Assessing, Planning and Implementing CLAS in your Health Center

September 27, 2019

Presented by:
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The **National Center for Farmworker Health** is a private, not-for-profit corporation located in Buda, Texas, whose mission is "to improve the health status of agricultural worker families through the provision of innovative training, technical assistance, and information services to Migrant and Community Health Centers."

Programs, products, and services in support of our mission, include:

- Population specific resources and technical assistance
- Governance development and training
- Program management
- Staff development and training
- Health education resources and program development
Learning Objectives

- Define CLAS and its importance in health care settings.
- Identify and explain the three CLAS Standard themes.
- Learn how to assess, plan, and implement CLAS strategies in a health center.

*Source for the presentation: Adapted from OMH's Think Cultural Health
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Culturally & Linguistically Appropriate Services?
Linguistic Competency
Cultural Competency
Health Literacy
Culturally & Linguistically Appropriate Services are:

Services that are respectful of and responsive to each patient's culture and communication needs.

Hearing Impaired
Visually Impaired
Physical Disability
Lack of Reading Ability
English Second Language

Communication Needs

Cultural Beliefs

Preferred Languages

Health Literacy Levels

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CLAS: History & Purpose

Provides a guide:
Inform & facilitate practices related to health service delivery

Intended to:
- Advance health equity
- Improve quality
- Eliminate health care disparities

- 2000 – 14 National Standards
- 2013 – 15 Enhanced National Standards

Source:
HHS/Office of Minority Health. Think Cultural Health Website.
Available at: https://www.thinkculturalhealth.hhs.gov/content/clas.asp
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Practice Redesign:
- Coordinated, efficient, high-quality care
- Patient-centered and culturally and linguistically-appropriate services

Why Important?
Persisting Health Disparities
Changing Policy Environment
- Accredited Bodies
- PCMH Standards
- HC Program Requirements
Changing Demographics

CLAS Standards

Triple Aim

Source: Maryland Office Of Minority Health and Health Disparities: Toolkit
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Benefits - CLAS Standards

- Facilitates increased access and quality of care for culturally diverse patients
- Increases community participation and involvement in health issues
- Promotes inclusion of all community members
- Increases mutual respect, trust and understanding
- Promotes patient and family responsibilities for health
- Increases preventive care-seeking behavior by patients

Source: Maryland Office of Minority Health and Health Disparities: CLAS Toolkit
Principle Standard: Standard 1

Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.
The RESPECT Model

RAPPORT
- Social Connection
- Point of View
- No Judging
- No Assumptions

EMPATHY
- Patient comes to You for Help
- Understand Patient’s rationale re behaviors & illness
- Acknowledge patient’s feelings

SUPPORT
- Understand Barriers
- Help Patient’s Overcome Barriers
- Assure Patient’s you’re Available to Help

PARTNERSHIP
- Understand Barriers
- Help Patient’s Overcome Barriers
- Assure Patient’s you’re Available to Help

EXPLANATIONS
- Check often for Understanding
- Use Verbal Clarification Techniques

CULTURAL COMPETENCE
- Respect Cultural Beliefs
- Understand Patient’s Views
- Awareness of own Cultural Biases
- Know limitations
- Understand personal style/recognize when it’s not working with a patient

TRUST
- Self-disclosure may be difficult for some patients
- Consciously work to establish Trust

Theme 1

Governance, Leadership and Workforce
Standard 2

Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
Standard 2: Implementation Strategies

Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.

1. Develop written policies, practices, procedures to reflect a commitment to cultural competency.

2. Have a recruitment, retention and promotion plan at all levels of the organization.

3. Provide ways where multidisciplinary dialogues about language and culture issues take place...During meetings, ground rounds, etc.
Standard 3

Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
Standard 3: Implementation Strategies

Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.

1. Create a work environment that respects and accommodates the cultural diversity of the local workforce.

2. Develop, maintain, and promote continuing education and career development opportunities.

3. Monitor work tasks & hire sufficient staff to ensure a manageable and appropriate workload for bilingual/bicultural staff members.
Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.
Standard 4: Implementation Strategies

Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

1. Take advantage of internal and external resources available to educate board, leaders, staff on cultural beliefs they may encounter.

2. Incorporate cultural competency and CLAS into staff evaluations.

3. Encourage staff to volunteer in the community and to learn about community members and other cultures.

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Starting Point for Culturally Competent Training

• Overview of CLAS
• Cultural Competency 101/ Cultural Humility
• Health Literacy
• Cross-cultural communication skills
• Activities for gaining cultural knowledge
• Awareness of diverse health beliefs and behaviors
• Respecting and Honoring Difference
• Resolving conflicts and respecting differences

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Theme 2

Communication and Language Assistance
Standard 5

Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
Standard 5: Implementation Strategies

Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.

1. Ensure that staff is fully aware of, and trained in, the use of language assistance services, policies, and procedures.

2. Develop processes for identifying the language(s) an individual speaks (e.g., language identification flash cards or “I speak” cards) and for adding this information to that person’s health record.

3. Use qualified and trained interpreters.

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Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.

1. Create notifications that describe what communication and language assistance is available, in what languages the assistance is available, and to whom they are available. And is free of charge.

2. Organizations should reflect the languages regularly encountered in the service area in their signs, materials, and multimedia resources & low literacy.

3. Cultural Mediator program – to promote quality communication. A cultural mediator can act as a liaison between the culture of the organization and the culture of the individual.
Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
# Language Competency Tool

## Requirements and Competency Checklist for Bilingual Staff Interpreting Clinical Encounter (2018)

### Section I. Basic Requirements
- Select at least one applicable requirement as per organizational policy:
  1. Completion of the written and oral proficiency test of both the source and the target languages (e.g., English and Spanish).
  2. Completion of basic interpretation training session.
  3. Observation of a face-to-face professional interpretation session.
  4. Completion of one or more supervised interpretation sessions.
  5. Other:

<table>
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<tr>
<th>Organization Name</th>
<th>Form #</th>
<th>Related to Policy #</th>
<th>Date Started</th>
<th>Date Completed</th>
<th>Notes</th>
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### Section II. Competencies applicable for all interpretation sessions
(Observed employee during one complete interpretation session to evaluate proficiency in all of the following competencies. Employee should:

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<th>Demonstration Date</th>
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<th>Re-Check Date (if applicable)</th>
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1. Self-introduce and explain the interpretation process.
2. Inform both parties that this interpretation will be repeated in the two languages.
3. Assure and demonstrate confidentiality and neutrality (i.e., avoiding giving more importance to provider or patient words).
4. Select the best position in the room to facilitate patient-provider interaction.
5. Avoid summarization demonstrating accuracy and completeness in the rendition of the observed interpretation session.
6. Serve as cultural advisor, if needed.
7. Use signals to request a speaker to pause or slow down.
8. Inform parties when clarification is needed.
9. Demonstrate ethical conduct by avoiding bias or inappropriate advocacy.
10. Avoid establishing one-way communication with patient or provider.
11. Demonstrate knowledge of colloquial terms used by the population (e.g., they “measure” my pressure, etc.)

### Section III. Competencies that may or may not be applicable to the interpretation session being evaluated
(Observed employee during one complete interpretation session and if applicable, evaluate proficiency of the following competencies. Employee should:

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1. Demonstrate knowledge of medical terminology applicable to the observed clinical interaction (e.g., pediatric, prenatal, etc.).
2. Demonstrate understanding of the basic clinical procedures interpreted (e.g., vital signs, access to after-hours care, etc.).

### Section IV. Follow-up plan
If lack of proficiency in one or more competencies are identified, employee and supervisor can agree on a plan of action (e.g., complete two more supervised interpretation sessions, study the...
Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.

1. Assess the individual’s language ability. Many options exist for testing an individual’s ability to communicate in a foreign language.

2. Conduct observations of medical interpreters.

3. Keeping these standards at the core of hiring, training, and evaluating individuals will help ensure their competence in providing language assistance.
Standard 8

Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.
Standard 8: Implementation Strategies

Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

1. Create documents in plain language.

2. Create forms that are easy to fill out, and offer assistance in completing forms.

3. Train staff to develop and identify easy-to-understand materials & establish processes for periodically re-evaluating and updating materials.

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Health Literacy!

Health Literacy

Achieve self-empowerment

Feel understood

Be happy and able to talk to medical staff

Be able to access the right information

Be well-informed

Be able to make the right decisions
Assume everyone has difficulty with health information
Theme 3

Engagement, Continuous Improvement, and Accountability

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Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.
Standard 9: Implementation Strategies

Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization’s planning and operations.

1. Allocate resources to support CLAS efforts.

2. Develop a strategic plan to identify measurable goals, objective, and timelines to provide CLAS.

3. Encourage governance and leadership to establish education and training requirements.
<table>
<thead>
<tr>
<th>CLAS Standard</th>
<th>Currently Being Met (Describe how the Standard is being met)</th>
<th>Not Being Met</th>
<th>Action Steps Strategies to be implemented</th>
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Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.
Standard 10: Implementation Strategies

Conduct ongoing assessments of the organization’s CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.

1. Conduct an organization assessment to inventory structural policies, procedures, and practices.

2. Use results from assessments to identify assets, weaknesses, and opportunities to improve the organization’s capacity to address CLAS.


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Standard 11

Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

1. Use multiple opportunities to collect data (enrollment, risk assessments, consumer complaints).

2. Train all staff on purpose and importance of collecting the data.

3. Explain to clients how data will (and will not) be used. Train all employees on a script for speaking with clients.
Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.
Standard 12: Implementation Strategies

Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

1. Partner with other organizations to negotiate data sharing which could facilitate the linking of different types of data.

2. Collaborate with other organizations and stakeholders in data collection, analysis, and reporting efforts to increase data reliability and validity.

3. Review demographic data collected with local health care organizations.

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Standard 13

Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.
Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

1. Partner with local media to promote better understanding of available care and services and of appropriate routes for accessing services among all community members.

2. Build coalitions with community partners to increase reach and impact in identifying and creating solutions.

3. Sponsor or participate in health fairs, cultural festivals, and celebrations. Offer education and training opportunities.
Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
Standard 14: Implementation Strategies

Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.

1. Train staff as mediators in cross-cultural conflict resolution.

2. Include a policy grievance resolution in the patient bill of rights. Promote diversity through policy.

3. Provide notice of complaint policies in the client’s language.

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Standard 15

Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.
Standard 15: Implementation Strategies

Communicate the organization’s progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

1. Share demographic data about the populations.


3. Share culturally and linguistically appropriate materials.

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Roadmap to Implementing CLAS

- Leadership support
- Self-Assessment
- Inform everyone at HC
- Implementation Plan
- Evaluate
- Evaluate
- Where Are You?
Cultural & Linguistically Appropriate Services (CLAS)
Initial Health Center Self-Assessment Tool

The following questions are designed to help your organization identify challenges and goals in meeting CLAS and develop an implementation work plan with concrete tasks to achieve or address them and using basic elements of Culturally and Linguistically Appropriate Services (CLAS) standards. CLAS work is considered to be an ongoing improvement project. The National Center for Farmworker Health, will help support your efforts to implement CLAS and will monitor continuous improvement based on your program's self assessment and proposed work plan. Thank you for your participation!

Organization

Organization Name: [_____]
CEO/ Executive Director: [_____]
Address: [_____], [_____]
City: [_____], State: [_____] Zip: [_____]
Telephone: [_____]
E-Mail: [_____]

Demographic Information

Number of Service Delivery Sites: [_____]
Number of Staff: [_____]
The CLAS Standards are a set of guidelines to improve the quality of care and services for all patients. CLAS is services that are respectful of and responsive to each person’s culture and communication needs. These guidelines help you take into account cultural health beliefs, preferred languages, health literacy levels, and communication needs.

### Principal Standard

**The achievement of all CLAS Standards**

1. Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.
   - This is the end goal.
   - It takes everyone’s awareness and participation of CLAS to ensure success.
   - All of the standards support and improve the work you’re already doing and provide a guide to provide better services to your patients. Addressing Standards 2-15 helps to achieve #1.

### Governance, Leadership, and Workforce

*Success requires that everyone at the organization is invested, supportive, and trained.*

<table>
<thead>
<tr>
<th>CLAS Standard</th>
<th>Key Concept/Words</th>
<th>Examples of Strategies</th>
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| 2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources. | Leadership Championing CLAS | 1. Create a strategic plan that incorporates policies, procedures, staff and financial resources, and organizational systems to support CLAS efforts.  
2. Create a CLAS Committee or designate leaders that will focus efforts around providing culturally competent care and ensuring the board represents the patient population being served.  
3. Identify Champions who rally and support CLAS internally and externally. |
|               | Diverse Board     |                        |
|               | Strong Infrastructure |                      |
| 3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area. | Diverse Board and Staff that reflect and respond to needs of population | 1. Recruit at minority health fairs and job fairs.  
2. Create an environment in which differences are respected and that is responsive to the challenges a culturally and linguistically diverse staff brings into the workplace such as incorporation of guidelines.  
3. Regularly conduct assessments of hiring and retention data, current workforce demographics, promotion demographics, and community demographics to ensure staff reflects the diversity of the patient/consumer population you serve. |
|               |                  |                        |
| 4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis. | Board Training  
Staff Development  
CLAS training | 1. Allocate annual budgetary expenditures for on-going CLAS training.  
2. Offer on-going training; orientation for new hires; annual training on how to meet the needs of the populations your serving including CLAS training via brown bag lunch series, and yearly update meetings.  
3. Annual training on Cultural Competency, Health Literacy or other topics that are specific to your needs. |
Theme 1: Governance, Leadership, and Workforce

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What is one thing you can do now to support implementation of CLAS?
Call to Action...
Join the CLAS LC
Benefits:
Group to share & learn
Tools:
✓ Assessment
✓ Action Plan Template
✓ Strategies
Guidance
Ideas
A Blueprint for Advancing & Sustaining CLAS Policy and Practice
https://thinkculturalhealth.hhs.gov/clas/blueprint

UnitedHealth Group
Just Plain Clear Glossary (English, Spanish & Portuguese):

Language App - MediBabble Translator (multi-language, free)
www.medibabble.com

Language Competency Checklist

Culturally & Linguistically Appropriate Services (CLAS) Tools
http://www.ncfh.org/health-center-toolbox.html
Thank you for your time & your work!

For additional information regarding CLAS or for customized training for your health center:
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1770 FM 967
Buda, Texas 78610
Direct Line: 512-312-5469
www.ncfh.org

This project was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under U30CS0 9737, Technical Assistance to Community and Migrant Health Centers and Homeless, ($1,583,856). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.