Advancing Cultural Competency and Health Literacy to Achieve Health Equity

January 19, 2021 | 11AM-12PM







Qlarant

#### **Chat In**



Please use the chat feature to share your name, organization, and state.



## The IPRO QIN-QIO: Where We Are





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#### The IPRO QIN-QIO Region

#### **IPRO**:

New York, New Jersey, and Ohio

#### **Healthcentric Advisors:**

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

#### Qlarant:

Maryland, Delaware, and the District of Columbia



Working to ensure high-quality, safe healthcare for **20% of the nation's Medicare FFS beneficiaries** 









#### SWEEP: Strategic Web-based Education & Engagement Plan

- A virtual, multi-event learning program.
- Brings together technology, education, and support.
- Consists of:
  - Presentations a gathering of healthcare providers from across our network
  - Learning Circles a QIN-facilitated conversation conducted in smaller groups.









#### Addressing Health Disparities to Reduce Opioid Use Harm

- Identify, prioritize, monitor, and eliminate health disparities
- Improve patient and organizational health literacy
- Promote culturally & linguistically appropriate services
- Discuss perceptions of addiction, stigma, implicit bias
- Screen & address social determinants of health





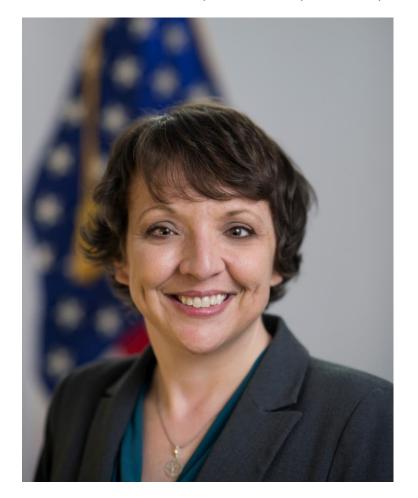
#### **Our Presenter**





Healthcentric Advisors
Qlarant

#### Darci L. Graves, MPP, MA, MA











Darci L. Graves, MPP, MA, MA, joined the Centers for Medicare & Medicaid Services, Office of Minority Health in 2015. As part of her work, she assists in the coordination and implementation of priority office-wide programs, policies, and products. In addition, she provides subject matter expertise in areas such as culturally and linguistically appropriate services, rural health, cancer, health disparities, and health equity.

Ms. Graves holds graduate degrees in Communications, Religion and Sociology, and Public Policy and has nearly 20 years of professional and academic experience in the fields of cultural and linguistic competence and health education. Darci began her career as a faculty member at the University of Missouri-Kansas City School of Medicine, where she aided in the development, implementation, and management of diversity, spirituality, communications, and geriatrics curricula. Since then she has continued to write and work in the area of cultural and linguistic competency as it relates to topics including public safety, disaster preparedness and response, language access, and domestic violence.



## Advancing Cultural Competency and Health Literacy to Achieve Health Equity



### **Today's Topics**

- Laying the Foundation
- Understanding Terms & Concepts
- Connecting Concepts to Outcomes
- Sharing Tools & Resources
- Finding Out More

#### **The Foundation**

#### **Patient Experience**

**Insurance Coverage** 

**Find the Front Door** 

**Check Out – Next Steps** 

Find a Doctor

**Find Your Doctor** 

Pharmacy

**Get an Appointment** 

Check In – Fill Out Paperwork -- Wait Tests – Blood Work – Radiology – Etc.

Arrive at the Office/Hospital/Clinic

Meet with Nurse/PA

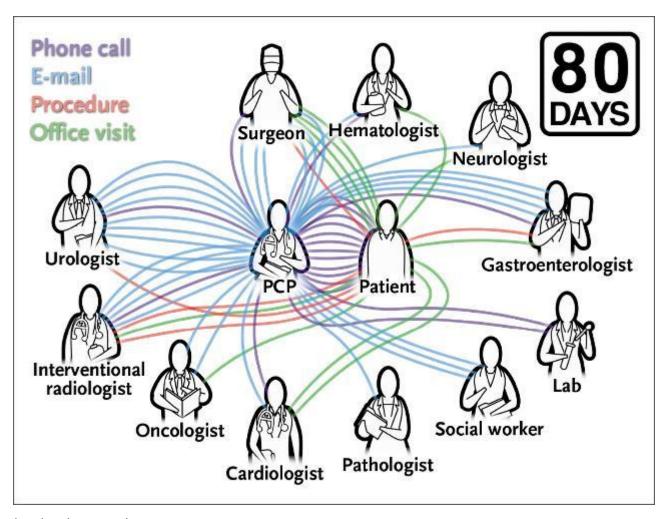
Therapy – Surgery -Treatment

**Park** 

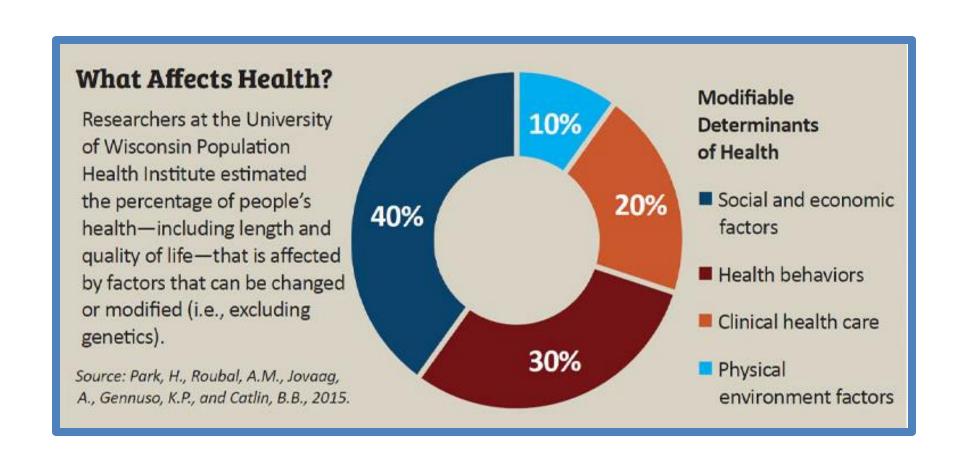
Meet with Doctor(s)

**Get Home** 

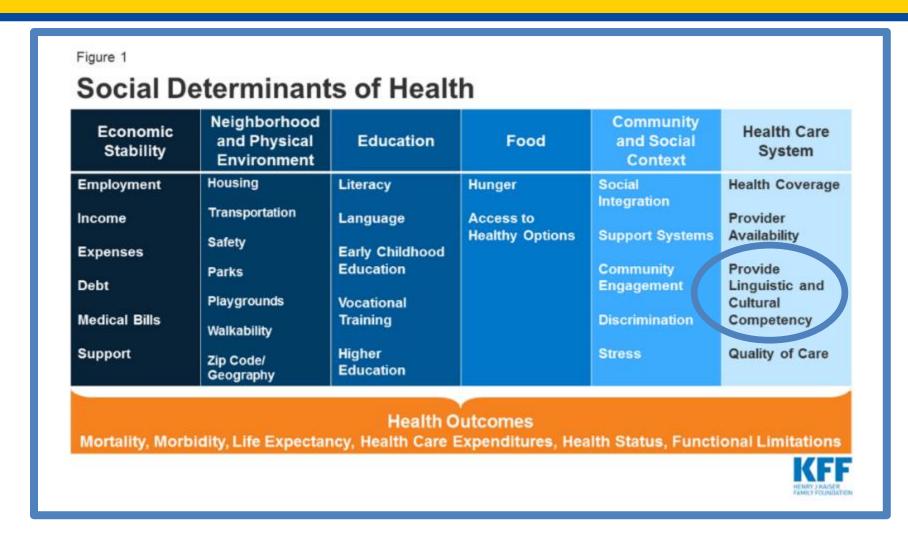
#### **Patient Experience**



#### **Modifiable Determinants of Health**



#### **Social Determinants of Health**

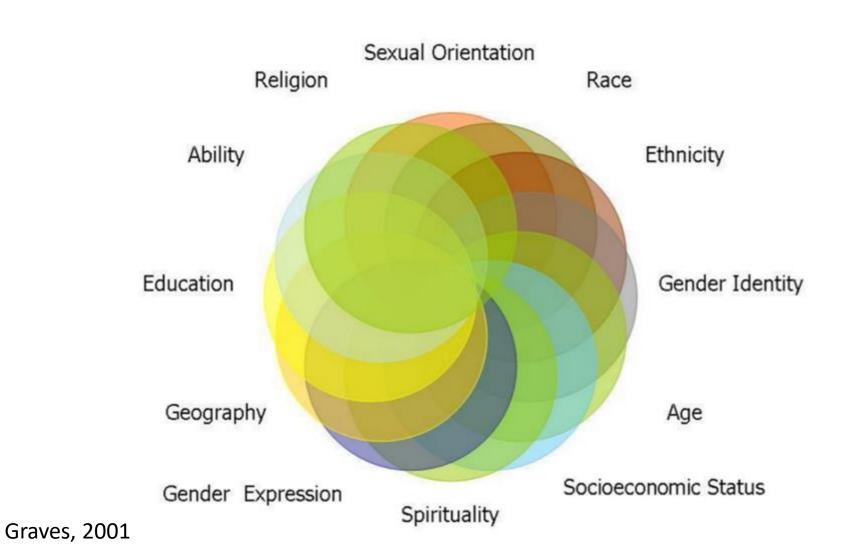


## **Terms & Concepts**

#### What Is Culture?

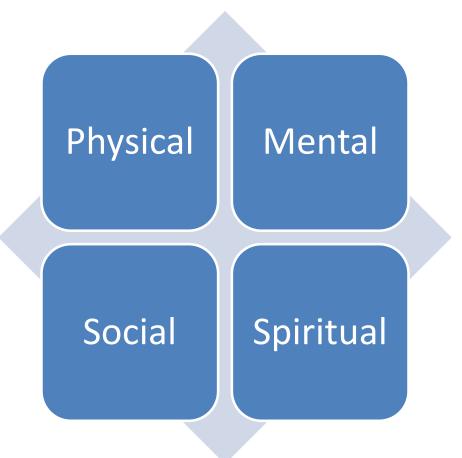
Culture is defined as the integrated pattern of thoughts, communications, actions, customs, beliefs, values, and institutions associated, wholly or partially, with racial, ethnic, or linguistic groups, as well as with religious, spiritual, biological, geographical, or sociological characteristics.

#### **Interrelationship of Cultural Identities**



#### What is Health?

Health encompasses many aspects, including physical, mental, social, and spiritual well-being.



#### What is Cultural and Linguistic Competency?

The capacity for individuals and organizations to work and communicate effectively in crosscultural situations through the adoption and implementation of strategies to ensure appropriate awareness, attitudes, and actions and through the use of policies, structures, practices, procedures, and dedicated resources that support this capacity.

## 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 is Health Equity?

## Attainment of the highest level of health for all people

## **Equality vs. Equity**



### What is health literacy?

- Healthy People 2030 addresses both personal health literacy and organizational health literacy and provides the following definitions:
  - Personal health literacy is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.
  - Organizational health literacy is the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

# Foundational Principle of Healthy People 2030

#### Achieving health and well-being requires\*:

- -eliminating health disparities,
- -achieving health equity, and
- -attaining health literacy.

### **Connecting Concepts to Outcomes**

## Six Domains of Quality in Medicine

Safe	Avoiding harm to patients from the care that is intended to help them.
Effective	Providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit (avoiding underuse and misuse, respectively).
Patient- Centered	Providing care that is respectful of and responsive to individual patient preferences, needs, and values and ensuring that patient values guide all clinical decisions.
Timely	Reducing waits and sometimes harmful delays for both those who receive and those who give care.
Efficient	Avoiding waste, including waste of equipment, supplies, ideas, and energy.
Equitable	Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.

#### National Academies of Medicine/ Perspectives

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Reducing disparities requires attention to the essential components of equitable, patient-centered, high-quality care – that is, to culturally and linguistically appropriate care as well as attention to health literacy.

nam.edu/Perspectives

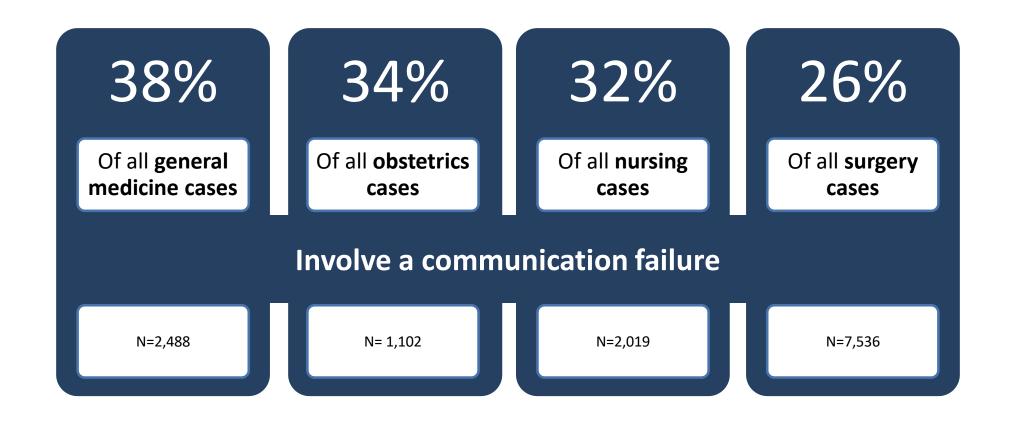
#### Cultural Competency, Health Literacy, & Patient Safety

Patient safety events that can result from the failure to address culture, language, and health literacy include diagnostics errors, missed screenings, unexpected negative responses to medication, harmful treatment interactions from simultaneous use of traditional medicines, healthcare-associated infections, adverse birth outcomes, inappropriate care transitions, and inadequate patient adherence to provider recommendations and follow-up visits.

## Cultural Competency, Health Literacy, & Patient Engagement/Trust

Cultural and linguistic competence strategies, such as provision of language assistance and the [engagement] of cultural brokers, can promote effective communication with diverse patients that is critical to engage them as collaborative partners in their care. Other interventions, such as cultural competence training, can increase understanding of what the patient is experiencing and give providers skills to bridge cultural differences and foster increased trust.

#### **Communication Failures within Selected Services**



#### **National CLAS Standards**

The National CLAS Standards are a set of 15 action steps intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health and health care organizations to implement culturally and linguistically appropriate services.

#### **Examples of CLAS**

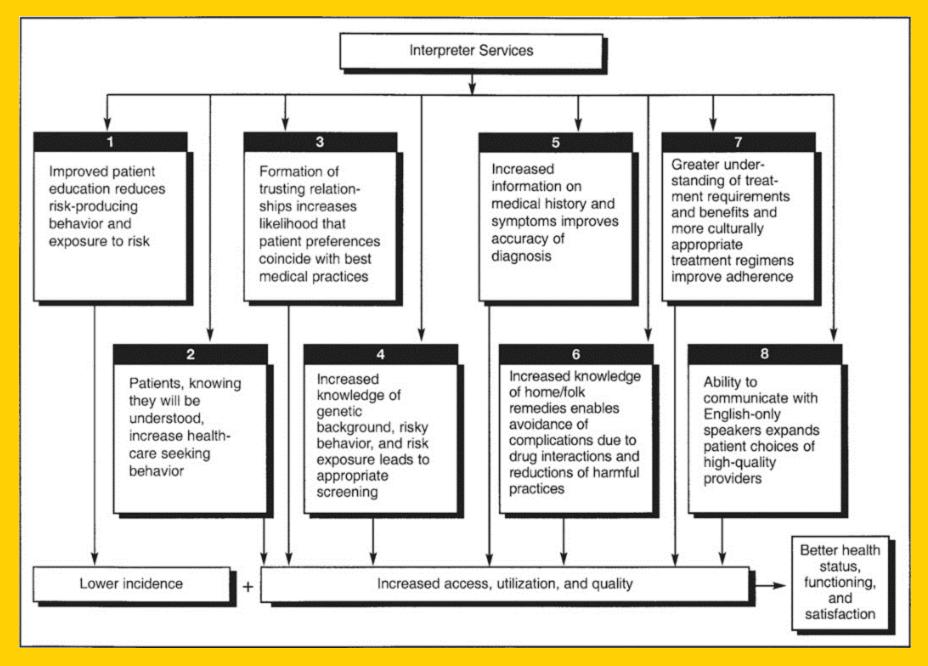
- Establish culturally and linguistically appropriate goals, policies and management accountability, and infuse them throughout the organizations' planning and operations.
- Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into assessment measurement and continuous quality improvement activities.

### **Examples of CLAS (cont.)**

- 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.
- 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.

### **Examples of CLAS (cont.)**

- Partner with the community to design, implement and evaluate policies, practices and services to ensure cultural and linguistic appropriateness.
- Create conflict- and grievance-resolution processes that are culturally and linguistically appropriate to identify, prevent and resolve conflicts or complaints.



### **Tools & Resources**

# **Health Equity Across HHS**



# **Data Snapshots & Data Highlights**



**Atrial Fibrillation** 



Autism Spectrum Disorders (PDF)



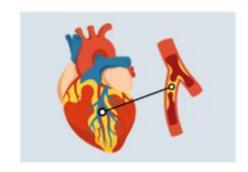
Chronic Kidney Disease (PDF)



Depression (PDF)



Diabetes (PDF)



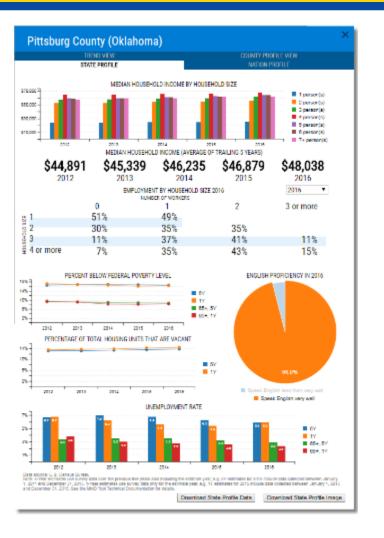
Heart Failure (PDF)

# **Health Research Reports**

- Impact of Hospital Readmissions Reduction Initiatives on Vulnerable Populations
- Putting Patients First: Today's Disparities Research Leading to Health Equity Tomorrow
- Racial, Ethnic, and Gender Disparities in Health Care in Medicare Advantage
- Rural-Urban Disparities in Health Care in Medicare

# **Mapping Medicare Disparities Tool**

	differences between two racial a							
elpful links: Q	uick Start Guide	FAQ's   MM	D Tool Technica	I Documentation	n   Office of M	inority Health I	MMD Tool home	epage
Year	2018	•						
Geography	County	▼						
Measure	Prevalence	▼						
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Analysis	Base measure	7						
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Condition/Service	Diabetes	▼	-					
Sex	All	*	100					M
Age	All	▼	ALC: N	A. W. J. L.	ALC: UN	more.		100
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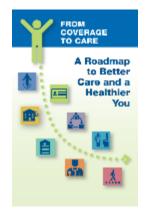


Population View

Hospital View

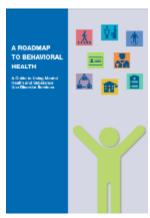
# From Coverage to Care

- Roadmap to Better Care and a Healthier You
- 5 Ways to Make the Most of Your Health Coverage
- Roadmap to Behavioral Health
- Manage Your Health Care Costs
- Enrollment Toolkit
- Prevention Resources
- Partner Toolkit and Community
   Presentation









go.cms.gov/c2c CoverageToCare@cms.hhs.gov

# **Quality Improvement & Interventions**

- A Culturally and Linguistically Tailored Type 2
   Diabetes Prevention Resource Inventory
- Guide to Developing a Language Access Plan
- Building an Organizational Response to Health Disparities: Five Pioneers from the Field
- A Practical Guide to Implementing the National CLAS Standards: For Racial, Ethnic and Linguistic Minorities, People with Disabilities and Sexual and Gender Minorities
- Guide to Reducing Disparities in Readmissions

# Improving Access to Care for People with Disabilities

- Improving Communication Access for Individuals who are Blind or have Low Vision
- Improving Communication Access for Individuals who are Deaf or Hard of Hearing
- Modernizing Health Care to Improve Physical Accessibility: Resource Inventory
- Getting the Care You Need: A Guide for People with Disabilities English
  - Chinese / 中文
  - Haitian Creole / Kreyòl Ayisyen
  - Korean / 한국어
  - Russian / Русский
  - Spanish / Español
  - Vietnamese / TIÉNG VIỆT
- Navigating Health Care with a Disability Our Stories: Video Vignettes

go.cms.gov/omh

## **For More Information**

### **Health Equity Technical Assistance Program**



plan initiatives, and

set SMART aims.



#### ACT

Implement targeted interventions to reduce health disparities.



Evaluate and improve your plan to reduce disparities.

HealthEquityTA@cms.hhs.gov



### **Contact Information**

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#### **Discussion**





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# We welcome your questions and comments!





#### **Next Presentation**







## **Culturally Competent Approaches** to Opioid Use Disorder Treatment

Tuesday, February 23, 2021 11:00 AM – 12:00 PM

To Register:

https://qi.ipro.org/



#### **SWEEP Team**





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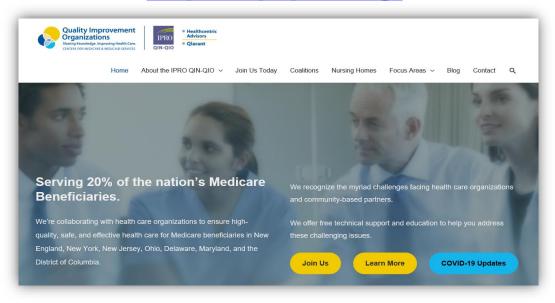
Have a question? Contact us!

Anne Myrka <a href="mailto:amyrka@ipro.org">amyrka@ipro.org</a>

Laura Benzel benzell@qlarant.com

## **Learn More & Stay Connected**

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