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White Paper

Cultural Competency in Healthcare

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What's at stake with Cultural Competency

For those directly involved with the healthcare industry, cultural competency is important in a healthcare setting for many obvious reasons. Patients come from a variety of cultures, medical professionals work with patients of various backgrounds on a daily basis, and these same medical professionals work with team members who come from different cultures than their own. These reasons alone should be enough to make the trend that indicates diversity of cultures in healthcare an obvious reality.

Given the above is true, why is the healthcare industry uncertain about how to address cultural differences in care delivery institutions? There are standards--lots and lots of standards, but how can changes in each organization and work unit allow for more effective execution on language, communication, team dynamics, process, and a host of other issues that are needed to fulfill the opportunity detailed in those standards? The obvious gets much more challenging when considering what it takes to lead change with thousands of people in tow.

The outcome of an organization-wide effort to become more culturally competent can pay large dividends if successful. Improvements in patient outcomes, patient readmissions, staff retention, satisfaction, labor relations, and even market share are achievable with the right approach. And riding the status quo is a risk to each as well.

By the Numbers

The cultural composition of our nations are changing, and with it the face of healthcare. According to the U.S. Census 2008 Projections, the nation's population will be 54% minority by the year 2050, making them no longer the minority. In the near-term, more than half of all the nation's children will be minorities in 2023. With hospital waiting rooms seeing a greater number of people with various cultural backgrounds, medical professionals are now focusing more time on ways to adapt their professional and bedside manner to more appropriately treat patients of different cultural backgrounds.

Medical and other healthcare professionals spend years in school learning how and when to treat patients for given symptoms, but teaching them to interact with patients currently falls on the healthcare provider. Cultural Competency, or the demonstrated knowledge and practice of healthcare professionals to deliver care with respect to the cultural beliefs and values of patients, has become a hot-button issue in the healthcare industry. Those who excel at adapting to these differences gain the trust and increase the comfort of their patients.

Currently, healthcare professionals turn to their employers for more training in cultural competency. As the issue becomes increasingly important, healthcare providers are beginning

to provide additional training on cultural topics for their team members. Healthcare providers have a variety of methods and reasons for completing cultural competency training, but all have begun to see the relevance and importance of cultural competence of the healthcare workforce.

Why is Cultural Competency Important in Healthcare?

Medical professionals defer to cultural cues in almost every interaction made with patients or patients' next of kin. As medical professionals treat patients, the perceptions made of that given caretaker and his/her treatment methods often can be misconstrued when cultural cues are overlooked. This becomes increasingly important in hospitals as patients may not explain their cultural differences or needs to a medical professional which, if left undetermined, could inhibit the treatment and well-being of that individual.

Imagine a doctor recommending that a patient drink three glasses of milk a day to increase calcium intake. The physician may see this as a reasonable request, but because the patient did not mention that he/she is actually Vegan and has made a cultural/lifestyle choice to not drink milk, this request is then deemed impossible by the patient. Should the doctor have taken this into consideration when deriving the patient's health plan, this request would have been altered for the patient's cultural/lifestyle choice and the patient would not lose trust in the doctor's (or even hospital's) professional abilities.

Additionally, hospital systems across the U.S. gain certifications and accreditations when cultural competency trainings are available and/or required by its people. Various healthcare networks provide trainings that bring a better understanding of cultural competence to its employees. Below are a few of examples of accreditation or certifications that healthcare systems can gain by providing cultural competency training for employees.

- Training employees on cultural competence complies with a hospital's Medicare Certification. The **Centers for Medicare and Medicaid Services (CMS)** say that the conditions of participant requirements related to cultural competence must include quality assurance, access to services, information on advanced directives, antidiscrimination, provider participation rules, as well as confidentiality and accuracy of enrollee records.
- **Accreditation Readiness Standards for Culturally Competent Healthcare Practitioners** under the Joint Commission's 21 standards. These standards are related to diversity in three areas: ethics, rights and responsibilities; provision of care, treatment and services; and management of human resources.

- The Department of Health and Human Services also provides accreditation to individuals completing 14 **Culturally & Linguistically Appropriate Services (CLAS)** standards related to diversity for all providers receiving Federal funds.

In the U.S. various hospital systems have implemented training programs for their employees. These training programs provide healthcare professionals the knowledge they need to adapt their treatments or procedures for different situations and cultural needs. Training programs focused on cultural competency ensure that a medical professional is properly interacting and treating patients. Hospital systems focusing on cultural competency also receive a number of benefits in doing so.

Benefits of Increasing Cultural Competency

Several benefits arise when cultural competency is properly implemented within a healthcare system. As waiting rooms continue to fill with individuals from all walks of life, healthcare professionals begin to understand the value placed in cultural competency.

Strategic leveraging of market share from ethnically diverse customer base

Reaching beyond traditional tools, various hospital systems not only are addressing the issue with their employees, but many also use a simple demographics check to assess where its people may be missing the mark. Supplementary research often shows demographic gaps where healthcare providers are only providing adequate treatment. For example, should a given area be comprised of 13% Asians, 2% Blacks, and 85% Caucasians that hospital then should serve a representative number of Asians, Blacks, and Caucasians. However, should that hospital be serving a very minimal number of one demographic to another, there may be a cultural gap that the hospital staff has overlooked. If the number of Chinese, Japanese, or other Asian culture served by the hospital is only 6%, there may be something that the hospital inadvertently is doing to upset or mistreat that given culture. People seek healthcare providers that make them feel comfortable. Providing the best comfort and cultural considerations for those in the areas closest to the establishment increases the number of people in a given demographic at that hospital.

When pulling statistics like this, however, it is imperative that the connection established between demographics and cultural composition is viewed as a correlation, but not as an exact depiction of cultural composition within the area. For example, a given area may have 13% Asian demographic composition, but that does not directly mean that all 13% have the same cultural views. Some of these people may have adopted the Chinese culture, others the Japanese, Korean, or traditional American cultural views. The most common mistake made when deducing cultural compositions is that culture is directly tied to ethnicity. Looking at the

cultural composition of the area and the apparent gaps allows the hospital system to determine where issues in its people's cultural competency may lie, but does not mean that cultural competency is tied directly to ethnicity. While this is often true, the exception is what can make or break a hospital system's cultural competence. Should traditional views or assumptions be made, these can also inadvertently share the same outcome as those without specific cultural competency training. A person's ethnicity can be, and often is different from culture. Medical professionals also must take this into account and avoid making assumptions that may inversely inhibit the patients' treatment.

Improved Patient Outcomes

When cultural consideration is given to treatment plans, patients' willingness to access care and adopt behavioral changes that affect health increase dramatically. When individuals are given care specific to his/her needs and cultural beliefs, they feel at ease with the care providers and feel their views are valued. Patients are much more willing to follow through with treatment plans when their treatment includes more cultural considerations and actions to which they can commit.

Additionally, readmission rates of these individuals also increases. When trust is built with a healthcare provider, the likelihood that an individual will readmit his/herself to that hospital should further care be necessary greatly increases with trust. Because so much of healthcare is also the intangible factor of trust between caregiver and patient, established trust often leads to greater readmission rates should that individual need additional care.

Avoidance of Intermediate Sanctions

Another benefit to cultural competency training in healthcare systems is the avoidance of intermediate sanctions. When proper cultural competency trainings are completed, hospitals can avoid sanctions such as Civil Money Penalties (CMPs) of \$10,000-\$100,000, suspension of enrollment of Medicare beneficiaries, suspension of payment to the organization by patients, and suspension of marketing activities to Medicare beneficiaries.

A Fresh Approach to Cultural Competence

As cultural competency grows within healthcare systems, cultures will require a more definite structure. Because patient populations often are generalized for research or Census purposes, healthcare providers must recognize that simply listing "Asians" or "Hispanics" are not as meaningful for specific patient care practices. Significant cultural differences exist among Chinese, Japanese, Indian, etc. and by lumping "Asian" together, these differences are lost. Determine the healthcare provider's largest cultural demographic areas as start cultural competency training with those largely populating the surrounding area. This may need further

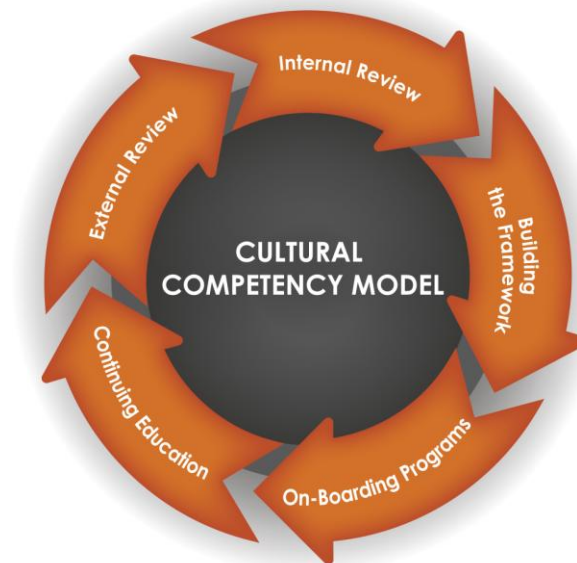
breakdown from current Census information the health system has. Also a growing number of minority and multi-cultural demographics should be considered when focusing on key cultures for trainings.

Single-threaded solutions are insufficient to change behavior

For organizations eager to realize the benefits of improved cultural competence, simply mandating that all employees attend a short program to emphasize the importance of culture is not enough to make a difference. Few people change their actions based on awareness programs. In fact, most organizations would benefit more by not using time to do these small, ineffective sessions versus spending employee time raising awareness and then providing no real substance or avenue for change. Instead, providing follow up activities to training sessions or hosting online training sessions throughout the year allow employees to constantly be reminded of cultural cues or key ideas. Only providing one touchpoint regarding cultural competence is just not enough to drive home ideas for most healthcare professionals.

Increasing Cultural Competence: The Competency Cycle

The Cultural Competency model is broken into several different components for cultural competency success. These components and their respective checklist of items are as follows:



Internal Review

The internal review process includes any and all aspects of research for the cultural competency training. Adayana recommends doing a complete organizational survey,

stakeholder interviews, policy analysis, and ethnicity analysis of the general area. The ethnicity analysis also includes a full analysis of the community, patient data, and a staff profile to determine which cultures/topics need the most discussion focused on them.

Building the Framework

In building the framework for the training methods, sessions should be structured in a manner that will be productive for that healthcare provider. These should be rapid improvement sessions with guided implementation that include cultural competence metrics to measure against. The experience level of those within the organization and the familiarity with instructor-led or self-directed trainings should also be considered.

On-Boarding Program

On-boarding team members is half the battle to cultural competency training. Team members must have access to a basic online training with supplemental classroom awareness sessions, and scenarios for job families. In this sense, the term “job family” refers to a specific job title or role, e.g. Nurse, physician, or administrator.

Continuing education

Providing continual education for healthcare professionals is crucial to the success of cultural competency training. Individual assessments should be conducted to assess gaps where improvement could be made. Leaders in cultural competence may be directed to present to others not excelling in cultural competency. Practitioners or physicians workshops can also be helpful as a follow-up activity. Other healthcare systems provide monthly newsletters or generate a blog that provides relevant, timely, and critical information on a regular basis. Follow-up activities do not only measure cultural competency trainings, but they also continually reinforce cultural standards to help healthcare providers make strides toward their cultural competence goals.

External Review

Through external reviews, the Accreditations Readiness Packages can be granted by the Joint Commission, AOA Standards, or Culturally & Linguistically Appropriate Services (CLAS). These standards are industry-recognized as standards set for cultural competence and should be applied to all healthcare provider cultural competence trainings. Below are these standards as defined by the Joint Commission and CLAS.

Joint Commission Standards

- **Standard RI.1.10 (2008)**
Individual Rights
 - A mere list of rights cannot guarantee those rights. Rather, an organization shows its support of rights by how its staff interacts with [patients/residents/clients] and involves them in decisions about their care, treatment, and services. These standards focus on how the organization respects the culture and rights of [patients/residents/clients] during those interactions. This begins with respecting their right to treatment, care, or service.

- **Standard RI.2.10 The hospital respects the rights of patients.**
 - EP 2 Each patient has a right to have his or her cultural, psychosocial, spiritual and personal values, beliefs, and preferences respected.
 - EP 3 The hospital supports the right of each patient to personal dignity.
 - EP 4 The hospital accommodates the right to pastoral and other spiritual services for patients.
 - **Standard RI.2.220 (LTC only) Residents receive care that respects their personal values, beliefs, cultural and spiritual preferences, and life-long patterns of living.**
 - EP.1. Residents' personal values, beliefs, and cultural and spiritual preferences are respected by the [organization].
 - EP.2. Residents' life-long patterns of living, including lifestyle choices related to sexual orientation are respected by the [organization].

- **Standard PC.2.20 The hospital defines in writing the data and information gathered during assessment and reassessment.**
 - EP 4 The information includes...for patients receiving end of life care, the social, spiritual, and cultural variables that influence perceptions and expressions of grief by the patient, family members, or significant others.

- **Standard PC.6.10 The patient receives education and training specific to the patient's needs and as appropriate to care and services provided.**
 - EP 2 The assessment of learning needs addresses cultural and religious beliefs, emotional barriers, desire and motivation to learn, physical or cognitive limitations, and barriers to communication, as appropriate.

- **Standard PC.7.10 The hospital has a process for preparing/distributing food and nutrition products as appropriate to the care, treatment, and services provided.**
 - EP 3 The patient's cultural, religious, and ethnic food preferences are honored when possible, unless contraindicated.

- **Standard HR.2.10 Orientation provides initial job training and information.**

Rationale:

Staff members, students and volunteers are oriented to their jobs and the work environment before providing care, treatment, and services. As appropriate, each staff member, student and volunteer is oriented to the following:

- EP 1 The organization’s mission and goals.
- EP 5 Cultural diversity and sensitivity.
- EP 6 Staff students and volunteers are educated about the rights of patients and ethical aspects of care, treatment, and services and the process used to address ethical issues.

CLAS Standards:

- **Standard 1**

Health care organizations should ensure that patients/consumers receive from all staff member's effective, understandable, and respectful care that is provided in a manner compatible with their cultural health beliefs and practices and preferred language.

- **Standard 2**

Health care organizations should implement strategies to recruit, retain, and promote at all levels of the organization a diverse staff and leadership that are representative of the demographic characteristics of the service area.

- **Standard 3**

Health care organizations should ensure that staff at all levels and across all disciplines receive ongoing education and training in culturally and linguistically appropriate service delivery.

For More Information on Cultural Competency Training

As a healthcare professional, cultural competency is of grave importance to your career. Hospitals across the nation are beginning to see value added to their healthcare systems when cultural competency training is available for their staff. Should you need more information about this topic, please contact Jim Naughton at jnaughton@adayana.com.