Executive Summary

The COVID-19 pandemic’s disproportionate impact on people of color has accelerated the integration of health equity into health care strategy playbooks across the nation. Within health care settings, from urban to rural and from hospitals to ambulatory care sites and clinics, there is renewed focus on efforts to advance health equity. Furthermore, there is growing recognition that a commitment to promoting equitable practices is tied to the core work of improving quality and patient safety.

Background on IFDHE Toolkit Series

To support hospitals and health systems starting from different points on their journey to achieve health equity, the AHA’s Institute for Diversity and Health Equity (IFDHE) is releasing a series of toolkits to share evidence-based practices to inform organizational next steps for the following topics:
- Data collection, validation, stratification and application of patient information to address disparate outcomes
- Cultural humility and implicit bias training and education
- Diversity and inclusion in leadership and governance roles
- Sustainable community partnerships focused on improving equity

Each toolkit is designed to be informative, whether organizations have already deployed health equity tactics and strategies or if they are at the early stages of implementation. Each helps lay the groundwork for an in-development equity roadmap to support hospitals’ and health systems’ efforts toward achieving high-quality, equitable care for all.

This toolkit focuses on training and education strategies and approaches to encourage cultural humility and overcome implicit bias.

Who should be involved in this work?

Interdisciplinary teams that are organized to coordinate efforts across departments to develop cultural awareness and implicit bias training and education initiatives should use these toolkits. Strong support from the senior leadership positions indicated below is essential to encourage and reinforce actions by teams involved in the ongoing work. Titles may vary by hospitals and health systems.

Examples of Senior Leadership

- Chief Executive Officer
- Chief Diversity and Inclusion Officer
- Chief Operating Officer
- Chief Population Health Officer
- Chief Finance Officer
- Chief Compliance Officer
- Chief Medical Officer
- Patient and Family Advisory Council
- Chief Nursing Officer
- Chief Clinical Information Officer
- Chief Health Equity Officer
- Chief Quality Officer
- Chief Information Officer
- Patient Experience Officer
- Chief Population Health Officer
- Patient Services Lead
- Chief Compliance Officer
- Chief Clinical Information Officer
- Chief Quality Officer
- Chief Information Officer

How these toolkits can be used

Recognizing there is no predetermined starting point, these toolkits are designed to meet organizations where they currently stand. Initial processes may include:
- Establishing your organization’s baseline experience
- Focusing on one or two key areas to drive change
- Tracking progress over time

Examples of leading practices from hospitals and health systems across the nation are used to inspire and motivate other organizations implementing similar initiatives that impact communities so that all people can reach their highest potential for health — this is the AHA’s vision for health equity.
Understanding the issue

To provide high-quality, equitable care focusing on patients’ specific needs and the broader societal factors that impact one’s overall health and well-being, hospitals and health systems must strive to increase cultural awareness and practice cultural humility. Although “cultural competence” has been a common term to describe how to improve cultural understanding, it is important to distinguish that cultural humility and awareness is a continuous process fueled by change and ongoing learning.

- **Cultural humility** in health care describes a lifelong commitment to self-evaluation and critique, to redressing power imbalances and to developing mutually beneficial and non-paternalistic partnerships with communities on behalf of individuals and defined populations. (Source: Tervalon, M., Murray-Garcia, J. “The Concept of Cultural Humility”)

- **Cultural competence** encompasses behaviors, attitudes and policies that can come together on a continuum that will ensure that a system, agency, program or individual can function effectively and appropriately in diverse cultural interactions and settings. (Source: U.S. Department of Health and Human Services reference)

A culturally aware health care system acknowledges the importance of culture, incorporates the assessment of multicultural relations, recognizes the potential impact of cultural differences, expands cultural knowledge and adapts services to meet culturally unique needs. Ultimately, cultural humility is an essential means to reduce racial and ethnic health disparities and improve equity of care. Becoming a more culturally aware health care organization can improve social responsibility, as well as patient outcomes. The Healthcare Equality Index, for example, is often used by LGBTQ patients and their families to find hospitals and health systems providing equitable and inclusive care. Those who participate demonstrate a public commitment to LGBTQ patient care and enjoy the benefits of enhanced patient satisfaction ratings. In Figure 1, several types of benefits are shown when health care organizations are providing care with cultural humility.

Figure 1. Benefits of Becoming a Culturally Appropriate Health Care Organization

<table>
<thead>
<tr>
<th>Social Benefits</th>
<th>Health Benefits</th>
<th>Business Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Increases mutual respect and understanding between patient and organization</td>
<td>• Improves patient data collection</td>
<td>• Incorporates different perspectives, ideas and strategies into the decision-making process</td>
</tr>
<tr>
<td>• Increases trust</td>
<td>• Increases preventive care by patients</td>
<td>• Decreases barriers that slow progress</td>
</tr>
<tr>
<td>• Promotes inclusion of all community members</td>
<td>• Reduces care disparities in the patient population</td>
<td>• Moves toward meeting legal and regulatory guidelines</td>
</tr>
<tr>
<td>• Increases community participation and involvement in health issues</td>
<td>• Increases cost savings from a reduction in medical errors, number of treatments and legal costs</td>
<td>• Improves efficiency of care services</td>
</tr>
<tr>
<td>• Assists patients and families in their care</td>
<td>• Reduces the number of missed medical visits</td>
<td>• Increases the market share of the organization</td>
</tr>
<tr>
<td>• Promotes patient and family responsibilities for health</td>
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Getting Started

Leadership Engagement
Cultural humility should be an institutional priority. In order to successfully take steps toward becoming a culturally aware organization, the board should set goals as part of the organization’s strategic plan to improve organizational diversity, provide culturally appropriate care and eliminate disparities in care. It also is important to create a culture of learning and make training (see upcoming table: Examples of Training Topics) available for all senior leadership, management, staff and volunteers.

Community Engagement
Before a health care organization becomes proficient in cultural humility, leaders must understand the communities they serve and the role the organization plays within those communities. In addition to the roles listed in the Examples of Senior Leadership table of interdisciplinary team members to support this effort, engaging with patients and the communities served is essential for this work to be successful. A major principle of cultural humility involves working in conjunction with natural, informal or formal partnerships with patients and communities and incorporating their voices.

Three steps to effectively engage with the community include:

1. Align programming and resources to engage with communities to identify their needs, strengths and resources
   - A Playbook for Fostering Hospital-Community Partnerships to Build a Culture of Health
   - Partnership for Public Health
   - Hospital Community Collaborative

2. Survey and analyze data to improve service for patients and the local community
   - Data-Driven Care Delivery toolkit

3. Communicate measures and findings with the community, patients and internal stakeholders
   - Health Equity, Diversity & Inclusion Measures for Hospitals and Health System Dashboards

Workforce Training
An effective educational or training program to promote cultural humility correlates with a lasting awareness and understanding by hospital staff. Although there are several approaches to educate staff, a successful educational program involves:

- Conducting cultural assessments;
- Identifying training topics;
- Offering multiple training methods;
- Providing ongoing education; and
- Measuring and tracking.

Conducting Cultural Assessments
Conduct an assessment to understand your staff’s knowledge of cultural humility before any educational program begins. Within the Georgetown University Center for Child & Human Development is the National Center for Cultural Competence, which offers guidance on planning and implementing organizational cultural awareness self-assessments for different audiences. At the same time, it’s critical to identify populations served and engage with patients and communities to determine specific topic areas for training. Use the assessment data to examine working relationships with diverse cultures and perceptions that may be held by community members regarding interactions with the health care system.
Identifying Training Topics

Training topics can vary for organizations, but establishing shared language and providing historical context in relation to equity, diversity and inclusion will be foundational. Once a general knowledge base is established, communication tools and practice will be important for engaging in conversations.

See the table below for examples of fundamental concepts in creating a culture of learning and cultural humility. Clinical topics, services and support (e.g., Black maternal health, diabetes in South Asian populations, behavioral health and veterans, etc.) should be identified and informed by patients and communities served. See the resources list for more training topics.

Examples of Training Topics

<table>
<thead>
<tr>
<th>Fundamental Topics</th>
<th>Communication Topics</th>
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<tbody>
<tr>
<td>Anti-Racism Training, Change Agency, Implicit Bias (or Unconscious Bias)</td>
<td>Coaching or Mentoring, Plain Language, Teach-back Method,</td>
</tr>
<tr>
<td>Intersectionality, Microaggressions, Oppression, Power, Privilege, Root Causes</td>
<td>Reflections and Conversations about Race</td>
</tr>
<tr>
<td>of Inequities, Social Determinants of Health</td>
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</tr>
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One common type of training is unconscious bias or implicit bias training. These training programs are designed to expose people to their implicit biases, provide tools to adjust automatic patterns of thinking and ultimately address discriminatory behaviors. Implicit biases are pervasive and common for everyone in one form or another. Implicit bias training can improve peer-to-peer interactions, improve delivery of care and create a more inclusive environment.

These resources offer more information:

- Four Ways Health Care Organizations Can Utilize the Implicit Association Test (IAT)
- Unconscious Bias Training: Two Approaches from Equity of Care Honorees

Offering Multiple Training Methods

Since everyone has their preferred methods of learning, offering different modalities for learning and training methods will provide a better environment for participants. Offer your staff opportunities for individual self-critiques and reflexivity during paid work time. You also should offer workshops and space for discussion.

Examples of Educational Tools and Training Methods.

- Case study reviews
- Didactic lectures
- Manuals
- Online modules
- Role-playing
- Scripts
- Simulations
Measuring and Tracking

Those who undergo cultural humility and awareness training should be evaluated on their knowledge, understanding and skills for interfacing with people from culturally, linguistically and socio-economically diverse backgrounds. Once training is implemented, data collected from patient satisfaction scores can be used to measure progress toward closing inequities related to cultural awareness. Read further for data collection and quality improvement metrics.

This table shows examples of metrics and data to stratify. See the Data-Driven Care Delivery toolkit for more information.

<table>
<thead>
<tr>
<th>Quality Metric</th>
<th>Data Element to Stratify</th>
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</thead>
<tbody>
<tr>
<td>Clinical</td>
<td>Demographic</td>
</tr>
<tr>
<td>Hospital inpatient quality reporting (IQR) measures (i.e., “core measures”)</td>
<td>• Age</td>
</tr>
<tr>
<td>30-day readmissions</td>
<td>• Gender Identity</td>
</tr>
<tr>
<td>Patient Satisfaction</td>
<td>• Sexual Orientation</td>
</tr>
<tr>
<td>Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores</td>
<td>• Race</td>
</tr>
<tr>
<td></td>
<td>• Ethnicity</td>
</tr>
<tr>
<td></td>
<td>• Language preference</td>
</tr>
<tr>
<td></td>
<td>• Language proficiency</td>
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</tbody>
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Other ways to measure cultural understandings at the organizational level include the National Quality Forum (NQF) 45 preferred practices for measuring and reporting cultural competency. These are organized across seven domains listed below (Figure 2). For more information, see NQF’s Comprehensive Framework and Preferred Practices for Measuring and Reporting Cultural Competency.

Figure 2. National Quality Forum’s Domains that Apply to Cultural Humility and Awareness

<table>
<thead>
<tr>
<th>Domain</th>
<th>Sub-domains</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership</td>
<td>Commitment to Diversity, Organizational Culture, Leadership Diversity, Dedicated Staff and Resources, Policies, Training and Development</td>
</tr>
<tr>
<td>Integration into Management Systems and Operations</td>
<td>Strategic Planning, Performance Evaluation, Reward Systems, Service Planning, Marketing, Public Relations</td>
</tr>
<tr>
<td>Patient-Provider Communication</td>
<td>Interpreter Services, Translation Services, Health Literacy Strategies, Knowledge of Culture and Social Context, Cultural Awareness, Cross-Cultural Communication Skills, Family Centeredness</td>
</tr>
<tr>
<td>Care Delivery and Supporting Mechanisms</td>
<td>Physical Environment, Assessment Tools, Coordination of Care, Linkages with Alternative Medicine Providers, Linkages with Community Based Organizations, Health Information Technology</td>
</tr>
<tr>
<td>Workforce Diversity and Training</td>
<td>Recruitment, Retention, Training Commitment, Training Content</td>
</tr>
<tr>
<td>Community Engagement</td>
<td>Community Outreach, Community-Based Participatory Research, Community Representation in Organizational Decision Making, Community Investments</td>
</tr>
<tr>
<td>Quality Improvement Information</td>
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</tbody>
</table>
Implementation Strategies

There are different ways to transform into being a culturally appropriate organization and implement leading practices. For example, offering culturally and linguistically appropriate services (CLAS) is a way to improve the quality of services provided to all individuals. By tailoring services to an individual’s culture and language preferences, health professionals can help bring about positive health outcomes for diverse populations. See the National Standards for CLAS Blueprint for implementation strategies around the 15 CLAS standards. More implementation information is listed under Resources.

Conclusion

High-quality care and services need to be more responsive in order to integrate diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs. Given the complexity of multiculturalism, it is beneficial to understand that cultural competence is not an end point and it will require a commitment to continuous reflection and learning. Incorporating cultural humility will be key to this work. Cultural humility training for health care professionals focuses on skills and knowledge that value diversity, understand and respond to cultural differences and increase awareness of providers’ and care organizations’ cultural norms. Potential benefits of cultural humility training include increased cultural understanding and skills among the workforce, increased patient satisfaction and improved health outcomes. Hospitals and health systems also can enact policies that promote more equitable and culturally appropriate care — creating a culture of continuous learning that better reflects the specific needs of all patients.
Discussion Guide

1. What is our understanding of cultural competency and cultural humility?

2. How can we hold our organization accountable?

3. How can cultural humility be incorporated into our strategic plan?

4. How can we demonstrate to patients and the communities we serve that we are a culturally aware or appropriate organization?

5. Has our organization assembled a working group to focus on cultural humility? If so, is diversity reflected across the working group? (This might include age, race/ethnicity, language, work unit, gender identity, etc.)

6. What training do we offer on developing cultural competency, cultural humility and health literacy? What types of training do we need to better understand cultural competency and cultural humility?
   a. Have staff members been trained and provided tools and resources?
   b. What steps has our organization taken to implement cultural humility training?

7. What protocols do we have in place for addressing concerns related to cultural humility and awareness from patients or staff?

8. Are the necessary fiscal and human resources, tools, skills and knowledge to support and improve culturally appropriate policies and practices in the organization available?

NOTES:
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RESOURCES

Culturally and Linguistically Appropriate Services

National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care

The federal Office of Minority Health offers cultural competence training resources and publishes the National CLAS Standards which, as of 2016, 32 states are actively implementing through strategic planning, training and technical assistance, and dissemination of the National CLAS Standards. See this website for standards and guidance implementation.

URL: https://thinkculturalhealth.hhs.gov/clas

Compendium of State-Sponsored National CLAS Standards Implementation Activities


Cultural Competence Training

4 Ways Health Care Organizations Can Utilize the Implicit Association Test (IAT)


Anti-Racism and Allyship 7 Day Journey

Stanford Graduate School of Business created a self-paced resource on anti-racism work and building allyship. Topics include implicit bias, how to have conversations about race, intersectionality and creating action plans.

URL: https://gsb-sites.stanford.edu/anti-racism-and-allyship/

Communication Guide for Health Care Administrators and Providers

This Communication Guide will help you and your organization interact more effectively with culturally and linguistically diverse individuals. The Guide covers strategies for communicating in a way that considers the cultural, health literacy and language needs of your patients and their families.

URL: https://thinkculturalhealth.hhs.gov/education/communication-guide

County Health Rankings & Roadmap

This page provides evidence of effectiveness for providing cultural competence training health care professionals.

URL: https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/cultural-competence-training-for-health-care-professionals

Culturally and Linguistically Appropriate Services (CLAS) in Maternal Health Care

This free, accredited e-learning program is designed for maternal health care providers and students seeking knowledge and skills related to cultural competency, cultural humility, person-centered care and combating implicit bias across the continuum of maternal health care.

URL: https://thinkculturalhealth.hhs.gov/education/maternal-health-care

Georgetown University National Center for Cultural Competence

The NCCC has developed several online curricula and learning tools to assist in incorporating cultural and linguistic competence into learners’ work. Various training topics available.

URL: https://nccc.georgetown.edu/resources/distance.php
Learning to Address Implicit Bias Towards LGBTQ Patients: Case Scenarios

This guide provides case scenario exercises for self-learning or can be used to teach health center staff how to identify and address implicit bias related to LGBTQ patients.

URL: https://www.lgbthealtheducation.org/publication/learning-to-address-implicit-bias-towards-lgbtq-patients-case-scenarios/

Practices for Measuring and Reporting Cultural Competency

A Comprehensive Framework and Preferred Practices for Measuring and Reporting Cultural Competency

The National Quality Forum report outlines a comprehensive framework for measuring and reporting cultural competency. The report also details a set of 45 preferred practices for providing culturally competent care covering a range of issues, including communication, community engagement and workforce training.


Self-Assessment

The National Center for Cultural Competence Self-Assessment Resources

This National Center for Cultural Competence webpage covers planning and implementing cultural competence organization self-assessments for different audiences.

URL: https://nccc.georgetown.edu/assessments/

Case Examples:

Unconscious Bias Training: Two Approaches from Equity of Care Honorees

This webinar features two webinar speakers from Henry Ford Health System and Chatham Health describing their innovative staff training methods addressing the dynamics of unconscious biases, how to avoid uncomfortable interactions and successful strategies for heightening bias awareness in the workplace.

URL: https://ifdhe.aha.org/unconscious-bias-training-two-approaches-equity-care-honorees

Innovative Education Requirements for Improved Physician Training

In this AHA case study, Cone Health, winner of the 2020 AHA Carolyn Boone Lewis Equity of Care Award, describes its history and how it has pioneered educational sessions for its physicians about social and racial influences in health care.

URL: https://www.aha.org/case-studies/2021-03-25-cone-healths-innovative-education-requirements-improved-physician-training

Advancing Health Equity through Research & Science

In this Advancing Health podcast, Essa Mohamed, PhD, Class of 2020 Bush Foundation Fellow and NIH Fellow at Mayo Clinic’s Department of Cardiovascular Medicine discusses ways to address bias and advance health equity and reduce health care disparities through research and clinical trials.

URL: https://www.aha.org/advancing-health-podcast/2020-10-28-advancing-health-equity-through-research-science

Recognizing and Managing Bias in Healthcare

In this American Society for Healthcare Risk Management podcast, speakers explore the definitions and impact of unconscious and implicit biases on healthcare delivery and patient safety, centering specific biases including relation, race, gender identity and expression, sexual orientation, age and mental health. This discussion facilitates evaluation of current healthcare environments and the identification of strategies, tools and interventions to address conscious or implicit bias in healthcare.

URL: https://radiomd.com/ashrm/item/43969-recognizing-and-managing-bias-in-healthcare