

PCREF Cultural Competencies

National Competencies

Cultural Awareness		
<p>Definition: Cultural awareness is about recognising and understanding the needs of the diverse cultural backgrounds of the communities a Trust serves. This encompasses awareness of and sensitivity to socioeconomic issues faced by local populations, to ensure services are more inclusive.</p>		
<ul style="list-style-type: none"> Understanding the diverse needs of the community you serve, particularly less visible or vocal communities. Co-design culturally appropriate services that reflect the needs of the community you serve. Collect and monitor evidence to assess cultural competence and embed improvements that is an anti-racist and anti-oppressive approach, including clinical practices and equality, diversity and inclusion practices across the Trust workforce. 		
Developing	Good	Outstanding
<ul style="list-style-type: none"> Services have some awareness of the diverse communities they serve. Services consult with local diverse communities about how to make services more culturally appropriate. 	<ul style="list-style-type: none"> Services have a comprehensive understanding of the diverse communities they serve and their differing needs; and actively seek out and include less visible or vocal communities. Services recognise the gaps in knowledge turn to people with lived experience to better understand these needs, and develop more holistic understanding of mental health, including cultural and religious beliefs. Services have access to a designated group of service users and carers of diverse backgrounds that co-designs services alongside clinicians. 	<ul style="list-style-type: none"> All staff attend regular coproduced, co-delivered training that enhances understanding the needs of local diverse communities. Services have adapted to accommodate less visible or less vocal local communities. Staff with lived experiences from a range of diverse backgrounds are included in decision making. Services regularly monitors data to ensure that their practices are making a positive impact.
Partnership Working		
<p>Definition: Partnership working is about mental health services working more closely with racialised and ethnically and culturally diverse communities, leaders and other organisations beyond the NHS, such as religious groups, ethnic led VCSE organisations, social care and others to support wellness in the round.</p>		
<ul style="list-style-type: none"> Actively engage and develop meaningful and sustainable partnerships at multiple levels ensuring the parity of relationship with your partners are equitable. 		

- Promote community champions to build trust and allyship.

Developing	Good	Outstanding
<ul style="list-style-type: none"> • Trusts connect with local communities which include ethnically and culturally diverse VCSE (Voluntary, Community, Social Enterprise) organisations. • Services are developing meaningful, sustainable partnerships with local diverse communities. • Trusts actively seek community champions in order to start to build trust with local communities. 	<ul style="list-style-type: none"> • Diverse communities are actively involved in service design, testing and development, lending their specialist cultural knowledge, local knowledge and expertise. • Opportunities are created for mutual learning with partnership organisations to develop a more holistic understanding of experiences of mental health. • Services collaborate with partnership organisations to signpost service users and carers to community spaces. 	<ul style="list-style-type: none"> • Services have established sustainable, equitable partnerships with their local community groups and have codeveloped community spaces to support service users. • Services and their community partners, including VCSE organisations share a single vision statement. • Services demonstrate the collective impact of each partner’s involvement by routinely monitoring and evaluating progress.

Workforce

Definition: A culturally competent and diverse **workforce** that has a positive impact on patient and carers from racialised and ethnic minority communities; and creates a safe space where the workforce champions inclusive leadership, shares learning, intentionally embeds anti-racist approaches, and tracks progress.

- Champion inclusive leadership and embed ‘Cultural Peer Support’. In particular, raise the profile of ethnic minority staff to enable them to share their lived experiences in the workforce to reduce racial basis from occurring.
- Support the workforce to improve on staff wellbeing to meet the specific needs of racialised and ethnic minority patients and carers. (decided to change this as the WRES does not address mental wellbeing of staff’)

Developing	Good	Outstanding
<ul style="list-style-type: none"> • Trusts submit the annual WRES report as required and show progress against the agreed indicators of workforce equality. • Services raise the profile of their ethnically and culturally diverse staff, enabling them to share their lived experience within the workforce. 	<ul style="list-style-type: none"> • Trusts engage with their ethnically diverse and underrepresented workforce and draw up plans to bring about equality of outcomes. This may include agreeing a local level indicator that measures mental wellbeing. • Trusts and services monitor the wellbeing of staff from ethnically and culturally diverse groups, with support clearly provided, and appropriate safe spaces to share experiences. 	<ul style="list-style-type: none"> • Trust have a well-established equality network for ethnically diverse and underrepresented staff. • Equality network(s) is actively involved in identifying and implementing initiatives to improve recruitment, retention, career progression.

Staff Knowledge and Awareness

Definition: **Staff Knowledge and Awareness** is about recognising and understanding the racialised experiences of the communities a trust serves, and overcoming biases and prejudices by acting upon them.

- Think about how your training standards, policies and practices support staff to respond to the diverse needs of ethnic communities and make improvements where necessary.

Developing	Good	Outstanding
<ul style="list-style-type: none"> • Service leadership is inclusive of service user views, with ad hoc service user presence at board meetings. • Support is available to the workforce to improve staff wellbeing. • Managers use prompts in appraisals/supervision that consider the knowledge and awareness skills related to working with diverse communities. 	<ul style="list-style-type: none"> • Services draw upon directorate-level workforce equity plans (such as the FLAIR: Racism in the workplace Plan) in collaboration with ethnically and culturally diverse workforce to improve equality of outcomes. • Leadership Teams consistently include patients and carers with lived experience of accessing services at meetings for decision-making. • Staff attend multiple and frequent learning opportunities, whether on the Intranet or through Communities of Practice, specifically about cultural competence so learning can be shared trustwide. 	<ul style="list-style-type: none"> • Services are actively engaged with local and Trust-wide networks for ethnically and culturally diverse staff. • Recruiting managers have actively identified and implemented initiatives to improve the recruitment and retention of its diverse staff as well as their career progression. • Services have regular learning opportunities for staff which are budgeted for in advance, and involve service users, carers and community groups.

Co-Learning

Definition: **Co-Learning** is a two-way process that strengthens collaborative knowledge sharing beyond co-production principles, and focuses on how trusts can raise awareness of early intervention support amongst racialised and ethnically and culturally diverse communities, and learn more about community concerns and barriers in return.

- Champion 'Reciprocal' and mutual co-learning – an environment where everyone can be both a teacher and a learner.
- Trusts work with community champions or undertakes active outreach to raise awareness of early intervention services cultural needs.

Developing	Good	Outstanding
<ul style="list-style-type: none"> • Services identify gaps in staff, service user and community knowledge and begin consulting about how to rectify this. 	<ul style="list-style-type: none"> • Service leads attend directorate-level strategic groups comprising service users, carers and community groups to design and facilitate co-learning processes. 	<ul style="list-style-type: none"> • Services work cross-directorate to embedded and established Trust-wide co-learning in a reciprocal way. • These comprise service users, carers and community groups that represent the local

	<ul style="list-style-type: none"> Services acknowledge barriers identified by existing research and consultations, and work with local community leaders to ensure referral routes for early interventions are clearly communicated to diverse communities. 	<p>population and include people of intersecting identities.</p> <ul style="list-style-type: none"> Services have a clear log of recommendations made based on barriers identified with service users and carers, and regularly demonstrate improvements with a “You Said, We Did” system.
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Co-Production

Definition: **Co-production** is ensuring ethnically and culturally diverse patients and carers are treated as equal partners in decision making on their care and treatment plans, and actively involved in the design, development and review of care pathways. When describing a service, project or piece of work as [coproduced](#), this must mean power-sharing from design to delivery.

- Create a space for patients and carers from racialised and ethnically and culturally diverse communities to have shared decision making.
- Ensure patients and carers from racialised and ethnically and culturally diverse communities are actively involved in the end to end process of designing and delivering culturally competent and patient-centred services.

Developing	Good	Outstanding
<ul style="list-style-type: none"> Racialised and ethnically and culturally diverse patients and carers are consulted when designing and delivering services. 	<ul style="list-style-type: none"> Services are co-producing quality improvement projects with culturally diverse patients and carers. Services have identified and involved less visible or less vocal local communities. 	<ul style="list-style-type: none"> Multiple opportunities are available for service users and carers to be involved in services at coproduction, codesign and codelivery. Service users, carers, and community groups are involved and represented from concept to design to delivery. The patients and carers involved are of various cultural, religious and racial backgrounds, with intersectional identities and knowledge of the same. There is an equal partnership between service users, carers and staff, including at the decision-making level.

Local Competencies

Trauma Informed Care

Definition: **Trauma-Informed Care** is an approach to health and care interventions which is grounded in the understanding that trauma exposure can impact an individual's neurological, biological, psychological and social development.

- Honour the six principles of trauma-informed care, which all play a part in cultural competence:
 - Trustworthiness and transparency
 - Empowerment, voice and choice
 - Cultural, historical and gender issues
 - Peer support
 - Collaboration and mutuality
 - Safety
- Understand the multifaceted and complex nature of trauma and its impact on mental and physical health, ensuring that services endeavour to help and not retraumatise service users – not just through individual practice but through systems.

Developing	Good	Outstanding
<ul style="list-style-type: none"> • Services commit to being trauma-informed, including this in their annual equality performance plan. • Services understand and promote awareness of the broader impact of trauma beyond the clinical definition. • Services are involved in social media campaigns to promote their commitment to being trauma-informed. 	<ul style="list-style-type: none"> • Staff are attending Trauma-Informed Care training via the ELFT Learning Academy and external agencies. Trauma-Informed Care training is completed by all staff within the service. • Service users are supported to access advocacy services. Services locate and partner with advocacy services that are culturally appropriate and accessible to service users and carers. 	<ul style="list-style-type: none"> • Trauma-informed is integrated into clinical supervision and performance reviews. Systemic changes have been made from the top down, with special sensitivity to the necessity of police involvement and a concerted effort to reduce the disproportionate impact of restrictive practice on racialised communities. • In-person training is fully coproduced and co-delivered with a diverse range of service users and carers in roles within the Trust. • Services provide spaces to service users and carers for increased accessibility of information on medication, side-effects, and legislation.

Intersectionality

Definition: **Intersectionality** is understanding the unique needs of people with multiple marginalised identities, such as Black LGBTQIA+ people or disabled people of faith.

- Within the Trust, this means going beyond basic understanding of protected characteristics under the Equality Act 2010 and considering where those characteristics intersect, for instance marginalisation through race and gender for a South Asian woman.
- It also means awareness that certain communities may be less vocal than others, particularly those that are invisible within a larger marginalised or minoritised community (such as LGBTQIA+ Jewish or Muslim people).
- This approach should be taken not only by staff with marginalised identities but across the board, with recognition of privilege and biases where applicable.

Developing	Good	Outstanding
<ul style="list-style-type: none"> • Services understand intersectionality, and have considered social impacts beyond the 9 protected characteristics of the Equality Act 2010. • Services are involved in awareness campaigns promoting intersectional approaches to equity, diversity and inclusion. • Services are regularly collating feedback which highlights the intersectional experiences of staff, service users, and carers. 	<ul style="list-style-type: none"> • Services have identified intersectional groups that access their services and are able to adapt services to meet their cultural needs. • Services are engaged with communities where intersectionality may impact their service access and outcomes, looking at the experiences of ethnically diverse communities who also represent LGBTQ, faith, and disabled groups. 	<ul style="list-style-type: none"> • Intersectionality underpins service strategies and leadership and is a core element of clinical supervision and formulations. • Services work with a diverse group of staff, services users, carers and voluntary organisations to scrutinise decisions through an intersectional lens.

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