



MSAC

*Multicultural Service
Advisory Committee*

**DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES
MULTICULTURAL SERVICES ADVISORY COMMITTEE (MSAC)
Strategic Plan FY'25- 26**

GOAL

MSAC supports provider agencies to ensure they vigorously embed cultural competency throughout their organizational environments. MSAC members are trail blazers championing cultural humility, modeling behavior and advocating for equity-minded practices for inclusion.

OBJECTIVE 1

Function as the multicultural organizational change agent.

Activities in collaboration with DMHAS:

- Review application and criteria for membership on MSAC
- Identify roles and responsibilities of MSAC members
- Conduct an ongoing self-assessment to evaluate the effectiveness of the MSAC supportive activities and goals
- Recruit and train a graduate-level intern to serve as moderator/administrator of this MSAC communications platform.

OBJECTIVE 2

Promote and inspire a system of care that demonstrates an understanding of cultural competence and cultural diversity when rendering services to individuals, their families, and networks.

Activities in collaboration with DMHAS:

- Track cultural competency and diversity trends, challenges, and data, and act as a liaison to share those trends, challenges, and data.
- Review those trends, challenges, and data with MSAC members and inquire about how those trends are affecting their organizations and discuss changes they may want / need to make based on the effects of those trends and challenges.

- Develop surveys and other client, staff, or system satisfaction/impact measurement processes.
 - This consists of expanding on activities to ensure that:
 - a) members include in their measurement processes data from clients and examine sustainable ways to complete this work,
 - b) members review their agency's cultural competency practice and the impact to service delivery,
 - c) members analyze and respond to satisfaction/impact results ensuring that the review/change process continues even if the member no longer works at the agency,
 - d) members utilize the committee as a think tank to share and discuss successful and challenging practices, for example SWOT (strengths, weaknesses, opportunities & threats)
- Develop and distribute a document that describes language that is stigma free for providers to best serve their community in an atmosphere that welcomes and includes diversity
- Create guidelines that encourage sharing of ideas, open communication, and approaching conversations from a humane perspective, ensuring we all interact and participate in a safe space for conversations

OBJECTIVE 3

In collaboration with DMHAS and the technical assistance centers, provide recommendations for training for the behavioral health workforce that will enable them to meet the standards of cultural competence as established by CLAS Standards.

Activities in collaboration with DMHAS:

- Address training needs identified from the results of provider assessments
- Identify which workshop topics would enhance individual and provider growth or to reinforce education to sustain long-term impact on the system
- Review workshop and training evaluations and make recommendations for change

OBJECTIVE 4

Strengthen internal and external communications among all agencies and institutions both formal and informal cultural communities (e.g. professional groups, advocacy groups, social and cultural groups).

Activities in collaboration DMHAS and community service providers:

- Develop mechanisms (e.g., newsletter, festivals, videos, etc.) to assure that there is a mutual flow of information on multicultural issues and activities both within MSAC, and between MSAC and agencies and stakeholders. The goal of which is to implement a curated/moderated platform for broadcasting relevant content

from MSAC and from stakeholders (as opposed to an unregulated, free-for-all style forum).

- Utilize existing DMHAS and technical assistance centers communication mechanisms
- Develop simple Google forms for MSAC members and stakeholders to utilize and contribute content to the aforementioned platform.
- Develop a virtual multicultural resource center
- Creating a space for agencies to share and access resources as well as trainings from other agencies

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to:

Principal Standard:

1. Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

Governance, Leadership, and Workforce:

2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

Communication and Language Assistance:

5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Engagement, Continuous Improvement, and Accountability:

9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.
10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.
11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.
13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.
14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

