Los Angeles County Department of Health Services
Equity, Diversity, Inclusion, and Antiracism Initiative

STRATEGIC PLAN

2022 - 2024

Health Services
LOS ANGELES COUNTY

EDIA
INITIATIVE

Equity
Diversity
Inclusion
Antiracism

As the DHS Equity, Diversity, Inclusion, and Antiracism (EDIA) Council,

we are proud to present the draft of the Department of Health Services' first-ever EDIA Strategic Plan. Catalyzed by the July, 2020 Los Angeles County Board of Supervisors' motion declaring racism a public health crisis, DHS launched an ambitious EDIA Initiative with the goal of transforming systemic policies and practices that have contributed to inequitable employment and patient care at DHS. As the Covid pandemic intensified the urgency to act, DHS leadership recognized that the gravity of the situation demanded not only bold solutions, but also a willingness to transform the change process itself. We cannot achieve equitable and inclusive outcomes without employing equitable and inclusive means. And we cannot let our sense of urgency betray our desire to meaningfully include all stakeholders, especially those with historically marginalized identities.

The EDIA Initiative embodied equity by carving out dedicated time for DHS workforce members to participate, creating a new EDIA timecode to capture hours spent on EDIA efforts, and by providing fair compensation and language access for participating patients and community members. The Initiative modeled inclusion by creating two types of strategic planning groups: six enterprise-wide affinity groups for workforce with marginalized identities and eight facility/program-based committees composed of patients, community members, and employees and contractors with a wide variety of roles—from custodians, case workers, and physicians to electricians, nurses, and analysts. The planning groups centered input from 33 listening sessions with 392 patients, community members, and workforce as they drafted the recommendations included in this strategic plan.

This draft plan represents months of reflection, discussion, and visioning to earnestly and compassionately address stakeholder needs and hopes. While many concerns were raised that fall under the jurisdiction of other LA County departments and policies, the planning groups recommended cross-departmental collaboration and advocacy to advance stakeholder concerns. We offer this plan as a first step, a solid foundation on which we can continue to build and improve, letting our commitment to justice guide us in creating a health system that nurtures the wellbeing of everyone. We are excited to receive your feedback. What parts do you love? Do you see your perspective and needs represented? What would you change? Attend a workforce, patient or community listening session or complete a workforce or patient/community feedback survey. We will use your responses to help us finalize the best version of this strategic plan. Thank you for your trust and engagement.

To our health,

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Health Services
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VALUES

Accountability
Anti-oppression
Antiracism
Diversity
Equity
Inclusion
Justice
Love
Transparency
Visionary

VISION

DHS will be a model integrated and affirming health system with a diverse, equitable, inclusive and antiracist culture in which all people—particularly historically marginalized communities—can thrive and have equitable access to experience justice, trust, safety, and love through all stages of employment and community wellness.

MISSION

To advance equity and justice for all patients, workforce, and communities in which we live, work, and serve by providing timely and high-quality trauma-informed care, dismantling systemic anti-Black racism, creating an inclusive and culturally humble work environment, and strengthening community-based collaboration.

CONTRACTS & PROCUREMENT

OBJECTIVE – Utilize DHS's economic power to optimize benefit for the community through shared capacity building which improves contract selection criteria that emphasize shared decision making, diversity, environmental impact, equitable business practices, and fiscal responsibility.

MEASURE OF SUCCESS #1

Appoint a Supplier Diversity Director tasked with developing and implementing a publicly accessible data monitoring system for tracking demographic data and living wage standards of tier 1 and tier 2 contracted entities to ensure alignment with EDIA principles and compliance to State and County statutory requirements.

TARGET – JUNE 2023

Appoint a Supplier Diversity Director who will collaborate with the DHS-wide EDIA Office/ Committee to direct development and implementation of a vendor EDIA performance expectation compliance score and data monitoring system of tier 1 and tier 2 service and procurement contracts and purchase orders. Compliance score will include, but is not limited to, diversity demographics, living wage, and utilization of a standardized tool for staff, patients, businesses, and community members to provide feedback on vendor interactions.

TARGET – JUNE 2024

Perform baseline assessment and analysis of vendor compliance score and tier 1 and tier 2 service and procurement contracts and purchase orders. Report findings in a publicly accessible dashboard and provide statutory reporting to the LA County Board of Supervisors and California Office of Statewide Health Planning and Development.

Develop a plan to 1) achieve BOS' target of 25% or increase by 5-10% above baseline, whichever value is greater, in CBE-certified diverse business participation; 2) increase percentage of contracts with living wage salary floor requirements; and 3) increase direct outreach and relationship building with diverse businesses.

MEASURE OF SUCCESS #2

DHS will encourage ISD to revise the bid review process and contract award criteria to prioritize businesses with greater workforce diversity and lower environmental impact, and to deepen its commitment to the economic empowerment of marginalized communities by providing local workforce capacity building.

TARGET – JUNE 2023

Supplier Diversity Director will develop a bidirectional relationship with ISD and utilize DHS's vendor EDIA performance expectation compliance score and data monitoring system to advocate for 1) revision of the bid review process; 2) revision of contract award criteria; and 3) provision of local workforce capacity building to deepen ISD's commitment to the economic empowerment of marginalized communities.

TARGET – JUNE 2024

Ongoing from year 1.

EDUCATION & DEVELOPMENT

OBJECTIVE #1 – Create a mandatory, annual, and interactive EDIA/Trauma-Informed, Resilience-Oriented (TIRO) capacity building workshop for all DHS workforce members.

MEASURE OF SUCCESS #1

The EDIA Office/Committee will collaborate with subject matter experts and stakeholders to create a comprehensive mandatory training for all new hires and existing workforce members, including any applicable supplemental trainings based on position or leadership role. Annual course and supplemental trainings to be updated to address systemic and environmental factors for any evolving and relevant EDIA principles and concepts deemed necessary and appropriate for inclusion.

TARGET – JUNE 2023	TARGET – JUNE 2024
Appoint an EDIA Education & Development Lead who will collaborate with DHS-wide EDIA Office/ Committee and multiple stakeholders (diverse in terms of gender, race/ethnicity, educational background, work title, sexual orientation, and ability) to design the required and supplemental EDIA training, including assessing baseline knowledge; finding subject matter experts; defining methodology (online/in person; length) and content/curriculum; logistics of implementation; policies and procedures; and determining plan for ongoing data collection, evaluation, and training revision.	Initiate a pilot EDIA/TIRO training program to include workforce members representing diverse DHS facilities/units, disciplines, employment level, and demographics.

MEASURE OF SUCCESS #2

All trainings must include pre- and post-tests and course evaluations to measure changes in attitudes, increase in knowledge, and overall course satisfaction.

TARGET – JUNE 2023	TARGET – JUNE 2024
Create course evaluation instruments and submit for feedback from subject matter experts and stakeholders outlined in Measure 1.	Conduct pre- and post-training assessments to determine EDIA/TIRO knowledge gain and level of course satisfaction. Utilize data from training evaluations to revise required EDIA/TIRO training design/curriculum. Continue to collect and guide continuous quality improvement of EDIA/TIRO Education & Development as needed.

EDUCATION & DEVELOPMENT

OBJECTIVE #2 – EDIA Education & Development Lead will collaborate with the DHS EDIA Office/Committee, subject matter experts, and stakeholders to improve organizational practices, develop educational materials, and provide individual-level resources that will lead to increased workforce understanding and implementation of EDIA and TIRO principles and support ongoing culture change at all levels.

MEASURE OF SUCCESS #1

Training course materials, EDIA- and TIRO-based resources, and supportive services (including, but not limited to, mentorship, technical assistance, and dedicated EDIA resource liaisons) will be made available to all workforce members.

TARGET – JUNE 2023

Develop supplemental EDIA/TIRO resources to support required annual training curriculum. Create EDIA/TIRO Education & Development SharePoint site where supplemental EDIA/TIRO supplemental resources can be housed. Supplemental resources should be regularly assessed and updated as needed. Design a supportive services program (including, but not limited to, mentorship, technical assistance, and dedicated EDIA resource liaisons) to enhance EDIA/TIRO knowledge gain.

TARGET – JUNE 2024

Implement EDIA/TIRO supportive services program with participants in pilot training program. Utilize feedback from training and course evaluations to ensure that supplemental resources and content are up to date and aligned with evolving EDIA/TIRO principles.

POPULATION HEALTH

OBJECTIVE #1 – Provide equitable access to DHS and community-based services and supports that enhance long-term health and wellness by working collaboratively with community members and organizations to optimize patient navigation programs that meet patients where they are, advocate for and support their needs, and eliminate systemic barriers to care.

MEASURE OF SUCCESS #1	Collaborate with community stakeholders* to create a process for evaluating, optimizing and innovating programs that help patients and families/caregivers navigate to DHS and community-based services and supports (e.g., transportation, community healthcare workers, facility-based patient navigators, community-embedded resources/offices).

TARGET – JUNE 2023	TARGET – JUNE 2024
Partner with community stakeholders to comprehensively evaluate existing patient navigation programs to identify disparities, systemic barriers to care, and gaps and opportunities for optimizing equitable access to care. The evaluation process will be collaboratively designed with community stakeholders and should be easy, incentivized, language-inclusive, and culturally congruent.	Implementation of emerging strategies prioritized by the community.

MEASURE OF SUCCESS #2	Engage trusted messengers (e.g., patients, families/caregivers, and County staff representative of diverse and marginalized communities, community-partnered organizations, media outlets) to develop campaigns and events that promote preventative health services and wellness. Campaigns and events should be patient and family/caregiver centered, language-inclusive, and culturally congruent.

TARGET – JUNE 2023	TARGET – JUNE 2024
Identify, recruit, and fund trusted messengers via an inclusive and equitable process. Collaboratively design and prioritize wellness and preventive health services campaigns and events to be promoted in year 2 (e.g., nutrition, vaccination, housing).	Implement campaigns and events prioritized by trusted messengers.

*Community stakeholders:
- *Includes patients, families/caregivers, community-based organizations, Patient and Family Advisory Councils, other LA County institutions, and other public and private institutions.*
- *Will be engaged via an outreach process designed to ensure compensated and inclusive partnerships are formed with stakeholders that reflect the diverse communities we serve, with an emphasis on including individuals or organizations from marginalized groups.*

POPULATION HEALTH

OBJECTIVE #2 – Expand and innovate programs to mitigate the social and structural determinants of equity that create health disparities (e.g., systemic racism, particularly anti-Black racism, nativism, cis-sexism, classism) in partnership with community and other LA County institutional stakeholders.

MEASURE OF SUCCESS #1

Identify disparities: Partner with stakeholders to evaluate for disparities in the distribution and funding of DHS services across geographic areas of LA County (e.g., the location of primary care and specialty clinics, acute care hospitals, mental health facilities, partnered housing care programs). Recommendations from DHS Social Determinants of Health (SDOH) Integration Project will be used as a framework for developing collaborative strategies toward social care services.

Stakeholders include other LA County institutions (e.g., DPH, DMH, LAUSD) and other public and private organizations with expertise in the care of marginalized communities (e.g., NGOs, academic experts).

Geographic data must be stratified by demographics measures of social vulnerability – e.g., race/ethnicity, socio-economic status, educational level and others reflected in the CDC/ATSDR Social Vulnerability Index.

TARGET – JUNE 2023

Identify and partner with stakeholders.

Collaboratively create a process for evaluation.

TARGET – JUNE 2024

Implement the process and publicly share findings transparently.

MEASURE OF SUCCESS #2

Innovate social care programs: Collaborate with community stakeholders and other LA County institutions (e.g., DPH, DMH, LAUSD) to expand and innovate social care programs that support preventative health and wellness services that are most needed.

TARGET – JUNE 2023

Identify large social care programs provided by multiple LA County institutions with overlapping goals (e.g., housing, food, educational assistance programs). Engage with community stakeholders partnered with these LA County institutions to prioritize which of these programs are most in need of expansion.

TARGET – JUNE 2024

Coordinate among LA County institutions to expand and innovate the top two programs endorsed by community stakeholders.

QUALITY & PATIENT EXPERIENCE

OBJECTIVE #1 – To improve the equity, access, quality, and experience of patients through data-driven strategies and more effective two-way communication methods between DHS and patients/family members to find out what DHS programs and initiatives work for the communities, what they would like to see more of, and to fund those programs the patients and community want.

MEASURE OF SUCCESS #1

Optimize the Patient Family Advisory Council (PFAC) program by including community members, ensuring fair compensation and language access (Optimized PFAC). The Optimized PFAC will collaborate with an identified DHS department/committee to jointly improve assessment of patient experience; identify top-rated DHS programs/resources through listening sessions, patient outreach, utilization statistics, surveys, and other data collection methods; and provide input for the development and funding of existing and new direct DHS clinical and clinical-access programs and services.

TARGET – JUNE 2023	TARGET – JUNE 2024
Assess existing PFACs for optimization and initiate PFACs for any facilities that do not currently have PFACs. Identify, outreach to, and select community members (with a diverse range of lived experiences and identities) who will be included in each Optimized PFAC. Develop and implement a plan to 1) secure funding for fair compensation and 2) make interpretation and translation services available in threshold languages for PFAC members. Identify DHS department/committee that will collaborate with the Optimized PFAC program.	Optimized PFAC and identified DHS department/committee will collaborate to develop and implement strategies for improvement of patient experience, including launching a patient engagement campaign; coordinating patient listening sessions to gather feedback on patient experience; assessing available data; and making recommendations for additional data collection and development of new programs based on identified patient needs.

MEASURE OF SUCCESS #2

Through collaboration with the Optimized PFACs, DHS will identify, prioritize, and address barriers to universal accessibility to direct DHS clinical and clinical-access programs and services, including lack of cultural responsiveness, low health literacy, inadequate language and disability access, and lack of awareness of DHS programs.

TARGET – JUNE 2023	TARGET – JUNE 2024
DHS will develop and implement an enterprise-wide assessment and utilize CG-CAHPS data to identify and prioritize the top three barriers to universal accessibility.	DHS will publish assessment findings and utilize assessment findings/data and feedback from Optimized PFAC program to develop strategies and an implementation plan to reduce/eliminate identified and prioritized barriers to universal accessibility.

QUALITY & PATIENT EXPERIENCE

OBJECTIVE #2 – Define and require inclusion of minimum standardized EDIA demographic data elements to be captured in all DHS reporting and survey tools (such as ELM, ORCHID, SI, Patient Experience), and make the data available to service teams in order to improve the provision and equity of care to those patients who are from historically marginalized or otherwise underrepresented communities.

MEASURE OF SUCCESS #1

The process for capturing patient demographic data (historically marginalized or otherwise underrepresented identities including, but not limited to, race/ethnicity, sexual identity/gender, language, etc.) will be updated to incorporate patient self-identification as the gold standard and increased percentage of DHS patient records will reflect self-identified demographic data.

TARGET – JUNE 2023	TARGET – JUNE 2024
Identify the primary EDIA demographic variables to use as a standard across DHS. Develop and implement a process for capturing and continuously validating accurate self-identified demographic data.	Assess the percentage of DHS patient records that reflect accurate self-identified standard EDIA demographic data and help draft and facilitate an implementation plan to increase the accuracy rate by 10% over baseline.

MEASURE OF SUCCESS #2

Historically marginalized or otherwise underrepresented identities including, but not limited to, race/ethnicity, sexual identity/gender, language etc. will be incorporated as standard, filterable variables in DHS interactive reports, dashboards, and static reports including health outcome measures.

TARGET – JUNE 2023	TARGET – JUNE 2024
Create filters accessible to all staff for DHS standard EDIA patient demographics within standardized reports, reporting tools, and dashboards.	Maintain public-facing equity dashboards and reports consistent with requirements of California AB 1204 for transparent sharing of methodology, identified disparities, improvement plans, and plain language reporting.

MEASURE OF SUCCESS #3

Create a resourced health disparities workgroup within the EDIA Office to identify disparities in delays in care, denial of service, and health outcomes based on patient demographic data (from historically marginalized or otherwise underrepresented identities including, but not limited to, race/ethnicity, sexual identity/gender, language, etc.) and help draft and facilitate implementation of improvement plans.

TARGET – JUNE 2023	TARGET – JUNE 2024
Create a multidisciplinary, community-partnered health disparities workgroup which will conduct baseline and longitudinal analyses to identify disparities based on DHS standard EDIA patient demographic data in all priority areas as listed in California AB 1204: Person-centered care, patient safety, social determinants of health, effective treatment, care coordination, and access to care.	Health disparities workgroup will select at least 10 key disparities and help draft and facilitate implementation of plans to prioritize and address disparities identified in the data, with measurable objectives and specific timeframes as specified in California AB 1204.

WORKFORCE

OBJECTIVE #1 – The EDIA Office will improve workplace culture by addressing staff wellness and creating an environment supportive of open dialogue and free from retaliation.

MEASURE OF SUCCESS #1	The EDIA office will conduct ongoing assessment of the DHS grievance processes and of the County Policy of Equity (CPOE) process. The EDIA Office will make periodic recommendations to DHS leadership and the Board of Supervisors/County CEO to reform DHS grievance and CPOE processes, respectively, by mitigating barriers, improving alignment with EDIA/TIRO principles, and delineating clearly stated goals and success metrics.

TARGET – JUNE 2023	TARGET – JUNE 2024
Create a taskforce to evaluate the current CPOE complaints process and make recommendations to both create an independent mediation process to promote honest dialogue and resolve conflicts before escalation to CPOE, and also to ensure staff can voice concerns without retaliation and just ramifications are rendered.	Develop corrective and reparative actions to take when necessary to those found to have violated the EDIA values, vision, and mission with a goal of promoting respect, growth, accountability and healing within workforce culture and teams.

MEASURE OF SUCCESS #2	Create dedicated positions in the EDIA Office to collaborate with the Wellness Initiative to provide staff with inclusive, culturally responsive mental health information, referrals, resources, and support.

TARGET – JUNE 2023	TARGET – JUNE 2024
Administer emotional and mental health wellness survey to all LA County worksites workforce members, collect results, determine primary causes of burnout.	Evaluate data on severity and causes of burnout, make improvements based on barriers to and other staff feedback.

WORKFORCE

OBJECTIVE #2 – Build a workforce and workplace culture that embodies EDIA/TIRO principles by improving staff diversity from underrepresented communities at all levels of DHS, utilizing transparent recruitment and data oversight while ensuring holistic application review and promotional processes account for all applicable experiences.

MEASURE OF SUCCESS #1 — Streamline recruitment, hiring, and promotions within DHS to ensure DHS staffing is representative of DHS' patient population and free of discrimination.

TARGET – JUNE 2023

Develop and implement a survey to collect baseline demographic information of candidates and DHS workforce. Perform a comprehensive EDIA review of DHS recruitment, hiring, and promotion practices, including, but not limited to, job specifications (e.g., non-traditional skills/experience besides college degrees); application practices (e.g., data collection during application process, transparency); and wages and benefits. Develop outreach strategies to increase workforce diversity (e.g., job postings in languages other than English, community-specific social media, promotion to underrepresented populations).

TARGET – JUNE 2024

Utilize survey data to develop strategies for improving and streamlining recruitment, hiring, and promotions practices at DHS. Continue collecting demographic data of candidates recruited, hired, and promoted; use data to assess the effectiveness of EDIA interventions and DHS's progress toward annual targets.

MEASURE OF SUCCESS #2 — The EDIA office will conduct ongoing assessment of the Department of Human Resources (DHR) examination process and make recommendations for reevaluating the practices regarding candidate qualifications such as professional development, banding, promotions, exams and experience.

TARGET – JUNE 2023

Create survey and gather baseline data on staff and potential candidates' experiences of DHR hiring/promotional processes and practices. The survey should include questions about notification about new opportunities, job specifications, application practices, and clarification of career ladders.

TARGET – JUNE 2024

Analyze data and create strategy to address data and lessons learned from survey administered during target Year 1.

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LOS ANGELES COUNTY

OVERSIGHT AND STAKEHOLDER ENGAGEMENT

The DHS-wide Office of EDIA reports to the DHS Director and works in collaboration with the facility EDIA leadership, the facilities' C-Suite, and the EDIA steering committee to oversee implementation with a performance improvement lens; ensure accountability to EDIA principles; draft future revisions of the EDIA Strategic Plan; coordinate EDIA activities; and facilitate bidirectional communication between community, patients, and across all DHS facilities and programs. Additionally, the Office of EDIA will create and resource the standing EDIA Steering Committee, which will be comprised of patients and representatives from historically marginalized groups representing each DHS facility/program workforce, affinity groups, and community partners/agencies.