

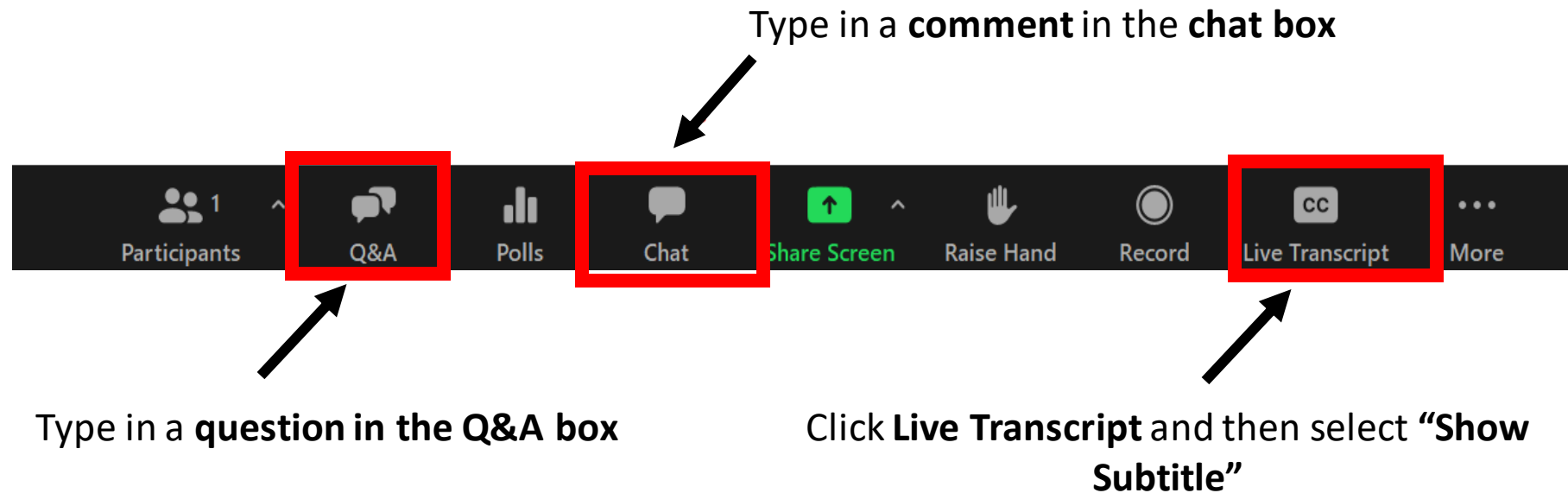
# The CLAS Standards for Integrated Health Part 2 – Introduction to CLAS

Thursday, October 20, 2022  
2-3pm 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).

***SAMHSA***

Substance Abuse and Mental Health  
Services Administration

[www.samhsa.gov](http://www.samhsa.gov)

NATIONAL  
COUNCIL  
*for* Mental  
Wellbeing



# 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)



# 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.

NATIONAL  
COUNCIL  
*for Mental*  
Wellbeing



# Learning Objectives

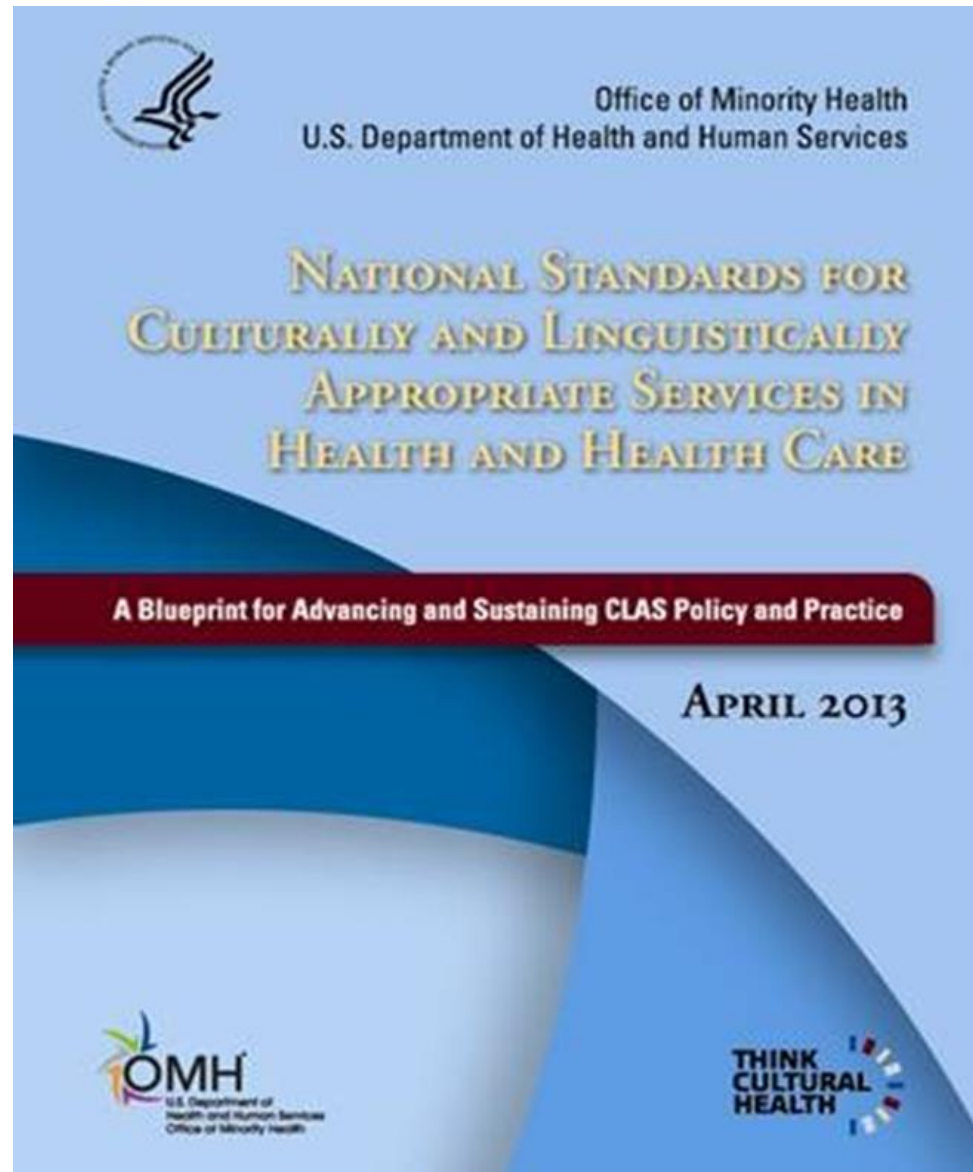
At the end of this session, participants will be able to:

- Describe the importance of implementing the CLAS standards.
- Explain the social, health, business and legal benefits of implementing the CLAS standards within integrated care settings.
- Identify and describe the three themes of the CLAS standards.





# Why CLAS?



NATIONAL  
COUNCIL  
for Mental  
Wellbeing



# 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. Becoming a culturally competent health care organization. (2013)  
[http://www.hpoe.org/Reports-HPOE/becoming\\_culturally\\_competent\\_health\\_care\\_organization.PDF](http://www.hpoe.org/Reports-HPOE/becoming_culturally_competent_health_care_organization.PDF)



# 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

Source: Institute for Diversity in Health Management and the Health Research & Educational Trust. Becoming a culturally competent health care organization. (2013)  
[http://www.hpoe.org/Reports-HPOE/becoming\\_culturally\\_competent\\_health\\_care\\_organization.PDF](http://www.hpoe.org/Reports-HPOE/becoming_culturally_competent_health_care_organization.PDF)



# 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

Source: Institute for Diversity in Health Management and the Health Research & Educational Trust. Becoming a culturally competent health care organization. (2013)  
[http://www.hpoe.org/Reports-HPOE/becoming\\_culturally\\_competent\\_health\\_care\\_organization.PDF](http://www.hpoe.org/Reports-HPOE/becoming_culturally_competent_health_care_organization.PDF)



# Legal Benefits

Potential for the following benefits:

## 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

## 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



# Introduction to the CLAS Standards

NATIONAL  
COUNCIL  
*for* Mental  
Wellbeing

**C**ulturally &  
**L**inguistically  
**A**ppropriate  
**S**ervices



---

**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

# What are the National CLAS Standards?

- The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care
- First published by the HHS Office of Minority Health in 2000
- Provided a framework for organizations to best serve the nation's diverse communities
- Underwent an Enhancement Initiative from 2010 to 2013
- Launched the enhanced CLAS Standards in April 2013

## Standard 1

Principal Standard

## Standards 2-4

Governance, Leadership & Workforce

## Standards 5-8

Communication & Language

## Standards 9-15

Engagement, Continuous Improvement & Accountability

Source: Institute for Diversity in Health Management and the Health Research & Educational Trust. Becoming a culturally competent health care organization. (2013)  
[http://www.hpoe.org/Reports-HPOE/becoming\\_culturally\\_competent\\_health\\_care\\_organization.PDF](http://www.hpoe.org/Reports-HPOE/becoming_culturally_competent_health_care_organization.PDF)



# What's New in the National CLAS Standards?

**The Enhancement Initiative:** newly enhanced version of CLAS released in 2013; improving previously developed CLAS from 2000.

## Statement of Intent:

The National CLAS Standards are intended to **advance** health equity, **improve** quality, and help **eliminate** health care disparities by establishing a blueprint for health and health care organizations to **implement and provide** culturally and linguistically appropriate services.

Source: <https://thinkculturalhealth.hhs.gov/clas>





# Standard 1

## Principal Standard:

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.

Source: 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: <https://thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedCLASStandardsBlueprint.pdf>





Activity:  
The Cultural  
Competence  
Continuum

NATIONAL  
COUNCIL  
*for* Mental  
Wellbeing





## The Cultural Competence Continuum

**Cross-Cultural Competence:** The ability to think, feel, and act in ways that acknowledge, respect, and build upon ethnic, (socio)cultural, and linguistic diversity.

(Lynch and Hanson, 1998)

References: Cross, T (1988). Services to Minority Populations. *Focal Point*, Vol. 3 No. 1, pp.1-4.  
 Lynch E. & Hanson, M. (1998). *Developing Cross-Cultural Competence*. Baltimore: Paul H. Brookes.

Points on the Continuum	Examples
<b>Cultural Destructiveness</b> Attitudes and practices that are destructive to cultures and consequently to the individuals in the culture.	
<b>Cultural Incapacity</b> Not intentionally seeking to be culturally destructive, but lacking the capacity to help minority clients or communities. Believing in racial superiority of the dominant group and assuming a paternal posture towards the 'lesser' races.	
<b>Cultural Blindness</b> Believing that culture/ ethnicity/race make no difference in how services are provided. "All people are the same." Believe approaches traditionally used by dominant culture are universally applicable.	
<b>Cultural Pre-Competence</b> Pre-competent individuals realize their weaknesses in serving minorities and attempt to improve aspects of their services to a specific population.	
<b>Cultural Competence</b> Accepting and respecting differences and continual self-assessment regarding culture.	
<b>Cultural Proficiency</b> Holding culture in high esteem, seeking to add to the knowledge base.	

# Theme 1 (T1)

## Governance, Leadership and Workforce Standards 2, 3 and 4



# T1: 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 3

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

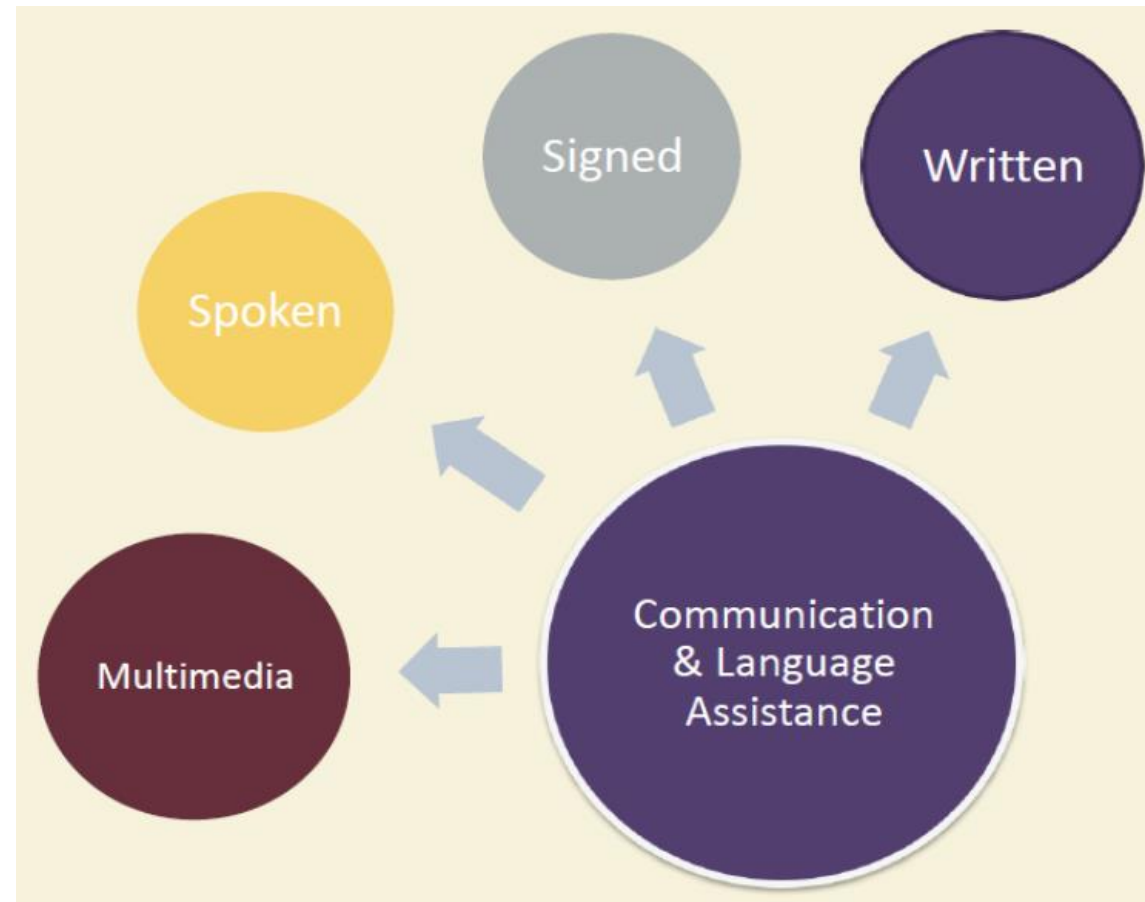


## Standard 4

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



# Theme 2 (T2): Communication & Language Assistance Standard 5, 6, 7 and 8



# T2: Communication & Language Assistance Standards 5, 6, 7 and 8

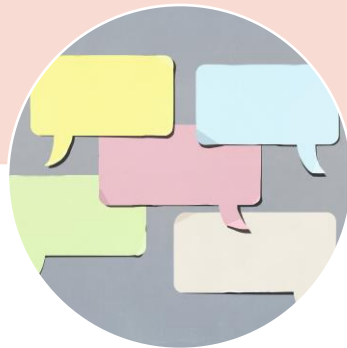
## Standard 5

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 6

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



## Standard 7

Ensure the competence of individuals providing language assistance, recognizing that **the use of untrained individuals** and/or **minors** as interpreters should be avoided.

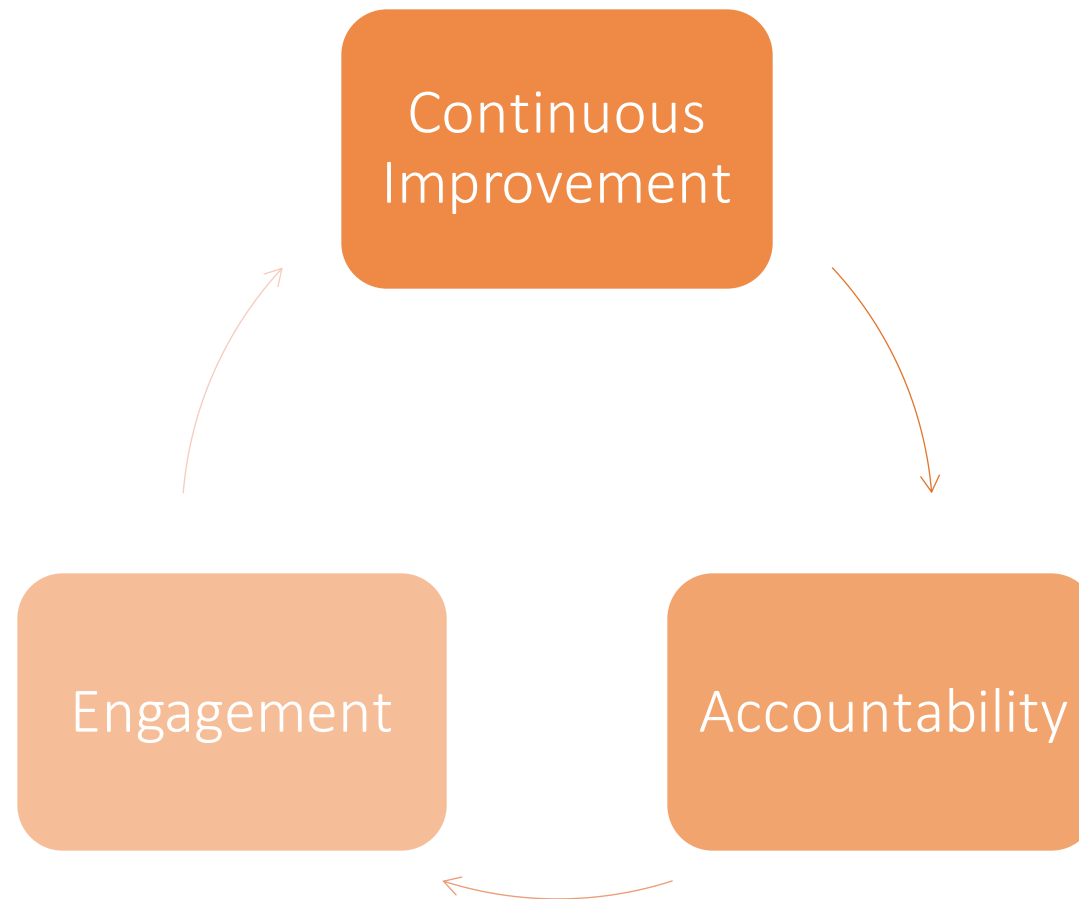


## Standard 8

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



# Theme 3 (T3): Engagement, Continuous Improvement and Accountability Standards 9 - 15





# T3: Engagement, Continuous Improvement and Accountability

## Standard 9

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



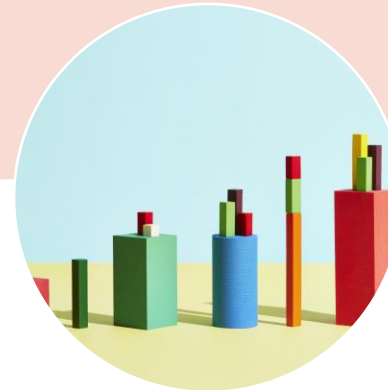
## Standard 10

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



## 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.



## 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.



# T3: Engagement, Continuous Improvement and Accountability, cont'd.

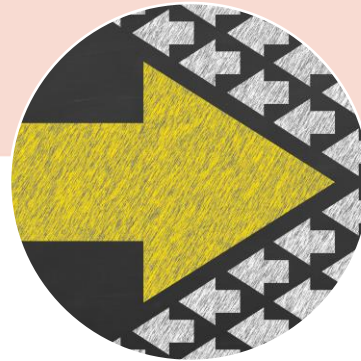
## Standard 13

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



## Standard 14

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



## Standard 15

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



# Key Take-aways

- CLAS standards have many social, health, business and legal benefits within health care settings.
- Three themes of CLAS standards:
  - T1: Governance, Leadership, & Workforce
  - T2: Communication & Language Assistance
  - T3: Engagement, Continuous Improvement, and Accountability
- CLAS helps with providing coordinated quality care that addresses health disparities, changing environments (geographic and policy) and changing demographics.
- Client-centered care will allow providers to deliver culturally and linguistically-appropriate services.



# Tools & Resources

- National Quality Forum. “Comprehensive Framework and Preferred Practices for Measuring and Reporting Cultural Competence: A Consensus Report”. 2009. Available at: [http://www.qualityforum.org/Publications/2009/04/A\\_Comprehensive\\_Framework\\_and\\_PREFERRED\\_Practices\\_for\\_Measuring\\_and\\_Reporting\\_Cultural\\_Competency.aspx](http://www.qualityforum.org/Publications/2009/04/A_Comprehensive_Framework_and_PREFERRED_Practices_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: <https://thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedCLASStandardsBlueprint.pdf>
- A Practical Guide to Implementing the National CLAS Standards, <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf>
- Think Cultural Health (Office of Minority Health, U.S. Department of Health & Human Services.) [www.thinkculturalhealth.hhs.gov](http://www.thinkculturalhealth.hhs.gov)



# Questions, Comments?



NATIONAL  
COUNCIL  
*for* Mental  
Wellbeing



**Thank  
You**

*Mahalo*

**Kiitos**

*Tack*

**Toda**

**Grazie**

*Obrigado*

**Thanks**

**Takk**

**Gracias**

**Merci**

NATIONAL  
COUNCIL  
*for* Mental  
Wellbeing



# Culturally & Linguistically Appropriate Services (CLAS) Series

[CoE-IHS Webinar: Culturally and Linguistically Appropriate Services Part 3 - Implementing the CLAS Standards](#)

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

[Office Hour: Culturally and Linguistically Appropriate Services](#)

Thursday, November 17th, 1-2pm ET



NATIONAL  
COUNCIL  
for Mental  
Wellbeing



# Upcoming CoE Events

CoE-IHS Webinar: State Integration Models of Recovery Support Services

[Register for the Webinar](#) on Thursday, October 27th, 11:30am-1pm ET

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

[Register for the Webinar](#) on Tuesday, November 15th, 2-3pm ET

Interested in an individual consultation with the CoE experts on integrated care?

[Contact us through this form here!](#)

Looking for free trainings and credits?

[Check out integrated health trainings from Relias here](#)

Subscribe for Center of Excellence Updates

[Subscribe here](#)





# Thank You

## Questions?

Email [integration@thenationalcouncil.org](mailto:integration@thenationalcouncil.org)

SAMHSA's Mission is to reduce the impact of substance abuse and mental illness on America's communities.

[www.samhsa.gov](http://www.samhsa.gov)

1-877-SAMHSA-7 (1-877-726-4727) 1-800-487-4889 (TDD)

