

## Best Practice Standard: Responsive Practice

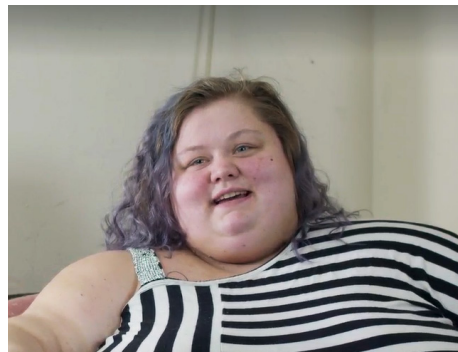
Provide effective, equitable & respectful care and services that are responsive to every person's cultural health beliefs and practices, communicated in people's preferred languages, promotes health literacy, and meets other communication needs.\*

### Think about...

1. There are clear examples of people who did not have interpreters offered to them or when they felt that their beliefs were ignored. What is the effect of this from the point of view of the person seeking services?
2. What are some examples of when providers did respond to the person's cultural health beliefs and practices, preferred languages, health literacy, or other communication needs?

### Reflect...

4. What does effective, equitable, and respectful quality care look like?
5. Think about your own practice and those of your agency or organization. What are you already doing that models this best practice?
6. What will you do to move towards providing practice that is responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs. What are your concerns?



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*\*Adapted from the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care (U.S. Dept. of Health & Human Services, Office of Minority Health) are intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health care organizations to implement culturally and linguistically appropriate services.*

## Best Practice Standard: LEADERSHIP, & WORKFORCE

Leadership actively promotes the provision of care that is culturally and linguistically responsive through policy, practices, budget allocation, and by recruiting and supporting a diverse workforce that is responsive to all populations being served.\*

### Notice...

1. What policies or institutional rules do the participants identify as inequitable or unfair?
2. What are some policies and practices currently in place that have created access barriers, including language and communication access?
3. What do participants say about the workforce – care providers, teachers, administrators?
4. What do participants identify as ways to improve leadership and create a more culturally responsive workforce?

### Reflect...

5. How can organizational leadership promote culturally and linguistically appropriate services and health equity? What can individual staff do?
6. What steps can your organization take to ensure your board, administrators, and workers reflect the diversity of your community?
7. Look at your organization. What steps can you and your organization take in terms of policy, budget, and workforce recruitment and development to improve equitable access to services?



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## Best Practice: COMMUNICATION AND LANGUAGE ASSISTANCE

Offer no-cost, timely and highly-quality language assistance (such as trained interpreters) to any person with a communication need. This will ensure timely access to all care & services. Inform all people of available language assistance services and provide easy-to-understand materials & signage in languages most used by the populations you serve.\*

### Notice...

1. How do participants describe the lack of communication accommodations from their providers? What happens when they cannot access the materials or understand their care?
2. What do participants say is helpful so they can know about options for language assistance?
3. What resources or approaches helped and improved their access to care?

### Reflect...

5. What are the some of the consequences of not providing health information that is understandable or not providing language assistance services at provider visits?
6. What can you or your organization do to improve language and communication access? What changes could be made to improve systems in your organization? What are the major barriers?



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## Best Practice ENGAGEMENT, CONTINUOUS IMPROVEMENT, & ACCOUNTABILITY

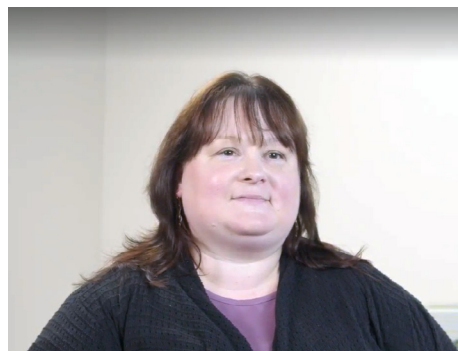
Collect and frequently review data relative to cultural and linguistic competency throughout your organization. Track demographic information and ensure that it is used to promote greater equity. Partner with the community to plan, implement, and assess policies, practices, & services. Create culturally & linguistically appropriate conflict and grievance resolution processes\*

### Notice...

1. What did participants say about surveys and assessments that were designed to get their feedback about their experiences?
2. What did participants say about engaging them to identify problems and make system improvements? What could help them be more engaged?
3. How did participants feel about attempts to gain their feedback?

### Reflect...

5. Does your agency actively solicit customer feedback for health services and do you make attempts to accommodate everyone in those activities? What are some ways that process could be improved?
6. Look at your organization. What are you already doing that models this principal? What changes could be made to improve your solicitation of feedback from underrepresented individuals you serve?



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