



CHANGE IDEA: Integrate the National CLAS Standards into screening and surveillance processes to ensure responsiveness for all families.

STEP 1: GET READY (TASKS)

- A. Include family advisors who represent the communities served by your health center.
- B. Review the [National CLAS Standards](#) and identify those most relevant to screening and surveillance workflows.
- C. Select one CLAS standard to focus on during the test (e.g., communication and language assistance).
- D. Conduct a [brief baseline assessment](#) of current practices related to responsive screening.
- E. Prepare materials for implementation (e.g., translated screening tools, interpreter workflows).

STEP 2: PLAN AND PRACTICE

Pilot the integration of the selected CLAS standard into screening and surveillance workflows for a defined population. For this example, the team chose CLAS Standard 6: Inform all individuals, in writing and orally, of the availability of language assistance services in English and other languages that serve their linguistic needs.

SAMPLE PROCESS:

First,

- A. Identify Spanish-speaking families scheduled for well-child visits in a 1-month pilot period.
- B. Use professionally translated, validated screening tools (e.g., Ages & Stages Questionnaires, Promoting Healthy Development Survey).
- C. Ensure signage, handouts, and language assistance instructions are available in Spanish.
- D. Provide brief training for front-desk and clinical staff on introducing interpreter services and translated materials.

Next,

- A. Select one pediatric provider and care team for the pilot.
- B. During patient check-in and screening, confirm language preference and offer interpreter services.
- C. Provide verbal notice and written information about free language assistance services in Spanish.
- D. Document language service offers in the electronic health record.

STEP 3: REVIEW AND REFINE

- A. At the end of the pilot, collect data on:
 - a. Number of families offered language assistance

- b. Number who accepted services
 - c. Feedback from families and staff
- B. Conduct a brief team debrief to identify challenges and improvement opportunities.

STEP 4: EXPAND

Refine workflows based on pilot feedback and expand implementation to additional providers and age groups. Incorporate language assistance indicators into routine visit preparation and population health workflows.

STEP 5: SUSTAIN

Develop standard operating procedures for language access during screenings. Monitor screening completion rates among Spanish- and English-speaking families and continue staff training on CLAS Standard 6.

Share results and improvements with the broader care team and leadership and integrate CLAS-informed practices into ongoing training, workflows, and quality improvement efforts.