To: IEHP – Global Quality P4P IPA Participants

From: IEHP – Quality Programs

Date: April 19, 2024

Subject: **Diversity, Equity, Inclusion (DEI) Survey – Process Measure**

A **Provider Diversity, Equity and Inclusion (DEI) Survey** is part of the 2024 Global Quality P4P PCP and IPA incentive programs. The purpose of this survey is to assess the PCP's comfort level and application of diversity, equity, and inclusion tools and resources in their practices.

Important notes:

- When completing this survey, Providers should utilize their **individual** National Provider Identifier (NPI) and **not** a group NPI.
- This survey should only be completed one time, per Provider.
- If a Provider practices out of more than one location, they will receive Global Quality credit for all their eligible sites, via the one DEI Survey submission.

All qualifying PCPs received access to survey on March 29, 2024 via fax and/or email with a QR Code for the survey. We are asking IPAs to encourage your qualifying PCPs to complete this survey by **May 30, 2024**, to qualify for the P4P incentive.

Attached, for your reference, is the DEI Survey sent to your assigned Providers.

Thank you for your continued partnership in providing quality healthcare to IEHP Members.

Questions? Contact IEHP's Provider Call Center at (909) 890-2054, (866) 223 - 4347, providerservices@iehp.org or email IEHP's Quality Department at QualityPrograms@iehp.org.

All communications are available at: www.providerservices.iehp.org > Provider Central > News and Updates > Notices

2024 Health Equity, Diversity, and Inclusion Provider Survey

1. Thank you, on behalf of Inland Empire Health Plan (IEHP), for taking the time to complete this survey.

The Diversity Equity and Inclusion All Plan Letter 23-025 (DEI APL 23-025), issued by DHCS on September 14th, 2023, requires Managed Care Plans (MCP), such as IEHP, to develop a DEI training program. This program must encompass sensitivity, diversity, cultural competency, cultural humility, and health equity trainings, for all MCP staff, and network providers regardless of their cultural or professional training and background.

This survey is intended to assess IEHP network practitioners' current knowledge of resources that support cultural humility, diversity, health equity, inclusion, and sensitivity. We are seeking your insights and collaboration to properly equip our network with the tools and resources to effectively serve the diverse population of the Inland Empire.

This survey should take no more than 10 minutes to complete.

※ 2. Please provide your National Provider ID Number (NPI)

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_____

_____

_____

_____

3. Provider's Fluent Language(s):

_____

_____

_____

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_____

4. Staff's Fluent Language(s):

_____

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5. **Qualified Interpreter**: A Qualified Interpreter: (A) Adheres to generally accepted interpreter ethics principles, including client confidentiality; (B) Has demonstrated proficiency in speaking and understanding at least spoken English and the spoken language in need of interpretation; and (C) Is able to interpret effectively, accurately, and impartially, both receptively and expressly, to and from such language(s) and English, using any necessary specialized vocabulary, terminology and phraseology (source 45 CFR 92.101).

Do you have staff who are qualified interpreters?

○ Yes

○ No

If, no, would you like to receive information on how your staff may become a qualified interpreter?

○　　Yes

○　　No

If yes, please provide contact name and email to receive interpreter information.

_____

_____

_____

6. **Qualified Translator:** A Qualified Translator must: (A) Adheres to generally accepted translator ethics principles, including client confidentiality; (B) Has demonstrated proficiency in writing and understanding at least written English and the written language in need of translation; and (C) Is able to translate effectively, accurately, and impartially to and from such language(s) and English, using any necessary specialized vocabulary, terminology and phraseology (source 5 CFR 92.101).

Do you have staff who are qualified translators?

○ Yes

○ No

If no, would you like to receive information on how your staff may become a qualified translator?

○   Yes

○   No

If yes, please provide contact name and email to receive translator information.

_____

_____

7. How comfortable are you using IEHP's in-person/video interpreter services and/or alternative format services (e.g. Audio Cassette, Audio CD, Braille, Electronic, Large Print, Text to ASL)? Please select the answer that best reflects your comfort with each.

	Not at all Comfortable (1)	Slightly Comfortable (2)	Moderately Comfortable (3)	Very Comfortable (4)
In-person Interpreter Services (1)	○	○	○	○
Alternative Format Services (5)	○	○	○	○
Telephonic/Video Interpreter (4)	○	○	○	○

8. Is there any feedback you would like to mention to help improve IEHP's interpreter services?

_____

_____

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_____

9. Which of the following best describes your familiarity and access to IEHP resources to help provide culturally responsive care or address barriers to health equity among patients?

○ I am aware of IEHP's resources and have access to them

○ I am aware of IEHP's resources but don't have sufficient access to them

○ I am not aware of these types of IEHP resources

10. Which of the following best describes your familiarity and access to resources **outside** of IEHP to help provide culturally responsive care or address barriers to health equity among patients?

○ I am aware of resources outside of IEHP and have access to them

○ I am aware of resources outside of IEHP but don't have sufficient access to them

○ I am not aware of these types of resources outside of IEHP

11. Have you completed IEHP's Diversity, Equity, and Inclusion Training through the IEHP Provider Website?

○ Yes

○ No

If, no, can you describe any barriers you might have to completing this training?

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_____

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_____

12. If yes, how effective did you feel IEHP's Diversity, Equity, and Inclusion Training was in enhancing your understanding of how to provide medically necessary and covered services to all members in a culturally and linguistically appropriate manner regardless of race, color, national origin, creed, ancestry, religion, language, age, gender, sexual orientation, gender identity, marital status, health status, or disability?

○ Very effective

○ Moderately effective

○ Slightly effective

○ Not at all effective

13. Check all that apply: What are your preferred methods for advancing your understanding of health equity?

☐ E-courses

☐ Workshops/trainings from an outside consultant

☐ Staff discussions

☐ Independent books/materials

☐ Conferences/professional development events

☐ Webinars

☐ Other _____

14. Do you believe that diversity, equity, and inclusion initiatives are effectively implemented **within your practice**?

○ Yes

○ No

       If no, are there any areas of improvement around DEI that you think are needed in your practice?

_____

_____

_____

15. Please rate how often you have a clear sense of your own ethic, cultural, social, faith and racial identity while practicing medicine?

○ Regularly

○ Occasionally

○ Rarely

○ Never

16. How confident are you in your ability to identify barriers to health equity among patients (e.g. housing insecurity, language, food insecurity, transportation, etc.)?

○ Very confident

○ Moderately confident

○ Slightly confident

○ Not at all confident

17. How comfortable are you with taking action to help address barriers to health equity among your patients (e.g. referral to a food bank, referral to Community Supports, contacting interpreter services, etc.)?

○ Very comfortable

○ Moderately comfortable

○ Slightly comfortable

○ Not at all comfortable

18. Do you consider your patients' beliefs in both traditional and alternative health practices when making recommendations to their health?

○ Regularly

○ Occasionally

○ Rarely

○ Never

19. How often do you participate in professional development and training to enhance your knowledge and skills in the provision of services and supports to culturally, ethnically, racially, and linguistically diverse patients that you serve?

  ○ Regularly

  ○ Occasionally

  ○ Rarely

  ○ Never

20. How comfortable are you tailoring your communications, programs, environments, and plan of care to support culturally diverse patients?

  ○ Very comfortable

  ○ Moderately comfortable

  ○ Slightly comfortable

  ○ Not at all comfortable

21. How comfortable are you with tailoring your written, verbal, and visual communications to support patients with limited English proficiency?

  ○ Very comfortable

  ○ Moderately comfortable

  ○ Slightly comfortable

  ○ Not at all comfortable

22. Does your practice budget for continuous improvement in Americans with Disabilities Act (ADA) accommodations?

  ○ Yes

  ○ No

23. How often do you review a patient's chart for intersecting identities such as pronouns, gender identity or gender expression **before** engaging with the patient?

○ Regularly

○ Occasionally

○ Rarely

○ Never

24. Thank you for taking the time to complete our survey! Your honest responses are extremely valuable to us and will solely be used for purposes related to developing Health Equity support services and addressing health-related social needs.