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**Owner:** *bonnie Herndon*  
**Policy Area:** *Customer Service*  
**References:** [MDHHS- EQR VIII](#), [NCQA QI 1A](#),  
[NCQA QI 4A](#), [NCQA QI 9 A](#), [F G](#)

## Cultural Competence

### POLICY

It is the policy of the Detroit Wayne Mental Health Authority (DWMHA) to assure that behavioral health services and supports are culturally appropriate for individuals with diverse cultural backgrounds, values beliefs, and practices. This applies to all service levels of DWMHA, Managers of Comprehensive Provider Networks (MCPNs'), SUD, contracted providers, and Access Center.

### PURPOSE

To provide system-wide guidelines that promote working effectively with culturally diverse, sensory impaired, and/or limited English proficiency individuals and under-served communities.

### APPLICATION

1. The following groups are required to implement and adhere to this policy: All DWMHA Staff, Contractual Staff, Access Center, MCPN Staff, Network Providers, Crisis services vendor.
2. This policy serves the following populations: Adults, Children, I/DD, SMI/SEI, SED, SUD, Autism
3. This policy impacts the following contracts/service lines: Medicaid, MI-HEALTH LINK, SUD, Autism, Grants, and General Fund.

### KEY WORDS

1. Culturally Competent Services
2. Diversity
3. Limited English Proficiency
4. Health Literacy

### STANDARDS

The DWMHA and its contracted provider networks shall be committed to the following provisions of cultural competency:

1. Foster an organizational philosophy that incorporates cultural competency principles into its mission, vision, values, goals policies and procedures.

2. Periodically review the goals, policies, and procedures to ensure that they incorporate principles and practices that promote linguistic and cultural competence.
3. Incorporate programs and services for diverse populations within the service community and methods to evaluate their effectiveness.
4. Provide ongoing staff cultural self-assessments to determine the level of knowledge of the diverse populations within the service community and the learning needs that exist among staff at all levels.
5. Provide educational and training opportunities for staff and community about natural supports (i.e., family, religious organization, advocacy groups, and social organization) within diverse cultural groups.
6. Incorporate processes that allow for the capturing of data on individual's race, ethnicity, spoken and written language to establish applicable needs assessment and services.
7. Establish collaborative partnerships with diverse community-based organizations to assist in designing and implementing cultural competence related activities.
8. Ensure that health literate and culturally competent care approaches to health care delivery are understandable, effective, respectful, and provided in a manner compatible with individual's cultural beliefs and practices.
9. Incorporate culturally sensitive assessments in the Individual Plan of Service (IPOS) to identify special needs, beliefs and/or practices.
10. Ensure that oral and written grievance, appeals and resolution processes are sensitive and capable of identifying, preventing, and resolving cross-cultural conflicts or complaints.
11. DWMHA reviews census data on an annual basis to ensure compliance with our service area's linguistic needs.
12. MCPNs and Direct Contract Providers are expected to develop their policies in alignment with DWMHA directives.
13. Cultural Competence training is required for all new hires of DWMHA, Access Center, Providers, MCPNs, and vendors. Re-training is required bi-annually for DWMHA, Access Center, Provider, MCPN, and vendor staff. DWMHA provides training content.

## **QUALITY ASSURANCE/IMPROVEMENT**

The DWMHA shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of MCPNs, their subcontractors, and direct contractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

## **COMPLIANCE WITH ALL APPLICABLE LAWS**

DWMHA staff, MCPNs, contractors, and subcontractors are bound by all applicable local, State and Federal laws, rules, regulations and policies, all Federal waiver requirements, State and County contractual requirements, policies, and administrative directives, as amended.

## LEGAL AUTHORITY

1. Michigan Department of Community Health Practice Improvement Steering Committee Compendium of Michigan's Evidence-Based, Best and Promising Practices, 2009
2. Michigan Mental Health Code, PA 258 of 1974, as amended, Suitable Services; treatment environment; setting; rights, MCL 330.1708
3. Michigan Department of Community Health, Application for Participation, 2009
4. Regulations of the US Department of Health and Human Services issued pursuant to the Acts, Title 45 Code of Federal Regulations (CFR) part 80, 84, and 91.
5. Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d et.seq
6. National Center for Cultural Competence—Georgetown University Center for Child and Human Development

## RELATED POLICIES

1. Limited English Proficiency (LEP)
2. Communication Using the Teletype Device, & Michigan Relay Service or Other Communication Devices
3. Michigan Relay Service or Other Communication Devices
4. Accommodations for Individuals with Visual and Mobility Impairments

## RELATED DEPARTMENTS

1. Administration
2. Claims Management
3. Clinical Practice Improvement
4. Compliance, Customer Service
5. Information Technology
6. Integrated Health Care
7. Legal, Managed Care Operations
8. Management & Budget, Personnel
9. Purchasing, Quality Improvement
10. Utilization Management
11. Recipient Rights
12. Substance Use Disorders

## CLINICAL POLICY

YES

## INTERNAL/EXTERNAL POLICY

EXTERNAL

## Attachments:

No Attachments

### Approval Signatures

<b>Approver</b>	<b>Date</b>
Ronald Hocking: Chief Operating Officer	06/2017
Dana Lasenby: Deputy Chief Operating Officer	05/2017
Allison Smith: Project Manager, PMP	05/2017
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