

## **Cultural Competency Assessment Tool for Hospitals (CCATH): Assessing Adherence to the CLAS Standards**

The national standards for culturally and linguistically appropriate services (CLAS) in health care, set forth by the U.S. Department of Health and Human Services (DHHS) Office of Minority Health (OMH), provide guidelines on policies and practices aimed at developing culturally appropriate systems of care (Office of Minority Health, 2001).

The Cultural Competency Assessment Tool for Hospitals (CCATH) is a survey designed to assess hospital's adherence to the CLAS Standards. The development and testing of the CCATH was funded by U.S. Department of Health and Human Services' (DHHS) Office of Minority Health (OMH) and the Commonwealth Fund. Organizational assessments, such as the CCATH, provide a useful tool to evaluate the structures (policies, programs) and processes (practices, culture) for cultural competency. The CCATH was subject to extensive qualitative testing, including pilot testing, focus groups, and cognitive interviews (Hays et al. 2006).

The CCATH was field tested using a mail survey of all of all general and children hospitals listed in the California Hospital Association Directory (344 hospitals) in 2006 (Weech-Maldonado et al. 2011). Following a modified approach to the Total Design Method (Dillman, 1978), a 36% response rate (125 hospitals) was obtained. We assessed potential non-response bias by comparing respondent hospitals with non-respondent hospitals on several organizational and market level variables. Respondent hospitals were less likely to be part of a system (59% vs. 70%). However, respondent hospitals were not significantly different ( $p < 0.05$ ) from non-respondent hospitals in terms of teaching status, ownership (government, for-profit, not-for-profit), size, percent non-White inpatients, percent Medicaid patient days, percent managed care

patient days, total profit margin, market competition (Herfindahl Index), percent non-White population in the county, percent non-English speakers in the county, being in a metropolitan area, and per capita income.

Exploratory and confirmatory factor analysis of the data supported 12 composite scales: Clinical Cultural Competency Practices, Human Resources Practices, Diversity Training, Availability of Interpreter Services, Interpreter Services Policies, Quality of Interpreter Services, Translation of Written Materials, Leadership and Strategic Planning, Performance Management Systems and Quality Improvement (QI), Data Collection on Inpatient Population, Data Collection on Service Area, and Community Representation (Appendix A). The 12-factor model provided good fit to the data: Chi-square=90.8 (p-value = 0.17); Comparative Fit Index (CFI)= 0.96; Tucker-Lewis Index (TLI)= 0.97; and the Root Mean Square Error of Approximation (RMSEA)= 0.035 (Weech-Maldonado et al. 2011).

Table 1 shows the relationship between the CCATH domains and the CLAS standards and provides coefficient alpha and mean score for each domain. Nine of the twelve CCATH domains had alphas greater than 0.70 and the reliability was 0.65 or above for all scales.

The CCATH was developed through a comprehensive and multi-stage evaluation process. The survey is directly targeted at assessing adherence to the CLAS standards for hospital inpatient services. The field test provided support for the reliability and validity of the CCATH measures.

## References

- Hays, R., Weech-Maldonado, R., Brown, J., Sand, K., Dreachslin, J., & Dansky, K. (2006). Cultural Competency Assessment Tool for Hospitals (CCATH). Final Report for Contract Number 282-00-0005, Task Order # 7. Washington D.C. : Department of Health and Human Services; Office of Minority Health
- Office of Minority Health. (2001). National Standards for Culturally and Linguistically Appropriate Services in Health Care: Final Report. Washington DC: US Department of Health and Human Services; Office of Minority Health.
- Weech-Maldonado, R., Dreachslin, J., Brown, J., Pradhan, R., Rubin, K. L., Schiller, C. et al. (In press). Cultural Competency Assessment Tool for Hospitals (CCATH): Evaluating Hospitals' Adherence to the CLAS Standards. *Health Care Management Review*.

Table 1. CCATH Domains, Number of Items, Internal Consistency Reliabilities, Means and Standard Deviations

| <b>Composite</b>                               | <b>N</b> | <b>CLAS Standard</b> | <b>Number of Items</b> | <b>Alpha</b> | <b>Mean*</b> | <b>Std Dev</b> |
|--|----------|----------------------|------------------------|--------------|--------------|----------------|
| <b>Clinical Cultural Competency Practices</b>  | 123      | 1                    | 4                      | 0.76         | 81.4         | 23.3           |
| <b>Human Resources Practices</b>               | 125      | 2                    | 8                      | 0.66         | 62.2         | 21.4           |
| <b>Diversity Training</b>                      | 125      | 3, 13                | 3                      | 0.68         | 53.7         | 35.5           |
| <b>Availability of Interpreter Services</b>    | 124      | 4                    | 4                      | 0.87         | 70.2         | 25.7           |
| <b>Interpreter Services Policies</b>           | 122      | 5, 6                 | 4                      | 0.65         | 61.1         | 32.5           |
| <b>Quality of Interpreter Services</b>         | 124      | 5, 6                 | 3                      | 0.75         | 58.1         | 40.7           |
| <b>Translation of Written Materials</b>        | 124      | 7                    | 6                      | 0.81         | 52.3         | 22.8           |
| <b>Leadership and Strategic Planning</b>       | 123      | 8, 14                | 6                      | 0.79         | 35.8         | 33.6           |
| <b>Performance Management Systems and QI</b>   | 112      | 9                    | 3                      | 0.78         | 33.3         | 35.0           |
| <b>Data Collection on Inpatient Population</b> | 125      | 10                   | 2                      | 0.70         | 87.1         | 29.8           |
| <b>Data Collection on Service Area</b>         | 125      | 11                   | 7                      | 0.84         | 60.5         | 31.3           |
| <b>Community Representation</b>                | 123      | 12                   | 2                      | 0.84         | 40.2         | 45.6           |

\*Range 0 – 100, with score of 100 indicating full adherence to each respective CLAS domain

## Appendix A.CCATH Domains and Items

| <b>Clinical Cultural Competency Practices</b>  | <b>Coding</b>   |
|--|---|
| Does the hospital consider cultural and language needs during the discharge planning? (1b)             | 0= No<br>1= Yes, less than half of the departments<br>2= Yes, half or more of the departments |
| Does the hospital accommodate the ethnic/cultural dietary preferences of in-patients? (1c)             | 0= No<br>1= Yes, less than half of the departments<br>2= Yes, half or more of the departments |
| Does the hospital tailor patient education materials for different cultural and language groups? (1d)  | 0= No<br>1= Yes, less than half of the departments<br>2= Yes, half or more of the departments |
| Does the hospital tailor patient clinical assessments for different cultural and language groups? (1e) | 0= No<br>1= Yes, less than half of the departments<br>2= Yes, half or more of the departments |

| <b>Human Resources Practices</b>   | <b>Coding</b>   |
|--|-----------------|
| Which of the following benefits are available to staff?<br>Formal mentoring program (5a)<br>Management training (5b)<br>Tuition assistance or tuition reimbursement for ongoing education (5c)<br>Personal counseling or employee assistance programs 5(d)<br>Flexible benefits such as domestic partner benefits, family illness, death, and personal leave policies that accommodate alternative definitions of family 5(e)<br>Affinity (networking) groups for racial/ethnic minority staff 5(f)<br>Work/life balance programs such as flextime, job sharing or telecommuting, child or elder care (5g) | 0= No<br>1= Yes |

| <b>Diversity Training</b>  | <b>Coding</b>  |
|--|--|
| Does this hospital have a formal and ongoing training program on cultural and language diversity? (9) Note: This may consist of either a stand-alone training program or several training components integrated into other types of training. A hospital may have a voluntary program, a mandatory program or both voluntary and mandatory programs. | 0= Yes<br>1= No  |
| Do the staff involved in the formal complaint and grievance process Receive formal training in conflict resolution? (26a)  | 0= No<br>1= Training less than once per year<br>2= Training at least once per year |
| Do the staff involved in the formal complaint and grievance process Receive formal training about cultural or language differences? (26b)  | 0= No<br>1= Training less than once per year<br>2= Training at least once per year |

| <b>Availability of Interpreter Services</b>                            | <b>Coding</b>   |
|--|---|
| Are interpreter services available for in-patients in Spanish? (12a)   | 0= No<br>1= Telephone only<br>2= Bilingual/Face to Face |
| Are interpreter services available to in-patients in Chinese? (12b)    | 0= No<br>1= Telephone only<br>2= Bilingual/Face to Face |
| Are interpreter services available to in-patients in Vietnamese? (12c) | 0= No<br>1= Telephone only<br>2= Bilingual/Face to Face |
| Are interpreter services available to in-patients in Korean? (12d)     | 0= No<br>1= Telephone only<br>2= Bilingual/Face to Face |
| Are interpreter services available to in-patients in Tagalog? (12e)    | 0= No<br>1= Telephone only<br>2= Bilingual/Face to Face |

| <b>Interpreter Services Policies</b>   | <b>Coding</b>   |
|--|-----------------|
| Does this hospital have a written policy and procedures about the use of Bilingual staff as interpreters? (14a)        | 0= No<br>1= Yes |
| Does this hospital have a written policy and procedures about the use of Face-to-face professional interpreters? (14b) | 0= No<br>1= Yes |
| Does this hospital have a written policy and procedures about the use of Face-to-face volunteer interpreters? (14c)    | 0= No<br>1= Yes |
| Does this hospital have a written policy and procedures about the use of Family or friends as interpreters?            | 0= No<br>1= Yes |

| <b>Quality of Interpreter Services</b>   | <b>Coding</b>   |
|--|-----------------|
| Does this hospital include information on the availability of interpreter services in marketing and community outreach initiatives such as television advertising, marketing brochures, and health affairs? (13) | 0= No<br>1= Yes |
| Does the hospital require an assessment of interpreter fluency in translating medical terms and procedures? (15a)  | 0= No<br>1= Yes |
| Does the hospital require an assessment of interpreter accuracy and completeness? (15b)  | 0= No<br>1= Yes |

| <b>Translation of Written Materials</b>   | <b>Coding</b>  |
|---|--|
| What types of written materials does this hospital routinely provide to in-patients in languages other than English?<br>Informed consent statements? (17a)<br>Medication instructions? (17b)<br>Discharge planning instructions? (17c)<br>Patient advance directives? (17d)<br>Health education material? (17e) | 0= No translation<br>1= Translation into Spanish or an Asian language<br>2= Translation into 2 or more languages |
| Does this hospital post signs providing directions in languages other than English? (19)  | 0= No<br>1= Yes  |

| <b>Leadership and Strategic Planning</b>  | <b>Coding</b>   |
|---|-----------------|
| Does this hospital's statement of strategic goals include Specific language about recruitment of a culturally diverse work force? (20a)     | 0= No<br>1= Yes |
| Does this hospital's statement of strategic goals include Specific language about retention of a culturally diverse work force? (20b)       | 0= No<br>1= Yes |
| Does this hospital's statement of strategic goals include Specific language about the provision of culturally appropriate patient services? | 0= No<br>1= Yes |

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|--|-----------------|
| (20c)  |                 |
| During the strategic planning process, does this hospital routinely assess achievement of its cultural diversity goals? (21)   | 0= No<br>1= Yes |
| Is there a person, office or committee who has dedicated responsibility for promoting this hospital's cultural diversity goals? (22a)  | 0= No<br>1= Yes |
| Does this hospital report information to the community at least once per year about its performance in meeting the cultural and language needs of the service area? (27) Note: This does not include EEO reporting to government agencies on workforce demographics. | 0= No<br>1= Yes |

| <b>Performance Management Systems and QI</b>  | <b>Coding</b>  |
|---|--|
| Does the employee satisfaction survey include measures of diversity climate? (8)  | 0= No<br>1= Yes  |
| Is the following assessment conducted at least once each year:<br>Accessibility of interpreter services? (23a)<br>Racial/ethnic differences in in-patient service use? (23b)<br>Racial/ethnic differences in in-patient assessments of care (satisfaction)? (23c) | 0= No<br>1= Assessment conducted at least once per year<br>2= Assessment conducted and used in quality improvement |

| <b>Data Collection on Inpatient Population</b>   | <b>Coding</b>   |
|--|-----------------|
| Does this hospital collect any ethnicity or racial data on individuals receiving in-patient services? (2)    | 0= No<br>1= Yes |
| Does this hospital collect data on the preferred language for individuals receiving in-patient services? (3) | 0= No<br>1= Yes |

| <b>Data Collection on Service Area</b>   | <b>Coding</b>  |
|--|--|
| Does this hospital track changes in the race or ethnicity of its work force? (6)   | 0= No<br>1= Yes  |
| Does this hospital collect or receive any of the following data on the population residing in the service area? Race/ethnicity (24a) | 0= No<br>1= Yes, data collected<br>2= Yes, data collected and used in service planning |
| Does this hospital collect or receive any of the following data on the   | 0= No  |

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|---|--|
| population residing in the service area? Languages spoken (24b)   | 1= Yes, data collected<br>2= Yes, data collected and used in service planning          |
| Does this hospital collect or receive any of the following data on the population residing in the service area? Income levels (24c)   | 0= No<br>1= Yes, data collected<br>2= Yes, data collected and used in service planning |
| Does this hospital collect or receive any of the following data on the population residing in the service area? Education levels (24d)  | 0= No<br>1= Yes, data collected<br>2= Yes, data collected and used in service planning |
| Does this hospital collect or receive any of the following data on the population residing in the service area? Health risk profiles (for diseases or conditions that disproportionately affect a particular racial/ethnic/gender group such as African American men, Latino women, or individuals of Jewish ethnicity) (24e) | 0= No<br>1= Yes, data collected<br>2= Yes, data collected and used in service planning |
| Does this hospital collect or receive any of the following data on the population residing in the service area? Utilization of health screening services (mammograms, prostate screening exams, PAP smears) (24f)   | 0= No<br>1= Yes, data collected<br>2= Yes, data collected and used in service planning |

| <b>Community Representation</b>  | <b>Coding</b>   |
|--|-----------------|
| Are community representatives routinely involved in the planning and design of in-patient services for culturally diverse populations? (25a) | 0= No<br>1= Yes |
| Are community representatives routinely involved in the evaluation of existing services for culturally diverse populations? (25b)            | 0= No<br>1= Yes |