

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN/PIHP	<i>Policy and Procedure Culturally and Linguistically Relevant Services</i>
Committee/Department: Customer Services Committee	Local Policy Number (if used)
Implementation Date 07/08/2022	Regional Approval Date 06/24/2022

Reviewed by:	Recommendation Date:
ROC	05/11/2022
CMH Board:	Approval Date:
Lenawee	05/26/2022
Livingston	05/31/2022
Monroe	05/18/2022
Washtenaw	06/24/2022

I. PURPOSE

To ensure that consumers/individuals served and families with culturally diverse backgrounds and/or linguistically different needs have access to needed translation services so that planning and service delivery can be conducted in a way that facilitates the consumer/individual’s desired outcomes.

Behavioral health services are more effective when they are provided within the most relevant and meaningful cultural, gender-sensitive, and age-appropriate context for the people being served. Present and projected changes in America’s ethnic composition should be reflected in the care system which serves its people (National Research Center for Hispanic Mental Health).

II. REVISION HISTORY

DATE	MODIFICATION
12/06/2011	
2014	Revised to reflect the new regional entity. Changed policy name to replace “Appropriate Services” with “Relevant Services”
2017	Revised to reflect Medicaid Managed Care Regulations Final Rule 2016
06/24/2022	3-year review

III. APPLICATION

This policy applies to all staff, students, volunteers and contractual organizations within the provider network of the Community Mental Health Partnership of Southeast Michigan

(CMHPSM).

IV. **POLICY**

The CMHPSM and all contractual network service providers shall effectively and efficiently address the treatment and psychosocial needs of consumers/individuals served and families with diverse values, beliefs, and sexual orientations, in addition to backgrounds that vary by race, ethnicity, religion, abilities, and language. Every effort shall be made to ensure that services and staff are participating in the ongoing process of achieving cultural competence.

This includes ensuring that consumers/individuals served with Limited English Proficiency (LEP) are given, free of charge, accurate and timely assistance to obtain effective and meaningful access to services. All individuals seeking services will be given adequate information to be able to understand their rights and the services and benefits available. This policy also establishes guidelines for the provision of interpreters for consumers/individuals served with hearing impairment, and assures that speech, language, and hearing services are available free of charge.

V. **DEFINITIONS**

Community Mental Health Partnership Of Southeast Michigan (CMHPSM) - The Regional Entity that serves as the PIHP for Lenawee, Livingston, Monroe and Washtenaw for mental health, developmental disabilities, and substance use disorder services.

Community Mental Health Services Program (CMHSP) - A program operated under chapter 2 of the Mental Health Code as a county community mental health agency, a community mental health authority, or a community mental health organization.

Cultural Competency - An ongoing process by which individuals and systems respond respectfully and effectively to all people in a manner that recognizes, affirms and values the worth of individuals, families, and communities and protects and preserves the dignity of each. It is an ability to honor and respect others' beliefs, interpersonal styles, and behaviors that leads to an ability to respond well to the challenges and opportunities of social and cultural diversity. "Competency" refers to the ability of staff to acknowledge and understand the influence of cultural histories (including oppressive histories), life experiences, language differences, beliefs, values, formal and informal help-seeking pathways, and traditional healing practices on an individual's recovery (NY Office of Mental Health). Culturally competent organizations have the capacity to value diversity, conduct self-assessment, manage the dynamics of difference, acquire and institutionalize cultural knowledge, and adapt to the diversity and cultural contexts of individuals and communities served (National Center for Cultural Competence).

Cultural Relevance - The understanding and application of the concept that all individuals' values and beliefs will be honored and respected in all interactions.

Culture- An integrated pattern of human behavior, which includes but is not limited to thought, communication, languages, beliefs, values, practices, customs, courtesies, rituals, manners of interacting, roles, relationships, and expected behaviors of a racial, ethnic, religious, social or political group; the ability to transmit the above to succeeding generations; dynamic in nature (National Center for Cultural Competence).

Deaf Person - a person whose hearing is totally impaired or whose hearing, with or without amplifications, is so seriously impaired that the primary means of receiving spoken language is through visual or other sensory input including, but not limited to, lip reading, sign language, finger spelling or reading, gestures or tactile signs.

Foreign Language Interpreters/Translators- Individuals who have a bachelor's degree from an accredited institution, preferably in languages or linguistics and possess at least one year of specialized experience in interpreting, translating or other work requiring the use of English and the foreign language from (to) which the interpretation/translation is being provided.

I-Speak Cards – Laminated cards that have examples of various languages illustrated for consumers/individuals served to point to so staff are able to secure appropriate translation/interpretation services.

Limited English Proficiency (LEP) – a limited ability to speak, read, write, or understand the English language at a level that permits him or her to interact effectively with health and social service agencies and providers.

Qualified Interpreter in Mental Health - a qualified foreign language interpreter/translator who is also familiar with behavioral health terminology and practices.

Regional Entity - The entity established under section 204b of the Michigan Mental Health Code to provide specialty services and supports for people with mental health, developmental disabilities, and substance use disorder needs

Sign Language Interpreters – an individual who has a bachelor's degree from an accredited institution, preferably in Humanities or related fields and certified by the Registry of Interpreters for the Deaf (RID) assessed by the National Association for the Deaf (NAD) or qualified as per the state quality assurance (QA) Levels Descriptions as a QA Level III and possesses at least one year of experience working with deaf and hearing impaired individuals.

Tactile Interpreter - an individual who uses sign language applied to the deaf/blind person's hand to convey information.

Translator – an individual or device that translates, in writing or speech, from one language into another. (Encarta® World English Dictionary [North American Edition] © & (P) 2006)

VI. STANDARDS

- A. CMHSP's shall maintain a current demographic, cultural, and epidemiological profile of the community as well as a needs assessment to plan accurately and implement services and materials that correspond to the cultural and linguistic characteristics of the service area. Identify any populations whose needs are not being appropriately met, and create plans for outreach and engagement.
- B. A designated CMH staff will ensure language posters and "I Speak" cards are

posted and accessible.

- C. A designated CMH staff will ensure a panel of providers for translator, speech, and interpreter services.
- D. To ensure consumer/individuals' cultural and linguistic needs are met, CMHSP staff shall do the following when assessing, recommending, or making referrals:
- Ensure cultural and language needs are discussed with the client in a respectful manner and assessed initially and annually.
 - Ensure that the Person-Centered Planning process and the Individual Plans of Service address cultural issues and any language assistance needs.
 - Identify any speech, language, and hearing service needs, cultural needs and language assistance needs, and authorize related specialty services within the initial authorization of care.
 - Make recommendations for obtaining speech, hearing or language, cultural needs and language assistance services for a client. The recommendations may be based on a physician referral, assessment, or other sources of information indicating client need. CMH staff will obtain necessary releases from the client or guardian.
 - Identify and contact potential interpretive service providers.
 - Assure the objectives of the referral are clear and relevant and that relevant background information is exchanged with the service provider.
 - Monitor and address follow-up with the referral.
 - Obtain all follow-up reports and information as a result of the referral, share information with other team members, and make the information available in the clinical record.
 - Evaluate the effectiveness of the referral and client satisfaction with the services. This will include determination of whether services were respectful, culturally and linguistically relevant, and reasonably accessible to the client.
- E. To ensure that services are culturally competent and relevant, CMHSPs and contract service providers shall:
- Promote awareness of cultural differences and concerns, develop knowledge of cultural issues, develop skills to work well with differences, and embed cultural experiences within all levels of the organization.
 - Make every effort to implement strategies to recruit, retain, and promote, at all levels of the organization, a diverse staff and leadership team that are representative of the demographic characteristics of the service area.
 - Incorporate a management strategy that addresses culturally and linguistically

relevant services and incorporates community and consumer/individuals served involvement in the design, execution, and service delivery.

- Conduct annual organizational self-assessments of culturally and linguistically relevant services to identify further opportunities to integrate cultural and linguistic competence-related measures into internal audits, performance improvement programs, satisfaction assessments and outcomes-based evaluations.
- Ensure that service for all consumers/individuals served shall be relevant to their culture and life experiences.
- Ensure that individual plans of service/treatment plans have documented evidence of cultural/LEP issues and values.
- Ensure that culturally and linguistically competent literature is made available on prevalent psychiatric disorders, medical treatment options, and pharmacological interventions.
- Develop participatory, collaborative partnerships and outreach activities with communities to facilitate community and consumer/individual served involvement to improve cultural and linguistic related activities. Make available to the public information about progress and successful innovations of cultural and linguistic relevant activities.
- Ensure that the physical environment uses visual images that reflect the diversity of the community. Artwork, photographs, colors, and decorations will be utilized that reflect this cultural diversity.
- Ensure training of all employees during orientation and as required by the Regional Training Grid regarding core Cultural Competency and LEP policies and procedures. Components of the training shall include:
 - Overall awareness of cultural competency/LEP and issues involved, including ethnic/ racial backgrounds, gender culture, socioeconomic/education status, sexual orientation, physical capacity, age/generation, personality type, spiritual/religious beliefs, regional perspectives, multi-cultural influences, and LEP.
 - Completion of the cultural competency and LEP training will be required as part of the initial and on-going credentialing process. Documentation of the training will be maintained that includes the employees' names and dates of training.
- Ensure that any person receiving services within the CMHPSM who believes that he or she has been excluded from the participation in, denied the benefits of, or subjected to discrimination under any program or activity within the CMHPSM, understands that they may file a Recipient Rights Complaint with the CMHPSM designated Recipient Rights Officer or Customer Services.
- Ensure that conflict resolution, grievance, and appeals processes are culturally and linguistically sensitive and capable of identifying, preventing, and resolving

cross-cultural conflicts or complaints by consumers/individuals served

F. To ensure linguistically relevant services, CMHSPs shall also:

- Offer and provide language assistance services, at no cost for persons with Limited English Proficiency, at all points of contact, and in a timely manner during all hours of operation.
- Work in the consumer/individual's preferred language and provide both verbal offers and written notices informing consumers/individuals served of their right to receive language assistance services.
- Ensure the competence of language assistance provided to consumers/individuals served with LEP by interpreters and bilingual staff.
- Ensure that family and friends are not used to provide interpretation services, except by request of the consumer/individual served. The request and relevant releases of information shall be documented in the clinical record.
- Ensure that children are not used for interpretation services.
- Create and maintain a list of languages spoken by CMHSP and provider staff.
- Ensure that sign language and/or oral interpreters for persons with hearing impairment shall be provided to persons who are authorized for services.
- Ensure that speech, language and hearing services are available to clients as identified in their Treatment Plans.
- Make available easily understood materials and post signage in the languages of commonly encountered cultural groups and/or cultural groups represented in the service area.
- Ensure that notices of available interpreter services are posted in all public areas.
- Monitor to ensure that individual consumer/individual's race, ethnicity, spoken and written languages are collected in health records, integrated into management information systems, and periodically updated so accurate data may be obtained.

G. Contract Service Providers shall:

- Have a procedure in place for identifying and requesting the need for sign language and/or interpretive services.
- Have a procedure to request written materials or other supports that meets the cultural, linguistic and ethnic needs for delivery of services as outlined in the consumer/individual's individual plan of service or treatment plan.

VII. EXHIBITS

None

VIII. REFERENCES

Reference:	Check if applies:	Standard Numbers:
42 CFR Parts 400 et al. (Balanced Budget Act)	x	45 CFR 438.10(c)
45 CFR Parts 160 & 164 (HIPAA)		
42 CFR Part 2 (Substance Abuse)		
Michigan Mental Health Code Act 258 of 1974	x	330.1748,330.1749, 330.1750, 330.1946
The Joint Commission - Behavioral Health Standards		
Michigan Department of Community Health (MDCH) Medicaid Contract		
MDCH Substance Abuse Contract		
Michigan Medicaid Provider Manual		
PIHP Policy Review Schedule		
Policy Tracking Form		
Section 601 of Title VI of the Civil Rights Act of 1964	x	A42 USC Section 20000d et. Seq.
US Department of Transportation (DOT)	x	Title VI regulations at 49CFR, Part 21
National Center for Cultural Competence - Georgetown http://nccc.georgetown.edu/foundations/assessment.html	x	
National Research Center for Hispanic Mental Health	x	

http://nrchmh.org/ResourcesMHAdminsLeaders/Cultural%20Competence%20Standards%20SAMHSA.pdf		
NY Office of Mental Health http://www.omh.ny.gov/omhweb/cultural_competence/guidance/agency_plan.html	x	
CMHPSM Organization Credentialing and Monitoring Policy	x	
CMHPSM Customer Services Policy	x	