



## Linguistic and Cultural Competency Self-Assessment Survey for Family PACT Providers

This self-assessment survey is for internal use of this office to help assess our efforts to provide services to our clients in a manner that accommodates their diverse linguistic and cultural needs. **This is not a test.** Your responses will be confidential and will not be used to reflect negatively on you or anyone else in this office. Your participation is appreciated as it will help us determine effective strategies for providing culturally appropriate services to our clients.

<b>Date of Survey:</b>	<b>Site Location:</b>	<b>Survey #:</b>			
<b>Please answer each of the questions below by placing checkmarks in the appropriate boxes.</b>					
<b>Participant Information</b>					
1.	<b>How many years have you worked for this office/ provider?</b>				
	<input type="checkbox"/> <1 year	<input type="checkbox"/> 1-3 years	<input type="checkbox"/> 4-6 years	<input type="checkbox"/> 7-10 years	<input type="checkbox"/> >10 years
2.	<b>What is your primary job area/ category?</b>				
	<input type="checkbox"/> Front office	<input type="checkbox"/> Back office	<input type="checkbox"/> Administrative	<input type="checkbox"/> Clinical/Counseling	
3.	<b>What languages do you speak and/or read well? (Check all that apply.)</b>				
	<input type="checkbox"/> Arabic	<input type="checkbox"/> Farsi	<input type="checkbox"/> Mandarin	<input type="checkbox"/> Tagalog	<input type="checkbox"/>
	<input type="checkbox"/> Armenian	<input type="checkbox"/> Hindi	<input type="checkbox"/> Punjabi	<input type="checkbox"/> Thai	<input type="checkbox"/>
	<input type="checkbox"/> Cambodian	<input type="checkbox"/> Hmong	<input type="checkbox"/> Russian	<input type="checkbox"/> Urdu	<input type="checkbox"/>
	<input type="checkbox"/> Cantonese	<input type="checkbox"/> Korean	<input type="checkbox"/> Sign Language	<input type="checkbox"/> Vietnamese	<input type="checkbox"/>
	<input type="checkbox"/> English	<input type="checkbox"/> Laotian	<input type="checkbox"/> Spanish	<input type="checkbox"/>	<input type="checkbox"/>
<b>Client Information</b>					
4.	<b>What languages do your clients use as their primary languages? (Check all that apply.)</b>				
	<input type="checkbox"/> Arabic	<input type="checkbox"/> Farsi	<input type="checkbox"/> Mandarin	<input type="checkbox"/> Tagalog	<input type="checkbox"/>
	<input type="checkbox"/> Armenian	<input type="checkbox"/> Hindi	<input type="checkbox"/> Punjabi	<input type="checkbox"/> Thai	<input type="checkbox"/>
	<input type="checkbox"/> Cambodian	<input type="checkbox"/> Hmong	<input type="checkbox"/> Russian	<input type="checkbox"/> Urdu	<input type="checkbox"/>
	<input type="checkbox"/> Cantonese	<input type="checkbox"/> Korean	<input type="checkbox"/> Sign Language	<input type="checkbox"/> Vietnamese	<input type="checkbox"/>
	<input type="checkbox"/> English	<input type="checkbox"/> Laotian	<input type="checkbox"/> Spanish	<input type="checkbox"/>	<input type="checkbox"/>
5.	<b>What social, cultural, and special-needs groups does your office serve? (Check all that apply.)</b>				
	<input type="checkbox"/> Adolescents	<input type="checkbox"/> East Indian	<input type="checkbox"/> Lesbian, Gay, Bisexual, Transgender	<input type="checkbox"/> Middle Eastern	<input type="checkbox"/>
	<input type="checkbox"/> African American	<input type="checkbox"/> East European		<input type="checkbox"/> Native American	<input type="checkbox"/>
	<input type="checkbox"/> Asian Pacific Islander	<input type="checkbox"/> Hearing Impaired	<input type="checkbox"/> Low/Non Literate	<input type="checkbox"/> Vision Impaired	<input type="checkbox"/>
	<input type="checkbox"/> Caucasian American	<input type="checkbox"/> Latin/Hispanic	<input type="checkbox"/> Males	<input type="checkbox"/>	<input type="checkbox"/>

## Section One: Training and Staff Development

**For each statement, check “Yes” or “No.” If you don’t know or the statement is not applicable to your position, check the corresponding box.**

1.	During the past year, I have attended at least one in-service or training that enhanced my knowledge of the ethnic and/or cultural groups served by my agency.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2.	This past quarter, I have read at least one article that has expanded my knowledge of the client population we serve.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.	Since my hire date, I have had at least one training about the various social, cultural and/or ethnic issues that affect the reproductive health of the clients we serve.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
4.	As part of an in-service or other training, I have had the opportunity to evaluate my own cultural and ethnic beliefs and potential biases.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
5.	In most circumstances, I am able to communicate with people who are different from me without fear or anxiety.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6.	In the past, I have attended training about how to better serve clients who are culturally and ethnically different from me.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7.	I have been trained in how to properly work with an interpreter while maintaining my client’s confidentiality.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
8.	Our agency has books, videos, lists of websites and other resources that staff can use to enhance our knowledge and understanding of the clients we serve.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don’t Know
9.	In the past year, our agency has conducted at least one staff training in the area of cultural competence.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don’t Know
10.	In the last six months, our agency has sponsored at least one activity that has helped improve communication and teamwork between employees of different cultural, language, and ethnic groups.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don’t Know
<p><b>Count the number of checked boxes in each column and enter the total here.</b></p> <p style="text-align: center;"><b>Section One Subtotal</b></p>				

## Section Two: Agency Capacities

**For each statement check “Yes” or “No.” If you don’t know or the statement is not applicable to your position, check the corresponding box.**

11.	Our agency has a way to identify the country of origin of our clients.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
12.	At our agency, we use a posted sign to identify the different languages used by our clients.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
13.	We have trained interpreters easily available for various languages, including sign language.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
14.	As an agency, we have established connections with various community cultural, ethnic, and religious groups to help us better serve our clients.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
15.	Our agency has developed a list of various community resources we can use for referrals to better serve clients of various cultural groups.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
16.	The décor and magazines in our waiting room reflect the diversity of our client population.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
17.	The signs in our clinic are in the languages of the population groups we serve.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
18.	Our agency has the capacity to meet the needs of clients who are hearing or visually impaired.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
19.	Our agency shows its commitment to meeting the needs of adolescents by using peer providers or educators, offering hours that accommodate teens' needs and/or creating a teen-friendly environment.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
20.	Our agency demonstrates its accessibility and willingness to help meet the needs of our client population by offering evening and weekend hours and/or finding ways to assist our clients with transportation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
<p><b>Count the number of checked boxes in each column and enter the total here.</b></p> <p style="text-align: center;"><b>Section Two Subtotal</b></p>				

### Section Three: Health Education

**For each statement check “Yes” or “No.” If you don’t know or the statement is not applicable to your position, check the corresponding box.**

21.	Most client education materials, intake forms, and satisfaction surveys used by our agency are easy-to-read and available in the different languages spoken by our clients.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
22.	Our agency works with a community advisory board to help assess the usefulness and appropriateness of client education materials used by our agency.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
23.	As an agency, we evaluate the reading level of client materials used by our agency.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
24.	Our agency has a way to assess the quality, accuracy, and cultural appropriateness of the materials we use, including translated versions.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
25.	Our agency has a way to identify those clients with low-literacy skills who may need assistance.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
26.	Our agency has identified and used appropriate resources to serve clients who are not able to read in their own language.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
27.	Our agency is committed to providing health education materials that appeal to the various social, cultural, and special-needs groups we serve.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
<p><b>Count the number of checked boxes in each column and enter the total here.</b></p> <p style="text-align: center;"><b>Section Three Subtotal</b></p>				

## Section Four: Administrative Issues

**For each statement check “Yes” or “No.” If you don’t know or the statement is not applicable to your position, check the corresponding box.**

28.	Key staff members of our agency reflect the ethnic, racial, cultural, and language diversity of our client population.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
29.	Our agency's board members reflect the diversity of our client population.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know or N/A
30.	In my opinion, clinic leadership and staff show appreciation and respect for all co-workers no matter their cultural and ethnic background.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
31.	Our agency has a written plan to implement culturally and linguistically appropriate health care services.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
32.	We have written policies to address concerns or complaints voiced by clients regarding unfair or inappropriate treatment due to their race, ethnicity, or the language they speak.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
33.	Our agency annually assesses our progress in implementing culturally and linguistically appropriate health care services.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
<b>Count the number of checked boxes in each column and enter the total here.</b>				
<b>Section Four Subtotal</b>				

**Thank you so much for taking the time to fill out this survey!**

Your answers will be combined with all the other staff members who complete the survey. Once we analyze the results, we will use what we find out to improve the training of our staff and to improve the kind of care we provide to our clients.

Please talk with your supervisor, if you:

- Have any questions about this survey.
- Have any suggestions for staff training regarding this topic.
- Have ideas for improving the way our agency provides care to our clients.
- Would like to learn more about linguistic and cultural competency.

We truly appreciate any input you can give.