



CULTURAL AND LINGUISTIC COMPETENCE POLICY ASSESSMENT 2024 REPORT

One of the Quality Improvement strategies in the County of San Diego Behavioral Health Services (BHS) Cultural Competence Plan is to survey all program managers annually to evaluate their perception of their programs' cultural and linguistic competence. Accordingly, all County and County-contracted programs are required to complete the Cultural and Linguistic Competence Policy Assessment (CLCPA). The assessment was administered for the first time in 2017, as a replacement of the annual CC-PAS.

The CLCPA was developed by Georgetown University's National Center for Cultural Competence and adapted by BHS to align with the expectations recommended by the Cultural Competence Resource Team (CCRT) and the National Culturally and Linguistically Appropriate Services (CLAS) Standards. The goal of the CLCPA is to enhance the quality of services within culturally diverse and underserved communities; promote cultural and linguistic competence; improve health care access and utilization; and assist programs with developing strategies to eliminate disparities.

For more information, contact bhspophealth.hhsa@sdcounty.ca.gov



BACKGROUND

A Google survey was distributed via email to all County-contracted and County-operated Program Managers from February through March of 2024. The Program Managers were asked to identify main cultural groups that their program predominantly serves, as a reference when they completed the survey. They also had the opportunity to request technical assistance to become familiar with the items in each of the eight sections. The response options were based on a Likert scale and assigned a numerical value, ranging from 1 to 5.

A total of 213 programs responded to the survey: 149 (70%) Mental Health Services (MHS) and 64 (30%) Substance Use Disorder Services programs (SUD). The self-reported responses are shown in this report as combined percentages, as well as broken down into MHS and SUD responses to contrast the two systems of care. Responses were compared to those received in 2023, with directional changes depicted in the Δ columns.

SUMMARY OF FINDINGS

- ♦ The majority of the respondents were in a Program Manager or Program Director role (45% and 41%, respectively). About 14% of respondents indicated that they held another position at the program.
- ♦ The respondents indicated that they are fairly or very familiar with the diverse communities and the demographic makeup of their service areas (Section 1), continuing the trend from the previous year.
- The majority of respondents indicated support for cultural competence in the overall organizational philosophy most of the time or all the time (Section 2), continuing the trend from the previous year.
- There was a relatively wide distribution of levels of personal and program staff involvement in the communities' culturally diverse activities (Section 3).
- The majority of respondents reported collaborating with community-based organizations to address the health and mental health needs of culturally diverse groups in their service area (Section 4).
- About 7-12% of respondents indicated that their organizations do not have procedures to achieve the goal of a culturally and linguistically competent workforce that includes either staff recruitment, hiring, retention, or promotion (Section 5).
- While the organizations' staff are reported as relatively diverse culturally and linguistically, respondents indicated that the executive management and physicians staff are the least diverse (Section 5).
- Less than half of survey respondents reported their programs <u>never</u> or <u>seldom</u> use interpretation services personnel. About 30-40% of respondents indicated that they regularly use interpretation services personnel, and about half of the respondents indicated that their organizations regularly evaluate the quality and effectiveness of these services. (Section 7).





- ♦ Compare to previous years, results from MHS and SUD respondents were relatively similar. (DMC-ODS was established in San Diego in 2018).
- Most technical assistance (TA) requests were related to the CLAS Standards, quality improvement process, community resources, educational resources, and culturally diverse activities.

ASSESSMENT RESULTS

Section 1: Knowledge of Diverse Communities

The focus of this section is organizational policy that takes into consideration cultural beliefs, strengths, vulnerabilities, community demographics, and contextual realities.

- ♦ The majority of the respondents (97.6%) indicated that their organizations were <u>fairly well</u> or <u>very well</u> familiar with and able to identify diverse communities in their service areas (*Question 1*).
- ♦ Most respondents (98.1%) indicated that their organizations' Cultural Competence Plans identified and supported the CLAS Standards (*Question 2*), a slight decrease of 1.4% from 99.5% in FY 2022-23.
- ♦ While there is a higher level of reported knowledge on the diverse communities served by the programs, the data reflects the most need is in the area of identifying health beliefs, natural networks of support, help-seeking practices, the way illness and health are viewed in the community especially for SUD programs. (Question 8 & 9).
- ♦ The most common TA requests were related to the identification of culturally diverse communities, cultural groups in the service area, CLAS Standards, and the cultural competence plan.







ASSESSMENT RESULTS

Section 1: Knowledge of Diverse Communities (continued)

Section 1 Questions:	Not at All	Δ	Barely	Somewhat	Fairly Well	Δ	Very Well	Δ	Yes	Δ	No	Δ
	0.0%		0.0%	2.3%	27.2%	4	70.4%	1	N/A	N/A	N/A	N/A
Is your organization able to identify the culturally diverse communities in your service area?	0.0%		0.0%	2.7%	20.8%	\downarrow	76.5%	1	N/A	N/A	N/A	N/A
communication your sorrice area.	0.0%		0.0%	1.6%	42.2%	1	56.3%	\downarrow	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	98.1%	1	1.9%	1
Does your organization's Cultural Competence Plan identify and support the CLAS Standards?	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	97.3%	4	2.7%	1
and support the CEAS Standards:	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100.0%		0.0%	\top
	0.0%	1	0.5%	6.1%	30.0%	\downarrow	63.4%	1	N/A	N/A	N/A	N/A
Is your organization familiar with current and projected demographics for your service area?	0.0%		0.0%	6.0%	24.8%	\downarrow	69.1%	1	N/A	N/A	N/A	N/A
actinographics for your service area:	0.0%	4	1.6%	6.3%	42.2%	\downarrow	50.0%	1	N/A	N/A	N/A	N/A
Is your organization able to describe the social strengths	0.0%		0.0%	6.6%	41.3%	4	52. 1%	1	N/A	N/A	N/A	N/A
(e.g., support networks, family ties, spiritual leadership, etc.)	0.0%		0.0%	7.4%	34.9%	\downarrow	57.7%	4	N/A	N/A	N/A	N/A
of diverse cultural groups in your service area?	0.0%		0.0%	4.7%	56.3%	\downarrow	3 9.1%	1	N/A	N/A	N/A	N/A
Is your organization able to describe the social problems	0.0%		0.0%	4.7%	34.7%	4	60.6%	4	N/A	N/A	N/A	N/A
(e.g., dispersed families, poverty, unsafe housing, etc.) of	0.0%		0.0%	5.4%	29.5%	\downarrow	65.1%	1	N/A	N/A	N/A	N/A
diverse cultural groups in your service area?	0.0%		0.0%	3.1%	46.9%	1	50.0%	V	N/A	N/A	N/A	N/A
	0.0%	П	0.5%	8.0%	36.6%	4	54.9%	4	N/A	N/A	N/A	N/A
Is your organization familiar with health disparities among culturally diverse groups in your service area?	0.0%		0.0%	8.7%	33.6%	\downarrow	57.7%	4	N/A	N/A	N/A	N/A
to the state of th	0.0%		1.6%	6.3%	43.8%	\downarrow	48.4%	1	N/A	N/A	N/A	N/A
Is your organization able to identify the languages and	0.5%	П	0.0%	8.5%	36.2%	1	54.9%	4	N/A	N/A	N/A	N/A
dialects used by culturally diverse groups in your service	0.7%		0.0%	7.4%	32.2%	1	59.7%	4	N/A	N/A	N/A	N/A
area?	0.0%		0.0%	10.9%	45.3%	1	43 .8%	4	N/A	N/A	N/A	N/A
For the culturally diverse groups in your service area, is	0.0%		0.9%	10.8%	51. 6%	1	36.6%	4	N/A	N/A	N/A	N/A
your organization familiar with: [The health beliefs, customs,	0.0%		1.3%	8.1%	49.7%	1	40.9%	4	N/A	N/A	N/A	N/A
and values?]	0.0%		0.0%	17.2%	56.3%	\downarrow	26.6%	1	N/A	N/A	N/A	N/A
For the culturally diverse groups in your service area, is	0.0%		1.4%	9.9%	50.2%	1	38.0%	1	N/A	N/A	N/A	N/A
your organization familiar with: [The natural networks of	0.0%		0.7%	8.1%	49.0%	1	42.3%	1	N/A	N/A	N/A	N/A
support?]	0.0%		3.1%	14.1%	53. _{1%}	\downarrow	28.1%	1	N/A	N/A	N/A	N/A
	0.5%	1	0.5%	12.2%	48.4%	4	38.5%	4	N/A	N/A	N/A	N/A
For the culturally diverse groups in your service area, can your organization identify: [Help-seeking practices?]	0.7%	1	0.0%	8.1%	50.3%	4	40.9%	4	N/A	N/A	N/A	N/A
, , , , , , , , , , , , , , , , , , , ,	0.0%		1.6%	21.9%	43.8%	\downarrow	<mark>3</mark> 2.8%	1	N/A	N/A	N/A	N/A
For the culturally diverse groups in your service area, can	0.5%	1	0.9%	12.7%	46.0%	4	39 .9%	4	N/A	N/A	N/A	N/A
your organization identify: [The way illness and health are	0.7%	1	0.0%	10.1%	47.0%	\downarrow	42.3%	V	N/A	N/A	N/A	N/A
viewed?]	0.0%		3.1%	18.8%	43 .8%	\downarrow	<mark>3</mark> 4.4%	4	N/A	N/A	N/A	N/A
For the culturally diverse groups in your service area, can	0.5%	1	0.0%	8.5%	44.1%	1	46.9%	4	N/A	N/A	N/A	N/A
your organization identify: [The way mental health is	0.7%	1	0.0%	4.7%	43.0%	1	51.7%	4	N/A	N/A	N/A	N/A
perceived?]	0.0%		0.0%	17.2%	46.9%	\downarrow	<mark>3</mark> 5.9%	V	N/A	N/A	N/A	N/A

Note: N/A in the above graph indicates that the answer option was not available for these questions. Δ column indicates change compared to 2023 results.

SUD





Section 2: Organizational Philosophy

This section focuses on the incorporation of cultural competence into the organization's mission statement, structures, practice models, collaboration with clients/participants and community members, and advocacy.

- ♦ 8.5% of programs reported their mission statement does not incorporate cultural and linguistic competence in service delivery (*Question 10*, compared to 3.2% in 2023).
- ♦ The majority of the respondents (94.3%) indicated their organization supported a practice model that incorporates culture in the delivery of services most of the time or all the time, continuing the trend from previous years (Question 11).
- ♦ Most of the respondents (92.4%) indicated that their organization considered cultural and linguistic differences in developing quality improvement processes most of the time or all the time (*Question 12*).
- Improvement was seen in delivery for the systematic review of procedures ensuring relevance to culturally and linguistically competent services (*Question 14*, 64.3 % and *Question 15*, 54.0% reporting their organization does this <u>all the time</u>).
- Majority of respondents (92.0%) reported that their organization helps participants get the support they need (e.g., flexible service schedules, childcare, transportation, etc.) to access services most of the time or all the time. This is consistent across MHS and SUD results (Question 16).
- ♦ The survey data reflects the area that has the most need is related to program planning, structures within programs to assure participant and community participation. (*Question 17*, 9.9% reporting program does this <u>not at all, sometimes</u>).
- The TA requests were related to assistance with quality improvement processes.

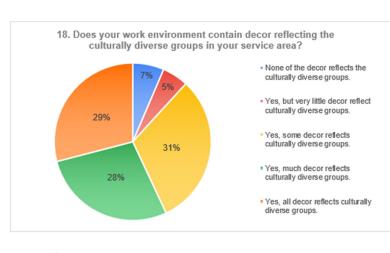
Section 2 Questions:	Not at All	Δ	Sometimes	Often	Δ	lost of the time	Δ	All the time	Δ	Yes	Δ	No	Δ
10. Does your organization have a mission statement that	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	91.5%	4	8.5%	1
incorporates cultural and linguistic competence in service	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	91.9%	\downarrow	8.1%	1
delivery?	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	90.6%	\downarrow	9.4%	1
	0.5%	1	1.4%	3.8%	1	28.6%	4	65.7%	1	N/A	N/A	N/A	N/A
Does your organization support a practice model that incorporates culture in the delivery of services?	0.7%	1	1.3%	4.0%	1	28.9%	\downarrow	65.1%	\downarrow	N/A	N/A	N/A	N/A
and the second of the second o	0.0%		1.6%	3.1%	4	28.1%	\downarrow	67.2%	1	N/A	N/A	N/A	N/A
	0.0%		1.9%	5.6%	1	30.0%	4	62.4%	1	N/A	N/A	N/A	N/A
12. Does your organization consider cultural and linguistic differences in developing quality improvement processes?	0.0%		1.3%	5.4%	1	31.5%	\downarrow	61.7%	1	N/A	N/A	N/A	N/A
unistrations in actionspiring quality improvements processes.	0.0%		3.1%	6.3%	1	26.6%	1	64.1%	1	N/A	N/A	N/A	N/A
13. Does your organization advocate for culturally diverse	0.0%		0.5%	5.6%	1	21.1%	\downarrow	72.8%	1	N/A	N/A	N/A	N/A
participants regarding quality of life issues (e.g., employment,	0.0%		0.0%	5.4%	1	23.5%	1	71.1%	\downarrow	N/A	N/A	N/A	N/A
housing, education) in your service area?	0.0%		1.6%	6.3%	\downarrow	15.6%	\downarrow	76.6%	1	N/A	N/A	N/A	N/A
14. Does your organization systematically review procedures	0.0%		4.2%	5.2%	1	26.3%	\downarrow	64.3%	1	N/A	N/A	N/A	N/A
to ensure that they are relevant to delivery of CULTURALLY	0.0%		3.4%	6.0%	1	27.5%	\downarrow	63.1%	1	N/A	N/A	N/A	N/A
competent services?	0.0%		6.3%	3.1%	1	23.4%	\downarrow	67.2%	1	N/A	N/A	N/A	N/A

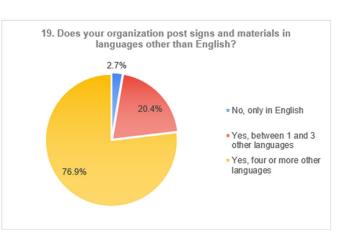




Section 2: Organizational Philosophy (continued)

Section 2 Questions:	Not at All	Δ	Sometimes	Often	Δ	lost of the time	Δ	All the time	Δ	Yes	Δ	No	Δ
15. Does your organization systematically review procedures	0.0%		4.7%	8.9%	4	<mark>3</mark> 2.4%	\downarrow	54.0%	1	N/A	N/A	N/A	N/A
to ensure that they are relevant to LINGUISTICALLY	0.0%		4.0%	10.1%	\downarrow	29.5%	\downarrow	56.4%	1	N/A	N/A	N/A	N/A
competent services?	0.0%		6.3%	6.3%	\downarrow	3 9.1%	1	48.4%	1	N/A	N/A	N/A	N/A
16. Does your organization help participants get the support	0.0%		1.9%	6.1%	4	28.6%	1	63.4%	1	N/A	N/A	N/A	N/A
they need (e.g., flexible service schedules, childcare,	0.0%		2.0%	5.4%	4	32.2%	1	60.4%	1	N/A	N/A	N/A	N/A
transportation, etc.) to access services?	0.0%		1.6%	7.8%	1	20.3%	\downarrow	70.3%	1	N/A	N/A	N/A	N/A
17. Are there structures in your program to assure for	1.4%	1	8.5%	8.0%	1	34.7%	1	47.4%	1	N/A	N/A	N/A	N/A
participant and community participation in: [Program	2.0%	1	10.1%	10.1%	4	34.9%	1	43.0%	4	N/A	N/A	N/A	N/A
planning?]	0.0%		4.7%	3.1%	4	<mark>3</mark> 4.4%	1	57.8%	1	N/A	N/A	N/A	N/A
	0.9%	1	5.6%	10.3%	4	29.1%	\downarrow	54.0%	1	N/A	N/A	N/A	N/A
17. Are there structures in your program to assure for participant and community participation in: [Service delivery?]	1.3%	1	6.0%	11.4%	4	29.5%	\downarrow	51.7%	1	N/A	N/A	N/A	N/A
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0%		4.7%	7.8%	\downarrow	28.1%	1	59.4%	1	N/A	N/A	N/A	N/A
17. Are there structures in your program to assure for	0.5%		4.2%	8.9%	4	21.6%	\downarrow	64.8%	1	N/A	N/A	N/A	N/A
participant and community participation in: [Evaluation of	0.7%	\downarrow	3.4%	10.7%	1	24.8%	\downarrow	60.4%	1	N/A	N/A	N/A	N/A
services?]	0.0%		6.3%	4.7%	\downarrow	14.1%	\downarrow	75.0%	1	N/A	N/A	N/A	N/A
17. Are there structures in your program to assure for	1.4%	1	3.3%	11.3%	4	26.8%	\downarrow	57.3%	1	N/A	N/A	N/A	N/A
participant and community participation in: [Quality	1.3%	1	4.0%	12.8%	4	29.5%	1	52.3%	4	N/A	N/A	N/A	N/A
improvement?]	1.6%	\downarrow	1.6%	7.8%	4	20.3%	\downarrow	68.8%	1	N/A	N/A	N/A	N/A
17. Are there structures in your program to assure for	0.0%		1.9%	8.0%	4	23.9%	1	66.2%	1	N/A	N/A	N/A	N/A
participant and community participation in: [Customer	0.0%		1.3%	9.4%	1	26.8%	\uparrow	62.4%	V	N/A	N/A	N/A	N/A
satisfaction?]	0.0%		3.1%	4.7%	\downarrow	17.2%	\downarrow	75.0%	1	N/A	N/A	N/A	N/A





Note: N/A in the above graph indicates that the answer option was not available for these questions.

 Δ column indicates change compared to 2023 results.

The pie charts for Questions 18 and 19 indicate percentages for combined responses from MHS and SUD respondents.





Section 3: Personal Involvement in Diverse Communities

This section addresses the extent to which an organization and its staff participate in social and recreational events and purchase goods and services within the communities they serve.

- Responses in this section are relatively more widely distributed.
- Most respondents reported that their organization identifies opportunities for staff to share their experience and knowledge of diverse communities with their colleagues (72.8% reporting program does this most of the time, and all the time).
- ♦ There are more identifying opportunities within culturally diverse communities for staff to attend formal cultural or informal recreational activities (*Question 20*). This result is likely influenced by the lifting of COVID-19 public health recommendations on limiting large scale gatherings and events.
- ♦ The most common TA requests were related to identifying opportunities within culturally diverse communities such as subcontracting for services from a variety of vendors and the participation in community and educational events or activities.

Section 3 Questions:	Not at All	Δ	Sometimes	Often	Δ	Most of the time	Δ	All the time	Δ
20. Does your organization identify opportunities within	6.1%	\downarrow	27.2%	18.8%	1	25.8%	\downarrow	22.1%	1
culturally diverse communities for staff to: [Attend formal	4.7%	1	24.2%	18.8%	\downarrow	29.5%	\uparrow	22.8%	1
cultural or ceremonial functions?]	9%	\downarrow	34%	19%	1	17%	\downarrow	20%	1
20. Does your organization identify opportunities within	8.5%	\downarrow	23.9%	15.0%	4	23.0%	\downarrow	29.6%	1
culturally diverse communities for staff to: [Purchase goods or services from a variey of merchants (either for personal use or	6.7%	1	25.5%	12.8%	\downarrow	24.2%	\downarrow	30.9%	1
job-related activities)?]	12.5%	\downarrow	20.3%	20.3%	1	20.3%	\downarrow	26.6%	1
20. Does your organization identify opportunities within	9.4%	1	19.2%	16.0%	\downarrow	22.5%	\uparrow	<mark>3</mark> 2.9%	1
culturally diverse communities for staff to: [Subcontract for	7.4%	1	20.1%	12.8%	\downarrow	24.2%	\uparrow	35.6%	1
services from a variety of vendors?]	14.1%	1	17.2%	23.4%	\downarrow	18.8%	\uparrow	26.6%	1
20. Does your organization identify opportunities within	2.8%	$ \downarrow $	31.0%	18.3%	V	24.4%	\uparrow	23.5%	1
culturally diverse communities for staff to: [Participate in	4.0%	1	28.9%	15.4%	\downarrow	27.5%	1	24.2%	1
informal recreational or leisure time activities?]	0.0%	\downarrow	<mark>3</mark> 5.9%	25.0%	1	17.2%	\downarrow	21.9%	1
20. Does your organization identify opportunities within	4.2%	1	11.7%	22.1%	1	31.9%	\uparrow	30.0%	1
culturally diverse communities for staff to: [Participate in	3.4%	1	12.8%	19.5%	\downarrow	34.2%	\uparrow	30.2%	\downarrow
community education activities?]	6.3%	1	9.4%	28.1%	1	26.6%	\uparrow	29.7%	1
21. Does your organization identify opportunities for staff to	0.0%		11.7%	15.5%	1	22.1%	\downarrow	50. <mark>7</mark> %	1
share with colleagues their experiences and knowledge about	0.0%		8.7%	17.4%	1	22.8%	\downarrow	51.0%	1
diverse communities?	0.0%		18.8%	10.9%	\downarrow	20.3%	\downarrow	50.0%	1





Section 4: Resources and Linkages

This section focuses on the ability of the organization and its staff to effectively utilize both formalized and natural networks of support within culturally diverse communities to promote and maintain linkages through structures and resources.

- ♦ Majority of respondents (85.5%) reported that their organization collaborated with community-based organizations most of the time or all the time to address the needs in their service area (*Question 22*).
- ♦ 71.8% of respondents reported that their organization uses resource materials most of the time or all the time (including communication technologies) that are culturally and linguistically appropriate to inform diverse groups about whole person wellness (*Question 25*).
- The most common TA requests were related to the organization working with social or professional contracts that would help them understand health and mental health beliefs and practices of culturally linguistically diverse groups in their service area. Examples include becoming more familiar with community resources and CLAS Standards.

Section 4 Questions:	Not at All	Δ	Sometimes	Often	Δ	Most of the time	Δ	All the time	Δ
22. Does your organization collaborate with community-based	0.0%		4.7%	9.9%	\downarrow	29.6%	1	55.9%	1
organizations to address the health and mental health related needs of the culturally and linguistically diverse groups in the	0.0%		6.0%	8.7%	\downarrow	28.2%	\uparrow	57.0%	1
service area?	0.0%		1.6%	12.5%	\downarrow	<mark>3</mark> 2.8%	1	53. <mark>1</mark> %	1
23. Does your organization work with social or professional contacts (e.g., cultural brokers, liaisons, cultural stakeholders)	4.2%	1	16.4%	18.3%		23.9%	\downarrow	3 <mark>7.1%</mark>	1
who help understand health and mental health beliefs and	2.7%	1	13.4%	20.8%	\uparrow	26.2%	\downarrow	36.9%	1
practices of culturally and linguistically diverse groups in the service area?	7.8%	1	23.4%	12.5%	1	18.8%	\downarrow	<mark>3</mark> 7.5%	1
24. Does your organization establish formal relationships with	3.8%	1	20.2%	16.0%	\downarrow	21.6%	\downarrow	<mark>3</mark> 8.5%	1
these professionals and/or organizations to assist in serving	2.0%	\downarrow	18.1%	16.1%	\downarrow	25.5%	\downarrow	38.3%	1
culturally and linguistically diverse groups?	7.8%	1	25.0%	15.6%	1	12.5%	\downarrow	<mark>3</mark> 9.1%	1
25. Does your organization use resource materials (including	0.5%	V	11.3%	16.4%	1	27.7%	\downarrow	44 <mark>.1%</mark>	1
communication technologies) that are culturally and linguistically appropriate to inform diverse groups about whole	0.0%	\downarrow	6.7%	17.4%	\downarrow	30.9%	\downarrow	45.0%	1
erson wellness?	1.6%	1	21.9%	14.1%	1	20.3%	\downarrow	42.2%	1



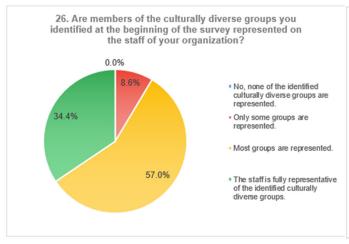


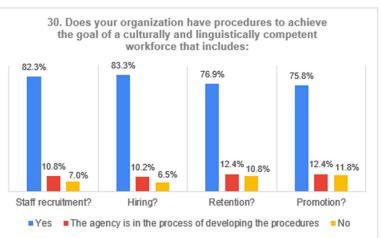


Section 5: Human Resources

The focus of this section is on the organization's ability to sustain a diverse workforce that is culturally and linguistically responsive.

- Respondents were asked to identify main cultural groups that their programs serve predominantly (*Question 26*). The majority of the respondents indicated that most culturally diverse groups are represented on the program staff (57.0%); about a third of respondents indicated that their staff is fully representative (34.4%).
- About 75% of respondents indicated that their organizations are in the process of developing procedures to enhance retention and promotion to achieve the goal of a culturally and linguistically competent workforce. These results are consistent across MHS and SUD programs.
- About 17% of respondents reported that their organizations had <u>very few</u> or <u>no</u> culturally and linguistically diverse staff in executive management, similar to the previous year. Additionally, a 14.4% reported the same for the physicians/psychiatrists cohort overall, increased from the previous year. This result reinforces the view that there may be opportunities for focusing on diversity in the behavioral health workforce pipeline (*Question 27*).
- ♦ There was a relatively wider distribution for incentives for the improvement of cultural and linguistic competence and about 40% of respondents reported <u>very few</u> or <u>no</u> incentives (*Question 28, 29*).
- ♦ Majority of respondents (74.6%) reported that there were <u>many</u> resources to support regularly scheduled professional development and in-service training for all levels of staff (*Question 31*).
- ♦ 75.7% of respondents indicated that <u>many</u> in-service training activities on culturally competent services were conducted for staff at all levels of the organization, and 51.6% indicated the same for linguistically competent services, which shows an increase from the previous year (*Questions 32* and *33*).
- ♦ The TA requests were related to workforce diversity, CLAS standards, culturally and linguistically competent workforce, Americans with Disabilities Act (ADA) mandates.





Note: The pie charts for Questions 26 and 30 indicate percentages for combined responses from MHS and SUD respondents.





Section 5: Human Resources (continued)

Section 5 Questions:	None	Δ	Very Few	Some	Δ	Most	Many	Δ	All	Δ
27. Does your organization have culturally and	2.1%	1	7.4%	40.2%	4	31.7%	0.0%	1	18.5%	1
linguistically diverse individuals as: [Board members?	1.6%	1	7.1%	41.7%	1	33.1%	0.0%	\downarrow	16.5%	1
(n=189)]	3.2%	1	8.1%	<mark>3</mark> 7.1%	\downarrow	29.0%	0.0%	1	22.6%	4
27. Does your organization have culturally and	3.8%	1	6.2%	28.2%	V	38.3%	0.0%	1	23.4%	1
linguistically diverse individuals as: [Program directors?	4.1%	1	8.3%	27.6%	\downarrow	39.3%	0.0%	\downarrow	20.7%	4
(n=209]	3.1%	1	1.6%	29.7%	\downarrow	<mark>3</mark> 5.9%	0.0%	1	29.7%	1
27. Does your organization have culturally and	4.8%	1	12.0%	32.2%	V	31.3%	0.0%	1	19.7%	1
linguistically diverse individuals as: [Executive	6.2%	1	11.7%	31.7%	\downarrow	33.8%	0.0%	1	16.6%	V
management? (n=208)]	1.6%	1	12.7%	<mark>3</mark> 3.3%	\downarrow	25.4%	0.0%	\downarrow	27.0%	1
27. Does your organization have culturally and	4.2%	1	10.2%	33.7%	\downarrow	31.3%	0.0%	V	20.5%	1
linguistically diverse individuals as:	5.0%	1	6.7%	33.6%	1	32.8%	0.0%	\downarrow	21.8%	1
[Physicians/psychiatrists? (n=166)]	2.1%	\downarrow	19.1%	<mark>3</mark> 4.0%	\downarrow	27.7%	0.0%	\downarrow	17.0%	\downarrow
27. Does your organization have culturally and	0.5%	1	2.1%	19.8%	1	49.5%	0.0%	V	28.1%	1
linguistically diverse individuals as: [Clinical staff?	0.8%	1	2.3%	16.5%	\downarrow	54.1%	0.0%	\downarrow	26.3%	1
(n=192)]	0.0%		1.7%	27.1%	1	3 9.0%	0.0%	\downarrow	<mark>3</mark> 2.2%	1
27. Does your organization have culturally and	1.0%	1	3.8%	19.7%	\downarrow	44.7%	0.0%	V	30.8%	1
linguistically diverse individuals as: [Administrative	0.7%	1	4.8%	15.9%	\downarrow	49.0%	0.0%	1	29.7%	1
staff? (n=208)]	1.6%	4	1.6%	28.6%	1	<mark>3</mark> 4.9%	0.0%	\downarrow	3 3.3%	1
27. Does your organization have culturally and	0.0%	4	4.5%	18.1%	V	47.5%	0.0%	1	29.9%	1
linguistically diverse individuals as: [Clerical staff?	0.0%		4.0%	15.3%	\downarrow	51.6%	0.0%	1	29.0%	1
(n=177)]	0.0%	4	5.7%	24.5%		37.7%	0.0%	1	<mark>3</mark> 2.1%	\downarrow
27. Does your organization have culturally and	0.5%	V	2.0%	15.3%	\downarrow	46.5%	0.0%	V	3 5.6%	1
linguistically diverse individuals as: [Support staff?	0.0%		2.9%	11.5%	1	48.9%	0.0%	\downarrow	36.7%	1
(n=202)]	1.6%	V	0.0%	23.8%	\downarrow	41.3%	0.0%	1	<mark>3</mark> 3.3%	\downarrow
27. Does your organization have culturally and	2.8%	1	2.8%	15.6%	4	41.3%	0.0%	П	37.4%	1
linguistically diverse individuals as: [Peer Support	1.6%	1	3.2%	12.8%	\downarrow	46.4%	0.0%	1	36.0%	1
Specialists? (n=179)]	5.6%	1	1.9%	22.2%	1	29.6%	0.0%	\downarrow	40.7%	V
27. Does your organization have culturally and	2.5%	1	2.5%	21.4%	V	47.8%	0.0%	1	25.8%	V
linguistically diverse individuals as:	0.9%	V	3.4%	20.5%	\downarrow	49.6%	0.0%	1	25.6%	4
[Volunteers/students? (n=159)]	7.1%	1	0.0%	23.8%	1	42.9%	0.0%	1	26.2%	V
								-		





Section 5: Human Resources (continued)

Section 5 Questions:	None	Δ	Very Few	Some	Δ	Most	Many	Δ	All	Δ
28. Does your organization have incentives for the	18.3%	\downarrow	19.7%	43.2%	1	0.0%	18.8%	1	N/A	N/A
improvement of CULTURAL competence throughout	13.4%	\downarrow	16.8%	46.3%	\downarrow	0.0%	23.5%	1	N/A	N/A
the organization?	29.7%	\downarrow	26.6%	<mark>3</mark> 5.9%	1	0.0%	7.8%	\downarrow	N/A	N/A
29. Does your organization have incentives for the	18.3%	\downarrow	22.1%	44.1%	1	0.0%	15.5%	\downarrow	N/A	N/A
improvement of LINGUISTIC competence throughout	14.1%	\downarrow	19.5%	47.7%	1	0.0%	18.8%	\downarrow	N/A	N/A
the organization?	28.1%	1	28.1%	<mark>3</mark> 5.9%	\downarrow	0.0%	7.8%	\downarrow	N/A	N/A
31. Are there resources to support regularly scheduled	0.5%	1	3.8%	21.1%	\downarrow	0.0%	74.6%	1	N/A	N/A
professional development and in-service training for	0.0%		4.0%	21.5%	\downarrow	0.0%	74.5%	1	N/A	N/A
staff at all levels of the organization?	1.6%	1	3.1%	20.3%	\downarrow	0.0%	75.0%	1	N/A	N/A
32. Are in-service training activities on CULTURALLY	0.9%	1	3.3%	19.2%	\downarrow	0.0%	75.7%	1	N/A	N/A
competent services (e.g., values, principles, practices, and procedures) conducted for staff at all levels of the	0.7%	\uparrow	2.7%	18.1%	\downarrow	0.0%	78.5%	1	N/A	N/A
organization?	1.6%	\uparrow	4.7%	21.9%	1	0.0%	71.9%	\downarrow	N/A	N/A
33. Are in-service training activities on	2.8%	1	7.0%	38.5%	\downarrow	0.0%	51.6%	1	N/A	N/A
LINGUISTICALLY competent services (e.g., Title VI, CLAS Standards, ADA mandates) conducted for staff at	3.4%	1	6.0%	43.0%	\downarrow	0.0%	47.7%	1	N/A	N/A
all levels of the organization?	1.6%	1	9.4%	28.1%	\downarrow	0.0%	60.9 [%]	\downarrow	N/A	N/A

Section 6: Clinical Practice

This section focuses on the ability of the organization and its staff to adapt approaches to behavioral health care delivery based on cultural and linguistic differences.

- ♦ The majority of respondents (77.5%) indicated that their programs differentiate between racial and cultural identity when serving diverse consumers (*Question 37*).
- ♦ A higher number of respondents indicated that their programs <u>never</u> or <u>seldom</u> used health assessment or diagnostic protocols adapted for culturally diverse group, 8.9% in 2024 compare to 1.8% in 2023 (*Question 34*).
- ♦ There was a TA request for additional resources for health assessment or diagnostic protocols that are adapted for culturally diverse groups, culturally diverse assessment, and CLAS Standards.

Section 6 Questions:	Never	Δ	Seldom	Sometimes	Regularly	Δ	Not applicable (my program does not provide clinical services)
34. Does your organization use health assessment or	1.1%	1	7.8%	15.1%	76.0%	1	16.0%
diagnostic protocols that are adapted for culturally diverse	1.6%	1	5.7%	13.1%	79.5%	\downarrow	18.1%
groups? (n=179)	0.0%		12.3%	19.3%	68.4%	1	10.9%
35. Does your organization use health promotion, disease	1.1%	1	7.3%	16.8%	74.9%	1	16.0%
prevention, engagement, retention and treatment protocols	1.6%	1	2.5%	17.2%	78.7%	1	18.1%
that are adapted for culturally diverse groups? (n=179)	0.0%		17.5%	15.8%	66.7%	1	10.9%
36. Does your organization connect consumers to natural	0.5%	\downarrow	1.6%	11.6%	86.3%	1	10.8%
networks of support to assist with health and mental health	0.8%		1.5%	8.3%	89.5%	1	10.7%
care? (n=190)	0.0%		1.8%	19.3%	78.9%	\downarrow	10.9%
	2.1%	1	5.2%	15.2%	77.5%	1	10.3%
37. Does your organization differentiate between racial and cultural identity when serving diverse consumers? (n=191)	0.8%	1	1.5%	13.5%	84.2%	\downarrow	10.7%
	5.2%	1	13.8%	19.0%	62.1 <mark>%</mark>	\downarrow	9.4%

Legend:

Combined

MHS

SUD





Section 7: Language and Interpretation Services

This section focuses on the ability of the organization and its staff to ensure access to materials in various languages, offer interpretation/translation services, and implement processes to ensure adherence to National CLAS Standards.

- ♦ Almost all respondents (92.0%) indicated their organization informs consumers of their rights to language access services as required by the CLAS Standards (*Question 38*). Notably, less respondents reported that this is done regularly at their programs compared to 2023 results.
- ♦ About 30-40% of respondents indicated that their programs <u>never</u> or <u>seldom</u> use interpretation services (*Question 39*).
- ♦ MHS respondents reported the <u>regular</u> translation and use of forms in other languages at a higher rate (73.8%) compared to SUD respondents (48.4%).
- ♦ The TA requests were related to the effectiveness and quality of interpretation materials and resources.

Section 7 Questions:	Never	Δ	Seldom	Sometimes	Regularly	Δ
38. Does your organization inform consumers of their rights to language access services under Title VI of the Civil Rights Act	0.9%	1	0.0%	7.0%	92.0%	\downarrow
of 1964 - Prohibition Against National Origin Discrimination	1.3%	1	0.0%	6.7%	91.9%	\downarrow
and as required by the CLAS Standards 5-8 for language access?	0.0%		0.0%	7.8%	92.2%	\downarrow
39. Does your organization use either of the following	25.4%	1	14.1%	26.8%	<mark>3</mark> 2.9%	\downarrow
personnel to provide interpretation services? [Certified medical	23.5%	1	12.1%	24.2%	39.6%	1
interpreters?]	29.7%	1	18.8%	<mark>3</mark> 2.8%	17.2%	\downarrow
39. Does your organization use either of the following	25.4%	1	12.7%	26.8%	<mark>3</mark> 4.3%	V
personnel to provide interpretation services? [Trained medical	22.8%	1	10.1%	26.2%	40.3%	1
interpreters?]	31.3%	1	18.8%	28.1%	20.3%	\downarrow
39. Does your organization use either of the following	17.8%	1	25.4%	29.1%	27.7%	V
personnel to provide interpretation services? [Sign language	18.1%	1	23.5%	29.5%	28.9%	4
nterpreters?]	17.2%	1	29.7%	28.1%	25.0%	\downarrow
40. Does your organization: [Translate and use patient consent	1.9%	1	12.7%	19.2%	66.2%	4
40. Does your organization: [Translate and use patient conse forms, educational materials, and other information in other anguages?]	1.3%	1	6.0%	18.8%	73.8%	\downarrow
languages?]	3.1%	\downarrow	28.1%	20.3%	48.4%	\downarrow
	0.5%		5.6%	18.8%	75.1%	V
40. Does your organization: [Ensure materials address the literacy needs of the consumer population?]	0.7%	1	4.0%	18.1%	77.2%	\downarrow
,	0.0%	1	9.4%	20.3%	70.3%	1
	1.9%	1	8.9%	27.7%	61.5 <mark>%</mark>	4
40. Does your organization: [Assess the health literacy of consumers?]	2.0%	1	7.4%	28.9%	61.7%	\downarrow
•	1.6%	4	12.5%	25.0%	60.9 <mark>%</mark>	1
	2.8%	1	8.9%	24.4%	63.8%	4
40. Does your organization: [Employ specific interventions based on the health literacy levels of consumers?]	2.0%	1	7.4%	24.8%	65.8%	4
,	4.7%	1	12.5%	23.4%	59.4%	1
41. Does your organization evaluate the quality and	9.4%	1	9.9%	28.2%	52.6%	1
effectiveness of interpretation and translation services it either	3.4%	1	9.4%	27.5%	59.7%	1
contracts for or provides?	23.4%	1	10.9%	29.7%	3 5.9%	\downarrow





Section 8: Engagement of Diverse Communities

This section focuses on the organizations and its staff's engagement of diverse communities in health and behavioral health promotion and disease prevention.

- ♦ This year more respondents indicated that their programs <u>regularly</u> practice the engagement activities outlined in the survey questions. These results are likely affected by the lifting of COVID-19 public health recommendations on limiting large scale gatherings and events.
- ♦ 62% of respondents reported regularly conducting activities tailored to engage culturally diverse communities, and representing cultural groups in their brochures and other media. Notably, 15.6% of SUD respondents reported that this is never or seldom done in their programs compared to 5.4% of MHS respondents (*Question 42*).
- Significant improvement was reported (73.2%) of respondents regularly indicated their organization brochures and other media reflect cultural groups in the service area. This reflects a 14.6% increase from FY 2022-23 who indicating regularly at 58.6%. (*Question 44*).
- There was an overall improvement with respondents indicating their organization reached out and engaged with individuals, groups, or entities in whole person wellness, mental health promotion, and disease prevention initiatives. Examples are as followed: primary care providers, homeopaths, ethnic/cultural publishers, human service agencies, tribal cultural, recovery advocacy, local business owners, and social/cultural organizations.
- ♦ The most common TA requests were related to identifying traditional healers in the community, community engagement, and building partnerships.

Section 8 Questions:	Never	Δ	Seldom	Sometimes	Regularly	Δ
	4.7%	1	3.8%	29.6%	62.0%	1
42. Does your organization conduct activities tailored to engage culturally diverse communities?	2.0%	1	3.4%	31.5%	63.1%	1
	10.9%	1	4.7%	25.0%	59.4%	1
	1.9%	1	2.3%	22.5%	73.2%	1
44. Do organization brochures and other media reflect cultural groups in the service area?	1.3%	+	2.0%	22.1%	74.5%	1
	3.1%	1	3.1%	23.4%	70.3%	1
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	11.7%	\downarrow	19.2%	42.3%	26.8%	1
wellness, mental health promotion, and disease prevention initiatives: [A. Places of worship or spiritual wellness, and	6.7%	†	18.8%	45.0%	29.5%	1
clergy, ministerial alliances, or indigenous religious or spiritual leaders?]	23.4%	\downarrow	20.3%	<mark>3</mark> 5.9%	20.3%	\downarrow
45. Does your organization reach out to and engage the	25.4%	\downarrow	<mark>3</mark> 7.6%	22.1%	15.0%	1
ollowing individuals, groups, or entities in whole person vellness, mental health promotion, and disease prevention nitiatives: [B. Traditional healers (e.g., medicine men or	17.4%	\rightarrow	41.6%	22.8%	18.1%	1
women, curanderas, espiritistas, promotoras, or herbalists)?]	<mark>43</mark> .8%	1	28.1%	20.3%	7.8%	\downarrow

Note: Question 43 is excluded from the systemwide analysis because the Program Managers were asked to list the types of activities that their organizations conducted that were tailored to engage culturally diverse communities. The respondents' answers will be included in the program-level reports.

N/A in the above graph indicates that the answer option was not available for these questions.





Section 8: Engagement of Diverse Communities (continued)

45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	5.2%	1	8.0%	17.8%	69.0%	1
wellness, mental health promotion, and disease prevention initiatives: [C. Primary care providers, dentists, chiropractors,	4.7%	1	9.4%	16.8%	69.1%	1
or licensed midwives?]	6.3%	↑	4.7%	20.3%	68.8%	1
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	21.6%	4	41.3%	24.4%	12.7%	1
wellness, mental health promotion, and disease prevention initiatives: [D. Providers of complementary and alternative	15.4%	V	43.6%	26.2%	14.8%	1
medicine (e.g., homeopaths, acupuncturists, death doulas, or lay midwives)?]	<mark>3</mark> 5.9%	1	<mark>3</mark> 5.9%	20.3%	7.8%	V
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	21.6%	4	30.5%	30.0%	17.8%	1
wellness, mental health promotion, and disease prevention initiatives: [E. Ethnic/cultural publishers, radio, cable, or	17.4%	1	32.2%	30.9%	19.5%	1
television stations or personalities, or other ethnic media sources?]	<mark>3</mark> 1.3%	V	26.6%	28.1%	14.1%	1
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person wellness, mental health promotion, and disease prevention	2.3%	\downarrow	7.5%	23.5%	66.7%	1
	3.4%	V	5.4%	24.8%	66.4%	1
initiatives: [F. Human service agencies?]	0.0%	V	12.5%	20.3%	67.2%	1
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	4.7%	\downarrow	25.4%	42.7%	26.8%	1
wellness, mental health promotion, and disease prevention initiatives: [G. Tribal, cultural, or recovery advocacy	4.7%	V	20.8%	48.3%	26.2%	1
organizations?]	4.7%	V	<mark>3</mark> 5.9%	29.7%	28.1%	1
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	16.0%	1	23.0%	3 8.5%	22.5%	1
wellness, mental health promotion, and disease prevention initiatives: [H. Local business owners such as	11.4%	1	20.1%	42.3%	26.2%	1
barbers/cosmetologists, sports clubs, casinos, salons, and other ethnic/cultural businesses?]	26.6%	1	29.7%	29.7%	14.1%	1
45. Does your organization reach out to and engage the following individuals, groups, or entities in whole person	11.3%	V	19.2%	3 6.6%	<mark>3</mark> 2.9%	1
wellness, mental health promotion, and disease prevention initiatives: [I. Social/cultural organizations (e.g.,	5.4%	\downarrow	16.1%	43.6%	34.9%	1
civic/neighborhood associations, sororities, fraternities, ethnic/cultural associations)?]	25.0%	1	26.6%	20.3%	28.1%	1





NEXT STEPS

- The CLCPA supports BHS' commitment to a culturally and linguistically responsive workforce, as well as the guidelines described in the Cultural Competence (CC) Plan and the CC Handbook. These documents can be accessed in Section 4 of the BHS Technical Resource Library.
- The CLCPA results will be disseminated systemwide and to interested parties and stakeholders such as the BHS leadership, the Cultural Competence Resource Team (CCRT), the Quality Review Council (QRC), BHS Training and Education Committee (BHSTEC).
- CCRT will review the technical assistance requests and strategize solutions for recommendations.
- The program-level results will be provided to the program monitors, who will be encouraged to begin conversations with the program managers, in order to strategize how their organizations can enhance the quality of services within culturally diverse and underserved communities.
- The next CLCPA will be administered in February 2025, notable changes in results will be highlighted in the analysis of the results.

