Exploring Cultural Awareness

You deliver superior quality care.... is it also culturally sensitive?
Slide 1
Exploring Cultural Awareness
Duration: 00:00:07
Advance mode: By user

You deliver superior quality care… is it also culturally sensitive?

Slide 2
Introduction
Duration: 00:00:40
Advance mode: By user

Notes:
Next slide is 3

Notes:
Next slide is 3
Every individual who walks through our doors has a unique set of needs.

We have a responsibility to treat each person with respect for his or her cultural and language needs.

What things do you do in your normal life that seem so second nature that you forget about them?

These things reflect your cultural background.

Select a scenario
Explore a scenario by clicking the picture that reflects your job or sounds interesting to you to see how you would deliver culturally sensitive care.

A = Inpatient – Mr. Smith (slide 5)
B = Patient Registration (slide 23)
C = Outpatient – Mr. Petrov (slide 37)

Notes:
Next slide is 4

Notes: Learner chooses a scenario – only 1 is required, but the learner can come back and choose others if desired.

Scenario names:
Slide 5
Mr. Smith - start
Duration: 00:00:01
Advance mode: By user

This is Mr. Smith. He is a 50-year-old man who came to LVHN with chest pain. Nothing in his echocardiogram, EKG or stress test explained his chest pain. So a cardiac catheterization is scheduled to find out what may be causing his pain. Upon admission to the hospital Mr. Smith identified himself as a Jehovah's Witness. His routine blood work showed that he is anemic.

Your goal is to prepare Mr. Smith for the cardiac catheterization procedure so that you can learn what is causing his chest pain.

Notes:
Return to scenarios goes to slide 4
Start this scenario goes to slide 6

Slide 6
Start SCENARIO choices
Duration: 00:00:05
Advance mode: By user

We're not sure why you are anemic, but the best way to treat the anemia is to give you a blood transfusion.

You have just explained to Mr. Smith that he is anemic. The anemia must be corrected before he can have a cardiac catheterization procedure.

I don't understand. How did I get anemic? What do we have to do?

The Cultural Competency Resource Center web site has information that would be helpful to you in this case. Click on to see.

Click on your best response

We're not sure why you are anemic, but the best way to treat the anemia is to give you a blood transfusion.

Choice A goes to slide 7
Choice B goes to slide 17
CCRC icon at bottom goes to slide 16

Notes:
Choice A goes to slide 7
Choice B goes to slide 17

Slide 7
RICH branch
Duration: 00:00:04
Advance mode: By user

Good choice. You knew when you went to talk with Mr. Smith that he is a Jehovah's Witness. Rather than forcing a transfusion on him you have shown that you respect his religious beliefs by offering other options.

That's right, I do not want to have a blood transfusion.

We can talk about some other things we could do. Before we start, would you like to have your family and elder present? Each of the options has some risks. Your family and elder may be helpful in considering your options or possibly identifying another choice.

Click on your best response

We can talk about some other things we could do. Each of the options has some risks.

Choice A goes to slide 12
Choice B goes to slide 8

Notes:
Choice A goes to slide 12
Choice B goes to slide 8
In addition to several non-blood alternatives, one option is to give you two doses of iron replacement therapy through an IV. Another option is to wait and see if your blood count comes up on its own.

Your response is...

**Slide 9**

Solo –wait option

Duration: 00:00:04
Advance mode: By user

How long will it take for my blood count to come up on its own if I decide to wait?

Your response is...

If we wait there is a chance that your blood count can keep going down instead of going up. The longer we wait, the longer we won’t know what’s wrong with your heart.

Your response is...

**Slide 10**

Resources

Duration: 00:00:40
Advance mode: By user

**Notes:**

- Patient Safety Newsletter = Volume 5, Number 2, Fall 2009 – FAQ section
- Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog
- Cultural Awareness Subject Guide – available on the Library Website
- Live Education and Diversity/Cultural Awareness Liaison
- CCRC web site – LVHN Intranet, Find Fast,
Slide 11
Solo Treatment Outcome
Duration: 00:00:01
Advance mode: By user

OUTCOME
Nice job! Whether Mr. Smith chose an option such as the iron treatment or to wait for his count to come up on its own, you took care of him in a way that was sensitive to his beliefs. You made him feel less anxious about what was happening, and he is satisfied with the care he received from you.

There are many resources to help you become more sensitive to others' cultural needs. Click on to see what they are.

Notes:
Replay goes to slide 5
Next goes to slide 50
“i” icon goes to slide 10

Slide 12
Slide 12
Duration: 00:00:08
Advance mode: By user

Mrs. Smith and the elder join Mr. Smith, and you finish reviewing Mr. Smith’s anemia diagnosis. You also explain that the normal treatment is to give a blood transfusion. Your response is…

In addition to several non-blood alternatives, one option is to give you two doses of iron replacement therapy through an IV. Another option is to wait and see if your blood count comes up on its own.

You are showing respect for Mr. Smith by involving his family and his elder in this decision.

Notes:
Next goes to slide 13
How long will it take for my blood count to come up on its own if I decide to wait?

If we wait there is a chance that his blood count can keep going down instead of going up. Waiting would increase the chance that whatever is wrong with his heart would keep causing the problems that made him come here in the first place. The longer we wait, the longer we won't know what's wrong with his heart.

Next goes to slide 15

Patient Safety Newsletter = Volume 5, Number 2, Fall 2009 – FAQ section
Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog
Cultural Awareness Subject Guide – available on the Library Website
Live Education and Diversity/Cultural Awareness Liaison
CCRC web site – LVHN Intranet, Find Fast, Clinical page
Nice job! Whether Mr. Smith chose an option such as the iron treatment or to wait for his count to come up on its own, you enabled Mr. and Mrs. Smith and the elder to be involved in Mr. Smith's care. You took care of Mr. Smith in a way that respected his beliefs. You made Mr. and Mrs. Smith feel less anxious about what was happening, and they were satisfied with the great care they received from you.

There are many resources to help you become more sensitive to others' cultural needs. Click on to see what they are.

- Choice A goes to slide 20
- Choice B goes to slide 18
Finally, you are listening!

In addition to several non-blood alternatives, one option is to give you two doses of iron replacement therapy through an IV. Another option is to wait and see if your blood count comes up on its own.

You say...

How long will it take for my blood count to come up on its own if I decide to wait?

If we wait there is a chance that your blood count can keep going down instead of going up. Waiting would increase the chance that whatever is wrong with your heart would keep causing the problems that made you come here in the first place. The longer we wait, the longer we won't know what's wrong with your heart.

My choice is I want a second opinion. I'd like to see if there is another way to do this. My beliefs are very important to me.

You haven't been sensitive to Mr. Smith's beliefs as a Jehovah's Witness. Instead of open communication to find a resolution, Mr. Smith wants to seek another opinion. Do you think he trusts the care he receives from LVHN?
Slide 21
Resources
Duration: 00:00:35
Advance mode: By user

Notes:
Patient Safety Newsletter = Volume 5, Number 2, Fall 2009 – FAQ section
Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog
Cultural Awareness Subject Guide – available on the Library Website
Live Education and Diversity/Cultural Awareness Liaison
CCRC web site – LVHN Intranet, Find Fast, Clinical

Slide 22
Poor Choice OUTCOME
Duration: 00:00:01
Advance mode: By user

Notes:
Replay goes to slide 5
"I" icon goes to slide 21
A man and woman enter the Diagnostic Care Center and take their place at the end of the check-in line. You (the registrar) call their number and they join you in the registration room.

Your goal is to register the patient (the woman) with accurate information.

You start by asking them what they are here for today.

Notes:

Start this scenario goes to slide 24
Return to scenarios goes to slide 4

Once you have asked what they are here for, the woman looks confused and responds in a language that you don’t understand.

Notes:

Choice A goes to slide 25
Choice B goes to slide 32

The patient looks confused—she’s holding a prescription form and insurance card—and offers a few words of English.

Notes:

Choice A goes to slide 26
Choice B goes to slide 29
The patient continues to look confused and hands you a prescription. She confirms that the address and phone number in the system are current, but does not answer you when you ask her the name of her primary care provider.

Click on your best response

I think we might need some language help

I assume that her primary care provider has not changed since her last service at LVHN so I don’t need to update the system.

Notes:
Choice A goes to slide 28
Choice B goes to slide 36

Slide 27
Your Resources
Duration: 00:00:45
Advance mode: By user

Notes:
CCRC web site – LVHN intranet, Find Fast, Clinical
Revenue Cycle Education web site – LVHN intranet, Departments, Non-clinical, L-Z, Revenue Cycle Education
Interpreter Services –
A) Cyracom phone system to help with language interpretation (blue phone)
B) Video Remote Interpretation to provide American Sign Language interpretation (George unit)
C) Staff interpreters
Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog
Cultural Awareness Subject Guide – LVHN intranet, Find Fast, Library Services, Subject Guides
Patient Safety Newsletter – Volume 5, Number 2, Fall 2009 – FAQ section
Diversity/Cultural Awareness Liaison
Live Education
Slide 28
Slide 28
Duration: 00:00:01
Advance mode: By user

OUTCOME
The patient stays for her blood test. However, since you did not update the system, her lab results were sent to the primary care provider (PCP) on record, which is no longer her doctor.
This would be a HIPAA violation.

There are many resources to help you become more sensitive to others' cultural needs. Click on to see what they are.

Notes:
Replay goes to slide 23
"I" icon goes to slide 27

Slide 29
Slide 29
Duration: 00:00:03
Advance mode: By user

Her companion says this slowly, without confidence Your response is...

OK. Date of birth?

Notes:
Next goes to slide 31

Slide 30
Your Resources
Duration: 00:00:45
Advance mode: By user

Your Resources
Several resources can help you deliver culturally sensitive care:
Click on the purple markers for more information about each one.

Notes:
CCRC web site – LVHN intranet, Find Fast, Clinical
Revenue Cycle Education web site – LVHN intranet, Departments, Non-clinical, L-Z, Revenue Cycle Education
Interpreter Services –
A) Cyracom phone system to help with language interpretation (blue phone)
B) Video Remote Interpretation to provide American Sign Language interpretation (George unit)
C) Staff interpreters

Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog

Cultural Awareness Subject Guide – LVHN intranet, Find Fast, Library Services, Subject Guides

Patient Safety Newsletter – Volume 5, Number 2, Fall 2009 – FAQ section

Diversity/Cultural Awareness Liaison
Live Education

Slide 31
Slide 31
Duration: 00:00:01
Advance mode: By user

OUTCOME
The patient stays for her blood test. However, since the bill was submitted with the wrong date of birth, the insurance company denied the claim and a bill was sent to the patient in error. The following things could happen as a result:
- The patient may feel upset, frustrated, or confused.
- The patient may not use LVHN’s services again.
- The patient may pay her bill, even though it should have been paid by her insurance company.

These outcomes could occur because an interpreter wasn’t called when the patient and family did not feel comfortable speaking to you in English, and they didn’t understand enough English to answer your questions.

There are many resources to help you become more sensitive to others’ cultural needs. Click on to see what they are.

Notes:
Replay goes to slide 23
“I” icon goes to slide 30

Slide 32
Interpreter Card
Duration: 00:00:02
Advance mode: By user

You ask the patient what language she wants to use and she points to Arabic.

You say:
Thank you. I will call for an interpreter.

Great, you have identified that Arabic, not English, is the patient’s preferred language to discuss health care.

Notes:
Next goes to slide 34
Sample language card goes to slide 33
The patient picks up one phone, and you pick up the other. You ask your questions in English and the patient hears them in Arabic. She answers in Arabic and the answers are provided to you in English.

You say...

What is your date of birth?

Notes:
Back returns to slide 32

Notes:
Next goes to slide 36

CCRC web site – LVHN intranet, Find Fast, Clinical
Revenue Cycle Education web site – LVHN intranet, Departments, Non-clinical, L-Z, Revenue Cycle Education
Interpreter Services –
A) Cyracom phone system to help with language interpretation (blue phone)
B) Video Remote Interpretation to provide American Sign Language Interpretation (George unit)
Good outcome

Great decision! Thanks to your actions to get language help, the registration process is efficient and the data is accurate. You also reduced the patient’s anxiety by enabling her to speak in a language with which she is comfortable. The patient has her blood test and the results are sent to the correct physician.

This patient feels respected because you communicated with her using the blue language interpretation telephone (Cyracom).

There are many resources to help you become more sensitive to others’ cultural needs. Click on the i icon to see what they are.

Notes:

Replay goes to slide 23
Next goes to slide 50
“i” icon goes to slide 35

Open A

This is Mr. Petrov. He has an office visit to review his lab results with you. Based on the results his physician determines he is diabetic. His A1C test shows an above average blood sugar level of 10% and his fasting blood sugar is 200.

Your goal is to educate Mr. Petrov on an appropriate diet for a person with diabetes.

Notes:

Start this scenario goes to slide 38
Return to scenarios goes to slide 4
Mr. Petrov, your lab results show that you are diabetic and you will need to follow a diabetic diet. Can you tell me what you know about diabetes?

Here is a Diabetic Teaching booklet – it explains the diet you must follow. The doctor wants to see you in a month.

How you would start the conversation? Click on your choice.

Choice A goes to slide 44
Choice B goes to slide 39

It's Mr. Petrov's one month follow up appointment. You are reviewing repeat lab results with him.

Mr. Petrov, I see nothing has changed in your lab work. Are you having trouble following the diet we gave you?

Mr. Petrov, I see nothing has changed in your lab work. Are you following the diet I gave you?

Click on your best response

Choice A goes to slide 40
Choice B goes to slide 40

I only eat cabbage and rice.

Can you tell me the reason why you only eat cabbage and rice?

Choice A goes to slide 41
Choice B goes to slide 46
I understand that changing your diet is hard and you may not feel sick. I want to help you to manage your diabetes by identifying foods that you like that will keep your blood sugar under control. If you're not going to follow the diet you're not going to get better.

Click on your best response

A

B

Notes:
Choice A goes to slide 48
Choice B goes to slide 43

---

Slide 42
Resources
Duration: 00:00:35
Advance mode: By user

Notes:
CCRC web site – LVHN intranet, Find Fast, Clinical
Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog
Cultural Awareness Subject Guide – LVHN intranet, Find Fast, Library Services, Subject Guides
Patient Safety Newsletter – Volume 5, Number 2, Fall 2009 – FAQ section
Diversity/Cultural Awareness Liaison
Live Education
Slide 43
Bad outcome
Duration: 00:00:01
Advance mode: By user

OUTCOME
Mr. Petrov probably feels disrespected. He may stop scheduling physician follow-up appointments.

As a result, his diabetes would not be under control and he may develop secondary complications such as vision loss, gangrene, neuropathy or cardiac disease.

This patient lacks trust in you, and maybe in LVHN too. You did not deliver compassionate health care when you dismissed his diet habits.

Notes:
Replay goes to slide 37
"I" icon goes to slide 42

Slide 44
Scene 1
Duration: 00:00:04
Advance mode: By user

Click on your best response

Honestly, I don't even eat sugar. How did I get diabetes?

There are many reasons why people get diabetes. Can you tell me what foods you commonly eat?

All your questions are answered in this Diabetic Teaching booklet. It explains the diet you must follow. The doctor wants to see you in a month.

Click the icon to visit the Cultural Competency Resource Center web site to review how to communicate diet issues and treatment options in a culturally-sensitive way.

Notes:
Choice A goes to slide 45
Choice B goes to slide 39

Slide 45
Scene 2
Duration: 00:00:03
Advance mode: By user

Click on your best response

I only eat cabbage and rice.

Gabbage and rice! You are eating all the wrong food. That’s why your blood sugar levels are not controlled.

Can you tell me the reason why you only eat cabbage and rice?

Click the icon to visit the Cultural Competency Resource Center web site to review how to communicate diet issues and treatment options in a culturally-sensitive way.

Notes:
Choice A goes to slide 41
Choice B goes to slide 46
CCRC laptop icon goes to slide 49
I understand you want to work hard. We can work together to find a way to modify your diet and control your diabetes while respecting your traditions. Do you feel you can do that with my help?

To work hard you need to eat the right foods. Here is a diabetic teaching booklet. It explains the diet you must follow so you can continue to work hard. The doctor wants to see you in a month.

My mother always said it holds you to the earth – it allows you to work harder.

Choice A goes to slide 48
Choice B goes to slide 41

Notes:

- CCRC web site – LVHN intranet, Find Fast, Clinical
- Catalog = Browse the Cultural Awareness & Diversity category of the TLC catalog
- Cultural Awareness Subject Guide – LVHN intranet, Find Fast, Library Services, Subject Guides
- Patient Safety Newsletter – Volume 5, Number 2, Fall 2009 – FAQ section
- Diversity/Cultural Awareness Liaison Live Education
### Slide 48
**Good Outcome**
*Duration: 00:00:01*

**Advance mode: By user**

*Outcome*
Nice job! Mr. Petrov feels respected because of the way that you interacted with him. He is likely to continue to schedule physician follow-up appointments and will work to change his diet to manage his diabetes. Because of this interaction, he may not experience any complications related to diabetes.

*Notes:*
- Replay goes to slide 37
- Next goes to slide 50
- "I" icon goes to slide 47

---

### Slide 49
**CCRC**
*Duration: 00:00:01*

**Advance mode: By user**

*Overview*
Specific Customs, Spirituality, and Diet

Of the myriad traditions and customs that help to shape a person’s cultural environment, some may have a significant relation to health and illness. For example, issues relating to dietary practices, folk remedies, and certain religious customs, among others, may impact directly on the medical encounter. While it is difficult to list even a fraction of these medically relevant traditions and customs, it is important to have an awareness of their importance, as well as openness and skills to explore them further.

Exploring customs, religious and spiritual beliefs, and dietary practices in the outpatient setting, prior to any potential hospitalization if possible, is optimal so as to be certain of patient’s preferences for treatment.

*Notes:*
- Back goes to slide 45

---

### Slide 50
**Last chance**
*Duration: 00:00:01*

**Advance mode: By user**

Remember that culture is more than a person’s race and ethnicity. It is the ideas and practices that a group of people share about what they believe and how they act. Culture influences the clothing a person wears, the mask he or she enjoys, the individuals that are considered family members and his or her traditions and lifestyle.

Everyone has a cultural background and you have a responsibility to treat patients, their families, visitors, and your colleagues – with respect for their cultural and language needs.

Optional - explore another scenario by clicking that picture... or click Next to continue with the course.

*Notes:*
- Pictures link to each scenario (A goes to slide 5, B goes to slide 23, C goes to slide 37)
- Next goes to slide 51
Why is cultural awareness important to me?

Duration: 00:00:30
Advance mode: By user

Notes:
Next slide goes to slide 52
Why is cultural awareness important to me?

**Patient Safety**
Patients with cultural and language barriers are more likely to experience adverse events that result in some kind of detectable harm. Most often these consequences are the result of some failure of communication.
By paying attention to meeting the cultural needs of patients and families we will be best able to reduce the potential for error and promote patient safety.

**Patient Satisfaction**
Patients who experience care that meets their cultural and language needs are more likely to be satisfied with the healthcare experience and their clinicians.

**Accreditation and Designation Requirements**
LVPN is required by federal mandates and accreditation organizations such as The Joint Commission to ensure that its services meet the cultural and language needs of its patients.
The delivery of cross cultural health care is required for “Magnet” designation by the American Nurses Credentialing Center.
Slide 52
Quiz
Duration: 00:00:01
Advance mode: By user

Did you make choices that showed sensitivity to the individual's needs in the scenario(s) that you reviewed?

Did you find some resources that will be helpful?

You must show that you are culturally aware to complete this course. Please click Show My Awareness to continue.

Notes:
Show My Awareness goes to slide 55 (quiz)

Slide 53
Your Resources
Duration: 00:00:45
Advance mode: By user

Notes:

Slide 54
Quiz
Duration: 00:00:01
Advance mode: By user

Did you make choices that showed sensitivity to the individual's needs in the scenario(s) that you reviewed?

Did you find some resources that will be helpful?

You must show that you are culturally aware to complete this course. Please click Show My Awareness to continue.

Notes:
Show my awareness goes to slide 55 (quiz)
Slide 55

**cult Aware_final_scenario**

Duration: 00:00:01

Advance mode: By user

---

**Question 1 of 5**

Select the items below that make up a person’s culture.

---

Notes:

End of quiz links to slide 56

For quiz details, see separate quiz paper copy document

---

Slide 56

**Course References**

Duration: 00:00:01

Advance mode: By user

---

**Course References**

  

  

  

  
  [http://www.jointcommission.org/assets/1/6/ARoadmapforHospitalsfinalversion727.pdf](http://www.jointcommission.org/assets/1/6/ARoadmapforHospitalsfinalversion727.pdf)

  


- Silver, S., Galenti, G., Ivey, A. *The C’s of Culture: A Memoir for Health Care Professionals.*
  


---

Notes:

To exit, click the [x] button.