

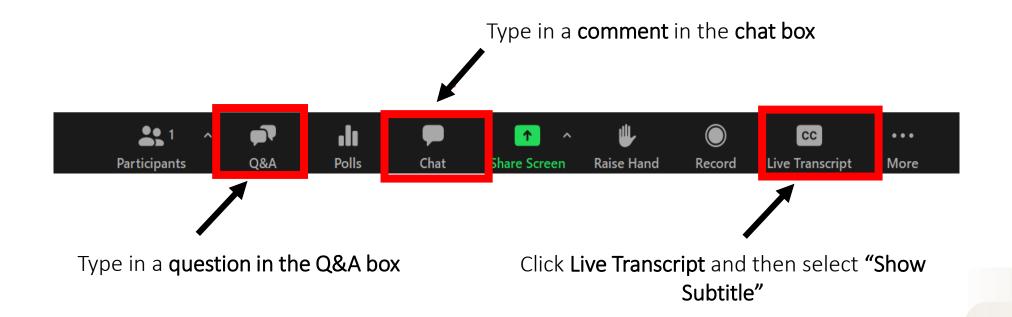
# The CLAS Standards for Integrated Health Part 1 - History and Purpose

Wednesday, September 28, 2022 3-4pm EST

**CENTER OF EXCELLENCE** for Integrated Health Solutions

Funded by Substance Abuse and Mental Health Services Administration and operated by the National Council for Mental Wellbeing

## Questions, Comments & Closed Captioning





## Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).



Substance Abuse and Mental Health Services Administration

www.samhsa.gov



## Poll #1: What best describes your role?

- Clinician
- Administrator
- Policy Maker
- Payer
- Other (specify in chat box)



## Poll #2: What best describes your organization? (check all that apply)

- Primary Care Provider
- Mental Health Provider
- Substance Use Treatment Provider
- Other (specify in chat box)

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## Poll #3: Where is your organization in the process of integration?

- Learning/Exploring
- Beginning Implementation
- Advanced/Full Implementation
- Ongoing Quality Improvement
- Other (specify in chat box)



## Our Speaker



Pierluigi Mancini, PhD,

President/CEO,

Multicultural Development Institute, Inc.





## Learning Objectives

At the end of this session, participants will be able to

- Discuss the history and purpose of the CLAS standards
- Identify ways of advocating for CLAS standards
- Explain the benefits of implementing the CLAS standards within healthcare settings
- Describe the importance of CLAS standards in integrated care settings

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# History and Purpose of CLAS Standards



"Of all the forms of inequality, injustice in health care is the most shocking and inhumane."

—Martin Luther King, 1966

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# A History of Health Disparities in America



## A History of Health Disparities in America (1/2)

- Division along racial and ethnic lines
- Healthcare systems loosely organized
- Emancipation
- Segregated facilities
- Native Americans/Indigenous Americans

Smith, D.B. (1999). Health Care Divided: Race and Healing a Nation. Ann Arbor: The University of Michigan Press

Institute of Medicine (US) Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care; Smedley BD, Stith AY, Nelson AR, editors. Washington (DC): National Academies Press (US);





## A History of Health Disparities in America (2/2)

- Approaching the 20<sup>th</sup> Century major social transformations
  - Development of surgical and medical advances
  - Passage of Jim Crow laws
- Hospitals
- Marginalized groups
- Payment issues
- Civil rights legislation and Medicare/Medicaid legislation
  - Mandated integration
  - Closing of hospitals
- Managed Care
- ACA







## History and Purpose of the CLAS Standards

- Quality, disparities and equity
- Support integration
- Framework for equitable and effective treatment
- Elimination of racial and ethnic health disparities
- Assist with policies and procedures; and accreditation and licensing
- Extend the cultural responsiveness spectrum

A Practical Guide to Implementing the National CLAS Standards, <a href="https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf">https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf</a>
U.S. Department of Health and Human Services, Office of Minority Health. (2013). National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care: A Blueprint for Advancing and Sustaining CLAS Policy and Practice. Washington, DC: U.S. Department of Health and Human Services.





## History

- 2001 Original CLAS Standards Office of Minority Health
- Inform, guide, and facilitate
- Provided guidance on improving quality care under three areas in particular:
  - Culturally Competent Care,
  - Language Access Services and
  - Organizational Supports
- Three-year process and extensive public comment enhanced version (2013)
- Progress in the state-of the- art in theory, and practice of cultural competency guidelines.
- Blueprint for health and health care organizations to "provide, equitable, understandable, and respectful quality care and services

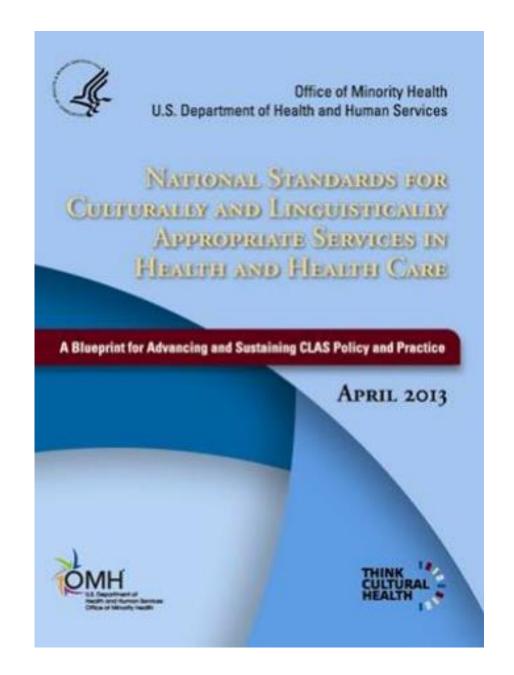
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U.S. Department of Health and Human Services, Office of Minority Health. (2013). National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care: A Blueprint for Advancing and Sustaining CLAS Policy and Practice. Washington, DC: U.S. Department of Health and Human Services.





## The 2013 Enhanced National CLAS Standards

- One principal standard and 14 supporting standards
- Divided into 3 major themes
  - Governance, Leadership and Workforce;
  - Communication and Language Assistance;
  - Engagement, Continuous Improvement, and Accountability
- Governance responsibility rests at the highest level of organizational leadership
- Communication language assistance; verbal and written
- Engagement importance of quality improvement, community engagement and accountability





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## Advocating for CLAS Standards

## Advocating

Internal

External

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## Internal Advocating











Engage your Leadership Assess what you are doing in this space

Identify the key personnel

Deliver a training

**Evaluate** 

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## **External Advocating**









Different Levels of Implementation

**Partnerships** 

Policy, Planning And Collaboration

Budgeting

 $\underline{\textit{Explore some examples}} \ of \ what \ different \ organizations \ did \ to \ achieve \ implementation.$ 





## U.S. Map of CLAS Legislation

HHS.gov

U.S. Department of Health & Human Services

Explore HHS

THINK
CULTURAL
HEALTH

About Us National CLAS Standards 
Explore HHS

Explore HHS

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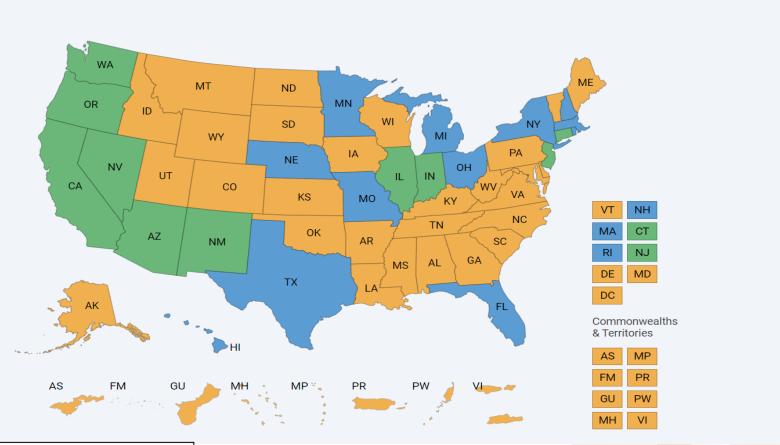
♠ > CLAS > Tracking CLAS

#### TRACKING CLAS

This map tracks the progress of state- and territory-led initiatives for mandatory cultural competency training across the United States and territories.

Click on the states or territories in this map for more specific information.

- Requires mandatory cultural competency training
- Proposed, but does not have, mandatory cultural competency traning
- Does not require cultural competency training



Source: Department of Health and Human Services, Office of Minority Health

## When you click on a state...

#### Georgia



Does not require cultural competency training

#### **Stay Informed**

Expand your knowledge of culturally and linguistically appropriate services (CLAS) and share it with others!

- Explore Think Cultural Health's resources about CLAS.
- Share this brochure about CLAS with your colleagues and networks.
- Visit this page to find information about your elected officials.
- Find the minority health point of contact for your state or territory on this page to stay informed about the development of health policies and programs.
- Follow the Office of Minority Health on Twitter, Facebook, and Instagram, and share articles, posts, and information to increase awareness of CLAS.

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# Benefits of Implementing CLAS Standards

## **Social Benefits**

#### Potential for the following benefits:

- Increases mutual respect and understanding between patient and organization
- Increases trust
- Promotes inclusion of all community members
- Increases community participation and involvement in health issues
- Assists patients and families in their care
- Promotes patient and family responsibilities for health



Source: Institute for Diversity in Health Management and the Health Research & Educational Trust. <u>Becoming a culturally competent health care organization</u>. (2013)





### **Health Benefits**

#### Potential for the following benefits:

- Improves patient data collection
- Increases preventive care by patients
- Reduces care disparities in the patient population
- Increases cost savings from a reduction in medical errors, number of treatments and legal costs
- Reduces the number of missed medical visits

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Source: Institute for Diversity in Health Management and the Health Research & Educational Trust. Becoming a culturally competent health care organization. (2013)



### **Business Benefits**

- Incorporates different perspectives, ideas and strategies into the decision-making process
- Decreases barriers that slow progress
- Moves toward meeting legal and regulatory guidelines
- Improves efficiency of care services
- Increases the market share of the organization

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Source: Institute for Diversity in Health Management and the Health Research & Educational Trust. Becoming a culturally competent health care organization. (2013)



## **Legal Benefits**

#### Improves risk management

- Reduces risk of medical liability
- Reduces care disparities in the patient/client population and subsequent legal action
- Improves patient safety and reduces number of medical errors

#### Reduces risk of sanctions and penalties

- Facilitates fulfillment of legal and regulatory guidelines
- Improves compliance with:
  - Title VI of Civil Rights Act of 1964
  - Americans with Disabilities Act
  - Rehabilitation Act of 1973
  - Patient Protection and Affordable Care Act of 2010
  - State and Federal community benefit reporting and needs assessments



Sources: Institute for Diversity in Health Management and the Health Research & Educational Trust. <u>Becoming a culturally competent health care organization.</u> (2013); Adelson BL. Beyond the Right Thing to Do: The Legal Case for CLAS Implementation. Webinar sponsored by Hopkins Center for Health Disparities Solutions (12/3/13).





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## **CLAS Standards in Integrated Care**

## Six Areas for Action



Adapted from "Making CLAS Happen", Massachusetts Department of Health

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## Foster Cultural and Linguistic Responsiveness



Identify Committed Champions



Embedded In Organization's Goals, Mission And Strategic Plan



Allocate Resources



Integrate Into Staff Evaluations



Review And Update
Organizational
Policies And
Practices

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## Reflect and Respect Diversity

- Implement recruitment, retention and promotion policies
- Establish conflict and grievance resolution process
- Provide training





## **Ensure Language Access**











Assess language needs Develop communicatio n and language plan Develop standard process

Provide training

Notify availability of language services



Issue guidance to staff



## **Collect Diversity Data**







Standardize



Collect data on organization's staff

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## Benchmark, Plan and Evaluate









Conduct organizational assessment

Integrate CLAS into strategic plan

Ensure fiscal and human resources

Involve the community and your clients in monitoring progress

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### **Tools & Resources**

- National Quality Forum. "Comprehensive Framework and Preferred Practices for Measuring and
- Reporting Cultural Competence: A Consensus Report". 2009. Available
   at: <a href="http://www.qualityforum.org/Publications/2009/04/A Comprehensive Framework and Preferred Practices">http://www.qualityforum.org/Publications/2009/04/A Comprehensive Framework and Preferred Practices</a>
   for Measuring and Reporting Cultural Competency.aspx
- Smedley, Brian et al (ed.). Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care.
- Washington, DC: Institute of Medicine, 2002.
- U.S. Department of Health and Human Services, Office of Minority Health. "National Standards for
- Culturally and Linguistically Appropriate Services in Health and Health Care". April 2013. Available at:
- <a href="http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=15">http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=15</a>
- A Practical Guide to Implementing the National CLAS Standards, <a href="https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf">https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf</a>
- Think Cultural Health (Office of Minority Health, U.S. Department of Health & Human Services.)
   www.thinkculturalhealth.hhs.gov



## Health Equity Tools & Resources

- Center of Excellence for Integrated Health Solutions
- Access for Everyone: A Toolkit for Addressing Health Equity & Racial Justice within Integrated Care Settings
- Social Justice Leadership Academy (SJLA) Workbook
- Racial Equity Tools
- Diversity, Equity & Inclusion Framework
- Racial Equity Toolkit
- Rasing the Bar (RtB) Framework



#### **Health Equity and Racial Justice Webpage**

National Council for Mental Wellbeing

See our page for more information on Webinars and Upcoming Events, Resources and Tools, and
Training and Technical Assistance focused
on Health Equity and Racial Justice, **including Cultural and Linguistically Responsive Services** 





## Questions, Comments?









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## Culturally & Linguistically Appropriate Services (CLAS) Series

CoE-IHS Webinar: Culturally and Linguistically
Appropriate Services Part 2 - Introduction to the CLAS
Standards

Thursday, October 20th, 2-3pm ET

<u>CoE-IHS Webinar: Culturally and Linguistically</u>
<u>Appropriate Services Part 3 - Implementing the CLAS</u>
Standards

Tuesday, November 15th, 2-3:30pm ET

Office Hour: Culturally and Linguistically Appropriate
Services

Thursday, November 17th, 1-2pm ET



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## **Upcoming CoE Events**

CoE-IHS Office Hour: Workforce Recruitment in Integrated Care Settings

Register for the Office Hour on Tuesday, October 11th, 2-3pm ET

CoE-IHS Webinar: Culturally and Linguistically Appropriate Services Part 2 - Introduction to the CLAS Standards

Register for the Webinar on Thursday, October 20th, 2-3pm ET

Interested in an individual consultation with the CoE experts on integrated care? Contact us through this form here!

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### Thank You

#### **Questions?**

Email integration@thenationalcouncil.org

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