9/21/16

CHARTER
Cultural Competence Continuing Education Approval/Advisory Committee (CCCEAC)

**Authority**

ORS 413.450 allows health care professional boards to adopt rules which may require a person authorized to practice the profession, regulated by the "board", to receive cultural competence continuing education approved by the Oregon Health Authority (OHA). This law also requires OHA to provide resources and support for improving the cultural competence of regulated health care professionals in Oregon, and to report on cultural competence continuing education participation levels among regulated health care professionals to the Oregon State Legislature.

OHA shall: approve continuing education opportunities relating to cultural competence, develop a list of approved opportunities, and make the list available to each board specified in the legislation.

**Background: Cultural Competence Continuing Education at OHA**

Office of Equity and Inclusion (OEI) established the Cultural Competence Continuing Education Committee (CCCEC) from April-Dec 2012, to explore opportunities to promote cultural competence continuing education for health care professionals. Membership was comprised of a group of 23 professionally and culturally diverse stakeholders including representatives from: health licensing boards, professional associations, health systems organizations, providers, community based organizations, and small business. Final report and recommendations are available on the OEI website.

In February 2015, per ORS 413.450, OHA began convening the Cultural Competence Continuing Education Approval Committee (CCCEAC) to advise OHA on the development of criteria and process to approve a list of cultural competence continuing education opportunities, and to work with OHA to implement the process.

The Cultural Competence Continuing Education Review Committee (CCCERC) is a subcommittee of CCCEAC.

**Scope**

The Cultural Competence Continuing Education Curriculum Approval Committee will be responsible for:

1) Advise OHA on the development of a **process** to approve a list of cultural competency continuing education opportunities,

2) Advise OHA on the development of **criteria** to approve cultural competency continuing education opportunities for the OHA list, and

   - Work with OHA and Cultural Competence Continuing Education Review Committee (CCCERC) to **update criteria**

3) Work with OHA to **implement the process**

## Membership, Roles & Responsibilities

The CCCERC reviews completed applications as needed. Meeting schedule of committee will be based upon the volume of applications received.

Membership

**Commented [WEL1]:** Should we add CCO representative?

1. Number of Members: The size of the committee may vary from 6-9.

2. Terms of Appointment: Members will serve for a one year term, and may be reappointed.

3. Committee Representation:

   The committee must include at least one representative of: licensed health care professional board (defined in ORS 413.450); health care professional association, patient advocate; and faculty/trainer/educator/facilitator of continuing education for health care professionals.

   The committee must include at least two representatives of: community experiencing health disparities because of race, ethnicity or culture

   Whenever possible, the committee shall include the perspectives of communities that experience health disparities because of race, ethnicity, or culture.

4. All members must complete and submit an application for membership. They must have familiarity with all domains regarding cultural competence practice:

   - Domain 1: Culturally competent practice requires **self-awareness and self-assessment** of beliefs, attitudes, emotions and values.
   - Domain 2: Culturally competent practice requires the acquisition of **knowledge** by providers.
   - Domain 3: Culturally competent practice requires the acquisition of **skills** by providers.
   - Domain 4: Culturally competent training requires specific **educational approaches** for acquisition of knowledge and skills

5. Additional member attributes include:
   a. Evidence of successful related experience
   b. Ability to raise neutral points and not bash others
   c. No relevant financial relationships or commercial interests.

      **Relevant financial relationships** are financial relationships, in any amount, during the past twelve months with any organization or individual that is currently, or potentially, an applicant for OHA approval of CE opportunities, programs, or activities. Financial relationships are those relationships in which the individual, or an immediate family member, benefits by receiving a salary, consulting

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fee, honoraria, royalty, intellectual property rights, ownership interest (e.g. stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

**Commercial interests** exist when an individual, or immediate family member, has any ownership interest in any organization producing, offering, selling, marketing, re-selling, or distributing services or products that are used in continuing education for health professionals.

Immediate family members are defined as spouses, domestic partners, children, siblings, and parents, including family members related by marriage, adoption, etc.

6. **Nomination and Appointment**: candidates may be nominated by a member of the committee or by the Office of Equity & Inclusion Director. The Director is encouraged to seek the advice of the committee members prior to confirming the appointment of any nominee. The Director will select final candidates and appoint members to the Committee.

7. **Resignations and Replacement Appointment**: If a member finds it necessary to resign from the committee, they are encouraged to remain until a replacement can be selected and to provide as much notice as possible. They are also encouraged to help the committee find a suitable replacement. Replacement members will be appointed to the remainder of the resigning member's term, and are eligible for reappointment at the discretion of the Director.

8. **Regular attendance** is vital to the work of the committee. Members accept the duty and obligation to attend meetings and to provide notice at least two business days in advance of a meeting, if they are unable to attend. In an emergency, the Member shall contact staff as soon as reasonably possible. Two consecutive absences may result in replacement of a member in order to effectively carry out the charge of the committee.

9. The Director may appoint a **replacement** for any member who misses more than two consecutive meetings of the committee. The newly appointed member shall represent the same group/constituency as the member replaced.

10. A majority of the members of the committee shall constitute a quorum for making any key decisions.

11. Members may be asked to step off of committee by the Director, if proven to not be a good fit.

**Commented [WEL2]:** Added this detail.

**Commented [WEL3]:** Changed this from "three", given committee will meet less frequently (e.g. quarterly), moving forward.

**Decision Making**

OEI prefers a consensus-based decision making process. When consensus is unreachable within the meeting time, the committee may use the voting process, with OEI leadership serving as the tie breaker, when needed.

**Executive Sponsor:** Leann Johnson, Director, OEI

**Staff:** Shelley Das, OEI
Emily Wang, OEI

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