

Semiannual Report and Evaluation Workgroup: Health Equity (HE)

Workgroup Purpose: Identify and reduce areas of health disparities and advance health equity by:

- Supporting the culturally diverse needs of members (cultural competence training, provider composition reflects member diversity, Certified Traditional Health Workers (TWHs) and THWs composition reflect member diversity)
- Support quality improvement focused on eliminating racial, ethnic, linguistic, and other disparities in access, quality of care, experience of care, and outcomes
- Support IHN-CCO's Community Health Needs Assessment (CHA) and Community Health Improvement Plan (CHP)

Reporting Period	Report Submission Date
October 1, 2017 – March 31, 2018	April 6, 2018
April 1, 2018 – September 30, 2018	October 5, 2018
October 1, 2018 – March 31, 2019	April 5, 2019
April 1, 2019 – September 30, 2019	October 4, 2019

A. Semiannual progress:

Short-Term Goals	Results to Date
Approval of Strategic Plan	COMPLETED
Complete Strategic Plan Actions as planned	ONGOING
Long-Term Goals	Results to Date
DATA: Increase the availability and knowledge of quantitative and qualitative data to inform, prioritize, and monitor strategies to meet the needs of culturally diverse members and to reduce health disparities	Investigating how to access data on health inequities but need to find out which organizations collect data, what data they collect, and how much of it they can share <ul style="list-style-type: none"> • Several social agencies collect this type of data but are using different methods • Healthcare data can be more challenging due to HIPAA (Health Insurance Portability and Accountability Act) considerations • Plan to use the local CHA) and Regional Health Assessments as sources of data and information specific to the region
TRAINING: Support and champion cultural competence and health equity trainings for the IHN-CCO Health Equity Workgroup, IHN-CCO staff, IHN-CCO providers, and other community stakeholders	The workgroup, in partnership with the Linn Benton Health Equity Alliance, was granted Delivery System Transformation (DST) funding to offer health equity trainings across the region The first step to this process will be Health Equity Summits (dynamic and interactive) followed by county-specific trainings and technical assistance
DIVERSE WORKFORCE: Support and encourage IHN-CCO provider and staff composition that reflects member diversity	Investigating how to access data collected by healthcare providers but need to find out which organizations collect data, what data they collect, and how much of it they can share

THWs: Increase, retain, and sustain support for THW to address health disparities across IHN-CCO services and in Linn, Benton, and Lincoln Counties	Continue to host joint meetings with the THW workgroup and plan to include THWs in the trainings that will be offered
COMMUNICATION: Ensure regular communication between the IHN-CCO Health Equity Workgroup, IHN-CCO staff, IHN-CCO DST committee, IHN-CCO Community Advisory Council (CAC), other stakeholders, and IHN-CCO workgroups about health disparities and health equity activities in the community	Developing a resource list that can be shared with IHN-CCO workgroups, staff, and other stakeholders about health equity

B. What has been successful?

- Securing funds for the Health Equity Training Pilot. Have also been making progress in developing a work plan for additional funds provided by IHN-CCO; the hope is to use those funds to develop videos about health equity, why it matters, and what has been done to address it in the region (by both IHN-CCO and its partners).

C. What are the challenges and how are you addressing them?

- Have struggled with moving toward some of the goals, as some of them are very broad. Have addressed this by breaking them down into smaller, achievable steps.

D. Have there been any significant changes to your Workgroup Goals? If so, why?

- Not as of now.

Semi-Annual Report and Evaluation Workgroup: Health Equity (HE)

Workgroup Purpose: Identify areas of health disparities and develop a strategic plan to address these disparities. Support work that addresses Transformation Elements 7 and 8: (7) Meeting the culturally diverse needs of Members and (8) Eliminating racial, ethnic and linguistic disparities.

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A. Semi-Annual progress:

Goals	Results to Date
Identify disparities based on diagnosis, IHN-CCO metrics, health outcomes, and other measures decided upon.	The Data Committee focused on the proposed strategic plan and reviewed proposed goals, actions, and measurements. In the latest pilot proposal round all applicants were asked to include equity considerations in their application and in the evaluation of their projects.
Identify data that will inform the Quality Improvement Plan (QIP) and Performance Improvement Plan (PIP).	This work will be started when the strategic plan is approved and changes will be made to the goals in line with the approved plan.
Identify and engage partners to participate in projects to address identified disparities.	The group continues to engage current and new partners. Workgroups for the five strategic goals will recruit partners as the specific work gets underway. The workgroup worked with the Linn Benton Health Equity Alliance to develop a comprehensive proposal for equity training and technical assistance.
Identify root causes for disparities and brainstorm strategies and initiatives to address those root causes.	This work is ongoing and will continue as the strategic plan is implemented. The workgroup provided input for the IHN-CCO Transformation Team to use in the latest funding round.
Implement a strategic plan to address disparities.	The strategic plan was approved by the Delivery System Transformation (DST) at the meeting on September 21, 2017 and is now being reviewed by the Regional Planning Council (RPC). Five workgroups are starting their work to implement the plan. A key collaboration for the training goal is starting with the Linn Benton Health Equity Alliance and their approved pilot project to bring equity training and awareness to all three counties.

B. What has been successful?

- The workgroup name was changed to Health Equity (from Health Disparities).
- The Strategic Plan was refined and updated to reflect the feedback from the DST. It was approved on September 21, 2017 and is now going to the RPC.
- The IHN-CCO Community Advisory Council (CAC) endorsed the proposed plan.
- The shared proposal with the Linn Benton Health Equity Alliance is an exciting opportunity to move the training goals forward.

C. What are the challenges and how are you addressing them?

- It has been a long process to get the plan approved: it was both challenging and invigorating to see the support from the DST community for the work that is included in the plan. The conversations are making a real difference in moving forward with the equity goals.

D. Have there been any significant changes to your Workgroup Goals? If so, why?

- Not yet. The goals will be replaced with the goals in the strategic plan and they will be updated for the next report after RPC approval is gained. More refinement will also take place as the subgroups start their work.