

Institutional Audit Checklist #4: Evaluation of Current Actions to Enhance Cultural & Linguistic Competence

(Note: This checklist is an internal assessment of current practices. It may be helpful to ask or consult with the training department and/or human resources department when completing this section of the audit.)

1. Organizational Mission Statement:

- a. Staff diversity is mentioned in our mission statement. **Yes** **No**
- b. Culturally and linguistically appropriate care is part of our mission statement. **Yes** **No**

2. Internal Organizational Communications

- a. The need to offer culturally and linguistically appropriate services to diverse populations is frequently mentioned in internal memos, publications and internal computer notices. **Yes** **No**
 - 1) Indicate the number of times this has been mentioned in communications during the past month. _____
 - 2) Indicate the number of times during the past 6 months. _____
- b. The need for cultural awareness and sensitivity to colleagues of different races, ethnicities and cultures is a frequent topic of internal memos, publications and over the internet. **Yes** **No**
 - 1) Indicate the number of times this has been mentioned in communications during the past month. _____
 - 2) Indicate the number of times during the past 6 months. _____

3. Cultural Diversity Education

- a. An internal course(s) in the cultural beliefs of our patient populations is required of all staff. **Yes** **No**
(If answered **No**, proceed to #3f. If answered **Yes**, continue with #3c.)
- b. The departments/individuals required to take the course(s) are:
 - 1) _____ 2) _____ 3) _____
 - 4) _____ 5) _____ 6) _____
- c. List the topics covered by the course(s). For example, the religious/cultural beliefs, proper etiquette (i.e. forms of address, rules of touching, etc.) and/or specific health/illness beliefs and practices of a particular patient group and the appropriate treatment modification.
 - 1) _____ 2) _____ 3) _____
 - 4) _____ 5) _____ 6) _____
- d. Indicate the length of the course(s) in hours. _____
- e. Indicate how many times the course(s) are offered per year. _____
- f. We provide specific teambuilding provisions to improve the communication and teamwork between employees of different cultural, language and ethnic groups. **Yes** **No**

4. Community Involvement (see Checklist #6)

We regularly work with and/or consult with our community's cultural, ethnic and religious groups regarding the forms of care and services which should be made available to their members. **Yes** **No**

5. Other Measures

List all other measures below which the organization *has already taken* as a means of insuring culturally and linguistically competent care and services (i.e. HR has been instructed to increase the diversity of staff at all levels or cultural competence is used as an indicator of career advancement.)

- a. _____
- b. _____
- c. _____

6. Overall Rating

Rate our organization's overall status in cultural competence at this time.

Fully competent _____ **Excellent** _____ **Moderate** _____ **Needs much improvement** _____