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# Bureau of Cultural Competence Annual Report

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2013

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NYS OMH Cultural Competence  
Work-Plan

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## INTRODUCTION

*Title VI of the Civil Rights Act of 1964, prohibits recipients of federal funding from discriminating on the basis of race, color, national origin, gender, age and disability. This protection requires that Limited English Proficiency (LEP) persons be provided an equal opportunity to benefit from or have access to services that are normally provided in English. The purpose of Title VI and related statutes and policies are to ensure programs in the receipt of federal and/or state funding are not utilized in a manner that results in discrimination.*

### Relevant Statutes and Standards

OMH Cultural and Linguistic Policy 502PC (May, 2012)

Executive Order No. 26 (October 6, 2011)

Americans with Disabilities Act (Pub. L. 101-336, 104 Stat. 327, 42 U.S.C. 12101-12213 and 47 U.S.C. 225 and 611).

14 NYCRR §527.4

*Comprehensive Accreditation Manual for Hospitals (CAMH) and the Comprehensive Accreditation Manual for Behavioral Health Care (CAMBHC)*

*CAMH standards*

National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS) (Federal Register, Vol. 65, No. 247, pp. 80865-80879, December 2000)

Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. §701 et seq)

Title VI of the Civil Rights Act of 1964 (Pub L.88-352, 78 Stat.241)

This report serves as annual monitoring tool for the completion of described goals and objectives for the Statewide Cultural Competence Plan for 2013. The CC plan is guided by Federal/State laws, regulation and other accrediting bodies (The Joint Commission) that require service provision to address the distinct needs of racial/ethnic and linguistic populations, and other marginalized groups.

The focus for 2013 was to integrate cultural competence into the fabric of our organization by establishing granular data collection across existing OMH data sets; strengthening our internal alignments; providing appropriate Language Access Services and training; providing culturally and linguistically competent related trainings; development of a cultural and linguistic assessment and cultural competency plan instrument for OMH use; standardizing our cultural competence (cc) practices and reviewing our policies for inclusion and infusing evidence best practices into services.

### Highlight for this year 2013:

#### Training:

- In the year ending 2013, BCC has provided **42 trainings** in which **2564 participants** attended the training this year.
- Since 07/26/09 to 12/1/13, BCC has provided a total of **147 trainings** in which **8673 participants** were provided cultural and linguistic competence throughout NYS **averaging 59 participants** per session.
- BCC and CECC established "**Learning**" **curriculum** internet page that host diverse CC and Linguistic webinars and training videos (e.g. "How to conduct Spirituality Groups"; and "How to Serve & Engage LGBT Adult and Children in Clinical Setting"; "What is Health Literacy?")
- BCC is responsible for monitoring and training compliance of Executive Order 26 (EO26) training mandate: BCC reports that all OMH facility staff have been trained (**13,169** OMH employees: **100% response rate**) from October, 2012 to December 6, 2013.

- All OMH facilities have provided **at least 2-3 hours** of cultural and/or linguistic training this year meeting OMH Policy 502 mandatory 2-4 hour annual training requirement (e.g. Mandatory EO26 training: 2.5 hours focused on language access services, the laws and regulations involved, and culture's impact within language access services)
- BCC was a guest speaker/ presenter at 2013 NYAPRS Conference, 2013 ACLAIMH Conference, and 2013 MHA of Suffolk/ Nassau County Conference.
- BCC had created **13 new** archived webinar videos from OMH and statewide access on BCC internet page for the Year, 2013.
- BCC had established new employee orientation and annual EO26 Training with designated facility Language Access Coordinators in 2013 to ensure OMH staff is trained annually.

### Assessments & Planning:

- New York State Psychiatric Institute CECC completed their Language Access Assessment Report (2013) of all 26 OMH Facilities and outpatient programs to identify potential disparities in access and utilization of LEP services within for OMH Facilities and outpatient programs. The study and collection of data was performed for 2012.
- BCC and NKI CCECC have successfully collaborated with Central Field Office to establish a process to develop a CC Assessment instrument that's in its final stage of revision to be utilized by the five OMH Field Offices in 2014 to develop an Annual CC plan (**on-going project 2014**).
- BCC and Nathan Kline Institute CECC developed and piloted a CC Assessment instruments for OMH facilities (Children, Adult, and Forensic) to measure cultural competence activity and to form the basis for a cultural competence plan to address the facility cultural and linguistic needs to be implemented 2014 in compliance to OMH Policy 502.
- The two CECCs and BCC have developed a "Cultural and Linguistic Competence Plan" Template instrument for OMH Facility use in 2013 which will be piloted at OMH facilities in 2014 in compliance to OMH Policy 502.
- BCC implemented and monitored compliance to the OMH Facility LEP Language Access 30-items checklist in which all OMH facilities submitted on September, 2013. OMH facilities meet 29 out of 30 items on checklist to access compliance to EO26)

### Compliance Monitoring:

- BCC had monitored compliance of OMH facilities to OMH Cultural and Linguistic Policy 502PC which mandates annually 2-4 hours cultural and linguistic training.
- BCC monitored compliance and implementation of EO26 Training of all OMH facility staff and facility utilization of Language Access Services (e.g. interpreter and translation services).
- BCC investigated and recommended corrective actions to be taken to on EO26 Complainants from OMH facilities. Three Complaint Reports received in 2013. BCC monitors EO26 Complaints for OMH as required by the Order.
- All OMH facilities have developed and implemented a bi-annual "Language Access Plan" which is monitored by the facility Language Access Coordinator and BCC for compliance to Executive Order 26.
- BCC implemented and provided OMH's Executive Order26 Compliance Report for the OMH Commissioner to review and approve for submission to the Governor's Office on 10/31/13.
- BCC project manager for the successful creation of the standardized OMH Facility Complaint Form (OMH 270). OMH had 26 versions s of a Complaint form. Estimated saving of **\$49,000** from creation of the standardized form

## OMH & Community Collaborations/ Partnerships:

- BCC met the goal for establishing the formation of four Regional Multi-cultural Advisory Committees (Lower Hudson Region, NYC Region, Long Island Region and Central Region) of this year 2013.
- The four Regional Multi-cultural Advisory Committees (Lower Hudson Region, NYC Region, Long Island Region and Central Region) have met multiple times this year in 2013 and meetings are scheduled for 2014.
- BCC and the two CECCs have developed and promoted “Demographic Granular Data Collection” policies promoting data collection processes that capture better cultural and linguistic information of recipients and family members served within OMH behavioral system’s within the data sets of CAIRS, PCS, and MHARS.
- BCC and the two CECCs have provided feedback and recommendations to OMH’s Regional Centers of Excellence Plan to be inclusive of cultural and linguistic competence and how it can enhance engagement, outreach, clinical, training, and development of community-based services to meet the diverse cultural needs served within NYS Behavioral Health system. NKI and NYSPI CECCs were represented in all planning committees in the Fall 2013.
- BCC establishment of Cultural-Diversity-Respect Committee at OMH Facilities (**15 out 24 facilities have an established committee in 2013: 2014 Objective is to have established a committee at all operating RCE facilities next year**). This Committee has been a valuable resource to facilities who have been utilizing the Committee within facilities operations and milieu practices.

## BUREAU MISSION AND STANDING GOALS:

THE MISSION OF THE BUREAU OF CULTURAL COMPETENCE (BCC) IS TO ELIMINATE MENTAL HEALTH DISPARITIES THROUGH TRAINING AND TECHNICAL SUPPORT.

We support OMH Vision: “The New York State Office of Mental Health will work toward a more effective public mental health system, which values recovery, hope, excellence, respect, and safety.”

To accomplish our mission and vision the Bureau of Cultural Competence (BCC) operates within our Cultural Competence Strategic Plan framework 2013-2014 identifying three standing goals that involved internal/external partners of the NYS OMH Steering Committee (Executive Staff), CECC Centers, and the NYS Multicultural Advisory Committee (MAC).

The Bureau of Cultural Competence collaborates with the CECCs at the Psychiatric Institute and the Nathan Kline Institute who are responsible for the advancement of research and development of cultural competency practices for people of color and underserved populations. The Bureau of Cultural Competence also serves as the conduit for the MAC which advises the Commissioner on improvement of mental health services for diverse cultural groups. This report is provided to detail the status of standing goals described above and to determine next steps for the years 2014-2015. This report also includes updates for the NYS MAC and the CECCs.

## DOMAINS, OBJECTIVES/ACTIVITES 2013-2014 BCC WORKPLAN:

### BCC Strategic Work Plan 2013-2014

#### I. Domain: Needs/Capacity Assessment

- ✚ Maintain knowledge base of the cultural groups of NYS who may have distinct mental health service needs
- ✚ Assess the capacity of the public mental health system to serve these groups

#### BCC Objectives/Activities:

##### A. Assess Populations Served-

- Promoted enhancement and utilization of OMH data sets (e.g., PCS, MHARS and CAIRS) to provide more granular- level details on cultural characteristics of persons and family served in the NYS PMHS  
**(Still working with OMH Executive Team : 2014 Objective)**

##### B. Assess state-operated facilities-

- Developed and Implemented NKI CC Organizational-level assessment pilot project at OMH facilities (Adult and Forensic facilities); analyzed data and suggested strategies for CC improvement.  
**(Completed in June, 2013).**
- BCC implemented and monitored compliance to the OMH Facility LEP Language Access 30-items checklist.  
**(OMH facilities on Sept. 2013, OMH meet all 30 items on checklist to be in compliance to EO26)**
- Complete NKI CC Organizational-level assessment at all OMH facilities (Adult, Children and Forensic); analyze data and suggest strategies for CC improvement- **(To be achieved 2014: 2014 Objective).**
- Assist in the development and creation of the CC Field Office Assessment instrument with Central Field Office (on-going process-  
**(The CC Assessment instrument will be piloted at the four other Field Offices in 2014).**
- Disseminated the report on results of NYSPI Language Access Survey of OMH facilities on November, 2013.
- Trained OMH Facilities to utilize and implement CC plan template to develop an annual language access and CC work plan in compliance to OMH Policy 502 **(to be achieved in 2014: 2014 Objective).**

##### C. Assess new health care reform environments-

- Developed CC assessment instruments for new environments, e.g. behavioral health care organizations, Health care homes, PROS program, or OMH Field Offices.  
**(Achieved for OMH Field Offices 2013- work in Progress with four other offices in 2014; work with NKI CECC for other adaptations)**

## II. DOMAIN: Information Exchange

- ✚ Provide information/resources to behavioral health internal/external stakeholders regarding best practices for cultural competency activities
- ✚ Improve training and/or technical supports across the OMH system

### BCC Objectives/Activities:

#### A. Gather/disseminate CC-related information (e.g., articles, best practices, program services, etc.) for internal and external stakeholders-

- Maintained website/intranet of CC information including instruments, scholarly articles, evidence-based practices, and training materials ( **BCC developed a new CC “Learning Unit” curriculum internet page:** that host diverse CC webinars and training videos for statewide access, and EO26 training videos for new hires and modified annual. EO26 training for OMH staff who completed the initial training; new training will be added in 2014)
- Maintained statewide volunteer Language bank (**Updated 2012-2013: Update due April, 2014**)
- Maintained website for mental health information for individuals and families in the OMH PBHS in the most frequently encountered languages (**On-going Annual Objective of BCC**)
- Utilized Listserv to highlight CC activities and events around NYS (**On-going Annual Objective of BCC**)
- Created and disseminated DMHIS cultural profile hospital data to facilities. (**On-going Annual Objective of BCC**)
- Maintained websites for Russian, Chinese (Mandarin), Korean, and Haitian (Creole) (**On-going Annual Objective of BCC**)
- Posted monthly cultural competence articles in the NYS OMH Newsletter (**On-going Annual Objective of BCC**)
- NYSPI-CECC produces regular Cultural Competence Matters newsletters for dissemination throughout New York State. Recent issues have focused on ensuring health care reform in New York State, and racial and ethnic disparities among persons with psychiatric disorders and multiple chronic medical conditions.
- Roberto Lewis-Fernández, Director of the NYSPI-CECC conducted three Grand Rounds on the Cultural Formulation Interview, at NYSPI, Mid-Hudson Forensic and Rockland.

#### B. Initiate and maintain stakeholder, within-system, and intersystem partnerships-

- Increased collaborative activities with internal/external partners (e.g., Regional/ Local MAC local and MAC statewide, CLMHDS, NYAPRS, NAMI, OMH CC Steering Committee, OMH senior staff, Center for Practice Innovation) (**On-going Annual Objective of BCC**).

- Nathan Kline Institute-CECC created and updated cultural demographic profiles related to race, ethnicity and religion for NYS
- CECC at New York State Psychiatric Institute has partnered with the OMH Center for Practice Innovations at Columbia University to develop an online training module of the Cultural Formulation Interview.
- NYSPI-CECC maintains collaboration with Comunilife to evaluate Life is Precious, a program to reduce suicidal behavior among Latina adolescents in the Bronx and Brooklyn.
- NKI and NYSPI CECCs have partnered with NYAPRS and the NYC DOHMH to organize an event on cultural competence in the ear of behavioral health care reform to be held in February 2014.
- Nathan Kline Institute-CECC created and updated cultural demographic profiles related to race, ethnicity and religion for NYS **(On-going Annual Objective of BCC)**
- Continued support of Regional/Local Multicultural Advisory Committees as a vehicle for the consumer voice statewide **(On-going Annual Objective of BCC)**
- Facilitated quarterly OMH State Multicultural Advisory Committee meetings with the purpose of advising NYS OMH programs about culturally competent services **(On-going Annual Objective of BCC)**
- Facilitated quarterly Regional Multicultural Advisory Committee meetings with the purpose of advising NYS OMH programs about culturally competent services **(On-going Annual Objective of BCC)**
- Facilitated quarterly OMH Cultural Competence Steering Committee meetings with the purpose of advising NYS OMH units and programs about CECC culturally competent research work **(On-going Annual Objective of BCC)**

### **C. Improve training and technical supports across OMH system-**

- BCC provided training and technical support to OMH facilities and OMH-licensed programs and agencies throughout NYS (approximately 2500+) through in-person training, videos, webinars, written materials, and other media as appropriate **(On-going Annual Objective of BCC)**

### **III. DOMAIN: Service Delivery**

- ✚ Improve the delivery of services to cultural groups with respect to language accommodations
- ✚ Modify existing services and/or introduce new services particularly geared towards specific cultural groups

## **BCC Objectives/Activities:**

### **A. Ensure the implementation of CC into OMH initiatives and programs-**

- Reviewed standing guidelines and newly developed program tools for cultural and linguistic competence **(In 2013, BCC provided recommendations to OMH SOC Anchors, PAR Applications, and OMH RCE Plan: On-going Annual Objective of BCC)**
- Developed novel culturally competent approaches to service delivery for diverse groups **(BCC provided tailored CC Training webinars, videos, CC curriculum, and resources for statewide access: On-going Annual Objective of BCC)**
- Implement and test culturally competent approaches to service delivery for diverse groups **(e.g. PI CECC developed Motivational Pharmacotherapy, Motivational Interviewing for Cultural groups, and DSM-V Cultural Formulation Interview; NKI CECC developed CC Program Modifying Tool-kit: On-going Annual Objective of BCC)**

## **IV. DOMAIN: Human Resources**

- ✚ Ensure staff at all levels are trained in CC
- ✚ Ensure staff at all levels trained Executive Order 26 (EO26) Language access Services

## **BCC Objectives/Activities:**

### **A. Develop and disseminate training material for staff-**

- Developed CC and EO26 training for orientation of new hires and for sustaining staff CC skills **(On-going Annual Objective of BCC)**
- Conducted webinars and videos to target specific cultural groups **(On-going Annual Objective of BCC)**
- Ensured that new and previously trained OMH staff on EO26 Languages Access Services is performed annually **(On-going Annual Objective of BCC)**
- BCC to monitor and update OMH Facility parenthesis and language bank directory lists bi-annually: updated 2012 **(Update on list due April, 2014: (On-going Annual Objective of BCC)**

## **V. DOMAIN: Outcomes**

- ✚ Track service outcomes in terms of disparities in access, service utilization, quality of care, and consumer satisfaction

## **BCC Objectives/Activities:**

### **A. Establish and monitor disparity rates using existing data sets-**

- Developed penetration and utilization rates by race/ethnicity/language preference using PCS and other OMH data sets (e.g. NKI & NYSPI: **OMH Unmet Needs Assessment Report 2012- posted 2013**)
- Developed and pilot test methodologies for assessing satisfaction with services in cultural groups (e.g. **NYSPI OMH Language Access Assessment Report completed 2012, posted 2013. Data are currently available Through NKI CECC for 2011**)

**NOTE\*:** BCC has incorporated Executive Order 26, Title VI, National CLAS Standards, Joint Commission's Road Map (2010), OMH's Cultural and Linguistic Policy 502PC in the BCC Work Plan 2013-2014 to be in compliance to the above mandates, laws, policy, and/or standards.

## **Establishment of Regional Multi-cultural Advisory Committees (RMACs) 2013**

### **Long Island RMAC (Suffolk County)**

This long standing Multicultural Advisory Committee continues to meet on a regular basis and has planned and hosted several trainings and conferences during 2013.

The Long Island RMAC sponsored a two-day Engagement Training for Health Home Care Managers and Care Coordinators which attracted **150** attendees. Hextor Pabon, NYS OMH Bureau of Cultural Competence presented these trainings at FEGS in Copiague and Federation at Pilgrim Psychiatric Center.

- Long Island RMAC also delivered their message across Suffolk to the East End in Hampton Bays by organizing a discussion on behavioral health stigma, cultural diversity, and the developing role of peer specialists.
- Long Island RMAC also sponsored a peer specialist training, presented by Frances Priester-Moss on Advocacy at Its Best at the Suffolk County Community Mental Hygiene Services Building. This training is part of a series of trainings focusing on the Peer Specialist and Cultural Competence.
- The Long Island RMAC continues to engage consumers and providers in the conversation about the challenges faced as we seek to understand each other spiritually, racially, and culturally.
- The Long Island RMAC will begin 2014 with a focus on the importance of spirituality as a significant component of cultural identity and an individual's recovery journey.

### **Lower Hudson River RMAC (Westchester County)**

- The Lower Hudson RMAC began its work with a focus on identifying disparities in service delivery for certain populations in Westchester County. This led to the creation of a consumer satisfaction survey that was written and reviewed by their expert team as well as the Bureau of Cultural Competence staff and the NKI Center of Excellence in Culturally Competent Mental Health, Carole Siegel, Ph.D., Director and New York State Psychiatric Institute Center of Excellence for Cultural Competence, Roberto Lewis-Fernandez, M.D. Director. The survey is currently being pilot tested in several behavioral health organizations within Westchester County. The plan is

to complete this process by December 31<sup>st</sup>, 2013.

- This group continues to meet monthly at the Mount Vernon Public Library.
- The Lower Hudson RMAC also hosted a faith based event for communities of faith to learn firsthand about the New York State of Health insurance Benefit exchange and the Affordable Care Act held at Grace Baptist Church, Mount Vernon, Ne

#### **Upper Hudson River RMAC (Brooklyn and Manhattan (New York City))**

- The Upper Hudson River RMAC meets every four months in Manhattan. During 2013 this group has focused on housing, housing advocacy, and accountability within the mental health housing system. The group was able to meet with representatives from NYSOMH Housing Development Office as well as a follow up visit with Ms. Moira Tashjian, Housing Development Director who spent extensive time with the group reviewing some of their many issues, concerns, and suggested solutions.
- The group has been briefed and educated about the role and work of consumer advisory boards spearheaded by Lourdes Cintron of the Citywide Mental Health Project.
- These meetings attract more than 40 people covering a broad range of issues that bear on cultural competency with an emphasis on solutions and not just problems.

In 2013, the team from NKI Center of Excellence in Culturally Competent Mental Health, led by Carol Siegel, Ph.D. Director, came to Manhattan to meet with consumers attending the Upper Hudson River RMAC meeting to discuss Consumer Cultural Activation or a process of activating consumers to participate early on in the care process by providing their care givers with a personal cultural lens on their views and attitudes towards care. The idea is that consumers will culturally identify themselves to their provider. This discussion will continue in 2014 with the assistance of NKI and the Upper Hudson River.

#### **Central Region RMAC (Broome County)**

- The Central RMAC was established on January 10, 2013 and has enjoyed much success with the engagement of county and community stakeholders in their deliberations and follow-up planning around issues and areas of community concern.
- The Central RMAC continues to meet quarterly in Broome County and attract a diversified population and an array of agencies and stakeholders from the Central region, both urban and rural They are also experiencing outstanding community participation and increasing attendance at their quarterly meetings.
- The Central RMAC hosted a town hall meeting on May 2, 2013 with stakeholders including consumers and providers. This meeting produced a list of issues and concerns that those in attendance wanted to address. Although there were many competing issues, the group decided that Transportation was the top issue that needed to be addressed from among all other issues. The group arranged a meeting with Mobility Management to address the transportation needs.

- Central RMAC also hosted a meeting of the New York State of Health for the faith based community and also , social services, non-profit agencies, Rural health Network and the YWCA. This meeting was held at the Broome County Public Library in the Decker Room with Mr. Kelvin S. Sapp, MPH, Project Coordinator, External Affairs, Outreach and Marketing for the New York State of Health.

Rockland County has invited the Bureau of Cultural Competence to meet with their group of providers who have expressed an interest in the development of a Regional MAC. The first meeting was held on December 2, 2013 at NKI. Subsequent meetings are scheduled for Monday, January 6, 2013 and Monday, February 5, 2013.

The Regional MACs are enjoying the presence of our own Moira Tashjian, Director of Housing Development NYSOMH on monthly conference calls to discuss Housing Redesign and OMH’s master plan for future housing developments to serve our diverse population.

***Other Community Collaboration and Presentations Performed 2013:***

- National Alliance on Mental Illness (NAMI NYS) Annual Conference “How NAMI Chapters can Perform Effective Community Outreach and Engagement by Using Cultural Competence”.
- Presented at Mental Health Psychiatric Advisory Committee about the “Health Homes: How cultural competence Matters”
- Presented New York Association of Psychiatric Rehabilitation Services sponsored Executive Conference and Person Recovery Orientated Services Conference: “Health Homes: How cultural competence Matters”
- Presented at Mental Health Association NYS Conference Nassau NY “How Cultural Competence Enhances Community Engagement”

**NEW YORK STATE MULTICULTURAL ADVISORY COMMITTEE (MAC) 2013**

The Multicultural Advisory Committee of the New York State Office of Mental Health advises the Commissioner of Mental Health on policy, programs, procedures, and activities regarding multicultural mental health matters and makes recommendations for possible solutions which meet the needs and concerns of racial, ethnic, and marginalized populations. This committee was reestablished as a working committee in the summer of June 2013.

- In 2013 the MAC By-Laws of 1989 were revised to bring them up to date with current standards, language, and practices and were approved by the OMH legal team in August of 2013
- 18 members were appointed by the OMH Commissioner in June, 2013 to serve on the MAC for a period of 3 (Three) years and a Chair and Co-Chair were elected by the membership to serve for an unspecified number of years.
- The MAC held quarterly meetings during the year and committee members introduced the proposed changes to the 725 Admission form and changes to the PCS, CAIRS, and MHARS datasets.
- The New York State of Health gave a presentation to MAC members on the New York State of Health Benefit Exchange for New York State. This presentation led to the Regional MACS outreach to our Faith based community and subsequent Town Hall Meetings held around the State with local clergy groups. NKI and PI acquainted the MAC with the rationale for changes in the data collection process and recommendations for further discussions.

- PI leader in the development of the Cultural Formulation Interview that has been added to the DSM V did three presentations at OMH on how it was created and how to utilize the instrument.
- The membership continues to provide advice and recommendations to the Commissioner of OMH on policies and procedures and
- Other comments on policy documents as related to behavioral health system transformation.

## **CENTER OF EXCELLENCE FOR CULTURAL COMPETENCE:**

### **Cultural Competence Research**

The enacted Amendment to the 2007 NYS Mental Hygiene Law establishes two Centers of Excellence in Culturally Competent Mental Health. The legislative charge is to identify, assess the outcome, and disseminate best practices of demonstrated behaviors, attitudes, policies and structures that work effectively cross-culturally across varied modalities of care. The New York State Office of Mental Health (OMH) designated the OMH Nathan Kline Institute for Psychiatric Research (NKI) in Orangeburg, NY as one such Center and the OMH New York State Psychiatric Institute (NYSPI) in New York City as another.

### **Nathan Kline Institute, Center of Excellence in Cultural Competence (NKI-CECC)**

#### **Research Initiatives:**

The NKI-CECC conducts research that identifies/develops culturally competent mental health practices, identify disparities and the culturally competent strategies to reduce these disparities, create valid and reliable measures of the cultural competency of practices and organizational structures, and serve as an informational resource on cultural groups and cultural competency to the bureaus of the OMH, and state planners, providers and consumers. The NKI-CECC and BCC work in collaboration in the development and/or dissemination cultural competence best practices, assessment and evaluation instruments, resources, information, research, and training for OMH Organizational use.

## **NKI Center of Excellence in CC Mental Health 2013 Accomplishments and 2014 Planned Activities**

### **Overview**

#### **Mission:**

The NKI CECC

- Conducts research to identify and develop culturally competent mental health practices and to provide evidence of their effectiveness.
- Conducts research to identify disparities and the culturally competent strategies to reduce these disparities for cultural groups
- Creates valid and reliable measures of the cultural competency of practices and organizational structures
- Serves as a resource to NYS OMH to promote cultural competency in programs, policies and practices

- Serve as a resource to providers, planners and consumers for service information and data on cultural groups in NYS

#### **Areas of Activities:**

- NYS needs assessment
- Outreach and engagement strategies
- Enhancing the cultural competency of services
- Cultural competency training
- Cultural competency assessments
- Disparity research
- Information exchange with OMH, communities and service provider
- 

## **2013 Accomplishments**

### **Needs Assessment**

- In a program-based assessment of service needs of Korean populations in a Queens based clinic of Hamilton Madison House, a need to modify the EBP CBT for Korean populations was identified. Negotiations with HMH to work with clinic staff to modify EBP took place in 2013 and agreement was reached to conduct project. An NYU psychiatrist has been engaged to use CECC's Toolkit to Adapt EBPs for Cultural Group to work with staff and community on adaptation. Work will begin in 2014.
- Lack of state funding for Indian based services was identified in our 2012 Indian youth community focus groups as a reason for lower use of OMH services by Indian youth in the Akwesasne reservation. In 2013, direct outreach to providers to develop ways to better engage youth took place but no local leadership emerged. Other approaches will be explored in 2014.

### **Outreach and Engagement**

- Dissemination of clergy guides to recognize mental health (MH) need in cultural groups in faith communities (Asian, Latino (English/Spanish), Muslim, Black) and to triage these persons to umbrella agencies and interested persons.
- Data collection completed at Bellevue Hospital for screening study for detection of depression in primary care. The PHQ-9 currently- used HHC cut-point is being validated for Mexicans, Ecuadoreans, and Puerto Ricans. Analyses in progress.
- Cultural Activation Prompts, a consumer shared decision making tool, for consumers to use to transmit information to care-givers on their cultural identity, and views on mental health care was developed and pilot tested at NYC MAC meeting. Revisions are in progress to make language user-friendly and prompts accessible to consumers.
- Stigma Reduction in Cultural Groups: Literature review and model formulation work were conducted. Cultural stigma framework is under modification.

### **Enhancing the cultural competency of services**

- Toolkit for Modifying EBPs for Cultural groups
  - Implementation write-ups completed and posted to website.
  - Curriculum for social workers on how to modify EBPs for cultural groups was developed (Wendy Schudrich) for Wurzweiler School of Social Work and was used in a 2013 course. CECC evaluated student project and post-tests of students' CC are being made. Dissemination work will take place in 2014 with the NYU Silver School of Social Work a starting possibility.
- Toolkit for modifying clinical practice for cultural groups

- Work continues on a 2<sup>nd</sup> generation toolkit and is based on the Multicultural Skills Model (MCS), a psychology based model of culturally competent service delivery (with Deborah Altschul).
- Community based programs for black youth and their families
  - PASS: Prevention/empowerment program
    - Work continues on elevating PASS to an EBP and on ways to replicate the program. BASC-2 evaluation of 17 youth by self-report and by 2-3 of their family members completed. Data being collected on new cohort and continues in 2014. Work on replication took place with Rockland CPC leadership.
- Collaboration with NYU Silver School of Social Work
 

We co-ran a mini conference with Dean Sherman and other school faculty on ways to collaborate on service related projects. Several areas and interested faculty were identified. We plan to pursue collaborations in 2014.

### **Cultural Competency Training Tools**

- Working with BCC, videos were developed for
  - EBP adaptation for cultural groups using CECC Toolkit.
  - Using guide for the 'Conduct of Multicultural Spirituality Discussion Groups in Behavioral Health Treatment Settings' to establish and run a group.
- Clinician pamphlet completed (Marta Hershkopf) on rationale for incorporating religion and spirituality into therapeutic encounters. Dissemination will take place in 2014.

### **Cultural Competency Assessments**

- Organizational
  - NKI OCCAS was modified for OMH Children's facility and pilot tested in all facilities. Await formation of RCE's for roll out activities.
- Program-level
  - Psychometric testing to date consisted of training pilot work. 2-3 providers were trained in 17 sites in Monroe County and they rated their facilities. In 2014 consumers will rate sites and provider and consumer ratings will be compared.
  - Submitted a grant to PCORI to expand the scope of psychometric testing of program-level instrument to focus on predictive validity. Grant was not funded, and we plan to resubmit grant application in 2014.
- OMH Field Office
 

Instrument was completed and piloted in Syracuse. It will be pilot tested at all field sites in 2014.

### **Disparity Research**

- Separate reports on non-inpatient racial/ethnic prevalence and service use rates were created and disseminated for Systems of Care regions and for OMH Regional Center of Excellence regions.
- Paper on psychosocial challenges of obese Latino youth in NYC high schools (with Cathy Yates and Antonio Convit) revised and accepted for publication.
- Paper on differential use of Buprenorphine vs. Methadone in neighborhoods of NYC examining whether policy has impacted changes over time being written. Data obtained, analyzed and paper in progress (with Helena Hansen).

### **Information Exchange**

- Website: <http://cecc.rfmh.org> updated with new materials.

- Cultural profiles updated. Vietnamese profile added and new materials added to Russian profile
  - Cultural/religious regional maps
    - Updated religion data collected. To be added to website in 2014.
- Worked with BCC, PI and data owners of OMH data collection systems on enhancement of data collection:
  - Selected more granular cultural/demographic information
  - Established policy directives for data collection enhancement for OMH data collection systems
- Participated in OMH Regional Centers of Excellence Meetings to insure infusion of CC into new service models.
- Collaborated with PI to augment the culture and cultural competence related content in the Safety Training for Mental Health Workers in the Community for the Bureau of Education and Workforce Development (BEWD). Will continue to collaborate.
- Participated with the NYC Department of Health and Mental Hygiene, Office of Consumer Affairs to develop a day-long conference to be held on February 28, 2014 on the topic of Cultural Competence in Health Care Reform.
- Member of NYAPRS Cultural Competency Committee
- Other OMH BCC support
  - Wrote articles for OMH newsletter
  - Completed CC Plan template (with PI) in February 2013. Dissemination on hold until RCEs are in place.
  - Participated in BCC webinars
  - Membership on Statewide and Rockland County MACs
  - OMH Steering Committee meeting participation and presentations
  -

## **2014 Planned Activities**

### **Services**

- Adapt CBT for Korean populations (with Dawn Sung)
- Complete 2<sup>nd</sup> generation toolkit to adapt everyday practices for cultural groups (with Deborah Altschul).
- PASS: Complete BASC-2 analysis; complete replication manual; find replication site; obtain funding for replication
- Establish projects with NYU Silver School of Social Work

### **Engagement**

- Complete Consumer Activation Prompts(CAPs)
  - Develop training manual for peer support staff
  - Evaluate
  - Disseminate
- Write paper and present (with Damara Gutnik) PHQ 9 Latino cut-points
- Complete cultural stigma framework. Develop culture specific stigma reduction materials

### **Training**

- Disseminate clinician pamphlet to incorporate religion/spirituality into therapeutic encounters

### **CC Assessments**

- Resubmit PCORI grant on psychometrics of program level instrument
- When OMH RCE roll outs occur, revisit need for different level CC instruments and develop where needed

## Disparities

- Conduct PCS disparity analyses using 2013 data.
- Complete ADHD PCS disparity analysis.
- Complete (with Helena Hansen) Buprenorphine/Methadone paper

## Information Exchange

- Website
- Update cultural data and maps on website using 2010 and ACS census updates.
- Update religious data
- Participate in NYCDOHMH CC Conference on 2/28.
- Present. Train note-takers. Take notes. Write summary conference report with PI.
- Health Care Reform

Work with NYAPRS, OMH, and DOH to ensure CC activities are infused into newly developing integrated care models including OMH RCEs, Medicaid Managed Care, HARPS, and Health Homes.

## ***NEW YORK STATE PSYCHIATRIC INSTITUTE CENTER OF EXCELLENCE FOR CULTURAL COMPETENCE (NYSPI-CECC)***

### RESEARCH INITIATIVES

NYSPI-CECC addresses the growing need for culturally and linguistically appropriate mental health care and service integration, included physical and mental health care integration, throughout New York State. It collaborates with mental health providers, consumers and families, community and faith-based organizations, policy makers, and mental health service researchers to develop, adapt, and evaluate evidence-based approaches aimed at improving access to and the quality of mental health services to underserved populations throughout the State. The NYSPI-CECC and BCC work in collaboration in the development and/or dissemination cultural competence best practices, assessment and evaluation instruments, resources, information, research, and training for OMH Organizational use.

**OMH Language Access Survey Project:** Developed a web-based survey of OMH facilities to assess the scope, type, and quality of access that patients with limited English proficiency have to mental health services in their primary language in order to improve access to services for consumers with limited English proficiency across New York State. Data analysis is completed. Response rate of over 95%.

- Preliminary results were presented to the OMH Cultural Competence Steering Committee in January, 2013.
- A final report on survey findings is under review by OMH. Final results will also be disseminated in one or more peer-reviewed journal articles.
- *Guidelines for Interpreters Working in Mental Health Settings* information sheet has been developed in collaboration with Wilma Alvarado-Little at SUNY Albany. The draft information sheet was presented to the OMH Cultural Competence Steering Committee in January 2013, and a webinar for OMH is under development. In addition, tools for consumers and families, as well as clinic administrators, are under development based on a review of national and international literature and training resources available.

**Physical-Mental Health Integration:** The NYSPI-CECC continues its commitment to examining the integration of physical and mental health. A pilot test of a care manager intervention is ongoing in an OMH outpatient clinic. Preliminary results are routinely presented at national conferences and for peer-reviewed publication. The following publications and presentations were made in 2013:

- Parcesepe, A. & **Cabassa, L. J.** (2013) Public stigma of mental illness in the United States: A Systematic literature review *Administration and Policy in Mental Health and Mental Health Services Research*, 40 (5), 384-399. PMID: 22833051 NIHMSID: 524527
- **Cabassa, L. J.**, Humensky, J., Druss, B., Lewis-Fernández, R., Gomes, P. A., Wang, W., & Blanco, C. (2013). Do race, ethnicity, and psychiatric disorders matter in the prevalence of multiple chronic medical conditions? *Medical Care*, 51(6), 540-547. PMID: PMC3654097
- **Cabassa, L. J.** & Baumann, A. A. (2013). A two-way street: Bridging implementation science and cultural adaptation of mental health treatments. *Implementation Science*, 8 (90). PMID: PMC3765289
- DeVlyder, J.E., Oh, H.Y., Yang, L.H., **Cabassa, L.J.**, Chen, F., & Lukens, E.P. (2013). Acculturative stress and psychotic-like experience among Asian and Latino immigrants to the United States. *Schizophrenia Research*, 150(1), 223-228. PMID: 23932446
- Ezell, J., **Cabassa, L. J.**, & Siantz, L. (In Press). Contours of usual care: Meeting the medical needs of diverse persons with serious mental illness. *Journal of Health Care for the Poor and Underserved*. PMID: 24185152
- Henwood, B., **Cabassa, L. J.**, Craig, C. M., & Padgett, D. K. (2013). Permanent supportive housing: Addressing homelessness and health disparities. *American Journal of Public Health*. [E-pub Ahead of Print] PMID: 24148031
- **Cabassa, L. J.**, Gomes, A., Meyreles, Q., Druss, B., & Lewis-Fernández, R. (2013). Primary health care experiences of Latinos with serious mental illness: A mixed-methods study. *Administration and Policy in Mental Health and Mental Health Services Research*. [E-Pub Ahead of Print] PMID: 24162079
- **Cabassa, L. J.**, Siantz, E., Nicasio, A., Guarnaccia, P., & Lewis- Fernández (In Press). Contextual factors in the health of people with serious mental illness. *Qualitative Health Research*.
- Carliner, H., Collins, P. Y., **Cabassa, L. J.**, McNallen, A., Joestl, S. S., & Lewis-Fernández, R. (In Press). Prevalence of cardiovascular risk factors among racial and ethnic minorities with schizophrenia spectrum and bipolar disorders: A systematic review of the literature. *Comprehensive Psychiatry*
- **Cabassa, L. J.**, Gomes, A., Meyreles, Q., Capitelli, L., Alvarez, J., Younge, R., Nicasio, N., Dragatsi, D., Druss, B., & Lewis-Fernández, R. (January, 2013). A mixed-method study of the health care experiences of Hispanics with serious mental illness. Paper presented at the 17<sup>th</sup> Annual Conference for the Society for Social Work and Research, San Diego, CA.
- Baumann, A. A. & **Cabassa, L. J.** (July 2013). A two-way street: Bridging implementation science and cultural adaptations of mental health treatments. Paper presented at the XXXIV Congresso Interamericano de Psicologia, Brasilia, Brazil.
- Gomes, A. P. & **Cabassa, L. J.** (October, 2013). Understanding barriers to a healthy lifestyle among Hispanics with serious mental illness: An ecological approach. Poster presented at the Annual Conference of the National Hispanic Science Network on Drug Abuse, Bethesda, MD.
- **Cabassa, L. J.** (March, 2013). Reducing Stigma towards Mental Illness in the Latino Community. Grand Rounds: 20<sup>th</sup> Annual Diversity Day, Department of Psychiatry, University of Maryland School of Medicine, Baltimore, MD
- **Cabassa, L. J.** (April, 2013). Reducing the Stigma of Mental Illness in the Latino Community. Alumni Day, Columbia University School of Social Work, New York, NY
- **Cabassa, L. J.** (May 2013). Preparing a Health Care Manager Program to Improve the Health of Hispanics with Serious Mental Illness. Paper presented at the American Society of Hispanic Psychiatry Symposium, American Psychiatric Association Annual Meeting, San Francisco, CA
- **Cabassa, L. J.** (October, 2013). Bridging research and practice: Preparing a health care manager

intervention for Hispanics with serious mental illness. Paper presented at the monthly faculty research presentation symposium. Columbia University School of Social Work. New York, NY

- **Cabassa, L. J.** (October, 2013). Bridges to better health and wellness: A health care manager program to improve the health of people with serious mental illness. Paper presented at the New York State Office of Mental Health Executive Committee Meeting, Albany, NY.
- **Cabassa, L. J.** (December, 2013). Bridging implementation science and cultural adaptation of mental health treatments. Paper presented at the Scholarship & Research Forum. Silberman School of Social Work at Hunter College, New York, NY
- **Cabassa, L. J.** (March, 2013). Reducing Stigma towards Mental Illness in the Latino Community. Grand Rounds: 20<sup>th</sup> Annual Diversity Day, Department of Psychiatry, University of Maryland School of Medicine, Baltimore, MD

**Photovoice:** Leo Cabassa, Assistant Director of the NYSPI-CECC, continues to disseminate the results of Photovoice, an innovative qualitative research project in which clients of two New York-based community service agencies were given cameras and used photographs to document their challenges with ensuring access to physical health. The following publications and presentations were made in 2013:

- **Cabassa, L. J.,** Parcesepe, A., Nicasio, A., Baxter, E. Tsemberis S. & Lewis-Fernández, R., (2013). Health and wellness photovoice project: Engaging consumers with serious mental illness in health care interventions. *Qualitative Health Research*, 23 (5), 618-630. PMID:PMC3818106
- **Cabassa, L. J.,** Nicasio, A. & Whitley, R. (2013). Picturing recovery: A photovoice exploration of recovery among people with serious mental illness in supportive housing. *Psychiatric Services*, 64 (9), 837-842. PMID:23728528 NIMHSID:516617
- **Cabassa, L. J. &** Nicasio, A. (January, 2013). Picturing recovery. A photovoice exploration of recovery dimensions among people with serious mental illness. Paper presented at the 17<sup>th</sup> Annual Conference for the Society for Social Work and Research, San Diego, CA.

**Fotonovela:** Leo Cabassa of the NYSPI-CECC continues to evaluate and disseminate the results of *Fotonovela*, which seeks to increase knowledge and awareness of mental health treatment among Hispanics by the use of a *fotonovela*, a colorful, Spanish-language magazine. Due to high demand at OMH functions, NYSPI-CECC has supplied the BCC with a supply to distribute as needed. Distribution of the *fotonovela* within OMH was also discussed in an OMH Cultural Competence Steering Committee meeting. In addition, the following publications and presentations were made in 2013:

- Unger, J. B., **Cabassa, L. J.,** Molina, G. B., Contreras, S., & Baron, M. (2013). Evaluation of a fotonovela to increase depression knowledge and reduce stigma among Hispanic adults. *Journal of Immigrant and Minority Health*, 15 (2), 398-406. PMID:PMC3602405

**Oral Health:** NYSPI-CECC has become aware of the need for increased access to dental care among persons with serious mental illness (SMI). NYSPI-CECC has developed a partnership with the Columbia University Dental School to develop a survey to be used in two OMH outpatient clinics. The survey examines needs for dental care, ability to access dental services, and barriers to receipt of dental care. We have developed the survey instrument and obtained approval to conduct the survey in the OMH clinics. Following NYSPI Institutional Review Board (IRB) approval, we will begin data collection.

**Cultural Formulation Interview:** NYSPI-CECC has led the development of the Cultural Formulation Interview (CFI), a 16-item cultural assessment that has been field-tested internationally and included in DSM-5. NYSPI-CECC has presented the CFI in multiple forums within OMH, including a webinar in April 2013 (filmed at the Manhattan Psychiatric Center), a presentation at the Cultural Competence Steering Committee in July 2013, and a video filmed for the BCC Curriculum Series (filmed October 2013). A Statewide Grand Rounds is scheduled for 2014. The CFI has been well-received by providers within OMH and we will continue our collaborations to identify ways in which this tool can be useful to OMH in its operations. The following publications and presentations were made in 2013:

- Lu F, Lewis-Fernández R, Primm A, Lim R, Aggarwal N. (In press). Cultural competence, mental health disparities, and cultural psychiatry, in Hales R, Yudofsky S (eds.). *Textbook of Psychiatry*, 6th edition, Washington DC: APPI
- Lewis-Fernandez R, Raggio G, Gorritz-Kindu M, Duan N, Marcus S, Cabassa LJ, Humensky JL, Becker AE, Alarcon RD, Oquendo MA, Hansen H, Like RC, Desai PN, Primm A, Lu F, Kopelowicz A. Development of a Checklist on the Comprehensive Reporting of Race, Ethnicity, and Culture in Psychiatric Publications, *Journal of Nervous and Mental Disease* 2013; 201(10):860-871.
- Aggarwal NK, Nicasio AV, DeSilva R, Boiler M, Lewis-Fernández R: Barriers to Implementing the DSM-5 Cultural Formulation Interview: A Qualitative Study. *Culture, Medicine, and Psychiatry* 37: 505-533.
- Aggarwal NK, DeSilva R, Nicasio A, Boiler, M, Lewis-Fernández R: Does the Cultural Formulation Interview (CFI) for the Fifth Revision of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) Affect Medical Communication? A Qualitative Exploratory Study From the New York Site. *Ethnicity and Health* (in press).
- Aggarwal NK, Glass A, Tirado A, Boiler M, Nicasio A, Alegría M, Wall M, Lewis-Fernández R: The Development of the Cultural Formulation Interview-Fidelity Instrument. *Journal of Health Care for the Poor and Underserved* (in press).
- Lewis-Fernández R. The Cultural Formulation Interview. Grand Rounds at NYSPI, Mid-Hudson Forensic and Rockland Psychiatric. Additional Grand Rounds at New York University Child Study Center, North General Hospital, Queens Hospital,, SUNY Downstate, and Rutgers University.
- Alarcon R, Aggarwal NK, Bassiri K, Bäärnhielm S, Lewis-Fernández R. The DSM-5 Cultural Formulation Interview. American Psychiatric Association Annual Conference.
- DeSilva R, Aggarwal NK, Lewis-Fernández R. Teaching the Outline for Cultural Formulation Through the Cultural Formulation Interview. American Psychiatric Association Annual Conference.
- Lewis-Fernández R, Aggarwal NK, DeSilva R: Using the Cultural Formulation to Train Psychiatry Residents. American Psychiatric Association Annual Conference.
- Lewis-Fernández R. *Culture and diagnosis*. Paper presented in Invited Symposium at Annual Meeting of the American Psychiatric Association, 2013.
- Lewis-Fernández R. *The use of the cultural formulation in training and practice*. Paper presented in Invited Symposium at Annual Meeting of the American Psychiatric Association, 2013.

In addition, the NYSPI-CECC has partnered with the OMH Center for Practice Innovations at Columbia University (CPI) to develop a clinician online training module on the CFI. This module will rely on cutting-edge interactive technology and instructional videos in order to scale up provider training across New York State via the CPI Learning Management System The NYSPI-CECC has leveraged additional funds for the completion of this project by supporting Dr. Ravi DaSilva in obtaining an OMH-Policy Scholar grant.

**Motivational Pharmacotherapy (MPT):** Roberto Lewis-Fernandez is leading a randomized trial of an intervention to improve engagement and retention in psychiatric treatment, including medication adherence, for Latino patients. The trial took place among outpatients seen in an OMH facility. The trial has concluded in 2013 and data analysis is continuing. The following publications and presentations were made in 2013:

- Lewis-Fernández R, Balán IC, Patel SR, Sánchez-Lacay AJ, Alfonso C, Gorritz M, Blanco C, Schmidt A, Jiang H, Schneier F, Moyers TB. Impact of motivational pharmacotherapy on treatment retention among depressed Latinos. *Psychiatry*, 2013; 76:210-222.
- Balán IC, Moyers TB, Lewis-Fernández R: Motivational Pharmacotherapy: Combining motivational interviewing and antidepressant therapy to improve treatment adherence. *Psychiatry*, 2013, 76:203-209. PMID: 23965260.
- Interian A, Lewis-Fernández R, Dixon L: Improving treatment engagement of underserved US racial-ethnic groups: A review of recent interventions. *Psychiatric Services*, 2013, 64:212-222. PMID: 23203442.
- Interian A, Lewis-Fernández R, Gara MA, Escobar JI: A randomized-controlled trial of an intervention to improve antidepressant adherence among Latinos. *Depression and Anxiety*, 2013, 30:688-696.

PMID: 23300127.

**Life is Precious:** In response to OMH's commitment to reduce suicidal behavior, NYSPI-CECC has built a partnership with Comunilife, a community-based organization run by Rosa Gil PhD. Comunilife operates Life is Precious (LIP), a comprehensive program designed to reduce suicidal behavior in Latina adolescents. NYSPI-CECC is evaluating LIP and will examine how to scale it up to a replicable evidence-based practice. We have secured external funding from the American Foundation for Suicide Prevention to help support this work.

**First Episode Psychosis:** In response to OMH's commitment to the development and implementation of comprehensive treatment following a first episode of psychosis (FEP), NYSPI-CECC has built a collaboration with Lisa Dixon, MD, who is implementing On-Track NY within OMH. Jennifer Humensky has contributed to a needs assessment tool and service utilization analysis. Jennifer Humensky and Leo Cabassa are contributing to an analysis of pathways into FEP treatment for persons following a first episode. Sapana Patel is examining shared patient-provider decision making tools. The following publication and presentation were made in 2013:

- Humensky JL, Dixon LB, Essock SM. A Tool for Estimating Costs of First Episode Psychosis Treatment Teams *Psychiatric Services* 2013; 64(9):832-834.
- Humensky JL, Dixon LB, Essock SM. Academy Health Annual Research Meeting, Baltimore, MD, June 26, 2013. "A Tool for Estimating Costs of First Episode Psychosis Treatment Teams" (poster presentation)

In addition, the NYSPI-CECC team assisted this past year with training OnTrack NY staff on the cultural formulation framework and its relevance to FEP treatment.

**Obsessive-Compulsive Disorder:** In response to OMH's interest in examining rates of Obsessive-Compulsive Disorder (OCD) and treatment options, Sapana Patel and Jennifer Humensky participated in an analysis of OCD treatment. This work was supported by an OMH Policy Scholar awarded to Sapana Patel, and was co-authored by Robert Myers. The following publication and presentation were made in 2013:

- Patel S, Humensky JL, Dixon L, Meyers R, Simpson HB. Current Treatment of Obsessive-Compulsive Disorder. *Psychiatric Services*, in press.
- Patel S, Humensky JL, Dixon L, Meyers R, Simpson HB. Academy Health Annual Research Meeting, Baltimore, MD, June 26, 2013. "Current Treatment of Obsessive-Compulsive Disorder" (poster presentation)

### Other NYSPI-CECC Activities

**Granular Data Collection:** NYSPI-CECC, along with NKI-CECC, collaborated with BCC to develop recommendations for standardized data collection of granular cultural data in OMH facilities. We collaborated with data owners of the Patient Characteristics Survey (PCS), the Mental Health Automated Record System (MHARS), and Child and Adult Information Reporting System (CAIRS), and presented our recommendations to the Data Infrastructure Grant (DIG) Team and the OMH Executive Team.

**Collaboration on Psychoeducation:** Roberto Lewis-Fernández collaborated with Molly Finnerty's group at OMH to examine family psychoeducation. The following publication was released in 2013:

- Hackethal VL, Spiegel S, Lewis-Fernández R, Kealey E, Salerno A, Finnerty M: Towards a cultural adaptation of Family Psychoeducation: Findings from three Latino focus groups. *Community Mental Health Journal*, 2013, 49:587-598. PMID: 23179044.

**OMH Multicultural Advisory Committee:** Aniel Nicasio, Research Coordinator of NYSPI-CECC, joined the MAC in 2012. NYSPI-CECC presented research findings in March 2012. Following Aniel's departure, Oscar Jimenez-Solomon joined the MAC and regularly participates in meetings and other activities.

**OMH Cultural Competence Steering Committee:** NYSPI-CECC has presented our work at CC Steering Committee meetings in January, April, and July of 2013. (October meeting was cancelled).

**BCC Cultural Competence Curriculum Development:** NYSPI-CECC collaborated with the BCC in the development of their web page of cultural competence resources. NYSPI-CECC, along with NKI-CECC, contributed to curriculum planning and development. Roberto Lewis-Fernandez provided one seminar which was videotaped for production. A second video is scheduled for January 2014, and more are in development for the FY2014.

**Cultural Competence Event:** The NYSPI-CECC, along with the BCC and NKI-CECC, are contributing to planning for the Cultural Competence Conference which will be held in February, 2014. The NYSPI-CECC is coordinating a panel on language access for that event.

**Collaboration with the Bureau for Workforce and Education Development (BWED):** The NYSPI-CECC joined the NKI-CECC and BCC to provide consultation on an ongoing BEWD effort to revamp training curricula on safety and recovery, and strengthen its cultural competence content. NYSPI-CECC and NKI-CECC will be represented in a taskforce being created to revise statewide curriculum with this goal.

**New York Association of Psychiatric Rehabilitation Services (NYAPRS):** NYSPI-CECC, along with NKI-CECC, presented current activities and research findings along with the BCC at the NYAPRS Executive Seminar in April 2013 and provided materials via a booth at the annual conference in September 2013.

**Cultural Competence Matters Reports:** NYSPI-CECC provided articles to the Monthly OMH Newsletter to inform OMH on the research work that they are doing 2013.

**Regional Centers of Excellence (RCE) Planning Meetings:** Roberto Lewis-Fernandez and Jennifer Humensky participated in the RCE planning meetings in the New York City and Long Island regions, respectively, and contributed to the discussion of cultural competence in the committee's recommendations.

## **NEXT STEPS FOR BCC WORK-PLAN 2014-2015**

The Bureau of Cultural Competence will work in collaboration with CECC Centers to continue in developing and implementing the goals and objectives of the BCC Annual Work Plan. The priorities for the 2014-2015 Work Plan will be developed from the list provided below and may be modified by BCC as needed to meet OMH's organizational needs.

### **CAPACITY NEEDS/ASSESSMENT:**

- Continue collaboration and development of Four Regional Multi-cultural Advisory Committees (MACs)
- NYS Statewide Multi-cultural Advisory Committee (MAC) to continue to provide recommendations to the NYS OMH Commissioner of OMH to ensure cultural and linguistic competency is infused in its initiatives, programs, and policies.

- Maintain and develop collaborations with advocacy groups i.e. NYAPRS, NAMI, Pride Agenda, NYS Compeer, In Our Own Voices, Faith Based Organizations, State Agencies, etc.
- Collaboration with vested OMH and Statewide stakeholders for inclusion of best practices

## SERVICES

- Monitor the development and implementation CC policies/plans for OMH facilities that are in compliance to Executive Order 26, OMH Policy 502, and Joint Commission mandates and requirements
- Collaborate with OMH Facility Language Access Coordinators to ensure annual training and monitoring of “Language Access Services” are being provided for Limited English Proficient patient/ family members served within by OMH Behavioral Health services (inpatient/ outpatient)
- BCC will monitor OMH Facility compliance of the “Language Access Plan” to ensure compliance to Executive Order 26
- BCC will provide training and monitor OMH Facility compliance to OMH Cultural and Linguistic Policy 502PC which speaks to all staff at OMH facilities receive 2-4 hours of Cultural and Linguistic training that meets their needs.
- BCC will provide recommendations, training and/or resources to assist OMH in meeting its objectives / goals in the development and implementation of OMH’s Regional Centers of Excellence Plan.

## INFORMATION EXCHANGE

- 2014, continue to conduct monthly tailored webinars in order to develop an e-learning educational format that increases capacity to serve diverse cultural and linguistic training needs of OMH’s facilities and its licensed behavioral health programs and providers throughout NYS
- Utilize list-serve as a process for learning collaborations for culturally competent services statewide
- Disseminate CC resources, materials, best-practices research throughout presentations, training, webinar/ videos, BCC “Learning” curriculum, “Resource”, and “Assessments” Internet page,

## OUTCOMES

- Enhance data collection in and utilization of current OMH data sets to improve services for cultural and linguistic competence
- Collaborate with OMH facilities to develop and establish “Cultural-Diversity-Respect Committees” within the facility to promote and establish effective cultural and linguistic engagement, outreach and services delivery practices and skills within OMH’s inpatient and outpatient services/programs
- Continue to develop tailored cultural and linguistic trainings to meet the needs of OMH facilities and licensed community providers/programs throughout NYS that infuses education and compliance to Title VI, Cultural and

Linguistic Access Services (CLAS) Standards, American's Disability ACT (ADA), Joint Commission, Executive Order 26, OMH Cultural and Linguistic Policy 502PC, and other Federal and/or NYS Mental Hygiene Laws.

- BCC will provide training , guidance, technical supports and oversight of the 24 OMH facilities “Annual Cultural and Linguistic Work plan” that is in compliance to OMH Cultural and Linguistic Policy 502PC, Executive Order 26 and Joint commission mandate/ requirements, and development of OMH Regional Centers of Excellence Plan
- Continue to recognize and reward the recipients of the individual, OMH facility, and Licensed OMH Community program in NYS through the BCC’s Cultural Competence Journey Award Ceremony 2014 (bi-annual award).
- Facilitate and implement CC Assessments and CC Plans at all OMH facilities (Adult, Children and Forensic) and the five Field Offices in 2014
- Develop and Conduct C&L “Consumer Satisfaction Survey” of all OMH facilities and outpatient programs
- Integrate State MAC and Regional MAC members in planned quarterly meetings held 2014 to inform and expand statewide RMAC membership voice on OMH Initiatives and CC concerns, as well as, establish State and Regional MAC collaborations across NYS

## **RESEARCH/ BEST PRACTICES for 2014-2015 Work Plan Discussion:**

### **NYSPI-CECC**

NYSPI-CECC will continue its commitment to supporting and promoting culturally competent mental health care in New York State via the following six initiatives:

- Language access
  - We will work with OMH to finalize the report on the language access survey.
  - We will disseminate the Do’s and Don’ts for Providers on working with interpreters within OMH. We will develop of similar tools for consumers and program administrators to promote effective use of interpreters within OMH.
- Physical and mental health integration
  - Leo Cabassa’s K01 examining the use of a depression care manager will continue in 2014-2015, as will analyses of Photovoice and *fotonovela*. We will work with OMH to identify how Photovoice and *fotonovela* can be incorporated into OMH activities.
- Diagnosis and engagement in care
  - Data collection on Motivational Pharmacotherapy (MPT) completed in 2013. We will work with OMH to identify how to implement MPT in OMH.
  - Analysis and dissemination of the Cultural Formulation Interview (CFI) will continue, including a video to be developed in collaboration with the Center for Practice Innovations (CPI).
  - We will produce at least two additional videos for the BCC’s learning curriculum, on the CFI and promoting engagement in treatment.
- Suicide prevention
  - NYSPI-CECC’s evaluation of Life is Precious (LIP) will continue.
- Mental health policy to promote culturally-competent care
  - NYSPI-CECC’s commitment to support culturally-competent care in OMH will continue, through collaboration with the BCC, NKI-CECC and other OMH divisions as appropriate.
  - NYSPI-CECC is beginning a new collaboration with Grameen Bank, to evaluate a health care initiative for uninsured or under-insured New Yorkers that provides access to preventive services tailored to the ability to pay.
- First Episode Psychosis (FEP)

- NYSPI-CECC has begun a new initiative in FEP, in response to OMH's commitment to this population, including through the On-Track NY initiative. Activities will include an analysis of pathways to FEP treatment, education and employment in FEP, shared-decision making, and asset building.

In the spring of 2014, NYSPI-CECC will work with the BCC to develop the work-plan for 2014-2015, which will describe specific activities in greater detail. All proposed projects are subject to change based on OMH needs.

## **NKI: CECC**

### **Services**

- Adapt CBT for Korean populations (with Dawn Sung)
- Complete 2<sup>nd</sup> generation toolkit to adapt everyday practices for cultural groups (with Deborah Altschul).
- PASS: Complete BASC-2 analysis; complete replication manual; find replication site; obtain funding for replication
- Establish projects with NYU Silver School of Social Work

### **Engagement**

- Complete Consumer Activation Prompts(CAPs)
  - Develop training manual for peer support staff
  - Evaluate
  - Disseminate
- Write paper and present (with Damara Gutnik) PHQ 9 Latino cut-points
- Complete cultural stigma framework. Develop culture specific stigma reduction materials

### **Training**

- Disseminate clinician pamphlet to incorporate religion/spirituality into therapeutic encounters

### **CC Assessments**

- Resubmit PCORI grant on psychometrics of program level instrument
- When OMH RCE roll outs occur, revisit need for different level CC instruments and develop where needed

### **Disparities**

- Conduct PCS disparity analyses using 2013 data.
- Complete ADHD PCS disparity analysis.
- Complete (with Helena Hansen) Buprenorphine/Methadone paper

### **Information Exchange**

- Website
- Update cultural data and maps on website using 2010 and ACS census updates.
- Update religious data
- Participate in NYCDOHMH CC Conference on 2/28.
- Present. Train note-takers. Take notes. Write summary conference report with PI.
- Health Care Reform

Work with NYAPRS, OMH, and DOH to ensure CC activities are infused into newly developing integrated care models including OMH RCEs, Medicaid Managed Care, HARPS, and Health Homes.