



Policy Purpose:

EOCCO collects information on peoples' race and ethnicity, language(s) spoken, and disability needs. This information is called "REALD" data. EOCCO will use REALD data when:

- 1) Asking people about their social needs
- 2) Connecting people to resources or services to help meet their social need(s)
- 3) Writing social needs screening policies or guidelines
- 4) Doing social determinants of health work with communities or individuals

Using REALD data is important because it helps EOCCO to better care for its Oregon Health Plan (OHP) members and our communities. With REALD data, peoples' cultural, language, and disability needs are included in all the decisions that EOCCO makes.

Definitions:

Cultural competence: A process of making healthcare a safe space for people. It includes medical providers caring for the whole person, and understanding that each person has unique experiences, identities and cultural values that affect their health needs. A culturally competent provider will not make guesses about a person's identity, needs, or ability, including:

- race
- color
- spiritual beliefs
- creed
- age

- tribal affiliation
- national origin
- immigration or refugee status
- marital status
- socio-economic status
- veteran's status
- sexual orientation
- gender identity, expression, and/or transition status
- level of education
- physical or mental disability
- medical condition

Cultural Responsiveness: Being able to learn from different communities and respond to issues with an understanding that peoples' identities and culture affect their needs and experiences.

REAL-D: Detailed information on peoples' race, ethnicity, languages spoken and written, and disability needs. In Oregon's ORS 413.161 law all the REALD requirements are listed. This law also asks organizations across the state to collect REALD information in the same way.

Social Determinants of Health (SDoH): Social, economic, and environmental (the place you live) factors that affect people's health. Some of these factors include: having safe housing, having a stable job, having low-cost and healthy food options, feeling safe in your neighborhood, and having clean air in the place you live. When we use the term social needs we are talking about the social determinants of health.

Equity: Making sure that people have access to the same opportunities. Our history and society have created barriers to equal opportunities and participation, so some groups or communities need more support and resources in order to have equal access.

EOCCO stores the REALD data it receives from the Oregon Health Authority (OHA) and other sources. For social needs screening and social determinants of health work, EOCCO will use the REALD data we have for our members in the following ways:

Activity 1:

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| <p>See if any member groups have more social needs, or more of one type of social need, compared to other member groups.</p> <ul style="list-style-type: none"> ➤ This is done by combining REALD data and information on members' social needs. | |
| <p>How Often:</p> <p>Once per Year</p> | <p>Response:</p> <p>Change social needs screening policies or change social determinant of health work to focus on member groups who are experiencing more social needs</p> |

Activity 2:

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| <p>See if there is any difference in member groups who complete a social needs screening vs. member groups who refuse to complete a social needs screening.</p> <ul style="list-style-type: none"> ➤ This is done by combining REALD data and information on members who took, or refused to take, a social needs screening. | |
| <p>How Often:</p> <p>Once per Year</p> | <p>Response:</p> <p>Change social need screening policies or guidelines to make sure they are meeting the cultural, language, and disability needs of members</p> |

Activity 3:

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| <p>Create social needs screening policies and guidelines that consider members' cultural, language, and disability needs.</p> <ul style="list-style-type: none"> ➤ This is done by looking at REALD data for EOCCO's entire member population | |
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| <p>How Often:</p> <p>At least once per year</p> | <p>Consider:</p> <ul style="list-style-type: none"> • WHO is screening members for social needs <i>(Does the screener share a racial or ethnic identity with the member, or do they speak the member's preferred language?)</i> • WHAT languages social needs screening questions are translated into <i>(Are screening questions translated into the top languages spoken among EOCCO members?)</i> • HOW social needs screenings are being given to members <i>(Phone, online, in-person?)</i> |
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Activity 4:

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| <p>Inform the social determinants of health work of EOCCO.</p> <ul style="list-style-type: none"> ➤ This is done by looking at REALD data for EOCCO's entire member population | |
| <p>How Often:</p> <p>At least once per year</p> | <p>Consider:</p> <ul style="list-style-type: none"> • WHICH community organizations EOCCO contracts with <i>(Work to contract with organizations that meet the cultural, language, and/or disability needs of the communities they serve)</i> • WHERE in the community are EOCCO members being screened for social needs <i>(Work to partner with community-based organizations to conduct social needs screenings)</i> |

EOCCO's Diversity, Equity, and Inclusion (DEI) committee is responsible for reviewing and monitoring all the activities listed above. The DEI committee will look for areas where social determinant of health activities could better meet the cultural, language, or disability needs of EOCCO's members.