

Office of Equity & Inclusion 2014–2015 Annual Report



421 SW Oak Street, Suite 750
Portland, OR 97204
971-673-1240 or 711 (TTY) • www.oregon.gov/OHA/oei



Office of
Equity & Inclusion

Director's message



Leann R. Johnson, M.S.

Welcome to the Office of Equity and Inclusion: a division of the Oregon Health Authority

Change can be a difficult proposition. The success of equity and inclusion work depends on the need to change, even if there is not a desire to do so. The work calls for substantive change in our institutions, systems, policy, practice and culture. It encompasses not only our behaviors, but our attitudes and values as well. When confronted by change, what do we do? How do we do it?

The Oregon Health Authority (OHA) experienced profound change in the last year, leading the transformation in Oregon's health care system. In the wake of that work, OHA reflected on its own internal systems and processes, ultimately resulting in significant reorganization.

The Office of Equity and Inclusion (OEI) also evolved relatively quickly from a small office to its own division in OHA with more than 20 diversity, inclusion and equity professionals. OEI's mission in this time of rapid transformation remains unchanged: to close the gap of health disparities in the relentless pursuit of health equity for all people of Oregon, especially those who are underserved and have experienced oppression over generations.

Today OEI is poised to continue our work as one of seven divisions in the Oregon Health Authority. Under the leadership of our new Director, Lynne Saxton, OHA's other six divisions are Operations and Finance, Health Systems, Health Policy and Analytics, External Relations, Public Health and the Oregon State Hospital.

As I consider the last few months, I recall the many challenges and opportunities that we had as an agency and as an OHA division. I remember members of our OEI team continuing to forge forward, working extra hours to fully engage in the agency's change management processes, yet never losing sight of our mission or the daily requirements of our "regular jobs." I remember our drive for consistency between ends and means, and working to align the goal of equity and a process that is equitable.

Our work has not gone unnoticed. I am proud to report that OEI and the Health Equity Policy Committee were each recognized for leadership in promoting and implementing equity, diversity and inclusion within government as finalists for the 2015 Robert Phillips-Regional Diversity Award.

With this brief reflection, I invite you to read this annual report and take a moment to celebrate the ongoing achievements of OEI and our community partners and stakeholders. Reflect also on this past year in our nation, which reminds us our collaborative and relentless pursuit of justice, equity and care is an ever-present opportunity and ongoing challenge.

Sincerely,

A handwritten signature in blue ink that reads "Leann R. Johnson". The signature is written in a cursive, flowing style.

About the Office of Equity and Inclusion

The Office of Equity and Inclusion (OEI) began in 1993 as part of the Department of Human Services (DHS) Office of Multicultural Health (OMH), focusing on addressing health inequities statewide. When Oregon Health Authority (OHA) was created in 2011, OMH became the Office of Equity and Inclusion. This year, as part of OHA's organizational restructure, OEI became one of seven agency divisions.

OEI is a leader and catalyst in assisting OHA promote equitable services and outcomes for underrepresented populations statewide. OEI also engages with our state's diverse communities to inform our agency's work to achieve the triple aim of better health, better care and lower costs.

What guides our work

Our vision

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

Our mission

To engage and align diverse community voices and OHA to ensure the elimination of avoidable health gaps and promote optimal health in Oregon.



2015 Developing Equity Leadership through Training and Action (DELTA) Graduation

Our strategic focus

Hundreds of Oregonians informed OEI's strategic plan for 2011–16. This plan guides our work, our priorities and our focus on partnerships with the goal of creating a healthier Oregon. By 2016, OEI



Panel of Speakers (Momentum Alliance 2015) OEI Sponsored Event

will connect people, policy and programs to make substantial and measurable progress toward achieving our vision and mission.

OEI priorities are:

- Foster dynamic, strength-based and authentic relationships among Oregon's diverse communities, OHA and Oregon's health-promoting systems.
- Ensure and sustain an organizational structure that relentlessly pursues health equity and organizational diversity in OHA and in Oregon's health-promoting systems.
- Integrate and use diversity development best practices within OHA to recruit, hire, retain, manage performance, contract and procure, and develop leadership 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.

OEI division and programs

As a direct result of the agency’s change management process, OEI reaffirmed our primary functions and identified three portfolios or units of work: business support, civil rights and compliance, and equity and policy.

Business support — long-term vision, strategic communications, quality improvement and efficient office operations.

Communications — provides communication to inform key stakeholders and the public of strategies to promote equity and diversity.

Community engagement — fosters dynamic, strength-based, authentic relationships among Oregon’s diverse communities, OHA and Oregon’s health promoting systems.

Diversity and inclusion — integrates and uses diversity development best practices for recruitment, hiring, retention, performance management, contracting and procurement, and leadership within OHA and in Oregon’s health promoting systems.

Grants and sponsorships — invests in the capacity of Oregon’s diverse communities to promote regional and community solutions to avoidable health gaps. Supports capacity building for community-based efforts to promote diversity development, cultural competence and health equity.

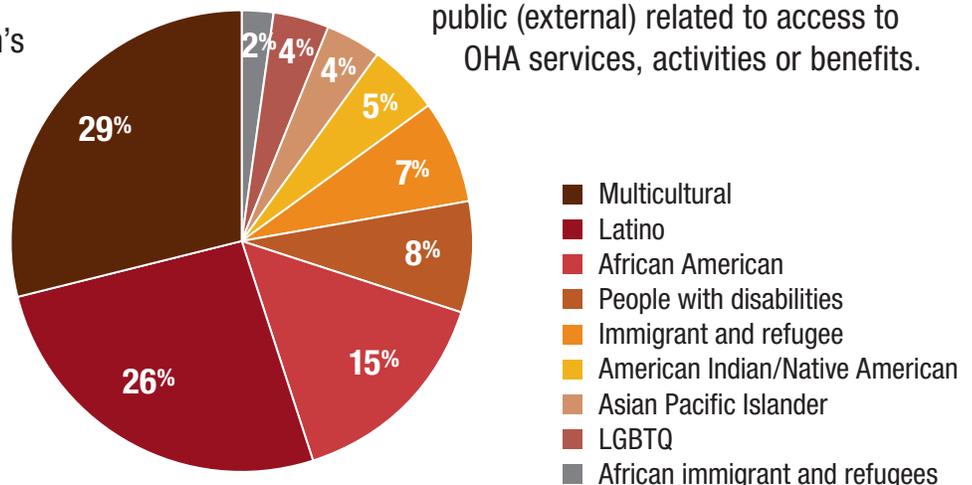
Research — disseminates data, research and cost/benefit analyses of the impact of diversity development and cultural competence on organizational performance. Collaborates with community partners to create policy, data and cost/benefit analyses.

Training and technical assistance — develops and provides training and consultation for improvement of health equity, diversity and inclusion policies, programs and practices.

Civil rights and compliance — compliance with state and federal civil rights laws and regulations, both internally and for the public.

Americans with Disabilities Act (ADA) — ensures Oregonians have meaningful access to OHA’s services, activities and benefits including employment and advancement opportunities within the agency.

Civil rights investigations — responds to reports of alleged discrimination or harassment based on protected class from employees (internal) related to employment and the public (external) related to access to OHA services, activities or benefits.



OEI Sponsorships 2014–15: \$71,192

Equity and policy — engages community and agency partners in developing and implementing long-term solutions to eliminate avoidable health inequities.

Developing Equity Leadership through Training and Action (DELTA) — DELTA is a nine-month health equity leadership program that builds capacity to advocate for programs and policy to promote health equity.

Health equity policy — OEI establishes statewide health equity policies by engaging community partners to assist with policy and organizational development priorities including the collection of race, ethnicity, language and disability data, establishing standards for provider cultural competence continuing education and ensuring representation of underrepresented communities.

Health Equity Workforce Program — Develops standards for training and certification of traditional health workers and health care interpreters. This program increases diversity within the health care workforce, supports culturally and linguistically appropriate patient-centered care, and increases access by linking community members with health-promoting systems.

Language Access Program — This program develops language access standards and policy for OHA employees and contractors, and supports compliance with federal requirements to serve people with limited English proficiency and people with disabilities, ensuring equitable access to care.

Rural and Migrant Health Program — This program, in partnership with the OHA Primary Care Office, provides technical assistance to federally qualified health centers and supports the establishment of new clinics to increase access to health care for migrant and seasonal farmworkers, and rural communities.

Regional health equity coalitions (RHECs) — RHECs are collaborative, community-driven groups organized regionally to establish policies that increase access to optimal health where community members may experience health inequities.

OEI by the numbers

\$71,192 in sponsorships to community-based organizations to support capacity-building efforts.

Our six regional health equity coalitions (RHECs) **cover 10 counties** and the **Confederated Tribes of Warm Springs**, and include more than **130 community-based organizations**.

RHECs held **122 community trainings** throughout the state.

Contracted with **six equity and inclusion coaches** who provide technical assistance across Oregon to address and integrate health equity into all areas of the health care system.

Established **five employee resource groups (ERGs)** to support OHA's recruitment, retention and diversity development.

Trained 25 leaders in the third cohort of DELTA.

Engaged 70 researchers in quarterly Health Equity Researchers of Oregon (HERO) meetings, focusing on traditional health workers.

Our 2014–15 Annual Report



RHEC members and OHA staff take a break during the 2015 Spring Gathering

This annual report reflects the four pillars of our strategic plan: community engagement, organizational direction, diversity development and health equity.

You will find highlighted accomplishments, organized by internal and external impact.

Community engagement

Foster dynamic, strength-based and authentic relationships among Oregon's diverse communities, OHA and Oregon's health-promoting systems.

Internal

- Engaged more than 700 community partners statewide through gatherings, trainings, sponsorships and capacity-building efforts.
- Connected 42 members of OHA leadership and staff with diverse community members and organizations through our Sponsorship Program.
- Partnered with OHA Public Health Division, Multnomah County, Immigrant and Refugee Community Organization (IRCO) Africa House, Oregon Association for Liberia, Sierra Leone Association and other community partners to address the Ebola crisis and prepare Oregon's African immigrant and refugee communities for the potential public health emergency in a culturally responsive manner.

- Supported development of OHA Transformation Center's sponsorship policy.

External

- Our six Regional Health Equity Coalitions (RHECs) cover 10 counties and the Confederated Tribes of Warm Springs, and include more than 130 community-based organizations. RHECs held 122 community trainings throughout the state.
- Provided \$71,192 in sponsorships to community-based organizations to support capacity-building efforts.
- Convened quarterly health care interpreter stakeholder sessions to discuss language access. More than 100 participants attended, including health care interpreters, health care and interpreter industry partners, and language access advocates.
- Sponsored three health care interpreter trainings in Bend, Pendleton and Portland. Sixty participants completed the training and may advance to qualification and certification. Trainings are planned for Medford and Wilsonville in early 2016.
- Developed and conducted Multicultural Storytelling training for the Annual Coordinated Care Model Summit Community Advisory Committee Roundtable as a culturally responsive strategy to improve health outcomes of communities of color.
- Identified and engaged community members whose health, finances or livelihood have been disproportionately burdened by the effects of climate change to share their stories (e.g., migrant farm workers, senior citizens, people from a community of color, non-English speakers).

- Convened two RHEC gatherings in central and southern Oregon. Attendees included representatives from all coalitions, the Governor’s Office, OHA’s Chief Medical Office and Public Health Division, CCOs, and community-based organizations.

Organizational direction

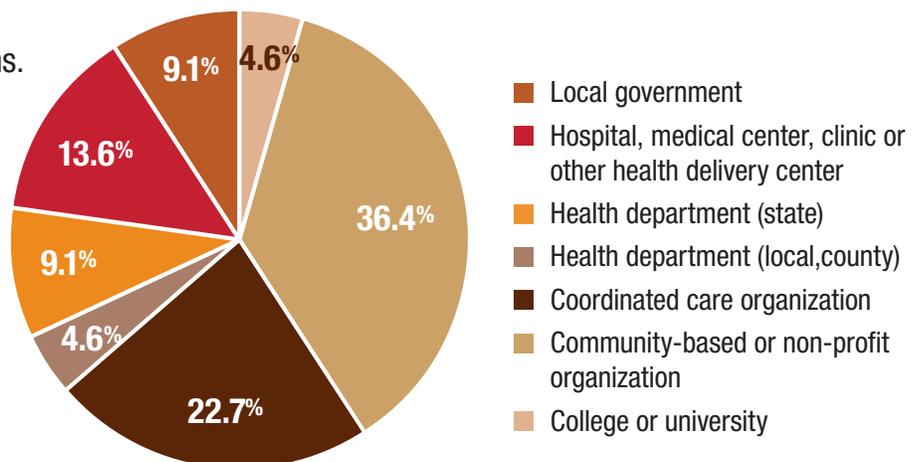
Ensure and sustain an organizational structure that relentlessly pursues health equity and organizational diversity within OHA and in Oregon’s health-promoting systems.

Internal

- Reviewed and provided detailed technical assistance for the Addiction and Mental Health Strategic Plan that led to the identification of health equity as its first strategic initiative.
- Increased OHA’s plain language review capacity by developing a “jargon glossary” as a resource for other plain language reviewers.
- Partnered with the Transformation Center to host a CCO-initiated Health Equity Learning Collaborative.
- Increased communication capacity of OEI by hosting an AmeriCorps VISTA who developed key communications to inform stakeholders and the public of strategies to promote equity and diversity.
- Provided cultural competency training to 64 AmeriCorps VISTAs assigned to work throughout OHA and in other community-based organizations.
- Reviewed “OHP Member Handbook” and other OHA and CCO documents for cultural and linguistic appropriateness.

External

- Worked with community partners on applications to establish new access points for health care. Oregon received four awards totaling \$3.8 million to serve 14,157 new patients.
- Provided more than 140 hours of technical assistance and training on outreach, council development and equity, and health disparities to CCO Community Advisory Councils.
- Contracted with six equity and inclusion coaches who provide technical assistance across Oregon to address and integrate health equity into all areas of the health care system.
- Participated in the preparation or review of various reports including the 2015 Agency for Healthcare Research and Quality (AHRQ) Report: “Improving Cultural Competence to Reduce Health Disparities for Priority Populations.”
- Presented information on the DELTA Program model at the Eighth Annual Conference by the Center for Minority Health & Health Disparities, the Latino Health Equity Conference, and the American Hospital Association’s Symposium for Leaders in Healthcare Quality & Equity Roadmap.
- Convened four Health Equity Researchers of Oregon (HERO) gatherings with a year-long focus on traditional health workers.
- Provided sponsorships for community-based efforts to support diversity development, cultural competence and health equity.



2015 DELTA participants

Diversity development

Integrate and use diversity development best practices in recruitment, hiring, retention, performance management, contracting and procurement, and leadership and employee development within OHA and in Oregon's health-promoting systems.

Internal

- Served as OHA Director's designee to respond to reports or complaints of discrimination, harassment or retaliation experienced by OHA employees, volunteers, contractors and interns.
- Partnered with DHS/OHA Office of Information Services to develop enhancements and improvements to the Internal (Employee) Civil Rights database.
- Established five employee resource groups (ERGs) to support OHA's recruitment, retention and diversity development. The ERGs are: Differently Abled Workplace Network (DAWN), Environmental Justice Solutions Team, Healthy Families ERG, LGBTQI+ Sexual Orientation and Gender Minorities Committee, and OHA Black ERG.
- Consulted with OHA leadership to promote equitable hiring and contracting policies, practices and services to ensure culturally and linguistically appropriate service delivery by OHA.
- Sponsored OEI staff member's participation in OHA/DHS's Leadership Academy resulting in recommendations about language access services at the Oregon State Hospital, "Can You Hear Me?"

External

- Developed a "Report of Discrimination" form available in six languages.
- Implemented OHA's client (public) civil rights complaint procedure.
- Provided technical assistance to internal and external stakeholders related to gender dysphoria, ADA accessibility and the Citizen-Alien Emergency Waived Medical (CAWEM) emergency medical benefit package.

- Produced and distributed OHA nondiscrimination communication tools throughout the state.
- Established a statewide, toll-free telephone line to report discrimination.
- Sponsored and participated in job fairs and other activities to engage community stakeholders and increase the diversity of the candidates applying for employment with OHA.



Community stakeholders at OEI's 2014 Annual Meeting with Dr. Bruce Goldberg, former OHA Director and 2014 Health Equity Champion Awardee

Health equity and policy

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.

Internal

- Convened the Cultural Competence Continuing Education Approval Committee (HB 2611) and developed processes to evaluate cultural competence trainings.
- Developed health equity analysis to review legislative bills.
- Tracked and provided health equity analyses on more than 100 pieces of legislation during the 2015 legislative session.
- Partnered with DHS and DHS/OHA Office of Information Services to implement REAL+D data collection standards.
- Collaborated with DHS to draft and adopt the Alternate Formats and Language Access Services Policy for OHA and DHS.

External

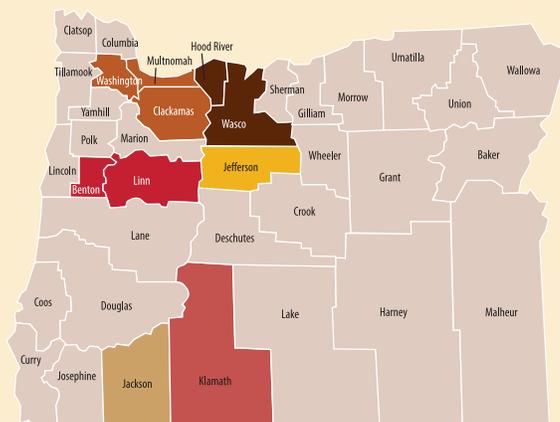
- Trained 25 leaders in the third cohort of DELTA, (totaling 74 graduates over the past three years) to build internal and external leadership to advocate for health equity policy and programs.
- Provided technical assistance and support on migrant and seasonal farmworker health challenges to rural health clinics and federally qualified Oregon health centers.
- Explored opportunities to create social determinants of health strategic priorities including employment, housing, education and corrections.
- Engaged 70 researchers in quarterly Health Equity Researchers of Oregon (HERO) meetings, focusing on traditional health workers.
- Hosted community-wide trainings on topics including health literacy, compliance with federal nondiscrimination regulations and community health workers models in Ethiopia.
- Provided technical assistance to two new migrant health centers and two new federally qualified health centers and staff.
- Conducted a Migrant Health and Sexual Violence workshop at the Fourth Annual Social Justice Conference & Fourth Biannual International Health Conference.
- Trained CCO clinical innovators on health equity concepts in health care.
- Held a community training on health literacy.

2016 OEI initiatives

The Office of Equity and Inclusion will continue to focus our resources and efforts toward the relentless pursuit of health equity. Our priority is to ensure access to physical, oral and mental health services for all individuals. To do so the work of OEI will continue to integrate strategies and tactics that promote health equity and inclusion into the decision-making and operations of the Oregon Health Authority and health systems in the state of Oregon.

In 2016 we will focus on:

- Engaging community partners to support local efforts to advance health equity;
- Partnering across the state and with the Governor's office to implement best practices in equity, diversity and inclusion;
- Improving processes to ensure language access, civil rights and ADA compliance;
- Establishing metrics for health equity, diversity and inclusion;
- Developing additional training and development opportunities to integrate health equity, diversity and inclusion concepts and practice; and
- Supporting the full implementation of REAL+D data collection standards.



Geographic representation of RHECs established between 2011–15

- [Oregon Health Equity Alliance \(OHEA\)](#)
Clackamas, Washington & Multnomah Counties
- [Let's Talk Diversity Coalition](#)
Confederated Tribes of Warm Springs & Jefferson County
- [Linn Benton Health Equity Alliance](#) Linn & Benton Counties
- [Klamath Regional Health Equity Coalition](#) Klamath County
- [Southern Oregon Health Equity Coalition \(SO Health-E\)](#) Jackson County
- [Mid-Columbia Health Equity Advocates](#) Hood River & Wasco Counties

OEI advisory councils and committees

We could not do our work without the leadership and support of so many community stakeholders. We want to take a moment to acknowledge the work of these individuals. Thank you!

Community Advisory Council

- » Dr. T. Allen Bethel, Albina Ministerial Alliance
- » Jacqueline Left Hand Bull, Northwest Portland Area Indian Health Board
- » Victoria Demchak, Oregon Primary Care Association
- » Lakeesha Dumas, African American Health Coalition
- » Mary Anne Harmer, DOJO Agency
- » Holden Leung, Asian Health and Service Center
- » James Mason, Providence Health & Services
- » Alberto Moreno, Oregon Latino Health Coalition
- » Joanne Noone, OHSU, Ashland Campus
- » Cristal Riley, OHSU, Intercultural Psychiatric Program
- » Joseph Santos Lyons, Asian Pacific American Network of Oregon

Traditional Health Workers Commission

- » Cheryl Badaracco, Providence Parish Health Promotores de Salud Program
- » Meghan Caughey, Cascadia Behavioral Health
- » Renee Balcom, Liberty Advocacy Group
- » Krissa Caldwell, Department of Community Colleges and Workforce Development
- » Lakeesha Dumas, African American Health Coalition
- » Jennifer Jenson, Peace Health
- » Ally Linfoot, Clackamas County Behavioral Health Division
- » Eric Martin, The Addictions Counselor Certification Board of Oregon
- » Roxanne McAnally, Home Care Commission

- » Connie Miyao, Oregon Nurses Association
- » Raeben Nolan, Oregon Doula Association, Birthingway College of Midwifery
- » Edna Nyamu, Oregon Community Health Worker Association
- » Maria Sanchez, Next Door Inc.
- » Jeanine Smart, Project Access NOW
- » Ashlen Strong, Health Share of Oregon
- » Jean Yamamoto, SEIU
- » Noelle Wiggins, Multnomah County Capacitation Center

Oregon Council on Health Care Interpreters

- » Melanie DeLeon-Benham, Oregon Judicial Department
- » Megan Harris-Jacquot, Attorney at Law
- » Erin Neff, Legacy Health Systems
- » Morad Noury, United Services for Counseling
- » Roxana Ocaranza-Ermisch, Cascades East AHEC
- » Vanloeun Ping, Immigrant & Refugee Community Organization
- » Samuel Pino, Salem Health
- » Miriam Volpin, Registered Nurse
- » Patricia Wetzel, Portland State University
- » Mitchell Yoder, Providence Medical Group

Health Equity Policy Committee

- » Lucy Baker, Oregon Advocacy Commissions
- » Liz Baxter, Oregon Public Health Institute
- » Sandra Clark, Health Share of Oregon
- » Patricia Cortez, Juventud FACETA
- » Chris Coughlin, Chris Coughlin, LLC

- » Victoria Demchak, Oregon Primary Care Association
- » Beth Englander, Oregon Law Center
- » Brandy Ethridge, Independent Researcher
- » Suzanne Hansche, Allies for a Healthier Oregon
- » Sandra Hernandez, Spect-Actors Collective
- » Denise Johnson, Care Oregon
- » Nancy Kramer, Oregon Advocacy Commissions
- » Lisa Ladendorff, Northeast Oregon Network
- » Shafia Monroe, International Center for Traditional Childbearing
- » Alberto Moreno, Oregon Latino Health Coalition
- » Dayna Morrison, Oregon AIDS Education and Training Center
- » John Mullin, Oregon Law Center
- » Samantha Naliboff, Volunteers of America
- » Midge Purcell, Urban League of Portland
- » Maura Roche, Basic Rights Oregon
- » Joseph Santos Lyons, Asian Pacific American Network of Oregon
- » Jeannette Taylor (Nguyen-Johnson), OHA Oregon Health Policy & Research
- » Kathy Wai, Asian Pacific American Network of Oregon
- » Fabiana Wallis, Oregon Psychological Association
- » Nancy Weed, Oregon Health Equity Alliance

DELTA Advisory Committee

- » Ignatius Bau, Independent Consultant
- » Emiliee Coulter-Thompson, OHA Transformation Center
- » Bob DiPrete, Community Member
- » Bobby Green, OHA Director of Local Government Affairs
- » Lisa Ladendorff, Northeast Oregon Network
- » John Lenssen, LLC
- » Catherine Potter, Kaiser Permanente NW
- » Belinda Sauer, OHA Addictions and Mental Health
- » Lucy Zamerelli, Trillium Behavioral Health



From left to right: OEI Equity and Policy Manager Carol Cheney, current OEI Director Leann Johnson, and former OEI Director Tricia Tillman share a moment of leadership transition and opportunity.

Cultural Competence Continuing Education Approval Committee

- » Cultural Competence Continuing Education Approval Committee (CCCE) Members
- » Amela Blekic, Oregon Health & Science University-Department of Psychiatry
- » Sandra Clark, Health Share of Oregon
- » Jordan Ferris, Oregon Nurses Association
- » Antonio Flores, Planned Parenthood of Southwestern Oregon
- » Benjamin Gerritz, Cascade AIDS Project
- » Maileen Hamto, Oregon Health & Science University-Center for Diversity & Inclusion
- » Leslie Houston, Oregon Home Care Commission
- » Fiona Karbowicz, Oregon Board of Pharmacy
- » Sunil Khanna, Oregon State University-College of Public Health and Human Services
- » Shafia Monroe, International Center for Traditional Childbearing
- » Nancy Nolin, Quest Center for Integrative Health
- » Samie Patnode, Oregon Health Authority-Health Licensing Office
- » Susan Polvi, Linn County Mental Health Services, Quality Improvement
- » Jorge Ramirez, Oregon Research Institute
- » Joseph Santos Lyons, Oregon Health Equity Alliance/Asian Pacific American Network of Oregon
- » Kimberly Tippens, Helfgott Research Institute, National College of Natural Medicine
- » Lucy Zammarelli, Trillium Behavioral Health

OEI staff

Business Support Team

Leann Johnson

Director
971-673-1285

Alyssa McClean

AmeriCorps VISTA
971-673-3354

Charniece Tisdale

Training Coordinator
971-673-1341

Helen Hoang

Diversity Coordinator
971-673-1288

Crystal Marion

Executive Assistant
971-673-1287

Rebecca Naga

Community Engagement Coordinator
971-673-1283

Shelley Das

Grant Program Coordinator
971-673-0027

Equity and Policy Team

Carol Cheney

Equity and Policy Manager
971-673-2960

Anastasia Sofranac

DELTA Program Coordinator
971-673-1333

April R. Johnson

Health Equity Workforce Manager
971-673-3389

April Turner

Health Equity Workforce Assistant
971-673-3359

Danielle Droppers

Regional Health Equity Coalition
Coordinator
971-673-3391

Dr. David Cardona

Language Access Coordinator
971-673-1286

Emily Wang

Health Equity Policy Analyst
971-673-2307

Maria Elena Castro

Rural and Migrant Health Coordinator
503-884-4448

Civil Rights and Compliance Team

Janice Kim

Lead Civil Rights Investigator
971-673-1284

Jánice O'Neal

Diversity and Equity Assistant
971-673-1342

Kerry Johnson

Civil Rights Investigator
971-673-2268

Mavel Morales

Civil Rights Investigator
971-673-2000

Staff departures

Thank you to OEI staff who moved on to other adventures in 2014–15.

Edith Molina

Lillian Jalali

Luis Martin del Campo

Lynda Olin

Noelle Hartwick

Rene Ferran

Robin Johnson

Rolanda Lively

Sean Hartfield

Tricia Tillman

Stay connected!

There are many ways to stay in touch with the Office of Equity and Inclusion.

Get updates through our newsletter at www.oregon.gov/oha/oei/Pages/index.aspx or visit us on [Facebook](#).



This document can be provided upon request in an alternate format for individuals with disabilities or in a language other than English for people with limited English skills. To request this publication in another format or language, call 971-673-1240 or 711 (TTY), or fax 971-673-1128.