated staff who fulfill the duties of an Ethnic Services Manager (ESM) and are responsible for MCBH's specific efforts related to cultural and linguistic competence. In 2022, this duty was split between a Case Manager and Staff Services Analyst. Program Manager assisted in completing the CLCP. Staff also participate in state- and regional-level ESM groups.

The responsibilities of the ESM are to incorporate cultural competence practices at every level within MCBH and MCBH provider networks. The ESM is to use stakeholder input to identify cultural competence objectives and goals that include the county's racial, ethnic, cultural, and linguistic populations. The ESM is also responsible for providing this information to the MCBH QI and Leadership teams to promote cohesive inclusion of all cultural and linguistically appropriate access and service delivery within all levels of the organization. The ESM will work closely with QI to ensure that policies, procedures, access, service delivery, and trainings are all culturally sensitive and appropriate.

It is also the responsibility of the ESM to work with the Cultural Outreach Committee (COC) maintain and update the Cultural and Linguistic Competency Plan on an annual basis.

IV. Budget resources targeted for culturally competent activities

The budget for FY 21-22 was created at the beginning of COVID-19 when it was unclear that the pandemic would continue for so long. As a result, the budget below will likely need to be re-allocated to activities that will allow for remote engagement. In addition to the activities below, the Department funds the ESM position and a supervisor's time, as well as staff time to plan and execute each activity below.

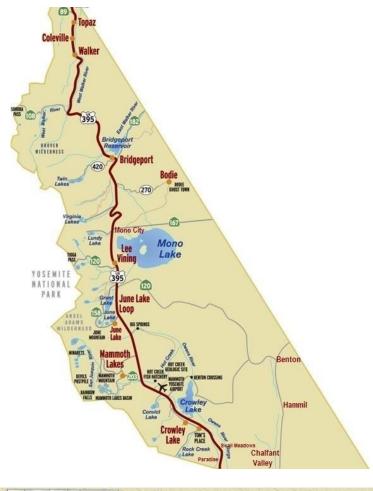
Activities	Total Budgeted
Foro Latino &	\$2,000
Other Cultural Outreach	\$8,000
Training for MCBH Staff	\$18,000

Criterion 2: Updated Assessment of Service Needs

I. General Population

Mono County is a frontier county located in the east central portion of the state of California and is the fifth least populous county in California. It is bordered to the east by the state of Nevada and is approximately 3,048 square miles. The county is geographically diverse and consists of a large land area that includes lakes, desert areas, and dense forests/forest service land. The county seat is Bridgeport and the only incorporated town in the county is Mammoth Lakes.

Many of the neighborhoods in Mono County consist of only residences and do not have community services such as gas stations, grocery stores, etc. The northern part of the county encompasses the small towns of Topaz, Coleville and Walker. Bridgeport, the county seat, is 35 miles south of these three small communities. The central part of the county includes the communities of Lee Vining, Mono City, June Lake, Crowley Lake, the Wheeler Crest communities (Swall Meadows, Paradise, Aspen Springs, McGee Creek, Long Valley) and Mammoth Lakes. In the southeast sector lie Benton, Hammil (Hammil Valley), and Chalfant (Chalfant Valley).





Most residents of Mono County live at elevations between 5,000 to 8,500 feet, with the center of the town of Mammoth Lakes at an elevation of approximately 7,880. Winters are often long and harsh with occasional road closures and summers are brief. Within the county, near the Town of Mammoth Lakes is Mammoth Mountain Ski Area, a popular winter vacation site and one of the top skiing/snowboarding destinations in California. During the 2016/2017 season, snowfall at the ski area's Main Lodge hit a record 618 inches (over 51 feet) of snow.

Residents primarily earn their livelihood through government service, service industry jobs, and retail trades related to tourism and agriculture. Several of Mono County's communities are year-round resorts and include a number of multi-million-dollar homes belonging to second homeowners. However, many year-round residents struggle to make ends meet, often having more than one job.

Schools for the County are located in Coleville, Bridgeport, Lee Vining, Benton, and Mammoth Lakes, each 25-45 miles from the next. Mono County has two school districts: Mammoth Unified and Eastern Sierra Unified.

According to 2020 Census statistics, the total population of Mono County is 13,247, a slight increase since the 2010 Census. Other than Mammoth Lakes, which has a year-round population of approximately 8,000, the remainder of the county consists of small communities ranging in population from less than 300 to about 1,200 people. To illustrate the vastness of the county, there are approximately 4.3 people per square mile.

The ethnic distribution of Mono County is 27 percent Hispanic/Latinx, 3 percent Native American and Alaska Native, 1 percent Black or African American, 2.3 percent Asian, 0.4 percent Native Hawaiian/Other Pacific Islander/Other/Unknown, and 65 percent White alone. The county is comprised of 46% percent female residents and 53% percent male residents. There are 638 veterans. Figure 1 shows populations by counts and percentages categorized by race, Hispanic or Latinx Origin (of any race), gender, and age. race/ethnicity, and gender of the general population.

Figure 1
Mono County Residents
By Gender, Age, and Race/Ethnicity

(Population Source: 2020 Census)

All Topics	Q	Mono County, California	×
1 Population Estimates, July 1 2021, (V2021)			△ 13,247
PEOPLE			
Population			
1 Population Estimates, July 1 2021, (V2021)			△ 13,247
Population estimates base, April 1, 2020, (V2021)			1 3,195
Population, percent change - April 1, 2020 (estimates base) to July 1, 2021, (V2021)			▲ 0.4%
Population, Census, April 1, 2020			13,195
Population, Census, April 1, 2010			14,202
Age and Sex			
Persons under 5 years, percent			△ 4.3%
Persons under 18 years, percent			△ 17.3%
Persons 65 years and over, percent			△ 17.7%
Female persons, percent			△ 46.4%
Race and Hispanic Origin			
White alone, percent			△ 89.6%
Black or African American alone, percent (a)			1.1%
American Indian and Alaska Native alone, percent (a)			△ 3.0%
Asian alone, percent (a)			△ 2.3%
Native Hawaiian and Other Pacific Islander alone, percent (a)			△ 0.4%
1 Two or More Races, percent			△ 3.6%
Hispanic or Latino, percent (b)			△ 27.2%
White alone, not Hispanic or Latino, percent			△ 65.4%

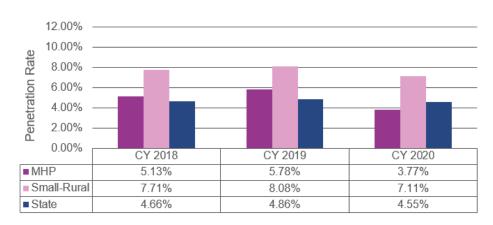
II. Medi-Cal Population Service Needs

Figure 1A below shows the Overall Penetration Rates for the past three years. Calendar Year (CY) 2018 indicates an overall penetration rate that is higher than the State however is lower than the small-rural rate. This rate increased slightly in CY19 and was higher again than the State but lower

than other small/rural counties. In CY20, MCBH's rate decreased, putting it lower than both the state and other small/rural counties.

Please refer below to Figure 1A. (Source: BHC CalEQRO data).

Mono MHP



Utilization of Mental Health Services (by age, ethnicity, gender)

For Mono County, the largest group of Medi-Cal Eligibles is the Hispanic/Latinx population. After that, the White population, then Other, and then Native Americans.

The population that is most served by MCBH, in the Medi-Cal Eligible population is the White population.

Please refer below to Figure 1B. (Source: BHC CalEQRO data).

County Medi-Cal Eligible Population and Beneficiaries Served by the MHP in CY 2020, by Race/Ethnicity

Mono MHP							
Race/Ethnicity	Average Monthly Unduplicated Medi-Cal Eligibles	Percentage of Average Monthly Unduplicated Medi-Cal Eligibles	Unduplicated Annual Count of Medi-Cal Beneficiaries Served by the MHP	Annual Percentage of Medi-Cal Beneficiaries Served by the MHP			
White	1,177	34.9%	57	44.9%			
Latino/Hispanic	1,648	48.8%	48	37.8%			
African-American	15	0.4%	*	n/a			
Asian/Pacific Islander	28	0.8%	*	n/a			
Native American	89	2.6%	*	n/a			

Other	418	12.4%	20	15.7%
Total	3,375	100%	127	100%

The total for Average Monthly Unduplicated Medi-Cal Eligibles is not a direct sum of the averages above it. The averages are calculated independently.

CALEQRO PERFORMANCE MEASURES - MONO MHP

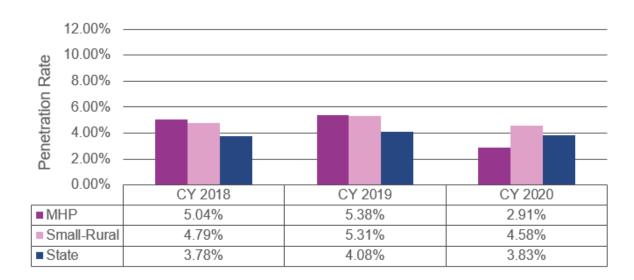
(Source: BHC CalEQRO data)

The Hispanic/Latinx penetration rates for MCBH remained essentially the same from CY 2018 to CY 2019 but decreased significantly in CY 2020.

Please refer below to Figure 2A. (Source: BHC CalEQRO data).

Latino/Hispanic Penetration Rates CY 2018-20

Mono MHP



III. 200% of Poverty (minus Medi-Cal) population and service needs

Mono County's per capita income estimate in 2016-2020 was at \$37,103 (source: U.S. Census). This is fairly comparable to the statewide per capita income of \$35,384.

For median household income, the U.S. Census lists median household income for time period 2016-2020 in Mono County at \$64,924, which is approximately \$10,000 lower than was reported for the time period of 2015-2020.

The U.S. census for the same time periods indicated above list that 9 percent of Mono County residents live in poverty vs. 11.6 percent across California. The median value of owner-occupied housing units is \$385,500 for 2016-2020 vs. \$505,000 for 2015-2020.

Income & Poverty		
Median household income (in 2020 dollars), 2016-2020	\$64,924	\$64,994
Per capita income in past 12 months (in 2020 dollars), 2016-2020	\$37,103	\$35,384
Persons in poverty, percent	₫ 9.0%	△ 11.6%

IV. MHSA Community Services and Supports (CSS) population assessment and service needs

Please refer to the FY 22-23 Mental Health Services Act Annual Update, which is available at this link.

https://www.monocounty.ca.gov/behavioral-health/page/mental-health-services-act-quality-improvement

V. Prevention and Early Intervention (PEI) Plan: The process used to identify the PEI priority populations

Please refer to the FY 22-23 Mental Health Services Act Annual Update, which is available at this link.

https://www.monocounty.ca.gov/behavioral-health/page/mental-health-services-act-quality-improvement

Criterion 3: Strategies and efforts for reducing racial, ethnic, cultural, and linguistic mental health disparities

I. Identified unserved/underserved target populations and identified inequities

We know culture plays an essential role in how clients and their families define mental health and respond to the services offered by mental health providers. Cultural competency, and also cultural humility, produces better care and better outcomes for the people we serve. This includes our staff being able to identify cultural differences with each other, community members and consumers. MCBH continually strive to provide information regarding "competency" about cultures that may differ from our own: Hispanic/Latinx persons and how there are cultural differences within this demographic, persons living in poverty, persons attracted to the loner/independent/off-the-grid lifestyle, as well as Native America persons who come from the different reservations in our county, multi-generational families who have lived in this Frontier county, etc.

With competency and humility as our goal, there are a number of obstacles that we continue to face due to the size and nature of our county.

- Staffing: Like workplaces across the country, MCBH is struggling with recruitment and retention at this time. MCBH has hired qualified personnel to reflect the County's culturally and linguistically diverse community, and we feel strongly that, when at all possible, our staff ought to mirror the ethnic demographics of our county and our clients. Currently, we have several vacant positions.
- Training: Due to our remote location, and small staff size, paying for, and incentivizing outside trainers who are skilled at cultural competency and/or have knowledge about the culture of the people in Mono County has been difficult in the past.
- Community: Our county is spread over a large geographical area, and the community in the north of our county is very different than that in the south of the community. The services that are provided in Mammoth Lakes, and how we outreach to people in that town has to be very different from how we engage and serve our outlying areas of the county. Outreach to our Native/Indigenous community has been a barrier for MCBH in the past, and thus is one of our priorities.

II. Identify strategies/objectives/actions/timelines for FY 2022-2023

• The following objectives have been identified to promote the development of culturally and linguistically competent services throughout our organization.

Goal 1: MCBH will provide culturally and linguistically appropriate behavioral health services to improve access for persons who are Native/Indigenous, Hispanic/Latinx and other race/ethnicity groups; TAY and older adults; veterans and their families; lesbian, gay, bisexual, transgender, questioning, intersex, and two-spirit (LGBTQI2-S) individuals; persons released from jail and their families; and physical disabilities.

- **Objective 1a**: MCBH will provide informing materials in English and Spanish in our clinics and wellness centers.
- Objective 1b: When appropriate, MCBH will hire and retain diverse or bilingual staff to work
 in our programs in order to provide services and information to the client and family in their
 preferred language and preferred cultural setting.
- **Objective 1c**: MCBH will ensure that the crisis line is culturally-sensitive to all persons utilizing these services, and clients receive services in their preferred language.
- **Objective 1d:** Trainings for interpreters to ensure that MCBH's bilingual staff have professional development opportunities related to the use of terminology and medical Spanish.
- **Objective 1e:** Training for all staff on how to use an interpreter to ensure that the client experience of having an interpreter is welcoming and clear.
- **Objective 1f:** Training of all staff on cultural competence, focusing on the CLAS standards.
- **Objective 1g:** Monitoring of contract providers (staff of North American Mental Health Services) to ensure they receive annual cultural competence training.

Notable changes: N/A

Goal 2: MCBH will create a work culture that values justice, equity, diversity, and inclusion through staff cultural competence training, dialogue, and other professional development opportunities.

- **Objective 2a**: In FY 2022-2023, all MCBH staff will participate in monthly self-guided continuing education promoting racial justice, equity, diversity, and inclusion
- **Objective 2b**: MCBH will offer at least one training or focus one month of continuing education on Native/Indigenous culture.
- **Objective 2c**: MCBH will train staff regarding LGBTQA+ related issues on access, stigma, and therapeutic needs through either a training or a continuing education focus.
- **Objective 2d**: MCBH staff will participate in state and community groups focused on justice, equity, diversity, inclusion, and cultural competence. Some examples may include on the California Behavioral Health Directors' Association (CBHDA) Cultural Competency, Equity, and Social Justice Committee and the Eastern Sierra Pride group.
- **Objective 2e**: MCBH will include a cultural competence and racial equity overview in every new employee onboarding process.
- **Objective 2f:** The MCBH Racial Equity Committee will continue to meet, create the racial equity work plan, and ensure the activities of the work plan are completed.
- **Objective 2g:** Every interview conducted by MCBH will have at least one question focused on justice, equity, diversity, and inclusion.

Notable changes: Changed Objective 2a to focus on monthly continuing education rather than three specific trainings. Combined Objective 2c and 2d to focus on one LGBTQ+ training. Changed Objective 2e (now 2d) to encompass state and community groups. MCBH also added Objectives 2e-2g, which align with the department's Racial Equity Workplan.

Goal 3: MCBH will provide services in culturally-appropriate and accessible ways. MCBH recognizes that due to cultural and/or other socio-economic barriers that exist within our county, utilizing the public behavioral health system may not be a viable option for some clients and their family members.

- **Objective 3a**: MCBH will deliver services in the most accessible ways (e.g., telehealth, home, schools, tribal community, senior center, and other rural community locations) when needed and as appropriate.
- Objective 3b: MCBH will provide outreach and engagement with local Tribal community members, including those working in the mental health/substance use disorder profession.
- **Objective 3c**: MCBH will work closely with local school districts (Eastern Sierra Unified School District and Mammoth Unified School District) to prevent alcohol and drug use and intervene early in the onset of behavioral health issues.
- **Objective 3d**: MCBH will hold meetings with other agencies and programs to discuss and plan culturally competent services that promote community wellbeing.
- **Objective 3e:** Identify opportunities for collaboration in the Spanish-speaking community (i.e. Latinx/Hispanic community events, etc.) to provide outreach with an emphasis on mental health and wellbeing.

•

Notable changes: Objective 3e added.

Goal 4: MCBH will be a leader in justice, equity, diversity, and inclusion (JEDI) trainings and dialogue and will strive to create an anti-racist environment throughout Mono County.

- **Objective 4a**: Through its participation on the County-wide JEDI committee, MCBH will encourage ongoing discussion at the Board of Supervisors level on how to address racism in Mono County and how to develop a culture of anti-racism within the County.
- **Objective 4b:** MCBH will offer support the work of the Mono County Public Health Equity Officer.
- **Objective 4c:** Promote JEDI through schools by reading stories and leading discussions about diversity, race, and different cultures/perspectives/experiences.
- **Objective 4d**: Increase MCBH staff participation on the Mono County JEDI Committee.

Notable changes: Previously, Goal 4 focused on inequities faced by the Latinx community as a result of COVID-19. Though some of these inequities continue to exist, it seemed appropriate to shift this goal given the time that has passed since the onset of the pandemic. This goal has been changed to focus on structural practices within the department.

In comparing current Goal 4 to last year's Goal 5, here are the notable changes: Objective 4b was changed to focus on supporting the work of the Public Health Equity Officer instead of leading our own community-oriented trainings. MCBH remove the original Objective 4c, which focused on inviting people to share stories of what it's like to be BIPOC in Mono County — MCBH realized that it does not have the technical capacity to gather these stories and share them in a meaningful way. MCBH also removed original Objective 5e to broadcast meetings since this is no longer applicable.

Goal 5: MCBH will create and maintain a strong and relevant Cultural Outreach Committee (COC) to serve as a space for learning, idea-sharing, and community connection.

- **Objective 5a**: Work with the COC to identify a clear mission and purpose for the group.
- **Objective 5b:** Include Native Community Members on the COC.
- Objective 5c: Consider other ideas for recruitment and retention of COC members.
- **Objective 5d**: Identify avenues for collaboration with community agencies participating in the COC, including joint wellness activities.

Notable Changes: N/A

III. Planning & monitoring of identified strategies/objectives/actions/timelines to reduce mental health inequities: evaluation of FY 21-22 goals & objectives

The goals and objectives below are from the previous CLCP in FY 2021-2022. Through these goals and objectives, MCBH has worked tirelessly to provide culturally-specific services to meet the needs of diverse populations, including peer-driven services.

Goal 1: MCBH will provide culturally and linguistically appropriate behavioral health services to improve access for persons who are Native American, Hispanic/Latinx and other race/ethnicity groups; TAY and older adults; veterans and their families; lesbian, gay, bisexual, transgender,

questioning, intersex, and two-spirit (LGBTQI2-S) individuals; persons released from jail and their families; and physical disabilities.

- Objective 1a: MCBH will provide informing materials in English and Spanish in our clinics and wellness centers. MET
- Objective 1b: When appropriate, MCBH will hire and retain diverse or bilingual staff to work
 in our programs in order to provide services and information to the client and family in their
 preferred language and preferred cultural setting. MET
- Objective 1c: MCBH will ensure that the crisis line is culturally-sensitive to all persons
 utilizing these services, and clients receive services in their preferred language. MET
- Objective 1d: Trainings for interpreters to ensure that MCBH's bilingual staff have professional development opportunities related to the use of terminology and medical Spanish. MET
- **Objective 1e:** Training for all staff on how to use an interpreter to ensure that the client experience of having an interpreter is welcoming and clear. MET
- Objective 1f: Training of all staff on cultural competence, including the CLAS standards. MET
- **Objective 1g:** Monitoring of contract providers (staff of North American Mental Health Services) to ensure they receive annual cultural competence training. MET

Current Status as of December 2022:

- MCBH offers all informing materials and other critical documents in both English and Spanish and the department has a diverse staff that is 41% bilingual English/Spanish speakers.
- MCBH staffs its crisis line with bilingual staff members as frequently as possible. In the cases that a bilingual staff member is not on call and interpretation services are needed, staff are trained in the use of an interpreter and have access to the Language Line.
- MCBH continually strives to expand the number of services we have available in Spanish in an effort to continue to improve mental health access for Hispanic/Latinx and monolingual Spanish speaking clients.
- All MCBH staff members received training on how to use an interpreter and all bilingual staff
 members received training on how to serve as an interpreter in Fall 2021 and Fall 2022. In
 Fall 2022, these trainings were opened to other County departments as well.
- MCBH ensured the its contract provider, North American Mental Health Services, completed its annual cultural competence training for FY 21/22. This was completed in August and September 2021

Goal 2: MCBH will create a work culture that values justice, equity, diversity, and inclusion through staff cultural competence training, dialogue, and other professional development opportunities.

- **Objective 2a**: In FY 2021-2022, all MCBH staff will attend at least three workshops/trainings promoting racial justice, equity, diversity, and inclusion MET
- Objective 2b: MCBH will offer at least one training regarding Native American culture. NOT MET
- **Objective 2c**: MCBH will train staff regarding LGBTQA+ related issues on access, stigma, and therapeutic needs. MET

- Objective 2d: MCBH will host a training around cultural issues and outreach and when working with LGBTQA+ adults and youth within the Hispanic/Latinx community. PARTIALLY MET
- **Objective 2e**: MCBH staff will participate on the California Behavioral Health Directors' Association (CBHDA) LGBTQA+ Workgroup and implement best practices around serving this group in the Department. MET

Current Status as of December 2022:

- MCBH staff members participated in several county-level implicit bias trainings facilitated by Dr. Rita Cameron-Wedding. Staff members also participate in monthly self-guided continuing education and all staff are trained in cultural competence and racial equity during their onboarding process. In summer 2022, the department also hosted a training facilitated by Dr. Jei Africa on white supremacy in the workplace.
- MCBH was unable to host a training on Native/indigenous culture in FY 21/22 but hosted one on November 1, 2022.
- MCBH has continued to collaborate with local Native/Indigenous communities, and Latinx community through committee meetings and in-person events. MCBH has also created a space for the LGBTQIA+ at the Sierra Wellness Center in Mammoth and has hosted LGBTQIA+ focused community events.
- In terms of training staff regarding LGBTQIA+ related issues, the department staff has met this goal by participating in training that covers issues to the LGBTQIA+ community (Creating A Welcoming Environment By Using Pronouns) on May 11, 2022.
- Staff members partially met the goal related to LGBTQIA+ members of the Hispanic/Latinx community through its continuing education – the department focused on gender one month and religion in the following month. This combination led to discussion about machismo stereotypes, how gender is represented through pop culture, and religious expectations related Latinx culture and gender.
- The department's ESM has continued to participate in the CBHDA monthly meetings for the Cultural Competency, Equity and Social Justice committee (CCESJC) and the LGBTQ+ Pride workgroup.
- As MCBH strives to be a leader within the county in moving work forward. As such, MCBH Director Robin Roberts, MFT, encouraged the creation of an internal equity committee to help lead and guide the department's equity efforts after engaging in a 12-month facilitated training and dialogue with Dr. Jei Africa on a broad range of topics related to diversity and equity. The committee's mission is to build awareness, create solutions, foster leadership, and implement change related to justice, equity, diversity, and inclusion. Since the creation of the committee, members have focused their efforts by creating an equity workplan. The goal of the Equity Workplan is to systematically identify and explore biases and stereotypes as individuals, co-workers, a department, and an organization to drive equity work forward.

Goal 3: MCBH will provide services in culturally-appropriate and accessible ways. MCBH recognizes that due to cultural and/or other socio-economic barriers that exist within our county, utilizing the

public behavioral health system may not be a viable option for some clients and their family members.

- Objective 3a: MCBH will deliver services in the most accessible ways (e.g., telehealth, home, schools, tribal community, senior center, and other rural community locations) when needed and as appropriate. MET
- Objective 3b: MCBH will provide outreach and engagement with local Tribal community members, including those working in the mental health/substance use disorder profession. MET
- Objective 3c: MCBH will work closely with local school districts (Eastern Sierra Unified School District and Mammoth Unified School District) to engage youth and TAY in the development of strategies to prevent alcohol and drug abuse and intervene early in the onset of behavioral health issues. MET
- **Objective 3d**: MCBH will hold meetings with other agencies and programs to discuss and plan culturally competent services that promote community wellbeing. MET

Current status as of December 2022:

- MCBH continuously works to deliver services in the most accessible environment
 possible. Through the pandemic, MCBH has found that telehealth services have
 increased access for a variety of different groups of people, including members of the
 Latinx community and individuals who live in our outlying areas.
- In terms of community programming, MCBH has started several wellness activities that
 focus on creating supportive spaces for LGBTQ+ community members, seniors, and
 Latinx community members. The department hosted events specifically focused on the
 Latinx community in Fall 2021, Spring 2022, and Fall 2022. Additionally, MCBH
 participates in Health and Safety Fairs and other community events throughout the
 county.
- MCBH regularly engages with Tribal community members through clinical, substance
 use disorder, wellness, and cultural outreach related work. MCBH staff have also
 partnered with the Bridgeport Indian Colony to conduct Narcan distribution on the
 reservation. MCBH also hosts the Benton Social, which takes place on the Benton Paiute
 Reservation and includes collaboration with the Toiyabe Elder Services program.
- In terms of youth outreach, MCBH has an after-school program called Clubhouse Live, and the department has expanded it to include two sessions per week for youth in Bridgeport. MCBH is also actively working on re-launching its school-based counseling center, North Star. Through Clubhouse Live, students provide input on departmental community programming.
- MCBH's Cultural Outreach Committee is a group that regularly discusses cultural competence in an effort to promote community wellbeing. MCBH also gathers input from both agencies and individuals through its annual MHSA Community Program Planning Process

Goal 4: Considering that the Latinx and Hispanic communities in Mono County have been the most affected by the pandemic, MCBH will research and respond to the inequities coming to light as a result of COVID-19.

- Objective 4a: Identify opportunities for collaboration in the Spanish-speaking community (i.e. Latinx/Hispanic community events, etc.) to provide outreach with an emphasis on mental health and wellbeing. MET
- **Objective 4b:** Integrate the existing Hispanic/Latinx Engagement Committee with the Cultural Outreach Committee to discuss challenges, barriers, successes, and solutions. MET
- **Objective 4c:** Invite influencers or individuals who are natural "hotspots of information" to participate in outreach efforts for the Latinx community. PARTIALLY MET

Current Status as of December 2022:

- In effort to reach out to the Latinx and Hispanic communities in Mono County MCBH has successfully collaborated with the Spanish speaking community through local events such as the Foro Latino and collaborated with Latinx community "influencers" to help share information about events and programming.
- MCBH successfully combined the Latinx Engagement Committee with the Cultural Outreach Committee.
- Foro Latino events were held in Fall 2021 and Spring 2022. The department also hosted a
 very well-attended Latinx heritage month celebration in Fall 2022 that was a huge success.
 Part of the reason that this was so successful was that all food and swag were purchased
 from local Latin markets, who also helped advertise. MCBH also hired a local Latinx DJ who
 is well-known in the community and who helped advertise.
- Objective 4a was added to another Goal in the update of this plan and this goal was removed.

Goal 5: MCBH will be a leader in justice, equity, diversity, and inclusion (JEDI) trainings and dialogue and will strive to create an anti-racist environment throughout Mono County.

- Objective 5a: Through its participation on the County-wide JEDI committee, MCBH will
 encourage ongoing discussion at the Board of Supervisors level on how to address racism in
 Mono County and how to develop a culture of anti-racism within the County. MET
- Objective 5b: MCBH will offer trainings on JEDI-related topics to institutions and agencies in our County - with a focus on major employers (specifically hospital, MMSA, schools, County, Town). PARTIALLY MET
- **Objective 5c:** Offer Storytelling: Invite people to share stories of what it's like to live in Mono County as BIPOC. NOT MET
- **Objective 5d:** Promote JEDI through schools by reading stories and leading discussions about diversity, race, and different cultures/perspectives/experiences. MET
- **Objective 5e**: Increase Outreach: broadcast meetings through Facebook and physical gatherings when possible. NOT MET
- Objective 5f: Increase MCBH staff participation on the Mono County JEDI Committee. MET

Current Status as of December 2022:

• At least one MCBH staff participates in each meeting of the County-Wide JEDI Committee.

- Through its work with the Cultural Outreach Committee, MCBH has been leading discussions with other businesses, agencies, and employers throughout Mono County. In November 2022, MCBH opened its interpreter trainings to other County agencies and as of fall 2022, MCBH is actively supporting the work of the Mono County Public Health Equity Officer.
- MCBH was unable to complete Objective 5c in part due to lack of technological capacity to edit videos, etc. MCBH will continue adding this Objective back in if capacity increases. The department collected one story as part of a "Breaking Bread" series but was unable to share it publicly.
- MCBH has an active program in which a staff member visits local schools to read stories and lead discussions that promote JEDI.
- It was determined by the Cultural Outreach Committee that Objective 5e was no longer applicable, but notes that minutes are publicly available for such meetings as the Behavioral Health Advisory Board.

Goal 6: MCBH will create and maintain a strong and relevant Cultural Outreach Committee (COC) to serve as a space for learning, idea-sharing, and community connection.

- Objective 6a: Work with the COC to identify a clear mission and purpose for the group.
 MET
- Objective 6b: Include Native Community Members on the COC. MET
- Objective 6c: Consider other ideas for recruitment and retention of COC members. MET
- **Objective 6d**: Identify avenues for collaboration with community agencies participating in the COC, including joint wellness activities. MET

Current Status as of December 2022:

- The COC now has a clear purpose as a group of peers pushing JEDI work forward through the County. The group also focuses on cross-collaboration for events and a pooling of resources for future trainings.
- MCBH has regular COC participation from Native community members and has a staff member who calls each COC participant in advance of the meeting to invite and remind them.
- MCBH collaborated with several agencies participating in the COC, including the Mono
 Arts Counsel (MAC) and the Mono County Library Makerspace, who both attended the
 Foro Latino. MCBH and MAC also collaborated to expand services in North County and
 are working on a contract to support an Indigenous person to teach Native dance
 classes throughout Mono County.

Criterion 4: Client/Family Member/Community Committee: Integration of the Committee within the County Mental Health System

The Cultural Outreach Committee (COC) meets every other month and spends a significant amount of time discussing potential outreach options to ensure the health and safety of our diverse residents. The Cultural Outreach Committee has also spent significant time addressing the disparities that COVID-19 pandemic has brought up in our community. In the past year, the COC has worked diligently in

collaborating with various businesses and agencies and regularly has attendance, participation and alliance with these entities. Committee members have been incorporating members of underserved groups into their agencies and programming as part of their commitment to the COC. Lastly, consumer and community involvement is also a contributing part of the COC meetings.

I. The Cultural Outreach Committee is reflective of the community

The MCBH Ethnic Services Manager (ESM) monitors all activities pertaining to the COC and provides technical support. The ESM is overseeing the development of the CCLP and is a member of the Equity Committee; the Equity committee was established after Mono County passed the resolution that addressed mental health as crisis. This committee is to address justice, equity, diversity, and inclusion within the county and community. This committee facilitates communication and collaboration for attaining the goals as set forth in the Cultural and Linguistic Competence Plan (CCP). Plan to reduce disparities, increase capacity, and improve the quality and availability of services.

The Mono County Cultural Outreach Committee works closely to ensure compliance to the Cultural and Linguistic Competence Plan and include recommendations in its CCLP implementation and development. In addition the MCBH Program Manager and a Wellness Center peer attend all COC, QIC, and BHAB meetings (Behavioral Health Advisory Board). The COC will in future participate in MHSA planning processes. The Cultural Outreach Committee will continue to meet every other month and track their activities so that projects, activities and policy issues are reported to the MCBH Program Manager to ensure compliance.

The policies, procedures, and practices that assure members of the Cultural Outreach Committee will be reflective of the diversity of the community, including county management level, line staff, clients, family members from ethnic, racial, and cultural groups, providers, community partners, contractors and other members as necessary.

Cultural Outreach Committee Roster:

- Lauren Plum- Mono County BH, Ethnic Services Manager/ Wellness Programming and Outreach Supervisor, Mono County Resident
- Tajia Rodriguez, Mono County BH, Case Manager, Mono County Resident
- Lori Michelon- Mono County, Librarian, Mono County Resident
- Patricia Robertson- Mammoth Lakes Housing Executive Director, Mono County Resident
- Debbie Painter- Cultural Liaison Bridgeport Indian Colony, Mono County Resident
- Kristin Reese- Mono Arts Council Director, Mono County Resident,
- Dana Ellis- Mammoth High School Librarian, Mono County Resident,
- Jolene Carley, Benton Tribal community partner, Mono County Resident
- Courtney Ivey, Community Service Solutions, Nutrition Educator
- Rachel Barnet, MC Public Health Chief Equity Officer, Mono County Resident
- Magnolia Barra, MC Public Community Health Outreach Specialist, Mono County Resident
- Jennifer Burrows, MC Public Health Deputy Director Covid Operations, Mono County Resident

Leadership

The COC is led by department Ethnic Service Manager (ESM). In 2021 the committee decided to meet every other month so there are 6 meetings throughout the year.

The roles and responsibilities of the ESM include:

- Facilitate all meetings
- Engage members in Committee discussions
- Collaborate with the COC in the development of meeting agendas
- Communicate the focus of the COC activities and recommendations made to diverse MCBH entities

Event	Number of Attendees	Name of Attendees	Length of meeting	Date
Cultural Outreach Committee	5	Amanda Greenberg Dana Ellis Kristin Reese Sabrina Rose Lauren Plum	90 Minutes	7/13/2021
Cultural Outreach Committee	7	Kasandra Montes Tajia Rodriguez Gabbi Duhl Julia Tawney Kristi Williams Lori Michelon Marcella Rose	90 minutes	9/7/2021
Cultural Outreach Committee	6	Kasandra Montes Tajia Rodriguez Kristi Williams Lori Michelon Marcella Rose Amanda Greenberg	90 Minutes	9/28/2021

Cultural Outreach Committee	6	Amanda Greenberg Lauren Plum Marcella Rose Tajia Rodriguez Dana Ellis Kristin Reese	90 Minutes	11/16/2021
Cultural Outreach Committee	9	Kasandra Montes Kristin Reece Brianna Goico Jolene Carley Dirk Addis Courtney Ivey Tajia Rodrguez Matias Bernal Wendy Rangel-Guzman	90 minutes	2/1/2022
Cultural Outreach Committee	10	Kasandra Montes Lori Michelon Jolene Carley Kristi Willians Maria Brianna Goico Dirk/Sabrina Addis Wendy Rangel-Guzman Mateas Bernal Kristin Reese	90 minutes	3/15/22
Cultural Outreach Committee	7	Lauren Plum Magnolia Barra Dirk Addis Courtney Ivey Jennifer Burrows Wendy Guzman-Rangel Kristin Reese	42 minutes	5/17/22
Cultural Outreach Committee	4	Lauren Plum Courtney Ivey Dirk Addis Brianna Goico	69 minutes	7/12/22

Cultural Outreach Committee	11	Lauren Plum Kelly Romp Debbie Painter Kristin Reese Briana Goico Tajia Rodriguez Lori Michelon Rachel Barnett Robin Roberts Emily Cruz Briana Goico	74 minutes	9/13/22
Cultural Outreach Committee	8	Lauren Plum Tajia Rodriguez Lori Michelon Magnolia Barra Kristin Reese Jenn Burrows Courtney Ivey Rachel Barnett	67 minutes	11/15/22

Criterion 5: Culturally Competent Training Activities (FY 2021-2022)

MCBH is committed to embedding cultural competence and cultural humility into all training activities within the agency and to the community.

In addition, the ESM attends regular webinar trainings on topics related to cultural competence. All webinar opportunities are distributed to MCBH staff members and community partners in order to increase their education, awareness and skills around all elements of culture.

This section describes cultural competence training for staff and contract providers, including training in the use of interpreters.

List of internal training and staff attendance by function:

- 1. Administration/management;
- 2. Direct services: MHP's staff;
- 3. Direct services: contactors;
- 4. Support services; and,
- 5. Interpreters.

Training Event	Number of Attendees	Attendees by Function	Date
Dr. Jei Africa Trainings FY 21-22: Moving Towards Equity	20+	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	8/5/2021
Racial Equity In-Service (Debrief of Dr. Africa training)	20+	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	9/21/21
County-wide Implicit Bias Training with Dr. Rita Cameron Wedding	15+	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	11/8/21
Spanish for Professionals "How to use interpretation services 101" – Dr. Bautista: FY 21-22	20	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	11/16/2021

Spanish for Professionals – Dr. Bautista: FY 21-22	8	Clinical Supervisor Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists SUD Counselor	11/30/2021
Spanish for Professionals – Dr. Bautista: FY 21-22	8	Clinical Supervisor Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists SUD Counselor	12/13/2021
County-wide Implicit Bias Training with Dr. Rita Cameron Wedding	15+	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	1/10/22
Cultural Competence Plan, CLAS standard overview, MHSA Community Program Planning Process Training	20+	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	1/11/22
Racial Equity Committee Workplan	15+	Director Clinical Supervisor SUD Supervisor Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	2/22/22

			_
LGBTQ+ Training w/ Dr. Jei Africa	15+	Director Clinical Supervisor SUD Supervisor Accountant Staff Services Analysts Case Managers Fiscal Technical Specialists Wellness Center Associates Psychiatric Specialists	5/17/22
White Supremacy Training w/ Dr. Africa	15+	Director Clinical Supervisor SUD Supervisor Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	7/7/22
White Supremacy In-Service (Debrief from Dr. Africa training)	15+	Director Clinical Supervisor SUD Supervisor Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	7/12/22
Culture of Poverty Training	20+	Director Clinical Supervisor SUD Supervisor Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	6/15/22
How to Use an Interpreter with Dr. Bautista	20+	Director Clinical Supervisor SUD Supervisor Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor	10/18/22

		Psychiatric Specialists	
Serving as an Interpreter: Spanish for Professionals with Dr. Bautista	10	Clinical Supervisor Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists SUD Counselor Psychiatric Specialists	10/18/22
Native American History Month Training w/ Debbie Painter	20+	Director Clinical Supervisor SUD Supervisor Program Manager Accountant Staff Services Analysts Behavioral Health Services Coordinators Case Managers Fiscal Technical Specialists Wellness Center Associates SUD Counselor Psychiatric Specialists	11/2/22

Criterion 6: County's commitment to a growing multicultural workforce: hiring and retaining cultural and linguistically competent staff

As of December 2022, MCBH is experiencing a shortage of clinical staff similar to the one described in the Workforce Needs Assessment in the FY 18/19 MHSA Annual Update, which is available at this link:

https://www.monocounty.ca.gov/sites/default/files/fileattachments/behavioral health/page/3 0423/mono mhsa fy 18-19 annual update final approved.pdf

This document includes comparisons of staff to Mono County's general population and client population. The department remains committed to recruiting and retaining culturally and linguistically competent staff, particularly staff who are bilingual English-Spanish speakers.

Despite the limitations of working in an isolated, rural community, MCBH encourages ongoing education and training in an effort to "grown our own." MCBH continues to offer Masters in Social Work and Marriage and Family Therapist Interns opportunities to earn their hours toward licensure within the department. Additionally, the department has a long operated a loan assumption program to help attract and retain staff members in hard-to-fill positions. In FY 22-23, MCBH is working with the Central Workforce Education and Training (WET) Regional Partnership and the Office of Statewide Health Planning & Development (OSHPD) to maximize funding for this and other workforce-related programs.

Solutions to the retention of workforce within MCBH are currently undergoing analysis to determine if what MCBH is currently doing to promote workforce education and training is sufficient. The department plans to do this through exit interviews, stay interviews, and other similar methods. As mentioned in Criterion 5, MCBH is also committed to training staff in cultural competence and in offering culturally-relevant professional development opportunities to staff through such activities as the Annual Central Valley Latino Conference. Additionally, MCBH addresses staff requests for specific trainings on a regular basis. Additionally, staff are allowed, and encouraged, to expand the scope of service in which they specialize using methods that work for them on an individual basis as long as the impact to service delivery remains positive.

At this time, the County's technical assistance needs related to this Criterion are being met through a combination of work with Dr. Jei Africa; Dr. Beth Cohen, an organizational psychologist; the Central Regional WET Partnership; and the California Behavioral Health Directors' Association.

Criterion 7: Language Capacity

I. Increase bilingual workforce capacity

Mono County recognizes the need for bilingual language skills or specialized communication skills to improve consumer experience and reduce cultural/linguistic disparities. Thus, we continue to implement a Bilingual Pay Differential, which is intended to be an incentive for bilingual staff to utilize their skills and for us to leverage resources. All of our bilingual staff must successfully pass a merit exam to determine that they meet the requirements to be considered bilingual.

- As of December 2022, there are currently nine bilingual English/Spanish-speaking staff members available as interpreters. MCBH also has access to the Language Line. Note that MCBH has 21 total FTE staff at this time.
- MCBH contracted a trainer that focuses on enhancing the use of terminology and professional Spanish speaking for bilingual staff.
- For further information, please see the Mental Health Services Act 18/19 Annual Updated (see link above), which includes the Workforce Needs Assessment, and the FY 22-23 Mental Health Services Act Annual Update WET section, which includes MCBH's strategies for recruiting and retaining bilingual staff members., which is available at this link:
 - https://www.monocounty.ca.gov/mhsa

II. Limited English Proficiency

(Provide services to persons who have Limited English Proficiency (LEP) by using interpreter services and provide services to all LEP clients not meeting the threshold language criteria who encounter the mental health system at all points of contact)

As outlined in Attachment A: Limited English Proficiency Services Policy and Procedure:

MCBH will assist beneficiaries in accessing services including, but not limited to, the beneficiary brochure required by Section 1810.360(c), materials explaining the beneficiary problem resolution and fair hearing processes required by Section 1850.205(c)(1), and mental health education materials used by the MHP, in threshold languages, based on the threshold languages in the county as a whole.

- When consumers present by telephone or walk-in and need information or request services in a language other than English, reception staff will first attempt to identify the consumer's primary language using language cards
- Staff will then attempt to locate a staff member who speaks that language to provide
 or take information. If there is not a staff member available who speaks the client's
 language, the Language Line or TTY service will be used for interpretation
- If a caller does not speak English, staff will utilize the Language Line Solutions Line on a conference call for interpretation of other languages as needed.
- Mono County provides a statewide, toll-free telephone number 24 hours a day, 7 days per week that provides adequate TTY/TDD or Telecommunications Relay Services. For TTY/TDD services, Mono County uses Sprint California Relay Services. To access the TTY/TDD services call 1-888-877-5379 for English and 1-888-877-5381 for Spanish.

III. Provide bilingual staff and/or interpreters for the threshold languages at all points of contact

- Two of our staff members alternate the 24/7 Access Line. Both of those staff members are bilingual in Spanish and bicultural.
- Bilingual/bicultural staff are available to assist in our office and are able to communicate with any caller who speaks Spanish.
- New clients are offered an assessment with a Spanish speaking interpreter, whenever possible.
- Throughout the department, information is posted and provided in both English and Spanish
- Bulletins regarding the availability of interpreter services and the language line are posted throughout the MCBH website.
- Our 24/7 Access Log includes a field to record a client's language and also a field for a need for an interpreter.
- Currently, we have two policies in place that outline the requirements and processes for meeting a client's request for language assistance. Please see Attachments A, B, and C.

IV. Required translated documents, forms, signage, and client informing materials

- All informing materials, including the intake packet and medication consents are provided in both English and Spanish.
- Our EHR includes primary language at the top of the client profile.
- Preferred language is asked as part of the client registration.
- Consumer Perception Surveys are offered in all threshold languages (English and Spanish)

Criterion 8: Adaptation of Services

I. Client driven/operated recovery and wellness programs

MCBH hosts a variety of wellness and community programs that are geared specifically toward different groups. Tailoring wellness programming to specific groups of people was a key suggestion for improvement in MCBH's MHSA Community Program Planning Process several years ago. The Department hosts the Foro Latino specifically for the Latinx community and several other programs throughout the year. MCBH also offers a series of programs for LGBTQ+ folks and is contracting with the Mono Arts Council to bring Native dance classes (taught by a local Indigenous community member) to Mono County. MCBH has more peer and wellness center associates than ever and these individuals offer programming specifically in outlying communities and the programming targets seniors and tribal communities. Programming is listed at this website:

https://www.monocounty.ca.gov/behavioral-health/page/wellness-centers

II. Responsiveness of mental health services

Some of our methods for informing clients of culturally competent services and providers include: Flyer circulation via public posting locations including, but not limited to: MCBH lobbies, Mammoth Lakes Public Library, Flores Family Day Care, La Tiendita, Espacio II, La Carniceria, local coffee shops , Mono County Social Services board, Mono County Superior Court, Laundromats, tabling at Health Fairs and other community events, Mammoth Lakes Post Office, etc.; via email to other county departments and agencies; Spanish Facebook page; Spanish section of Mono County Behavioral Health website; telephone calls to individuals; and "word-of-mouth" throughout the community.

Individuals who staff our 24/7 Access Line are trained to be familiar with the culturally-competent services that we offer and are able to provide interpreter services or link clients to language assistance services as needed.

Mono County Behavioral Health has several informing materials, brochures, and postings in our lobbies (in English and Spanish) that highlight available services, including culturally-specific services. In addition, informing materials inform clients of their right to FREE language assistance, including the availability of interpreters. Informing materials are offered to clients at intake and are also available in our lobbies and both wellness centers in the county.

A Wellness Centers & Programming lists provides an invitation from MCBH to community members to visit our wellness centers in Walker or Mammoth lakes. These centers host a variety of free activities each week, including yoga, support groups, arts and crafts, and youth programs. Additional free programming is available in Bridgeport and Benton.

A *Provider List* is available to clients which lists provider names, population specialty (children, adult, veterans, LGBTQI2-S, etc.), services provided, language capability, and whether or not the provider is accepting new clients. This list offered to clients upon intake and is available in our

lobbies and both wellness centers. The *Provider List* is also available on our website in both Spanish and in English for viewing and/or downloading. The *Provider List* is regularly updated

Visit: https://monocounty.ca.gov/behavioral-health/page/resources

Front Office staff are bilingual and bicultural and are able to assist Spanish speaking consumers immediately. Should a consumer require another language besides Spanish or English, Front Office staff are familiar with the use of Language Line Solutions.

MCBH has also assessed factors that may create barriers for diverse populations to access services and created plans to increase access. These include extended hours, option for telehealth services, and an ADA-compliant office centrally located in Mammoth Lakes; and pursuing a co-located office in a planned affordable housing and permanent supportive housing development in the center of Mammoth Lakes. Finally, MCBH increases access for members of the County's most rural communities, as well as its Native/Indigenous residents in those communities by hosting or operating wellness programming in those communities.

III. Quality of Care: Contract Providers

MCBH's Quality Assurance Coordinator ensures that our contracted provider, North American Mental Health Services completes an annual cultural competence training.

IV. Quality Assurance

At this time, MCBH collects such outcome measures as the PHQ-9, GAD-7, CANS, and ACEs from clients. As part of the Department's ongoing racial equity training with Dr. Jei Africa, staff participated in a brief_pre/post-test regarding their understanding of cultural competence and comfort having such conversations with fellow staff members.

In terms of the process for reviewing grievances and appeals related to cultural competency Mono County Behavioral Health is committed to addressing issues regarding cultural competency grievances and appeals in an expedient and appropriate manner. The department is also committed to providing several avenues to file an issue:

- Ensuring assistance is available, if needed, for the client / family member / provider / community member to file their issue; and
- Honoring the Issue Filer's desire for anonymity; and
- Contact with MCBH's contracted Patient Rights Advocate.

MCBH will follow all protocols as outlined in our "Beneficiary Grievance and Appeal Process" policy and procedure when cultural issues arise.