

5.15. Culturally appropriate care

5.15.1. Policy

We aim to identify important and significant cultural groups within our practice and have implemented strategies to meet their needs. We also aim to accommodate the specific needs of patients who experience disadvantage and increased disease risk whether due to socioeconomic factors, educational or literacy issues, cultural background, or disability (refer to **Section 5.12 - Patient rights**).

In order to improve health outcomes, we encourage our:

- Patients to self-identify their Aboriginal and/or Torres Strait Islander origin or cultural background,
 and
- Practice team members to ask patients of their Aboriginal and/or Torres Strait Islander or other cultural background.

We are sensitive and aware that there may be many reasons why patients are reluctant to identify their Aboriginal and/or Torres Strait Islander or other cultural background, and equally there are reasons why practice team members are reluctant to ask about the cultural background of our patients.

The entry of information about the Aboriginal and/or Torres Strait Islander or other cultural background of patients into health records is undertaken in a standardised manner that enables the extraction of data.

When patients are distressed, we provide appropriate care and privacy which also respects their cultural practices (refer to **Section 5.2 - Appointments**).

We know how to communicate with patients who do not speak the primary language of our practice team or who have communication impairment, and our practice has a list of contact details for interpreters and other communication services (refer to **Section 5.14 – Non-English-speaking patients**).

5.15.2. Procedure

Our practice routinely obtains and records the cultural background of our new and existing patients. Cultural background and ethnicity, e.g. Aboriginal and/or Torres Strait Islander background, can be an important indication of clinical risk factors and can assist our general practitioners and other clinical team members in providing disease prevention and in delivering culturally appropriate care.

We have identified the main cultural groups in our practice and endeavour to provide culturally appropriate written health information.

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We collect information about the country of birth, languages spoken and any other additional cultural information.

The standard indigenous status question asked is "Are you of Aboriginal or Torres Strait Islander origin?" This question is asked of all patients, irrespective of appearance, country of birth or whether our practice team members know of the patient or their family background. Our practice collects this information from patients initially as part of our *New Patient Information Form*.

Our clinical software has the option to input Aboriginal and/or Torres Strait Islander status or other cultural backgrounds; therefore, we use the drop-down options rather than free-text to assist with extracting the information for preventative activities.

To encourage Aboriginal and/or Torres Strait Islander origin patients to self-identify, we have self-identification posters in the waiting room