



HURON BEHAVIORAL HEALTH OPERATIONAL POLICY

Policy #: **RR.1.03**
Issue Date: **06/27/02**

Rev. Date: **04/22/25**
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Title: Cultural Competence Policy

Prepared By: Executive Director

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Purpose:

To define the philosophies, principles, and practices of Huron Behavioral Health with regard to cultural diversity and sensitivity. This policy is established to comply with federal and state requirements to provide culturally competent supports and services to all enrollees, including individuals with Limited English Proficiency (LEP), diverse cultural and ethnic backgrounds, and special communication accommodation needs and also honors the individual's culture.

Scope:

This policy applies to all employees (including full-time and part-time employees), contract providers, volunteers, students, and/or interns of Huron Behavioral Health (HBH) and all individuals served.

Information:

1. Cultural competence includes a general awareness of the cultural diversity of the service area including race, culture, religious beliefs, and regional influences in addition to social factors such as gender, gender identity, sexual orientation, marital status, education, employment, socioeconomic status, and language, etc.
2. It is the philosophy of Huron Behavioral Health to promote an unconditional Culture of Gentleness whereby positive supports and approaches are the norm, regardless of the challenges an individual may present. A culture of gentleness presumes a trauma-informed system of care, which has been shown to significantly improve outcomes for persons served. HBH staff will promote pathways to recovery that recognize resiliency and strength of persons served and their natural supports within a treatment approach that is culturally sensitive.
3. Some of the ways that HBH monitors the cultural needs of the community includes, but is not limited to:
 - Identifying non-English languages and ethnic and cultural backgrounds that employees are likely to encounter while providing services. This is done by using community needs assessment data, census data, consumer utilization data, as well as data from school systems, community agencies, and other county organizations.
 - Identifying the language and cultural needs of each person served and documenting this information in the consumer's case record so other providers are informed of any special needs of the individual.
 - Identifying the point of contact where language and other assistance may be needed.
 - Identifying the resources needed to provide effective language assistance, the availability and location of resources, and the arrangements needed to make access to these resources efficient and timely at no cost to the individual (see also "[Limited English Proficiency \(LEP\) Policy](#)" RR.1.01).
4. HBH has developed a written Cultural Competence Plan that reflects a commitment to providing services in a manner respectful of cultural diversity and ensures that agency interactions with individuals who have Limited English Proficiency (LEP), or cultural differences, are utilized and effective. This includes affirmative efforts to ensure the cultural competency of providers/staff.
5. HBH assesses and monitors services to assure that current policies and procedures related to cultural competence are effective by seeking feedback from consumers, employees, and other stakeholders reviewing current and future needs, and assuring staff is trained in cultural competence principles and philosophies (see also ("[Training Requirements for HBH Employees and Contract Providers Procedure](#)" TR.2.03).
6. HBH evaluates the overall effectiveness of cultural competence and language proficiency efforts through monitoring and periodic evaluation. Monitoring will explore whether HBH's current cultural and linguistic competencies accurately reflect the diversity of the service area. Annual monitoring for outcomes will also

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include information on consumer grievances relative to cultural competence (see [RR.1.02 "Limited English Proficiency \(LEP\) Accommodation Policy"](#) and [RR.2.46 "Limited English Proficiency Procedure"](#)).

Policy:

1. It is the policy of Huron Behavioral Health that all services shall reflect an ongoing commitment to accommodate cultural and linguistic diversity in order to ensure timely access to services and supports that are person-centered, family-driven, youth-guided and provide meaningful participation for all individuals in the service area. Such commitment includes non-judgmental acceptance and respect for the cultural values, beliefs, and practices of the individual, as well as the ability to apply an understanding of the relationships of language and culture identity to the delivery of supports and services. This includes accommodations for alternative communication methods. It also includes identifying American Indian children and collaborating with the appropriate tribe or Indian organization and helping maintain connections between the family and tribe, as appropriate. (See also ["Limited English Proficiency \(LEP\) Policy" \(RR.1.01\)](#), ["LEP Accommodation Policy" \(RR.1.02\)](#), and ["Services to the American Indian Child Procedure" SD.2.04](#)).
2. It is also the policy of Huron Behavioral Health that behavioral health services will be available and provided to all qualifying Huron County residents. These services will be provided by employees who demonstrate competence in cultural sensitivity when providing mental health services. HBH staff will provide services in a manner that assures programs and services are equally accessible to all individuals including those who may require an alternative method of communication.
3. HBH has an internal Consumer Advisory Council that meets regularly whose focus also encompasses cultural competence. The Consumer Advisory Council is responsible for developing and maintaining an annual Cultural Competence Plan.
4. The HBH Board of Directors and the HBH executive leadership support the efforts of staff to maintain a high level of cultural competence. The standards for cultural competence training curriculum will be reviewed and approved by the Consumer Advisory Council.
5. All employees receive cultural competence training as a part of new employee orientation and annually thereafter (see ["Training Goals and Requirements for HBH Employees Procedure" TR.2.03](#)). Contract providers also receive initial and annual cultural competence training. HBH has procedures in place for educating and training staff regarding the availability and processes to obtain information in alternative formats (see also ["Limited English Proficiency \(LEP\) Procedure" RR.2.46](#)). The goal of cultural competence training is to enhance staff awareness and competency to comprehend and incorporate the cultural diversity strategies in order to provide services in the most effective manner in order to meet the needs of the consumer, including their cultural needs. As a result, training is:
 - supported by HBH administration and the Board of Directors
 - reflective of the diversity of the community
 - held on a regular, on-going basis (not less than annually)
 - provided in a variety of means for continuing education
 - reflective of issues staff have requested
 - required in the annual training plan for every employee and reviewed annually in employee appraisals (see ["Employee Performance Appraisal/Evaluation Procedure" HR.2.05](#))
6. In support of the MSHN Cultural Competency Policy, HBH adheres to MSHN's seven (7) components to organizational cultural competence:
 - a. a process for conducting community assessments
 - b. written policy and plan that support MSHN's Cultural Competency Policy (see this policy and "Annual Cultural Competence Plan")
 - c. a process for measuring service assessment, evaluation, monitoring, complaint reporting, and continuous quality improvement (see ["Quality Improvement, Quality Assessment and Performance Improvement Program \(QAPIP\) Policy" QI.1.01](#))

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- d. on-going training, resources, and supports to ensure staff awareness (see "[Training Requirements for HBH Employees and Contract Providers Procedure](#)" TR.2.03)
 - e. a service array with services and supports that reflect and embrace the cultures of individuals and the community
 - f. outreach activities targeted at under-represented communities and disparities in the service delivery (see also "[Access to Services, Eligibility, Medical Necessity, and Referrals Policy](#)" ISP.1.01)
 - g. evaluation/assessment tools that reflect cultural competence and sensitivity to individual's cultural identity (see also "[Assessments Policy](#)" ISP.1.02)
7. Cultural competence will be measured by the following methods which may include but is not limited to:
- feedback from trainings
 - responses from consumer satisfaction surveys
 - feedback from the Consumer Advisory Council
 - input from peer discussion groups
 - responses from Community Focus Groups
 - data from Community Needs Assessments
8. HBH strives to maintain a staff composition that reflects the cultural diversity of the community and to maintain its high standards relative to employee skills, education, and cultural sensitivity.

Definitions/Acronyms:

Acronyms:

HBH – Huron Behavioral Health

LEP – Limited English Proficiency

MDHHS – Michigan Department of Health and Human Services

PIHP – Pre-paid Inpatient Health Plan

Definitions:

Accommodations: Internal or external resources needed to ensure the consumer is afforded meaningful access to services at no cost to the consumer. Examples include augmentative communication specialists, voice interpreters, interpreter/translation services, etc.

Competence: refers to having the capacity to function within the context of culturally integrated patterns of human behavior defined by a group.

Cultural Competence: refers to a set of congruent behaviors, attitudes, beliefs, practices, and procedures that come together in a system, agency or among professionals to enable that system, agency, or those professionals to work effectively in cross-cultural situations. It is an ongoing process by which individuals and systems respond respectfully and effectively to all people in a manner that recognizes, affirms, and values diverse populations.

Culture: refers to the integrated patterns of human behavior that includes thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups.

Limited English Proficiency/LEP: Is the inability to speak, read, write, or understand English at a level that permits effective interaction with health care providers. Accommodating LEP is the responsibility of providers of health and social services who receive Federal Financial Assistance from the U.S. Department of Health and Human Services.

Population Eligible for or Likely Impacted by the Program or Services: Those persons who are in the geographic area that has been approved as the service provider's service area, and who are either eligible for benefits or services provided by the entity, or otherwise, are directly affected by such an entity's policies and practices. An example is a parent who is seeking services for a child. The child is the one who is eligible for services, but the parent is also impacted by the entity's policies and practices.

Forms:

N/A

Records:

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N/A

Reference(s) and/or Legal Authority

COA standards

MDHHS/PIHP Medicaid Managed Specialty Supports and Services Contract

Executive Order 13166 @ <https://www.justice.gov/crt/executive-order-13166>

Department of Labor Policy Guidance on LEP @ <https://www.dol.gov/oasam/regs/fedreg/notices/2003013125.htm>

[HBH Annual Cultural Competence Plan](#)

[HR.2.05 Employee Performance Appraisal/Evaluation Procedure](#)

[ISP.1.01 Access to Services, Eligibility, Medical Necessity, and Referrals Policy](#)

[ISP.1.02 Assessments Policy](#)

[RR.1.01 Limited English Proficiency \(LEP\) Policy](#)

[RR.1.02 Limited English Proficiency \(LEP\) Accommodation Policy](#)

[RR.2.46 Limited English Proficiency \(LEP\) Procedure](#)

[QI.1.01 Quality Improvement, Quality Assessment and Performance Improvement Program \(QAPIP\) Policy](#)

[SD.2.04 Services to the American Indian Child Procedure](#)

[TR.2.03 Training Requirements for HBH Employees and Contract Providers Procedure](#)

Change History:

Change Letter	Date of Change(s)	Changes
A	03/28/03	Brought into new documentation system and new format with minimal content changes: combined "Cultural Competency Definition Policy" and "Cultural Competence Policy" into one policy (RR.1.02)
B	12/09/05	Removed all sections & references that related to LEP and put those items into the agency's various LEP policies (RR.1.01 & RR.1.02).
C	08/28/08	Revised to comply with regional AAM Policy (11.5.6 dated 04/17/08).
D	06/17/09	Reviewed and revised to comply with COA 8 th Edition Standards and present practices, also incorporated regional added "including their cultural needs" to #5, added second sentence in #1,
E	03/20/13	Reviewed and revised to comply with 8 th edition COA standards –in #1 added reference to RR.1.01 & RR.1.02, added "QI.2.32 Cultural Competence Committee Procedure" reference (2 places), added #3, added last bullet (Focus Groups) in #6 corrected several typos and grammatical errors without changing sentence content.
F	10/29/14	Removed references to "AAM" throughout document (6 places), corrected staff titles, made several minor grammatical changes without changing content, in "Information" section #6 removed "annually", .
G	03/22/16	Reviewed and revised to comply with MSHN policy "Service Delivery System – Cultural Competence" – In "Purpose" section added provide culturally competent supports and services" and removed "promote the delivery of services in a competent manner", in "Information" section removed previous statement and moved it to "Definitions" section and replaced with current paragraph, in "Policy" section #1 added 2 nd sentence, made several additional minor grammatical changes/corrections for clarification without c hanging sentence content.
H	01/02/18	Added references to "HR.2.05" (2 places), in "Acronyms" section added "LEP" & changed "MDCH" to "MDHHS", made numerous minor wording/grammatical changes/corrections throughout document without changing sentence content.
I	11/20/19	In "Information" section #7 added "and contract providers", in #9 last bullet added reference to RR.2.46, in "Policy" section #5 added last sentence ("Contract providers.....training"), corrected hyperlinks, made several minor wording/grammatical changes/corrections throughout document without changing sentence content.
J	10/20/21	Total rewrite of policy – see Controlled Documentation Manager for changes and/or previous versions of this policy.
K	08/24/23	In "Information" section #5 added reference to TR.2.03, made several minor wording/grammatical changes/corrections throughout policy without changing sentence content.
L	01/28/25	In "Policy" section added #6, made several minor wording/grammatical changes/corrections throughout policy without changing sentence content.
M	04/22/25	In "Policy" section #1 added "family-driven, youth-guided", in #3 and #4 changed "Cultural Competence Committee" to "Consumer Advisory Council" as the Consumer Advisory Council assumed the responsibilities of the Cultural Competence Committee in 2024 when this committee was discontinued as a stand-alone committee, removed reference to QI.2.32 ("Cultural Competence Committee Procedure"), in "References" section removed QI.2.32, made several minor wording/grammatical changes/corrections throughout policy without changing sentence content.