



KERN HEALTH SYSTEMS POLICY AND PROCEDURES			
Policy Title	Diversity, Equity, and Inclusion and Health Equity Education and Training Program	Policy #	22.07-P
Policy Owner	Health Equity Office	Original Effective Date	12/2023
Revision Effective Date	04/2024	Approval Date	09/26/2024
Line of Business	<input checked="" type="checkbox"/> Medi-Cal <input type="checkbox"/> Medicare		

I. PURPOSE

Kern Health Systems (KHS) is committed to building a system of service that meet that diversity, equity and inclusive (DEI) needs of members. Training will promote access and delivery of high quality services in a culturally competent manner to all members and potential members regardless of their sex, race, color, religion, ancestry, national origin, creed, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, health status, marital status, gender, gender identity, sexual orientation or identification with any other persons or groups defined in Penal Code 422.56.

II. POLICY

A. The DEI training program will be overseen by the Chief Health Equity Officer (CHEO) and must align with the National Committee for Quality Assurance (NCQA) Health Equity Accreditation Standards. The DEI training program includes sensitivity, diversity, cultural competency and cultural humility, and health equity training programs. The training program will be formally evaluated by the Executive Quality Improvement Health Equity Committee (EQIHEC) and will be incorporated into the Quality Improvement and Health Equity Transformation Program (QIHETP)

III. DEFINITIONS

TERMS	DEFINITIONS
Diversity, Equity, and Inclusion (DEI)	Is a conceptual framework that promotes the fair and just treatment of all people with a particular focus on populations who have historically been marginalized, underrepresented and/or subject to discrimination because of their background or identity.

IV. PROCEDURES

A. DEI TRAINING COMPONENTS

The following components will include consideration of health-related social needs that are specific to Kern County, regional demographics, and disparity impacts of all current Members including but not limited to the Seniors and Persons with Disabilities population; those with chronic conditions; those with Specialty Mental Health Service and/or Substance Use Disorder needs; those with intellectual and developmental disabilities; and children with special health care needs.

1. Explicit consideration and acknowledgement of structural and institutional racism and health inequities, and their impact on Kern Health System's Members, staff, Network Providers, Subcontractors, and Downstream Subcontractors
2. Information about relevant health inequities and identified cultural groups in the Kern Health System's service area, which includes but is not limited to:
 - a. The groups' beliefs about illness and health.
 - b. Kern Health System's Member experience, including perceived discrimination and the impacts of implicit bias.
 - c. Lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, and more (LGBTQIA+) concerns, including asking for and respecting the name and pronouns Kern Health System's Members and family members use and avoiding assumptions about partners, spouses, and children.
 - d. Need for gender affirming care.
 - e. Methods of interacting with Providers and the health care structure.
 - f. Traditional home remedies that may impact how the Provider should treat the Kern Health System's Member.
 - g. Language and literacy needs.
 - h. Skills and practices regarding culture-related health care issues of the membership.
 - i. How cultural competency relates to quality of care and access to care.
 - j. Appropriate use and provision of interpreters.
 - k. Translation process of written informing documents.
 - l. Health literacy.
 - m. NA findings and identified targeted strategies.
 - n. Culturally and linguistically appropriate community resources; and
 - o. Required completion of Continuing Medical Education on cultural competency and implicit bias
3. Accommodation of different learning styles (e.g., visual, auditory, or written) and strategies to promote motivation and incentives to integrate concepts into practice and behavior change.
4. Components to the training should allow for observational assessments and evaluation strategies.
5. Community input and advisement on development of the training as well as relevant issues, barriers, and discrimination within specific Kern Health System's service locations and communities.

- a. Learnings from the qualitative and quantitative data compiled by the Health Equity Office (HEO); and
 - b. Learning from member, provider, employee, and community meetings.
6. Development of a process for evaluating and determining the need for special initiatives regarding material to be included in the DEI training program.
7. Recruitment and retention of staffing that represents the community they serve, are responsive to community needs, and dedicated staff who apply the DEI training program principles.
8. Assessment of the Kern Health System's staff, Subcontractors, Downstream Subcontractors, and Network Providers for incorporating DEI training goals into their interactions with Kern Health System Members and staff with lived experience.
9. Designated staff for coordinating and facilitating the integration of DEI training guidelines.
10. Establishment of an array of communication tools for distributing information to Kern Health System staff, Subcontractors, Downstream Subcontractors, and Network Providers.
11. Participation with government, community, and educational institutions in matters related to best practices encompassing the principles of DEI training so that they may be integrated into the Kern Health System's specific DEI training program.
12. Evaluation of the effectiveness of the DEI training program strategies for improving the health status of diverse populations with applicable alterations to the DEI trainings.
13. Provision of training in multiple formats (e.g., braille, large print, audio, translations, etc.) as requested by Kern Health System's staff, Subcontractors, Downstream Subcontractors, and Network Providers.

B. New Staff and Provider Training Requirements

KHS will provide DEI training to new staff, Subcontractors, Downstream Subcontractors, and Network Providers regardless of their cultural or professional training and background serving KHS Members within 90 days of start date that reflects the above criteria.

C. Ongoing Staff and Provider Education and Training

The Health Equity Office (HEO) will conduct an annual evaluation, or on a more frequent basis as necessary for evolving best practices, of its DEI education and training program by using the following strategies:

1. Identifying opportunities for education and training based on analysis of health outcomes impacted by cultural and linguistic issues.
2. Specifically addressing training deficiencies found in the health care delivery systems with educational solutions.
3. Instituting methods to utilize and network with community-based organizations that work with diverse communities for appraisal of educational efforts.
4. Involving community leadership and decision-makers, including those with lived experience, in the design and development of education evaluation programs.
5. Engaging with the Health Equity Transformation Steering Committee (HETSC) and

subsequent Public Policy Community Advisory Committee and internal DEI committee for continued DEI training program recommendations and feedback for consideration.

6. Provider training will be conducted in line with KHS policy 4.23 Provider Education.
 - a. Delivery of the Network provider training will be the joint responsibility of the Provider Network Management Department and the Health Equity Office.
7. Subcontractors and Downstream Subcontractor training will be completed based on their contract.
 - a. Subcontractors and Downstream Subcontractor will either be contracted to complete with Kern Health System's staff or provide attestation of completion.

D. Dissemination of Information

Kern Health Systems will develop and maintain a system of communication to ensure coordination and dissemination of cultural and linguistic information and activities to Kern health System staff, Subcontractors, Downstream Subcontractors, and Network Providers.

E. Sharing and Exchange of Information

Kern Health Systems will work with other MCP's located within Kern County to ensure alignment on DEI training criteria and accurate training records. KHS will develop and maintain a system of communication and reporting to ensure that Subcontractors, Downstream Subcontractors, and Network Providers servicing Kern County are able to provide an attestation of training completion.

V. ATTACHMENTS

Attachment A: N/A

VI. REFERENCES

Reference Type	Specific Reference
Regulatory	R.0042_R1_20230424_KHS_HEProgDesc:2023 Health Equity Program Description
All Plan Letter(s) (APL)	2023/12: Created for APL 23-025: Diversity, Equity, and Inclusion Training Program
Other	2024/04: Health Equity Improvement Steering Workgroup renamed

VII. REVISION HISTORY

Action	Date	Brief Description of Updates	Author
Revised	2024-04	Health Equity Improvement Steering workgroup renamed	HEO
Effective	2023-12	Policy was created to align with DHCS APL 23-025, per DHCS contract manager 'Review and approval' is not needed.	HEO

VIII. APPROVALS

Committees Board (if applicable)	Date Reviewed	Date Approved
Choose an item.		

Regulatory Agencies (if applicable)	Date Reviewed	Date Approved

Chief Executive Leadership Approval *		
Title	Signature	Date Approved
Chief Executive Officer		
Chief Health Equity Officer		
Chief Medical Officer		
Chief Legal and Human Resources Officer		
*Signatures are kept on file for reference but will not be on the published copy		



Policy and Procedure Review

KHS Policy & Procedure: 22.07 DEI and Health Equity Education and Training

Last approved version: N/A

Reason for revision: Policy was created to align with DHCS APL 23-025.

Director Approval		
Title	Signature	Date Approved
N/A		

Date posted to public drive: _____

Date posted to website (“P” policies only): _____