### Cultural Competence Continuing Education Program October 24, 2018



CCOs Advancing Health Equity Workshop Portland Convention Center





#### **Increasing Diversity in Oregon**

The diversity of Oregon's population continues to grow

- From 2009-2015, the state's racial and ethnic populations grew at a faster rate than the nation's with 1 in 4 (25%) or 1,007,244 Oregonians identified as a person of color (U.S. Census Bureau, 2015)
- In 2010, at least 137 languages spoken— Oregon within top
   15 language diverse states (U.S. English Foundation)
- In 2016, 1 in 10 Oregon residents is an immigrant &
   1 in 8 residents is a U.S. citizen with at least one immigrant parent (American Immigrant Council, 2017)

# Considerations Collecting Granular Data

- Racial or Ethnic Identity (primary identity, multiracial identity)
- Preferred Language for Health Information
- Disability Status
- Gender Identity
- Sexual Orientation
- Intersectionality of these considerations



- In 2010, Oregon's Asian population surpassed Hispanic/Latinos as fastest growing, making up 5.2% of population (214,750)
- At state level, Chinese Americans are largest ethnic group, followed in size by Vietnamese, Filipino, Japanese, Korean & Asian Indian (Asian Americans Advancing Justice report: A Community of Contrasts: Asian Americans, Native Hawaiians, & Pacific Islanders in the West, 2015).
- There is not 1 Asian language or culture
- Historical trauma-Chinese Exclusion Act of 1882; forced internment of Japanese Americans in 1942
- In 2017, Asian American adults & children reported the least access to care and the least satisfaction with care out of all racial/ethnic groups among Oregon's Coordinated Care Organizations (OHA Transformation Center Report: Opportunities for Oregon's CCOs to Advance Health Equity: Oregon Health Authority Transformation Center)

# Cultural Competency Training A Foundational Strategy for Advancing Health Equity in Oregon

- Since 1999, cultural competency training identified by communities, the state, & health care professionals to address health disparities & advance health equity
  - Governor's Racial & Ethnic Health Task Force (1999)
  - Oregon Health Fund Board's Health Equities Committee (2008)
  - Oregon Action Plan for Health (2010-2019)
  - OHA's Communities of Color Policy Forums (2010)
  - SB 97 (2011); HB 2611 (2013)-Urban League, Asian Pacific American Network of Oregon (APANO), Oregon Health Equity Alliance (OHEA), Oregon Law Center, Oregon Student Association, health care professionals/organizations, and more (2011-present)
  - Engaging Oregonians in Identifying Health Equity Policy Priorities:
     a Modified Policy Delphi Approach (2014)

## Benefits of Cultural Competence Continuing Education (CE)

- Improved patient-provider communication & patient adherence to treatment
- Improved provider self-reported perception & understanding of cultural competence
- Increased ability to provide patient-centered care
- Cost savings (increased access to appropriate care, more patient engagement, improved service delivery, less costly inpatient & urgent care costs, & less liability issues)

### Development of Cultural Competence CE Recommendations for OHA

**2012:** Cultural Competence CE Comte Report to OHA:

https://www.oregon.gov/oha/OEI/Pages/Reports.aspx

Over 180 health care professionals voted on standards

**2013**: Cultural Competence CE law-ORS 413.450, formerly HB 2611

**2014**: OHA & Rules Advisory Committee developed permanent rules OAR 943-090-0000 through 943-090-0020 to guide implementation of law

**2015, 2017:** Cultural Competence CE Advisory & Review Committees

Developed/updated criteria

#### **Oregon's Culture Competence Definition\***

- Cultural competence means a lifelong process of examining values and beliefs and developing and applying an inclusive approach to health care practice in a manner that recognizes the context and complexities of provider-patient communication and interaction and preserves the dignity of individuals, families, and communities.
- Cultural competence applies to all patients. Culturally competence providers
  do not make assumptions on the basis of an individual's actual or perceived
  abilities, disabilities or traits whether inherent, genetic or developmental
  including race, color, spiritual beliefs, creed, age, tribal affiliation, national
  origin, immigration or refugee status, marital status, socio-economic status,
  veteran's status, sexual orientation, gender identity, gender expression,
  gender transition status, level of formal education, physical or mental
  disability, medical condition or any consideration recognized under federal,
  state and local law

\*Oregon Administrative Rule (OAR) 943-090-0000 through 943-090-0020

### **CCCE Criteria for OHA Approval**



Criteria for A	pproval
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			Criteria for Approval											
Г		Cultu	Cultural Competence Continuing Education Training (December 2017)											
		Culturally competent practice requires self-awareness and self-assessment of beliefs, attitudes, emotions and values.												
			Training opportunity teaches about cultural factors that may influence provider and patient's behaviors											
	=		Training opportunity helps to foster a non-judgmental and respectful environment during health											
	aj.		encounters between provider and patient											
	Domain I		Training opportunity teaches relationship between cultural competence and ethics											
			Training opportunity explores concepts of power, privilege and oppression across personal identities and											
		*	the intersections among these identities (e.g. racial, ethnic, culturally-based, LGBTQ, people with											
			disabilities, limited English proficient, etc.)											
ı		Cultu	rally competent practice requires the acquisition of knowledge by providers.											
П			Training opportunity demonstrates understanding of cultural competence as a developmental, life long,											
П			participatory process, not an endpoint											
П		✓	Training opportunity provides a broad and inclusive definition of diversity, even if it focuses on a specific											
Н	=		population											
П	Domain II	✓	Training opportunity demonstrates knowledge of legal, regulatory (i.e. patient rights & responsibilities,											
1	Ě		risks to practice-civil rights act, ADA, CLAS, Joint Commission requirements, etc.) and accreditation											
	ă		issues of diversity and linguistic issues and providers' professional standards regarding cultural											
			competence											
		✓	Training opportunity demonstrates knowledge of health disparities and social determinants of health											
		✓	Training opportunity demonstrates knowledge of culturally-based information and related resources											
L			specific to Oregon											
1		Culturally competent practice requires the acquisition of skills by providers.												
		<b>✓</b>	Training opportunity demonstrates how to collaborate with patients and/or stakeholders in making health											
			care decisions.											
П	_	_	Training opportunity demonstrates how to develop and/or utilize communication tools/multiple patient											
	=		education formats (including translated, audio and visual materials) and patient assessment strategies (e.g.											
	nai.		patient- and family-centered communication, patient's perception of his/her health, patient preferences, etc.)											
П	Domain III		Training opportunity demonstrates how to collect and utilize data to inform clinical practice related to											
	_	*	health equity, (including recognition of institutional cultural issues)											
		_	Training opportunity demonstrates how to collaborate effectively with community resources,											
П			stakeholders, traditional health workers (THWs), qualified/certified health care interpreters (HCIs),											
			providers, and other types of healers											
İ		Cultu	tally competent training requires specific educational approaches for acquisition of knowledge											
1		and skills												
		<b>✓</b>	Training opportunity is delivered through facilitated learning processes (e.g. interactive training involving											
			case review, homework; discussion group/blog; interactive test with trainer/facilitator; post-training to											
	≥		demonstrate what was learned; etc.)											
	Domain IV	_	Training opportunity uses a variety of collaborative, inclusive and accessible teaching methodologies											
	Ĕ		consistent with adult learning principles (self-directed, goal oriented activities based on participant											
	ā		experiences in order to gain new forms of knowledge, skills, attitudes, or values)											
		·	Training opportunity is evaluated to assess impact on participants and efficacy of trainers, with clear											
			description of criteria for participant completion											
		_	Training opportunity incorporates the principles of privilege, power, oppression, bias, and the guiding											
L			principles of cultural competency											

#### **OHA Approved CCCE Trainings (Registry)**

https://www.oregon.gov/oha/OEI/Pages/CCCE-HB2611-2013.aspx

REGISTRY: OHA-Approved Cultural Competence Continuing Education Trainings (10/23/18 Update)

\*\*Please check training website/contact for more information, including number of CEUs (e.g. CE, CME, CEU, CCM, LSW, etc

Training Title	CE Trai	ner l	fealth Care Professional(s)		Subject/Interest Area		Number of hours (NOT CEUs)**	Number of experen-ti learning hours		Website N			Contact Info, if	any	Approval Date	Expiration Dat	ie
Building Foundations "Cross Cultural Care: A Person-Centered Approach"	Quality Inc.				Cultural competency training for healthcare professionals of any specialty.		1		Y	www.eualininteractions.com		Andres Echeverri, secheverri@qualityinteractions.com, 1-866- 360-9918 x 707		10/1/201	18 10/1/20	20	
	College	Techonologist, Dietitian, Eme Worker, Lactation Consultant tland Community Therapist, Medical Imager, M		apist, Dental Hygienist, Dentist, Denture rgency Medical Service Provider, Home Care, Long Term Care Administrator, Massage idwife, Naturopathic Doctor, Nurse, cal Therapist, Polysomnographic Tech, er	General training for CEUs healthcare professionals; competency and ethics.		6		6 ly	http://climb.occ.edu		/cultural-competency-uperade-healthcare-ethics	Amy Evans, amy	y.evans3@pcc.edu, 971-722-	10/1/2018	S 10/1/20	20
		Training Title	CE Trainer	Health Care Professional(s)		Subject/Interest	t Area		umber of ours (NOT EUs)**	Number of experen-tial learning hours	Cost? Y/N	Website		Contact Info, if any		Approval Date	Expiration
Cultural Competency 3 201 On Working for Diverse Population in Maternal and Child Sh		Transgender 7 Medicine 101	Naturopathic CE	Chiropractor, Counselor/Therapist, Dental Hyg Technologist. Diettian, Emergency Medical Se Worker, Massage Therapist, Medical Imager, D Doctor, Nurse, Nursing Board Administrator, O Optometrist, Pharmacult, Physical Therapist, P Polysomographic Technologist, Psychologist, Language Pathologist/Audiologist	rvice Provider, Home Care Aldwife, Naturopathic ccupational Therapist, hysician (MD/DO).	Transgender Me	idicine		1.5		Y	www.naturepathice.com		Dr. Timothy Miller, customerservice@naturopath 716-514-9312	icce.com,	3/23/2018	3/23
fealth (	Cor	Transgender a gender nonconformin (GNC) heatile of a primary care 8 setting	nd 5 are in	Counselor/Therapist, Massage Therapist, Mido Nurse, Occupational Therapist, Physician (MD/ Worker, Chiropractor, Pharmacist, Physical The	DO), Psychologist, Social	Transgender and Health Care		nforming	8		Υ	annous apul-institute.org		Dr. Angela Carter, dr.angela@institute.org, 503-459-2584	equi-	4/5/2018	4/5
Developing Equity eadership through fraining and Action DELTA)	Ore Aut Equ	Cultural Comp for Health Can 9 Providers	etency e DCCredits.org, Inc.	elysomnographic Technologist, Psychologist, Respiratory Therapist, compet		Multimedia introduction to cultural competency-includes interviews with providers and patients of various culture		s with	4	4	Y	OregonCulturalEquality.com		Dr. Scott Abrahamson, info@OregonCulturalEquality.com, 509-780-55		4/10/2018	4/10
racticing Cultural 1 lumility in I lealthcare Settings (	YWi Por Cha	Understanding Diversity of Le Blindness Its Ir so and Solutions	gal	Chiropractor, Counselor/Therapist, Dentist, En Provider, Home Care Worker, Lactation Consu Nurse, Nursing Board Administrator, Occupatie Therapist, Psychologist, Social Worker, Speech Pathologist/Audiologist	Itant, Massage Therapist, anal Therapist, Physical	General-disabilit	ty specific to visi	on and	4	3 (of the 4)	Y	www.adaptabilityforlife.com		Deb Marinos, adaptability@w 503-871-5299	avecable.com,	4/18/2018	4/18
		Understanding in LGBT: Gend Identity and G 11 Expression	s the T er International Training and Development, LLC	Chiropractor, Counselor/Therapist, Dental Hyg Technologist, Diethian, Emergency Medical Se Worker, Massage Therapist, Leatation Consult Midwife, Naturopathic Doctor, Nurse, Nursing Occupational Therapist, Optometrist, Pharmac Physician (MD/DO), Polysomnographic Techno Respiratory Therapist, Social Worker, Speech- Bathologist/Audiologist	rvice Provider, Home Care ant, Medical Imager, Board Administrator, ist, Physical Therapist, logist, Psychologist,	LGBT: General er inclusive and res cultural compete patients and the	pectful commun ence in care for l	nication, pl LGBT fa	.75 online, lus 1-3 cilitated arming		v	www.diversityinchusiencenter.com		Leslie Aguillar, leslie @diversityinclusioncente 1191	r.com, 407-859-	6/8/2018	6/8
		Intersecting Identities: Cult Competency fi 12 Healthcare Pro		Chiropractor, Counselor/Therapist, Dental Hyg Technologist, Dietitian, Emergency Medical Se Worker, Lactation Consultant, Massage Thera Midwife, Naturopathic Doctor, Nurse, Nursia Occupational Therapist, Optometrist, Pharmac Physician (MD/DO), Polysomorgraphic Techno- Respiratory Therapist, Social Worker, Speech-I Pathologist/Audiologist	rvice Provider, Home Care pist, Medical Imager, Board Administrator, ist, Physical Therapist, logist, Psychologist,	Cultural Identity Culturally Comp	As Framework I	for	4.5		v	www.asrinsfieldcounselineservices.com		Erin Kitumba, springfieldcounseling@gmail.c 8864	om, 541-357-	6/22/2018	6/22
		Supporting Transition: Collaboration: 13 Healthcare Pro	of oviders Glow Healthcare	Chiropractor, Counselor/Therapist, Emergency Lactation Consultant, Massage Therapist, Natu (MD/DO), Psychologist, and Social Worker		Cultural Compet	ency in Providin		8		Υ	drprovone@glowhealthcare.com		Dr. Rebecca Provorse, drprovorse@glowhealthcare.c 1865,	om, 503-222-	7/10/2018	7/10

### Health Professional Board Biennial Reporting Requirement (ORS 413.450)

- Whether or not boards require cultural competence CE or require their licensees/members access education opportunities from an OHA list, affected boards are required to document and report cultural competence continuing education information to OHA OEI every two years, beginning in 2017.
- OHA collected the first board reports in July 2017 (Minimum reporting period: Jan 1-June 30, 2017)

### Health Professional Board Biennial Reporting Requirement (ORS 413.450)

- Whether the board requires members participate in cultural competence continuing education
- The number of licensees/members who completed cultural competence continuing education
- The number of audited licensees/members who completed cultural competence continuing education from the OHA-approved list
- The level or reporting each board requires of member related to participation in cultural competence continuing education



#### OHA's 1<sup>st</sup> Cultural Competence CE Biennial Report to the Oregon Legislature

- Report to the Legislature: Cultural Competence Continuing Education Report: HB 2611 (2013) - 1<sup>st</sup> biennial report (Aug, 2018)
- 10,413 health care professionals completed CCCE training (Jan 1-June 30, 2017)
- Boards of Psychology & Nursing had highest % completion (43%)
- Oregon Board of Psychology & Oregon Board of Licensed Professional Counselors & Therapists require licensees to complete 4 hours of CCCE during 2-year reporting period
- Oregon Board of Licensed Social Workers requires 6 hours of CCCE during
   2-year renewal cycle
- 13 boards allow CCCE to satisfy general CE requirements (see Appendix 1)

### Thank you!

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https://www.oregon.gov/oha/OEI/Pages/CCCE-HB2611-2013.aspx

