

CLAS Plan Information (Attachment 8)

Broward Behavioral Health Coalition, as part of the OCP2 system of care initiative, requires all its network providers to comply with the National Standards for **Culturally and Linguistically Appropriate Services** in Health and Health Care (CLAS Standards). The CLAS Standards are utilized as the benchmark for evaluation because they are aligned with the U.S. Department of Health and Human Services Action Plan to Reduce Racial and Ethnic Health Disparities (HHS, 2010) and the National Stakeholder Strategy for Achieving Health Equity (National Partnership for Action to End Health Disparities, 2011), which aim to promote health equity by providing clear plans and strategies to guide efforts to improve cultural and linguistic competence.

The CLC assessment tool was created using the CLAS Standards as benchmarks. This tool can serve as a guide for agencies to improve their CLC plans and better serve their target populations.

The tool includes the 4 themes that the CLAS Standards focus on: 1) Introduction: Principal Standard; 2) Governance, Leadership, and Workforce; 3) Communication and Language Assistance; and 4) Engagement, Continuous Improvement, and Accountability. Researchers decided to add two additional themes: 5) Family Involvement and 6) Service Delivery: Intake, Treatment, and Discharge. The family involvement theme centers around taking an individual approach to service delivery, and values the importance of the family during treatment and discharge. The CLC plan should include several statements on how the agency values the individual and their familial preferences. Lastly, the service delivery theme centers on how the cultural and spiritual preferences of the individual are recognized during intake, service, and discharge. These two themes are an integral part of culturally appropriate practices to care that go beyond linguistically appropriate practices that is covered in CLAS standards 1-15.

BBHC will require providers to submit a CLC Action Plan based on the Assessment tool. Updates to CLC plans must be submitted on November 30 2016 & Updates on revised plans by January 31 2017 and as needed thereafter for Contract Negotiations.

CLC Assessment Tool

Theme 1: Introduction: Principal Standard (Goal of the CLC Plan)

	Statements	Yes/No	Date of Implementation	Data Source	Responsible Party
CLAS 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 plan states that the organization offers <u>effective</u> quality care responsive to diverse cultural and health beliefs and practices.				
	The plan states that the organization offers <u>understandable</u> quality care responsive to diverse cultural and health beliefs and practices.				
	The plan states that the organization offers <u>respectful</u> quality care responsive to diverse cultural and health beliefs and practices.				
	The plan states how the organization collects and recognizes cultural health beliefs.				
	The plan states that the care provided will be provided in the <u>client's preferred language</u> , recognizing their <u>health literacy</u> and other <u>communication needs</u> .				
	The plan acknowledges health literacy and other communication needs, and defines what those are or may be for the organization.				

Theme 2: Governance, Leadership, and Workforce

	Statements	Yes/No	Date of Implementation	Data Source	Responsible Party
CLAS Standard 2: Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.	The plan states that the organization annually allocates resources to meeting the diverse cultural and linguistic needs of its clients.				
	The plan revisits its policies and management strategies on an annual basis to determine needs that may need addressing or added.				
	The plan states how often that the CEO and Board meets to set goals to improve diversity and offer continual cultural competence care and training <u>as a part of the strategic plan</u> .				
	The plan details how and when staff members can provide feedback on interactions with LEP and minority populations, to improve interactions and services.				
CLAS 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.	The plan has protocols in place for recruiting diverse staff members including leadership and governance positions.				
	The plan specifies how organizations place priority on hiring members of staff with added bilingual or multilingual qualifications.				
	The plan specifies how the organization will recruit staff members that represent the service population, which includes advertising job opportunities in foreign languages in various outlets (social media networks, publications, professional organizations' email listservs, job boards, local schools, faith based organizations, training programs, minority health fairs, etc.).				
	The plan states that the organization recognizes staff who continue to meet the diverse needs of clients by offering the individuals internal promotions and other opportunities for upward mobility before seeking external candidates.				
	The plan states that the organization recognizes the diverse cultural beliefs of its employees.				
CLAS Standard 4: Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.	The plan discusses how staff (workforce, leadership and governance positions) are trained on cultural norms, and how they vary by family (such as youth alcohol consumption or physical punishment).				
	The plan states that the organization supports the staff development of its employees, and how it places value on continued education and training in diversity and leadership.				
	The plan states how often staff and leaders receive training.				
	The plan states that the staff is trained on recognizing and responding to cultural health beliefs.				
	The plan states how both internal and external resources are used to educate the governance, leadership, and workforce on cultural beliefs that they may encounter.				
	The plan states that cultural competence is incorporated into staff evaluations and performance reviews.				
	The plan states what is included in the staff training, and how the training is evaluated.				

Theme 3: Communication and Language Assistance

	Statements	Yes/No	Date of Implementation	Data Source	Responsible Party
CLAS 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.	The plan states that the organization offers language assistance to LEP individuals and/or other communication needs <u>at no cost to the client.</u>				
	The plan details the way that clients are made aware of no cost language assistance.				
	The plan states that the organization offers language assistance to LEP individuals and/or other communication needs for access to services <u>in a timely manner.</u>				
	The plan states how program directors, "point of contact staff" or agency's appointed "gatekeeper" are made aware of and trained in language assistance services, policies, and procedures.				
	The plan identifies how language needs are noted in records for individuals seeking care (which may include language needs, "I speak" cards, etc.).				
	The plan states the maximum time that it will take to provide an interpreter and the maximum amount of time for service delivery using a certified interpreter.				
CLAS Standard 6: Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.	The plan states that the organization has the availability of language assistance services clearly displayed.				
	The plan states what language assistance services are available at all times.				
	The plan states how the organization translates appropriate material.				
	The plan states that there is a protocol for verbally informing clients of the availability of services in their preferred language.				
CLAS Standard 7: Ensure competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors should be avoided.	The plan states the protocol for ensuring language assistance providers are certified.				
	The plan states how the organization ensures interpreter competence, including the interpreter's active listening skills, message conversion skills, and clear and understandable speech delivery.				
	The plan states if community brokers are used within the organization.				
	The plan states that untrained individuals and minors should NOT be used as interpreters.				
CLAS Standard 8: Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.	The plan states that the organization has clear, easy to understand multimedia materials and signage in the languages used within the service community.				
	The plan states what multimedia materials are available in various languages.				
	The plan states that there is a formalized process and what the process is for translating materials into languages when the materials are not readily available.				
	The plan notes that the materials have been tested with members of the target audience (such as through focus groups, where members may identify content that may be embarrassing or offensive, suggest cultural practices that may be more appropriate examples, and assess whether the graphics are appropriate and reflect the diversity of the community).				
	The plan states that easily understandable signage is posted throughout the service area (including, but not limited to diverse languages, minority representation, and responsive to LGBTQ+ (safe space sign), and youth populations).				

Theme 4: Engagement, Continuous Improvement, and Accountability

	Statements	Yes/No	Date of Implementation	Data Source	Responsible Party
CLAS Standard 9: Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.	The plan states that the organization will regularly review organizational planning and operations with the purpose of identifying cultural and linguistic needs that are not being met.				
	The plan states how the annual organizational diversity goals will be created and discussed in meetings throughout the year.				
	The plan states that cultural and linguistic goals created by the organization will be included in the strategic plan, and will regularly be included as agenda items in staff meetings.				
CLAS Standard 10: Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and CQI activities.	The plan ensures that there is an ongoing evaluation of CLAS standards and how they are implemented within the organization.				
	The plan states that all staff are provided with CLAS-oriented feedback in their performance reviews.				
	The plan states how often CLAS standards are evaluated and revisited for quality improvement.				
CLAS 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.	The plan details how and when demographic data will be obtained from the target community, and where the information will be updated and posted within the organization.				
	The plan discusses how the community demographic data will be used in program planning and service delivery.				
	The plan discusses how the community demographic data will be used to guide translated material and signage in the organization.				
	The plan discusses how the community demographic data will highlight any apparent disparities that may exist.				
	The plan states that the community demographic data and disparities will be presented to the governance and leadership of the organization annually.				
CLAS Standard 12: 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.	The plan details how and when community health assets and needs are performed.				
	The plan will discuss when and if qualitative data will be collected and used (such as focus groups or interviews) to enhance the community health assets and needs.				
	The plan discusses how findings from the community health needs assessments are utilized within the organization.				
	The plan offers opportunities for collaboration with other community based partners and stakeholders in discussing assets and challenges of the community and sharing best practices related to: 1) meeting needs; 2) capturing community demographics; and 3) strategies on the dissemination of findings.				
	The plan discusses how findings from the community health needs assessments are used in program development.				
CLAS Standard 13: Partner with the community to design, implement, and evaluate policies, practices, and services to	The plan details the method of targeting and communicating with other community based organizations that offer services that clients would benefit from.				
	The plan recognizes the success of cross-system collaborative efforts and the use of multidisciplinary teams in working with children and families.				

ensure cultural and linguistic appropriateness.	The plan states the organization's policies on ensuring collaborative agencies practice culturally and linguistically appropriate services and adhere to the CLAS standards.				
CLAS Standard 14: Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.	The plan states the organization's strategies for LEP and others with communication needs to fill out conflict and/or grievances with the organization.				
	The plan offers conflict and grievance forms in various languages, including all of the languages that are represented within the target community.				
	The plan details the grievance resolution process, and the maximum length of time that grievances will be addressed.				
CLAS Standard 15: Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents and the general public.	The plan details where the organization's diversity and linguistic policies are posted for the public.				
	The plan specifies that information collected from stakeholders is used in training, meetings, and for quality improvement.				
	The plan states the organization's policies on open communication to raise concerns of cultural and linguistic needs.				
	The plan states the protocol for a clear communication plan that is discussed with the individual seeking behavioral health care services and their family during discharge.				

Suggested Themes 5 and 6

	Statements	Yes/No	Date of Implementation	Data Source	Responsible Party
Family Acknowledgement	The plan states the organization's policy for including family in the service delivery, including the treatment and discharge of the client.				
	The plan details the organization's efforts and strategies towards coordinated, individualized, family-driven and youth guided services.				
	The plan should detail how the organization identifies familial preferences for and availability of traditional healers, religious and spiritual resources, alternative or complementary healing practices, natural supports, bilingual services, self-help groups, and consultation from culturally and linguistically competent independent providers, except when clinically or culturally contraindicated.				
	The plan acknowledges that treatment plans do not always match family values, and that improved listening to family and youth is suggested.				
Spiritual and Cultural Beliefs in Treatment & Discharge	The plan states that cultural and spiritual beliefs are recognized during the intake assessment.				
	The plan states that cultural and spiritual beliefs are recognized during the service treatment.				
	The plan states that cultural and spiritual beliefs are recognized during discharge of the individual.				
	The plan recognizes that traditional and natural supports may be necessary for treatment and interactions with individuals seeking behavioral health care.				

CLAS STANDARDS SOURCE: <https://www.thinkculturalhealth.hhs.gov/>