1. What is cultural competence?

A complex integration of knowledge, attitudes, and skills applied in cross-cultural encounters resulting in appropriate and effective interactions between doctors and patients.

The medical profession’s responsibility of competence, respect and beneficence that enables effective functioning in the context of cultural differences.

2. Why does it matter?

Health inequalities for ethnic minority patients extensively documented. Culturally incompetent healthcare providers contribute to health inequalities. Rapid, recent, significant change in the ethnic make-up of the population.

3. Aim of this research

• To assess the baseline cultural competence of doctors in higher specialist training (SpRs) in Ireland.
• To assess attitudes towards and need for cultural competency training of SpRs.
• To make recommendations on the inclusion of cultural competence in postgraduate medical training in Ireland.

4. Methods

Internationally validated Clinical Cultural Competence Questionnaire (CCCCQ) which assesses knowledge, attitudes, and skills in the provision of culturally competent care.

In addition, open-ended questions about barriers to the incorporation of training into the postgraduate curriculum.

A link to online CCCCQ distributed via email to SpRs in:
• Royal College of Physicians of Ireland (RCPI)
• Royal College of Surgeons in Ireland (RCSI)
• Irish College of General Practitioners (ICGP)
• Irish Psychiatric Training Programme (IPTr)

Data analysed using StatsDirect® (v2.7.7).

5. Key results

Two thirds (65%) of respondents had at least weekly contact with patients of a different ethnic background to themselves (Fig 2).

Majority (83%) of respondents rated training as ‘very important’ or ‘important’.

Previous training in equality, diversity or intercultural matters was uncommon:
• 14.5% during undergraduate medical training
• 9.8% at CME / CPD sessions
• 26.3% during Higher Medical training

Of those who had received training, majority (81%) felt it was either ‘relevant’ or ‘very relevant’ (Fig 3).

6. Key recommendations

Incorporate clinical cultural competency training into postgraduate medical training.

Obtain high level support and endorsement.

Identify suitably qualified trainers.

Encourage uptake of training by:
• Facilitating attendance
• Imparting relevance to daily clinical practice
• Emphasising patient safety, obligations under equality legislation, litigation issues, health inequalities, and professional responsibility
• Accreditation of training

Target priority content areas (due to lack of resources) identified in this research:
• Imparting relevance to daily clinical practice
• Emphasising patient safety, obligations under equality legislation, litigation issues, health inequalities, and professional responsibility
• Accreditation of training

Limitation of study:
• Fewer than 20% of SpRs have received training.
• Lack of support / leadership to provide culturally competent care.

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