

## CLAS Standards

Community Action Partnership of Mid-Nebraska (Mid) provides Clinics of Good Health (Clinica de Buena Salud) in Gibbon and Lexington. These clinics meet CLAS Standards.

- 1. Health Care organizations ensure patients receive from all staff members effective, understandable and respectful care compatible with their cultural beliefs and language needs.**

Every week, Mid Health Program staff meets to discuss issues and program development. Mid has been providing quality program services to low and moderate income people for over 40 years in south central Nebraska. Mid staff are trained in cultural diversity, attend Minority Health conferences, and serve on community task forces and boards to better serve minority populations.

- 2. Health Care Organizations should implement strategies to recruit, retain, at all levels a diverse organization staff and leadership representative of demographics served.**

Mid makes every effort to recruit and retain bi-lingual staff based on their skills and education in order to meet our clients needs. This increases the ability to access care for patients in need. Because we have diversity within our minority staff we have more understanding of the issues our clients face. (some of our staff live in the Lexington area, some come from 2nd generation families, one first generation citizen immigrating from Guatemala giving her an understanding of the issue raised with the native dialect language spoken.)

- 3. Health care organizations should ensure that staff at all levels receive education and training in CLAS delivery.**

Three Mid Registered Nurses have completed the nine hour cultural competent nursing course put on by thinkculturally.org by DHHS. The Clinic of Good Health Program Manager has attended the CLAS standards course in Omaha. When there are opportunities for staff training, every effort is taken to allow staff at all levels to attend the offered training.

- 4. Health Care Organizations must offer and provide language assistance services at no cost during all hours of operation.**

Mid employs several bilingual staff members. They are available now in Buffalo and Dawson county everyday. Mid staff also has access to the language line if a translator is not available for a specific language.

- 5. Health Care Organizations must provide to patients in their preferred language both verbal and written notices informing them of their rights to receive language assistance.**

At all Mid clinics, patients are asked if they would like an interpreter present. Signs are posted in Spanish regarding their right to an interpreter. We do still struggle with the patients from the Sudan area and rely on other organizations for assistance with interpreters for this population.

**6. Health Care Organizations must ensure the competence of language assistance provided to non-English speaking patients.**

Mid has always encouraged their interpreter staff to attend trainings in our area when ever possible. We will continue to provide these educational opportunities as a way to enhance their skills and maintain high performance standards. Staff is very pro-active by proofing what is handed out to our clients and not afraid to change any written signage or instructions published by others that they find translated poorly.

**7. Health Care Organization's must make easily available patient related materials and post signage in the appropriate languages in common areas.**

Mid staff consistently checks signage they have posted in areas around Lexington and Gibbon replacing when necessary. We have signage in both English and Spanish for all of the clinic populations we serve. All of our written patient forms have been translated as well for clients.

**8. Health Care Organizations should develop, implement, and promote a written strategic plan that outlines clear goals, policies, operational plans and management mechanisms.**

This is being addressed by our health care team at this time. Although we do not have a specific format for our health programs our agency does have a written plan and policies for the larger institution. The work plan reporting does give us a basic guideline of who we served and what we did to meet the population's needs.

**9. Health Care Organization should conduct initial and ongoing self assessment of CLAS related measures into internal audits, performance improvement programs and pt satisfaction surveys.**

Each week at our Health Programs staff meeting we evaluate our clinics and look for ways to improve our service in the community. At this time we are developing a patient satisfaction survey with regards to the client's appropriate language. We also continue to evaluate our success using ROMA (Results oriented management and accountability) and our agency intake forms. As a result of our grant reporting we have a mechanism to evaluate who we served and how we met their needs.

**10. Health Care Organization should ensure that data on the individual's race/ ethnicity and language spoken and written are documented on the health record and integrated into the organizations information's systems.**

This information is consistently documented in the patient's personal chart as well as our grant reporting forms. It will be recorded on our agency intake forms as they become available this summer.

**11. Health Care Organizations should maintain a current demographic, cultural and epidemiological profile of the community as well as needs assessment to plan for and implement services that respond to the cultural and linguistic needs in the community.**

Mid is a Census Data Collection site. Census data is updated annually. Cultural and linguistic need reports are collected from the Department of Health and Human Services, Buffalo County Community Partner Reports, and Two Rivers Health Department. A Statewide Needs Assessment was recently completed assessing the needs of customers served by Mid and eight other Community Action Agencies in the State of Nebraska. Customer demographics can also be reported on using Mid's data intake reporting system (ServicePoint).

**12. Health Care Organizations should develop participatory and collaborative partnerships with communities and utilize a mechanism to facilitate community and pt involvement in designing and implementing CLAS related activities.**

Mid staff are active with the Interagency Group in Dawson County and the Buffalo County Community Partners in Kearney/ Gibbon. These groups are consistently examining the needs of the community and involving community members to not only access the needs but determine appropriate changes with in the community.

**13. Health Care Organizations should ensure conflict and grievance resolution processes are culturally and linguistically sensitive to identify, prevent and resolve cross-cultural conflicts or complaints by pts.**

Mid's Grievance Policies and forms are available in English and Spanish. Instructions on Mid's Grievance Policy are posted at every agency site. These forms are also available on the agency website (<http://www.mnca.net/Staffprograminfo.html>) At this time we are in the process of updating the Web site with a Spanish link for the appropriate forms.

**14. Health Care Organizations are encouraged to make available regularly to the public about their progress and successful innovations in implementing CLAS standards and to provide public notice in their communities about this information.**

Information about the CLAS Standards is available on our website:  
<http://www.mnca.net/publicsectorinfo.html>

This information is also posted at clinic sites and when possible shared at Interagency meetings/trainings.