Practical Strategies to Operationalize the Culturally and Linguistically Appropriate Standards (CLAS) in Health Care

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Outline of Workshop

• Cultural Introductions
• Rationale and Description of CLC Domains/Standards/Focus Areas
• Implementing the standards: The TAP CCAT Implementation Guide
  • Domains and Focus Areas
  • Standards
  • Implementation Strategies
  • Community Examples/Best Practices/Resources/Tools
  • Performance Indicators/Measures
• A living example: Workforce Development
Cultural Competence Standards in Managed Mental Health Care Services

Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) (2000)

CMHS Standards

- Contain 16 guiding principles
- Domains, Standards and Guidelines organized within following 3 content areas:
  - Overall system
  - Clinical
  - Provider competencies
Culturally and Linguistically Appropriate Standards in Health Care (CLAS)

Office of Minority Health, Human Resources and Services Administration (HRSA), Department of Health and Human Services (2001)

CLAS Standards

14 Standards
1. Culturally Competent Care (Standards 1-3)
2. Language Access Services (Standards 4-7)
3. Organizational Supports for Cultural Competence (Standards 8-14)
Indicators of Cultural Competence in Health Care Delivery Organizations: An Organizational Cultural Competence Assessment Profile

The Lewin Group, Inc. (2002)

Lewin Group Assessment Profile

• Intended for use in:
  – Monitoring routine performance
  – Quality review processes and improvement efforts
  – Evaluation of compliance

• Organized into:
  – 7 Domains
  – Focus areas within domains
  – Indicators associated with focus areas
Cultural Competence in Systems of Care: Guidelines for Implementation (The Implementation Guide)

Cultural Competence Action Team (CCAT)

Technical Assistance Partnership 2006

Format of the Implementation Guide

• Integrates the conceptual frameworks and content of the CLAS, CMHS and Lewin Group documents.
• Modifications were made in wording and content to increase their relevance to SOC communities
• Focus is on practical “implementation” strategies and movement from standards to action
Format of the Implementation Guide

7 DOMAINS

23 FOCUS AREAS/STANDARDS

IMPLEMENTATION STRATEGIES

Community Examples/Best Practices/Resources/Tool Performance Indicators/Measures

Intended Audience

- Implementation Guide is relevant to:
  - Policy Makers
  - Administrators
  - Families
  - Youth
  - Service/Support Providers
  - Community Partners
  - Community Members
Purpose of the Implementation Guide

• Provide practical tools for implementation in System of Care Communities
• Create peer-to-peer mentoring opportunities
• Identify and showcase best practices
• Connect theory to practice
• Broaden the knowledge base of CLC
• Help demystifying CLC and redefine progress in promoting CLC
• Provide a tool for documenting performance
From Theory to Practice:

A Walk thru of the Workforce Domain
**Workforce Domain**

- An organization’s efforts to a) recruit and retain a culturally and linguistically representative staff; and b) ensure that staff and other service providers have the requisite attitudes, knowledge and skills for delivering culturally competent services.

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**Workforce Development**

**Focus Area:** Recruitment and retention of diverse staff

**Standard:**

“Systems of care recruit, retain and promote a diverse staff at all levels, including leadership positions, that are reflective of the community served.” (Adapted from CLAS)
Workforce Development

Implementation Strategy

“Employ a workforce that includes, and implements specific policies and procedures to recruit and retain at least a proportional representative percentage of staff from the racial, ethnic, and/or cultural populations of focus.” (Adapted from CMHS)

Workforce Development

Community Examples/Best Practices

• The Center for Multicultural Human Services, Falls Church, VA. Contact: Dennis Hunt, Ph.D. dhunt@cmhs.org http://www.cmhs.org

• Diverse Workforce: Programs, tools and examples from the MN Dept. of Health http://www.health.state.mn.us/divs/idepc/refugee/immigrant/divmodels.html
Workforce Development

Resource

Multicultural Specialty Provider Network, MN.
Grow Your Own Initiative
Contact: Jannina Aristy, Executive Director
http://www.multiculturalmh.org/index.html

Workforce Development

Community Example/Best Practice

• Mental Health Association of Hawaii.
  Document describes recruitment and training of mental health consumers from diverse cultural backgrounds.
  http://www.ncstac.org/content/culturalcompetency/chapter4.pdf
  http://www.ncstac.org/content/culturalcompetency/chapter3app.pdf
Workforce Development

Resource

Promoting Cultural Competence in Children’s Mental Health Services

Chapter 5: Recruitment, Retention, Training, and Supervision of Mental Health Services Staff

By Josie Torralba-Romero


ISBN 1-55766-287-8

Workforce Development

Performance Indicator/ Performance Measure

–Performance Indicator: Recruitment, retention and career development plan exists for racial/ethnic/cultural staff. (CMHS)

–Performance Measure: The racial/ethnic staffing is proportional to the populations of focus. (CMHS)
Recruitment and Retention Implementation Strategy

“Designate dedicated funding for diverse workforce development activities within the system of care.”

• Performance Indicator: A dedicated line item in the budget is invested in adequate cultural and linguistic competence activities.

• Performance Measure: At least five to 10% of the annual operating budget is dedicated to cultural and linguistic competence expenditures.  [NOTE: The 5-10% allocated for cultural and linguistic competence activities does not include the salary of the cultural and linguistic competence coordinator. That salary is in addition to the dedicated 5-10% budget allocation.]

Recruitment and Retention Implementation Strategy

–Provide mentoring and individual supports to aid in the professional advancement of staff who are engaged in cultural and linguistic competence work.
Workforce Development

Focus Area: Linguistic Competence

Standard:

“Systems of care assure that all staff communicate effectively in the preferred languages of the population of focus. This includes sign language for individuals with limited hearing ability.”
Workforce Development

Implementation Strategy

“Ensure that bilingual staff and interpreters are certified or otherwise have formally demonstrated linguistic competence.” [Note: Use of family members, especially children, as interpreters shall be strictly prohibited except on request by the consumer]. (Adapted from CMHS)

Resources/Tools

– Diversity Rx: Bilingual Interpreter Services: Model Programs. Provides descriptions and information for model programs in the area of bilingual interpreter services. http://www.diversityrx.org/HTML/MOBISA.htm

Performance Indicator/Performance Measure

- Performance Indicator: Use language fluency examinations or comparable measures to determine the level of competence of staff and interpreters. (CMHS)

- Performance Measure: All services meet the standards for the provision of linguistically competent services as measured by a language fluency examination or comparable measure. (CCAT, Adapted from CMHS)

Linguistic Competence

Implementation Strategy

“Ensure that standards for staff and interpreters include knowledge of local nuances in the interpretation and meaning of language within the community served.” (CCAT)
Linguistic Competence

A Community Generated Cultural Gem: Defining “Family” in Puerto Rico

- “Language is more than translation”
- What does “family” mean?
  - Urban housing project –vs- Rural community
- How a family defines “family” has many implications for success or failure of service and support modalities.

Linguistic Competence

Resource

- Bridging the Cultural Divide in Health Care Settings: The Essential Role of Cultural Broker Programs. The National Center for Cultural Competence.

Linguistic Competence

Resource

Workforce Development

Focus Area: Training and Supervision

Standard

“Effective models of training, supervision and development in cultural and linguistic competence are implemented at all levels of the system of care.” (CMHS, FMHI)

Workforce Development

Implementation Strategy

“Staff training and orientation in cultural and linguistic issues is incorporated into every aspect of the system of care functions, policies and procedures.” (Isaacs, 2005)
Resource

• **Communities Can! Communities of Excellence 2000.** Child Find, Early Intervention and Culturally/ Linguistically Competent Staff, Services and Materials. Broward County, FL (page 28)
  

Community Example/Best Practice

• **“Baldo”- Latino Comic Strip: Glenn County, CA**
  
  The Glenn County SOC dedicates time at every staff meeting to circulate this comic strip to stimulate discussion about cultural issues in a humorous, non-threatening manner. The practice was started and is led by a family member/case manager on the team.

  * Other possible cartoons include:
    • “The Boondocks”
    • Political cartoons on race, ethnicity and cultural issues.
TIP NO. 1: I'M AN OLD BOY Scout.

TIPS FOR IDENTIFYING GANG MEMBERS can be checked in this notebook. Remember: just say, 'I'M AN OLD BOY Scout.'

TIP NO. 2: ANY GANG MEMBER WILL CRINGE IF YOU CALL THEM BY THEIR NAME.

TIP NO. 3: IF YOU SEE A GROUP OF Dudes talking, it's not a gang. Take orders from its leader.

TIP NO. 4: IF YOU SEE A GROUP OF Dudes talking, it's not a gang. Take orders from its leader.

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Resource

A Planner’s Guide...Infusing Principles, Content and Themes Related to Cultural and Linguistic Competence into Meetings and Conferences.

National Center for Cultural Competence, Georgetown University
Child Development Center
Center for Child Health and Mental Health Policy

http://gucchd.georgetown.edu/nccc/documents/Planners_Guide.pdf
Training and Supervision

Implementation Strategy

Encourage providers to assess and explore the role of their own cultural framework through cultural self-assessment and mapping techniques. (CCAT)

Resource

- Cultural Competency Survey for Mental Health Professionals. Developed by the Asian American Family Counseling Center of Houston, TX.
  
  http://www.ncstac.org/content/culturalcompetency/chapter8app.pdf

Training and Supervision

Resources

- Hogg Foundation for Mental Health: Cultural Competence Tools for Providers
  
  http://www.hogg.utexas.edu/Pages/CAI_tools.html#provider

- Promoting Cultural Diversity and Cultural Competency. Self-assessment checklist for personnel providing services and supports to children with disabilities & special health needs and their families (Tawara D. Goode - Georgetown University Center for Child & Human Development)
  
Training and Supervision Resource

Multicultural Counseling Competencies 2003: Association for Multicultural Counseling and Development

http://www.counseling.org/Publications/

Timeframe for release of the Implementation Guide

- The TA Partnership Cultural and Linguistic Competence Implementation Guide is a living document always in the process of evolving and growing. As new community examples, best practices and resources are identified, they will be added.

- One Domain will be released at a time.

- Workforce Development Domain to be released August 1st, 2006
  - Will be available on TA Partnership website, Cultural Competence webpage: http://www.tapartnership.org/resources/cc/default_new.asp
    (Can be printed)

- Organizational Infrastructure Domain to be released by fall.
Help Contribute to the Guide!

Please share your stories and strategies used within your communities to promote CLC. They will help us identify innovative and best practices in the field to share with others and your community will be recognized in the Guide!

For further information about the TAP CCAT CLC Implementation Guide or to share your stories contact us!

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Thank you

mahalo

istuti

XIE XIE

Gracias
dziekuje
toda

 obrigado
grazie
merci

Shia Shia
danke

arigato
Key References


