

Keeping It Simple: CLAS Theme 3: Standards 12 - 15

Session 5

March 8, 2023

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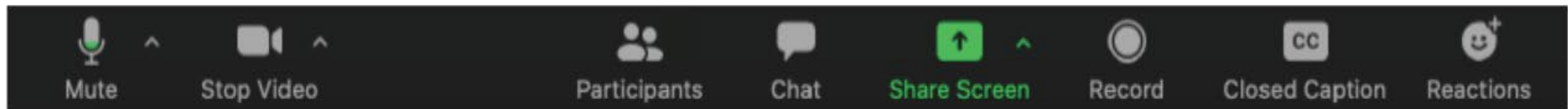
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Use Chat to Ask Questions and Make Comments

How to use Zoom

At the bottom of your screen, you will see a black bar with icons:



Chat **Everyone** for general
comments or questions



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The IPRO HQIC

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- A federally funded Medicare Hospital Quality Improvement Contractor (HQIC) in 12 states.
- IPRO collaborates with several organizations to reach hospitals.

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■ Healthcentric Advisors

■ Kentucky Hospital Association

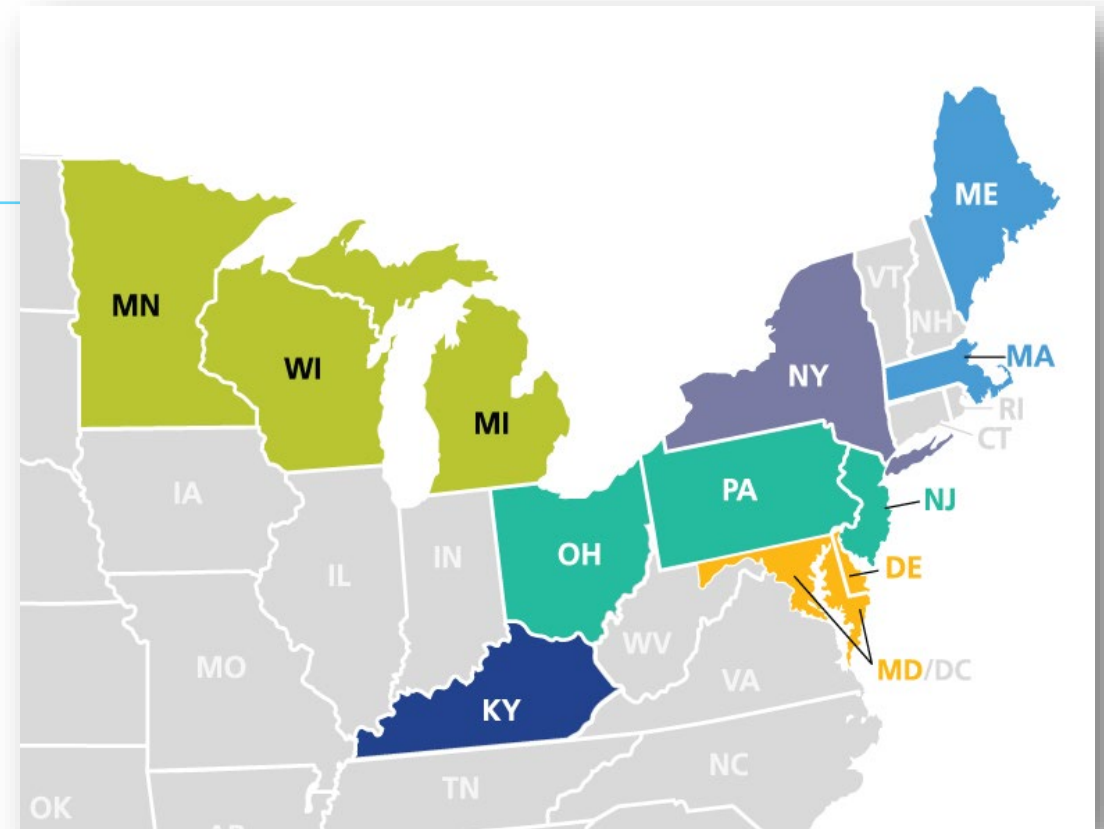
■ Qlarant

■ Q3 Health Innovation Partners

■ Superior Health Quality Alliance

American Institutes for Research (AIR)

QSource Health Equity Subject Matter Experts



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The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network – Quality Improvement Organization (QIN-QIO) in contract with the Centers for Medicare & Medicaid Services (CMS)
- 12 regional CMS QIN-QIOs nationally

IPRO:

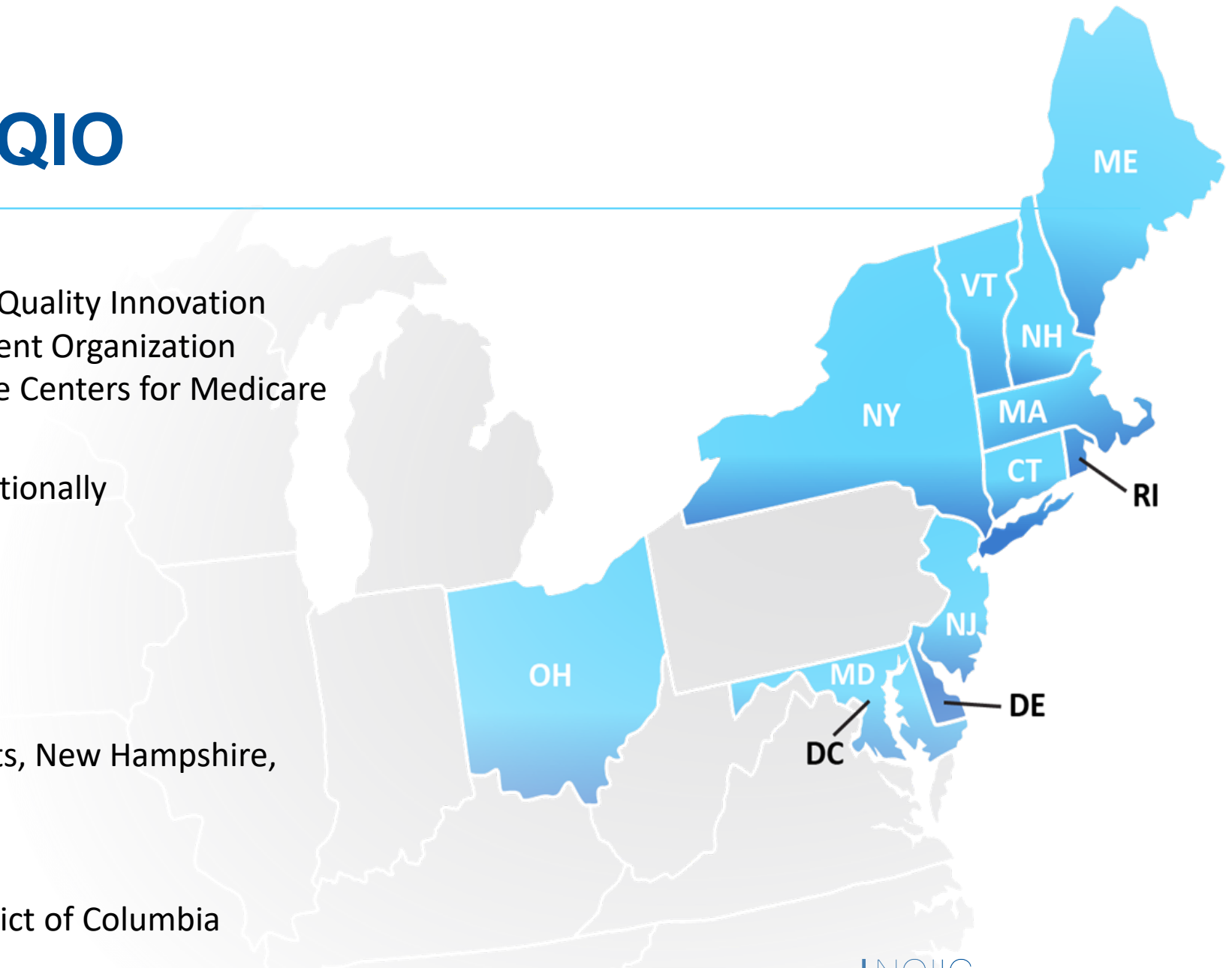
New York, New Jersey, and Ohio

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



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Overview of this Series



- 1 CHALLENGE:** One aspect of eliminating health disparities requires a commitment to the delivery of culturally and linguistically appropriate care at every patient encounter.
- 2 ACTION:** Use the [IPRO CLAS Assessment](#) to identify opportunities for improvement in your organization's delivery of culturally and linguistically appropriate services.
- 3 Result:** Develop and implement an action plan to address opportunities for improvement based on the IPRO CLAS Report and information from this educational series.



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Agenda

- Theme 3
- CLAS Standards 12 – 15
- Implementation Plans
- Resources and Slides
 - CMS Office of Minority Health resources
- Registration Information for Final Session
- Q&A



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National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care

U.S. Department of Health and Human Services (HHS)



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The CLAS Standards

PRINCIPAL STANDARD

Standard 1

GOVERNANCE, LEADERSHIP, AND WORKFORCE

Standards 2 – 4

COMMUNICATION AND LANGUAGE ASSISTANCE

Standards 5 – 8

ENGAGEMENT, CONTINUOUS IMPROVEMENT, AND ACCOUNTABILITY

Standards 9 – 15



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Theme 3

Engagement, Continuous Improvement, and Accountability



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Standards 12 - 15

Standard 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.

Standard 13: Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

Standard 14: Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.

Standard 15: Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

Standard 12

Standard 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.

3.12 Collaborate with stakeholders and community members in community health needs assessment data collection, analysis, and reporting efforts to increase data reliability and validity.

Standard 12 – Components

COMPONENTS

To determine the service assets and needs of the populations in the service areas (needs assessment).

To identify all of the services available and not available to the populations in the service areas (resource inventory and gaps analysis).

To determine what services to provide and how to implement them, based on the results of the community assessment.

To ensure that health and health care organizations obtain demographic, cultural, linguistic, and baseline data and update the data regularly to better understand the populations.

Standard 13

Standard 13: Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

3.13 Include community members in the process of planning programs and developing policies to ensure cultural and linguistic appropriateness by convening town hall meetings, conducting focus groups, and/or creating community advisory groups.

Standard 13 – Components

COMPONENTS

To provide responsive and appropriate service delivery to a community.

To ensure that services are informed and guided by community interests, expertise, and needs.

To increase use of services by engaging individuals and groups in the community in the design and improvement of services to meet their needs and desires.

To create an organizational culture that leads to more responsive, efficient, and effective services and accountability to the community.

To empower members of the community to become active participants in the health and health care process.

Standard 14

Standard 14: Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.

3.14 Consider using staff as cultural brokers to help improve feedback mechanisms, conflict resolution processes, and communication with culturally and linguistically diverse individuals.

Standard 14 – Components

COMPONENTS

To facilitate open and transparent two-way communication and feedback mechanisms between individuals and organizations.

To anticipate, identify, and respond to cross-cultural needs.

To meet federal and/or state level regulations that address topics such as grievance procedures, the use of ombudspersons, and discrimination policies and procedures

Standard 15

Standard 15: Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

3.15 Partner with community organizations to:

- lead discussions about the services provided and progress made
- to create advisory boards on issues affecting diverse populations
- how best to serve and reach these diverse populations

Standard 15 – Components

COMPONENTS

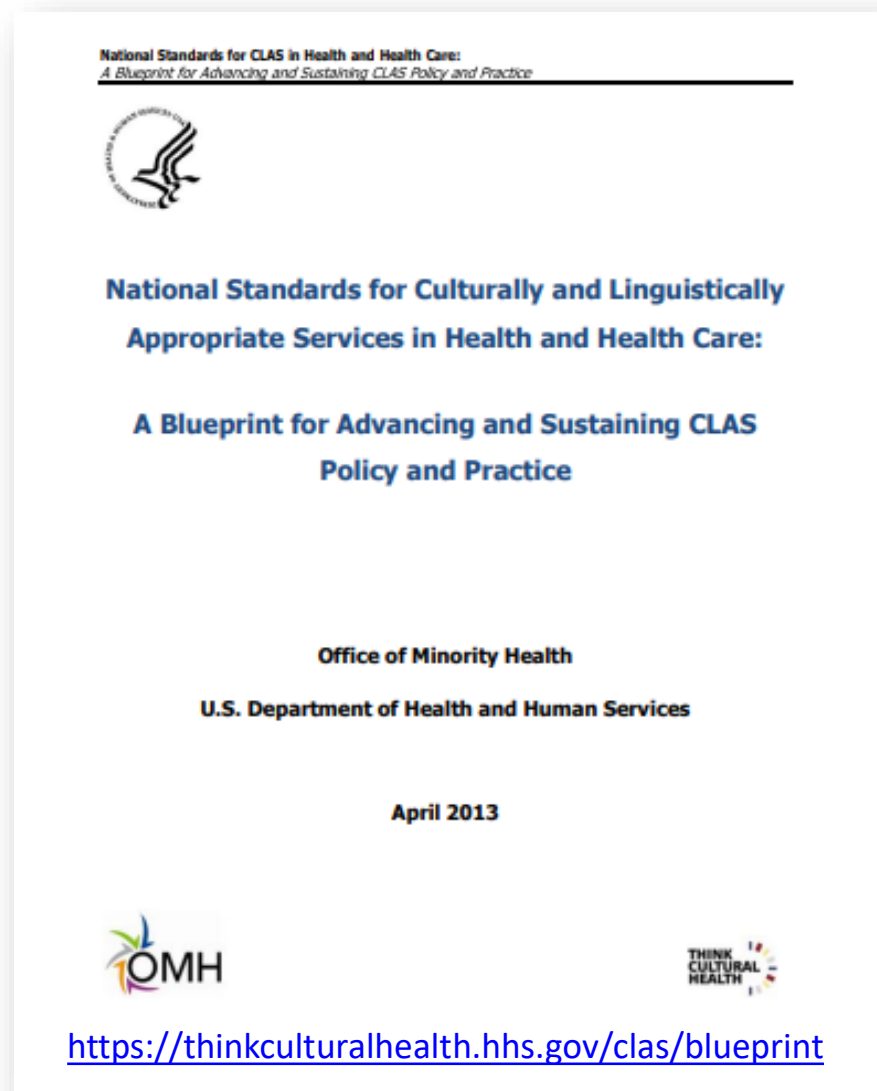
To convey information to intended audiences about efforts and accomplishments in meeting the National CLAS Standards.

To learn from other organizations about new ideas and successful approaches to implementing the National CLAS Standards.

To build and sustain communication on CLAS priorities and foster trust between the community and the care setting.

To meet community benefits and other reporting requirements, including accountability for meeting health care objectives in addressing the needs of diverse individuals or groups

The Blueprint



For more information on each Standard:

- Purpose
- Key components and concepts
- Explanations of concepts
- Strategies for implementation
- The case for the National CLAS Standards
- Glossary of 75+ terms
- 200+ Resources related to CLAS



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An Implementation Checklist for National CLAS Standards

An Implementation Checklist for the National CLAS Standards

with a CLAS Action Worksheet and CLAS Testimonials



- Includes an implement checklist to help you assess your organization's competency for each activity for each Standard.
- Includes testimonials from organizations to provide a snapshot of how to implement the National CLAS Standards and why.

<https://thinkculturalhealth.hhs.gov/assets/pdfs/AnImplementationChecklistfortheNationalCLASStandards.pdf>

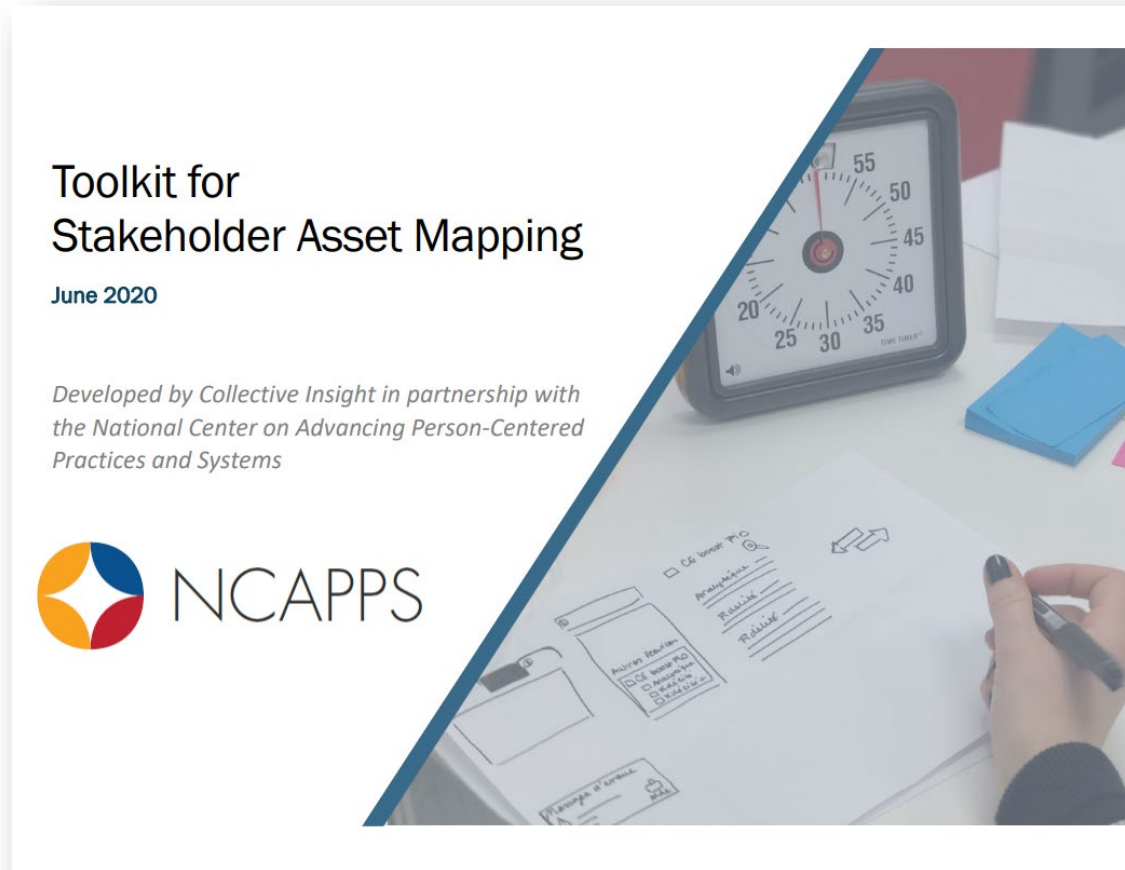


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Toolkit for Stakeholder Asset Mapping

National Center on Advancing Person-Centered Practices and Systems



- The Stakeholder Asset Mapping process is an ideal way to inventory your engagement assets before developing a Stakeholder Engagement Plan.
- Helps you understand existing stakeholders—including the individuals and families you serve.
- Illustrates the ways stakeholders are already engaged in the design or implementation of your programs so you can build on rather than duplicate these efforts.

https://ncapps.acl.gov/docs/AssetMappingToolkit_200827_linked.pdf



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Toolkit for Stakeholder Asset Mapping

National Center on Advancing Person-Centered Practices and Systems

Sample Stakeholder Asset Map: Montana



- **Existing Councils/ Advisory Groups** include CFC Council, Big Sky Waiver Workgroup, Governor's Advisory Council (TBI), Governor's Advisory Council on Aging
- **Existing Webinars** include Monthly Discussion Group
- **Existing Conference** options include MyLife (youth in transition) and Annual Governor's Conference (older adults)
- **Other models to build from** include State Health Improvement Model (statewide initiative informed by local activity, BI social media activity, provider survey model inclusive of incentives)

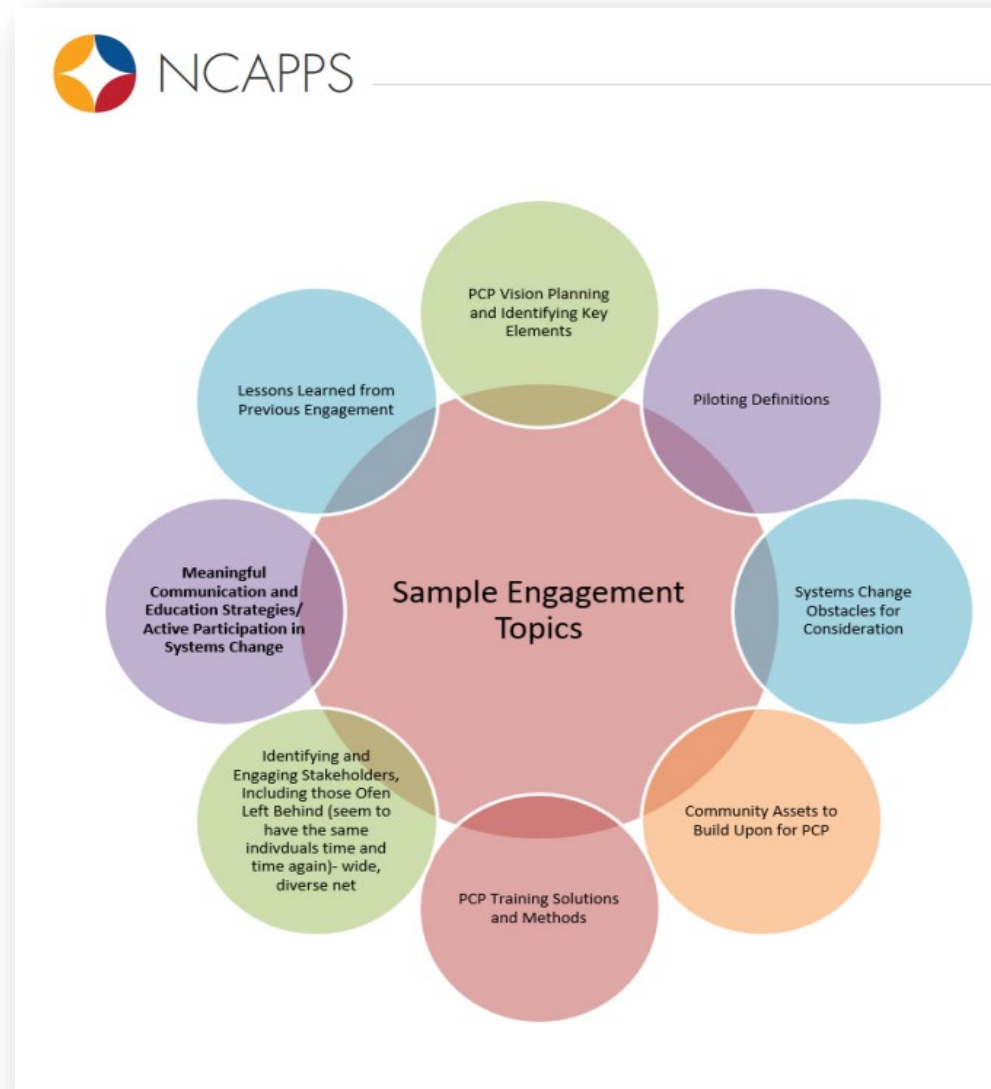
Toolkit for Stakeholder Asset Mapping

National Center on Advancing Person-Centered Practices and Systems



Toolkit for Stakeholder Asset Mapping

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Toolkit for Stakeholder Asset Mapping

National Center on Advancing Person-Centered Practices and Systems



Sample Stakeholder Engagement Plan: Montana (May 2020)

Engagement Purpose and Target Audiences

Element	Detail
Engagement Goal	Our goal is initiate a meaningful and feasible engagement strategy that 1) helps build a constructive environment for stakeholders to inform our person-centered planning systems change activities and 2) identifies preliminary Community First Choice lessons learned that are applicable to multiple Division programs and broader stakeholder engagement strategies.
Engagement Objectives	<p>By September 30, 2020:</p> <ol style="list-style-type: none"> 1. Participate in three Community First Choice Advisory Council and/or Subcommittee meetings to inform Council members of our NCAPPS activities, seek guidance on person-centered principles and focus areas, and summarize what is heard/what it means for NCAPPS. 2. Disseminate one newsletter article (e.g., Aging Horizon Special Addition) on the NCAPPS initiative that includes the input received to date on person-centered principles and focus areas; include this language in a CFC distribution list email. 3. Produce one Aging Horizons segment on the NCAPPS initiative that includes the input received to date on person-centered principles and focus areas. <p>By November 30, 2020:</p> <ol style="list-style-type: none"> 4. Engage one to three tribal-affiliated CFC providers in two meetings (could be individual or small group) to discuss person-centered planning and systems change and to inform the design of our Tribal Consultation Meeting. 5. Develop a plan to further identify and engage various local advisory councils (e.g., Mental Health Local Advisory Councils) in person-centered planning systems change activities.
Engagement Target Groups	<ul style="list-style-type: none"> • Individuals Accessing Services (CFC, BigSky, SDMI, 0208, PAS) (especially CFC/PAS for this first phase) • Informal Supports of Individuals Accessing Services (especially CFC/PAS for this first phase) • Community-Based Service Providers (especially CFC/PAS for this first phase) • Divisions impacted (especially those impacted by CFC/PAS for this first phase) • State Legislators/ Elected Officials (secondary, information sharing)

Example Gap Analysis (SmartSheet)

smartsheet

File Automation Forms Gap Analysis ☆

Grid View Filter Arial 10 B I U

No.	Strategic Objective / Requirement	Current Standing	Deficiency	Action Plan	Assigned To	Action Due Date	
1	Northwest Hospital					Gap Analysis	
2							
3	Analysis Date:						
4							
No.	Strategic Objective / Requirement	Current Implementation	Deficiency	Action Plan	Assigned To	Action Review Date	
1	Example: Implement CLAS Standards in Cardiac in all Health System Divisions	Currently implemented in 7 out of 12 division	42% of divisions need to implement CLAS	Work with each division to develop an implementation plan using the HHS Blueprint	LB Laura Benzel	03/07/23	
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IPRO CLAS Assessment

<https://redcap.ipro.org/surveys/?s=RXJPNMPWPAMM49X7>

Theme 1: Governance, Leadership, and Workforce		
CLAS Standard 2: Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.	1.2a Identify and designate a CLAS champion or champions: <ul style="list-style-type: none">• who are supported by the organization's leadership;• whose specific responsibilities include (at a minimum) continuous learning about, promoting, and identifying and sharing educational resources about CLAS and the National CLAS Standards throughout the organization.	<p>Currently Implementing</p> <p>Planning to Implement</p> <p>Not planning to implement at this time</p> <p>* must provide value reset</p>
	1.2b Create and implement a formal CLAS implementation plan that: <ul style="list-style-type: none">• is endorsed and supported by the organization's leadership• describes:<ul style="list-style-type: none">◦ how each Standard is understood;◦ how each Standard will be implemented and assessed;◦ who in the organization is responsible for overseeing implementation.	<p>Currently Implementing</p> <p>Planning to Implement</p> <p>Not planning to implement at this time</p> <p>* must provide value reset</p>



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HHS CLAS Checklist

5

Checklist of National CLAS Standards Implementation Practices
Theme 1: Governance, Leadership, and Workforce

Select your organization's stage of implementation for each practice	Currently implementing	Planning to implement	Not planning to implement at this time
1.2a Identify and designate a CLAS champion or champions, who are supported by the organization's leadership, and whose specific responsibilities include (at a minimum) continuous learning about, promoting, and identifying and sharing educational resources about CLAS and the National CLAS Standards throughout the organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2b Create and implement a formal CLAS implementation plan that is (at a minimum) endorsed and supported by the organization's leadership, that describes how each Standard is understood, how each Standard will be implemented and assessed, and who in the organization is responsible for overseeing implementation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3a Target recruitment efforts to the populations served to increase the recruitment of culturally and linguistically diverse individuals, through actions such as: posting job descriptions in multiple languages in local community media, holding job fairs in the community(ies) served, and/or working with leaders of local community institutions to create mentorship and training programs targeting populations served.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3b Create internal organizational mentorship programs, specifically targeting culturally and linguistically diverse individuals, that provide information about and support for additional training opportunities, and that links individuals in junior positions with individuals in senior positions to receive career guidance and advice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4a Deliver or make freely available continuous CLAS-related training and technical assistance to leadership and all staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4b Create and disseminate new resources about CLAS within the organization using widely accessible platforms (e.g., employee-dedicated webpages, employee intranet, employee break room).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4c Incorporate assessment of CLAS competencies (e.g., bilingual communication, cross-cultural communication, cultural and linguistic knowledge) on an ongoing basis into staff performance ratings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Checklist of National CLAS Standards Implementation Practices

Theme 1: Governance, Leadership, and Workforce

Select your organization's stage of implementation for each practice	Currently implementing	Planning to implement	Not planning to implement at this time
1.2a Identify and designate a CLAS champion or champions, who are supported by the organization's leadership, and whose specific responsibilities include (at a minimum) continuous learning about, promoting, and identifying and sharing educational resources about CLAS and the National CLAS Standards throughout the organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2b Create and implement a formal CLAS implementation plan that is (at a minimum) endorsed and supported by the organization's leadership, that describes how each Standard is understood, how each Standard will be implemented and assessed, and who in the organization is responsible for overseeing implementation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


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Achieving CLAS – Action Plan



Culturally and Linguistically Appropriate Services

CLAS Action Plan

Primary Contact/Champion: _____

Role/Title _____ Department/Division: _____

Organization: _____

Additional Improvement Team Members: _____

Standard(s) Your Organization Has Chosen to Focus On

CLAS Standard Theme: _____

CLAS Standard Practice: _____

Considerations (organizational objectives, challenges, resources, building on an existing plan, working with other external partners, etc.):

Action Steps/Strategies:

1. _____

2. _____

3. _____

Recommended Resources: _____

This material is based on content initially developed by GSources, and was prepared by IPRO-QIN-QIO, a Quality Improvement Network-Quality Improvement Organization, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication # 115000-IPRO-QIN-QIO-50-66-23-006 [12/15/2022] v1.0

continued on next page

Standard(s) Your Organization Has Chosen to Focus On

CLAS Standard Theme: _____

CLAS Standard Practice: _____

Considerations (organizational objectives, challenges, resources, building on an existing plan, working with other external partners, etc.):

Action Steps/Strategies:

1. _____

2. _____

3. _____

Recommended Resources: _____

Standard(s) Your Organization Has Chosen to Focus On

CLAS Standard Theme: _____

CLAS Standard Practice: _____

Considerations (organizational objectives, challenges, resources, building on an existing plan, working with other external partners, etc.):

Action Steps/Strategies:

1. _____

2. _____

3. _____

Recommended Resources: _____

Resources

IPRO Resource Library

All slides and resources for this series can be found here:

[Culturally and Linguistically Appropriate Standards \(CLAS\) Resources](#)

<https://qi-library.ipro.org/2023/02/15/culturally-and-linguistically-appropriate-standards-clas-resources/>



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Mark Your Calendar for Upcoming Session



	Keeping It Simple: Achieving CLAS Noon – 12:00 PM ET	
February 8 th	An Overview of the National CLAS Standards	REGISTER
February 15 th	Principal Standard, CLAS Theme 1: Standard 2 - 4	REGISTER
February 22 nd	CLAS Theme 2: CLAS Standards 5 - 8	REGISTER
March 1 st	CLAS Theme 3: CLAS Standards 9 - 11	REGISTER
March 8 th	CLAS Theme 3, CLAS Standards 12 - 15	REGISTER
March 15th	Additional Resources, Q&A, Wrap-Up	REGISTER



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Health Equity Leads

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Free Training: Nursing Home COVID-19 Preparedness Read More

As the **IPRO QIN-QIO**, we bring together communities of healthcare providers across the care continuum, stakeholders, and patients in data-driven initiatives to achieve national health quality goals.

As the **IPRO HQIC**, we provide targeted quality improvement assistance to small, rural, critical access hospitals, and additional hospitals requiring technical assistance.



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Thank You!



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