

**ROAD TRIP!**

# Take a journey With the CLAS Roadmap:

## Effective and Efficient services for Everyone

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Virginia Department of  
Behavioral Health &  
Developmental Services

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

- Understand the ethical, legal, and practical case for providing culturally and linguistically appropriate services in health and health care
- Define the CLAS Standards by theme
- Describe what culturally and linguistically appropriate services look like in practice
- Have an emerging capacity to develop plan for cultural competence in your own organization



## Fill Me Out...Please?

Name \*

Email \*

Phone

How much do you love forms? \*

- Not at all
- Kind of
- I'm indifferent
- I'm fond of them
- Love 'em!

**Submit**

\* Required



# Workshop Rationale

## Demographics

As Virginia's population becomes more diverse and our understanding of the multiple layers of culture expands, we recognize there is a greater need to provide emergency services clinicians and crisis intervention teams with an opportunity to explore their own cultural perspectives and that of those individuals they encounter in a crisis.

## Disparities

“Minorities experience "greater disability and greater burdens" due to mental illness than whites--"not because the illnesses are more severe...but because of the barriers they face in terms of access to care." Failure to address these disparities is "playing out in human and economic terms on our streets, homeless shelters, foster-care systems and in our jails.”

*Former U.S. Surgeon General David M. Satcher,  
MD, PhD*

*“When it comes to mental health, culture counts”*

# Levels of cultural competence

## INDIVIDUAL LEVEL

*Right skills, knowledge,  
and attitude to work for a diverse population*

## ORGANIZATIONAL LEVEL

*Policies and procedures in place and an  
infrastructure that supports diverse  
communities*

## SYSTEMS LEVEL

*Laws and regulations in place and an  
infrastructure that supports diverse  
communities*



“A BLUEPRINT FOR ADVANCING AND SUSTAINING CLAS POLICY AND PRACTICE”

There are  
**15**  
standards

Watch this!



*The Blueprint outlines*

*with 3 key intentions:*

- 1** advance health equity
- 2** improve quality
- 3** help eliminate health care disparities

**6** key reasons why health and health care organizations should adopt and implement the National CLAS Standards

- Quality of care
- Changing demographics
- Marketplace
- Health disparities
- Legal mandates
- Risk of liability

# The National CLAS Standards

# National CLAS standards in health and health care

**Principal  
Standard**

**Governance,  
Leadership, and  
Workforce**

**Communication  
and Language  
Assistance**

**Engagement,  
Continuous  
Improvement,  
and  
Accountability**



# First! The Final Destination

## *Principle 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 communications needs.



# Pit Stop # 1

GREETINGS  
FROM ALONG



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# Governance, Leadership, and Workforce

Advance and sustain governance and leadership that promotes CLAS and health equity

Recruit, promote, and support a diverse governance, leadership, and workforce

Educate and train governance, leadership, and workforce in CLAS

# “GO WHERE THE LOCALS GO”

## Governance

- Policies
- Planning
- Accountability
- Data Driven
- Community Engagement

# TAKE THE DIRT ROAD

- Consistent
- Self-Awareness
- Courageous
- Strategic
- Transparent
- Champion
- Connected
- Realistic



**Leadership**

A map of the Eastern United States with a red line tracing a path through Virginia and the Carolinas. The path starts in the northeast, goes south through Pennsylvania, Delaware, Maryland, and Virginia, then continues through North Carolina and South Carolina. Major cities and states are labeled. The text 'your turn!' is overlaid in red on the map.

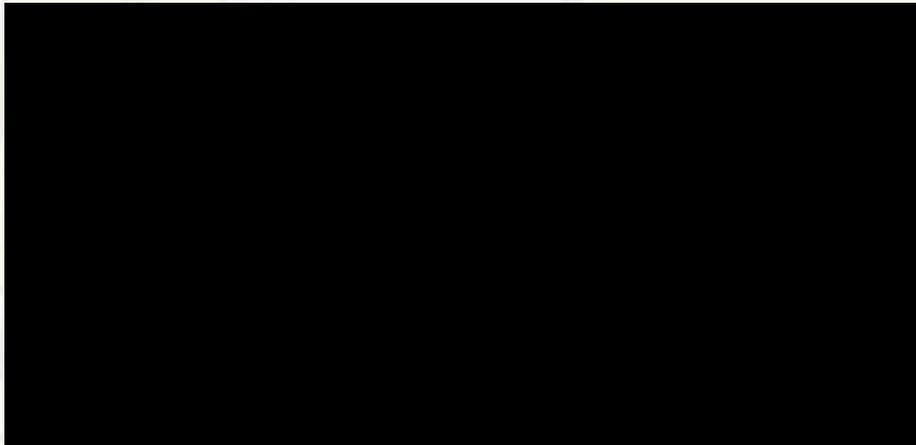
**your turn!**

**GREETINGS  
FROM ALONG**



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# Change the route you take to get there



Watch this!



## Workforce

- Recruitment, Selection, Retention
- Performance Management
- Training
- Organizational Development
- Employee Engagement



# What the experts are saying

Identify and develop champions throughout the organization.

Ensure that the necessary fiscal and human resources, tools, skills, and knowledge to support and improve culturally competent policies and practices are available.

*National Quality Forum*

Provide space for internal multidisciplinary dialogues about language and culture issues.

Create financial incentives to promote, develop, and maintain accessibility to qualified health care interpreters.

*The Joint Commission  
(Wilson-Stronks & Galvez)*





# Pit Stop # 2

GREETINGS  
FROM ALONG



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# Communication & Language Assistance



*[Speaking Spanish]*  
Come quick. Help! The floor, it broke.  
My granddaughter, my little baby is  
hurt, bleeding!



# What makes you linguistically competent?

## ASSESS YOURSELF!

Do you know and follow your language policies?

Do you understand how to effectively work with interpreters?

Do you ensure material is available in other formats; Enlarged print, audiotape, Braille?

Do you understand how and when language selection happens for bilingual individuals?

Do you have policies in place for how and when you use interpreters and bilingual staff?

Do you offer materials in alternative formats?

Do you use qualified translations services, esp. for legal documents?

Do you evaluate the material you hand out for easy understanding?

# Think it is just a nice thing to offer?

TeamSTEPPS™

LEP

## The Story of Willie Ramirez

### Results of not having an appropriate interpreter:

- Misunderstanding of "intoxicado"
- Inaccurate medical history
- Cultural deference to authority
- Quadriplegic teen
- \$71 million lawsuit

TeamSTEPPS 2006

"I would tell the doctor 'OK,' but I didn't understand anything [about taking my medications]."

## Could This Happen To You?

- LEP parents of infant patient - Adult sibling of one parent used to interpret informed consent and other communications.
- Tragic outcome to surgery
- Medical Malpractice + Title VI Lawsuit - 2010
- Out of Court Settlement – Multi-Million Dollar  
NO INFORMED CONSENT w/o Qualified Interpreter

Youdelman, Mara and Jane Perkins. 2002.  
*Providing Language Interpretation Services in Health Care Settings: Examples from the Field*

[https://cccdpcr.thinkculturalhealth.hhs.gov/AudioPlayer/AudioPlayer.asp?AudioFileName=17\\_3-4-2.mp3](https://cccdpcr.thinkculturalhealth.hhs.gov/AudioPlayer/AudioPlayer.asp?AudioFileName=17_3-4-2.mp3)



# Literacy A Language Issue that Affects US All

## Why Learn About Health Literacy?

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Excerpted from  
*Health Literacy*  
*Help Your Patients Understand*

Used with permission from  
American Medical Association Foundation

Watch this!



# Think

**GNINAELC — Ot erussa  
hgih ecnamrofrep,  
yllacidoirep naelc eht  
epat sdaeh dna natspac  
revenehw uoy eciton na  
noitalumucca fo tsud  
dna nword-der edixo  
selcitrapp.**

# Think

Cleaning — To assure high performance, periodically clean the tape heads and capstan whenever you notice an accumulation of dust and red-brown oxide particles.

# Individuals/ Right to Know

...n futura que hablo español.  
...blece que las agencias deben brindar la inform  
...recer la asistencia correspondiente en su idioma en  
...o recibe ayuda en su idioma, comuníquese con la Of  
... Humanos del DC al teléfono 202-727-4559 y presio



我说的是汉语普通话。  
程中，我有需要并且有权利接受帮助。请为我配  
一位译员并在记录中说明在日后的交流  
中我将使用汉语普通话。

...关机构必须免费向您提供语言方面的信息与帮  
...。如果您未得到相关帮助，请联系哥伦比亚  
...，电话：202 - 727 - 4559，接通后按 0。



አርዳታ ያስፈልገኛል፡ በምናገራው ቋንቋ አርዳታ የማግኘት  
አስተርጓሚ ያስገኝላለሁ። ወይፈለጉም ለማድረጋቸው ግንኙነቱን  
እንደምናገር መዘገብዎ ላይ ያስፍሩ።  
የመንግስት መስሪያ ቤቶች በቋንቋዎ መረጃና አርዳታ በገን አንዲያቀርቡልዎ  
“ዲስትሪክቱ” ህግ ያዘል። በቋንቋዎ አርዳታ ካላገኙ፣ እባክዎ ለ “ዲ  
ጽሕፈት ቤት በስልክ ቁጥር 202-727-4559 ይግኙ።

Tôi nói tiếng Việt.  
Tôi cần sự trợ giúp và tôi có quyền được nhận sự trợ giúp trong ngôn  
tôi nói. Xin hãy cung cấp cho tôi một thông dịch viên, và ghi và  
qua quý vị rằng tôi sẽ nói tiếng Việt trong mọi lần giao tiếp tron  
tương lai.

... của Quận quy định rằng mọi cơ quan phải cung cấp miễn phí  
... những thông tin và trợ giúp bằng ngôn ngữ của quý vị. Nếu  
... nhận được sự trợ giúp bằng ngôn ngữ của quý vị, xin  
... 727-4559 và nhấn số 0 để nối với Văn Phòng Nhân Quyền.



# Untrained Interpreters

- 52% Omission
- 16% False Fluency
- 13% Substitution
- 10% Editorialization
- 8% Addition



# Children as interpreters

Watch this!



# create your Language TOOLBOX!

- Train **ALL** staff to use language assistance services, and understand policies, and procedures (HHS OMH, 2005).
- Develop processes for identifying the language(s) and for adding this information health records (QSource, 2005).
- Establish contracts with interpreter services (in-person, telephonic & video remote) (HHS OMH, 2005).
- Provide on-site resources to support communication for individuals who experience communication issues related to other factors. (The Joint Commission, 2010).

**ONE SIZE DOES NOT FIT EVERY LANGUAGE NEED!**



A map of the Eastern United States showing a red route line starting from the top right and moving south through Pennsylvania, Virginia, North Carolina, and Georgia. The route is marked with a '95' shield. Major cities and states are labeled. The text 'Pit Stop # 3' is overlaid in large red letters.

# Pit Stop # 3

GREETINGS  
FROM ALONG



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# Engagement, Continuous Improvement, and Accountability

To understand how to provide effective service delivery, you gotta travel in **YOUR OWN BACKYARD**



You gotta expand your definition of “community” and incorporate their voice .



You gotta look in the mirror from time to time.



You gotta know who lives among you.



You gotta know the health status of the folks in your community



You gotta understand where the issues lie

# YOUR OWN Backyard

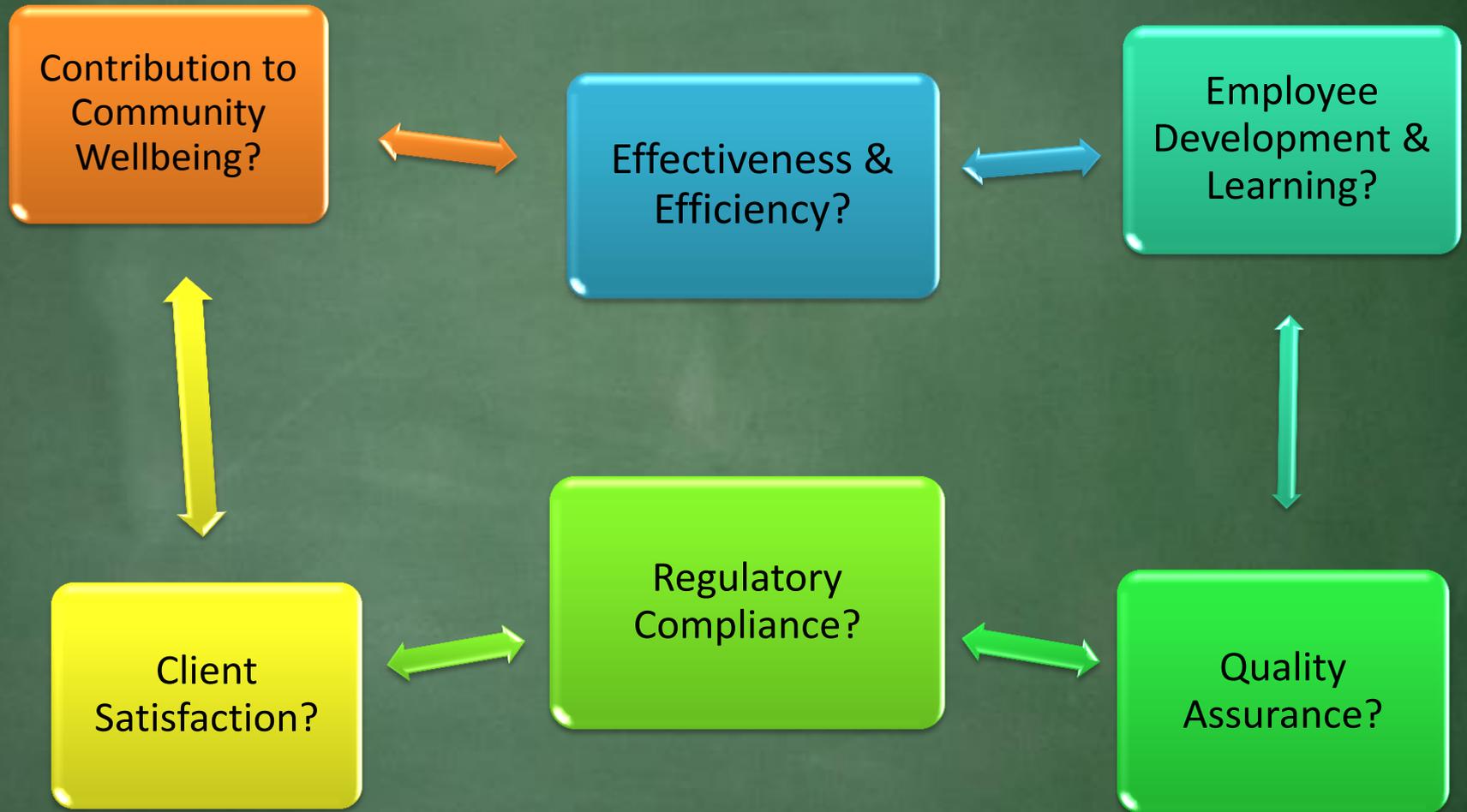
*What do you want from an Organizational Assessment*

*What kind of demographic information do you need?*

**Understand the Community Health Assets & Needs**



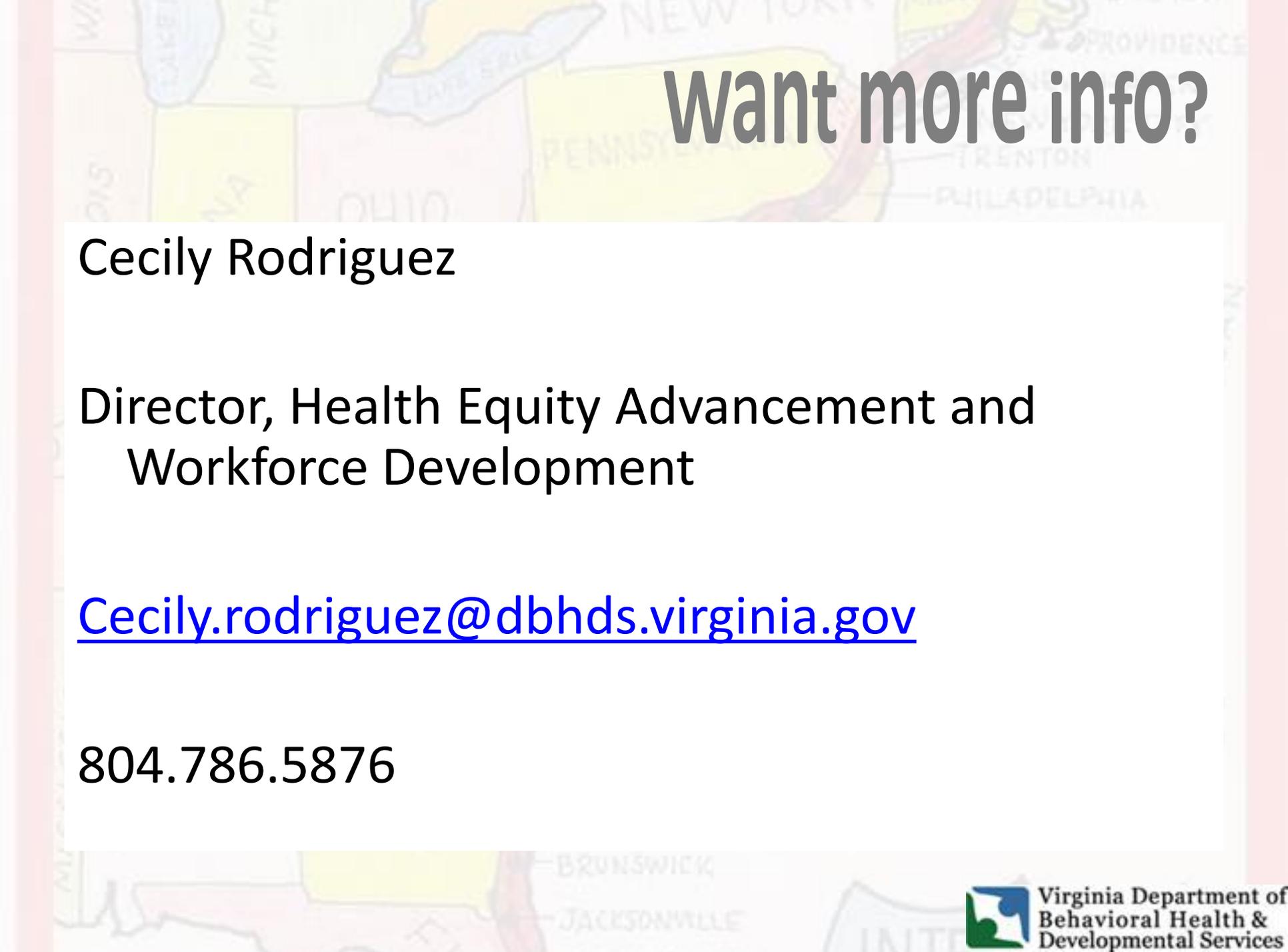
# Planning for your own backyard



# Design your own Map

- Think of the CLAS Issues that came to your mind during this discussion.
- Decide which activities you will now **STOP** as they are no longer useful or add little value for meeting your organization's CLAS goals
- Determine which activities you should **CONTINUE** as they are effective in developing those CLAS goals for your team or the organization as a whole.
- Add those activities that have been on the To Do list for much too long that you plan to **START**.





# Want more info?

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[http://www.commonwealthfund.org/usr\\_doc/810\\_Youdelman\\_providing\\_language\\_services.pdf](http://www.commonwealthfund.org/usr_doc/810_Youdelman_providing_language_services.pdf)