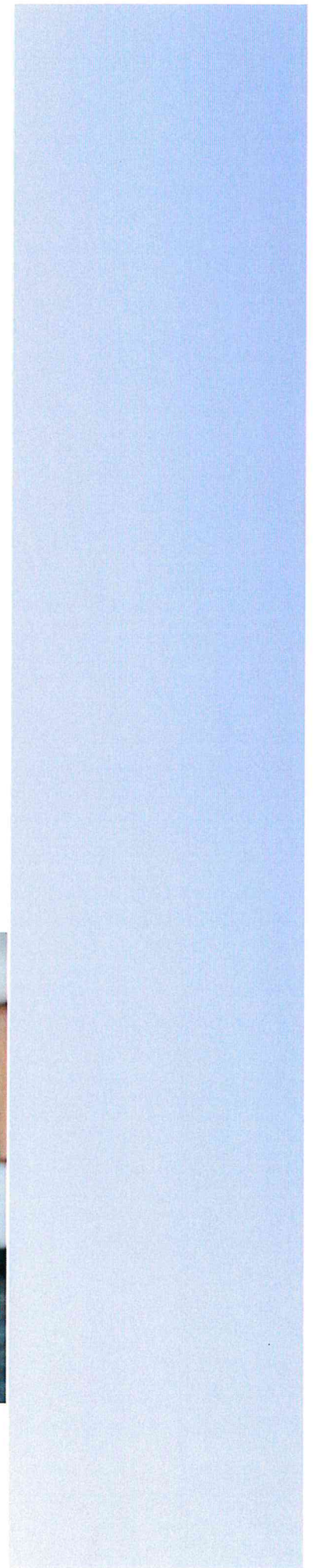




# CULTURAL & LINGUISTIC COMPETENCE PLAN

FY '24

Revised 10/26/23



# Table of Contents

Purpose.....2

Mission, Vision, Values.....2

Cultural Competence.....2

CLAS Standards.....3

Self-Assessment.....5

Cultural Competence Goals.....5

CLAS Activities and Measures.....5

CLAS Activities Impact.....9

CLAS Resources.....9

Cultural & Linguistic Competence Plan Approval.....10

## **PURPOSE**

MHMR Concho Valley's (MHMRCV) Cultural & Linguistic Competence (CLC) Plan includes a multipurpose strategy. The primary objective is to aid in the delivery of culturally and linguistically appropriate services (CLAS) as a way to improve the quality of services provided to all individuals, which will ultimately help to reduce health disparities and achieve health equity. Second, the MHMRCV CLC Plan exists to ensure that services focus on respect and responsiveness: respect the whole individual and respond to the individual's health needs and preferences. Together, these principles work to help close the gap in health outcomes<sup>1</sup>.

## **MISSION, VISION AND VALUES**

The CLC Plan is driven by, and supports, the mission, vision, and values of MHMRCV. These statements are provided next.

### **MISSION:**

"Working together to help people help themselves"

### **VISION:**

"Creating Better Health & Wellness in our Community"

### **VALUES:**

*R.I.S.E – "Respect, Integrity, Support and Excellence"*

## **CULTURAL COMPETENCE**

Cultural competence means to be respectful and responsive to the health beliefs and practices including cultural and linguistic needs of diverse population groups.<sup>2</sup> In health care, cultural competence defines the ability of organizations to provide care to clients

---

<sup>1</sup> Office of Minority Health, U.S. Department of Health & Human Services

<sup>2</sup> Culturally and Linguistically Appropriate Services, Think Cultural Health at:  
<https://www.thinkculturalhealth.hhs.gov/clas>



with diverse values, beliefs and behaviors, including tailoring delivery to meet clients social, cultural, and linguistic needs.<sup>3</sup> The development of cultural competence is an ongoing process that takes place over time.

## CLAS STANDARDS

MHMRCV's CLC Plan is designed to be consistent with the National CLAS Standards in Health and Health Care, 2013<sup>4</sup>. These standards guide the provision of services in a culturally competent and responsive and responsible way. The fifteen CLAS Standards strive to enhance health equity, improve quality of care for patients, and eliminate health care disparities. A list of the standards organized by category are listed next.

### 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.

---

<sup>3</sup> Betancourt, J.R., Green, A.R., & Carrillo, J.E. 2002. Cultural competence in health care: Emerging frameworks and practical approaches. New York: The Commonwealth Fund.

<sup>4</sup> Office of Minority Health, U.S. Department of Health and Human Services.

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.

Engagement, Continuous Improvement, and Accountability

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

## **SELF-ASSESSMENT**

In order to identify the extent to which current MHMRCV services and programs align with the National CLAS Standards, the Center conducted a self-assessment in October 2022. The Chief Operations Officer prepared and disseminated a questionnaire to all of the MHMRCV Quality Assurance Committee (QAC) members asking them to indicate the level of alignment they felt that 9 of the 15 CLAS Standards were with MHMRCV's current services/programs. An analysis of the results provided by the survey respondents on the QAC indicated that five specific CLAS standards needed attention by MHMRCV.

## **CULTURAL COMPETENCE GOALS**

The first step in prioritizing the Center's needs was to identify the dominant cultures in the Center's catchment area. The QAC concurred that the cultures most often served in the Concho Valley included: Hispanic, White/Caucasian, military and LGBTQIA+. The QAC then discussed the five CLAS Standards that were identified as needs. Based on the cultures served, and the dialogue around the importance of the identified needs, two standards were prioritized for continued focus in the FY '24 CLC Plan. Those two needs are listed next.

- Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
- Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

## **CLAS ACTIVITIES AND MEASURES**

To address and improve upon the two CLAS Standards that MHMRCV classified as the priorities for FY '23, and will continue to prioritize in FY '24, activities and measures were developed as part of the action plan. In order to be effective, activities must meet specific

S.M.A.R.T. criteria. **S.M.A.R.T. activities are:** specific, measurable, attainable, relevant and time bound. The S.M.A.R.T. activities identified by the QAC for the two priority measures are described next.

**(1) Measure Description: Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.**

o Specific Activities

- (1) Identify Cultural Populations - Identify representative cultural populations in the MHMRCV service area.
- (2) Notification - Notify individuals of the availability of language assistance services via the following sources:
  - MHMRCV website
  - MHMRCV social media
  - Distribution of written information about language assistance resources by LPHA staff at intake appointments with individuals served
  - Distribution of written information about language assistance resources by clinic reception staff
  - Verbal discussion about language assistance resources between individual served and LPHA staff at intake appointments
  - Face-to-face and telephone dialog about language assistance resources provided by clinic reception staff
  - Advertising targeted toward Spanish speaking individuals

o Measurable Activities

- (1) Facebook - Publish one MHMRCV Facebook post per week in Spanish.
- (2) Intake Documentation - 100% of intake documentation will include written Language Line Solutions informational material.



- (3) Marketing - 100% of marketing materials will be available in Spanish.
- (4) Language Line Solutions - Review the volume of Language Line Solutions usage twice per fiscal year to determine if it has increased as a result of the promotion of the availability of language assistance resources.
- (5) Add-On Code - Develop and implement an add-on code in the electronic health record that can be used to capture when a staff member provides foreign language interpreter services. A report can then be run to determine how often staff are providing interpreter services for patients with limited English proficiency.
- (6) Baseline Cultural Stratification Reports - Run demographic data reports from the electronic health record (EHR) to measure baseline (beginning of the fiscal year) volume of cultural stratifications.
- (7) End of Fiscal Year Cultural Stratification Reports - Run demographic data reports from EHR to measure end of fiscal year volume of cultural stratifications.
- Attainable Activities
  - (1) Survey Results - Publish baseline and end of fiscal year Language Line Solutions Interpreter Services usage volume.
  - (2) Cultural Stratification Data - Publish aggregate, deidentified, demographic data to demonstrate the changes in volume of cultural stratifications.
- Relevant Activities
  - (1) Confirm predominant languages/cultures in the MHMRCV service area by review of census data.
- Time Bound Activities – One year; FY '24 (Sept. 2023 – Aug. 2024)

**(2) Measure Description: Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.**



- Specific Activities

- (1) Site Visit - Invite representatives from the local chapters of the National Association for the Advancement of Colored People (NAACP) and League of United Latin American Citizens (LULAC), Open Arms Rape Crisis Center and LGBTQ+ Services and Region 15 Education Service Center to visit/tour MHMRCV clinics to learn their opinion of the MHMRCV clinic experience from a cultural perspective (AMH/CMH).
- (2) Focus Group - Organize and conduct a focus group that include representatives from the local chapters of the NAACP and LULAC, Open Arms Rape Crisis Center and LGBTQ+ Services, Region 15 Education Service Center and Center clientele to determine the perception of the level of cultural and linguistic appropriateness of Center practices, services, and marketing materials.

- Measurable Activities

- (1) Focus Group CLAS Quality Improvement Plan (QIP) - Create a CLAS quality improvement plan based on focus group feedback that identifies objectives requiring improvement..
- (2) End of Fiscal Year Focus Group CLAS QIP Assessment– Conduct an end of fiscal year CLAS QIP assessment to quantify improvements made and achievements.
- (3) Baseline Cultural Stratification Reports – Run demographic data reports from the EHR to measure baseline (beginning of the fiscal year) volume of cultural stratifications.
- (4) End of Fiscal Year Cultural Stratification Reports - Run demographic data reports in EHR to measure end of fiscal year volume of cultural stratifications.

- Attainable Activities

- (1) CLAS QIP Assessment Results - Publish CLAS QIP Assessment results to demonstrate changes in MHMRCV practices, services, and marketing materials and their cultural appropriateness.

- (2) Cultural Stratification Data - Publish aggregate, deidentified, demographic data to demonstrate changes in volume of cultural stratifications.
- Relevant Activities
  - (1) Confirm predominant languages/cultures in the MHMRCV catchment area by review of census data.
- Time Bound Activities – One year; FY '24 (Sept. 2023 – Aug. 2024)

### **CLAS ACTIVITIES IMPACT**

It is expected that there will be an increase in services to the identified populations because of improved attention to specific cultural/linguistic needs. In addition, the Center anticipates a decrease in appointment no-shows and also improvement on CANS/ANSA assessment scores related to culture.

### **CLAS RESOURCES**

Additional CLAS resources are posted on the MHMRCV website ([www.mhmrcv.org](http://www.mhmrcv.org)).

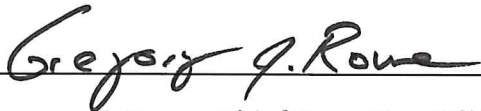
**MHMR CONCHO VALLEY**  
**FY '24**  
**CULTURAL & LINGUISTIC COMPETENCE PLAN**  
**APPROVAL**

The Cultural & Linguistic Competence Plan is reviewed by the following committees:

Quality Assurance Committee

Planning and Network Advisory Committee

The Cultural & Linguistic Competence Plan for MHMR Concho Valley was approved on October 31, 2023.



\_\_\_\_\_  
*Gregory J. Rowe, Chief Executive Officer*