The New and Enhanced National CLAS Standards: A Reintroduction

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Mission: To improve the health of racial and ethnic minority populations through the development of health policies and programs that will eliminate health disparities.
What are culturally and linguistically appropriate services (CLAS)?

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.
What are the National CLAS Standards?

The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care

- First published by the HHS Office of Minority Health in 2000
- Provided a framework for organizations to best serve the nation’s diverse communities
- Underwent an Enhancement Initiative from 2010 to 2013
- (Re)Launched: April 24, 2013
Why were the National CLAS Standards enhanced?

- Growth in the Field
- Changing Demographics
- Policies & Legislation (ACA)

National CLAS Standards for Health and Health Care
The Case for Culturally and Linguistically Appropriate Services

Changing Demographics
By 2060, the U.S. population is projected to be 43% non-Hispanic White; 31% Hispanic; 15% Black; 8.2% Asian American; .3% Native Hawaiian and Pacific Islander; and 1.5% American Indian/Alaska Native.

Legislation
Federal: Affordable Care Act, Title VI of the Civil Rights Act of 1964, Americans with Disabilities Act
State Examples: New Jersey, California, Washington

Accreditation
Joint Commission, National Committee on Quality Assurance

Cost of Health and Health Care Disparities
Combined cost of health inequalities and premature death in the U.S. is $1.24 trillion. Eliminating health disparities for minorities would have reduced direct medical care expenditures by $229.4 billion in 2003-2006.
# The Case for Culturally and Linguistically Appropriate Services

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Medical Errors</strong></td>
<td>Limited English proficient (LEP) patients who may not be able to communicate effectively with their health care providers may be at greater risk for medical errors.</td>
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<tr>
<td><strong>Readmissions</strong></td>
<td>Racial and ethnic minorities are more likely to be readmitted for certain chronic conditions than their non-Hispanic White counterparts.</td>
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<td><strong>Length of Stay</strong></td>
<td>Length of a hospital stay for Limited English Proficient patients was significantly longer when professional interpreters were not used at admission or both admission/discharge.</td>
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<td><strong>Increase Market Share</strong></td>
<td>A hospital increased its market share among individuals with LEP by creating individual maternity suites with a substantial cultural competency component in their design.</td>
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What is the purpose of the enhanced National CLAS Standards?

The National CLAS Standards are intended to **advance health equity, improve quality, and help eliminate health care disparities** by establishing a blueprint for health and health care organizations to implement and provide culturally and linguistically appropriate services.
What’s New in the National CLAS Standards?
What’s New in the National CLAS Standards?

The addition of a statement of intent
What’s New in the National CLAS Standards?

The definition of “culture”
What’s New in the National CLAS Standards?

The definition of “health”
What’s New in the National CLAS Standards?

The target audience: health and health care organizations
What’s New in the National CLAS Standards?

An increased focus on governance, leadership, and workforce.
What’s New in the National CLAS Standards?

Enhanced implementation guidance: *The Blueprint*
What’s New in the National CLAS Standards?

2000 Framing

- Culturally Competent Care
- Language Access Services
- Organizational Supports

2013 Framing

- Principal Standard
- Governance, Leadership, and Workforce
- Communication and Language Assistance
- Engagement, Continuous Improvement, and Accountability
The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to…
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.
Theme 1: Governance, Leadership, and Workforce

governance

leadership

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.
Theme 2: Communication & Language Assistance

- Spoken
- Signed
- Written
- Multimedia
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.
Theme 3: Engagement, Continuous Improvement, and Accountability
Standards on 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.
Where can you find more information about the National CLAS Standards?

National CLAS Standards: A Blueprint for Advancing and Sustaining CLAS Policy and Practice
Where can you find more information about the National CLAS Standards?

www.ThinkCulturalHealth.hhs.gov
For *The Blueprint*:

www.ThinkCulturalHealth.hhs.gov

To send ideas and stories of implementation:
AdvancingCLAS@ThinkCulturalHealth.hhs.gov

To submit questions regarding this presentation:
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