



Cultural Competency Plan Annual Evaluation

Updated April 2021

Carisk Behavioral Health has recently completed the annual evaluation of its Cultural Competency Plan (CCP). The summary below reflects an assessment of the plan's key elements and its effectiveness in meeting the goals of the CCP.

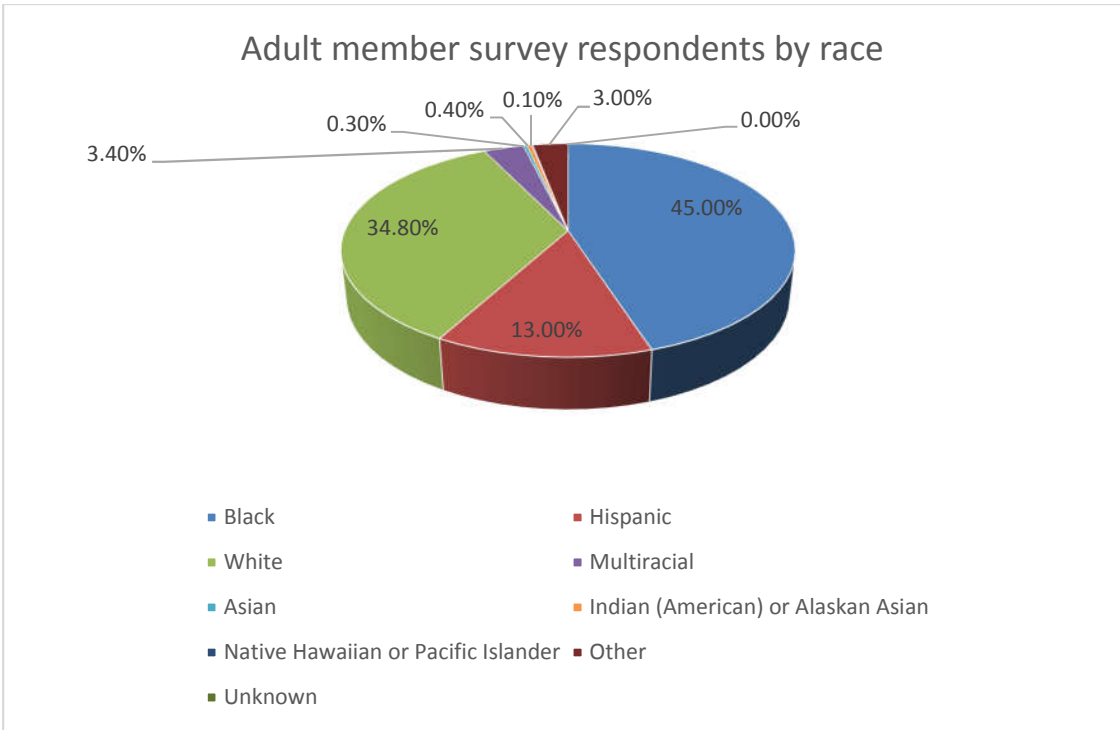
1. Member Experience Survey

Carisk regularly conducts member experience surveys. To assess whether member's cultural and ethnic needs are being met, the member's demographic information is collected on the survey, and specific questions regarding respect for culture and ethnicity are reviewed. The data from the most recent member experience survey in 2020 show that over 62% of adult respondents and 79% of child respondents identified with a non-White ethnicity. Regarding Hispanic ethnicity, 13% of adult survey respondents and 25% of child survey respondents identified as Hispanic. Below are the complete statistics regarding the self-identified ethnicity of the adult and child respondents:

TABLE 1. 2020 Adult Survey Respondent Percentages by Race (n=2509)

Adult	
<i>Race</i>	<i>Percentage</i>
Black	45.0%
Hispanic	13.0%
White	34.8%
Multiracial	3.4%

Asian	0.3%
Indian (American) or Alaskan Asian	0.4%
Native Hawaiian or Pacific Islander	0.1%
Other	3.0%
Unknown	0.0%



Adult member survey respondents by Hispanic ethnicity

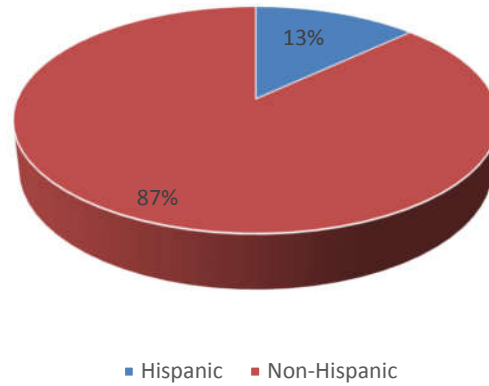
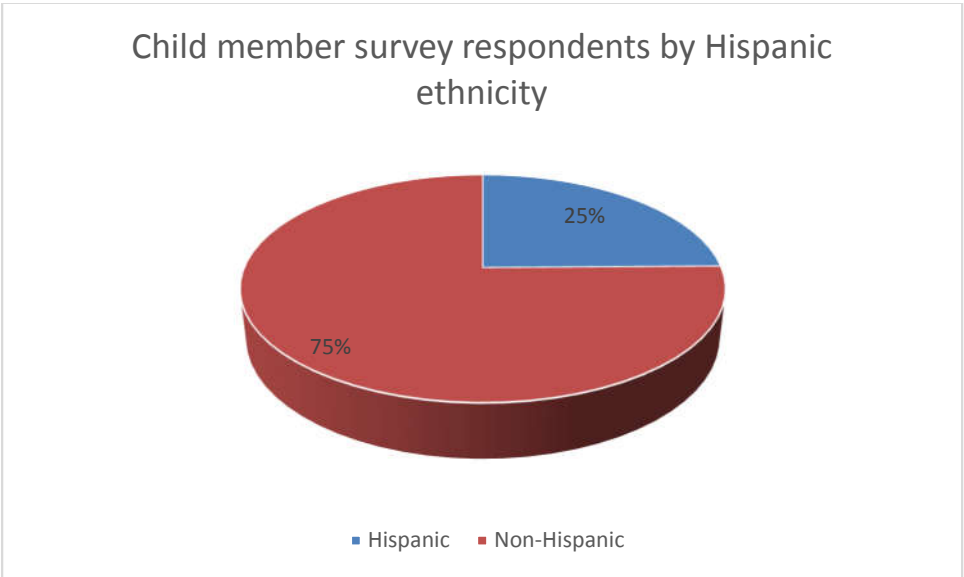
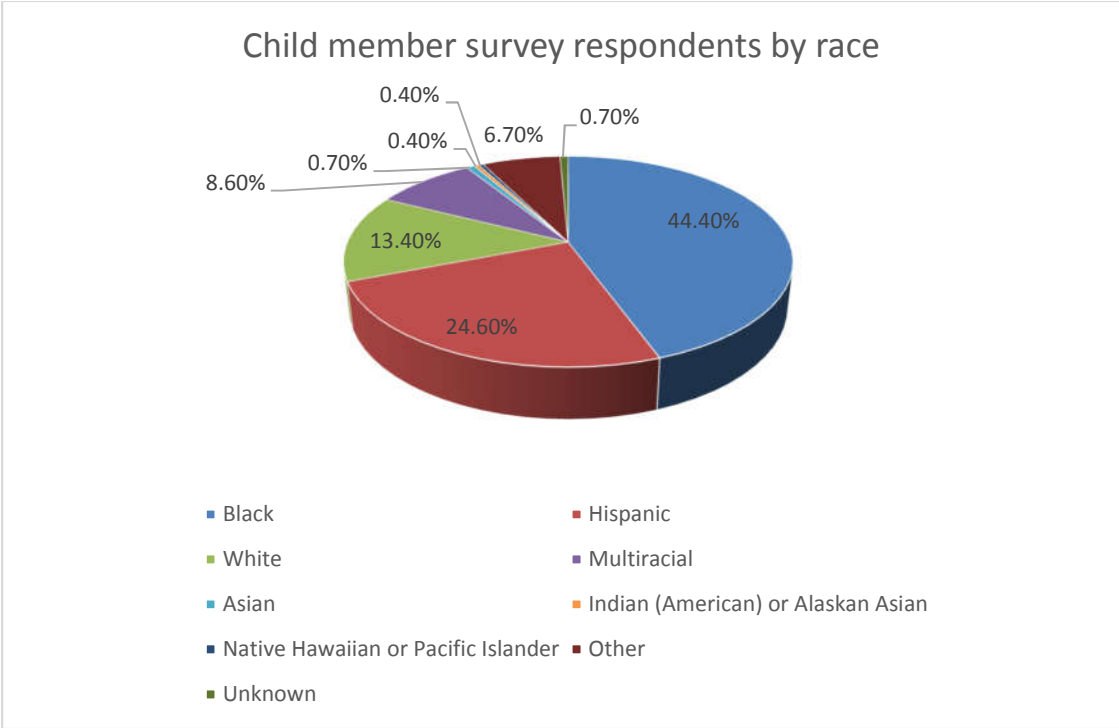


TABLE 2: 2020 Child Survey Respondent Percentages by Race (n=797)

Child	
<i>Race</i>	<i>Percentage</i>
Black	44.4%
Hispanic	24.6%
White	13.4%
Multiracial	8.6%
Asian	0.7%
Indian (American) or Alaskan Asian	0.4%
Native Hawaiian or Pacific Islander	0.4%
Other	6.7%
Unknown	0.7%



Based on the survey questions regarding respect for culture and ethnicity, the results in the two tables below show that both child and adult members are highly satisfied with their treatment as it relates to these factors, and no corrective action is necessary; however, programs are consistently reviewed for their appropriateness to member’s needs and preferences.

TABLE 3. Cultural Competency Questions from Adult Survey

ADULT (n=2509)

Item Number	Percent Agreed, or Favorable Response
1. I was treated with respect.	93.7%
18. The staff is sensitive to my cultural/ethnic background.	89.3%
19. The services focus on my needs.	90.4%

TABLE 4: Cultural Competency Questions from Child Survey

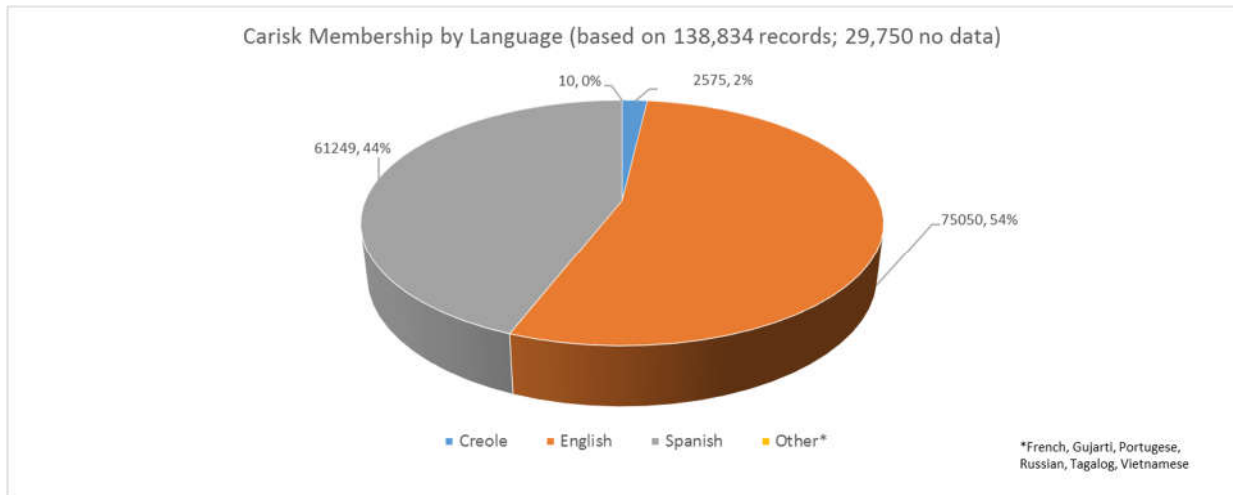
CHILDREN (n=797)

Item Number	Percent Agreed, or Favorable Response
1. I was treated with respect.	95.3%
15. Staff respected my ethnic background.	93.5%
20. I was free to practice my religion.	93.1%

2. Provider Network Regarding Race, Ethnicity, and Cultural Needs

Race, ethnicity, and cultural needs. Carisk continually assesses its membership to determine if there are needs specific to this population that can be met by the characteristics of the provider network. According to a demographic profile done for Carisk members, the South Florida population, in general, and the Carisk member population, specifically, have a higher-than-average percentage of Hispanics, blacks, and Creole-speaking Haitian-Americans who may

require that providers speak Spanish or Creole in addition to English, and be sensitive to the cultural and ethnic needs of Hispanics and Caribbean-Americans. The chart below shows the Carisk membership by preferred language, according to eligibility files.



Carisk strives to have appropriate providers available for the large group of Spanish- and Creole-speakers. The Carisk credentialing and re-credentialing applications have a question regarding provider race; however, it is optional for providers to answer. To assist members in seeking treatment from a provider who speaks a specific language, there is a question on the application that asks providers their spoken language(s):

English	Dravidian	Kokborok	Slovakian
Spanish	Dutch	Kurukh	Swedish
Haitian Creole	Faardu	Lebanese	Sylheti
Sign Language	Farsi	Laotian	Tagalog
Afrikaans	French	Mahle	Tamalin
Arabic	Garo	Malayalam	Tamil
Arakanese	German	Manipuri	Telugu
Bangla	Gujarati	Marathi	Telugu
Bengali	Creole	Nepali	Thai
Bishnupriya	Hebrew	Philippine	Ukrainian
Bulgarian	Hindi	Polish	Urdu
Cambodian	Ho	Portuguese	Vietnamese
Chakma	Hungarian	Punjab	Yiddish
Chinese	Indo-Aryan	Punjabi	Other
Chittagonian	Italian	Romanian	
Croatian	Jannada	Russian	
Czech	Japanese	Serbian	

There is also a question on the provider application regarding attributes that members may look for in choosing a provider with a specific area of expertise or type of therapy, or who is sensitive to their cultural and ethnic background; please see following excerpt of these specialties from the application:

Eating Disorders (25)		Men's Issues (77)
ECT (41)		Mood Disorders/Depression/Bipolar (36)
EMDR (42)		Neuropsychological Testing (1)
→ Ethnic Based Counseling (83)		OCD, Phobias, PTSD (26)
Forensic (74)		Pain Management (49)
→ Gay/Lesbian/Transgender Issues (8)		Parenting Classes (51)
Gender Identity Issues -Children (47)		Personality Disorders (20)
Substance Abuse / Addictions (16)		→ Pregnancy Related Issues (85)
Weight Management (63)		Psychotic Disorders (78)
→ Women's Issues (76)		Rape / Crime Victim (55)
Workers Compensation (5)		→ Religious-Based Counseling (71)

Carisk tracks and trends the languages in which providers can use in treating their patients. According to the Carisk member demographic analysis (with data from the latest United States Census estimates [2019]), the South Florida ethnic breakdown is 69.4% Hispanic in Miami-Dade County, 31.1% in Broward County, and 23.4% in Palm Beach County. According to 2019 Census data, the Sun Sentinel (2017), and the Migration Policy Institute (August 2020), the Haitian community in South Florida is estimated to be between 250,000 and 300,000, and the population growth for people with Haitian ancestry has increased by 18% in Miami-Dade County, 24% in Broward, and 43% in Palm Beach County between 2007 and 2015, inordinately higher compared to an overall population increase in these three counties of only 11%, 4%, and 9%, respectively.

The vast majority of Carisk’s membership is in South Florida, so the table below shows a breakdown of the percentages of Spanish-speaking and Creole-speaking providers by county and license level in the South Florida Carisk network:

TABLE 5. Providers who speak Spanish or Creole - Language Availability by County/License Level – 2020

SPANISH

County	Doctoral	Masters Level	Psychiatrist
Broward	29.6%	34.6%	58.7%
Miami-Dade	53.4%	57.2%	56.4%
Palm Beach	26.3%	16.4%	42.4%

CREOLE

County	Doctoral	Masters Level	Psychiatrist
Broward	0.0%	5.6%	19.6%

Miami-Dade	3.1%	5.2%	4.0%
Palm Beach	10.5%	1.8%	9.1%

There are a total of 32 Florida counties with Spanish-speaking Carisk providers, and 9 Florida counties with Creole-speaking Carisk providers. These counties are listed in the table below.

TABLE 6. Locations of Providers who speak Spanish or Creole - 2020

Counties with Spanish-speaking Providers	
Alachua	Leon
Bay	Martin
Brevard	Miami-Dade
Broward	Monroe
Charlotte	Okaloosa
Clay	Okeechobee
Collier	Orange
De Soto	Osceola
Duval	Palm Beach
Escambia	Pasco
Hernando	Pinellas
Highlands	Polk
Hillsborough	Saint Lucie
Indian River	Sarasota

Lake	Seminole
Lee	Volusia
Counties with Creole-speaking Providers	
Broward	
Hernando	
Hillsborough	
Martin	
Miami-Dade	
Okaloosa	
Palm Beach	
Polk	
Saint Lucie	

Extrapolating the census percentages for Hispanics in South Florida’s three counties, population estimates for people of Haitian ancestry, and reviewing preferred language data from eligibility files, it can be seen in Table 1 and Figures 1 and 2 above that there are sufficient numbers of Spanish-speaking and Creole-speaking providers to adequately serve Carisk’s members of Hispanic or Haitian ancestry.

Carisk has observed over the previous three years that for those members who have sought services (those who call the Carisk member services department), about 8.6% of callers chose the Spanish-speaking option in the automated call distribution system. In 2020, this number slightly increased to 10.67%, but the data still indicate that the majority of Hispanic-identified members are comfortable speaking English. Because the statistics above show that Carisk has sufficient provider coverage if the majority of Hispanic members wanted to receive

treatment in Spanish, and 90% of the member population chooses to speak English, Carisk providers more than adequately cover these main linguistic requirements.

In addition to English, other languages spoken by Carisk providers include:

Carisk Provider Languages	
Afrikaans	Kannada
Arabic	Malayalam
Armenian	Polish
Bangla	Portuguese
Bengali	Punjabi
Bulgarian	Romanian
Cambodian	Russian
Chinese	Sign
Creole	Spanish
Czech	Swedish
Dutch	Tagalog
Farsi	Tamalin
French	Tamil
German	Telugu
Haitian Creole	Turkish
Hebrew	Ukrainian
Hindi	Urdu
Italian	Yiddish
Japanese	Yoruba

For any member who speaks a language other than those above, Carisk contracts with a translation service; however, Carisk has not had any language requests that are not listed above for the provider network.

We have concluded that this data suggests that our Provider network is currently meeting the language and cultural needs of our members.

3. QI Educational Materials for ADHD and MDD

All educational materials for members identified as being diagnosed with ADHD or MDD are available in both English and Spanish. Information on the website is also available in both languages. There have been no requests for materials in any other language; however, a translation service is available if this need arises.

4. Member Complaints and Grievances

There have been no complaints registered by members regarding cultural or ethnic issues.

5. Provider Complaints

There have been no complaints registered by providers regarding cultural or ethnic issues.

6. Cultural Awareness and Training

Carisk Partners initiated a Diversity Council in 2020 to be leaders in continuing to embrace the differences of its team members and promote a diverse and inclusive environment through commitment to education both internally and externally.

Carisk provides staff training, particularly to Member Services, Provider Relations, and Utilization Management, Case Management Departments as needed to ensure that services are provided effectively and with sensitivity to our multi-cultural population. This training is customized to fit the needs of Carisk based on the nature of contacts with members and/or providers.

Carisk also recommend periodic training for all network Providers with direct Member contact to ensure that they are aware of the importance of providing services in a culturally competent manner. This training includes ideas and assistance about how to provide care in a culturally competent manner. Providers access educational materials and training through the following website:
<https://thinkculturalhealth.hhs.gov/education/behavioral-health>