

# Update

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## Important NPI Dual-Use Period Changes

In an effort to ensure National Provider Identifier (NPI) implementation success for participating Medi-Cal providers, the Department of Health Care Services (DHCS) is extending the current dual-use period, which began on May 23, 2007, to continue beyond the NPI implementation date. **Effective November 26, 2007, the NPI implementation date, a Medi-Cal provider number will continue to be required, even though the NPI is also being requested.** Failure to include the Medi-Cal provider number beyond the NPI implementation date could result in delay or denial of payment.

You can find more information about the NPI and how to register at:

[www.medi-cal.ca.gov](http://www.medi-cal.ca.gov)

or

[www.cms.hhs.gov/NationalProvIdentStand](http://www.cms.hhs.gov/NationalProvIdentStand)

## Meeting the Linguistic and Cultural Needs of Family PACT Clients

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Family PACT providers play a key role in influencing the health and well-being of their clients. However, cultural and linguistic barriers can limit the ability of health care providers to meet the needs of their clients and can lower the chances clients will benefit from the services provided. Finding ways to enhance health care communication is an essential part of providing quality health care. By improving our understanding of cultural and linguistic competency, we can provide high-quality health care that is truly effective, cost-efficient, and most importantly, accessible to the people we serve.

### Why Emphasize Cultural Competency?

According to a 2002 Census Bureau survey, over one-quarter of Californians were born in another country, a level not seen since the 1890s. California's population has an estimated 26.9 percent foreign-born, higher than any other state.<sup>1</sup>

Nationally, the percentage of people born elsewhere hit an estimated 11.2 percent, its highest point since 1930. Altogether, 13.3 million immigrants arrived in the United States in the 1990s.

In addition, almost 4 in 10 Californians ages 5 and older speak a language other than English at home, the highest percentage in the country. Many speak Spanish (25.7 percent) or an Asian language (8.8 percent).<sup>2</sup>

But beyond these statistics, the need for cultural and linguistic competence in health care is borne out in daily encounters with Family PACT clients whether or not they are from immigrant families.

According to Human Resources and Services Administration of the U.S. Department of Health and Human Services, a number of specific factors highlight the importance of providing linguistically and cultural competent services:

- ❖ The perception of illness and disease and their causes varies by culture.
- ❖ Diverse belief systems exist related to health, healing, and wellness.
- ❖ Individual preferences and culture affect traditional and non-traditional approaches to health care.
- ❖ Culture and personal experiences influence help-seeking behaviors and attitudes towards health care professionals.<sup>3</sup>

All these factors make learning more about providing culturally competent services all the more important.

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### **How does Family PACT define Linguistic and Cultural Competence?**

Linguistic and cultural competence is the ability of Family PACT providers to understand and respond effectively to the cultural and linguistic needs brought by clients to the health care visit. Linguistic and cultural competence requires recognizing and addressing clients' behaviors, values, practices, attitudes, and beliefs as they affect their reproductive health care. Being linguistically and culturally competent will lead to improved communication between providers and clients. <sup>4</sup>

### **Becoming linguistically and culturally competent is a win-win proposition.**

- ❖ If your clients find your services more respectful and honoring of their health beliefs and values, they will feel more comfortable. These clients will return for services and recommend them to others in their community.
- ❖ Your communication with your clients will improve and you will begin to see more adherence to your medical advice and better health outcomes.
- ❖ Your agency will become accessible to new Family PACT clients.

### **To demonstrate continual progress, Family PACT providers are encouraged to:**

- ❖ Ensure services are received from staff in a manner compatible with the clients' cultural beliefs, practices, and preferred language.
- ❖ Offer and provide language assistance services, including bilingual staff and interpreter services, at no cost to clients with Limited English Proficiency.
- ❖ Pursue continuous expansion of individual staff members' cultural knowledge and resources.
- ❖ Recruit staff and board members who reflect the client population served.
- ❖ Support ongoing cultural competency training for all staff and board members.

### **Family PACT providers should also:**

- ❖ Provide easy-to-read client education materials in the languages of the clients served.
- ❖ Provide a client-friendly front office with signage posted in the languages commonly served by the practice.
- ❖ Develop collaborative partnerships with agencies that advocate for and represent the diverse populations in that community.

- ❖ Develop a strategic plan for enhancing cultural and linguistic competence.

Family PACT providers need to be able to recognize and address their clients' reproductive health beliefs and practices in a manner that is sensitive and that honors the clients' cultural values and norms. Increased linguistic and cultural competence will improve health care access and service delivery for all clients.

1. "Immigrant Population Booming" [San Francisco Chronicle](#), September 3, 2003.
2. "100-year high in California's percentage of foreign-born" [San Francisco Chronicle](#), August 6, 2001
3. Elena Cohen, Goode T.D., "Rationale for Cultural Competence in Primary Health Care" Policy Brief 1, [National Center for Cultural Competence](#), Winter, 1999.
4. [Linguistic and Cultural Competency Toolkit](#), Family PACT, 2007

## **DEFINING "CULTURE"**

- ❖ The word "culture" denotes a group's patterns of behavior, values, norms, and practices.
- ❖ Culture is dynamic in that it continually changes. Therefore, staff knowledge and skills in communicating with clients of different cultural groups should be improved on an ongoing basis.
- ❖ The term "culture" is not limited to different ethnic and racial groups. It is inclusive of other types of cultural groupings by age, gender, sexual orientation, religion, etc. For example, teens may be considered a cultural group with different health needs than that of adults or children.
- ❖ The cultural make-up of the clients served by Family PACT providers also changes continually due to immigration trends, levels of acculturation and assimilation, as well as other factors. For example, the length of time clients have lived in the same region, as well as when they immigrated, may have an affect on their health beliefs and practices.
- ❖ In order for a Family PACT provider to be effective in working within a culturally diverse community, they need to assess how well all of their agency's systems, programs, services, staff members, and administrators meet the needs of the communities they serve.

# Introducing a Linguistic and Cultural Competency Toolkit for Family PACT Providers

The California Department of Public Health, Office of Family Planning, is providing the **Linguistic and Cultural Competency Toolkit** to all Family PACT providers in an effort to assist them in meeting the Linguistic and Cultural Competence standards listed in the Family PACT **Policies, Procedures and Billing Instructions** (PPBI) Manual.

## PPBI Standard C. Linguistic and Cultural Competence (Family PACT Standards, Page 3)

1. All services shall be provided in a culturally sensitive manner and communicated in a language understood by the client.
2. All print and audiovisual materials shall be appropriate for the client's language and literacy level.

### This Toolkit is made up of several components:

- ❖ **Overview.** This explains the purpose of the Toolkit and its components.
- ❖ **Definition of Linguistic and Cultural Competence.** This definition was created specifically for Family PACT providers and includes standards for providing linguistically and culturally competent care. The information highlighted there is included in this Update.
- ❖ **Instructions for Administering the Self-Assessment Survey.** This section helps staff administering the survey understand how to conduct the survey, and analyze and use the results to improve the health care services provided to their clients.
- ❖ **Linguistic and Cultural Competency Self-Assessment Survey for Family PACT Providers.** This survey can be administered to all staff working in a Family PACT provider's office or agency.

### ❖ **Understanding Your Results.**

This comprehensive explanation helps agencies analyze the results of the self-assessment process.

- ❖ **Developing a Strategic Plan.** This section provides helpful strategies Family PACT providers can use to improve linguistic and cultural competence both individually and organizationally.

- ❖ **Resources.** This section of the Toolkit provides a wealth of books, resources, tools, and websites to complement Family PACT providers' efforts in this area.

By administering the survey and analyzing its results, Family PACT providers and their agencies will be able to assess how well prepared they and their agency are in meeting the linguistic and cultural needs of the clients they serve. This Toolkit is designed as an in-house tool to enable providers to assess the degree to which their agency meets these requirements; and to help them plan and implement training and support for staff and clients.

The survey itself is simple yet comprehensive. The questions are easy to understand and answer. Using the strategies and resources provided with this Toolkit, Family PACT providers will be able to quickly analyze the results and develop a strategic plan for improving services as well as for obtaining technical assistance and training.

The **Linguistic and Cultural Competency Toolkit** will be part of the new Family PACT provider Starter Kit. It is also available to download at [www.family-pact.org/providers/cultural-competency](http://www.family-pact.org/providers/cultural-competency).

## New Provider Resources

Go to [www.family-pact.org/providers](http://www.family-pact.org/providers) to find:

[POS Device User Guide](#)  
[New Family PACT Superbill](#)  
[Tips for Effective Family PACT Outreach](#)  
[Sample History and Medical Forms for Men and Women](#)

See [familypact.org](http://familypact.org) or call 1-877-FAMPACT for more information about these events.

**Provider Orientations: 8:30 am - 4:30 pm**

- November 1, 2007**      Provider Orientation & Update Session - San Diego
- December 13, 2007**      Provider Orientation & Update Session - Bakersfield
- January 31, 2008**      Provider Orientation & Update Session - Riverside
- February 21, 2008**      Provider Orientation & Update Session - Santa Rosa
- March 27, 2008**      Provider Orientation & Update Session - Palm Springs

**Regional Provider Forums: 9:00 am - 1:00 pm**

- January 17, 2008**      Regional Forum - Woodland Hills
- March 14, 2008**      Regional Forum - Lake Tahoe