Building a Culturally Competent Organization: The Quest for Equity in Health Care

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Culturally Competent Model for Care Delivery

- Cultural competency – “the ability of systems to provide care to patients with diverse values, beliefs and behaviors, including tailoring delivery to meet patients’ social, cultural and linguistic needs.”
- Culturally competent health care systems acknowledge and incorporate:
  - Importance of culture
  - Assessment of cross-cultural relations
  - Recognition of potential impact of cultural differences
  - Expansions of cultural knowledge
  - Adaption of services to meet culturally unique needs
  - Increased diversity of workforce and leadership
  - Strategies to promote diversity in all hiring and recruitment
  - Assessment of bias, stereotypes and prejudice in organizational and leaders’ behaviors
Importance of Culturally Competent Governance and Leadership

- Essential for hospital governance to embrace cultural competency in order to engrain it within hospital culture and make it a priority
- Will provide strong incentive for development of initiatives, policies and procedures that improve cultural competency and ensure delivery of equitable care
Importance of Culturally Competent Governance and Leadership

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• Increasingly important to ensure that hospital leadership and staff reflect diversity of local population
  • Business requirement that will become more important as diversity grows
Regulations, Standards, Laws and Public Trust

• Strong regulatory and legal framework for promoting culturally competent care
  • Title VI of the Civil Rights Act of 1964
  • 1997 Consumer Bill of Rights and Responsibilities
  • HHS Office of Minority Health national standards for culturally and linguistically-appropriate services (CLAS) in health care (2000)
Regulations, Standards, Laws and Public Trust

• Strong regulatory and legal framework for promoting culturally competent care (contd.)
  • 2000 presidential executive order – “Improving Access to Services for Persons with Limited English Proficiency”
  • 2010 Patient Protection and Affordable Care Act
    • Section 1557 – requires covered entities to provide information in a culturally and linguistically appropriate manner
    • Section 4302 – requires all federally funded programs to collect data on race, ethnicity, primary language, disability status and gender
The Business Case for Cultural Competence and Equity

• Improve efficiency by helping patients access appropriate services in a timely fashion
• Eliminating linguistic and cultural barriers can help aid assessment of patients and reduce need for unnecessary and potentially risky diagnostic tests
• Reduction of disparities and increasing diversity can also lead to increased patient satisfaction scores
• Can have positive impact on reduction of avoidable readmissions, medical errors and extended lengths of stay – eliminating unwarranted variations in care
Steps for Building a Culturally Competent Organization

- Collect race, ethnicity and language preference data
- Identify and report disparities
- Provide culturally and linguistically competent care
- Develop culturally competent disease management programs
- Increase diversity and minority workforce pipelines
- Involve the community
- Make cultural competency an institutional priority
Collect Race, Ethnicity and Language Preference Data

• Necessary first step to:
  • Understanding the populations served
  • Tailoring the delivery of care to their patients
  • Obtaining feedback on performance on quality measures across patient populations
  • Developing appropriate quality improvement interventions

• Data standardization important
  • Use the HRET Disparities Toolkit for data collection/reporting

• Self-assessment
  • Do you systematically collect race, ethnicity and language preference data on all patients?
Identify and Report Disparities

• Use quality measures to generate data reports stratified by race, ethnicity and language group to examine disparities in clinical processes and patient experiences

• **Self-assessment**

  • Do you use race, ethnicity and primary language (REAL) data to look for variation in clinical outcomes, resource utilization, length of stay, and frequency of readmissions within your hospital?
  
  • Do you compare patient satisfaction ratings among diverse groups and act on the information?
  
  • Do you actively use REAL data for strategic and outreach planning?
Provide Culturally and Linguistically Competent Care

- Culturally and linguistically competent services include such items as:
  - Cultural competency training for providers and staff
  - Interpreter services and translators
  - Bilingual workforce
  - Diverse community health educators
  - Use of multilingual signage
• **Self-assessment**

  • Have your patient representatives, social workers, discharge planners, financial counselors and other key patient and family resources received special training in diversity issues?

  • Has your hospital developed a “language resource,” identifying qualified people inside and outside your organization who could help your staff communicate with patients and families from a wide variety of nationalities and ethnic backgrounds?

  • Are your written communications with patients and families available in a variety of languages that reflects the ethnic and cultural fabric of your community?
• Self-assessment (contd.)
  • Based on the racial and ethnic diversity of the patients you serve, do you educate your staff at orientation and on a continuing basis on cultural issues important to your patients?
  • Are core services in your hospital, such as signage, food service, chaplaincy services, patient information and communications attuned to the diversity of the patients you care for?
Develop Culturally Competent Disease Management Programs

• Tailor disease management programs to meet medical needs of minority and other high-risk patients
• Address barriers to care that are particularly challenging to minority patients, e.g., limited English proficiency, different health beliefs
Develop Culturally Competent Disease Management Programs (contd.)

- **Self-assessment**
  - Does your hospital gather information to determine conditions of high prevalence within your community’s minority populations?
  - Does your hospital offer disease management programs that effectively address these conditions?
  - Do your disease management programs address the barriers to care that are particularly challenging for minority patients?
Increase Diversity and Minority Workforce Pipelines

- Recognize benefits of diverse workforce
  - Improved marketing to consumers
  - Improve management of multicultural workforce
  - Enhanced communication from greater racial and ethnic concordance among patients and providers, leading to greater trust and improved adherence to medical treatment plans
- Evidence that underrepresented minority providers more likely to practice in underserved communities
Increase Diversity and Minority Workforce Pipelines (contd.)

- **Self-assessment**
  - Does your organization have a mentoring program in place to help develop your best talent, regardless of gender, race or ethnicity?
  - Are search firms required to present a mix of candidates reflecting your community’s diversity?
  - Do your recruitment efforts include strategies to reach out to the racial and ethnic minorities in your community?
  - Do you acknowledge and honor diversity in your employee communications, awards programs and other internal celebrations?
  - Does your human resources department have a system in place to measure diversity progress and report it to you and your board?
Involve the Community

- Engage the broader public through community-based activities and programs
- Consider creating a community-based diversity advisory committee
- **Self-assessment**
  - Has your community relations team identified community organizations, schools, churches, businesses and publications that serve racial and ethnic minorities for outreach and educational purposes?
  - Do you have a strategy to partner with community leaders to work on health issues important to community members?
Make Cultural Competency an Institutional Priority

• Incorporate equity strategies and initiatives into organization’s vision and strategic plan
• With increasing diversity in U.S., provision of culturally competent care will move from being merely an appropriate measure to a national priority

• Self-assessment
  • Has your board set goals on organizational diversity, culturally proficient care and eliminating disparities in care to diverse groups as part of your strategic plan?
  • Is diversity awareness and cultural proficiency training mandatory for all senior leadership, management and staff?
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