

Cultural Competence Maturity Matrix

Guidance Notes (Ver 4.0)



Contents

Introduction	3
What is the Maturity Matrix?	4
Purpose of the matrix	5
Tips on using the matrix.....	7
Glossary.....	10
Further reading	11

Acknowledgements

Clive Foster and Donna Sherratt the Race Health Inequalities Programme leads would like to thank all members of the Nottingham City Place-Based Partnership Race Health Inequities Group for their contribution to developing the Cultural Competence Maturity Matrix

Introduction

The Nottingham City Place-Based Partnership (PBP) has a stated ambition to reduce the health inequalities experienced by Black, Asian and Minority Ethnic (BAME) communities and in doing so, address structural racism within health and care.

Reports both locally and nationally have highlighted that people from minority communities disproportionately experience poorer health outcomes. These reports¹ highlight the need for a transformation in the way in which people from these communities' access and experience care and support. To reduce health inequalities will require commitment from partners to take a bold and principled approach. The tragic murder of George Floyd in May 2020 brought into sharp focus both nationally and globally the impact of structural racism. Many organisations pledge to tackle institutional and structural racism as a result of this incident and set about work to achieve this. The Nottingham City Place-Based Partnership, working in partnership with and BAME community leaders came together to discuss potential approaches to tackling structural racism in the commissioning and provision of health and care services.

In the summer of 2020, the PBP Executive Team endorsed the formation of the PBP Race Health Inequalities Group. Over a period of 18 months, the group, made up of senior members of the PBP partner organisations and leaders from Nottingham's BAME communities have co-designed a **Cultural competence maturity matrix** self-assessment tool. The maturity matrix is a progression model that enables systems, organisations, and services to reflect on current practice, engage in difficult conversations and develop responsive action plans for change.

¹ Health Needs Assessment of BME 2017 Report, Nottingham insight: Demography chapter: the people of Nottingham, Ethnic health inequalities and the NHS Report, Commission on Race and Ethnic Disparities Report, -PHE Report Beyond the data: understanding the impact of covid-19 on BAME groups

What is the Maturity Matrix?

The Maturity Matrix is a continuous improvement self-assessment tool used to assess the maturity of an organisation, service or system's responsiveness in delivering or commissioning service provision to meet the need of BAME citizens. By completing the Maturity Matrix this will initially give you a maturity rating against the 7 principles that PBP partners and BAM community leaders have assessed as being most important in achieving cultural competence. There are 4 stages of maturity in the Nottingham City PBP maturity matrix.



A typical Maturity Matrix has a grid like appearance with the cultural competence principle down the vertical axis and the 4 increasing maturing stages across the horizontal axis. The content for each box describes the expected level of maturity at that stage.

e.g.

	Emerging	Developing	Maturing	Thriving
Community needs mapped (5)	No formal recognition of 'natural communities'. Local profiles based only on 'top down' statistical analysis.	Neighbourhood profiles augmented with some 'bottom-up' qualitative input from residents and frontline staff.	Needs, assets and preferences gathered systematically through community centred research. Priorities agreed through discussion.	Intelligence based segmentation of communities to align approaches and share learning.

The Nottingham City PBP Maturity Matrix comprises 7 principles to assess against. These are:

- a. Equality Impact Assessments
- b. Community Engagement
- c. Representative Workforce
- d. Accountable Leadership
- e. Data & Evidence
- f. Financial Investment
- g. Inclusive Decision Making

Equality Impact assessment	An equality impact assessment (EIA) is an evidence-based approach designed to help organisations ensure that policies, practices, events and decision-making processes are fair and do not present barriers to participation or disadvantage any protected groups from participation. This covers both strategic and operational activities.
Community Engagement	Community engagement is a way of developing a working relationship between public bodies (such as local authorities or local NHS) and community groups. Good community engagement will mean that both groups can understand and act on the needs or issues of community experiences, helping to achieve positive change.

Representative Workforce	A representative workforce is a workforce that best represents the communities and service users that organisations engage with and serves, at all levels.
Accountable Leadership	Leaders that demonstrate cultural intelligence and ensure this is embedded in all aspects of leadership responsibility and leaders that are open, accountable and responsive in tackling cultural competence.
Data and evidence	Data and evidence is used to ensure that the collection of data or evidence is complete and accurate, data sharing is clear and robust, and data sharing is transparent and intelligently processed to guide evidence based interventions
Financial investment	Systems and organisations demonstrate financial investment in service provision that meets the culturally specific needs of BAME communities, whether that is through culturally specific services or through mainstream services that are flexible to meet cultural needs.
Inclusive Decision Making	Diversity of thought and the inclusion of multiple perspectives is required to break current patterns of thinking and behaviour. Communication can help foster relationships and inspire and create collective action. It is essential for bringing people who think differently together to capture and integrate perspectives that might otherwise be absent

Purpose of the matrix

The purpose of the matrix is pinpoint your current position of cultural competence (**emerging, developing, maturing, or thriving**) against the principles and establish a shared understanding of your current level of maturity against each principle. Once this has been established you can then plan your journey for competence maturation.

Allow enough time to complete the matrix and acknowledge it is not a one-off activity. Colleagues who have piloted the tool have noted that using the matrix have allowed for a more structured, objective and open conversations to start to take place.

The matrix can be used flexibly, some pilot organisations used one principle as a discussion point at the start of team meeting. Another applied this to a service they were seeking to improve and completed the full matrix in one session.

“We used the matrix with a small group of providers for the social prescribing in Emergency Department pilot service. As a group we discussed each principle and what it meant to our service and how we could adapt/improve our cultural approach. As a result we identified that translation improvements are required within the service and have therefore put actions in place to address this”

Service Transformation Officer – Nottingham and Nottinghamshire Integrated Care Board

Applying the matrix can help to identify and develop specific *enablers* to progress cultural competence e.g. identifying the need for more **inclusive communication** (*enabler*)

The matrix helps to recognise that different parts of a system will require different development and at different speeds. When using the matrix don't expect to gain a consistent level across all principles. Some conversations about health inequalities with colleagues or partners can be challenging for some organisations for several reasons. For example, when discussing racial inequalities some people may feel '*out of their depth*' or afraid of saying the '*wrong thing*' and find these conversations '*difficult*'.

We encourage users to take a generous approach to asking questions when apply the matrix. It is important the emphasis here that responses to such questions are about eliciting deeper conversations not just ticking the box exercise approach. If the question is *does this process reach all communities?* If yes – then elaborate with examples if no, what could you do the rectify this.

What the matrix is not	What the matrix is
χ A tick box exercise.	√ A tool to start difficult conversations and assist in creating a responsive action plan
χ About marking your own homework on cultural competence.	√ To objectively assess the position of the organisation, service or process being assessed in relation to the maturity principles
χ A one-time assessment silver bullet approach.	√ A tool to be embedded as part of an entire design, development, implementation and monitoring process.
χ About applying a business-as-usual or catch-all approach to addressing health inequalities	√ An opportunity to be specifically diverse and inclusive in your approach.
χ A ridged inflexible set of rules to follow	√ Designed to be flexible in use
χ About generalising outcomes under assessment	√ Help to identify the strengths and challenges of a process under assessment enabling a greater quality of action planning response

Tips on using the matrix

Be clear as to exactly what you are applying the matrix to. Take a macro birds-eye-view when carrying out this assessment. This applies whether you are applying the matrix being applied to the whole organisation, to a specific service, to a specific project or to a specific process.

For example:

Implementing across a team

Nottingham City Council's Commissioning Team have been one of the teams testing the 'Reducing Race Inequalities Maturity Matrix'. We have adopted the approach to have this as our first item on our monthly team meetings. We are exploring one section in each meeting, and discussing different perspectives of how the narrative on each stage of maturity can be translated into practice and examples across different pieces of commissioning work. We feel that this has helped us to have better conversations, and also changes our discussions on the rest of our team agendas. We are developing corporate commissioning standards for our organisation and would like to include this as a tool within those. Once agreed at the Place-Based Partnership Executive Group, we plan to champion the Matrix within our 'People's Leadership Team' and discuss with our Corporate Leadership Team

Implementing across a small voluntary lead organisation

The use of the Maturity Matrix was refreshing and interesting. We regularly have conversations around topics within, just by the nature of being in Black Asian and Ethnic Minority post, as well as in meetings with people higher-up in the service. But the Maturity Matrix provides a structure to this, which is really helpful. We felt that taking this to wider teams would provide even more space for meaningful discussions and plans.

A big strength of the document is the break-down in the table of example statements, which help with the "scoring", as it makes it easier to map out whereabouts we are as a service on the scale. Without them, it would be much more difficult to come up with a position where we feel we fit. It also helps provide some ideas on desired outcomes, for example where we fit in "emerging" (most of the principles), looking at developing, thriving etc, is helpful in thinking about where we want/need to be and prompt ideas on how we may approach getting there.

Think about who needs to be involved and consulted as part of the maturity matrix approach. Speak with a wide range of people who are connected to the process you're trying to assess. Getting buy-in at senior organisational level is vital for the success and delivery of the maturity matrix self-assessment.

Always consider who in your organisation would benefit most from applying the matrix. We would recommend at the earliest onset that clear visibility be given to senior management. This potentially could deal with any barriers that could happen further down the line such as access to departments or personnel to complete the matrix.

The range of people could involve simply your own team, your own peer group, senior managers, internal staff, external partners or a community.

Before you start

- √ Familiarise yourself with the matrix – what are key the key principles you will be applying against?
- √ Are you clear on what you are assessing?
- √ Do you have access to the evidence you need in order to make your assessment?
- √ Are you completing the matrix as an individual or as a group – are the right stakeholders involved?
- √ Have you established how you will test your assumptions?

Completing the matrix

- √ Go through each principle in turn, drawing on the evidence you have to make your assessment.
- √ Consult with colleagues, peers and senior management involvement on your assessment
- √ Keep in mind that some principles will fit better than others when assessing
- √ Decide if you would like to use the action plan template or action plan and evidence template to capture your actions and evidence.

Establishing your maturity rating

- √ Did you score as you were anticipating you would?
- √ What are the areas that surprised you?
- √ Could you share the score with anyone else who could help ratify the score?

Action planning

In setting out your action plan we recommend you:

- √ Establish what your ambitions are within each domain and what you will need to do to achieve them
- √ Assess which areas are in need of particular attention – will your action plan focus on all principles or should you have a dedicated focus on individual principles?

Ask yourself:

- √ How will you share your learning within your organisation / with partners?
- √ How will you know when you've completed your actions?
- √ How will you know when you're ready to re-take the assessment?

The real measure of success when applying the matrix will be the formation off your action plan. To assist you in achieving and effective action plan we recommend:

- Ensuring that there are clear actionable next steps that follow the SMART objective principle of being specific, measurable, achievable, realistic and time bound.
- Applying a RAG rating to each state of the matrix journey to illustrate how close you are to achieving the desired state of maturity

Do not be afraid of obtaining low scores when engaging in the maturity matrix. The key value of the matrix is to understand the current level of maturity and the steps that are needed to improve this – this will often mean having difficult conversations. Trust the process to allow to clearly identify your position on the matrix. Your resultant action plan will be the key determinant to progress change within the organisation, service, system, or process.

Glossary

Structural Racism – discrimination or unequal treatment on the basis of membership of a particular ethnic group (typically one that is a minority or marginalized), arising from systems, structures, or expectations that have become established within society or an institution

Commissioning – The process of assessing needs, planning and prioritising, purchasing and monitoring health services to get the best health outcomes

Maturity Matrix – Maturity Matrix is a measurement tool that measures the ability of an organization for continuous improvement in a particular discipline

Race – A group of people identified as being distinct from other groups because of supposed physical or genetic traits shared by the group.

Health Inequalities - differences in health (or differences in important influences on health) that are systematically associated with being socially disadvantaged (e.g., being poor, a member of a disadvantaged racial/ethnic group, or female), and that put already disadvantaged groups at further disadvantage

Ally ship Someone who makes the commitment and effort to recognize their privilege (based on gender, class, race, sexual identity, etc.) and work in solidarity with oppressed groups in the struggle for justice. Allies understand that it is in their own interest to end all forms of oppression, even those from which they may benefit in concrete ways.

Micro aggression The everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership.

Co-Production Meaningful partnership engagement with community and service users when commissioning, designing, delivering and/or assessing services and support and improve outcomes.

A comprehensive glossary is also available at [Glossary | Racial Equity Tools](#)

Further reading

Black Health Initiative

BHI is a community engagement organisation working towards equality of access to health and social care within Leeds and the surrounding areas for disadvantaged communities.

www.blackhealthinitiative.org

British Medical Association

The British Medical Association (BMA) is the trade union and professional body for doctors in the UK. The BMA represents, supports and negotiates on behalf of all UK doctors and medical students.

www.bma.org.uk

Institute of Health Equity

The UCL Institute of Health Equity aims to develop and support approaches to health equity and build on work that has assessed, measured and implemented approaches to tackle inequalities in health.

www.instituteofhealthequity.org

NHS Confederation

The NHS Confederation is the membership body that brings together and speaks on behalf of organisations that plan, commission and provide NHS services in England, Northern Ireland and Wales.

www.nhsconfed.org

NHS England

NHS England and NHS Improvement leads the National Health Service (NHS) in England.

www.england.nhs.uk

Nuffield Trust

The Nuffield Trust is an independent health think tank. They aim to improve the quality of health care in the UK by providing evidence-based research and policy analysis and informing and generating debate.

www.nuffieldtrust.org.uk

Race Observatory

The NHS Race & Health Observatory works to identify and tackle ethnic inequalities in health and care by facilitating research, making health policy recommendations and enabling long-term transformational change

<https://www.nhsrho.org/>

Public Health England

PHE is an executive agency, sponsored by the Department of Health and Social Care. They exist to protect and improve the nation's health and wellbeing and reduce health inequalities.

www.gov.uk

Race Disparity Unit

Race Disparity Unit is part of the Cabinet Office. They collect, analyse and publish government data on the experiences of people from different ethnic backgrounds.

www.gov.uk

Royal College of Nursing

The Royal College of Nursing is the world's largest nursing union and professional body. We represent more than 450,000 nurses, student nurses, midwives and nursing support workers in the UK and internationally.

www.rcn.org.uk

Royal College of Psychiatrists

The Royal College of Psychiatrists is the professional medical body responsible for supporting psychiatrists throughout their careers from training through to retirement, and in setting and raising standards of psychiatry in the UK.

www.rcpsych.ac.uk

Runnymede Trust

Runnymede is the UK's leading independent race equality think tank. We generate intelligence to challenge race inequality in Britain through research, network building, leading debate, and policy engagement.

www.runnymedetrust.org

The King's Fund

The King's Fund is an independent charitable organisation working to improve health and care in England. Their vision is that the best possible health and care is available to all.

www.kingsfund.org.uk

DRAFT