

# Cultural Competency:

BRIDGING THE COMMUNICATION GAP



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healthplan™

## What Is Cultural Competency?

Cultural Competency encompasses Superior HealthPlan's beliefs, values and behaviors. It is the ability to interact effectively with people from different cultures and backgrounds.

## Why Is Cultural Competency Important?

Better cross-cultural and linguistic communications can play a role in reducing health disparities which are prevalent throughout Texas and the nation. The 2010 U.S. Census revealed 34.2% of Texas residents over the age of five speak a language other than English. The top three non-English languages spoken are Spanish (6,543,702 residents), Vietnamese (168,886 residents), Chinese (93,084 residents), which presents numerous opportunities for misunderstanding information related to health conditions or medications.

## What Can You Do To Become More Culturally Competent?

As an organization, Superior uses the National Culturally and Linguistically Appropriate Services (C.L.A.S.) standards from the Office of Minority Health to guide our efforts to become more culturally competent. Here are a few standards to guide you:

- 1. PRINCIPAL STANDARD:** 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.
- 2. GOVERNANCE, LEADERSHIP AND WORKFORCE:** Recruit, promote and support a culturally and linguistically diverse governance, leadership and workforce that are responsive to the population in the service area.
- 3. COMMUNICATION AND LANGUAGE ASSISTANCE:** Offer communication and 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.
- 4. ENGAGEMENT, CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY:** Establish culturally and linguistically appropriate goals, policies and management accountability, and infuse them throughout the organization's planning and operations.

## What Is Health Literacy?

Health Literacy is the capacity to obtain, process and understand basic health information and services needed to make appropriate decisions. A patient's level of health literacy can impact how and when they take their medications, their understanding of their health conditions, attendance at their appointments and the choices they make regarding treatment. Low health literacy has been linked to poor health outcomes, such as higher rates of hospitalization and less frequent use of preventive services.<sup>1-3</sup>

### SIGNS OF LOW HEALTH LITERACY:

- Noncompliance with medication regimens, lab tests or appointment attendance.
- Inability to explain the functions, timing and names of their medications.
- An incomplete or inaccurately completed registration form.
- Saying they "forgot their glasses" if they cannot read something.

## WHAT CAN YOU DO?

The American Medical Association Foundation has compiled six steps to improve interpersonal communications with low health literacy patients.

- **Use plain, non-medical language** – Use terms like “high blood pressure” instead of “hypertension” or “skin doctor” instead of “dermatologist”.
- **Use the “teach-back” method** – Confirm that the patient understands by asking them to repeat back your instructions. It may be helpful to say something like, “I want to make sure I told you everything correctly. Can you please tell me what you’re going to do to take care of your foot?”
- **Create a shame-free atmosphere that encourages questions** – Make patients feel comfortable asking questions. Use the patient’s family and friends in promoting understanding.<sup>4</sup>
- **Be positive and empowering** – Encourage questions from the patient after every main point.

## Cultural Sensitivity and Health Literacy Training

Providers are encouraged to review Superior’s Cultural Competency Health Literacy Training found at: [www.SuperiorHealthPlan.com/providers/resources.html](http://www.SuperiorHealthPlan.com/providers/resources.html)

Providers can also participate in training opportunities administered by the State or nationally recognized organizations, including:

- “A Physician’s Practical Guide to Culturally Competent Care” from The U.S. Department of Health and Human Services, Office of Minority Health, found at: <https://cccm.thinkculturalhealth.hhs.gov>
- Online courses on topics such as addressing health literacy, cultural competency and limited English proficiency from:
  - The U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), found at: [www.hrsa.gov/about/organization/bureaus/ohe/health-literacy/index.html](http://www.hrsa.gov/about/organization/bureaus/ohe/health-literacy/index.html)
  - The Health and Human Services Commission Center for Elimination of Disproportionality and Disparities Office of Minority Health and Health Equity, found at: [www.txhealthsteps.com/cms/?q=office-of-minority-health-and-health-equity](http://www.txhealthsteps.com/cms/?q=office-of-minority-health-and-health-equity)

## Resources For Your Practice

### COMPLIMENTARY INTERPRETATION SERVICES

Superior provides interpretation services to our providers at no cost. To obtain access to a telephonic interpreter, follow these steps:

1. Use a phone in the exam room, call the Member Services number located on the back of the patient’s Superior member ID card.
2. Tell the representative that you need an interpreter in the desired language.
3. When connected, use the speakerphone function to communicate with the patient.

### REFERRAL TO CARE OR DISEASE MANAGEMENT

For those situations where a patient needs extra assistance, but you don’t have the time to address the issue, you can refer the patient to Superior’s Care or Disease Management department by calling **1-800-783-5386**.

### CONTACT INFORMATION

If you have any questions or need help, please contact your dedicated Account Manager or call Provider Services

### SOURCES:

<sup>1</sup>Baker DW, Parker RM, Williams MV, Clark WS. 1997. The Relationship of Patient Reading Ability to Self-Reported Health and Use Of Health Services. American Journal of Public Health. 87(6): 1027-1030 | <sup>2</sup>Baker DW, Parker RM, Williams MV, Clark WS. 1998. Health Literacy and the Risk of Hospital Admission. Journal of General Internal Medicine. 13(12): 791-798. | <sup>3</sup>Baker DW, Gazmararian JA, Williams MV, Scott T, Parker RM, Green D, Ren J, Peel J. 2002. Functional Health Literacy and the Risk of Hospitalization Admission Among Medicare Managed Care Enrollees. American Journal of Public Health. 92(8): 1278-1283. | <sup>4</sup>Weiss, Barry D. M.D., Removing Barriers to Better, Safer Care. Health Literacy and Patient Safety: Help Patients Understand. Manual for Clinicians. Second Edition. American Medical Associations Foundation and American Medical Association, 2007. | MLA Language Map Data Center, source: American Community Survey U.S. Census 5 year Estimates, Public Use Microdata Sample, 2006-2010; retrieved from [https://apps.mla.org/map\\_data](https://apps.mla.org/map_data)