



Wardliparingga Aboriginal Health Equity

South Australian Health and Medical Research Institute (SAHMRI)
Adelaide, South Australia

© South Australian Health and Medical Research Institute Limited 2019. All rights reserved.

Cultural Safety in Aged Care Funded by the Australian Government through the Dementia and Aged Care Services Fund

Cultural protocols– Acknowledgement of Country

It is important that appropriate protocols are adhered to. Therefore, recognising local Aboriginal and Torres Strait Islander people and their connection to Country is extremely important. When meetings or important events are held, acknowledgement of the traditional custodians of the place is a very significant and important part of formal recognition of Aboriginal people. An Acknowledgement of Country is an opportunity for staff to show respect for the traditional custodians and continuing connection of Aboriginal and Torres Strait Islander people to Country (Aboriginal and Torres Strait Islander Protocols Document SAHMRI, 2017).

Appropriate and respectful acknowledgment of Country, Elders past, present and future as well as Aboriginal and Torres Strait Islander people presenting and attending the presentation(s) must be undertaken prior to starting.

Note: When presenting this content, we encourage the presenter to acknowledge the local Aboriginal and/or Torres Strait Islander people of the geographical area. The following example can be used and/or adapted to suit the local area and acknowledgement of relevant traditional custodians.

“We acknowledge and respect the traditional custodians whose ancestral lands we are meeting upon here today, the _____ people. We acknowledge the deep feelings of attachment and relationship of the _____ to their Country. We also pay respects to the cultural authority of Aboriginal and Torres Strait Islander people visiting/attending from other areas of _____ present here”

The Australian Institute of Aboriginal and Torres Strait Islander Studies have developed an online interactive tool which can assist with the identification of different language groups across Australia. It is available at:

<https://aiatsis.gov.au/explore/articles/aiatsis-map-indigenous-australia>

1. Making use of the Presenter Guide

The presenter guide is intended to assist you with presenting the information provided in the accompanying powerpoint slides. You can use the notes included in this guide to:

1. Outline the main information provided in the accompanying powerpoint slides.
2. Provide examples of suggested strategies described in the slides.
3. Assist with generating discussion with participants – see included questions throughout the guide.

Note: Please remind participants to use the accompanying workbook to note any thoughts and questions relating to content. The questions in the presentation slides are included in the workbook to record participants’ notes and responses.

2. Presenter Introduction

1. Presenter introduce yourself
2. Invitation to participants to introduce
 - themselves, their work roles etc
 - their organisation affiliations (where appropriate)
 - their reason for attending the Cultural Safety in Aged Care Training and
 - what they want to get out of the course, i.e. what would they like to learn about cultural safety in aged care?

Cultural Safety in Aged Care

WARDLPIRINGGA
Aboriginal Research

THE UNIVERSITY
of ADELAIDE

SAHMRI
South Australian Health &
Medical Research Institute

Principle 5. All aged care staff work towards cultural competence

Presenter Notes **Title Slide**

Presenter points to follow:

In this presentation, we will describe key concepts relating to Principle 5. “All Aged care staff work towards cultural competence” and consider:

1. What did we learn from Aboriginal Elders about their cultural safety needs in aged care?
2. What are the benefits to aged care organisations?
3. What are the opportunities for aged care organisations?
4. What can an aged care organisation do?

Note: Remind participants that they can use the accompanying workbook to note any thoughts or questions relating to this principle. The questions in the presentation slides are also included in the workbook to record participants’ response.



Acknowledgement of Country

We would like to acknowledge the traditional owners of the land on which we meet and pay our particular respects to the Elders past and present, as well as acknowledging the Aboriginal and Torres Strait Islander people in the room.

Presenter Notes Acknowledgement of Country

Appropriate and respectful acknowledgment of Country, Elders past, present and future as well as Aboriginal and Torres Strait people presenting and attending the presentation(s) must be undertaken prior to starting.

Note: We encourage the presenter to acknowledge the local Aboriginal and/or Torres Strait Islander people of the geographical area. The example in this slide can be used or adapted to suit the local area and acknowledgement of relevant traditional custodians.

Principle 5. Cultural Competence



Principle 5

All aged care staff work towards cultural competence

Presenter Notes Title

Presenter points to follow:

1. Supporting staff, both Indigenous and non-Indigenous to increase cultural competence is one strategy of many in developing culturally competent organisations.
2. This presentation includes information and suggestions for developing and maintaining cultural competence within aged care organisations.

Principle 5. Cultural Competence

The diagram, titled "Cultural Competence", shows four interconnected components in a clockwise cycle: Policies (blue box), Structures (green box), Practices (purple box), and Attitudes (orange box). Arrows connect each component to the next in the cycle.

"A set of congruent behaviours, attitudes and policies that come together in a system, agency or among professionals that enable them to work effectively in cross-cultural situations"

Source: Cross et al (1989)

SAHMRI South Australian Health & Medical Research Institute
UNIVERSITY OF ADELAIDE

Presenter Notes What is cultural competence?

Presenter points to follow:

1. This definition (Cross et al 1989) is drawn from the health and education literature.

It places organisational cultural competence within a systems framework that emphasises the inter-relationships between individuals' behaviours and attitudes (worker competencies) and organisational structures. The definition implies that organisations must demonstrate values and principles and implement policies and structures that enables effective cross-cultural competency.

This framework enables organisations to assess and make improvements in every aspect, for example, from management and governance structures to service delivery and in increasing individual staff capacity.

References

Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). Towards a Culturally Competent System of Care, Volume 1. Washington, DC: CASSP Technical Assistance Center, Center for Child Health and Mental Health Policy, Georgetown University Child Development Center

Dudgeon, P. Wright, M., & Coffin, J. (2010). Talking it and walking it: Cultural Competence. Journal of Australian Indigenous issues, vol. 13, no. 3, pp 29-44

Principle 5. Cultural Competence

What is cultural competence?

- Cultural competency is a key strategy for reducing inequalities in access to care and improving the quality and effectiveness of care for Aboriginal and Torres Strait Islander peoples
- It is *more* than cultural awareness
- Integration of individual competencies *and* organisations' practice, policies and culture

Presenter Notes People in Australia's aged care workforce

Presenter points to follow:

1. Cultural competency is most commonly described as a key strategy for reducing inequalities in access to care and in the quality and effectiveness of care received. It works to enhance the capacity and ability of service systems, organisations and practitioners to provide more responsive care to diverse cultural groups, as discussed in the National Aboriginal and Torres Strait Islander Health Plan 2013–2023 (Commonwealth of Australia 2013).
2. A culturally competent organisation ensures that the cultural diversity, rights, views, values and expectations of Aboriginal and Torres Strait Islander peoples are respected in the delivery of services.
3. Cultural competence is much more than awareness of cultural differences, as it focuses on the capacity of systems or programs and services to improve quality of care by integrating culture into service delivery. (NHMRC 2005)
4. Culture is always changing and therefore, achieving cultural competency should not be perceived as being a process that ends.

Reference

Australian Government Department of Health. 2015. Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023. [http://www.health.gov.au/internet/main/publishing.nsf/Content/AC51639D3C8CD4ECCA257E8B00007AC5/\\$File/DOH_ImplementationPlan_v3.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/AC51639D3C8CD4ECCA257E8B00007AC5/$File/DOH_ImplementationPlan_v3.pdf)

National Health and Medical Research Council. 2005. Cultural Competency in Health: A guide for policy, partnership and participation Australian Government. <https://www.mhahs.org.au/images/cald/CulturalCompetencyInHealth.pdf>

Principle 5. Cultural Competence






Cultural Awareness	Cultural Sensitivity	Cultural Competence	Cultural Safety
<ul style="list-style-type: none"> • Being able and willing to recognize cultural differences • Being aware of one's own culture • Accept cultural differences within a population 	<ul style="list-style-type: none"> • Taking in consideration the cultural background and experiences of Indigenous Peoples • Go beyond acknowledging cultural difference to respecting Indigenous knowledges • Culture means being sensitive to the fact that customs can also be uniquely individual 	<ul style="list-style-type: none"> • Refers to the knowledge, skills, and attitudes of practitioners which revolve around empowering clients • Adapting the delivery of health care services to meet the social, cultural, and sometimes even the linguistic needs of the Indigenous population 	<ul style="list-style-type: none"> • Requires a systemic approach that encompasses an understanding of the power differentials that are inherent in health service delivery • Remove barriers to service delivery including policy, procedures and practices • Client-centered service delivery where the evaluation resides with the patient and practitioners undergo behavioral changes to assure client engagement

Source: National Collaborating Centre for Indigenous Health
<https://www.nccih.ca/en/>

Presenter Notes Cultural Competence Continuum-Presenter Notes

Presenter points to follow:

There are many examples of frameworks for cultural competency, this is an example adapted from National Collaborating Centre for Aboriginal Health, Canada.

1. The definition of cultural competency has evolved from one-off competency-based measures, for example training in cultural awareness to understanding its ongoing development within a continuum of learning and practice. Hence, it should be viewed as an ongoing process that requires continual development, monitoring, review and implementation into practice.
2. Cultural safety is a point on this continuum that progresses from—cultural awareness, cultural sensitivity, and cultural competency. (Brascoupe et al 2009) It involves incremental stages of learning, practice and reflection throughout an organisation.

References

Brascoupe, S. and Waters, C. 2009 Cultural safety: Exploring the applicability of the concept of cultural safety to Aboriginal health and community wellness. *International Journal of Indigenous Health*, 2009. 5(2): p. 6.
<https://jps.library.utoronto.ca/index.php/ijih/article/view/28981/23928>

Principle 5. Cultural Competence

What did we learn from Aboriginal Elders about their cultural safety needs in aged care?

“Don’t come with an attitude problem. Just don’t knock on my door with an attitude problem of any sort, particularly discrimination against black fellows”

“Don’t make judgements on my home, and how I live”.

Presenter Notes What did we learn from Aboriginal Elders about their cultural safety needs in aged care?

Presenter points to follow:

1. Here we can understand the need for developing workforce cultural competencies. These quotes highlight the continued racism Aboriginal and Torres Strait Islander people face. Unfortunately, dealing with misconceptions and negative stereotypical attitudes are challenges constantly facing Aboriginal and Torres Strait Islander people daily. This can result in great distrust and fear for older Aboriginal and Torres Strait Islander people and their families in feeling safe to access services.
2. This is why it is important for services and workers to build trust and rapport with Aboriginal and Torres Strait Islander Elders, families and community. Trusting relationships underpin and are critical to culturally safe care.

Questions

- What types of behaviour do you believe results in clients feeling this way as indicated by these comments?
- What do you believe are the key attributes of a culturally competent aged care worker?



Principle 5. Cultural Competence

SAHMRI
South Australian Health & Medical Research Institute

UNIVERSITY OF ADELAIDE

What are the benefits for aged care organisations?

- Improved service delivery through increased understanding, communication and relationships between clients and care providers
- Increased access to services
- Improved health and wellbeing outcomes
- Skilled and confident staff
- Compliance with aged care standards

Presenter Notes **What are the benefits for aged care organisations?**

Presenter points to follow:

Research has demonstrated that improving the cultural competency of services can increase Aboriginal and Torres Strait Islander peoples' access to and effectiveness of care and improve health and wellbeing. (Bainbridge et al 2015).

A key strategy to improving cultural competence in aged care is to develop the capacity of the workforce to practice in a culturally competent manner. Benefits for aged care organisations include:

1. Improved service delivery through increased understanding of the diversity of communities, their needs and experiences
2. Services are more likely to be accessed if they are perceived as culturally safe
3. Clients will experience Improved satisfaction with care received
4. Increased confidence and satisfaction of employees
5. Compliance with Single Quality Framework

Reference:

Bainbridge, R., McCalman, J., Clifford, A., & Tsey, K. 2015. Cultural competency in the delivery of health services for indigenous people (Issues paper no.13). Produced for Closing the Gap Clearinghouse Canberra & Melbourne: Australian Institute of Health and Welfare & Australian Institute of Family Studies. <https://www.aihw.gov.au/getmedia/4f8276f5-e467-442e-a9ef-80b8c010c690/ctgc-ip13.pdf>

Principle 5. Cultural Competence

What are the opportunities for aged care organisations?

- Integrate cultural competence into continuous quality improvement efforts
- Monitor and evaluate cultural competency strategies
- Provide ongoing cultural competency training to all staff
- Partner with Aboriginal and Torres Strait Islander communities

Presenter Notes What are the opportunities for aged care organisations?

Presenter points to follow:

1. Developing a culturally competent organisation requires a sustained focus and commitment at multiple levels. Continuous quality improvement efforts within organisations will increase capacity to provide a culturally responsive service that meet the needs of Aboriginal and Torres Strait Islander clients. This is an important component of adhering to the Single Quality Framework whereby organisations to demonstrate cultural safety.
2. Organisations need to monitor and evaluate the cultural competency of individuals within the organisation and the organisation as a whole.
3. Training is a key strategy for developing individual skills and knowledge. There are different approaches to cultural competence training and education. For useful information regarding good practice related to training see “Creating the NACCHO Cultural Safety Training Standards and Assessment Process A background paper”.
4. Organisations should develop collaborative partnerships with Aboriginal and Torres Strait Islander persons and communities.

Questions

- How does (or how could) your organisation’s management, operational framework and practices, (for example, policies, procedures, mission/vision statements, planning documents and services) reflect cultural competency?

References:

National Aboriginal Community Controlled Health Organisation. 2011. Creating the NACCHO Cultural Safety Training Standards and Assessment Process: A background paper. <http://www.csheita.org.au/wp-content/uploads/2015/11/CSTStandardsBackgroundPaper-NACCHO.pdf>

Principle 5. Cultural Competence



What can organisations do?

- Integrate and assess cultural competency strategies aimed at both individual (employee) and the organisation as a whole
- Provide cultural competence training for all staff that is developed in collaboration with local Aboriginal and Torres Strait Islander communities, including content relevant to those communities
- Develop strategies to partner with local communities to gain feedback on and improve cultural competency
- Incorporate culturally specific requirements into recruitment processes, including for Aboriginal and/or Torres Strait Islander people
- Include cultural competence as part of workforce performance review processes

Source: Australian Commission on Safety and Quality in Health Care. (2017)

Presenter Notes What can aged care organisations do?

Presenter points to follow:

1. Cultural competence training for staff, especially for non-Indigenous staff will increase the likelihood that their services are sensitive to the needs of Aboriginal and Torres Strait Islander people. It should enable individual workers to gain skills and knowledge, an understanding of their own culture and how this affects their practice, and an understanding of how to engage with people from Aboriginal and Torres Strait Islander backgrounds.
2. There are multiple strategies an organisation can implement to improve workforce and organisational cultural competency, the suggested strategies in this slide are examples included in the National Safety and Quality Health Service Standards, User Guide for Aboriginal and Torres Strait Islander Health.
3. It is not possible to “prescribe” frameworks and strategies. Ultimately, individual organisations will need to consider what is achievable, taking into consideration their own needs, capacity and resources.

Reference:

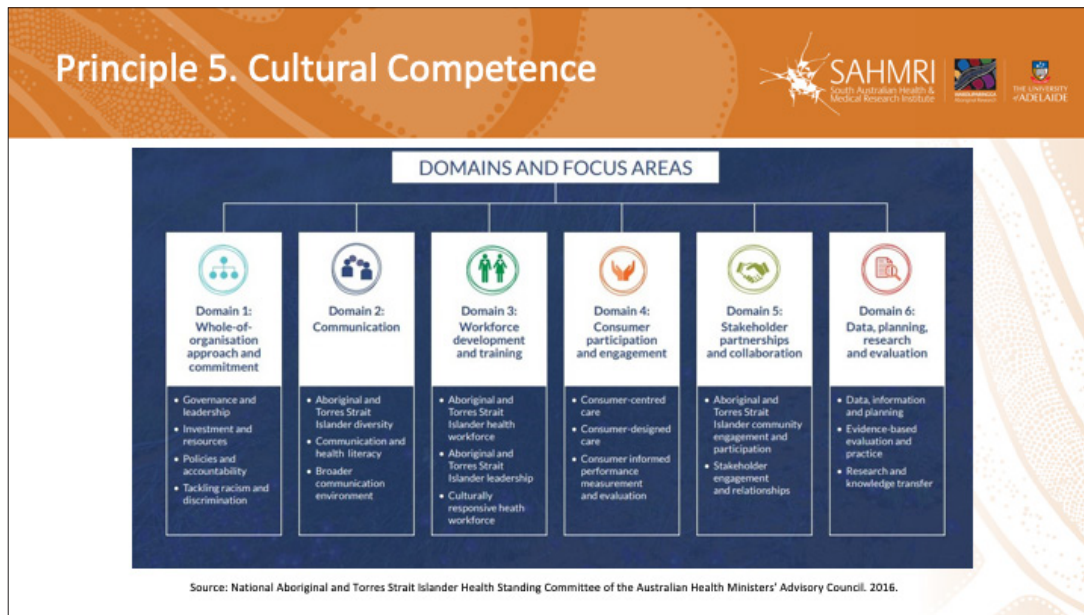
Australian Commission on Safety and Quality in Health Care. 2017. National Safety and Quality Health Service Standards. User guide for Aboriginal and Torres Strait Islander Health

Questions

- Consider your organisation and services from an Aboriginal and Torres Strait Islander perspective:
- How are Aboriginal and Torres Strait Islander people reflected in your organisation’s vision, mission statement or strategic plan?
- Are your policies appropriate to your clients’ needs and interest?
- Is there a policy on reconciliation or anti-racism that is visible?

References:

Australian Commission on Safety and Quality in Health Care. 2017. National Safety and Quality Health Service Standards - User guide for Aboriginal and Torres Strait Islander Health. <https://www.safetyandquality.gov.au/sites/default/files/migrated/National-Safety-and-Quality-Health-Service-Standards-User-Guide-for-Aboriginal-and-Torres-Strait-Islander-Health.pdf>



Presenter Notes Cultural Competence Framework

Presenter points to follow:

- There are numerous national cultural competency frameworks or guides that can direct organisations with developing cultural training programs and packages, this will assist services to become culturally responsive in the care they are providing to Aboriginal and Torres Strait Islander communities. In the health services field these include:
 - The National Health and Medical Research Council. 2005. Cultural Competency in Health Guide for Policy, Partnerships and Participation.
 - National Aboriginal and Torres Strait Islander Health Standing Committee of the Australian Health Ministers' Advisory Council. 2016. Cultural respect framework 2016–2026 for Aboriginal and Torres Strait Islander Health.
- Common to these frameworks are multi-level strategies that are implemented through the following domains:
 - organisational values
 - governance
 - communication
 - staff development and training
 - multi-sectoral partnerships
 - monitoring and evaluation

References

Cultural respect framework 2016–2026 for Aboriginal and Torres Strait Islander Health. 2016. National Aboriginal and Torres Strait Islander Health Standing Committee of the Australian Health Ministers' Advisory Council. <https://www.sahealth.sa.gov.au/wps/wcm/connect/06651271-647f-4ac5-a3a7-4ceaebb0f13a/National+Cultural+Respect+Framework+for+Aboriginal+and+Torres+Strait+Isl....pdf?MOD=AJPERES&CACHEID=ROOTWORKSPACE-06651271-647f-4ac5-a3a7-4ceaebb0f13a-mMA1Cp->

National Health and Medical Research Council. 2005. Cultural Competency in Health: A guide for policy, partnership and participation Australian Government. <https://www.mhahs.org.au/images/cald/CulturalCompetencyInHealth.pdf>

Discussion



- How would you describe the cultural competence of your organisation?
- What does your organisation do well?
- What are the challenges for improving cultural competency?
- What do you need to address these challenges?

Resources

National Aboriginal Community Controlled Health Organisation. 2011. Creating the NACCHO Cultural Safety Training Standards and Assessment Process: A background paper.

<http://www.cshehc.org.au/wp-content/uploads/2015/11/CSTStandardsBackgroundPaper-NACCHO.pdf>

National Health and Medical Research Council. 2005. Cultural Competency in Health: A guide for policy, partnership and participation Australian Government. <https://www.mhahs.org.au/images/cald/CulturalCompetencyInHealth.pdf>

Cultural respect framework 2016–2026 for Aboriginal and Torres Strait Islander Health. 2016. National Aboriginal and Torres Strait Islander Health Standing Committee of the Australian Health Ministers' Advisory Council.

<https://www.sahealth.sa.gov.au/wps/wcm/connect/06651271-647f-4ac5-a3a7-4ceaebb0f13a/National+Cultural+Respect+Framework+for+Aboriginal+and+Torres+Strait+Isl....pdf?MOD=AJPERES&CACHEID=ROOTWORKSPACE-06651271-647f-4ac5-a3a7-4ceaebb0f13a-mMA1Cp->

National Aboriginal and Torres Strait Islander Health Workers Association. 2013. Cultural Safety Framework.

https://www.natsihwa.org.au/sites/default/files/natsihwa-cultural_safety-framework_summary.pdf

Australian Institute of Health and Welfare. 2019. Cultural safety in health care: monitoring framework.

<https://www.aihw.gov.au/reports/indigenous-australians/cultural-safety-health-care-framework/contents/summary>

Australian Government Department of Health. 2015. Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023.

[http://www.health.gov.au/internet/main/publishing.nsf/Content/AC51639D3C8CD4ECCA257E8B0007AC5/\\$File/DOH_ImplementationPlan_v3.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/AC51639D3C8CD4ECCA257E8B0007AC5/$File/DOH_ImplementationPlan_v3.pdf)

Australian Commission on Safety and Quality in Health Care. 2017. National Safety and Quality Health Service Standards - User guide for Aboriginal and Torres Strait Islander Health.

<https://www.safetyandquality.gov.au/sites/default/files/migrated/National-Safety-and-Quality-Health-Service-Standards-User-Guide-for-Aboriginal-and-Torres-Strait-Islander-Health.pdf>

Readings

Brascoupé, S. and Waters, C. 2009 Cultural safety: Exploring the applicability of the concept of cultural safety to Aboriginal health and community wellness. *International Journal of Indigenous Health*, 2009. 5(2): p.6.

<https://jps.library.utoronto.ca/index.php/ijih/article/view/28981/23928>

Bainbridge, R., McCalman, J., Clifford, A., & Tsey, K. 2015. Cultural competency in the delivery of health services for indigenous people (Issues paper no.13). Produced for Closing the Gap Clearinghouse Canberra & Melbourne: Australian Institute of Health and Welfare & Australian Institute of Family Studies.

<https://www.aihw.gov.au/getmedia/4f8276f5-e467-442e-a9ef-80b8c010c690/ctgc-ip13.pdf.aspx?inline=true>

Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). *Towards a Culturally Competent System of Care*, Volume 1. Washington, DC: CASSP Technical Assistance Center, Center for Child Health and Mental Health Policy, Georgetown University Child Development Center

Dudgeon, P. Wright, M., & Coffin, J. (2010). Talking it and walking it: Cultural Competence. *Journal of Australian Indigenous issues*, vol. 13, no. 3, pp 29-44

Funded by the Australian Government through the Dementia in Aged Care Services Fund



www.sahmri.org

