



**Lutheran  
HealthCare**<sup>SM</sup>

# Practical Steps to Cultural Proficiency

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# Definition of Cultural Competence

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- A set of congruent behaviors, attitudes, policies and procedure that come together in a system, agency or among professionals which enable that system, agency or those professionals to work effectively and efficiently in cross-cultural and diverse linguistic situations on a continuous basis.

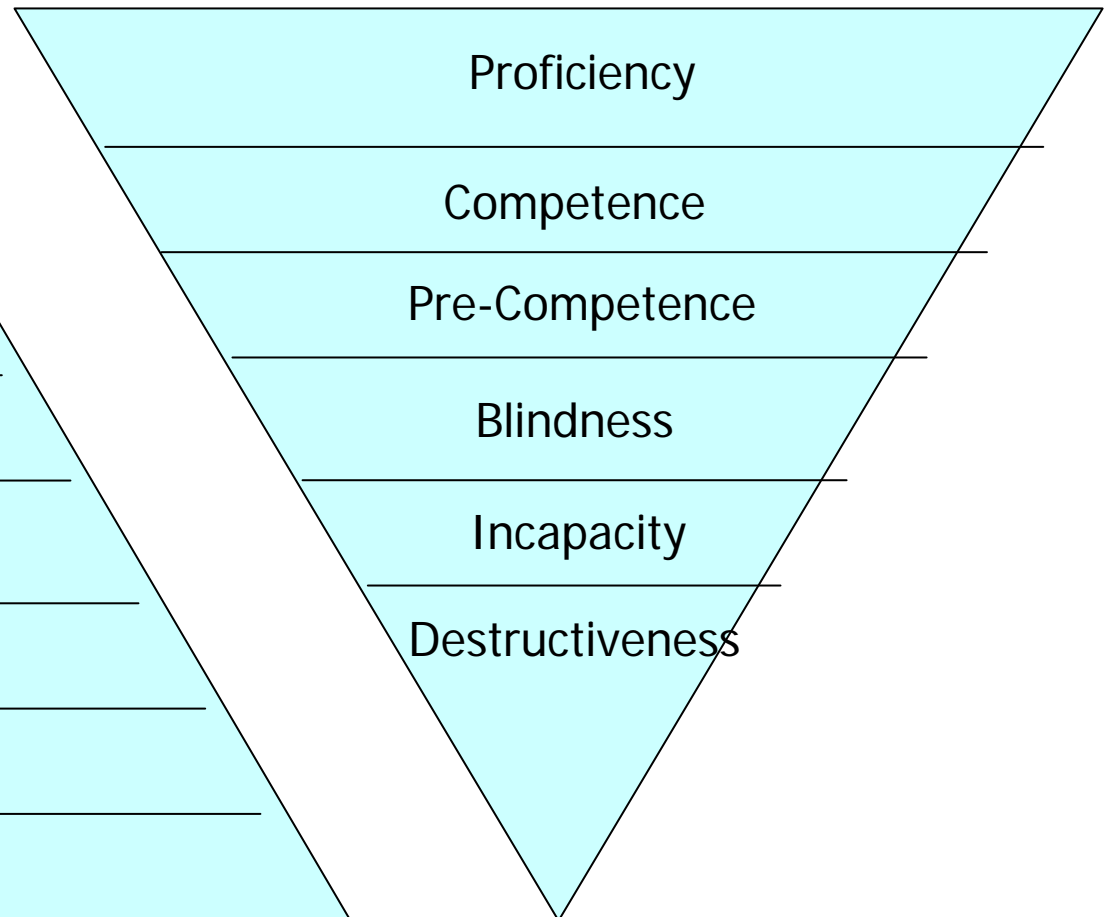
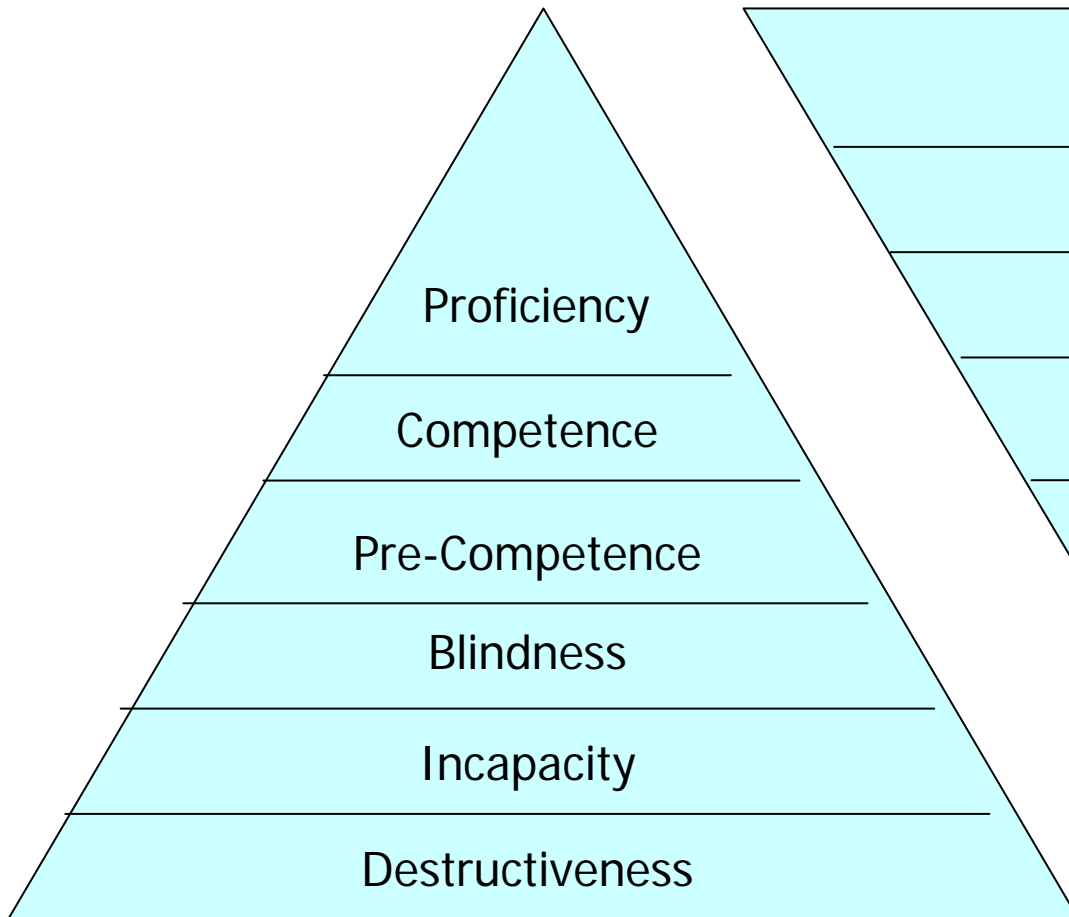
# The Cultural Competence Continuum



From this...

to

THIS!



# The Cultural Competence Continuum



- **Cultural Destructiveness** – Attitudes and practices that are destructive to cultures and consequently to the individuals in the culture.
- **Cultural Incapacity**- Not intentionally seeking to be culturally destructive but lacking the capacity to help minority clients or communities. Believing in racial superiority of the dominant group and assuming a paternal posture towards the “lesser” races.
- **Cultural Blindness**- Believing that culture/ethnicity/race make no difference in how services are provided. “All people are the same.”



# The Cultural Competence Continuum

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- **Cultural Pre-Competence-** Pre-competent individuals realize their weakness in serving minorities and attempt to improve aspects of their services to a specific population.
- **Cultural Competency-** Accepting and respecting differences and continual self-assessment regarding culture.
- **Cultural Proficiency-** Holding culture in high esteem, seeking to add to the knowledge base.

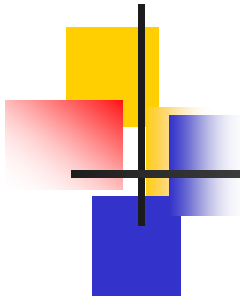
( Cross Model of Cultural Competence, Terry Cross. (1988))



# Cross Cultural Competence

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The ability to think, feel, and act in ways that acknowledge, respect, and build upon ethnic, (socio) cultural, and linguistic diversity.



Social Status  
& Power

Gender

Age

- Race
- Ethnicity
- National origin
- Geographic region
- Spirituality/Religion
- History

Marriage &  
Family

Education &  
Vocation

Personal  
Psychology

Family  
Dynamics

Acculturation

**Culture Expressed  
Through Individuals  
Over Time**

*Developed & Produced  
By the National  
Center for  
Primary Care at  
Morehouse  
School of Medicine,  
with Support  
From the Pfizer  
Foundation*



# Cultural Differences in Health Care

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- Communication and language
- Sense of Self and Space
- Values & Norms
- Time Orientation/Time Consciousness
- Family Values & Relationships - decision making
- Gender Roles, Role of Elderly



# Cultural Differences in Health Care (continued)

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- Diet- food & nutrition
- Concept of Health - health seeking behavior
- Folk Medicine
- Religious Beliefs
- Health Care System in Home Country

# Concept of Cultural Humility

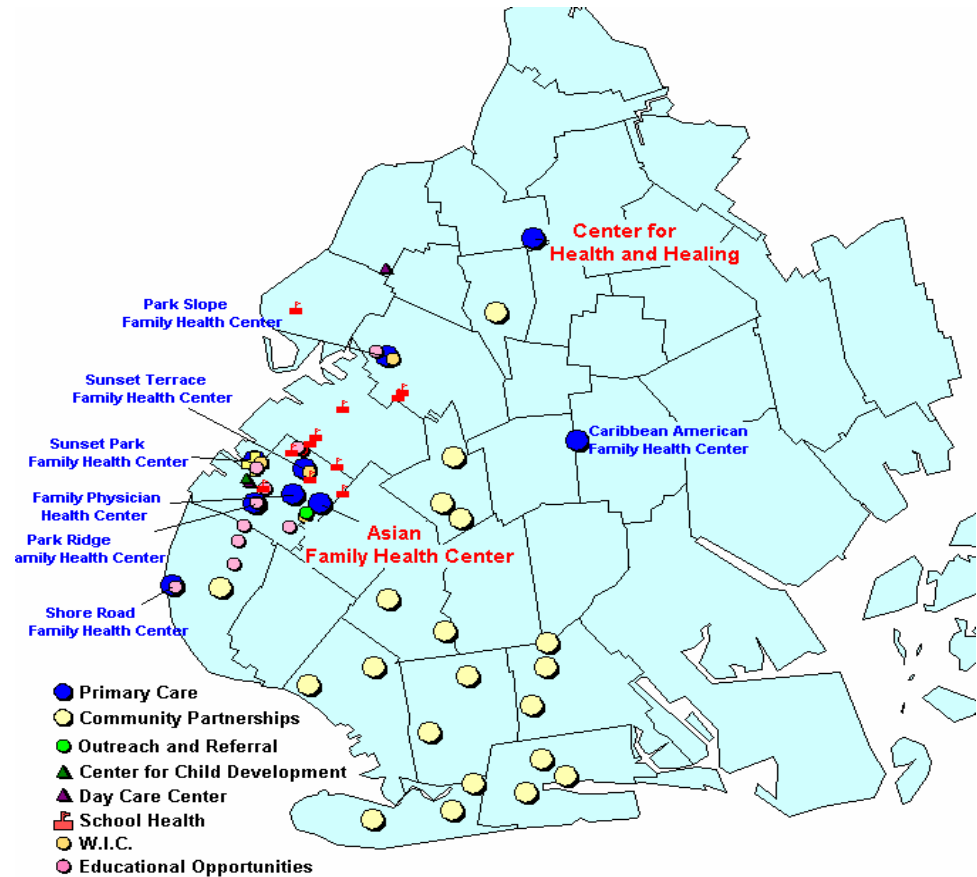


- Focuses on the process of intercultural exchange, paying explicit attention to clarifying the service providers values and beliefs through self-reflection and self critique, and
- Incorporates the characteristics of both the service provider and the older adult into a mutually beneficial and balanced relationship

(Melanie Tervalon, Jann Murray-Garcia " *Cultural Humility versus Cultural Competence: A Critical Distinction in Defining Physiciana Training Outcomes in Multicultural Education*" Journal of Health Care for the Poor and Underserved Vol 9, No. 2 1998)

# Lutheran HealthCare

- **Established in 1886**
- **System includes:**
  - 476 bed teaching hospital and Level 1 Trauma Center
  - Ambulatory care system (600,000 visits)
  - Nursing home
  - 3 senior housing developments
  - Managed care company (Health Plus)
  - Community services division (ESL, GED, daycare, meals on wheels, ...)





# Neighborhood Profile

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- Located in Sunset Park, Brooklyn, along the waterfront
- **1880's:** LMC est. in 1880's – Norwegian immigrants
- **1960's:** Predominantly Scandinavian and Puerto Rican residents
- **1980's:** Chinese immigrants
- **1990's:** Arabic, Russian, Dominican and Mexican immigrants, expansion to include Caribbean population
- **Annual documented need for 40+ languages and dialects**
- Institution-wide average number of annual patient visits that require an interpreter close to 200,000 (excluding part-time clinics)



# Lutheran HealthCare's Mission and Vision Statement

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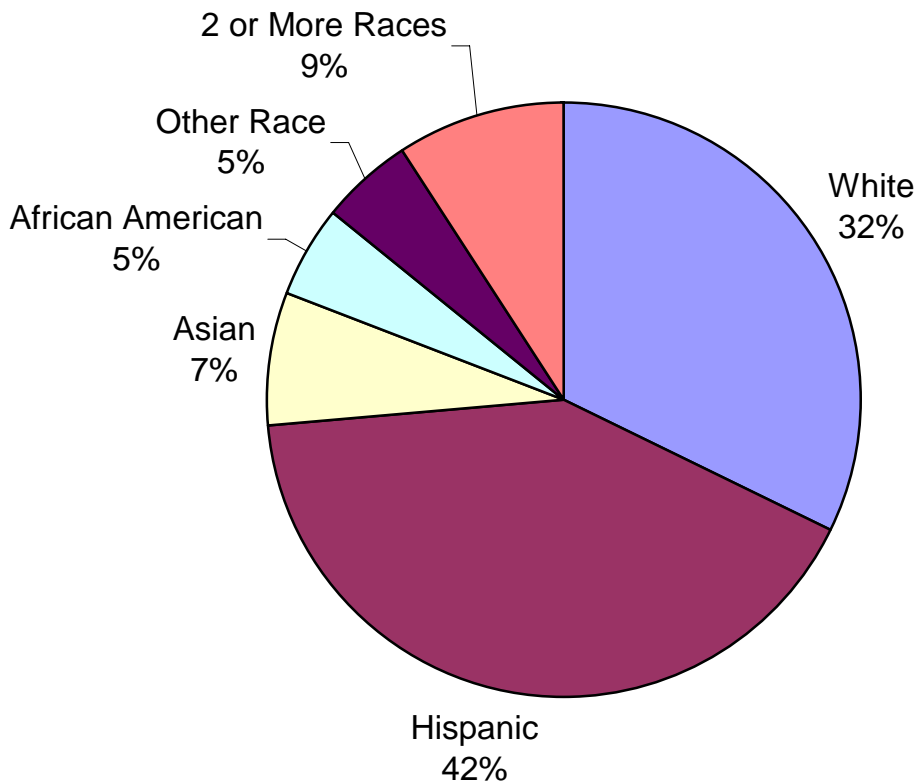
“Lutheran HealthCare has no reason for being of its own; it exists only to serve the needs of its neighbors ...

Lutheran HealthCare understands a hospital is not a collection of buildings, machines and beds, but a staff of talented, creative and committed people who serve the community as they are needed...

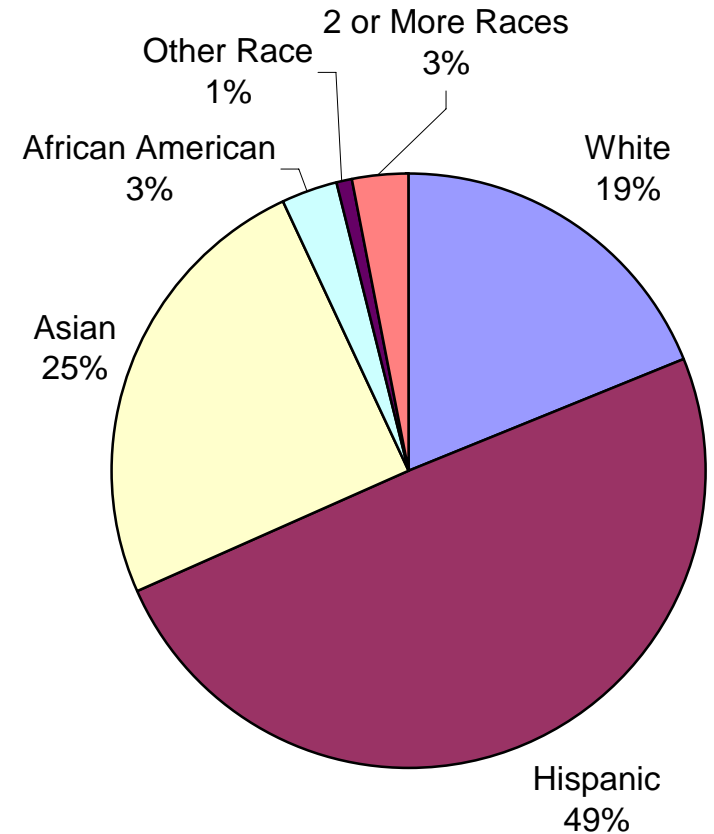
Lutheran HealthCare works in partnership with its neighbors, each relying on the other as friends who care about and assist each other...”

# Our Demographics

**LMC Patient Demographics**



**Sunset Park Demographics**





# History of Cultural Competence at Lutheran Healthcare

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- 1990- Asian Initiative w/ Chinatown Health Clinic
- 1995- Cultural Access Task Force
- 1996- Partnerships with Russian providers
- 1997- Open Park Ridge HC (w/ mosque), Hire Cultural Initiatives Coordinator
- 1998- Open Caribbean Health Center
- 2000- Mexican Health Project
- 2002- Open Chinese Health Center
- 2004- Korean Initiative, Institute for Cross Cultural Health,
- 2004- Appoint Vice President for Cultural Competence
  - Responsible for all matters related to cultural competence and working with all staff on the planning and implementation of cultural competence initiatives in operations and program planning



# Cultural Access Task Force

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- Goal- To provide cultural and linguistic access to hospital services to the community
  - Established 1995- interdisciplinary and representative of ethnic communities we serve
  - Work via committees- Language Bank, Telecommunication, Translation, Signage, Food Service, ADA, Education, Spiritual Care, Research, HR, Holiday (latter two no longer meet)
- Accomplishments: Multilingual signage (5 languages- FHC, 6 language- LMC); celebration of over 30 ethnic and religious holidays; Latino, Chinese, Kosher and Halal menus; most major forms translated in 4 languages; IT changes- added interpreter, language and ethnicity fields

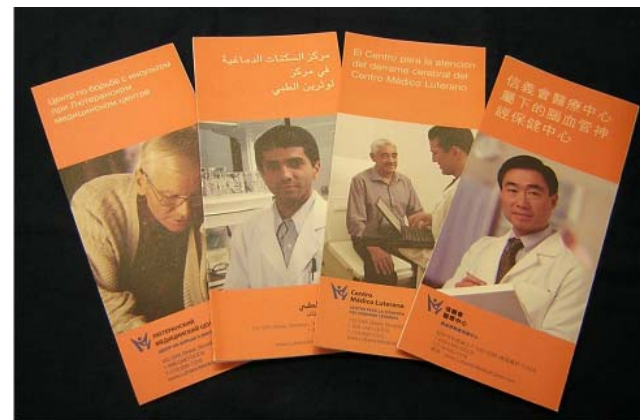
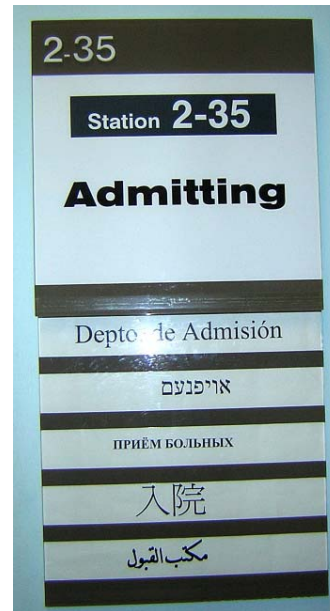


# Language Initiatives

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- Coordinate all language access activities including:
  - Language Bank and interpreter services,
  - Sign Language services
  - Translation services
  - Recruitment of and training of bilingual staff
  - Signage, telephone access
  - Assure compliance with Federal, State and local mandates
  - Signage in 6 languages (hospital), 5 languages (FHC)

# Translated Documents and Signage





# Educational Initiatives

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- Full Day mandatory training for all staff
- Latino Values and Health Beliefs
- Chinese Values and Health Beliefs
- Death and Dying Series
- Conflict Resolution
- The fast of Ramadan & its impact on Muslim patient care
- Symposium – Barriers to health care access and Latino health disparities
- Health & Spirituality Lecture – “The Relaxation Response: Linking Mind, Body and Spirit”



# Advisory Groups

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- Provide community and staff input to cultural and spiritual initiatives
  - Arab Initiatives Committee
  - Latino Advisory Board
  - Chinese Advisory Board
  - LGBT Advisory Board
  - ADA Subcommittee
  - Senior Initiatives
  - Tanenbaum Center Project
  - AdHoc- Chinese Unit Advisory Board, Mosque Advisory Board, various focus groups (ie Russian)



# Strategic Initiatives

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- Promote cultural competence, patient-focused care through:
  - Collaborate and plan programs with Organizational Learning, Pastoral Care, Human Resources, Food Service, Nursing, Medical and other departments
- Liaison with community organizations
  - To form linkages to increase access to care for patients and the community
  - Collaborate with External Affairs department to develop culturally and linguistically appropriate marketing, outreach and health education activities



# Recommended Reading

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## Cross-Cultural Servanthood- Serving the World in Christlike Humility

by Duane Elmer

InterVarsity Press, 2006

ISBN-10 0-8308-3378-1



# Thank You!

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- Should you have any questions or comments, please contact:
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