CCH
Cultural Competency in Health

servingohiobetter.org

Ohio Department of Health

CULTURAL COMPETENCY STANDARDS

SELF-ASSESSMENT TOOL

Last updated April 1, 2016

Ohio
Department of Health

ACKNOWLEDGEMENTS

This Assessment Tool was developed for the Ohio Department of Health as part of project *CSP905214: Planning for and Implementing Cultural and Linguistic Competence in State Title V Programs.*

The Standards, Indicators, and Assessment Tool have been adapted from the United Way of Central Ohio Agency Cultural Competence Standards, 2014.
The Ohio Department of Health wishes to express its gratitude for your support during the Cultural Competence Planning process.

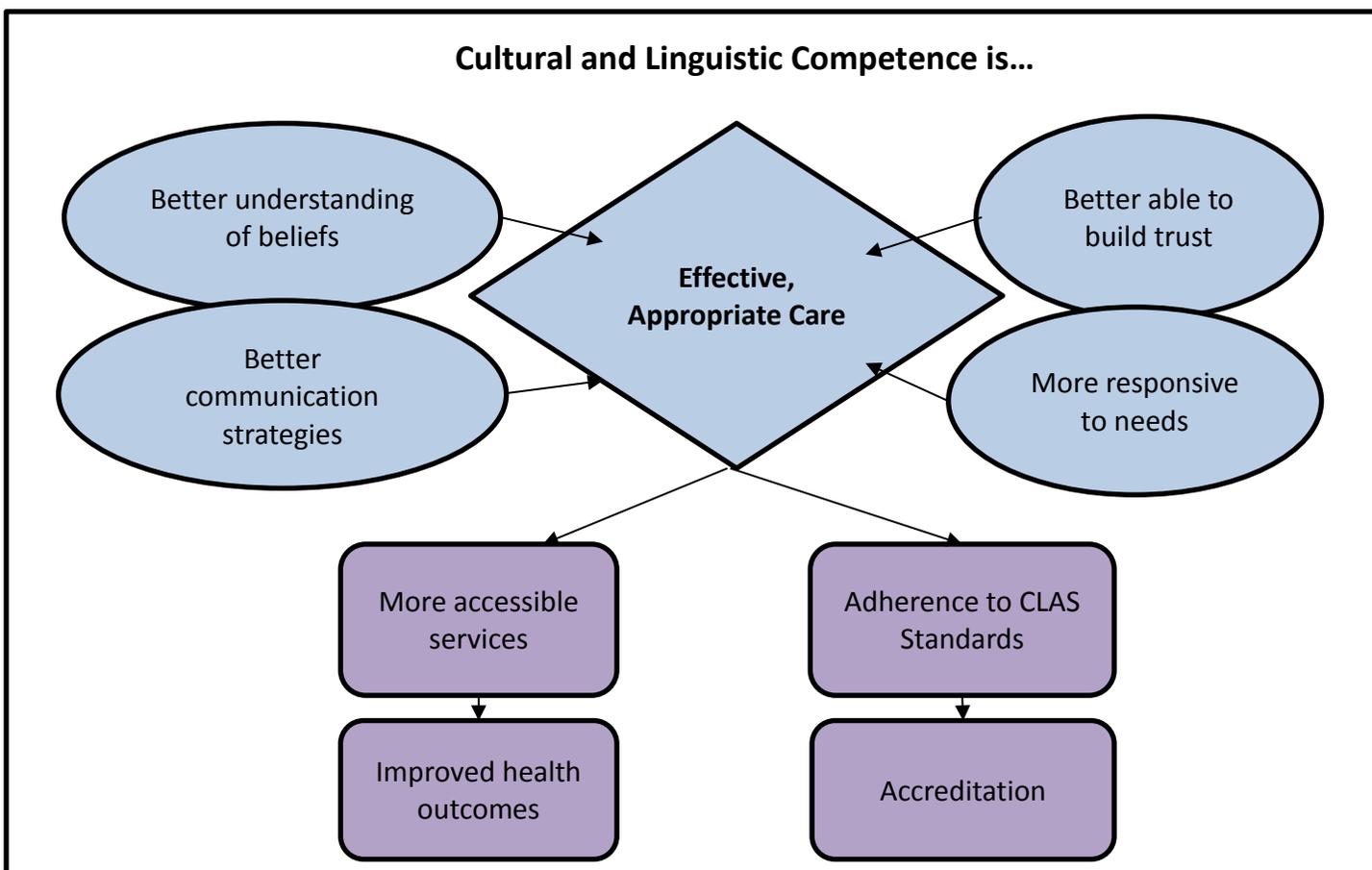*Project Management and Consulting by:*

TABLE OF CONTENTS

BACKGROUND

The state of Ohio, and the nation as a whole, are experiencing rapidly shifting demographic patterns. The minority population in Ohio increased by 20% between 2000 and 2010, and is still growing. According to the Office of Minority Health, a culturally and linguistically competent staff is better able to discuss healthcare beliefs, needs, and preventative care without being hindered by cultural differences or barriers. When service providers are more knowledgeable of and respectful towards the needs and beliefs of diverse patients, they are able to be more responsive to these needs to bring about positive health outcomes.

Effective and targeted services for minorities and individuals with disabilities are also part of a federal mandate under the National Culturally and Linguistically Appropriate Services (CLAS) Standards in Health and Health Care. According to the Office of Minority Health, these CLAS standards establish a blueprint for health and health care organizations to "provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs." The goal of these standards is to advance health equity and improve disparities through effective client engagement and service delivery by health care professionals nationwide.

In response to this changing trend, the Ohio Department of Health (ODH) wanted to create a culturally competent workforce and environment to more effectively engage this growing population and reduce health disparities in Ohio. In order to achieve the department's goals of creating a culturally competent workforce and workplace, an interdisciplinary team of ODH stakeholders came together to develop the ODH Cultural Competency Standards.

Cultural and Linguistic Competence is…

- Better understanding of beliefs
- Better communication strategies
- Effective, Appropriate Care
- Better able to build trust
- More responsive to needs
- More accessible services
- Adherence to CLAS Standards
- Improved health outcomes
- Accreditation

ODH CULTURAL COMPETENCY STANDARDS MODEL

Cultural Competency Standards are **clearly defined benchmarks** that quantify an organization's efforts toward becoming more culturally competent. Standards are designed to be both **outcomes focused** as well as **flexible in their approach** to implementation. Given the diversity of the work units within ODH, this approach ensures that all ODH Offices, Bureaus, and Programs have clearly defined expectations but are able to implement them in a way that is targeted to their needs and work processes. These Standards not only offer guidelines to inform and improve ODH services, they will also assist ODH in **planning and decision making, establishing priorities, building capacity, maintaining accountability, and allocating resources.**

The ODH Standards are twenty-two standards in the following seven categories of department operations:

Standards Categories	Short-term Outcome *The immediate result of implementing the Standards is…*	Long-term Outcome *The long-term effect of our efforts will yield…*
Leadership: How leadership within ODH will develop and support a culturally competent organization.	Cultural and linguistic competency strategies are fully and consistently integrated into policies, practices, procedures and programs throughout the department.	Demonstrated and documented adherence to CLAS Standards ensures ODH is able to obtain and maintain necessary accreditations.
Directives & Governance: Necessary organizational structures to create and sustain a culturally competent organization.		
Reporting & Accountability: How the organization will identify and assess progress towards cultural and linguistic competency strategies.		
Training & Development: How ODH builds and maintains a comprehensive knowledge base of cultural competence concepts, best practices, and strategies.	All ODH employees and subgrantees have baseline knowledge of cultural competency and access to regular capacity-building opportunities to progress through the cultural competency continuum.	
Staff: Critical strategies for building and supporting a workforce that is culturally competent and responsive to client needs.	Staff and programs are more accessible and culturally/linguistically responsive to the diverse needs of clients served by ODH.	Improved Health Outcomes
Service Climate: Required components of programs and services to ensure accessibility by a diverse client base.		
Community Involvement: How ODH will capitalize on and interact with the diverse and extensive knowledge within our community.		

SELF-ASSESSMENT TOOL OVERVIEW

Given that cultural competence is a process, not a destination, this Self-Assessment Tool is designed to assist ODH teams in **understanding their current position on the cultural competence continuum and develop action plans to move toward becoming more culturally competent.** Because this is a new process, teams may find they do not yet meet a cultural competence standard. This is to be expected at this stage of the ODH cultural competency initiative. Teams that desire to become culturally competent but do not have the organizational resources to do so are not penalized but rather supported in obtaining the necessary resources to become culturally competent. Data collected from the self-assessments will assist in identifying resources and the necessary support needed to support the ODH Cultural Competency Standards process as a collective organizational priority.

The following sections of the Assessment tool are included for each Standards Category:
- ✓ Indicators and Key Considerations
- ✓ Standards Rating
- ✓ Explanation Statement
- ✓ Supporting Documents Listing

Indicators and Key Considerations
Indicators and key consideration questions are included for each Standards Category and are designed to help you determine what factors to consider in determining your overall self-rating. These indicators are observable, measureable characteristics that represent achievement of the Standard. Use the key consideration questions to determine your Standards Rating and identify what kind of data/activities you may want to examine and include in your explanation statement.

Standards Rating
Based on your assessment of the indicators, you will rate your team's adherence to the Standard. To recognize the range of progress that fall within meeting and/or not meeting a standard, a six-point scale has been created. The first four points recognize that a team has the capacity to meet the standard and either meets the standard fully, meets the standard in-part, has made attempts to meet the standard but was unsuccessful or does not meet the standard. The fifth point on the scale recognizes that the agency does not have the capacity to meet the standard, and therefore indicates that additional resources are needed. The final point on the scale recognizes that a particular standard is not within a team's scope of work, and therefore cannot be assessed.

Self-Assessment Rating Definitions:

> **Standard Achieved**: Actions have resulted in adherence to standard.

> **Standard Partially Achieved**: Has capacity to meet the standard, and actions have resulted in meeting some aspects of the standard.

> **Attempted to Achieve Standard:** Evidence demonstrates a good faith effort to achieve the standard, but actions have not resulted in adherence to standard.

> **Did Not Achieve Standard:** Has capacity to meet the standard, but has not engaged in actions that result in adherence to standard.

> **Unable to Achieve Standard:** Does not have capacity to engage in actions that will result in adherence to standard.

> **Standard is Not Applicable:** Particular standard is not applicable to this unit's work activity.

Explanation Statement

Each Standard Rating should be accompanied by a statement to explain how you determined your rating. In this section you may want to reference specific activities or data points/documents you reviewed to inform your decision. If you did not meet the Standard or feel that it does not apply, you should include a statement about why or what additional resources/capacity building support you would need in order to meet the Standard.
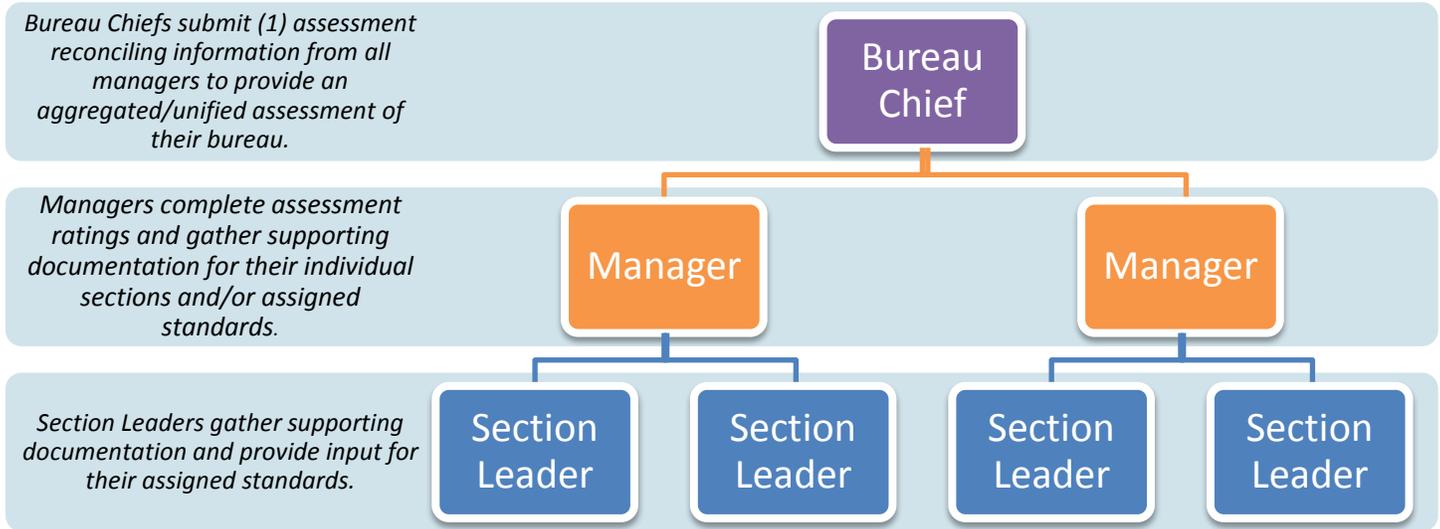
Supporting Documents Listing

For each Standards category, you should list the documents or data sources you reviewed to reach your decision. The ODH Cultural Competency Planning Committee may request these documents to provide further evidence for reporting or to share strategies with other bureaus. The following are potential materials/data sources that may be reviewed and collected during the self-assessment process.

Accommodations	Interview Criteria and Practices
Activities	Meeting Agendas/Minutes/Attendance Records
Best Practices	Participation in Program Development Groups
Budget	Performance Evaluations
Bureau Policies and Procedures	Performance Measures
Client/Stakeholder Demographics	Performance Outcomes
Collaboration Agreements	Program Evaluations
Communication Guidelines	Program/Service Outcomes
Credentials of Staff	Promotion Data and Policies
Data Collection Protocols	Recruitment Strategies and Activities
Data Entry Protocols	Retention Strategies and Practices
Description of Training Offerings	Staff Demographics
Description of products/outputs of the work unit	Strategic Plan
EEO policies	Training Attendance Sheets/Evaluations
Facility Elements (signage, accommodations, etc.)	Training Descriptions and Guidelines
Hiring Criteria and Practices	Vendor/Subcontractor Credentials
Human Resources Policies and Procedures	Vendor/Subcontractor Selection Criteria
Internal and External Program/Activity Reports	Vision and Mission Statements
Internal and External Satisfaction Surveys	

SELF-ASSESSMENT INSTRUCTIONS

The following instructions are a suggested approach to completing the Assessment. Each individual Bureau or work unit should tailor its approach to accommodate their specific needs and processes.

SUGGESTED HIERARCHY OF WORK

Bureau Chiefs submit (1) assessment reconciling information from all managers to provide an aggregated/unified assessment of their bureau.	**Bureau Chief**
Managers complete assessment ratings and gather supporting documentation for their individual sections and/or assigned standards.	**Manager** **Manager**
Section Leaders gather supporting documentation and provide input for their assigned standards.	**Section Leader** **Section Leader** **Section Leader** **Section Leader**

Below are a recommended timelines and strategies for completing the Assessment within a 45-day timeframe. Additional resources to help you with this process can be found in the Cultural Competency Toolkit at www.servingohiobetter.org.

STEP 1 – Convene the Assessment Team

Bureau Chief and 1ˢᵗ Level Managers meet to determine how their Bureau will complete the Assessment Plan.

- ✓ Identify specific tasks
- ✓ Assign responsibility
- ✓ Create internal deadlines

> **DAY 10:**
> **Assessment Plan Developed!**

Sample Meeting Agenda
- Review purpose of the assessment
- Define key terms (i.e. "leadership", "community", "appropriately representative", etc.)
- Develop the Assessment Plan: specific tasks, who is responsible for what, due dates, etc.
- Determine the "Rules of Engagement":
  - o Set an expectation of safety/privacy among the team to promote an honest and more effective assessment process.
  - o Define how the team intends to work together and hold itself accountable to complete the self-assessment within the time period; how information will be organized, frequency of meetings, method of communication method of follow-up, etc. These rules should be documented and disseminated to all team members.

STEP 2 – Communicate Assessment Plan to all Bureau Staff

Each Manager convenes a meeting with their appropriate Section Leaders.

- ✓ Review Assessment Plan and delegate tasks; develop internal due dates
- ✓ Identify needs and sources of documentation
- ✓ Review Rules of Engagement

DAY 15:
Identify list of documentation needed for review!

Sample Meeting Agenda

- Review the Standards and purpose of the Assessment, definitions of key terms (i.e. "leadership", "community", "appropriately representative", etc.) as determined by the Assessment Team (see Step 1)
- Review Assessment Plan developed by the Assessment Team, delegate tasks and develop internal due dates
- Distribute and review the "Rules of Engagement" as defined by the Assessment Team
- Identify sources of documentation:
    - o The team should review the list of materials and data sources identified in this packet (Use Materials/Data Source Checklist) and determine if these materials/data sources exist and if so, where located.

STEP 3 – Implement Assessment Plan

Managers and Section Leaders implement the agreed upon work plan.

- ✓ Review data collected about each indicator associated with a standard
- ✓ Collectively determine assessment rating using the Cultural Competence Standard Rating Form.

DAY 30:
Manager submits Assessment Form to Bureau Chief!

STEP 4 – Complete Final Assessment Document

Bureau Chief reviews Managers' Assessments and consolidates information into overall assessment for the bureau.

- ✓ Convene meeting with Managers to create consensus on the ratings
- ✓ Review documentation to ensure completeness and accuracy

DAY 45:
Bureau Chief submits Assessment to CC Planning Committee!

LEADERSHIP

<u>Self-Assessing the Standards</u>

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table below is for your overall self-assessment of your adherence to each Standard.

- Office/Bureau Leadership actively participates in cultural competence activities and models desired behaviors through their leadership and management practices.
  - o *Have leaders participated in the cultural activities (i.e. diversity exercises, multicultural celebrations, diversity training, etc.) with their team?*
  - o *Can you provide some specific examples of actions leaders have taken to demonstrate a commitment to cultural competence?*
- Office/Bureau Leadership regularly reviews population and workforce data and adjusts strategies/direction to reflect the needs of their constituents.
  - o *Is there an articulated timeframe for reviewing data? Is the data regularly reviewed according to this timeframe?*
  - o *How is this data used?*
- Office/Bureau Leadership ensures their cultural and linguistic competency plan is in alignment with the Public Health Accreditation Board's (PHAB) standards, CLAS Standards, and other Department plans/requirements, and utilizes best practices identified in the CLAS guidebook.
  - o *What inputs/sources were used to develop your cultural and linguistic competency plan?*
  - o *How does your implementation plan support the Department's cultural competence standards and best practices?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
L 1 Office/Bureau Leadership is visible and participates in supporting a workplace and programs that strive towards cultural competence.						
Please provide an explanation for your rating of this standard:						
L 2 Office/Bureau Leaders are knowledgeable of their target populations and demonstrate commitment to the diverse needs of their staff and client base.						
Please provide an explanation for your rating of this standard:						
L 3 Office/Bureau Leaders monitor the development and implementation of actionable policies and improvement plans that adhere to cultural competency standards and best practices.						
Please provide an explanation for your rating of this standard:						

<u>Supporting Documents & Data</u>

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

DIRECTIVES & GOVERNANCE

<u>Self-Assessing the Standards</u>

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table below is for your overall self-assessment of your adherence to each Standard.

- The budget indicates a commitment to developing and sustaining cultural competence efforts as identified by implementation plans (e.g. staff, training & development, program needs, marketing materials, etc.).
  - *What resources were directed to supporting your implementation plan? (financial or otherwise)*
- Cultural competency goals and strategies are communicated to staff via multiple sources (i.e. bulletin board, newsletters, management meetings, etc.).
  - *How has your staff learned about the cultural competency goals and standards?*
  - *Are these goals and strategies visible and/or consistently communicated and reinforced?*
- Development of programs, policies, and services incorporate the diverse experiences and knowledge of staff throughout the organizational structure through an articulated input process.
  - *Are staff aware of the opportunities and mediums for providing feedback/suggestions?*
  - *How is this feedback used as an input during decision-making or strategy development?*
- Cultural competency standards are woven into department policies and procedures.
  - *What are some specific things you have done to incorporate cultural competence into your policies and procedures?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
DG 1 Office/Bureau Leadership allocates available resources to ensure plan implementation and continued efforts are adequately supported.						
Please provide an explanation for your rating of this standard:						
DG 2 Cultural competency standards and accountability indicators are consistently communicated and reinforced to all members of the Office/Bureau as a core agency competency.						
Please provide an explanation for your rating of this standard:						
DG 3 Staff at all levels are engaged in decision-making and strategy development.						
Please provide an explanation for your rating of this standard:						

<u>Supporting Documents & Data</u>

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

REPORTING & ACCOUNTABILITY

<u>Self-Assessing the Standards</u>

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table below is for your overall self-assessment of your adherence to each Standard.

- Performance measures for individuals, programs, and the overall department include written goals and objectives that specify measurable cultural competence outcomes.
    - *Are cultural competence performance measures clear and understood?*
- Routine self-assessments are used to effectively gauge achievement of the ODH Cultural Competence Standards.
    - *Is there an articulated timeframe for performing self-assessments?*
    - *How are these self-assessments used to improve performance?*
- Local funded partners are required to submit a plan which articulates how they are implementing cultural competence/CLAS standards, along with measureable benchmarks.
    - *Is a statement of expectations surrounding cultural competence activities and reporting used in all guidance documents/RFP language for local funded partners?*
- A feedback and communication strategy regularly shares ODH's progress in implementing and sustaining cultural competence strategies to stakeholders.
    - *How is this information shared with stakeholders and at what intervals?*
    - *Which stakeholders have been included in this process?*
- Programs and local funded partners adhere to a culturally competent process for collecting, sorting, and generating client data in a way that is appropriate, not intrusive, and maintains confidentiality.
    - *What changes have you made to adapt your data collection strategies for diverse individuals?*
- Current data collection tools are adapted to better support cultural competence standards, measurements, and accountability.
    - *Does the data collection tool adequately capture data required?*
    - *Can you easily produce reports of this data?*
- Cultural data is regularly reviewed to improve organizational performance.
    - *What process do you use? Who is involved in this review?*
    - *What are you looking for and why?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
RA 1 Cultural competence is a key performance measure for programs and the overall department.						
Please provide an explanation for your rating of this standard:						
RA 2 Adherence to CLAS Standards is a requirement for all local funded partners and programs.						
Please provide an explanation for your rating of this standard:						
RA 3 Office/Bureau Leadership has a clearly defined plan to monitor and report on cultural competence goals, activities, and successes.						
Please provide an explanation for your rating of this standard:						
RA 4 Annual review and analysis of cultural data is used for strategic decision-making.						
Please provide an explanation for your rating of this standard:						

<u>Supporting Documents & Data</u>

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

TRAINING & DEVELOPMENT

Self-Assessing the Standards

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table below is for your overall self-assessment of your adherence to each Standard.

- All staff receive mandatory cultural competence training at appropriate intervals to ensure working knowledge of cultural competence concepts and desired behaviors.
    - *Have staff at all levels participated in training?*
    - *How often is training provided?*
- Cultural demographics of clients served are regularly assessed to anticipate and adapt cultural and linguistic competence training needs.
    - *How are training needs assessed and addressed?*
    - *How is a trainer selected?*
- Have we conducted reinforcement activities on what was learned?
    - *Are cultural competence concepts and strategies discussed during team meetings?*
    - *Has your team led or participated in cultural competence activities identified in the toolkit?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
TD 1 Office/Bureau Leadership and staff at all levels have a working knowledge of cultural competence and CLAS Standards.						
Please provide an explanation for your rating of this standard:						
TD 2 Office/Bureau Leadership and staff create a learning environment to support continuous reinforcement of cultural competence concepts and strategies.						
Please provide an explanation for your rating of this standard:						

Supporting Documents & Data

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

STAFF

<u>Self-Assessing the Standards</u>

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table below is for your overall self-assessment of your adherence to each Standard.

- Best practices for diversifying recruitment and employee performance appraisal strategies are collaboratively identified and adapted to ODH protocols.
  - o *Has your team identified new strategies for recruitment and employee performance appraisal?*
  - o *Who was involved in this process?*
- Interviewing for new positions utilizes a diverse interview panel and a standardized list of diversity & inclusion related interview questions.
  - o *How have you modified your current interview process to make it more inclusive?*
- The Department has a process for considering flexible human resource policies that support multicultural staff needs (i.e. vacations, time off, meeting scheduling, etc.).
  - o *Are you using industry best practices?*
  - o *Is there a mechanism for staff feedback/input on these policies?*
- Employee feedback mechanisms (i.e. focus groups, surveys, etc.) are used to assess the degree to which staff are satisfied and feel supported in their roles.
  - o *Can you provide some specific strategies you have used to assess employee satisfaction among your team?*
  - o *How did you report the results to your employees and identify next steps?*
- Questions are added to exit interviews that assess employee's perception of cultural competency efforts and their impact.
  - o *Have you incorporated cultural competency questions into your exit interviews?*
  - o *How is this feedback being used?*
- Staff are provided population and workforce data (or other relevant data) and develops strategies to reflect the needs of their constituents.
  - o *Is there an articulated timeframe for reviewing data? Is the data regularly reviewed according to this timeframe?*
  - o *How is this data used?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
S 1 The Office/Bureau works to recruit, promote, and support a diverse workforce that is representative of the general population and the targeted populations.						
Please provide an explanation for your rating of this standard:						
S 2 The Office/Bureau supports employee retention and satisfaction by regularly assessing perceptions and attitudes of its workforce.						
Please provide an explanation for your rating of this standard:						
S 3 Staff are knowledgeable of their targeted populations and demonstrate commitment to the diversity of the staff and clients who represent those targeted populations.						
Please provide an explanation for your rating of this standard:						
S 4 Cultural competence is a key performance measure for individual employees.						
Please provide an explanation for your rating of this standard:						

<u>Supporting Documents & Data</u>

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

SERVICE CLIMATE

<u>Self-Assessing the Standards</u>

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table below is for your overall self-assessment of your adherence to each Standard.

- Materials and signage at all public ODH sites are adequately translated in languages and mediums most representative of the consumer base as determined by available data.
  - o *How did you determine which groups to include?*
- Clients are consistently made aware of language services available to them both in person and on the phone.
  - o *Does staff have knowledge of and access to necessary language services?*
- Signage, waiting area, office space, class rooms, websites, and reading materials are reflective and respectful of the all constituents.
  - o *What has been done to ensure accommodation of persons with physical or functional disabilities?*
  - o *Does the physical atmosphere of ODH space reflect an appreciation for diversity?*
- The Office/Bureau and local funded partners have a process for considering ethnic holidays and traditions when organizing client, staff, and volunteer activities or programs.
  - o *What cultures/ethnicities does your process include?*
  - o *How did you determine which groups you consider?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
SC 1 Materials and services communicate with clients in a language and format that is intelligible and welcoming to ODH services.						
Please provide an explanation for your rating of this standard:						
SC 2 Clients have access to bilingual personnel and/or interpreter services while interacting with ODH staff.						
Please provide an explanation for your rating of this standard:						
SC 3 Location and design of events/activities is both accessible and comfortable for diverse clients and staff.						
Please provide an explanation for your rating of this standard:						
SC 4 Office/Bureau Leadership, staff, and local funded partners are sensitive to multicultural customs and practices in scheduling, defining and enforcing internal policies, and conducting activities.						
Please provide an explanation for your rating of this standard:						

<u>Supporting Documents & Data</u>

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

COMMUNITY INVOLVEMENT

Self-Assessing the Standards

Indicators and key consideration questions below are designed to help you determine what factors to consider in determining your overall self-rating for these Standards. The table above is for your overall self-assessment of your adherence to each Standard.

- Development of programs, policies, and services utilize levels of collaboration that are mutually beneficial and involve groups representative of the diverse consumers/customers in the target service area.
  - *How do you determine who to partner with and for what?*
  - *What is the nature of these partnerships?*
- The Office/Bureau's public relations materials accurately and respectfully depict members of the constituents and targeted service area, and are presented in a way that is easily understood by the target audience.
  - *Do you adhere to the Plain Language Guidelines?*
  - *How did you determine which groups to include?*
  - *Do the materials reflect an appreciation and respect for diversity?*
- The Office/Bureau has a process to incorporate client feedback in program development when possible.
  - *Who is engaged?*
  - *How are clients engaged and at what intervals?*
  - *Who is responsible for collecting this feedback?*

Check the appropriate box to indicate your self-rating for each Standard.	Standard Achieved	Standard Partially Achieved	Attempted to Achieve Standard	Did Not Achieve Standard	Unable to Achieve Standard	Standard Not Applicable
CI 1 Staff, Office/Bureau Leadership, and partners are collaboratively involved in creating and maintaining culturally competent services.						
Please provide an explanation for your rating of this standard:						
CI 2 ODH creates partnerships with organizations and coalitions that are reflective of targeted populations.						
Please provide an explanation for your rating of this standard:						
CI 3 The Department's outreach and public relations strategies are culturally and linguistically appropriate/sensitive.						
Please provide an explanation for your rating of this standard:						
CI 4 Clients and program participants have input in developing/enhancing services and programs.						
Please provide an explanation for your rating of this standard:						

Supporting Documents & Data

Please list the documents or data points (if any) that can be provided to support your rating and explanation.

GLOSSARY OF TERMS

Bilingual: A term describing a person who has some degree of proficiency in two languages. A high level of bilingualism is the most basic of the qualifications of a competent interpreter but, by itself, does not ensure the ability to interpret.

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.

CLAS Standards: The framework for culturally and linguistically appropriate services issued by the U.S. Department of Health and Human Services, Office of Minority Health. The National CLAS Standards are intended to inform, guide, and facilitate practices related to culturally and linguistically appropriate health service delivery.

Cultural and Linguistic Competency (CLC): The capacity for individuals and organizations to work and communicate effectively in cross-cultural 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.

Culture: 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. Culture is dynamic in nature, and individuals may identify with multiple cultures over the course of their lifetimes.

Disability: A physical, sensory, emotional, or cognitive impairment that substantially limits a major life activity and fulfilling of social roles.

Diversity: A collective mixture characterized by differences and similarities that are applied in pursuit of organizational objectives. Workforce diversity includes race, sex and gender identity, ethnicity, physical ability, religion, belief systems, sexual orientation, age, parental status, economic status, geographic background, etc.

Health Literacy: The degree to which an individual has the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

Multi-cultural: Of, relating to, or including several cultures.

Plain Language: A strategy for making written and oral information easier to understand; communication that users can understand the first time they read or hear it. A plain language document is one in which people can find what they need, understand what they find, and act appropriately on that understanding.

CONTACT INFORMATION

For Questions or Technical Assistance, please contact members of the CC Planning Team:

Robyn Taylor, Office of Health Policy & Performance Improvement
(614) 644-2534
Robyn.Taylor@odh.ohio.gov

Chip Allen
Chip.Allen@odh.ohio.gov

David Ellsworth
David.Ellsworth@odh.ohio.gov

Vivian Jackson-Anderson
Vivian.Anderson@odh.ohio.gov

Brandi Robinson
Brandi.Robinson@odh.ohio.gov

Theresa Seagraves
Theresa.Seagraves@odh.ohio.gov

Stanley Sikorski
Stanley.Sikorski@odh.ohio.gov