

# [Cultural competency in health service management](https://assignbuster.com/cultural-competency-in-health-service-management/)

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## 1. 0 Introduction

The report would focus on different aspects cultural competency in health care. The main area on which the report would give insight is the Health Service Management. Some points around principles of cultural competency and how these are relevant in Health Service Management. The report would look at NHMRC guidelines. Different Ways in which culturally safe health services can be provided would be discussed in this report in addition to the details on what is culturally and socially safe’ professional practice. 2. 0 Relevance and Relationship between culture/ethnicity, socioeconomic status, and cultural competence related to Health Service Management.

Socioeconomic has a direct impact on health. Cultural competence with regards to health care defines the capability of structures to offer care to patients with various cultures, principles and actions, including modifying distribution to see patients’ communal, cultural, and verbal requirements. Cultural competence is a way with which quality care can be provided to all the patients and even helpful to business growth. From health service management point both the above reasons are equally important and proper emphasis should be given to business grown, but at the same time the basic needs of patients should not be sacrificed. Understanding Ethnicity is critical to understanding the health care which would be required. A People belonging to a special type of ethnicity might need higher care from health service management. It is quite evident that the socioeconomic condition determines the health related consequences more than ethnicity (Egede, L. 2006). When the socioeconomic condition is better than in most of the cases the culture and race effect might not be that significant. Still, there is a relationship between cultural competence and socioeconomic status along with ethnicity. It is required by health service management to understand this relationship so that they can provide the patients the help which is required.

## 3. 0 Elements and principles of cultural competency and its relation to Health Service Management.

Culture is a mixture of knowledge, belief and behavior. The principle of cultural competency and its relevance in health service management are listed below:

Pleasing customers & societies and supporting mutual relationships

This principle is very important in Heath service management and in this case it is Health service management people should understand the customers which are patients.

Governance and responsibility for continued change

The Health Service Managers should show accountability on the decisions with regards to different health plans (Hayes, M. 2010). The Health Service Manager should be ready to implement changes which would be beneficial to the patients and the health care centres which they handle.

Building on powers

“ Identify the public, identify what works”

The Health Service Management should try to understand the community in which they operate. They have to get the information on what would work best for the people in that community and should work toward achieving what is required in that community. Health Service Management should know the problems they face in the community regarding the health in that area.

A mutual accountability

“ Generating partnerships along with sustainability”

Health service management should work towards continued partnership with other health institutes to sustain the improvement of health service and care in that particular location.

4. 0 Policies and Guildline in relation to health service and details on Health Service Management.

There are different policies and guidelines set up by NHMRC in regards to cultural competency. Some of these are around National focus. In addition, there should be a focus on complement the existing work which is already being done. The guidelines mention that there should be a generic approach and not confined to some specific group. It should be applied to everyone rather than to a specific group of people (‘ Public health’, 1915). Even for Health service management these guidelines are very critical as there are different type of people who require health plans and health care. So any decision taken should be keeping in view a generic approach as there are different cultured people involved. The other guideline defines 4 domains model for any actions which involves organization, systemic, individual and professional (L Leavitt, R. 2015). The health service provider should work to provide improved living with a better environment. There should be a proper research done in the area and even the feedback of the patients should be taken to improve the services by the health care center this can be done by the health service management. Public health research should be considered to take decisions on improving to be done in this area. Expert option should be considered while implementing any changes by the health care service management.

5. 0 Evidence of knowledge about how the elements and principles of cultural competency indicated in Criteria 3 and 4 relate to health consumers The idea of cultural competency has a beneficial outcome on patient consideration conveyance by empowering suppliers to convey administrations that are deferential of and receptive to the well being convictions, hones and social and etymological needs of differing patient (‘ Scientific Research and Social Well-being’, 1938)s. Cultural competency is basic to lessening well being variations and enhancing access to amazing health awareness, human services that is deferential of and receptive to the needs of differing patients (‘ Health and safety awareness’, 2001). At the point when created and actualized as a structure, social capability empowers frameworks, offices, and gatherings of experts to capacity adequately to comprehend the needs of gatherings getting to well being data and human services or taking an interest in examination in a comprehensive organization where the supplier and the client of the data meet on shared opinion. This cultural competence advantages shoppers, partners, and groups and backings positive well being results.

Since various components can impact well being correspondence including practices, dialect, traditions, convictions, and viewpoints social skill is additionally basic for accomplishing exactness in medicinal exploration (Weick, 1980). Lack of foresight in therapeutic examination, arranging that does consider standards of social fitness, may yield incorrect results (Silk, 2007). It requires a dynamic methodology of learning and creating abilities to draw in viably in diverse circumstances and re-assessing these aptitudes over the long run.

6. 0 Ability to identify what is needed to ensure ‘ culturally/socially safe’ professional practice for both the health professional and health consumer

The idea of safe health services includes strengthening of the human services specialist and the patient. The determinants of “ safe” consideration are characterized by the beneficiary of consideration. These are interest, assurance and organization. Significance is put on recognizing and assessing one’s own particular convictions and values and perceiving the potential for these to effect on others. Dispersal of social security information and practice is increasing.

This idea gives acknowledgment of the lists of force characteristic in any collaboration and the potential for difference and disparity inside any relationship. Affirmation by the human services specialist that burden they could call their own social convictions may weakness the beneficiary of health awareness is crucial to the conveyance of socially safe consideration. This sheet places social wellbeing toward the end of a continuum that starts with social mindfulness and advances through social affectability and social competency.

So as to be of prompt utilization to forefront health awareness suppliers, it is important that the dynamic thought of social security to an exceptionally individual and useful level by depicting distinctive situations in which socially mindful, touchy, equipped, and safe practices are added to improve human services administrations and patient results.

The general objective is to treat individuals with nobility and admiration to guarantee they will feel acknowledged and safe from separation in medicinal services situations.

7. 0 Ability to identify a number of ways that your health profession can ensure to provide culturally safe health services (approx. 200 – 250 words) The idea of safe health services includes strengthening of the human services specialist and the patient. The determinants of “ safe” consideration are characterized by the beneficiary of consideration. These are interest, assurance and organization. Significance is put on recognizing and assessing one’s own particular convictions and values and perceiving the potential for these to effect on others. Dispersal of social security information and practice is increasing.

This idea gives acknowledgment of the lists of force characteristic in any collaboration and the potential for difference and disparity inside any relationship. Affirmation by the human services specialist that burden they could call their own social convictions may weakness the beneficiary of health awareness is crucial to the conveyance of socially safe consideration (Chatfield, 1983). This sheet places social wellbeing toward the end of a continuum that starts with social mindfulness and advances through social affectability and social competency.

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8. 0 Conclusion

Cultural competency is characterized just as the level of learning based aptitudes needed to give viable clinical consideration to patients from a specific ethnic or racial gathering (‘ PHYSICAL APTITUDES’, 1926). It means administrations, bolsters or other support that are led or gave in a way that is receptive to the convictions, interpersonal styles, demeanor, dialect and practices of people who are getting services, and in a way that has the best probability of guaranteeing their greatest investment in the project

Cultural competency incorporates: Attaining the information, abilities, and mentality to empower chairmen and experts inside arrangement of consideration to give compelling consideration to various populaces, i. e., to work inside the individual’s qualities and reality conditions. Social ability recognizes and fuses change in regularizing satisfactory practices, convictions and values in deciding an individual’s mental wellbeing/ailment, and consolidating those variables into evaluation and treatment.

9. 0 References Egede, L. (2006). Race, ethnicity, culture, and disparities in health care. J Gen Intern Med, 21(6), 667-669.

Hayes, M. (2010). Retrieved 25 April 2015, fromhttp://www. doh. wa. gov/Portals/1/Documents/Pubs/631013. pdf

L Leavitt, R. (2015). Developing Cultural Competence in a Multicultural World, Parts 1 & 2 . Retrieved fromhttp://learningcenter. apta. org/

Chatfield, M. (1983). Management of Health Services. Health Care Management Review , 8 (4), 90

Health and safety awareness. (2001). In Practice , 23 (5), 297-297.

PHYSICAL APTITUDES. (1926). JAMA: The Journal Of The American Medical Association , 86 (13), 953.

Public health. (1915). Public Health , 29 , 147.

Scientific Research and Social Well-being. (1938). Nature , 142 (3589), 304-304.

Silk, J. (2007). Social Components of Fitness in Primate Groups. Science , 317 (5843), 1347-1351

Weick, K. (1980). The analysis of social skill. Psyccritiques , 25 (11).

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