
2024

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



Create an equity-centered system



Encourage smart, flexible spending



Invest in equity across systems

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

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.

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 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.

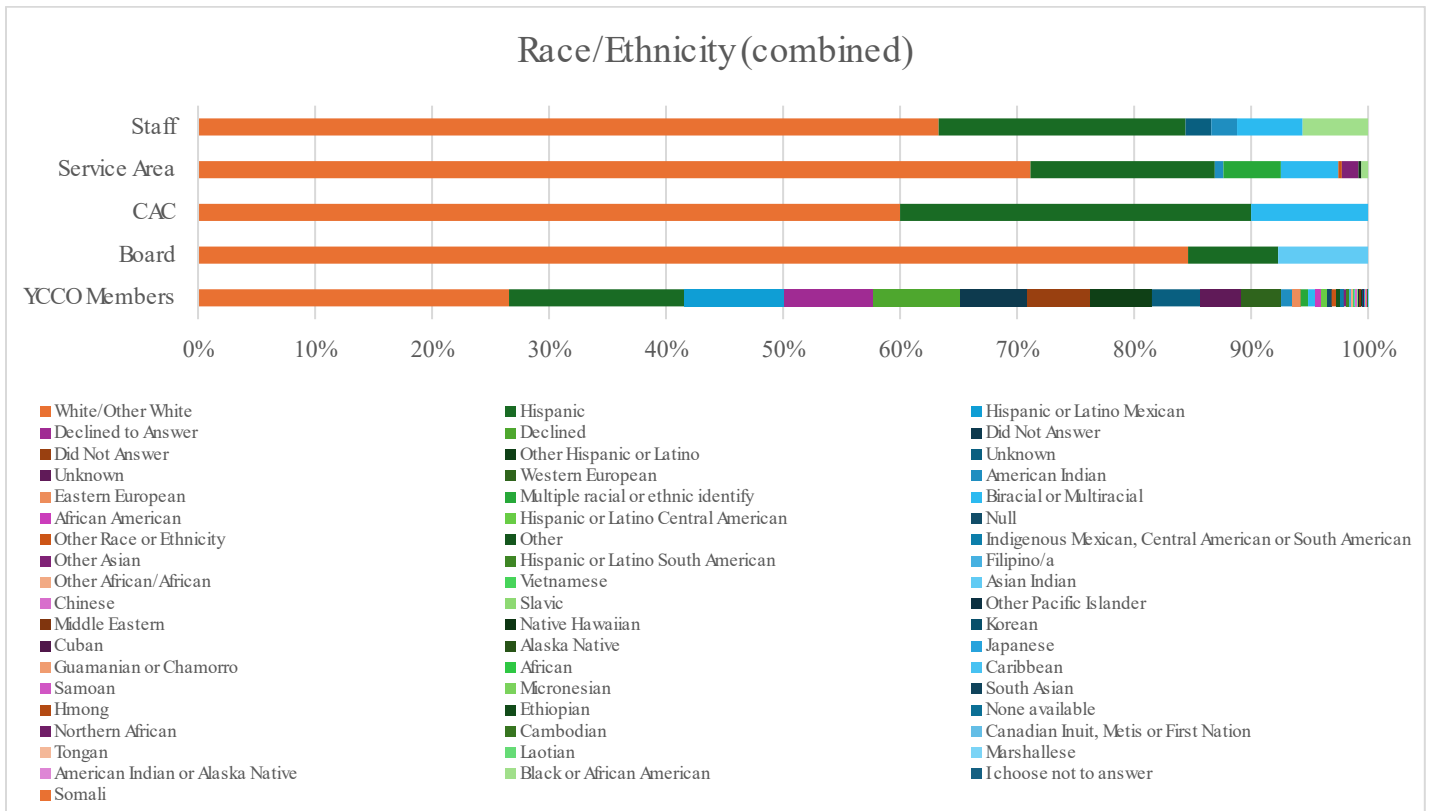
As indicated in the guidance document, all strategies have been updated to reflect **Inclusive** and **Equitable** components of the strategic goals and are marked in the color indicated.



DEMOGRAPHIC INFORMATION

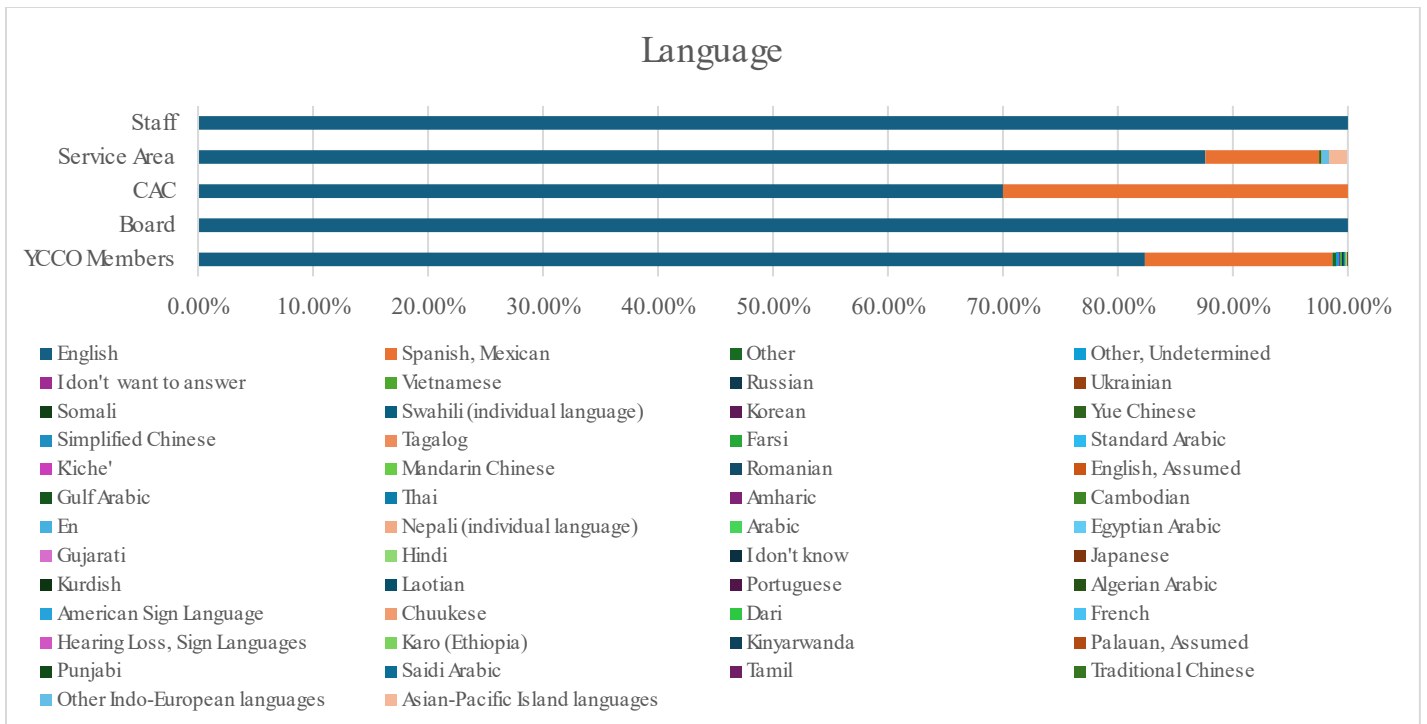
CCO Workforce, CAC, and Service Area Demographic Information

The Yamhill Community Care service area is a rural region, with a wide range of different towns, cultures, and service availability. The total member population is 37,273, which is ~1300 fewer than June of 2023. Redetermination resulted in a small population loss, while the Healthier Oregon Population expansion added membership. Below are demographics for YCCO members, staff, Community Advisory Council, Board of Directors, and the county region.¹ Note that legend columns are read horizontally in order of prevalence, e.g. “White/Other White” is the most prevalent race/ethnicity, “Hispanic” next, followed by “Hispanic or Latino Mexican” then “Declined to answer.” The most prevalent race or ethnicity categories for YCCO members were matched with the corresponding categories for Board, CAC, and staff for the sake of comparison while preserving granular race/ethnicity detail.

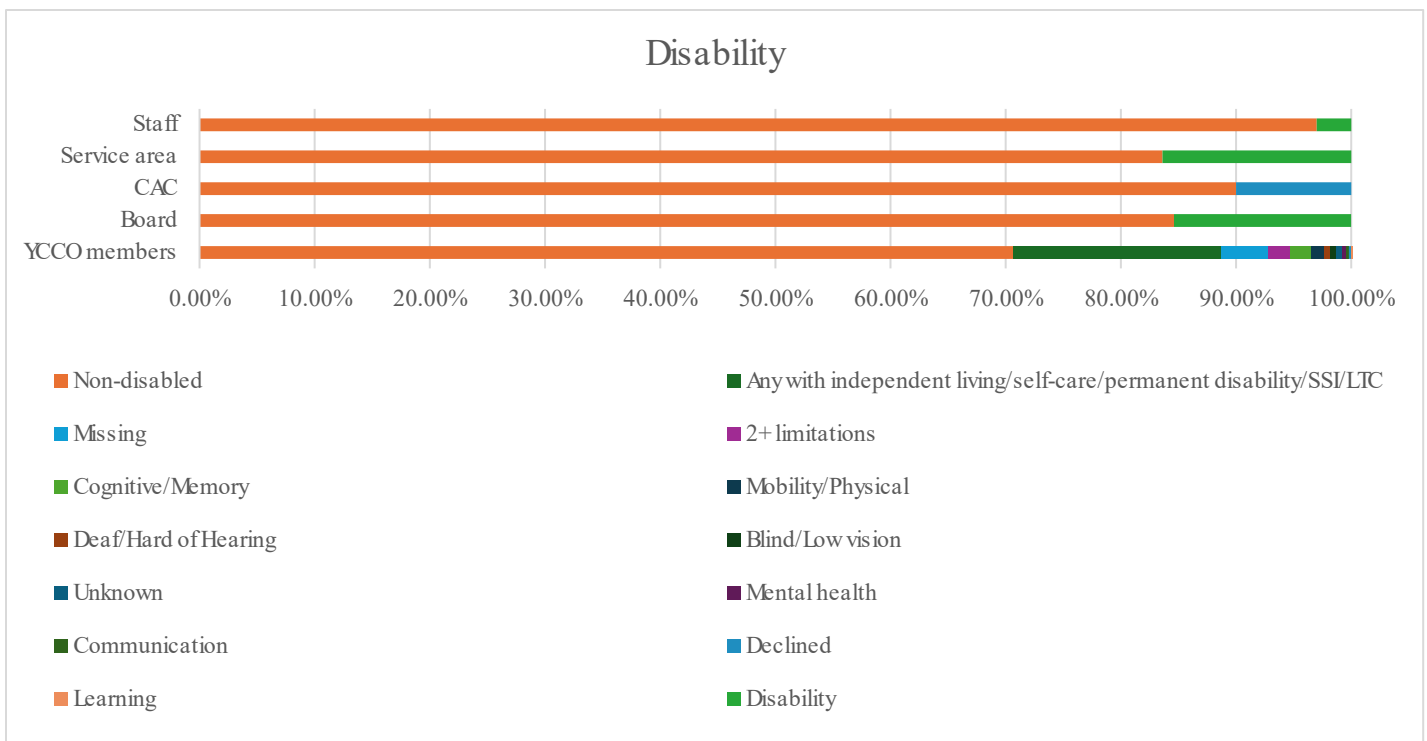


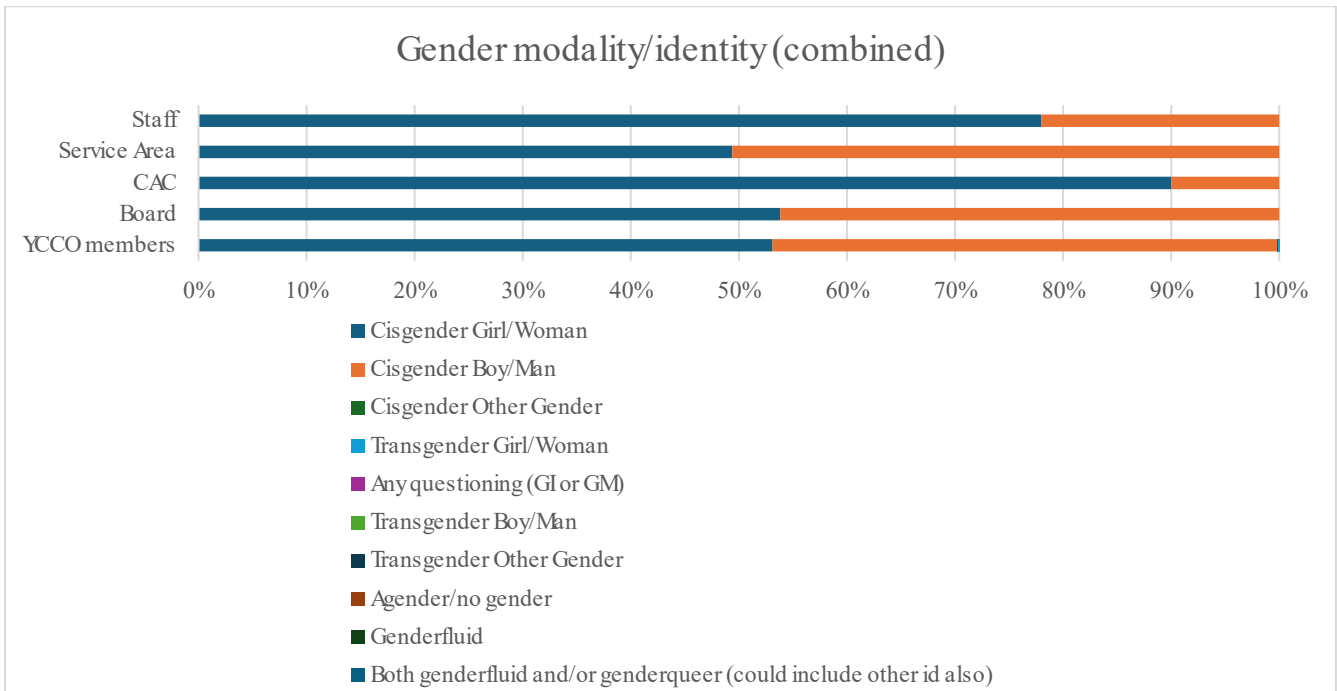
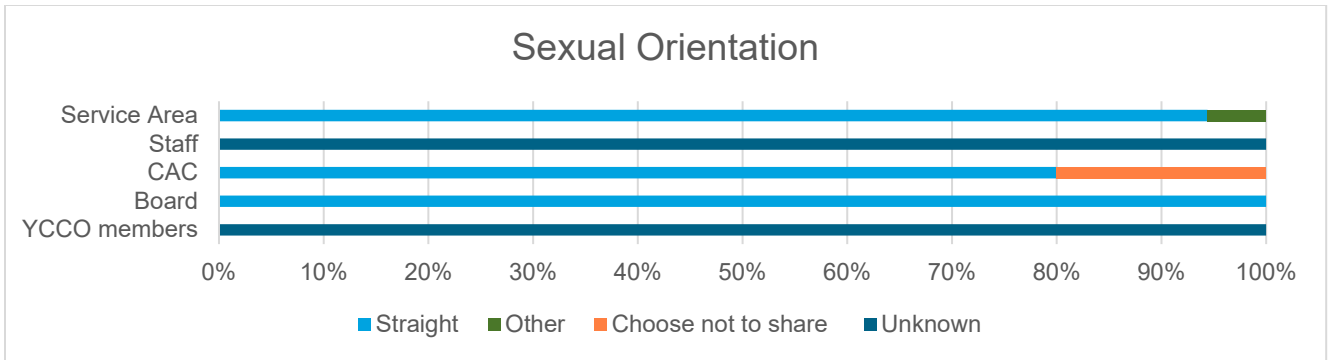
¹ <https://data.census.gov/all?q=yamhill+county>





YCCO members speak more than 50 languages, but after the first seven most prevalent languages, each has fewer than 10 speakers.





As YCCO acquires more robust sexual orientation, gender identity, and gender modality data, using the highest level of specificity in labels will be prioritized. See more information in Focus Area 3 below.

Of note, the response rates for the Board of Directors, CAC, and the staff are near 100%, due to process changes in collection. The Board and CAC have options to complete during the meeting, and the staff demographic data is collected through Human Resources instead of in an optional survey. More about the HR staff demographic process below in Focus Area 1.



FOCUS AREA STRATEGY UPDATES

FOCUS AREA 1: REALD / SOGI

Year 4 Progress Update

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 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- A new strategy has been developed

The foundation of the HIT infrastructure is in place with ongoing refinement and enhanced application.

Strategy 2.1:
Develop data collection and HIT infrastructure that 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
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Progress to date:
YCCO continues to use a needs assessment process to evolve the HIT systems and infrastructure to capture relevant REALD-SOGI demographic data. The core foundation for the collection and storage of REALD-SOGI data is in place while focusing, refining, and building the architecture for more efficient data storage and integration of the data tables to leverage with other health plan data. To do this, YCCO staff have socialized various dashboards, analytic tools and aggregate member data with internal operations committees, the Leadership team, Board of Directors, and the Community Advisory Council to gather feedback on the output of the HIT structure and how it informs health equity work.

The expansion of new data infrastructure includes analytic tools John Hopkins ACG risk stratification, historic care coordination health risk assessment data, a Human Resource Information System (HRIS) and the collection of employee disability status, and a new reporting system for Early Learning community partners to share data are the 2023-2024 additions. These new data feeds combined with more sophisticated aggregation of member demographic detail related to spoken languages, disability status reasons, sexual orientation, and gender identity are all new elements being integrated.

For staff demographics, the HR team developed a data infrastructure for collecting staff demographics, which supports and automates demographic data collection from staff. This will increase efficiency and consistency of this collection process. The current system collects gender, age, preferred language, ethnicity, and disability. To address these gaps, YCCO will work to add more data fields to this system, as well as include REALD-SOGI aligned



demographic questions in an annual staff experience survey.

The screenshot shows a web-based survey form with several sections:

- Personal:** Gender (dropdown), Date of Birth (text input), Marital Status (dropdown), Employee SSN (text input), Citizenship (dropdown: 'A citizen of the United States'), Preferred Language (dropdown: 'English'), Ethnic Code (dropdown: 'White / Caucasian').
- Status:** Veteran (dropdown: 'No'), Vietnam Veteran (dropdown: 'No'), Disabled Veteran (dropdown: 'No'), Wellness Qualification Stat (dropdown: '-- Select --'), Assessment Due Date (text input), Service Medal Veteran (dropdown: 'No'), Newly Separated Veteran (dropdown: 'No'), Other Protected Veteran (dropdown: 'No'), Active Duty Badge Veteran (dropdown: 'No'), Future Date (text input), Assessment Completion Date (text input), Tobacco User (dropdown: '-- Select --'), Disabled (dropdown: 'No'), Blind (dropdown: '-- Select --'), Deceased (checkbox).
- License:** Drivers License Number (text input), Drivers License Class (text input), License Expiration Date (text input), State Issuing License (dropdown: '--Select--'), License Plate Number (text input).

 A dropdown menu for race/ethnicity is open, showing options: '--Select--', American Indian or Alaska Native, Asian, Black or African American, Declined to State, Hispanic or Latino, Native Hawaiian or Other Pacific Islander, Two or More Races, and White / Caucasian. The 'White / Caucasian' option is highlighted in blue.

Supporting Documentation:

- Tableau - Equity Data Dashboards 2024
- Johns Hopkins ACG System_2023-09-12
- Voluntary Self-Identification of Disability OFCCP 503Self-IDForm

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:

Growth and development take time. Over the past year, implementation of the HIT infrastructure has been slow, yet on-pace with the data available across the state. YCCO has worked to further integrate REALD demographic data into member-level data sets used to analyze needs, monitor progress, evaluate the effectiveness of programs, and incorporated into CCO contract reporting. The addition of SOGI data into these structures has been delayed but is showing progress. SOGI data is incomplete with a large margin compared to the YCCO population and does not represent an accurate foundation to make any correlated determination at this time.

To overcome the initial barriers related to SOGI data, YCCO has presented the available data to its CAC, data governance committee, and data equity workgroup for feedback and guidance. YCCO staff continue to participate in OHA-led REALD-SOGI collaboratives and convenings to understand the barriers to more comprehensive collection, and community advised approaches to incorporate the use of this data.

Reflection on key milestones from the past four years of this plan as reported:

- Year 1: Establishing the use-case for demographic data in four domains; Medicaid enrollment data, system data, population data, program data
- Year 2: Develop YCCO Internal data repository and database; Identify and implement a data analysis tools and structures



<ul style="list-style-type: none"> • <u>Year 3</u>: Formation of data governance committee; expansion of data management administrative and vendor services • <u>Year 4</u>: Refinement of data sources and data management platforms; collection of new data elements related to social needs, disability status, and SOGI 	
Supporting Documentation: <ul style="list-style-type: none"> • Tableau - Equity Data Dashboards 2024 	
Strategy 2.3: Develop and share data collection policy and procedures that encompass all demographic data requirements.	
Baseline (if any): Limited data collection and policy and procedure references	Metric/Measure of success: Established set of policies and procedure documents used consistently across organization
Progress to date: YCCO reviewed and updated the below listed policies and procedures that reflect consistent collection and use of demographic data. In addition to review of current policies, new policies and process were developed related to data equity and social needs data collection. The inclusion of HE-003 SDoH Screening, Referral, & Authorization; SVC-013 Health Related Social Needs; and Data Equity Workgroup Purpose Statement.	
Supporting Documentation: <ul style="list-style-type: none"> • Tableau - Equity Data Dashboards 2024 • HE-003 SDoH Screening, Referral, & Authorization • SVC-004 Network Capacity Service Adequacy and Availability • SVC-013 Health Related Social Needs • YCCO Data Equity Workgroup Purpose Statement • YCCO Data Equity Workgroup Meeting Documentation 2024 • Data Visualization Best Practices Guide 	

FOCUS AREA 2 CLAS Standards as an Organizational Framework to Advance Health Equity
Year 4 Progress Update
Goal: 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 5 Strategy
<input checked="" type="checkbox"/> Strategy is the same as year 4 <input type="checkbox"/> Strategy has been modified for year 5 <input type="checkbox"/> 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:

YCCO reviewed and updated the below listed policies and procedures that reflect the application and assurance of culturally and linguistically appropriate services (CLAS Standard 2 and 9) In addition to reviewing current policies, new policies and process were developed related to data equity and social needs. The inclusion of HE-003 SDoH Screening, Referral, & Authorization; SVC-013 Health Related Social Needs; and Data Equity Workgroup Purpose Statement add to the already existing communication policies.

As part of an organizational-wide implementation of provider network contracting, YCCO evaluated current contract templates and practices for the provider network. The result of the evaluation was to strengthen the language in the provider agreement templates that reflect the provision of language assistance services as part of care delivery (CLAS Standard 3.) Contracted providers represent varying service categories, physical health, behavioral health, dental, traditional health workers, and new health related social needs providers. All provider agreements represent this enhanced language and expectation for compliance with federal language provision requirements (CLAS Standard 5.)

Supporting Documentation:

- HE-003 SDoH Screening, Referral, & Authorization
- SVC-004 Network Capacity Service Adequacy and Availability
- SVC-013 Health Related Social Needs
- YCCO Data Equity Workgroup Purpose Statement
- YCCO Data Equity Workgroup Meeting Documentation 2024
- Data Visualization Best Practices Guide
- Provider Contracting Request Form V4 - 11.01.2023
- YCCO Participating Provider Agreement_Professional PH and BH, p. 6-7, 11, 29

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**.



<p>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</p>	<p>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</p>
<p>Progress to date: The YCCO CLAS Strategic Framework receives annual updates from the Equity Committee. With staff expansion in 2022-3, the Equity Committee has grown and includes newer staff. The framework was reviewed, and feedback included concerns about using a high-level framework with limited concrete examples or clear relation to individuals,' especially new individuals,' work. The new framework includes clearer examples of projects or programs spanning each area of the grid, allowing staff to better understand how their day-to-day work fits into YCCO's equity infrastructure.</p> <p>Based on these discussions, the CLAS Standards that still need the most development are: CLAS Standard 7 - Ensuring the competence of individuals providing language assistance, and CLAS Standard 10 – Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities. These two areas of the standards are being discussed with the language access plan expanding to include greater detail and measurable interventions as reflected in a 2024 Transformation and Quality Strategy project.</p>	
<p>Supporting Documentation:</p> <ul style="list-style-type: none"> • CLAS as a framework update 2024 • Equity Committee Meeting Documentation • TQS-2024-Project 174_Member Language Accessibility and System Barriers 	

<p>CLAS – Governance Leadership, and Workforce</p>
<p>Year 4 Progress Update</p>
<p>Goal: YCCO recruits, supports, and collects ongoing feedback from a diverse staff and provider network workforce.</p>
<p>Year 5 Strategy</p>
<p><input checked="" type="checkbox"/> Strategy is the same as year 4 <input type="checkbox"/> Strategy has been modified for year 5 <input type="checkbox"/> A new strategy has been developed</p>
<p>Strategies remain the same while the activities to achieve strategic goals have evolved – work is considered ongoing.</p>
<p>Strategy 5.1: Implement enhanced Human Resources and network policies, practices, and investments to support a diverse and inclusive workforce.</p>



<p>Baseline (if any): Current staff and provider network demographics identified, and baselines established</p>	<p>Metric/Measure of success: Ongoing data collection process refined to capture policy and procedure enhancement and investments that support the recruitment and retention of a diverse workforce.</p>
<p>Progress to date: Internal Human Resource policies and practices have expanded to include new position roles, employee demographic tracking, expanded outreach, and recruitment efforts. New roles adopted are in the human resources department and other roles related to member care and care experience.</p> <ul style="list-style-type: none"> • HR Generalist • Training and Development Program Manager • Health Equity Specialist • Community Engagement Specialist • Care Managers • Clinical Support Specialists • Quality Improvement Specialist <p>These positions strategically recruited and hired multicultural and bi-lingual personnel. A 2025 goal of the human resource department is to develop a comprehensive workforce recruitment strategic plan. As part of an organizational insourcing project of key member-facing health plan functions, utilization management, care management, and appeals and grievances, YCCO has experienced an 86% increase in staff at the end of 2023 and is now operating with staff from 11 US States. This staff expansion has allowed for a broader, more diverse retention of employees.</p> <p>The process for capturing data on a diverse network of providers has improved through enhanced use of the provider network data platform Quest Analytics. This platform and the integration of provider demographic data has significantly expanded the capability to track provider demographics such as language, gender, populations served, and services provided.</p>	
<p>Supporting Documentation:</p> <ul style="list-style-type: none"> • YCCO Training & Development Program Manager • YCCO Health Equity Specialist • YCCO Community Engagement Specialist (Bilingual Skills English-Spanish) • Tableau - Quest Enriched Data And the Provider DSN Report 	
<p>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</p>	



<p>Baseline (if any): Baseline community engagement strategy established, member and community engagement measures developed</p>	<p>Metric/Measure of success: Five (5) new organizations identified to partner or outreach for recruitment; 25% of clinics surveyed provide recruitment strategy data; five (5) trainings completed to prepare staff and leadership for a diverse workforce.</p>
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Progress to date:
Key activities to promote and expand recruitment reach and promotion of YCCO employment opportunities and services are through Human Resource efforts and a community awareness and branding campaign. These strategies support community awareness of available services and support and promote YCCO as a wonderful place to come work and be part of the community solution. Lead by the communication and government affairs department, a company-wide brand promotion campaign launched 2022. This process has included identifying new organizations and media platforms to promote YCCO services and career opportunities.

As referenced above, the past year has brought on significant growth in personnel and with the HR and branding campaigns, over 36 employees have been hired that hold and align with the mission, vision, and principles of Yamhill Community Care. Referenced on the enhanced YCCO Career page of the corporate website <https://yamhillcco.org/about-us/careers/> presents a photo from an all-staff gathering, videos of Yamhill Community Care and the CCO model, and direct access to the hiring portal and relevant employment related information.



Share: [f](#) [t](#) [in](#)

At Yamhill Community Care (YCCO) we envision a work culture that is a safe, vibrant, and friendly with a supportive work environment that empowers individuals to grow their potential both professionally and personally.

YCCO is a Coordinated Care Organization (CCO) that serves Oregon Health Plan (OHP) members in Yamhill County, and parts of Washington, and Polk.

YCCO is a small grassroots 501 (c)3 nonprofit organization with the vision of A unified healthy community that celebrates physical, mental, emotional, spiritual, and social well-being.

YCCO selects the best individual for the job based upon job related qualifications, regardless of race, color, religion, sexual orientation, national origin, gender, gender identity, age, veteran status, ancestry, marital status, or disability. YCCO will make a reasonable accommodation to known physical or mental limitations of a qualified applicant or employee with a disability, unless the accommodation will impose an undue hardship on the operation of our organization.

Equal Employment Opportunity
Federal Polygraph Protection Act Notice

Supporting Documentation:

- YCCO Board Brand Awareness Update June 17, 2024
- YCCO Brand Awareness Campaign Update_2023 Oct 10
- <https://yamhillcco.org/about-us/careers/>

CLAS – Communication and Language Assistance

Year 4 Progress Update

Goals:

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 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- 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:

The Language Access Plan in place since 2021 was reviewed and updated in Language Access workgroup with minor changes recommended. Updates to the plan included additional strategies and interventions in each of the six domains of the Language Access Plan.

Understanding Individual/Cultural Barriers and Needs	Increased System Knowledge and Awareness	Strengthening Policies, Procedures, Workflows	Network Availability	Quality Assurance and Monitoring of Access	Data Reporting & Evaluation Structures
<ul style="list-style-type: none"> • Demographic analysis • Grievance complaints analysis • CAC system barriers subcommittee • Provider Language Accessibility Survey • Member Language Accessibility Survey • Staff Demographic Survey • Engaged community feedback loops • Considerations for older and rural individuals 	<ul style="list-style-type: none"> • Provider Language Accessibility survey • Updated language access information in member-facing materials • Updated language access information on YCCO website • Statement of commitment to health equity • YCCO Health Equity Specialist • Provider CME series • Staff & committee training plan • Education of CBOs, BH providers 	<ul style="list-style-type: none"> • Equity and TIC policy audit review • Member-facing policy plain language initiative • Formation of internal member engagement workgroup • Provider technical assistance and support – site visits, collaboratives, resource toolkit • Policy and procedure enhancements • Language Access Workgroup 	<ul style="list-style-type: none"> • Amendments to vendor agreements • Provider directory includes language information • Support workforce development, including providers languages • Health Care Interpreter Reimbursement Program • Expand network review to CBOs and HRSN providers 	<ul style="list-style-type: none"> • Included CLAS review in the annual policy audit plan • Amendments to vendor agreements; new section in the APM agreements • Structured progress monitoring on CLAS implementation • TQS projects • Language Access Workgroup • Health Equity Measure: quarterly and annual reports • Provider proficiency testing 	<ul style="list-style-type: none"> • Amendments to vendor agreements • Quarterly language access reporting • Data systems support measuring meaningful language access • Tableau language access dashboard



As these strategies have evolved over the past three years, activities such as proficiency tracking and consistency of contract language referencing CLAS requirements are foundational for quality assurance. Addition outreach and engagement with CBO's and potential HRSN providers supports the inclusion of culturally specific language services to be offered at all levels of care delivery. A newer focus of deeper exploration are the expanded rural and older adult populations that have accommodation needs.

Supporting Documentation:

- YCCO Language Access Workgroup Purpose Statement - FINAL
- Language Access Plan_2024
- Language Access Work Diagram - 2024-06
- Provider Newsletter May 2024

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**.

Baseline (if any):

Policies in place

Metric/Measure of success:

Polices are updated with standard definition and procedure steps defined

Progress to date:

Continuous adaptations and updates are made to YCCO policies and processes to ensure accessibility and appropriateness for members. Updates include the following:

- Bilingual Pay Policy Update – With an increase in bilingual staff serving multiple functions, from direct member services to community outreach and engagement, the YCCO bilingual pay policy was updated in 2024 to reflect these needs. The policy includes an increased pay differential for job-relevant bilingual skills.
- Oregon Health Care Interpreter Registry – For member and provider accessibility, links to the OHA Health Care Interpreter Registry Search were added to the YCCO website. On both the provider- and member-facing pages, these link outs ensure those audiences have access to a comprehensive real-time list of OHA Certified/Qualified interpreters.
- Member-facing Policy Summary – While member-impacting policies are publicly posted, they are not necessarily simple and accessible for members. YCCO has implemented a plain language project to pair member-facing or relevant policies

Your Right to Quality

Coordinated Care

As a YCCO member on the Oregon Health Plan you have rights, such as the ones below.

- Not feel like you are being treated differently, or discriminated against.
- Receive care that provides choice, independence and dignity.
- Be actively involved in making your treatment plan.
- Be free to report complaints to YCCO, the Oregon Health Authority, the Bureau of Labor and Industries, or the Office of Civil Rights.
- Receiving services in the language you prefer. Read more about language access here: [Member Language Access Toolkit](#)
- **Find A Health Care Interpreter**

Access OHA Health Care Interpreter Registry Search: <https://hciregistry.dhsoha.state.or.us/Search>



with brief summaries for members to access. This ensures that “publicly posted” also is meaningfully accessible.

Supporting Documentation:

- YCCO Bilingual Skills Pay Policy_May 2024 Update
- YCCO Website - OHA Health Care Interpreter Registry Link
- Provider Newsletter May 2024
- COM-001 Member Plain Language Policy Summary
- COM-002 Member Plain Language Policy Summary

Strategy 3.3:

Adopt organizational monitoring policies and procedures to ensure culturally appropriate and linguistically appropriate services are available, **publicly posted**, **available for comment**, and audited to ensure an **equity and trauma-informed focus**.

Baseline (if any):

General audit and oversight policies in place

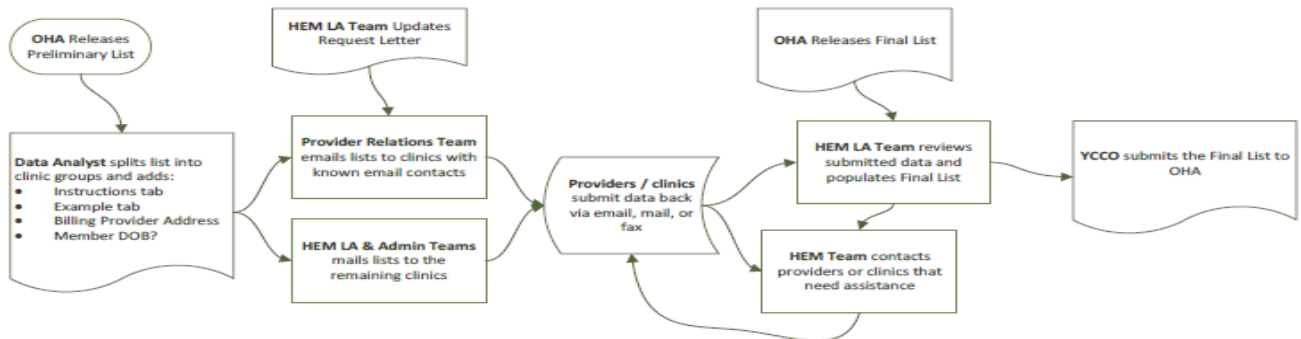
Metric/Measure of success:

CLAS specific policies and procedures created and adopted

Progress to date:

A Health Care Interpreter Reimbursement Program is the newest program addition to support the provider network and internal staff workforce in having an adequate network of trained and certified individuals to provide high quality language support. This program is offered to encourage bi-lingual providers and staff to participate in an OHA approved HCI training program or proficiency test and receive certification with YCCO covering the cost via reimbursement with a financial incentive to participate, see [HCI Reimbursement Program Brochure](#). To date, six recorded clinic practices are participating in the HCI certification program with additional practices submitting inquiry. Capturing language services provided by an OHA certified or qualified individuals is the primary goal of this program.

Procedures ensuring language availability and the collection of language access data were strengthened with the addition of standard workflows and resources for providers. A Health Equity Measure (HEM) workflow was developed to streamline the process for the collection and submission of language service data. Data collected as part of the HEM measure are incorporated into the existing Language Access Dashboard and represent a comprehensive collection of language services data available.



An update to a standard operating procedure for annual collection of language access data from providers was made to further solidify written documentation of the collection and oversight processes. This procedure records how data is collected and how quality and equity committee structures use the data to inform system gaps and improvements.

Supporting Documentation:

- HCI Reimbursement Program Brochure
- Project Plan - Language Access HEM MY2023
- HPO- Provider Language Access Survey
- Accessibility and SDoH Provider Survey
- Language Access Workgroup Meeting Documentation 2023-2024, page 27
- Project Plan - Language Access_DELTA 2024

Strategy 3.4:

Develop plan for evaluating compliance and gathering direct feedback of the quality and accessibility of language services and standard workflows, including all spoken and sign language regardless of volume on a regular basis to assure adherence internally and across the provider network.

Baseline (if any):

Evaluate monthly data submitted

Metric/Measure of success:

Services found to be high quality and accessible based on audit standards

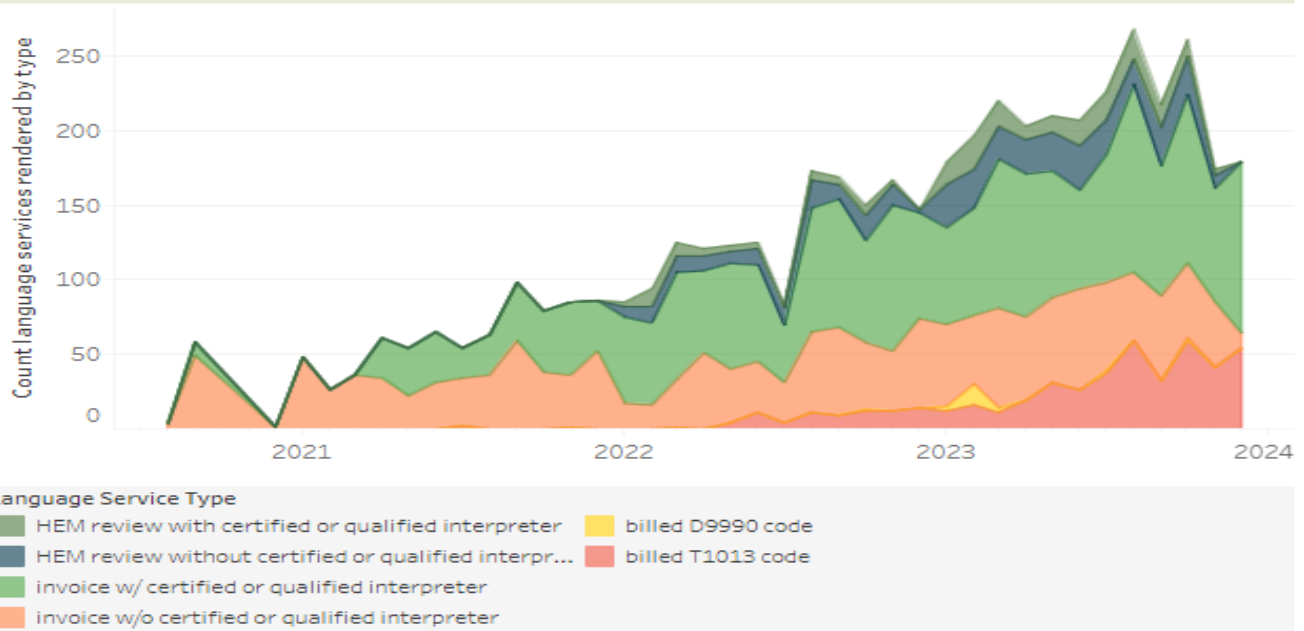
Progress to date:

Concerted effort towards language access data collection was contributed in this last 12-month reporting cycle. Internal teams worked diligently to increase the completeness and accuracy of language access data, worked to streamline collection across the different reporting systems, (quarterly language access reporting, Health Equity Measure, Transformation and Quality Projects, and language access survey data from members and providers.) Established templates, collection methods, and validation efforts were updated based on feedback received in surveys and site visits related to system and staff resource barriers for being able to discreetly capture the required data elements to report.

Despite these efforts, YCCO is anticipated to report lower than the improvement target of 18.5% set for the percent of OHA qualified or certified interpreter services provided with a rate of 9.9%. Lessons learned for the last HEM measure collection were that providers are still struggling to capture every element needed to report which creates enormous administrative burden and as reported by providers, takes away from patient care, certain providers specifically vision, dental, and behavioral health providers who had overall lower rates.



Language services rendered by type



Count language services rendered by type

Language Service Type	2020				2021				2022				2023			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
no known language service rendered	2,840	1,592	2,496	2,937	2,832	3,149	3,319	3,257	3,704	3,518	4,008	4,544	4,582	4,661	5,667	6,068
invoice w/ certified or qualified interpreter			9			93	86	124	185	191	207	237	237	247	299	304
invoice w/o certified or qualified interpreter			52	1	110	87	127	125	65	121	140	145	168	181	162	104
HEM review without certified or qualified interpreter									29	29	41	33	77	79	66	35
HEM review with certified or qualified interpreter									24	13	13	10	55	37	54	15
billed T1013 code							2	1	1	15	24	38	39	76	128	154
billed D9990 code												1		20		2

Supporting Documentation:

- Tableau - Language Access Dashboard 2024
- 2024 Transformation and Quality Strategy (TQS) for QCAP, page 5
- HEM - Language Access Informational Presentation - Site Visits - 2024 Spring
- 2023 HEM Project Lessons Learned 4_5_24
- Accessibility and SDoH Provider Survey
- Accessibility and SDoH Community Partner Survey

Strategy 3.5 / 7.2:

Increase awareness and participation in system improvement to ensure accessibility to culturally and linguistically appropriate services in the provider networks.

Baseline (if any):

Survey developed and fielded with Primary Care

Metric/Measure of success:

Data collected from at least 60% of the provider network; Increase in improved systems & accessibility when reported year over year.

Progress to date:



To address challenges related to collection of complete and accurate language services data from providers as referenced in the above section, different interventions were deployed to support the network improvement processes for offering, tracking, and reporting language services.

- Fall 2023 and Spring 2024 site visits with Primary Care Provider offices offered an opportunity to review and discuss different system improvement initiatives related to metrics, member grievances, network barriers, language access, participation and providing feedback to the CCO, and care management supports.
- Training specific to the Health Equity Measure – Meaningful Language Access measure was offered to providers in Spring 2024 site visits and focused on technical reference to the measure specifications and federal requirements, current state information, and tools for increasing the amount of reportable language services offered to members.

Supporting Documentation:

- HEM - Language Access Informational Presentation - Site Visits - 2024 Spring
- 2023 Site Visit - Fall Provider Engagement Meeting Sample

CLAS – Engagement, Continuous Improvement, and Accountability

Year 4 Progress Update

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 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- A new strategy has been developed

Given the nature of these CLAS Standards, strategies are continuous and **ongoing**. In 2024 efforts continue to strengthen and enhance existing member communication processes, supported by new hires.

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:

YCCO has formed a Communications Subcommittee centered around ensuring member materials are distributed effectively, efficiently, and in a way that aligns with requirements across departments, strategic plans, brand awareness, and include equitable strategies for reaching each population. This group is informed by feedback from those performing



community outreach, to best understand what methods and modes are most effective for reaching people. In partnership with the Communications Committee, this work includes monitoring and evaluating material reach, engagement, how information and materials are received, and discussing impact based on these metrics.

With hiring of a Government Affairs Director and Public Relations Specialist, YCCO has also developed new policies to guide how communications are created and disseminated, as well as led a brand awareness process to ensure members are aware of available services and clear monitoring processes are in place for determining reach. These strategies have been presented to the CAC for feedback and accompanied by brief training on engaging with social media to ensure the Advisory Council can be engaged in engagement activities.

Supporting Documentation:

- COM-004 YCCO Website
- COM-005 Media Relations Policy
- COM-006 Press Release SOP
- COM-007 Crisis Communications Policy
- 2024 Brand Awareness Calendar
- YCCO Board Brand Awareness Update_2024
- Social Media 101_CAC mtg
- Social Media 101_CAC mtg-es_final

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:

In line with its current policy, YCCO reviews all member-facing materials through the Community Advisory Council. In addition, in 2023 YCCO explored and developed a partnership with the local Promotores group through Providence Newberg Hospital, which offers navigation and health supports to the Hispanic/Latinx population and Spanish-speakers. This group will be reviewing select member materials for appropriateness of the translations for their community, culture, and dialect. This group will be compensated for their time and will be invited to continue to shape the review procedure as it is developed. Once this pilot review process is complete, YCCO will update its member materials policy to reflect community review.

Supporting Documentation:

- COM-003 Communication Materials



<p>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>	
<p>Baseline (if any): Current outreach strategy in development; member engagement committee established</p>	<p>Metric/Measure of success: Baseline response and engagement rates determined for in-person/virtual and online engagement; five (5) new organizations identified for strategic population-based outreach; five (5) organizational relationships strengthened, as demonstrated by participation on committee or regular communication, including outreach to the three (3) Tribes represented within YCCO's service area.</p>
<p>Progress to date: In 2023-4, YCCO hosted an AmeriCorps VISTA volunteer to support community engagement efforts in the community. In addition to evaluating the effectiveness of the in-person engagement strategies, this role reviewed material appropriateness and interviewed partners and community members to create recommendations to inform an outreach strategy with population-specific elements. In partnership with Yamhill County Public Health, YCCO co-facilitates a community Equity Advisory Group, which currently has more than 60 representatives from various organizations around the service area, focused on advising local programs and projects to improve overall health and well-being for specific populations who experience or may experience disparities.</p> <p>In 2023, YCCO created partnerships with three culturally specific or -focused organizations to assist in OHP redetermination, developing data sharing agreements and funding them to perform outreach to YCCO members to ensure they received information and support on redetermination. This format will be a model for future engagement agreements with partners.</p> <p>YCCO has identified 48 new organizations or events for strategic outreach; added 5 committee members to the CAC and, in partnership with Yamhill County Public Health, recruited 67 community members to the Equity Advisory Workgroup. YCCO has conducted a funding site visit with one Tribe, regularly attends the TAC, and continues outreach to the other Tribe and Urban Indian Health Program in YCCO's service area.</p>	
<p>Supporting Documentation:</p> <ul style="list-style-type: none"> • 2023-24 Community Engagement Tracker • Memo re Community Outreach Summary • Equity Advisory Workgroup collaborative Jamboard samples 	



FOCUS AREA 3: People with Disabilities and LGBTQIA2S+

People with disabilities

Year 4 Progress Update

Goal:

Provide health services that are culturally and linguistically appropriate and accessible, including plain language and alternative formats.

Year 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- A new strategy has been developed

The foundation of a data collection and analysis infrastructure and access plan in formed and working towards objectives.

Strategy D3.1:

Develop **comprehensive** 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 **that address individuals' unique needs**.

Baseline (if any):

Limited data collection structure.

Metric/Measure of success:

Supportive data systems in place to measure population trends and outcomes.

Progress to date:

Information Systems work to develop SQL tables and Tableau data visualization dashboards are two significant accomplishments of the past year. While progress has been slow, the data governance committee have explored and developed plans to consume all updated demographic data related to the disability status categories and are finetuning how this information will be available to join with other member-level data. Additionally with the implementation of a care management system – Helios, disability status is a cohort grouping indicating higher risk members flagged for more intensive outreach by the care management team.

Disability status when referenced in data is a significant indicator for health risk and the need for more intensive healthcare services. As part of the implementation of the new care coordination rules, the ACG risk stratification tool from Johns Hopkins was adopted. Integration of this tool is still in the adoption phase. Once adopted, this system will provide a powerful analytic tool to help stratify members based on risk, diagnoses, health and social circumstances, and critical vents in the members health care experience that will allow the plan to outreach and intervention to support members who have the greatest needs.

Supporting Documentation:

- Johns Hopkins ACG System_2023-09-12

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.

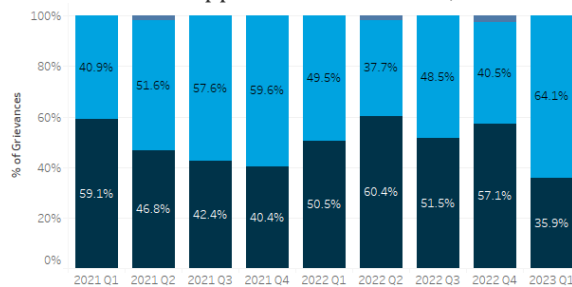
Progress to date:
 An access plan for members with disabilities was developed with six pillars of work that will be implemented over the next three years and beyond. The access plan is in alignment with the 1115 Waiver goals of creating access to coverage and services, centering equity in the coordination of services with a focus on members with vulnerability during significant life transitions, adapting investments and intentional direction of dollars into the community and on services that most directly address the barriers that members face.



Foundational progress has been made and will continue to evolve in the following domains.

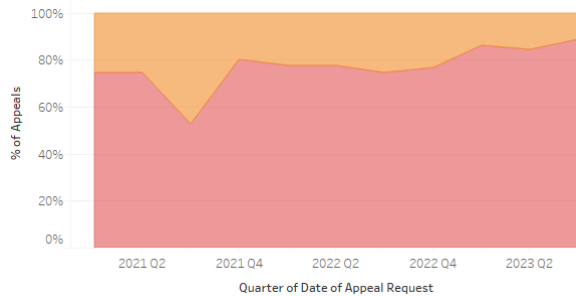
- **Member Experience:** Documented grievance and appeals received from members are one of the primary data sources to track member experience. Members with disabilities represent an average of 42.7% of grievances and 15.9% of all appeals in the last 12 months reported.

Grievances and Appeals filed over time, broken down by member's **disability status.**



shcn	2022				2023			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Null		1.9%		2.4%			4.3%	11.9%
N	49.5%	37.7%	48.5%	40.5%	64.1%	51.0%	47.8%	50.0%
Y	50.5%	60.4%	51.5%	57.1%	35.9%	49.0%	47.8%	38.1%





Shcn	2022				2023		
	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Member with a disability	22.5%	22.2%	25.5%	23.1%	13.7%	15.5%	11.5%
Member without a disability	77.5%	77.8%	74.5%	76.9%	86.3%	84.5%	88.5%



- **Utilization Baseline & Monitoring:** New disability data set in review. Once the review is complete and SQL tables are built, disability markers will be applied to service utilization data to understand and establish baselines.
- **Health Plan Covered Services:** Developing Health Related Social Needs benefit structure, communication plan and roll out specifically targeting this population as an eligible population for the climate benefits that launched in March 2024.
- **Accessibility Accommodations:** Exploring ways to strengthen the capture and report out of facility ADA accessibility features and accommodations available. The new Quest Analytics platform collects and tracks the percentage of providers who report ADA accommodation and the features available within their offices ([Quest Enriched Data and the Provider DSN Report, page 1.](#))
- **Adequate Network of Trained & Competent Providers:** As part of the provider selection process, YCCO evaluates potential providers for the network. As part of that evaluation and review, a provider's specialty and competency are evaluated specifically on the ability to treat certain health care needs related to disability status. This can be tracked over time on the Quest Analytics platform in a Provider Population Treated tab ([Quest Enriched Data and the Provider DSN Report, page 2.](#))
- **Support & Technical Assistance:** Technical assistance to providers has been limited in this first phase of the access plan as baselines are being established. As part of internal work to ensure accessibility and member supports, the YCCO Health Related Social Needs (HRSN), care management staff, and community health hub staff (traditional health workers) have been expanding their reach into the community to gauge and understand what the community need is related to social needs supports and navigation.

Supporting Documentation:

- Disability Access Plan
- Tableau - Quest Enriched Data and the Provider DSN Report
- Equity Committee Review 24-05-16 - Grievance System 2023 Annual Report 1gend
- Provider Newsletter May 2024

People who identify as transgender, nonbinary, or gender diverse

Year 4 Progress Update

Goal:

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 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- A new strategy has been developed

With Access Plan framework defined, strategies include implementation of key elements.

Strategy GI3.1:

Build *and implement* 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**.

Baseline (if any):

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

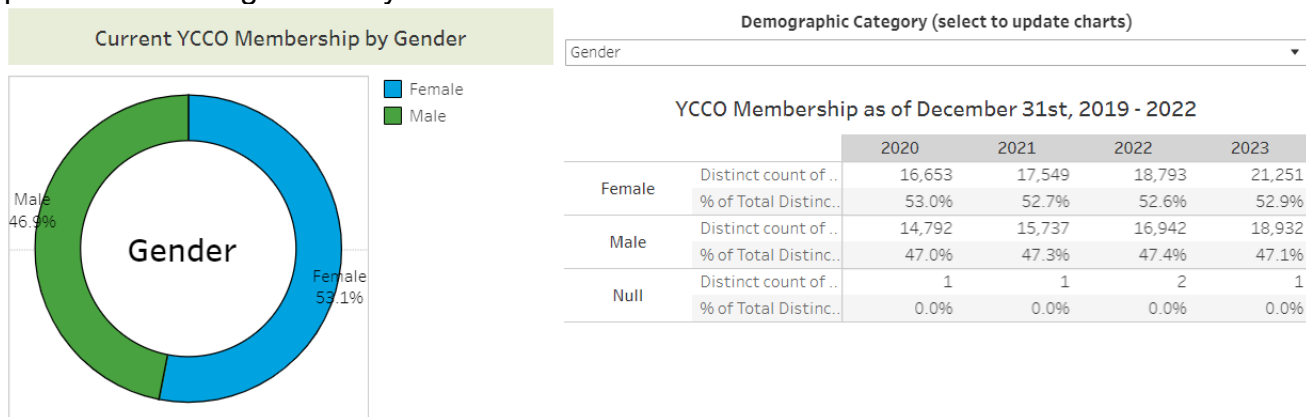
Metric/Measure of success:

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

Progress to date:

To address the unique needs of individuals with diverse gender identities, a specific access plan is required to ensure all elements of care provision are appropriate for this population, from experience at point of service to supporting a competent provider network. In 2023 the primary focus was developing baselines, establishing best practices for gathering member feedback, assessing current processes, and beginning to use new gender identity data. This will be used to ensure providers deliver services that affirm members' gender, including intake processes, pronoun use, and referral workflow development.

Utilization Baseline & Monitoring: Gender identity is being built into the current demographic dashboard in Tableau, allowing for visualization of gender identity within membership, including utilization, chronic disease rates, and ICC status. While the current version only includes binary gender, adding the multi-category gender identity and gender modality is in process and will go live July 2024.



Health Plan Covered Services: With the release of new WPATH8 standard of care guidelines, YCCO will ensure providers are aware of new standards related to gender affirming care, as well as the services covered under OHP for these services. The access plan includes evaluation of delivery of these types of service to ensure equitable access.



Accessibility Accommodations: Regular evaluation of accessibility will include surveying and auditing for gender-appropriate care and services, including evaluation of name changes and pronouns within documentation, and intake processes for collecting gender-specific information. Considerations will also be made for youth-provider healthcare confidentiality regulations.

Adequate Network of Trained & Competent Providers: As part of the provider selection process, YCCO evaluates potential providers for the network. As part of that evaluation and review, a provider’s specialty and competency are evaluated specifically on the ability to treat certain health care needs related to gender transition. This can be tracked over time on the Quest Analytics platform in a Provider Population Treated tab ([Quest Enriched Data and the Provider DSN Report, page 2.](#))

Support & Technical Assistance: YCCO will offer topic-specific training for gender affirming terminology, care delivery, and referrals to providers specializing in gender-affirmation. In the 2024 Accessibility Survey, 78% of responding clinics collect gender identity upon intake; 82% collect preferred pronouns. YCCO will provide technical assistance as requested for WPATH8 compliance, gender-affirming practices, and basic terminology.

Member Experience:

YCCO conducted a pilot survey in 2023 to establish baseline information and establish local best practices for surveying the LGBTQIA2S+ population specifically. This survey was reviewed by the local Wine Country Pride organization, which hosts a Pride Fair in McMinnville. Two key components of this survey included preferred language and available services. Fifty percent of respondents were not sure where to find gender-affirming physical health care, and 65% were not sure where to get binders, packers, or other gender affirming products. This information will inform the access plan to ensure consistent data collection beyond GI for members and into accurate member experience data.

Supporting Documentation:

- LGBTQIA2S pilot survey
- LGBTQSurveyData
- Gender Affirming Treatment Clinical Guideline_2024
- Tableau - Quest Enriched Data and the Provider DSN Report

People with sexual orientation diversity

Year 4 Progress Update

Goal:

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 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5



A new strategy has been developed

With Access Plan framework defined, strategies include implementation of key elements.

Strategy SO3.1:

Build *and implement* 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.

Progress to date:

Because sexual orientation data for YCCO members is not yet usable, access plan development is focused on infrastructure for utilizing SO member data and developing the overall competency of the delivery service system. Activities in the plan include reviewing new provider applications for provider identities and competencies, considerations for intake form audits and practices to respect sexual orientation, and provider education planning to ensure care appropriate to individuals who are not heterosexual.

Health Plan Covered Services: Through its Tableau member demographic dashboard, YCCO will monitor disparities or outlying utilization trends within the diverse SO population and monitor as appropriate, especially as those identities intersect with other identities, like rural or younger members.

Accessibility Accommodations: Regular evaluation of accessibility will include surveying and auditing for sexual-orientation care and services, including evaluation of intake processes for collecting relevant information specific to sexual orientation (e.g., avoiding pregnancy tests in specific situations). Considerations will also be made for youth-provider healthcare confidentiality regulations.

Adequate Network of Trained & Competent Providers: As part of the provider selection process, YCCO evaluates potential providers for the network. As part of that evaluation and review, a provider's specialty and competency are evaluated specifically on the ability to treat certain health care needs related to diverse identities. This can be tracked over time on the Quest Analytics platform in a Provider Population Treated tab ([Quest Enriched Data and the Provider DSN Report, page 2.](#))

Support & Technical Assistance: YCCO will offer topic-specific trainings for gender affirming terminology, care delivery, and referrals to providers specializing in gender-affirmation. In the 2024 Accessibility Survey, 78% of responding clinics collect gender identity upon intake; 82% collect preferred pronouns. YCCO will provide technical assistance as requested for WPATH8 compliance, gender-affirming practices, and basic terminology.

Member Experience:



In its LGBTQIA2S+ pilot survey, a small sample of respondents (n=20) reported high rates of uncertainty related to sexuality-affirming care and services. Forty-five percent were unsure where to find sexuality-affirming physical health care, and 40% did not know where to find LGBTQIA2S+-friendly education. Respondents ranged in their preferred labels for their community or population, from using mostly LGBT to LGBTQIA2S+ to queer. The Health Equity Committee reviewed this survey and discussed best practices for asking about identity, assumptions and bias in survey-creation (are questions written to assume queer people may use tobacco or are they appropriately neutral?), and methodologies for getting the best sample of the population (a mailing to all members versus going to a pride festival which includes a high amount of self-selection). All this data will inform the access plan to ensure consistent data collection beyond SO for members and into accurate member experience data.

Supporting Documentation:

- LGBTQIA2S+ Pilot Survey
- Equity Committee Meeting Documentation 2024
- Tableau - Quest Enriched Data and the Provider DSN Report

FOCUS AREA 4: Community Engagement

Year 4 Progress Update

Goal:

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 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- A new strategy has been developed

YCCO will continue to prioritize relationships with community partners and community members and will increase its ability to create a positive feedback loop from community to YCCO and back to the community. YCCO will continue to increase the number of formal and informal agreements with partners, and continue to increase the number of engagement events and activities and involvement.

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

Progress to date:



YCCO currently holds 26 LOAs, 21 DOCs, and anticipates another 36 LOAs from CCBF and other grant supports and relationships. While the primary formal agreements have been through funding, YCCO has also developed a site visit process to allow stronger, in-person relationship-building. This has included ongoing meetings with partners to ensure sufficient program monitoring, reporting, and evaluation, as well as increasing CBO visibility, gathering feedback about their experience working with YCCO, and a collaborative report development process.

Supporting Documentation:

- Community Engagement Satisfaction Survey

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.

Progress to date:

YCCO supported an AmeriCorps VISTA role in 2023-4 dedicated to developing best practices for local community engagement. This role spent time attending community events and meetings, connecting with partners and members, and developing recommendations and strategies for engaging in each community. Recommendations included ensuring opportunities to give feedback are in large print or conducted verbally, Spanish language outreach is available, and prioritize in-person outreach. This role's time as a VISTA culminated in two listening sessions in partnership with Northwest Senior and Disability services to better understand the experience of the older population and validate that current CHIP strategies meet the needs of this specific population effectively.

As a result of the findings, YCCO crafted an open staff position to be a full FTE dedicated to community engagement and outreach, and required this position to be fluent in Spanish. In June 2023, this role was hired and onboarded and will begin target outreach to achieve the listening session goals and build the engagement plan.

Supporting Documentation:

- Yamhill Community Care VAD April 2024 FINAL_Year 3
- YCCO Community Engagement Specialist (Bilingual Skills English-Spanish)



FOCUS AREA 5: Continued Development of Organizational Health Equity Infrastructure

Year 4 Progress Update

Goal:

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

Year 5 Strategy

- Strategy is the same as year 4
- Strategy has been modified for year 5
- A new strategy has been developed

Add exploration of the National Committee for Quality Assurance (NCQA) Health Equity Accreditation to strategy ORG 5.1.

Strategy ORG5.1:

Establish and maintain *the highest level of program quality through 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.

Progress to date:

YCCO is actively beginning the process of a gap analysis that assesses the eligibility and application, survey, and accreditation processes for the Health Equity accreditation offered by the National Committee for Quality Assurance. While achievement of this accreditation status will demonstrate the highest level of program quality, this process requires financial and staff resource allocation and will temporarily divert resources away from current work plans to focus on meeting accreditation standards. Leadership support for this re-prioritization is being gathered as well as feedback from key community partner organizations on the prioritization for pursuing this recognition status.

YCCO is engaging in a partnership with Cascade Employers Association, whose mission is to “Build better workplaces through compliance, culture, and connection.” Services will include a Spectra Diversity Self-Assessment, a four-part Inclusive Leadership Series, and DEI Essential Training Sessions for staff to include concepts DEI: Bridges to Understanding, Implicit Bias, Microaggressions in the Workplace, Say This, Not That: Improving DEI Communication, and additional technical support to the Spectra profile and leadership series as identified.

YCCO was honored to have an additional staff selected to participate in the 2024 DELTA Program Cohort. The Health Equity Administrator participated in the 2020-2021 cohort and found tremendous value in the coursework and application to YCCO programs and systems. An additional staff person developing equity leadership will further contribute to the tools and knowledge base to effectively advance health equity within the Yamhill community.



Supporting Documentation:

- NCQA-HealthEquityAccreditationProgram-Toolkit
- Project Plan - Language Access_DELTA 2024

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

Progress to date:

YCCO has continued to refine its granting and partnership process based on feedback from its community, past grantees, and governance committees. Because of the variety of funding streams YCCO has made available, a single grant application for all funds allows partners to apply for the type of funding they choose, while allowing YCCO to redirect applications to more appropriate funding streams. This also allows for blending and braiding funds (e.g., SHARE and CBI) or leveraging partner funds, which enables more valuable community projects to be funded. Promotion reaches and number of applicants for the main YCCO CBI grant cycle has increased from year to year, from 31 in 2023 to 47 in 2024. These investments are also guided by a clear funding strategy, based on specific plans. All require alignment with the Community Health Improvement Plan and are considered based on specific strategic plan criteria.

FUTURE: YCCO has hired a staff person to oversee CBO partner relationships, including grantmaking and support oversight, as well as monitoring and reporting on grant program outcomes. In 2025 this will extend more fully to program evaluation and review in partnership with grantees.

Supporting Documentation:

- Moving Upstream YCCO slides 9.13.2023



Section 2:

Annual Training & Education Report

FOCUS AREA 6: Organizational Training and Education	
Year 4 Progress Update	
<p>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.</p>	
Year 5 Strategy	
<p> <input checked="" type="checkbox"/> Strategy is the same as year 4 <input type="checkbox"/> Strategy has been modified for year 5 <input type="checkbox"/> A new strategy has been developed </p>	
<p>Strategy is ongoing to engage in and with high quality trainings that support a diverse and culturally sensitive workforce of providers and staff.</p>	
Strategy 6.1:	
<p>Meet contract requirements for offering training and education opportunities for staff, governing board and committees, leadership, and community partners.</p>	
<p>Baseline (if any): Current training plan established; requirements review completed; has not historically had 2.0 contract training requirements included</p>	<p>Metric/Measure of success: Training activities meet contract requirements; Minimum 5 in-person or virtual training events delivered to staff and committees in 2022.</p>
<p>Progress to date: In 2023 YCCO made considerable time and resource investments in staff training infrastructure, including hiring a Training and Development Program Manager hired in July 2023 and selecting a new Learning Management System. This will allow for more continuity and congruence between training, and the new Training Manager will work closely with the Health Equity Committee and staff members to create, implement, and monitor the training plan. See additional detail below in Training Plan narrative.</p>	
<p>Supporting Documentation:</p> <ul style="list-style-type: none"> Training and Development Program Manager PD 2024 YCCO Training Calendar Equity Committee Meeting Documentation 2024 	
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.**

<p>Baseline (if any): Provider and staff surveys delivered regularly; no regular report or analysis system</p>	<p>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</p>
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Progress to date:
YCCO continued in 2023 with its standard OEI-aligned template for surveying participants in staff and provider trainings and continues to survey recipients of YCCO-sponsored CEUs/CMEs. While this element may have been closed out, because of the new Training and Development position and new Learning Management System identification YCCO is reassessing an annual QI process for all staff training to automate participant feedback systems.
Currently, 100% of virtual staff training events included surveys; approximately 60% of other events had survey responses. YCCO will be exploring incentivizing surveys as well as creating considerations for accessing survey results from other organizations when partnering.

- Supporting Documentation:**
- Staff and governance committee assessment template
 - Sample NASW Evaluation Form

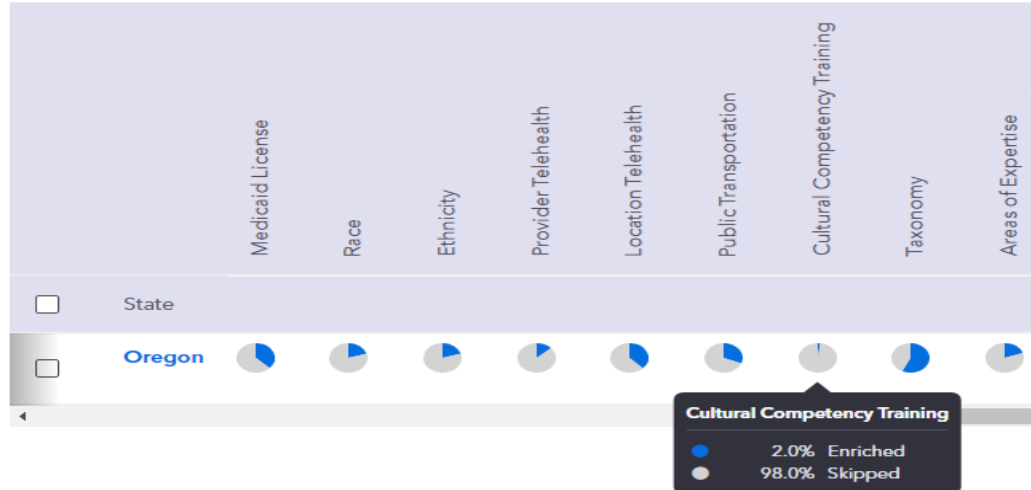
Strategy 6.3:
Complete system review to ensure network providers receive contract- and state-required training and certification related to cultural competency and language access measures as well as **topics they and community members have requested**, to best address **local needs**.

<p>Baseline (if any): Assessment of Board-required CE completed; initial survey data indicates gaps in language access training</p>	<p>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</p>
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Progress to date:
Provider training has been bolstered by different partnerships over the years, and 2023 included ending a contract with the Integrated Primary Care Institute (IPCI), which had been providing partnership for Continuing Medical Education for providers within YCCO’s service network, and starting a new contract with Cornerstone Whole Health Organization (C-WHO) to offer behavioral health training and supports. YCCO continues to explore options for ensuring provider training opportunities provide CME, which has been a key draw for bringing in staff. To align with the requirements of the Social Determinants of Health metric, YCCO offered training to all providers focused on delivering social needs screenings appropriately. Other areas of focus in 2023 included a cultural competency training that met Board requirements for all providers, an LGBTQIA2S+ training with a focus on gender affirming care and referral, and a series of Mental Health First Aid trainings for providers and the community at large.



Features with the Quest Analytic Network tool allow providers to self-attest to receiving cultural competency training and add to the ability to monitor the provider network. The percentage of providers who self-attest is low at 2.0% and staff are still exploring ways to leverage this data collection tool.



The primary way for collecting the cultural competency training among the network is an annual access survey fielded for providers. The 2024 survey indicates that 83% of respondents have received cultural competency training as part of their ongoing continuing education.

Supporting Documentation:

- 2024 Accessibility Survey
- Accessibility and SDoH Community Partner Survey
- Accessibility and SDoH Provider Survey
- 2024 YCCO Training Calendar
- YCCO July 2023 LGBTQIA2S+ Training Flyer
- Gender Affirming Treatment Clinical Guideline_2024
- Tableau - Quest Enriched Data and the Provider DSN Report

STAFF TRAINING

YCCO has hired a Training and Development Manager who will support implementation of a new Learning Management System and other systems and strategies to offer staff education. A full review of the staff training survey reporting held with the Equity Committee in June 2024 showed that with the increase in staff, many staff commented about uncertainty around YCCO equity accomplishments and initiatives, and expressed a desire for more trainings, especially on topics like microaggression, implicit bias awareness, population specific training for Hispanic/Latinx culture, poverty, trauma, and LGBTQIA2S+. YCCO has hired staff from outside of Oregon for the first time and will focus on ensuring all staff have a clear sense of the service



area population demographics, culture, strengths, and barriers to best serve the YCCO membership.

PROVIDER NETWORK TRAINING

With the implementation of the Quest Analytics system, YCCO staff have better insight into the demographics and competencies of the YCCO provider network, and with the hiring of a Provider Relations Program Manager, will be able to craft more focused technical assistance, outreach, education, and training for the provider network. Additionally, 2023 launched a process to transition contracting and management of the provider network internally, which will provide more access to the network. In 2023, YCCO offered or partnered with other agencies to offer a multitude of mental health trainings for providers and the community, and continued to offer targeted primary care supports for its Primary Care Collaborative and Metrics Subcommittees.

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

With expansion of the Human Resources and training team as well as a Provider Relations team, the focus of 2023 efforts were building best practices to set up a thoughtful and comprehensive training and education plan to meet all the various requirements and goals of the organization. YCCO continued to offer a mix of on-demand, live hybrid, and in-person training with a focus on specific equity topics, including LGBTQIA2S+ education, mental health, and disability. The plan for 2024 will be updated to include enhanced engagement with third party consultants to provide neutral and ongoing assessment and support of YCCO leadership and staff. YCCO will also be exploring modifications to its current Continuing Medical Education program to allow more flexibility in content and format.

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



Supporting Documents

2023 HEM Project Lessons Learned 4_5_24

2023 Site Visit - Fall Provider Engagement Meeting Sample

2023-24 Community Engagement Tracker

2024 Transformation and Quality Strategy (TQS) for QCAP

2024 YCCO Brand Awareness Calendar

2024 YCCO Training Calendar

Accessibility and SDoH Community Partner Survey

Accessibility and SDoH Provider Survey

CLAS as a framework update 2024

COM-001 Member Plain Language Policy Summary

COM-002 Member Plain Language Policy Summary

COM-003 Communication Materials

COM-004 YCCO Website

COM-005 Media Relations Policy

COM-006 Press Release SOP

COM-007 Crisis Communications Policy

Community Engagement Satisfaction Survey

Data Visualization Best Practices Guide

Disability Access Plan

Equity Advisory Workgroup collaborative Jamboard samples

Equity Committee Meeting Documentation 2024

Equity Committee Review 24-05-16 - Grievance System 2023 Annual Report 1

Gender Affirming Treatment Clinical Guideline_2024

HCI Reimbursement Program Brochure - 2024-05-31

HE-003 SDoH Screening, Referral, & Authorization



HEM - Language Access Informational Presentation - Site Visits - 2024 Spring
HEM Workflow
HPO- Provider Language Access Survey
Johns Hopkins ACG System_2023-09-12
Language Access Plan_2024
Language Access Work Diagram - 2024-06
Language Access Workgroup Meeting Documentation 2023-2024
LGBTQIA2S pilot survey
LGBTQIA2S+ Access Plan
LGBTQSurveyData
Memo re Community Outreach summary
Moving Upstream YCCO Slides 9.13.2023
Project Plan - Language Access HEM MY2023
Project Plan - Language Access_DELTA 2024
Provider Contracting Request Form V4 - 11.01.2023
Provider Newsletter May 2024
Sample NASW Evaluation Form
Social Media 101_CAC Mtg
Social Media 101_CAC Mtg-es_final
SVC-004 Network Capacity Service Adequacy and Availability
SVC-013 Health Related Social Needs
Tableau - Equity Data Dashboards 2024
Tableau - Language Access Dashboard 2024
Tableau - Quest Enriched Data and the Provider DSN Report
TQS-2024-Project 174_Member Language Accessibility and System Barriers
Voluntary Self-Identification of Disability OFCCP 503Self-IDForm
Yamhill Community Care VAD April 2024 FINAL_Year 3
YCCO Bilingual Skills Pay Policy_May 2024 Update



YCCO Board Brand Awareness Update June 17, 2024
YCCO Brand Awareness Campaign Update_2023 Oct 10
YCCO Community Engagement Specialist (Bilingual Skills English - Spanish) - 2-2024 Final Approved
YCCO Data Equity Workgroup Meeting Documentation 2024
YCCO Data Equity Workgroup Purpose Statement
YCCO Health Equity Specialist _Approved Final 5-3-2023
YCCO July 2023 LGBTQIA2S+ Training Flyer
YCCO Language Access Workgroup Purpose Statement – FINAL
YCCO Participating Provider Agreement_Professional PH and BH
YCCO Training & Development Program Manager 05_15_2023-Final
YCCO Website - OHA Health Care Interpreter Registry Link

