

How to deliver or facilitate clinical, public health or health-related services in a culturally competent manner.

Why is it important?

Health services will be more effective if they acknowledge and work with clients' cultural knowledge, prior experience and frames of reference. The capacity of a health worker to improve a client's health status will be enhanced if the worker can integrate culture into clinical practice.

Client, family and community input

Indicators:

- There are policies and protocols regarding client, family and community input.
- Workers obtain client, family and patient advocate input regarding care planning and treatment, as appropriate.
- Care and treatment plans are agreed upon by clients and families, and may be amended with client/family input as appropriate.
- Community input is obtained for community-level interventions.

Good practice example

A social worker develops individual client plans based on consultation with her clients and their families. The plans include information about clients' cultural and religious backgrounds and self-identity. They help the social worker to clarify clients' behaviour and explain actions and choices that may stem from cultural values, attitudes and beliefs.

Screening, assessment & care planning

Indicators:

- Guidelines and tools are used to elicit cultural and demographic factors relevant to clients' health and health behaviours.
- Data is routinely available on cultural and language needs, populations and clients served.
- Screening, assessment and care planning reflect cultural and ethnic considerations.
- Prevention, treatment and maintenance plans reflect factors related to cultural competence.

Good practice example

A diabetes health educator visits a client's home to discuss his treatment and diet plan. The worker consults with the client and his family to ensure that they understand information provided, and that the diet plan is culturally and religiously appropriate.

Treatment and follow up

Indicators

- Practice guidelines and treatment frameworks account for differences related to culture and traditional beliefs and practices, as appropriate.
- Health education is provided at client and population levels on issues that are related to the community
- Treatment processes and outcomes related to culturally and linguistically diverse clients are regularly assessed as part of a quality improvement program.
- Outreach services are provided to target populations to facilitate access to care.

Good practice example

An occupational therapist, seeking to increase her knowledge of healing resources used by CALD communities, develops working relationships with the local migrant resource centre, religious leaders, folk healers and community elders. She also visits her clients at their homes so she can meet their families.

Reference:

This tip sheet is based on Indicators of Cultural Competence in Health Care Delivery Organisations: An Organisational Cultural Competence Assessment Profile, prepared by the Lewin Group Inc. under contract with the USA Department of Health and Human Services (2002).

Source: <http://www.ceh.org.au/cultural-competence-in-services-and-interventions/>