CONDUCTING A CULTURAL COMPETENCE SELF-ASSESSMENT

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PURPOSE

There are several reasons why a healthcare organization may wish to conduct an audit of its cultural competence. First, it may want to validate its understanding of the ethnic and cultural composition of its patient and employee populations. Further, it may seek to identify the unique attributes of a given cultural group to ensure access, appropriate treatment and effective communication between providers and patients. Additionally, the audit may reveal opportunities for the organization to make itself more attractive to diverse populations, thereby enhancing its marketing capabilities as well as strengthening its ties to community. Most important, the very act of conducting the self-assessment is a statement to the workforce, patients and community that the organization values diversity and desires to increase its cultural competence.

HOW TO CONDUCT THE SELF-ASSESSMENT

A. Create a task force of stakeholders

Ultimately, quite a number of people will be involved in the process because you will want to scan the breadth and depth of the organization. However, the audit should be led by a small committee that represents certain key functions or departments. A typical self-assessment team consists of 8 to 12 people. On the audit team should be individuals who can access and interpret data addressing the composition of the patient and staff population. Team members may come from finance, admitting, patient registration, human resources, information systems, or administration. Additionally, there should be individuals whose jobs are directly concerned with ethnic/cultural issues, i.e. diversity coordinators, translators/interpreters, social workers, community relations and employee relations specialists, and clergy. Different clinical disciplines should also be represented: doctors, nurses, therapists. The team may benefit by inviting patients or representatives of your community as members. The team itself should also reflect ethnic/cultural diversity.

B. Select a task force leader

Who serves as leader of the assessment team is an important decision. He or she should be an individual who is well-positioned within the organization—one who has access to people at all levels and information from all sources. He or she must be credible, respected, and generally regarded as sensitive to diversity issues. Equally important is the explicit support for this initiative from the CEO and other prominent leaders. They can demonstrate such support through written and verbal communication, as well as by devoting time and other resources needed to conduct the audit.
STEPS IN THE SELF-ASSESSMENT PROCESS

There are generally five steps in the self-assessment. However, organizations will vary the time spent or depth of inquiry at various stages of the process.

Step 1 Organization

(a) The CEO appoints the team leader and task force.
(b) CEO and other organizational leaders affirm the project team’s charter.
(c) The task force develops a timeline for the entire project.
(d) Individual task force members take assignments.

Step 2 Completing the Questionnaire

(a) Task force members determine who is best able to complete each section of questionnaire and takes responsibility for its completion.
(b) Task force members discuss what supplementary materials may support the information provided in the questionnaire (e.g. patient information pamphlets) and take responsibility for obtaining them.

Step 3 Interviews

(a) The task force reviews and discusses findings from the questionnaire. Based on those results, the task force determines what individual or group interviews should be conducted to explore further some issues identified in the questionnaire or to clarify areas that are ambiguous.
(b) Members of the task force decide who will complete each of the interviews. (Possible interview subjects and exploratory questions are suggested below.)

Step 4 Evaluation of Results

(a) The task force reviews the data from the questionnaire and the interviews.
(b) Drawing on the data and analyses, the team decides where the organization fits along the “spectrum of cultural competence.”

Step 5 Report and Action

(a) Depending on the charge given the team in Step 1, the task force discusses its findings with multiple audiences. These findings are often offered in a written report to the CEO or a Board committee.
(b) In addition to a self-assessment of overall cultural competence, the report will likely include specific recommendations for actions to be taken, identifying who would be accountable for taking the actions.
HOW LONG DOES THE SELF-ASSESSMENT TAKE?

Depending on the availability of data and the complexity of the organization, the entire self-assessment can be completed in three to six weeks. Completing the questionnaire and conducting the interviews can be simultaneous if desired.

THE INTERVIEWS

There is no magic number of interviews, but individuals from each of the following groups should contribute:

- Board of Trustees
- Administration
- Community leaders
- Patients
- Translators/interpreters
- Social Workers
- Nurses
- Physicians
- Emergency Unit staff
- Diversity trainers
- Dietitians
- Admitting and registration staff
- Human Resources staff
- Marketing staff
- Community Relations staff
- Clergy
- Maintenance/ housekeeping staff
- Public Relations staff
- Patient advocates
- Union leadership

Before the interviews are scheduled, the CEO should issue a general announcement about the assessment, its purpose, and what the organization will do with the results. Members of the committee should contact the interviewees, emphasizing that each interview is confidential and that results will be shared only in aggregate form. The interview will generally last 15 to 45 minutes, and participants should be encouraged to bring along relevant data, materials etc. Invite them to show you materials such as patient information pamphlets, special menus, translated newsletters, etc.

In general, the interviews should elicit information about those policies and practices that impact on ethnic/cultural competence. They should identify both support and barriers to ethnic/cultural competence. Additionally, they provide the opportunity to learn about individuals’ opinions and attitudes about this subject and to explore related areas that may not be covered in the questionnaire. Interview questions are suggested below. You will want to add or delete some based on your particular findings and interests.

SUGGESTED QUESTIONS FOR INTERVIEWS*

The following are questions that might be posed to individuals both within and external to the organization who are interviewed as part of the self-assessment process. The purpose of the interview is to add the dimension of personal experience to the information gleaned from the questionnaire and to identify unexplored areas. While many of these questions are covered in the questionnaire, additional insights will be obtained as the interviewees address these questions in terms of their experience and the context of their jobs. Along with data reported in the questionnaire, these answers will help your organization assess its overall cultural competence and identify steps for action. These questions may be supplemented by others suggested by the committee. Also, interviewees may wish to discuss other aspects of diversity and/ or share written materials with you.
QUESTIONS

1. When you hear the term “cultural competence,” what comes to mind?

2. What are the most challenging priorities of the multi-ethnic and cultural nature of the healthcare organization?

3. What are the major organizational obstacles (policies, organizational characteristics) inhibiting ethnic and cultural understanding among staff, patients, providers, etc.? What are the major organizational characteristics that enhance the multi-ethnic and cultural nature of the healthcare organization?

4. As the healthcare organization has attempted to meet the needs of ethnic and cultural diversity, what issues have arisen (need for resources, conflict, etc.)?

5. What mechanisms, if any, are in place that promote communication among different levels and departments of the healthcare organization in regard to issues of cultural competence?

6. What has the healthcare organization done to provide the best care for the multi-ethnic and cultural patient population (e.g. educating providers in regard to different ethnic/cultural beliefs and practices; use of specific services—interpreters, community liaisons, etc.)?

7. In what ways have you addressed the ethnic and cultural needs of patients as they receive care throughout the continuum (home health, social services, etc.)?

8. What services, programs, etc. are available to staff regarding ethnic/cultural-related issues?

9. In what ways are providers trained and helped to deal with ethnic and cultural issues (e.g. trained to recognize diseases common in certain populations, mechanisms and protocols by which providers can request assistance in dealing with ethnic/cultural patient issues and needs)?

10. What relationships does the healthcare organization have with particular community groups and how have these relationships affected the ethnic/cultural competency effort (community businesses under contract, initiatives with neighborhood health centers, etc.)?

11. What community outreach actions have been taken by the healthcare organization (e.g. health education programs, materials and forums for various ethnic/cultural groups, community support for patients of various ethnic/cultural backgrounds)?

12. In what ways are ethnic and cultural differences recognized throughout the healthcare organization (e.g. celebration of certain days, programs focused on specific health needs of a particular group)?

13. What, if any, ethnic/cultural professional programs are there to develop, as well as attract staff? Are internships targeted toward ethnic professionals? Mentoring programs? What are the challenges in developing and delivering these programs?

14. What government guidelines or regulations guide or influence your programs and initiatives regarding ethnic/cultural diversity and cultural competence?
15. What are the greatest strengths and the biggest concerns of the healthcare organization in regard to the delivery of care to and interactions with the multi-ethnic/cultural populations of its community?

16. What have you seen or would you like to see in terms of actual effects of ethnic/cultural initiatives on the work environment and on patient care?

17. What are your concerns about any of the ethnic/cultural activities undertaken by your organization?

*(Acknowledgment is given to Deborah Dwork, Employee Relations Director, Beth Israel Deaconess Healthcare organization, Boston, MA, who developed many of the above questions for use in its self-assessment.)*
HOW THE QUESTIONNAIRE IS ORGANIZED

The questionnaire is divided into three sections, each with distinct features.

Questions in Section 1 relate to the ethnic/cultural characteristics of the staff and organization. There are two sub-sections covering the following: (a) board, staff, and patient/community profiles; and (b) healthcare organizational recognition of diversity needs.

Questions in Section 2 relate to healthcare organizational approaches to accommodating diversity needs and attributes. There are three sub-sections covering the following areas: (a) diversity training; (b) human resource programs; and (c) union presence.

Questions in Section 3 are dedicated to healthcare organizational links to the communities you serve as well as patient and staff diversity initiatives. This section is divided into five parts: (a) healthcare organizational links to community; (b) organizational adaptation to diversity; (c) database systems and data development; (d) language and communication needs of patients and staff; and (e) business strategies attracting patients from diverse cultures.

USING THE RESULTS

This self-audit will help an organization evaluate where it sits within a “spectrum of cultural competence.” However, it is important that the team completing this assessment not view it as a quiz with a set of perfect answers. It is, rather, an opportunity to consider candidly the extent to which the healthcare organization is meeting the needs of diverse populations, both patients and those in the work force. The findings will, in themselves, suggest actions an organization may take to improve its cross-cultural competence. The results of this internal review will help the healthcare organization gain a broad perspective of its policies, programs and procedures relevant to ethnic and cultural concerns. Please refer to the accompanying scoring guide for data analysis and interpretation.
PART 1: ETHNIC/CULTURAL CHARACTERISTICS

This section contains questions on the characteristics of your staff and the healthcare organization. Questions relate to two broad areas: staff profiles and healthcare organizational recognition of diversity needs.

PART 1A: BOARD, STAFF AND PATIENT/COMMUNITY PROFILES

1. Ethnic and Cultural Characteristics - For each of the five ethnic/cultural groups, please provide percentages, estimates or ranges for the past fiscal or calendar year. Base responses on the past fiscal or calendar year. Please indicate whether (1) fiscal year: from ___________ to ___________, or (2) calendar year: from ___________ to ___________

<table>
<thead>
<tr>
<th></th>
<th>Administration / Management</th>
<th>Support Staff</th>
<th>Board Members</th>
<th>Non-Physician Providers</th>
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<tbody>
<tr>
<td>African-American*</td>
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<tr>
<td>Asian/ Pacific Islander</td>
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<tr>
<td>Hispanic/ Latino</td>
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<tr>
<td>European-American**</td>
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<tr>
<td>American Indian/ Eskimo/ Aleut</td>
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<td>Total 100%</td>
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</table>

* Includes persons of Caribbean descent and non-Hispanic
** Non-Hispanic

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<thead>
<tr>
<th></th>
<th>House Staff</th>
<th>Attending Physicians</th>
<th>Patients by Discharge</th>
<th>Community Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>African-American*</td>
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<tr>
<td>Asian/ Pacific Islander</td>
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<td>Hispanic/ Latino</td>
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<tr>
<td>European-American**</td>
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<tr>
<td>American Indian/ Eskimo/ Aleut</td>
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<tr>
<td>Total 100%</td>
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</tr>
</tbody>
</table>

* Includes persons of Caribbean descent and non-Hispanic
** Non-Hispanic
2. To what degree do your board members reflect the ethnic/cultural characteristics of your community?

   1  2  3  4  5
   almost a  somewhat  not at all perfect match

3. Has the administration identified ethnic/cultural competence as an organizational concern?
   Yes    No

4. In what ways has the administration identified ethnic/cultural competence as an organizational concern?

5. Has the board/administration adopted a mission or goals statement that explicitly incorporates a commitment to cultural diversity?
   Yes    No (if no, skip to Q 8)

6. To what degree does this statement reflect the current issues and concerns of the organization?

   1  2  3  4  5
   completely  somewhat  not at all

7. What year was this done? Please attach the mission statement, or type in sections that address this.
   Year ______________
PART 1B: HEALTHCARE ORGANIZATIONAL RECOGNITION OF DIVERSITY NEEDS

8. What are the major organizational characteristics that inhibit ethnic and cultural understanding among staff, patients, providers? Attach extra sheets if necessary.

<table>
<thead>
<tr>
<th>Characteristic #1</th>
<th>Administration/Support Staff</th>
<th>Patients</th>
<th>Providers-Physicians/Nurses</th>
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<tbody>
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</table>

For example: Facilities are spread across broad geography Communication difficulties for non-English speaking patients Signage and communication problems

9. To what degree are there strategies in place to recruit/retain actively a culturally diverse management/administration?

1 2 3 4 5

high somewhat not at all

10. To what degree are there strategies in place to recruit/retain actively a culturally diverse support staff?

1 2 3 4 5

high somewhat not at all
11. What are these strategies?

<table>
<thead>
<tr>
<th></th>
<th>Management/ Administration</th>
<th>Support Staff</th>
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<tbody>
<tr>
<td>Strategy #1</td>
<td></td>
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<td>Strategy #2</td>
<td></td>
<td></td>
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<tr>
<td>Strategy #3</td>
<td></td>
<td></td>
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</tbody>
</table>

For example: Minority search firm Mentoring

12. Are ethnic and cultural practices of minority staff accommodated through:

   (a) Time off for religious observance? Yes  No
   (b) Dietary/ Cafeteria preferences? Yes  No
   (c) Holidays? Yes  No
   (d) Other __________________ Yes  No
   (please specify)

13. Overall, to what degree does the healthcare organization accommodate needs and preferences of ethnic and cultural staff?

   1 2 3 4 5
   completely somewhat not at all
14. An organization can identify several ways to increase cultural competence. Below are potential initiatives and areas in which organizations address diversity. To what extent has your healthcare organization identified these and other areas? Please use the following scale in responding.

1 2 3 4 5
---
great extent somewhat not at all

(a) Awareness of cultural issues in establishing measures for attracting and retaining minority & female staff

(b) Awareness of cultural issues in improving achieving outcomes related to low birth weight, prenatal care utilization, immunization rates, etc.

(c) Cultural awareness/participation is recognized as important factor in decision making

(d) Soliciting minority input in developing programs, models, guidelines and training materials

(e) Long-term commitment to achieving cultural competence has been established

(f) Other (please specify)
PART 2: HEALTHCARE ORGANIZATIONAL APPROACHES TO ACCOMMODATING DIVERSITY NEEDS AND ATTRIBUTES

This section contains questions on how your healthcare organization addresses diversity needs. Questions relate to diversity training, human resource programs and union presence.

PART 2A: DIVERSITY TRAINING

15. Are staff members educated regarding the special needs and characteristics of each other; including the education of one ethnic/cultural group about another ethnic/cultural group?

(a) Cultural beliefs
Yes No
(b) Adherence to treatment regimens (e.g. dietary requirements)
Yes No
(c) Integration with patient-preference for alternative therapies
Yes No
(d) Gender roles
Yes No
(e) Other (please specify) ________________________________
Yes No

If no to all of the above, skip to Q 20

16. How are staff members educated, and how effective are these methods?

<table>
<thead>
<tr>
<th></th>
<th>1 extremely effective</th>
<th>2 somewhat effective</th>
<th>3 moderately effective</th>
<th>4 somewhat effective</th>
<th>5 not effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes/No</td>
<td>Effectiveness</td>
<td></td>
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<tr>
<td>Training</td>
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<tr>
<td>Orientation</td>
<td></td>
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<tr>
<td>Reading materials</td>
<td></td>
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</table>
17. If yes to training above (Q16), is it mandatory or voluntary? Please check appropriate box. If no to training above (Q16), skip to Q 20

<table>
<thead>
<tr>
<th></th>
<th>Mandatory</th>
<th>Voluntary</th>
<th>If Voluntary, what is compliance rate (percent)</th>
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</thead>
<tbody>
<tr>
<td>All staff</td>
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<tr>
<td>All but physicians</td>
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<tr>
<td>Management</td>
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<tr>
<td>Support</td>
<td></td>
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<tr>
<td>Volunteers</td>
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<tr>
<td>Other</td>
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</table>

18. Please rate the general impressions of effectiveness of the training initiatives:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
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<tbody>
<tr>
<td>1</td>
<td>extremely beneficial</td>
</tr>
<tr>
<td>2</td>
<td>somewhat beneficial</td>
</tr>
<tr>
<td>3</td>
<td>beneficial</td>
</tr>
<tr>
<td>4</td>
<td>not beneficial</td>
</tr>
<tr>
<td>5</td>
<td>don’t know</td>
</tr>
</tbody>
</table>

(a) Workforce relationships _______
(b) Staff-patient interactions _______
(c) Patient adherence to treatment protocols _______

19. Does your organization conduct formal evaluations of training programs that include pre and post measurements?

(a) Workforce relationships Yes No
(b) Patient adherence to treatment protocols Yes No

If yes to any of the above, please attach findings from these studies.
PART 2B: HUMAN RESOURCE PROGRAMS

20. Does your healthcare organization have the following programs?

(a) Career development activities  Yes  No
(b) Succession planning  Yes  No
(c) Technical training  Yes  No
(d) Management development  Yes  No
(e) Other __________________________  Yes  No

(please specify)

If no to all of the above, skip to Q 24

21. If yes to any of the above (20), for which staff? __________________________

22. Do you have the following activities available?

(a) Mentoring  Yes  No
(b) Tuition reimbursement  Yes  No
(c) Personal counseling/ 

employee assistance programs  Yes  No
(d) Other __________________________  Yes  No

(please specify)

If no to all of the above, skip to Q 24

23. If yes to any of the above (Q 22), how effective are those programs identified in Q 22 in contributing to organizational goals for ethnic/cultural staff, and to what extent do they participate?

1 2 3 4 5 6

1 extremely beneficial 2 somewhat beneficial 3 not beneficial 4 don’t know

<table>
<thead>
<tr>
<th></th>
<th>Effectiveness</th>
<th>Percent staff participation</th>
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<tbody>
<tr>
<td>Mentoring</td>
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<tr>
<td>Tuition reimbursement</td>
<td></td>
<td></td>
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<tr>
<td>Personal counseling</td>
<td></td>
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<tr>
<td>Employee assistance</td>
<td></td>
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<tr>
<td>Other</td>
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</table>

(please specify)

24. With regard to ethnic/ cultural staff at your organization, what trend do you observe over the last 5 years?
(a) Discrimination charges are not increasing  Yes  No
(b) Retention of ethnic/cultural minorities is not a problem  Yes  No
(c) Promotions of ethnic/cultural minorities is not a problem  Yes  No
(d) Turnover is not a problem  Yes  No

25. Are there human resource policies and procedures in place to address concerns or complaints concerning unfair treatment in the area of ethnic/cultural issues?

Yes  No  (if no, skip to Q 27)

26. What are these human resource policies and procedures, and how effective are they?

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<th>5</th>
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<tbody>
<tr>
<td>extremely effective</td>
<td>somewhat effective</td>
<td>not at all effective</td>
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</table>

Please attach policies and procedures if more space is required.

<table>
<thead>
<tr>
<th>Policy and procedure #</th>
<th>Description</th>
<th>Effectiveness</th>
</tr>
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<tbody>
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27. Has the organization developed a special office or function to address ethnic/cultural diversity; for instance an Office of Diversity?

Yes  No  (if no, skip to Q 30)

28. Provide a list of principal duties.

(a) ____________________  (b) ____________________  (c) ____________________

29. Please identify (a) where the responsibilities reside; and (b) the position title.

(a) ____________________

(b) ____________________

30. Are there marketing initiatives to identify, select and retain minority staff?

Yes  No  (if no, skip to Q 32)

31. What are these marketing initiatives? Provide example. (For instance, are there specific goals to recruit Asian speaking staff to strengthen the ability to reach Asian mothers?)
32. Is there specific financial support for cultural diversity activities or programs?

Yes  No (if no, skip to Q 35)

33. This question is in three parts. Please provide responses in the table below (see next page).
   (a) How much money has been allocated to the following key areas of cultural diversity activities or programs? Please provide dollar estimates in column titled ‘Allocation.’
   (b) How beneficial have these programs been in achieving related objectives? In column titled ‘Benefits,’ please indicate whether they have been

<table>
<thead>
<tr>
<th>Allocation</th>
<th>Benefits</th>
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<tbody>
<tr>
<td>Staff Training</td>
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<tr>
<td>Community Based Outreach (Clinical Programs)</td>
<td></td>
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<tr>
<td>Community Education Programs</td>
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<tr>
<td>Other</td>
<td></td>
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Please base your responses on past fiscal or calendar year.
34. If the allocation has changed over the past fiscal or calendar year, by what percentage has it changed? Indicate whether change has been positive (+) or negative (-). If budget has not changed, skip to Q 35.

<table>
<thead>
<tr>
<th>Change in allocation</th>
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<tbody>
<tr>
<td>Staff Training</td>
</tr>
<tr>
<td>Community Based Outreach (Clinical Programs)</td>
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<tr>
<td>Community Education Programs</td>
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<tr>
<td>Other</td>
</tr>
<tr>
<td>______________________</td>
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<td>(please specify)</td>
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PART 2C: UNION PRESENCE

35. Is your organization unionized?
   Yes   No (if no, skip to Q 40)

36. Please provide the names of the unions represented.
   1. ___________________ 2. ___________________ 3. ___________________
   4. ___________________ 5. ___________________ 6. ___________________

37. What functions or employee groups in the system are unionized? E.g. maintenance, housekeeping.
   1. ___________________ 2. ___________________ 3. ___________________
   4. ___________________ 5. ___________________ 6. ___________________

38. Please rate the impact of unions on promoting diversity within the organization.
   1 2 3 4 5 6
   extremely beneficial somewhat beneficial not beneficial can’t judge

39. If you circled (1) or (2) above, list programs or activities that reflect this involvement.
   1. ___________________ 2. ___________________ 3. ___________________
PART 3: HEALTHCARE ORGANIZATIONAL LINKS TO PATIENTS AND THE COMMUNITIES YOU SERVE

Questions in this section are dedicated to healthcare organizational links to the communities you serve as well as patient and staff diversity initiatives. This section is divided into five parts: (a) healthcare organizational links to community; (b) organizational adaptation to diversity; (c) database systems and data development; (d) language and communication needs of patients and staff; and (e) business strategies attracting patients from diverse cultures.

PART 3A: HEALTHCARE ORGANIZATIONAL LINKS TO COMMUNITY

Questions in this section address your healthcare organization’s links to the communities you serve and the effectiveness of these linkages.

40. This question is in three parts; use table below:
   (a) Identification of service links - please name up to four (4) groups/organizations with which your healthcare organization has substantial links. If more than four, please attach pages.
   (b) What are the service linkage activities - please describe activities in the space provided, or attach additional pages if necessary.
   (c) How effective are these linkages - please use the scale below.

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<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>extremely effective</td>
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<td>moderately effective</td>
<td>somewhat effective</td>
<td>not at all effective</td>
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Please identify **Community Advocacy Groups** with which you have links

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<th>Activities</th>
<th>Effectiveness</th>
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Q 40 continued

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<th>Please identify Local/ State Provider Associations with which you have links</th>
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<th>Activities</th>
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<th>Please identify Schools with which you have links</th>
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41. How closely does your healthcare organization work with these external resources in accomplishing diversity objectives?

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<th>4</th>
<th>5</th>
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<tr>
<td>a lot</td>
<td>somewhat</td>
<td>not much</td>
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</table>

42. Does your healthcare organization engage in the following community outreach activities:

(a) Provide an ombudsman office to assist ethnic/ cultural populations?
   If yes, how long have you had this activity? _____ (in years)
   If no, do you have plans to undertake this activity?

(b) Involve the community in planning/ evaluating functions?
   If yes, how long have you had this activity? _____ (in years)
   If no, do you have plans to undertake this activity?

(c) Encourage staff to participate in community meetings?
   If yes, how long have you had this activity? _____ (in years)
   If no, do you have plans to undertake this activity?

(d) Select patient advocates for their ethnic/ cultural diversity?
   If yes, how long have you had this activity? _____ (in years)
If no, do you have plans to undertake this activity? Yes No

(e) Offer to communities educational programs that address health beliefs/needs of ethnic/cultural population?
If yes, how long have you had this activity? ______ (in years)
If no, do you have plans to undertake this activity? Yes No

Establish or contribute to community support groups for certain ethnic/cultural populations?
If yes, how long have you had this activity? ______ (in years)
If no, do you have plans to undertake this activity? Yes No

(g) Other
_______________________________________________
Yes No (please specify)
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

43. Has your healthcare organization established links with minority businesses for health promotion in the community?
Yes No (if no, skip to Q 45)

44. How long have you had this link or program? ______ (in years)

Skip to Q 46

45. Do you have plans to undertake this activity?
Yes No

46. Does your healthcare organization explicitly seek contract arrangements with ethnic/cultural businesses in your community?
Yes No (if no, skip to Q 49)

47. If yes, please give examples.
________________________________________________________________________
________________________________________________________________________

48. How long have you had this initiative or program? ______ (in years)

Skip to Q 50

49. Do you have plans to undertake this activity?
Yes No

PART 3B: ORGANIZATIONAL ADAPTATION TO DIVERSITY
50. Do you have an organized way to collect data on the ethnic/cultural characteristics of patients (including patients who use community-based services)?  

Yes  

No (if no, skip to Q 52)  

51. Is the database or information system used to identify the special needs of the ethnic/cultural patients in the following areas?  

(a) Special meals  

Yes  

No  

(b) Scheduling appointments  

Yes  

No  

(c) Translation  

Yes  

No  

(d) Other __________________________  

Yes  

No  

(please specify)  

52. How does your healthcare organization determine the ethnic/cultural characteristics of the patients served?  

53. Do you survey patients to determine their perception of your services?  

Yes  

No (if no, skip to Q 59)  

54. How often do you survey patients?  

55. Does your survey ask questions assessing service satisfaction related to cultural diversity?  

Yes  

No (if no, skip to Q 57)  

56. How many questions addressing these issues are on the survey?  

Please attach copy of survey  

57. Is the survey available in languages other than English?  

Yes  

No  

58. If yes to Q 57 above, in what languages is the survey available?  

1.__________________  

2.__________________  

3.__________________  

4.__________________  

5.__________________  

6.__________________  

59. In addressing the ethnic/cultural needs of patients throughout the continuum of their care, do you provide the following, and if you do, how well do they work?  

1  

2  

3  

4  

5  

extremely well  

somewhat well  

not at all  

Use table for response.
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/ No</th>
<th>If yes, how well do they work?</th>
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<tbody>
<tr>
<td>A. Appointment systems tailored for ethnic/cultural populations in outpatient or specialty clinics</td>
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<td>B. Protocols for addressing ethnic/cultural interpreting needs</td>
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<td>C. Signs that direct patients to language/cultural assistance</td>
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<td>D. Accommodations for religious preferences of patients</td>
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<tr>
<td>E. Accommodations for the ethnic/cultural dietary preferences of patients</td>
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<tr>
<td>F. Assistance for ethnic/cultural populations in discharge planning</td>
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<tr>
<td>G. Other</td>
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<td>(please specify)</td>
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</table>

60. If yes to Q 59 C above, in what languages are the signs available?

1. ____________________  2. ____________________  3. ____________________
4. ____________________  5. ____________________  6. ____________________

If no to Q 59 C, skip to Q 62
61. If yes to Q 59 C above, where are these directions posted?

(a) Emergency room  Yes  No
(b) Admissions  Yes  No
(c) Outpatient clinics  Yes  No
(d) Other _____________________ Yes  No
(please specify)

PART 3C: DATABASE SYSTEMS AND DATA DEVELOPMENT

62. Does your healthcare organization maintain a computerized database documenting the characteristics of your ethnic/cultural staff? Database refers either to management information system (MIS) or human resources information system (HRIS).
Yes  No (If no, skip to Q 67)

63. Does your database or information system include the characteristics of ethnic/cultural staff; such as salary, rate of turnover, promotions, staff tenure, performance appraisals, training, absenteeism? Circle yes if one or more of the above apply.
Yes  No (if no, skip to Q 66)

64. Is the database analyzed?
Yes  No (if no, skip to Q 66)

65. Describe the nature of analyses that apply to such data.


66. Identify initiatives, programs or policies developed based on such analyses.


PART 3D: LANGUAGE AND COMMUNICATION NEEDS OF PATIENTS AND STAFF

67. Does your healthcare organization have written policies that relate to the provision of interpreter/translator services?

   Yes         No (if no, skip to Q 69)

68. Please describe or attach these policy statements.

69. Are hospital-based interpreter services required in your state or by any regulatory agency?

   Yes         No         Don’t know

70. Does your healthcare organization have interpreter/translator services?

   Yes         No (if no, skip to Q 85)

71. Are your interpreter/translator services

   (a) Hospital/Health System based? Yes        No
   (b) Non-hospital based?        Yes        No

   If no to (a) and yes to (b), skip to Q 79
   If no to (a) and no to (b), skip to Q 85

72. If services are hospital based, is one specific office or department responsible for providing interpretation/translation services?

   Yes         No (if no, skip to Q 79)

73. What is the name of the office or department?

74. What are the principal duties of this office?

   (a) __________________________________________________
   (b) __________________________________________________
   (c) __________________________________________________
75. If your healthcare organization does not have a specific office dedicated to interpreter/translator services, please identify (a) the office or department; (b) the position title; and (c) how your healthcare organization addresses the language needs of patients and staff.

(a) _____________________________________________
(b) _____________________________________________
(c) _____________________________________________

76. In general, how effective are the hospital-based interpreter/translator services in addressing the needs of your ethnic/cultural population?

1 2 3 4 5
extremely effective somewhat not effective

77. Does this office or your healthcare organization maintain a central registry documenting requests for interpreter/translator services?

Yes (if yes, skip to Q 79)       No

78. How do you track or document the utilization of interpreter/translation services?

____________________________________________________________

79. What kind of non-hospital based interpreter/translator services does your healthcare organization have?

(a) AT&T phone translation       Yes      No
(b) Friend or family             Yes      No
(c) Other ____________________ Yes      No
   (please specify)

80. Does your system allocate support specifically for interpretation services?

Yes       No (if no, skip to Q 85)

81. What is the dollar amount of this support?

82. Has the allocation changed over the past fiscal or calendar year?

Yes       No (if no, skip to Q 85)

83. What is the percent change in allocation. Indicate whether the change is positive (+) or negative (-).

84. What percent of your interpreter/translator services is ‘paid,’ in contrast to voluntary?
STAFF ISSUES

85. Does your healthcare organization have a policy for recruiting bilingual staff?
    Yes  No

86. Does your healthcare organization give preference in hiring to bilingual staff?
    Yes  No

87. How or where are translators used?

For Patients:
(a) In the emergency room  Yes  No
(b) In ambulatory units  Yes  No
(c) On inpatient units  Yes  No
(d) At discharge  Yes  No
(e) On-call for off-shifts  Yes  No

For Staff:
(f) Employment interviews  Yes  No
(g) Employee counseling  Yes  No

88. Are interpreters trained in cross-cultural medical language?
    Yes  No (if no, skip to Q 91)

89. How are the interpreters trained?
(a) In house training  Yes  No
(b) Outside contractors  Yes  No

90. How effective is this training?

1  2  3  4  5
extremely effective somewhat not effective

91. Are interpreters and other staff trained to understand and respond to ethnic or cultural traditions (e.g. death/dying rituals, involvement of family, dietary preferences, etc.)?
    Yes  No (if no, skip to Q 94)

92. Describe how interpreters and other staff are trained.

93. How effective is this training?
94. Does your healthcare organization assess the quality of interpretation services?
   Yes  No (if no, skip to Q 97)

95. How does your healthcare organization assess the quality of these services?

96. Does your healthcare organization test interpreters in their knowledge of medical technology?
   Yes  No (if no, skip to Q 98)

97. Are results used to make personnel decisions:
   (a) Retrain an interpreter   Yes  No
   (b) Evaluate interpreter performance   Yes  No
   © Other  ________________ Yes  No
   (please specify)

98. Are interpreters accredited, or otherwise evaluated for proficiency?
   Yes  No

99. Are medical staff and medical students given any training in communicating with ethnic/cultural minority patients?
   Yes  No (if no, skip to Q 102)

100. Describe how medical staff and medical students are trained.
101. How effective is this training?

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<td>somewhat</td>
<td>not effective</td>
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PATIENT ISSUES

102. Does your healthcare organization identify languages spoken in your service community?

Yes  No

103. How does your healthcare organization identify patients needing interpretation and translation?

(a) Identification by admissions assessment  Yes  No
(b) Identification by nursing assessment  Yes  No
(c) Identification by physician  Yes  No
(d) Medical support staff assessment  Yes  No
(e) Self-identification  Yes  No
(f) Other  Yes  No

(please specify)

104. What languages, other than English, are the principal languages of your patients and staff?

<table>
<thead>
<tr>
<th>Language</th>
<th>% of Patients</th>
<th>Language</th>
<th>% of Staff</th>
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105. Estimate the percentage of patients served by your hospital who require interpreter services:
106. Does your healthcare organization measure patients’ satisfaction with your hospital’s interpreter/translator services?

Yes  No

107. Please indicate up to four (4) languages for which you have the highest demand for interpretation or translation.

<table>
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<tr>
<th>Languages</th>
<th>Percent of all requests</th>
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108. How does your healthcare organization acquire translated materials? Circle all that apply

(a) Translated by hospital staff or person hired by contract Yes  No
(b) Translations by volunteers Yes  No
(c) Translations purchased from professional translator Yes  No
(d) Translated material secured from another hospital facility Yes  No
(e) Translated material secured from other (non-hospital) agency or organization Yes  No
(f) Other ____________________________ Yes  No

(please specify)

109. What materials are translated into other languages?

For Patients:

(a) Patient education materials Yes  No
(b) Patient menu Yes  No
(c) Patient satisfaction survey Yes  No
(d) Marketing/Advertisements Yes  No
(e) Billing information Yes  No
(f) Directions to sites/services Yes  No
(g) Patient directives (e.g. DNRs) Yes  No
(h) Medication instructions Yes  No

For Staff:

(a) Employee handbook Yes  No
(b) Employee newsletters Yes  No
(c) Employment application Yes  No
110. Does your healthcare organization have programs designed to address the needs of hearing or sight-impaired patients?

Yes  No

If yes, please describe: ______________________________________________________

111. Does your healthcare organization provide interpreter services for the hearing or sight-impaired patients?

Yes  No

112. Does your healthcare organization have special clinical or educational programs for gay/lesbian patients?

Yes  No

If yes, please describe: ______________________________________________________

113. Does your healthcare organization have special clinical or educational programs for the physically disabled?

Yes  No

If yes, please describe: ______________________________________________________

114. Does your healthcare organization have special clinical or educational programs for the mentally disabled?

Yes  No

If yes, please describe: ______________________________________________________

PART 3E: BUSINESS STRATEGIES ATTRACTING PATIENTS FROM DIVERSE CULTURES

115. Are you undertaking special initiatives to target patients and expand services to ethnic/cultural populations in the following areas:

(a) Marketing:
   (a1) Advertising (e.g. newspapers, community fliers, churches, etc.)?  
        If yes, how long have you had this initiative? ______ (in years)
        If no, do you have plans to undertake such an initiative?  
   (a2) Recruitment drives in ethnic/cultural neighborhoods?  
        If yes, how long have you had this initiative? ______ (in years)
        If no, do you have plans to undertake such an initiative?
(a3) Meetings with ethnic/cultural community organizations? Yes No
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(a4) Meetings with ethnic/cultural business groups? Yes No
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(a5) Other ______________________________________________________ (please specify)
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(b) Services:
(b1) Developing services in ethnic/cultural communities? Yes No
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(b2) Expanding services in ethnic/cultural communities? Yes No
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(b3) Developing special ethnic/cultural related health programs, such as hypertension education in Hispanic communities? Yes No
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(b4) Monitor outcomes regarding ethnic/cultural minorities Yes No
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

(b5) Other ______________________________________________________ (please specify)
If yes, how long have you had this initiative? ______ (in years)
If no, do you have plans to undertake such an initiative? Yes No

116. Do you have written policies for reviewing and assessing ethnic/cultural patient needs?
Yes No (if no, skip to Q 121)
117. Please describe or attach these policies and procedures for reviewing and assessing ethnic/cultural patient needs; e.g. ombudsman, cross organizational team.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

118. Do these policies and procedures address all of your ethnic/cultural patient groups that have substantial numbers of patients?

Yes (if yes, skip to Q 121) No

119. What groups are omitted?

1.__________________ 2.__________________ 3.__________________
4.__________________ 5.__________________ 6.__________________

120. What groups are included?

1.__________________ 2.__________________ 3.__________________
4.__________________ 5.__________________ 6.__________________

121. Has consideration of ethnic/cultural minority patient issues been incorporated into your healthcare organization’s Quality Improvement efforts?

Yes No

122. Please describe how this has been done.