

Excellent Health Outcomes for All: Principles and Practices



Health Plan of San Joaquin Mountain Valley Health Plan

Excellent Health Outcomes for All: Principles and Practices



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Health Plan of San Joaquin Mountain Valley Health Plan

Module 2

FOUNDATIONS OF EXCELLENT HEALTH OUTCOMES FOR ALL

In this module, you'll gain a foundational understanding of health equity challenges and data-driven solutions. By the end, you'll be prepared to apply equitable principles in your role, supporting a more equitable healthcare system for all.

Duration: 12 Minute

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Health Plan of San Joaquin Mountain Valley Health Plan

Module 3

WORKFORCE DIVERSITY AND CULTURAL RESPONSIVENESS

In this module, you'll explore the important role of diversity, equity and inclusion in healthcare.

Duration: 15 Minute

[Start](#)

Health Plan of San Joaquin Mountain Valley Health Plan

Module 4

UNDERSTANDING MEMBER DEMOGRAPHICS

In this module, you'll explore the diverse demographics of our service area, understanding the unique health challenges faced by various groups, and learn how cultural beliefs and practices influence healthcare delivery.

Duration: 15 Minute

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Health Plan of San Joaquin Mountain Valley Health Plan

Module 5

PRACTICAL IMPLEMENTATION OF HEALTH EQUITY PRINCIPLES

In this module, you'll learn review ways to turn disparity trends into action.

Duration: 20 Minute

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Module 6

SCENARIO ACTIVITY

In this activity module, scenarios are used as theory meets practice. It's your opportunity to apply everything you've learned so far—principles, data analysis, cultural responsiveness, and strategies for addressing disparities—in simulated healthcare scenarios.

Duration: 15 Minute

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Module 7

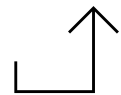
Course Summary

In this module, you'll recap what you learned in this course and affirm completion.

Duration: 6 Minute

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Click this symbol to return to the main menu from any slide.





Excellent Health Outcomes for All:

Principles and Practices



[Click here to start the course](#)

Start

WELCOME TO EXCELLENT HEALTH OUTCOMES FOR ALL: Principles and Practices

This 90-minute training supports your role whether as a health plan staff member, provider, subcontractor, or downstream subcontractor in creating more inclusive, equitable healthcare. We appreciate your commitment to reducing disparities and improving care for all Medi-Cal members.

Let's begin our journey toward impactful, compassionate healthcare.

Click the buttons to navigate the slides.

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IDENTIFY AND ADDRESS HEALTH DISPARITIES, ENHANCE CULTURAL COMPETENCE, AND APPLY PRACTICAL STRATEGIES

This course is designed to equip trainees with practical knowledge and steps to:

- Identify and address health disparities
- Enhance cultural responsiveness
- Implement equitable practices in your role



This course offers region specific data, real world scenarios and interactive learning moments.

Duration: 90 Minutes

Audience: Health Plan Staff, Providers, Subcontractors, Downstream Subcontractors

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HIGHLIGHTING WHAT LEARNERS WILL “ACHIEVE BY THE END OF THIS COURSE



By the end of this course you will be able to:

- Understand key disparities in affecting healthcare access, utilization, and outcomes
- Use data to identify and address health disparities
- Explore social determinants of health impacting managed care enrollees
- Review strategies to promote equity and inclusion in healthcare services
- Understand culturally and linguistically appropriate care
- Identify policies and practices to reduce various disparities
- Emphasize continuous improvement in addressing disparities

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**THIS IS A JOURNEY
TO BUILD A
CULTURALLY RESPONSIVE
HEALTHCARE SYSTEM**

- 01** COURSE OVERVIEW
- 02** FOUNDATIONS OF EXCELLENT HEALTH OUTCOMES FOR ALL
- 03** WORKFORCE DIVERSITY AND CULTURAL RESPONSIVENESS
- 04** UNDERSTANDING MEMBER DEMOGRAPHICS
- 05** ADDRESSING HEALTH DISPARITIES
- 06** PRACTICAL IMPLEMENTATION AND SCENARIOS
- 07** SUMMARY AND FUTURE DIRECTION

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“ INSTRUCTIONS AND GUIDELINES TO HELP YOU NAVIGATE

This course is designed to be informative and user-friendly.

Review the module instructions to help you navigate the course.

Course Navigation Tips

- Use the "Next" and "Back" buttons to move through slides
- Clickable links to access additional forms

Explore at your own pace and return to any module as needed.



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TECHNICAL REQUIREMENTS, SUPPORT AND TROUBLESHOOTING

Review the technical standards required for your device to complete this course.

Operating System: Windows 7 or later, macOS 10.12 or later

Processor: 1 GHz or faster processor

Memory: 4 GB recommended

Display: 1024x768 screen resolution or higher

Browser: Latest versions of Chrome, Firefox, Safari, or Edge

Adobe Acrobat Reader: Ensure you have the latest version of Adobe Acrobat Reader installed for optimal performance.

Internet Connection: A stable internet connection is required to access external links and online resources.

Support and Troubleshooting: If you encounter any technical issues or need further assistance, Contact our Provider Services team at (209) 942-6340, or at ProviderServices@HPSJ.com

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“ THIS COURSE AIMS TO

EQUIP YOU WITH PRACTICAL STRATEGIES TO APPLY

IN FOCUSED AND IMPACTFUL WAYS.

You're ready to start!

*Let's jump into Module 2: Foundations of Excellent Health Outcomes for All. **Click Exit and select Module 2 from the main menu.***

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Module 2

FOUNDATIONS OF EXCELLENT HEALTH OUTCOMES FOR ALL

In this module, you'll gain a foundational understanding of health equity challenges and data-driven solutions. By the end, you'll be prepared to apply equitable principles in your role, supporting a more equitable healthcare system for all.

Duration: 12 Minute

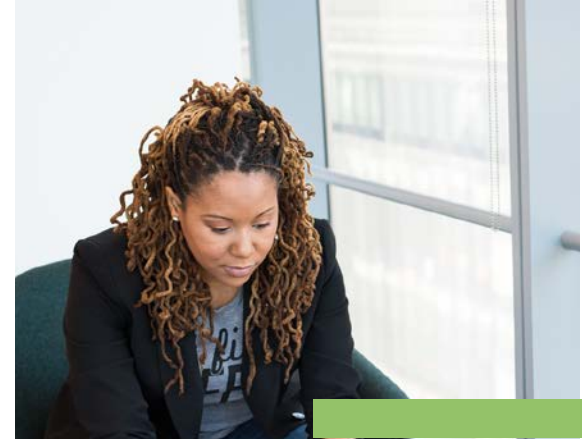


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MODULE OBJECTIVES

HIGHLIGHTING WHAT “LEARNERS WILL ACHIEVE BY THE END OF THIS MODULE



After completing this module you will be able to:

- Explain the importance of equity in managed care
- Use demographic data to identify health inequities
- Define key terms like cultural responsiveness and structural racism

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“ KEY TERMS AND CONCEPTS

Before we go further, it is important to define key terms related to achieving excellent health outcomes for all. These terms are foundational and will guide your learning:

DIVERSITY

The presence of differences within a given setting.

HEALTH EQUITY

Ensuring everyone has the opportunity to attain their highest level of health.

INCLUSION

Involvement and empowerment of all individuals in a diverse group.

EQUITY

Fairness and justice in procedures, processes, and distribution of resources.

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Terms and Acronyms

Terms

- Health Disparities
- Cultural Competency
- Institutional/Structural Racism
- Bias (explicit/implicit)

Acronyms

- Managed Care Plan (MCP)
- Diversity, Equity, Inclusion (DEI)
- Department of Health Care Services (DHCS)
- Transgender, Gender Diverse, and Intersex(TGI)

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“ These terms will guide our understanding as we explore equity further.

Health Disparities – Preventable differences in disease burden, injury, or health opportunities affecting socially disadvantaged populations.

Cultural Competency – The ability to respect and understand diverse cultural backgrounds in healthcare through ongoing reflection, learning, and cultural humility.

Institutional/Structural Racism - A system in which public policies, institutional practices, and other norms perpetuate racial group inequity.

Bias (Explicit/Implicit) - Prejudice in favor of or against one thing, person, or group compared with another.



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“

DHCS VISION FOR HEALTH EQUITY



Let's begin by exploring DHCS's vision for health equity. We'll explore the critical importance of diversity, equity, and inclusion in healthcare, specifically within the managed care system. DHCS actively works toward eliminating disparities through policy reform, community partnerships, and targeted interventions designed to create a more inclusive healthcare system.

- DHCS aims to achieve health equity through targeted strategies and initiatives.
- Ensure all Californians have access to quality healthcare, regardless of background.
- Strategic approach that addresses systemic barriers.

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“ USING DATA TO ADDRESS DISPARITIES

Data empowers healthcare providers to make evidence-based decisions and implement strategies that specifically address healthcare disparities.

Stratifying data allows providers to identify patterns and trends, enabling the creation of customized interventions for different communities, which ultimately helps reduce healthcare inequities.

Follow these **Steps to Effectively Leverage Data**, and design more equitable and effective healthcare solutions.

1

Collection

Gather demographic and health outcome data across diverse populations.

2

Analysis

Review data over a time to identify patterns and disparities in healthcare access and outcomes.

3

Action

Develop targeted interventions based on data insights to address specific disparities.

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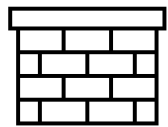


“ EXAMINING NATIONWIDE HEALTH INEQUITIES

Across the U.S., racial and ethnic minorities experience:

- Higher rates of chronic diseases
- Greater barriers to care
- Poorer health outcomes

Understanding these patterns is the first step to change.



These disparities stem from limited healthcare access, socioeconomic barriers, and the lasting impact of historical discrimination.



To address these inequities, we must first understand their root causes and then implement public health strategies that improve access and outcomes for underserved populations.

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Understanding the Root Causes of Health Disparities

Health disparities do not happen by accident, they are influenced by a variety of factors, including socioeconomic conditions, access to healthcare, and structural barriers. Many underserved communities face challenges such as:



- Limited Access Barriers – Lack access to healthcare services and resources.
- Socioeconomic Factors – Income, education, and occupation influence health outcomes.
- Historical Discrimination – Long-standing systemic inequalities impact health.
- Cultural Barriers – Language and cultural differences affect healthcare interactions.

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“ Structural Racism and Health

Structural racism significantly impacts health disparities. As Ford (2011) states, "Structural racism highlights the most significant socioecological levels where racism can impact racial and ethnic health disparities."



Systemic Barriers and **Structural Racism** create obstacles in accessing quality healthcare.

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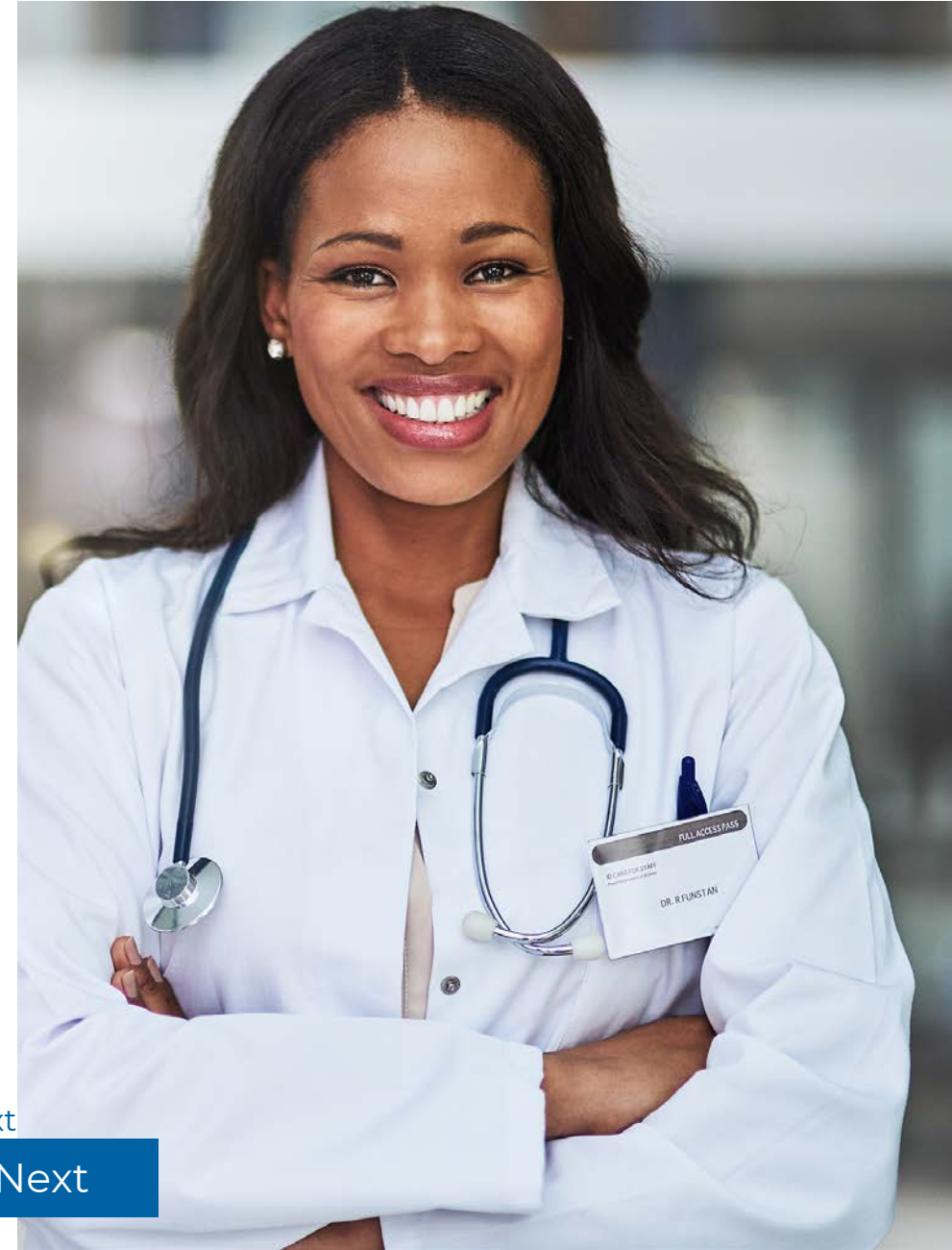
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“ Impact of Equity Initiatives on Healthcare

When equity principles are part of healthcare everyone benefits from inclusive, respectful care. Let's explore some key impacts:

- **Improved Access** Increased availability of healthcare services for underserved populations.
- **Cultural Competence** Enhanced understanding and respect for diverse patient needs.
- **Better Outcomes** Reduced health disparities and improved overall community health.
- **Increased Trust** Stronger relationships between healthcare providers and diverse communities.



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DHCS Initiatives to Address Health Disparities

DHCS initiatives are part of a broader effort to ensure that all patients have access to the resources they need to achieve optimal health, regardless of their background or circumstances.

DHCS is leading efforts to close care gaps by:



- Sharing equity data with plans and providers
- Supporting community-informed solutions
- Requiring culturally appropriate care strategies

***Your role in this work matters
every interaction counts.***

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KNOWLEDGE CHECK



Let's review what we've learned with a brief assessment. Answers on the following slide.

1. Fill in the blank:

_____ gathering plays a pivotal role in identifying and addressing health disparities.

2. Which of the following is NOT a key term in achieving excellent care outcomes?

A) Diversity, B) Equity, C) Inclusion, D) Exclusion

3. Structural racism has an insignificant impact on creating disparities in healthcare.

True/False

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ANSWER KEY



Use the Answer Key to check your responses.

1. Fill in the blank:

Data gathering plays a pivotal role in identifying and addressing health disparities.

2. Which of the following is NOT a key term in DEI?

D) Exclusion

3. Structural racism has an insignificant impact on creating disparities in healthcare.

False

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“ KEY TAKEAWAYS

- You've learned the essential principles of Excellent Health Outcomes for All and their importance.
- We explored the role of health equity and why it's crucial for improving patient outcomes and providing respectful, quality care.
- We defined core terms and how understanding these concepts strengthen trust and outcomes.

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“ Module 3 Look Ahead & Focus

Module 3 Look Ahead

Next, we'll focus on **Workforce Diversity and Cultural Responsiveness**. This module will highlight how a diverse workforce and culturally sensitive practices contribute to more effective and compassionate healthcare.

Focus

You'll learn specific strategies for fostering cultural responsiveness in healthcare and begin to examine the impact of structural and institutional biases.

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CONGRATULATIONS!

“ YOU COMPLETED MODULE 2

*Foundations of Excellent
Health Outcomes for All*

*Now you should be ready to proceed to
Module 3. **Click the Exit button to return to
the main menu and click on Module 3 to
proceed.***

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Module 3

WORKFORCE DIVERSITY AND CULTURAL RESPONSIVENESS

In this module, you'll explore the important role of diversity, equity and inclusion in healthcare.

Duration: 15 Minute

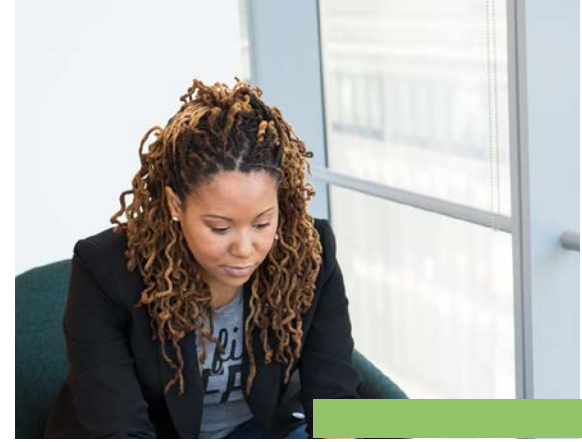


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MODULE OBJECTIVES

HIGHLIGHTING WHAT “LEARNERS WILL ACHIEVE BY THE END OF THIS MODULE



Upon completion of this module, learners will :

- Understand the importance of workforce diversity in healthcare.
- Recognize the impact of structural and institutional racism.
- Learn strategies for providing culturally and linguistically appropriate care.

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“ UNDERSTANDING EQUITY IN HEALTHCARE

- Equity in healthcare promotes a holistic and inclusive approach to patient care.
- By incorporating equity principles into healthcare practices, organizations can address the unique needs of diverse populations, reduce disparities, and enhance overall health outcomes.

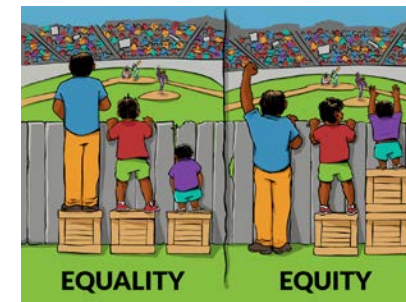
Diversity Inclusion of various groups within the workforce, including different races, ethnicities, genders, and sexual orientations.



Inclusion Creating an environment where everyone feels valued and respected in the healthcare setting.



Equity Providing fair access to healthcare services and resources for all patients.



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HPSJ/MVHP's Commitment to Equity

Health Plan of San Joaquin / Mountain Valley Health Plan is committed to advancing equity in service delivery. Our mission and diversity statements emphasize the importance of equity in healthcare access and patient care.

HPSJ/MVHP Vision and Mission

- **Vision** Healthy communities with equitable access to quality care.
- **Mission** Provide high quality healthcare for our members through community partnerships.

HPSJ/MVHP Value Statement for Diversity, Equity, and Inclusion

"We believe in promoting a foundation of compassion and respect for diversity, equity, and inclusion strengthening our organization and community by embracing opportunities for growth and leveraging the uniqueness of individual ideas, thoughts, and cultures."

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HPSJ/MVHP's Commitment to Equity

- By embedding health equity into our culture, we aim to improve understanding of the needs of diverse communities.
- This leads to more personalized and effective care, promoting a healthcare system where every individual has the opportunity to achieve optimal health.
- We are dedicated to fostering compassion and respect through diversity, equity, and inclusion.
- By valuing individual ideas, perspectives, and cultures, we strengthen the organization and the communities we served.

HPSJ/MVHP strives for an environment where everyone feels valued and respected in the healthcare setting.

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Impact of Equity Focus on Patient Care

As you think about your role in health equity and its impact on patient care, consider this:



Address Unique Needs

Equity principles help healthcare providers understand and meet diverse patient requirements.

Reduce Disparities

Implementing equity practices can lead to more equitable health outcomes across populations.

Improve Outcomes

A comprehensive equity approach can contribute to better overall patient health and satisfaction.

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Structural and Institutional Racism in Healthcare

Structural and institutional racism has a long-standing history in healthcare, contributing to disparities in access to care, treatment quality, and health outcomes.

Structural Racism: Refers to societal systems, policies, and practices that perpetuate racial inequities, such as the chronic underfunding of healthcare in communities of color.

Institutional Racism: Occurs within healthcare organizations, leading to unequal treatment and outcomes based on race, whether intentional or not.

These forms of racism impact who receives care, how it's delivered, and the quality of outcomes. Addressing and dismantling these barriers is critical for achieving health equity and reducing disparities.

“The Future of Nursing 2020-2030 report suggests that a new generation of nurse leaders is needed to recognize the importance of diversity” (NASEM 2021).

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“

Benefits of Workforce Diversity in Healthcare

A diverse healthcare workforce is essential for delivering high-quality, equitable care. Key benefits include:

Improved Patient Outcomes: Trust and engagement are higher when providers understand patients' cultural backgrounds, leading to better communication and health outcomes.

Better Problem-Solving: Diverse teams foster creativity and innovation, driving effective solutions to complex healthcare challenges.

Increased Cultural Competence: A diverse workforce improves culturally responsive care, enhancing communication and patient satisfaction.

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The nursing workforce should reflect the racial, ethnic, and gender composition of the U.S. population with the goal of creating a new generation of nurses who recognize and advocate for diversity. (Fields, 2022)





Addressing Health Inequities in Health Plan Service Areas

In several Medi-Cal service regions, significant disparities in health outcomes persist, especially within historically marginalized communities. These inequities are driven by factors such as:

- Income inequality
- Limited access to healthcare facilities
- Historical and systemic discrimination

To address these challenges, managed care plans (MCPs) are focused on:

- **Identifying** and addressing root causes of health disparities
- **Partnering** with community-based organizations to expand access
- **Investing** in culturally responsive care and workforce diversity
- Using data to **drive equity-focused** interventions and

accountability

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Culturally and Linguistically Appropriate Care

Providing culturally and linguistically appropriate care is key to ensuring all patients feel understood and respected. Healthcare providers can employ the following strategies:



- **Cultural Competence:** Being aware of and respectful toward patients' cultural backgrounds and health beliefs.
- **Linguistic Services:** Offering interpreters or translated materials for patients with limited English proficiency.
- **Personalized Care:** Tailoring treatment approaches to meet the cultural needs of each patient.

How can these practices improve patient trust, satisfaction and outcomes?

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KNOWLEDGE CHECK



Let's review what we've learned with a brief assessment. Answers on the following slide.

What are the key components of equity in healthcare?

(Select all that apply)

- A. Equity ensures fair access to healthcare services.
- B. Diversity refers only to racial and ethnic differences.
- C. Inclusion creates an environment where everyone feels valued.
- D. Equity is not relevant to improving healthcare outcomes.

Which of the following describes structural racism in healthcare?

- A. Direct discrimination by healthcare providers toward patients.
- B. Unequal policies and practices embedded within societal systems that disadvantage certain racial groups.
- C. Providing healthcare services that are linguistically and culturally appropriate.
- D. Offering personalized care based on patient preferences.

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ANSWER KEY



Use the Answer Key to check your responses.

What are the key components of equity in healthcare?

- A) Equity ensures fair access to healthcare services.
- C) Inclusion creates an environment where everyone feels valued.

Which of the following describes structural racism in healthcare?

- B) Unequal policies and practices embedded within societal systems that disadvantage certain racial groups.

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KNOWLEDGE CHECK



Let's review what we've learned with a brief assessment. Answers on the following slide.

Why is workforce diversity important in healthcare?

- A. It makes the workplace more enjoyable for staff.
- B. It improves patient outcomes and enhances cultural competence.
- C. It eliminates the need for cultural humility training.
- D. It has no significant impact on healthcare delivery.

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ANSWER KEY



Use the Answer Key to check your responses.

Why is workforce diversity important in healthcare?

B) It improves patient outcomes and enhances cultural competence.

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“ KEY TAKEAWAYS

- You examined how structural and institutional racism shape healthcare access, delivery, and outcomes, especially in marginalized communities.
- You identified specific health disparities affecting diverse populations and explored how managed care plans are working to address them through targeted, equity-driven strategies.
- You explored the importance of cultural understanding and workforce diversity in building trust, improving patient outcomes, and delivering equitable care.

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“ Module 4 Look Ahead & Focus

Module 4 Look Ahead

Moving forward to Module 4 we will delve into **Understanding Member Demographics**. By analyzing patient demographics, we can provide more personalized and equitable care tailored to the unique needs of each population.

Focus

This module will help you understand the impact of demographic factors on healthcare experiences, enabling you to address health disparities more effectively.

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CONGRATULATIONS!

“ YOU COMPLETED MODULE 3

Workforce Diversity and Cultural Responsiveness

*Now you should be ready to proceed to
Module 4. **Click the Exit button to return to
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Module 4

UNDERSTANDING MEMBER DEMOGRAPHICS

In this module, you'll explore the diverse demographics of our service area, understanding the unique health challenges faced by various groups, and learn how cultural beliefs and practices influence healthcare delivery.

Duration: 15 Minute

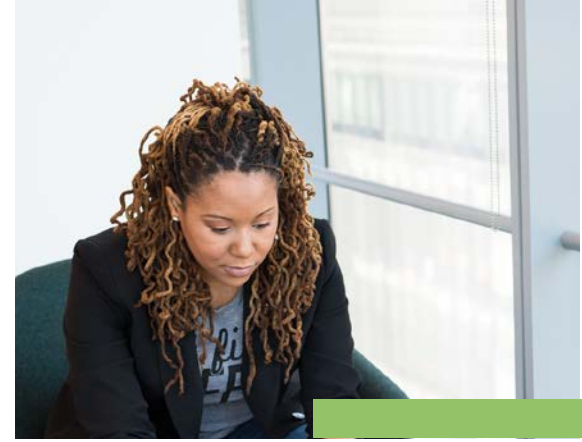


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MODULE OBJECTIVES

HIGHLIGHTING WHAT “LEARNERS WILL ACHIEVE BY THE END OF THIS MODULE



Upon completion of this module, learners will :

- Better understand the demographic composition of the service area.
- Identify specific health disparities in different member groups.
- Recognize cultural beliefs that influence healthcare delivery.

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DEMOGRAPHIC BREAKDOWN – RACE AND ETHNICITY

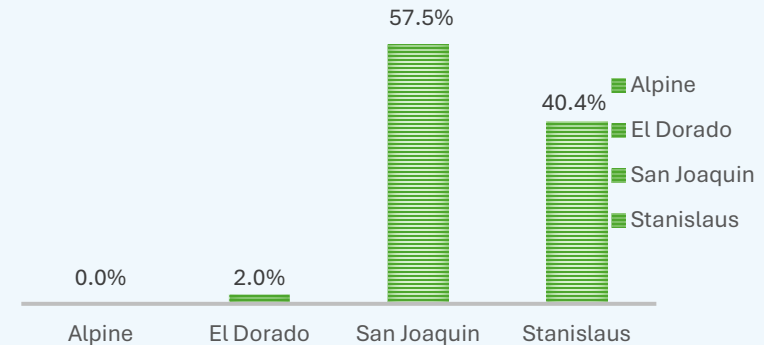
The Health Plan’s service area — including San Joaquin, Stanislaus, El Dorado, and Alpine counties — is home to a racially and ethnically diverse population.

Our members include Hispanic/Latino, White, African American, Asian, Pacific Islander, and Native American individuals, each bringing distinct cultural practices and health challenges that shape how care is accessed and delivered.

Understanding these differences helps us provide more equitable, culturally responsive care.



TOTAL MEMBERS BY COUNTY



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“ Key Identified Groups



Chronic Conditions

More than 57,000 members live with chronic conditions — and the rates vary significantly by race/ethnicity, language age, gender, and more.

Conditions like diabetes and hypertension are more common across several demographic groups, underscoring the need for targeted, culturally informed care strategies.

“Chronic health conditions impact each community differently, reflecting unique health needs and disparities.”

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“ KEY POINTS

“As age increases, so does the need for targeted healthcare to manage chronic conditions effectively.”

GENDER DIFFERENCES

Females have a higher prevalence of chronic conditions, especially diabetes and hypertension, compared to males.

RACIAL IMPACT

Hispanics experience the highest rates of diabetes and heart disease, while both Hispanics and Caucasians report the highest rates of cancer.

HEALTH DISPARITIES

Chronic conditions can vary across demographics, reflecting the unique health challenges faced by each group.

OLDER ADULTS (61-80)

This age group has the highest rates of chronic conditions, followed closely by those aged 41-60.

YOUTH (0-20)

While this group has almost the lowest prevalence of chronic conditions, it's a critical time to focus on prevention.

TAILORED INTERVENTIONS

Strategies specific to where disparities are found are essential to effectively manage chronic health issues across the lifespan.

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“ Key Identified Groups



Mental Health and Substance Use Disorder

Many members may avoid seeking **mental health care** because of **stigma.**

Among surveyed Health Plan members, over 18,000 reported experiencing mental health concerns.

Anxiety and depression were most common among female members, affecting 31%.

Alcohol-related substance use disorders were reported at the highest rates among African American and American Indian / Alaskan Native members.

Consider This:

- Providing **culturally sensitive counseling** may reduce dropout rates in therapy programs.
- **Integrating mental and physical healthcare services** in a single location can be beneficial.



“ Special Health Care Needs

Children with Special Health Care Needs

- As of July 2024, there were around 5,600 children with special health care needs assigned to the Health Plan

Intellectual and Developmental Disabilities

- As of July 2024, about 10,000 members had intellectual and developmental disabilities (IDD).
- Although Asian membership is twice as large as African American membership, both groups report IDD at similar volumes — highlighting a potentially disproportionate impact on African American members

Early diagnosis enables effective care through coordinated support from healthcare, schools, and families.

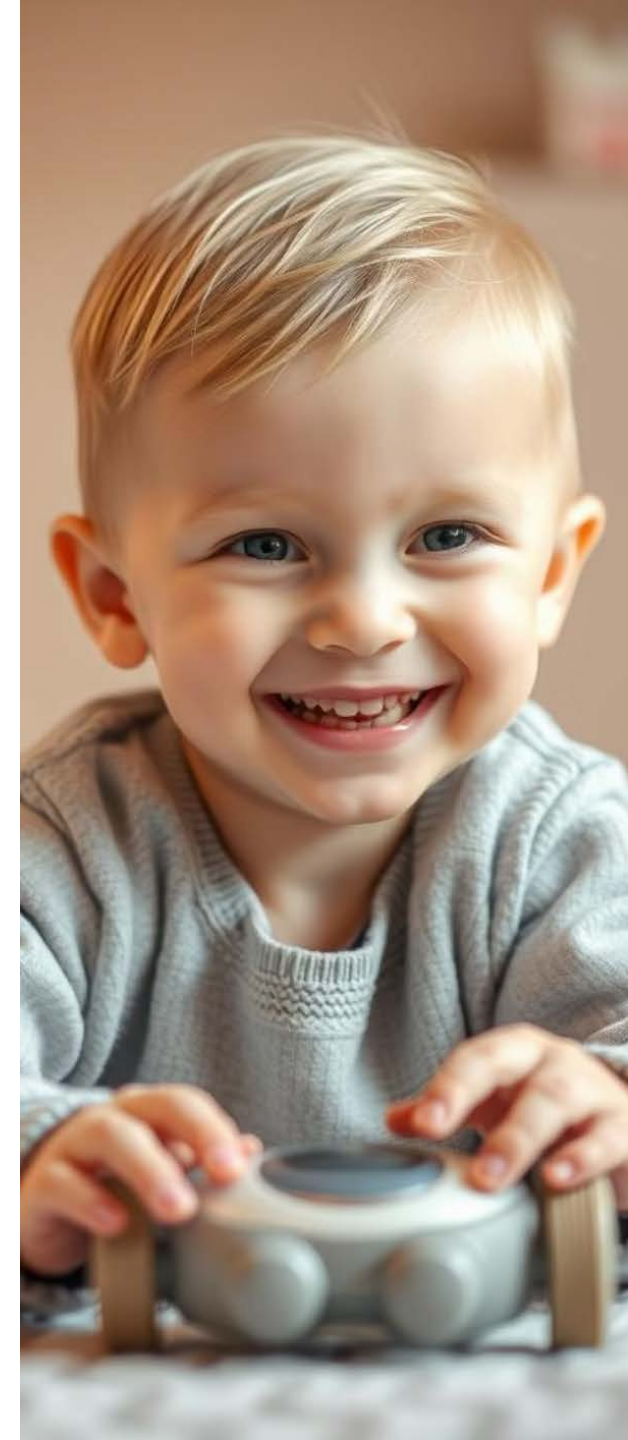
Consider this:

- Early Diagnosis and Assessment
- Specialized Treatment and Ongoing Management
- Comprehensive Coordination of Care

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Cultural Beliefs and Practices

Health Practices

- Many cultural groups use **traditional remedies**, such as **herbal medicine** or **acupuncture**, alongside or instead of or instead of conventional Western medical treatments.
- For some cultural groups, family involvement in healthcare decisions may be higher than others.
- When providers **acknowledge and respect** these practices, treatment adherence can improve.



Religious Beliefs

- **Members** may have religious beliefs that influence healthcare decisions.
- These beliefs can impact choices around **end-of-life care, dietary restrictions, and certain medical treatments.**

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DEMOGRAPHIC INSIGHTS AT A GLANCE

Language Diversity is important in healthcare disparities as it ensures clear communication, reducing misunderstandings and improving access to equitable care.

- **More than 35%** of members speak a language other than English at home.
- **Common languages:** Spanish, Punjabi, Farsi, Cambodian, Vietnamese.
- **Spanish** is the preferred language of over 30% of health plan members, making bilingual services critical.

Social Determinants of Health (SDOH) impact healthcare disparities by affecting access to resources, quality of care, and health outcomes, particularly for lower-income individuals.

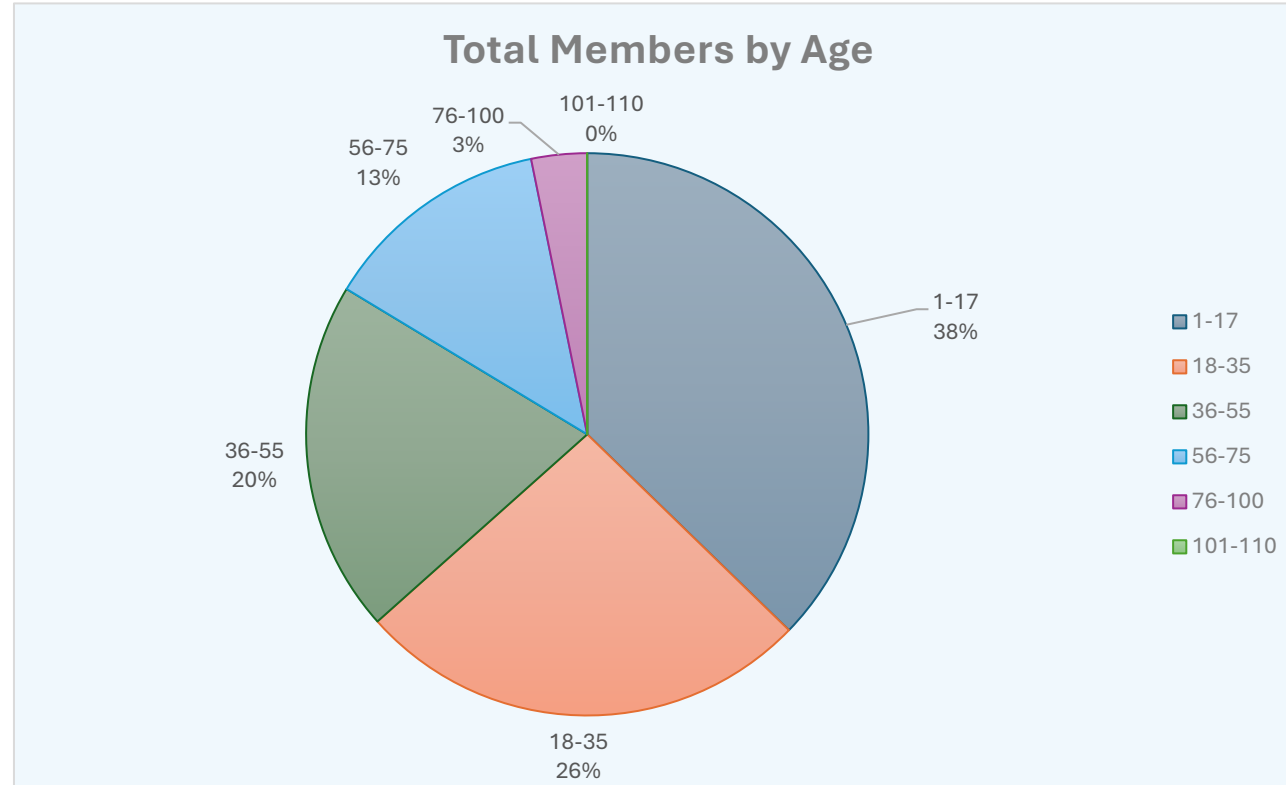
- **35-40%** of members live **below the poverty line**
- **89% have high school diploma. Only 17-19% have Bachelor's degree**
- **7% are unemployed**

Income, education, and job access all shape healthcare outcomes.





DEMOGRAPHIC INSIGHTS AT A GLANCE

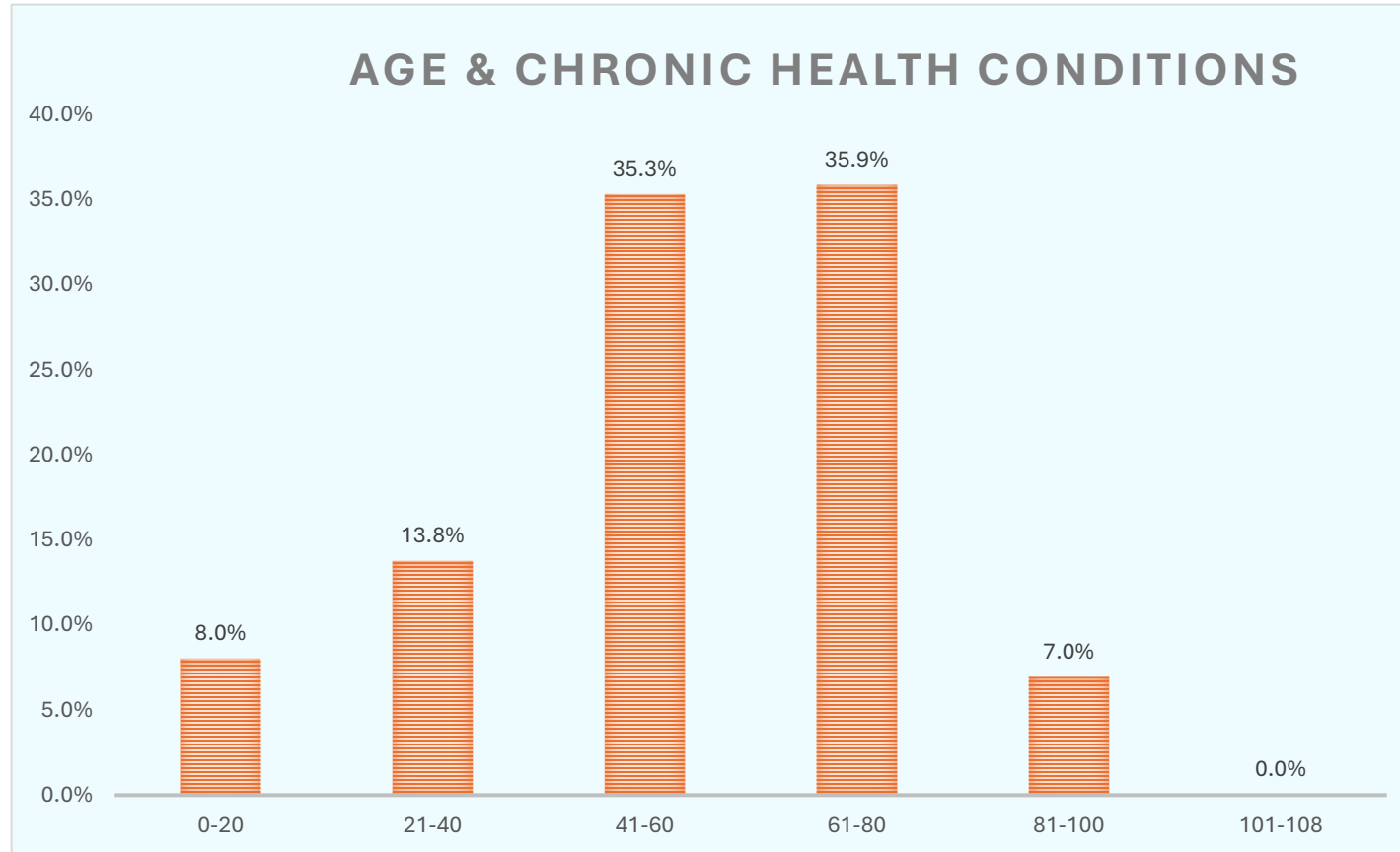


The grand majority (**64%**) of members fall between **1-35 years of age**.





DEMOGRAPHIC INSIGHTS AT A GLANCE

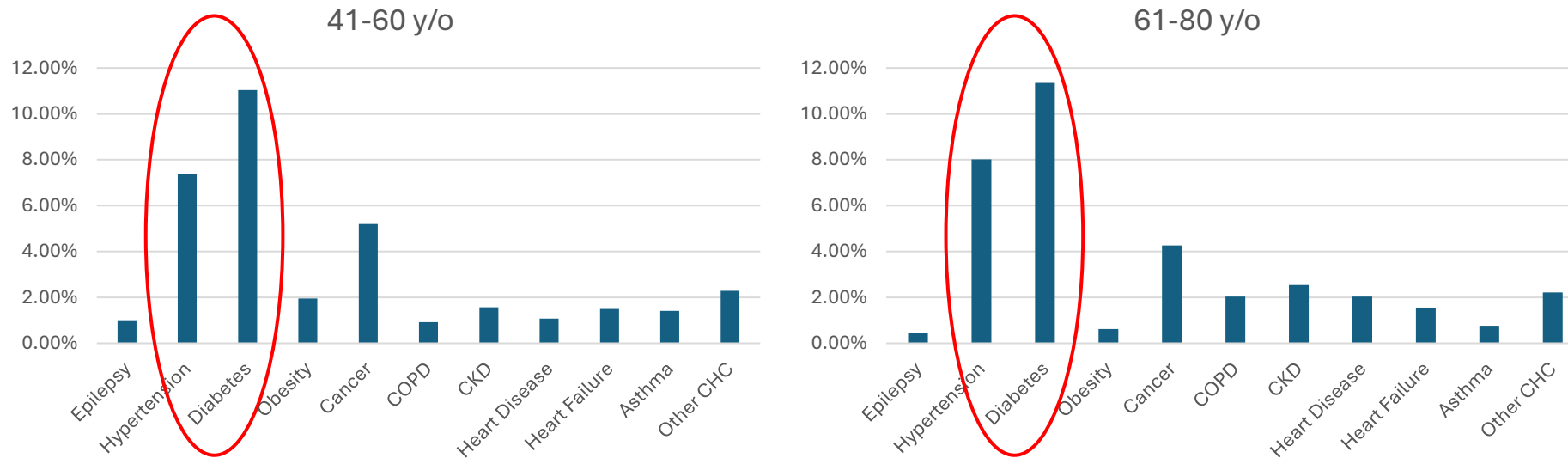


Chronic Health Conditions are most prevalent in the 41-80 age range, which represents less than 37% of the overall member population.





DEMOGRAPHIC INSIGHTS AT A GLANCE

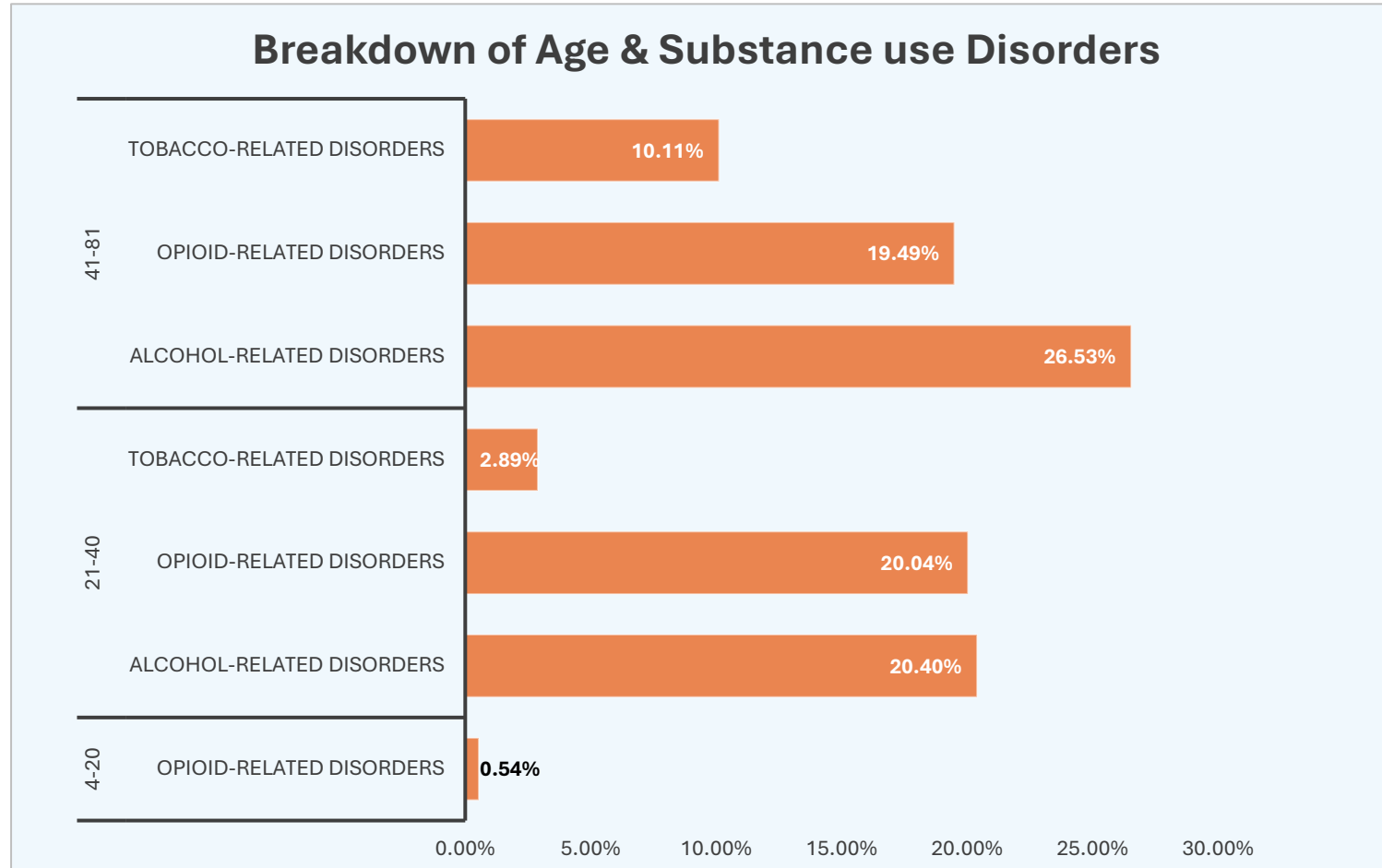


In the 41-80 age range, diabetes is the most prevalent chronic condition, followed by hypertension.





DEMOGRAPHIC INSIGHTS AT A GLANCE

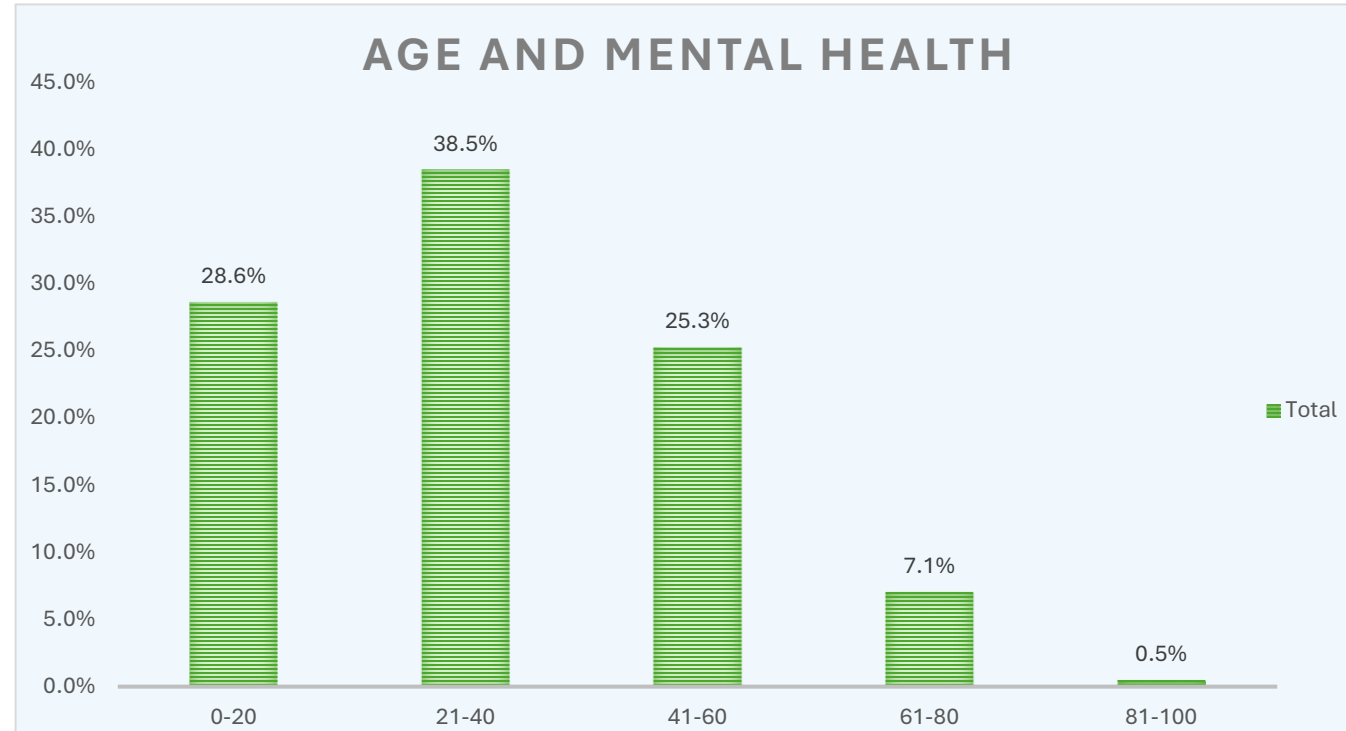


Alcohol and tobacco-related disorders affect more members aged **41-81** than members aged 21-40, and **20% of both age groups face opioid-related disorders.**





DEMOGRAPHIC INSIGHTS AT A GLANCE



Mental health conditions and disorders affect at least **25% of all members 0-80** years old. **The 21-40 age group is the most affected**, at nearly **39%**.

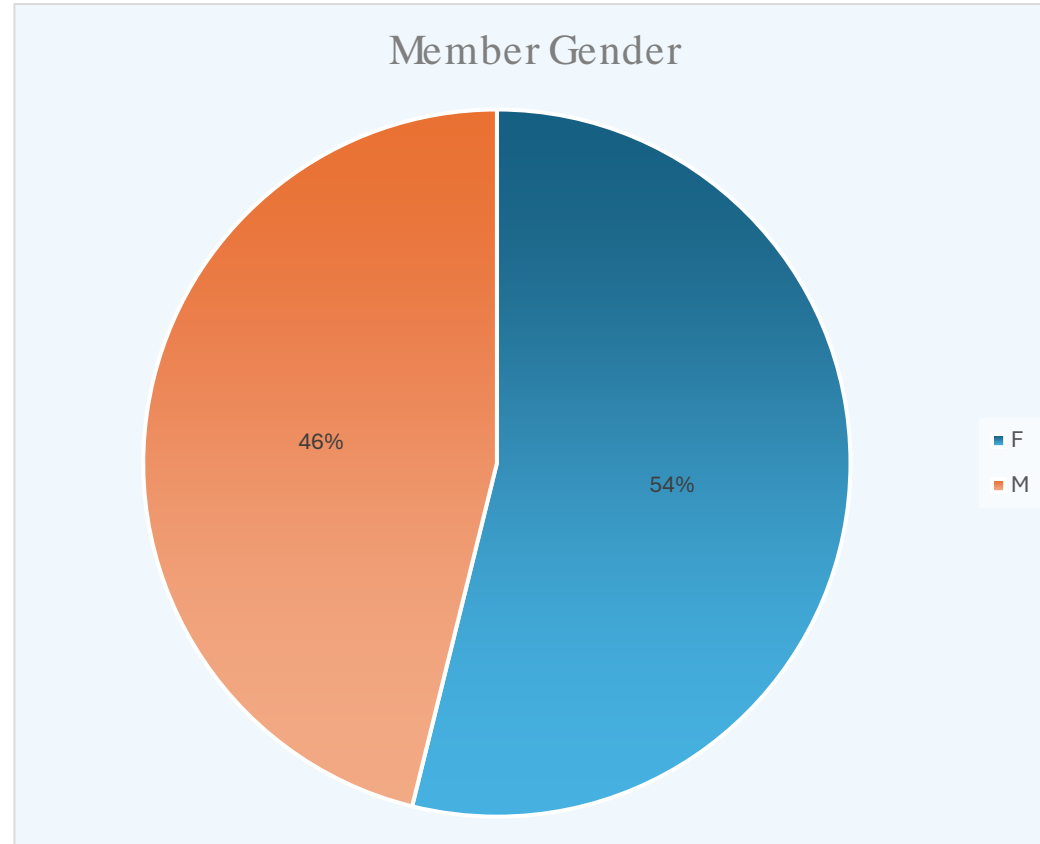
For those 0-40, anxiety and fear-related disorders are the most prevalent

For those 41+, depressive disorders become the more prevalent.





DEMOGRAPHIC INSIGHTS AT A GLANCE

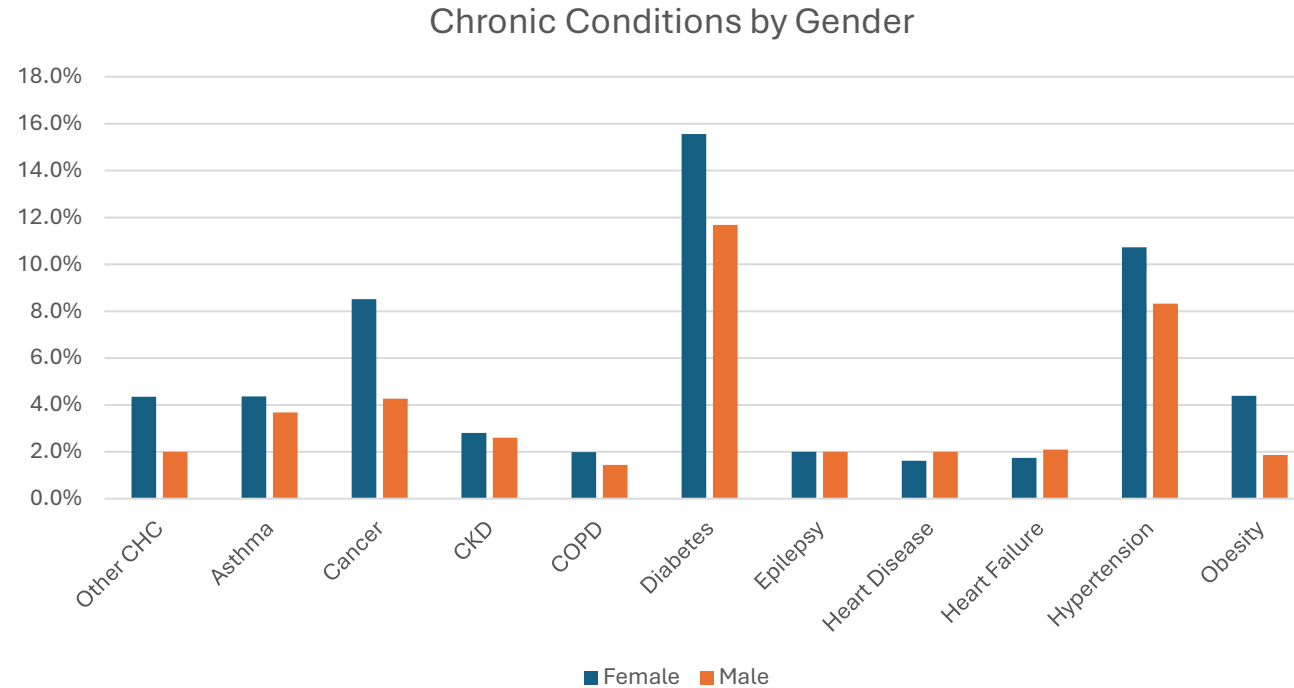


There are **8% more female members** than male members





DEMOGRAPHIC INSIGHTS AT A GLANCE



While the female population is only 8% higher than the male, **females experience significantly more cancer, diabetes, hypertension, obesity, and other chronic health conditions.**

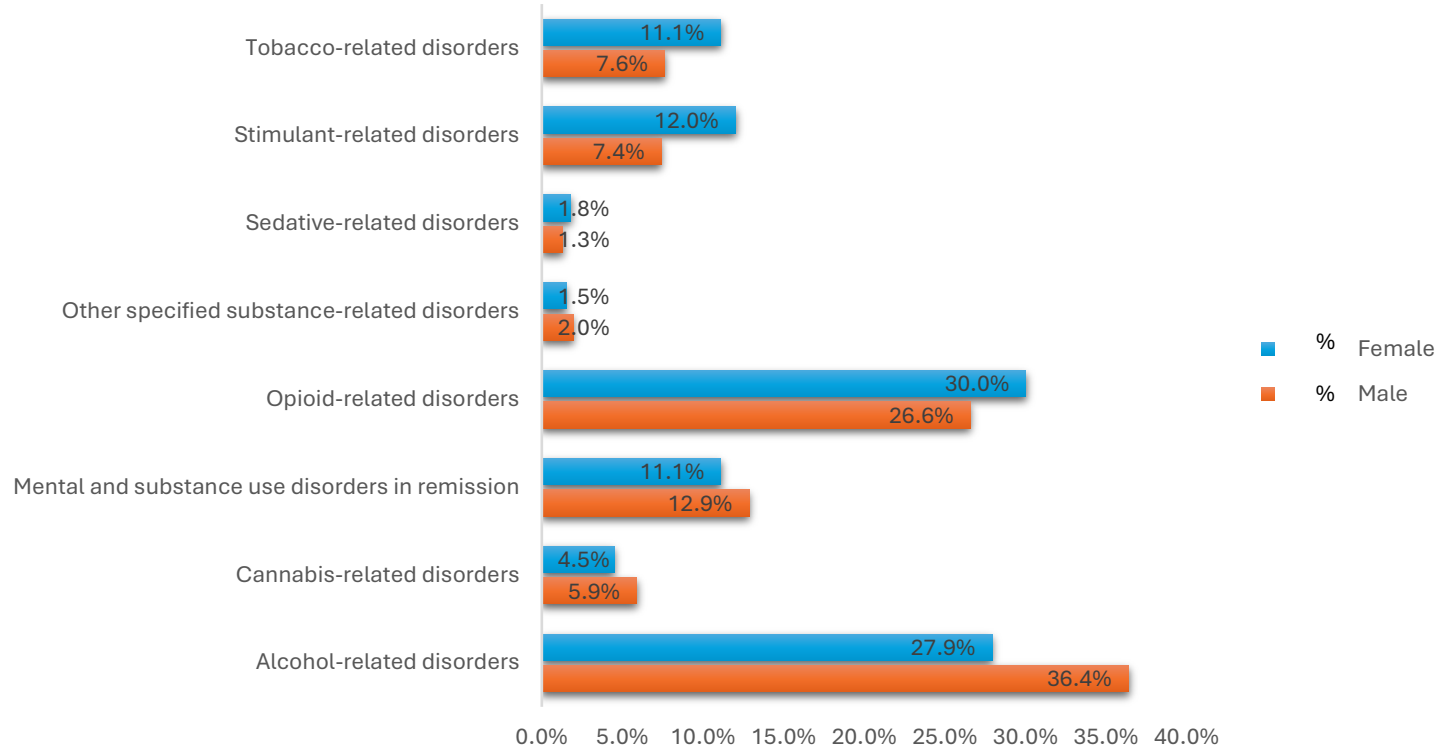
Males lead only slightly in heart disease and heart failure.





DEMOGRAPHIC INSIGHTS AT A GLANCE

Gender & Substance use Disorders

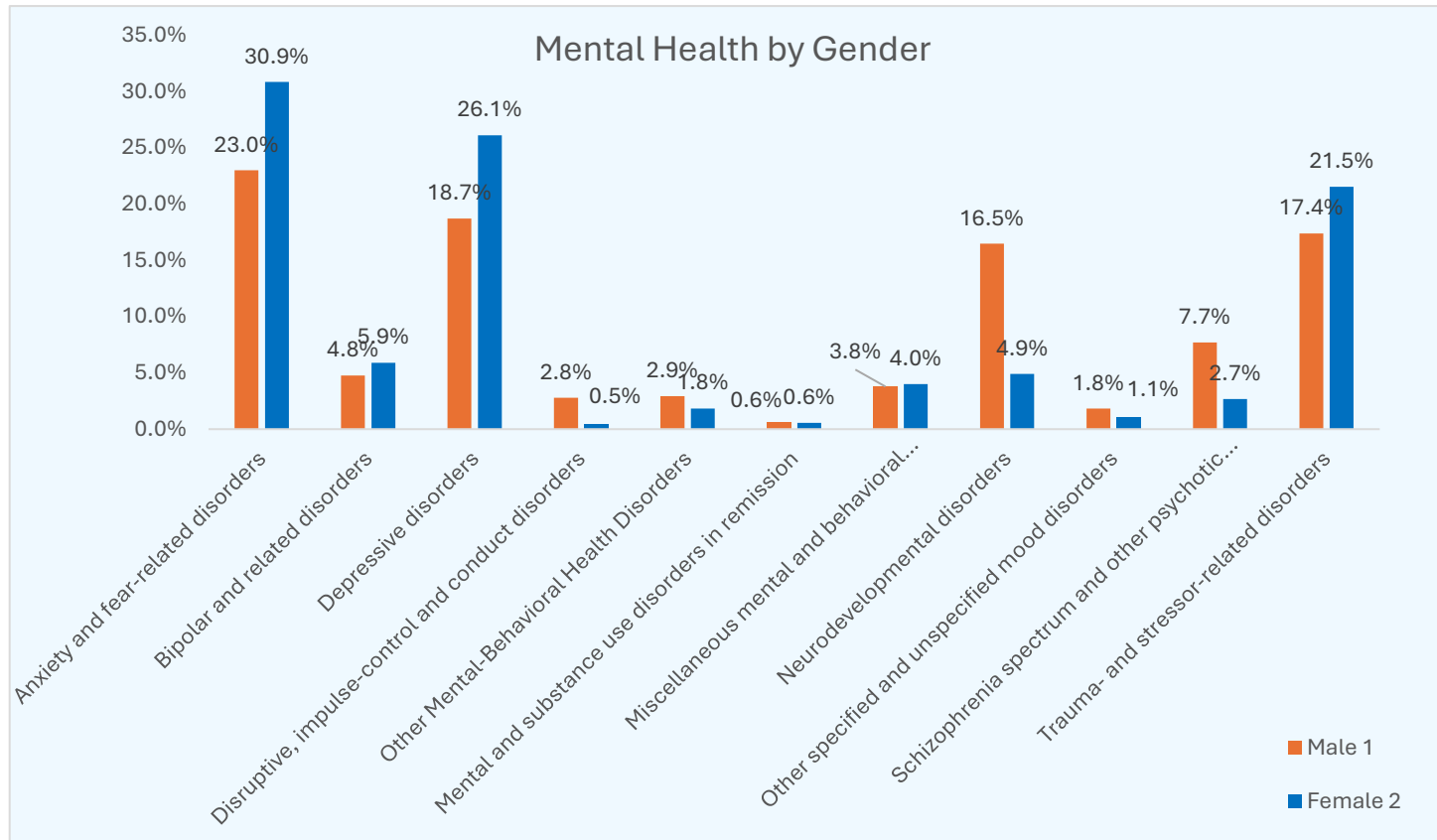


While over 25% of males and females have alcohol and opioid-related disorders, **females have more opioid-related disorders, and males have more alcohol-related disorders.**





DEMOGRAPHIC INSIGHTS AT A GLANCE



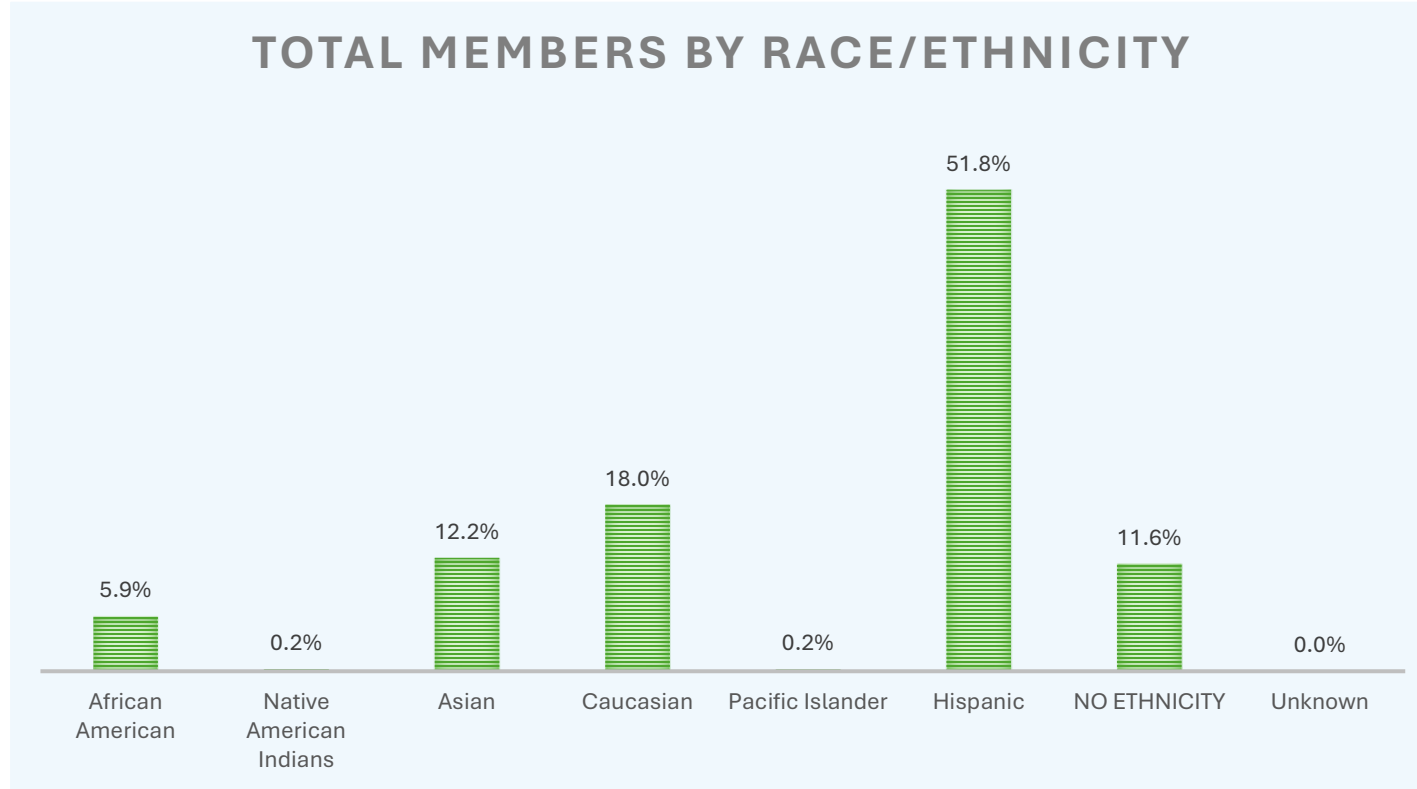
While **anxiety and fear disorders, depressive disorders, and trauma and stressor-related disorders** are the highest for males and females, **females have notably higher cases in all three.**

Males have significantly more Neurodevelopmental disorders than females.





DEMOGRAPHIC INSIGHTS AT A GLANCE



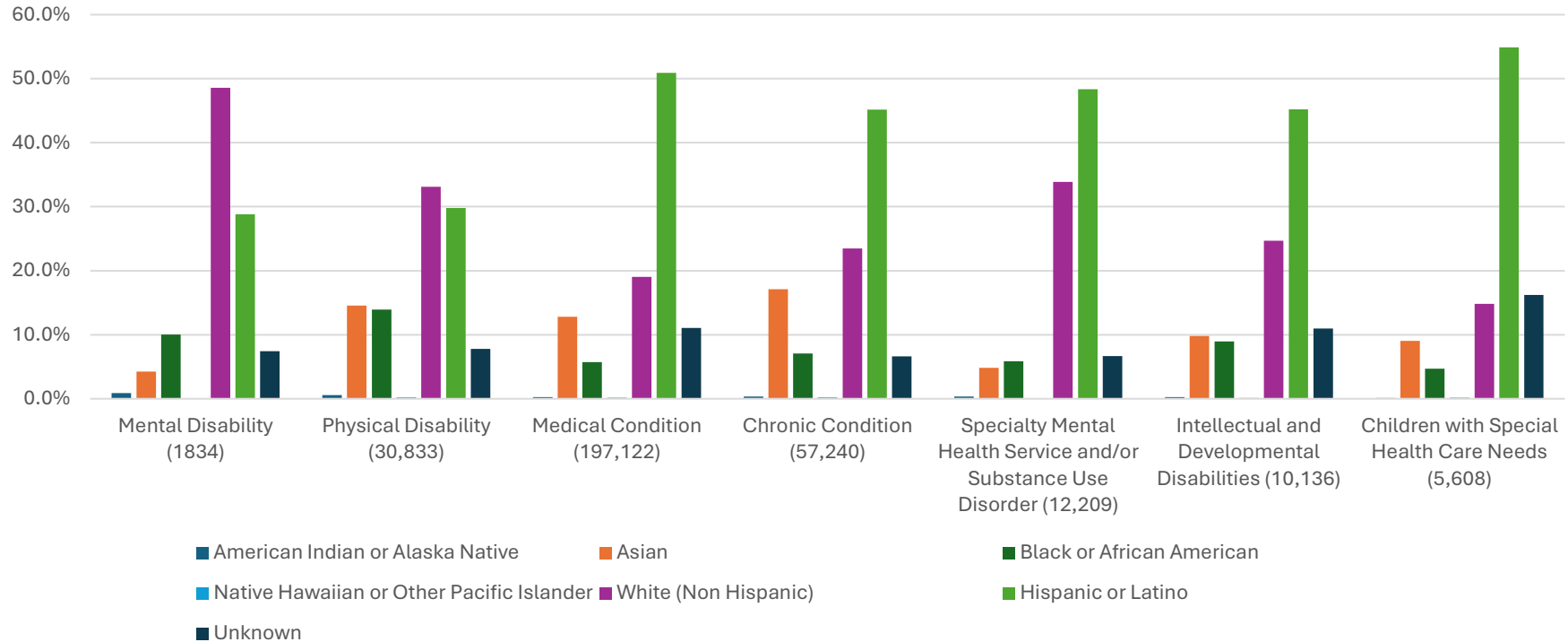
The largest racial/ethnic group in the total service are is Hispanic/Latino.





DEMOGRAPHIC INSIGHTS AT A GLANCE

Disabilities, Chronic Conditions and Other Needs by Race/Ethnicity

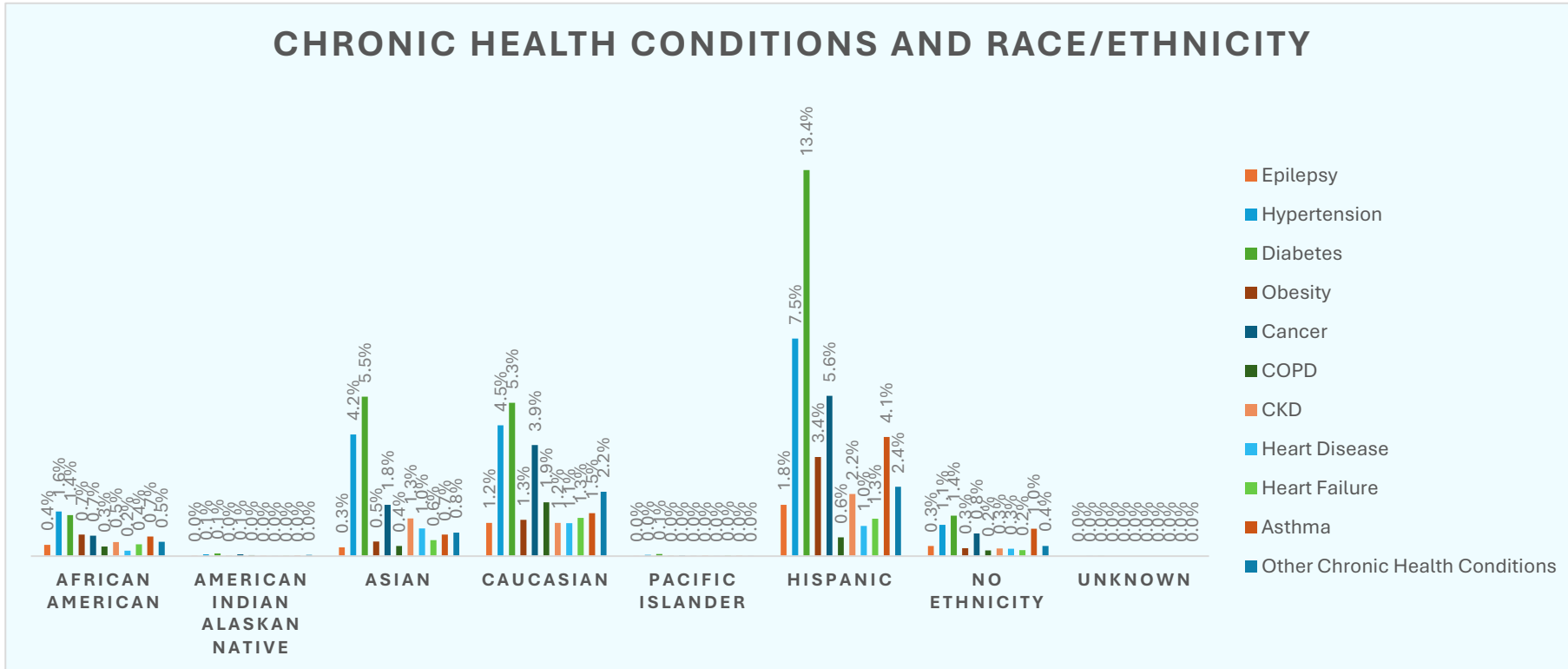


Hispanics lead significantly in all of the above categories apart from Mental and Physical Disabilities, which is lead by Caucasians. **Given the larger Hispanic population overall, this could be an indicator of under-reporting of mental and physical disabilities by Hispanics based on cultural stigma.**





DEMOGRAPHIC INSIGHTS AT A GLANCE



Diabetes and Hypertension are the lead chronic conditions for **African Americans, Asians, Caucasians, and Hispanics**. However, prevalence of **hypertension is higher than diabetes** specifically with **African Americans**.



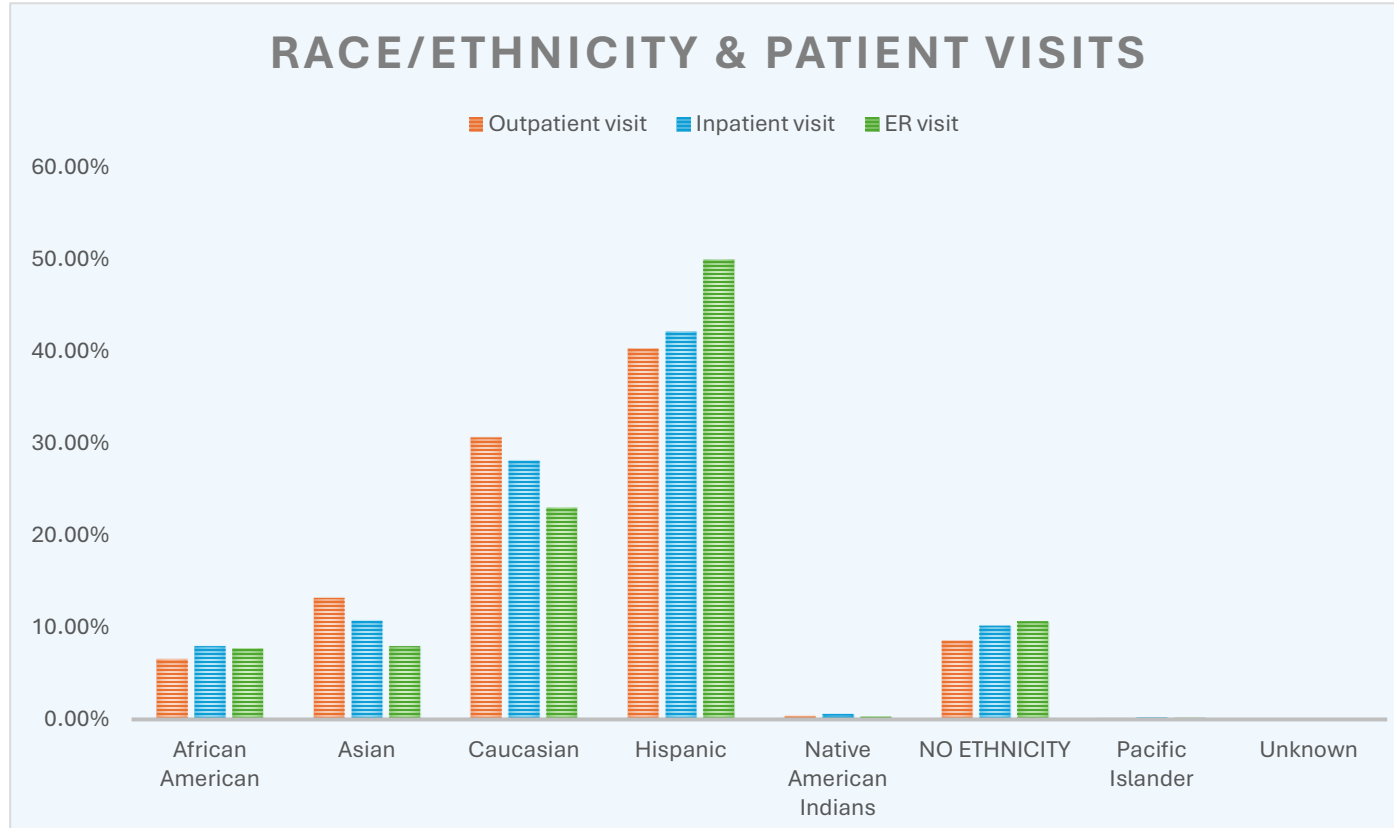
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DEMOGRAPHIC INSIGHTS AT A GLANCE



For **Asians and Caucasians**, **outpatient visits are higher**, and inpatient and ER visits are fewer. **Conversely**, for **African Americans and Hispanics**, outpatient visits are fewer, and **inpatient and ER visits are higher**.



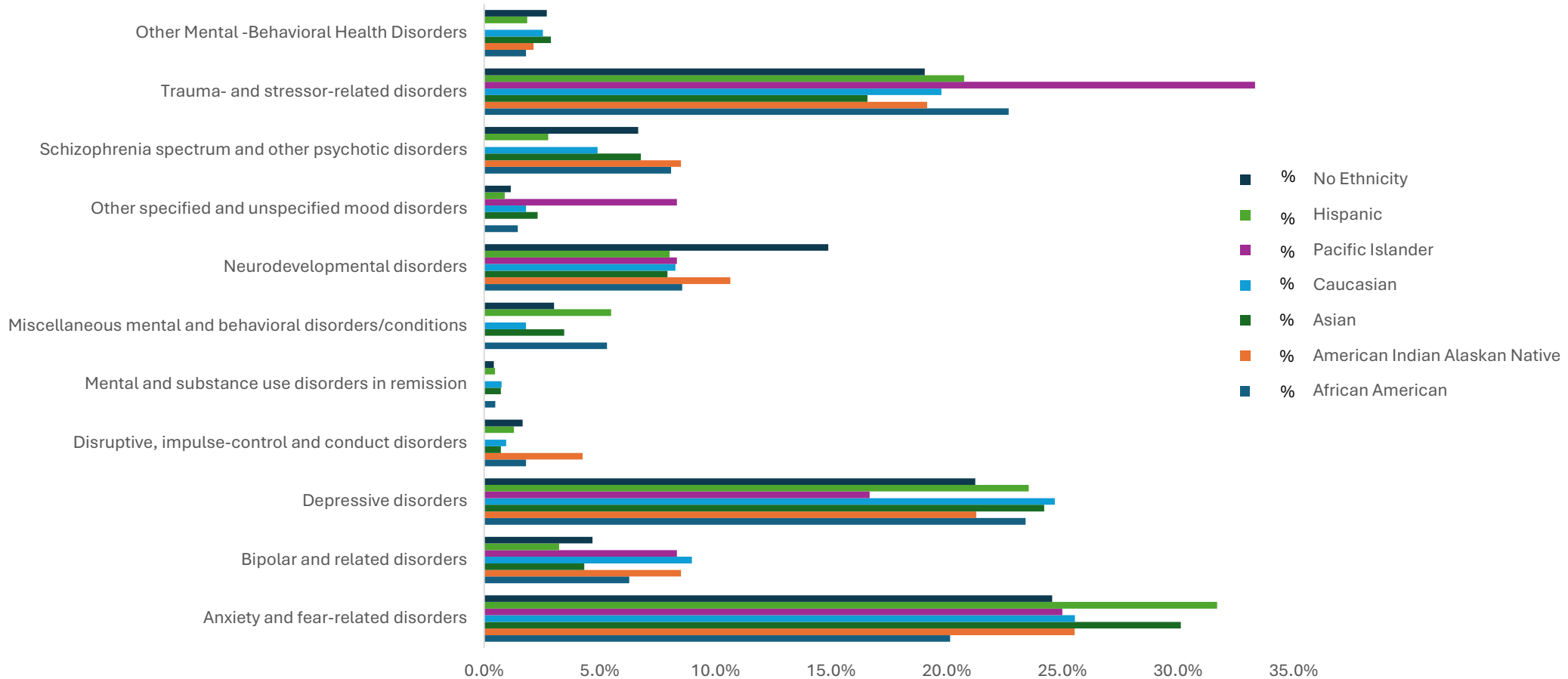
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DEMOGRAPHIC INSIGHTS AT A GLANCE



Despite being a much smaller portion of the population, **Pacific Islanders have a much larger share of trauma and stressor-related disorders** than any other racial/ethnic group.



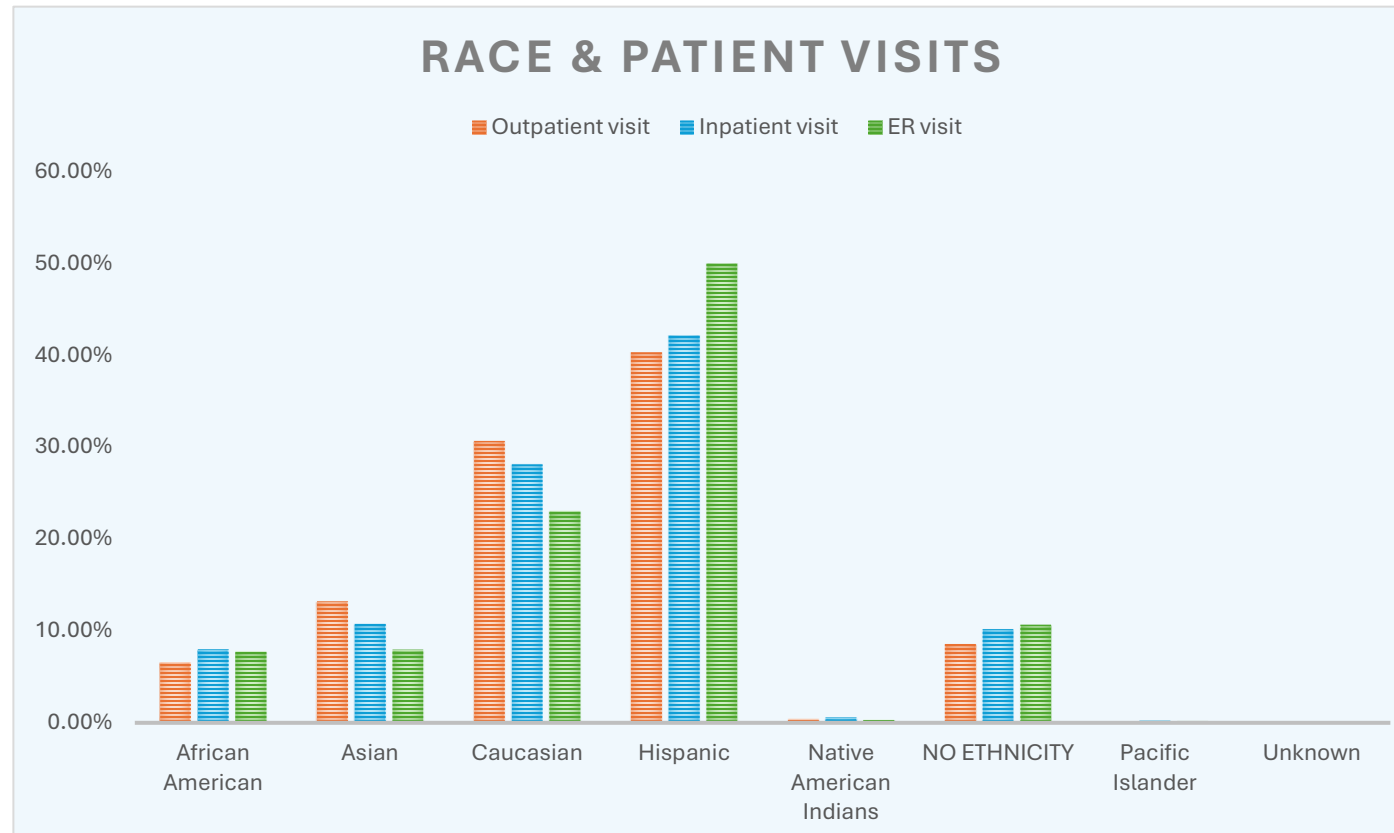
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DEMOGRAPHIC INSIGHTS AT A GLANCE



For **Asians and Caucasians**, outpatient visits are higher, and **inpatient and ER visits are fewer**. Conversely, for **African Americans and Hispanics**, outpatient visits are fewer, and **inpatient and ER visits are higher**.



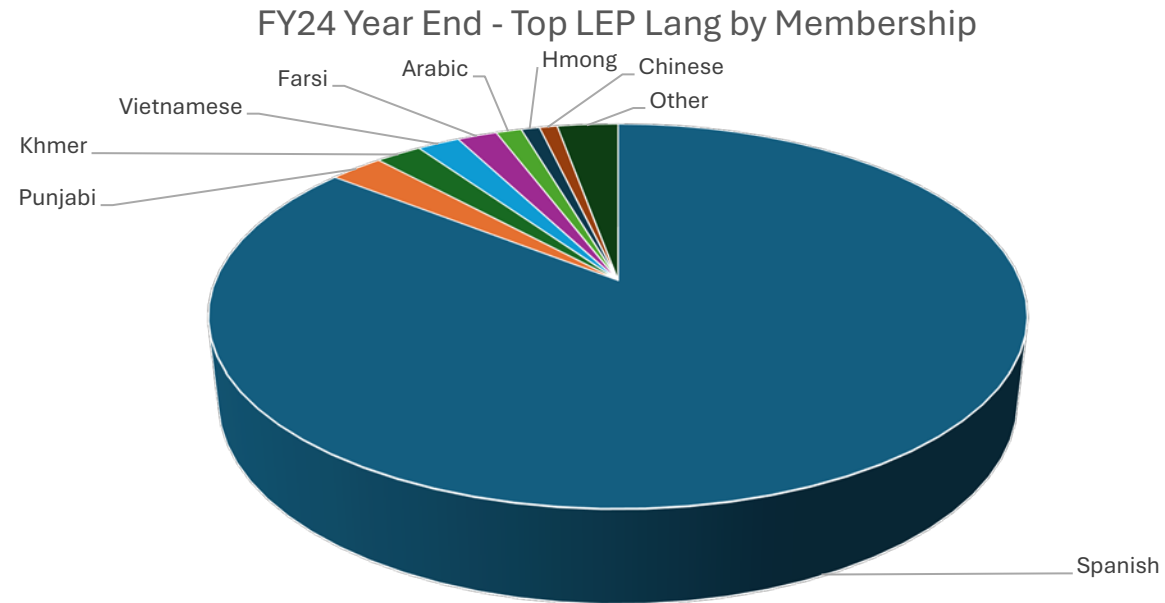
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DEMOGRAPHIC INSIGHTS AT A GLANCE



While **Spanish is the top non-English language for the member population**, over **50 additional languages are represented in the Other category**.





Cultural Beliefs and Practices

Cultural considerations to support diverse member populations in seeking care for physical or mental health:

- Incorporating cultural beliefs and values into therapy and treatment plans promotes culturally sensitive counseling.
- Some members from diverse backgrounds may rely on traditional remedies before seeking conventional medical care; address this proactively in care conversations.
- Stigma surrounding mental health is a significant barrier to seeking care, particularly among marginalized groups; create space in conversation for this topic.

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“ Addressing Bias in Healthcare – Member Experience

Discrimination: Marginalized groups often experience oppression, which leads to mistrust, and can lead to them avoiding seeking care due to discrimination

Implicit Bias: Unconscious biases among healthcare providers can lead to unequal treatment; awareness and training can mitigate this.

Across USA

Kaiser Family Foundations:

- Only around 50% of Black/African American adults trust local hospitals to provide quality care.
- Nearly 40% of Black mothers report experiencing racial discrimination when seeking care for themselves or their children.

CAC Feedback

- Community Advisory Committee feedback emphasized the need for diversity education to address both implicit and explicit bias and reduce discrimination.
- Concerns were especially strong regarding the Deaf and Hard of Hearing, ADA, and Transgender communities.

Consider This

- Implicit bias can influence treatment decisions and lead to unequal care.
- Awareness helps reduce bias and improve care quality.
- When members experience discrimination, they're more likely to avoid care, inclusive programs can rebuild trust and improve outcomes.

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“ Common Discrimination Grievance Themes

Below is a **list of themes** identified through health plan data by which members have recently reported feeling discriminated:

Race/Ethnicity

Mental Health (depression/anxiety/bipolar)

Language

Health issues

Personal appearance

Prescription pain medication use

Current or Previous substance abuse or addiction

Disability and requesting assistance with disability forms

Homelessness

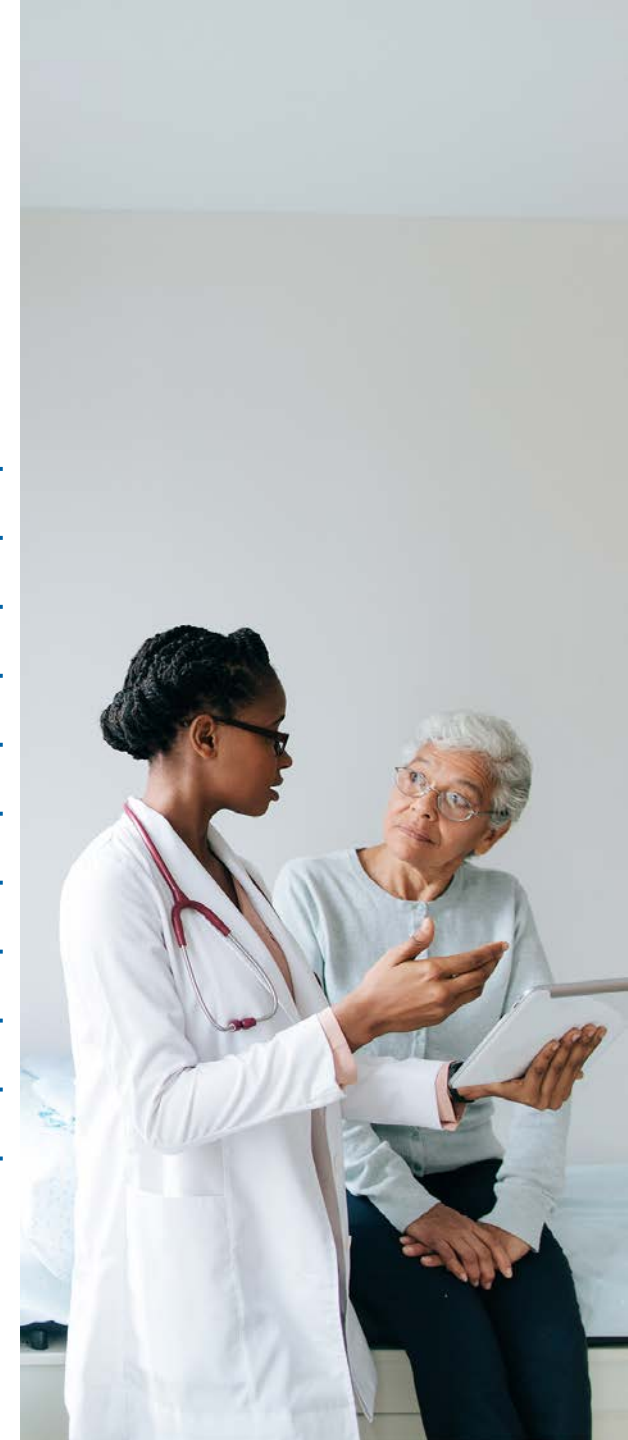
Covid and Covid precautions

Being a Medi-Cal member

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“ Supporting LGBTQIA+ Members

What is Gender-Affirming Care?

Gender-affirming care supports a person's gender identity through social, psychological, behavioral, and medical interventions, and is tremendously vital for transgender, non-binary, and intersex individuals. *Gender-affirming care honors bodily autonomy, affirms identity, and reduces mental health risks associated with gender dysphoria and social stigma.*

Core Components include:

- Affirming names and pronouns
- Family structure and relationships
- Mental health support
- Hormone therapy
- Surgical interventions (e.g., top or bottom surgery)
- Voice training and other supportive services



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“ Supporting LGBTQIA+ Members

Why Gender-Affirming Care Matters?

Transgender, Gender Diverse, and Intersex (TGI) individuals face disproportionate health disparities:

- Many TGI individuals may delay or avoid medical care due to anticipated discrimination.
- Mental health crises are more common when access to gender-affirming care is denied.
- Geographic and provider scarcity, long wait times, and insurance denials create added barriers.
- Health plans, providers, and support staff play a critical role in reducing these barriers and improving health outcomes.

Avoid assumptions about a person's **partner, spouse, or children**. Gender identity does not determine family structure. Always use inclusive language and ask open-ended questions to better support the member's lived experiences.

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“ Supporting LGBTQIA+ Members

Culturally Competent Practices in Action

Respectful Engagement:

- Geographic and provider scarcity, long wait times, and insurance denials create added barriers.
- Use correct names and pronouns.
- Avoid assumptions about gender or anatomy.
- Maintain privacy and dignity in discussions and documentation.

Health Plan Considerations:

- Provider directories should clearly indicate gender-affirming services.
- Simplify prior authorization requirements.
- Act promptly on grievances related to care.

Ongoing Education:

- Look out for community-based organizations that offer in depth LGBTQ+ training. Many offer resources free of charge or at low cost.



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KNOWLEDGE CHECK



Let's review what we've learned with a brief assessment.
Answers on following slide.

1. What is a significant factor that could influence health disparities in the Hispanic/Latino population?

- A) Too many options for healthcare services
- B) Language barriers and cultural health practices
- C) Dialysis

2. Per Health Plan data, which group is more likely to experience higher rates of hypertension?

- A) Hispanic/Latino
- B) African American
- C) Asian/Pacific Islander

3. How can healthcare providers reduce implicit bias?

- A) Avoid interacting with marginalized groups
- B) Provide general care without considering individual needs
- C) Engage in bias-awareness training and actively work to build trust



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ANSWER KEY

Use the Answer Key to check your responses.



1. What is the primary factor that influences health disparities in the Hispanic/Latino population?

B) Language barriers and cultural health practices

2. Which group is more likely to experience higher rates of hypertension?

B) African American

3. How can healthcare providers reduce implicit bias?

C) Engage in bias-awareness training and actively work to build trust

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“ KEY TAKEAWAYS

- You’ve gained insights into the demographics of patient populations and how these impact healthcare needs and experiences.
- We identified common health disparities among several specific demographic groups.
- You explored the role of cultural beliefs in healthcare delivery and how these impact patient care.

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“ Module 5 Look Ahead & Focus

Module 5 Look Ahead

Our next module, **Practical Implementation**, will transition from theory to action by exploring how to apply equity principles in real-world scenarios.

Focus

This module emphasizes data-driven approaches and continuous improvement strategies to ensure that equity initiatives are effective and sustainable.

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CONGRATULATIONS!

“ YOU COMPLETED MODULE 4

Understanding Member Demographics

*Now you should be ready to proceed to Module 5. **Click the Exit button and return to the main menu and click on Module 5 to proceed.***

Click **Exit**

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EXIT





Module 5

PRACTICAL IMPLEMENTATION OF HEALTH EQUITY PRINCIPLES

In this module, you'll learn review ways to
turn disparity trends into action.

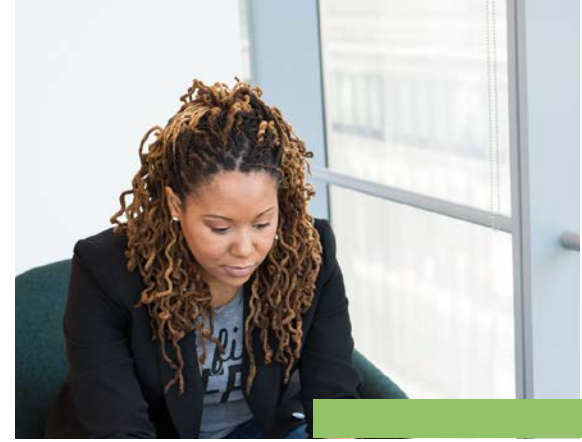
Duration: 20 Minute



Start



**HIGHLIGHTING WHAT
“ LEARNERS WILL ACHIEVE BY
THE END OF THIS MODULE**



Upon completion of this module, learners will :

- Apply practical implementation strategies to address tangible health equity challenges and disparities in healthcare settings.
- Examine how health equity impacts patient satisfaction and access to care.
- Analyze the effects of health equity on overall health outcomes.

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Implementation Strategies Overview



Implementation Strategies: Implementing health equity initiatives requires a comprehensive and systematic approach. This involves setting clear goals, developing action plans, and allocating resources to support efforts.

Successful implementation also requires strong leadership, commitment and continuous evaluation. Leaders must prioritize health equity as a core organizational value and model inclusive behaviors.

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DEMOGRAPHICS AND IMPLEMENTATION

- By adopting a strategic and inclusive approach, health teams can create a more equitable and inclusive environment for all patients and staff.
- Establishing focused goals and creating actionable steps for implementation of programs and initiatives, that align with organizational mission and patient needs.
- Develop **SMART** goals:
Specific, Measurable, Achievable, Relevant, Time-bound

Consider This:

- Focus on conducting cultural competency training, gathering feedback, forming health equity committees, and embedding health equity into policies.
- Collect and analyze patient demographic data to address disparities and collaborate with community partners to understand diverse needs and perspectives.

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“ How Can Understanding and Applying Specific Population Data Solve Problems?

Consider these examples of equity in action:

Driving Targeted Solutions: Using data showing high diabetes rates in a specific community to develop a culturally tailored health campaign promoting screening and prevention.

Unlocking Insightful Strategies: Analyzing data that reveals low vaccination rates in a population with language barriers, leading to outreach efforts in multiple languages and community-based clinics to improve access.

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Cultural Competency Training Development

How can culturally related training enhance patient engagement and address healthcare needs?



- Health plan data indicates that the most prevalent mental health disorders among males and females are "anxiety and fear-related disorders" (males 23%, females 31%).
- While both genders are experiencing similar disorders, successful treatment of both groups hinges in part on nuanced approaches for each.

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Benefits of Forming Diverse and Inclusive Committees

Establish diverse and inclusive committees to oversee progress, adapt initiatives to evolving community needs, and ensure accountability.



Community Advisory Committee

- The Health Plan consults its Community Advisory Committee for community insights, and health equity goals and progress are overseen by the Quality Improvement and Health Equity Committee (QIHEC)
- At a recent Community Advisory Committee (CAC) meeting, patients emphasized the importance of seeing their diversity reflected in the provider staff and requested that providers demonstrate greater empathy and respect.
- These findings underscore the committee's role in championing improvements in provider-patient relationships and advocating for a diverse workforce.

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Feedback Shapes Health Plan Solutions

- **Cultural Views on Illness:** Cultural beliefs shape how patients perceive illness and choose treatments.
- **Religious Beliefs:** Religious values influence decisions on end-of-life care, dietary restrictions, and medical interventions.
- **Traditional Remedies:** Some patients may use herbal medicine or acupuncture alongside conventional treatments.
- **Communication Preferences:** Cultural differences affect how much information patients wish to receive about their care.
- **Family Dynamics:** In many cultures, family involvement is crucial in healthcare decisions.



Member feedback helps shape the actions and changes needed to improve healthcare experiences and outcomes.

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Member Expectations and Provider Responses

CAC Member Expectations

Ample time and attention with healthcare providers to build connections

Positive interactions with staff and providers during appointments

Reduced feelings of discrimination and more diversity education

Accessibility to care and addressing healthcare system inefficiencies

Recommended Approaches

Give attention, express kindness, empathy, understanding, and listening during appointments

Express respect, responsibility, and professionalism toward members

Sensitivity regarding the Deaf and Hard of Hearing, ADA, and Trans Community

- Reduce long wait times to secure appointments
- Eliminate the need for referral request for return visits to the same specialist
- Remove the disconnect between members and healthcare providers

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“Fostering A Culture of Accountability”

“The Health Plan currently has committees and data gathering tools in place; what are other ways to assess equity and support a culture of accountability?”

Member Feedback on Quality and Access

- Health plan grievance data shows that Hispanic/Latino populations have the highest grievance rates, with themes including quality of care and access to services.
- This feedback reinforces the need for regular assessments that address gaps in service quality and access, and highlights the importance of continuous improvement to reduce member dissatisfaction.

Provider Actions

- Providers can work to ensure equity initiatives are regularly assessed and refined, with accountability mechanisms holding leaders and staff responsible for advancing objectives.
- Fostering a culture of accountability requires gaining feedback through tools like surveys, assessments, and progress reports to track equity efforts and identify areas needing improvement

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“ Continuous Improvement

Maintaining a focus on continuous improvement, healthcare organizations can ensure that their health equity initiatives are effective, sustainable, and responsive to the needs of all.

It also involves celebrating successes and recognizing individuals and teams who contribute to equity efforts.

- Celebrate successes and recognize contributions to equity efforts.
- Regularly review and refine policies, practices, and programs.
- Use feedback and data to drive decisions and change.
- Track progress, identify gaps, and implement corrective actions.
- Foster accountability by holding stakeholders responsible for promoting health equity.

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Addressing Gaps and Implementing Equity Strategies Based on Data Insights

Reducing chronic health disparities requires targeted, culturally informed, and gender-sensitive programs that address the unique health needs of diverse communities.

Take Action

- **Preventive Care Programs:** Create culturally relevant initiatives that include nutrition counseling, accessible screenings, and education campaigns tailored to specific communities.
- **Chronic Disease Management:** Implement gender-sensitive care models that address the unique health challenges faced by women, particularly in managing diabetes and hypertension.
- **Community Engagement:** Collaborate with local organizations and leaders to improve outreach and build trust within Hispanic and African American populations.

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Populations with Limited English Proficiency (LEP)



- Strengthen translation and interpretation services to ensure equitable care for LEP members.
- LEP members face challenges receiving translated materials and information compared to English speakers.
- Low interpreter use among Asian language speakers, including Tagalog and Hmong, requires increased outreach.
- No less than 35% of patients prefer non-English communication, but only ~60-70% of total preferences are captured.
- The gap highlights the need for robust interpreter services to address language barriers.
- LEP survey results show lower ratings for access to timely written and verbal information in their language.

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“ REFLECTION FOR PRACTICAL IMPLEMENTATION

Now you will reflect on what we have learned about action planning for equity, data, continuous improvement, accountability, feedback, and addressing gaps. Consider the questions below before moving on to the scenario activity.

- Are we addressing health disparities within our patient population?
- Have we engaged community stakeholders to understand underserved groups' needs?
- Are our interventions culturally aligned with diverse populations' needs?
- Are we using feedback and data to refine our equity strategies?
- How are we tracking the long-term impact on disparities?
- Are we fostering an inclusive environment where every patient feels respected?

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“ KEY TAKEAWAYS

- You reviewed health plan feedback and findings to gain real world insights into effective strategies for **Inclusive Care**, embedding equity in all aspects of care, fostering respect and value for patients.
- We covered **Data-Driven Refinement** using feedback and data to track progress and adjust DEI strategies.
- You learned the value of **Culturally Aligned Interventions**, tailored to address the unique needs of diverse populations.

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“ Module 6 Look Ahead & Focus

Module 6 Look Ahead

In Module 6 you will complete scenario activities where theory meets practice. This module, **Scenario Activity**, will bring everything together. You will apply what you have learned so far.

Module 6 Focus

You will focus what you have learned to address real-world healthcare scenarios.

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CONGRATULATIONS!

“ YOU COMPLETED MODULE 5

Practical Implementation of Health Equity Principles

*Now you should be ready to proceed to Module 6 Scenario Activity. **Click the Exit button to proceed to the Main Menu, then select Module 6.***

Click **Exit**

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Exit





Module 6

SCENARIO ACTIVITY

In this activity module, scenarios are used as theory meets practice. It's your opportunity to apply everything you've learned so far—principles, data analysis, cultural responsiveness, and strategies for addressing disparities—in simulated healthcare scenarios.

Duration: 15 Minute



Start



“Instructions

1

Read the Scenario Carefully: Each scenario presents a unique challenge that a healthcare provider might face. Take your time to understand the details of the situation, including the patient’s background, concerns, and the context of the interaction.

2

Review the Options: For each scenario, you will be presented with two possible options for responding to the situation. Each option represents a different approach to handling the issue, and not all options will lead to a positive outcome.

3

Evaluate the Outcomes: Think critically about how each option would affect the member’s experience. Consider the following factors:

- Will this option improve or worsen the patient’s trust in their care?
- Does it demonstrate cultural competence, empathy, and understanding?
- Will this option address the patient’s concerns effectively?
- How might this impact the patient’s overall health outcome?
- Is this plan of care based on the patient’s needs and no external influences or factors?

[Click here to begin](#)

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Start





TIME, ATTENTION, AND CONNECTION WITH PROVIDERS

*Read the scenario carefully.
Click the next button to view options
for responding to this scenario.*




Sarah, a 45-year-old Latina woman, has been struggling with debilitating back pain for over five years. Once an active member of her community, she now finds it difficult to do simple tasks like cooking for her family or taking care of her children. Her work as a housekeeper has become increasingly hard, and she's had to cut back her hours due to the pain. Over the years, she's visited multiple doctors who have dismissed her concerns, offering only quick fixes like painkillers without fully investigating the root cause of her condition. Today, Sarah walks into your office, her face lined with frustration and exhaustion. "I'm tired of being ignored," she says, her voice strained. "It's like no one wants to help me—they just rush me out the door with another prescription. I can't keep living like this."

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CHOOSE THE BEST OPTION

TIME, ATTENTION, AND CONNECTION WITH PROVIDERS

“ ***Click the option you believe is the most appropriate response based on the principles of health equity and patient-centered care. After selecting, review the feedback to understand why certain choices are better than others and how they align with equitable practices.*** 

Option 1:

Tell her that, unfortunately, due to time constraints, you need to focus on writing her a quick prescription. Let her know she can book another appointment if the pain persists.

Click an option

OPTION 1

Option 2:

Acknowledge Sarah's frustration and take extra time to ask questions about her pain, her history, and how it affects her daily life. Actively listen without interrupting, showing empathy for her experience.

OPTION 2

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FEEDBACK

You selected the least beneficial choice. Sarah leaves the office feeling even more dismissed and frustrated, perceiving the interaction as another instance of her concerns being minimized. She may delay seeking further care or abandon the healthcare system altogether.

Why this is the least beneficial: This response reinforces Sarah's perception that healthcare providers are unwilling to address her pain meaningfully. It may damage trust, decrease engagement, and contribute to ongoing health inequities.

Consider this: Time constraints are a reality, but dismissing a patient's concerns without acknowledgment erodes the relationship and risks worsening the situation.

[Click here for next scenario](#)

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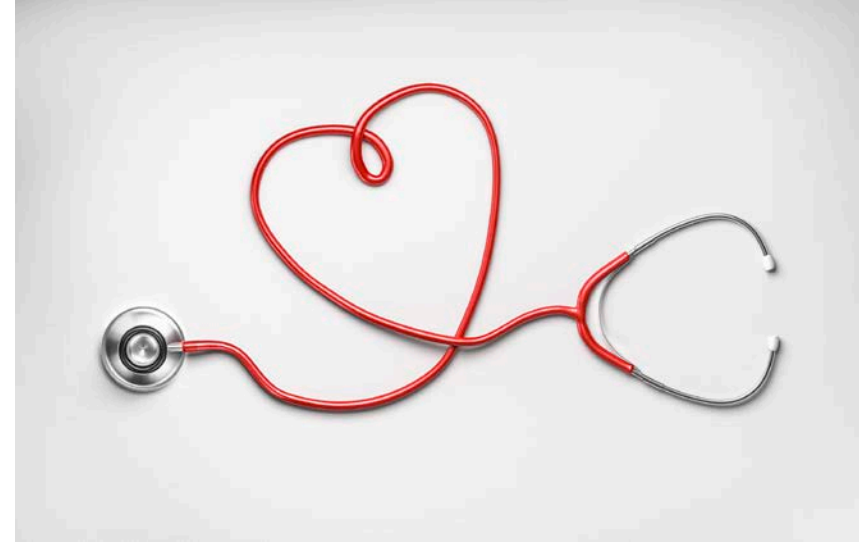
1





FEEDBACK

You selected the best choice! Sarah feels heard and validated for the first time in years. She opens up about her struggles, providing a clearer picture of how her pain impacts her daily life and mental health. This deeper understanding helps you identify potential underlying causes and develop a more tailored care plan.



2

Why this is the best choice: Taking the time to listen builds trust and rapport, essential for patients who have felt dismissed in the past.

Consider this: This approach might slightly extend the appointment time, but the benefits of patient satisfaction and improved care outweigh the inconvenience.

[Click here for next scenario](#)

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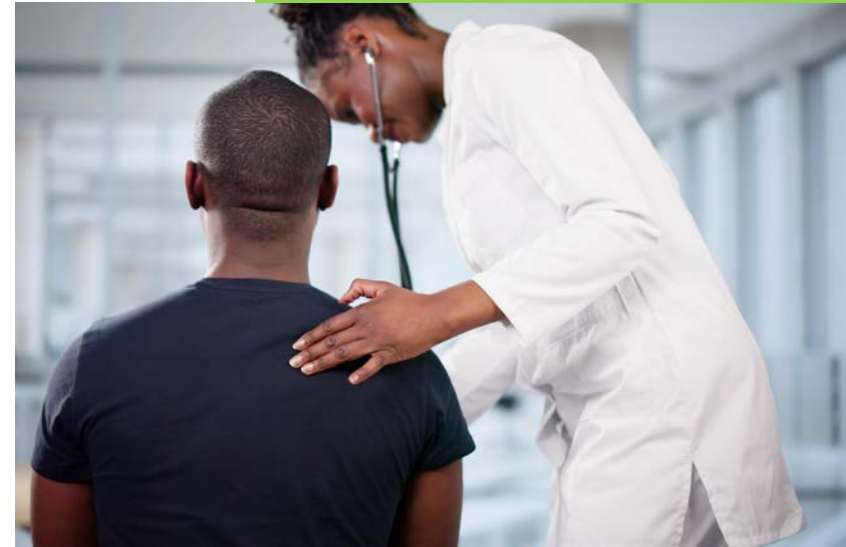
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DIVERSITY OF PROVIDERS AND STAFF

*Read the scenario carefully.
Click the next button to view options for responding to this scenario.*



Dontae, a 35-year-old Black man, has always been proactive about his health, regularly working out at the gym and eating well. Lately, though, he's been feeling fatigued, and his blood pressure has been creeping up, despite his efforts to stay healthy. As someone who takes pride in being in control of his life, Dontae is now feeling uncertain about his health and is looking for answers. He's arrived at your clinic for a check-up but is immediately uncomfortable. He notices that none of the staff, from the receptionist to the doctors, look like him. When you call him in for his appointment, Dontae sits down stiffly and says, "I'm not sure if anyone here understands me. I've had issues with doctors in the past who didn't get my background or didn't seem to take me seriously because of where I come from. I'm worried that's going to happen again."

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CHOOSE THE BEST OPTION

DIVERSITY OF PROVIDERS AND STAFF

“ **Click the option you believe is the most appropriate response based on the principles of health equity and patient-centered care. After selecting, review the feedback to understand why certain choices are better than others and how they align with equitable practices.** ”

Option 1:

Acknowledge Dontae’s feelings and offer to connect him with a provider from a similar cultural background, if available. If not, explain how your team can work to make him feel more comfortable and understood in his care plan.

[Click an option](#)

OPTION 1

Option 2:

Dismiss his concerns by saying, “Race shouldn’t matter. All doctors are trained the same way, and it doesn’t affect your treatment. Just focus on the medical care you’re receiving.”

OPTION 2

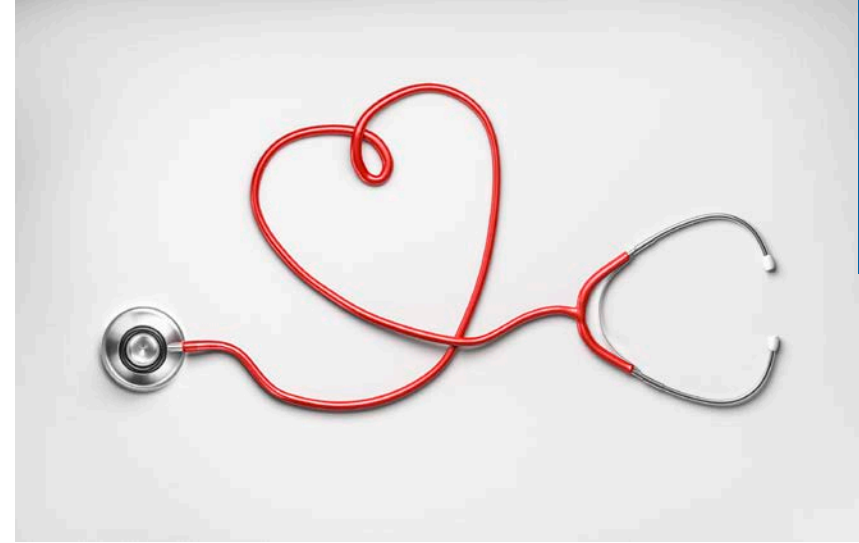
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FEEDBACK

You selected the best choice! Dontae feels his concerns are taken seriously, and he begins to trust you and the clinic. If a culturally matched provider isn't available, explaining your team's commitment to inclusivity reassures him that his background and experiences matter in his care.



1

Why this is the best choice: Actively acknowledges and addresses Dontae's concerns while offering a solution that respects his preferences. This approach builds trust and validates his lived experience.

Consider this: Availability of a culturally matched provider may be limited, but offering alternatives ensures Dontae feels prioritized and supported.



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FEEDBACK

You selected the least beneficial choice.

Dontae feels dismissed and invalidated, reinforcing his mistrust of healthcare providers. He may disengage from care entirely or avoid follow-up visits, worsening his health outcomes.



2

Why this is the least beneficial: Ignores Dontae's legitimate concerns and perpetuates the distrust many patients from marginalized communities feel toward the healthcare system.

Consider this: Dismissing cultural concerns undermines the importance of trust and rapport in patient-provider relationships.



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FEELING OF HOW ONE IS TREATED BY STAFF AND PROVIDERS

*Read the scenario carefully.
Click the next button to view options for responding to this scenario.*



Maria, a 60-year-old immigrant from Mexico, has been living in the U.S. for over two decades, but she still struggles with English, especially in medical settings. Today, she's back at the clinic for a follow-up on her cholesterol treatment. She arrived early to fill out the paperwork but found the forms confusing and difficult to understand. As she approached the front desk to ask for help, the receptionist barely looked up, muttering something without making eye contact. Maria felt dismissed and embarrassed, and after struggling through the paperwork alone, she's now sitting in front of you. Her hands are trembling slightly, and her eyes avoid yours as she explains, "I asked the lady for help, but she seemed so busy and didn't care. It made me feel like I was bothering her. I don't know if I filled the forms out right."

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CHOOSE THE BEST OPTION

FEELING OF HOW ONE IS TREATED BY STAFF AND PROVIDERS

“ **Click the option you believe is the most appropriate response based on the principles of health equity and patient-centered care. After selecting, review the feedback to understand why certain choices are better than others and how they align with equitable practices.** ”

[Click an option](#)

Option 1:

Apologize for her experience, validate her feelings, and assure her that this behavior will be addressed with the staff. Proactively offer qualified interpreting services to her and offer to personally assist her with the paperwork or ensure she has the help she needs in future visits.

OPTION 1

Option 2:

Tell her that the front desk staff are very busy and that her questions might have interrupted their workflow, but they were likely just trying to keep things moving efficiently.

OPTION 2

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FEEDBACK

You selected the least beneficial choice. Maria feels further dismissed, believing her concerns are not important. This response may make her reluctant to ask for help in the future, exacerbating her discomfort and mistrust in the healthcare system.



2

Why this is the least beneficial choice: Excusing the behavior of staff undermines Maria's experience and fails to address the root issue. Dismisses her feelings and fails to address her concerns, perpetuating a cycle of mistrust. It perpetuates the feeling of being unwelcome or a burden.

Consider this: Efficiency cannot come at the expense of patient respect and dignity. This requires taking immediate action and additional time, but it establishes trust and shows Maria her care is a priority.

[Click here for next scenario](#)

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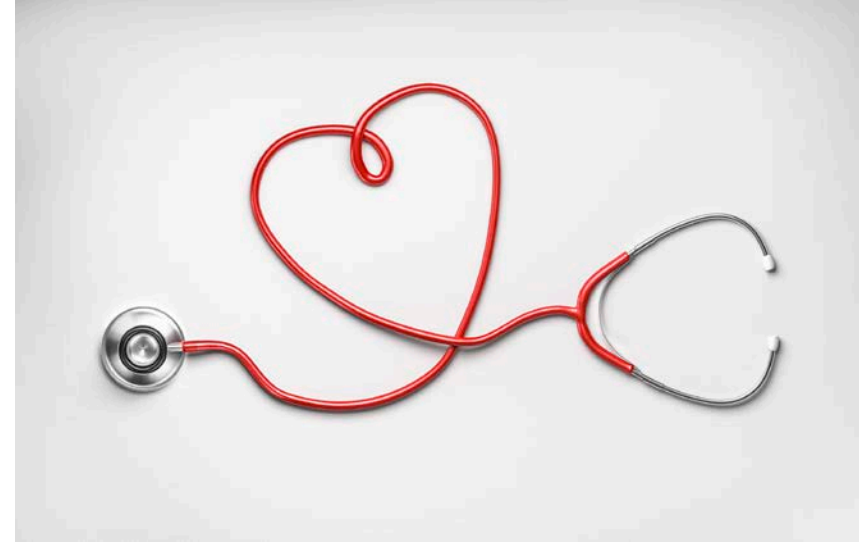


FEEDBACK

You selected the best choice! Maria feels heard, respected, and reassured. She leaves confident her concerns are taken seriously and that future visits will be more supportive. Offering interpreting services and assistance with paperwork resolves her immediate issues and builds trust in the clinic's commitment to equitable care.

Why this is the best choice: This approach directly addresses Maria's concerns and provides immediate, tangible support while ensuring she won't face the same issue in future visits. It also reinforces inclusivity and empathy.

Consider this: This requires taking immediate action and additional time, but it establishes trust and shows Maria her care is a priority. This Requires extra time but significantly enhances patient satisfaction and engagement.



1



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TIME, ATTENTION, AND CONNECTION WITH PROVIDERS

*Read the scenario carefully.
Click the next button to view options
for responding to this scenario.*



John is a 38-year-old Deaf patient who relies on American Sign Language (ASL) to communicate. During his last appointment, the doctor spoke directly to his interpreter, instead of addressing John himself. This made John feel invisible, as if his presence didn't matter. Today, he arrives for a follow-up appointment, nervous about whether the same thing will happen again. John arrives with his interpreter, and as they sit down, he hesitates for a moment before signing, "Last time, the doctor didn't talk to me—he talked to the interpreter the whole time. It felt like I wasn't even in the room. I don't want to go through that again."

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CHOOSE THE BEST OPTION

FEELINGS OF DISCRIMINATION AND NEED FOR DIVERSITY EDUCATION

“ **Click the option you believe is the most appropriate response based on the principles of health equity and patient-centered care. After selecting, review the feedback to understand why certain choices are better than others and how they align with equitable practices.** ”

Option 1:

Apologize and assure John that you will directly communicate with the provider while the interpreter signs. Also, suggest that all staff will attend a workshop on communicating with Deaf and Hard of Hearing patients to improve their interactions prior to his next visit.

Option 2:

Dismiss John's concern and tell him that it's more efficient for the provider to speak to the interpreter because it saves time, and they have other patients waiting.

Click an option

OPTION 1

OPTION 2

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FEEDBACK

1

You selected the best choice! John feels acknowledged and reassured that his concerns are being taken seriously. Speaking directly to him shows respect for his autonomy and presence, restoring trust. Communicating the plan to the team ensures consistent care during his appointment.



Why this is the best choice: Taking the time to listen builds trust and rapport, essential for patients who have felt dismissed in the past. This approach directly addresses John's concerns, ensures immediate action, and restores his confidence in the clinic. Scheduling an interpreter for his next visit is proactive.

Consider this: Requires coordination with the team but provides an immediate and effective resolution that prioritizes respect and inclusion.

Click here for next scenario

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FEEDBACK

You selected the least beneficial choice!

John feels invalidated and dismissed, reinforcing his belief that his presence doesn't matter. This likely damages trust and discourages him from seeking future care at your facility.



2

Why this is the least beneficial choice: Efficiency is prioritized over patient-centered care, perpetuating feelings of exclusion and disrespect. This response fails to meet basic standards of empathy and inclusivity.

Consider this: While time management is important, it should never compromise the dignity and experience of a patient.

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REFLECTING ON YOUR CHOICES

If you chose mostly Best Answers:

Great job! You demonstrated a strong understanding of equity principles and how to apply them in real-world scenarios. Continue building on this foundation by practicing empathy, active listening, and inclusive communication in your daily work.

If you chose mostly Least Beneficial Answers:

This is an opportunity to grow. Take some time to review the best practices and key takeaways to better understand how to foster trust, validate patient concerns, and create inclusive experiences. Reflect on how small, intentional actions can make a big difference in patient care.



"Every interaction is a chance to learn and improve. By reflecting on your choices and applying best practices, you can create a more inclusive and equitable healthcare environment for all."

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BEST PRACTICES

"By reflecting on your choices and applying best practices, you can create a more inclusive and equitable healthcare environment for all."



ACKNOWLEDGE AND VALIDATE CONCERNS

APOLOGIZE SINCERELY AND ACTIVELY LISTEN TO VALIDATE PATIENT FEELINGS, REBUILDING TRUST AND FOSTERING RESPECT.



PROVIDE IMMEDIATE SUPPORT

ADDRESS IMMEDIATE CHALLENGES BY OFFERING RESOURCES LIKE INTERPRETING SERVICES, ASSISTANCE WITH PAPERWORK, OR ACTIONABLE NEXT STEPS TO RESOLVE CONCERNS.



SPEAK DIRECTLY TO THE PATIENT

ALWAYS ADDRESS THE PATIENT DIRECTLY, EVEN WHEN COMMUNICATING THROUGH AN INTERPRETER, TO ENSURE THEY FEEL INCLUDED AND RESPECTED.



FOSTER EMPATHY

USE SIMPLE YET IMPACTFUL ACTIONS LIKE MAINTAINING EYE CONTACT, OFFERING A WARM TONE, AND SHOWING GENUINE COMPASSION TO CREATE A WELCOMING ENVIRONMENT.



PREPARE THE TEAM

COMMUNICATE SPECIFIC PATIENT NEEDS, SUCH AS CULTURAL OR ACCESSIBILITY CONSIDERATIONS, TO THE TEAM IN ADVANCE TO ENSURE A CONSISTENT AND RESPECTFUL EXPERIENCE.



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KEY TAKEAWAYS

Address	Address Staff Behavior <i>Escalate concerns and hold staff accountable by providing targeted training in empathy, cultural competency, and effective communication.</i>
Invest	Invest in Cultural Competency Training <i>Train your team to understand and respect cultural nuances, even when direct representation isn't available, to create an inclusive environment.</i>
Improve	Improve Accessibility <i>Make materials and processes clear, user-friendly, and available in multiple languages or accessible formats to accommodate diverse patient needs.</i>
Build	Build Trust Through Action <i>Follow through on commitments to improve care, ensuring patients see their concerns lead to meaningful and visible changes.</i>
Provide	Provide Resources and Representation <i>When possible, connect patients with culturally aligned providers, cultural liaisons, or patient advocates to build understanding and support.</i>



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**“ YOU COMPLETED THE
SCENARIO ACTIVITY!**



"Addressing systemic challenges begins with individual moments of care."

What You Did:

- You worked through simulated scenarios applying equity principles like active listening, empathy, and cultural competency.
- Critical thinking was used to address patient concerns and ensure long-term improvements.

Why It Matters:

- These activities demonstrated how small, intentional actions rebuild trust and improve patient-provider relationships.
- Addressing systemic challenges ensures equitable healthcare and meets individual patient needs.

Next Steps:

- Complete the Course Recap, Module 7
- Complete the Course Attestation Form



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Exit





Module 7

Course Summary

In this module, you'll recap what you learned in this course and affirm completion.

Duration: 6 Minute



Start



” WELCOME TO THE COURSE SUMMARY

Welcome to the final module in the Excellent Health Outcomes for All: Principles and Practices. This module will recap key learning points and direct you to provide your attestation of course completion.



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RECAP THE KEY TAKEAWAYS UPON “COMPLETION OF THIS COURSE



As we conclude this course, let's review the key objectives and insights from each module:

Module 1: Introduction

- The purpose of the course and what to expect.

Module 2: Foundations of Excellent Health Outcomes for All

- Understand the core principles of health equity and their importance in Healthcare.
- Recognize the significance of health equity in improving patient outcomes.

Module 3: Workforce Diversity and Cultural Responsiveness

- Explore the value of a diverse healthcare workforce.
- Learn strategies to provide culturally responsive care and recognize institutional biases.

Module 4: Member Demographics

- Understand the impact of demographics on patient care and health disparities.
- Recognize the role of cultural beliefs in healthcare delivery.

Module 5: Practical Implementation

- Learn to identify and address disparities through data.
- Understand how social determinants of health contribute to inequalities.

Module 6: Scenario Activity

- Apply health equity principles to real world scenarios.

Module 6: Summary

- Recap what has been learned.

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NEXT STEPS



1. Complete the Course Completion Attestation

This form confirms you have completed the training. The link is on the following slide. For Network Providers, Subcontractors, and Downstream Subcontractors.

2. Provide Course Feedback

Your feedback is valuable! Please email CLServices@hpsj.com to share your thoughts on how this training can provide additional value.

3. Implement What You've Learned

Talk with your colleagues about how you can apply this information to improve health outcomes for our diverse member population!

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CONGRATULATIONS!

**“YOU COMPLETED
the course!**

**Excellent Health Outcomes for All:
Principles and Practices.**

Click **Provide Attestation** to submit your form

Provide Attestation

