

Cultural Competence Guideline project

Evaluation summary report

What is the Cultural Competence Guideline project?

Cultural competence refers to practices that reflect ethical and effective participation in personal and professional intercultural settings. The aim of this Project is to optimise the experiences of the Aboriginal and Torres Strait Islander clients at non-Aboriginal non-government Alcohol and Other Drugs services in NSW, by standardising and enhancing cultural competence of these services. The project involved five steps:

- 1. Developing a best-practice guideline:** (the *Alcohol and Other Drugs Treatment Guidelines for Working with Aboriginal and Torres Strait Islander people in a non-Aboriginal setting*), which describes key elements of culturally competent service delivery in non-Aboriginal NGO services.
- 2. Baseline audit:** Using the Guidelines to design and implement a structured baseline audit of current practice.
- 3. Audit report:** Providing written feedback to services on the audit.
- 4. Implementation workshop:** Undertaking a workshop with key staff from service providers to review the written feedback, set goals for improvement and identify activities to operationalise their goals.
- 5. Follow-up audit:** Conducting a re-audit of services to assess change.

Who was involved with the project?

- The Project was implemented at 15 non-Aboriginal non-government Alcohol and Other Drugs services in regional and urban NSW.
- The Project Team was Raechel Wallace and Julaine Allan.
- The Project was overseen by the Network of Alcohol and other Drugs Agencies (NADA).
- The Project was funded by a coalition of Primary Health Networks (PHNs).
- This evaluation was run by the National Drug and Alcohol Research Centre, UNSW.

Key findings

- The intervention process improved the cultural competence audit scores at all participating services, and this tended to flow through to an increase in episodes of care provided to Aboriginal people.
- This is encouraging given the short time frame that services had to implement cultural competence changes following the baseline audit.
- The service use outcomes could easily continue to be monitored over time because the data are routinely collected administrative data and would provide a better understanding of the longer-term impacts of the cultural competence improvements made by services.

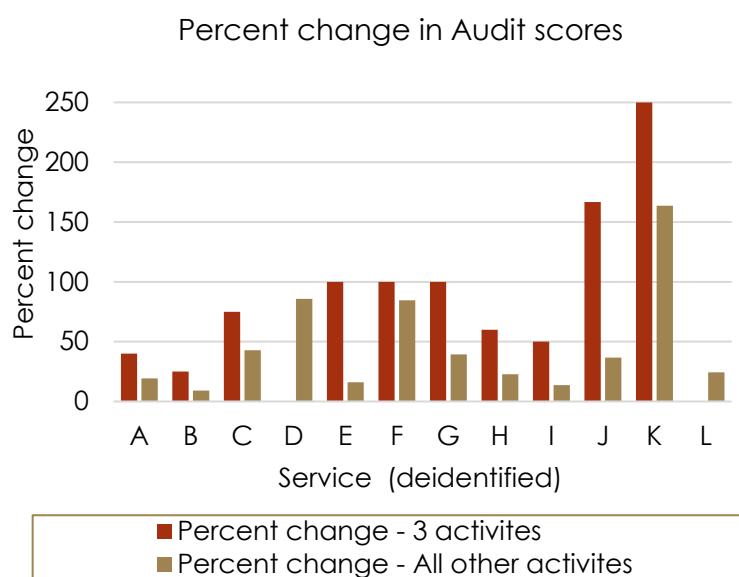
Was the project implemented consistently at the services?

- Fifteen services were identified to participate in the Project. Of these, **twelve services completed the entirety of the Project** (steps 2 to 5 above).
- One service completed all except the follow-up audit; one withdrew after the baseline audit; and another withdrew before completing any part of the project.
- Service staff rated the Project resources (e.g. feedback reports and action planning logs) as particularly useful tools for implementing their action plans.

What were the enablers and barriers to implementing cultural competence activities at the services?

Common enablers	Common barriers
<ul style="list-style-type: none"> • Timing of project with service changes or setting up new programs • Interest in the project from multiple levels within services • Resources/staff time available to progress activities 	<ul style="list-style-type: none"> • Limited access to funding and time to progress activities • Challenges hiring Aboriginal staff or culturally competent staff • The need to balance the needs of varied population groups • Difficulty adapting activities to different service delivery models • Limited time (3 months) to implement change • Varied skill level across staff
<p><i>Enablers and barriers reported by managers during interviews with the evaluation team.</i></p>	

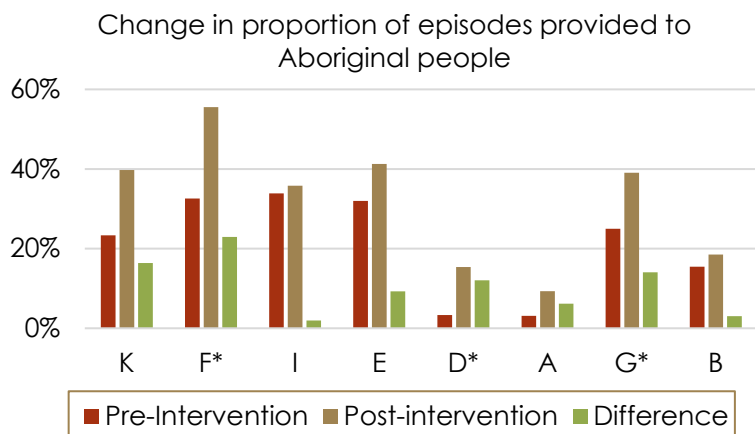
Did the project improve the cultural competence of services according to the baseline and follow-up audits?



Twelve services completed both baseline and follow-up audits.

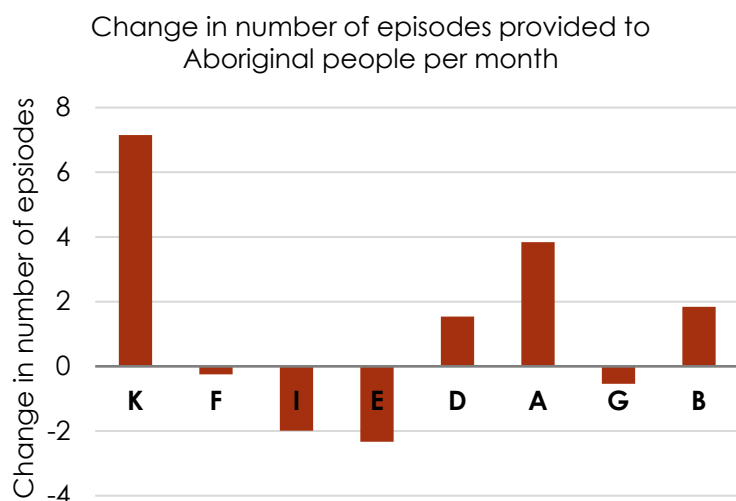
Ten out of twelve services had an **improvement in their cultural competence audit score** in the three key action areas. On average, audit ratings increased by 2.4 points (out of 9), improving upon baseline scores by an average of 81%. All twelve services had an **improvement in their audit score** for all other activities, with an average increase of 8.3 points (out of 54), improving upon baseline scores by an average of 46%.

Was there a change the proportion of episodes of care provided to Aboriginal people versus non-Aboriginal people?



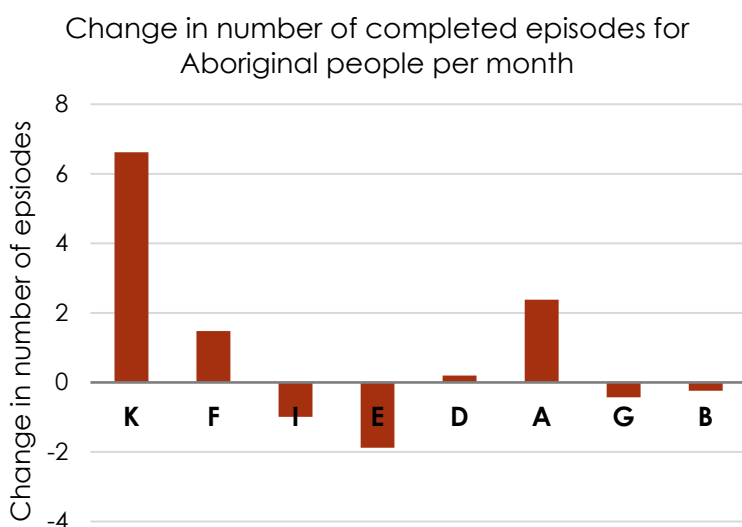
Eight services that consented to an examination of routinely collected administrative data. All eight showed an **increase in the proportion of episodes provided to Aboriginal people** versus non-Aboriginal people, with an average increase of 11%. This increase was statistically significant for three out of the eight services.

Was there a change the total number of episodes of care provided to Aboriginal people?



Four out of eight services showed an **increase** in the number of episodes provided to Aboriginal people per month after the project was implemented. This increase was statistically significant for one of the services. Some services only provided care to small numbers of Aboriginal people, meaning that monitoring this outcome over a longer period of time may be needed to be able to accurately estimate changes in service provision.

Was there a change the number of completed episodes of care by Aboriginal people?



Four out of eight services showed an **increase** in the number of completed episodes by Aboriginal people per month, after the project was implemented. This increase was statistically significant for two of the services. Again, monitoring this outcome over a longer period of time may be needed to be more accurately estimate changes in episode completion rates by Aboriginal clients.