

Oregon Health Policy Board Health Equity Committee

Charter

Approved by the Oregon Health Policy Board on May 2, 2017

I. Authority

The Health Equity Committee is established by the Oregon Health Policy Board (OHPB). The purpose of the committee is to coordinate and develop policy that proactively promotes the elimination of health disparities and the achievement of health equity for all people in Oregon. Achieving health equity, including a healthcare workforce that reflects the demographics of the communities it serves, is a priority for the OHPB, the Oregon Health Authority (OHA) and the Governor. The Health Equity Committee will be responsible for reviewing health policy and leading efforts to develop best-practice policies which improve health equity.

II. Duties/Deliverables and Timeline

- 1. Provide analysis, guidance and recommendations to OHPB on policy, including key legislation, using an equity lens.** Make substantive recommendations on proposed policies to be considered by OHPB, OHA and the broader health system in Oregon using an equity lens, which shall be clearly defined. Identify any gaps and assist in developing policy that will maximize progress and improve targeted outcomes. Evaluate policy impacts, including gathering feedback from affected communities regarding efficacy. Identify best-practice policies to reduce and eliminate disparities and achieve equity. Serve as an entry point, in collaboration with the OHA Office of Equity and Inclusion Division (OEI) and OHA External Relations Division for community organizations to share policy priorities, barriers, and solutions they have identified.
- 2. Provide assessment and actionable recommendations. Analyze data and information and assess OHA's progress toward achieving defined health equity goals, including steps to becoming a more culturally responsive organization.** Develop best-practice, defined health equity policy framework and goals regarding culturally responsive policies and procedures, equitable access to resources to promote health, community engagement, and inclusion.

Coordinate and review health equity related policies as directed by the OHPB, including establishing health equity goals and metrics that are based on best-practice and measurable when appropriate. Provide guidance on policy development to ensure that substantive progress toward goals and metrics is made, including but not limited to health equity metrics established by the state.

3. Collaboratively work with other OHPB committees and make recommendations to OHPB to:

- Improve racial, cultural and ethnic diversity of Oregon's healthcare workforce to reflect communities served, showing a baseline and benchmarks by county;
- Serve as a resource for the Health Plan Quality Metrics Committee and identify quality measures relevant to advancing health equity in Oregon;
- Serve as a resource to the Workforce Committee to assist in the identification of strategies that support health equity and integrated health delivery;
- Collaborate with the OEI and PH Divisions regarding the scope of work to integrate health equity strategies into Public Health Modernization;
- Develop strategies to advance health equity related to the OHA workgroups focusing on Primary Care and Behavioral Health Reform efforts identified in OHA work groups.
- Identify strategies to advance health equity across policy domains relevant to the social determinants of health.
- Serve as a leader and catalyst for meaningful change in the health system related to health equity.

The Health Equity Committee in the first year will convene joint meetings with OHPB committees to review and develop health equity goals and make health equity recommendations to the OHPB. Joint meetings between the Health Equity Committee and each of the OHPB committees will be held annually. The Health Equity Committee is charged, in collaboration with other OHPB committees, with reporting and making recommendations regarding OHPB committee health equity policy development and goal setting.

III. Committee composition (demographics, geographic representation, skills, sector)

The committee is appointed by OHPB and shall consist of 15 individuals who are experienced and skilled in the review, analysis and development of health equity policy and results-proven implementation, including but not limited to the social determinants of health. Members shall include health equity professionals or individuals who have life experience in health equity policy advocacy and policymaking processes, community members, and health equity practitioners. Applications shall be solicited from a diverse group of candidates. Selection shall be made to ensure the committee is representative of communities experiencing health disparities, including, but not limited to racially and ethnically diverse populations, linguistically diverse populations, immigrant and refugee populations, LGBT populations, the aging population, people with disabilities, rural communities, and economically disadvantaged populations as well as individuals with experience transforming health equity in operational settings.

Terms will be two years, with staggered membership terms to ensure continuity.

IV. Dependencies

The committee will seek information from, provide information to, and collaborate with a wide range of partners, including but not limited to:

- Community partners and stakeholders representing communities impacted by health disparities
- OHA
- Committees of OHPB

V. Staff and Board Expectations

OEI will provide technical assistance, consultation and staff support to the committee on matters of health equity, health disparities, health policy goals, health policy development and equity and inclusion. OHPB will consult with the Health Equity Committee on an ongoing basis and involve the committee in regular discussion with and reports to the Board at their monthly meeting and annual retreats.