

EQUITY, DIVERSITY, & INCLUSION

Chase Brexton Health Care EDI STRATEGIC PLAN

MAY 2023



Renaye James Healthcare

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LETTER FROM THE EXECUTIVE DIRECTOR

I am proud to assume the first Executive Director position of the Institute for Equity, Diversity, & Inclusion at Chase Brexton Health Care at a time when social awareness to support equity, diversity, and inclusion (EDI) in healthcare is accelerating.

The Institute for Equity, Diversity, & Inclusion ensures that EDI principles are deeply embedded in our organization's policies, conduct, behaviors, and in the overall experience of each patient and employee.

This enhances efforts to address patient barriers and access to care, promoting a culture of inclusivity and continued learning.

The early development of the Institute for Equity, Diversity, & Inclusion was an employee-led initiative to gain a deeper understanding of the increasingly diverse environments both within and outside the organization. When I came to lead the Institute, I found valuable, thoughtful work had been accomplished. It is now time to unite previous work and our current expertise into strategy, acknowledge opportunities for improvement, and advocate for positive shifts in perspective and behavior.



AYA SHUMAN

Executive Director, The Institute for Equity, Diversity, & Inclusion

I am leading the Institute's efforts to address and challenge the behaviors, beliefs, and policies that sustain systemic inequities, structural racism, and other discriminatory practices. This aligns with Chase Brexton Health Care's long-standing efforts as a health equity leader, providing compassionate and integrated, high quality health care for those at increased risk of marginalization.

The community that Chase Brexton Health Care serves and our committed staff are at the forefront of a movement — and these pages will ensure our steps are swift and deliberate. Our priorities are set. Our mission is clear. Please read the plan. Raise your voice. Your words will be heard by empathetic ears, respectful minds, and a firm resolve to strengthen our community's health together.

Aya Shuman, MS

Executive Director, The Institute for Equity, Diversity, & Inclusion

Pronouns: She/Her/Hers

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LETTER FROM THE CHIEF EXECUTIVE OFFICER

When I joined Chase Brexton Health Care in 2017, I was attracted to the organization's mission to provide high quality health care, honor diversity, and address health inequities among LGBTQ+, African American, Hispanic, and underserved patients.

Our team has continued to build on this legacy, making tangible progress within Baltimore and the surrounding communities where Chase Brexton Health Care is located.

The creation of our Institute for Equity, Diversity, & Inclusion in 2022 was a key step in broadening our EDI efforts. Our next steps included bringing on Aya Shuman as Executive Director to the Institute.

We understand that there is a great need to consistently monitor and share our EDI progress. Such progress is strengthened by the transparency of Chase Brexton Health Care's actions and continued dialogue with the communities we serve and the teams we employ.



PATRICK MUTCH
President & Chief Executive Officer

With these values in mind, we created this Equity, Diversity, & Inclusion Strategic Plan. This allows us to highlight our EDI activities, as well as set the stage to track our progress and gauge community impact. We aim to address the health-related social needs and risks that impact our patients, employees, and communities in a thoughtful, intentional manner.

I encourage all community members and Chase Brexton Health Care teams to review our plan and join our efforts toward an intentionally healthier tomorrow.

Patrick Mutch

President and Chief Executive Officer

Patin & F. Mutch

Chase Brexton Health Care

Pronouns: He/Him/His

EXECUTIVE SUMMARY

The Institute for Equity, Diversity, & Inclusion at Chase Brexton Health Care was established in 2022 to provide coordination, accountability, and leadership for Chase Brexton Health Care's ongoing equity, diversity, and inclusion (EDI) efforts.

The development of a strategic plan and strategic goals are a critical step in the evolution of The Institute for Equity, Diversity, & Inclusion and provides a method to quantify its work and success. Key stakeholders, prior EDI work, and nationally accepted health equity guidelines contributed to the strategic plan framework. The new EDI strategic goals align with Chase Brexton Health Care's established strategic pillars:

- Employee Engagement
- Patient Experience
- Growth and Community Engagement
- Quality

In addition, a Financial goal has also been included. This emphasizes the comprehensive approach recommended to build a culture of EDI and model the principles that support movement toward economic equity in Chase Brexton Health Care's community.

Additionally, this plan reveals a special focus on employee engagement: an essential building block to establish and sustain a culture that is inclusive and equitable — building trust among staff in order to serve the community with honor and respect.

MISSION

To provide compassionate and integrated high quality health care that honors diversity, addresses health inequities, and advances wellness in the communities we serve.

VISION

To be a health equity leader in our communities, recognized for excellence in patient care and a culture of teamwork that supports individuals to achieve their full potential.

BACKGROUND

EDI work began with the opening of Chase Brexton Health Care in 1978.

Chase Brexton Health Care began as a volunteer-based gay health clinic — a first in Maryland. As the years progressed, the organization expanded to meet the needs of underserved populations and surrounding communities.

In the 2021 Community Health Needs Assessment, Chase Brexton Health Care asked patients and staff about EDI.

Seventy-six percent of respondents agreed that Chase Brexton Health Care has a strong commitment to EDI. While recognizing the commitment within the organization, Chase Brexton Health Care continues to shape the workforce, better serve patients, and meet the needs of the community through bold and intentional EDI efforts.

From 2021 to 2022, Chase Brexton Health Care worked with partners to gain a full understanding of the organization, patients, and community. Data was generated about patients and staff demographics by sex, race, ethnicity, sexual orientation, and gender identity. Using a focused approach, a comprehensive survey was completed with Hispanic patients to assess the current state of engagement and resources in place to serve the Hispanic community. The data indicated that the Hispanic population encompasses 21% of the overall patient base at Chase Brexton Health Care.

Additionally, the assessment highlighted the need for direct focus on language, increased need for health access, improved acculturation, and the specific need to address barriers to care (language, transportation, cost).

"What kind of culture are we building, nurturing, protecting, and recruiting for? It's to serve our diverse patients and address health inequities in the communities we serve, and to do that with a diverse organization that fosters a strong sense of belonging. The time for equity, diversity, and inclusion is now."

Sam McClure

Executive Director
The Center for LGBTQ
Health Equity –
Chase Brexton Health Care



Chase Brexton Health Care also examined its internal operational focus on EDI. An internal assessment was completed to include an online survey, key informant interviews, and focus groups. More than 200 staff members participated in the survey (67% response rate). There were 19 key informant interviews designed to gather diverse perspectives from staff and board members. Five focus groups were held.

Key insights were shared:

- Chase Brexton Health Care staff are poised for change and transformation with an opportunity to further share organizational awareness about EDI efforts; and
- Staff, board, patients, and partners recognize that developing community partnerships can help advance EDI and achieve better alignment with the organization's mission and values.

In January 2022, the Institute for Equity, Diversity, & Inclusion was launched at Chase Brexton Health Care.

The Institute for Equity, Diversity, & Inclusion chose to emphasize equity by placing it first in its name. This honors Chase Brexton Health Care's long history as a health equity leader. It also ensures historically marginalized communities receive access to high quality health care. The Institute for Equity, Diversity, & Inclusion has championed health equity practices by identifying and addressing barriers to care and ensuring fair and just access to health care services. Diversity is likewise imperative to the Institute. Diversity celebrates the authentic individual. Inclusion promotes, accepts, and encourages active involvement from the community served.

In this document, the term EDI and DEI (diversity, equity, and inclusion) are used interchangeably based on the preference of each national organization that provided guidance for this strategic plan.

"Chase Brexton has strong origins. It is a welcoming environment, has strong staff commitments, and they remember the goal is to serve their community. It is impressive how they are a highly committed organization."

Veronica Cool CEO Cool Associates, LLC



CURRENT STATUS

Internal Efforts

Several interactive EDI training sessions for Chase Brexton Health Care team members have been held to date. Training topics already delivered include Emotional Intelligence, Microaggressions, Mastering Productive Conflict on Differences, Introduction to the Institute for Equity, Diversity, & Inclusion, and Foundations of Equity, Diversity, & Inclusion. Upcoming trainings will include Implicit Bias, EDI 101, Burnout Breakthrough, and Understanding Your Patient's Context. Staff are encouraged to actively participate and become engaged through EDI book club discussions, Facebook Live videos, awareness day activities, newsletters, and community events. All-Staff and Bi-Weekly EDI Digest emails have showcased information about Martin Luther King Jr. Day, Black History Month, Women's History Month, Juneteenth, Hispanic Heritage Month, Native American Heritage Month/Chase Brexton's Land Acknowledgment, Common Idioms and Expressions that are Unknowingly Offensive, Police Brutality, Roe V. Wade, Inclusive Holiday Guidance, New Year Celebrations Around the World, and much more.

Chase Brexton Health Care provides exceptional health care in a welcoming and affirming space for all. Strategic efforts to further develop a diverse workforce are well underway. The landing page of the website and recruitment statements were modified with purposeful recruitment language to seek diverse candidates. The Chase Brexton Health Care website states, "Everyone is welcomed and accepted, regardless of race, nation of origin, gender, gender identity, sexual orientation, marital status, religion, socio-economic status, veteran status, or disability." In the community, the Executive Director of the Institute is a member of the Leaders in Equity and

VALUES

We are committed to being trustworthy and reliable and to authentically living our values.

Respect: We are committed to respect each other and to value unique qualities, diverse backgrounds, and perspectives.

Compassion: We are committed to helping our patients, their families, and each other, with kindness and understanding.

Patient-Focused Care: We are committed to partnering with our patients and communities to improve their health and well-being.

Innovation: We are committed to adopting technology to remove barriers to care and continuously improve the patient and staff experience.



Diversity (LEAD) Collaborative. LEAD consists of 34 like-minded organizations committed to a yearlong EDI initiative. One initiative underway is the Social Determinants of Health Project where food insecure patients are connected with a Chase Brexton Health Care Food Pantry.

The Institute for Equity, Diversity, & Inclusion also leads Chase Brexton Health Care's efforts in demonstrating adherence to The Joint Commission's (TJC's) new health care equity standards.

Community Needs

Chase Brexton Health Care conducted a community health needs assessment (CHNA) in 2021 in partnership with Renaye James Healthcare Advisors. Patients (n = 732) who responded to the CHNA questionnaire indicated poverty, access to health care appointments, and access to insurance as the three most important social/environmental problems that impact their community. Additionally, respondents listed mental health, diabetes, and alcohol/drug addiction as the three most important health issues affecting their community.

Chase Brexton Health Care has locations in five Maryland jurisdictions: Baltimore City, Anne Arundel County, Baltimore County, Howard County, and Talbot County. Each jurisdiction has its own unique patient and community needs. The patient responses from the CHNA largely identified Baltimore City as their Chase Brexton medical home; as a result, the data collected from the 2021 CHNA relies heavily on the Baltimore City service area. Knowing this, it will be beneficial for future CHNAs to conduct separate needs assessments utilizing an EDI framework to further explore the unique needs of patients and the community by jurisdiction/service area.

"Because Chase Brexton is a community health center, it's important to ask questions and respect the answers that we get from the communities that we serve. We not only serve diverse communities but sit in diverse places."

Lisa PearsonLCSW-C
Senior Clinical Director
of Behavioral Health



EDI is a Priority

In recent years, the need for the advancement of EDI has become evident among various national- and state-level health care organizations. An article, titled "Diversity, Equity and Inclusion in Medicine: Why It Matters and How do We Achieve It?" published in the July/August 2021 issue of the *Journal of Surgical Education* showed that in addition to creating a safe space for people to work and remain healthy, improving diversity and inclusion within health care can positively impact health disparities, improve patients outcomes, and enhance medical education.

Chase Brexton Health Care is positioned to excel in equity, diversity, and inclusion within the organization and the community through continued focus on identifying opportunities to work with all partners, attract resources, and implement innovative ideas. Efforts that address patient and community needs will propel Chase Brexton Health Care to the next level. Recommendations in this strategic plan align with the CommonHealth Action EDI Roadmap, Action Plan, and Policy Review Report of October 2021. To address patient and community needs, these efforts include:

- Searching for grants and foundations that provide EDI general operating support, professional development, and capital resources.
- Building support and sustaining the implementation of its EDI initiatives.
- Partnering with community grassroots organizations to assist Chase Brexton Health Care with advocating for more equitable access to health care services for all.
- Redefining the traditional health care system to incorporate a holistic wellness approach to patient care and workforce practices.
- Leveraging patients' experiences and knowledge to create more innovative and effective services that support health and well-being for all.



Maryland EDI Efforts

State government and health care centers alike recognize that EDI health initiatives add value to health care providers and their patients. To demonstrate the commitment to advance health equity, in 2021, the Maryland State General Assembly passed the Maryland Health Resource Act, which granted more than \$13 million in funding through the Pathways to Health Equity program. This investment has allowed several county health departments, healthcare corporations, and educational institutions to address health disparities such as hypertension, heart disease, substance abuse, diabetes, mental health, and sickle cell disease in underserved communities throughout various counties and regions. In 2023, the Maryland Community Health Resources Commission (CHRC) plans to expand its funding for additional programming to address the ongoing impact of the opioid crisis, maternal and child health, and oral health care.

Continued ongoing support from the Maryland Department of Health and the CHRC can make a positive impact on community health and will encourage health care teams to work together to bridge gaps in health equity.

National EDI Efforts

The National Committee for Quality Assurance (NCQA) has made a commitment to diversity both internally and externally by fostering inclusive leadership teams, engaging in diverse community partnerships, and prioritizing equity in all NCQA programming. DEI efforts commenced in 2020 when its DEI council was established, and today the organization has expanded its council to auditors, consultants, executives, and various specialists. Regular assessments evaluate gaps and discrepancies in employee experiences, and feedback is used to set achievable organizational and departmental goals. To further support their employees, the implementation of LGBTQ+ and Black/African American employee resource groups were established for employees and allies to celebrate intersectionality, foster network building, and advocate for important social issues. While practicing these elements internally, health care



organizations seeking NCQA accreditation must also demonstrate these standards.

Since its founding in 1990, NCQA continues to execute its mission of improving health care quality through the administration of evidence-based standards, measures, programs, and accreditation. NCQA recognition and accreditation programs were designed to provide a framework for standardizing quality care and improving care delivery strategies for patients and health care leaders across the nation. Recently, NCQA developed Health Equity Accreditation that provides health care organizations a framework to develop and implement health equity practices.

This strategic plan uses tenets of the NCQA Health Equity and Health Equity Plus as a basis for the stakeholder interview questions, data analysis, and strategic goal development. Using the 2023 NCQA Health Equity and Health Equity Plus Standards and Guidelines as strategic plan framework, positions the Institute for Equity, Diversity, & Inclusion for a national Health Equity recognition, which further demonstrates Chase Brexton Health Care's commitment to equitable care. A questionnaire to review organizational compliance with national EDI standards is found in Appendix A.

Table 1: 2023 NCQA Health Equity and Health Equity Plus Standards

HE1:	Organizational Readiness
HE2:	Race/Ethnicity, Language, Gender Identity and Sexual Orientation Data
HE3:	Access and Availability of Language Services
HE4:	Practitioner Network Cultural Responsiveness
HE5:	Culturally and Linguistically Appropriate Services Programs
HE6:	Reducing Health Care Disparities
HE7:	Delegation of Health Equity Activities
HEPLUS1:	Collection, Acquisition and Analysis of Community and Individual Data
HEPLUS2:	Cross-Sector Partnerships and Engagement
HEPLUS3:	Data Management and Interoperability
HEPLUS4:	Program to Mitigate Social Risks and Address Social Needs
HEPLUS5:	Referrals, Outcomes, and Impact

On January 1, 2023, The Joint Commission (TJC) began enforcing a new leadership standard to address health disparities within their hospital, ambulatory, and behavioral healthcare accreditation programs. TJC has now elevated this concept to a National Patient Safety Goal (NPSG) to improve health care equity. Starting July 1, 2023, this new NPSG will help create a consistent national baseline related to the equitable delivery of health care and will include changes to leadership requirements when collecting patient race and ethnicity data information, and rights and responsibilities requirements prohibiting discrimination. These revisions will improve overall patient safety regarding race, language, health literacy, religion, and gender identity.

Federal Government Efforts

At the federal level, significant strides have been made to eliminate health care disparities by supporting underserved communities and advancing racial equity. To foster these efforts, President Joe Biden signed an executive order in February 2023, which reaffirmed the administration's commitment to emphasize health care equity priorities and achieve safe and high-quality health care for all groups. This approach builds upon the initial Equity Action Plans developed under Executive Order 13985 and allocates significant investments to support underserved communities and strengthen racial equity.

In addition to employee resource groups, the implementation of new policies, and diversity workshop training, federal government organizations — the Health Resources and Services Administration (HRSA) and Centers for Medicare and Medicaid Services (CMS) — have developed strategic plans targeted at promoting diversity within their organizations and in the communities that they serve. Appendix B provides a list of national agencies that provide EDI requirements and guidance.

With increasing diversity within the Chase Brexton Health Care patient population, a May 2022 article, titled "A Culturally Competent Patient Care: A Review of the CLAS Standards," in the International Archives of Public Health and Community Medicine showed that the provision of culturally competent care can significantly and positively impact patient health outcomes. The national Culturally and Linguistic Approach Services (CLAS) standards developed by the U.S. Department of Health and Human Services, Office of Minority Health can serve as a guide and tool to achieve health care equity by improving the quality of care and enhancing the elimination of health care disparities. Implementing CLAS standards can enable Chase Brexton Health Care to better understand and incorporate the cultural values and beliefs of the patients in their care and augment the communication flow between the patients and the care teams. This will ultimately lead to the delivery of high quality care that is respectful and mindful of the patients' primary languages.



The National CLAS Standards encompass 15 standards that can be categorized as follows:

- Principal Standard (Standard 1): Provide effective, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices
- Governance, Leadership, and Workforce (Standards 2-4)
- Communication and Language Assistance (Standards 5-8)
- Engagement, Continuous Improvement, and Accountability Standards (Standards 9-15): A practical guide to assist organizations in successfully implementing CLAS standards

A checklist to identify an organization's EDI maturity is provided in Appendix C.



NSTITUTE FOR EQUITY, DIVERSITY, & INCLUSION STRATEGIC PLAN METHODOLOGY

Stakeholder interviews were conducted with themes and an emphasis on patient, community, and employee engagement for the Institute for Equity, Diversity, & Inclusion. The six stakeholders were Chase Brexton Health Care staff and one external agency, Cool and Associates, LLC.

In addition, to understand Chase Brexton Health Care's prior EDI work, the following documents were reviewed to provide additional context to stakeholder interviews and the organizational analysis.

- HR-EDI-All Center (Slide Deck) This resource provides data that demonstrates the race, ethnicity, sexual orientation, and gender identity (SOGI) of staff and patients. The data is stratified by center.
- Society for Human Resources Management Employee
 Engagement Survey This resource highlights employee
 engagement and satisfaction, relationship management, survey response rates, and respondent demographics.
- CommonHealth Action: EDI Roadmap, Action Plan, and Policy Review Report — This resource provides an EDI roadmap, action plan, policy review and engagement strategies; it also provides concrete implementation recommendations and a survey of staff, board, and community partners.
- Community Health Needs Assessment (2021) This
 resource provided details of the prevalence of chronic disease
 and behavioral health conditions in the jurisdictions Chase
 Brexton Health Care serves. Additionally, staff, patients, and
 partners provided their perspective of the critical health needs
 in their communities.
- Hispanic Strategic Assessment and Roadmap This resource
 is specific to the Hispanic/Latino community. It focuses on
 language, health access, acculturation, barriers, and roadmap
 implementation recommendations.

Additionally, new health equity guidelines from TJC, NCQA, and CLAS were reviewed. Primary qualitative or quantitative patient data has not been collected for the Institute for Equity, Diversity, & Inclusion strategic plan. The patient voice was obtained from the recent Community Health Needs Assessment (2021).



SWOT SUMMARY

A strengths, weaknesses, opportunities, and threats (SWOT) analysis was completed to examine the work of Chase Brexton Health Care and the Institute for Equity, Diversity, & Inclusion. The purpose of the SWOT analysis was to further enhance the organizational structure and expand upon its many initiatives. The analysis was compiled from a series of stakeholder interviews and a review of existing EDI materials.

The SWOT analysis highlighted the numerous assets and practices present within the organization, including Chase Brexton Health Care's excellent reputation across Maryland. It is a trusted, well-respected healthcare organization and known for its accessible clinical services and gender-affirming care. The Board of Directors and senior leadership have financially invested in EDI and health equity efforts. They have taken concrete action to develop a diverse and inclusive workforce. The staff bring a high level of commitment to the mission and provide excellent care for patients. Chase Brexton Health Care relies upon its well-developed partners in the community to offer comprehensive treatment and support for their patients.

As the Institute for Equity, Diversity, & Inclusion continues to develop, there are several areas of growth and opportunity. Incorporating technology into the Institute for Equity, Diversity, & Inclusion is an opportunity. Technology advancements may include obtaining the infrastructure to track improvements in health outcomes in relationship to the Social Determinants of Health that create access or barriers to health. Staff are highly engaged and keenly interested in taking part in EDI efforts. Chase Brexton Health Care can continue to nurture the staff's sense of belonging by supporting their professional growth and encouraging active participation in organizational-wide EDI efforts. Finally, Chase Brexton Health Care has an opportunity to share their knowledge of EDI practices with community partners through training engagements and educational opportunities.





	GOAL 1	GOAL 2	GOAL 3	GOAL 4	
Bre Ser Ins: & II rec enq	collaboration with Chase exton Health Care's nior Leadership Team, the titute for Equity, Diversity, nclusion will establish ruitment and gagement strategies to ract and retain talent m diverse backgrounds.	The Institute for Equity, Diversity, & Inclusion will collaborate with Chase Brexton Health Care's Senior Leadership Team to implement an inclusive approach for talent development.	The Institute for Equity, Diversity, & Inclusion will improve the employee experience by providing and monitoring EDI- related activities.	The Institute for Equity, Diversity, & Inclusion will promote a culture of equity, diversity, and inclusion at Chase Brexton Health Care.	
	OBJECTIVES	OBJECTIVES	OBJECTIVES	OBJECTIVES	
 2. 3. 	Increase the number of new hires who are from underrepresented groups into clinical, managerial, and leadership roles. Implement a hiring strategy to intentionally include qualified talent from diverse backgrounds, identities, or experiences. Ensure that interview panels are diverse and include representation	 Identify mentorship and sponsorship programs for diverse employees to accelerate career development. Implement culturally and linguistically appropriate protocols and processes to enhance reporting and resolution of EDI-related concerns. 	 Identify EDI cross-departmental champions for enhanced transparency and socialization of EDI efforts across Chase Brexton Health Care. Expand organization-wide EDI training, in alignment with Chase Brexton Health Care's learning management infrastructure. Develop a post-training evaluation process and 	 Infuse EDI priorities in the organization's policies and protocols including antidiscrimination policies. Incorporate EDI priorities into employee culture of safety and engagement surveys to capture feedback and provide opportunities for inclusion. Recognize and implement EDI observances and 	
	from multiple functional areas within the organization.	le functional encourage staff to the provide feedback on	cultural celebrations throughout the year.		
4.	EDI recruitment metrics.		4. Empower established Chase Brexton Health Care work groups to		
5.	Expand relationships with recruitment organizations focused on EDI development and pipelining programs.		provide guidance on employee experiences to inform future EDI training priorities, topics, and activities.		



GOAL 1 GOAL 2

The Institute for Equity, Diversity, & Inclusion will strengthen its current plan to address social determinants of health and health-related social needs.

The Institute for Equity, Diversity, & Inclusion will strengthen its current EDI practices and principles by ensuring the following identities and communities are incorporated into Chase Brexton Health Care's existing priority populations.

- Disability
- Sex/gender identity and expression
- Sexual orientation
- Racial and ethnic groups

OBJECTIVES OBJECTIVES

- Continue to identify additional social risks that are relevant to Chase Brexton Health Care's patients and community.
- Share the findings of patient and community social risk and health-related social needs data with all stakeholders including staff, patients, and the greater Chase Brexton Health Care community.
- 1. Review patient care policies, procedures, signage, and other communication and provide guidance on the use of inclusive/nonbinary and anti-discriminatory language.
- **2.** Provide guidance on policies, procedures, and workflows to consider patients, staff, and visitors with mental or physical disabilities.

Note: Goals align with NCQA HE, The Joint Commission, and CLAS Standards.



GOAL 1 GOAL 2

The Institute for Equity, Diversity, & Inclusion will establish and maintain community-based partnerships that are mutually beneficial, supportive, and appropriate for mitigating the social risks and addressing the social needs of the Chase Brexton Health Care community.

The Institute for Equity, Diversity, & Inclusion will help individuals with social needs obtain access to resources and interventions and evaluate the effectiveness of the referral process.

OBJECTIVES

- 1. Demonstrate a transparent, progressive approach for engaging with community partners to highlight EDI activities.
- 2. Devise a standardized approach to address requests for community engagement (health fairs, partnership opportunities, funding relationships, presentations, conferences, etc.) and ensure that staff represented at community events are reflective of the community membership.

OBJECTIVE

1. Identify and facilitate programs, services, and strategies that align with the needs of Chase Brexton Health Care's patient population, keeping various identities and communities at front of mind.



GOAL 1	GOAL 2
The Institute for Equity, Diversity, & Inclusion will use technology to measure performance with EDI Initiatives.	The Institute for Equity, Diversity, & Inclusion will support Chase Brexton Health Care's quality program by providing EDI expertise to achieve and sustain national health equity accreditations, recognitions, or certifications.
OB IECTIVES	OBJECTIVES

- 1. Collect data related to patient outcomes and social risk factors and explore opportunities to address disparities with more than one health outcome related measure.
- 2. Use electronic health records and data analytic systems to stratify populations based on risk and prioritize those who require case management and/or referral services.
- **3.** Utilize existing health equity dashboards and processes to track demographics, quality, and access.
- 1. Identify measurable goals and key performance indicators related to improving health equity (e.g., reducing health disparities and assessing social determinants of health) to incorporate into the organizational quality plan.
- **2.** Use performance improvement methods to monitor progress, improve performance, and display results of health equity goals.



GOAL 1

The Institute for Equity, Diversity, & Inclusion will ensure the use of diverse and other priority groups in financial contracts and operational policies and procedures.

OBJECTIVES

- 1. Actively pursue national and local grant opportunities that specifically focus on healthcare services for diverse patient populations.
- 2. Increase the number of diverse suppliers/vendors used throughout the organization (i.e., minority, women, LGBTQ+, disabled, veteran-owned businesses for contracts and business transactions).

Note: Goals align with NCQA HE, The Joint Commission, and CLAS Standards.

APPENDIX A

Health Equity Accreditation Self-Assessment Questionnaire

- Do the organization's mission and vision statements prioritize EDI?
- Does the organization support health equity goals and take actions toward reducing bias and improving diversity, equity, and inclusion?
- Does the organization gather patients' race/ethnicity, language, gender identity, and sexual orientation data using standardized methods?
- Do the organization's policies and procedures incorporate EDI priorities to foster a conducive work environment, reduce disparities in care, and achieve health equity?
- Does the organization gather staff race/ethnicity, language, gender identity, and sexual orientation data using standardized methods?
- Does the organization collect information that helps it provide culturally and linguistically appropriate services?
- Does the organization assess the preferred language of its patient population using a standardized approach?
- Does the organization provide materials and services in the languages preferred by its patients?
- Are the organization care teams reflective of the demographical composition of its patient population?
- Is the organization's practitioner network capable of serving the diversity of individuals served, and is it responsive to their needs and preferences?
- Does the organization consistently assess the needs of its multicultural populations?
- Does the organization continually improve its services to meet the needs of multicultural populations?
- Does the organization have a health equity dashboard in place with prioritized clinical quality measures stratified by race/ethnicity, languages, gender identity and/or sexual orientation?
- Does the organization use race/ethnicity, languages, disability, gender identity and/or sexual orientation?
- Is the organization responsible, and does it have appropriate structures and mechanisms to oversee any delegated health equity activities?
- Does the organization complete a community health needs assessment to understand the similarities and differences between the social risks of the community and the social needs of the individuals it serves?

- Does the organization use the data it collects to inform prioritization of social risks and social needs that may have the most impact on communities and individuals through interventions?
- Does the organization collaborate with community-based partners and initiatives to mitigate and address prioritized social risks and social needs?
- Does the organization have data privacy and security processes in place for managing access to, using, and sharing individuals' social needs data?
- Does the organization protect individuals' social needs data, supports interoperability when sharing data with partner organizations and communicates protections to individuals?
- Does the organization engage the communities and individuals it serves to improve its ability to mitigate social risks and address social needs?
- Does the organization refer individuals to social needs resources, accept referrals from community-based organizations, track progress and evaluate the effectiveness of the referral process?
- Does the organization have a network of organizations it refers its patients to who provide no or reduced cost services and prioritize EDI principles?

APPENDIX B

National, State, and Local EDI Landscape

State and federal agencies establish requirements for advancing healthcare equity and health equity

The Health Resources and Services Administration FY23 strategic plan focuses on actionable steps to achieve health equity, improve public health and access to quality health services.

The National Committee for Quality Assurance established an accreditation framework to improve equity, deliver culturally and linguistically appropriate services and deliver equitable care.

The Centers for Medicare and Medicaid Services adopted health equity measures into quality reporting initiatives.

The Institute for Healthcare Improvement developed a framework to serve as a guide for healthcare organizations to achieve health equity.

The Maryland Department of Health implemented statutes and legislation focused on improving access, addressing disparities, and developing workforce and cultural competency.

The Joint Commission developed a new health equity National Patient Safety Goal in 2023.

The Accreditation Council for Graduate Medical Education developed a continuous learning framework for DEI and anti-racism practices in graduate medical education.

APPENDIX C

The Office of Minority Health of the U.S. Department of Health and Human Services offers checklists as action items for healthcare centers to ensure delivery of Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS). The following are the three checklists, broken into themes.

Checklist of National CLAS Standards Implementation Practices Theme 1: Governance, Leadership, and Workforce

	Select your organization's stage of implemention for each practice	Currently implementing	Planning to implement	Not planning to implement
1.2a	Identify and designate a CLAS champion or champions, who are supported by the organization's leadership, and whose specific responsibilities include (at a minimum) continuous learning about, promoting, and identifying and sharing educational resources about CLAS and the National CLAS Standards throughout the organization.			
1.2b	Create and implement a formal CLAS implementation plan that is (at a minimum) endorsed and supported by the organization's leadership, that describes how each Standard is understood, how each Standard will be implemented and assessed, and who in the organization is responsible for overseeing implementation.			
1.3a	Target recruitment efforts to the populations served to increase the recruitment of culturally and linguistically diverse individuals, through actions such as: posting job descriptions in multiple languages in local community media, holding job fairs in the community(ies) served, and/ or working with leaders of local community institutions to create mentorship and training programs targeting populations served.			
1.3b	Create internal organizational mentorship programs, specifically targeting culturally and linguistically diverse individuals, that provide information about and support for additional training opportunities, and that links individuals in junior positions with individuals in senior positions to receive career guidance and advice.			
1.4a	Deliver or make freely available continuous CLAS-related training and technical assistance to leadership and all staff.			
1.4b	Create and disseminate new resources about CLAS within the organization using widely accessible platforms (e.g., employeededicated webpages, employee Intranet, employee break room).			
1.4c	Incorporate assessment of CLAS competencies (e.g., bilingual communication, cross-cultural communication, cultural and linguistic knowledge) on an ongoing basis into staff performance ratings.			

Checklist of National CLAS Standards Implementation Practices Theme 2: Communication and Language Assistance

	Select your organization's stage of implemention for each practice	Currently implementing	Planning to implement	Not planning to implement
2.5a	Complete an organizational assessment specific to language assistance services to describe existing language assistance services and to determine how they can be more effective and efficient.			
2.5b	Standardize procedures for staff members and train staff in those procedures. It may be appropriate to provide staff with a script to ensure that they inform individuals of the availability of language assistance and to inquire whether they will need to utilize any of the available services.			
2.6	Provide individuals with notification that describes what communication and language assistance is available, in what languages the assistance is available, and to whom they are available. Notification should clearly state that communication and language assistance is provided by the organization free of charge to individuals.			
2.7a	Require that all individuals serving as interpreters complete certification or other formal assessments of linguistic and health care terminology skills to demonstrate competency.			
2.7b	Provide financial and/or human resource (e.g., time off) incentives to staff who complete interpreter training and meet assessment criteria, to build organizational capacity to provide competent language assistance.			
2.8	Formalize processes for translating materials into languages other than English and for evaluating the quality of these translations. This may include testing materials with target audiences.			

Checklist of National CLAS Standards Implementation Practices Theme 3: Engagement, Continuous Improvement, and Accountability

	Select your organization's stage of implemention for each practice	Currently implementing	Planning to implement	Not planning to implement
3.9	Incorporate CLAS into mission, vision, and/or strategic plans by determining how organization acknowledges and addresses concepts such as diversity, equity, inclusion, and practices such as asking individuals about preferences for care/services.			
3.10a	Tailor existing evaluation efforts to include measures of CLAS implementation (e.g., patient/client satisfaction measures can include questions about CLAS; outcome data can be stratified by REAL data to determine demographic differences).			
3.10b	Complete a CLAS-related organizational assessment of the cultural and linguistic needs of populations served and of organizational resources to address these needs.			
3.11a	Collect race, ethnicity, and language (REAL) data (at a minimum) from all individuals receiving services, either by tailoring existing data collection approaches or creating a new data collection process.			
3.11b	Use REAL data to identify needs, describe current care and service provision trends, and improve care and service provision.			
3.12	Collaborate with stakeholders and community members in community health needs assessment data collection, analysis, and reporting efforts to increase data reliability and validity.			
3.13	Include community members in the process of planning programs and developing policies to ensure cultural and linguistic appropriateness by convening town hall meetings, conducting focus groups, and/or creating community advisory groups.			
3.14	Consider using staff as cultural brokers to help improve feedback mechanisms, conflict resolution process, and communication with culturally and linguistically diverse individuals.			
3.15	Partner with community organizations to lead discussions about the services provided and progress made and to create advisory boards on issues affecting diverse populations and how best to serve and reach them.			

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