

Indigenous Relationship and Cultural Awareness (IRCA) Courses: Interactivity Guide Answers

Module 3: The Need for Cultural Competence in Healthcare

Note that the answers provided below are not exhaustive and merely provide relevant information/points to consider for each question.

Chapter 1 - Defining the Cultural Continuum

1. Reflection: After learning about the cultural continuum, and the four levels of cultural competency, how might you take action or support cultural competence at each level?

Systemic	Answer: Self-reflection question. Points to consider:
	There is a need for the development of policies, procedures and mechanisms for monitoring, gaining and maintaining sufficient resources. It is important to remember that a culturally competent system may require a greater input of resources and care for some groups than others, to address the same health problem.
Organizational	Answer: Self-reflection question. Points to consider:
	The requirement for organizational cultural competency is effective management of programs and staff to create and maintain a culture where cultural competency is valued as integral to core business. You may want to consider your centre's programs and services, and whether they meet the needs of First Nations, Inuit and Métis patients.
Professional	Answer: Self-reflection question. Points to consider:
	Cultural competency can be addressed through guidelines and standards to guide an organization's operational outcomes. You may consider becoming an advocate within your organization.
Individual	Answer: Self-reflection question. Points to consider:
	A physician can develop cultural competency at the individual level by focusing on developing cultural safety skills, cross-cultural communication, patient-centred care, empowerment of the patient, flexibility within clinic processes and leadership through quality improvement.

Chapter 2 - Cultural Competence in Healthcare

1. Reflection: After watching the video featuring Tony Jocko, Former Federal Policy Analyst, Anishinabek Nation, how might you play an advocacy role to ensure First Nations, Inuit, Métis and urban Indigenous patients receive proper medical care?

Answer: Self-reflection question. Points to consider:

Consider the eight steps to Cultural Competence for Healthcare Professionals and the cultural competency checklist that can be found within this chapter, and how you might use them to inform yourself and your colleagues.

Government of Nova Scotia. Health Department. (2005). A cultural competence guide for primary health care professionals in Nova Scotia. Retrieved from

 $http://www.healthteamnovascotia.ca/cultural_competence/Cultural_Competence_guide_for_Primary_Health_Care_Professionals.pdf$

2. Reflection: Thinking about cultural competence in healthcare through communication, decision-making, understanding/misunderstanding, and beliefs, what are some specific action items that you can take with you?

Answer: Self-reflection question. Points to consider:

Using plain language, involving the patient in their healthcare decisions, provide written information, in clear language, and integrating a patient's beliefs into their care.

Chapter 3 - Putting Cultural Competence into Practice

1. Reflection: How does your organization or healthcare practice address cultural practices for First Nations, Inuit, Métis and urban Indigenous patients? Does your organization have a smudging or land recognition policy, and if so, what is the procedure?



Answer: Self-reflection question. Points to consider:

Many healthcare organizations are creating smudging policies for First Nations and Métis patients. For example, the UHN has created a new policy which outlines the procedure for accommodating smudging and spiritual observances indoors at UHN. This policy was been developed with the support of Fire and Life Safety, Occupational Health, Spiritual Care, Facilities, and the Indigenous Council at UHN.. More information about their policy can be found at the link below:

https://www.uhn.ca/corporate/News/Pages/UHN policy helps support Indigenous spirit ual practice of smudging.aspx

Chapter 4 - Cultural Competence from the Patient's Perspective

 Reflection: After reading through the cultural competency case study, how can you make sure that you are communicating effectively with First Nations, Inuit, Métis and urban Indigenous patients?

Answer: Self-reflection question. Points to consider:

Use appropriate translators, person-centred communication and shared decision making tools, and staff such as Indigenous Navigators (who work throughout Ontario and can assist in finding an appropriate translator).

