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2023

HEALTH  
EQUITY PLAN  
UPDATE

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# Section 1: Health Equity Plan Update

Formed from a cohort of local leaders, Yamhill Community Care has consistently been led by local interest and community voice. YCCO has formalized its commitment to listening to stakeholders and adopting a collective-impact model. The creation of a Health Equity Plan in 2016, demonstrates the commitment and on-going effort to achieve what is described within. YCCO has invested in equity and the social needs of its community before and beyond Health-Related Services and SHARE and affirms its continuous, ever-growing dedication to an equitable, inclusive, collaborative health system designed to help members and community flourish.

YCCO adopts and aligns with the 1115 Waiver four key policy areas relayed to health equity:

## Yamhill Community Care Pathway to Advancing Health Equity



**Ensure access to coverage**

Partnership to improve the accessibility of the full array of services. Centering cultural appropriateness and meaningful connection with historically oppressed communities.



**Create an equity-centered system**

Strong coordination within local health and social service systems to create adaptive care that meet the needs of people when they are most vulnerable, during life transitions.



**Encourage smart, flexible spending**

Commitment to listening, learning, and adapting funding strategies on an individual and community level to be community identified, data-driven, and locally informed.



**Invest in equity across systems**

Invest in innovative initiatives to improve wellness, and address barriers locally. Return revenue to the community to identify needs and decide where to invest.

YCCO offers these updates to its existing plan to enhance and continue this important work for our staff, for YCCO members, and our whole community.

Regards,

*Seamus McCarthy*

Seamus McCarthy, PhD  
President/CEO



## HEALTH EQUITY ADMINISTRATOR

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**Note:** Documents attached to this plan are marked in orange for ease of reference.

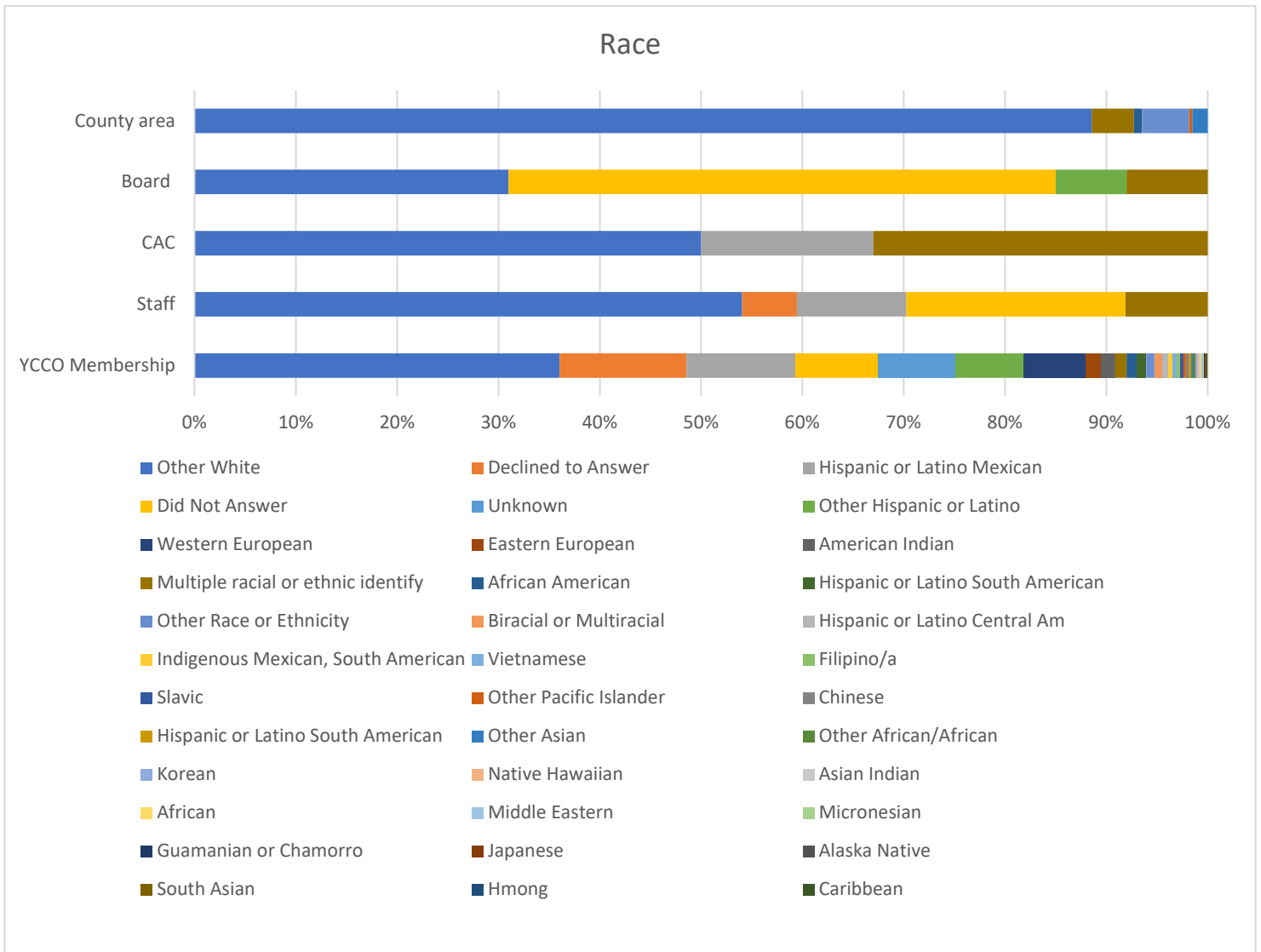
As indicated in the guidance document, all strategies have been updated to reflect **Inclusive** and **Equitable** components of the strategic goals and are marked in the color indicated.



# DEMOGRAPHIC INFORMATION

## CCO Service Area, CCO Workforce (Staff, Leadership, and Governance Committee)

The Yamhill Community Care service area is majority rural, defined by the Oregon Office of Rural Health as areas ten or more miles from the centroid of a population of 40,000 people or more. Only four zip codes in the service area are considered urban under this definition, none of them in Yamhill County.<sup>1</sup> The total member population is 38,686. Below are demographics for YCCO members, staff, Community Advisory Council, Board of Directors, and the county region.<sup>2</sup>



Note: the Board did not complete the demographic survey in 2022; data is 2021 survey data. Response rate has declined year over year, and YCCO will be utilizing the method used for the CAC: including demographic information in annual renewals and offer one-on-one support to

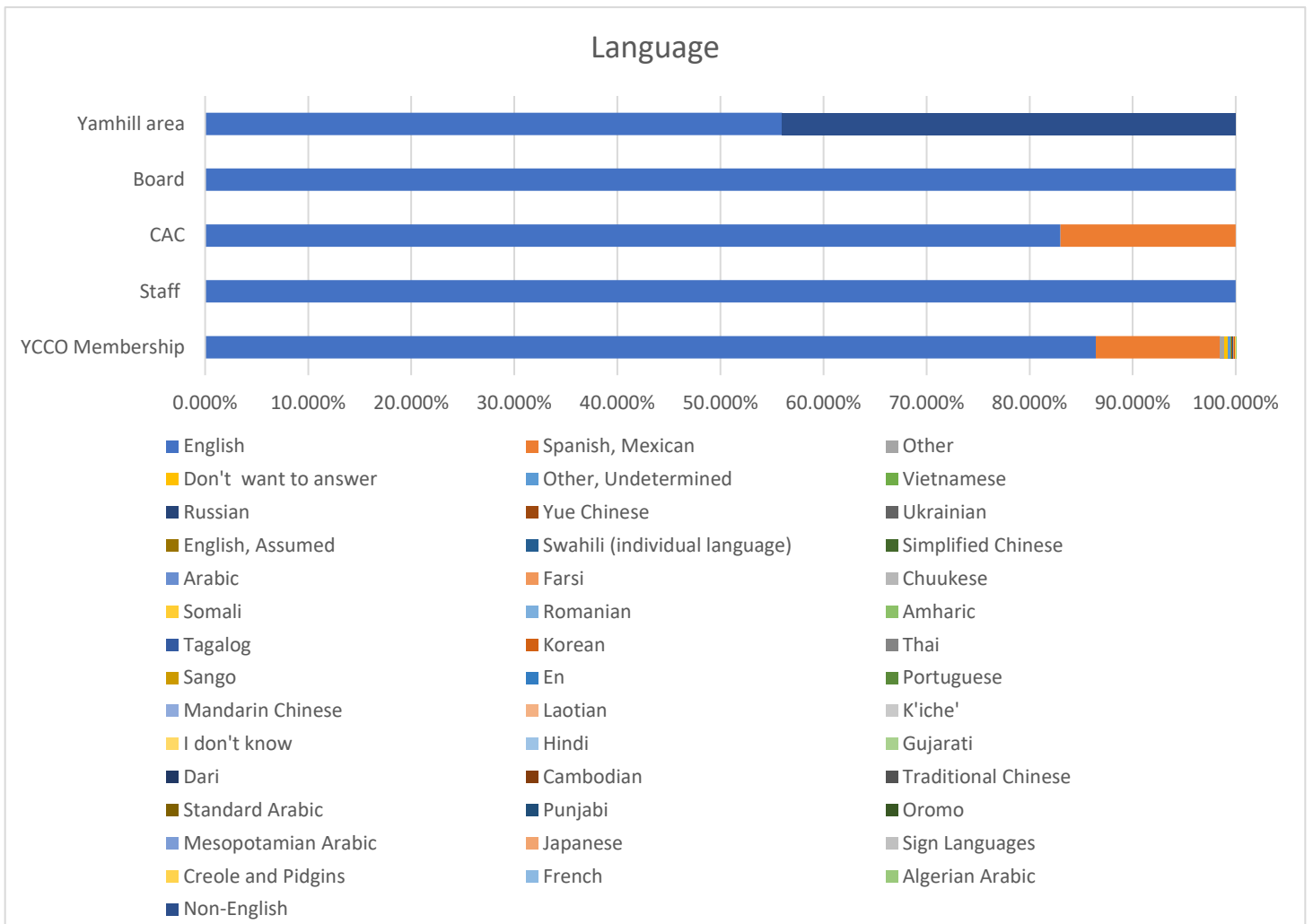
<sup>1</sup> <https://www.ohsu.edu/oregon-office-of-rural-health/about-rural-and-frontier-data>

<sup>2</sup> <https://data.census.gov/all?q=yamhill+county>



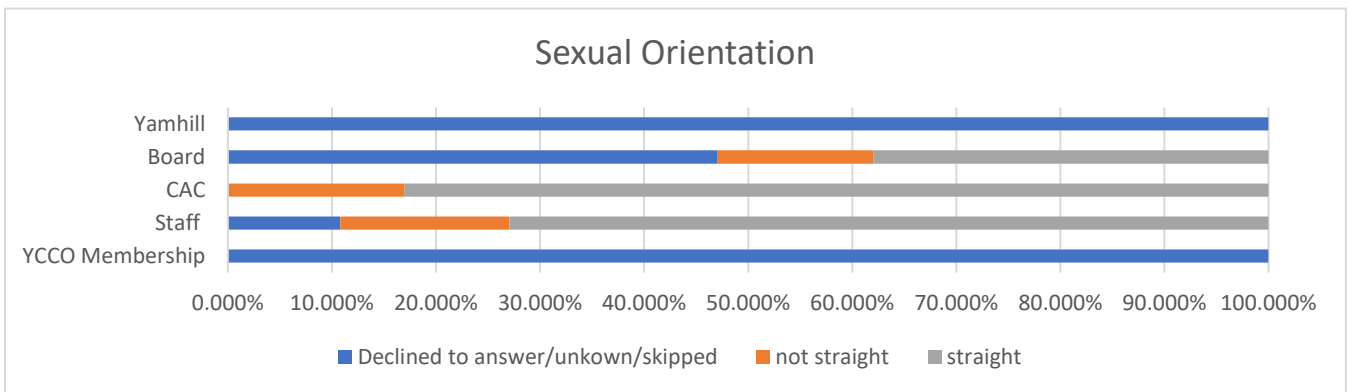
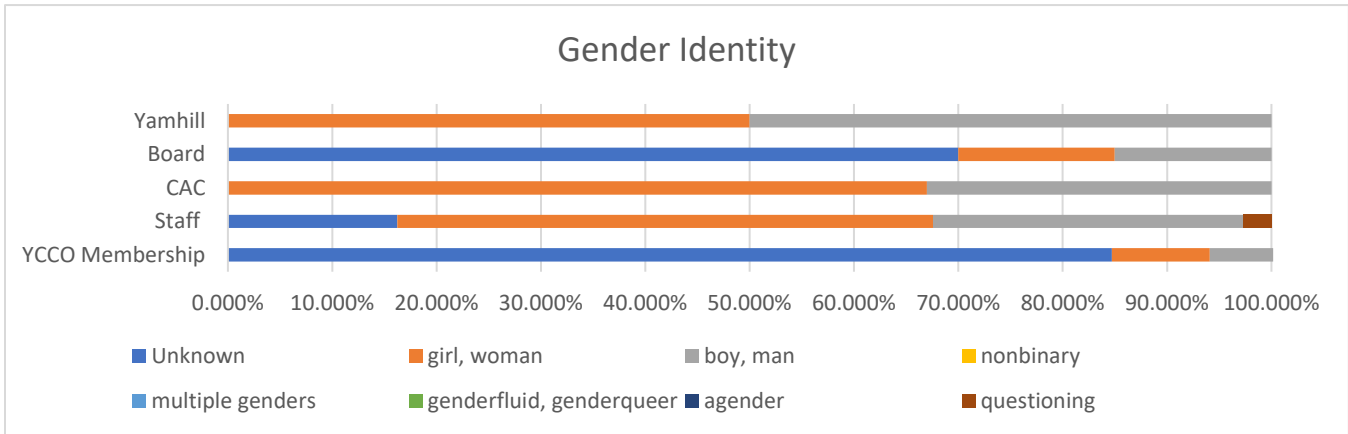
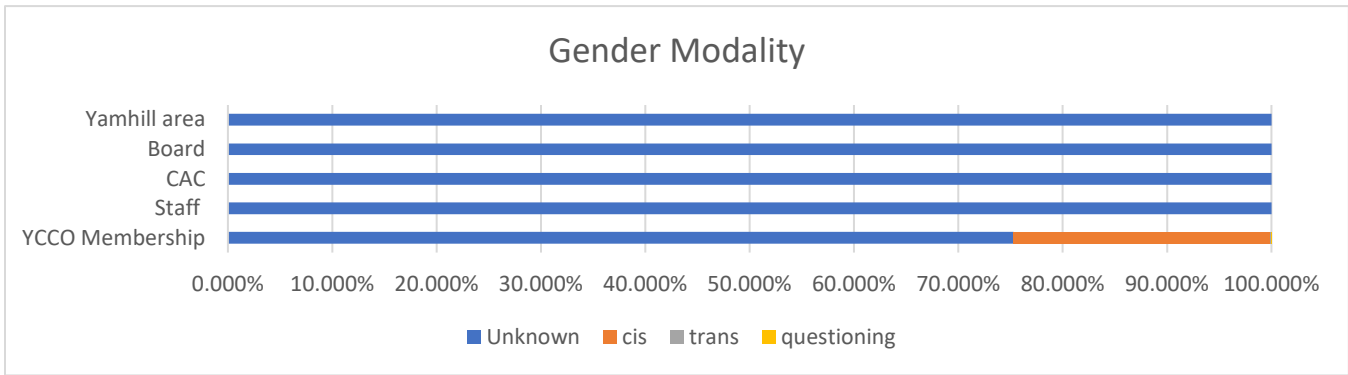
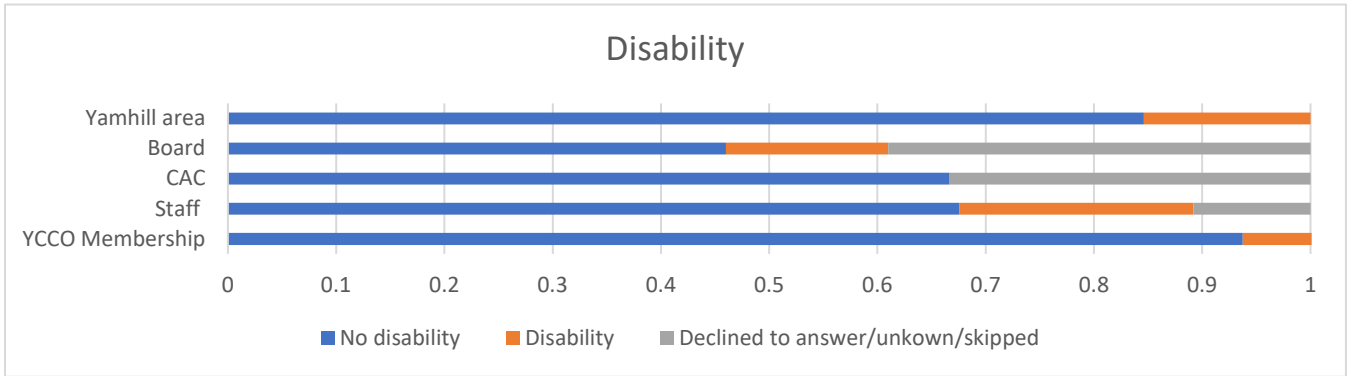
complete and submit. This allows for additional conversation and safety around this data sharing.

YCCO has begun utilizing the Heritage Native American indicator to understand the enrolled Tribal member population more accurately. This allows for precise identification for the purposes of benefit administration and membership analysis. While there is significant overlap, 1.43% of YCCO members identify as American Indian/Alaska Native and 2.80% have the HNA marker. Considering the high number of members with unknown race, this may be a more accurate indicator of Tribal membership and race in some cases.



While the distinction between highly specific races and languages is not seen in the CCO staff or committee data, responders are either given the full suite of REALD race/ethnicity and language options or asked to self-define. The populations are simply too small to see the kind of diversity in the membership, but as much as possible YCCO recognizes each language individually instead of grouping into “other” categories for ease.





# FOCUS AREA 1: REALD SOGI

(FA2-Demographic Data)

## Year 3 Progress Report

### Goal:

Maintain and use data systems and resources to collect and analyze demographic data to be used to improve systems of care and the advancement of health equity.

## Year 4 Strategy

- Strategy is the same as year 3
- Strategy has been modified for year 4
- A new strategy has been developed

Modification to Strategy 2.2 – addition of more distinct populations and data exchange partners to include Health Related Social Needs (HRSN) transitions populations, people identified with disabilities, LGBTQIA2S+, social needs and social service community-based organization (CBO) data.

Strategies 1.1 and 1.3 remain the same as year 3 and are **Ongoing**.

### Strategy 2.1:

Develop data collection and HIT infrastructure **informs the needs of historically oppressed individuals and communities** and identified gaps – based on a **multi-stakeholder and community informed** needs assessment.

#### Baseline (if any):

Needs assessment development

#### Metric/Measure of success:

HIT plan is in place for the necessary systems, processes, and IS infrastructure needed; Third-party administrator member demographic reports include “other” and “unknown” categories

### Progress to date:

The data collection and HIT infrastructure has continued to evolve and increase within governance oversight, consistent data values, collection and reporting capabilities, analysis, and use case examples. The data governance committee (**Data Governance Program Charter**) describes these activities in more detail and in strategy 1.2 is responsible for creating consistent and reliable management of data and the understanding of information across the organization.

Additional partnerships with data management administrators and vendor services also play a vital role with how data collected is stored and used to promote system improvement and the advancement of health equity. Key project partners who contributed to the expansion of this infrastructure include Ayin, formerly Performance Health Technology (PH Tech), Tableau, SQL, and new vendor services Quest Analytics, Connect Oregon UniteUs, PolicyCo, and Helios by Virtual Health.

Along with partnerships, the addition of human resources was also identified. With the expansion of data systems comes additional processing and management. An additional 4 FTE was added to the IS team and includes a Senior Business System Analyst, System Configuration Analyst, System Administrator and Data Integration Engineer. These additional





positions work to support the overall technology and systems; data, reporting, and analytics; and IS security and reliability.

**Supporting Documentation:**

- Data Governance Program Charter
- IS Department Structure

**Strategy 2.2:**

Implement HIT infrastructure and data collection plan *including new populations and data exchange partnerships* by *seeking feedback from defined populations* informs culturally appropriate collection (the why), analysis, and use.

**Baseline (if any):**

Plan is developed

**Metric/Measure of success:**

The five-year plan is implemented with key milestones tracked

**Progress to date:**

The Data Governance Committee (DGC) met consistently throughout the year and discussed in depth topics. The Health Equity Administrator and primary data analyst that support equity data analytics are active members and participants in this work. Discussions focused on the people, process, and technology needed to support robust data systems and how to manage the collection and use, how data is packaged for different audiences, and what distinct business needs are supported. Committee topics included:

- Updates and finalizing the committee charter
- Current reporting structures
- Data sources “source of truth”
- Tableau Server (tool for data visualization and sharing)
- Data strategy development
- Provider Network Data – Quest Analytics
- Health Equity data infrastructure enhancement (SOGI)

A new data project was initiated to meet the 1115 Waiver Health Related Social Needs population data requirements. As an example, an SPMI flag has been added to member demographic reports and extract files. Another example includes establishing cohorts and sorting data elements based on the transitions populations with capabilities to define these populations by REALD and SOGI when available.

**Supporting Documentation**

- Data Governance Program Charter

**Strategy 2.3:**

Develop and *share data collection* policy and procedures that *encompass all demographic data requirements*.



<p><b>Baseline (if any):</b> Limited data collection and policy and procedure references</p>	<p><b>Metric/Measure of success:</b> Established set of policies and procedure documents used consistently across organization</p>
<p><b>Progress to date:</b> No new data system policy and procedures were developed over the past year. As part of the data governance committee work, four new business solutions were identified and are being implemented to support the effective collection and use of demographic data that will lead to system policies and standardization. The addition of new IS staff as referenced above are pivotal resources that allow YCCO greater resource capacity to build out data infrastructure and standard processes for accessing and applying demographic data to day-to-day activities.</p> <p>Key implementation of data infrastructure include:</p> <p><i>Connect Oregon Unite Us</i> – A comprehensive Community Information Exchange (CIE) network that connects health care and community to provide coordinated referral resources, support, and services to meet needs that are identified. Referrals and resource needs that are captured in the platform contribute to the collection of demographic data, service needs, and other social determinants of health data.</p> <p><i>Quest Analytics</i> – A provider network management solution implemented in November. This tool supports a better member experience by taking the health plan contracted providers and analyzes network adequacy and accuracy, identifies access trends, provider directory collection and verification for things like spoken language, diverse sub-specialties, and cultural competency training. Since implementation, YCCO is evaluating where and how to incorporate this tool into standard operating procedures related to managing a network that is sufficient in providers and services that will meet the diverse needs of YCCO members.</p> <p><i>Helios Care Management Platform</i> – This unified ecosystem of care provides a broad spectrum of visibility across the care continuum and supports seamless collaboration, coordination, and care delivery. As part of an integrated care management project focused on care coordination, utilization management, and appeals and grievances, YCCO is investing in this documentation system and will go live January 2024. This system will provide a member-centered view that includes a demographic profile that can be reviewed and updated while care interactions are taking place with the plan.</p> <p><i>Tableau Server Implementation Plan</i> – Tableau desktop has been a key data visual analytic platform for a number of years, reach was limited to key staff. YCCO has invested in Tableau server and is working to spread access to structured dashboards more organization wider. Tableau server’s goal is to bring data to the people – responsibly which extends the value of data across the organization. See <a href="#">Tableau Dashboards REALD</a>.</p> <p><i>PolicyCo</i> – Policy management tool that supports organizational policies, tracks changes made over time and contains definitions and regulatory libraries to maintain consistency of references through all policies and procedures. The tool also has a training and attestation feature that allows users to review policies and other training materials and attest to the</p>	



completion and provide feedback. Features support the administrative tracking of education and training for all staff, governance committees, and providers if we choose to deploy for provider training. Anticipated completion of this implementation scheduled for September 2023.

Once fully implemented, these solutions will be leveraged and incorporated into documented standard procedures.

**Supporting Documentation:**

- Data Governance Program Charter
- Tableau Dashboards REALD

**FOCUS AREA 2 – CLAS Standards as an Organizational Framework to Advance Health Equity**

**CLAS – Governance Leadership, and Workforce (FA4-CLAS as an organizational framework)**

**Year 3 Progress Report**

**Goals:**

Implement all CLAS standards in a way that improves the system of care to meet the individual needs of YCCO members by reducing barriers that lead to health disparity.

**Year 4 Strategy**

- Strategy is the same as year 3
- Strategy has been modified for year 4
- A new strategy has been developed

Strategies considered to be **ongoing** and not modified. Informing and reinforcing infrastructure is continuous and long-term. Both quantitative and qualitative progress is described in updates.

**Strategy 4.1:**

Evaluate organizational policies, practices, and resources that **support implementation of equity goals** in each area of the CLAS standards to build internal knowledge and capacity within YCCO leadership and governance structures and **communicate widely**.

**Baseline (if any):**

YCCO CLAS Standards strategic framework has been developed

**Metric/Measure of success:**

YCCO policies and systems support the strategic goals of the organization

**Progress to date:**

To deeply align CLAS standards and a focus on resources, staff reporting through the Health Plan Operations Department selected a minimum of two self-identified Health Equity Plan strategies to show accountability and progressive evidence of activities completed in 2022 (CLAS Standard 10 and 15). Performance on achieving these goals along with other selected goals were compiled and presented to Human Resources (HR) and the Chief Executive Officer (CEO) for review and based on achievement, the organization awarded a financial incentive embedded within the HR compensation package.



As part of an annual review, policies were amended to reflect updates to standard definitions of discrimination, REALD and SOGI, and social needs. Updates were made to the Health Equity specific policies and other related policies (CLAS Standard 9). The sharing of this information and updated policies was delivered as part of the overall training strategy. Staff completed over 200 hours of training on topics including bias in the workplace, disability rights, Tribal Medicaid rights, LGBTQIA2S+, microaggressions, REALD/SOGI, language services and building DEI committees in the workplace. The DEI Committees That Work – Strategies for Success was attended by the Health Equity Administrator as well as the Human Resources Director. Strategies from the September training are being discussed and implemented with the current Equity Committee structures (CLAS Standard 4.)

**Supporting Documentation:**

- 2022 Health Plan Operations Bonus Goals Report Out
- HE-001 Culturally & Linguistically Appropriate Services
- HE-002 Equity
- DEI Committees That Work A Strategy for Success
- Advancing Health Equity Committee Meeting Documentation Tracker

**Strategy 4.2:**

Refine and update CLAS standards strategic framework that represents the multiple facets of changing/improving how the system provides care and reduces barriers that lead to health disparities.

**Baseline (if any):**

CLAS Standards 1, 5, 6, 8, 9, 10, 11, 12,13,14 have strategic goals and objectives developed and in process of implementation

**Metric/Measure of success:**

CLAS Standards 2, 3, 4, 7, 15 have strong strategic goals and objectives and activities are implemented; Staff demonstrates increased awareness of CLAS fundamentals

**Progress to date:**

As various strategies are implemented, others evolve and expand. In the Governance, Leadership, and Workforce standards (2-4), three activities evolved around how YCCO engages and partners with the community around equity with the addition of a Yamhill County Equity Advisory collaborative; evolving the self-assessment and capacity for the workforce to screen for social needs and language assistance services in non-clinical settings; and the dedication of additional staff resources to support care management programs with a diverse workforce. Changes are marked in blue in the CLAS Framework 2023.

Holding leadership accountability to recruit and promote a culturally and linguistically responsive workforce, YCCO has earmarked funds in the 2023 budget to support clinics in identifying bi-lingual staff with a desire to become a certified/qualified interpreter (CLAS Standards 3 and 7). Additionally, the administrative budget for interpreter and translation services was scaled up in preparation for increased language assistance. A specific Tribal grant set-aside within the SHARE allocation was established for all three recognized tribal entities in the region. With the allocation of monetary resources, YCCO recognized the need for establishing pools of funding for the community to self-direct where and how these dollars should be used to support culturally appropriate care.



<b>Supporting Documentation:</b>
<ul style="list-style-type: none"> <li>CLAS Framework 2023</li> </ul>

**CLAS – Governance, Leadership, and Workforce (FA5-Workforce)**

**Year 3 Progress Report**

**Goal:**  
YCCO recruits, supports, and collects ongoing feedback from a diverse staff and provider network workforce.

**Year 4 Strategy**

- Strategy is the same as year 3
- Strategy has been modified for year 4
- A new strategy has been developed

Strategies remain the same while the activities to achieve strategic goals have evolved – work is considered **ongoing**.

**Strategy 5.1:**

Implement enhanced Human Resources and network policies, practices, and investments to support a diverse and inclusive workforce.

<b>Baseline (if any):</b> Current staff and provider network demographics identified, and baselines established	<b>Metric/Measure of success:</b> Ongoing data collection process refined to capture policy and procedure enhancement and investments that support the recruitment and retention of a diverse workforce.
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**Progress to date:**

The recruitment process itself underwent two key changes. First, reducing education requirements for positions if possible and adding “years of equivalent experience” to recognize the inherent disparity in higher educational attainment and socioeconomic barriers to these degrees. This widens the pool of potential applicants who may be highly qualified and have years of valid experience but no formal degree. Second, all interview questions are shared in advance. This allows preparation time for those who may not speak English as their first language to craft answers thoughtfully that accurately represent their skills, for those whose skill sets are perfect for the job description but may have interview anxiety, or myriad of other reasons where a more prepared interview allows interviews to get a more accurate sense of the candidates’ abilities.

To support retention of employees, YCCO continues to improve and refine its onboarding and training program. NavEx has been the main online video platform for compliance, IS and safety, and equity training, including topics on disability and discrimination, implicit bias, microaggressions, and diversity and inclusion in the workplace. This training will be incorporated into the onboarding process, and YCCO is exploring its HR platform Xenium to offer additional training for existing staff. All supervisors are completing a series on supervision and discussion during supervisory meetings, as staff feedback from past surveys has indicated supervisor training and additional onboarding support were desired.



YCCO has new access to additional demographic data from providers from their licensing boards, more than has previously been available. While only around 15% of providers have complete demographic information, this is an additional piece of information to target recruiting strategies based on which providers are underrepresented.

**Supporting Documentation:**

- New PrismHiring Email Templates

**Strategy 5.2:**

Utilize local feedback and HR tools to **expand reach** of recruitment materials and efforts, for **recruiting diversity** within internal positions and provider workforce

**Baseline (if any):**

Baseline community engagement strategy established, member and community engagement measures developed

**Metric/Measure of success:**

five new organizations identified to partner or outreach for recruitment; 25% of clinics surveyed provide recruitment strategy data; 5 trainings completed to prepare staff and leadership for a diverse workforce.

**Progress to date:**

The 2023 staffing budget was approved with an additional FTE to directly support health equity. A Health Equity Specialist position description was developed and in recruitment at the time of the writing of this update. To support the candidate review process, a specific set of interview questions was developed to assess competencies and aligned commitment. See [YCCO Health Equity Specialist \\_Approved Final 5-3-2023, Interview Questions\\_Health Equity Specialist](#)

YCCO completed its annual staff survey in 2022, receiving a high rate of response (88% of staff members). Feedback relevant to recruitment efforts included 70% of respondents agreeing that “YCCO intentionally recruits representative, diverse applicants,” with 22% neutral or not answering; 5.4% disagreed. While this shows a positive trend, YCCO can always improve not only in this space, but in the staff’s perception of recruitment efforts. A respondent acknowledged the setbacks in “not living in a highly diverse area.”

As part of its recruitment strategies, YCCO HR has consistently increased the number of online spaces jobs are advertised, doubling the number of job boards and list serves and, after a long hiatus, was able to hire a PR Specialist who will be managing social media and will be able to extend the recruitment reach onto various local social media platforms. Feedback from community partners has indicated this a key way to reach people who may not otherwise see the specific types of jobs YCCO offers but may be qualified.

In 2022 YCCO also partnered with Willamette Workforce Partnership as part of its Mid-Willamette Valley Behavioral Health Consortium, which has goals to increase diversity and number of the behavioral health workforce, expand training opportunities, and adjust systems to be more inclusive. YCCO continued discussions with WWP to present ideas for partnering on Personal Health Navigator Traditional Health Worker training to further expand the workforce, through the Home Care Commissions’ PHN training-in-development. The BH



Department is also exploring options for dual-credential providers so that they can prescribe and/or support medication assisted treatment. Based on feedback from key behavioral health partners, this strategy allows YCCO to increase the capacity of its workforce while attempting to increase the number of providers.

**Supporting Documentation:**

- YCCO Health Equity Specialist \_Approved Final 5-3-2023
- Interview Questions\_Health Equity Specialist
- Oregon Home Care Commission LOS
- Providence LOS
- Medical Training Academy LOC
- 2022 Provider Accessibility Survey 2022 Questions
- 2022 Provider Accessibility Survey 2022
- Staff Equity Survey 2022

**CLAS – Communication and Language Assistance (FA3-Culturally and linguistically appropriate services + FA7 Language Access Reporting Mechanisms)**

**Year 3 Progress Report**

**Goal:**

YCCO and the provider delivery systems offers services that are culturally and linguistically appropriate and accessible, including oral and sign language interpretation for each individual member.

Ensure access to language services through reporting complete and accurate data that is representative of members’ language assistance needs.

**Year 4 Strategy**

- Strategy is the same as year 3
- Strategy has been modified for year 4
- A new strategy has been developed

Strategies are multi-faceted and **ongoing**. The Language Access plan is relevant and incorporates the new focus area 3, people with disabilities.

**Strategy 3.1/7.1:**

Develop and implement a language access plan by including **provider network and member feedback**, data collection plan and policies, provider incentives for reporting, quality language access provider services, member materials review, individual member assessments for **all members including fewer common languages**.

**Baseline (if any):**

Data collection process in place; provider needs assessment in process; Comprehensive language access plan in development

**Metric/Measure of success:**

Comprehensive language access plan activities are implemented and monitored to ensure meaningful access

**Progress to date:**



While goals based on language service provision have previously been measured by contracted interpreter or bilingual staff direct services, YCCO is introducing a new goal: increasing the number of bilingual staff members who are certified/qualified to interpret. In follow-up technical assistance to providers, the Provider Relations Supervisor determined that while coding for interpretive services has increased significantly (211 claims in 2022 versus 3 in 2019), providers reported preferring to use internal staff to interpret. YCCO implemented a scholarship program to support bilingual staff and providers to become certified to interpret, creating another option to ensure language service provision. As of this report, no staff or providers have yet become certified.

Spoken Language	Spoken Language	Percent
Spanish	2097	93.6%
English	56	2.5%
Mesopotamian Arabic	20	0.89%
Other	17	0.76%
Yue Chinese	16	0.71%
Vietnamese	15	0.67%
Hindi	7	0.31%
Portuguese	6	0.27%
Oromo	4	0.18%
Other	2	0.09%
Simplified Chinese	1	0.04%
(blank)		
<b>Grand Total</b>	<b>2241</b>	<b>100.0%</b>

As part of the Health Equity Measure (HEM): Meaningful Language Access measure activities, staff worked with over 130 providers to collect the status of language support provided through 2241 service encounters. A provider communication notice template and tracking sheet was developed to capture these activities outside of claims and vendor invoiced services. Multiple staff resources were pulled together over the two months of collection and reporting of language services and overall, the results were positive.

Interesting baseline information was gathered during this process:

- YCCO was able to collect responses from providers at a rate of 83.2%
- The largest non-English language collected on was Spanish, with all other non-English/Spanish languages madding up slightly less than 4%
- Data indicates that a fair amount of language services utilized with 39.9% of encounters showing any language service.
- The rate associated with the HEM of language services utilized by Oregon certified/qualified interpreters is lower at 12.2%. This establishes the baseline and next year's improvement target to strive for.

YCCO has monitored the process with the provider accessibility survey year over year. While the reporting of language access service provision has drastically increased, completion rates for the survey have decreased.

**Supporting Documentation:**

- Language Access Procurement Letter
- HEM Tracking Sheet YCC
- 2022 Provider Accessibility Survey 2022
- Language Access Plan 2022

**Strategy 3.2:**

Adapt current policies and procedures to include mechanisms for ensuring accessibility to culturally and linguistically appropriate services that are publicly posted and available for comment and audited to ensure an equity and trauma-informed focus.





<b>Baseline (if any):</b> Policies in place	<b>Metric/Measure of success:</b> Policies are updated with standard definition and procedure steps defined
<b>Progress to date:</b> Policies have received updates to reflect the most accurate and thorough language to represent CLAS for its membership. Updates include ensuring LGBTQIA2S+ references were consistent, REALD included SOGI, and nondiscrimination language included health status as a protected category. YCCO has three procedure guides regarding language services, one for providers, one for staff, and one for members, which is currently in the process of being translated into all language members speak, including the less common ones.	
<b>Supporting Documentation:</b> <ul style="list-style-type: none"> <li>• HE-001 Culturally &amp; Linguistically Appropriate Services</li> <li>• HE-002 Equity</li> <li>• Provider Language Access Toolkit</li> <li>• Member LA Toolkit</li> <li>• Staff Language Service Guide</li> <li>• Language Access Plan_2022</li> </ul>	
<b>Strategy 3.3:</b> Adopt organizational monitoring policies and procedures to ensure culturally appropriate and linguistically appropriate services are available, <b>publicly posted, available for comment</b> , and audited to ensure an <b>equity and trauma-informed focus</b> .	
<b>Baseline (if any):</b> General audit and oversight policies in place	<b>Metric/Measure of success:</b> CLAS specific policies and procedures created and adopted
<b>Progress to date:</b> YCCO has created and updated a CLAS Policy, including the three core elements of CLAS: Governance, Language, and Engagement. The Language Access Workgroup shifted at the end of 2022 to Language Access metric focused meetings, which, beyond the outcomes of the meetings themselves are focused on developing workflows to gather language access information from partners and ensure alignment with CLAS across the service delivery network. The group reviewed and evaluated topics like language access in the HR space, an audio handbook, and language service provider contracts. Policies in the process include an HRSN and SDoH policy, both of which will go through CAC review to ensure alignment with community need.	
<b>Supporting Documentation:</b> <ul style="list-style-type: none"> <li>• Language Access Workgroup Meeting Minutes</li> <li>• HE-002 Culturally and Linguistically Appropriate Services</li> <li>• Language Access Plan_2022</li> </ul>	
<b>Strategy 3.4:</b>	

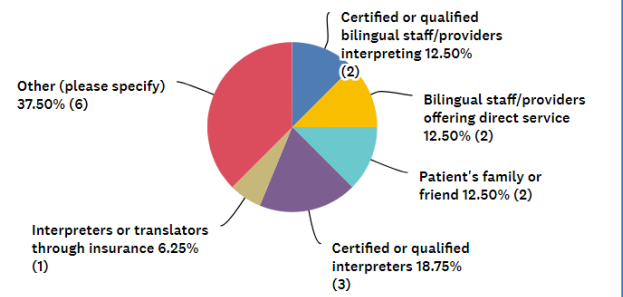
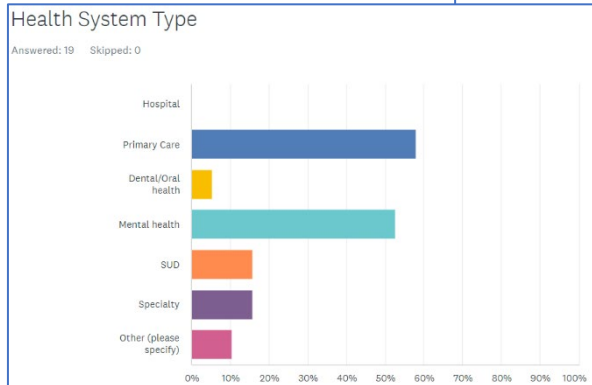


<p>Develop plan for evaluating compliance and <b>gathering direct feedback</b> of the quality and accessibility of language services and standard workflows, including all <b>spoken and sign language regardless of volume</b> on a regular basis to assure adherence internally and across the provider network.</p>	
<p><b>Baseline (if any):</b> Evaluate monthly data submitted</p>	<p><b>Metric/Measure of success:</b> Services found to be high quality and accessible based on audit standards</p>
<p><b>Progress to date:</b> Because grievance reviews for language-related complaints have been inconclusive, YCCO is sending out surveys to members with a language flag who had a healthcare visit in 2022 to get feedback on their experience. Two surveys, one for those who have an interpretation indicator and another for those who are Deaf or Hard of Hearing, are tailored to each population and will be used to target resources and evaluation plan changes.</p> <p>Based on the results from the Health Equity Measure: Meaningful Language Access, there is space for improvement in overall accessibility to language services (39.9% of people with interpreter needs received interpreter services.) Most importantly, the rate of quality language services is now baselined at 12.2%, which creates a wide frame for improvement. In a statewide comparison, YCCO has the highest quality rate indicating there may have been an error in interpretation the measure guidance and specifications or YCCO's data capture strategies are effective in capturing required data fields. Additional verification and analysis are underway at the time of this update.</p>	
<p><b>Supporting Documentation:</b></p> <ul style="list-style-type: none"> <li>• Language Access member survey – Deaf and Hard of Hearing</li> <li>• Language Access member survey</li> <li>• HEM Comparison_CCO</li> <li>• Language Access Plan_2022</li> </ul>	
<p><b>Strategy 3.5/7.2:</b> Increase awareness and <b>participation in system improvement</b> to ensure <b>accessibility to culturally and linguistically appropriate services</b> in the provider networks.</p>	
<p><b>Baseline (if any):</b> Survey developed and fielded with Primary Care</p>	<p><b>Metric/Measure of success:</b> Data collected from at least 60% of the provider network; Increase in improved systems &amp; accessibility when reported year over year.</p>
<p><b>Progress to date:</b></p>	



As part of its biannual site visits with primary care clinics, YCCO staff determined that while bringing in interpreters to clinics is a frequently used resource, providers and staff often would prefer to use bilingual staff to interpret. Based on this feedback, YCCO made the decision in 2022 to budget for interpreter certification scholarships for providers in 2023 to support the workforce capacity to serve patients more effectively.

Which language assistance services does your clinic utilize?  
 Answered: 16 Skipped: 0



The provider accessibility survey has been expanded from only the primary care network to include mental and oral health and specialty care. A barrier in this space, however, is survey response. Providers have shared that with so many surveys they get confused about which they have completed, and their administrative burden is exceedingly high. To begin addressing this, guidelines for gathering information from partners and community include combining questions for multiple purposes into one survey and spacing out sessions or surveys.

**Supporting Documentation:**

- 2022 Provider Accessibility Survey questions
- 2022 Provider Accessibility Survey data
- COM-005 Engagement
- Language Access Plan 2022

**CLAS – Engagement, Continuous Improvement, and Accountability  
 FA 8-Member education and accessibility**

**Year 3 Progress Report**

**Goal:**

Improve member health outcomes and eliminate health disparity by ensuring member materials and communications are available and meet quality standards that comply with federal and state accessibility and alternative formatting requirements.

**Year 4 Strategy**

- Strategy is the same as year 3
- Strategy has been modified for year 4
- A new strategy has been developed

Given the nature of these CLAS Standards, strategies are continuous and **on-going**.



**Strategy 8.1:**

Collaborate with multiple stakeholders to refine the standard processes for how member communications/materials are developed, delivered, tracked, monitored, and evaluated to ensure they meet Members communication needs

**Baseline (if any):**

Workflow in place

**Metric/Measure of success:**

100% of member communications and materials are developed following applicable, contract-adherent workflows

**Progress to date:**

In the first year YCCO truly transitioned to in-person engagement and had additional dedicated resources, the team needed to review and refine how it approached in-person education and outreach. This involved creating an Engagement Policy to delineate best practices for engagement with different populations using different modes and methodologies and will be a foundation for developing specific additional metrics for engagement. The new Government Relations Director and Public Relations Specialist are partnering with the Communications Committee to develop a Strategic Communications Plan. Departments track their own outreach efforts, and in the interim without a Communications Specialist, were keeping their own tracking mechanisms.

A 2023 key focus is redetermination; YCCO created locally specific materials, informed by community members, to offer materials to help both partners and members update contact info, find assisters, and reenroll. YCCO is also partnering with local agencies to disseminate member educational materials around redetermination through funding, prioritized data sharing, and offering technical assistance and materials around redetermination.

Finally, YCCO is mid-process translating its Member Language Services toolkit into more than ten languages that YCCO members speak, including the less-common ones. Once it is fully available in multiple languages, YCCO has identified clinics with patients using the listed languages and share out guides in those languages.

**Supporting Documentation:**

- Member LA Toolkit
- COM-005 Engagement
- EL Outreach Tracker 2022 extract

**Strategy 8.2:**

Enhance the evaluation plan through multi-stakeholder review and assessment for reviewing the quality and accessibility of member materials and standard workflows on a regular basis to ensure adherence to language requirements for every person based on their needs.

**Baseline (if any):**

Current evaluation plan established

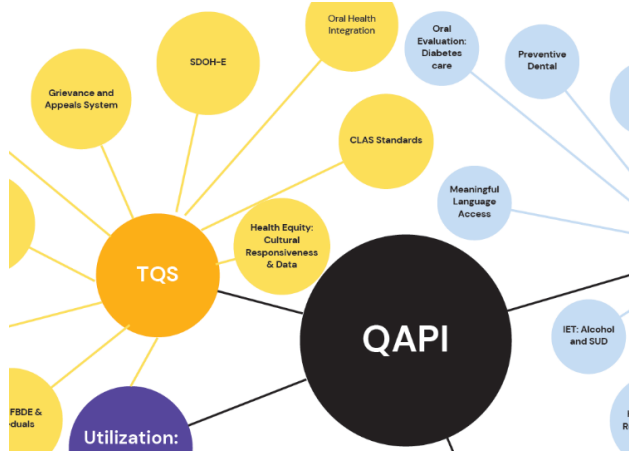
**Metric/Measure of success:**

Material review process is inclusive of community and member voice, demonstrated by CAC feedback workflow and community feedback sessions; 100% of member materials with a potential reach of 50%+ members will be reviewed by the CAC

**Progress to date:**



The commitment and accountability of partnering with the community and key stakeholders to continuously work to improve CLAS-related activities was strengthened over this past year (CLAS Standard 10 and 13). Deepening the alignment of quality improvement initiative such as the Meaningful Language Access Measure, TQS Health Equity Cultural Responsiveness Data, CLAS Standards, and evaluating CLAS with the annual Quality Assessment and Performance Improvement (QAPI) evaluation of access, care management, and the availability and utilization of services, **Quality Management Framework**.



One of the most significant elements of progress to date was the hiring of 1FTE for Public Relations and three staff members with portions of their position descriptions dedicated to member engagement and accessibility. An AmeriCorps VISTA member will be volunteering with YCCO until May 2024, and is dedicated to creating and refining processes for dissemination materials and information in person, whether at community events or meetings.

Staff turnover created a gap in FTE resources from October 2022 -June 2023, and while the tracking and review processes stayed in place, the overall evaluation of outreach efforts flagged during this staffing shortage. Individual departments tracked outreach internally but did not consistently duplicate their tracking in the central monitoring sheet. However, the new Public Relations Specialist, who will be taking on communications activities, is creating a new Communication Strategic Plan to guide the work strategically moving forward using the systems created and improving upon them with new perspective, which may include keeping department-specific monitoring.

The CAC continues member material review, and per their request have been receiving near-monthly updates on redetermination, reviewing materials, and advising strategy. In 2022, the CAC reviewed seven documents or member-facing materials.

**Supporting Documentation:**

- Advancing Health Equity Committee Meeting Documentation

**Strategy 8.3:**

Continuous outreach **with community review and feedback** to ensure the spaces where and how information is shared are leveraged to **improve engagement and outcomes**.



<p><b>Baseline (if any):</b> Current outreach strategy in development; member engagement committee established</p>	<p><b>Metric/Measure of success:</b> Baseline response and engagement rates determined for in-person/virtual and online engagement; five new organizations identified for strategic population-based outreach; 5 organizational relationships strengthened, as demonstrated by participation on committee or regular communication, including outreach to the 3 Tribes represented within YCCO's service area</p>
<p><b>Progress to date:</b> 2022-3 work centered around process refinement for sensitive data collection and dissemination practices, as well as creating not only accessible materials but better understanding of what is accessible to distinct types of members. With the CHA/CHIP process and the introduction of SOGI data into YCCO member files, materials in 2022-3 were created to gather information from members and the community. This involved connecting with local agencies, like culturally specific Unidos and Wine Country Pride, an LGBTQIA2S+ advocacy agency to develop outreach strategies and materials.</p> <p>YCCO created surveys around coordinated preschool enrollment, SDoH screening practices, behavioral health access for children, and surveys to gather information about how the complain process and language access services can be improved. It also prioritized continuous feedback in development of the Community Health Assessment and Improvement Plan.</p>	
<p><b>Supporting Documentation:</b></p> <ul style="list-style-type: none"> <li>• Grievance System member survey</li> <li>• Language Access member survey</li> <li>• SDoH Screening Questionnaire</li> <li>• Language Access member survey – Deaf and Hard of Hearing</li> <li>• Listening Session Questions with Intro_English</li> <li>• Listening Session Questions with Intro – Spanish</li> <li>• CHIP Workshop Presentation – English</li> <li>• CHIP Workshop Presentation – Spanish</li> </ul>	

<p><b>FOCUS AREA 3 – People with Disabilities and LGBTQIA2S+</b></p>
<p><b>People with disabilities</b></p>
<p style="background-color: yellow;"> </p>
<p><b>Goals:</b> Provide health services that are culturally and linguistically appropriate and accessible, including plain language and alternative formats.</p>
<p style="background-color: yellow; text-align: center;"><b>Year 4 Strategy</b></p>
<p><b>Strategy D3.1:</b> Develop <b>comprehensive</b> data collection and analysis infrastructure that supports a detailed understanding of YCCO members with disabilities, including the distinct types of disability, needs according to those disability types, and available services <b>that address individuals' unique needs.</b></p>



**Baseline (if any):**  
Limited data collection structure

**Metric/Measure of success:**  
Supportive data systems in place to measure population trends and outcomes.

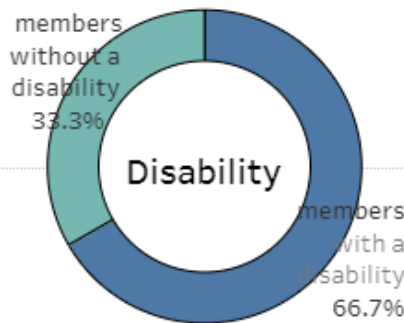
**Background/Current CCO Status:**

Data structures that help to understand the needs and services related to their populations exist in membership and utilization, care management, grievance and appeals system, and community needs assessment. YCCO defines this population today through a couple of categories of aid values, Special Health Care Needs (SHCN) and Youth with Special Health Care Needs (YSCHN).

Membership – Of the approximately 38,000 YCCO members, 6.27% of members defined as a person with disability. No current breakdown of disability status based on disability types. Defining disability type and developing deeper analytic capabilities is underway.



Grievance and Appeals – While the population with disabilities represents 6.27% of YCCO members, 66.7% of grievances filed in the past year were filed by a member with a disability. This is a significant issue and disproportionate. Understanding the root causes of such a significant adverse/negative experience of care will be a key component of the access plan that will be developed.



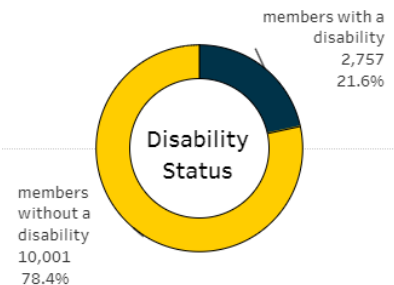
members with a disability have filed 66.7% of grievances in the past 12 months.

Count of grievances filed by members with a disability over time.



Category Of Ai..	2021				2022			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
members with ..	43	45	66	75	71	67	48	57

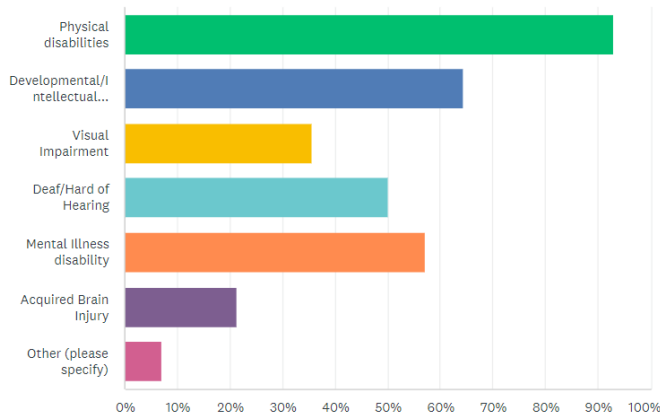
Care Management Need – 21.6% of care management activities have been with members with disabilities. Increased needs associated with appropriate care and service for people with disabilities is another component that the access plan will address.



**Provider Network Access** – Reported in a provider accessibility survey, providers reported the level of accommodation that is available for patients with disabilities.

Which types of disabilities does your clinic have specific accommodations for? Check all that apply

Answered: 14 Skipped: 2



**Supporting Documentation:**

- Tableau Dashboards REALD
- SHCN Demographics

**Strategy D3.2:** Develop and implement an access plan by including **provider network and member assessment and feedback**, data collection plan and policies, provider incentives for reporting, quality language access services, plain language, and alternative formatting of member materials, **with a focus on system accommodation and accessibility.**

**Baseline (if any):**

Limited data collection structure  
No comprehensive access plan for this population

**Metric/Measure of success:**

Comprehensive access plan activities are defined, implemented, and monitored to ensure system accessibility.

**Background/Current CCO Status:** YCCO is actively evaluating its current language access plan and aligning with those strategies as appropriate and expanding components within the plan through root cause and barriers analysis. The Access Plan will model from the initial six components of the Language access plan.

- Understanding individual/cultural barriers and needs
- Increase system knowledge and awareness
- Strengthen policies, procedures, and workflows
- Network availability
- Quality assurance and monitoring of access
- Data reporting and evaluation structures

YCCO is also mindful of the changing environment with the Network Adequacy and Provider Delivery System requirements and upcoming access plan requirements and will be aligning with those requirements for this population.





<p><b>Supporting Documentation:</b></p> <ul style="list-style-type: none"> <li>• Language Access Plan_2022</li> <li>• Health Equity Plan - New focus areas QCAP</li> </ul>
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**People who identify as transgender, nonbinary, or gender diverse**



**Goals:** YCCO and the provider delivery system offers services that are culturally appropriate and accessible, and meet the unique needs of each individual seeking care.

**Year 4 Strategy**

**Strategy GI3.1:** Build access plan structures and supports to ensure health and safety needs **informed by transgender, nonbinary, or gender diverse individuals** are met by a competent health plan and provider workforce confident in offering care that **meets this population's specific needs.**

<p><b>Baseline (if any):</b>          No consistent data collection and use structure for this population          No comprehensive access plan for this population</p>	<p><b>Metric/Measure of success:</b>          A comprehensive access plan is developed, with identified activities implemented and monitored to ensure compliance with access requirements.</p>
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**Background/Current CCO Status:** YCCO has informally recognized the needs of this population over the past few years and has implemented different strategies specifically to support provider and staff training, ensuring a network of competent providers who provide gender affirming care and partnering with local community-based organizations to identify community resources and support for people in this community with a specific focus on youth. With the limitation of comprehensive data collection, needs and barriers have been identified either at the individual member level or qualitatively through community feedback.

YCCO recognizes the need to develop a comprehensive plan that will ensure access to needed services for this population. Planning for this has begun with the community and internal staff and governance committee. Feedback session have surfaced themes in the following areas:

- Understanding individual/cultural barriers and needs
- Match data with anecdotes to understand high utilization needs
  - Evaluate Ombuds Report for 2022 on Transgender service barriers
- Increase system knowledge and awareness
- Promote a culture of inclusivity and safety for trans, nonbinary, and gender diverse people where they can feel free to disclose their identities
  - Training, training, training
- Strengthen policies, procedures, and workflows
- Emphasize appropriate definitions
  - Build supports resources for this population – social, data gathering, school-based



- Provide education on the Medicaid benefit for gender affirming care

Network availability

- Work with provider network to develop workflows to treat the gender diverse population
- Identify provider/partner champions
- Assess service network for demographics and competency, forms and procedures

Quality assurance and monitoring of access

- Assess network for competency with LGBTQIA2S+ patients
- Explore credentials or certifications for provider competencies necessary to serve this population
- Determine how to measure gender diversity and/or gender affirming care competency

Data reporting and evaluation structures –

- Develop mechanisms to understanding this population’s demographics and needs as represented by the community to deliver culturally and clinically appropriate care
- Develop a gender identity data collection, analysis, and dissemination plan

**Supporting Documentation:**

- Health Equity Plan - New focus areas QCAP

**People with sexual orientation diversity**

**Goals:** YCCO and the provider delivery system offers services that are culturally appropriate and accessible, and meet the unique needs of each individual seeking care.

**Year 4 Strategy**

**Strategy SO3.1:** Build access plan structures and supports to ensure health and safety needs **people with diverse sexual orientations** are met by a competent health plan and provider workforce confident in offering care that **meets this population’s specific needs**.

**Baseline (if any):**

No consistent data collection and use structure for this population  
No comprehensive access plan for this population

**Metric/Measure of success:**

A comprehensive access plan is developed, with identified activities implemented and monitored to ensure compliance with access requirements.

**Background/Current CCO Status:**

Like the other new populations, YCCO lacks a comprehensive data structure which contributes to a system-wide understanding of unmet health care needs and barriers. Modeling after the language access plan framework, YCCO is awaiting guidance from OHA on Sexual Orientation data requirements that will help to inform the developments of a sexual orientation data collection, analysis, and dissemination plan. To date, only County and State-wide data has been used to identify the needs of this population and is not specific to Medicaid.



YCCO intends to develop an access plan with feedback from multiple stakeholders and member representatives that will define strategies in the following areas to address barriers and service needs.

- Understanding individual/cultural barriers and needs
- Increase system knowledge and awareness
- Strengthen policies, procedures, and workflows
- Network availability
- Quality assurance and monitoring of access
- Data reporting and evaluation structures

**Supporting Documentation:**

- Health Equity Plan - New focus areas QCAP

**FOCUS AREA 4 – Community Engagement**

**Goals:** Yamhill Community Care will engage with communities in a way that honors their needs and autonomy, giving up power to learn in ways that benefit the community and share information about things and in ways the community wants.

**Year 4 Strategy**

**Strategy CE4.1:** Progressively build and strengthen relationships with community partners through **listening first** then building consistent communication and support mechanisms aimed to **reduce disparities**, through a shared leadership model.

**Baseline (if any):**

Currently hold 29 LOAs, DOCs, or other types of agreements with CBOs addressing the social determinants of health and equity

**Metric/Measure of success:**

Hold agreements or coordinated projects with one agency in each town within the YCCO service area

**Background/Current CCO Status:**

YCCO spent 2022 creating a new Community Health Assessment, the engagement activities for which were designed to extend far beyond the completion of the assessment document and create long-term relationships with local partner agencies. The team first established MOUs between Providence Newberg Hospital and Yamhill County Public Health to share commitment to the ongoing Health Assessment Process. This Collaborative continues to work together to share data and align resources, and will be using a shared platform, Achievelt, to track progress in the Community Health Improvement Plan.

Within the CHA outreach process, YCCO engaged a steering committee with members of various local agencies. The following agency categories were represented in this group.

CHIP/CHA Steering Committee	
Furniture bank	Traditional health work



Housing and food security nonprofit – youth outreach	Support for families with children experiencing disabilities
Higher education	Post-prison re-entry and housing

The process then engaged dozens of additional agencies to engage in stakeholder interviews, hold listening sessions, share surveys, receive updates on progress, and advise process. The goal of this process is to continue connecting with these agencies, supporting their efforts in the community, continuing to gather feedback when partners want to share, and let those closest to the community lead local initiatives.

**Supporting Documentation:**

- CHA CHIP Community Partners

**Strategy CE 4.2:** Build an engagement structure to ensure regular, multi-modal, and multilingual and community led conversation and connection.

**Baseline (if any):**

Hold regular listening sessions with the community

**Metric/Measure of success:**

Hold regular listening sessions, coordinate communication with members, and attend events to meet the community at least twice per quarter, with members across a range of geographies, backgrounds, and identities.

**Background/Current CCO Status:** YCCO focused heavily on engaging members, not community partners, in listening sessions for the Community Health Assessment, to ensure individuals were given space to talk about their own need from their personal perspective. YCCO held fourteen listening sessions in 2022 but has a goal to continue regular listening sessions or coordinate communication with members at least twice per quarter, with members across a range of geographies, backgrounds, and identities.

YCCO has created an engagement policy to guide outreach work, ensuring efforts take multiple tracks to be most accessible, meet members where they are at, and valuing their time. Engagement will also include a targeted outreach strategy to recruit new CAC members.

**Supporting Documentation:**

- COM-005 Engagement Policy
- 2022 CAC Recruitment Planning



## FOCUS AREA 5 – Continued development of organizational Health Equity infrastructure

**Goals:** Continuous development of organizational infrastructure to advance health equity for YCCO members and the community.

### Year 4 Strategy

**Strategy ORG5.1:** Establish and maintain **continuous collaboration** with staff, leadership, and community (including tribal governments) support structures, for advancing health equity by identifying and **understanding gaps and disparities and create opportunity to rectify (change)** the health care system.

**Baseline (if any):**

Adopted health equity definitions  
Four years of intentional health equity plan development and learning

**Metric/Measure of success:**

Key stakeholders understand and actively seek to achieve stated goals and strategies through Continuous Quality Improvement (CQI) cycles.

**Background/Current CCO Status:**

Current state, YCCO has adopted the OHA recognized definition for health equity, cultural competency, discrimination, REALD/SOGI demographic data, social determinants of health and health related social needs. These definitions can be found in policy and on the YCCO corporate website: <https://yamhillcco.org/about-us/>. Training and exposure to health equity principles are part of new employee onboarding and on-going implicit bias and cultural responsiveness training offered throughout the year with topics varying from disability rights, diversity, equity, and inclusion in the workplace, trauma informed care, social factors that impact health, native American/tribal history, LGBTQAI2S+ services and health disparities, microaggressions, demographic data and identities, among other provider-specific topics.

As described in focus area 2 above, community engagement is at the center of YCCO's equity work even when topics are controversial and demand significant financial and administrative resources. As an example, in discussions with the Board of Directors around language access and the new disabilities and LGBTQAI2S+ focus areas. Transparent conversation about the significant administrative resources that are needed to submit the required data of certified/qualified interpreter services. Open dialogue on the base definitions of preferred pronouns of individuals within the differing sectors of communities with disabilities. These conversations are represented by a diverse director makeup of healthcare administrators, community members, representatives from BIPOC communities, and people with politically conservative viewpoints. Continuous open and safe conversations help to reconcile oppressive systems and provide leadership support to move the work forward.

Additionally, YCCO maintains department staffing and committee structure embedded throughout all departments and committee leadership structure that reinforce organizational philosophy and commitment to the advancement of health equity within the services offered and delivered.

**Supporting Documentation:**

- Governance – Advancing Health Equity



- Staffing – Advancing Health Equity
- Board Health Disparities and System Barriers
- Tribal Medicaid Rights training Board
- Health Equity Plan Update 2023 + LGBTQIA2S+ training

**Strategy ORG5.2:** Purposeful investments and **community lead resource allocation**, both administrative and financial to achieve the **commitment of offering equitable care** for all members.

**Baseline (if any):**

Administrative budget  
 Health Related Services budget  
 Grant funding opportunities

**Metric/Measure of success:**

Investments demonstrate desired (quantitative/qualitative) outcomes including member/consumer feedback and experience

**Background/Current CCO Status:**

Funding and resource allocation continues to be a paramount structure that is necessary and evolving to support the equity infrastructure built within YCCO and the Yamhill/Washington/Polk communities. As previously shared, YCCO maintains a staff and committee structure that strives to advance health equity through a variety of mechanisms. These structures take leadership and financial support, and community engagement and partnership to accomplish these goals. See **YCCO CHIP Progress Report 2023 for more narrative description of programs supported**. Listed below are key investments:

- Health Related Services Flex Services – individual member social needs
- Health Related Services Community Benefit Investments – Programs that are non-Medicaid covered but provide a valuable service to meet health and wellness needs of the community.
- SHARE – Housing focused capital build projects with local counties, Housing Authority and Community Action Agency (YCAP)
- Administrative Budget – diverse staffing, training and consultation resources, language service provision, community funding allocations
- Language Assistance Services – direct delivery of interpreter and translation services
- Staffing - diverse care management and quality improvement staff
- Community Prevention and Wellness – upstream public health initiatives
- Community Information Exchange – Community referral process and platform (Connect Oregon)
- Traditional Health Worker Program Investments – Supports culturally-responsive provider network (Peers, Community Health Worker, Doulas, Health Navigators)
- Community Health Improvement Plan (CHIP) – Coordinated grant funding cycles that provide community resource to achieve stated goals
- Early Learning Hub – Programs and coordinated resources that support children and families (educators, childcare providers)

YCCO formed a Funding Alignment Workgroup in 2022 to ensure that funding and granting processes were equitable, community-led, and used consistent processes. This group is creating a master RFP for funding proposals and a funding protocol guide.



**Supporting Documentation:**

- Staffing – Advancing Health Equity
- CLAS Framework 2023
- YCCO Responses - 2022\_YCCO\_ExhL\_HRS Tabs
- YCCO 2023 CHIP Progress Report
- CPW CHIP Project RFP 2023 Instructions
- Grant process standard operating procedure

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## Section 2: Annual Training & Education Report

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**Focus area 6: Organizational training and education**

**Year 2 Progress Report**

**Goal:**

Demonstrate staff and committee knowledge and confidence from contractually required and **community recommended** training, **tailored to the population’s needs to provide the most culturally responsive care.**

**Year 3 Strategy**

- Strategy is the same as year 3
- Strategy has been modified for year 4
- A new strategy has been developed

**Strategy 6.1:**

Meet contract requirements for offering training and education opportunities for staff, governing board and committees, leadership, and community partners.

**Baseline (if any):**

Current training plan established; requirements review completed; has not historically had 2.0 contract training requirements included

**Metric/Measure of success:**

Training activities meet contract requirements; Minimum 5 in-person or virtual training events delivered to staff and committees in 2022.

**Progress to date:**



This plan, while fluctuating in format and frequency of training, remains aligned with the recommended topics, but grounded itself first in common definitions for the year 2022, and dug deeper into the concept and specific topic areas in 2023.

Nineteen separate training courses were available to YCCO staff (limited to new staff or supervisors) in 2022. Training was multimodal to meet staff, governing committees, and community needs, including online on-demand videos, articles, virtual presentations from staff, hybrid training with consultants, and hybrid videos shown during sessions.

Topics covered in 2022 were as follows

- Health Disparities and System Barriers
- LGBTQIA2S+ Introduction
- LGBTQIA2S+ Terminology
- Language Access
- Microaggressions
- Developing Successful DEI Structures
- Tribal Medicaid Rights and History
- Grievance System
- Implicit Bias



**Supporting Documentation:**

- Health Disparities and System Barriers training
- Health Equity Plan Update and LGBTQIA2S+ training
- Training and Info Opportunities Staff
- REALDSOGI 2022 training
- Enrollee Rights Training 2022-02 QCAP
- Enrollee Rights Training 2022-03 BOD
- Enrollee Rights Training 2022-3 Staff
- Course Description – Dispelling the Illusion of Communication
- DEI Committees that Work A Strategy for Success
- Tribal Medicaid Rights training
- Grievance System 2022 Annual Report

**Strategy 6.2:**





Develop a mechanism for incorporating participant feedback into the training plan, **informing participants how their data is used and ensuring training is accessible, culturally appropriate, and offers accommodations.**

**Baseline (if any):**  
 Provider and staff surveys delivered regularly; no regular report or analysis system

**Metric/Measure of success:**  
 QI process, including annual report and analysis, implemented annually; 100% of training events include surveys to gauge self-assessment, skills acquisition, and knowledge, per OEI criteria

**Progress to date:**  
 Of the 23 training sessions offered in 2023, 12 of them offered some form of evaluation or attestation (52%). Of those with surveys, 8 had completed surveys (66%). Unless offered by an outside agency with a fixed evaluation, all surveys align with the OEI Cultural Competency criteria.

Equity Committee reviews training data biannually and discusses options and strategies for improvement. In 2022 the Committee discussed training in April, May, June, and September.

**Supporting Documentation:**

- Advancing Health Equity Committee Meeting Documentation tracker

**Strategy 6.3:**

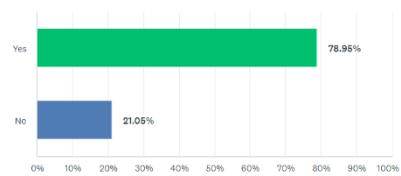
Complete system review to ensure network providers receive contract- and state-required training and certification related to cultural competency and language access measures as well as **topics they and community members have requested**, to best address **local needs**.

**Baseline (if any):**  
 Assessment of Board-required CE completed; initial survey data indicates gaps in language access training

**Metric/Measure of success:**  
 Needs assessment completed to determine noncompliance with training requirements; 100% of provider network contracts include requirements related to Board-required culturally competency CME

**Progress to date:**  
 The rate of providers in the clinic network receiving topic-specific training through their work has slightly increased based on 2022 Accessibility Survey data compared to preliminary 2023 data, but YCCO ensured additional resources were available. Training offered to providers included Timely Care, Language Access, traditional health workers and behavioral health integration, and decentering whiteness in the care setting. The last training listed is called “Decolonizing and Decentering Whiteness in the Healthcare Workforce to build shared understanding around culturally responsible care, especially when addressing pain management and learn about decentering whiteness in the care setting

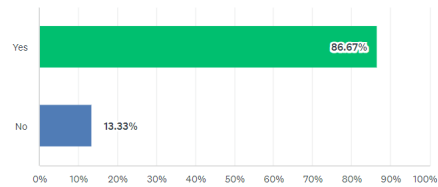
Do staff and providers receive topic-specific cultural competency training, including topics like ADA and disability, LGBTQ+ patients, or Tribal patients?  
 Answered: 19 Skipped: 0



A Wellness Summit to acknowledge difficult emotions in clinical practice and skill-building for managing and addressing concerns about burnout to build shared understanding around culturally responsible care, especially when addressing pain management and learn about decentering whiteness in the care setting.

Do staff and providers receive topic-specific cultural competency training, including topics like ADA and disability, LGBTQ+ patients, or Tribal patients?

Answered: 15 Skipped: 1



### Supporting Documentation

- YCCO Provider Update – CME Training
- Healthcare Worker Wellness Summit

## STAFF TRAINING

YCCO staff provided feedback that multiple modes of training would best meet needs. For staff members who prefer to learn alone and/or at their own pace, there are online NavEx training videos. For those who prefer real-time training with space for discussion, YCCO also offers both staff- and consultant-led training. Surveys indicate positive response for this method. Another strategy developed in 2022 to be more responsive to need was frontloading training at the beginning of the year, so in 2023's training plan, created at the end of 2022, all trainings are scheduled for the first half of the year. A barrier encountered in 2022 was running out of time on meeting agendas, especially the staff and Board agendas, to complete trainings. Governance committees have been providing feedback that training is disrupting the time that the committees could be giving feedback or working on their own projects.

Data collection during meetings proved difficult as well; demographic data collection has lowered since starting to collect it. YCCO will return to in-meeting data collection strategies in 2023 but is also reviewing what data is being gathered and clearly sharing why.

YCCO has hired a Training and Development Manager who will support the NavEx Learning Management System and other systems and strategies to offer staff education.

## PROVIDER NETWORK TRAINING

YCCO is partnered with the Interprofessional Primary Care Institute to offer Continuing Medical Education to partners, with a special focus on behavioral health integration. YCCO also offers additional training and materials, including sharing out educational tools like the Provider Language Access Toolkit in its Provider E-News, and coordinating training specific to culturally responsive care. Feedback from providers has been that committee time spent on updates and training reduces the time the committees can work collaboratively. YCCO is exploring utilizing



more written educational materials as a part of the consent agenda within meetings and offering additional continuing education opportunities to the network outside of existing gathering or committees.

To ensure providers have resource to meet licensing requirements with CE, YCCO offered course approved with OHA for Cultural Competency Continuing Education called “Dispelling the Illusion of Communication.” This course explores basic concepts for providing meaningful access for non-proficient English speaking and deaf patients including language access as a civil right; literacy; tips for communicating with English language learners; and best practices for working with & including integrating interpreters into the health care team. Twelve providers attended the December virtual training. All training includes the OEI-aligned follow up surveys.

YCCO also utilizes its Provider Handbook, which providers agree in their credentialing contracts to abide by, shares the requirements that providers maintain their appropriate CE to keep current licensure.

## **UPDATES TO ORGANIZATIONAL AND PROVIDER NETWORK CULTURAL RESPONSIVENESS, IMPLICIT BIAS, AND EDUCATION PLAN**

The Equity Committee discussed training strategies at three separate meetings in 2022 alone ([Advancing Health Equity Committee Meeting Documentation Tracker](#)). This group reviewed the NavEx platform training topics to give feedback on preferred staff training and shared thoughts about the online video platform. As part of these discussions, YCCO will be shifting its NavEx training to support onboarding needs, while staff who have already completed them will not repeat training. There have been no changes in topics or content of the Education Plan, but in the remote space YCCO is exploring as multiple modes of training and development, for both providers and staff, as possible.

## **ATTESTATION**

Has the CCO adopted the definition of Cultural Competence set forth in OAR 943-090-0010 and is utilizing it to guide its development of cultural responsiveness materials and topics in its Cultural Competence Continuing Education training activities into its training plans for Health Care Professionals?

Yes       No



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# Supporting Documents

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2022 CAC Recruitment Planning

2022 Health Plan Operations Bonus Goals Report Out

2022 Provider Accessibility Survey questions

Board Health Disparities and System Barriers

CHA and CHIP Contributors

CHIP Workshop Presentation Spanish

CHIP Workshop Presentation

CLAS Framework 2023

COM-005 Engagement

Course Description - Dispelling the Illusion of Communication

CPW CHIP Project RFP 2023 Instructions

CY 2023 HEP-Training-Report-Plan-YCCO

Data Governance Program Charter – signed

DEI Committees That Work A Strategy for Success

EL Outreach Tracker 2022 extract

Enrollee Right Training 2022-02 QCAP

Enrollee Right Training 2022-03 BOD

Enrollee Right Training 2022-03 Staff

Governance - Advancing Health Equity

Grant process standard operating procedure

Grievance System 2022 Annual Report

Grievance System member survey

HE-001 Culturally & Linguistically Appropriate Services

HE-002 Equity

Health Disparities and System Barriers training



Health Equity Plan - New focus areas QCAP  
Health Equity Plan Update 2023 + LGBTQIA2S+ training  
Health Plan Ops Department Structure 2023  
HEM Comparison\_CCO  
HEM Tracking Sheet YCCO  
Interview Questions\_Health Equity Specialist  
IS Department Structure 2023  
Language Access member survey - Deaf and Hard of Hearing  
Language Access member survey  
Language Access Plan\_2022  
Language Access Procurement Letter  
Listening Session Questions with Intro\_English  
Listening Session Questions with Intro\_Spanish  
Medical Training Academy LOC  
Member LA Toolkit  
New YCCO PrismHiring Email Templates  
Oregon Home Care Commission LOS  
Providence LOS  
Provider Language Access Toolkit  
Quality Management Framework  
REALDSOGI 2022 training  
SDoH Screening Questionnaire\_final  
SHCN Demographics  
Staff equity survey 2022  
Staff Language Service Guide  
Staffing – Advancing Health Equity  
Tableau Dashboards REALD  
Training and Info Opportunities staff meeting 5.10.23



Tribal Medicaid Rights training

YCCO 2023 CHIP Progress Report

YCCO Health Equity Specialist \_Approved Final 5-3-2023

YCCO Provider Update - CME Training

YCCO Responses - 2022\_YCCO\_ExhL\_HRS Tabs

