

Improving Lives. Building Hope. Empowering People.

Populations of Focus

- 3 PBHCI sites in Brooklyn: ICL Highland Park Clinic (HPC), ICL PROS and ICL Rockaway Parkway Clinic (RPC)
- Focus on African American/Caribbean, Latino, and Russian speakers
- African Americans are not a homogenous group, as a significant number have origins in the West Indies
- Ethnic minorities and monolingual non-English speakers are both at risk for poor access to mental health services
- We hope to enroll 5 Russian speakers per year
- Projected enrollment from ethnic minority populations of focus:

	Total	FY1	FY2	FY3	FY4
All Races	750	200	185	185	180
African American/Caribbean	387	103	96	95	93
Hispanic or Latino	253	67	62	63	61

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Implementation Practices (CLAS 2013)

- All ICL employees are trained on cultural competence during orientation.
- Psychosocial assessments at intake identify our clients' cultural background and needs, as well as linguistic needs, to begin treatment with a culturally humble outlook.
- ICL hires staff with cultural and language abilities reflective of the populations served.
- The ICL Rockaway Parkway Clinic has a written notice in Russian of the right to receive language services. A similar notice in Spanish was developed for the ICL Highland Park Clinic.
- ICL's self-management workbooks and other health-related materials are available in Russian and Spanish.
- Phone translation services are available when staff cannot speak the language of a person served.

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Implementation Practices

- At ICL PROS, the diabetes management group discusses culturally-appropriate food options.
- Employment-related ICL PROS groups cover cultural attire preferences when discussing professional dress.
- ICL PROS has monthly meetings of a client advisory board, 90% of which is African American/Caribbean or Latino.
- Peer health coaches represent populations served.
- At ICL HPC, there is a group for Spanish-speaking women on depression and improving eating habits.
- Focus groups occur regularly at ICL and will happen soon for each of the three PBHCI sites, with a majority of participants from the populations of focus.

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Challenges and Barriers

- Lower capture of vitals and lab results among African American/Caribbean and Latino clients compared to Caucasians
 - We have been improving processes to increase collection of vitals and lab results
- Limited ability to recruit multicultural and/or multilingual staff due to work locations in grittier neighborhoods
 - Through relationships with psychiatry and social work programs we have been able to recruit high quality staff, including a new Spanish-speaking psychiatrist
- Difficulty recruiting participants who only speak Russian
 - We intended to recruit these participants at Rockaway Parkway Center and have been working with clinicians to improve recruitment of PBHCI participants from that site

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Data & Collection Measures

- We will be comparing outcomes for each ethnic subgroup with other subgroups and with the entire group
- We will also be tracking how these outcomes change over time
- Goals for Latino, and African American/Caribbean participants over a one-year period:
 - Statistically significant decrease in weight for 10% of program participants
 - 10% increase in the number of participants who have blood pressure and cholesterol in the normal range

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Successes to Date

- Recruitment of a majority of participants from the African American/Caribbean and Latino groups
- Increasing numbers of clients are engaging with the peer health coaches, participating in vital signs and lab monitoring, and displaying interest in planned wellness groups
- Improved adherence to CLAS standards, including posted signage and translated materials

Looking Ahead

- Improve use of electronic health record to more easily obtain accurate descriptive data and feedback from clients.
- Recruit employees who are multilingual, reflective of populations served, and/or interested in cultural humility.
- Translate more materials into Russian and Spanish, including consent forms. Offer materials consistently.
- Hold focus groups with diverse membership that cover cultural considerations.
- Add languages covered by phone translation.
- Increase community presentations in order to reach out to underserved persons who may need services.
- Improve spiritual assessment at intake.