POLICY/PROCEDURE REGARDING: Cultural and Linguistic Competency Requirement for Behavioral Health Services

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Director of Behavioral Health Services  

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References:  


Purpose:

The purpose of this policy is to formally designate cultural and linguistic competence as an essential characteristic, as well as a defining quality and standards that must be embedded in all aspects of the Behavioral Health Services (BHS) systems of care.

Policy Statement:

The BHS service system shall function with cultural and linguistic competency that responds effectively to the needs and differences of all individuals based on their race, gender, age, physical or mental status, sexual orientation and ethnic or cultural heritage. BHS shall establish a system-wide environment of support, training and education related to cultural competence to assist the BHS workforce in advancing cultural and linguistic competence.

Scope:

This policy applies to all BHS Civil Service and Contractor operated programs.

PROCEDURES

A. Organizational Accountability

1.1 BHS shall model and promote cultural competency as an active part of its organizational culture, and will develop and/or provide the necessary professional development training to staff in these areas.

1.2 BHS shall maintain its Cultural Competency Task Force, which reflects the diverse views of many ethnic and cultural communities necessary to provide guidance and feedback in advancing cultural competency throughout all mental health service providers. This group shall meet on a bi-monthly basis to discuss any observations and developments in cultural competency.
1.3 BHS shall establish guidelines for the Cultural Competency Tracking System (database), the Annual Cultural Competency Report (narrative) and evaluation methods that will be used to define service/staffing needs, assess and identify opportunities for improvement, develop action plans, and design programs and activities appropriate and relevant to population(s) served.

1.4 All contracting entities providing behavioral health care and services will carry out their duties in a culturally competent manner that is reflective of the diverse population of the City & County of San Francisco and staff in the workplace.

1.5 All contracting entities, who meet required budget criteria established by the Office of Cultural Competence, will provide an annual Cultural Competency Report that define service needs, assess and identify opportunities for improvement, develop action plans, and design programs and activities appropriate and relevant to population(s) served.

B. Availability of Appropriate Language Services & Language Interpreters

2.1 BHS will recruit and hire behavioral health professionals who are proficient in non-English languages.

2.2 In accordance with applicable Federal, State and City & County Policy and Agreements, BHS will provide equal access to all non-English speaking behavioral health clients/consumers in the City & County of San Francisco.

2.3 All Limited English Proficiency (LEP) clients seeking services at BHS facilities will be offered access to the services of a qualified oral interpretation at no cost to them.

2.4 BHS will maintain sufficient interpreter resources and provide these services in a timely manner. As a first preference, qualified bilingual staff who can communicate directly with clients/consumers in their preferred languages will be made available. When such staff are not available, face-to-face interpretation provided by contract or volunteer interpreters is the next preference. A telephone interpreter will be used as a supplemental system when an interpreter is needed immediately, or when services are needed in an infrequently encountered language.

2.3.1 Under no circumstances shall a client/consumer be denied services because of a language barrier.

2.3.2 DPH Office of Cultural Competence and Client Relations will collect and update all demographic data and linguistic capacity of BHS staff, interns, peers employees, and volunteers on an annual basis through its Cultural Competency Tracking System (CCTS).

2.4 DPH staff who are designated as bilingual and provide interpreting services to clients will be qualified, based on their performance on a test issued by Dept. of Human Resources. Internal and CBO staff will also be trained in techniques, ethics and cross cultural issues, tested and monitored by a BHS approved program to determine competency. Recruitment and placement of interpreters will be based on resource availability or qualified interpreters.
2.5 Family, friends or other individuals will not be required, suggested or used as interpreters unless the client chooses to use them as such. Only after being informed of the availability of free interpreter services and determining that the effectiveness of those services is not compromised or the LEP person’s confidentiality is not being violated, may a family member or friend be used.

2.5.1 Directly operated and contract programs will have access to the Language Line Services Interpreter services 24 hours a day, 7 days a week, via ACCESS CENTER at 415-255-3737.

2.5.2 Directly operated and contract programs will maintain an internal roster of staff proficient in non-English languages provided by the BHS Office of Cultural Competence and Client Relations on an annual basis through the CCTS.

2.5.2.1 BHS staff identified by the Department of Public Health Human Resources Department as proficient in a non-English language may qualify for bilingual compensation.

2.5.3 The offer and declination by the LEP person for interpreter services will be documented in the medical record and through the use of informed consent forms. Children shall not be used to provide interpreting services except in life-threatening situations.

C. **Hearing Impaired Behavioral Health Access**

3.1 In accordance with applicable Federal, State and County policies and agreements, BHS shall provide equal access to services for clients with behavioral health issues and hearing impairment at all City & County of San Francisco directly operated and contract service programs.

3.2 Staff having client contact shall review this policy annually in order to become familiar with utilization of interpretation services and to become sensitive to the needs of clients with hearing impairment. Supervisors shall document this review.

3.3 Upon request, American Sign Language (ASL) interpretation services will be available and offered to clients with hearing impairments **at no cost to them.**

3.4 BHS staff or appropriate qualified contract persons proficient in ASL will be identified and utilized to provide services to the hearing impaired as appropriate to their service site assignments.

3.5 Sign language interpretation services are available Monday through Friday, after hours and on weekends. Interpretation services are available via the BHS agreement with Bay Area Communication Services (BACA) and International Effectiveness Center (IEC).

3.6.1 **Staff ACCESS, Non-Emergency Sign Language Service**

The BHS Office of Cultural Competence and Client Relations Administrative Analyst shall coordinate all Staff requests for sign language interpreter services. BHS and contractor staff must contact Office of Cultural Competence and Client Relations Administrative Analyst at 415-255-3426 Monday through Friday, 9:00 a.m. to 5:00 p.m. to receive authorization to access service from BACA. After hours and on weekends, staff may
contact BACA directly at 415-356-0405. BACA requires a three-day notice prior to dispatching an interpreter for non-emergency counseling services.

3.6.2 Staff must notify the Office of Cultural Competence and Client Relations Administrative Analyst on the next business day of all after hours and weekend requests.

D. **Availability of Written Translations**

4.1 All BHS vital documents will be translated into, at minimum, the five identified threshold languages for the City & County of San Francisco*. Threshold languages may also vary, based on the setting or service area; programs are encouraged to consider concentration languages as well where appropriate and necessary. BHS staff responding to LEP persons making inquiry regarding English language documents will access bilingual staff or request an interpreter. Vital documents requiring translation include, but may not be limited to signage, intake forms, etc.

4.2 Other written materials will be translated when it is determined that a printed translation is needed for effective communication. If there is no translation for an English-language document, or the LEP client cannot read the translated version, a qualified interpreter will orally sight translate the document for the LEP individual whenever possible.

4.3 Materials in alternative formats will be developed for individuals who cannot read, those who speak non-written languages, as well as for people with sensory, developmental, and/or cognitive impairments.

E. **Informing Clients of Their Right to Language Services**

5.1 BHS facilities will post and maintain signs, informing the public of the availability of interpreter services at all points of contact in appropriate areas of the facilities. The signs, in at minimum the threshold languages for the City & County of San Francisco*, will say: “You have the right to an interpreter at no cost to you.” A “Point to Your Language” card in, at least the threshold languages, will also be maintained at the points of contact and be made available for front line staff.

5.1.1 BHS staff will ask clients for their preferred written and spoken language and whether they need an interpreter at any point where the client presents for care, including telephone calls. When staff place or receive telephone calls and cannot determine what language the person on the line is speaking, a trained telephone interpreting service will become involved in making an expedient determination. LEP callers generally have sufficient proficiency to explain the need to speak in another language. Training will include techniques on how to communicate over the phone with LEP callers using simple phrases in order to determine language needs.

F. **Diversity Leadership and Employees**

6.1 BHS will build a workforce able to address the cultural and linguistic needs of City & County of San Francisco residents and provide appropriate and effective services as required by Federal, State, and City & County laws, regulations and policies. BHS will promote a system of
recruitment and retention of qualified staff from diverse backgrounds that understand their client cultures and communities in order to provide better service to the community.

6.2 BHS will use the CC Tracking System to annually collect, assess and report data on staff, interns, volunteers and community demographics as well as the organization’s progress in recruitment, hiring and retention of qualified diverse, bilingual and bicultural employees.

6.3 The BHS goal of staff diversity will be disseminated and incorporated into the organization’s mission statements, strategic plans, and goals and objectives.

G. Cultural & Linguistic Competency Trainings

7.1 BHS will provide the necessary tools, skills and knowledge to support, improve and evaluate culturally competent practices. This includes creating a workplace environment that empowers staff to work comfortably and effectively across the cultural and linguistic boundaries presented by clients/consumers and with other BHS staff, interns and volunteers.

7.2 BHS will develop and provide training opportunities on cultural and linguistic competency for all staff, interns, volunteers and senior management, as well as clinicians and providers and other contracted and affiliated personnel. These trainings will include the linkage between cultural and linguistic care and improved health access, legal requirements and policies including the BHS policies and procedures, quality of care issues and the importance of using qualified interpreters. BHS staff at all levels, have the responsibility to undertake training and practices that promote culturally competent care.

* The California Department of Health Care Services requires that the state’s county-operated mental health agencies provide information and services to Medi-Cal beneficiaries in their primary language when the number of beneficiaries in the county reaches “threshold” levels. “Threshold” is defined as “3,000 beneficiaries or 5% of the Medi-Cal population, whichever is lower, whose primary language is other than English.” Concentration language is described as each LEP language group in the service area that constitutes 5% of 1,000 individuals, whichever is less. Threshold languages for the City & County of San Francisco are: Chinese (Cantonese and Mandarin), Russian, Spanish, Tagalog, and Vietnamese.

Contact Person:
Cultural Competence Analyst, 415-255-3426.

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