



ESSB 5229: HEALTH EQUITY CONTINUING EDUCATION

Health Systems Quality Assurance

ESSB 5229 Overview

- Washington State Legislature passed **Engrossed Substitute Senate Bill (ESSB) 5229** during 2021.
- It requires that health care professionals take health equity continuing education (CE) every **four (4) years**.
- The Department of Health must:
 - **Develop minimum standards** (model rules) by 1/1/2023.
 - Identify a **free training program** (that meets minimum standards) by 7/1/2023.
- Boards and Commissions for professions with a CE requirement must **adopt rules that meet or exceed minimum standards by 1/1/2024**.

Approach to Model Rules

We intentionally set out to take an equity focused approach to our rule-making process and elevate voices that often go unheard.

This was innovative, deliberate, and powerful.

Approach to Model Rules

- Conversations with equity focused community partners
 - Partnered with key community partners in healthcare to ensure our messaging is equity focused
- Developed plain language information sheets that describes:
 - Health equity and how the department defines it
 - Our rules process and how anyone can become involved
- Listening Sessions (x4)
 - We heard from individuals who showed courage in sharing their experience
- Rules Workshops (x4)
 - We ensured that we elevated voices from our listening session throughout our workshops

Listening Sessions

- Focused on **listening to individuals' experiences with health inequities**
 - Reached out to communities our rule-making communication often misses.
 - Provided information in plain talk.
 - Included a one-pager about health equity with our communications.
- **Identified problems** due to inequities and **potential solutions.**
- **Identified themes** we needed to concentrate on during our rule-making to address health inequities we heard during our Listening Sessions.

RACE & ETHNICITY

“He **looked at me with this funny** look on his face and he said, ‘**well I've never met a Native American before in my life... and then he told me that many of our native mental health issues were due to our intermarriage with our relatives** and i couldn't believe that he said that and i was in complete shock.”

“For a black woman, **going to the doctor it's like a black man being stopped by the police** and that there is fear of potential misjudgment, and **violence that accompanies that misjudgment.**”

LANGUAGE & CULTURE

“My name looks and sounds foreign to a lot of providers. I will be treated differently because **they look at my name and they make assumptions** based on whether or not i may be able to speak English fluently or not. **I have been treated negatively and differently.**”

“We have had many situations where **we've had families be told that they can't be served because they don't speak English** or that a child will be served because they speak English, but the **parents will not receive parent education because they don't speak English.**”

ACCESS & ABILITY STATUS

“These effects begin way before the patient shows up to the clinic. It has to do with **access to transportation**. It has to do with **childcare**... It has to do with finally **how you're greeted at the reception**, and it also has to do with lack of referrals when you see the primary care provider. It has to do with **assumptions about lack of follow-through or lack of motivation or commitment** to either therapy programs or protocols or return visits.”

“**Our most vulnerable people are being pushed around**, moving different areas, and also their access of health care is becoming very hard in some areas... sometimes people are not able to find good providers and also once they find good providers **there is a lot of obstacles that [they] may face such as language barriers and cultural barriers.**”

LGBTQA+ INEQUALITIES

“When I think of health equity, I think of care that is competent, compassionate, accessible, and respectful. **We do a terrible job in this debate [regarding] all of those when we’re talking about trans folks.** It is the whole thing about **‘if you don't look like me and i don't look like you’, the health care just goes south.**”

“I was not able to get the covid vaccine without having to out myself as a transgender individual, because you know we're collecting that information how the vaccine is affecting people, based on birth gender... I've gone to enough of the support groups and heard about **mistreatment and inappropriate treatment.**”

Mental Health & Substance Use

“Any time I've had to seek care related to my opioid use disorder I **faced a lot of stigma** and **even years into recovery i still have that follow me into healthcare interactions.**”

“To walk into a place where **you expect compassion** for your medical emergency and to really get greeted with **‘oh, you're one of those.** You can sit take a seat and we'll get to you when we have some time, which by the way could be five or six or seven hours’... and then to sit there in the emergency room and basically **be ignored...** and to hear that i really was **told almost verbatim that it was not important to them and not a priority.**”

Collective Session Thoughts

- **Require implicit bias training**

- This is the most important thing for creating a foundation in health equity
- It provides opportunities for learning before individuals start working with others
- It ensures that health care professionals are continuing to learn throughout their career

- **Promote a diverse workforce**

- People need to look like the people they serve

- **Address systemic and systematic issues**

- Healthcare policies can either encourage continued inequities or can encourage equitable practices

Rules Workshops

- The rules that we will propose are a result of collaboration with interested parties that attended the rules workshops
 - Themes originated from the listening sessions
 - Over 200 individuals submitted emails sharing stories, thoughts, and opinions related to experiences with health inequities
 - Individual professions are encouraged to expand on minimum standards
- The department will send out notices via the same means as the listening sessions and workshops when we have a date for our upcoming public hearing

Questions?



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