

# Health-Care Emergency: It's Not What You Think

It is critical for hospitals and health-care providers to attain a high level of Cultural Competency proficiency if they are going to survive. A four-step training approach can be the prescription for success. **BY NEAL GOODMAN, PH.D.**



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**T**hose who lead our health-care institutions are being tasked with providing the necessary Cultural Competency (CC) training and development of all members of the hospital community in order to transform the organization to meet urgent challenges. It is critical for hospitals and health-care providers to attain a high level of CC proficiency if they are going to survive. The major factors that push the need for cultural competence include:

**1. The increasing diversity of the workforce** and the need to create an inclusive environment where all members of the organization feel welcome and respected and know their insights and contributions will be heard and considered.

**2. The growing diversity of the population of the U.S.** and the corresponding need to provide culturally competent and appropriate health care to patients from diverse backgrounds based on ethnicity, nationality, religion, linguistic group, racial groupings, gender, sexual preference, socio-economic status, and many more factors.

**3. The globalization of health care.** Each year, the number of patients who travel overseas to receive health care is increasing, and those who care for them must have the appropriate cultural competence. Furthermore, more hospitals are forming relationships across borders, and these newly formed relationships can only succeed with cultural intelligence.

**4. Requirements of the Affordable Healthcare Act** and mandates by regulatory and accrediting agencies. If the hospitals cannot demonstrate they can effectively serve multicultural and multilingual patients, they could lose funding and accreditation.

### CASE STUDY

In response to this need, a multi-pronged training approach was implemented at Florida's largest and highest-rated hospital with great success. The hospital utilized a four-step approach, which can be a model for any successful new training intervention.

- **Identify the need:** Meetings with the chief

diversity officer, the chief people officer, and the chief clinical officer resulted in several measurable goals for staff development, patient outcomes, and community outreach. The hospital began with the end in mind.

- **Create a training and sustainability plan:** Working together with an external consultant, the hospital designed a customized CC training program with a train-the-trainer component for the top 400 leaders of the organization who would cascade the learning across all elements of the hospital, including every member of the staff who has any contact with patients, all people managers, dietitians, clergy, and others. All sectors reviewed the program prior to delivery, and an electronic survey of all 400 leaders was conducted to further identify their needs.
- **Implement program delivery, a train-the-trainer approach, and an action plan:** An interactive, two-part, one-day program was delivered. It included pre- and post-testing of the participants' degree of Cultural Competence. Throughout the program, participants practiced how they would share what they learned using a "Leader as Teacher" approach. Equally important, several action-planning sessions were built into the program, allowing the leaders to design and share specific applications they were committing to implement for themselves, their teams, those they lead, and the broader organization.
- **Sustain the training:** A one-year sustainability plan was built into the program design. This included electronic and face-to-face support by the staff of the Office of Diversity and Inclusion; delivery of supplementary written and e-learning materials; sharing of best practices through newsletters, e-mails, and internal communications such as the hospital TV station; and a one-year reunion and celebration at which all 400 leaders met to share their achievements, struggles, and successes.

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## LESSONS LEARNED

As a result of the training, 98 percent of the participants demonstrated measurable improvement in their Cross-Cultural Competency and 100 percent thought such training should be shared with others they lead. Action plans that were tied to measurable results were most easily implemented. More than 240 distinct actions were identified for implementation.

A sample of some of the action plans that were implemented included:

- All prescriptions were translated into the six most common languages used by patients.
- Intake forms and evaluations were changed to include more demographic information, including questions related to culturally competent health-care delivery by the staff.
- Recognition was given to those who made the most effective use of interpreters.
- Teams participated in accent understanding

workshops.

- Blogs were created.
- Automated whiteboards focusing on cultural needs were implemented.
- Cultural Competency training was included in onboarding programs.

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- Underserved communities were identified and outreach programs were created to bring health-care clinics to these communities.

A key factor for the successful implementation proved to be that those functional groups that sent several leaders to the training were more effective at implementing team-focused action plans. 