Performance Measure 4: Degree to which Division of Family and Community Health Services programs can incorporate and evaluate culturally appropriate activities and interventions

Last Year's Accomplishments

The FFY 07 target for this process measure was to complete 3 of 5 steps: !) Programs describe the racial/ethnic/cultural makeup of MCH populations served and underserved; 2) Programs describe culturally appropriate activities they are undertaking to address racial/ ethnic/cultural disparities; and 3) Assess existing tools used for cultural competence. Ohio has completed all three steps, and has met the FFY 07 target.

A. Develop DFCHS profile of populations served by programs

The DFCHS Cultural Competency workgroup developed a data collection spreadsheet to capture information needed for SPM 04, as well as data needed for MCH BG Form 7 (Individuals served in Title V programs by types of individuals and primary source of health coverage); and data needed for MCH BG Form 8 (deliveries and infants served by Title V and entitled to benefits under Title XIX, by race and Hispanic ethnicity). Information requested included: program descriptions; target population; eligibility requirements; method used to collect racial/ethnic data; numbers served by population type/race/Hispanic ethnicity/primary source of health coverage; percent of population served by race/Hispanic ethnicity; estimates of racial/Hispanic populations expected to be served, based on program target population.

Using information collected, a profile of populations served by DFCHS program was described. Problems identified for future work included:1) not all programs collect data on race and ethnicity; 2) not all programs adhered to the ODH standard for collection of race and ethnicity; 3) reporting of such data was not standardized; and 4) a few programs did not appear to target the populations with greatest disparities

B. Compile a description of program requirements for cultural competency, including definitions of "culturally appropriate/competent" and a description of tools used for cultural competence.

A survey to gather information about program requirements and activities related to cultural competency, as required for MCH BG State Performance Measure 04, was administered in all program bureaus in DFCHS. Thirty surveys covering 44 programs were completed by the six DFCHS program bureaus. This represented the majority of DFCHS programs. Nearly half (14) of survey respondents reported that their programs had some type of requirement or mandate to address cultural competency and/or to provide culturally appropriate services to their customers. Of the 14 programs with a stated requirement for cultural competency, five respondents provided a definition of cultural competency for their programs. Only two of the definitions were the same, while the others were similar. Forty percent of the 30 respondents assess the degree to which a specific program can incorporate culturally appropriate activities and interventions. Less than half stated that assessment/monitoring process was part of the RFP process. Other responses included annual

program reports, site visits, audit tools, MCH Block Grant Annual report, etc. Three programs use the CLAS self assessment tool to monitor. The Universal Newborn Screening program uses a very comprehensive tool required by MCHB for that grant category.

There are few common or consistent themes in DFCHS in regard to any of the dimensions of cultural competency covered by the survey: definitions, requirements that cultural competency be addressed, training and assessment/monitoring. On the other hand, it was apparent that DFCHS programs are aware of cultural competency as an important element in service delivery, but not seemingly aware of definitions or guidance on cultural competency that were embedded in regulation and guidance. Survey findings were forwarded to DFCHS chiefs and ODH Disparities Council for direction on next steps. Their suggestions for next steps were incorporated into the FFY 2008 plan.

C. Participate in National Center for Cultural Competence's (NCCC) Community of Learners meeting and year-long initiative: "Leadership to Advance and Sustain Cultural and Linguistic Competence in Systems Serving Children and Youth with Special Health Care Needs."

Ohio was chosen as one of 18 states to participate in the NCCC's Community of Learners (COL) year-long initiative. The strategy workgroup leader from the MCH BG State Performance Measure 04 is serving as Ohio's representative to the initiative and has attended one face-to-face meeting at Georgetown University and has participated in four conference calls with the COL.