

Paradigm Shift from Cultural Competency to Cultural Humility: A Feasibility Study

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Problem

As health care has evolved, part of the discovery is that there remains a lack of a clear definition of cultural competency. Thusly, there has been a shift in the paradigm towards cultural humility as a more effective means to deliver healthcare for all.

Methods

The methods included utilization of a qualitative design to assess the feasibility of creating an online CE module.

A feasibility study, often used by businesses, can be viewed as a tool to assess practicality of proposed projects.

The data collected was via password protected email correspondence, interviews, and meetings.

Illustration

Cultural Humility Principles

1. Lifelong commitment to learning and critical self-reflection

2. Desire to fix power imbalances within provider-client dynamic

3. Institutional accountability & mutual respectful partnership based on trust

Discussion & Implications

The unanticipated outcomes included discovering the narrowness of the amount of literature available for CRNAs and cultural humility, and how these factors impose project restrictions. It was also not predicted that obtaining more module content would entail deviation from the original scholarly project PICOT, which would have deleterious effects on the project's primary purpose.

Literature Review

Due to the integration of a more globalized society and increased number of compounded health elements that may present while providing cross cultural care, a keen need for a clear definition specifying how to efficiently provide care for diverse populations is of the utmost importance (Alizadeh & Chavan, 2016; Cai, 2016).

Results

This project required careful analysis of the module creating process to create a feasibility report.

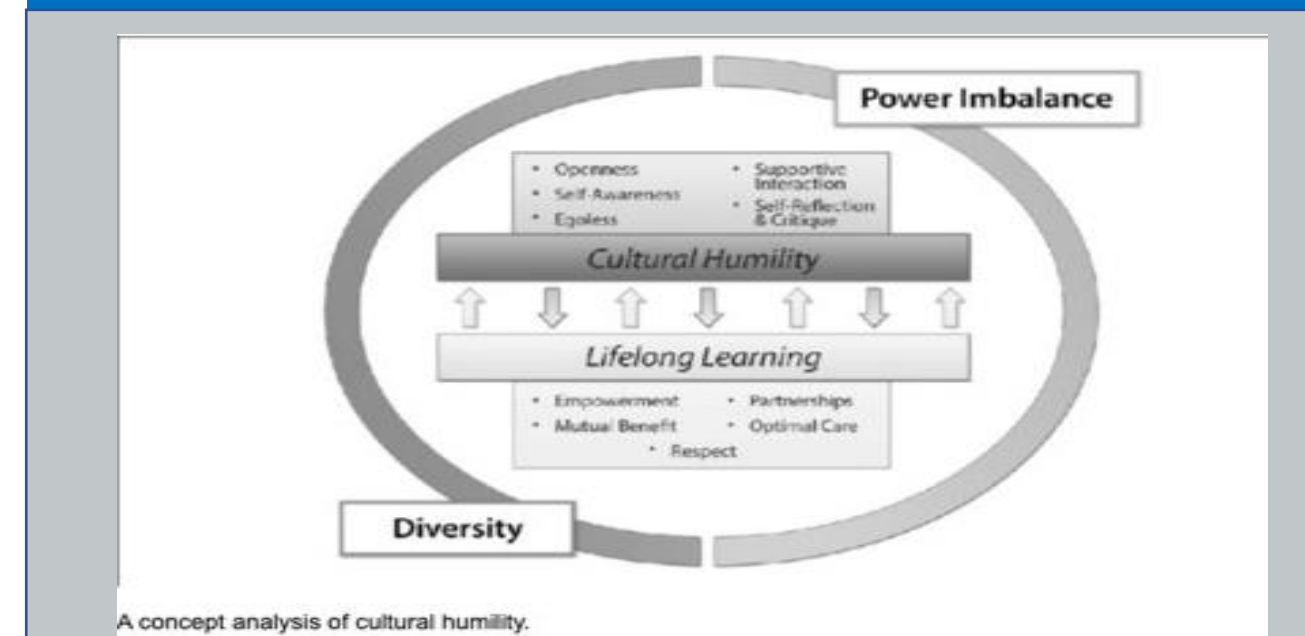
After submission of the original module to Echelon, it took approximately eight weeks before a response was received.

Accordingly, the module did not meet the requirements for accreditation via Echelon.

More Results

Upon researching additional information to attempt to supplement the module, it was determined that the ancillary content would fall outside of the project's defined PICOT question, thus disrupting the original project aims.

Illustration



Conclusions

Continuing education for CRNAs is of utmost importance in order to remain current and advance the provider's knowledge base. The process of creating a module that obtained CE credits from the AANA via Echelon proved to be unsuccessful. However, engaging in this process has created an opportunity for process improvement which will allow future investigators to avoid the time-consuming errors and communication barriers that were encountered during this project.

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