

**Assessment**

1. Match the following descriptions to the appropriate cultural competency pillar:
	1. Awareness. Description #:\_\_\_\_
	2. Attitude. Description #:\_\_\_\_
	3. Knowledge. Description #:\_\_\_\_
	4. Skills. Description #:\_\_\_\_

|  |
| --- |
| 1. Exploring your values, beliefs, and personal cultural norms; Understanding your openness to differing views and opinions; Being curious about culture and lives of others, being nonjudgmental about differences
 |
| 1. Examining your own understanding and beliefs; Reflecting on your actions, reactions, and interpretations; Recognizing opportunities for personal development
 |
| 1. Integrating one’s awareness, attitude, and knowledge into repeated practice and interactions with the people they serve
 |
| 1. Seeking out information and developing a deeper understanding of how culture impacts and influences health and healthcare-related interactions
 |

1. Which of the following should be used in your care coordination activities? Select all that apply.
	1. Practice patience and listening.
	2. Center the enrollee’s and family’s needs and preferences in goals and interventions.
	3. Establish your values in conversations so that the enrollee and family can align with your views.
	4. Recognize and accept cultural differences and norms when assessing and care planning.
	5. Offer and use interpreters, visual aids, or other alternatives to meet the enrollee’s and family’s communication preferences.
2. When meeting a new enrollee and their family, what is one way that you can practice cultural competency?
	1. Wait until the end of the conversation to ask about their language preferences.
	2. Avoid asking questions about their religious beliefs.
	3. Skip assessment questions that you think they may not understand.
	4. Spend time with the family asking about their culture, values, and beliefs that might influence the way they prefer to interact with the healthcare system.
3. Family-Centered Care is a way of providing services that assures the health and well-being of children and their families through respectful family/professional partnerships. It honors the strengths, cultures, traditions, and expertise that families and professionals bring to this relationship.
	1. True
	2. False
4. Family-centered care:
	1. Starts with trust, emphasizes autonomy, and focuses on self-efficacy and choice
	2. Recognizes the importance of community-based services
	3. Promotes an individual and developmental approach
	4. All of the above
	5. None of the above
5. Match the following descriptions to the appropriate trauma-informed care principle:
	1. Safety. Description #:\_\_\_\_
	2. Trustworthiness and Transparency. Description #:\_\_\_\_
	3. Peer Support. Description #:\_\_\_\_
	4. Collaboration and Mutuality. Description #:\_\_\_\_
	5. Empowerment, Voice, and Choice. Description #:\_\_\_\_
	6. Cultural, Historical, and Gender Issues. Description #:\_\_\_\_

|  |
| --- |
| 1. Recognize strengths and believe in resiliency and healing. Offer choices and options, focus on skill building, and promote accountability and responsibility
 |
| 1. Come to interactions with humility and responsiveness to past and current biases and stereotypes, including recognizing historical traumas. It is critical to respect autonomy, culture, and beliefs.
 |
| 1. Establish an equal partnership and support shared decision-making. This can include identifying and shifting actual or perceived power differences.
 |
| 1. Leverage and incorporate persons with lived experiences.
 |
| 1. Build and maintain trust within the conversation and relationship. Some ways to do this are to use non-judgmental language, show empathy and compassion, and follow through on commitments.
 |
| 1. Create a safe space, during interactions and within your organization. It is also crucial to establish clear boundaries.
 |

1. What are the Four “Rs” in the Trauma-informed framework?
	1. Realize, Recognize, Respond, Resist Retraumatization
	2. Respect, Rest, Realize, Recognize
	3. Realize, Recognize, Remind, Repeat
	4. Report, Remind, Realize, Recognize
2. Family engagement means:
	1. Goals are given to the family by the care coordinator.
	2. That the family is only a part of the care team after care planning is complete and health decisions have been made.
	3. That the family is an active and equal partner in their child’s care.
	4. Only the family can call their child’s primary care provider.
3. Which of the following should be used in your care coordination activities? Select all that apply.
	1. Focusing on health literacy
	2. Promoting informed decision-making
	3. Building self-management and self-efficacy skills
	4. Waiting to make goals until after a member is home
4. What is one way that you can promote family engagement in your care coordination activities?
	1. Involve the family in the care planning process, co-creating goals that are based on the family’s preferences and values, promoting their personal and family strengths.
	2. Give them handouts when they ask questions.
	3. Don’t share the care plan with them to prevent them from becoming overwhelmed.
	4. Remind them about their child’s limitations each time they ask about available services and supports.

Key:

* 1. 2
	2. 1
	3. 4
	4. 3
1. a, b, d, e
2. d
3. b
4. d
	1. 6
	2. 5
	3. 4
	4. 3
	5. 1
	6. 2
5. a
6. c
7. a, b, c
8. a