

	County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure	Policy Issuer (Unit/Program)	Cultural Competence & Ethnic Services
		Policy Number	02-01
		Effective Date	02/28/2018
		Revision Date	08/05/2025
Title: Implementation of Cultural Competence		Functional Area: Administration	
Approved By: Signed version available upon request			

Background/Context:

The commitment to developing and providing culturally responsive and linguistically proficient services is reflected throughout the mission, vision and values of the Division of Behavioral Health Services (BHS).

Our Mission -To provide a culturally competent system of care that promotes holistic recovery, optimum health, and resiliency.

Our Vision - We envision a community where persons from diverse backgrounds across the life continuum have the opportunity to experience optimum wellness.

BHS Equity Vision Statement - Sacramento County Behavioral Health Services (BHS) envisions a community where all Sacramento County residents thrive and have equitable access to optimal behavioral and emotional wellness. By racial equity we mean closing the gaps so that race does not predict one's success, while also improving outcomes for all.

BHS Equity Core Values - Client and family driven; Mutual collaboration and partnership; An environment of belonging, emotional safety, and promotion of expressions of diversity; Staff reflective of community served; Accountability, impact, results; Innovation/fundamental change.

This policy reflects a restatement of existing practices and ensures compliance with the cultural competence and linguistic requirements mandated for mental health/behavioral health services to diverse populations as outlined in the Sacramento County Phase II Consolidation of Medi-Cal Specialty Mental Health Services - Cultural Competence Plan 1998, 2002, 2003, 2010; the California Code of Regulations Title 9, Chapter 11, Section 1810.410; the State of California Department of Health Care Services Behavioral Health information Notice No.: 20-070; and the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care.

Definitions:

“Cultural Competence” is defined as a set of congruent practice skills, knowledge, behaviors, attitudes, and policies that come together in a system, agency, or among consumer

providers, family members, and professionals that enables that system, agency, or those professionals and individuals receiving services (client), and family member providers to work effectively in cross-cultural situations. (Adapted from Cross, et al., 1989)

“Cultural Competence Plan (CCP)” - [The California Code of Regulations \(CCR\), Title 9, Chapter 11, Section 1810.410](#) states that each Mental Health Plan (MHP) shall develop and implement a Cultural Competence Plan that addresses eight specific criteria. The criteria are explained in [California Department of Mental Health \(DMH\) Information Notice NO.: 10-02 - The 2010 Cultural Competence Plan Requirements \(CCPR\)](#) and [DMH Information Notice NO.:10-17 -The 2010 Cultural Competence Plan Requirements \(CCPR\) Modification](#). The CCPR is intended to move county behavioral health systems toward the reduction of mental health/behavioral health service disparities identified in racial, ethnic, cultural, linguistic, and other unserved, underserved, and inappropriately served populations.

Purpose:

This policy serves to communicate to BHS and BHS contracted provider staff and volunteers the commitment to provide culturally responsive and linguistically proficient services to ultimately eliminate behavioral health disparities in access, quality and outcomes of behavioral health treatment in diverse cultural, racial, ethnic, linguistic, LGBTQ, or other unserved, underserved or inappropriately served communities. Additionally, the policy provides guidance around implementation, training, and oversight of the Cultural Competence Plan.

Details:

1. Cultural Competence Plan

A. The BHS Cultural Competence/Ethnic Services Manager is responsible for the development and implementation of the Sacramento County Cultural Competence Plan (CCP) to ensure that county mental health services are in compliance with current federal and state statutes, regulations and California Department of Health Care Services (DHCS) (formerly Department of Mental Health - DMH) policy letters related to the planning and delivery of specialty mental health services for a highly diverse cultural, ethnic and linguistic community. The Cultural Competence Plan shall address each of the criteria listed below.

- Criterion 1: Commitment To Cultural Competence
- Criterion 2: Updated Assessment of Service Needs
- Criterion 3: Strategies 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

- Criterion 8: Adaptation Of Services

B. BHS shall include the following in their CCP:

- 1) Objectives and strategies for improving the MHP's cultural competence based on assessments that have been identified in the CCPR
- 2) Population assessment and an organizational and service provider assessment focusing on issues of cultural competence and linguistic capacity
- 3) A listing of specialty mental health services and other MHP services available to beneficiaries in their primary language by location of the services and
- 4) A plan for cultural competence training for the administrative and management staff of the MHP, the persons providing specialty mental health services employed by or contracting with the MHP or with contractors of the MHP, and the persons employed by or contract with the MHP or with contractors of the MHP to provide interpreter or other support services to beneficiaries

C. Additionally, BHS shall provide annual updates of the CCP in accordance with the requirements listed in the California Department of Mental Health DMH Information Notice NO.: 10-02 - The 2010 Cultural Competence Plan Requirements (CCPR) and DMH Information Notice NO.:10-17 -The 2010 Cultural Competence Plan Requirements (CCPR) Modification.

- 1) Annual update shall include program specific budget expenditures of cultural competence related activities from the prior fiscal year.

2. Cultural Competence Committee - BHS has an established Cultural Competence Committee (CCC) which is a sub-committee of the Quality Improvement Committee (QIC).

- A. The CCC shall meet regularly and provide reports to the QIC.
- B. The CCC membership shall be comprised of consumers and family members, community members, cultural specific community-based organizations, and county and contract provider staff, representing line staff and management, all of whom represent diverse cultural, racial, ethnic, linguistic, LGBTQ and other unserved, underserved or inappropriately served communities of Sacramento County.
- C. The CCC shall take an active role in the continued monitoring of current and the development of subsequent Cultural Competence Plans in Sacramento County.
- D. The CCC shall review all services/programs/Quality Assurance Annual Work Plan Reports/MHSA Annual Update plans with respect to cultural competence and behavioral health equity issues.
- E. The CCC shall act as an advisor to BHS on cultural competence issues including but not limited to the following: outreach, accessibility, linguistic requirements, human resources, and strategies to improve penetration rates.

3. Cultural Competence Training Plan – The State of California requires that Sacramento County, Behavioral Health Services (BHS) have a plan for cultural competency training for the administrative and management staff; the persons providing mental health or substance

use prevention and treatment services employed by or contracting with contractors for BHS to provide interpreter or other support services to beneficiaries. The State also requires that BHS track who has taken the required cultural competence training and have a mechanism in place to alert BHS when someone who should have taken the training has not yet completed the requirement in order to send them a reminder to take the required training or trainings.

A. All BHS-funded program staff who provide direct behavioral health services and their supervisors/managers/administrators must complete a minimum of six (6) hours annually of BHS-approved cultural competence/behavioral health equity training(s) as part of their contract agreement with the County.

1. BHS programs that would like to provide their own training in lieu of the BHS-approved required training(s) must comply with all of the requirements noted in the [Annual Cultural Competence Training Checklist] and receive written approval from BHS Cultural Competence/Ethnic Services Manager or designee.

B. Each BHS-funded county operated, and contract provider shall submit to BHS the names and contact information of their staff who are required to take the annual training(s) and will provide updates to BHS as their staffing changes.

C. BHS shall utilize a system that performs the following activities:

1. Sends an invitation to staff who are required to take the annual required BHS-sponsored cultural competence/behavioral health equity training(s),
2. Tracks the completion of the training(s) for each staff to ensure that the six (6) hour annual minimum has been met for each staff, and
3. Sends reminders to staff who have not yet taken the required training(s)

D. BHS programs that provide additional cultural competence training to their staff are required to track attendance of their staff and submit training information to BHS on an annual basis (2010 CCPR).

E. Bilingual staff who are currently serving as language interpreters within BHS programs are required to complete the BHS-sponsored Behavioral Health Interpreting Training.

F. Each BHS-funded county operated and contract provider, and subcontractor staff who are in direct contact with members in the delivery of care or member services to complete evidence-based training transgender, gender diverse, intersex (TGI) Cultural Competency Training program required by Senate Bill (SB) 923 (Chapter 822; Statutes of 2022) for the purpose of providing trans-inclusive health care to Medi-Cal members. This training must be completed within 45 days of the hire date and every two years thereafter.

G. Each BHS-funded county operated, and contract provider shall comply with federal laws and regulations, DHCS contract requirements, DHCS mandated cultural competence trainings, DHCS guidance, and are trained on requirements set forth to Behavioral Health Plans.

Reference(s)/Attachments:

Title VI of the Civil Rights Act of 1964, U.S. Code 2000-d (Code of Federal Regulations, Part 21: the Std. Title VI); Executive Order 13166 of August 11, 2000; Section 1557 of the Affordable Care Act (ACA) of 2010; Welfare and Institutions Code (WIC), 14029.91 (a), (b), 14684 (h); California Code of Regulations Title 9, Chapter 11, § 1810.410; the State of California Department of Health Care Services Behavioral Health information Notice No.: 20-070; National Standards on Culturally and Linguistically Appropriate Services (CLAS) in Health Care; and the California Department of Health Care Services Behavioral Health information Notice No.: 25-019.

Attachment: Annual Cultural Competence Training Checklist

Related Policies:

[PP-BHS-CCES-01-02-Access to Interpreter Services](#)

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