

Best Practice Standard: RESPONSIVE PRACTICE

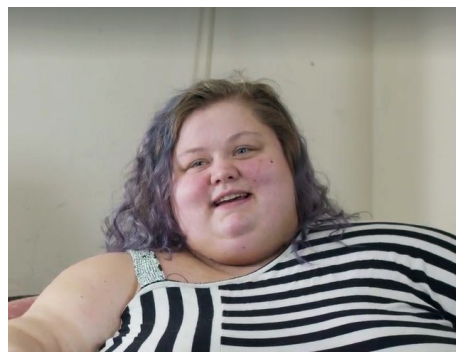
Provide effective, equitable, understandable, & respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.*

Notice...

1. There are clear examples of people who did not have interpreters offered to them, or who felt that their beliefs were ignored. What is the effect of this, from the point of view of the person seeking services?
2. What are some examples of providers taking participants' cultural health beliefs and practices, preferred languages, health literacy, or other communication needs into consideration?

Reflect...

3. Think about all the interactions that make up someone's experience with their provider. E.g., appointment scheduling, check-in and waiting room, ongoing follow-up, etc. What does effective, equitable, quality care look like in each context?
4. Think about your own practice and that of your agency or organization. What are you already doing that models this best practice?
5. What will you do to move towards providing practice that is responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs? What are your concerns?



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**Adapted from the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care (U.S. Dept. of Health & Human Services, Office of Minority Health) are intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health care organizations to implement culturally and linguistically appropriate services.*

Best Practice Standard: LEADERSHIP & WORKFORCE

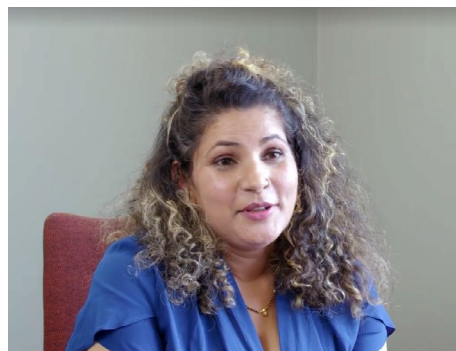
Leadership actively promotes the provision of care that is culturally and linguistically responsive through policy, practices, and budget allocation, and by recruiting and supporting a diverse workforce that is responsive to all populations served.*

Notice...

1. What institutional rules do the participants identify as inequitable or unfair?
2. What are some policies and practices currently in place that have created access barriers, including language and communication access?
3. What do participants say about the workforce – care providers, teachers, administrators?
4. What do participants identify as ways to improve leadership and create a more culturally responsive workforce?

Reflect...

5. How can organizational leadership promote culturally and linguistically appropriate services and health equity?
6. What steps can you and your organization take to ensure your board, administrators, and workers reflect the diversity of your community?
7. What steps can you and your organization take in terms of policy, budget, and workforce recruitment and development to improve equitable access to services?



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Best Practice Standard: COMMUNICATION AND LANGUAGE ASSISTANCE

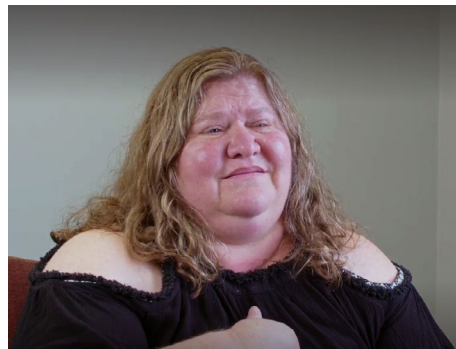
Offer no-cost, timely, and high-quality language assistance (such as trained interpreters) to any person with a communication need to ensure timely access to all care and services. Inform all people of available language assistance services and provide easy-to-understand materials and signage in languages most used by the populations served.*

Notice...

1. How do participants describe the lack of communication accommodations from their providers? What about problems understanding materials or descriptions of their care?
2. What do participants say helps them know about their options for language assistance?
3. What resources or approaches were helpful and improved access to care?

Reflect...

4. What are some of the consequences of not providing health information that is understandable or not providing language assistance services at provider visits?
5. What can you or your organization do to improve language and communication access? What changes could be made to improve systems in your organization?



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Best Practice Standard: ENGAGEMENT, CONTINUOUS IMPROVEMENT, & ACCOUNTABILITY

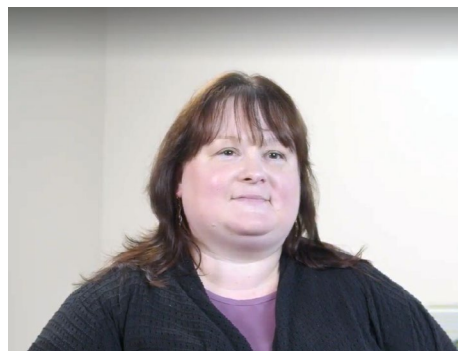
Collect and frequently review data relative to cultural and linguistic competency throughout your organization. Track demographic information and ensure that it is used to promote equity. Partner with the community to plan, implement, and assess policies, practices, and services. Create culturally and linguistically appropriate conflict and grievance resolution processes*

Notice...

1. What did participants say about surveys and assessments that were designed to collect their feedback about their experiences?
2. What did participants say about engaging them to identify problems and make system improvements? What could help them be more engaged?
3. How did participants feel about attempts to collect their feedback?

Reflect...

4. Does your organization actively solicit customer satisfaction feedback for health services, and do you attempt to accommodate everyone in those activities? How frequently is this information being reviewed, and how is it used?
5. What are you and your organization already doing that models this standard? What changes could be made to improve your solicitation of feedback from underrepresented individuals you serve?



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