Oregon Health Authority | Office of Equity and Inclusion

2012–2013 Annual Report

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Director's Message

It has been an outstanding year for equity and justice in our nation. On January 1, we celebrated the 150th anniversary of the Emancipation Proclamation that legally ended the institution of slavery. Three weeks later, President Barack Obama took the oath of office to begin his second term—an achievement unimaginable even a generation ago. This past August, our nation celebrated the 50th anniversary of the March on Washington for Jobs and Freedom, one of the largest events of the civil rights movement.

In the midst of national talks and focus on racial justice, this year has also been one of many milestones for equity in Oregon. In 2000, the Governor's Racial and Ethnic Health Task Force* advocated for a number of policies. Many of these policies were passed during the 2013 Oregon Legislative Assembly. That was in large part due to the leadership and advocacy of coalitions rich in cultural, linguistic, geographic, and professional diversity. New laws focus on equity, and with the growing diversity in Oregon's political processes, represent significant advancements to Oregon's health equity agenda.

The Office of Equity and Inclusion (OEI) has been helping to implement three of these new laws. These include a demographic data collection law, formalizing traditional health workers into our health care system, and continuing education related to cultural competency. House Bill (HB) 2134 requires the Oregon Health Authority (OHA) to put rules in place on the collection of race, ethnicity, language and disability data.

While we work on the rules, OHA is increasing our commitment to reporting data by race and ethnicity—with more reports that present data by language and disability. Phase two of the State of Equity Report* and the first quarterly report delivered to the coordinated care organizations (CCOs)* are examples of this commitment. Both reports use subgroup data to highlight otherwise hidden opportunities for quality improvement and systems change.

For the past three years, OEI has been working to integrate traditional health workers. This includes community health workers, doulas, peer support and peer wellness specialists and patient navigators into our health care system. HB 3407* establishes the Traditional Health Worker Commission to formalize the voices of traditional health workers—who have been valued across the globe for centuries—within Oregon's health system transformation.

Starting in mid-2014, OEI began working on the implementation of HB 2611*. This includes the creation of an accessible website where health care and public health professionals can learn about cultural competence continuing education opportunities. We know the importance of this to many partners and stakeholders and look forward to working with you on this in the year to come.

We have also achieved internal milestones within OHA. The most significant of these is adopting

the Eliminating Health Disparities Initiative by OHA leadership. It focuses on agency-wide policies and best practices for health equity, civil rights, and diversity and inclusion. It also includes the individual commitments OHA executives have made to be champions of equity and diversity within their own spheres of influence.

In celebration of another major national civil rights milestone -- the 50th anniversary on July 2, 2014, of the passage of the Civil Rights Act of 1964 – OEI made significant headway in advancing civil rights policies and practices across OHA. This shapes our employee practices, and how OHA interacts with the people we proudly serve.

In partnership with the members of the OHA executive team, we continue with a sense of urgency, as the entire agency strives to promote health throughout Oregon's increasingly diverse communities.

Of course, the achievements and aspirations detailed here would not be possible without you. We are fortunate to have exceptional support from our agency leadership, and a highly qualified, diverse and passionate team. We are inspired by the wisdom and determination of community elders, emerging leaders and engaged partners. Your continuing generosity of spirit and your high regard for our community is truly the foundation of health equity in Oregon.

Patricia Hillman

*More information is available at: *www.oregon.gov/oha/oei*

About the Office of Equity and Inclusion

Our vision:

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

Our mission:

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.

Our strategic focus:

By 2016, OEI 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.
- To 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, contracting and procurement, and leadership and employee development in OHA and in Oregon's health promoting systems.
- To 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.

We organize our work in three units:

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

Our history:

The Office of Equity and Inclusion (OEI) was created in 2011, along with the new Oregon Health Authority (OHA). At that time, our sister office, the Office of Equity and Multicultural Services (OEMS) was also created at the Department of Human Services (DHS). Both OEI and OEMS share a common history as the Office of Multicultural Health and Services (OMHS).

In 1993, OMHS conducted a number of activities addressing health disparities in Oregon. In 2009, OMHS moved from inside the Oregon Public Health Division to the Director's Office of DHS. It was then that OMHS expanded its mission, with an agency wide scope of health and human services.

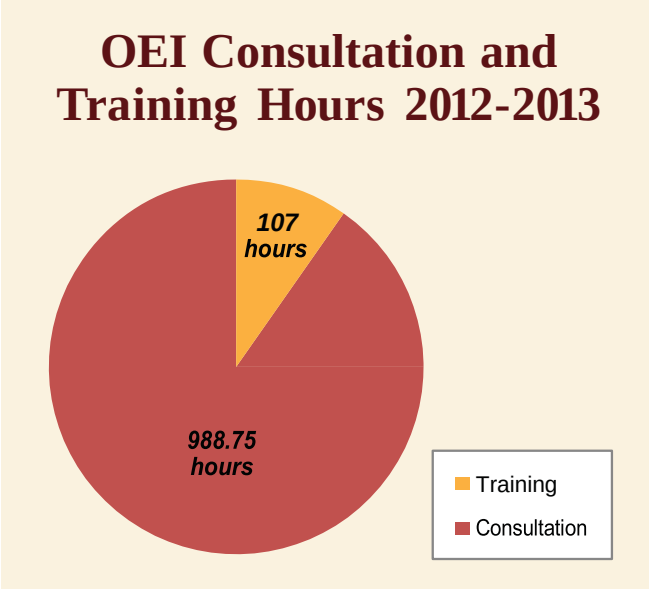
The scope of OEI now includes equity in all aspects of OHA. It also leads equity work with Oregon's focus on health system transformation to achieve the triple aim (better health, better care, and lower costs). Our strategic plan for 2011-2016 was informed by hundreds of Oregonians. Their views were captured by a series of individual interviews, focus groups, and surveys. This continues to guide our work, our focus on partnerships, and our priorities.

2013 OEI Accomplishments

Oregon's health care system has undergone many changes over the past year. Within this system, OEI staff members, and our community partners, play key roles in advancing health equity, diversity and inclusion, and civil rights.

We are making measurable progress towards a system of care that provides better health, better care, and lower costs, all in a more equitable and diverse fashion.

We are proud to share the following accomplishments:

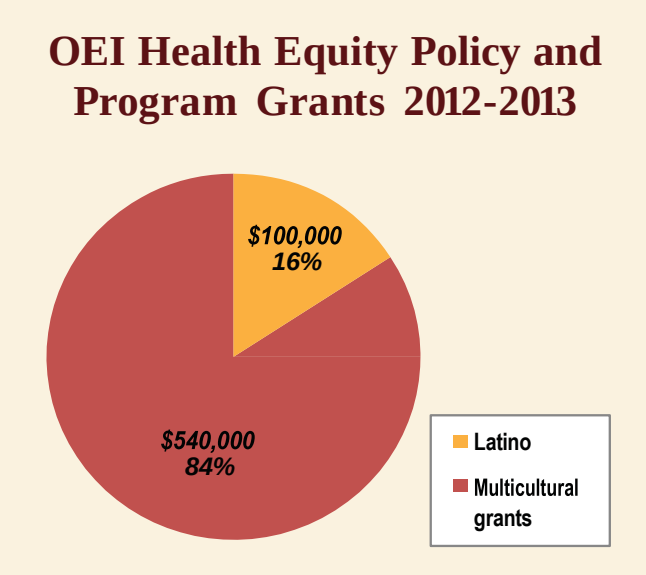


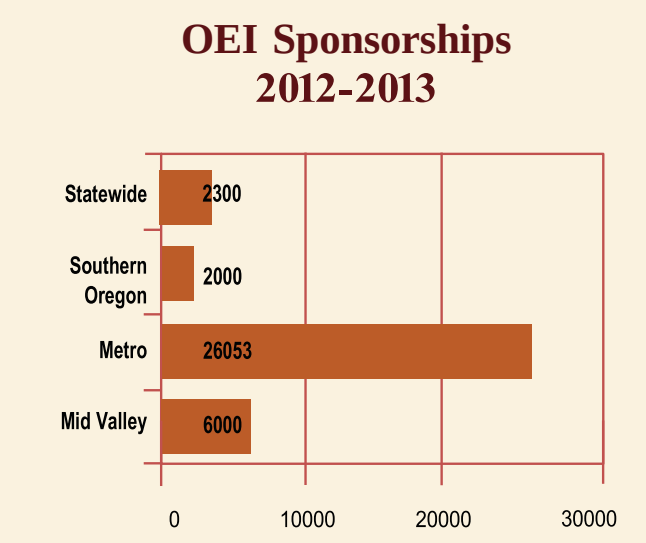
Direction

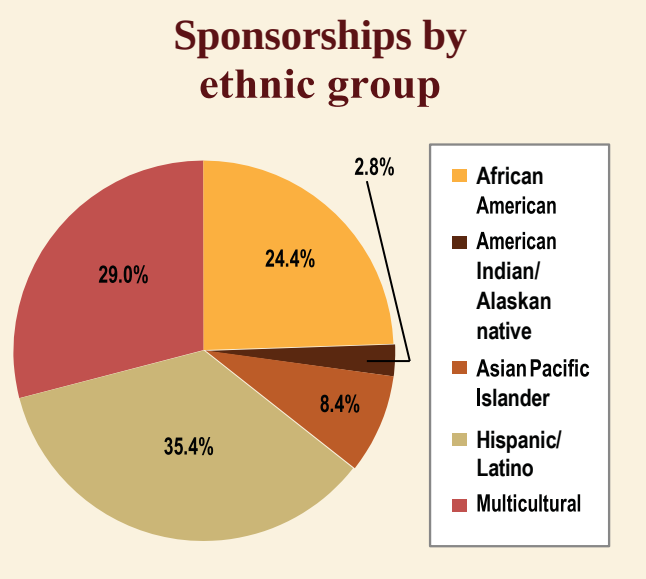
Communicating a long-term vision while creating efficient office operations

With health system transformation fully underway, OEI staff members and community partners are always busy. They are serving on committees, delivering hours of training and consultation, and reviewing and providing input on numerous documents that support strategies to enhance health equity, diversity and inclusion, and civil rights.

- OEI collaborated with OHA Health Analytics to publish statewide performance measures of Oregon's CCOs in a quarterly report. The report highlighted baseline race and ethnicity data for each performance measure, such as ambulatory care, for which data was available.
- OEI made 52 presentations to a wide variety of committees, community groups and educational institutions. OEI also provided just shy of 1,000 hours of technical consultation to numerous stakeholders.
- In September, just two years after its predecessor, Phase 2 of the State of Equity Report was published. For this report, each OHA and DHS division analyzed selected race and ethnicity indicators, using the information to guide the actions of the respective agencies.
- OEI leadership staff serves on OHA decision-making and monitoring committees, helping to inform the agency-wide strategic plan. Committees served include OHA Executive Cabinet, OHA Operations Executive Team and OHA Quarterly Target Review. OEI also served on committees established by the Division of Medical Assistance Programs (DMAP or MAP) to produce metrics, enhance quality of care and outcomes, support member engagement, and ensure contract compliance and protection of civil rights.
- OEI staff served on grant-making committees for Cover Oregon's outreach and enrollment, and for supporting prevention activities in communities within the Public Health Division.
- OEI provided professional development opportunities in health equity, diversity and inclusion to six emerging professionals. OEI has also been extremely fortunate to bring on interns from the Portland State







University Masters in Social Work Program, Portland Community College Paralegal Certification Program and the University of Oregon Ethnic Studies Program. Additionally, OEI collaborated with the Public Health Division to bring four AmeriCorps VISTA members to Oregon.

- ✓ One VISTA is developing approaches to address the needs of Oregonians who will remain uninsured after the full implementation of health care reform.
- ✓ Another VISTA is supporting policy development related to the social determinants of health equity.
- ✓ Two VISTAs are serving two of OEI's Regional Health Equity Coalitions (RHECs).

Equity

Engaging community and agency partners to implement solutions that promote health equity

- **Eighteen individuals from OHA, CCOs, other health systems, and community-based organizations completed our new "Developing Equity Leadership through Training and Action (DELTA)" Program, coordinated by Charniece Tisdale. With generous support from Kaiser Permanente, this pilot training series provided training on key concepts of health equity, diversity and inclusion, delivered by local and national experts.**

We are excited about the many ways that the concepts of health equity, diversity and inclusion, and civil rights are embedded in CCO contracts, transformation plans, and public health accreditation. We are encouraged that the same concepts are informing funding activities and partnerships.

- The 2013 Legislature passed key equity and inclusion laws. These laws will strengthen the cultural competence of health care providers. They also define the standards for the collection of race, ethnicity, and language data of OHA and DHS clients and consumers, and systematize the work and representation of traditional health workers (THWs) in policy and program development. OEI staff reviewed and provided input on 165 bills between January and June 2013, and led two rule-making committees to move these laws forward.
- OEI staff reviewed and provided input on CCO transformation plans and contracts, standards for patient-centered primary care homes, and public health accreditation. OEI issued $640,000 in grant funds to support the work of the RHECs, and equity and inclusion policy activities by community-based organizations.
- From December 2012 to January 2013, OEI staff created and delivered 15 webinars to support the CCOs as they developed their transformation plans. Topics included Data Collection and Analysis, Diversifying Community Advisory Councils, Traditional Health Workers, Civil Rights, Language Access and Health Care Interpreters, Health Literacy and Cross-Cultural Communications, Tribal Health and Engagement, Diversifying the Health Care Workforce, Culturally Competent Care for Health Care Providers, and Achieving Health Equity through Member Engagement. More than 500 people participated in our webinars.

- OEI collaborated with the OHA Transformation Center, which was awarded State Innovation Model funding from the Centers for Medicare and Medicaid (CMS) Innovation. In addition to supporting all health system transformation activities around the state, these funds will be used by OEI to create three additional RHECs, three additional cohorts of the DELTA Program, and support the qualification or certification of 150 health care interpreters around Oregon.
- OEI staff led a community-driven process to conduct and analyze qualitative research about health policy priorities from community members around the state. This community input process resulted in identifying priorities that will not only inform OEI's strategic initiatives, but will also expand our efforts beyond health care to address social determinants of health.
- OEI completed the administrative rules for THWs and convened a committee to review and approve their training programs. As of 2013, there are 15 certified THW training programs in Oregon and 117 trained THWs.

➢ **OEI's Health Care Interpreter Program, under the direction of Dr. David Cardona, is certifying interpreters in Spanish, Russian, Mandarin, Cantonese, Korean, and Arabic, with Vietnamese coming soon. Interpreters of all languages can apply for qualification.**

Diversity

Create environments that support a highly qualified, diverse workforce

➢ **OEI Equal Employment Opportunity and Affirmative Action (EEO/AA) and Diversity Development Manager Leann Johnson has led efforts to implement initiatives promoting diversity and equal opportunity for minority and women-owned businesses.**

OEI is leading the development and implementation of an agency-wide initiative focused on eliminating health disparities. This focuses leadership attention on equity and inclusion policies for OHA, including civil rights, language access and bilingual proficiency, recruitment and retention of a qualified and diverse workforce, cultural competency and increasing business opportunities through the Office of Minority, Women and Emerging Small Business (OMWESB).

- OEI led the development and adoption of the OHA Diversity Recruitment Policy, as well as the plan and procedure to develop Employee Resource Groups (ERGs).
- OEI managed 44 internal cases per the Discrimination and Harassment Complaint Procedure, launched a new database to better track and report case-related data, and continued to impact systemic and organizational culture throughout the agency.

- OEI was tapped to improve OHA-wide compliance with the Americans with Disabilities Act (ADA) and the Civil Rights Act for employees, clients and service recipients.
- OEI collaborated with the Department of Administrative Services, Multnomah County, the Office of Contracts and Procurement and Business Oregon to provide informational meetings for Minority, Women and Emerging Small Business on how to contract with OHA and the State of Oregon.
- In compliance with state policy, OHA has set an aspirational target of 2.5% as an agency. OEI is executing initiatives identified to ensure Minority, Women and Emerging Small Business (MWESB) are certified and are being contracted. OHA currently holds contracts with 17 MWESB.

- OEI sponsored 35 job and contractor fairs, 20 of which were attended by OHA employees of other departments. This ensures more OHA employees are looking to contract with MWESB businesses.

OEI Initiatives for 2013–2015

In Fiscal year 2013-2014, the OHA executive leadership team focused on Eliminating Health Disparities as one of five leadership initiatives. The initiative includes work that each executive leader in OHA is sponsoring and work that OEI is leading. During the course of this biennium, OEI's focus was on the 50th Anniversary of the Civil Rights Act, which President Lyndon B. Johnson signed into law on July 2, 1964, in response to the Civil Rights Movement.

This act was responsible for desegregating public accommodations and public services, including health care and public health. It paved the way for future civil rights advances such as the ADA and civil rights guarantees for additional protected classes.

This initiative covers five domains:

* Policy
* Organizational Culture Change
* Community Engagement
* Operational Support
* Metrics

We highlight some of the key aspects of the initiative below by the following domains.

Policy

- Establishing bilingual proficiency standards for OHA staff who use bilingual skills as a part of their jobs.
- Supporting the development of ERGs, which are a diversity and inclusion best practice.
- Requiring diversity recruitment plans for all job openings issued by the OHA.
- Adopting standards for race, ethnicity, language and disability data collection that reflect national and local best practices.
- Establishing practices that support supplier diversity and the implementation of the Governor's Executive Order.*
- Establishing a client civil rights process within OHA.

Organizational Culture Change

- Supporting OHA executive leaders to implement individual health equity, diversity and inclusion initiatives.

Community Engagement

- Ensuring a robust presence of OHA leadership in diverse community settings.
- Publishing Phase 3 of the State of Equity Report and engage with diverse communities to develop tailored responses to identified inequities documented in the report.

Operational Support

- Recruiting and supporting cohort classes 2 and 3 of the DELTA Program, a leadership development program that builds capacity and relationships among health equity leaders in communities across the state.
- Replicating the Equity and Inclusion Learning Series, a continuing education model for OHA executive leaders and members of the OEI. Establishing a second cohort with senior managers, as well as an alumni cohort.

* Additional information is available at: *www.oregon.gov/gov/docs/executive_orders/eo_12-03.pdf*

Metrics

- Supporting the internal use of data for defined OHA dashboard measures by race, ethnicity, language and disability for analyzing and reporting use in internal management systems.
- Supporting the publicizing of statewide health outcome and health care quality data by race, ethnicity, language and disability, ensuring a continued OHA focus on achieving health equity.
- Providing quarterly recruitment, hiring, promotion and retention data to OHA executives and senior managers in order to support their efforts to sustain a diverse and highly qualified workforce

Consistent with our values of transparency and engagement, we invite you to participate in shaping and implementing these initiatives.

2012-13 OEI Staff

Abdiasis Mohamed, Health Policy Intern

Andrea K. Thompson, Equity and Inclusion Training Volunteer

April R. Johnson, Health Equity Workforce Manager

Anita Yap, Equity and Inclusion Training Coordinator

Carol Cheney, Equity, Policy & Community Engagement Manager

Charniece Tisdale, CDC Public Health Prevention Fellow/DELTA Program Coordinator

Christine Meadows, ADA Manager

Crystal Marion, Executive Assistant

David Cardona, Language Access Services Coordinator

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Erica DeJong, AmeriCorps*Vista

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Janice Kim, Civil Rights Investigator

Jánice O'Neal, Paralegal

Jayvin K. Green, AmeriCorps*Vista

Kerry Johnson, Civil Rights Investigator

Leann Johnson, EEO/AA and Diversity Development Manager

Lynda Olin, Budget and Contracts Coordinator

Malea Guppy, Diversity and Inclusion Intern

Maria Elena Castro, Rural and Migrant Health Coordinator

Mavel Morales, Civil Rights Investigator

Noelle Hartwick, Health Equity Research Analyst

Omar Carrillo, Health Equity Workforce and Language Access Assistant

Rebecca Naga, Community Engagement Coordinator

Robin Johnson, Health Equity Research Analyst

Sean Hartfield, Civil Rights Investigator

Shelley Das, Grant Program Coordinator/Developer

Tricia Tillman, Director

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