

4 - Mobile Health Screenings

4.1. How to Use This Chapter

This chapter describes how to provide quality BCCHP services in an off-site mobile setting.

Mobile screenings require advance planning and coordination.

Strong teamwork is the hallmark of successful mobile screening clinics. To insure that the mobile screening clinic and its systems of medical care and follow-up, are in place.

First-time coordinators must observe and work with an agency that already has experience conducting a mobile screening clinic. Call the BCCHP office for contact information.

Enrolling in BCCHP at a mobile site:

When a client enrolls in BCCHP at a mobile screening clinic, we must:

1. Correctly enroll the client so that BCCHP pays for the client's services
2. Provide appropriate services
 - The client should have a Women's Health Exam prior to the mammogram. This includes pelvic exam, Pap test (if indicated), and clinical breast exam (CBE).
 - At a *minimum*, the client should have a clinical breast exam before the mammogram. A BCCHP-contracted, licensed physician or nurse practitioner must provide the CBE.
 - Healthcare providers must have a current Washington license and their malpractice insurance must cover services provided outside the clinic setting. Note: most community clinics DO NOT cover off-site clinical services.
 - Inform the client of all test results
 - Assure follow-up on any abnormal findings
3. Encourage the client to establish care with a BCCHP-contracted primary care provider

This chapter includes tools to help the health care team provide the highest quality service when conducting a mobile screening clinic.

1. Overview of mobile health screenings
2. Helpful Resources List
3. Checklists: This is a detailed planning tool made up of 4 sections:
 - General List of forms and supplies
 - Space Requirements
 - Planning Timeline
 - Description of Roles and Responsibilities for Staff and Volunteers
4. Steps to a More Culturally Competent Practice

4.2. Mobile Health Screenings - Overview

Mobile health screenings should not be a substitute for establishing a health care home with a regular provider.

Mobile health screenings bring screening services into the community. Mobile health screenings provide quality care in a culturally safe and geographically convenient location.

Bringing services to a community can help when working with groups where barriers have previously prevented women from receiving regular health care. Mobile events can be held in both urban and rural areas, in community or business settings, including shopping malls, religious settings, and health clinics. Many of the events are for a specific population, such as for women who are recent immigrants, women of color, non-English speaking women, or lesbians.

There are three kinds of mobile health screening models.

1. Remote-Site Mobile Health Screenings

A mammogram mobile coach can serve clients in remote areas or stand-alone settings. This type of screening can take place in a city, smaller communities, or rural areas. A BCCHP-contracted nurse practitioner or physician performs the women's health exam. The exam includes a CBE, pelvic exam, and Pap. The mammography technologist performs the mammogram. All of these procedures take place on the coach. The coordinator for the screening refers the patients to a BCCHP-contracted clinic for continuity of care. Up to 26 patients can be screened in one day.

2. Onsite Community Mobile Health Screenings

This type of screening is usually held with an identified group, such as a religious or community group, or at a health fair. A community facility provides rooms for intake, exams, and the portable mammogram unit. A BCCHP-contracted nurse practitioner or physician performs the women's health exam. The mammography technologist performs the mammogram. The screening coordinator for the event refers the client to a BCCHP-contracted clinic to encourage continuity of care. Up to 26 patients can be screened in one day.

3. Clinic Mobile Mammogram Day

For these mobiles, the clinic schedules the mobile mammogram unit or the mobile coach to come to the clinic and perform onsite mammograms. Clients enroll in BCCHP prior to getting scheduled for the mammogram day. Clients should have the CBE and, if possible, the pelvic exam and Pap testing, if indicated, before the event. This type of clinic day allows clients to have a mammogram in a comfortable and familiar setting. Up to 26 patients can be screened in one day. These clinic mammogram days are often ongoing and planned for the same day each month.

Symptomatic Clients

Clients with breast symptoms or those following-up on a previous finding **should not** receive services at a mobile screening. Examples of previous findings include: "Assessment Incomplete" or suspicious findings on a prior mammogram or clinical breast exam (CBE).

- Schedule all symptomatic clients ages 40 - 64 with a BCCHP-contracted clinic for a CBE. If the CBE is suspicious, the provider should refer the client to a diagnostic facility.
- Clients under age of 40 may enroll in BCCHP if they are symptomatic or at increased risk. They should **never** get scheduled for a mobile health screening. Enroll these clients

and schedule them for a CBE at a BCCHP-contracted clinic. If the CBE is suspicious, the provider should refer the client to a diagnostic facility.

- Refer clients who need further tests after their screening exam for an appointment at a diagnostic facility. This appointment is the best approach for the client because she can also receive further diagnostic procedures at that same visit. This also helps to resolve clients' abnormal findings within the 60-day timeframe that CDC and BCCHP require.
- Refer clients who have an abnormal finding at the mobile health screening to a radiology facility and connect the client with a BCCHP-contracted clinic for follow-up care. The clinical provider and the screening coordinator are responsible for following-up on this referral.

4.3. Mobile Health Screenings - Helpful Resources

Scheduling a Mobile Mammography Unit:

- Assured Imaging - (206) 467-1949
- Evergreen – (425) 899-3251
- Swedish Medical Center - (206) 861-6279
- Seattle Cancer Care Alliance - (206) 288-7800

Scheduling a clinician: Call BCCHP for a list of clinicians.

BCCHP forms: View our website at www.kingcounty.gov/health/cancer

Federal Poverty Level Guidelines: see website

Brochures, Health Education Materials, and Websites:

- for materials and incentives call 206-263-8200 or view the web site:
 - www.kingcounty.gov/health/cancer
- Susan G. Komen for the Cure - Puget Sound Affiliate - www.pskomen.org
Komen also has limited **small grant funding** for costs associated with mobile screening set-up. Apply for funds to cover incidental costs, i.e. food, gift bags, interpreters, etc.
- Ethnomed - www.ethnomed.org - provides information on cultural beliefs and resources to support health care for immigrants new to the United States.

Other health screenings to consider:

- Cholesterol/glucose screening
- Blood pressure
- Height
- BMI
- Hope Heart Institute: Provides screenings and education to help meet a heart healthy lifestyle. Call Meagan Jepson at (425) 456-8717 for more information about their program.

- Tobacco Quit Line - (1-800-Quit-Now) The Quit Line has a program for uninsured or under insured clients, which includes self-help material and medication support.

4.4. Mobile Health Screenings - Promotion

Remember to give a schedule and screening promotional flyers to the BCCHP Health Educator to promote the activity with the BCCHP partners' group.

Suggestions for where to advertise your mobile health screening:

- Community newspapers
- Clinic waiting areas and newsletters
- Event location newsletter and common area
- e-mail distribution lists
- Community centers
- Local or language specific radio stations
- School and business related newsletters
- Neighborhood Service Centers
- Libraries
- Other community related programs
- Laundromats
- Coffee Houses
- Church newsletters
- Hair Salons

4.5. Check List – General

Community Mobile Health Screenings	
Templates and Lists: see Helpful Resources in this chapter	
<input type="checkbox"/>	Scheduled appointments template
<input type="checkbox"/>	Client Sign-In List
<input type="checkbox"/>	BCCHP Contracted Providers List
<input type="checkbox"/>	BCCHP and Komen Income Eligibility Guidelines: See our website
<input type="checkbox"/>	Staff and Volunteer Role Description (1 copy for each staff member and volunteer)
Forms: available on our website at www.kingcounty.gov/health/cancer	
<input type="checkbox"/>	BCCHP Forms: English and appropriate translated versions Consent Enrollment Radiology Women's Health Exam BCCHP Enrollment Card Collate into packets for clients prior to the event.
<input type="checkbox"/>	Radiology Provider Forms: Check with facility – may include:
<input type="checkbox"/>	Consent <input type="checkbox"/> Patient Information <input type="checkbox"/> Prior Mammogram and Health History
Education Materials: In English and appropriate languages and reading levels (See Helpful Resources in this chapter)	
<input type="checkbox"/>	BCCHP program brochures
<input type="checkbox"/>	BCCHP health education materials
<input type="checkbox"/>	Breast Models in various skin colors and sizes
<input type="checkbox"/>	Cervical Health Model
<input type="checkbox"/>	Colon Cancer polyp model
Supplies	
<input type="checkbox"/>	Banner / Poster Board Sign / Tent Sign
<input type="checkbox"/>	Extension Cords
<input type="checkbox"/>	Office supplies, as needed: <input type="checkbox"/> File Folders <input type="checkbox"/> Large Paper Clips
<input type="checkbox"/>	Mailing Folders (for confidential client information)
<input type="checkbox"/>	Stapler <input type="checkbox"/> Masking Tape <input type="checkbox"/> Pens <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input type="checkbox"/>	_____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Incentives:	
Incentive items are nice to have at screening. Exact items may depend on availability.	
Providing gift bags to clients who attend the mobile screening clinic is a nice gesture, if within your budget. The more we can make this a pleasant experience and reinforce that we care about their getting screened, the better. Refer to “Helpful Resources” above or contact the BCCHP Outreach Coordinator for more information and ideas.	

Screening Tools
<input type="checkbox"/> Blood Pressure Cuff (with other sizes) <input type="checkbox"/> Stethoscope <input type="checkbox"/> Wipes
<input type="checkbox"/> BP Record Cards ~35 copies
<input type="checkbox"/> FOBT or FIT kit.
Food and Beverage (local vendors may donate)
<input type="checkbox"/> Hot Beverages: <input type="checkbox"/> Coffee <input type="checkbox"/> Hot Water <input type="checkbox"/> Tea <input type="checkbox"/> _____ <input type="checkbox"/> Sugar <input type="checkbox"/> Cream <input type="checkbox"/> Nonfat Milk
<input type="checkbox"/> Cold Beverages: <input type="checkbox"/> Juice <input type="checkbox"/> Bottled Water <input type="checkbox"/> _____
<input type="checkbox"/> Food: Examples: <input type="checkbox"/> Fresh Fruit <input type="checkbox"/> Dried Fruit <input type="checkbox"/> Nuts <input type="checkbox"/> Pretzels <input type="checkbox"/> Low Fat Popcorn <input type="checkbox"/> Other _____
<input type="checkbox"/> Lunch for Staff / Volunteers
Food and Beverage Supplies
<input type="checkbox"/> Cups (hot and cold) <input type="checkbox"/> Napkins <input type="checkbox"/> Paper Towels <input type="checkbox"/> Utensils <input type="checkbox"/> Tablecloths
<input type="checkbox"/> Serving Utensils <input type="checkbox"/> Paper Plates <input type="checkbox"/> Plastic Bowls <input type="checkbox"/> Baskets <input type="checkbox"/> Trays
<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Miscellaneous
<input type="checkbox"/> Cell Phones
<input type="checkbox"/> "Exam in Progress" Signs (3 copies)
Budget (things to consider)
Facility rental Mammogram unit (set-up charge varies) Refreshments Clinicians Interpreters Materials

4.6. Check List – Space Requirements

Community Mobile Health Screenings
Mobile Mammography machine – check resource list to confirm with appropriate contractor
<input type="checkbox"/> Private space for mammography and square footage requirement of 6 x 10 feet
<input type="checkbox"/> Sink; preferably in the room with the mammogram machine
<input type="checkbox"/> Wheel-chair accessible doorway ≥ 32 inches
<input type="checkbox"/> Electrical outlet
<input type="checkbox"/> Elevator capacity of 400 lbs.
<input type="checkbox"/> Space for film developing cart (can fit in a hallway or can use an exam table)
Mobile Coach - check resource list to confirm with appropriate contractor
<input type="checkbox"/> Relatively flat space to park the coach which can be up to 65 feet long
<input type="checkbox"/> Height requirement: the coaches can be up to 13 feet tall. Note that electrical lines may interfere with the coach's access on some streets.

<input type="checkbox"/> Passenger side of coach must be next to a sidewalk or a walkway.
<input type="checkbox"/> There is no need for electrical access - the coaches function by a generator.
<input type="checkbox"/> Close access to restrooms
<input type="checkbox"/> Separate space for intake, education and other screenings (e.g. blood pressure)
Women's Health Exam and Pap test
<input type="checkbox"/> Private room or space made with portable walls
<input type="checkbox"/> Sink in room or nearby; Bathroom nearby
Intake, Resources and Education
<input type="checkbox"/> Semi-private space for intake conversations
<input type="checkbox"/> Space for resources and educational materials
<input type="checkbox"/> Space for health screenings (blood pressure, nutrition) if applicable
<input type="checkbox"/> Photocopy machine available
<input type="checkbox"/> Snack area for clients

4.7. Check List – Planning Timeline

Community Mobile Health Screenings
6 - 12 Months Prior to Clinic
<input type="checkbox"/> Schedule screening dates with: <input type="checkbox"/> Mammography contractor <input type="checkbox"/> Clinician Clarify with the mammography facility if there is a fee to use their unit. Schedule early for screening dates in April, May, or October. The clinician (physician or nurse practitioner) must have a BCCHP contract, be licensed, and have malpractice insurance that allows services provided outside a clinic facility. For the clinician and mammography unit, ask about the minimum and maximum number of clients they can see in one day.
3 - 4 Months Prior to Clinic
<input type="checkbox"/> Determine the site. Check with the radiology provider about site suitability. <input type="checkbox"/> Letter of agreement and proof of liability (per location requirements). <input type="checkbox"/> Secure host site screening dates. <input type="checkbox"/> Determine the timeframe. For events with a coach, there could be a required time minimum that would also allow for set-up and breakdown. Check with the mammography contractor about these time requirements. At the site visit, assess the suitability of the location: <ul style="list-style-type: none"> <input type="checkbox"/> Space and facility requirements (See: Space Requirements) <input type="checkbox"/> Access for people with disabilities; some coaches are wheelchair accessible and some are not <input type="checkbox"/> Parking At the site visit, determine the type of clinic that is the most appropriate for the group and location, based on the: <ul style="list-style-type: none"> <input type="checkbox"/> Services to be provided <input type="checkbox"/> Number of appointments needed to conduct the event <input type="checkbox"/> Number of providers and volunteers available <input type="checkbox"/> Need for interpreters. Note that there may be a fee
<input type="checkbox"/> Confirm event date and location with: <input type="checkbox"/> Mammography contractor <input type="checkbox"/> BCCHP clinical provider <input type="checkbox"/> Staff and volunteers.

<input type="checkbox"/> Conduct a meeting with staff and volunteers. At this meeting: <ul style="list-style-type: none"> <input type="checkbox"/> Distribute Role Description List and discuss the roles <input type="checkbox"/> Designate duties and sign-up for work shifts <input type="checkbox"/> Review Check Lists <input type="checkbox"/> Designate a scheduler to make and track appointments <input type="checkbox"/> Determine contact phone number for appointment scheduling <input type="checkbox"/> Plan media strategy and flyer distribution <input type="checkbox"/> Consider writing a small grant or donation request for incidentals such as food, beverages or gift bag items. See “Helpful Resources” on page 3 of this chapter.
1 Month Prior to Clinic
<input type="checkbox"/> Design and distribute flyer throughout communities. See examples in Helpful Resources section of this chapter. <input type="checkbox"/> Distribute media release and media packets. <input type="checkbox"/> Provide materials to the scheduler. These should include: <ul style="list-style-type: none"> <input type="checkbox"/> Scheduled Appointments template [Check with mammography provider regarding time slots. Allow 1 hour lunch for mammography technologist] <input type="checkbox"/> BCCHP and Komen Income Eligibility Guidelines (Chapter 2, pages 1-2 Error! Bookmark not defined.of this manual) <input type="checkbox"/> Cell phone <input type="checkbox"/> Records request forms to mail to client to release prior mammogram results <input type="checkbox"/> Telephone numbers of primary contact (scheduler) and address of event <input type="checkbox"/> Printed directions to the location <input type="checkbox"/> Bus schedules to the location
<input type="checkbox"/> Contact local vendors to request donations of food and beverages, lunch for staff, incentives.
<input type="checkbox"/> Obtain educational materials in the appropriate languages and reading levels.
1 Week Prior to Clinic
<input type="checkbox"/> Make reminder calls to clients with appointments
<input type="checkbox"/> Contact staff and volunteers with any updates and respond to their questions or concerns.
<input type="checkbox"/> Mobile screening clinic coordinator is available answer questions and address unexpected problems
Day of Event
<input type="checkbox"/> Review Check Lists and Scheduled Appointments List.
<input type="checkbox"/> Review roles with staff and volunteers.
<input type="checkbox"/> Set up 1 - 1.5 hours prior to event. Remember to set out Client Sign-In sheet
<input type="checkbox"/> If using the mobile coach, note that it needs to be in place 2 hours prior to the start of the clinic to warm up its power source.
<input type="checkbox"/> Make certain that the clinical provider has the Pap tests to deliver to the lab
<input type="checkbox"/> Attend to other details of the day at the end of the clinic

Post Screening Follow Up
<input type="checkbox"/> Collect data and create follow-up Screening Results Report for distribution.
<input type="checkbox"/> Assure that completed BCCHP Forms are sent to BCCHP within 10 days of the mobile screening event.
<input type="checkbox"/> Send communication mentioning number of clients served and thank yous to:
<input type="checkbox"/> host sites <input type="checkbox"/> volunteers <input type="checkbox"/> local vendors <input type="checkbox"/> _____
<input type="checkbox"/> Assist with client follow-up as needed.
<input type="checkbox"/> Follow-up with clients to see how services went, offer reminders like referrals.
<input type="checkbox"/>

4.8. Check List – Roles and Responsibilities for Staff and Volunteers

Community Mobile Health Screenings
Coordinator
<input type="checkbox"/> Coordinate all mobile health screening components <ul style="list-style-type: none"> effectively communicate with staff, agencies and volunteers involved follow planning timeline; secure clinic location, date, and staffing ensure that staff and volunteers understand roles and responsibilities
<input type="checkbox"/> Arrange to have exam tables at the mobile health screening location
<input type="checkbox"/> Assess client problems during the mobile health screening and intervene with upset, angry, or fearful clients. Assist clients with special needs.
<input type="checkbox"/> Communicate with mammography technologist and clinician throughout the day.
<input type="checkbox"/> Assist mammography technologist and clinician with logistics and special requests. This may include photo-copying, collecting forms, providing breaks for staff, and verifying the Scheduled Appointments List and Client Sign-In List throughout the event.
Scheduler
<input type="checkbox"/> Schedule appointments using the Scheduled Appointments template on page 12. Discuss the following with potential clients: <ul style="list-style-type: none"> <input type="checkbox"/> Eligibility (see specifics below) <input type="checkbox"/> Specifics: location, appointment time <input type="checkbox"/> Ask client about any needed special accommodations <input type="checkbox"/> Time expectations: plan to spend about an hour since there may be other types of screenings at the event <input type="checkbox"/> Mammogram needs to be scheduled a minimum of one year from the last one (a client cannot have more than one screening mammogram within a year)
<input type="checkbox"/> Determine Eligibility for BCCHP: (see chapter 2 of this manual) <ul style="list-style-type: none"> <input type="checkbox"/> Age (40 thru 64) <input type="checkbox"/> Insurance status Limited or no insurance Remember that Medicaid is insurance (Medical Coupons) Clients lacking Medicare Part B are eligible <ul style="list-style-type: none"> <input type="checkbox"/> Monthly or annual income Use Income Eligibility Guidelines for BCCHP and Komen

<input type="checkbox"/> Maintain the Client Sign-In List and continue to update Appointment List throughout the event.
Intake
<input type="checkbox"/> Welcome and introduce yourself to clients
<input type="checkbox"/> Maintain client Sign-In List. It's important to keep an accurate list during the event because we use it for reporting, tracking follow-up, and as a waiting list.
<input type="checkbox"/> Establish rapport and maintain client confidentiality
<input type="checkbox"/> If not already done, determine eligibility for BCCHP. See chapter 2 of this manual, using criteria above.
<input type="checkbox"/> Give enrolled clients a BCCHP Enrollment Card. Remind clients that enrollment is good for one year.
<input type="checkbox"/> Complete BCCHP Forms and give to mammography technologist and clinician
Interpreter
<input type="checkbox"/> Assist clients with enrollment, consent, and history paperwork.
<input type="checkbox"/> Assist clients in communicating with providers.
Educator
<input type="checkbox"/> Set up displays of health education materials.
<input type="checkbox"/> Provide Breast Self-Exam (BSE) instruction using models and displays.
<input type="checkbox"/> Show breast health education video to clients or small groups, if possible.
<input type="checkbox"/> Provide cervical health education.
Blood Pressure Screener
<input type="checkbox"/> Get blood pressure measurement, education, and written client record.
Float Person
<input type="checkbox"/> Arrange for and pick up any donated food and beverages from local vendors.
<input type="checkbox"/> Arrange for and pick up lunches from local vendors for staff and volunteers.
<input type="checkbox"/> Collate packets of forms for clients prior to event.
<input type="checkbox"/> Assist mammography technologist and clinician with logistics and special requests. This may include photo-copying, collecting forms, providing breaks for staff, and verifying the Scheduled Appointments List and Client Sign-In List throughout the event.
<input type="checkbox"/> Communicate with the mammography technologist and the clinician throughout the day.
BCCHP Responsibilities
<input type="checkbox"/> Supply BCCHP forms
<input type="checkbox"/> Pay for clinical and diagnostic services for clients enrolled in BCCHP.
<input type="checkbox"/> Maintain and make available an up-to-date BCCHP Contracted Providers List.
<input type="checkbox"/> Maintain database and provide follow-up reports on patients with abnormal findings.
<input type="checkbox"/> Assist clients who are diagnosed with cancer while enrolled in BCCHP to transition onto the Medicaid treatment program.
<input type="checkbox"/> Recruit clinicians to staff mobile health screenings

Radiology Facility Responsibilities

- ☐ Comply with professional and FDA regulations. These apply for all aspects of mammography, including professional personnel, equipment quality control, and patient care.
- ☐ Send result letters to clients and the clinician who ordered the mammogram.
- ☐ Send “unknown outcome” letters to clinicians about clients who need to return for follow-up care, such as special views, ultrasounds, biopsies, or surgical consults.
- ☐ Maintain the all client’s mammography medical records up to 10 years from the last visit.

Clinical Provider

Note: The clinician who provides services for BCCHP clients must be:

- contracted with BCCHP’s Seattle office
- licensed to practice in Washington State
- either a physician (MD, ND, DO), an advanced practice nurse practitioner (ARNP), or a physician’s assistant (PA)
- covered by malpractice insurance that allows them to provide clinical services at community settings

- ☐ Provide Women’s Health Exam for clients during the screening.
- ☐ Send completed BCCHP forms to the BCCHP office within 10 days of the screening.
- ☐ Notify clients of their Pap result within 3 weeks of the screening.
- ☐ Refer clients appropriately according to the BCCHP Breast Algorithm and the BCCHP Cervical Algorithm.
- ☐ Notify the BCCHP Clinical Coordinator and/or the BCCHP Data Manager of any clients diagnosed with cancer or pre-cancerous condition.
- ☐ Refer clients who need clinical follow-up to a BCCHP-contracted clinic.
- ☐ Mail Pap test reminder cards to clients.
- ☐ Maintain cultural competency and a non-judgmental attitude and approach throughout the mobile screening clinic and when conducting follow-up procedures. See Cultural Competency, Section 8.10 on page 15.

Supplies – The clinician brings the following to the mobile screening clinic:

- ☐ Pap testing kits and lab forms from a BCCHP-contracted laboratory
- ☐ Lubricant for exams
- ☐ Cotton swabs, giant
- ☐ Plastic speculums, various sizes
- ☐ Gloves, non-latex, powder-free, various sizes
- ☐ Exam table paper
- ☐ Paper gowns and drapes
- ☐ Hand sanitizer and antiseptic table wipes
- ☐ Box of tissues

☐ Light source of choice

4.9. Mobile Screening Schedule

Date:

Time: 9.00-3.00 PM

Appt	First/Last Name	Phone	DOB	Screening				Coverage			
				P	C	F	M	B	K	T	I
9.00AM											
9.15AM											
9.30AM											
9.45AM											
10.00AM											
10.15AM											
10.30AM											
10.45AM											
11.00AM											
11.15AM											
11.30AM											
11.45AM											
12.00-12.30	BREAK										
12.30PM											
12.45PM											

NC -No Cervix

Time: 9.00-3.00 PM

Public Health: Seattle & King County, December 2018

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4.10. Cultural Competency

Each mobile health screening will present its own unique challenges. It is important to know your audience and consider how they will view and receive the mobile health screening. The following overview of cultural competency topics can help you consider points that might apply to the group you are working with.

Maintaining a culturally competent environment

Many mobile health screenings are organized to reach a specific ethnic or racial group. Maintain an ongoing awareness of your own cultural background, the culture of western medicine, and the culture of your own institution. Participate in trainings to gain an understanding of cultural influences that are often subconscious to people from the mainstream culture.

It is important to:

- Approach clients and others in a respectful manner.
- Ask clients to state their race rather than assuming yourself what race they belong to.
- Remember that many people take great pride in their country of origin, so for them, it may be important to note their homeland. It could also be a cultural mis-step if you mix up nationalities.
- Ask the client what name or title they would prefer to be called.
- Recognize that each person, including yourself and your clients, views behavior and the rest of life through a cultural lens. Being a member of a "majority" culture does not make one's views correct or superior to the views of others.
- Take the extra time to develop and implement systems that are effective in working with diverse patients. Clients may not want to be thought of as foreigners if they have had a long history of living in the United States. Staff need to adjust what they have learned about another culture for individuals with that cultural heritage, but who are now third or fourth generation Americans.
- Consider and build-in costs related to staff training, funding interpreter services, and creating a welcoming environment. Translate or locate quality translated educational materials.
- Assess a client's ability to communicate in English and determine their language of origin. Often, people take pride in their ability to communicate in English when others may not think they have a good command of the English language. It is important to know when to get an interpreter to help explain complex medical issues. The client may not want an interpreter, but it may be important for the provider to have one there to make sure that everyone understands the medical decisions discussed.
- Recognize that clients who currently work as laborers in this country may have been executives, managers, or health care professionals in their country of origin. In

addition, a client's financial status in her own country may have been quite different from her current situation.

- Commit yourself and your staff to increasing the knowledge, skills, attitudes and policies necessary to effectively serve diverse populations.
- Remember that becoming culturally competent is a lifelong process, not a one-time project.

Benefits of Increasing Cultural Competence:

- Increased capacity to effectively serve your clients.
- A proactive response to the health care needs of an increasingly diverse community.
- Successful communication about crucial information, both from your client to you and from you to your client.
- Compliance with Title VI of the Civil Rights Act of 1964 non-discrimination provisions, which are increasingly being used in credentialing and funding requirements.
 - To learn more about the Standards for Culturally and Linguistically Appropriate Services (CLAS), see the OMHCR website listed at the end of this chapter
- Improved trust and rapport between you and your clients, which can result in:
 - Increasing access to services.
 - Improving prevention/early intervention.
 - Contributing to your clients' adherence to treatment plans.
 - Increasing patient retention.
 - Increasing positive health outcomes.
 - Decreasing the number of mistakes based on miscommunication and lack of mutual understanding.
 - Increasing your and your client's satisfaction

4.11. Steps to a More Culturally Competent Practice*

Relating to Clients:

- Make sure that your intake forms and other written materials are available in the language of your clients, whenever possible. Several web sites offer brochures in various languages.
- Make sure that you have interpreters available on site if clients are not fluent in English. Do not use family members to interpret, unless the client insists they be involved. It is wise to have a trained interpreter in these situations, to assure quality and complete translation services.
- Use inclusive language in enrollment and information forms and other written materials. For example, since most clinics serve some lesbian or gay clients, add terms like "partnered" or "significant other" where the forms asks "married, widowed, single, or divorced."

- Use open-ended questions about the health care needs or symptoms of your clients. Demonstrate empathy in facial expression, posture, and tone.
- Be aware of your own bias, values, and limitations about various cultures.
- Use evidence-based clinical guidelines.
- Acknowledge when you don't know something, find the answer, and provide the information to the client.
- Avoid making assumptions about clients. Ask them about their responses or behavior rather than assuming that you know the meaning or intent behind their behavior. For example, don't assume that they are being "noncompliant" if they feel the need to see another community member prior to having a procedure done. Learn to work "along with" differing views where possible, rather than "in opposition to" differences that surface.

Mobile Clinic Practices and Policies:

- Provide ongoing training to all clinic staff regarding populations seen on a regular basis.
- Provide educational materials, brochures, etc. in the languages of the clients you see. Be aware that some clients may not be able to read their own language or read English. Consider the health literacy level of your clients especially when explaining recommended treatment. Make sure that they understand and find the recommended treatment acceptable from their own point of view.
- When possible, place magazines, newspapers, posters, and art work that reflect the audience you serve and want to serve. For example, if you serve a lot of Puerto Rican and African American clients, be sure to have some art work, music, or other visual images that reflect these populations. Consider this approach when developing signage and advertising for the mobile clinic.
- Review and revise all policies, forms, and patient literature to be more inclusive and eliminate bias.
- A mobile health screening creates challenges in honoring issues of confidentiality, how to work with interpreters, and other relevant culturally and linguistically appropriate practices. Consider how you can make your clinic run smoothly in those areas.

* See "A Family Physician's Practical Guide to Culturally Competent Care" website which offers continuing medical education (CME) credits and assists family physicians with awareness, knowledge, and skills to more effectively treat the increasingly diverse U.S. population they serve at www.thinkculturalhealth.org

See the "Final National Standards on Culturally and Linguistically Appropriate Services (CLAS) in Health Care," the basis for this training at <http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=1&lvlID=3> and choose the cultural competency tab.