

Delivering Culturally Competent Care



Learning Objectives

By the end of this workshop, participants will be able to...

- Understand terms and definitions related to cultural competence
- Understand the importance of delivering culturally competent care
- Have familiarity with appropriate terminology regarding people with disabilities
- Know the proper etiquette used when interacting with people with disabilities (PWD)
- Understand the need for language services
- Know how to find additional resources to deliver culturally competent care

Introduction

Kaiser Foundation Health Plan of Mid -Atlantic States, Inc. serves some of the most diverse populations in the nation. We believe that by understanding our members' racial and ethnic backgrounds and their cultural and communication preferences, we can customize our care delivery system and services by allocating appropriate resources to meet their specific needs.

Kaiser Foundation Health Plan of Mid -Atlantic States, Inc. is proud of the many resources and programs developed to increase cultural and linguistic competence.

Definition of Culture

The set of beliefs, values, customs, actions, thoughts, communications, institutions, and ideas shared by racial, ethnic and social groups.

The steadily increasing diversity of the United States affects health care providers and institutions, from small rural towns to large urban centers. The impact of this diversity means that every day, health care providers encounter, and must learn to manage, *complex differences* in communication styles, attitudes, expectations, and world views.

Culture is a crucial component in both *how the clinician delivers medical care* and *how the patient responds to medical interventions*. Delivering culturally appropriate medical care requires becoming familiar with the many aspects of culture that influence patients' health values, beliefs, behaviors and expectations for treatment.

How Culture Affects Patient Care

Cultural background influences:

The lens
that is used
to understand
daily events

How we
communicate –
verbal and
non-verbal

What we
expect
from others

Understanding cultural background can:

Increase our
understanding
and appreciation
for our own background

Improve communication
between individuals
from diverse backgrounds

Cultural Competence

A set of behaviors and attitudes, as well as a culture within an institution or system, that respects and takes into account the cultural background, cultural beliefs, and values of those served and incorporates this into the way services are delivered.

Source:

Turnock, B.J. (2004). Public Health: What it is and How it Works (3rd ed.), *Public Health & The Health System* (pp109).



Barriers to Accessing Health Care

Culture affects individual and collective experiences that are directly and indirectly related to health. Examples of cultural influences on patient health beliefs and behaviors can be found in patients' perceptions, preferences, communication norms, and prioritization of needs, as well as in their understanding of physical and mental illness and of the roles of the individual, family, and community.

Common Cultural Factors that act as barriers to accessing health care include:

- Religious background
- Food preferences
- Concepts of disease, sickness and health
- Eye contact
- Touch
- Language

Culturally and Linguistically Appropriate Services (CLAS) Standards

CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health care organizations to implement culturally and linguistically appropriate services.

The first set of CLAS standards were released in December, 2000. In 2013, the enhanced CLAS standards were developed to address and provide an even stronger framework in providing culturally and linguistically appropriate services.

Kaiser Permanente adopted the standards and embraced them as being integral to the delivery of high quality care for all our members.

Tips on Providing Culturally Competent Care

The following guidelines emphasize promoting skill sets for establishing a relationship based on [respect and empathy for cultural and racial diversity](#) as the basis for exchange and engendering trust. In addition, they offer a framework to avoid the pitfalls of stereotyping and generalizing about subgroup beliefs, practices and behaviors.

- Assess the cultural norms, values and customs that influence the patient's health seeking behaviors, practices and expectations.
- Develop communication skills that are respectful of the patient's cultural norms, values and language to facilitate empathy in the clinical encounter.
- Acknowledge that personal, professional and institutional factors can affect aspects of clinical decision-making which, in turn, may lead to disparities in care.
- Take proactive steps to adapt institutional and system processes that support clinical practice aimed at delivering clinically appropriate and culturally responsive care.

Practitioners must recognize that developing knowledge and skills to deliver patient-centered care to culturally diverse populations is an ongoing developmental process that requires gaining a certain level of awareness, reflecting on current practice and taking actions to continually modify care delivery processes.

Disabilities



Disabilities



People with disabilities can have a number of disabling conditions, including:

- Mobility impairments
- Blindness and visual impairments
- Deafness and hearing impairments
- Cognitive disabilities
- Speech and language disorders

Effective Interaction: Talking or Writing About Disabilities

Use “person first” language (refer to the individual first, then his or her disability).

Do use....	Don't use....
✓ person with disability	handicapped; crippled; afflicted; victim
✓ people without disabilities	normal; able-bodied; healthy
✓ person who uses a wheelchair	wheelchair bound; confined to a wheelchair
✓ person with a mental disorder	crazy; psycho; mental case
✓ person with a developmental disorder	retard; retarded; slow
✓ person who is deaf	deaf-mute; deaf and dumb

Effective Interaction: Communicating With and About People with Disabilities in the Workplace

It is human nature and not unusual to be concerned about interactions with people who use wheelchairs, who are blind, who are deaf, or whom we find difficult to understand. We may be concerned that we will say the wrong thing, ask an inappropriate question, or unintentionally offend. We do not want to appear uninformed or insensitive.

Appropriate etiquette when interacting with people with disabilities is based primarily on respect and courtesy.

The basics when interacting with people with disabilities

- Ask before you help
- Don't make assumptions
- Speak directly to a person with a disability, not to his/her companion or sign language interpreter

Mobility Impairments

- Mobility impairments can substantially limit one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying, as a result of a congenital condition, injury or amputation. Some people experience limited mobility due to non-visual factors such as epilepsy, respiratory disorders, heart disease or other medical conditions.
- People with mobility impairments often use assistive devices or mobility aids such as canes, crutches, prosthesis, and/or wheelchairs.

Tips for Interacting with People with Mobility Impairments

When introduced to a person with disability, it is appropriate to offer to shake hands. People with limited hand use or who wear an artificial limb can usually shake hands.



For those who cannot shake hands, touch the person on the shoulder or arm to welcome and acknowledge their presence.

Visual Impairments

Visual impairment is the consequence of a functional loss of vision, rather than the eye disorder itself. The terms “partially sighted,” “low vision,” “legally blind,” and “totally blind” are used to describe individuals with visual impairments.

Many people with serious visual impairments can travel independently, using a wide range of adaptive tools and techniques. A small number of people employ guide dogs to assist in mobility.

Communication with people who are visually impaired may require written material in alternative formats (e.g., large print, Braille, audio format).

Tips for Interacting with People who are Blind or Visually Impaired

- Identify yourself before you make physical contact.
- If a person needs guidance, offer your arm or shoulder.
- If the person has a guide dog, walk on the opposite side of the dog.
- Don't touch a person's cane or guide dog without their permission. It's a part of his/her personal space.
- Describe settings, obstacles, or possible hazards in the path of travel.
- If you are giving directions, be very specific.
- Offer to read written information.
- In a waiting room setting, a member may not know where to go when their name and/or number is called or may not be able to see when their name and/or number is displayed on a message board. Please walk over to the member to offer assistance and offer to guide them to receive their health care service or to alert them that a service is ready.

Hearing Impairment

The term hearing impairment is usually reserved for people who have relative insensitivity to sound in the speech frequencies. The severity of a hearing impairment is categorized according to how much louder a sound must be made over the usual levels before the listener can detect it. In profound deafness, even the loudest sounds may not be detected.

Effective communication with people who are hearing impaired may require the use of interpreters or assistive technology.

Tips for interacting with people who are deaf or hard of hearing

- Maintain eye contact.
- Do not cover your mouth.
- Speak clearly.
- There is no need to shout.
- Use a different word to convey your message.



Cognitive Disabilities

Affect memory, perception, problem solving, attention, concentration, language abilities, emotion and behavior.

They include:

- Intellectual disabilities
- Language and learning difficulties
- Head injury
- Stroke
- Alzheimer's disease
- Dementia



Speech Disorders

When a person is unable to produce speech sounds clearly or fluently, or has problems with his or her voice, then he or she has a speech disorder.

- Apraxia: caused by damage to the parts of the brain related to speaking
- Dysarthria: muscles of the mouth, face, and respiratory system may become weak, move slowly, or unable to move after a stroke or other brain injury
- Stuttering: disruptions in the production of speech sounds, also called “disfluencies”
- Voice: voice is hoarse or sound is not produced

Language Disorders

When a person has trouble understanding others (receptive language), or sharing thoughts, ideas, and feelings completely (expressive language), then he or she has a language disorder. A stroke can result in aphasia or a language disorder.



Aphasia is a disorder that results from damage to the parts of the brain that contain language. Aphasia causes problems with any or all of the following: speaking, listening, reading and writing.

Tips for Interacting with People with Cognitive Speech or Language Related Disabilities

A key to interacting with a person with cognitive, speech or language related disability is patience.

- Be patient and allow the person to complete what they are saying without interruption.
- Repeat what you understand, and allow the individual time to “fill in the blanks.”
- Anxiety can aggravate a speech disability.
- Allow for one-on-one communication if possible to avoid anxiety with group interaction.
- Check to see if writing may be easier than speaking.
- Consider alternative communication formats and technology.

Language Services and Resources



Language Resources

Kaiser Permanente facilities have access to multiple language assistance resources to support communication with limited English speaking patients and their families. Use of qualified resources not only ensures the delivery of high quality care, it is also a legal and regulatory requirement that we provide language assistance to our members, free of charge.

The following language resources are provided by Kaiser Foundation Health Plan of Mid-Atlantic States, Inc.:

INTERPRETATION SERVICES

Face to face: Qualified Bilingual Staff (QBS)

Telephone : Language Select

SERVICES FOR DEAF MEMBERS

American Sign Language Interpretation:

Sign Language USA, The Big Word

Communication Services

TDD (Telecommunication Device for the Deaf)

TTY (Teletypewriter/Text Telephone) or relay system

TRANSLATION SERVICES

Spanish prescription labels

Translated health education materials and member informing materials

COMMUNICATION SERVICES FOR MEMBERS WITH VISION LOSS OR WHO ARE BLIND

Braille and Large Print Format

HEALTH EDUCATION RESOURCES

KP.org

Clinical Library

Core Health Education Materials Catalog (Mid-Atlantic States region)

How to Effectively Work With An Interpreter

- Brief the interpreter
 - Speak directly to the patient
 - Use one or two short sentences at a time
 - Check frequently for understanding by the patient
 - Avoid slang or technical terms
 - Speak and read slowly
 - Be sensitive to cultural differences

Key Takeaways

Kaiser Permanente is committed to providing the highest quality of care to our increasingly diverse membership.

Culturally competent care refers to the delivery of health care services in a manner that acknowledges and understands cultural diversity in the clinical setting, respects members' health beliefs and practices, and values cross-cultural communication. Ensuring that a patient's cultural needs are considered and respected at every point of contact is essential.



By continuously enhancing the cultural competency of its workforce, Kaiser Permanente will improve:

- Quality of patient-care delivery and health outcomes
- Member satisfaction
- Access to services

Kaiser Permanente's participation in the Medicaid program is important because it allows us to provide quality care to many of the neediest individuals within the communities we serve.

Resources

(these links can be found on the Kaiser Foundation Health Plan of Mid-Atlantic States, Inc. diversity website:
<http://kpnet.kp.org/masdiversity/>)

PHYSICIAN TOOLKIT AND CURRICULUM: Resources to Implement Cross-Cultural Clinical Practice Guidelines For Medicaid Practitioners

<https://minorityhealth.hhs.gov/assets/pdf/1/checked/toolkit.pdf>

http://kpnet.kp.org/ada/training/pocket_cards/interacting_with_persons_pocket_card.pdf

United States Department of Labor, Office of Disability Employment Policy

<http://www.dol.gov/odep/pubs/fact/effectiveinteraction.htm>

MASK Materials in alternate formats

http://kpnet.kp.org/ada/cas/health_ed_docs.htm

National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care

www.ThinkCulturalHealth.hhs.gov

Provider's Handbooks on Culturally Competent Care (1996-2009)

<http://diversity.kp.org/2main-library/online-resources.html>



ADA Compliance Department

<http://kpnet.kp.org/ada>

ADA training and tools available to convert files to audio and large print

http://kpnet.kp.org/ada/cas/cas_tools/index.htm

Disability Etiquette: Tips on Interacting with People with Disabilities

<http://www.unitedspinal.org/pdf/DisabilityEtiquette.pdf>