Government of **Western Australia**
South Metropolitan Health Service

Multicultural Action Plan
2026 – 2030

Working together to ensure everyone in our diverse community feels safe, welcomed, and respected.

Contents

Aboriginal artwork element from **Wetji (Emu) Dreaming** by artist Nola Naylor.

Acknowledgement of Country

South Metropolitan Health Service respectfully acknowledges the Noongar people both past and present, the traditional owners of the land on which we work. We affirm our commitment to reconciliation through strengthening partnerships and continuing to work with Aboriginal peoples.

Using the term Aboriginal

Within Western Australia, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. Aboriginal and Torres Strait Islander may be referred to in the national context and Indigenous may be referred to in the international context. No disrespect is intended to our Torres Strait Islander colleagues and community.

Acknowledgement of stakeholder input

SMHS staff and community stakeholders contributed their time, knowledge and perspectives as part of this project. We are grateful for their input and also extend thanks to Janali & Co. and the Ethnic Communities Council of WA who led the engagement process.

Acknowledgement of lived experience

Staff and consumers with culturally and linguistically diverse backgrounds generously shared their lived experience to help inform this plan. The rich insights that helped shape this plan reflect the courageous and thoughtful contributions of all who took part.

Foreword

South Metropolitan Health Service (SMHS) is committed to improving the health and wellbeing of all individuals accessing our services. This commitment is guided by our vision of **excellent health care, every time**.

To realise this vision, SMHS acknowledges the critical importance of fostering a harmonious, inclusive environment that respects and responds to the needs of all members of our community. We recognise the vital role that culturally and linguistically diverse (CaLD) consumers, carers and staff play in shaping our services, and we remain committed to ensuring their voices, needs and priorities are reflected in everything we do.

We are proud to launch the **SMHS Multicultural Action Plan 2026–2030 (MAP)**. This plan builds upon the foundations and achievements of our inaugural MAP, while addressing emerging priorities identified through meaningful engagement. It aligns with the Western Australian Multicultural Plan Framework (WAMPF) and reflects our ongoing commitment to equity and inclusion.

We extend our sincere appreciation to the staff, consumers and community groups who contributed to the development of this plan. In particular, we acknowledge the valuable input from the:

- Ethnic Communities Council of WA
- SMHS Multicultural Action Plan Advisory Group
- Janali & Co
- SMHS Safety, Quality and Consumer Engagement (SQCE) team.

Their dedication and collaboration have been instrumental in shaping a plan we are proud to implement over the next five years.

Together, we look forward to continuing our journey toward a more inclusive and equitable health system for all.

Neil Doverty
Chief Executive
South Metropolitan Health Service

SMHS 2030 Multicultural Vision

By 2030, SMHS will be known for providing culturally responsive care, fostering a diverse and inclusive workforce, and cultivating a culture of respect and inclusion.

Every person – consumer or staff – will feel welcome, safe, and empowered.

Multicultural Action Plan Goals

**Goal 1
Culturally intelligent workforce**

**Goal 2
Culturally responsive services**

**Goal 3
Inclusive communication and navigation**

**Goal 4
Culturally safe environment**

**Goal 5
Systemwide accountability**

**Goal 6
Informed and engaged stakeholders**

**Goal 7
Enhanced data capture and measurement**

Introduction

South Metropolitan Health Services (SMHS) serves consumers from a wide range of backgrounds. Across our catchment area, health consumers speak 137 languages at home and identify with 205 unique ancestries. Each day our staff are on the frontline, supporting CaLD consumers to navigate health systems, often in the context of language barriers, varying levels of health literacy and other access challenges.

Our staff reflects the diversity in our community, with 38 per cent born overseas and representing various faiths, cultures and languages. Our diverse workforce is a significant asset that enhances our capacity to understand and respond to the diverse needs of health consumers.

This MAP articulates our commitment to deliver services that are responsive to the needs of all consumers and to cultivating an organisational culture where all staff can thrive. This MAP aligns with the WAMPF and builds on the foundational work that has been driven through the implementation of the first SMHS MAP.

Our seven goals and supporting actions articulate a road map towards achieving SMHS 2030 Multicultural Vision.

Terminology

	Culturally and linguistically diverse (CaLD)	A term generally applied to groups and individuals who differ according to religion, language and ethnicity and whose ancestry is other than Aboriginal, Anglo Saxon or Anglo Celtic.
	Cultural intelligence	Refers to the capability of individuals to understand, adapt and function effectively across different cultural contexts. It goes beyond basic cultural awareness and includes the capacity to recognise cultural difference, adjust behaviours and make decisions that take cultural nuances into consideration.
	Cultural responsiveness	The ability of individuals and systems to respond respectfully and effectively to people of all cultures, in a manner that acknowledges their worth and preserves the dignity of individuals, families and communities.
	Cultural safety	Refers to an environment and practices that enable consumers and staff to feel respected and safe when receiving services or coming to work, regardless of their cultural background. A culturally safe environment is free of racism and discrimination.
	Intersectionality	A term that describes how overlapping social identities such as race, gender, age, disability, sexual orientation, socioeconomic status and culture intersect to shape individual experiences of advantage or disadvantage.
	Multiculturalism	A social policy that recognises cultural and ethnic diversity. In Western Australia, it means all Western Australians are entitled to exercise their rights and participate fully in society, regardless of their different linguistic, religious and ethnic backgrounds.

Overview of SMHS

SMHS delivers health care via hospital and community-based services. The SMHS catchment equates to one quarter of Western Australia's population and covers nine local government areas. In addition, SMHS services regional patients who need to travel to the metropolitan area for care.

SMHS provides the following services:

Fiona Stanley Fremantle Hospital Group (FSFHG)

- Fiona Stanley Hospital (FSH)
- Fremantle Hospital (FH)
- Rottnest Island Nursing Post

Rockingham Peel Group (RkPG)

- Rockingham General Hospital (RGH)
- Murray District Hospital
- Mandurah and Kwinana Community health centres

Peel Health Campus (PHC)

SMHS Community Services

- Complex Needs Coordination Team
- Complex Needs Coordination Team – Mental Health Expansion
- Rehabilitation in the Home
- Home Hospital
- Community Physiotherapy Service
- WA Voluntary Assisted Dying Statewide Care Navigator Service
- SMHS Health Promotion

SMHS Mental Health Services

- Inpatient mental health at Fiona Stanley, Fremantle and Rockingham hospitals Cockburn Health – specialist women's mental health services
- Community Mental Health Services (Rockingham, Peel, Fremantle and Fiona Stanley)

Strategic context

SMHS alignment

This MAP aligns with several key internal SMHS plans and frameworks, including the *SMHS Strategic Plan*. It strongly aligns with SMHS core values and commitment to providing compassionate care and ensuring an equitable and inclusive workforce which reflects the diversity of our SMHS community.

SMHS recognises the need for a welcoming and inclusive culture where diversity is valued, and the social and cultural backgrounds of all patients, carers, families and staff are respected.

Whilst this MAP has a specific focus on equity and inclusion outcomes for CaLD consumers and staff, it sits alongside and intersects with other SMHS strategies and frameworks that provide roadmaps for responding to the intersectional barriers that people from CaLD backgrounds may face. This includes the:

- *SMHS Person-centred Care Framework*
- *SMHS Disability Access and Inclusion Plan*
- *SMHS Equity and Diversity Plan*
- *SMHS Respect in the Workplace Prevention and Response Framework.*

SMHS is also committed to respectful engagement with Aboriginal communities and driving outcomes that reduce health inequities. This is reflected through our SMHS Aboriginal Health Strategy and *SMHS Aboriginal Community and Consumer Engagement Framework*. We affirm our commitment to reconciliation through strengthening partnerships and continuing to work with Aboriginal peoples.

State alignment

The Western Australian Multicultural Policy Framework

In 2020 the State Government introduced the *Western Australian Multicultural Policy Framework (WAMPF)* as a blueprint for the public sector to lead in the implementation of actions that realise the State Government's multicultural vision. Public sector agencies in Western Australia are required to develop MAPs that outline their plan for implementing actions that align with the following WAMPF policy priorities:

- Harmonious and inclusive communities.
- Culturally responsive policies, programs and services.
- Economic, social, cultural and political participation.

The WAMPF policy priorities have been identified against the actions in this MAP.

WA Health Equal Opportunity, Discrimination and Harassment Policy

The *WA Department of Health Equal Opportunity, Discrimination and Harassment Policy* aims to create and maintain an environment where staff members are treated with respect, dignity, fairness and which is free from discrimination and harassment.

It enshrines minimum requirements and responsibilities under a mandatory code of conduct, and health providers must develop internal process to comply with the policy.

WA Health System Languages Services Policy

The WA Department of Health mandatory *Language Services Policy* sets out the minimum standards to enable effective communication with consumers and carers who have difficulty communicating in English.

The policy aims to ensure the delivery of care that is culturally appropriate, trauma informed, equitable, non-discriminatory and safe. The policy supports the delivery of free and targeted language services, including the appropriate and timely engagement of interpreters and translators and staff training.

National alignment

National Safety and Quality Health Service Standards

The Australian Commission on Safety and Quality in Health Care release the National Safety and Quality Health Service (NSQHS) Standards, which set nationally consistent expectations for health care quality nationwide.

Standard 2 Partnering with Consumers is especially relevant in the context of the MAP. It outlines expectations that health service organisations should develop, implement and maintain systems to partner with consumers. This aims to ensure consumers are partners in service planning, design and delivery, as well as being partners in their own care. A commitment to cultural responsiveness and cultural safety will better enable SMHS to meet this standard for our CaLD consumers.

Australian Charter of Healthcare Rights

The *Australian Charter of Healthcare Rights* applies to all people in all places where healthcare is provided in Australia. It sets out what consumers, and their carers can expect when receiving health care. Key rights include the right to:

- access healthcare and treatment
- be cared for in an environment that makes consumers feel safe
- have consumer culture, identity, beliefs and choices recognised and respected
- be provided clear information.

Our achievements to date

SMHS developed its first MAP in 2020. This new plan builds on the significant work that has been progressed over previous years to advance cultural responsiveness and workforce inclusion.

SMHS Multicultural Action Plan 2020–2025 Key achievements
☑ The development of a SMHS Equity and Diversity Plan that promotes sustainable and equitable employment outcomes.
☑ Implementation of workplace events and other initiatives that celebrate cultural diversity and promote inclusivity (e.g. Harmony Week morning teas and recipe eBook).
☑ Integration of cultural competency training into the SMHS education suite and promotion of additional learning opportunities.
☑ Information campaigns to build awareness of interpreter services and promotion of the WA Health Language Services Policy.
☑ Establishment of a database of CaLD community stakeholders, networks and organisations.
☑ Improved CaLD patient data capture across the SMHS system.
☑ A register of religious denominations developed and maintained through pastoral care/chaplaincy services.
☑ Development of easy read and translated feedback forms to guide CaLD consumers.
☑ Promotion of 'Drop the jargon' day to encourage staff to use plain language.
☑ Increased number of staff from a CaLD background employed by SMHS.

Consumer diversity

SMHS provides health services to a diverse catchment population. Census data and SMHS language services requests demonstrate the cultural, religious and linguistic diversity of our consumer base. As part of the development of this plan, a diversity dashboard was developed as a resource to deepen awareness of diversity and to help target engagement. Figure 1 and Figure 2 provide snapshots from the dashboard.

Cultural diversity

205 unique ancestries

35% born overseas

Top five non main English speaking countries of birth

1. India
2. Malaysia
3. Phillippines
4. China
5. Singapore

Linguistic diversity

Top five interpreter requests

1. Mandarin
2. Cantonese
3. Portuguese
4. Arabic
5. Vietnamese

17% people speak a language other than English (LOTE)

137 languages spoken at home

8.9% LOTE speakers have limited English proficiency

Religious diversity

287,855 Secular, no religious belief

274,284 Christianity

12,111 Buddhism
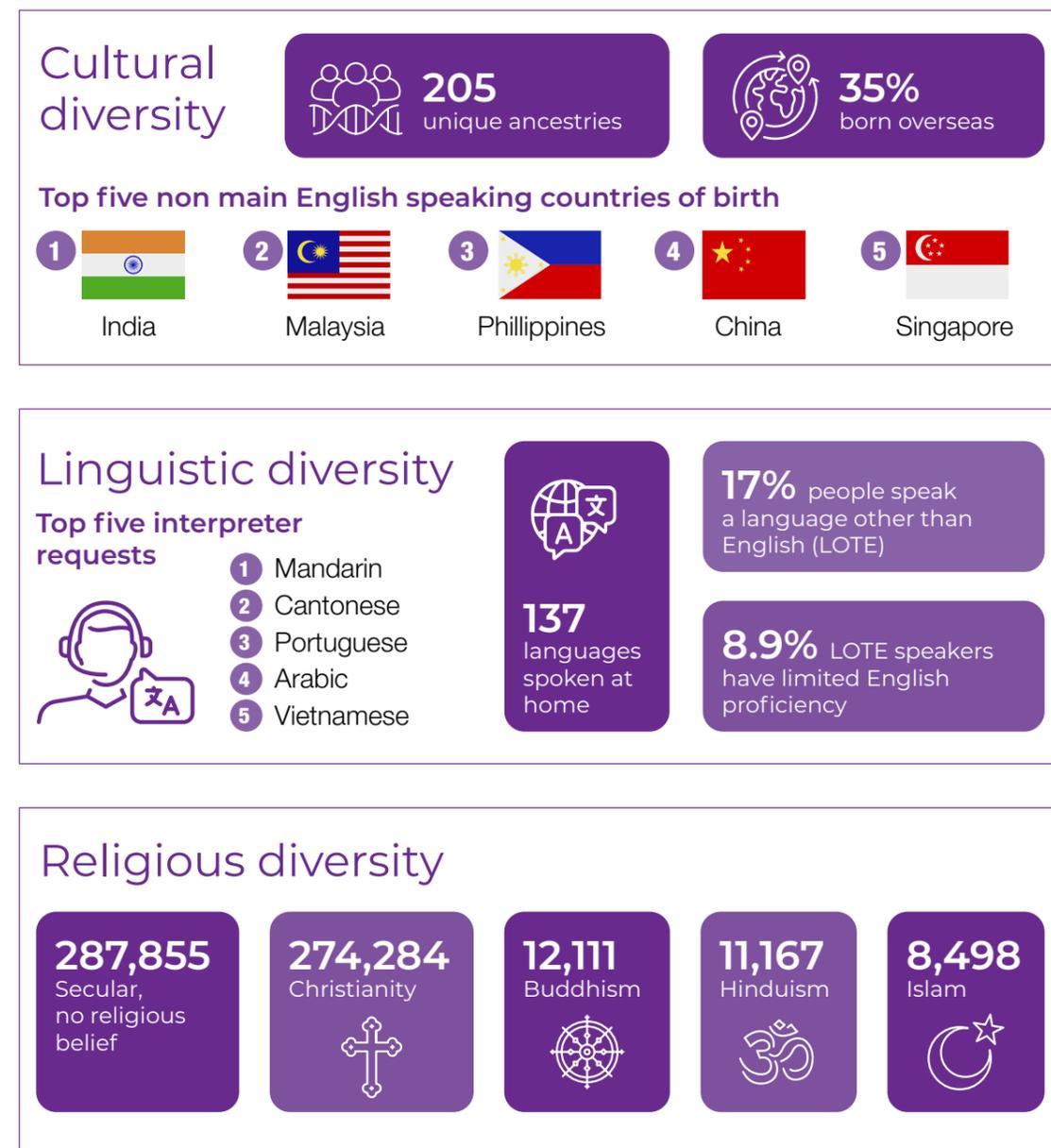
11,167 Hinduism

8,498 Islam

Figure 1. Consumer diversity

Staff diversity

SMHS employs 15,849 staff, and many of these staff come from CaLD backgrounds. SMHS diverse workforce is one of its greatest strengths.

This diversity within the workforce enhances SMHS capacity to deliver culturally appropriate services, strengthens connections with communities, and promotes inclusivity throughout the organisation. Staff from CaLD backgrounds often serve as cultural liaisons, helping to bridge gaps in understanding and communication. Their insights and experiences contribute to improved patient outcomes and foster a more welcoming environment for all.

SMHS currently measures workforce diversity through a diversity questionnaire. See Figure 2 for a snapshot of the CaLD staff demographics.

SMHS staff are born in non-main English speaking countries

38%

Top ten places of birth

1. Australia
2. India
3. England
4. Philippines
5. Malaysia
6. New Zealand
7. Bhutan
8. Zimbabwe
9. Singapore
10. South Africa

Staff and consumers value workforce diversity

We need staff on board who understand the patient's cultural nuances and who can act to break through the language barrier between patient and staff.”
Staff survey

It helps to have works who understand different cultures and can support families.”
Consumer survey

Figure 2. Staff diversity

Plan development

Engagement background

A comprehensive engagement process was undertaken to inform this MAP. This included the:

- establishment of an internal advisory group with representation from staff with lived experience and operational insights
- engagement of CaLD communities through targeted outreach via local governments, community networks and multicultural services.

Insights from consumers, staff and other stakeholders were gathered through surveys, qualitative interviews and workshops.

How we engaged

275 survey responses	**43** interviews	**5** workshops	Advisory group

Who we heard from

123 consumers	**192** staff	**18** stakeholder organisations	**9** community leaders	**10** interpreters

Figure 3. Engagement summary

What we heard

Engagement insights point to an opportunity for SMHS to build on growing awareness to embed a focus on cultural responsiveness and cultural safety. Consumer focused themes included the importance of guiding frameworks and education, while also addressing the practical barriers that impact on communication and service navigation. SMHS staff feedback echoed consumer calls for the need to invest in building the cultural intelligence of the workforce. Other key themes included addressing racism, and fostering an environment that recognises and celebrates diversity, enabling all staff to thrive both personally and professionally. The data below provides a snapshot of the survey results which were unpacked further through interviews and workshops.

Consumer focused themes		Workforce focused themes	
Cultural responsiveness	**49%** of staff cite limited cultural awareness as a major challenge in caring for CaLD patients.	**Inclusive culture**	**72%** of staff believe the SMHS workplace is good or excellent at being inclusive and respectful of all cultural backgrounds.
Cultural safety	**75%** of CaLD consumers reported feeling welcome and respected. **25%** reported perceptions of unfair treatment or discrimination.	**Equitable employment opportunities**	Qualitative data reflected concerns with unconscious bias and the need for supports to navigate recruitment processes and career progression.
Communication	**26%** of staff are very confident using interpreting services. **30%** of CaLD consumers are unaware of their right to an interpreter or translated health information.	**Diverse leadership**	**38%** of staff are from CaLD backgrounds however there is currently no measurement of diversity in leadership.
Service navigation	**8%** of staff believe SMHS services are easy for CaLD consumers to navigate. **40%** of CaLD consumers cite access difficulties— especially when trying to get an appointment.	**Racism and cultural bias**	**47%** of staff reported experiencing or witnessing cultural exclusion or racism. **37%** of CaLD staff reported direct experiences that were attributed to interactions with both colleagues and consumers.

Opportunities for action

The engagement process identified key priorities for action that stakeholders felt should guide the development of the new MAP. These suggestions and ideas broadly fell into the following categories:

Person centred

Maintaining a person-focused lens across cultural responsiveness strategies, reflecting the diverse experiences, needs and identities of CaLD consumers and staff.

Education

Targeted education strategies that focus on cultural norms and nuances, anti-racism and language access.

Guidance

Frameworks, policies and supporting resources that set expectations, drive consistency and provide guidance to staff on cultural responsiveness, anti-racism and language access.

Practical

Flexible approaches that enable practical solutions that address barriers CaLD consumers face navigating and communicating with services.

Representation

Ensuring that CaLD voices are meaningfully represented in decision-making, policy development and organisational leadership.

Celebration

Events and other initiatives that recognise and value of cultural diversity, whilst providing opportunities to celebrate and share culture.

Embedding

Developing mechanisms for embedding initiatives to ensure that the MAP is an effective driver for change across SMHS' services and sites.

Data driven

More effective data collection and reporting mechanisms that can be used to understand workforce and consumer trends, inform decision-making and track improvements.

MAP 2026–2030 overview

Underpinned by seven strategic goals the SMHS MAP 2026–2030 provides a road map for driving improvements across our organisation that contribute to our vision for change.

Multicultural Action Plan vision

By 2030, SMHS will be known for providing culturally responsive care, fostering a diverse and inclusive workforce, and cultivating a culture of respect and inclusion. Every person – consumer or staff – will feel welcome, safe, and empowered.

SMHS Multicultural Action Plan 2026–2030

Goal 1
Cultural intelligent workforce

Goal 2
Culturally responsive services

Goal 3
Inclusive communication and navigation

Goal 4
Culturally safe environment

Enabling actions – enabling implementation and impact across the SMHS system

Goal 5
Systemwide accountability

Goal 6
Informed and engaged stakeholders

Goal 7
Enhanced data capture and measurement

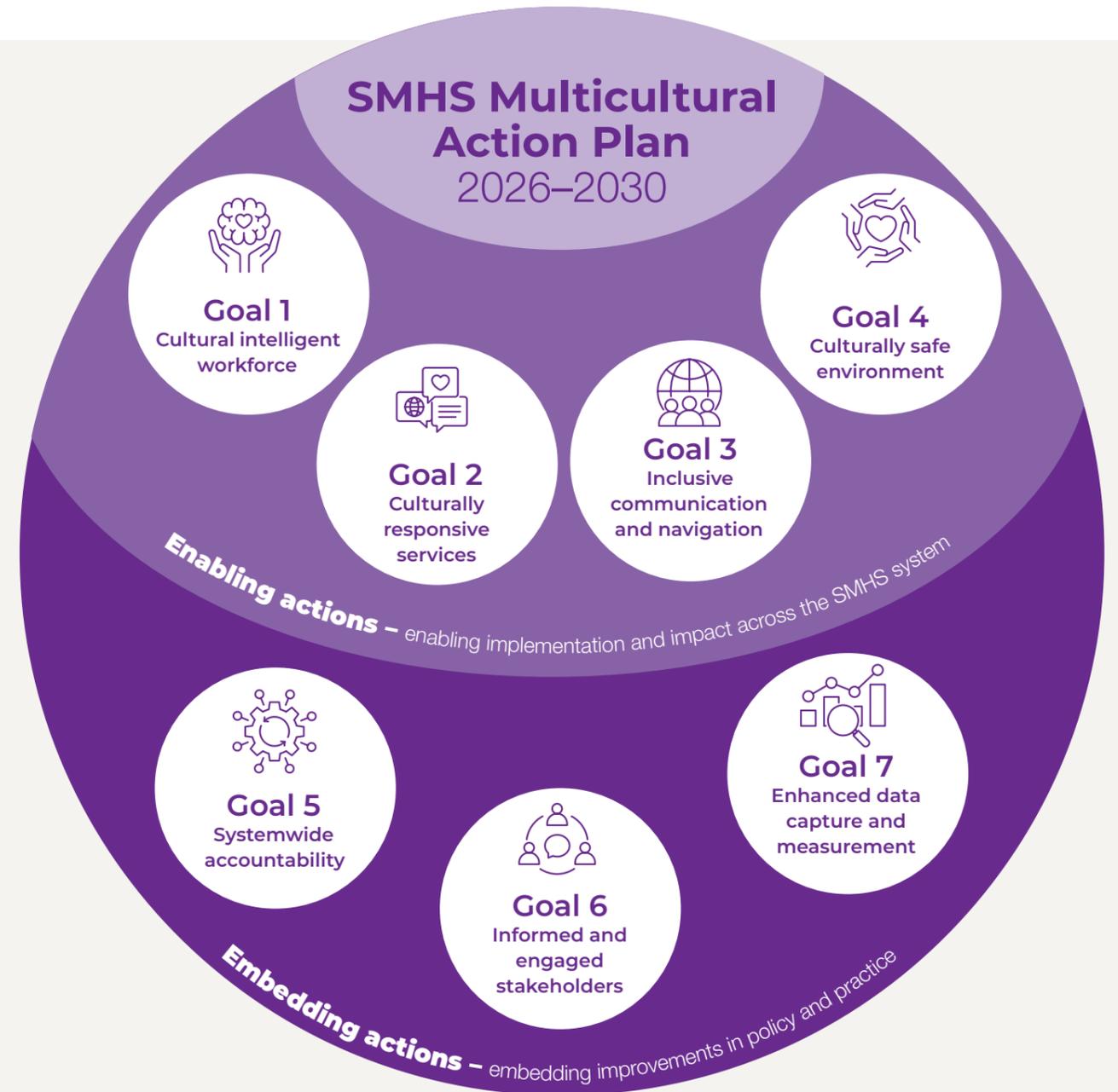**Embedding actions –** embedding improvements in policy and practice

Figure 4. MAP overview

Goal 1: Culturally intelligent workforce

Foster a culturally intelligent workforce by embedding intercultural learning, leadership development, and team-based dialogue into everyday practice.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Empower staff through learning	Develop and deliver a multimodal education program accessible to all staff with a focus on developing cultural intelligence, intercultural communication skills and understanding cultural nuances in a health services context. This includes updating and promoting the Equity Diversity and Inclusion learning suite, promoting Respect in the Workforce e-learning and developing resources to support targeted delivery.	1.1	SMHS Organisational Development SMHS Workforce					▓	Policy Priority 2
Cultivate inclusive leadership	Integrate principles of cultural intelligence in existing leadership training to nurture knowledge, skills and capacity to drive an inclusive culture and lead a culturally diverse workforce.	1.2	SMHS Organisational Development					▓	Policy Priority 2

Goal 2: Culturally responsive services

Advance culturally responsive care across the health service by embedding guiding frameworks, expanding cultural supports, and co-designing practices and policies with CaLD consumers.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Establish a CaLD Consumer Advisory Group	Establish a CaLD Consumer Advisory Group to co-design culturally responsive frameworks, policies and practices.	2.1	SMHS SQCE		▓				Policy Priority 3
Establish cultural care guidelines for CaLD consumers	Design cultural care guidelines and supporting resources for staff that establish clear principles and guidance for culturally responsive care.	2.2	SMHS SQCE				▓		Policy Priority 2
Ensure availability of multifaith prayer and reflection spaces	Investigate provisions for multifaith prayer and reflection spaces across SMHS sites. Identify gaps and plan for increasing provision of space that meets the needs of consumers and staff.	2.3	FSFHG, RkPG, PHC Pastoral care				▓		Policy Priority 1
Expand culturally appropriate meal options	Identify gaps in the provision of culturally appropriate food options across SMHS hospitals services. Develop a plan for addressing gaps and expanding options to cater for consumer needs.	2.4	FSFHG, RkPG, PHC Patient Support Services				▓		Policy Priority 2

Goal 3: Inclusive communication and navigation

Enhance service access and navigation through implementing a standardised approach to language services, a focus on inclusive communication, and co-designing solutions that address barriers faced by CaLD consumers.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Standardise Language services procedures	Audit current Language Services processes across SMHS sites and services against the Language Services Policy to identify gaps and opportunities for improvement.	3.1	Sites/services Language Service leads			�			Policy Priority 2
Increase awareness of Language Services Policy	Promote and deliver training to frontline staff on the Language Services Policy as part of induction processes.	3.2	Sites/services Language Services leads					■	Policy Priority 2
Enhance access to translated information	Create a priority list of documents to translate into community languages to improve access to important information.	3.3	SMHS SQCE				■		Policy Priority 2
Develop a guide to support service navigation	Develop a guide to support services to assess and address common service navigation barriers for CaLD consumers.	3.4	SMHS SQCE			■			Policy Priority 2
Promote clear and inclusive communication	Develop and promote plain language communication guidelines for staff, including avoiding jargon, using repetition and speaking slowly.	3.5	SMHS SQCE SMHS Communications		■				Policy Priority 2

Goal 4: Culturally safe environment

Nurture a culturally safe and inclusive culture where staff, patients, carers and the community are free from racism and discrimination, diversity is valued, and everyday acts of kindness foster trust and belonging.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Celebrate cultural diversity across the workforce	Develop a calendar of cultural celebrations and encourage/empower teams to host events and activities in conjunction with these days of significance.	4.1	SMHS Organisational Development SMHS SQCE FSFHG, RkPG, PHC Pastoral Care			■			
Foster an inclusive culture and prevent racism	Develop and deliver an education campaign that promotes anti-racism messaging and fosters a culture of compassion, kindness and respect between colleagues, staff and consumers.	4.2	SMHS Aboriginal Health Strategy SMHS SQCE SMHS Communications SMHS Wellbeing Group SMHS Work Health and Safety					■	

Goal 5: Systemwide accountability

Establish a collaborative and representative governance model to drive the implementation of the MAP across SMHS, featuring service-level leadership through a centralised structure supported by a network of empowered staff champions.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Establish a representative governance structure	Establish a governance structure to oversee the implementation of the new MAP with representation from CaLD consumers, CaLD staff, interpreters and service areas responsible for plan implementation.	5.1	SMHS SQCE	■					Policy Priority 3
Empower service level champions to drive implementation	Develop and embed a staff champions network that can feed into a centralised governance structure and support implementation of the MAP across the different SMHS sites and services.	5.2	SMHS SQCE					■	Policy Priority 3

Goal 6: Informed and engaged stakeholders

Enhance awareness of the MAP and maximise opportunities for both internal and external collaboration by increasing staff understanding and promoting ongoing engagement with key external stakeholders.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Establish a central resource hub for MAP resources	Enhance staff awareness of the MAP through establishing a central resource hub for the MAP, including related resources and information updates.	6.1	SMHS SQCE	■					Policy Priority 2
Facilitate ongoing engagement with key external stakeholders	Establish an external stakeholder database and engagement plan to support ongoing communication and engagement with key external stakeholders.	6.2	SMHS SQCE			■			Policy Priority 2

Goal 7: Enhanced data capture and measurement

Consistently and accurately capture data to increase understanding and responsiveness to the needs and experiences of CaLD consumers and staff, and track progress in key outcome areas.

Objective	Action	Number	Responsibility	Completed by					WAMPF Alignment
				Dec 2026	June 2027	June 2028	June 2029	June 2030	
Build internal awareness of how to consistently capture diversity data	Develop and implement an internal education campaign to increase consistency in capturing patient diversity data collection fields in web-based Patient Administration System (WebPAS).	7.1	Site Health Information Management Services		■				Policy Priority 2
Enhance existing diversity data capture methods	Explore the ability to extend existing workforce diversity data capture methods to measure the representation of cultural and linguistic diversity in leadership roles.	7.2	SMHS Workforce SMHS Digital Health			■			Policy Priority 3
Develop a data capture mechanism to track racism incidents	Explore data capture mechanisms to track incidents of racism through consumer feedback mechanisms and staff reporting channels.	7.3	SMHS SQCE SMHS Work Health and Safety SMHS Workforce			■			Policy Priority 1
Maintain a cultural diversity dashboard	Maintain a dashboard that makes key cultural and linguistic diversity data available to support service planning.	7.4	SMHS Digital Health SMHS SQCE				■		Policy Priority 2

Reporting and measurement

To support monitoring, reporting and evaluation of the MAP:

- SMHS has allocated responsibilities for actions under this plan. SMHS SQCE team will monitor the progress of these actions.
- An annual progress report, compiled by SMHS SQCE will be submitted to the SMHS Area Executive Group, SMHS Board and Office of Multicultural Interests.
- Public stakeholders will be provided an update on the progress of the plan through the SMHS Annual Report.
- An evaluation will be completed at the end of the plan to assess the extent to which it achieved intended goals and to identify opportunities for learning and improvement.

To assist with the evaluation of the MAP goals, the following measures and methods will be used.

Goal	Output measures	Outcome measures	Data sources
Goal 1: A culturally intelligent workforce	Number of learning opportunities offered % of staff who participate in learning opportunities Percentage of leaders who complete training	Percentage of staff who feel confident supporting CaLD patients and their families Percentage of leaders who feel confident leading a culturally diverse workforce	Staff survey Program / course registration and evaluation
Goal 2: Culturally responsive services	Culturally responsive care guidelines developed CaLD Advisory Group formed Multifaith prayer and reflection spaces established Cultural food options expanded	Percentage Percentage of CaLD consumers who feel welcome, safe and respected. Percentage of CaLD Advisory Group members who feel they have provided meaningful input on policies Number of policies and initiatives developed with the input of CaLD staff and/or consumers Consumer satisfaction with cultural responsiveness of the service.	Meeting minutes Consumer feedback Consumer survey CaLD Advisory Group Annual Evaluation

Goal	Output measures	Outcome measures	Data sources
Goal 3: Inclusive communication and navigation	Language services guidelines developed and promoted % of staff who complete mandatory languages services training Language abilities displayed on staff badges # of key documents translated	Percentage of consumers who are aware of their rights to language services Percentage of CaLD consumers who indicate the information they received was easy to understand Percentage of staff who indicate they are confident in accessing and using interpretation and translation services Percentage of staff who report services are easy to navigate for CaLD consumers	Consumer survey Staff survey
Goal 4: A culturally safe and inclusive culture	Anti racism education campaign developed and implemented Number of staff/consumer complaints related to racism or cultural bias Calendar of key cultural dates celebrated and promoted	Percentage of staff who feel the SMHS workplace is inclusive and respectful of people from all cultural backgrounds Percentage of staff/consumers who have experienced or witnessed cultural exclusion, racism, bias or discrimination Percentage of CaLD consumers who feel welcome, safe and respected	Staff survey Consumer survey
Goal 5: System level accountability	MAP governance structure established MAP staff champions network established at each service	Percentage of staff who are aware of the MAP and its goals Impact stories demonstrate service level and systemic improvements in cultural responsiveness and workforce inclusion.	Staff survey Impact stories
Goal 6: Communication and engagement	Stakeholder engagement and communication plan developed	Percentage of staff who are aware of the MAP and its goals. Impact stories demonstrate evidence of collaboration with CaLD communities and multicultural services	Staff survey Impact stories
Goal 7: Enhanced data capture and measurement systems	CaLD data capture awareness campaign occurs Dashboard of key cultural and linguistic diversity data is developed	Increase in completeness of consumer diversity data fields in WebPAS Increased staff awareness of CaLD consumer needs	Administrative data Staff survey

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