

DEVELOPMENT OF AN LGBTQ POLICY TO INCREASE CULTURAL COMPETENCE IN THE CORRECTIONAL HEALTH SETTING

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PROJECT OVERVIEW



The topic of the DNP project is the “Development of an LGBTQ policy to increase cultural competence in the correctional health setting.”

- Providers have shown discomfort in communicating with the Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) patients during delivery of care (Paradiso & Lally, 2018).
 - Increased growth in healthcare disparities and negative health outcomes related to the care offered to LGBTQ individuals, especially those in the correctional health setting (Jaffer et al., 2016).
- Staff training was implemented to improve cultural competency for LGBTQ individuals
 - Project was consisted of 25 correctional facility registered nurses
- Policy developed to promote cultural competency (Banerjee et al., 2018)
 - Staff training improved adherence to policy (Banerjee et al., 2018)
 - Staff training improved cultural awareness and competency

PROJECT INTRODUCTION & BACKGROUND

- Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) healthcare disparities and staff attitudes towards population
- Lack of RN understanding of LGBTQ culture
- Role of registered nurses to advocate for patients' needs
- Poor attitude towards LGBTQ population which impacts care quality (Hafeez et al., 2017)
 - Hinders patient outcomes (Paradiso & Lally, 2018).
- Host site is in a Correctional health facility in New York City and 25 registered nurses are involved in this DNP project
- The DNP project focuses on improving RN cultural competency with an educational training and by utilizing an LGBTQ policy in the host site

PROJECT PROBLEM

- Literature illustrates that nurses continue to receive little or no training or education to advance their knowledge when dealing with LGBTQ individuals (Sekoni, Gale, Manga-Atangana, Bhadhuri & Jolly, 2015)
- Lack of LGTBQ cultural understanding has caused low cultural competency (Sekoni et al., 2017)
- Poor cultural understanding causes negative attitudes to culture (Sekoni et al., 2017)
- Improving LGTBQ cultural competency is dependent on training of registered nurses
- Studies conducted speculate that personal barriers exist among providers towards the LGBTQ population (Haesler, Bauer & Fetherstonhaugh, 2016)
- Development of a LGBTQ policy in the correctional health setting as an effective way for achieving RN cultural competence

PURPOSE STATEMENT

- The purpose of this DNP project is:
 - To provide staff educational training in a correctional health setting on the LGBTQ population
 - Develop a LGBTQ cultural competence policy as a strategy to increase staff cultural competency.



PROJECT QUESTION

- The project question is:
 - Would a LGBTQ educational training program and cultural competence policy to registered nurses in a correctional health setting increase cultural competence within the time frame of this DNP project?

PROJECT OBJECTIVES

- Enhancing patient health outcomes and decreasing health disparities are among the core objectives of nurses (Paradiso & Lally, 2018). However, the majority of nurses lack the essential skills, knowledge, and cultural competencies to handle the LGBTQ population (Butler et al., 2016).
- The objectives for this project:
 - ❖ To develop an evidence-based (EBP) policy for LGBTQ in the correctional health setting
 - ❖ To provide training on LGBTQ to registered nurses and improve cultural competency
 - ❖ To evaluate impact of the training program by using the pre and post Multicultural counseling self-efficacy scale-racial diversity (MCSE-RD tool)
 - ❖ Disseminate the cultural care of LGBTQ policy to all staff who may care for LGBTQ patients.

REVIEW OF LITERATURE

- Articles published between 2014-2019 describing the impact of educating nurses in correctional facilities about the LGBTQ population
- Negative attitude towards LGBTQ patients
- Attitude can be corrected by training nurses (Cornelius et al., 2015)
- Theme of education and its outcomes on vigilance in clinical area.
- Sub-theme of attitude and understanding of situation.
- Putting policies in place secures consistency of practice
- Outcome evaluation by evaluating attitude of nurses
- Cultural competency of registered nurses improves after training

THEORETICAL MODEL

- The theory of human caring by Jean Watson
- The model states that it is the responsibility of nurses to assume the role of the caring human when attending to patients (Gonzalo, 2016)
- The caring human understands patient needs and can empathize with the patient's holistic needs (Gonzalo, 2016)
- The use of this theory will allow the nurse to engage their own emotions to the caring relationship of patients while looking into the wellness and psychological needs; which can focus on the cultural preferences of patients (Zamanzadeh et al., 2015)
- Nurses who understand the theory of human caring can achieve cultural competency by observing all the needs of the LGBTQ patients (Gonzalo, 2016)



PROJECT DESIGN

- The design for this project utilized a quality improvement (QI) design
- The design focused on improving quality of services in regards to cultural competency in the correctional facility (Hughes, 2008)

PROJECT PLAN

- The DNP project was implemented during a four-week time frame.
- The implementation phase included:
 - Implementing the intervention
 - Data collection
 - Evaluating the project results



IMPLEMENTATION

- Implementation for this DNP project will involve educational training and implementing an LGBTQ policy to improve RN cultural competency
- An educational handout on cultural competency on the LGBTQ population and a policy on cultural care of LGBTQ patients will be used for implementation

DATA COLLECTION

- The data collection procedure included:
 - The pre and posttest Multicultural counseling self-efficacy scale-racial diversity (MCSE-RD) tool, which was completed by the nursing staff and was conducted by the project lead (Sheu, Rigali-Oiler & Lent, 2012)
 - Consists of a 37-item questionnaire that asks about perceived ability to perform different care behaviors with individuals who are from different sexual orientations from you (Sheu et al., 2012)
 - The data was compiled into an Excel spreadsheet created by the project lead and the analysis was done using the SPSS software (Hughto et al., 2017)

RESULTS

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	delivered care before training	4.5400	25	1.06206	.21241
	care delivered after training	5.3933	25	.97644	.19529
Pair 2	attitude level before training	4.7067	25	1.19235	.23847
	attitude level after training	5.5644	25	1.08484	.21697
Pair 3	cultural competency level before training	4.6900	25	.87490	.17498
	cultural competency level after training	5.5925	25	.82386	.16477

- The project was successfully implemented at the practice site and the findings showed that there was an improvement in cultural competency by the registered nurses after the training program and use of the policy was significantly higher than that delivered before the educational training program.
- Descriptive Statistics was done and the findings showed a 4.6900 mean of the cultural competency before the training program and a 5.5925 mean after the program, and had a significant effect on enhancing RNs' understanding of the beliefs, norms, and needs of the LGBTQ population.
- The findings indicated the mean attitude level of the nurses to LGBTQ patients before the training program was 4.7067. After the training program, the attitude level showed an improvement with a mean of 5.5644.
- This indicates that the implementation of the training program and the use of an LGBTQ policy on cultural competency among the registered nurses helped to create cultural responsiveness among nurses

EVALUATION

- A pre and post Multicultural counseling self-efficacy scale-racial diversity (MCSE-RD) form was utilized to assess cultural competence (Sheu, Rigali-Oiler & Lent, 2012)
- Evaluation entailed assessment of cultural competency
- Evaluation entailed the assessment of the nurse's attitudes towards the LGBTQ population

PROJECT LIMITATIONS

- There were two limitations to this project:
 - The small sample size:
 - A small sample size limits the chance of expression of diverse opinions and this limits the validity of the project results (Dove, Townend, Meslin, Bobrow, Littler, Nicol, ... & Shabani, 2016)
 - Volunteer sample:
 - Using one health correctional facility provides limited opportunities for the staff in volunteering to participate, and this limits the data collection which may affect the diversity of the project (Dove et al., 2016)



FUTURE DISSEMINATION

- Project results will be disseminated to the stakeholders at the practice site.
 - Cultural competency educational training and policy in upcoming orientations for incoming registered nurses as well as the current nursing staff that are in the facility
- Dissemination will also include presenting DNP project results as a DNP presentation to Touro University Nevada (TUN) nursing faculty and peers of the DNP program followed by the submission of the project to the DNP Project Repository.
- Professional organizations in nursing and medical practice.
- Abstract will be given to the American Journal of Nursing, Journal of Nursing Education, and other evidence-based nursing journals for possible publication
- Additional venues for dissemination include the American Nurse Association, Institute of Medicine (IOM), and the American Association of Colleges of Nursing (AACN), for a possible podium or poster presentation

CONCLUSION

- Educational training of registered nurses improves cultural competency
- Utilization of the LGBTQ policy has also shown improvement in RN cultural competency
- Nursing attitudes towards LGBTQ individuals was improved by education

ANY QUESTIONS



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