



Minnesota Department of **Human Services**

Cultural and Ethnic Communities Leadership Council (CECLC) Meeting, November 15, 2013
from 11:30 until 3:30, Wilder Research.

Members Present: Mitchell Davis, Jr*., Kamaludin Hassan, Pahoua Yang, Sarita Ennis; Samanthar Hassan, Vayong Moua, Kamala Puram*, Titilayo Bediako*, Dave Haley, Paula Haywood*, Pa H. Lor, Saciido Shaie*, Sen. Tony Lourey*, Rev. Janet Johnson*, LaJuana Whitmore*, Pamela Cosby, Edward McDonald* and Yende Anderson*(COBM) , Sia Her (CAPMN), Hector Garcia CLAC), Bauz Nengchu, Muriel Gubasta, Anne Hill, Jill Kehaulani Esch)Office for the Ombudsperson for Families), LaRone Greer, Anna Mazig*, Maria Sarabia, Scott Leitz*,

DHS Staff: Mee Cheng, Chuck Johnson, Antonia Wilcoxon.

*Left the meeting before adjournment.

Members Absent: Jose Gonzalez, Annamarie Hill, Rep. Thomas Huntley, Rep. Jim Abeler, Rep. Tina Liebling, Rep. Tara Mack, Sen. Julie Rosen, Sen. Kathy Sheran, Sen. Michelle Benson

Guests: Rae Bly, DHS Ethics Officer, Carol Olson, DHS, Executive Director/Forensic Administrator

Welcome, Introductions, Opening. Deputy Commissioner called the meeting to order at 11:35. He explained that he would be chairing the meeting at the commissioner's request. He started the discussion by asking everyone the question: Why did you join this council? What are your hopes? The answers included the following comments:

- To look at how we continue to create appropriate access to services
- I am concerned about mental health and education disparities. I hope to contribute my experience in this field
- I work on prevention and health equity, health inequities occurring outside the four walls of a doctor's office. I am looking for ways that we can go upstream and on other sectors, to learn about accountability pieces, sustainability, structural and metrics around equity issues.
- I am interested in cultural competency and policies around diversity and inclusion. The continuum of cultural competency, and employees and clientele
- I am Hawaiian and we do not experience disparities there. This is new to me to find how entrenched issues of disparities continue to contribute to policy and rules in the child welfare system
- To bring up issues to better serve immigrant families
- I am interested in economic development issues to be addressed for minority communities
- I look forward to synergies and what we can discuss together

- I am interested in South Asian communities and to address the myth of the “model minority” when in reality there is poverty, ESL barriers, representing challenges. I want to bring perspectives to the community and also to learn
- 25% of the population in Ramsey County, are populations of color. We are actively working and have made some progress, but need to build better partnerships in the community and with others outside the county. We have challenges of access, over representation in the child welfare system. How can we do this work in a better way, so services are more valuable and how do we do in partnerships?
- I am interested on issues that are relevant and close to home for me: bringing up issues that impact my community
- Families, child protection system, I hear parents complain about language barriers, lack of services, and hope to have a more positive attitude, including refugees issues.
- Our role is to advise the governor on all communities, the most vulnerable, we are a mandated council and I view our charge to position our councils strategically to improve knowledge, and learn why disparities exist
- Policies and rule and how they impact the community
- I have been working 20+ years for the state. This is not the first initiative of this nature. I hope we can learn to work better together
- My work is to encourage under-represented students in the health careers. We have low representation of students of color.
- My agency works to promote children’s success in school so they do better. We needed a face to the issue that are impacting individuals
- We are working on 4 major areas to address disparities for populations of color: health and wellness, education, workforce solutions and financial literacy, together these support an individual to bring their goals into action
- I am here because I want to help my community. I live in an African American community, and I want to learn so I can help my neighbors.

Review proposed agenda for approval. Ann Hill moved and Paula Haywood seconded to approve the agenda as presented. Motion passed unanimously.

Introduction to DHS/Welcome to DHS. Chuck Johnson presented an overview of the agency and its administration. Several questions emerged after his presentation:

How is DHS funding culturally specific programs? Who are the vendors? What are we funding-on disparities reduction? What populations are served? How is the effort on cultural competency aligned with the changing demographics? How are funds allocated? How is funding used? Do we know how counties use dollars? Where are funds being spent for interpreting services, if it is counties obligations, are LEP plans in place for each county?

Equal Opportunity Employment Division

There are two units in our division that deal with language issues. The first is headed by Heidi Oxford and it specifically deals with **translation of documents and other written materials**. First with the assistance of the Translation Advisory Committee, it identifies and maintains DHS priority translation list, and translate them to five major different languages.

Translation funds are part of a direct general appropriation from the legislature for DHS operations. The current translation budget is a base budget which was established by management services a few years ago and has not required any adjustment since then.

The current DHS Translation vendors are Betmar and The Bridge. They are selected through RFP. Priority documents are mainly translated into the following five languages:

1. Hmong
2. Russian
3. Somali
4. Spanish and
5. Vietnamese.

The second unit is headed by Alejandro Maldonado. This one deals with **interpretation issues. Contrary to general belief in the agency, this office does not have funds allocated for interpretation services. It does not pay for interpreters who provided service to DHS' various business areas. It also does not provide funds to counties to pay for the cost of delivering language access services. Each DHS business area or the county pays for the interpreter service when it uses one. Interpretation costs are born at the transactional level, as a business cost.**

Counties and DHS have obligation under Title VI of the Civil Rights Act of 1964, to provide meaningful access to individuals with limited English proficiency. As an LEP Coordinator the major function of Alejandro's office is to ascertain that this is implemented. Thus, County agencies are required to provide **a copy of their updated LEP plan along with a complete review form to his office for review.** He conducts such review on a schedule basis at least every 12 to 18 months. At the end of each review cycle all 87 counties are reviewed and approved for another 12 months. Being in compliance with this review makes county agencies compliant with item 8 of the Comprehensive Civil Rights Plan submitted to the DHS' Civil Rights Coordinator.

To specifically answer your questions, "yes, each county has LEP plans in place."

Related to this, the **LEP Coordinator also manages the Multilingual Referral Lines (MRL) service.** It should be emphasized that this is **a referral service, and not an interpreting or translation service.** DHS provides this service through the notice given on DHS documents as a Language Block (LB), i.e., text included as a stuffer or printed in certain DHS publications e.g. notices sent out by Issuance Operating Center (IOC), or in the Combined Application Form (CAF). In such notices clients are advised where to call if they need interpretation service.

The funding for this service comes from the legislature, and the current budget is \$86,000. There are two vendors, **Hennepin County and ARCH Languages**, providing referral services in the following ten languages:

1. Arabic
2. Hmong
3. Lao
4. Oromiffa
5. Somali
6. Spanish
7. Vietnamese
8. Khmer
9. Serbo-Croatian, and
10. Russian

There are approximately 5,000 to 8,000 referral calls per year.

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Where does the “Code 45 of Federal Regulations of the United States of America, part 80:

- Nondiscrimination under programs receiving Federal assistance through the Department of Health and Human Services- effectuation of the Title VI of the Civil Rights Act of 1964,” <http://www.law.cornell.edu/cfr/text/45/80>
<http://www.gpo.gov/fdsys/pkg/CFR-2000-title45-vol1/pdf/CFR-2000-title45-vol1-part80.pdf>
<http://www.justice.gov/crt/about/cor/coord/titlevi.php>

<http://www.justice.gov/crt/about/cor/byagency/dojvi.pdf>

intersect with services provided?

- Where does equity lie in the agency? Where is the oversight on accountability? Does the administrative application of Federal laws receive oversight? We are talking about equal access and equal opportunity. Is this compliant with Affirmative Action Laws? DHS Affirmative Action Plan: <http://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-5362-ENG>

McDonald noted that this council needs to be highlighted in the Ethnic Councils’ work.

McDonald noted underutilization of people of color in the executive team. Concern was expressed about leadership not having representation.

Sen. Lourey, suggested that Wilcoxon send SHADAC (State Health Access Data Assistance) information prior to the next meeting for review by council members, as a good resource.

<http://www.shadac.org/content/about-shadac>

http://www.shadac.org/search/apachesolr_search/Minnesota

Moua suggested that language is important. He commented on the value added of using inequities/advancing equity, instead of using disparities reduction. Equity is being used nationwide. He suggested that we consider equity in access and outcomes.

McDonald moved, Mitchell seconded a request of the following, for the next meeting:

1. Reports chronicling evolution of DHS disparities reduction

2. Equity assessment from DHS which provides an understanding of the agency's management of disparities reduction efforts
3. How is the agency responding to the issue? Where does this issue lie?
4. Reports are required as important items to inform the discussion we are having at this time.

Moua introduced a friendly amendment: the need to accelerate the conversation on equity will not replace the need for DHS to present the information listed above. He emphasized the need to allow time for discussion.

Motion passed unanimously.

Health Care Administration – Scott Leitz, Assistant Commissioner made a presentation about the work of his administration. He stated that there are opportunities to ask the council to offer community input. He stated that Medicaid/Medical Assistance is a program created during the 1960's. It provides health coverage for low income, it receives a 50/50 match of state and federal funding. It covers a variety of people: individuals with high health needs, with disabilities, mothers, children and families, the chronically ill, and community living services.

The state of Minnesota legislators passed an expansion of Medicaid to cover childless adults.

Health Care Administration has 4 areas: Enrollment of clients, eligibility, provider enrollment, quality measurement, to assess how are we doing? We need to develop a baseline for quality services that addresses the gap between those enrolled under private insurance and public insurance. The office of the Medicaid director administers the federal guidelines.

A medical director ensures that benefits are evidence-based.

MNSURE: is closely tied to DHS as eligibility determinations happen at DHS. DHS staff was involved to a large extent in the Navigator program, enrollment is very complex, we are making attempts to streamline, the choice of community-based agencies working with populations was made by MNSure. A network of providers is doing the oversight. We contract with a network of providers in the Managed Care Organizations. We understand that access to services is a challenge. We don't know a lot about how we are doing, and I hope this council can guide our efforts.

We are exploring using Medicaid funds for capacity building. We are working directly with certain provider organizations. We can provide an incentive for quality services. Providers can then share the incentive with community-based organizations..

Direct Care and Treatment, Carol Olson, Exec. Director made an abbreviated presentation of the State Operated Services (SOS). She said that there is an increased need for Post-Traumatic Stress Disorders treatment for immigrant populations. The services are provided to patients considered to be mentally ill and dangerous. Bediako and Haywood commented on the fact that there is high placement of former SOS patients in the Minneapolis zip codes 55411 and 55412. Communities are not prepared to receive the populations. Olson clarified that counties make placement choices.

McDonald stated that he learned that immigrants in small Minnesota communities who are learning to adapt to Western ways, are accidentally being placed in SOS. They actually need no mental health care, their actions are misinterpreted. Olson said that Institutions are growing with the growing demographics of the state.

Ethics – Rae Bly, DHS Ethics Officer also made an abbreviated presentation about her role as the Ethics Office for agency employees. She was pleased to be invited to present on what DHS holds as values which are important to ensure trust from the public we serve.

Items tabled for next meeting: A. Cultural and Ethnic Communities Leadership Council Overview, B. History of Disparities Reduction Advisory Committee (DRAC), C. Legislative Language Review, and D. Governance language review.

Several members left at this point.

Council’s Mission, Vision, Values, etc. Wilcoxon asked council members:

What do we want to see in place as a result of our actions in the work of this council? (VISION)

Responses were grouped at the suggestion of members:

Governance: Process & Implementation

Equity in ALL policies
Accountability and oversight of programs
The strict application of equal access & opportunity laws, policies and rules germane to DHS operations
Durable and high impact accountability structure
The strict review of the administrative application of equal access, equal opportunity laws, policies and rules germane to DHS operations
Cohesive people of color advocacy efforts
Action plan to end inequities
Broad based coalition of state agencies
Recommended legislative changes
Fully engaged & operational equity agenda that is sustainable and attainable
Re-examining laws
A new way to address paradox of Mn disparities & MN civic-minded generosity

Pursuit of better data

Future trends and data gaps
System change “impact”
Deep dive and understanding of exhaustive list of issues/disparities/gaps affecting MN of color
Make data-driven decisions
MN taking lead on disaggregated data
Understand & use DHS metrics for service delivery decisions
Full information sharing
MN establish a reasonable, feasible number (i.e. “lower disproportion__ by x %”)

Inclusion & Engagement

Method of incorporating an understanding of communities of color into our policies in MN
Engagement from the community
Focused conversations with community--yearly
Language access for LEP population
More minority providers for DHS services
DHS senior staffing match demographics

Increase awareness of services/ways to navigate
Reduction in documentation requirements for Medicaid supported mental health services as an effort to reduce systemic & cultural barriers to services & bring MH more on par with physical health
Equitable DHS funding to community-based organizations

???

Create an equity cabinet (Intra agencies)
Health equities work is complex
Equity integrated into vision, project, plans and policies.
Health equity in all policies.
Policy change on how DHS funds agencies work with diversity
To ensure durability and impact, increase capacity of this council to provide input and oversee implementation.
A focus in North Minneapolis
For the government to listen.

There were several responses –noted on chart:

Produce an effective way to reduce disparities
There is more action
No barriers to access to services
There are no gaps between people of color (and American Indians) and the rest of the community
Difficult to have a vision without baseline/timeline
Realistic methodologies utilized by human services institutions and accountability for quality services
Programs take into consideration profile of the community
Structural and systematic changes base on Equity are in place
DHS has an internal cultural group
When we say how MN is doing – we say including populations of color and American Indians
Key conversations include diverse group of people
More engagement for everyday communities of color
This council is long-term
Every citizen in Minnesota regardless of the color of their skin, economic condition, educational background will get respectful, courteous services in a timely manner in order to eradicate disparities
I want to live in a state where being healthy is not a privilege

Completion of CIQ. Critical Incident Questionnaire

(14 Respondents)

1. At what moment in the meeting today did you feel most engaged with what was happening?
- The time when we were talking about the visions of each member for this meeting. I also felt engaged when it was time to express your thoughts about how we see the disparities in our culture.
 - When the community members were speaking their truths.
 - Throughout the meeting
 - None really but I did appreciate learning more about DHS
 - In the morning

- While we discussed the mission and values of the council, what was important for us to address, what we need to change, and how we would get there
 - Throughout
- When we were brainstorming the top three things that we would like to see happen with this group
 - The one by one overviews for DHS departments
 - From beginning to end
 - The end—mission and vision
 - All the time
- When we were doing the exercises led by Antonia. Great work, Antonia!
- Discussion of vision

2.At what moment in the meeting today did you feel most distanced from what was happening?

- When it was time to talk about numbers and how resources were used.
- Too top-heavy and bureaucratic. State overview. I understand explaining the Dept., but more about charges of committee would have been appreciated.
- When some of the laws were mentioned.
- Most of the time because it appeared that most people wanted ALL the information all at once, which took us away from the agenda.
- Halfway or after 2 hours
- At the beginning with the introductions of DHS, SOS, etc.. The introductions were important but there was too much data and discussion about technical details. It would have been a more effective use of time to allow the presentations to happen then have comments about what would be important or helpful for everyone to know or for us to consider.
- When the presenters spoke
- Once people monopolize the topics being discussed, it's a challenge to absorb the details
- I think there is so much, it is easy to get distracted. While I appreciated some comments from my esteemed colleagues, I would like us to look at how the information we bring forth can be helpful and distracting to our talk (goes with #4 too)
- When they were talking about the different laws without too much context
- Overview of DHS programs. From a county perspective, I was already familiar with the information

3.What action that any one (facilitator or someone) took in the meeting today did you find most affirming or helpful?

- I think there was a lot of information was helpful, even when we did not have the main information such as the baseline.
- The Council on Black MNs viewpoint and law explanations.
 - Participation
- Antonia and Sen. Lourey keeping us on time.
- Reminding us that we are short on time and keeping the meeting flowing
- Ed McDonald's comments regarding civil/human rights law & responsibility of the state
- Ed McDonald hit the nail on the head when he said that no people of color were shown in the DHS photo line-up
- To clearly understand the desires of visions and values what is contributed
- Change of policy on how funds, services and resources appropriated
- Thanks to the chair for calmly moving us along
- Sen. Lourey's comments about advancing equity as a legacy
- The meeting was conducted very well. Deputy Commissioner did a great job. Antonia was helpful by posting up the answers and asking for help in grouping

- The last 2-3 comments for the vision were very articulate

4. What action that any one (facilitator or someone) took in the meeting today did you find most puzzling or confusing?

- Laws and resources used.
- The non-member/public guest
- I felt some of the conversations were focused on how DHS is working—rather than how do we move it forward.
- Relative good 1st meeting for a group this size
- Not having sufficient information to understand the disparities
- I find confusing that DHS partners with agencies to deliver services
- Define “vision” and process for the day expectation
- When the laws were just thrown around without stating what they are

5. What about the meeting today surprised you the most? (This could be something about your own reactions to what went on, or something that someone did, or anything else that occurred to you).

- I was surprised to see people from different cultural and with different points of view.
- How many people.
- That someone would point out to the assistant commissioners that they may be part of the problem.
- Most senators were unable to attend
- To be honest, I was surprised by the amount of people who left the meeting so early (after lunch)
- Most (all) of the members spoke up
- It did not surprise me, but it was good that Sen. Lourey stated that in the aggregate, MN does well on a certain level. However when diving down into the details regarding communities of color, MN fairs poorly
- How much is not clear in this complex scenario? How can we hone in on accomplishable tasks
- How everyone was engaged
- I am concerned that we will continue to get stuck and would like more history on what was accomplished and what kept us stuck in the past with similar committees
- DHS willingness to adapt, listen and share leadership. DHS can tailor overview more towards equity
- How engaging people are
- Some of the requests for information

6. What do you feel you can do to make a difference in your setting? What do you need from this group to do what you envision?

- Explain, explain, explain expectations
- I need to learn a lot more about the existing healthcare system and data
- Continue to listen to other people’s perspectives and to provide support
- Continue to be sure that MN DHS leadership, especially Children and Families Services Division, knows how to utilize the Mexican Consulate to conduct background checks and home studies via the Mexican Consulate, which in turn has access to the Desarrollo Integral de la Familia (DIF).
- Suggest that we have a chat room or a place to keep dialogue between meetings
- I am very concerned from workforce development and direct client care perspectives about how we continue to service diverse communities

- More time to build relationships, learn about members—more opportunities to know each other. Need cross-cultural facilitation
- Be more engaging with those present which would require more time and less agenda items

Public Comment. Children's Hope International representative had two topics to discuss:

1. She is concerned with Medicaid giving priority to veterans over communities of color;
2. People of color who speak limited English are unable to join business and high tech industries.

Adjourn. Haywood moved, Cosby seconded to adjourn the meeting. Motion passed unanimously.

Meeting was adjourned at 3:28.

Next Meeting: December 20, 2013 Wilder Research, Room 2610 (second floor)