DEPARTMENT OF PSYCHIATRY POLICY MANUAL	DATE POSTED
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## POLICY

The Department of Psychiatry will continue to serve the culturally and linguistically diverse community and workforce while striving to understand the broader definitions of diversity and cultural humility\*. Cultural humility requires a lifelong commitment to self-evaluation and self-critique, a desire to fix power imbalances where none ought to exist and includes aspiring to develop partnerships with people and groups who advocate for others<sup>1</sup>. Aspects of cultural identity differences include race, privilege, ethnicity, culture, socioeconomic status, religion, spirituality, physical ability, sexual orientation, and health belief system.

The Department of Psychiatry believes that integrating diversity and cultural humility into the fabric of the department will result in increased access to and engagement in behavioral health and chemical dependency treatment; improvement of services which lead to more favorable clinical encounters; facilitation of a more rewarding interpersonal experience and the overall increase in patient satisfaction.

The Department will also strive to demonstrate its sincere commitment to diversity and cultural humility by recruiting, hiring, training and retaining culturally diverse staff, faculty and trainees assuring equitable opportunities for personal and professional growth, advancement and compensation. Measurable cultural proficiency<sup>2</sup> across programs will also demonstrate our commitment.

This policy will help to sustain a long-term effort in responding to the needs of patients, staff faculty and trainees from racially, ethnically, linguistically and culturally diverse groups. We aim to be mindful of the increasing diversity of the population to assure our efforts align with the populations we serve, educate and employ.

## **Procedure**

- 1. The department's overall strategic plan will include an overview on department-wide efforts in establishing cultural humility and diversity processes, practices and outcomes.
- 2. Each program/service/division has adopted language expressing a commitment to cultural competence in its mission statement.
- 3. The department promotes activities/trainings that educate and expand faculty/staff/trainees' knowledge about culture, cultural diversity and cultural humility with expressed support of these activities/trainings from the Department Chair and other department leaders.
- 4. Employee orientation emphasizes the importance of understanding diversity and cultural inclusion and their relationship to work processes and co-worker, patient, and trainee interactions.
- 5. The department includes cultural humility items in staff, faculty and trainee evaluations to monitor attention to these issues and to underscore the importance of them in their daily practice and work. Additional tracking mechanisms will be used by programs or supervisors when training needs are identified at an individual or group level to document additional training received.
- 6. Cultural Humility/Diversity Training Requirements: It is an expectation that all faculty members, clinical staff, administrative, support staff, and trainees (from all disciplines) will participate in a minimum of 3 hours of workshops, readings or cultural emersion events per year offered by the Department, the Medical Center, your program or the community.
- 7. Several opportunities are offered throughout the year via our Psychiatry Grand Rounds and other departmental programs including an on-line course for department members.

- 8. Monitoring of completion of trainings will occur at each individual's annual evaluation and through the Human Resources Management System (HRMS) or via MyPath. All trainings, i.e. those taken during orientation, at the program level or as part of a training program, are recorded in HRMS or via MyPath.
- 9. Periodic completion cultural proficiency assessment scales, e.g., the Nathan Kline Institute Cultural Competency Assessment Scale<sup>3</sup>, will be utilized to gauge our progress toward cultural proficiency<sup>2</sup>.

## **References**

Cultural Competence and Diversity Strategic Plan <sup>1</sup>Hook, J.N. (2013). Cultural Humility: Measuring openness to culturally diverse clients. Journal of Counseling Psychology.

<sup>2</sup>Cultural Proficiency – This is the most positive end of the scale and is sometimes referred to as advanced cultural and linguistic competence or proficiency. This point is characterized by holding culture in high esteem. Culturally proficient agencies seek to add to the knowledge base of culturally competent practice by conducting research, developing new therapeutic approaches based on culture, and publishing and disseminating the results of demonstration projects.(From <a href="http://www.ccsi.org/pdf/GLOSSARYOFTERMS.pdf">http://www.ccsi.org/pdf/GLOSSARYOFTERMS.pdf</a>)

<sup>3</sup>The Nathan Kline Institute, Center of Excellence in Culturally Competent Mental Health at <u>http://www.ccsi.org/cultural-linguistic-competence.aspx</u>

## <u>History</u>

Policy developed by: Diversity and Cultural Competence Leadership Team and Office of Community and Consumer Affairs/Department of Psychiatry Approved By Psychiatry Quality Council 9/01

Moved to Personnel section of the manual and re-numbered 12/02 Revised to include training requirement 12/03

Renumbered from 14.3 to 13.3 6/04

Reviewed and revised by the Diversity and Cultural Competence Leadership Team 11/07 Increased training hours to 3. Added Blackboard course and HRMS tracking method. 10/09 Approved By Psychiatry Quality Council 11/09

Reviewed with no revisions 1/16

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