
HERITAGE PROVIDER NETWORK
&
AFFILIATED MEDICAL GROUPS
CULTURAL AND LINGUISTIC PROGRAM

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Approval Signature:



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PURPOSE

Heritage Provide Network and its affiliated Medical Groups are committed to establishing multicultural principles and practices throughout our organizational systems of services and programs. We strive to reduce healthcare disparities and increase access by providing high quality, culturally competent healthcare. A key component of this goal is our desire to provide high quality healthcare to our member's irrespective of their ethnic, cultural, religious beliefs, or language.

POLICY

To ensure effective communication regarding treatment, diagnosis, medical history, and health education by providing cultural, linguistic and sensory appropriate interpretation and translation services to members, taking into consideration members' beliefs, traditions, customs, and individual differences.

Heritage Provider Network and its affiliated Medical Groups will take actions to ensure the provision of health services is not influenced by members' race, ethnicity, national origin, religion, sex, age, mental or physical disability or medical conditions, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), disability, genetic information, or source of payment.

Members are entitled to dignified, appropriate, and quality care. Heritage Provider Network is committed to the development, strengthening and sustaining of healthy provider/member relationships. Towards this end, our goal is to provide services to all of our members that:

1. Recognize value, affirm, and respect the worth of individual members;
2. Protect and preserve the dignity of people of all cultures, races, ethnic backgrounds, sexual orientations, physical or medical disability and religions;
3. Are culturally and linguistically competent.

GOALS AND OBJECTIVES

The objectives of Heritage Provider Network and its affiliated Medical Groups are:

1. To relay to providers their responsibility to provide competent health care that is culturally and linguistically sensitive.
2. To provide members access to quality health care services that are culturally and linguistically sensitive.
3. To educate and facilitate communication to develop partnerships among providers and Heritage Provider Network in an effort to enhance cultural awareness.
4. To identify members with cultural and/or linguistic needs through demographic information and develop mechanisms to utilize this information in program planning and service delivery.
5. To provide competent translation/interpreter services to our members who require these services in their preferred language.
6. To provide our members with Limited English Proficiency (LEP), the assistance they need to understand the care being provided and to accomplish effective interactions with their health care providers.

STANDARDS FOR THE PROVISION OF CULTURALLY & LINGUISTICALLY COMPETENT CARE

Heritage Provider Network strives to provide high quality, culturally sensitive services through identification, delivery, and continual monitoring of members' needs. To accomplish this, Heritage Provider Network continually develops its cultural competence program objectives and activities based on the National Standards on Culturally and Linguistically Appropriate Services (CLAS), as developed by the Department of Health and Human Services, Office of Minority Health.

The CLAS Standards serve as a key source for guidelines for providing culturally sensitive services which promote 15 standards organized by themes:

1. Principal Standard (Standard 1)
2. Governance, Leadership, and Workforce (Standard 2 - 4)
3. Communication and Language Assistance (Standard 5 - 8)
4. Engagement, Continuous Improvement, and Accountability (Standard 9 -15)

The CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to:

Principal Standard:

1. 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.

Governance, Leadership, and Workforce:

1. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
2. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
3. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

Communication and Language Assistance:

1. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
2. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
3. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
4. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Engagement, Continuous Improvement, and Accountability:

1. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.

2. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.
3. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
4. 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.
5. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.
6. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
7. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

CULTURAL & LINGUISTIC COMPETENCE

For healthcare providers, cultural and linguistic competence can simply be defined as, "The ability of health care providers and health care organizations to understand and respond effectively to the cultural and linguistic needs brought by the patient to the health care encounter"

Cultural Competence activities include:

1. Cultural competency education and skills development;
2. Self-assessments for providers, staff and systems (organizations);
3. Implementation of objectives and activities to ensure that governance, administrative policies and practices, and clinical skills and practices are responsive to the culture and diversity within the populations served.

We acknowledge that cultural competence is a developmental process that evolves over an extended period. Both individuals and organizations are at various levels of awareness, knowledge and skills along the cultural competence continuum. These practices must be evaluated regularly and made subject to a process of continuous quality improvement.

The Need for Culturally Competent Services

Failure to use culturally competent and linguistically competent practices could result in the following:

1. Compromised quality of care;
2. Disparities in health outcomes;
3. Unnecessary tests
4. Medication errors
5. Readmissions
6. Feeling of being insulted or treated rudely;
7. Reluctance and fear of making future contact with the office;
8. Confusion and misunderstanding;
9. Non-compliance;

10. Unfilled prescriptions;
11. Missed appointments;
12. Misdiagnosis due to lack of information sharing;
13. Increased grievances or complaints.

CULTURAL COMPETENCY DEVELOPMENT & TRAINING

The road to developing a culturally competent practice begins with the recognition and acceptance of the value of meeting the needs of our members. Heritage Provider Network is committed to helping its staff, providers and other stakeholders in the care delivery process reach this goal. Heritage Provider Network will inform providers of Cultural competency resources in the: Annual update through website links, newsletters, and blast facsimiles.

In addition, Heritage Provider Network asks its staff and network providers to take into consideration the following as they provide care to the Heritage Provider Network members:

1. What are your own cultural values and identity?
2. How do or can cultural differences impact your relationship with your patients?
3. How much do you know about your patients' cultures and languages?
4. Does your understanding of culture take into consideration values, communication styles, spirituality, language ability, literacy, and family definitions?
5. Do you embrace differences as allies in your patients' healing process?

Education and Training

1. **Heritage Provider Network Staff:** All new Heritage Provider Network employees will receive cultural competency training as a part of their new employee orientation process. Annually, the affiliated Medical Groups will coordinate and document the provision of their staff and provider network trainings for cultural and linguistic requirements and available resources in accordance with state and federal regulations.
2. **Providers:** Heritage Provider Network's affiliated Medical Groups provide a cultural competence training program to educate providers on the key components of cultural and linguistic competent care and defines expectations for performance, highlight's linguistic/translation services, and provide useful references for developing cultural competence. The affiliated Medical Groups will alert providers of cultural competency development opportunities and update through provider newsletters and other communications.

DISABILITY COMPETENCY TRAINING

Disability Competency Training will be provided in multiple formats and include the following:

1. Various types of chronic conditions prevalent within the target population;
2. Awareness of personal prejudices;
3. Legal obligations to comply with the Americans with Disabilities Act (ADA) requirements and Section 504 of the Rehabilitation Act;
4. Definitions and concepts, such as communication access, alternative formats, medical equipment access, physical access, and access to programs;
5. Types of barriers encountered by the target population;
6. Training on person-centered planning and self-determination, the social model of disability, the independent living philosophy, and the recovery model;
7. Use of evidence-based practices and specific levels of quality outcomes;

8. Use of culturally sensitive practices and access for beneficiaries requiring threshold languages;
9. Working with members with mental health diagnoses, including crisis prevention and treatment; and;
10. Working with members with substance use conditions, including diagnosis and treatment.

DELIVERY OF CARE AND SERVICES EXPECTATIONS

The development and implementation of our Cultural Competency Plan is part of a collaborative effort between Heritage Provider Network and its providers to deliver and provide culturally and linguistically appropriate care to our enrollees. Heritage Provider Network also offers a choice of providers with cultural and linguistic expertise.

Cultural competency more than just a part of the care delivery process; it is an expectation. Some specific expectations for the delivery of care and services are outlined below.

Culturally Competent Care & Services
<p>Heritage Provider Network expects the provider to be aware of cultural differences and the potential impact of those cultural differences on provider and patient communication and quality of care:</p> <ol style="list-style-type: none"> 1. Heritage Provider Network Health expects the provider to acquire cultural knowledge and skills to understand the needs of the populations they serve. 2. Heritage Provider Network Health expects the provider to ask questions relevant to how the family and culture values might influence the patient's health care perceptions and needs. 3. Heritage Provider Network Health encourages the provider to listen to the patient's opinion in considering treatment options.

INTERPRETIVE AND TRANSLATION SERVICES

Heritage Provider Network has a linguistically diverse population. To meet the linguistic needs of our enrollees, Heritage Provider Network has bilingual staff available to provide culturally sensitive information and to provide the linguistic skills required for meeting the needs of our members, including one-on-one communication and access to interpreter services. Furthermore, Provider credentialing applications include a question about other languages spoken by providers to indicate their linguistic diversity.

Heritage Provider Network and its affiliated Medical Groups discourage the use of friends or family as interpreters, *particularly* minors, unless: it is requested by the member; will not compromise effectiveness of services; will not violate a member's confidentiality; or the member is advised that an interpreter is available at no cost.

Heritage Provider Network and its affiliated Medical Groups must accommodate the communication needs of all qualified members with disabilities, including the member's authorized representative, and facilitate alternative format requests for Braille, audio format, large print (no less than 20 point Arial font), accessible electronic format (such as a data CD), and requests for other auxiliary aids and services as appropriate.

Heritage Provider Network shall, at no cost to members, provide linguistic interpreter services and interpreter services for the deaf or hard of hearing at all key points of contact, including telephone, advice, urgent care transactions, outpatient encounters, all sites utilized by Health Network or any subcontractors, as well as member services, orientations, appointments setting and administrative functions, as necessary (See Attachment A).

Heritage provides centralized **24-hour phone access to interpreter services**, including sign language interpreter services at **Key Points of Contact** (*Key Points of Contact: service sites that provide members with access to health care services, both medical [urgent care or face-to-face encounters with providers] and non-medical [Member services, appointments or orientation meetings]*): **(877) 225-6784**

Heritage will use the 24-hour phone interpreting service as a supplement to live interpretation, and will mobilize qualified staff or contact a qualified interpreting agency, or language appropriate community based organization to meet its interpreting needs; rather than rely solely on telephone interpretation.

EVALUATION AND ASSESSMENT

Assessment

In order to identify the cultural, racial, ethnic and linguistic needs and preferences of its members, as well as the needs of individuals with disabilities, Heritage Provider Network conducts a population needs assessment and analysis annually. The assessment may include data and information from the following sources:

1. United States Census data;
2. Heritage Provider Network enrollment files;
3. Patient Assessment Survey or other member satisfaction surveys;
4. Member complaints, grievances, and appeals, and
5. Other relevant data sources.

Heritage Provider Network will also conduct an assessment and analysis of network provider / practitioner availability by location (Geo-Access report). This report, coupled with information from the population assessment, will be used to identify any current or forecasted member needs or gaps in services to specific population segments.

Monitoring

Heritage Provider Network also monitors the delivery of care and services in relation to the provision of culturally competent services through a comprehensive set of quality data and information sources that include:

1. Member Satisfaction Surveys;
2. Staff, vendor, and stakeholder feedback;
3. Member communications such as complaints, grievances and/or appeals.

Data, information, and survey results are analyzed and evaluated annually to identify opportunities for improvement.

Attachment A

Heritage Provider Network will provide the following interpretive and translation services when delegated:

Service	Description	Access
TDD/TTY Access	<ul style="list-style-type: none"> • Assists the hearing and speech impaired. • CALIFORNIA RELAY • LIFE SIGNS 	Available 24 hours a day, 7 days a week. Voice: <ul style="list-style-type: none"> • English: 1-800-735-2922 or 1-800-855-7100 or 711 • Spanish: 1-800-855-3000 or 1-800-855-7200 or 711
L.A.C Sign Language Interpreter	<ul style="list-style-type: none"> • Contracts with American Sign Language Interpreting (ASL) vendor to provide 24-hour ASL services at no cost to member. 	Available 24 hours a day, 7 days a week.
Language Line Services/ Member Services Staff	<ul style="list-style-type: none"> • Provides assistance to providers and members in communicating with each other during urgent/emergent situations, non-urgent/emergent appointments as requested, or when there are no other interpreters available for the language requested. • Heritage Provider Network provides customer service in English and in the threshold languages. 	<ul style="list-style-type: none"> • Available 24 hours a day, 7 days a week • Accessed through Member Services during regular business hours or the member is directed to the Health Plan LAP service.
Written Material	<ul style="list-style-type: none"> • Materials are available in threshold languages, upon requests. • Request for Alternative Formats are made through Member Services phone and TTY/TDD lines. 	Upon request of the member, provider, or designee.
Member Mailings	<ul style="list-style-type: none"> • Mailings are sent in English and in the threshold languages • The Evidence of Coverage has been translated in the threshold languages. 	We offer translation of material upon request, on an as-needed basis.

Attachment B

Additional Resources

Heritage Provider Network encourages its staff and providers to learn more about how to provide culturally and linguistically competent care. Listed below are some helpful resources.

Resource	Website
U.S. DHHS Office of Minority Health; Cultural Competency Section	http://www.minorityhealth.hhs.gov/
Cigna Health Plan	http://www.cigna.com/healthcare-professionals/resources-for-health-care-professionals/health-equity
The American Medical Association (AMA) <ul style="list-style-type: none">• Veterans' Health Resources for Medical Professionals	https://www.ama-assn.org/delivering-care/population-care/veterans-health-resources-medical-professionals
National Library of Medicine	https://www.nlm.gov/training/class-catalog/providing-multilingual-and-multicultural-health-information
U.S Department of Health and Human Services Health Resources and Services Administration	http://www.hrsa.gov/culturalcompetence/index.html
National Center for Cultural Competence	http://nccc.georgetown.edu/
A Physician's Practical Guide to Culturally Competent Care	https://cccm.thinkculturalhealth.hhs.gov/