

Office of Multicultural Health and Services 2010 – 2011 Annual Report



Oregon
Health
Authority



800 NE Oregon Street, Suite 550, Portland, OR 97232

971-673-1240 • www.oregon.gov/OHA/omhs



Administrator's Message

In 2009, when I started in my role as Administrator, I reached out to a number of diverse community leaders to ask how they thought the Office of Multicultural Health and Services should focus its work. Several referenced the Racial and Ethnic Health Task Force, which was created by executive order of Governor John Kitzhaber in 1999. In 2000, the Task Force made a number of recommendations for how to promote health among Oregon's diverse communities and close avoidable gaps in health outcomes. Remarkably, these recommendations remain relevant today given recent data analysis and emerging health equity research.

This past year, the Office of Multicultural Health and Services has paid particularly close attention to those recommendations. With the help of an unprecedented number of partners, to whom we are most grateful, we have implemented several policies that are closely aligned with the recommendations:

- Establishing standards for how the Oregon Health Authority (OHA), the Department of Human Services (DHS), and both agencies' contractors collect race, ethnicity, and language data;
- Implementing the Health Care Interpreter law, which establishes a standardized system for certifying and qualifying health care interpreters; and,
- Establishing a fair process for resolving discrimination and harassment complaints within OHA and DHS.

These policies support OHA to create a solid foundation for enacting its value of health equity. However, to move forward from here, not only do we need to establish policy, we must also develop stronger leadership capacity within the Oregon Health Authority and communities impacted by inequity so we can enact long-term solutions to entrenched problems that have emerged from injustice and oppression that are aspects of Oregon's and our nation's history.

Ronald A. Heifetz, of Harvard University's Kennedy School of Government, is known worldwide for his seminal work on leadership. He suggests that we experience some critical problems for which we have few technical solutions. These adaptive challenges are deeply rooted in individual and institutional behavior, so leadership ownership of the problem becomes part of the solution itself.

Achieving health equity, knowing how to talk about it and advance policies using an equity lens, is a critical adaptive challenge for the Oregon Health Authority and the State of Oregon. So as the Office of Multicultural Health and Services moves forward, we will strive to better balance technical solutions that promote health equity with developing adaptive approaches for inspiring leadership to expect new behaviors, new approaches, and assure advances toward creating a just and equitable society in which all Oregonians can be truly healthy.

Latricia Hillman

About OMHS

Since 1993, the Office of Multicultural Health and Services (OMHS) has conducted a variety of activities focused on addressing health disparities in Oregon. Initially, OMHS was located in the Oregon Public Health Division. In 2009, the Office of Multicultural Health and Services moved to the Director's Office in the Department of Human Services. At that time, OMHS expanded its mission to encompass an agency-wide scope of health and human services.



In 2011, with the creation of the Oregon Health Authority, OMHS transitioned to the new agency, and a “sister office” was created in the Department of Human Services. The scope of the office expanded to encompass equity in all aspects of the Oregon Health Authority and Oregon's focus on Health Systems Transformation to achieve OHA's Triple Aim (improved health outcomes, increased access to health care, and decreased or controlled health care costs).

In addition to its ongoing work, the Office of Multicultural Health and Services has spent the greater part of fiscal year 2011 working on its new strategic plan. This plan was informed by hundreds of Oregonians through individual interviews, focus groups and surveys.

The vision of OMHS is:

All people, communities and cultures co-creating and enjoying a healthy Oregon.

Our mission is:

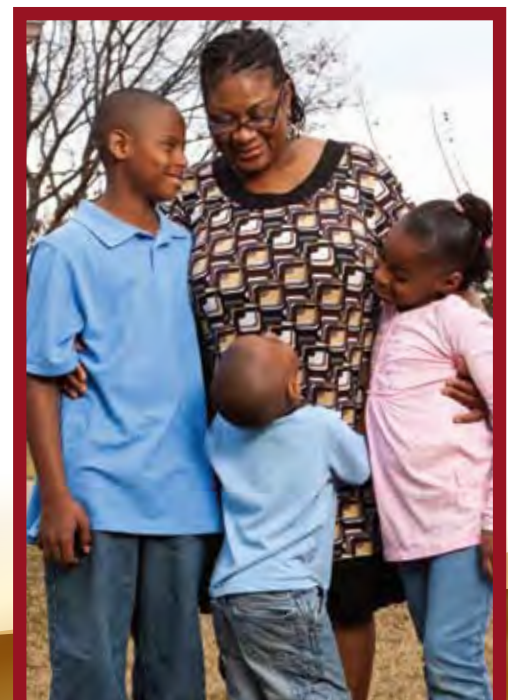
To engage and align diverse community voices and the Oregon Health Authority to assure the elimination of avoidable health gaps and promote optimal health in Oregon.

By 2016, the Office of Multicultural Health and Services will connect people, policy and programs to make substantial and measurable progress toward the achievement of our vision and mission.

We will prioritize the following strategic imperatives:

- Assure and sustain an organizational structure that relentlessly pursues health equity and organizational diversity in OHA and in Oregon's health promoting systems.
- Foster dynamic, strength-based, and authentic relationships among Oregon's diverse communities, OHA, and Oregon's health promoting systems.
- Integrate and use diversity development best practices in recruitment, hiring, retention, performance management,

CONTINUED ON NEXT PAGE

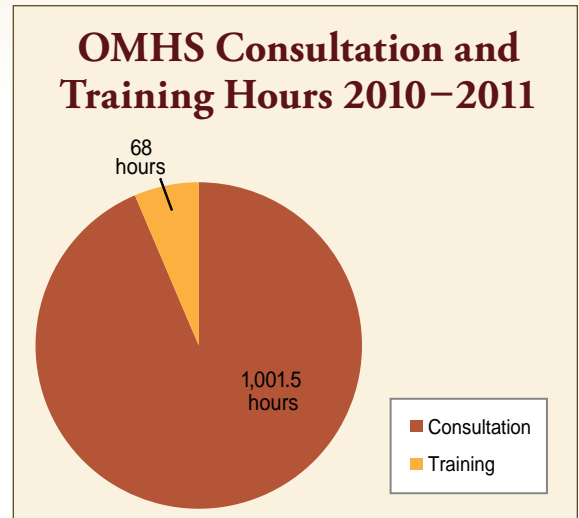


contracting and procurement, and leadership and employee development in OHA and in Oregon's health promoting systems.

- Leverage community wisdom, timely data, and research to develop and effectively communicate the rationale for investing in health equity and eliminating avoidable gaps in health outcomes.

Our work is organized in three units:

- **Administrative** — focusing on long-term vision, strategic communications, and efficient office operations;
- **Equity** — focusing on engaging community and agency partners in developing and implementing long-term solutions to avoidable health inequities; and
- **Diversity** — focusing on creating work environments that support and leverage the strengths of a highly qualified, diverse workforce.



OMHS Accomplishments in 2010 – 2011

OMHS staff provided 1,001 hours of consultation and 68 hours of training on equity, policy development, cultural competency, diversity to OHA and DHS offices and programs, and for our community partners.

Diversity Development Unit

The Diversity Development Unit supports affirmative action, cultural competency and diversity initiatives that create and sustain welcoming environments for staff, customers and partners.



- Co-chaired the 2011 Diversity Conference, leading the development of workshops more closely aligned with affirmative action and equal employment opportunities, and diversity development principles.
- Developed and implemented a new procedure to investigate agency discrimination and harassment complaints within DHS and OHA.
- Hired an investigator to serve as the Director's designee for discrimination and harassment complaints within OHA.
- Finalized the Department of Human Services and Oregon Health Authority 2011-2013 Affirmative Action Plan.
- Researched and initiated the preliminary development of affirmative action and diversity development strategies, including diversity recruitment and retention, employee affinity groups, employee development, and internship and mentoring programs.

- Advocated, agency-wide, for the integration of diversity and cultural competency into policy and program development, including “HR Essentials” for new employees, and interview panel materials.
- Administered the Intercultural Development Inventory (IDI) to various agency leadership teams and initiated action planning to facilitate stronger partnerships across cultures.
- Initiated and currently leads a network of diversity and inclusion professionals, which includes representation from the health care industry, education, government and non-profits.

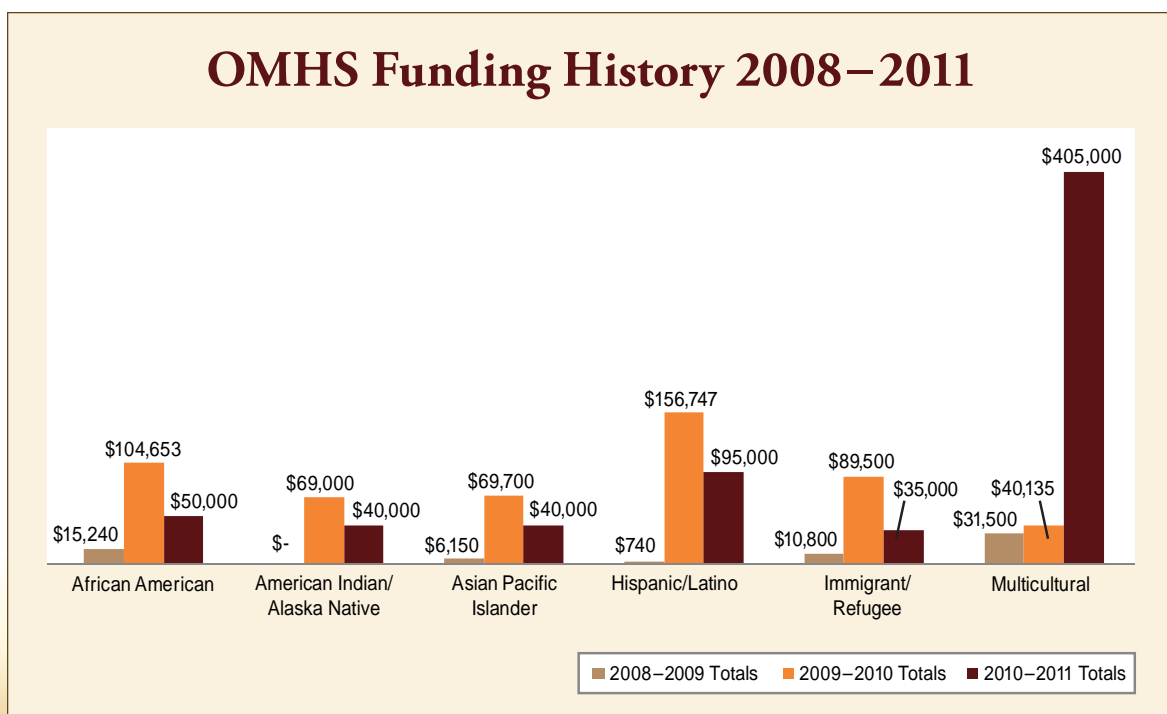


Equity, Policy and Community Engagement Unit

The Equity, Policy and Community Engagement Unit leads and supports health equity initiatives through policy development and analysis, community engagement and capacity building, and training and technical assistance.

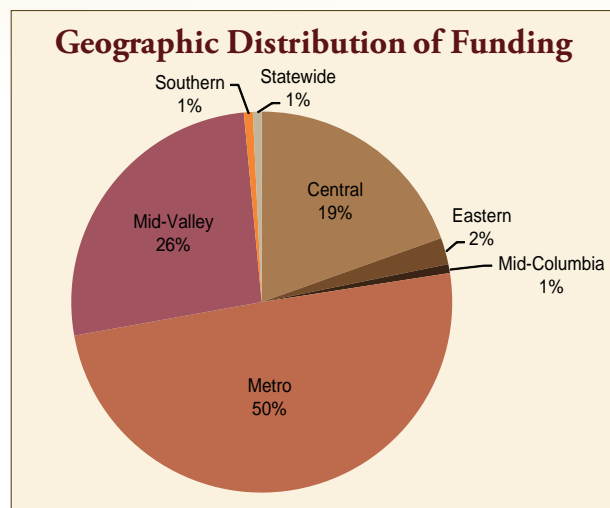
- Provided bill analysis, legislative testimony, research and information to legislators and stakeholders about bills that could affect the equitable provision of health and human services in Oregon.
- Collaborated with and supported community partners who are increasing their capacity to engage in policy work.
- Distributed \$150,000 in small grants to 25 organizations to support health equity policy and program initiatives, and community listening sessions focused on cultural competency in health care provision through our Small Grants Program.
- Partnered with the Oregon Public Health Division and the Northwest Health Foundation to

CONTINUED ON NEXT PAGE



establish three Regional Equity Coalitions (REC). These coalitions promote local, regional and statewide policies to improve equitable access to optimal health for all Oregonians. Funding for these RECs totaled \$390,000. Additional RECs will be developed if funds become available.

- Fully implemented Oregon’s Health Care Interpreter Law. The Oregon Council on Health Care Interpreters also established revised rules to reduce the cost of implementation and ensure that we meet national standards.
- Convened a new Oregon Health Policy Board (OHPB) subcommittee on “non-traditional” health workers. The subcommittee’s charge is to make recommendations to the Workforce Committee of the OHPB on the roles, education and training requirements of community health workers, patient navigators, and peer wellness specialists as mandated by House Bill 3650.
- Engaged members of the Health Equity Policy Review Committee and OMHS staff to support the incorporation of equity strategies and solutions into Health System Transformation, Oregon’s version of Health Care Reform.
- Established an Equity Researchers group to consider opportunities to conduct equity-based research, connect health equity research to policy and program development and increase health equity research funding in Oregon.



OMHS Policy Priorities for 2011–2013

Advancing Health Equity through Health Systems Transformation

Oregon’s approach to health care reform creates numerous key opportunities for OMHS to promote adoption of effective health equity strategies, including the following:

- Encouraging utilization and reimbursement of qualified and certified health care interpreters and assuring standards for language proficiency of bilingual OHA and DHS staff.
- Leading the effort to establish standards for community health workers, peer wellness specialists, and personal health navigators in order to increase the utilization and sustainability of this important workforce.
- Working with community organizations and OHA leaders to improve birth outcomes for women who face a disproportionately greater risk of poor birth outcomes by exploring the use of doulas in the state medical assistance programs.
- Engaging stakeholders to develop cultural competency continuing education strategies and options for health care providers.

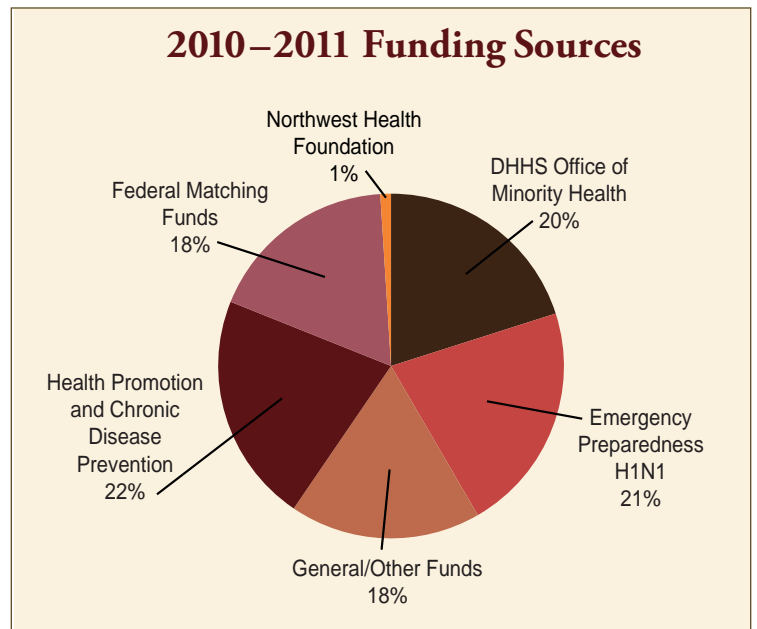
Improve the “State of Equity” in Health and Human Services

The State of Equity Report describes outcomes in health and human services across DHS and OHA programs and highlights service and client satisfaction disparities. OMHS will provide support to OHA staff to address these gaps and incorporate equity strategies with the goal of eliminating these disparities within our programs and services.



REAL Data Collection

OMHS worked with our partners across DHS and OHA programs to establish standards for data collection of race, ethnicity and language (REAL) data. We will support the implementation of these standards in OHA by assuring appropriate information technology infrastructure changes, embedding the standards in OHA contracts, and providing training and technical assistance to divisions and programs to collect the data and track health outcomes by race, ethnicity and language.



Implement Regional Equity Coalitions

OMHS will support three Regional Equity Coalitions to assess critical regional health equity challenges and formulate strategic activities that promote equity through policy and program change and community engagement and action.

Affirmative Action Plan

Achieving equitable health outcomes is facilitated, in part, through the internal implementation of diversity development strategies. The Department of Human Services and Oregon Health Authority 2011-2013 Affirmative Action Plan provides a road map for OHA policy development that includes improving communication with managers of affirmative action data and strategies, and training managers to create discrimination and harassment-free work environments to decrease the number of equal employment opportunity complaints and violations.

OHA Committee and Council Diversity

Committees, advisory councils and policy bodies are used throughout OHA to guide the agency’s work. We are working to promote diversity on these committees and policy boards to ensure that the needs of all Oregonians are considered and addressed.

OMHS Advisory Councils and Committees

OMHS Community Advisory Council

Heidi Allen, Providence CORE

T. Allen Bethel, Maranatha Church of God

Joe Finkbonner, Northwest Portland Area
Indian Health Board

Cynthia Gomez, Latino Network

Mary Anne Harmer, Regence Blue Cross
Blue Shield

Kayse Jama, Center for Intercultural Organizing

Holden Leung, Asian Health and Services Center

Francisco Lopez, CAUSA

David Rebanal, Northwest Health Foundation

Carmen Rubio, Latino Network

Oregon Council on Health Care Interpreters

Gloria Anderson, DHS Children Adults and
Families Division

Carmen Costan, Multnomah County
Health Department

William Coulombe, OHA Public Health Division

Megan Harris-Jacquot, Law Office of
Megan Jacquot

Sheila Hoover, DHS Children Adults and
Families Division

Tina Kitchin, DHS Seniors and People with
Disabilities Division

Rob Kodirov, International Refugee Center
of Oregon (IRCO)

Christine Lau, Asian Health and Service Center

Sheila Meserschmidt, Portland Community
College CLIMB for Health Professionals

Kelly Mills, Oregon Judicial Department

Maria Susana Molano, Shriners Hospital

Naghme Moshtael, Kartini Clinic and
Legacy Emanuel Children's Hospital

Morad Noury, Center for Intercultural
Organizing (CIO)

Roxana Ocaranza-Ermisch, Cascades East AHEC

Tressa Perlichek, OHA Division of Medical
Assistance Programs

Paul Potter, OHA Addictions and Mental
Health Division

Susana Rivera-Mills, Oregon State University

Patricia Wetzels, Portland State University

Mitchell Wilson, Freelance Interpreter

Community Health Workers Advisory Council

Jim Adriance, CareOregon

Maria Avila, Catholic Charities

Laura Brennan, PacificSource

Arika Bunyoli, Lutheran Community Services
NW

Miguel Canales, Multnomah County
Health Department

Tina Castañares, Columbia Gorge Hospice

Shawn Clark, OHA Addictions and Mental
Health Division

Jack Dempsey, Oregon Nurses Association

Seth Doyle, Northwest Regional Primary
Care Association

Ignolia Duyck, Virginia Garcia Memorial
Health Center

Erin Fair, CareOregon

Alisha Fehrenbacher, Health Matters of
Central Oregon

Sarah Goforth, Central City Concern

Community Health Workers Advisory Council — continued

Ann Kasper, Women with Disabilities
Health Equity Coalition

Bruce Korus, Oregon Primary Care Association

Pat Kuratek, Health Matters of Central Oregon

Daniel Lopez-Cevallos, Western Oregon
University

Sandy Madsen, Northwest Parish Nurse Ministries

Julio Maldonado, Multnomah County
Health Department

Pepper McColgan, Northeast Oregon Network

Charlene McGee, African Women's Coalition

Nicole Mejia, The Next Door, Inc.

Carol Merrell, Oregon Primary Care Association

Shafia Monroe, International Center for
Traditional Childbearing

Robin Moody, Oregon Association of Hospitals
and Health Systems

Alberto Moreno, Oregon Latino Health Coalition

Adrienne Mullock, OHA Office of Family Health

Rocio Muñoz, Benton County Health
Department

Ellen Pinney, Governor's Office

Catherine Potter, Parish Health Promoters

Health Equity Policy Review Committee

Sonali Balajee, Multnomah County
Health Department

Danette Burchill, OHSU Avel Gordly Center
for Healing

Ebony Sloan Clarke, Multnomah County

Bob DiPrete, OHA Division of Medical
Assistance Programs

Sharon Gary-Smith, Cascadia Behavioral
Healthcare

Angela Gonzalez, Yakima Valley Farm
Workers Clinic

Jalaunda Granville, Oregon Primary
Care Association

Kim Heller, Gateway Women's Clinic

Mardica Hicks, Children's Community Clinic

Kayse Jama, Center for Intercultural Organizing

Jennifer Pratt, Oregon Primary Care Association

Midge Purcell, Urban League of Portland

Teresa Rios-Campos, Multnomah County
Health Department

Evaristo Romero, La Clínica del Cariño

Carole Romm, Central City Concern

Maria Antonia Sanchez, La Clínica del Cariño

Fabiola Sandoval, Benton County
Health Department

Mark Spofford, Kaiser Center for Health Research

Lorena Sprager, Nuestra Comunidad Sana

Janna Starr, OHA Division of Medical
Assistance Programs

Antonio Torres, Oregon Latino Health Coalition

Ed Tryon, Janus Youth Programs

Jennifer Valentine, Cascade East AHEC

Kelly Volkmann, Benton County
Health Department

Pei-ru Wang, IRCO Asian Family Center

Eca-Etabo Wasongolo, Janus Youth Programs

Noelle Wiggins, Multnomah County
Health Department

Yves Labissiere, PSU School of
Community Health

Karen Levy Keon, OSU Department of
Public Health

Maria Loreda, Virginia Garcia Memorial
Health Center

Alberto Moreno, Oregon Latino Health Coalition

Lai-Lani Ovalles, NAYA

Midge Purcell, Urban League of Portland

Suk Rhee, Northwest Heath Foundation

Joseph Santos-Lyons, Asian Pacific American
Network of Oregon

Jennifer Valentine, Oregon Cascades AHEC

OMHS Advisory Councils and Committees — continued

Migrant and Seasonal Farm Worker Research Council

Doris Cancel-Tivado, Oregon State University

Tina Castañares, La Clinica De Carino

Chad Cheriell, Portland State University

Phillip Cooper, Portland State University

Stewart Cowburn, OCHIN, Inc.

Ann Curry-Stevens, Portland State University

Donalda Dodson, Oregon Child
Development Coalition

William “Ted” Donlan, Portland State University

Margaret Everett, Portland State University

John Heintzman, Oregon Health &
Science University

Elena Herrero Hernandez, Formerly with
Oregon Health & Science University

Laura Isiordia, Farmworker Housing
Development Corporation

Ed Kissam

Alice Larson

Kat Latet, Oregon Primary Care Association

Mary Lewis, State of Oregon

Daniel Lopez-Cevallos, Western
Oregon University

Maria Loreda, Virginia Garcia Memorial
Health Clinic

Robert “Max” Maxwell, Oregon Primary
Care Association

Heather McClure, Oregon Social Learning
Center, University of Oregon

Janice Morgan, Legal Aid Services of Oregon

Christine Nelson, OCHIN, Inc.

Mailiki Patterson, Bright Now Dental

Julie Samples, Oregon Law Center

Nargess Shadbeh, Oregon Law Center

Anne Smith, Oregon Child
Development Coalition

Lorena Sprager, Sprager Associates

Claudia Vargas, Oregon Health &
Science University

Emergency Preparedness Advisory Council for Vulnerable Populations

Marin Arreola, Interface Network

Clarice Charging, Northwest Portland
Area Indian Health Board

Ignolia Duyck, Virginia Garcia
Memorial Health Center

Francisco Ianni, American Red Cross
Oregon Trail Chapter

Christine Lau, Asian Health & Service Center

Corliss McKeever, African American
Health Coalition

Esther Puentes, Interface Network

Pei-Ru Wang, IRCO Asian Family Center

OMHS Interns: An Invaluable Resource and Partnership

During the last two years, we have been fortunate to work with nine interns who are near completion of their degrees or who recently finished their formal education. Working with these interns has provided us an opportunity to open the door for racially and ethnically diverse young professionals who are typically underrepresented in public health and public administration fields. In addition, their passion for health equity, cultural competency and diversity translates to hard work and commitment to our goals and strategies. We are grateful for these amazing individuals, and have benefited greatly from their time with us.

Felicia Bautista-Nelson established and supports the Migrant and Seasonal Farmworker Research Advisory Council, a group of researchers interested in health issues of migrant and seasonal farmworkers.

Nicole Burda established the Community Health Worker Policy Advisory Council and facilitated their policy and priority-setting efforts.

Rolando Cruz conducted a literature review of existing research related to the health of migrant and seasonal farmworkers, helping the Migrant and Seasonal Farmworker Research Advisory Council identify research and policy action priorities for this population.

Rachel Gilmer helped establish and continues to support the Health Equity Policy Review Committee for OMHS. She conducts bill analysis and researches and reports on existing health equity and health care transformation legislation and concepts within and outside of Oregon.

Sabrina Kosok assessed several aspects of the 2000 Racial and Ethnic Task Force Report. The assessment included surveying OHA advisory committees and councils to quantify the diversity of these groups convened to provide input and feedback to OHA programs.

Janie McGee conducted research on best practices in utilizing affinity groups for employee retention and support. Her work provided the foundation for the development of a DHS and OHA Employee Affinity Group Policy.

Ruth Nkemontoh coordinated the OMHS website upgrade, disseminated the weekly OMHS Diversity Newsletter, and planned the launch of the National Partnership for Action to End Health Disparities.

Tina Pham supported OMHS' strategic planning efforts.

Fabrice Saboue conducts outreach to health systems, health care providers and social service organizations to encourage the utilization of qualified and certified health care interpreters.

Staci Williamson helped establish the Oregon Council on Health Care Interpreters and supported the process to revise the Oregon Administrative Rules governing the implementation of the Health Care Interpreter law.

Hikari Yamashita-Ward provided support to the Community Health Worker Policy Advisory Council, including bringing a policy expert from Minnesota to provide guidance for Oregon's CHW Policy Advisory Council.

OMHS Staff

Alexis Asihene, Community Engagement Coordinator
alexis.m.asihene@state.or.us
971-673-1283

Felicia Bautista-Nelson, Migrant and Seasonal Farm Worker Policy Intern
felicia.bautista-nelson@state.or.us
971-673-1240

David Cardona, Health Care Interpreter Program Coordinator
david.cardona@state.or.us
971-673-1286

Carol Cheney, Equity, Policy and Community Engagement Manager
carol.i.cheney@state.or.us
503-602-9441

Rachel Gilmer, Policy Analyst Intern
rachel.b.gilmer@state.or.us
503-688-0362

Leann Johnson, EEO/AA and Diversity Development Manager
leann.r.johnson@state.or.us
971-673-1284

Christine Meadows, Civil Rights Investigator
christine.m.meadows@state.or.us
971-673-0593

Carlos Richard, Diversity Coordinator
carlos.j.richard@state.or.us
971-673-1288

Fabrice Saboue, Health Care Interpreter Policy Intern
fabrice.saboue@state.or.us
971-673-1341

Tricia Tillman, Administrator
tricia.tillman@state.or.us
971-673-1287

Mei Yong, Executive Assistant
mei.y.yong@state.or.us
971-673-1287

Stay connected!

There are many ways to stay in touch with the Office of Multicultural Health and Services. Register for updates via the weekly newsletter by visiting www.oregon.gov/OHA/omhs/newsletter; or see our events on the diversity calendar at www.oregon.gov/OHA/omhs/calendar; or visit us on Facebook.



Office of Multicultural Health and Services

800 NE Oregon Street, Suite 550, Portland, OR 97232
971-673-1240 • www.oregon.gov/OHA/omhs

This document can be provided upon request in alternative formats for individuals with disabilities. Other formats may include (but are not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats. E-mail rachel.b.gilmer@state.or.us, call 971-673-1240 (voice) or 971-673-0372 (TTY), or fax 971-673-1128 to arrange for the alternative format that will work best for you.