

NATIONAL CULTURAL COMPETENCY CHECKLIST



This Checklist forms part of the **National Cultural Competency Tool (NCCT) for Mental Health Services**

Services can use this template to input their information directly into the Action columns for each competency. Please feel free to customise the Checklist by inserting your agency name and/or logo and other details relevant to your organisation.

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NATIONAL CULTURAL COMPETENCY CHECKLIST

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.

Review Date:
Completed by:

Principle:

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

Performance Measures:

ACTION							
The service has:		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
1.1	a Strategic Business Plan, or equivalent, clearly stating its commitment to meeting the mental health needs of people from CALD backgrounds						
1.2	a policy for ensuring delivery of culturally appropriate services to all cultural groups in the service region						
1.3	incorporated a statement about cultural diversity considerations in its recruitment documentation/processes for all positions at the service.						



CULTURAL COMPETENCY STANDARD 2:

The service collaborates with key mental health government and broader community stakeholders working with people from CALD backgrounds¹.

Principle

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

Performance Measures:

ACTION							
The service has:		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
2.1	ensured there is a position, or positions, allocated the responsibility for implementing the NCCT across the service. Such a position/s could be existing Full Time Equivalent (FTEs)						
2.2	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: <ul style="list-style-type: none"> ▪ transcultural 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 groups 						
2.3	representation of CALD communities on its internal committees across all levels of service development and delivery						

¹ Please see *Appendix 4: Further contacts for States and Territories* which can assist services in accessing resources and information required to achieve this Standard.

2.4	representation, where possible, on various CALD community associations in its service region						
2.5	<p>disseminated information in English and in key CALD languages based on the annually updated profile of the CALD communities within its service region (see Performance Measure 3.4), via one or more modalities, including print, audio-visual or community information sessions and forums on:</p> <ul style="list-style-type: none"> ▪ mental illness prevention ▪ suicide prevention ▪ recovery ▪ mental health promotion ▪ mental health information ▪ stigma reduction ▪ benefits and rights of mental health consumers and their carers <p>to different cultural groups at community venues, including but not limited to:</p> <ul style="list-style-type: none"> ▪ 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 						
2.6	<p>ensured that its staff and/or clinicians delivering a mental health program are aware and respectful of:</p> <ul style="list-style-type: none"> ▪ existing alternative or complementary health and/or mental health service providers (e.g., traditional 'folk healers') ▪ key individuals in the specified community who may be consulted on religious and spiritual beliefs influencing assessment, treatment and management. 						



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 Measures:

ACTION							
The service has:		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
3.1	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						
3.2	linked with external agencies that have had wide research experience with CALD communities						

3.3	<p>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</p>						
3.4	<p>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:</p> <ul style="list-style-type: none"> ▪ 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 <p>and that this profile is reviewed annually</p>						
3.5	<p>conducted research or projects in collaboration, or independently, to measure the needs of the CALD population in its region². Examples of projects could be:</p> <ul style="list-style-type: none"> ▪ 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 psychosocial remediation ▪ looking at the proportion of people from CALD backgrounds accessing service. 						

² It is of utmost importance to ensure research methodologies are appropriate for the needs of CALD.



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 (1991)* and other legislated rights, must be ensured when delivering mental health services.

Performance Measures:

ACTION							
The service has:		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
4.1	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						
4.2	<p>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:</p> <ul style="list-style-type: none"> ▪ 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 						

4.3	<p>developed policies and procedures to facilitate the accommodation of specific culture-based needs of its CALD consumers, their carers and families, such as:</p> <ul style="list-style-type: none"> ▪ childcare needs ▪ family roles and obligations ▪ dietary needs ▪ religious needs 						
4.4	<p>processes in place to access, where available, accredited or suitably competent interpreters who have been trained in mental health interpreting</p>						
4.5	<p>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.</p>						



CULTURAL COMPETENCY STANDARD 5:

The service adheres to a Language Services Policy³.

Principle

People from CALD backgrounds have a right to receive the same quality mental health service as other Australians.

Performance Measures:

The service has:		ACTION					
		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
5.1	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						
5.2	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						
5.3	where available, used accredited or suitably competent interpreters, trained in mental health interpreting						
5.4	provided staff training on the: <ul style="list-style-type: none"> ▪ 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 						
5.5	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.						

³ See *Appendix 3* for best practice principles identified by the Commonwealth Ombudsman's report on the Use of Interpreters (2009) as well as details on the Language Services Policy/Statement for respective states and territories. For states or territories without one, the service should use internally accepted policies or guidelines.



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 Measures:

ACTION							
The service has:		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
6.1	ensured that all staff undergo a mental health cultural competency training program ⁴ 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						
6.2	ensured that policy documents specify that assessment instruments or inventories administered on CALD clients are culturally appropriate, and where feasible, are culturally validated						
6.3	conducted development and implementation of more culturally appropriate assessment, review and treatment plans						
6.4	incorporated cultural competency into staff orientation and performance review requirements ⁵						

⁴ There is value in having CALD consumers and carers included in a cultural competency training program in order to provide their perspective and lived experience.

⁵ See *Appendix 2* for items to include in Staff Orientation Programs.



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 Measures:

The service has:		ACTION					
		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
7.1	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						
7.2	engaged suitably trained CALD consumers and carers to deliver services where appropriate (e.g., a peer support service)						
7.3	taken satisfaction surveys of CALD clients, translated or interpreted, where needed, in preferred languages to: <ul style="list-style-type: none"> ▪ inform continuous improvement ▪ determine cultural appropriateness of various programs delivered by the service ▪ determine cultural competence of staff. 						



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 Measures:

ACTION							
The service has:		Y	N	What needs to be reviewed? By when? By whom?	What needs to be changed? By when? By whom?	What results/outcomes are expected?	Where is the evidence for this measure located?
8.1	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						
8.2	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 NCCT.						