# CALD Training: Working with People from Culturally and Linguistically Diverse Backgrounds

**PIR Agency:** Neami National

**Date:**

Date range: 29 June 2015 – 30 April 2016

**Key issue(s)**

People from Culturally and Linguistically Diverse (CALD) backgrounds experience barriers accessing services that are culturally appropriate and there is need for staff at all levels of service delivery to be trained to increase awareness, knowledge and skills in cross cultural work and mental health.

**Main Objective(s)**

- To up skill service providers to work cross culturally by implementing policies and practices that are aligned with the framework for Mental Health in Multicultural Australia (MHiMA)-Towards Culturally Inclusive Service Delivery.
- To invite service providers/guest speakers with expertise working with CALD background people with mental health issues and mental illness to deliver presentations on different practice themes at one day seminar
- To deliver an in depth and interactive presentation of the framework for Mental Health in Multicultural Australia (MHiMA) – Towards Culturally Inclusive Service Delivery.
- To form a stakeholders working group for consultation and advice

**Summary of Impact or Result**

The following topics were presented in a one day seminar

- The Mental Health in Multicultural Australia Framework (MHiMA)
- Cultural Factors in Mental Health
- Cross Cultural Communication and Self Reflective Practice
- Understanding the Impact of Trauma and Identifying Symptoms of PTSD
- Pre and Post Migration Experience
- Translating and Interpreting services

It was assumed that people attending the seminar will be confident going back to their organisations and instigate the implementation of culturally appropriate and inclusive practices and the development of organisation policies to work with people from CALD backgrounds.

To achieve the above, seminar attendees were guided step by step on how to go about undertaking an organisational assessment on cultural competency by using a tool to be downloaded from the Mental Health in Multicultural Australia website: [http://www.mhima.org.au](http://www.mhima.org.au)

A pre survey was emailed to people that RSVP for the seminar to explore their knowledge and confidence about the seminar topics. A post seminar survey was sent to people that attended the seminar and that have completed the pre survey. The figures below summarize the pre and post seminar evaluation process.

- 48 people RSVP for the seminar
- 48 Pre Seminar surveys were emailed
- 36 people completed it
- 45 people attended
- 36 Post seminar surveys were emailed to the same participants that completed the
pre survey. From those 36, only 25 people completed it.

Comparison of pre and post seminar surveys showed that there was very little knowledge and confidence about all seminar topics, except for Understanding the impact of trauma and identifying symptoms of Post-Traumatic Stress Disorder that was rated just above the rest.

25 people stated having very little knowledge about the framework for Mental Health in Multicultural Australia (MHiMA) which was the basis for seminar attendees to instigate organisational assessment on cultural competency.

The post survey results showed remarkable improvement in knowledge and confidence in all topics. From the 25 people with very little knowledge and confidence about the MHiMA cultural competency framework, only 5 remained the same.

Overall, there was increase on awareness, knowledge and skills in cross cultural work and mental health. Being this, one of the expected benefits.

In order to evaluate the project sustainability a 6 months post seminar survey will be emailed to the 25 people that completed the pre and post seminar surveys.

**Context**

This project was planned as a response of identified needs in 2 recent project reports funded by North Brisbane and greater Metro South Partners in Recovery: The Diverse connections from the Collaborative Action and Response for a Multicultural Moreton bay and Building a Case Reform - The Experience of People from Refugee and CALD backgrounds negotiating the Mental Health System who are at risk of developing or have a severe and persistent mental health condition, respectively.

These reports identified that barriers to service delivery are experienced by service providers and by CALD background people.

In summary, service providers identified the need for more training and CALD background people the need for services to be more culturally appropriate.

**Stakeholders/Partnerships**

Key people from The Trans cultural Mental Health Centre, Communify and CAMS from Caboolture Neighbourhood Centre were invited to form part of the Project working group for consultation and advice.

The project timeline contemplated to have face to face meeting with the project working group. However due to time constraints communication and consultation with the group was via email and phone. They were informed about the seminar milestones and provided timely feedback on the content of the seminar and seminar surveys.

The Trans cultural Mental Health centre as the Qld Health organisation and pioneers of the MHiMA framework, played a more active role by leading the framework presentation.

**Project Management**

**A timeline**

- **A timeline for the life of the project was developed:**
  - 07-15 to 30-07-15
    - Venue booking confirmation, forming working group, event planning, making publicity and identifying potential seminar attendees.
  - 06-08-15
    - Assessing organisations/community knowledge with a pre questionnaire and tasking as follows: Making publicity, developing and sending invitations and pre event questionnaire, organising catering conforming presenters, gathering pre questionnaire responses, taking RSVPs, liaison with presenters and working/advisory group
  - 15-09-15 to 30 -10-15
    - Main event – One day seminar, sending post questionnaire, ongoing liaison through email and phone calls and report writing and launching
  - 15-04-2016
Six months post questionnaire to identify best practice that is aligned with MHIMA framework, mainly if an organisational Cultural competency has been done and if any leanings or changes have been instigated in the organisation as a result of the assessment or the seminar. For example, people from CALD backgrounds increased access to service delivery, increased use of professional Interpreters, etc.

30-04-15
Practice sustainability: Collecting answers from six months post seminar survey, writing final report and electronic dissemination.

Description of Activities

Project activities up to date as described above occurred as planned and additional monthly emails were planned to be sent to seminar attendees as a reminder to keep working on instigating changes in their own organisations.

On the 21st October an email was sent to seminar attendees to explore any progress in instigating organisational change and a sample of the Organisational cultural competency assessment tool was attached to prompt people to access it in the MHIMA website to undertake an organisation cultural competency.

Form 25 emails sent, only 2 responded: one stated that he does not have the time and power to instigate change because of working with a big organisation and the other stated to have gained more awareness.

Judging from the responses or lack of responses to post seminar monthly emails, it can be concluded that the plan to explore organisational changes and sustainability of the project after 6 months of the seminar may not produce the expected outcome of reporting organisational changes in cultural competency or even the undertaking of an organisation cultural competency assessment using the MHIMA tool.

Project Impact

The project has shown to have an impact in up skilling service providers. This has been shown by collating an analysing pre and post seminar surveys. However, this does not necessarily imply that the project has resulted in permanent change to systems.

In addition to increased awareness, it can be stated that some innovative ideas for potential additional system reform projects have been generated.

- A project proposal to deliver the same training delivered at the seminar targeting only mental health service providers is envisaged.
- The translation in different languages of the North Brisbane PIR brochure has been considered
- Neami Strathpine has liaised through email with Neami National in Melbourne (head office), Manager Projects Innovation and Research to explore the integration of the MHIMA framework and the reply has been positive.
- Additional interest in the project has been shown by Brisbane North PHN and an email from Quality Practice Lead PIR has been received to expect future contact.

Lessons Learned

The project has proven to have achieved the intended outcome of increasing awareness, knowledge and skills amongst seminar participants, to a certain extent, but not to the depth that it was expected. Pre and post evaluation surveys reported increased awareness, knowledge and skills in all topics presented, being the MHIMA framework, one item that was reduced from 25 participants knowing very little before the seminar, to 5 after the seminar.

It appears that seminar participants gained awareness, knowledge and skills at individual level but would/could not instigate and transfer those at the organisational level by proposing/negotiating an organisational assessment on cultural competency, using the assessment tool and accessing the MHIMA framework website.

Considering the above, the project may have been very ambitious for the audience, which appeared not to be in a position to influence or in a decision making role to make the organisational cultural competency assessment a reality. Therefore, future projects with the same aim need to target organisational decision makers/managers in mental health services as the framework is intended for mental health services to adopt it as best practice in cultural
An additional learning has to do with the planning of the seminar. The project's main activity, a one day seminar proved to fell short of time. The Neami Consumer Participation Framework as a sample of best practice, needed to be cancelled as the time was not enough. If the activity is to be repeated, individual presentations' time slots need to be negotiated in order to fit all topics.

As a seminar, the activity was a success, with good attendance and quality of presenters working with people from CALD backgrounds with mental health issues and mental illness.

The success of the activity could not have been possible without adequate financial resources, the team approach at the organisational level and the project lead independence in decision making once the project proposal was approved. Additionally, the partnerships formed with seminar's presenters, the project's stakeholders working/consultation group and the support provided by PIR Consortium Lead PHN and Marketing PHN with the design of the seminar invitation flyer.

Appendices

1. Pre seminar survey
2. Post seminar survey
3. Pre, post seminar graphs
4. Comparison of pre and post surveys graph
5. Assessment Score Report Card MHIMA (Specimen showing the 8 cultural competency standards)
WORKING WITH CULTURALLY AND LINGUISTICLY DIVERSE (CALD) BACKGROUND PEOPLE IN THE NORTH SIDE OF BRISBANE SEMINAR: 15th September 2015

PRE SEMINAR SURVEY

This survey has been created to help us to measure seminar’s attendees’ level of confidence and knowledge on the topics to be presented at the seminar. Two post seminar surveys will follow to capture changes. The first one will be sent soon after the event and a final one six months after.

As a Local project reform, it has been planned in a way that actual reforms take place at the organisational level. The seminar will equip participants to do so. Improvements in confidence and knowledge at the three stages, whether big or small will be documented in a final report. At the completion of the project and for reference, an electronic copy of the report will be provided to all participants.

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<tr>
<th>Please rate your current level of confidence and knowledge about the following topics:</th>
<th>Excellent</th>
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<th>Very little</th>
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<td>7 Framework for Consumer participation</td>
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Thank you for completing this survey. North Brisbane PIR and Neami National look forward to having you at the seminar.

Please send the completed survey to ofelia.rivera@neaminational.org.au by Friday 11th September 2015.
POST SEMINAR SURVEY

WORKING WITH CULTURALLY AND LINGUISTICALLY DIVERSE (CALD) BACKGROUND PEOPLE IN THE NORTH SIDE OF BRISBANE SEMINAR HELD ON 15TH SEPTEMBER 2015

This survey has been created to help us measure seminar’s attendees’ level of confidence and knowledge on the topics presented at the seminar.

As it was explained during the seminar, it is envisaged that attendees use their enhanced knowledge and confidence to apply new learnings to increase cultural competency at the organisational level. In six months’ time a new survey will be sent to capture organisational changes.

In the meantime, a courtesy monthly email will be sent to keep in touch to explore and document any progress. At the completion of the project, an electronic copy of the report will be provided to all participants.

Please rate your current level of confidence and knowledge about the following topics:

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Any further comments about the seminar: ___________________________________________________________
_____________________________________________________________________________________

North Brisbane PIR and Neami National thank you for your participation and completing this survey.

Please send the completed survey to ofelia.rivera@neaminational.org.au by Friday 25th September 2015.
MHIMA
Assessment Score Report Card
Summary View

Overall score:

CULTURAL COMPETENCY STANDARD 1
The service’s Strategic Business Plan, or equivalent, recognises the relevance of transcultural mental health issues in service planning, implementation and evaluation.

Principle
Cultural and linguistic diversity must be acknowledged and reflected in all stages of service planning, implementation and evaluation.

Performance Measure 1.1
The service has a Strategic Business Plan, or equivalent, clearly stating its commitment to meeting the mental health needs of people from CALD backgrounds.

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<th>Yes</th>
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Evidence (up to 500 characters):

Supporting Documents:
### Performance Measure 1.2
The service has a policy for ensuring delivery of culturally appropriate services to all cultural groups in the service region.

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<th>Yes</th>
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Evidence (up to 500 characters):

Supporting Documents:

### Performance Measure 1.3
The service has incorporated a statement about cultural diversity considerations in its recruitment documentation/processes for all positions at the service.

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Evidence (up to 500 characters):

Supporting Documents:

Cultural Competency 1 Percentage Score:
CULTURAL COMPETENCY STANDARD 2
The service collaborates with key mental health government and broader community stakeholders working with people from CALD backgrounds.

Principle
To promote a coordinated approach to providing services, intersectoral links must be established with ethnic community organisations, non-government sectors and government agencies relevant to the specified communities.

Performance Measure 2.1
The service has ensured there is a position, or positions, allocated the responsibility for implementing the Framework across the service. Such a position's could be existing Full Time Equivalents (FTEs).

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Evidence (up to 500 characters):

Supporting Documents:

Performance Measure 2.2
The service has liaised, consulted and fostered links with relevant multicultural or ethno-specific agencies, organisations or community-relevant resources in the course of client or case management. Linkages and consultations may be with, but are not limited to:
- Mental illness prevention
- Taxicultural mental health centres/services and/or relevant networks in respective state or territory
- Migrant resource centres
- Places of worship
- Ethnic community organisations
- CALD consumer and carer advisory group

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Evidence (up to 500 characters):

Supporting Documents:
Performance Measure 2.3

The service has representation of CALD communities on its internal committees across all levels of service development and delivery.

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Evidence (up to 500 characters):

Supporting Documents:

Performance Measure 2.4

The service has representation, where possible, on various CALD community associations in its service region.

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Evidence (up to 500 characters):

Supporting Documents:
Performance Measure 2.5

The service has disseminated information in English and in key CALD languages, via one or more modalities, including print, audio-visual or community information sessions and forums on:

- Mental illness prevention
- Suicide prevention
- Recovery
- Mental health promotion
- Mental health information
- Stigma reduction
- Benefits and rights of mental health consumers and their carers

To different cultural groups at community venues, including but not limited to:

- Community centres
- Places of worship
- Schools
- Ethnic community organisations
- Refugee services and services for survivors of torture and trauma
- CALD Consumer Advisory Groups (CAGs)
- Children’s, youth and women’s centres
- Other meeting places deemed important for the specified communities.

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Evidence (up to 500 characters):

| Supporting Documents: | |
|-----------------------| |
Performance Measure 2.6

The service has ensured that its staff and/or clinicians delivering a mental health program are aware and respectful of:
- existing alternative or complementary health and/or mental health service providers (e.g. traditional healers)
- key individuals in the specified community who may be consulted on religious and spiritual beliefs influencing assessment, treatment and management.

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Evidence (up to 500 characters):

Supporting Documents:

Cultural Competency 2 Percentage Score:
**CULTURAL COMPETENCY STANDARD 3**

The service engages in evaluation, research and development of culturally appropriate service delivery relevant to transcultural mental health.

**Principle**
Strategies to enhance service delivery for people from culturally and linguistically diverse backgrounds must be evidence based.

**Performance Measure 3.1**
The service has an organisational culture which promotes research and development relevant to transcultural mental health in consultation with relevant stakeholders, including CALD carers, consumers and their families.

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Evidence (up to 500 characters):

Supporting Documents:

**Performance Measure 3.2**
The service has linked with external agencies that have had research experience with CALD communities.

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Evidence (up to 500 characters):

Supporting Documents:
**Performance Measure 3.3**

The service has protocols for collecting patient or client demographic data that are useful and relevant to the demographic profile of CALD communities in the given catchment or service area.

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Evidence (up to 500 characters):

Supporting Documents:

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**Performance Measure 3.4**

The service has generated, through a mapping and needs exercise, or other appropriate information gathering or research, a profile of the CALD communities within its service region, which includes information, such as:

- population size of each community
- demographic and religious characteristics
- socio-economic status
- language requirements
- relevant community organisations
- how best to access the specified communities
- cultural sensitivities
- and that this profile is reviewed annually.

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Evidence (up to 500 characters):

Supporting Documents:
Performance Measure 3.5

The service has conducted research or projects in collaboration, or independently, to measure the needs of the CALD population in its region. Examples of projects could be:
- looking at the referral patterns or pathways typically taken by CALD consumers who access mental health services in the service catchment area
- determining what kind of programs the CALD communities would like to attend that may be congruent with their explanatory model of psycho-social remediation
- looking at the proportion of people from CALD backgrounds accessing service.

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Evidence (up to 500 characters):

Supporting Documents:

Cultural Competency 3 Percentage Score:
CULTURAL COMPETENCY STANDARD 4
The service ensures equitable access for people from culturally and linguistically diverse backgrounds, and their carers and families.

Principle

The rights of people from CALD backgrounds, and their carers and families, as set out in the Mental Health statement of rights and responsibilities (2012) and other legislated rights, must be ensured when delivering mental health services.

Performance Measure 4.1

The service has informed people from CALD backgrounds and their carers of their rights and responsibilities, using the client’s preferred language and modality, where necessary, when accessing and using the service.

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Evidence (up to 500 characters):

Supporting Documents:
Performance Measure 4.2

The service has promoted awareness of its programs by disseminating information in English and in appropriate languages, via one or more modalities including print, audio-visual, or community information sessions and forums, to different cultural groups in places including, but not limited to:

- local doctors' surgeries
- hospitals
- community centres
- places of worship
- schools
- libraries
- other meeting places deemed important for the specified communities (e.g. sporting and cultural clubs, etc)
- chemists
- family courts
- ethnic radio and TV
- the service website, if available.

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Evidence (up to 500 characters):

Supporting Documents:

Performance Measure 4.3

The service has developed policies and procedures to facilitate the accommodation of specific culture-based needs of its CALD consumers, their carers and families, such as:

- childcare needs
- family roles and obligations
- dietary needs
- religious needs.

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Evidence (up to 500 characters):

Supporting Documents:
Performance Measure 4.4

The service has processes in place to access, where available, accredited or suitably competent interpreters who have been trained in mental health interpreting.

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Evidence (up to 500 characters):

Supporting Documents:

Performance Measure 4.5

The service has conducted assessment, diagnoses and treatment by formally qualified and culturally competent mental health clinicians, and/or provided services by appropriately qualified and culturally competent staff.

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Evidence (up to 500 characters):

Supporting Documents:

Cultural Competency 4 Percentage Score:
CULTURAL COMPETENCY STANDARD 5

The service adheres to a Language Services Policy.

**Principle**
People from CALD backgrounds have a right to receive the same best practice standard of mental health service as other Australians.

**Performance Measure 5.1**
The service has a Language Services Policy which provides guidelines for booking and effective use of interpreters in accordance with the Language Services Policy for their State or Territory. Where no such policy exists, a service needs to adhere to its own existing best practice guidelines in relation to language services.

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**Evidence (up to 500 characters):**

**Supporting Documents:**

**Performance Measure 5.2**
The service has negotiated with interpreter service agencies to ensure that, where available, accredited or suitably competent interpreters trained in mental health interpreting are booked to the service.

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**Evidence (up to 500 characters):**

**Supporting Documents:**
Performance Measure 5.3

The service has where available, used accredited or suitably competent interpreters, trained in mental health interpreting.

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Evidence (up to 500 characters):

Supporting Documents:

Performance Measure 5.4

The service has provided staff training on the:
- effective use of interpreters
- principles outlined within the Language Services Policy of the state/territory, or, where no policy is available, on the best practice language services guidelines upheld by the service.

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Evidence (up to 500 characters):

Supporting Documents:
**Performance Measure 5.5**

The service has sought to develop a staff profile which reflects the cultural diversity of the wider community; this could include services working together with bilingual workers sourced through relevant networks.

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CULTURAL COMPETENCY STANDARD 6

The service makes available and encourages:
• mental health cultural competency training for its staff, with independently and externally evaluated state-endorsed cultural competency training to be used where available, and
• the use of culturally appropriate assessment and planning tools.

Principle

Understanding of cultural differences must be incorporated in the development of all mental health programs and services.

Performance Measure 6.1

The service has ensured that all staff undergo a mental health cultural competency training program within the first 12 months of employment at the mental health service and ongoing annual professional development thereafter. State-endorsed training, that has been independently and externally evaluated, is to be delivered where available.

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Evidence (up to 500 characters):

Supporting Documents:
Performance Measure 6.2

The service has ensured that policy documents specify that assessment instruments or inventories administered on CALD clients are culturally appropriate, and where feasible, are culturally validated.

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Evidence (up to 500 characters):

Supporting Documents:

Performance Measure 6.3

The service has conducted development and implementation of more culturally appropriate assessment, review and treatment and or rehabilitation/recovery plans:

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Evidence (up to 500 characters):

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Performance Measure 6.4

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Evidence (up to 500 characters):

Supporting Documents:

Cultural Competency 6 Percentage Score:
CULTURAL COMPETENCY STANDARD 7
The service ensures CALD consumer and carer participation in service planning, implementation and evaluation.

*Principle*

CALD consumers and carers are involved in the planning, implementation and evaluation of the mental health service.

*Performance Measure 7.1*

The service has consulted with CALD consumers and carers in the planning, implementation and evaluation of policies and programs for the service, so that issues of cultural diversity are incorporated.

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<th>Yes</th>
<th>No</th>
<th>Developing</th>
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Evidence (up to 500 characters):

Supporting Documents:

*Performance Measure 7.2*

The service has engaged suitably trained CALD consumers and carers to deliver services where appropriate (e.g. peer support service).

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<th>Yes</th>
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Evidence (up to 500 characters):

Supporting Documents:
### Performance Measure 7.3

The service has taken satisfaction surveys of CALD clients, translated or interpreted, where needed, in preferred languages to:
- inform continuous improvement
- determine cultural appropriateness of various programs delivered by the service
- determine cultural competence of staff.

<table>
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<th>Yes</th>
<th>No</th>
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Evidence (up to 500 characters):

Supporting Documents:

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<th>Cultural Competency 7 Percentage Score:</th>
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CULTURAL COMPETENCY STANDARD 8
The service has proactive support from senior management for developing transcultural mental health initiatives.

**Principle**
A formal commitment to dedicating resources is essential to achieve cultural competency.

**Performance Measure 8.1**
The service has budgetary policies and practices that allocate resources and fiscal support to facilitate delivery of evidence-based programs for CALD communities and to assist the service in achieving cultural competency.

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<th>Yes</th>
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Evidence (up to 500 characters):

Supporting Documents:

**Performance Measure 8.2**
The service has genuine and active support for FTEs who are designated the responsibility for monitoring the progress of the service in attaining cultural competency through the implementation of the Framework.

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<th>Yes</th>
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Evidence (up to 500 characters):

Supporting Documents:

Cultural Competency 8 Percentage Score:

Overall Percentage Score: