

## **Cultural Competency and Health Literacy Workgroup Charge**

### **Purpose Statement and Objectives**

This workgroup is being formed to develop 1) a cultural competency and health literacy strategy and 2) workforce training strategy focused on the drivers of health disparities for the Leatherstocking Collaborative Health Partners (LCHP). Specific cultural challenges in the service area include low literacy; low health literacy; a small, but growing, Hispanic community; several developmentally disabled populations located in residential communities; and geographic isolation from available health care services. With increased cultural diversity in LCHP's service area, there is a strong need for culturally competent care coordination and patient navigation services that will be sensitive to the beliefs and practices of the areas scattered ethnic and religious groups. Health literacy is a critical component of patient safety and will be a key factor in LCHP's mission for health improvement.

Source: Leatherstocking Collaborative Health Partners DSRIP Implementation Plan Project

#### **Duration and Time Commitment**

The workgroup will be committed through the end of DSRIP DY2, Q1 (June 30, 2016). Biweekly effort TBD.

## Scope

Decisions and activities outside of the identified milestones will be documented and pursued following the achievement of steps and milestones laid out in the revised plan submitted to the Department of Health on August 6, 2015. Depending on proposed strategy, the workgroup will reassess whether to continue in support of implementation activities beyond the current meeting schedule.

### **Members**

Chairperson: Zoe Aponte,

Co-Chairperson: Frances Wright

Group Members: Tamie Macdonald

Jill Tibbett

More members TBA.



## **Supporting Resources**

- Leatherstocking Collaborative Health Partners Community Needs Assessment
- LCHP Workforce Workgroup
  - Workforce Training Strategy (DY1, Q3)
  - Workforce Transition Roadmap (DY1, Q3)

Other resources are dependent on workgroup activities.

# **Reporting Plan**

The workgroup lead will provide a monthly report outlining the participation, progress on primary tasks, supporting documents, and documentation of any past-due tasks to the LCHP Workforce Steering Committee. Workgroup meetings must be documented, using LCHP guidelines for uniform meeting minutes. Additionally, the lead or other workgroup members may be asked to present at Board or Committee meetings.

#### **Deliverables**

The workgroup will deliver a series of documents outlining the status of key steps, including but not limited to meeting minutes and monthly reports. The primary deliverables are:

- 1. Cultural Competency/ Health Literacy strategy signed off by the PPS Board. The strategy should:
  - a. Identify priority groups experiencing health disparities (based on CBA/other analyses;
  - b. Identify key factors to improve access to quality primary, behavioral health, and preventative health care.
  - c. Define plans for two-way communication with the population and community groups through specific community forums
  - d. Identify assessments and tools to assist patients with self-management of conditions (considering cultural, linguistic and literacy factors);
  - e. Identify community-based interventions to reduce health disparities and improve outcomes
- 2. Cultural competency training strategy, signed off by the LCHP Board. The strategy should include:
  - a. Training plans for clinicians, focused on available evidence-based research addressing health disparities for particular groups identified in the cultural competency strategy



b. Training plans for other segments of the workforce (and others as appropriate) regarding specific population needs and effective patient engagement approaches