



**Pascua Yaqui Tribal Regional Behavioral Health Authority  
CENTERED SPIRIT PROGRAM**

**2009 Cultural Competency Plan**

**Area: Leadership**

**Goal 1: To assure the support of the leadership of the PY/TRBHA in developing a system of care that is culturally and linguistically competent.**

**Objective 1A: Cultural Competence is embedded into all organizational components.**

Steps	Assigned Parties	Completion Date and Product/Measure	Status/progress update –what was done and when, what remains to be done and by when will it be completed?	Additions/Modifications/ Completions/Deletions
The PY/TRBHA will develop a Cultural Competence Plan (CCP) that will serve as a blue print for the development of culturally competent services which reflect respect and responsiveness to the service needs of the consumers and their families. This plan will include goals and objectives for all pertinent organizational components.	-TRBHA Director -CCP Advisory Committee -Quality Manager	May 2009 Product: CCP	The Cultural Competence Plan was updated and needs further implementation.	The CCP plan was accepted on March 25, 2009.
To develop a system of care that is culturally and linguistically competent, the Cultural Competency Advisory Committee (CCAC) will consult and/or collaborate with the Language Department to meet the goals and objectives of the CCP.	Cultural Competency Advisory Committee	On-going  Measure: MOU	Interim QM manager and chairperson, Maria Gary, drafted a letter to clarify the role of the language department in consultation and collaboration with the CC Committee.  The letter will be submitted by the Network Coordinator for legal approval.  The committee and Language Department will continue to work to establish a MOU with the Language Dept.	

**Objective 1B: The CSP/TRBHA makes continuous progress toward its goal of providing culturally competent services.**

Steps	Assigned Parties	Completion Date and Product/Measure	Status/progress update –what was done and when, what remains to be done and by when will it be completed?	Additions/Modifications/ Completions/Deletions

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<p>The PY/TRBHA leadership will periodically monitor progress towards its goal of achieving cultural competence.</p>	<p>-TRBHA Director -CCP Advisory Committee -Quality Manager</p>	<p>1x6 mo. CCP Adv. Meeting. Measure: Evidence of meetings including sign-in sheet, agenda and minutes and completion of Status/Progress Update.</p>	<p>CCAC met in March 2009  Theresa Ybanez, Behavioral Health Director participated in the CC Committee and Organizational Assessment Team Meetings on 2-20-09, 3-5-09, and 3-30-09. Vice Chairman, Robert Valencia participated in the Competency Committee meeting on Monday, June 22, 2009.</p>	<p>CSP Director will continue to participate in CC Committee and Vice Chairmen, Robert Valencia, will continue to be invited to attend CC meetings.  Minutes and sign-sheets will be documented for ongoing progress. The CC Committee will meet quarterly to update/and or modify CC Plan.</p>
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**Objective 1C:** The leadership engages in and promotes regular self-assessments of the PY/TRBHA workforce to determine their degree of cultural competence and seek the enhancement of their knowledge and understanding of the diverse cultural, racial and ethnic groups in the community.

Steps	Assigned Parties	Completion Date and Product/Measure	Status/progress update –what was done and when, what remains to be done and by when will it be completed?	Additions/Modifications/ Completions/Deletions
<p>A CC Assessment Tool will be developed.</p>	<p>CCP Advisory Committee</p>	<p>May 2009 Product: CC Self-Assessment Tool</p>	<p>The CCAC met and completed the Self-Assessment Tool in April 2009.</p>	<p>On July 10, 2009 the CC Committee decided not to develop a CC Assessment. The CC Committee will review ADHS CC Assessment and decided if they will incorporate the template with modifications. This will be decided at the CC Committee meeting.</p>
<p>Conduct a ‘Staff Cultural Awareness Needs Survey’.</p>	<p>CC Adv. Committee  Quality Manager, Melanie Roberts.</p>	<p>CSP Quarterly Meeting Measure: Survey instrument; results.</p>	<p>CSP staff and committee recommended a Focus Group to gather PYT questions and definitions.  CSP Staff prefer a Focus Group to gather data related to <i>Cultural Awareness Needs</i>.</p>	<p>By September 2009, the CC Committee will develop a survey to capture Cultural Awareness Needs, which will be distributed to the focus group.</p>
<p>All PY/TRBHA employees will participate in an CC assessment activity.</p>	<p>All</p>	<p>Quarterly Employee Meetings. Beginning Measure: Evidence of meetings including sign-in</p>	<p>The CC Organizational Assessment Team met on April 22, 2009 to complete the assessment. Analyses of the results were presented on Monday June 22, 2009.</p>	

		sheet, agenda and minutes and completion of Status/Progress Update.		
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**AREA: HUMAN RESOURCES.**

**Goal 2. To ensure the general workforce of the PY/TRBHA reflects the diversity of their communities.**

**Objective 2A. To recruit, retain and develop a culturally diverse workforce that reflects the community served.**

<b>Steps</b>	<b>Assigned Parties</b>	<b>Completion Date and Product/Measure</b>	<b>Status/progress update –what was done and when, what remains to be done and by when will it be completed?</b>	<b>Additions/Modifications/ Completions/Deletions</b>
PY/TRBHA will make efforts to hire retain and promote qualified employees from diverse cultural / racial backgrounds that reflect the diversity of the community and population served.	Director and Management.	Annual review. Measure: Number of qualified employees hired, retained and promoted by race and gender.	PYT CSP adheres to Tribal Codes, the <i>PASCUA YAQUI PREFERENCE ACT Members of the Tribe shall be given absolute preference with respect to hiring, promotion, training, contracting, and separation from employment with the Pascua Yaqui Tribe.</i> 42 out of 69 employees are currently Tribal members.	PYT will continue to work with Tribal Human Resources to hire, retain, and promote qualified employees from diverse cultural/ racial backgrounds that reflect the diversity of the community served.
HR interview process shall include questions related to knowledge of cultural diversity of the community and population to be served.	CC Advisory Committee shall review and make recommendations to CSP Director.	July 2009 Measure: Outcome of recommendations and modifications to interview questions.	CSP works closely with HR to review interview questions. HR follows no standard for interview questions; however each program can develop their own questions.  CSP's CC committee will develop cultural competency questions for interview and submit to CSP Director-Theresa Ybanez for approval. If approved, Director will submit to HR.	CC Committee will propose a number of cultural competency questions by September of 2009.

**AREA: EDUCATION & TRAINING.**

**Goal 3. To assure cultural competency of the staff.**

**Objective 3A. To develop a training program that promotes cultural competence.**

Steps	Assigned Parties	Completion Date and Product/Measure	Status/progress update –what was done and when, what remains to be done and by when will it be completed?	Additions/Modifications/ Completions/Deletions
The PY/TRBHA will develop a new employee orientation and staff training curriculum to address the delivery of culturally and linguistically appropriate behavioral health services.	Training Coordinator CCP Advisory Committee	April 2009 Product: Curriculum materials.	Russell Johnson, Training Coordinator developed curriculum for delivery of culturally and linguistically appropriate behavioral health services.	The CC committee will review/ and or modify the training curriculum to determine if it meets cultural/linguistic standards by August 2009.  The training curriculum will continuously be modified when needed.

**AREA: CLINICAL / CULTURAL SERVICES.**

**Goal 4. To promote effective clinical care.**

**Objective 4A: To assure services are culturally and linguistically appropriate.**

Steps	Assigned Parties	Completion Date and Product/Measure	Status/progress update –what was done and when, what remains to be done and by when will it be completed?	Additions/Modifications/ Completions/Deletions
Clinical assessments will clearly identify relevant cultural issues of	Clinical Liaisons Monitoring will be	Quarterly chart reviews. Measure: % of clinical	In June 2009, records indicated that cultural needs were assessed on an average of 78%.	Chart reviews will continue to monitor culturally appropriate

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the consumer	done by the Team Manager.	assessments that clearly identify the consumer's input, strengths, beliefs, values, needs and preferences	On 7-2-09, an average of 81.82% records indicated that cultural needs were assessed.	services to assure consumers culturally needs are meet.
Individualized Treatment Plans will clearly reflect the culture of the consumer and families as evidenced by the consumer's input, strengths, beliefs, values, needs and preferences.	Clinical Liaisons Monitoring will be done by the Team Manager.	Quarterly chart reviews. Measure: % of Tx Plans that clearly identify the consumer's input, strengths, beliefs, values, needs and preferences	(Tucson) June 2009a n average of 44% of the service plans address culture. A record review on July 2, 2009 shows 36.36% Individualized Treatment Plans or service plans reflect the consumer and families' culture.	On July 20, 2009, The Director notified staff via email to remind of the importance of including consumer and families input, strengths, beliefs, and values and needs on treatment plans. Will continue to monitor on quarterly chart reviews.
Put into practice a Cultural Clinical Team to counsel clinicians on tradition issues and appropriateness of referral to Traditional healers.	Cultural Clinical Team Maria Gary Alex Alvarez Gabino Molina	July 2009 Outcome: Cultural Clinical Team; # of consultations w/clinicians; # of referrals.	Clinicians and managers will respond to consumers needs for traditional healers by contacting a member of the Cultural Clinical Team.  Providers and subcontractors will complete staffing forms and discuss verbal referrals for traditional services. Providers and subcontractors will document coordination and provision of traditional services in staffing forms and progress notes.  Verbal referral to traditional healers has been deemed to be culturally appropriate and will continue to be done this way. Documentation will continue to be done in progress notes.	Training by Cultural Clinical Team will present a training on how the process will be performed by August 31, 2009.  Progress notes will monitor if cultural needs are met.

**Objective 4B: To encourage family members to participate in treatment, when appropriate.**

<b>Steps</b>	<b>Assigned Parties</b>	<b>Completion Date and Product/Measure</b>	<b>Status/progress update –what was done and when, what remains to be done and by when will it be completed?</b>	<b>Additions/Modifications/ Completions/Deletions</b>
The PY/TRBHA will have a Policy and Procedure to promote the active involvement of consumers and families in treatment.	Quality Manager	July 2009 Product: Policy and Procedure	CSP adheres to ADHS policies and procedures related to Referral and Intake which includes encouraging family members to participate in intakes, assessments, and Child Family Teams.	Chart reviews will monitor family involvement in treatment plans.

**Objective 4C: To promote the use of natural healing supports (i.e. family members, religious and spiritual resources, traditional healers, churches, community organizations) as part of the treatment plan.**

<b>Steps</b>	<b>Assigned Parties</b>	<b>Completion Date and Product/Measure</b>	<b>Status/progress update –what was done and when, what remains to be done and by when will it be completed?</b>	<b>Additions/Modifications/ Completions/Deletions</b>
The PY/TRBHA will promote the use of natural healing supports to promote family, religious and spiritual resources, churches, community organizations etc. as part of a treatment plan.	Clinical Liaisons Monitoring will be done by the Team Manager.	Ongoing Measure: # of consumers using natural healing supports. Progress notes, TTR's, and staffing.	QM and the Adult Team conducted a record review on 7-2-09. 45% of the records show evidence of appropriate referrals. 36.36% of the records document cultural considerations. The current chart review form does not capture referrals for cultural/traditional services; however a chart modification will be implemented for chart audits to capture verbal referral language.	QM will monitor the utilization of these services with quarterly chart review rather than a referral log.  Staffing sign-in sheets and minutes will be completed to monitor natural healing supports for treatment. Verbal referral language detected in the progress notes will also be used to monitor these services.
Identify person (s) from the Language Department	CC Advisory Committee Maria Gary-CC Chairperson	Committee Sign- In Sheet	Maria Florez Leyva, Jose Alvarez, Isidro Moreno, and Anabel Galindo were selected and participate on the CC Committee.	

**CONSUMERS, FAMILIES & THE COMMUNITY.**

**Goal 5. To promote and support the involvement of advocacy groups, consumers and their families in the planning, development and implementation of our system of care.**

**Objective 5A: The organization develops participatory, collaborative partnerships with communities and utilizes a variety of formal and informal mechanisms to facilitate community and consumer involvement in designing and implementing cultural and linguistically appropriate services.**

Steps	Assigned Parties	Completion Date and Product/Measure	Status/progress update –what was done and when, what remains to be done and by when will it be completed?
Conduct a Community Satisfaction Survey which evaluates the cultural competency of CSP services.	CCAC	Annually Measure: Survey instrument and the % of returns.	An ADHS Consumer Satisfaction Survey was completed on June 30, 2009. Over 100 consumers and families participated. The survey contains questions which address CC.

**Cultural Competency Advisory Committee: Approval of 2009 CSP/TRBHA Cultural Competency Plan\_\_\_\_\_, 2009.**

**Approved by:** Theresa Ybanez, CSP/TRBHA Director