



VENTURA COUNTY  

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HEALTH CARE AGENCY

# CONSEJO ASESOR DE EQUIDAD EN ATENCIÓN DE SALUD

AGENDA DE REUNIÓN ORDINARIA

Martes, 21 de febrero de 2023  
5:30 p.m. - 7:30 p.m.

Sala de Conferencias Grande  
Administración de Salud Pública del Condado de Ventura  
2240 E Gonzales Rd., Suite 200, Oxnard, CA 93036

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**Sala de Conferencias Grande, Administración de Salud Pública del CV  
2240 E Gonzales Rd., Suite 200, Oxnard, CA 93036**

**COMENTARIOS DEL PÚBLICO POR CORREO ELECTRÓNICO:**

SI DESEA HACER UN COMENTARIO DEL PÚBLICO EN GENERAL O UN COMENTARIO SOBRE UN ASUNTO ESPECÍFICO DE LA AGENDA QUE SE VAYA A ANALIZAR, PUEDE ENVIAR SU COMENTARIO POR CORREO ELECTRÓNICO A MÁS TARDAR A LAS 9:00 AM DEL DÍA DE LA REUNIÓN A LA SIGUIENTE DIRECCIÓN: [HEACCouncil@VENTURA.ORG](mailto:HEACCouncil@VENTURA.ORG). POR FAVOR, INCLUYA LA INFORMACIÓN SIGUIENTE EN SU CORREO: (A) FECHA DE LA REUNIÓN; (2) NÚMERO DE ASUNTO DE LA AGENDA, (3) TEMA O TÍTULO DEL ASUNTO, (D) EL NOMBRE COMPLETO DE USTED. DURANTE LOS COMENTARIOS DEL PÚBLICO SOBRE EL ASUNTO DE LA AGENDA QUE SE ESPECIFIQUE EN SU CORREO, SU CORREO ELECTRÓNICO SE PRESENTARÁ PARA QUE QUEDE REGISTRADO.

**APERTURA**

- 1. LLAMADA AL ORDEN**
- 2. PASE DE LISTA**
- 3. APROBACIÓN DE LAS ACTAS DEL 10 de enero de 2023**
- 4. TODOS LOS COMENTARIOS DEL PÚBLICO PARA ASUNTOS EN LA AGENDA Y ASUNTOS QUE NO ESTÉN EN LA AGENDA (hasta 10 minutos)**

**AGENDA ORDINARIA**

- 1. ASUNTOS INFORMATIVOS (5 minutos)**
- 2. INFORME: Plan de Visión y Acción de Equidad en Salud de VCMS (25 minutos)**

## **PAUSA** (después de una hora)

### **3. TALLER: Priorizar Áreas Focales** (40 minutos)

- a. Barreras para la Comunicación
- b. Experiencia de Atención
- c. Tratamiento Desigual
- d. Prestación de Atención (Foco en Proveedores)

### **4. COMENTARIOS DE LOS MIEMBROS Y CONVOCATORIA PARA ASUNTO(S) FUTURO(S) PARA AGENDA** (5 minutos)

- a. Comentarios de los miembros del consejo, actualizaciones y debate
- b. Próximas reuniones del HEAC programadas para el tercer martes de meses alternativos. Próxima reunión: 18 de abril de 2023
- c. Establecimiento de Agenda

### **5. LEVANTAMIENTO DE SESIÓN**

Los materiales relacionados con un asunto en esta Agenda presentados tras la distribución del paquete de la agenda están disponibles para inspección pública en el sitio de Internet del HEAC del Condado de Ventura, [Healthcare Equity Advisory Council \(vchca.org\)](http://HealthcareEquityAdvisoryCouncil.vchca.org), sujeto a la capacidad del personal de subir los documentos antes de la reunión.

Las personas que requieran acomodación para cualquier discapacidad auditiva, visual o de otro tipo para revisar una agenda, o para participar en una reunión del Grupo Asesor de Equidad Racial de Seguridad Pública del Condado de Ventura, conforme a la Ley de Estadounidenses con Discapacidades (ADA, por sus siglas en inglés) pueden obtener ayuda solicitando dicha adaptación por escrito dirigiéndose a la Oficina Ejecutiva del Condado, 800 South Victoria Avenue, Ventura, CA 93009-1740 o por teléfono escribiendo un correo electrónico a [HEACCouncil@ventura.org](mailto:HEACCouncil@ventura.org). Cualquier solicitud de acomodación de este tipo debe realizarse como mínimo 48 horas antes de la reunión programada para la que se solicita ayuda.

**Consejo Asesor de Equidad en Atención de Salud**  
**Martes, 10 de enero de 2023**  
**Actas**

**Miembros Comunitarios con Derecho a Voto Presentes:**

Kimberly Cofield – Copresidenta  
Dra. Liz Diaz-Querol  
Kimberly Kelley  
Hugo Tapia  
Juana Zaragoza  
Emily Bridges

**Miembros con Derecho a Voto Ausentes:**

**Personal Presente:**

Selfa Saucedo  
Dra. Loretta Denering  
Sara Rivera  
Cynthia Salas  
Phin Xaypangna  
Steven Auclair

**Miembros Administrativos con Derecho a Voto Presentes:**

Barry Zimmerman – Presidente  
Scott Gilman  
Rigoberto Vargas  
Dr. John Fankhauser  
Dra. Theresa Cho  
Kristina Swaim

**Miembros Administrativos con Derecho a Voto Ausentes:**

**Invitados:**

**1. LLAMADA AL ORDEN**

La reunión fue llamada al orden a las 5:35 p.m. por la Copresidenta Cofield.

**2. PASE DE LISTA**

**3. APROBACIÓN DE LAS ACTAS DEL 18 de octubre de 2022 Aprobadas.**

**4. TODOS LOS COMENTARIOS DEL PÚBLICO PARA ASUNTOS EN LA AGENDA Y ASUNTOS QUE NO ESTÉN EN LA AGENDA**

Eliza Hernandez tenía preguntas respecto de atención hospitalaria y comunicación con pacientes. El Dr. Fankhauser respondió en términos generales y puede hablar directamente con un paciente que tenía preocupaciones.

Caridad Vasquez subrayó la necesidad de mejor comunicación, accesibilidad a servicios, barreras lingüísticas y tiempos más cortos de espera para servicios y remisiones.

**5. ASUNTOS INFORMATIVOS Ninguno.**

**6. CANDIDATOS PARA REVISIÓN**

Se consideraron dos candidatos, Alejandra Valencia y David Tovar. Por votación mayoritaria, se invitará a Alejandra Valencia a unirse al Consejo.

**7. DEBATE SOBRE REUNIONES HÍBRIDAS**

Debido a la Ley Brown, los miembros con derecho a voto deben estar presentes, con ciertas excepciones limitadas; los comentarios del público pueden realizarse mediante Zoom. Las reuniones se limitarán a 90 minutos (5:30 a 7:00 pm.)

## **8. INFORMES DE COMITÉS ESPECIALES**

### **a. Barreras**

Para abordar los problemas con los servicios lingüísticos, la certificación como intérprete exigida se redujo del nivel 5 al nivel 3, que se consideró apropiado para nuestras necesidades, para incrementar la reserva de intérpretes disponibles. La disponibilidad del recurso no ha mejorado de forma perceptible. La disponibilidad de WiFi también crea limitaciones.

Otra barrera puede abordarse mediante la modificación de los requisitos lingüísticos de Recursos Humanos, acomodando hablantes de español/lenguas indígenas que no tienen pleno dominio del inglés.

### **b. Experiencia de Atención**

Este subcomité se centra en la navegación de atención al paciente, y necesita entender mejor las necesidades comunitarias. Los especialistas pares/promotoras pueden tener un papel importante.

### **c. Diferencias en Tratamiento**

Las iniciativas incluyen:

- Mejorar el acceso y la equidad para grupos cuya lengua materna no es el inglés, para los no familiarizados con Medi-Cal, para los que no dominan las nuevas tecnologías, y otras comunidades desatendidas.
- Capacitar a los miembros de la comunidad para navegar por el sistema, y hacerles capaces de capacitar a otras personas. Salud del Comportamiento también está trabajando para ampliar los servicios a la Avenida.
- Utilizar conexiones con grupos comunitarios (como MICOP) para identificar recursos que podamos incrementar para ayudar a los pacientes a entrar en nuestro sistema.

### **d. Prestación de la Atención (enfoque en proveedores)**

Entregables que se pretenden:

- Entender factores en el entorno de salud como ritmo y volumen, y la forma en que eso afecta a la atención al paciente.
- Capacidad de los proveedores para comunicar comprensión, empatía.

## **9. COMENTARIOS DE LOS MIEMBROS**

Por favor, completen la hoja que ha ofrecido Phin Xaypangna y envíenla a [heaccouncil@ventura.org](mailto:heaccouncil@ventura.org); HCA compilará la información y la condensará en un único documento. HCA traerá la propuesta

al grupo para debatirla en la próxima reunión.

#### **10. CIERRE DE SESIÓN**

Se cierra la sesión a las 6:45 pm.



**COUNTY of VENTURA**

**HEALTHCARE EQUITY ADVISORY COUNCIL  
DRAFT 22-24 WORK PLAN FOR DISCUSSION AND INPUT**

| <b>PRIORITY AREA</b>                  | <b>GOAL(S)</b> | <b>OUTCOME(S)</b> | <b>TIMELINE (High level) -leave blank until finalized if uncertain.</b> |
|---------------------------------------|----------------|-------------------|-------------------------------------------------------------------------|
| <b>Communication Barriers</b>         |                |                   |                                                                         |
| <b>Care Experience</b>                |                |                   |                                                                         |
| <b>Disparate Treatment</b>            |                |                   |                                                                         |
| <b>Care Delivery (Provider Focus)</b> |                |                   |                                                                         |



# VENTURA COUNTY MEDICAL SYSTEM (VCMS)

## Health Equity Vision & Action Plan 2022-2023

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### VCMS Health Equity Vision & Action Plan

The Ventura County Medical System envisions a community where everyone can attain their full potential for health and well-being.

**Educate:  
Raise Awareness & Build Skills**

- Increase awareness of health disparities and clarify the urgency of health equity need
- Townhalls
- Training on Health Equity
- VCMS DEI Advisory Council
- Health Equity Grand Rounds
- Staff Meetings
- CMEs
- Racism as a Public Health Emergency

**Examine:  
Measure and Monitor**

- Use data, including patient outcomes, and patient experience data to identify needs
- Patient Outcomes Projects (e.g. Perinatal Outcomes Non-US Born Hispanic)
- Engage in CAPH Safety Net Institute Racial Equity Project 2022-23 to define and enhance anti-racism efforts within the system

**Implement:  
Create Positive Interventions /  
Remove Barriers**

- Design intervention to address identified health disparities and inequities related to both medical care and patient experience.
- Identify key improvement projects based on data
- Identify patient experience needs and design changes to improve both workforce and patient experience

**Communicate:  
Seek Feedback and Respond**

- Engage in Health Equity Advisory Council and other forums for feedback to the medical system, design responses appropriate to drive change
- Use patient feedback including tools such as NRC, Patient Complaints, HCAHPs
- Seek employee input and feedback
- Design interventions responsive to feedback

2



### Health Equity Vision

The Ventura County Medical System envisions a community where everyone can attain their full potential for health and well-being.

We commit to providing equitable care to the communities we serve and investing in and celebrating a diverse and inclusive workforce.

We commit to the delivery of health care that is culturally responsive, accessible, evidence-based and high quality in delivery and patient outcomes. We commit to the absence of unfair, avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically or by other dimensions of inequality (e.g. sex, gender, ethnicity, disability, or sexual orientation). We commit to the use of data to measure outcomes, identify disparities, and design changes in our system protocols, practices and customs, aimed at increase health equity for our community.

| <b>Educate:</b><br><b>Raise Awareness &amp; Build Skills</b>                                                                                                                                                                                                                                                                                                         | <b>Examine:</b><br><b>Measure and Monitor</b>                                                                                                                                                                                                                                                                                                                    | <b>Implement:</b><br><b>Create Positive Interventions / Remove Barriers</b>                                                                                                                                                                                                                                                                                  | <b>Communicate:</b><br><b>Seek Feedback and Respond</b>                                                                                                                                                                                                                                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Increase awareness of health disparities and clarify the urgency of health equity need</p> <ul style="list-style-type: none"> <li>• Townhalls</li> <li>• Training on Health Equity</li> <li>• VCMS DEI Advisory Council</li> <li>• Health Equity Grand Rounds</li> <li>• Staff Meetings</li> <li>• CMEs</li> <li>• Racism as a Public Health Emergency</li> </ul> | <p>Use data, including patient outcomes, and patient experience data to identify needs</p> <ul style="list-style-type: none"> <li>• Patient Outcomes Projects (e.g. Perinatal Outcomes Non-US Born Hispanic)</li> <li>• Engage in CAPH Safety Net Institute Racial Equity Project 2022-23 to define and enhance anti-racism efforts within the system</li> </ul> | <p>Design intervention to address identified health disparities and inequities related to both medical care and patient experience.</p> <ul style="list-style-type: none"> <li>• Identify key improvement projects based on data</li> <li>• Identify patient experience needs and design changes to improve both workforce and patient experience</li> </ul> | <p>Engage in Health Equity Advisory Council and other forums for feedback to the medical system, design responses appropriate to drive change</p> <ul style="list-style-type: none"> <li>• Use patient feedback including tools such as NRC, Patient Complaints, HCAHPs</li> <li>• Seek employee input and feedback</li> <li>• Design interventions responsive to feedback</li> </ul> |

## Alignment with Health Care Agency's Strategies and Plan

### Health Care Agency Strategic Focus Areas

**Patient and Community Engagement**

*Actively engage patients and their families in their care. Actively engage with each community providing culturally appropriate services to build trust and well-being.*

**Service Excellence**

*Improve the patient experience across the continuum of care by delivering timely, accessible, comprehensive care in a professional and compassionate manner.*

**Quality and Safety**

*Achieve recognition for clinical and operational excellence through rigorous application of evidence-based practices and continuous improvement.*

**Growth and Access**

*Serve as a leader, catalyst, and community partner in transforming the health of our patients through strategic, future-focused growth and development.*



**Staff Engagement and Leadership Development**

*Create an environment where staff can achieve their best and can contribute in meaningful and valued manner. Develop highly skilled,*

### Patient and Community Engagement

*Actively engage patients and their families in their care. Actively engage with each community providing culturally appropriate services to build trust and well-being.*

Strategic Goals

1. Increase overall awareness and use of the Ventura County Medical System.
2. Increase access and awareness for historically underserved and diverse populations with a commitment to equitable care that does not vary because of any personal characteristics

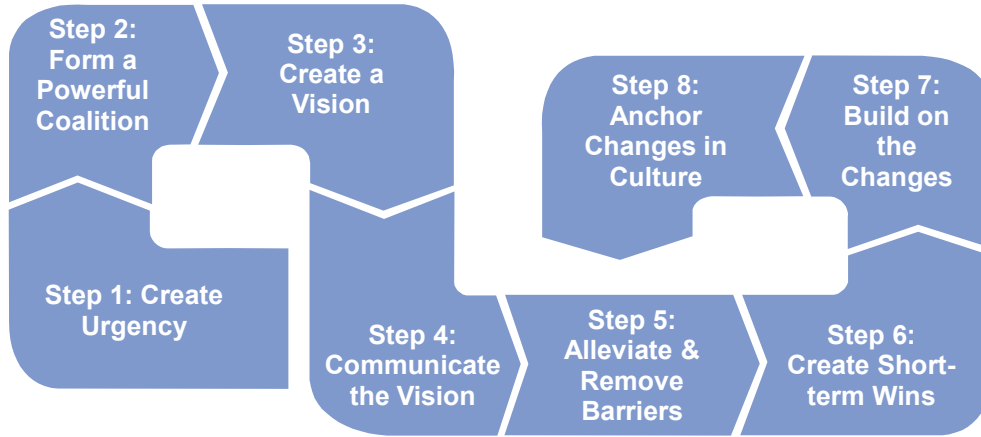
Initiatives

- a. Focus on building culturally, diversity, and equity-based competencies for all HCA programs.
- b. Develop and implement a comprehensive public awareness and branding campaign to inform the community of the services available with greater reach to diverse and underserved communities.
- c. Meet with key stakeholders and community leaders to provide updates and obtain feedback on VCMS delivery of care.
- d. Develop customer feedback to measure satisfaction, understand the customer's voice, and improve the system as needed.



## Steps in the Organizational Change Process for DEIB/Equity

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Ref: Kotter's 8-Step Process for Organizational Change

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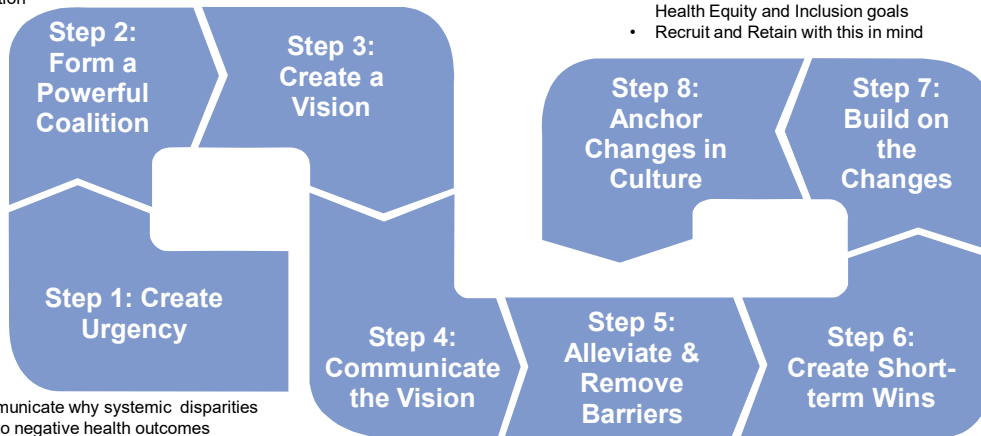
## Steps in the Organizational Change Process for DEIB/Equity

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- Create DEIB teams
- Identify Champions in each part of the organization

- Define how changes will make a difference, who will make changes, and how changes will impact people

- Ensure alignment of incentives
- Reward behaviors that help reach Health Equity and Inclusion goals
- Recruit and Retain with this in mind



- Repetition is critical – take momentum from small wins and build on it
- Adapt any changes to "make it stick" as needed

- Communicate why systemic disparities lead to negative health outcomes
- Communicate personal stories
- Communicate the imperative and mandate for systems to change
- Use surveys, audits, feedback from staff and patients

- Communicate to those outside the DEI/HE teams
- Communicate many times in many ways and by many leaders

- Identify where goals are not aligned with the vision, modify or change them
- Identify gaps i.e. not understanding the need, or the changes planned

- Celebrate quick, small-term wins
- Celebrate progress of all kinds
- Communicate success with stakeholders

Reference: Kotter's 8-Step Process for Organizational Change

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# Regulatory Mandates

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## Mandates and Specific Initiatives in Flight (1 of 3)

### The Joint Commission Requirements as of 1/1/2023

| Requirement                                                                                                                                                              | VCMS Actions                                                                                                                                                                           | Comments                                                                                                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| EP1 VCMS has a dedicated individual leading activities to reduce health care disparities                                                                                 | CMO Co-Director of Health Equity/DEI (Dr. Watabe)<br>Health Equity Lead (Griffiths)                                                                                                    | None                                                                                                                                                                                                       |
| EP 2 VCMS assesses the patient's health-related social needs and provides information about community resources and support services                                     | Possibly have PRAPARE Tool in our PowerChart tools (Dr. Carroll)<br>Nursing/Social Services discussing workflow changes required; Jan 2023 discussion planned<br>2024 mandated CMS IQR | Note: TJC 2023 Can select population to assess, can select when to ask (e.g. 1/year or at admission, etc), and can select which health-related social needs to assess<br>CMS IQR Measures required in 2024 |
| EP 3 VCMS identifies health care disparities in its patient population by stratifying quality and safety data using the sociodemographic characteristics of our patients | In progress                                                                                                                                                                            | Note: TJC Allowable to focus on this data for high risk areas, such as OB. Allowable to focus on all using data such as HCAHPS and patient experience data                                                 |
| EP 4 VCMS has a written action plan describing how we are addressing at least one health care disparity identified in its patient population                             | In progress<br>See following table with specific disparities                                                                                                                           | Note: TJC Must include a: Specific population, b: Improvement goal, c: Strategies and defined resources to achieve the improvement, d: reports and timeline to monitor outcomes/progress to goal           |

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## Mandates and Specific Initiatives in Flight (2 of 3)

### The Joint Commission Requirements as of 1/1/2023

| Requirement                                                                                                                        | VCMS Actions                                                                                                                                                                                                                                                                      | Comments                                                                                                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| EP 5 Make Improvements: VCMS acts on disparities identified and works to sustain improvements                                      | VCMS reviews quality and safety data to see where we have not improved in decreasing disparities.                                                                                                                                                                                 | Requires that we act when improvements are not made, or not sustained.<br><br>Note: Acceptable to review data, and/or collect patient feedback from interviews regarding changes and new services, and/or review and evaluate staff training needs etc.          |
| EP 6 Keep Stakeholders Informed: VCMS communicates via several vehicles on health equity goals, vision, project plans and outcomes | On 12/14 via Townhall leadership featured Health Equity overview and plan Reached x% of staff<br><br><ul style="list-style-type: none"> <li>Subsequent stakeholder updates to be provided</li> <li>Subsequent written materials to be shared (via HCA newsletter, etc)</li> </ul> | Note: Must update stakeholders at least annually, stakeholders including leaders, licensed practitioners, staff, etc. Updates can be provided via Townhalls, Newsletters, Staff Meetings, Huddles, etc. (we must be able to document and show this has happened) |

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## Disparities: Specific HE Initiative for 2023 (TJC EP4)

### Specific Health Disparity Being Address for our Patient Population

Per TJC EP4 must include:

- a) Specific population: **Non-US Born Hispanic Patients**
- b) Improvement goal: **TBD**
- c) Strategies and defined resources to achieve the improvement: **TBD**
- d) Reports and timeline to monitor outcomes/progress to goal: **CMQCC Data**

| Area for Improvement                                                                        | Outcomes Data (Source)                                    | Disparities Identified: Hypotheses and Root Causes                                                                                                                                                                                                                                                        | Interventions                                                                                                                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Maternal Severe Mortality and Morbidity - Outcomes for Non-US Born Hispanic Patients</b> | CMQCC Data on Hypertension<br>CMQCC Data on Pre-Eclampsia | TBD<br>Brainstorming issues included: <ul style="list-style-type: none"> <li>Use of aspirin</li> <li>Patient education content in indigenous languages</li> <li>Post-visit follow-up to confirm understanding</li> <li>Interpreters/verbal translation</li> <li>Forms translated appropriately</li> </ul> | <b>Already Started:</b><br>- OB Implicit bias training for physicians and staff<br><br><b>Possible Items:</b><br>-Toolkit on Hypertension interventions - Kristina Swaim (L&D Nurse Manager)<br>-Toolkit on Preventing HAI NICU<br>-Voice of Customer surveys/interviews<br>-Involve staff in solutioning<br>-PDSA Model for improvement |

As of 2/15 Next Steps:

- Establish workgroup by 1/10/2023
- Define interventions round 1 by 3/15/2023
- Begin PDSA Cycles by 4/1/2023

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# Health Outcomes Disparities and Supporting Data

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## Data Analysis Activities Summary

VCMS uses **both patient outcomes and experience data** to identify health disparities based on race and ethnicity for our patient population.

Improvement Projects are initiated based on these identified data-based inequities, and health outcomes improvement initiatives leverage a Plan Do Study Act (PDSA) approach, testing interventions and adjusting when improvements are resulted.

Subsequently, VCMS continues to leverage both patient outcomes and experience data to identify progress or determine when additional areas for improvement can be selected for improvement initiatives.

Example Sources of Quality and Outcomes Patient Data:

- CMQCC Data – OB
- NSQIP – Surgery
- Data Warehouse Reports
- Trauma outcomes Data
- *HCAHPS Data – Patient Experience*
- *NRC Data – Patient Experience*

Selected Data Drivers and Aggregate Sources:

- CMS IQR Data Requirements
- TJC Data Requirements
- QIP Data Reporting Requirements

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# Additional Activities in Health Equity and Diversity, Equity, Inclusion

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## Health Equity Project with Safety Net Institute

VCMS Leadership is participating in a joint health equity project led by the Safety Net Institute and California Association of Public Hospitals. This work consists of virtual workshops, in-person conferences, and periods of action in between meetings where teams test/pilot approaches to address racial equity goals.

### Participating Teams



- Alameda Health System
- Arrowhead Regional Medical Center
- Contra Costa Regional Medical Center
- Natividad Medical Center
- Riverside University Health System
- San Joaquin General Hospital
- San Mateo Medical Center
- County of Santa Clara Health System
- UC Davis Health
- UCLA Health
- UC San Diego Health
- Ventura County Health

### Our Work Individually & Together in this Network...



#### LOOKING IN A MIRROR

Insight into myself – what change will be required of me?



#### LOOKING OUT OF A WINDOW

Insight into my context – What do I want to be different in California and healthcare as a result of this Community of Practice?

Declare our Vision for and Commitment to Equity

Use Data to Identify Inequities



Understand Power, Privilege, Oppression; Cultivate Cultural Responsiveness & Self-Awareness

Interrupt Conversations and Behaviors of Explicit or Unconscious Biases

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# VCMS Feb 4 2023 Health Equity Conference

**HEALTH EQUITY CONFERENCE: HEALTH EQUITY AND ANTI-RACISM IN PRACTICE**

**Sessions Include:**

- Caring for our Indigenous Migrant Community
- Trauma-Informed Care
- Healthcare and Law Enforcement
- Implicit Bias
- Intersectionality

**Questions?**  
Contact Minako Watabe, Thomas Duncan, Zadok Sacks or Victoria Yuschenkoff

**Follow the QR code/link below:**  
<https://forms.gle/D9Uwkl9GJAFKQmAC8>

**Spaces limited - register by Monday, Jan 16th:**

Health Equity Conference for VCMC Physicians and staff

**“Health Equity and Anti-Racism in Practice”**

- Saturday Feb 4 8-12
- Optional team activities before and after
- Speakers include MICOP, Trauma-Informed Care, Anti-Bias Training for Health Care Providers, and more

Sponsored by Medical Executive Committee and the VCMS DEI Advisory Team

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# The County of Ventura DEI Committee & and Health Equity Advisory Council (HEAC) of VCHCA

## County of Ventura DEI Committee

Formed in 2017, DEI Council (formerly the DEI Taskforce) is building momentum to advance equity with agency representatives at all levels of the organization. The DEI Council meets monthly and provides recommendations to County leadership on policies, programs, and initiatives, while also serving as a link between all County of Ventura Agencies and the community.



## HCA Health Equity Advisory Council

- On November 10, 2020, the Board of Supervisors of Ventura County adopted a resolution declaring racism a public health crisis, making a commitment to promote equity, inclusion, diversity in housing, employment, economic development, public safety, and health care in the County of Ventura.
- The Ventura County Health Care Agency (VCHCA) honors the commitment by becoming a more racial equity and justice-oriented organization in service to our community.
- The Healthcare Equity and Advisory Council (HEAC)'s purpose is to expand efforts toward community and patient partnership engagement to advance equity in healthcare.
- The HEAC is a working group of healthcare subject matter experts and community stakeholders who advocate for equity for historically underserved communities.

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# Health Equity and Diversity, Equity, Inclusion (DEI) Work at VCMS

**Health Equity** can be defined as the absence of unfair, avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically or by other dimensions of inequality (e.g. sex, gender, ethnicity, disability, or sexual orientation). Health Equity is achieved when everyone can attain their full potential for health and well-being. *(WHO definitions and VCHCA HEAC charter)*

## Why it Matters

- The mission of our Agency (VCHCA) is to provide comprehensive, compassionate healthcare for our diverse community, especially those facing barriers.
- Health disparities result in poorer health outcomes for historically marginalized populations.
- Excess disease burden leads to increased costs for health systems, insurers, employers, and patients and families; and lower worker productivity due to higher rates of absenteeism and people working while sick.

## DEI Advisory Team at VCMS - Goals:

1. Celebrating diversity and opposing discrimination in any form. Addressing “Implicit bias” defined as, “the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.”
2. Diversifying our workforce through recruitment, residency initiatives, and pipeline programs and increasing our supportive presence within diverse communities.
3. Community partnerships to strengthen our collaboration with the community and in particular, those advocating for improved health equity for historically underserved communities.
4. Self-study and education by examination of biases, both conscious and unconscious, to raise our collective awareness, and using this knowledge to promote health equity and justice in our community.
5. Evaluation and research on patient experience and health outcomes as it relates to racism, bias and discrimination.

**Join us! To be added to the DEI team distribution list, contact Dr. Minako Watabe, or Lisa Griffiths. All are welcome.**

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# Heritage Month, Inclusion & Cultural Celebrations

**Our Patient Access Team**

Carmen Cardona, Birth Certificate Clerk  
 Angie Pena, Medical Office Assistant - Loves all the food. She also likes the old stories brought down from generations.  
 Bea Hernandez, Paging Operator - Loves the food and the colors  
 Marlene Delva, Patient Representative - Loves enchiladas. She loves the Latin traditions with holidays, especially Christmas.  
 Raquel Garibay, Patient Representative - LOVES Latin music and festivities.

**Diana Ramos, MD, MPH, MBA**  
 Surgeon General of California

- Took over for Dr. Halley Barber, our very first Surgeon General
- OB-GYN and currently the ACOG District IX Chair
- Board of CMZCC
- Public Health Administrator for the California Department of Public Health
- Secretary of the Hispanic Medical Association Board
- Co-Chair of Women's Preventive Services Initiative Implementation Committee
- Carin Herrera, MD, Renato is a distinguished leader in medicine and a trusted public health expert who brings a lifetime of pioneering, teaching, and growing the health of vulnerable communities. His interest in the importance of ensuring urgent priorities for the state on women's health, mental health, addressing the gun violence epidemic, and more.

**Native American Heritage Month**

**LGBTQ+ Pride Celebration**

**PROUDLY SUPPORTING THE LGBTQ+ COMMUNITY BY PROVIDING COMPASSIONATE DIVERSE INCLUSIVE CARE**

**Partner Organizations:** diversity collective, Santa Paula West & Hospital Clinic, sb|tan, Trans Alliance Ventura, CASA PACIFICA, The New Beginnings Center, One Step At A Time.

**Latin X Heritage Lecture**

**Latin X Heritage Month**  
 COUNTY OF VENTURA  
 Diversity, Equity & Inclusion

**Join our next Celebration and CMO Huddle: December 15th at 12 noon**

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## Diversity, Equity & Inclusion Calendar 2022-23

The Diversity, Equity, and Inclusion Council, through the DEI Calendar, honors and celebrates various identities, races/ethnicities, cultures and backgrounds of traditionally marginalized/underserved communities throughout the year

Items listed below in **BOLD** in Brown are major recognitions and will be the primary focus of DEI Council calendar events. The other items listed will also be recognized.



### July

7/26 Disability Independence Day  
(ADA Passage)

### August

8/20 Ventura County LGBTQ+ Pride  
8/26 Women's Equality Day  
(Women gain the right to vote)

### September

9/15-10/15 **Latinx Heritage Month**  
Guide Dog Month

### October

**National Disability Employment  
Awareness Month**  
10/10 Indigenous People's Day

### November

**Native American Heritage Month**  
11/1 Día de Muertos  
11/20 Transgender Day  
of Remembrance

### December

12/1 World AIDS Day

### January

1/16 Martin Luther King Jr. Day  
1/22 Lunar New Year  
1/23 Ed Roberts Day  
1/27 International Day in  
Memory of Victims of the Holocaust

### February

**Black History Month**  
2/4 Rosa Parks Day

### March

**Women's History Month**  
Developmental Disabilities  
Awareness Month  
3/8 International Women's Day  
3/31 Cesar Chavez Day  
3/31 Transgender Day of Visibility

### April

Autism Awareness Month  
4/10 Dolores Huerta Day  
4/30 Children's Day (Día del Niño)

### May

**Asian American Pacific Islanders  
Heritage Month**  
Older Americans Month

### June

**LGBTQ+ Pride Month**  
6/18 Autism Pride Day  
6/19 Juneteenth

For more information contact: [CountyDEI@Ventura.org](mailto:CountyDEI@Ventura.org)