

Connect for Health Colorado

Health Equity Project

Background

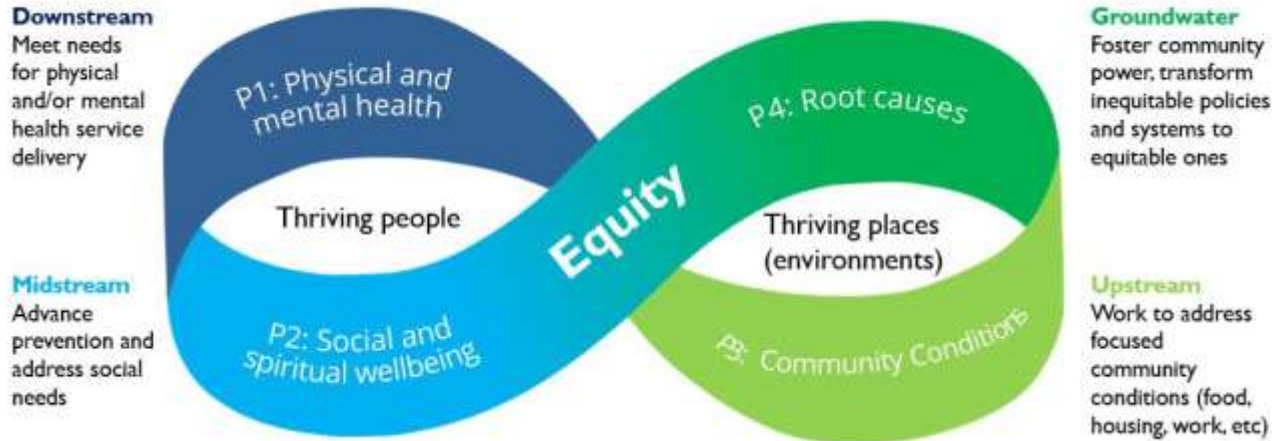
National Academy for State Health Policy

Mission: To be of, by, and for all states by providing nonpartisan support for the development of policies that promote and sustain healthy people and communities, advance high quality and affordable health care, and address health equity..

NASHP Emerging Leaders of Color Fellowship

Fellowship is an immersive program that aims to empower emerging and aspiring state health policy leaders of color — particularly those from communities most impacted by health inequities — with the tools to build a career in executive branches of state government and lead the development and administration of more equitable state health policy informed by their lived experiences.

Pathways to Population Health Equity



An intentional examination of portfolio 4 was agreed upon. This to measure the relationship with populations of lived experience and Omnisalud.

Portfolio 4 - Root Causes

C4HCO interests are to

- 1) Influence policies and support investments to address root causes of health inequity;
 - 1) Language support and financial assistance to assist with communication barriers.
- 2) Grow the power and leadership of those affected by inequities to lead and own the change process;
 - 1) Example: Provision of grants and supports to community organizations to train community members to help their own communities access health insurance.

Health Compass

- Developed in collaboration with Centers for Disease Control and Prevention (CDC), the Association of State and Territorial Health Officials (ASTHO), and We in the World. To help guide the work of Health Equity to take meaningful action to advance Health Equity.
- Root causes — Working with communities of color and other marginalized groups to address historic and present-day structural inequities, and to shift narrative, policies, and investments to grow community power and build a more equitable system.

How the compass is structured

Core Transformation Skills	Physical and/or Mental Health of People	Social and/or Spiritual Well-being of People	Community Conditions	Root Causes
<ul style="list-style-type: none"> • Equity • Stewardship • Communication • Partnerships with people with lived experience • Understanding our populations through an equity lens • Community collaboration • Budgeting and payment 	<ul style="list-style-type: none"> • Data for physical and/or mental health • Advance population health strategies • Direct care services <ul style="list-style-type: none"> ○ Integrated care ○ Care management 	<ul style="list-style-type: none"> • Data for social and/or spiritual well-being • Planning around social needs • Direct care services: <ul style="list-style-type: none"> ○ Screen for and address social needs 	<ul style="list-style-type: none"> • Common vision • Concrete aims • Shared theory of change/community strategy • Set measures with the community • Community access to data 	<ul style="list-style-type: none"> • Power sharing • Growing community leadership and voice • Institutional/health department policy • Public policy and context • Directing fiscal and human resources • Aligning and leveraging assets

Project Rollout

- Determine area of need for C4HCO
 - Understanding the relationship between C4HCO and community organizations and how they engage their respective communities.
- Determined explorative mixed methods design (Quan/Qual)
- Deliver assessment tool (Qualitative Data)
- Use results to determine questions for focus group conversations
- Report focus group feedback to C4HCO board.



Focus Group

Assistance Network Focus Group

- Cohort of community-based organizations (CBO's) C4HCO contracts with to provide enrollment assistance.
- Respective CBO's provide services to Latin X, Rural, African American, LGTBQ, and respective age group populations.
- Representative from all areas of Colorado.



Results from Compass



Connect for Health Colorado

Pathways to Population Health Equity Compass: Looking at Root Causes

WELCOME TO YOUR ASSESSMENT REPORT

Thank you for taking the time to assess your organization in the Pathways to Population Health Equity. This report provides feedback on your progress and suggestions of resources that may help you plan your next steps. If other people from your organization are also taking the Compass, we strongly encourage you to meet together to go over the results. Compare answers with other members of your group. Where members of your group have a score difference of 4 or more points, discuss why you might have such different answers. This could be because people have access to different pieces of information or resources within your collaboration, or might arise from improvement opportunities. The greatest value of this tool is to foster a dialogue within your team or collaboration to help identify strategies to improve. Come up with a final answer as a group based on your conversation.

Overall, your organization is at the Gaining Skill level.



You have made some good progress on your population health equity journey. You are gaining skills and have probably established some important habits about ensuring that equity considerations are discussed and factored into your decision-making. This is a time to begin to build a more balanced strategy in partnership with communities experiencing inequities. Your Compass scores by section are below. Identify a few places you want to build your health equity capacity using the detailed assessment findings below—then go to www.publichealthequity.org or the [Public Health and Equity Resource Navigator](#) to find resources to take action.

For more context and recommendations on achieving better results in each area, see the [Compass](#).



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Focus group questions

- How does your organization respond to be more equitable?
- How can Connect for health Colorado assist, in improving community partnerships?
- How does your organization give leadership voice to those who have less “voice”
- What Data collection needs/wants/wishes do you have?



How does your organization respond to be more equitable?

- language justice - currently revisiting our "phone tree" system to make it so that people calling in can be attended to as quickly as possible in their preferred language without having to wade through a bunch of introductory messages/choices in English.
- we offer services in both Spanish and English, we offer virtual and in-person help.
- For strategic planning - incorporating "SMARTIE" goals - with the usual SMART goal framework, but making sure to include "I" inclusion and "E" equity in any goals we create during the strategic planning process.
- We offer services in Spanish and English. We do have bilingual staff. We also have a language line. We also offer in services, virtual, phone and in person.

Theme: Language interpretation



How can Connect for health Colorado assist, in improving community partnerships?

- There is plenty of opportunity for improvement,
- Continuing to provide grant opportunities!
- **I'd like to take this opportunity to shout out to C4HCO's outreach team, Jess and Maria, who is always talking about community partnerships.**
- Would love to see newer collaborations formed to help address the needs of the newly arrived migrants in the metro area
- I always appreciate when those grant opportunities are directed to specific community engagement projects! So they make our work more meaningful!

Theme: Funding



How does your organization give leadership voice to those who have less “voice”

- It's hard work and you have to understand the different cultures in each community
- Curious what within an organization allows or inhibits outside collaboration.
- *To be constantly aware when coming to the table with those in the community - are we truly "power sharing" and acting as collaborators, rather than gate keepers (of funding, resources, etc.)*
- We hire bicultural bilingual staff and try to hire people who live in the community
- We also focus on language justice
- We collaborate with PH to do a community needs assessment

Theme: Inclusion



What Data collection needs/wants/wishes do you have?

- EBNE for each insurance type by zip code
- maybe info on where these communities are centralized by zip codes
- Uninsured rate within the communities we serve
- How many people understand equality vs equity
- EBNE is always a top request
- Health insurance literacy rates
- Not sure how that would be measured but would be interesting to know where classes are offered and where gaps are missing

Theme: Eligible But Not Enrolled Data



Recap of themes of focus group

- **Theme: Language interpretation**
- **Theme: Funding**
- **Theme: Inclusion**
- **Theme: Eligible But Not Enrolled Data**



Questions?

Thank you



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