

Cultural Competency and Linguistics Training for California Providers



Behavioral Solutions of California

BH2476_11/2019

U.S. Behavioral Health Plan, California doing business as OptumHealth Behavioral Solutions of California

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Training Objectives

OptumHealth Behavioral Solutions of California (“Optum”) offers this training to all California providers.

After completing this course you will have a better understanding of:

- The striking behavioral health disparities that exist for minorities
- The importance and value of cultural competency in behavioral health treatment
- How linguistic challenges can influence Member health and delivery of care
- The impact of provider cultural competency on Member recovery
- How to identify Members with potential cultural or language needs who may require modified communication methods
- The processes and tools that are available to support you and assist in removing barriers to care

Terms and Definitions



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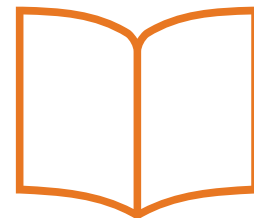
Terms and definitions

For purposes of this training presentation, the following definitions apply:

- **Culture** – the shared values, norms, traditions, customs, arts, history, folklore and institutions of a group of people
- **Cultural Competency** – in health care, this is the communication bridge that enables organizations and practitioners to respond appropriately and directly serve the unique needs of populations whose cultures may be different than the prevailing culture
- **Ethnicity** – of or relating to large groups of people classified according to common racial, national, tribal, religious, linguistic or cultural origins or backgrounds
- **Limited English Proficiency (LEP)** – an inability or a limited ability to speak, read, write, or understand the English language at a level that permits that individual to interact effectively with health care providers or plan employees

Terms and definitions (continued)

- **Linguistic Competency** – an individual’s knowledge and ability to effectively communicate in a language; including an understanding of grammar, structure, semantics and other nuances of a language
- **Mental Health or Behavioral Health** – a person’s condition with regard to their emotional, psychological and social well-being
- **Mental Health Disparity** – an inequality in access to care or the quality of care received based on race, ethnic or cultural origins, or language preference
- **Race** – a classification based on a person's physical characteristics, such as bone structure and skin, hair or eye color
- **Recovery** – “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.” (definition from [SAMHSA](#))



Mental Health Disparities and California's Diverse Member Population

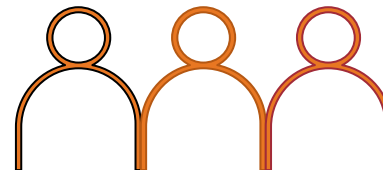


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Mental health disparities

“Mental health disparities” refers to differences in access to services and treatment outcomes for mental health and substance use disorders (MH/SUD) that can occur based on race, ethnicity, social and/or economic status.

- There are often striking disparities for minorities
 - Less access to and availability of MH/SUD services
 - Less likely to receive needed MH/SUD services
 - Often receive a poorer quality of MH/SUD care
 - Underrepresented in MH/SUD research
- These disparities impose a greater disability burden on minorities



California's diverse member population

- At least 44% of Californians speak a language other than English at home. A total of 27% of Californians are foreign-born. There are 220 languages spoken in California.*
- Optum's membership population is very diverse. Members who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English are considered to have Limited English Proficiency, or "LEP."
- Optum makes every effort to contract with a diverse provider network, representing a wide variety of language skills, cultures and ethnicities to serve California's diverse membership.

* Based on 2010 U.S. Census

Cultural Competency



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Elements and components of culture

What contributes to “culture”?

- Collective values, experience, beliefs —beliefs about health and health care, as well as behavioral styles
- Non-verbal communication
- Perspectives, world views, frames of reference
- Community motivation and social identification
- Cultural awareness
- Language – including dialect, tone, slang

Value of cultural competency

In the delivery of MH/SUD services:

- Cultural competency plays a vital role in realizing a goal of supporting a member's recovery and resiliency
- We need to recognize that a person's cultural norms, values and beliefs shape how they use and approach behavioral health care services
- Cultural competency is not about knowing all aspects of cultural variances but rather being open to every culture and aware of how culture will impact the pathway to an individual's recovery
- Cultural competency allows for acceptance and respect of differences
- Development of cultural competency involves ongoing enhancement of our cultural knowledge and resources

Continuing enhancement of cultural competency



These components of cultural competency are all designed to:

- Develop attitudes that value and respect diversity
- Enhance knowledge and awareness of beliefs, behaviors and preventative health practices
- Develop communication skills for members with diverse language needs, including sign language interpreter services
- Develop the ability to address the health needs of Optum's diverse population

The impact of cultural competency on recovery

- The oppression and trauma brought on by racism, sexism, colonization, homophobia, poverty, cultural and language isolation, place individuals at even greater risk for emotional/behavioral problems. **Recovery and healing is an ongoing process and a journey that cannot be taken alone.**
- Recovery requires a strong support network, competent caregivers, resources to provide the services, and an individual who is willing to push him/herself to find the place of healing and recovery. **Most importantly, it requires a belief that recovery is possible.**
- Culture permeates all aspects of an individual's life and must be taken into consideration when providing services. **Failure to understand the importance of culture can result in misdiagnosis leading to inappropriate and poor quality of services.**

Ida, D.J., Lopez, Steve, Lafferty, Paula, McKinney, Jacki, & Running Wolf, Paulette, *Recovery within Diverse Populations* (2007)

Cultural competency and recovery (continued)

- Recovery for mental health and/or co-occurring disorders must also include the notion of healing. This is particularly true for communities of color and those who are lesbian, gay, bisexual, transgender, queer, or intersex (LGBTQI). These are individuals who must not only recover from their mental health disabilities/substance use disorder, but they must also heal the wounds suffered by virtue of their minority status.
- The oppression and trauma brought on by racism, sexism, colonization, homophobia, poverty, cultural and language isolation, place them at even greater risk for emotional/behavioral problems. Recovery and healing is an ongoing process and a journey that cannot be taken alone. **It requires a strong support network, competent caregivers, resources to provide the services, and an individual who is willing to push his/herself to find the place of healing and recovery. Most importantly, it requires a belief that recovery is possible.**

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Cultural competency and recovery (continued)

- Having Peer Services can bring an understanding of the recovery culture into your organization.
 - Education to those who don't believe everyone can be in recovery
 - Peers being advocates for the recovery culture
- Having a diverse population of Peer providers will help remedy behavioral health disparities and promote a recovery culture in your organization
 - American Indian tribes, refugees, LGBTQI, Hispanic, elderly, those with co-morbid disorders
- Peer providers come from different cultures and usually the cultures that are part of the minority cultures



Promoting cultural competency

- Support health literacy: communicate clearly, slow down the pace of the conversation and use simple words to explain the situation
- Value diversity: Consider the member's cultural beliefs in terms of medical situations
- Conduct a cultural self- assessment of your practice
- Be conscious of the dynamics when people from different cultures interact
- Institutionalize cultural knowledge by making it part of your group's policies and procedures
- Adapt service delivery to reflect an understanding of cultural diversity by making changes to help meet the diverse needs of patients.

Cultural competency for providers

As a health care provider, it is important for you to remember to be culturally sensitive to the diverse population you serve:

- All services should be conducted in accordance with Title VI of the Civil Rights Act of 1964 and should be provided in a manner that respects the Member's cultural heritage and appropriately utilizes natural supports in the Member's community
- Remember that statistics do not apply to individuals
- Be aware that there are differences within cultures and from generation to generation
- Evaluate each person using all available cultural "clues"
- Ask questions in a culturally sensitive fashion

Cultural competency for providers (continued)

- Providers are required to deliver services in a culturally competent manner to all members, including those with limited English proficiency and diverse cultural and ethnic backgrounds, and to provide for interpreters in accordance with 42 CFR §438.206
- All providers shall comply with any state or federal law which mandates that all persons, regardless of race, creed, color, religion, sex, age, income, sexual orientation, gender identity, national origin, political affiliation or disability, shall have equal access to employment opportunities, and all other applicable federal and state laws, rules and regulations, including the Americans with Disabilities Act and Title VI



Cultural competency for providers (continued)

- Culturally and linguistically appropriate services are increasingly recognized as effective in improving the quality of care and services. By providing a structure to implement culturally and linguistically appropriate services, the National Standards for Culturally and Linguistically Appropriate Services (CLAS) will improve an organization's ability to address health care disparities.
- [National Standards for Culturally and Linguistically Appropriate Services \(CLAS\) in Health and Health Care](#), published by the U.S. Department of Health and Human Services, provides additional valuable information.



California Language Assistance Program



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California (CA) Language Assistance Program

- The OptumHealth Behavioral Solutions of California Language Assistance Program includes assessment of the language needs of Members, provision of free language assistance services, and monitoring of compliance with the Program
- Language assistance services are available at no cost to you or to covered Members
- Oral interpretation services are available for all language assistance needs
- Providers are required to post written notice in your waiting room regarding the availability of free language services. The notice is available in the Appendix of the *OHBS-CA Network Manual* on providerexpress.com.

CA Language Assistance Program (continued)

- Providers are required to offer interpretation services to Limited English Proficiency (LEP) Members at the time of their initial assessment. This assistance must be offered even if you have self-attested to your ability to conduct treatment in the Member's language and/or when the Member is accompanied by a family Member or friend who can interpret on their behalf.
- The offer of interpretation services, as well as the Member's acceptance or declination of that assistance, must be documented in the treatment record.
- It is also important that you have a process in place for your staff to identify Members who desire language assistance in all contacts.

CA Language Assistance Program (continued)

- To access language assistance services for an identified LEP Member, contact us at **1-800- 999-9585**
- Optum staff will connect you and the Member with the interpretation services vendor, where certified interpreters are available to provide telephonic interpretation services
- California member can also obtain hearing and speech assistance by contacting the impaired line 1-800-842-9489 (TTY)
- Upon request, Optum will also provide translation for member-related written communications, such as Explanations of Benefits, appeal letters, Utilization Management letters, etc., at no cost to members
- Additional information and resources regarding the California Language Assistance Program can be found on providerexpress.com

Resources



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Resources

Additional resources for information on Cultural Competency are:

<https://minorityhealth.hhs.gov/> - U. S. Department of Health & Human Services - Office of Minority Health website. Information on Cultural Competency, and links to: Center for Linguistic and Cultural Competency in Health Care, National CLAS Standards, Think Cultural Health website, Continuing Education.

<https://www.thinkculturalhealth.hhs.gov/education> - U. S. Department of Health & Human Services website. Information on National CLAS Standards, Education including free continuing education e-learning programs, Resources to: Recorded Presentations, Quarterly Newsletters, Case Study Video Units and more.

https://www.nlm.nih.gov/hsrinfo/health_literacy.html - U. S. National Library of Medicine - Health Services Research Information Central website. Health Literacy and Cultural Competence information including: News, Data, Tools and Statistics, Guidelines and Journals, Education, Meetings, Conferences and Webinars, Key Organizations.

<https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/CLAS-Toolkit-12-7-16.pdf> - pdf from the Centers for Medicare and Medicaid Services (CMS) website. A Practical Guide to Implementing the National CLAS Standards: for Racial, Ethnic and Linguistic Minorities, People with Disabilities and Sexual and Gender Minorities, December 2016.

LEP.gov – Limited English Proficiency, a federal interagency website. Promotes importance of language access to federal programs and federally assisted programs.



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