



Section: QAPI	Policy Name: Cultural & Linguistic Competency	Policy Number: 03.07
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Application: <input checked="" type="checkbox"/> SWMBH Internal Staff <input checked="" type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input checked="" type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify): <hr/>	Line of Business: <input checked="" type="checkbox"/> Medicaid <input checked="" type="checkbox"/> Healthy Michigan <input checked="" type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> SUD Medicaid <input type="checkbox"/> MI Health Link <input type="checkbox"/> Other (please specify): <hr/>	Effective Date: 7/16/2014

Policy: Southwest Michigan Behavioral Health (SWMBH) values diversity as the full utilization of all human resource potential. SWMBH seeks to understand and value differences in promoting mental health and substance abuse services that empower all people to succeed. There will be an ongoing and continuous commitment to create and promote an inclusive work and service provision environment that values our differences.

Purpose: To reduce service disparities that are inextricably linked to cultural issues and to ensure that all cultures have access to, and availability of, mental health and substance abuse services. To convey the SWMBH commitment to cultural and linguistic competency and to outline the ways this commitment will be carried out. It is the official position of SWMBH that cultural diversity and cultural competency are prized assets and sources of great enrichment for staff, providers and consumers alike and as such, they should be celebrated, eagerly explored and viewed in highly positive terms.

Scope: All SWMBH staff and its affiliates

Responsibilities: N/A

Definitions:

A. Culture

The word "culture" describes the integrated pattern of human behavior that includes action, assumptions, values, reasoning, and communication of a racial, ethnic, religious, or social group. The word "competence" is the "state of being capable" (Webster's 1977) of functioning in a particular way. Therefore, culturally competent services are systems, agencies, and practitioners that have the capacity,



skills, and knowledge to respond to the unique needs of populations whose cultures are different from that which might be called dominant or mainstream American.

B. Cultural Awareness

Cultural awareness is the self-examination of one's own cultural background and identity relative to the cultural values of others. This process involves the recognition of one's biases, prejudices and assumptions about individuals who are different. Cultural awareness works to:

- a. Create an environment that recognizes, values, and utilizes the unique skills and abilities of everyone
- b. To maximize the level of contribution of each cultural group

C. Cultural Proficiency

Cultural proficiency means the systematic utilization of the talents of people of different backgrounds, experiences, and perspectives as a means of further improving the workplace environment, facilitating the exchange of culturally based knowledge and enhancing the outcome of the services performed by the organization. It is a philosophy of recruitment, development and retention of personnel who reflect the culture of individuals served and includes an organizational philosophy of people gaining knowledge toward enhancing personal and organizational cultural proficiency and competency. Materials and communications will be evaluated to ensure that these are addressing the cultural and linguistic needs of a diverse membership.

D. Culturally Competent Services

1. Services provided within the framework of an effective planning effort that take into consideration the impact that cultural values and culturally related issues may have on the way that services are provided. This process requires personnel to achieve certain levels of cultural proficiency in order to plan and deliver culturally sensitive service strategies. SWMBH will work to reduce health care disparities in clinical areas as well as to improve network adequacy to meet the needs of underserved groups. Cultural competence is a set of congruent behaviors, attitudes, structures, and policies that come together to work effectively in intercultural situations. The cultural competency of an organization is demonstrated by its policies and practices.

Standards and Guidelines:

- A. SWMBH shall use the Culturally and Linguistically Appropriate Standards (CLAS) as general guidelines.
- B. Collaboration within our service area and with our community partners will occur in order to enhance our diversity goals and ensure equal access for persons with diverse cultural backgrounds.
- C. The SWMBH Quality Management Committee will share and promote CLAS standards at least annually with regional CMHSP partners
- D. All service provision activities and programs within SWMBH will be culturally competent so that all persons served are treated in the most sensitive and respectful manner.
- E. All personnel within the SWMBH provider system are expected to participate in initial and annual Cultural Awareness and Competency education that promotes or leads to cultural competence.



F. SWMBH has written guidelines to explore diversity issues in the hiring process that are to be used throughout the provider network

References:

Federal Code of Regulations, 42 CFR § 438.100 & 438.206(c)(2)

National Standards for Culturally and Linguistically Appropriate Services in Health Care, EXECUTIVE SUMMARY. U.S. Dept. of Health & Human Services Office of Minority Health, March 2001

NCQA, MBHO, QI Standard 3, Element A, Factor 1.

SWMBH Cultural Competency Plan

Network Adequacy Analysis

A practical Guide to Implementing the National CLAS Standards <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf>

Attachments: None



Revision History

03.07 Cultural & Linguistic Competency

Final Audit Report

2022-07-25

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Cultural Competence Strategies

Personnel

Business Practice – to promote Competency	Source	Outcome
A. SWMBH actively recruits workforce of diverse backgrounds through the candidate selection process.	<ul style="list-style-type: none"> • SWMBH Position Descriptions • SWMBH Policy 3.7 – Cultural and Linguistic Competency • SWMBH Policy 4.7 – Competitive Employment • Network Adequacy Analysis – Population Race/Ethnicity Analysis 	To promote a workforce that is reflective of the community and individuals served.
B. SWMBH hiring process includes utilization of “Guidelines to Explore Diversity in Job Interview” to determine an interviewee’s experience/willingness to support diversity and cultural competence as a SWMBH employee	<ul style="list-style-type: none"> • SWMBH Position Descriptions • SWMBH Policy 3.7 – Cultural and Linguistic Competency • SWMBH Policy 4.7 – Competitive Employment 	To promote hiring of staff who embrace cultural competency as a work ethic.
C. SWMBH utilizes non-discrimination statements in all hiring and contracting searches.	<ul style="list-style-type: none"> • SWMBH Position Descriptions • SWMBH Annual Performance Review Form • SWMBH Policy 3.7 – Cultural and Linguistic Competency • SWMBH Policy 4.7 – Competitive Employment 	SWMBH seeks to develop a workforce reflective of our community/individuals served.
D. SWMBH Personnel/Providers are required to follow training guidelines related to Cultural Competence and all other required topics of training. Monitored process to occur annually.	<ul style="list-style-type: none"> • SWMBH Policy 3.7 – Cultural and Linguistic Competency • SWMBH Cultural Competency and Diversity Training (Power Point Presentation) • SWMBH Cultural Competency and Diversity Attestation Form 	<p>SWMBH promotes workforce education in working with diverse populations.</p> <p>Spanish is the most prevalent non-English language spoken in the SWMBH 8-county region.</p> <p>According to the American Community Survey Aggregate Data, 2020 ACS 5-Year Estimates Subject Table, 2.9% of the population in the SWMBH region in 2019 are native Spanish</p>

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	<ul style="list-style-type: none"> • Network Adequacy Analysis – Population Race/Ethnicity Analysis 	speakers. 1.75% speak Arabic and .489% speak Chinese (including Mandarin, Cantonese), the next two most common languages
E. SWMBH reviews Essential Functions of each employee.	<ul style="list-style-type: none"> • SWMBH Position Descriptions • SWMBH Annual Performance Review Form • SWMBH Policy 3.7 – Cultural and Linguistic Competency 	To ensure tasks and responsibilities remain accurate as well as provided in a Culturally Competent manner.
F. SWMBH promotes Cultural Competence practices in design, monitoring of contractual provider performance.	<ul style="list-style-type: none"> • SWMBH Member/Provider Handbook • SWMBH Site/Monitoring Reviews • SWMBH Cultural Competency Workgroup • Network Adequacy Analysis – Population Race/Ethnicity Analysis 	To ensure provider network performance meets SWMBH standards.
G. SWMBH maintains representation within the Recovery Oriented Systems of Care (ROSC) Community-Wide Collaboration, which explores Cultural Competency and barriers.	<ul style="list-style-type: none"> • ROSC Community Collaboration Meeting Minutes. • Network Adequacy Analysis – Population Race/Ethnicity Analysis 	Based on needs, is a community wide partnership to address/discuss Cultural issues and barriers to care.
H. SWMBH annually/internaly evaluates demographic data of network and individuals served through its Network Adequacy review (Attached on pg. 7-8).	<ul style="list-style-type: none"> • SWMBH Employee Satisfaction Surveys • SWMBH Policy 3.7 – Cultural Competency • SWMBH Policy 2.12 – Network Adequacy • SWMBH Policy 2.7 – Communication to Providers 	Evaluation performed to identify if SWMBH workforce continues to be reflective of demographics of community/individuals served.

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Individuals Served

Business Practice – to promote Competency	Source	Outcome
I. SWMBH encourages customers to identify their need for language support services via the use of “I Speak” tools at service sites or via telephone contacts.	<ul style="list-style-type: none"> • SWMBH Policy 6.5 Limited English Proficiency • SWMBH Network Adequacy Plan 	When customers can identify their primary language, SWMBH can direct supports necessary to provide support and services.
J. SWMBH provides no-cost interpretation and translation as necessary for vital documents, during appointments, and telephone contacts.	<ul style="list-style-type: none"> • SWMBH Policy 4.3 – Authorization and Outlier Management 	To engage in services, SWMBH offers free language assistance to customers and individuals seeking services.
K. Via the Person-Centered Planning process, SWMBH (and all contracted providers) encourages discussion of the importance of issues such as: culturally sensitive needs, gender or age specific needs, economic issues, spiritual needs/beliefs, and/or issues related to sexuality identity/orientation – in all treatment planning.	<ul style="list-style-type: none"> • SWMBH Policy 4.5 – Person and Family Centered Planning 	To ensure customers are receiving services suited to their individual needs.
L. SWMBH maintains a competent provider panel of interpreters and translators.	<ul style="list-style-type: none"> • SWMBH Policy 4.1 – Access Management 	To ensure customers can receive educational materials and supportive services in their preferred language.
M. SWMBH will utilize the community needs assessment process and feedback generated from annual customer satisfaction surveys to evaluate any changing cultural/linguistic needs of the community.	<ul style="list-style-type: none"> • SWMBH 2020 Customer Satisfaction Survey Analysis and Results • SWMBH 2020 Grievance and Appeal Data Analysis • SWMBH 2020 QAPI Evaluation of Services 	SWMBH can modify printed materials as language thresholds change and can target workforce training needs to new community needs.
N. SWMBH educational materials are written in simple language and provided in preferred languages to customers.	<ul style="list-style-type: none"> • SWMBH Customer Handbook • SWMBH UM Policy 	Community members and customers will have access to information in commonly used languages. Vital documents are translated to Spanish.

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O. Customer access to Grievance and Appeal processes is aided by translated documents, assistance to all customers, and available interpretation at all steps. Customers can identify Authorized Representatives to represent them.	<ul style="list-style-type: none">• SWMBH Policy 2.14 – Grievance and Appeals• Network Adequacy Assessment of cultural, ethnic, racial and linguistic needs	Customers will have processes explained to them in preferred language and have access to language support to represent themselves while SWMBH addresses their complaint(s).
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2021 Cultural Competence Goals

Goal	Source	Steps to take/Completion Date	Outcome	Responsibility
1. Implement Staff/Provider survey to gauge Organizational level of Cultural Competence.	Network Adequacy Analysis – Population Race/Ethnicity Analysis	A. ACTION: Quality Management Committee to research and identify tool to utilize.	SWMBH to utilize data for future planning and movement of organization along path of Competence. Specifically, are their improvement opportunities for SWMBH policy/training	ACTION: SWMBH Quality Management Committee to work with internal/external stakeholders to complete needs assessment and use data to improve outcomes.
2. Utilize feedback from Customers related to Cultural Competency of workforce.	Customer Satisfaction Surveys RSA-r Surveys Grievance and Appeals Data Network Adequacy Analysis – Population Race/Ethnicity Analysis Consumer Advisory Committee to review and provide feedback	A. ACTION to evaluate current customer survey tools to: Identify if current tools provide questions regarding customer opinion of Competency and if not -Identify tool(s) to add to surveys to collect data B. The Consumer Advisory Committee and possibly other Regional Committees with consumer representation, will review current tools and protocols and provide feedback to improve processes.	SWMBH to utilize data for future planning and movement of organization along path of Competence. Specifically, are customers identifying that SWMBH is able to meet their individual needs through services.	The SWMBH Management Committee will share and promote CLAS standards at least annually with regional CMHSP partners .

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Goal	Source	Steps to take/Completion Date	Outcome	Responsibility
<p>3. Utilize outcome data to guide service design toward cultural competency</p> <p>2021 PBIP Minority Health (African American) Population Service Improvement Reports/Tracking</p>	<p>A. ACTION: to research SWMBH customer service outcomes based on populations of MIA, I/DD, and SED to</p> <p>B. Identify if customer demographics are part of data collection process</p> <p>RSA-r Survey Evaluation</p>	<p>ACTION: Quality Improvement Committee to identify relevant tools.</p> <p>SWMBH to utilize data for future planning and movement of organization along path of Competence. Specifically, are outcomes impacted by cultural considerations.</p> <p>C. SWMBH to add CMHSP Cultural Competency plan/needs review to the 2022 CMHSP site review tool.</p> <p>2021 PBIP Minority Health (African American) Population Service Improvement Reports/Tracking</p>		

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4. Promote continued education throughout the agency and community by participating in or contributing to an organization/event.	Cultural Diversity Training Curriculum	A. ACTION: to present at 2022 All-Staff meeting. B. ACTION: to provide at least 1 Cultural educationally focused article to SWMBH newsletter during 2022. C. ACTION: to evaluate and promote new Culturally Competent educational opportunities for SWMBH staff/providers such as Lunch and Learns, and portal-based information.		
		To promote Workgroup activities and provide information to staff/providers regarding new ACTION plans. To enhance the Cultural Competency educational experiences for SWMBH staff.		

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Overall Region	% of Practitioners by Race/Ethnicity			Asian/ Pacific Islander			Hispanic/ Latino			Other or Not Reported																										
	Doctoral	MSWs	PAs and NPs	Physicians	SUD	Overall	0.00%	0.45%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%
Doctoral	0.00%	0.45%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%	46.26%					
MSWs	0.00%	0.00%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%	46.26%					
PAs and NPs	0.00%	0.00%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%	46.26%					
Physicians	0.00%	0.00%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%	46.26%					
SUD	0.00%	0.00%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%	46.26%					
Overall	0.00%	0.00%	0.00%	5.56%	2.00%	1.02%	22.27%	6.33%	8.33%	2.78%	10.00%	5.78%	0.65%	1.81%	0.00%	0.00%	2.00%	1.36%	63.64%	83.33%	75.00%	66.66%	20.00%	20.00%	53.39%	27.27%	16.67%	27.78%	56.00%	45.92%	46.26%					

SWMBH Population Race/Ethnicity Makeup ¹ Estimates as of July 1, 2018, US Census:	Asian/ Pacific Islander			Hispanic / Latino			other			White																														
	Barry	Berrien	Branch	Calhoun	Cass	Kalamazoo	St. Joseph	Van Buren	Barry	Berrien	Branch	Calhoun	Cass	Kalamazoo	St. Joseph	Van Buren	Barry	Berrien	Branch	Calhoun	Cass	Kalamazoo	St. Joseph	Van Buren																
Barry	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
Berrien	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
Branch	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
Calhoun	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
Cass	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
Kalamazoo	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
St. Joseph	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%
Van Buren	0.49%	2.14%	0.73%	2.99%	0.82%	2.80%	0.68%	0.72%	0.49%	14.92%	2.30%	11.16%	5.20%	11.85%	2.58%	3.99%	3.12%	5.71%	5.01%	5.34%	4.33%	3.97%	5.03%	8.12%	2.13%	3.36%	2.50%	4.33%	2.13%	9.58%	4.07%	3.05%	4.36%	8.96%	9.47%	8.15%	9.67%	9.47%	9.58%	9.67%

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Overall, about 2.80% of the clinicians in the SWMBH region speak Spanish. SWMBH provides translation services for all services. At least one local Spanish translator gets very positive reviews both from staff and customers. SWMBH assessed customer complaints regarding lack of accessible language preferences. There were no complaints regarding the MI Health Link Business line.

County	County Population	# Spanish Speaking Clinicians (total)	% Spanish Speaking Clinicians (total)	# Spanish Speaking Clinicians (available)	% Spanish Speaking Clinicians (available)
Barry	1.2%	0	0%	0	0%
Berrien	3.8%	0	0%	0	0%
Branch	3.0%	0	0%	0	0%
Calhoun	3.0%	0	0%	0	0%
Cass	1.8%	0	0%	0	0%
Kalamazoo	2.8%	5	3.7%	3	3.0%
St Joseph	6.1%	0	0%	0	0%
Van Buren	8.1%	1	6.7%	0	0%
Outside Region 4	~	2	8.7%	2	8.7%
SWMBH (including non-CMH-affiliated providers)	3.5%	8	2.8%	5	2.5%

2021 Assessment of cultural, ethnic, racial, and linguistic needs

The racial/ethnic makeup of the SWMBH region is primarily White (83.88%), with persons of Black or African American backgrounds (9.96%) and Hispanic/Latino ethnicity (5.82%) being the second and third most prevalent.¹ This data has not changed much since 2020. SWMBH's provider network appears to, again,

¹ The 2019 US Census includes Hispanic ethnicity as a category separate from its racial field. Accordingly, all percentages listed here do not add up to 100%. Here, a person's Hispanic ethnicity is not mutually exclusive with White, Black, Asian/Pacific Islander, or other racial backgrounds.

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underrepresent the region's Black and Hispanic/Latino populations; Black personnel comprise 5.3% of the SWMBH provider network, while Hispanic or Latino personnel comprise 0.7% of it, when referencing the FULL Network: 2021 Data Chart. Black personnel only comprise of 3% in the AVAILABLE Network for 2021. Keeping in mind 52.8%, which is down 2.1% from 2020, of SWMBH's practitioners did not report their own race/ethnicity, it was determined that it was difficult to assess whether or not the network requires any adjustments in this area.

Opportunities for Improvement:

SWMBH recognizes that over half of its FULL Network of practitioners report "Other" or simply do not report their own Race/Ethnicity. This data is something SWMBH has been attempting to capture for two years now and would like to see more practitioners participate in answering this question either at Initial Credentialing, recredentialing or during the annual MHL Network Adequacy Survey. SWMBH believes capturing more of the Practitioner Race/Ethnicity data will assist the Provider Network Department on ensuring SWMBH's Member's needs are being met in this capacity. For example (this scenario actually happened at SWMBH):

- A member called the MHL Member Line to speak to a SWMBH Care Manager and asked for a referral for Outpatient Therapy with a Black female therapist

SWMBH would like to be able to present those Provider options to the member; however, currently, it is hard to do so with only half of the Practitioners reporting this data.

SWMBH has also discussed the opportunity to offer its Practitioners a training on Cultural Competency. SWMBH hosts a handful of robust trainings throughout the year for its Network Providers, but rarely do Non-CMHSP MHL Providers attend.

Additional Resources:

- 2021 Consumer Satisfaction Survey Analysis Report – Survey Demographical Breakdown/Response Section.
- Tableau Analytics Time/Distance to Provider Location Report.
- Tableau Analytics Enrollment Served Population Analysis.

03.07A SWMBH Cultural Competency Plan FY2022

Edited on: 6/22/22
MHL Committee Approved on:
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Southwest Michigan Behavioral Health
~ Cultural Competence Plan ~
Fiscal year 2022