



Cultural Competency Training

**For Non-Emergency Medical
Transportation Providers**

Overview

- Elements of Culture
- Cultural Competency Definition
- 15 CLAS Standards
- Lack of Cultural Compliance outcomes
- History/Examples
- CLAS Discussion/What We Can Do
- Conclusion

Elements of Culture

Elements of culture include but are not limited to:

- Age
- Cognitive and/or physical ability or limitations
- Country of origin or degree of acculturation
- Racial and ethnic identity
- Linguistic characteristics, including language(s) spoken, written, or signed
- Generation, educational level, socioeconomic status
- Environment and surroundings, family and household composition, residence (i.e., urban, rural, or suburban)



Elements of Culture (continued)



- Gender Identity, sex, or sexual orientation
- Health practices, including use of traditional healer techniques such as Reiki and acupuncture
- Perceptions of family and community
- Military affiliation
- Occupational groups
- Political beliefs
- Religious and spiritual characteristics, including beliefs, practices, and support systems related to how an individual finds and defines meaning in his/her life

What Is Cultural Competency?

Cultural Competency is a system of values, behaviors and policies that enable us to act, think and work effectively in cross-cultural, diverse situations with respect and acceptance of others' differences.

To be culturally competent is to acknowledge the many factors that make people who they are and to appreciate and understand them.



- Because health care is a cultural construct based on beliefs about the nature of disease and the human body, cultural issues are central in the delivery of health services.

Cultural and Linguistic Appropriate Services (CLAS) & Health Equality

- *CLAS are services that are respectful of and responsive to individual cultural health beliefs and practices, preferred languages, health literacy levels, and communication needs and employed by all members of an organization (regardless of size) at every point of contact.*

Cultural and Linguistic Appropriate Services (CLAS) & Health Equality

- The Office of Minority Health at the U.S. Department of Health and Human Services has created National CLAS Standards.
- Each of the 15 Standards is equally important to an organization's ability to advance health equity, improve quality, and help eliminate health care disparities.



Transportation Providers and CLAS

- The National CLAS Standards apply not only to hospitals or other health care delivery organizations, but also to **“any public or private institution addressing individual, family, or community health, health care, or well-being”**.



This includes **providers of medical and non-medical transportation.**

The 15 CLAS Standards

Principal 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.

Governance, Leadership and Workforce

2) Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices and allocated resources.

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

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

CLAS Standards (continued)

Communication and Language Assistance

- 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.
- 6) Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
- 7) Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- 8) Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

CLAS Standards (continued)

Engagement, Continuous Improvement and Accountability

- 9)** Establish culturally and linguistically appropriate goals, policies and management accountability, and infuse them throughout the organizations' planning and operations.
- 10)** Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into assessment measurement and continuous quality improvement activities.
- 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.
- 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.

CLAS Standards (continued)

- 13)** Partner with the community to design, implement and evaluate policies, practices and services to ensure cultural and linguistic appropriateness.
- 14)** Create conflict- and grievance-resolution processes that are culturally and linguistically appropriate to identify, prevent and resolve conflicts or complaints.
- 15)** Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents and the general public..

-US Department of Health and Human Services Office of Minority Health

Why the CLAS Standards were Created:

1. **To respond to current and projected demographic changes in the U.S.**
2. **To eliminate long-standing disparities in the health status of people of diverse racial, ethnic and cultural backgrounds**
3. **To improve the quality of services and primary care results**
4. **To meet legislative, regulatory and accreditation mandates**
5. **To gain a competitive edge in the market place**
6. **To decrease the likelihood of liability/ malpractice claims**

Why the CLAS Standards were Created:

EXAMPLE

A first responder in Florida misinterpreted a single Spanish word, “intoxicado,” to mean “intoxicated” rather than its intended meaning of “feeling sick to the stomach”.

This led to a delay in diagnosis, which resulted in a potentially preventable case of quadriplegia, and ultimately, a \$71 million malpractice settlement.

The Affect on Health Care

Potential outcomes due to lack of Cultural Competency:

- Delayed treatment or diagnoses resulting in life and death situations
- Loss of time due to missed appointments
- Patient feels insulted and/or unwelcome based on judgment from provider
- Negative experiences create loss of referrals to provider
- Communication problems may cause misdiagnoses
- Provider may come across as disrespectful
- Patient may feel misunderstood and avoid treatment

History

- **An example of the impact on care due to lack of Cultural Competency:**

Ms. G. speaks very little English. She finds it very difficult to make appointments and get prescriptions renewed at her child's doctor's office. She chose her child's pediatric practice because one of the doctors speaks Spanish. There is another person in the office who speaks Spanish, but she is often interpreting for patients who are seeing other doctors in the practice. Thus, Ms. G. feels very hesitant about calling the doctor's office and often has to wait for a friend or for one of her older children to make the calls.

-National Center for Cultural Competence (NTCCC)

CLAS Discussion

What we can do:

- Take time to explore your own roots/family background
- Continuously seek to expand your knowledge of different cultural practices
- Be aware of the dynamics between people of different cultures
- Increase your interactions with other diverse groups
- Realize we are all effected by cultural competence in some way
- Assess your own cultural competence. There are many training resources available online
- Promote the use of Cultural Competency once you feel you have a firm understanding- help others to understand as well

CLAS Discussion

Transporting passengers from A to B is only the basic service provided by the transportation company. This, by itself, will not attract new customers, nor will it ensure the long-term commitment of existing customers.



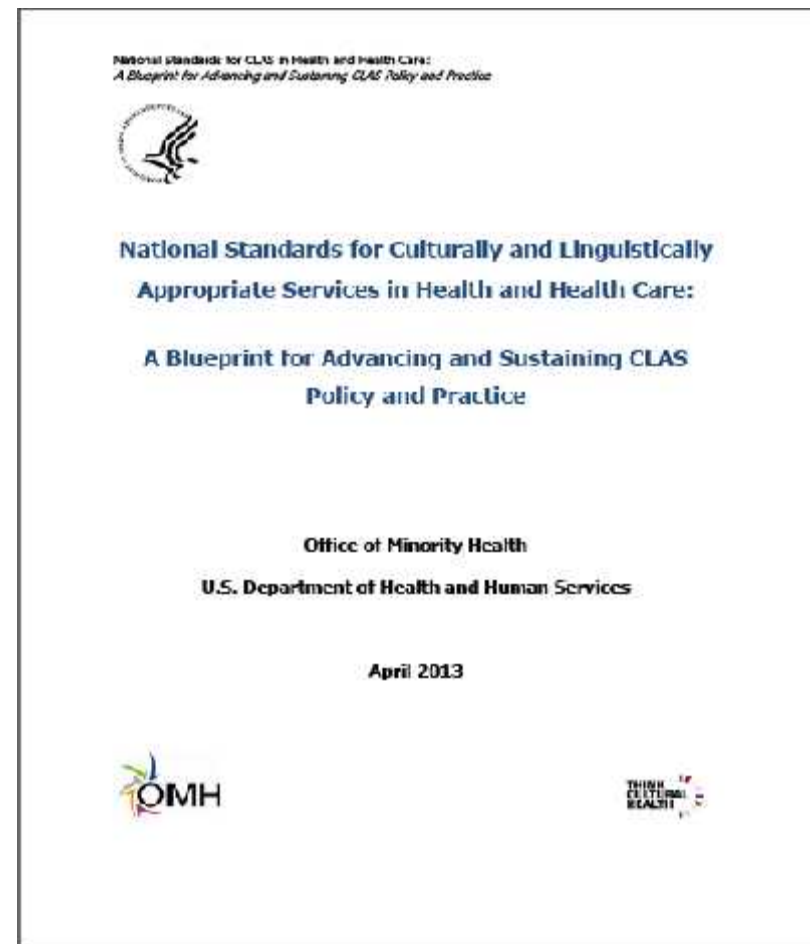
CLAS Discussion

Customers are satisfied when something additional is offered. A smile, for example, is the best and most economical form of customer service; it creates a pleasant atmosphere and inspires trust. It also enriches the employee's own work day.

Let your passengers know that you are happy to serve them, which will give them a feeling of security.



This presentation is based on the document “**A Blueprint for Advancing and Sustaining CLAS Policy and Practice**” created for the *National Standards for Culturally and Linguistically Appropriate Services (CLAS) in health and Health Care* from the *Office of Minority Health at the U.S. Department of Health and Human Services*.



Additional Resources

Centers for Medicare and Medicaid Services (CMS)

<https://www.cms.gov/>

National Center for Cultural Competence (NCCC)

<http://nccc.georgetown.edu/>

U.S. Department of Health and Human Services-
Office of Minority Health

<http://minorityhealth.hhs.gov/>