



Jerry Wengerd, Director

Department of Mental Health County of Riverside

Cultural Competency Plan



2010

COVER SHEET

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CHECKLIST OF THE 2010 CULTURAL COMPETENCE PLAN REQUIREMENTS CRITERIA

- ☒ CRITERION 1: COMMITMENT TO CULTURAL COMPETENCE
- ☒ CRITERION 2: UPDATED ASSESSMENT OF SERVICE NEEDS
- ☒ CRITERION 3: STRTERIES AND EFFORTS FOR REDUCING RACIAL, ETHNIC, CULTURAL, AND LINGUISTIC MENTAL HEALTH DISPARITIES
- ☒ CRITERION 4: CLIENT/FAMILY MEMBER/COMMUNITY COMMITTEE: INTEGRATION OF THE COMMITTEE WITHIN THE COUNTY MENTAL HEALTH SYSTEM
- ☒ CRITERION 5: CULTURALLY COMPETENT TRAINING ACTIVITIES
- ☒ CRITERION 6: COUNTY'S COMMITMENT TO GROWING A MULTICULTURAL WORKFORCE: HIRING AND RETAINING CULTURALLY AND LINGUISTICALLY COMPETENT STAFF
- ☒ CRITERION 7: LANGUAGE CAPACITY
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**COUNTY OF RIVERSIDE
DEPARTMENT OF MENTAL HEALTH**

Jerry Wengerd, Director

**2010
CULTURAL COMPETENCY PLAN**

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| Leticia Troncoso | Medical Interpreter, ETS/ITF |
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| Amanda Wilbur | NAMI Representative, DPSS |

INTRODUCTION

Riverside County Department of Mental Health has been a State leader in cultural competency and continues to enhance its services in an ongoing effort to provide the best possible cultural and linguistic services for all people of all ethnicities, cultures, beliefs, lifestyles, and languages. Population Projection indicate that the county population increased by 36.0% from 2000 to 2008 and will continue to increase by (8.6%) from 2008 through 2011. During the fiscal year 2007-2008, Riverside County Department of Mental Health (RCDMH) provided services to a total of 38,945 clients.

This rise in population and the multicultural and multilinguistic diversity of its communities will continue to challenge the Department in its efforts to provide barrier-free access to all groups. The Department understands the important role that culture and language play in the delivery of mental health services. We want our services to be able to adapt in order to effectively meet the mental health needs of our County population regardless of what values, beliefs, and lifestyles they bring with them.

The Cultural Competency Plan is consistent with the Cultural Competence Plan Requirements (CCPR) per California Code of Regulations, Title 9, Section 1810.410. It is a "living" document that provides a framework for developing and increasing cultural competency and linguistic services over time. The Cultural Competency Reducing Disparities Committee drives and facilitates this critical plan. The members of this committee represent direct line staff all the way up to top administrators, community, consumers and family members.

This CCPR (2010) indicates efforts being made on an ongoing basis to achieve cultural competence and to reduce mental health disparities by Riverside County Department of Mental Health. It is a unique plan that was developed to reflect the current times. It highlights the current work undertaken for the planning, implementation and monitoring of the Mental Health Service Act (MHSA.) The Department has made an effort on developing a cohesive relationship between the activities that are undertaken in support of cultural competency with those that support the MHSA. This unified approach will allow us to move forward in an efficient, cost-effective, and structured manner that will enable our staff to feel that they are working towards a common goal - improving our service delivery and outcomes regardless of whether the action plans are under the umbrella of Cultural Competency, Quality Improvement (QI) and/or the MHSA. As MHSA expands and increases services, the Department is opening doors to a more comprehensive cultural and linguistic mental health system. It is an underlying assumption that the accomplishment of the 2010-2011 Cultural Competence Plan's goals and objectives are critical for producing organizational changes that achieve organizational cultural and linguistic competence. The plan is based on the idea of "organizational cultural competence", which aims to increase

compatibility between Riverside County Mental Health and the community by developing strategic changes in both organizational infrastructure and direct service levels.