

## The Enhanced National CLAS Standards

### The Standards

The enhanced National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care from the Office of Minority Health at the U.S. Department of Health and Human Services are composed of 15 Standards that provide individuals and organizations with a blueprint for successfully implementing and maintaining culturally and linguistically appropriate services. Culturally and linguistically appropriate health care and services, broadly defined as care and services that are respectful of and responsive to the cultural and linguistic needs of all individuals, are increasingly seen as essential to reducing disparities and improving health care quality.

All 15 Standards are necessary to advance health equity, improve quality, and help eliminate health care disparities. As important as each individual Standard is, the exclusion of any Standard diminishes health professionals' and organizations' ability to meet an individual's health and health care needs in a culturally and linguistically appropriate manner. Thus, it is strongly recommended that each of the 15 Standards be implemented by health and health care organizations.

### Purpose

The purpose of the enhanced National CLAS Standards is to provide a blueprint for health and health care organizations to implement culturally and linguistically appropriate services that will advance health equity, improve quality, and help eliminate health care disparities.

### Audience

All members of the health and health care community can benefit from the framework offered by the enhanced National CLAS Standards. The enhanced National CLAS Standards are directed toward a broader audience than the original Standards in order to address more fully every point of contact throughout the health care and health services continuum. A wide spectrum of professionals and organizations influence health and health care every day. The following is a partial list of audiences of the enhanced National CLAS Standards and how each type of audience might utilize them:

- o ***Accreditation and Credentialing Agencies:*** to assess and compare health care facilities, health and human service organizations, and providers who offer culturally and linguistically appropriate services and ensure quality for diverse populations. Institutions such as The Joint Commission and the National Committee for Quality Assurance have made great strides in implementing policies and standards to help ensure these quality services.

- o ***Community Based Organizations:*** to promote quality health care for diverse populations and to assess and monitor care and services being delivered. The potential advocate audience is broad and includes: legal services, consumer education agencies, faith-based organizations, and other local, regional, or national nonprofit organizations that address health and health care issues.
- o ***Educators:*** to incorporate cultural and linguistic competency into their curricula and to raise awareness about the impact of culture and language on health and health care services. This audience would include educators from academic institutions, state health professional licensing agencies, and educators from legal and social service professions.
- o ***Governance and Leadership:*** to draft consistent and comprehensive laws, regulations, and contract language. This audience would include federal, state, tribal, and local governments. The audience would also include the individuals within organizations who are responsible for developing regulations and contracts, as well as the leadership responsible for decision making regarding regulations and contracts.
- o ***Health Care and Service Providers:*** to incorporate cultural and linguistic competency into the delivery of quality health care and services. This audience would include clinicians, practitioners, and service delivery organizations across health and allied health disciplines, including behavioral health.
- o ***Health and Health Care Staff and Administrators:*** to implement culturally and linguistically appropriate services throughout an organization, at every point of contact. This audience would include employees, contractors, and volunteers serving throughout the organization.
- o ***Patients/Consumers:*** to understand their right to receive accessible and appropriate health and health care services and to evaluate whether providers can offer them.
- o ***Public Health Workforce:*** to implement cultural and linguistic competency into the provision of public health services. This audience would include those involved in the behavioral health, emergency medical services, environmental health, epidemiology, and global health.
- o ***Purchasers:*** to promote the needs of diverse consumers of health benefits, and leverage responses from insurers and health plans. This audience would include government and employer purchasers of health benefits.

## Components of the Standards

The enhanced National CLAS Standards are built upon the groundwork laid by the original Standards developed in 2000. The enhanced Standards incorporate broader definitions of culture and health and

aim to reach a broader audience, in an effort to ensure that every individual has the opportunity to receive culturally and linguistically appropriate health care and services.

The enhanced National CLAS Standards are organized into one Principal Standard and three themes: (1) Governance, Leadership, and Workforce; (2) Communication and Language Assistance; and (3) Engagement, Continuous Quality Improvement, and Accountability. Individuals and organizations may identify or utilize additional standards that are relevant to their mission and services and are encouraged to add to the National CLAS Standards.

## Strategies for Implementation

Implementation of the National CLAS Standards will vary from organization to organization. Therefore, organizations should identify the best implementation methods appropriate to their size, mission, scope, and type of services offered. It is also important to develop measures to examine the effectiveness of the programs being implemented, identify areas for improvement, and identify next steps. Many of these measures and evaluation strategies may already be in place throughout an organization for the purposes of accreditation and grant management. Health and human service providers, emergency responders, community-based organizations, and health care delivery sites (e.g., hospitals, clinics, and community health centers) will have different goals and expectations for the National CLAS Standards. Therefore, their strategies for implementation may differ widely.

The enhanced National CLAS Standards and *The Blueprint* include specific implementation strategies to further the establishment or expansion of culturally and linguistically appropriate services. Prior to implementation, it is important to have a vision of what culturally and linguistically appropriate services would look like within the organization and to identify available and required resources (e.g., structure, funding, and personnel) to ensure success.

Responsibilities associated with implementing the enhanced National CLAS Standards should be distributed throughout the organization to ensure comprehensive engagement and effectiveness so that no single individual or department bears the responsibility for the entire organization. For example, some organizations find it helpful to establish an interdisciplinary or cross-departmental committee that will help identify, implement, and sustain the elements of a well-developed CLAS plan.