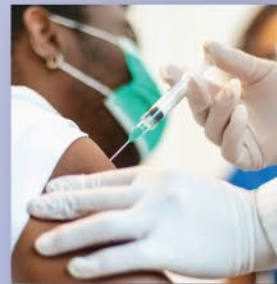


# Developing Partnerships for Culturally and Linguistically Appropriate Services (CLAS)



# Welcome

**LeTonya Smith, CRNP**

iQuality Improvement and Innovation Group (iQIIG), Division  
of Community and Population Health (DCPH)





# OBJECTIVES

- Describe how CLAS standards support health equity.
- Identify potential partners with whom you can share this information.
- Create your own CLAS standards education program based on tools and resources shared.
- Apply lessons learned to your own CLAS technical assistance program.

# Preparing for CLAS

Tammy Geltmaker, RN, BSN, MHA, CPHQ

Program Director

Qsource

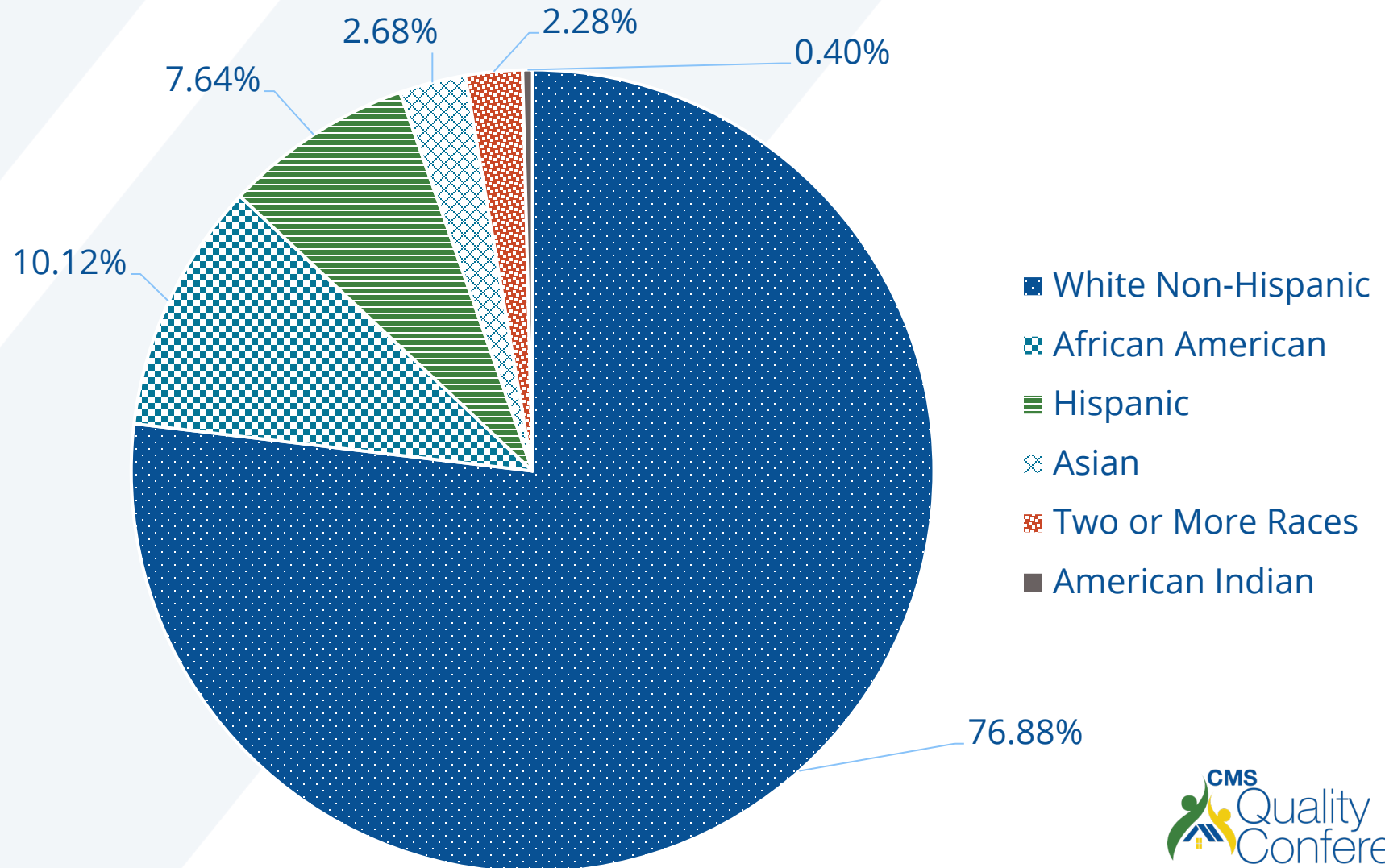


# Background

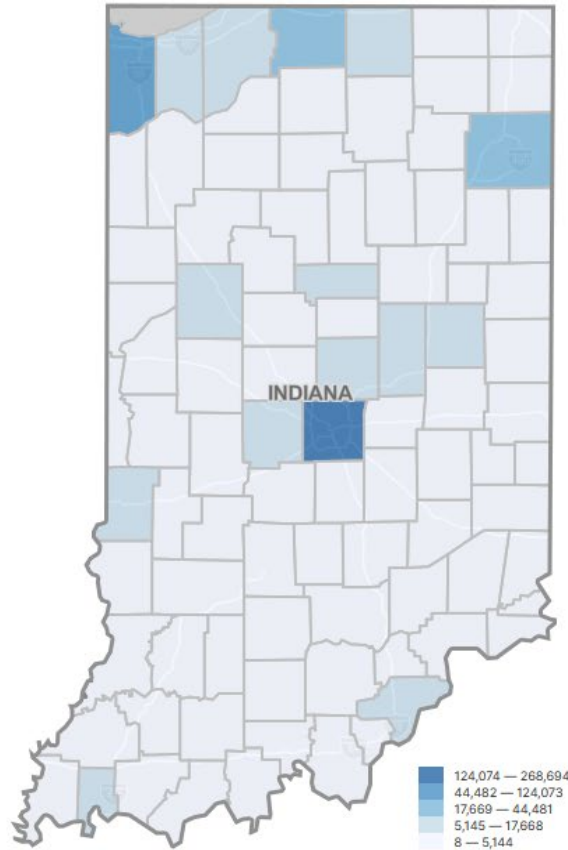
- Although nearly a quarter of Indiana's population is made up of diverse races, cultures, and ethnicities, they are primarily located in "pockets" in several areas of the state.
- In addition to the diversity represented by race, culture and ethnicity, Indiana is largely rural with many Amish and/or farming communities.
- To address the diverse populations, various cultures, and many languages, Qsource has initiated a campaign to introduce CLAS to the communities – including community-based organizations and healthcare providers.



# Indiana Racial/Ethnic Diversity (1 of 2)



# Indiana Racial/Ethnic Diversity (2 of 2)



**African American**



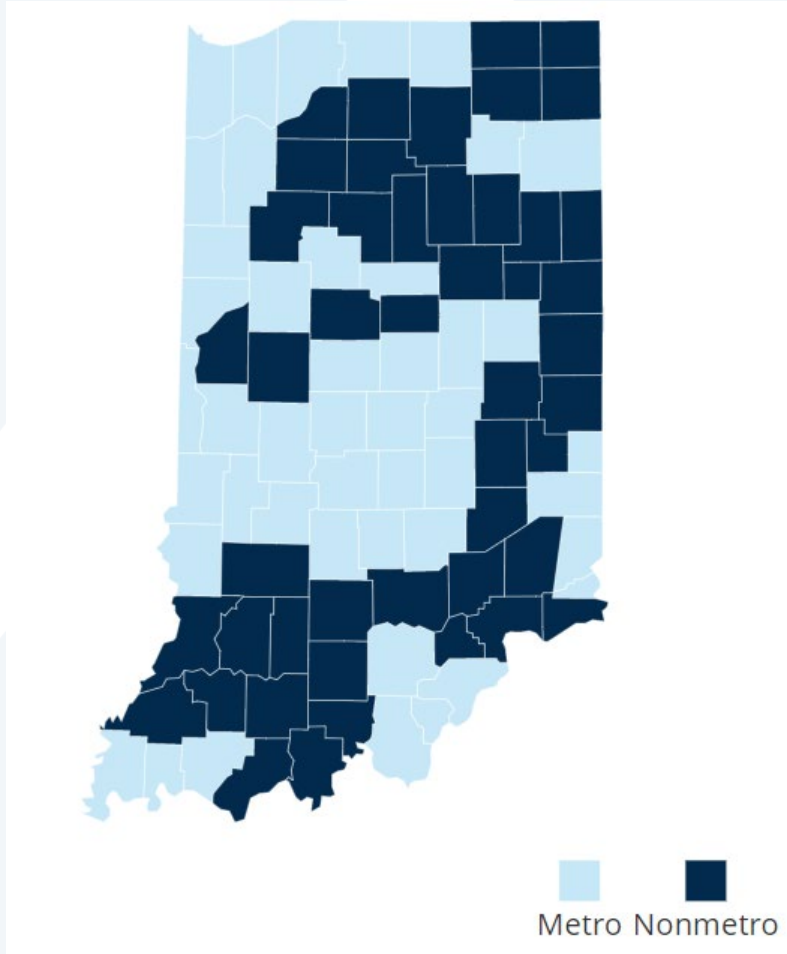
**Asian American**



**Hispanic**



# Indiana Urban and Rural Areas



**6,696,893**

Estimated population

**1,463,816 (21.9%)**

People living in nonmetro areas



Source: US Census Bureau 2020 Census.gov



# Initial Challenges

- Lack of familiarity with CLAS among QIO staff
- Limited interest initially from partners and stakeholders
- Access to translated resources from trusted sources



# Internal Education (1 of 2)

- Created a comprehensive written plan outlining strategies for engaging stakeholders, training internal staff and providers, conducting CLAS assessments, and developing action plans
- Created an internal training plan for team members
- Created a standardized email script and talking points for use with correspondence and discussions around CLAS
- Developed two slide decks with speaker notes to use when presenting on CLAS
  - Abbreviated version for simple introductions to CLAS
  - Expanded version for conducting CLAS education



# Internal Education (2 of 2)

- Established monthly meetings with members of the Qsource Health Equity team and external subject matter experts, X4 Health
- Compiled a library of evidence-based resources to assist organizations with developing and implementing their CLAS action plans
- Completed research on populations in Indiana to gain insight into factors contributing to disparities and shared results with the entire team





# The CLAS Technical Assistance (TA) Program and Marketing Strategies

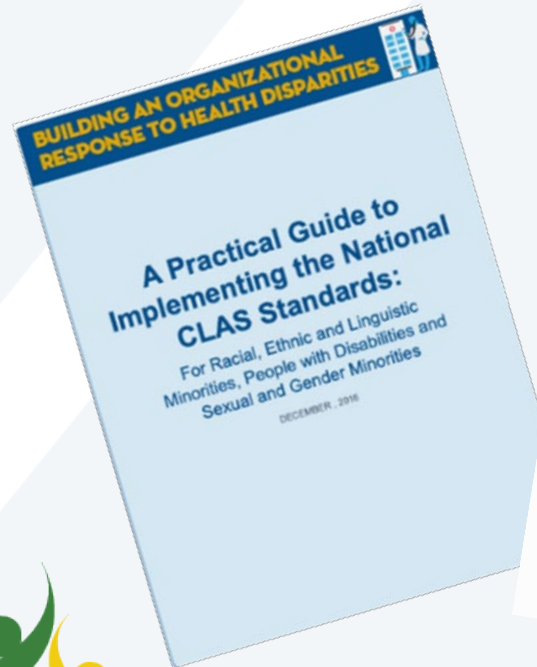
Tara Hatfield, MHA, BSN, CPHQ  
Education and Outreach Coordinator  
Qsource



# CLAS Technical Assistance Program (1 of 2)

Office of Minority Health – Think Cultural Health

- 15 Standards
- The Blueprint
- Resources for Healthcare Professionals



# CLAS Technical Assistance Program (2 of 2)

## Qsource Resources

- "The Case for CLAS"
- CLAS Recruitment flyer
- CLAS Presentations with scenario discussion

**Addressing Disparities**

Getting started with providing Culturally and Linguistically Appropriate Services (CLAS)

Language is central to communication, which is essential to patient care and safety.

Approximately 20 percent of people in the United States speak a language other than English, and a significant proportion of this population has limited English proficiency (LEP).

These patients face many disparities in care, including:

- longer hospital stays,
- greater risk of surgical infections, falls, pressure ulcers, and
- greater chance of readmissions.

Cultural competence can lead to improved patient communication, patient safety, lower healthcare disparities, and decreased costs.

**How Can We Get Started on Implementing CLAS?**  
Complete the CLAS Assessment (<https://bit.ly/3Rm1SS4>) to understand where your organization is with its implementation of the National CLAS Standards.

Use the CLAS Assessment to develop an action plan on how best to improve CLAS implementation and contact Tammy Getreker [tgetreker@qsource.org](mailto:tgetreker@qsource.org) for resources and assistance on moving forward. Resources on CLAS can also be found at [www.ResourceHub.ExchangeAq1/](http://www.ResourceHub.ExchangeAq1/).

**What is CLAS?**  
Culturally and linguistically appropriate services (CLAS) ensure that the services you and your organization provide are respectful and responsive to each patient's culture and communication needs.

**What are CLAS Standards?**  
The HHS Office of Minority Health published National CLAS Standards in 2000 and updated them in 2013 to advance health equity and improve quality of care.

The CLAS Standards provide health care organizations with 15 actionable steps for providing appropriate services.

**Why is CLAS important?**  
CLAS helps advance health equity to ensure that every person can "attain his or her full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances."

While many factors impact health equity, providing culturally and linguistically appropriate services can be effective at improving healthcare quality and outcomes.

**What is CLAS's Impact on Patient Care?**  
Culture plays an important role in health beliefs, behaviors, and practices as well as communication styles and treatment adherence.

[www.Qsource.org](http://www.Qsource.org)

Quality Improvement Organizations  
www.Qsource.org

Qsource.

**The Case for Providing Culturally and Linguistically Appropriate Services (CLAS)**

**The Importance of CLAS**  
Culturally and linguistically appropriate services (CLAS) ensure that the services you and your organization provide are respectful and responsive to each patient's culture and communication needs.

**CLAS Standards are Part of Your Organization's Health Equity Journey**  
The CLAS standards are a part of your organization's journey to achieving health equity and are embedded in CMS priorities to advance health equity – without addressing language barriers, low health literacy, or cultural considerations, we cannot achieve health equity.

**CMS Framework for Health Equity<sup>1</sup>**  
CMS' framework for health equity includes four priorities, one of which is to advance language access, health literacy, and the provision of culturally tailored services which the CLAS standards incorporate.

- Priority 1: Expand Collection, Reporting, and Analysis of Standardized Data**
- Priority 2: Access Causes of Disparities Within CMS Programs, and Address Inequities in Policies and Operations to Close Gaps**
- Priority 3: Build Capacity of Health Care Organizations and the Workforce to Reduce Health and Health Care Disparities**
- Priority 4: Advance Language Access, Health Literacy, and the Provision of Culturally Tailored Services**
- Priority 5: Increase All Forms of Accessibility to Health Care Services and Coverage**

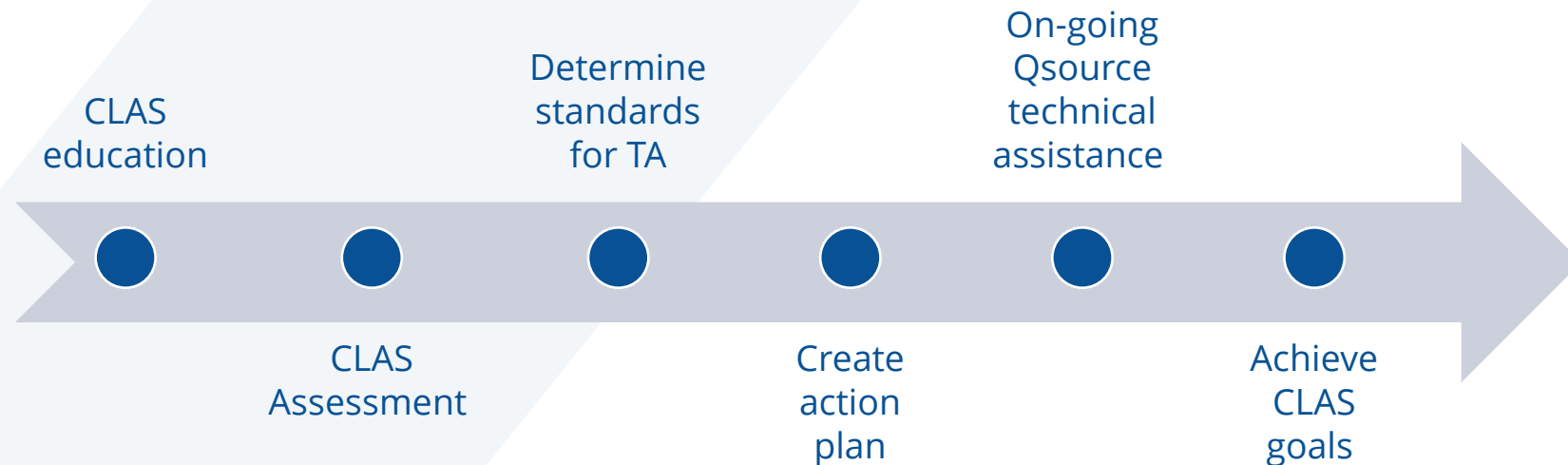
[www.Qsource.org](http://www.Qsource.org)

Quality Improvement Organizations  
www.Qsource.org

Qsource.

# CLAS Technical Assistance Program

- Virtual or on-site CLAS education and assessment
- CLAS assessment survey available online
- Flexible timeline and goal setting
- Customized Action Plan



# CLAS Standards (1 of 2)

The National CLAS Standards give your health organization action steps for providing CLAS. They offer guidance in the areas of:

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.





# CLAS Standards (2 of 2)

2-4

## Standards 2-4

Governance, Leadership, and Workforce

5-8

## Standards 5-8

Communication and Language Assistance

9-15

## Standards 9-15

Engagement, Continuous Improvement, and Accountability



# Marketing Strategies (1 of 2)

## Internal Strategies

- Emails with CLAS Program information, contact information, and online survey
- Included CLAS information in our monthly newsletter and resource library
- Presented CLAS at each of our Community Coalitions across the state
- CLAS information shared on our social media

## Ongoing Strategies

- Emails with CLAS program information, contact information, and online survey
- CLAS information included in our newsletter, resource library and social media
- CLAS presentations at each of our community coalitions
- Customized CLAS presentations to address person-centered care
- Health equity and CLAS have been added as a standard agenda item at Partnership for Community Health (PCH) meetings



# Marketing Strategies (2 of 2)

## External Strategies

- CLAS presentations at partner and stakeholder events
- Collaborated on interactive learning events (live and on-demand)
- CLAS program information and contact information shared via partner and stakeholder newsletters, websites, and social media
- Partnered with subject matter experts on podcasts



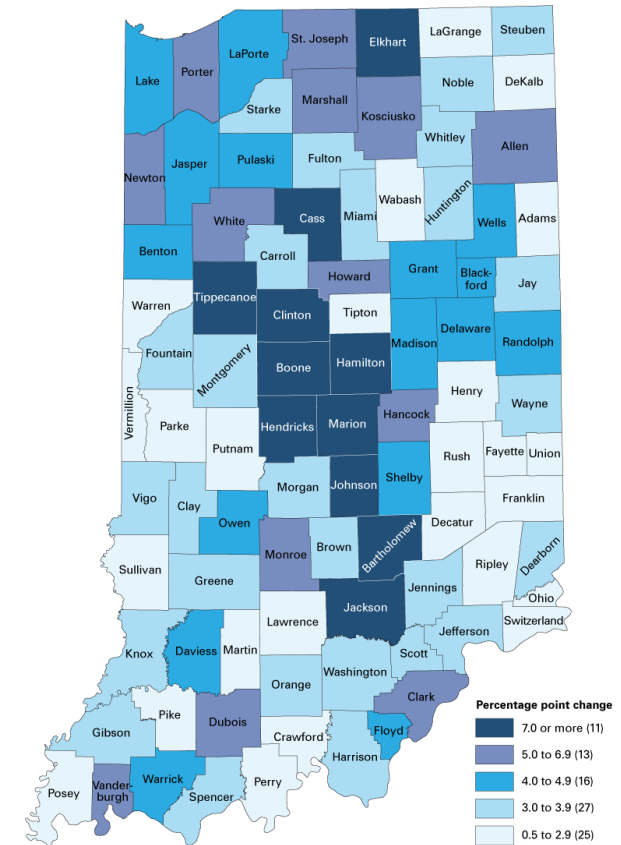
# Partners

- Area Agencies on Aging
- Health systems
- Local health coalitions
- Medical associations
- Rural Health Association
- State Office of Minority Health
- State Office of Rural Health



# Resources in Other Languages

- Providing links to CDC, CMS, and other organizations that provide materials in a variety of languages
- Partnering with Su Casa and other organizations to have materials translated
- Offering our most popular resources in Spanish
- Exploring other translation technologies



Percentage point change in minority share of county population, 2010 to 2020



Map source: Indiana Business Review (2021). *Census results show Indiana's growing diversity.* <https://www.ibrc.indiana.edu/ibr/2021/fall/article1.html>

# Data and Results

Don Gettinger, BS  
Quality Improvement Advisor  
Qsource



# Outreach and Meaningful Discussions

36

Meetings where we promoted awareness or provided education on CLAS

6

Additional presentations pending by May 30th

525

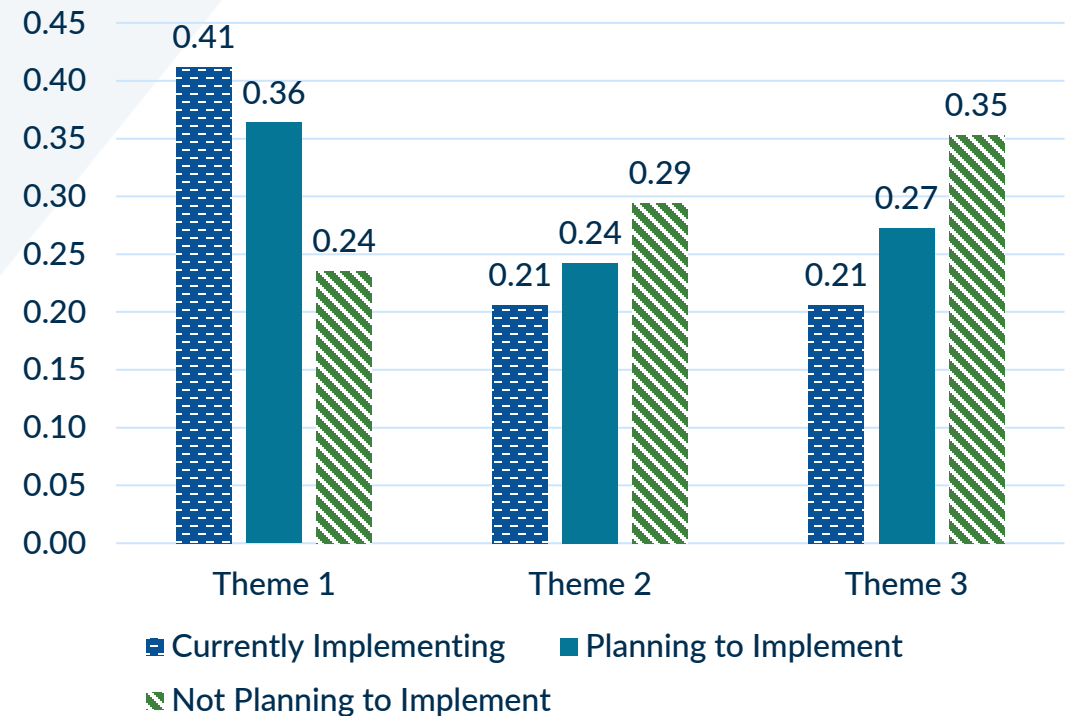
People educated through discussions, coalition meetings, and stakeholder conferences



# Assessment Results

- Most current and planned implementation in Theme 1: Governance, Leadership, and Workforce
- Theme 3: Engagement, Continuous Improvement, and Accountability follows with the number of participants currently or planning to implement one or more of the standards

CLAS Responses





# Resources Shared

## Internal

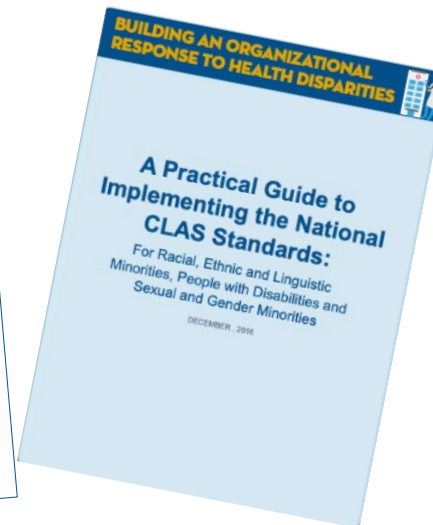
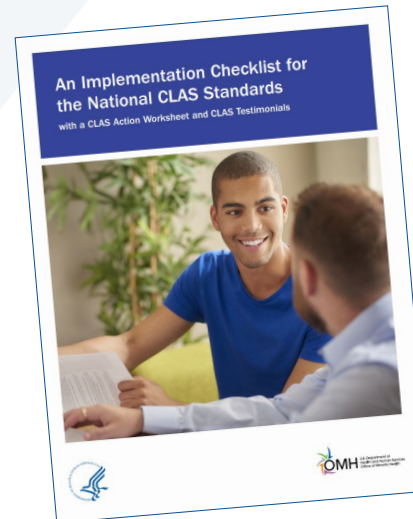
- CLAS Checklist
- Self-Assessment Tool
- Action Plan Template

The image shows the cover of a 'Checklist of National CLAS Standards Implementation Practices'. The title is 'Theme 1: Governance, Leadership, and Workforce'. Below the title is a table with four columns: 'Current', 'Planning in progress', and 'Not planning to do this year'. The table contains several rows of implementation practices, each with a checkbox in each column.

Checklist of National CLAS Standards Implementation Practices	Current	Planning in progress	Not planning to do this year
1.1a Identify and designate a CLAS champion or champion, who is responsible for the organization's leadership, and who leads, promotes, and monitors and manages organizational efforts about CLAS and the National CLAS Standards throughout the organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2a Create and implement a formal CLAS implementation plan that includes a mission statement and objectives for the organization, the organization's commitment and assessment, and who is responsible for monitoring implementation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3a Target recruitment efforts to the populations served to increase the recruitment of culturally and linguistically diverse individuals. Targeted efforts may include: providing job descriptions in the community's primary language; providing information about the organization's services and working with leaders of local community organizations to create mentorship and training programs targeting populations served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3b Create internal organizational mentorship programs, specifically targeting culturally and linguistically diverse individuals, that provide information about and assist in additional training opportunities that allow individuals to gain experience with individuals in similar positions to receive career guidance and advice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4a Deliver or create timely available continuous CLAS-related training and technical assistance to leadership and all staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4b Create and disseminate new resources about CLAS within the organization using multiple approaches (e.g., articles, brochures, internal meetings, employee handout, employee focus group).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4c Implement assessment of CLAS competence (e.g., targeted communication, observational communication, self and ratings knowledge on all ongoing tasks like staff performance, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## External

- Practical Guide to CLAS Implementation
- CLAS Blueprint
- Think Cultural Health and Office of Minority Health Websites



# Noteworthy Feedback/Observations

- An organization that works with the Burmese population hired staff that speak Burmese, but still faces issues of mistrust in cases where the patient is from a different region or dialect.
- A hospital located near an Amish community noted veterinarians are a trusted resource for healthcare information and would be a good partner to share important messages.



# Lessons Learned (1 of 2)

- To successfully support others, team members need to be given time to obtain internal education to feel comfortable in the knowledge, expertise, and resources they can bring to the project.
- Stakeholders need to see that implementing the CLAS standards is not taking on “another project” but can be an important part of helping them streamline or focus their health equity efforts.



# Lessons Learned (2 of 2)

- The importance of identifying and developing relationships with partners who advocate for the various populations at risk and are viewed as trusted resources.
- Revise or customize talking points to better emphasize items that are important to that particular audience.
- Any organization addressing individual or community health, health care, or well-being can benefit from the adoption and implementation of the National CLAS Standards.



# Thank You

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Don Gettinger, Quality Improvement Advisor

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# Closing Remarks

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Community and Population Health (DCPH)

