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# Cultural Competence Training for Hospital Staff: Experiences and Results from the MFH project – an overview

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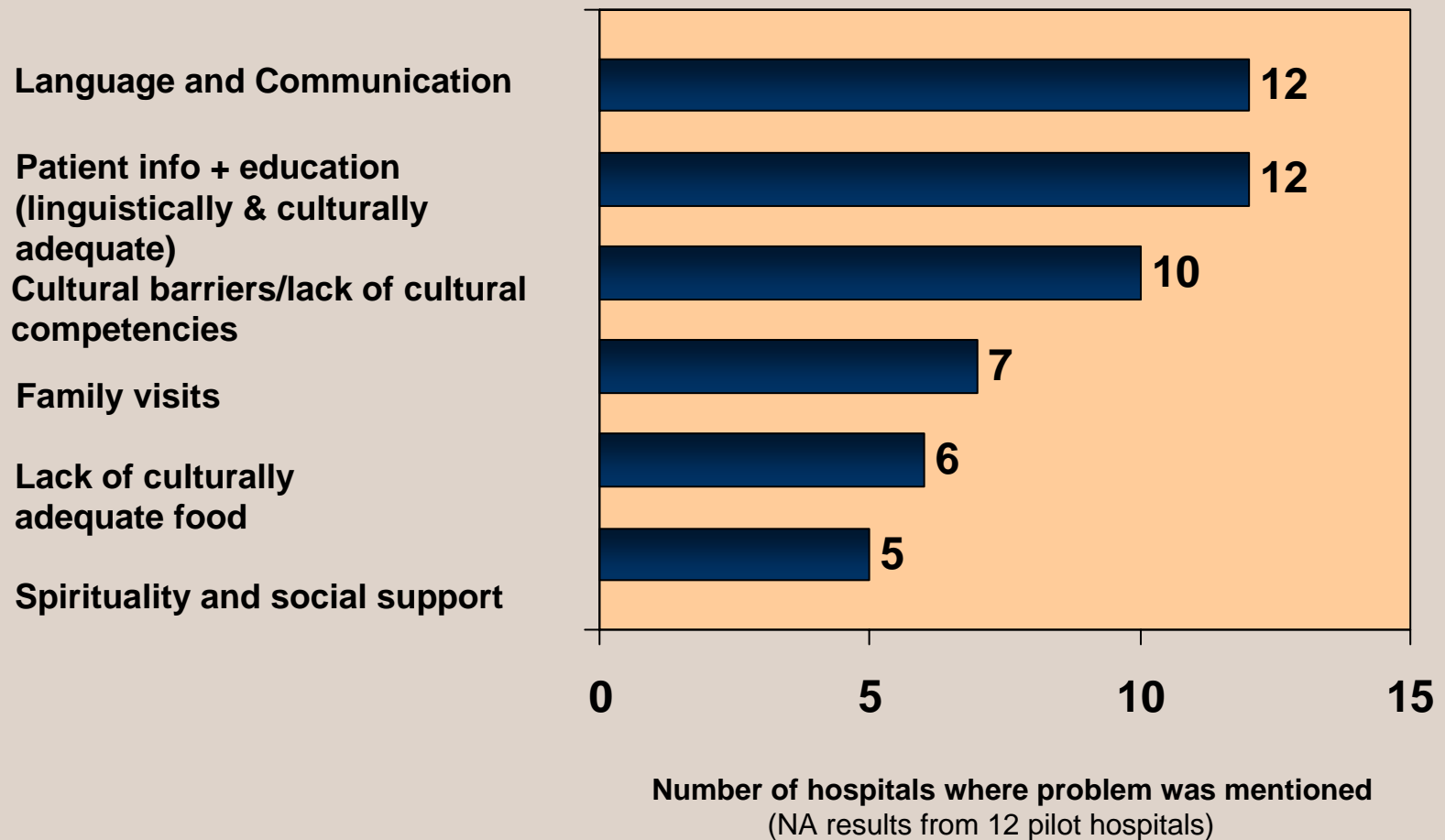
Ludwig Boltzmann Institute for the Sociology of Health and Medicine,  
University of Vienna

**Hospitals in a culturally diverse Europe**

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## Results of Needs Assessment 2003

European cross analysis: The six most important problem areas



## Basic decisions concerning cultural competence intervention in the MFH project

- **Decision on an investment in improving staff's competences** as staff experiences difficulties in cross-cultural encounters between health care providers, patients and relatives
- **Decision an integrated training course** aiming at development of awareness, knowledge and skills for all department staff confronted with with cultural diversity – oriented at a common model provided in a European pathway, but locally adapted
- **Primary orientation: Supporting staff** to successfully handle/ cope with challenges around cultural diversity
- **Decision for systematic evaluation** with common instruments adapted from a US project

## Specifications intervention

- Gaining **managerial support** and staff acceptance
- Ensuring **funding** / providing necessary resources
- Increasing relevance for management / staff by **targeting departments**
- Conducting a department specific **needs assessment**
- Deciding on **training design** / curriculum:
  - Introduction in 2 sessions around 6 hours, experiential learning as follow ups
  - Content – practical relevance, awareness, knowledge, skills
  - staffs composition
- Contracting **trainers** that offer skills required
- Conducting **TRAINING**

## Specifications - Evaluation

- **Measuring change in staff perspectives and staff satisfaction with training:** pre – post questionnaire translated into local languages
- **Progress reports:** Measure documentation by focal persons
- **Interviews** with focal persons after conclusion of courses, **measure documentation sheets**

## Evaluation Results 1

- **Feasibility/ Acceptability**

Implementation attempted in 8 of 12 pilot hospitals – 7 completed implementation in the agreed timeframe

Number of training participants: 149

- **Quality**

- Measured as conformity with suggestions of a common Pathway developed on the basis of expert knowledge: In the very limited timeframe of the project many compromises had to be made

- **Effectiveness**

In the expected direction, but varying across different dimensions (awareness, knowledge, skills, comfort levels) and between hospitals

- **Cost-Effectiveness**

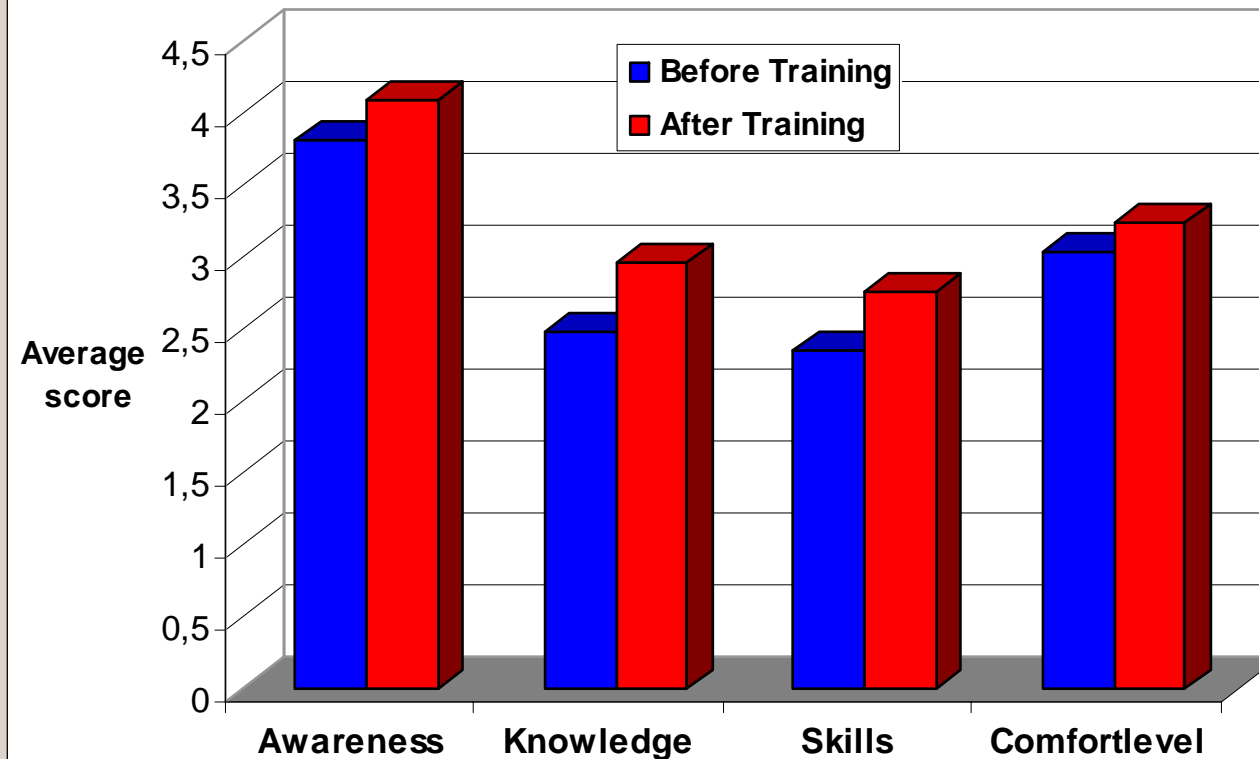
External costs low, developmental costs high (volunteer work)

- **Sustainability**

Measured by inclusion in standard continuous professional education: in process in at least 5 out of 7 pilot hospitals

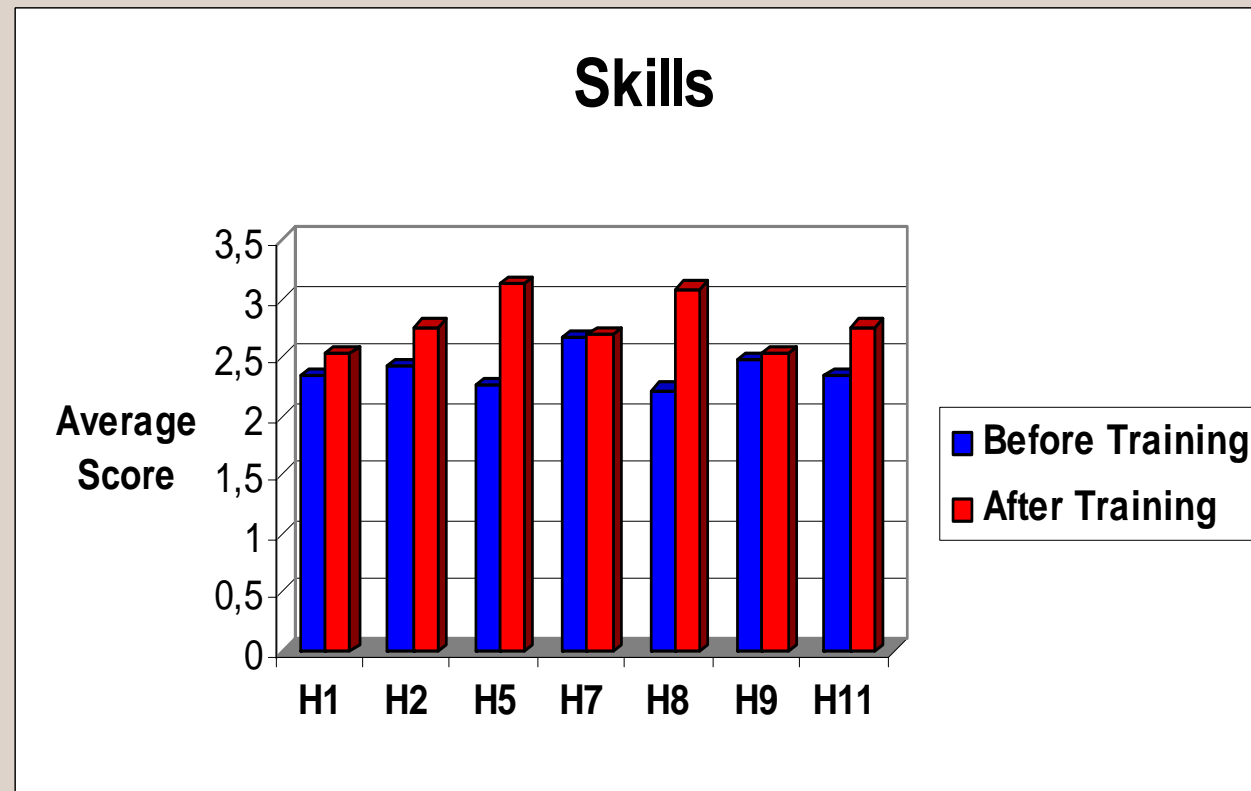
## Effectiveness 1 – all targeted areas

### Effectiveness of the cultural competence training in all participating hospitals



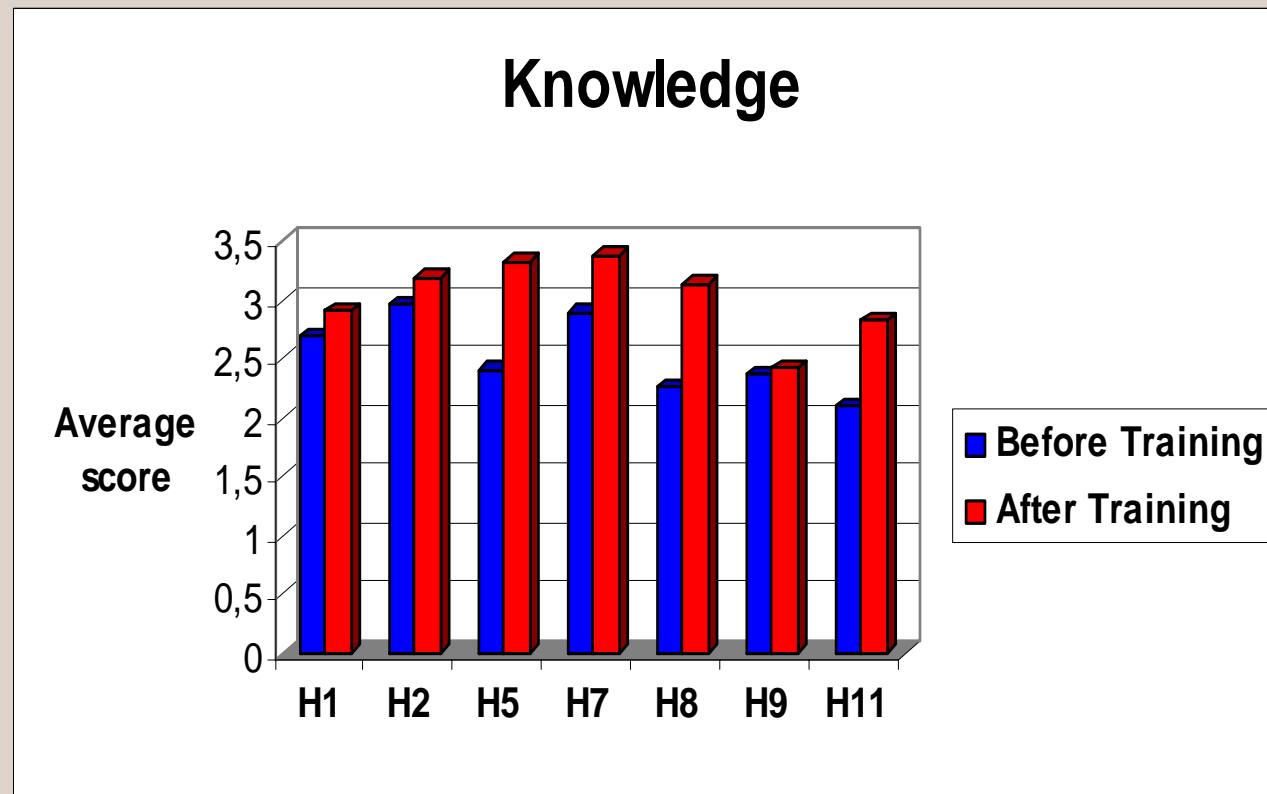
Scale range: 1 = not at all, 2 = a little, 3 = somewhat, 4 = quite a bit, 5 = very

## Effectiveness 1: Developing individuals Skills – Selected Results



Scale range: 1 = not at all, 2 = a little, 3 = somewhat, 4 = quite a bit, 5 = very

## Effectiveness 1: Improving individuals knowledge – Selected Results



Scale range: 1 = not at all, 2 = a little, 3 = somewhat, 4 = quite a bit, 5 = very

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## Conclusions

- Training will make a positive difference on staffs awareness, knowledge, skills and comfort level – it makes sense to invest
  - Difficulties the participating hospitals faced and their decisions concerning future training intervention advocate a reshaping of the integrated training approach into a two level approach
1. Generic basic training: introduction into the subject of cultural competence, increasing staffs (self-) awareness and receptivity to diverse patient populations as well as their knowledge and basic skills concerning matters of diversity
  2. Practical cultural competence development as part of the quality management routines on department level: Finding practical solutions for known or newly arising problems, developing/ improving cultural competency routines for service provision