



Culturally and Linguistically Appropriate Services (CLAS)

Provider Cultural Competency

CLAS Standards Overview

The CLAS Standards are national standards and guidelines established in 2000 (and enhanced in 2013) by the U.S. Department of Health and Human Services, Office of Minority Health, to advance health equity, improve quality, and help eliminate health disparities by providing a blueprint for individuals and health care organizations to implement culturally and linguistically appropriate care.

- 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.

- Governance, leadership and workforce**

- Communication and language assistance**

- Engagement, continuous improvement and accountability**

What is CLAS?



Cultural competency training
Language services
Culturally competent care

Member engagement
Community education
Member services



Why CLAS?

Legal Requirements

Local Need

Business Consideration

Membership Diversity

Legal Requirements –why providers should be culturally competent

Federal regulations

- Civil Rights Act of 1964
Title VI, 42 U.S.C. § 2000d
 - No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

Training and education

- CLAS is a state-required annual cultural competency training



Local Need – Total Health Care provider language demographics



5,400
Providers



62%
English only

38%

Second Language

Top 5 Non-English Languages:

Arabic – 433

Hindi – 318

Spanish – 233

French – 141

Urdu - 126

Business Consideration

Providers who administer health care services responsive to the health beliefs and practices, and cultural and linguistic needs of diverse patient populations:



Decrease
liability



Meet
regulatory
standards



Gain
competitive
edge

The Cost of Health Disparities

- Lost wages
- Premature death
- Lost productivity
- Family leave
- Absenteeism



The Cost of Health Disparities

Indirect costs
associated with
premature death

\$1
trillion

Annual
direct
losses

\$230
billion

Annual excess
medical costs due
to health disparities

30%

We can do better.



Membership Diversity

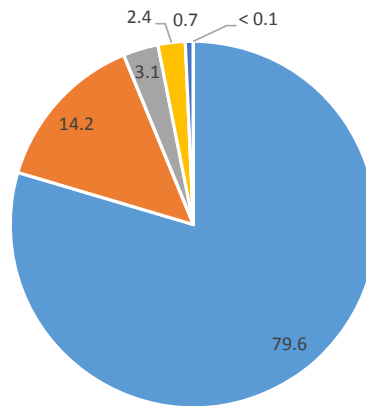
Michigan's Historic Cultural Landscape

- Canadian
- English
- French
- Native American
 - Eight indigenous tribes that were present before the arrival of Europeans, include:
 - Ojibwa
 - Menominee
 - Miami
 - Ottawa
 - Potawatomi
 - Wyandot
 - Fox and Sauk
 - Kickapoo



Race and Ethnicity — Michigan Census State Information

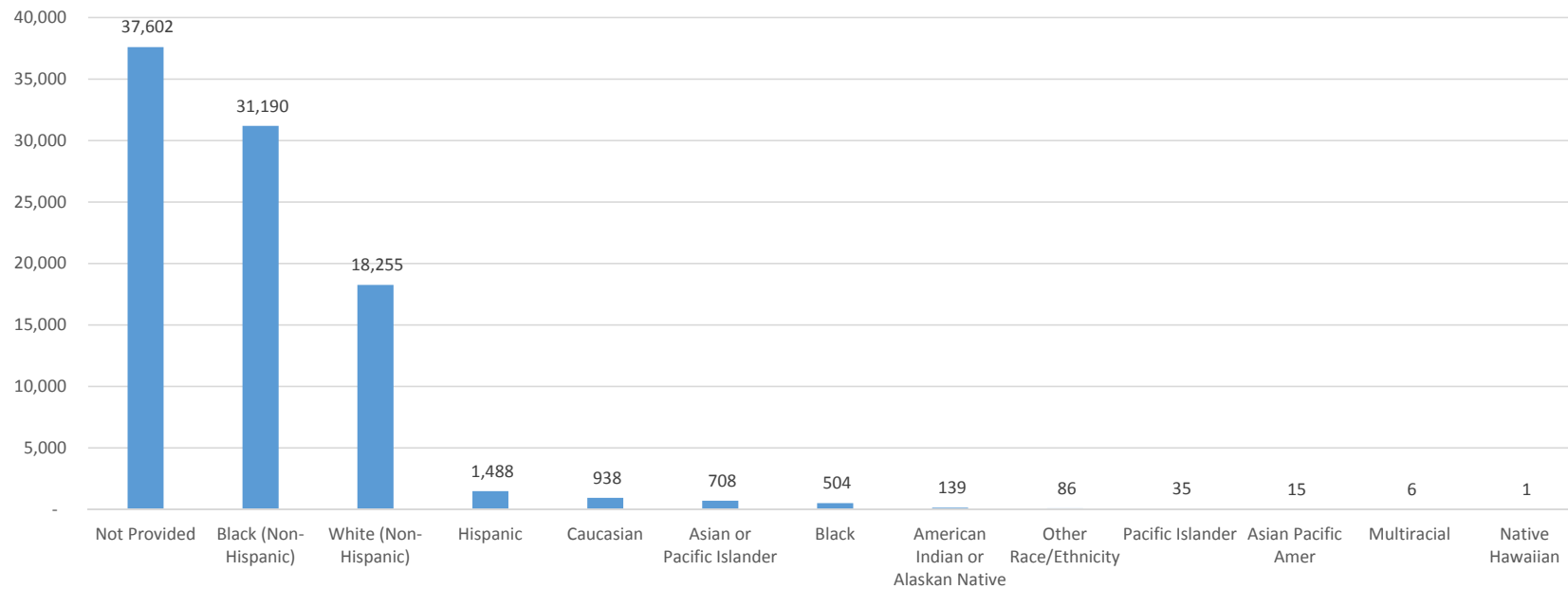
2016 Michigan Census Race and Ethnicity by Percentage



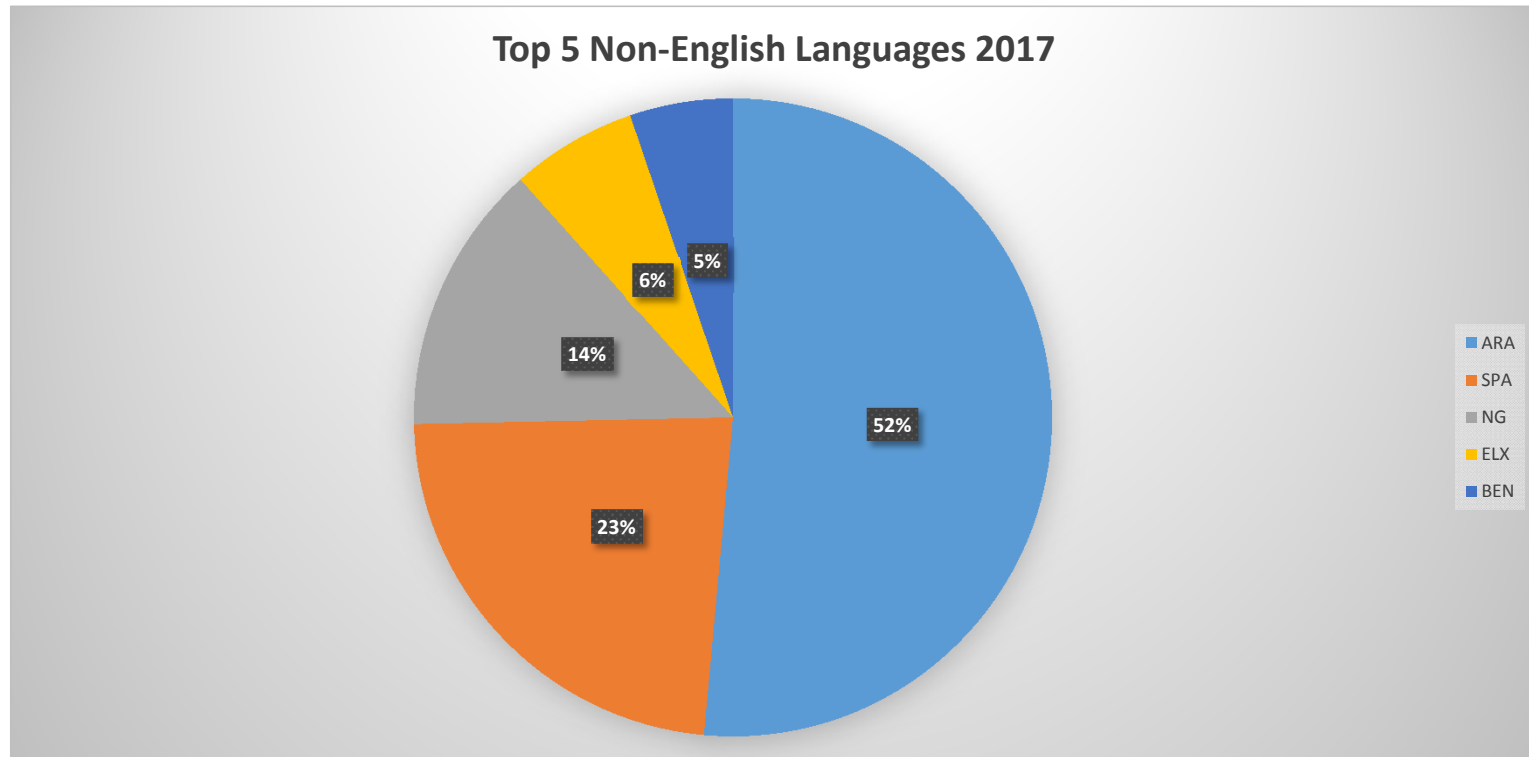
- White
- Black or African American
- Asian
- Two or More Races
- American Indian and Alaska Native
- Native Hawaiian and Other Pacific Islander

Race and Ethnicity — Membership Portrait

Membership Count by Race and Ethnicity 2017



Member Languages — Top Five Non-English Languages



Tribal Awareness — Federally Recognized Tribes

There are 12 federally recognized tribes of Michigan:

- Bay Mills Chippewa Indian Community
- Grand Traverse Bay Band of Ottawa and Chippewa Indians
- Hannahville Indian Community
- Keweenaw Bay Indian Community
- Lac Vieux Desert Band of Lake Superior Chippewa Indians
- Little River Band of Ottawa Indians
- Little Travers Bay Bands of Odawa Indians
- Match-e-be-nash-she-wish Band of Potawatomi Indians of Michigan (Gun Lake)
- Nottawaseppi Huron Band of the Potawatomi Indians
- Pokagon Band of Potawatomi Indians
- Saginaw Chippewa Indian Tribe
- Sault Ste. Marie Tribe of Chippewa Indians

Tribal Awareness — Michigan Map



Source: www.michiganbusiness.org/cm/files/tribal_business_development/tribes_map.pdf



Your CLAS

Provider tips for assisting non-English and limited-English speaking patients

Provider CLAS Tools —Interpretation tips

- Speak directly to the patient, not the interpreter
- Don't rush. Pause every sentence or two for interpretation
- Use plain language. Avoid slang and sayings. Jokes don't always translate well
- Check understanding occasionally by asking the patient to repeat back what you said. This is better than asking "do you understand?"



Additional Training Resources

The Office of Minority Health culturally competent care programs

Providers can take the first step in serving diverse populations by completing accredited **continuing education programs** offered by The Office of Minority Health, part of the U.S. Department of Health and Human Services:

- **A Physician's Guide to Culturally Competent Care** (accredited for physicians, nurses, nurse practitioners and pharmacists)
- **Culturally Competent Nursing Care: A Cornerstone of Caring:** (accredited for nurses and social workers)

Both programs are accredited for continuing education credits and available online at no cost to participants.

Visit www.minorityhealth.hhs.gov or www.thinkculturalhealth.org for more information on these programs and for more resources to bring cultural competency to your health care practice.

CLAS Training Attestation

Please complete and print the attestation and email it to:

Training Attestation: Total Health Care

fax attestation to 313-748-1390 or email to Providerupdate@thcmi.com

I, _____ certify on behalf of myself or my agency that I have received materials from and undergone cultural competency training by Total Health Care in accordance with state requirements, including:

- The Civil Rights Act of 1964
- Michigan federally recognized Indian tribes
- Member race, ethnicity and language for my region
- State training requirements
- Availability of on-site training
- Cultural awareness in patient relationships
- Assessment of my experience with interpretation service

I further certify that all newly hired staff will receive and review the cultural competency materials and resources that I received today, within 30 days of hire, and documentation confirming the same will be maintained in each employee's personnel file and be available upon request.

Signature

Date

Please provide one attestation per provider location

Please print in the spaces below	
Provider or company name:	
Contact name and NPI:	
Contact title and department:	
Contact email:	
Contact phone:	

By submitting, you certify that your responses above are accurate, truthful and complete to the best of your knowledge.