# **Agenda for Healthcare Cultural Competency Training**

Date: [Insert Date]

Location: [Insert Location]

Time: [Insert Start Time] - [Insert End Time]

## **Agenda Items**

#### 1. Welcome and Introduction

Time: [Insert Time]

Facilitator: [Insert Name]

#### 2. Keynote Speaker: Importance of Cultural Competency in Healthcare

Time: [Insert Time]

Speaker: [Insert Speaker's Name]

### 3. Workshop 1: Understanding Cultural Differences

Time: [Insert Time]

Facilitator: [Insert Name]

#### 4. Lunch Break

Time: [Insert Time]

## 5. Workshop 2: Strategies for Effective Communication

Time: [Insert Time]

Facilitator: [Insert Name]

#### 6. Group Discussion and Q&A

Time: [Insert Time]

Facilitator: [Insert Name]

# 7. Closing Remarks and Evaluation

Time: [Insert Time]

Facilitator: [Insert Name]

For inquiries, please contact: [Insert Contact Information]