

Impact of cultural diversity in inter professional practice and patient centred care

Volume 3 Issue 5 - 2015

Samantha Buckle

Southlake Regional Health Centre, Canada

Correspondence: Samantha Buckle (RRT), Southlake Regional Health Centre, Canada, Email sjbuckle21@hotmail.com**Received:** November 27, 2015 | **Published:** December 01, 2015

News

Cultural diversity is something that often is not at the forefront of one's mind when thinking about healthcare, but nonetheless it is a very important part of how one interacts with their patients and coworkers, and can have an effect on the quality of care we provide. It is of increasing importance in recent years due to a variety of factors, including changing demographics and quality improvement missions in health care institutions.¹ A study done in Pennsylvania over the past few years has provided a framework and guidelines for improving culturally competent care delivery and thereby improving the quality, safety, and equitability of this care. The goal is to meet all of the requirements of the patient: social, linguistic, and otherwise, and not just their medical needs, as well as to tailor the patients' care for their diverse values and beliefs.¹

A survey performed at the Lehigh Valley Health Network (LVHN) in Pennsylvania prior to their cultural awareness transformation initiatives showed that some patients from different backgrounds, education levels, and socioeconomic classes felt that their culture, religion, and medical care preferences were ignored during their stay at the hospital. These results jump-started a campaign to become more culturally competent through various projects. Because of the high Latino population in the area, the task force elected to offer Latino meals in hospital cafeterias, have signs in Spanish, and have a special kind of practice consisting of Spanish-speaking health professionals and support staff. The network also supplied health-related courses in the Spanish language and offered a program for medical staff in Puerto Rico.¹

Another thing that is essential in serving patients whose primary language is one other than English is to increase the number of interpreters on staff and to provide interpreter training programs for bilingual staff members. Support services should also be provided for those who are hearing impaired with tele-interpretation technology. Clinicians should attend education programs regarding different cultural groups and their religious beliefs and practices, death and dying rituals, and opinions regarding healthcare institutions.¹

Gertner et al.¹ offers suggestions on implementing a more culturally competent healthcare system, and they are as follows: data collection and analysis to determine areas for improvement, addressing the unique needs of the population by developing customized services for that area, and developing relationships with members of the community. Finally, cultural awareness, diversity, and competency initiatives must not occur only in sections of a network. Rather, it must span all of the hospitals, clinics, and home care companies within a region that make up that network, and include all of the people that work for these institutions and the patients or clients they serve.¹

The best possible experience for a patient is one that fulfills their medical needs, but is also centred around their culture. This results in better outcomes for treatment and higher satisfaction rates for patients and their loved ones. To ensure the most effective results in cultural competency initiatives, for patients and staff, health networks must institute education programs, train staff to be interpreters, and hire bilingual and culturally diverse employees. This will benefit employees in that they will be able to provide better, more effective care and they will constantly be learning new things from the people they work with, and in turn these things will benefit the patients, which should be the number one priority in any healthcare institution.

Conflicts of Interest

The authors do not have any Conflict of interests.

Acknowledgments

None.

Funding

None.

References

1. Gertner E, Sabino J, Mahady E, et al. Developing a culturally competent health network: A planning framework and guide. *J Healthc Manag.* 2010;55(3):190–204.