**Improving Cultural responsiveness of Victorian hospitals**

# Summary of key findings

**Evaluator:** Social Compass

**Aim:** To examine Victorian hospitals’ efforts to improve cultural responsiveness and cultural safety for Aboriginal people.

**Approach:** The voices of Aboriginal people are at the centre of the findings and drawn from:

* Case studies of seven Victorian hospitals - interviews with hospital CEOs, staff and Board members, local Aboriginal Community Controlled Health Organisations (ACCHOs), patients, community members and other key stakeholders
* Surveys of Aboriginal Hospital Liaison Officers (AHLOs) and Koori Maternal Health Liaison Officers
* Data review of over 200 documents—CQI reports, Quality of Care reports, Statement of Priorities, Aboriginal Employment Plans, Victorian Healthcare Experience Survey results, previous evaluations and academic literature.

**‘Cultural Responsiveness’**

**and ‘Cultural Safety’: What do they mean to Aboriginal community members?**

* **Cultural responsiveness** refers to how the **SERVICE acts**—meaning how health services listen to and understand patient needs and demonstrate empathy. Staff will know and respect community Elders, their land and their culture and they will work alongside Aboriginal people.
* Cultural **safety** refers to how the **PATIENT feels** when accessing hospital services—that there will be no loss of identity or dignity and being Aboriginal

will not lead to feelings of otherness, being an outsider or feeling unwelcome.

**Six themes impacting on cultural safety**

**AHLO and Aboriginal staff**

The role of the Aboriginal Health Liaison Officer or an Aboriginal staff member is crucial to enhancing culturally responsive care and ensuring the cultural safety of patients.

**Committed CEO and Leadership**

**Leadership** and **commitment** within hospitals at the Board, CEO and Executive level is necessary though not sufficient on its own in enhancing culturally

responsive care and cultural safety.

##### Cultural safety training

Hospitals generally view

**cultural training** as important. They are looking

for more support in developing training, contracting providers, determining content and measuring the

*It takes a lot for me to walk into a*

*hospital… even more to stay but seeing our flag and an acknowledgement of who we are makes a huge difference. Just a small thing like that. Every*

*hospital can*

### Patient

**(experience)**

impact of cultural

training.

## do that.

(Elder)

**Welcoming**

**Environment**

A welcoming environment plays a significant part in Aboriginal patients having

a **positive experience** and feeling **culturally safe**—

in the **first instance**. **Engagement**

**and Partnership with ACCHO(s)**

Partnerships with local ACCHOs help hospitals **access** local **cultural knowledge**, supporting the Aboriginal Health Liaison Officer and building **cultural competency** and safety

in the hospital.

##### Accountability

**and Reporting / Learning and Adapting**

There is no **rigorous monitoring** or **reporting** at the hospital or state- wide level of cultural responsiveness or cultural safety. The reporting mechanisms are ad

hoc, non-mandatory and provide

an incomplete story at the sector level.

**The evaluation report is available on the health.vic website. In your search engine, type ‘Koolin Balit evaluations’**

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# Here’s what we heard from some of the study participants

*The hospital system is often very hard for Aboriginal people to understand.*

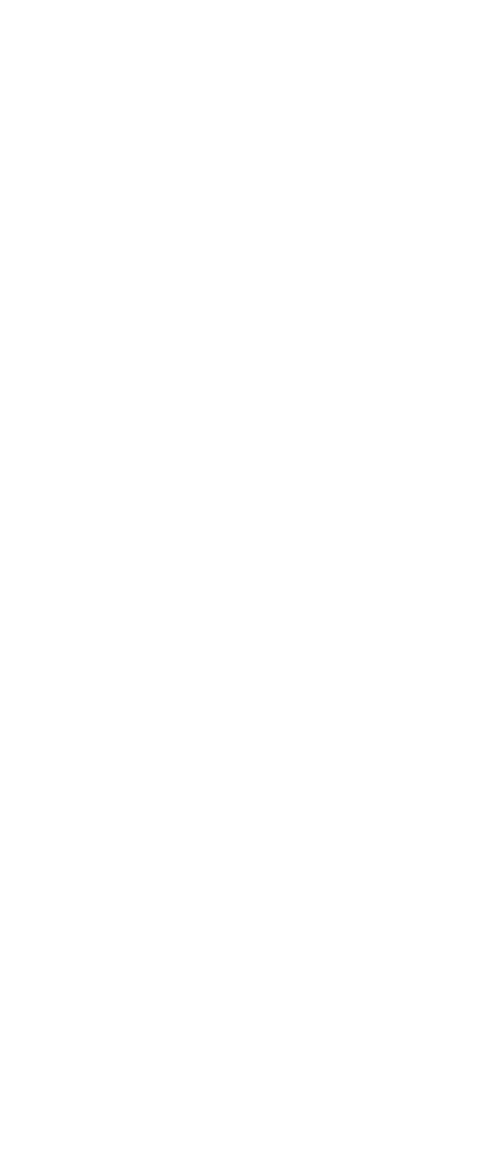
*We live in a holistic environment and that is quite often not understood. Aboriginal culture is quite often not known by hospital staff and it is important when considering the journey of the patient in hospital and importantly the healing. Aboriginal people quite often face stereotypes, stigma and racism and this can put many barriers up from prior experience. There is a need to make sure the patient completely understands what is happening. Communication is quite often lacking. We need to understand all aspects*

*to enable us to close the gap. As an Elder I am quite often asked for advice and assistance, I think every hospital should have Aboriginal advisors.*

***(Wurundjeri Elder, Aunty Di Kerr)***

**Community meaning for Cultural Responsiveness and Cultural Safety**

|  |  |  |  |
| --- | --- | --- | --- |
| **Listening** | **Understanding** | **Empathy** | **Respect** |
| **Cultural** Love | Equality | No racism | Consideration |
| **Responsiveness** Cultural knowledge | Involved | Acknowledged | Trained staff |
| Responsive | Caring | Genuine |  |
| **Comfortable**  **Cultural** At ease | **Friendly**  AHLOs / Aboriginal staff | **Artwork**  Still on my country | **Control**  Culture acknowledged |
| **Safety** Family friendly | Flags | Engaged | At home |
| Not different | Not the same | Welcome |  |



*It’s not always about money… culture doesn’t cost much*

***(Community member)***

**The Aboriginal Health Workforce**

I want to know why they don’t employ our people and when they do it is always as gardeners or maintenance. We want our people being doctors and nurses and then we get to see them and they understand us

(Community member)

**High level commitment**

[The CEO] is a lovely person! Makes us feel very welcome. Always says hello. Before, it wasn’t like that, never!

(Community member)

[The CEO] is excellent… and brought great change

(ACCHO staff member)

**Aboriginal Health Liaison Officers (AHLOs)**

The AHLO is great. She communicates constantly and always calls to

remind me of appointments, but the overall service probably isn’t culturally responsive

(Community member and Elder)

We need an AHLO to walk us through all the steps… what are our rights and what are the processes and why and why not things happen while we are in the hospital

(Community member and Elder)

It’s good that we’ve got an AHLO. They make you feel comfy, and less stressed. The other side don’t understand us

(Community member)

**The physical environment**

I think more can be done in a visual sense with the environment... it makes me feel safe

(Community Member)

We’re now seeing more and more cultural recognition through artwork etcetera, and all the Acknowledgement of Country

(Community member)

**Engagement and partnerships with Aboriginal Community Controlled Health Organisations (ACCHOs)**

We could not have a relationship with the [the ACCHO] if it was not for the connection our AHLO has with them. Well at least it would be harder but we recognise this is an extra and sometimes difficult addition to [names AHLO] job

(Executive Manager)

I work hard at building the relationship between the hospital and [the ACCHO] but this is critical to building competence and understanding

(AHLO)

The ACCHO relationship is a hell of

a lot better than ever before. Multiple specific services are running now too.

This is all my work

(AHLO)

We are working really hard on our relationship [with local ACCHO] but it’s not easy. We thought we were going well and then the CEO changed and that changed everything. Then the CEO changed again and it got better. We need to work harder and make the relationships stronger and sustainable but they are pretty good… for now

(Hospital Executive)