

## CONNECTING WITH CLAS LOGIC MODEL (LAST UPDATED 11/16/17)

**Vision:** To develop, plan and implement a statewide process for incorporating enhanced Culturally Linguistically Appropriate Services (CLAS) standards within the children’s Network of Care in Connecticut.

**Goal:** To partner with families and network of care leaders in order to promote health equity, racial justice and cultural and linguistic competence across all behavioral health services at the local, regional and state levels.

<h3 style="text-align: center;">CONTEXT</h3> <p style="text-align: center;">Disparities exist in access to services and health outcomes for children and youth residing in Connecticut</p>	<h3 style="text-align: center;">ACTIVITIES/STRATEGIES</h3> <p><b>Disparities in Access to Culturally Appropriate Care</b></p> <p>Develop materials that provide information on the expectations &amp; disseminate these materials to potential CLAS participants</p> <p>Identify &amp; recruit direct service providers for the implementation of a 6-month CONNECTing with CLAS plan development process.</p> <p>Follow-up with identified service providers to assess their capacity to participate in the six month CLAS process.</p> <p>Provide ongoing technical assistance and peer-to-peer support to identified service providers to ensure commitment to the plan development process</p> <p>Assist agencies with a multi-phase strategy to assess and implement CLAS standards including: Initiation and Engagement; Assessment; Health Equity Plan Implementation; Sustainability</p> <p>Continue to engage previous CLAS cohort participants in order to support best practices</p>	<h3 style="text-align: center;">OUTPUTS</h3> <p><b>Disparities in Access to Culturally Appropriate Care</b></p> <p># of provider agencies recruited</p> <p>#/% of provider agencies that complete the CONNECTing with CLAS process</p> <p>#/% of fully completed cohorts</p> <p># hours/days of technical assistance &amp; support provided during cohort process</p> <p>#/% of service providers’ internal workgroup participants</p> <p># of people in attendance at large group meetings</p> <p>#/% of agencies that complete self-assessment</p> <p>#/% of health equity plans created</p> <p>#/% of health equity plans implemented</p> <p>#/% of health equity plans updated</p> <p>#/% of agencies continuing to work in statewide/regional workgroups</p> <p>#/% of agencies that complete updates to written/spoken materials/resources</p>	<h3 style="text-align: center;">OUTCOMES</h3> <p><b>Disparities in Access to Culturally Appropriate Care</b></p> <p><b>Short-term</b></p> <p>Increased provider awareness of disparities in health care access within their organization</p> <p>Increased number of provider agencies that have incorporated racially just, CLAS standards into the delivery of services</p> <p>Increased interagency collaboration</p> <p><b>Intermediate</b></p> <p>Increased commitment to cultural and linguistic competency from leadership and governance of child serving agencies</p> <p>Decrease in disparities in health care access within organizations participating in CONNECTing with CLAS process</p> <p>Improved linguistic accessibility in materials provided to families</p> <p><b>Long-term</b></p> <p>Increased level of cultural and linguistic competency and racial justice across the Network of Care</p> <p>Increase in a workforce that is reflective of the community being served</p> <p>Reduction in health disparities</p>
<h3 style="text-align: center;">INPUTS</h3> <p>Family &amp; Youth Leadership &amp; Voice</p> <p>FAVOR, Inc.</p> <p>Beacon Health Options</p> <p>Child Health &amp; Development Institute</p> <p>PL 13-178 Advisory Board</p> <p>Department of Children and Families</p> <p>Health &amp; Equity, LLC</p> <p>Independent Contractors</p> <p>Curricula and Toolkit</p> <p>Provider Agencies</p> <p>SAMHSA</p> <p>IMPACCT</p> <p>ASSERT</p>			