

# Overview of Council Structure, Authority, and Responsibilities in Statute (RCW 43.20.270-43.20.285)

"The legislature finds that women and people of color experience significant disparities from men and the general population in education, employment, healthful living conditions, access to health care, and other social determinants of health... It is the intent of the Washington state legislature to create the healthiest state in the nation by striving to eliminate health disparities in people of color and between men and women."

**Structure:** The Governor's Interagency Council on Health Disparities (Council) is a <u>Class 1 advisory group</u>. Formal membership is defined in <u>statute</u> and consists of 14 state agencies, boards, and commissions; 2 members of the public representing the interests of health care consumers; and a Chair appointed by the Governor. Council membership must be diverse in race, ethnicity, and gender.

Formal Membership			
Commission on African American Affairs (CAAA) State Board of Health (SBOH)	Commission on Asian Pacific American Affairs (CAPAA) Department of Health (DOH)	Commission on Hispanic Affairs (CHA) Department of Social and Health Services	Governor's Office of Indian Affairs (GOIA) Department of Commerce (COMM)
Health Care Authority (HCA)	Department of Agriculture (WSDA)	(DSHS) Department of Ecology (ECY)	Office of Superintendent of Public Instruction (OSPI)
Department of Children, Youth, and Families (DCYF)	Workforce Training and Education Coordinating Board (Workforce Board)	2 members of the public representing interests of healthcare consumers	1 Chair appointed by the Governor

#### Authority & Responsibilities

- Create a state action plan for eliminating health disparities.
- Create statewide policy that measures and addresses social determinants of health as well as contributing factors of health.
- Prioritize certain diseases, conditions, and health indicators according to prevalence and severity of the health disparity.
- Understand how state government actions reduce/contribute to health disparities.
- Recommend initiatives for improving the availability of culturally and linguistically appropriate health literature and interpretative services.

#### Mechanisms

- Interagency coordination
- Collaboration among state agencies, communities of color, and the private and public sectors
- Development of statewide policy
- Public meetings
- Research and information gathering (hearings, inquiries, studies, literature reviews, etc.)

#### **Statutory Definition**

"Health disparities are defined by the national institute of health as the differences in incidence, prevalence, mortality, and burden of disease and other adverse health conditions that exist among specific population groups in the United States." (RCW 43.20.270)



# **Past Recommendation Topics**

Access the Council's State Action Plan and past reports online.

#### Education

- Opportunity gaps
- Workforce: access to certified staff; training; stipends and incentives; culturally responsive teaching
- Early learning: access to services; provider training; cultural competence

### Health Insurance Coverage

- Single state-subsidized health insurance plan for public programs
- Coverage for families with low incomes
- Community-state partnerships for enrollment outreach

### Healthcare Workforce

- Workforce diversity: data collection, analysis, and reporting
- Requirements, training, and resources for culturally competent care
- Higher education enrollment, training, and completion
- Career exploration; preparation; work-based learning; mentorship; early certification

### **Health Conditions**

- Obesity: access to healthy foods; business incentives; foods and physical education in schools
- Diabetes: culturally appropriate education; insurance plan coverage; diversity of health educators
- Adverse Birth Outcomes: community-driven approaches; health of pregnant people and infants; doula care; culturally and geographically accessible care

#### **Behavioral Health**

- Workforce preparation, credentialing, training
- Culturally and linguistically appropriate care; navigators
- Data on access, quality, and health outcomes
- Qualified health homes: inclusion of Tribes, Indian Health Organizations, community-based organizations, school-based centers

## **Reproductive Health Access / Reproductive Justice**

- Continuum of care; trauma-informed care
- Intersections with criminal legal system, carceral system
- Comprehensive, culturally appropriate, LGBTQIA-inclusive sexual health education
- Communications containing personal health information
- Non-gendered, inclusive language
- Health insurance coverage regardless of immigration status; Medicaid reimbursement rates
- Funding for family planning services
- Community Health Workers



#### Poverty

- Culturally and linguistically competent early learning services
- Access to healthy foods
- Healthcare services capacity in rural areas
- Equity in government

#### Data

- Collection of patient race/ethnicity, gender, and primary language
- Disaggregated data
- Standardize data collection methods
- Identify disparities in care and outcomes

### Culturally and Linguistically Appropriate Services (CLAS)

- Implementing national CLAS standards
- Healthcare: bilingual staff; document translation; interpretative services reimbursement
- State services: reimbursement system; language access plans; staff training; document translation; track services provided; public awareness
- Interagency Limited English Proficiency (LEP) Workgroup
- Language testing and certification for qualified interpreters
- Health insurance coverage (reimbursement for services)

#### Environmental Justice (EJ)

- Environmental Justice Task Force
- State commitment; statewide policies and practices; precautionary approach
- Children's rights and health
- Service equity: underserved and disproportionately overburdened communities
- Impact assessments; measurements and indicators to track impact and progress
- Interagency processes for investigations
- Strengthen community capacity

#### **Equity in State Government**

- Office of Equity Task Force
- Agency and statewide equity, diversity, inclusion initiatives
- Diversity in hiring, contracting, recruitment, retention, promotion
- Staff training: environmental justice; institutional racism; government-to-government relations; cultural competence and humility
- Technical assistance and tools (e.g., sample language, model practices) for agencies
- Coordination for language assistance services
- Align with Results Washington goals

#### **Community Engagement**

- Diversity on government boards and commissions
- Workgroup member compensation and reimbursement
- Community engagement and partnership in decision-making



#### **Cross-cutting Themes**

- Cultural competence, cultural humility, and workforce diversity (healthcare; state government)
- Meaningful access for individuals with limited English proficiency (LEP)
- Community engagement/partnership in decision-making
- Community-centered/led approaches
- Increased government capacity for CLAS, community engagement, measuring and addressing health disparities
- Government accountability
- Government staff training: environmental justice; institutional racism; government-to-government relations; cultural competence; language access procedures
- Assess equity impacts of policies, programs, etc. before implementation
- Track disparities and impact of interventions
- Data collection standards; collection of racial/ethnic and other disaggregated data to the finest extent possible