



# Diversity, Equity and Inclusion Plan

2024-2026



Samaritan  
Health Services

InterCommunity   
Health Network CCO

## Table of contents

- 1 A message from Samaritan's executive leadership
- 2 Defining diversity, equity and inclusion at Samaritan
- 3 Samaritan's diversity, equity and inclusion journey: Major milestones and accomplishments
- 4 Diversity, equity and inclusion priorities and goals
- 5 Samaritan's roadmap for change: Priorities and goals
- 14 Executing the plan: Implementation work teams
- 16 Samaritan's roadmap at a glance
- 18 Appendix
- 23 Community demographics
- 23 SHS region
- 38 Council/committee charter
- 40 Diversity, Equity and Inclusion Council membership
- 41 Glossary of terms
- 44 Acronym key

### Acknowledgments

The Diversity, Equity and Inclusion Council would like to thank the following individuals for their contributions to the creation of this strategic plan: Earlean Wilson Huey, Kaylie Wengrzynek and David Stickland for their leadership in guiding the strategic planning process and for their roles as co-leads and co-authors of this plan; and all members of the Diversity, Equity and Inclusion Strategic Planning Subcommittee for their contributions in planning and editing. The Council would also like to thank the many partners and work team members listed in this document for their continued guidance, support and dedication in furthering diversity, equity and inclusion at Samaritan Health Services and throughout our communities.

## A message from Samaritan's executive leadership



**Doug Boysen, JD, MHA**  
President and chief executive officer of Samaritan Health Services

“At Samaritan, our mission is ‘building healthier communities together.’ As an organization we have made a commitment to safety and are working to become a high reliability organization. However, these goals are not achievable if we do not also make a commitment to furthering diversity, equity, and inclusion, which is why DEI remains one of our most important strategic priorities. Building on prior work, we need to continue dismantling systemic barriers that create disparities for our patients, members, and employees.”



**Sonney Sapra**  
Chair of Samaritan's Diversity, Equity and Inclusion Council

“Recognizing that the health care system has historically mistreated underserved communities, causing people to experience health inequities, our aim at Samaritan is to work with intent to cultivate a culture that provides a safe, inclusive and equitable environment for everyone, and to collaborate with regional partners to advance health equity and social justice in the communities we serve.”



**Bruce Butler**  
Chief executive officer of InterCommunity Health Network Coordinated Care Organization

“Our ultimate goal at IHN-CCO is to ensure that everyone can realize their full potential for health and well-being. To address the social determinants of health and access to care, we actively collaborate with local committees and organizations and seek advice and guidance from the Community Advisory Council and other forums for community input. Advancing health equity is a priority and we partner with providers to offer everyone access to high-quality and culturally responsive care. We value life experiences and look forward to achieving the goals outlined in this shared Diversity, Equity and Inclusion Plan by centering the voices of the community and our members.”



# Defining diversity, equity and inclusion at Samaritan

## Diversity

Diversity refers to all the ways in which people differ, and it encompasses all the different characteristics that make one individual or group different from another. It is all-inclusive and recognizes everyone and every group as part of the diversity that should be valued. A broad definition includes not only race, ethnicity and gender — the groups that most often come to mind when the term “diversity” is used — but also age, national origin, religion, disability, sexual orientation, socioeconomic status, education, marital status, language and physical appearance.

## Equity

Fair and just practices and policies that ensure all community members can thrive.

## Health equity

Health equity is achieved when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

## Inclusion

Authentically bringing traditionally excluded individuals and/or groups into processes, activities and decision/policy making in a way that shares power.

## Samaritan’s diversity, equity and inclusion purpose statement

Samaritan’s diversity, equity and inclusion purpose is to serve as visible, vocal and thoughtful sponsors of diversity, equity and inclusion efforts across our organization, communities and region. We are working to ensure all patients, members, visitors, caregivers and employees feel welcomed, valued and supported in every Samaritan Health Services interaction as we build healthier communities together.



# Samaritan’s diversity, equity and inclusion journey: Major milestones and accomplishments

**2016**

Signed the AHA#123EQUITY pledge.

**2020**

Implemented the equity and inclusion plan. Some activities delayed due to COVID-19.

**2022**

Implemented Samaritan Employee Resource Groups (SERGs) and participated in Washington State Hospital Association (WSHA) Health Equity Collaborative.

**2019**

Formed the Equity and Inclusion Council (EIC) and developed a plan to advance diversity, equity and inclusion within Samaritan.

**2021**

Participated in George Washington University Together, Equitable, Accessible, Meaning (TEAM) cancer care for sexual and gender minority (SGM) patients training. 100% of Leaders completed High Reliability Organization Training

**2023**

Required Interrupting Racism training for all managers. Earned Military Friendly Employer awards for 2023.

# Diversity, equity and inclusion priorities and goals

The goals and activities outlined in this plan are aligned with Samaritan’s strategic priorities. The colored circles indicate the implementation status as of January 2024.

- White indicates initiative has not started.
- Red indicates initiative is delayed.
- Yellow indicates on track for completion.
- Green indicates completion.



# Samaritan’s roadmap for change: Priorities and goals

## Data collection and use

**Goal 1.** Collect the necessary disaggregated patient, member and employee data to identify disparities within our service area, patient populations and workforce.

### 1.1. Identify key DEI metrics and identify gaps in data collection.

Activities	Target Completion Date	Status
1.1.1. Identify key metrics to measure the progress of DEI initiatives in the areas of recruitment, workforce, plan membership and clinical outcomes.	Q1 2024	<input checked="" type="checkbox"/>
1.1.2. Identify gaps in demographic, SDoH, REAL-D and SOGI data for employee, patient and member populations.	Q2 2024	<input checked="" type="checkbox"/>

### 1.2. Create and implement systems to accurately and reliably collect data.

Activities	Target Completion Date	Status
1.2.1. Develop and implement systems for collecting disaggregated data from board members, employees, patients, members, students and volunteers.	Q3 2024	<input type="checkbox"/>
1.2.2. Create and distribute a reporting tool to track DEI activities across Samaritan.	Q4 2024	<input type="checkbox"/>

### 1.3. Develop a dashboard to display and evaluate DEI data.

Activities	Target Completion Date	Status
1.3.1. Use key metrics to create a dashboard.	Q4 2024	<input type="checkbox"/>
1.3.2. Analyze and evaluate data to inform planning and decision-making.	Ongoing	<input type="checkbox"/>
1.3.3. Identify key stakeholders and share results.	Q1 2025	<input type="checkbox"/>



**Key success indicators:**

- ✓ Operational dashboard capturing and illustrating progress on key DEI metrics.
- ✓ Accurately tracking and reporting on systemwide DEI activities.
- ✓ Effectively sharing REAL-D and SOGI data.

**Awareness, education and training**

**Goal 2. Increase employee and provider awareness and understanding of DEI concepts and opportunities to:**

- Increase workforce diversity.
- Improve employee engagement, satisfaction and retention.
- Provide culturally responsive care.
- Improve outcomes and patient experience.

**2.1. Establish a cross-functional DEI training workgroup to develop a comprehensive learning strategy and oversee its implementation.**

Activities	Target Completion Date	Status
2.1.1. Create a formal DEI training workgroup.	Q1 2024	●
2.1.2. Develop a comprehensive three-year learning strategy.	Q2 2024	○

**2.2. Expand required training for all Samaritan employees and contracted providers on unconscious and implicit bias and culturally responsive care and service.**

Activities	Target Completion Date	Status
2.2.1. Develop DEI core competencies for all Samaritan employees and additional role-specific competencies to ensure the provision of culturally responsive care and service.	Q4 2024	○
2.2.2. Develop, implement, track and evaluate training for all competencies.	Q1 2025	○
2.2.3. Develop and implement a DEI train-the-trainer program.	Q1 2026	○
2.2.4. Stand up a DEI response team to coordinate efforts across Samaritan for patient and employee inquiries, as well as complaints, grievances, concerns and unsatisfactory outcomes.	Q3 2024	○

**2.3 Ensure all Samaritan training and education is aligned with and supportive of DEI concepts and considerations.**

Activities	Target Completion Date	Status
2.3.1. Create and distribute DEI guidelines for Samaritan subject matter experts and educators to reference while developing training content.	Q1 2025	○
2.3.2. Create training and education that is accessible to all Samaritan learners.	Ongoing	●

**2.4 Provide resources and opportunities for Samaritan employees and providers to engage in and learn more about DEI related concepts, challenges and activities.**

Activities	Target Completion Date	Status
2.4.1. Launch new DEI website on the intranet.	Q1 2024	●
2.4.2. Develop equity and leadership champions trained through a structured DEI program.	Q1 2026	○
2.4.3. Promote participation and programming in Samaritan Employee Resource Groups.	Ongoing	●
2.4.4. Promote inter-organization opportunities for connection and collaboration.	Ongoing	●
2.4.5. Provide opportunities for employees to connect and discuss DEI topics and issues and reflect on how they relate to their own lives and work.	Ongoing	●

**Key success indicators:**

- ✓ Core competencies created for all designated roles.
- ✓ Plan developed to coordinate responses to DEI related inquiries, complaints and grievances.
- ✓ Number of staff trained in DEI programs.
- ✓ Number of participants at Samaritan DEI events.
- ✓ Number of inter-organization opportunities for connection and collaboration.

## Culturally and linguistically appropriate care and service

**Goal 3. Ensure Samaritan’s members, patients and their families receive equitable and culturally appropriate care and services from all Samaritan facilities, providers and staff.**

### 3.1. Develop strategies and practices to support health literacy.

Activities	Target Completion Date	Status
3.1.1. Ensure members, patients, families and caregivers receive essential health information and resources in multiple languages and culturally appropriate and accessible formats.	Q1 2025	●
3.1.2. Provide Spanish-speaking patients access to MyChart in their written language.	Q2 2025	○
3.1.3. Provide interpreting services to all patients who need them.	Ongoing	●

### 3.2. Create welcoming and accessible environments for all Samaritan staff, patients and members.

Activities	Target Completion Date	Status
3.2.1. Incorporate diverse images and artwork into specified Samaritan facilities to better represent our patient and employee populations.	Q3 2025	●
3.2.2. Incorporate diverse language into Samaritan communications.	Q3 2025	○
3.2.3. Assess and ensure accessibility for everyone at all Samaritan locations.	Q4 2025	●

### 3.3 Develop Samaritan standards of culturally responsive care and service.

Activities	Target Completion Date	Status
3.3.1. Adopt best practices and standards that meet the needs of individuals with disabilities.	Q1 2025	○
3.3.2. Create workflows and processes to ensure all patients and members are addressed by their appropriate name and pronoun.	Q4 2024	●

## Key success indicators:

- ✓ Resources available in multiple languages and culturally appropriate and accessible formats.
- ✓ MyChart adoption by Spanish speaking population increased to 10%.
- ✓ Increased provision of interpreter services.
- ✓ Decreased number of complaints and grievances from vulnerable populations.
- ✓ Improved likelihood to recommend score from vulnerable populations.
- ✓ Pronoun-specific policy and procedures developed.

## Community engagement

**Goal 4. Establish Samaritan as a diverse, equitable and inclusive organization. Increase and strengthen Samaritan’s partnership with government agencies, businesses, educational institutions and other organizations to better serve our communities.**

### 4.1. Enhance Samaritan’s reputation as a visible and reliable ally that is working toward a more equitable, diverse and inclusive society.

Activities	Target Completion Date	Status
4.1.1. Sponsor, collaborate on or lead community events that are DEI focused.	Ongoing	●
4.1.2. Increase the involvement and visibility of Samaritan managers and executives in community DEI events, outreach efforts and partnerships.	Ongoing	●
4.1.3. Encourage and recognize Samaritan staff participation in community DEI events and activities.	Ongoing	●
4.1.4. Ensure all Samaritan marketing campaigns, channels and materials align with and support DEI concepts and considerations.	Ongoing	●






**4.2. Expand, diversify and strengthen Samaritan's community partnerships to reduce health care inequities and disparities in our region.**

Activities	Target Completion Date	Status
4.2.1. Engage communities and populations facing disparities in our organization's decisions.	Ongoing	
4.2.2. Build effective informal partnerships with organizations and leaders representing communities and populations facing disparities.	Ongoing	
4.2.3. Develop formal partnership agreements with organizations serving marginalized, vulnerable and historically underserved communities.	Ongoing	
4.2.4. Share resources with partners from communities and populations facing disparities.	Ongoing	

**4.3. Develop a supplier strategy that ensures minority, women and veteran owned businesses have an opportunity to serve the Samaritan organization.**

Activities	Target Completion Date	Status
4.3.1. Create business relationships with diverse local and statewide suppliers.	Q4 2026	




**Key success indicators:**

- ✓ Guidelines developed to assess opportunities within the Samaritan brand framework.
- ✓ Plan developed to support and partner with organizations that reduce health care inequities and increase representation of women, minoritized and underserved populations in our region.
- ✓ Identification of local and statewide businesses eligible for partnership.







**Recruitment and retention**

**Goal 5. Increase the diversity of Samaritan's workforce and build a culture that proactively supports and develops diverse talent.**

**5.1. Increase the diversity of our management and staff to reflect the communities we serve.**

Activities	Target Completion Date	Status
5.1.1. Identify and remove organizational barriers to workplace and workforce diversity.	Ongoing	
5.1.2. Develop and distribute recruitment best practice guidance for hiring managers.	Q3 2024	
5.1.3. Engage with community partners to provide employment opportunities for people who are under-represented in our workforce.	Q3 2026	

**5.2. Develop an organizational culture that fosters and supports workforce and workplace diversity, equity and inclusion.**

Activities	Target Completion Date	Status
5.2.1. Explore development and expansion of infrastructure and positions providing leadership and support for DEI at Samaritan, as well as funding sources to reflect our organization's commitment to diversity, equity and inclusion.	Q3 2024	
5.2.2. Continued development of the DEI Council focusing on membership and training (e.g., criteria for membership, application processes, expectations of members, etc.).	Ongoing	
5.2.3. Identify more ways to incorporate diversity, equity and inclusion into Samaritan (e.g., job descriptions, signing hiring expectations, etc.).	Ongoing	
5.2.4. Include equity and cultural competency measures in performance appraisals for all Samaritan employees.	Q1 2026	
5.2.5. Invest in specific programs that help to retain diverse talent, such as job shadowing, workplace observations, mentorship and career advancement scholarships.	Q3 2025	
5.2.6. Include diversity, equity and inclusion questions on exit interviews.	Q4 2024	



**5.3. Promote and sustain Samaritan Employee Resource Groups to enhance employee engagement and support retention efforts.**

Activities	Target Completion Date	Status
5.3.1. Facilitate employee resource groups to leverage the experiences, knowledge and passion of staff to share information, support engagement, solicit suggestions and drive innovation helping to foster an accessible and inclusive workplace culture at Samaritan.	Ongoing	●

**Key success indicators:**

- ✓ Recruitment best practice guidelines distributed to new and incumbent managers.
- ✓ Increased number of applicants and new employees from under-represented populations.
- ✓ Cultural competency measures included in performance appraisals.
- ✓ Increased participation in retention programs for identified talent.





# Executing the plan: Implementation work teams

The following work teams, with identified sponsors and suggested members, will be helping implement this plan.

Data collection and use	Awareness, education and training
<p><b>Sponsor:</b> Chief information officer</p> <p>Work team members:</p> <ul style="list-style-type: none"> <li>• Academic Affairs director.</li> <li>• Accredited continuing education program administrator.</li> <li>• DEI manager.</li> <li>• HR business partners.</li> <li>• HR operations.</li> <li>• IS analytics and data architecture manager.</li> <li>• IS applications vice president.</li> <li>• IS informatics medical director.</li> <li>• IS operations director.</li> <li>• Outcomes and research director.</li> <li>• Patient Experience and Engagement director.</li> <li>• Patient Safety and Clinical Risk manager.</li> <li>• Quality outcomes reporting director.</li> <li>• Risk safety data analyst.</li> <li>• SHP health equity administrator.</li> <li>• TA director.</li> <li>• Talent Development lead program manager.</li> <li>• Volunteer Services director.</li> <li>• Workers' compensation coordinator.</li> </ul>	<p><b>Sponsor:</b> Chief administrative officer</p> <p>Work team members:</p> <ul style="list-style-type: none"> <li>• Accredited continuing education program administrator.</li> <li>• Clinical development manager.</li> <li>• DEI manager.</li> <li>• DEI program coordinator.</li> <li>• eLearning program manager.</li> <li>• GME quality accreditation administrator.</li> <li>• HR business partner.</li> <li>• HR operations team.</li> <li>• HR service center.</li> <li>• HR technical team.</li> <li>• IS analytics and data architecture manager.</li> <li>• IS technical training manager.</li> <li>• IS web developer.</li> <li>• Marketing and Communications strategist.</li> <li>• Organizational and talent development manager.</li> <li>• Patient Experience and Engagement director.</li> <li>• Patient safety officer.</li> <li>• SHP education programs manager.</li> <li>• SHP grievance team.</li> <li>• SHP program manager.</li> <li>• SMG Behavioral Health medical director.</li> <li>• SMG value-based care director.</li> <li>• TA director.</li> <li>• Well-Being director.</li> </ul>

Culturally and linguistically appropriate care and service	Community engagement
<p><b>Sponsor:</b> Chief quality officer</p> <p>Work team members:</p> <ul style="list-style-type: none"> <li>• Clinical design director.</li> <li>• DEI manager.</li> <li>• DEI program coordinator.</li> <li>• Emergency Management and Security director.</li> <li>• Health education manager.</li> <li>• HR business partners.</li> <li>• Marketing and Communications strategist.</li> <li>• Patient Experience and Engagement director.</li> <li>• Patient safety officer.</li> <li>• Population Health director.</li> <li>• Professional services associate vice president.</li> <li>• SHP program manager.</li> <li>• SMG senior medical director.</li> </ul>	<p><b>Sponsor:</b> Marketing and communications vice president</p> <p>Work team members:</p> <ul style="list-style-type: none"> <li>• Community health improvement program specialist.</li> <li>• DEI manager.</li> <li>• DEI program coordinator.</li> <li>• Foundations vice president.</li> <li>• Foundations directors.</li> <li>• Health education manager.</li> <li>• Marketing and Communications strategist.</li> <li>• Patient and family engagement coordinator.</li> <li>• Population Health director.</li> <li>• SHP program manager.</li> <li>• Strategic Sourcing and Procurement director.</li> <li>• TA director.</li> </ul>

Recruitment and retention
<p><b>Sponsor:</b> Human resources vice president</p> <p>Work team members:</p> <ul style="list-style-type: none"> <li>• DEI manager.</li> <li>• DEI program coordinator.</li> <li>• Foundations directors.</li> <li>• HR business partners.</li> <li>• HR Compensation and Benefits team.</li> <li>• HR job description and job analysis team.</li> <li>• Organizational and talent development manager.</li> <li>• Physician Recruitment director.</li> <li>• TA director.</li> <li>• Talent Development lead program manager.</li> </ul>





# Appendix

## Demographics and data

### SHS patients

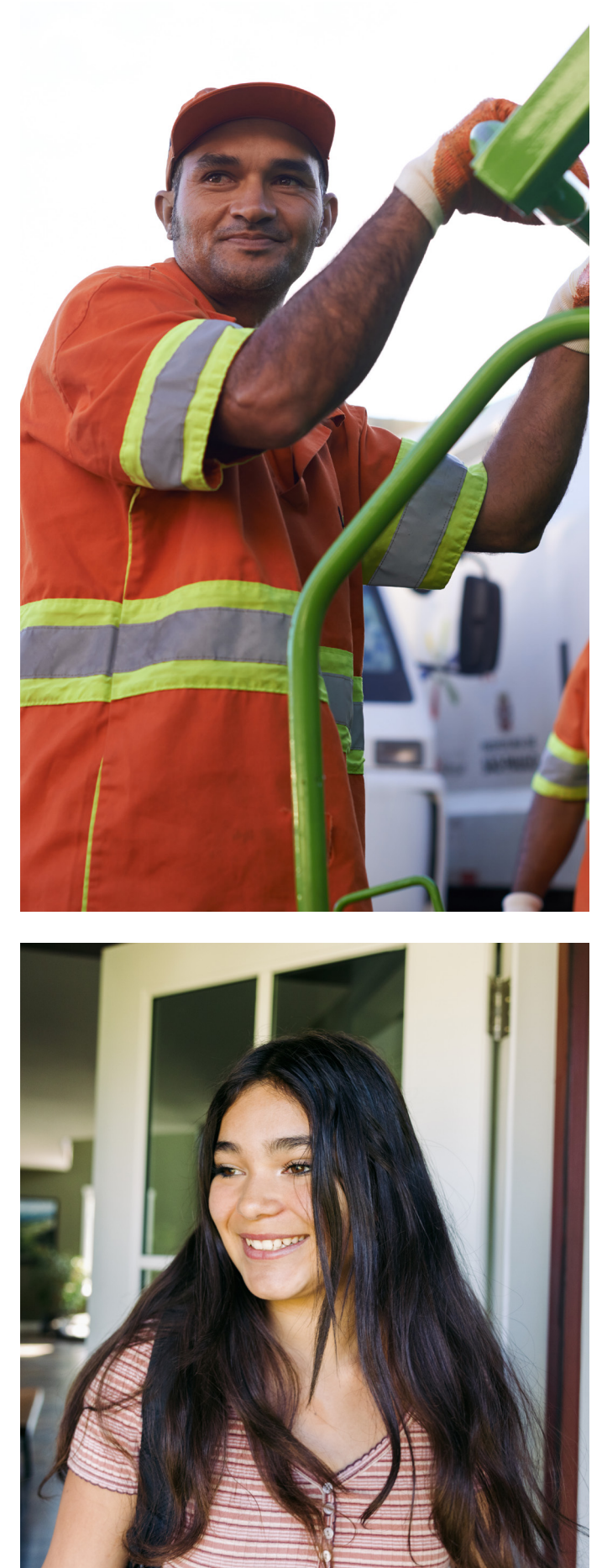
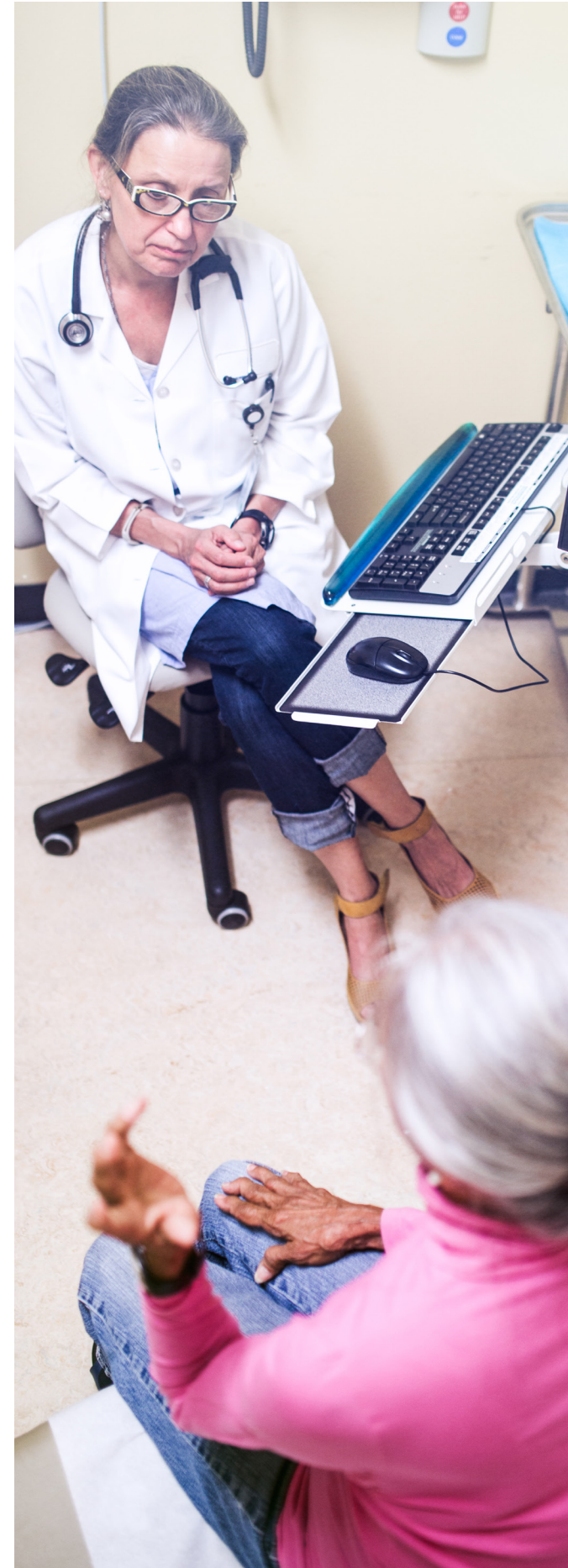
SHS is committed to providing high-quality care to our patients. Below are the demographics for our patients who had one or more encounters at Samaritan in 2022.

*Methods:* Epic's Slicer Dicer tool was used to identify patients with one or more encounter (of the 24 encounter types listed below) at SHS between Jan. 1 and Dec. 31, 2022.

### Encounter types included:

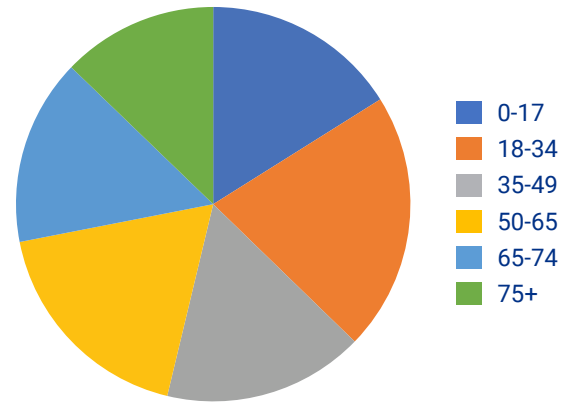
- Appointment.
- Hospital Encounter (ED, hospital outpatient or inpatient admission).
- Hospital follow-up.
- Initial consult.
- Office visit.
- Patient outreach.
- Postpartum visit.
- Procedure visit.
- Routine prenatal.
- Telemed support.
- Telemedicine.
- Telephone.
- Anti-coag visit.
- Clinic lab.
- Clinical support.
- Group class.
- Home care visit.
- Home care update.
- Hospice admission.
- Immunization.
- Initial prenatal.
- Lab requisition.
- Lactation encounter.
- Maternity care coordinator.

This approach identified 222,597 patients. The following tables and figures summarize demographic information about these patients.

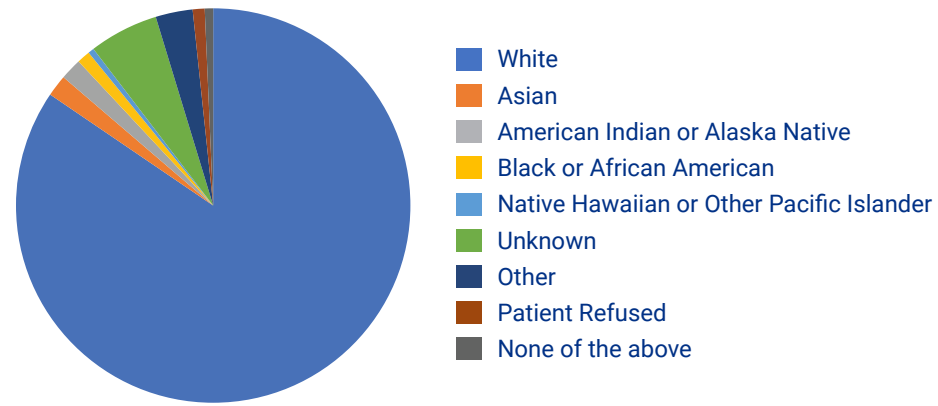




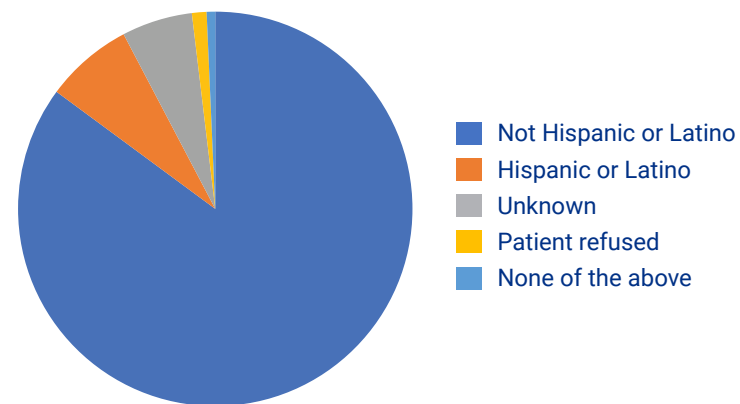
Percentage of population by age group



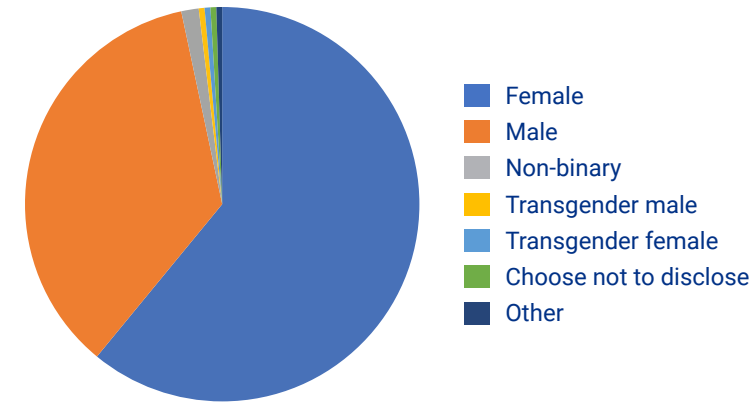
Percentage of population by patient race



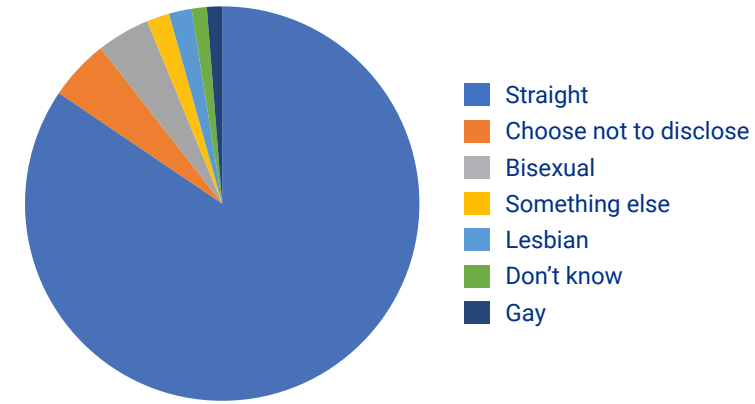
Percentage of population by patient ethnic group



Percentage of population by gender identity (non-missing responses)



Percentage of population by sexual orientation (non-missing responses)

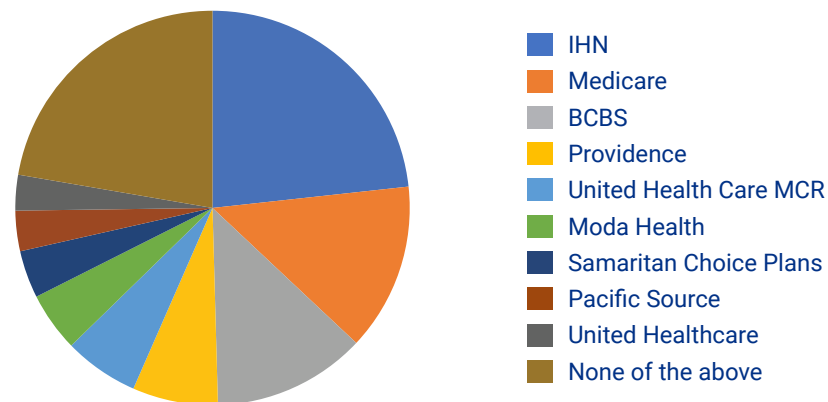






### Percentage of population with one or more encounters by payer

This graph reflects the proportion of patients who had at least one encounter in 2022 associated with the following payers. Patients that had multiple payers associated with encounters in 2022 will be represented in more than one group. Self-pay encounters were excluded from these results because almost all encounters display 'self-pay' as an associated payer.



**Note:** 5,802 patients (2.8%) had one or more encounters covered by Veterans, Veterans Choice or Tricare.

## Community demographics

SHS strives to provide the best health care services to the communities we serve. Understanding the demographics of the people within our communities helps us to meet our mission, live out our values, and reach our vision and organizational goals.

### Language

The following information outlines the top languages in Oregon as well as the SHS service area of people who do not speak English as their primary language.

#### Oregon's top 15 languages:

Rank	Language	Estimate	Percentage
1	Spanish	135,840	3.4
2	Vietnamese	15,131	0.4
3	Chinese (incl. Mandarin, Cantonese)	14,174	0.4
4	Russian	6,557	0.2
5	Ukrainian or other Slavic languages	5,611	0.1
6	Ilocano, Samoan, Hawaiian or other Austronesian languages:	4,415	0.1
7	Korean	4,020	0.1
8	Nepali, Marathi, or other Indic languages	3,876	0.1
9	Tagalog (incl. Filipino)	3,407	0.1
10	Thai, Lao, or other Tai-Kadai languages	2,721	0.1
11	Other languages of Asia	2,712	0.1
12	Amharic, Somali, or other Afro-Asiatic languages	2,694	0.1
13	Arabic	2,432	0.1
14	Other Indo-European languages	1,942	0.05
15	Japanese	1,801	0.04

## SHS region

### Benton

**Source:** U.S. Census Bureau, 2022 American Community Survey 5-Year Estimates, Table C16001.

Rank	Language	Estimate	Percentage
1	Spanish	1,235	1.4
2	Chinese (incl. Mandarin, Cantonese)	1,326	1.5
3	Korean	462	0.5
4	Other Asian and Pacific Island languages	445	0.5
5	Other and unspecified languages	209	0.2
6	Arabic	124	0.1
7	Russian, Polish, or other Slavic languages	112	0.1
8	Vietnamese	96	0.1
9	French, Haitian, or Cajun	54	0.1
10	German or other West Germanic languages	37	0
11	Other Indo-European languages	32	0
12	Tagalog (incl. Filipino)	8	0.0

**Note:** Total population is 90,932.





**Lincoln**

Rank	Language	Estimate	Percentage
1	Spanish	943	2.1
2	Other Asian and Pacific Island languages	56	0.1
3	Korean	43	0.1
4	Tagalog (incl. Filipino)	39	0.1
5	Chinese (incl. Mandarin, Cantonese)	31	0.1
6	Other and unspecified language:	14	0
7	German or other West Germanic languages	11	0
8	Other Indo-European languages	9	0
9	French, Haitian, or Cajun	8	0
10	Russian, Polish, or other Slavic languages	0	0
11	Vietnamese	0	0
12	Arabic	0	0

Source: U.S, Census Bureau, 2022 American Community Survey 5-Year Estimates, Table C16001.

Note: Total population is 44,744.

**Linn**

Rank	Language	Estimate	Percentage
1	Spanish	2,660	2.2
2	Chinese (incl. Mandarin, Cantonese)	191	0.2
3	Other Indo-European languages	124	0.1
4	German or other West Germanic languages	62	0.1
5	Tagalog (incl. Filipino)	61	0.1
6	Russian, Polish, or other Slavic languages	42	0
7	Other Asian and Pacific Island languages	31	0
8	Other and unspecified languages	15	0
9	French, Haitian, or Cajun	11	0
10	Korean	0	0
11	Vietnamese	0	0
12	Arabic	0	0

Source: U.S, Census Bureau, 2022 American Community Survey 5-Year Estimates, Table C16001.

Note: Total population is 119,645.



**Race/Ethnicity**

Population percentages by race or ethnicity in Oregon and SHS tri-county service area.

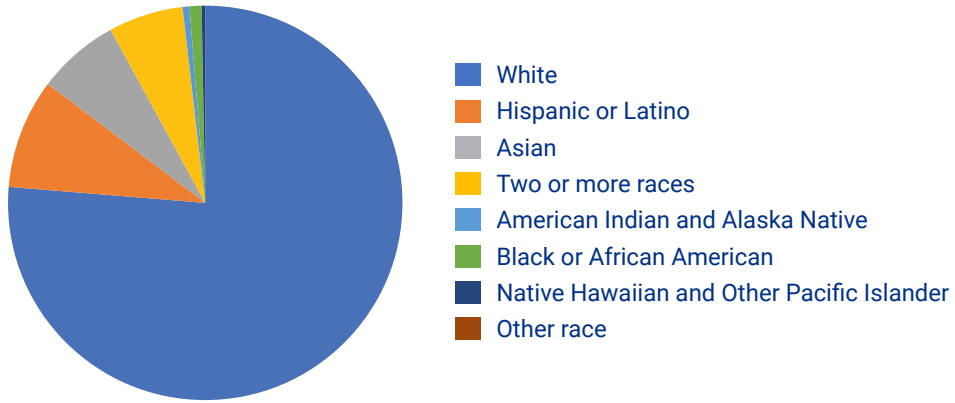
Race or ethnicity	Oregon	Benton	Lincoln	Linn
White	85.9	86.4	89	91.9
Hispanic or Latino	14.4	8.6	10.1	10.6
Asian	5.1	6.6	1.6	1.3
Two or more races	4.3	4.2	4.1	3.8
American Indian and Alaska Native	1.9	1.1	4.1	1.8
Black or African American	2.3	1.4	1	0.9
Native Hawaiian and Other Pacific Islander	0.5	0.3	0.2	0.2

Source: U.S. Census Bureau, 2023 Census Quick Facts

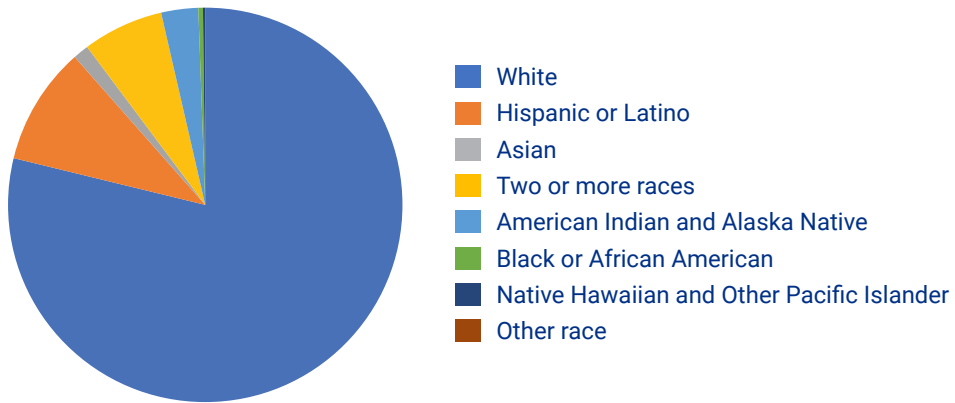


Race/ethnicity estimates by county

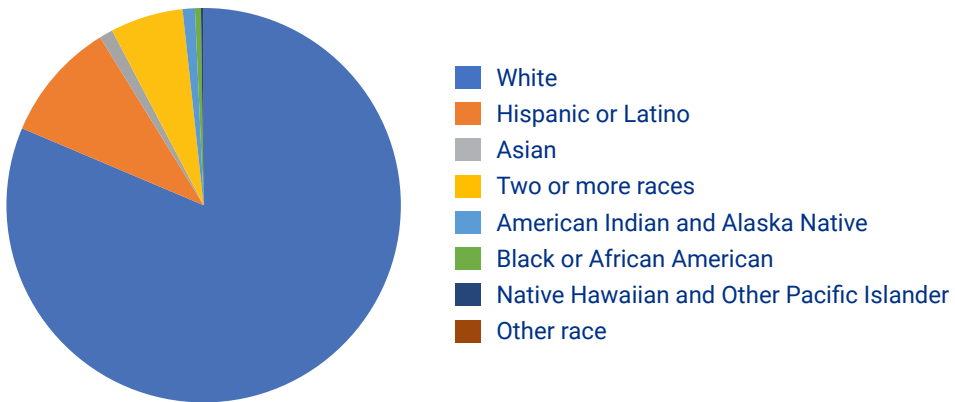
Benton County



Lincoln County



Linn County



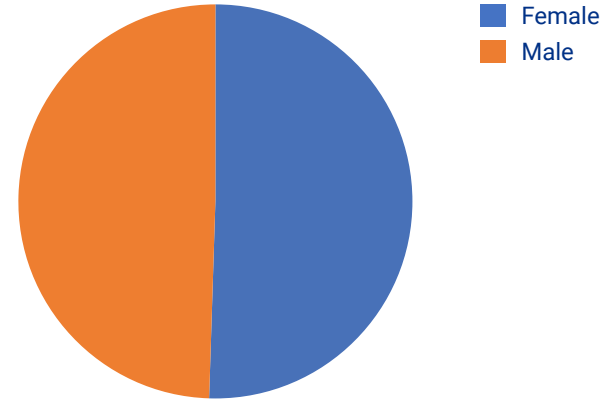
Source: U.S. Census Bureau. "HISPANIC OR LATINO, AND NOT HISPANIC OR LATINO BY RACE." Decennial Census, DEC Demographic and Housing Characteristics, Table P9, 2020.

Note: These figures are based on raw numbers.

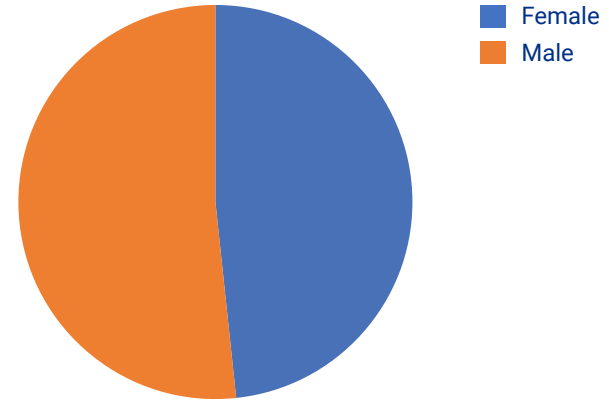
Note: See racial category definitions in glossary of terms.

Gender by county

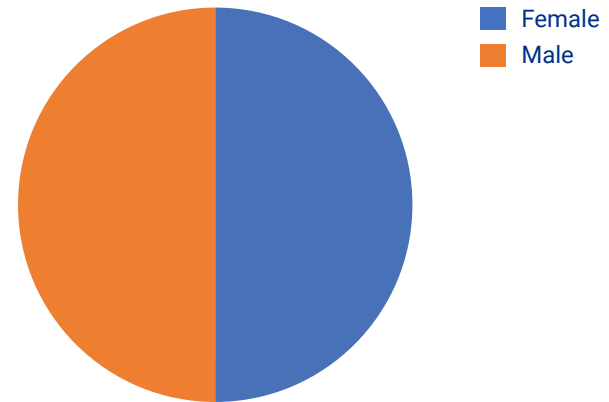
Benton County



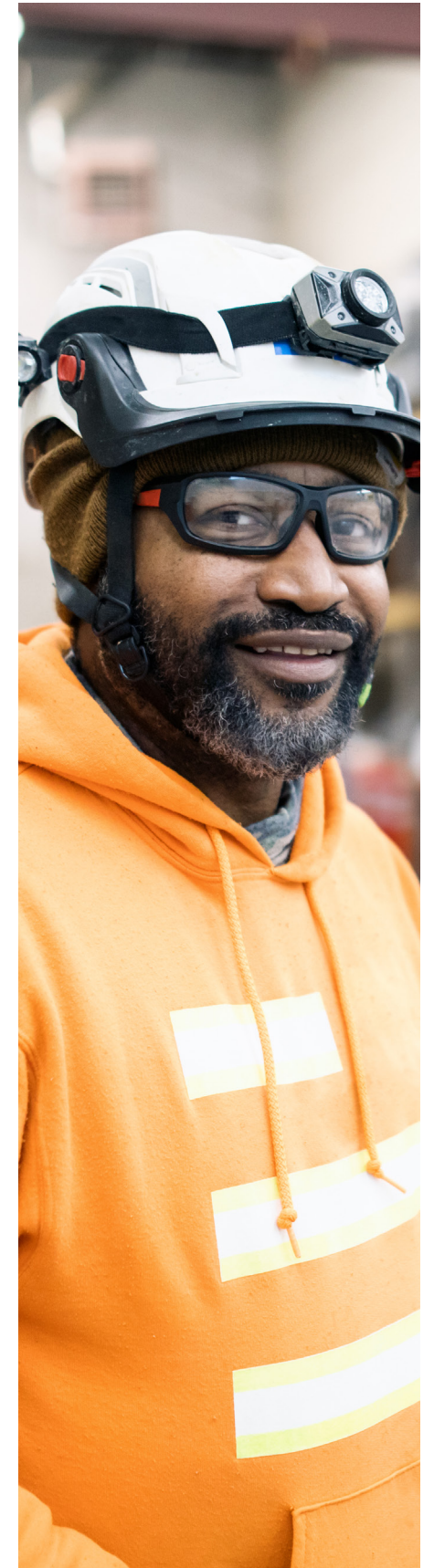
Lincoln County



Linn County



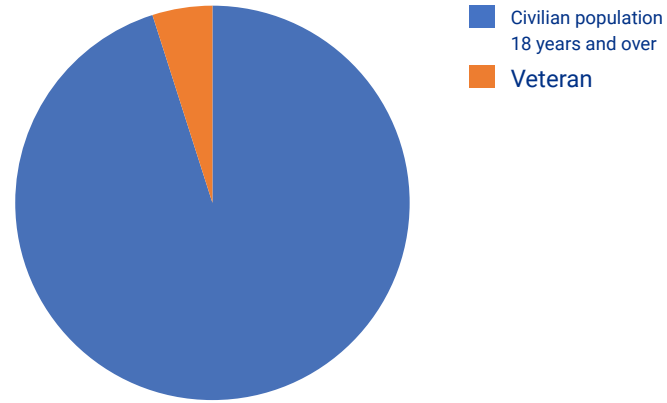
Source: U.S. Census Bureau. "Age and Sex." American Community Survey, ACS 5-Year Estimates Subject Tables, Table S0101, 2022.



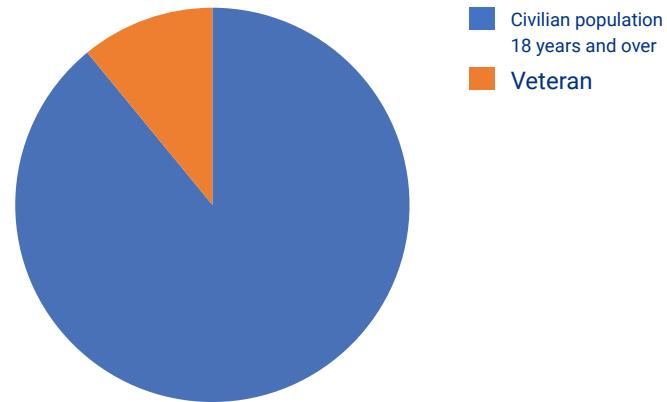


### Veteran status by county

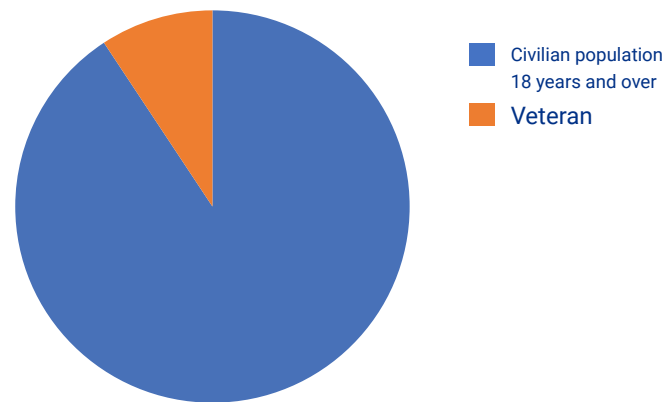
#### Benton County



#### Lincoln County



#### Linn County

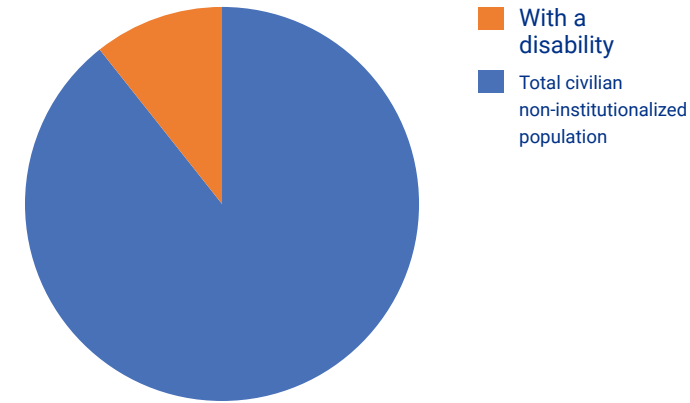


Source: U.S. Census Bureau. American Community Survey, ACS 1-Year Estimates Subject Tables, Veteran Status, Table S2101, 2022.

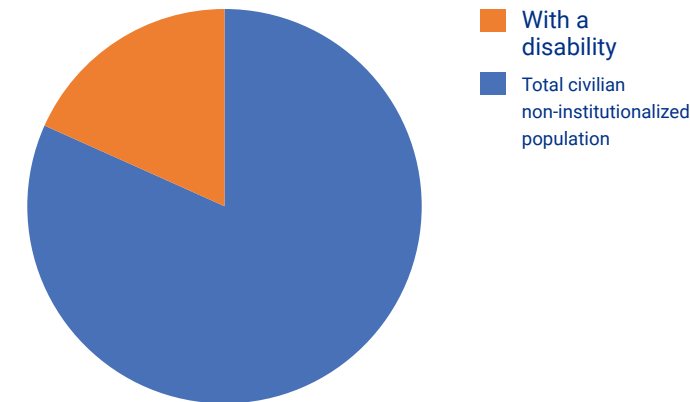


### Disability characteristics by county

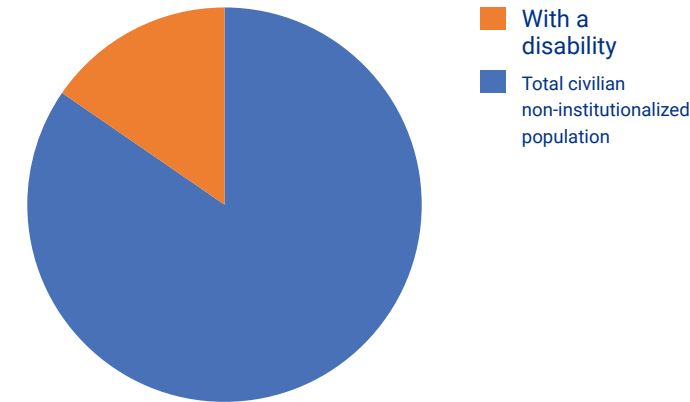
#### Benton County



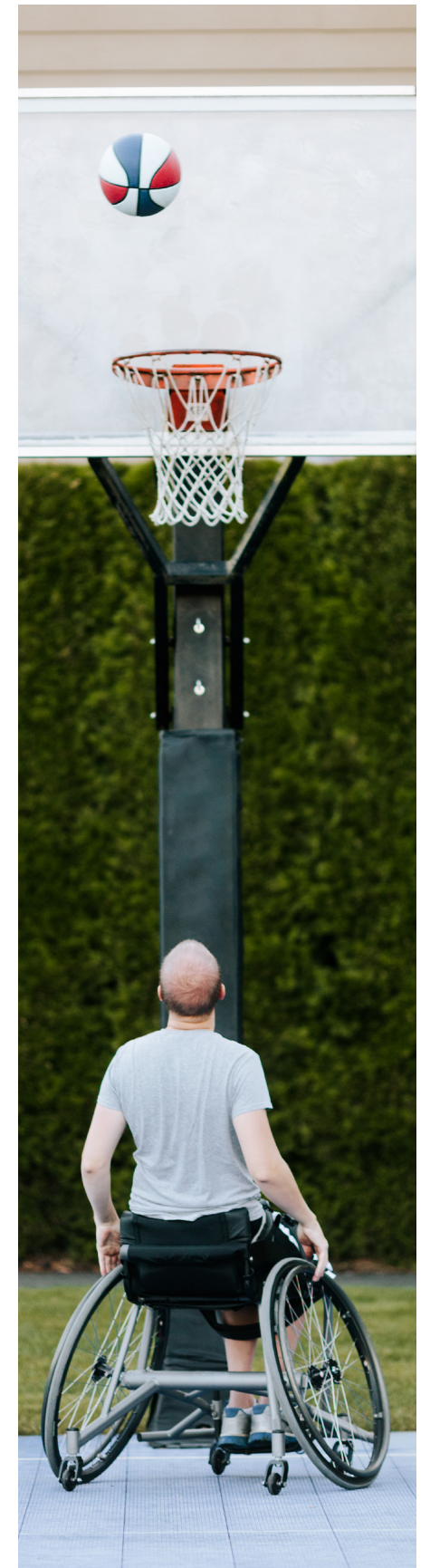
#### Lincoln County



#### Linn County



Source: U.S. Census Bureau. American Community Survey, ACS 5-Year Estimates Subject Tables, Disability Characteristics, Table S1810, 2022.





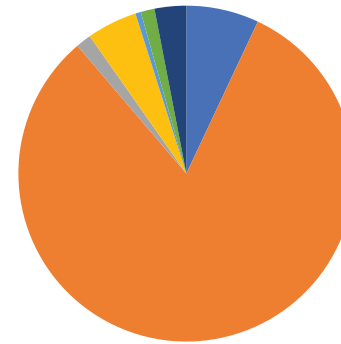
# SHS workforce

SHS strives to improve workforce diversity throughout the entire system. The following are the employee demographics by race/ethnicity and by gender as of Oct. 23, 2022. Gender identity data is not currently collected.



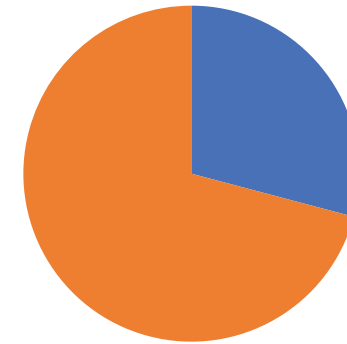
## Good Samaritan Regional Medical Center and associated medical clinics

Race/ethnicity of employees



- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian and Other Pacific Islander
- Asian
- Native American
- Two or more races

Gender of employees



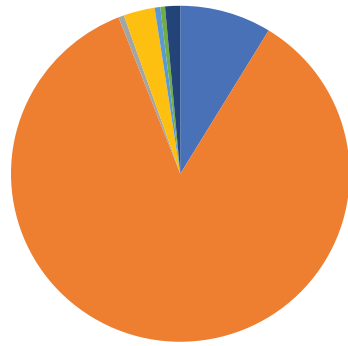
- Female
- Male

Job Category	Race/Ethnicity															Row Total
	Hispanic or Latino		Not Hispanic or Latino													
	Male	Female	Male						Female							
		White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races			
Executive/Senior Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	
First/Mid-Level Officials and Managers	0	3	15	0	1	0	0	1	49	0	1	0	0	2	72	
Professionals	15	27	292	9	27	1	2	11	668	8	38	4	9	17	1128	
Technicians	5	14	64	1	2	1	1	2	102	1	5	2	3	5	208	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	2	21	24	0	2	0	0	1	191	1	2	1	7	7	259	
Craft Workers	1	0	16	0	1	0	1	0	1	0	0	0	0	0	20	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5	
Service Workers	15	43	75	6	4	0	2	6	215	5	19	2	3	12	407	
Current 2022 Reporting Year Total	39	108	491	16	37	2	6	21	1227	15	65	9	22	43	2101	
Prior 2021 Reporting Year Total	47	97	480	10	40	1	5	14	1298	12	71	5	21	39	2140	



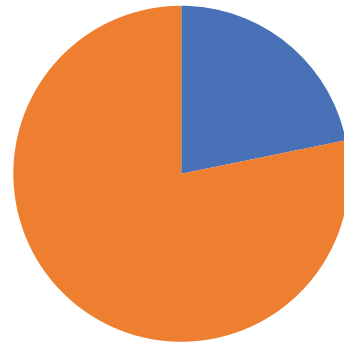
**Samaritan Albany General Hospital and associated medical clinics**

Race/ethnicity of employees



- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian and Other Pacific Islander
- Asian
- Native American
- Two or more races

Gender of employees

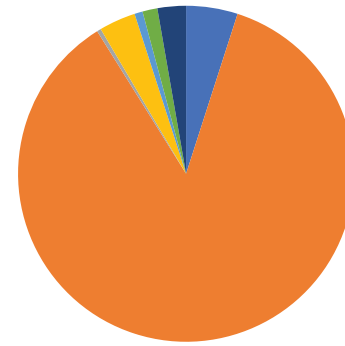


- Female
- Male

Job Category	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
	Male	Female	Male						Female						
		White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	1	0	11	0	1	0	0	26	0	1	0	0	0	40	
Professionals	6	21	129	0	4	0	1	358	2	8	2	0	5	536	
Technicians	2	8	20	1	1	2	1	80	0	4	1	3	2	125	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	2	13	5	0	0	0	1	124	0	4	1	1	3	154	
Craft Workers	0	0	8	0	0	0	0	0	0	0	0	0	1	9	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	2	
Service Workers	11	33	32	0	0	1	0	151	3	10	0	0	2	243	
Current 2022 Reporting Year Total	22	75	207	1	6	2	3	740	5	27	4	4	13	1110	
Prior 2021 Reporting Year Total	22	60	186	2	6	1	2	745	5	27	3	4	12	1075	

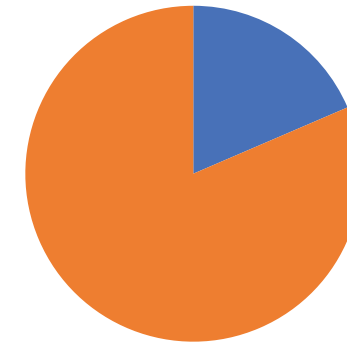
**Samaritan Lebanon Community Hospital and associated medical clinics**

Race/ethnicity of employees



- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian and Other Pacific Islander
- Asian
- Native American
- Two or more races

Gender of employees



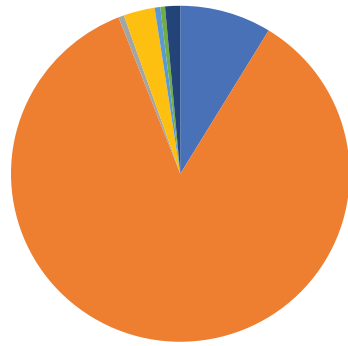
- Female
- Male

Job Category	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
	Male	Female	Male						Female						
		White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	0	0	7	0	0	1	0	20	0	3	0	0	0	32	
Professionals	1	10	74	0	3	1	1	204	0	13	1	3	6	320	
Technicians	1	2	16	0	1	0	1	56	0	2	1	1	1	82	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	1	6	3	0	0	0	0	95	1	0	0	2	3	111	
Craft Workers	0	0	8	0	0	0	0	0	0	0	0	0	0	8	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	3	
Service Workers	1	16	13	1	0	1	0	160	1	5	1	3	7	209	
Current 2022 Reporting Year Total	4	34	124	1	4	3	4	536	2	23	3	9	17	766	
Prior 2021 Reporting Year Total	4	33	131	2	2	4	2	565	2	22	1	8	9	789	



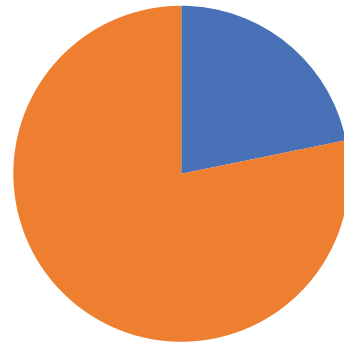
**Samaritan North Lincoln Hospital and associated medical clinics**

**Race/ethnicity of employees**



- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian and Other Pacific Islander
- Asian
- Native American
- Two or more races

**Gender of employees**

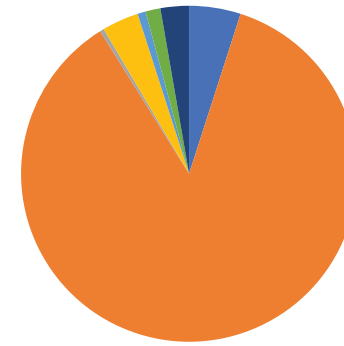


- Female
- Male

Job Category	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
	Male	Female	Male						Female						
		White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	1	0	11	0	1	0	0	26	0	1	0	0	0	40	
Professionals	6	21	129	0	4	0	1	358	2	8	2	0	5	536	
Technicians	2	8	20	1	1	2	1	80	0	4	1	3	2	125	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	2	13	5	0	0	0	1	124	0	4	1	1	3	154	
Craft Workers	0	0	8	0	0	0	0	0	0	0	0	0	1	9	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	2	
Service Workers	11	33	32	0	0	1	0	151	3	10	0	0	2	243	
Current 2022 Reporting Year Total	22	75	207	1	6	2	3	740	5	27	4	4	13	1110	
Prior 2021 Reporting Year Total	22	60	186	2	6	1	2	745	5	27	3	4	12	1075	

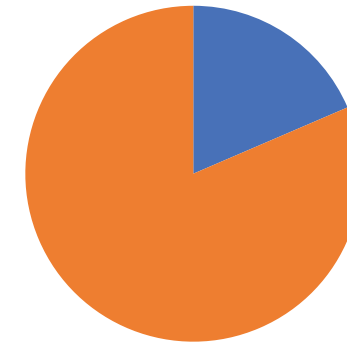
**Samaritan Pacific Communities Hospital and associated medical clinics**

**Race/ethnicity of employees**



- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian and Other Pacific Islander
- Asian
- Native American
- Two or more races

**Gender of employees**

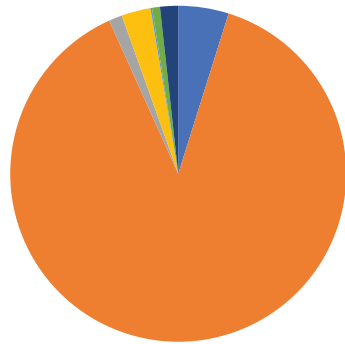


- Female
- Male

Job Category	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
	Male	Female	Male						Female						
		White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
Executive/Senior Level Officials and Managers	0	0	1	0	0	0	0	1	0	0	0	0	0	2	
First/Mid-Level Officials and Managers	0	1	3	1	0	0	1	14	0	0	0	1	1	22	
Professionals	3	6	58	1	1	0	1	128	0	5	0	2	0	205	
Technicians	1	1	16	0	0	1	2	20	0	1	0	0	1	43	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	2	8	6	0	0	0	0	59	0	0	1	0	0	76	
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	5	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Service Workers	4	13	23	0	1	1	1	62	1	2	1	1	3	113	
Current 2022 Reporting Year Total	10	29	112	2	2	2	5	284	1	8	2	4	5	466	
Prior 2021 Reporting Year Total	3	25	113	1	1	0	5	283	0	15	1	5	4	456	

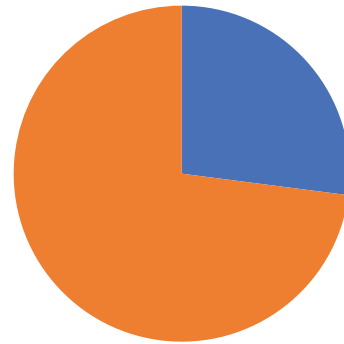
### Samaritan Health Services Corporate including Samaritan Health Plan Operations and IHN-CCO

Race/ethnicity of employees



- Hispanic or Latino
- White
- Black or African American
- Native Hawaiian and Other Pacific Islander
- Asian
- Native American
- Two or more races

Gender of employees



- Female
- Male

Job Category	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
	Male	Female	Male						Female						
		White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
Executive/Senior Level Officials and Managers	1	0	10	0	1	0	0	0	12	0	0	0	0	0	24
First/Mid-Level Officials and Managers	2	4	38	1	1	0	1	1	86	4	4	1	0	2	145
Professionals	7	11	185	4	5	0	0	3	312	5	11	0	4	5	552
Technicians	0	0	2	0	0	0	0	0	17	0	1	0	0	1	21
Sales Workers	0	0	0	0	0	0	0	0	4	0	0	0	0	0	4
Administrative Support Workers	5	34	80	1	0	0	1	4	397	2	14	1	4	6	549
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	4	0	0	0	0	0	20	0	0	0	0	1	25
Current 2022 Reporting Year Total	15	49	319	6	7	0	2	8	848	11	30	2	8	15	1320
Prior 2021 Reporting Year Total	12	36	294	5	5	0	2	5	756	6	28	2	5	12	1168

### Job categories key

Job categories	Examples*
Executive/senior managers	Chief executive officers, vice presidents
First/mid-level managers	Assistant vice presidents, directors, managers, supervisors
Professionals	Clinicians, nurses, health educators, graphic designers
Technicians	Lab technicians, medical lab scientists
Sales workers	Commercial accountants, sales representatives
Administrative support	Analysts, administrative assistants, coordinators, customer service representatives
Craft workers	Carpenters, maintenance engineers
Laborers and helpers	Groundskeepers, maintenance repair
Service workers	Caterers, dietary assistants, aides, housekeeping

**Note:** There are more than 900 job titles at SHS. This table lists a few examples in each category.





# Council/committee charter

## Summary

<b>Committee</b>	Diversity, Equity and Inclusion Council (DEIC)
<b>Purpose</b>	Samaritan’s diversity, equity and inclusion purpose is to serve as visible, vocal and thoughtful sponsors of diversity, equity and inclusion efforts across our organization, communities and region. We are working to ensure all patients, members, visitors, caregivers and employees feel welcomed, valued and supported in every Samaritan Health Services interaction as we build healthier communities together.
<b>SHS Strategic 2024 Goal(s)</b>	Further diversity, equity and inclusion. Achieve goals outlined in year one of DEI long-term strategy.
<b>Chartered by</b>	Senior Executive Council

## Details

<b>Scope &amp; Responsibilities</b>	<p>The DEIC:</p> <ul style="list-style-type: none"> <li>• Reviews, recommends, and implements the identified priorities in the SHS Diversity, Equity, and Inclusion Plan.</li> <li>• Reviews the health services provided by SHS to ensure they are meeting the Federal Office of Minority Health National Cultural and Linguistic Appropriate Services (CLAS) Standards.</li> <li>• Provides guidance in the planning, implementation, and integration of intentional health equity work in SHS.</li> <li>• Develop, implement, and support the Samaritan Employee Resource Groups (SERG). Develops proposed policies related to diversity, equity, and inclusion.</li> <li>• Utilize data to drive and inform activities, programs, and initiatives.</li> <li>• Reviews and recommend training for all employees on diversity, equity, and inclusion.</li> <li>• Reviews and recommend training for all employees on cultural humility and intercultural effectiveness.</li> <li>• Reviews the hospitals’ Community Health Needs Assessments for content concerning diversity, equity, and inclusion</li> <li>• Reviews the hospitals’ Community Benefit Plan Implementation Strategy for content concerning diversity, equity, and inclusion.</li> <li>• Reviews local and state data to support diversity, equity, and inclusion efforts within SHS.</li> <li>• Identifies system-wide improvements to support diversity, equity, and inclusion.</li> <li>• Ensures equity and inclusion is integrated in all Human Resources policies and practices.</li> </ul>
<b>Chair</b>	Appointed by SEC

Date charter reviewed and approved — Feb. 17, 2023



<b>Membership</b>	<ul style="list-style-type: none"> <li>• SHS Executive Team representative/executive — sponsor.</li> <li>• SHS Executive Team representative/executive.</li> <li>• SHS Community Health Promotion Department representative.</li> <li>• SHS Diversity, Equity and Inclusion manager.</li> <li>• SHS Graduated Medical Education.</li> <li>• IHN/CCO representative.</li> <li>• SHS Compliance Department.</li> <li>• SHS Human Resources representative.</li> <li>• SHS Learning and Development representative.</li> <li>• SHS Veterans Outreach Department.</li> <li>• SAGH InReach Clinic representative.</li> <li>• Samaritan Medical Group Operation Leadership.</li> <li>• Population Health/Care Coordination representative.</li> <li>• SHS Patient Experience and Engagement representative.</li> <li>• Three to five at-large employee representatives.</li> <li>• Community representative — ad hoc.</li> <li>• Data analytics specialists representative.</li> <li>• SHS administrative fellow.</li> </ul>
<b>Meetings</b>	<ul style="list-style-type: none"> <li>• Are every other month and more frequently if needs arise.</li> <li>• Both in-person meetings, video conference options, and email to further the needs of the Diversity, Equity and Inclusion Council will be available for participants.</li> <li>• Formal agendas and decision support data will be prepared for review at the meetings.</li> <li>• Work groups designated by Diversity, Equity and Inclusion Council as needed.</li> </ul>
<b>Quorum</b>	A majority of the committee members from the organization, attending either in person or by video conference, shall constitute a quorum.
<b>Staff</b>	SHS Diversity, Equity and Inclusion manager, DEI Program coordinator and Community Health Promotion staff are responsible for scheduling and organizing meetings, completing specific assignments, clarifying expectations and executing assigned responsibilities.
<b>Other resources</b>	<ul style="list-style-type: none"> <li>• Other SHS staff as appropriate.</li> <li>• Facilitation work groups as appropriate.</li> </ul>

## Diversity, Equity and Inclusion Council membership

**Anne Daly**, vice president of Compliance, Samaritan Health Services

**Beck Fox**, Medicaid program manager, InterCommunity Health Network Coordinated Care Organization and Samaritan Health Plans

**Bruce Butler**, vice president and chief executive officer, InterCommunity Health Network Coordinated Care Organization and Samaritan Health Plans

**Claire Hall**, Lincoln County commissioner, community member

**David Stickland**, Organizational and Talent Development manager, Samaritan Health Services

**Earlean Wilson Huey**, Diversity, Equity and Inclusion manager, Samaritan Health Services

**Jennifer Will**, associate vice president of clinic operations, Samaritan Health Services

**John Heffron**, director of Talent Acquisition, Samaritan Health Services

**Kacey Urrutia**, health education manager, Samaritan Health Services

**Kari Hart, LCSW**, clinic well-being program manager, Samaritan Health Services

**Kaylie Wengrzynek**, Diversity, Equity and Inclusion program coordinator, Samaritan Health Services

**Kelley Kaiser**, senior vice president and chief administrative officer, Samaritan Health Services

**Kimberly Schauer**, vice president of Marketing and Communications, Samaritan Health Services

**Kyle Hatch**, veteran's representative, Samaritan Health Services

**Laurie Simpson**, Experience and Engagement director, Samaritan Health Services

**Leah Smith**, senior Human Resources business partner, Samaritan Health Services

**Margaret Mikula, MD**, vice president and chief Quality officer, Samaritan Health Services

**Miranda Miller**, primary care practice director, Samaritan Health Services

**Olivia Danforth, MD**, physician, Samaritan Health Services

**Robert Fallows, MD**, senior medical director, Samaritan Health Services

**Robert Power**, retired, community member

**Rochelle Hazelton**, department assistant, Samaritan Health Services

**Sandy Tsuneyoshi**, retired, community member

**Scott Russell**, vice president of Human Resources, Samaritan Health Services

**Sonney Sapra**, senior vice president and chief information officer, Samaritan Health Services

## Glossary of terms

The following is a glossary of equity and inclusion terms. It is not an exhaustive list but reflects the most common terms.

### Community

A group of people living in the same place or having a particular characteristic in common.

### Cultural humility

Cultural humility is a lifelong process of self-reflection and self-critique whereby the individual not only learns about another's culture, but one starts with an examination of her/his own beliefs and cultural identities.

### Data collection or data gathering

The process of gathering and measuring information on targeted variables in an established system.

### Disaggregate

Separate something into its component parts.

### Discrimination

Discrimination is a broad term that includes but is not limited to racism (see below). Prejudicial treatment has been based on a wide range of characteristics, including not only racial or ethnic group but also low income, disability, religion, LGBTQ status, gender and other characteristics that have been associated with social exclusion or marginalization.

### Diversity

Diversity refers to all the ways in which people differ, and it encompasses all the different characteristics that make one individual or group different from another. It is all-inclusive and recognizes everyone and every group as part of the diversity that should be valued. A broad definition includes not only race, ethnicity, and gender — the groups that most often come to mind when the term “diversity” is used — but also age, national origin, religion, disability, sexual orientation, socioeconomic status, education, marital status, language, and physical appearance.

### Ethnicity or ethnic group

Ethnicity or ethnic group refers to belonging to a group of people who share a common culture (beliefs, values, or practices, such as modes of dress, diet, or language).

### Gender identity

A person's inner sense of being a boy/man/male, girl/woman/female, another gender, or no gender.

- **Cisgender**

A person whose gender identity and assigned sex at birth correspond (i.e., a person who is not transgender).

- **Non-binary**

A continuum or spectrum of gender identities and expressions, often based on the rejection of the gender binary's assumption that gender is strictly an either/or option of male/men/masculine or female/woman/feminine based on sex assigned at birth.

- **Transgender**

Describes a person whose gender identity and assigned sex at birth do not correspond. Also used as an umbrella term to include gender identities outside of male and female. Sometimes abbreviated as trans.

### Health

In this report, health refers to health status, that is, physical and mental health and well-being, distinguished from health care.

### Health disparity

Health disparities are preventable differences in the burden of disease, injury, violence or in opportunities to achieve optimal health experienced by socially disadvantaged racial, ethnic, and other population groups and communities.

### Health equity

Health equity is achieved when all people can reach their full health potential and well-being and are



not disadvantaged by their race, ethnicity, language, disability, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

### Implicit bias

The bias in judgment and/or behavior that results from subtle cognitive processes (e.g., implicit attitudes and implicit stereotypes) that often operate at a level below conscious awareness and without internal control.

### Inclusion

Authentically bringing traditionally excluded individuals and/or groups into processes, activities and decision/policy making in a way that shares power.

### Intersectionality

The idea that identities are influenced and shaped by race, class, ethnicity, sexuality/sexual orientation, gender/gender identity, physical disability, national origin, etc., as well as by the interconnection of all those characteristics.

### Data collection or data gathering

Is the process of gathering and measuring information on targeted variables in an established system.

### Community

A group of people living in the same place or having a particular characteristic in common.

### Disaggregate

Separate something into its component parts.

### Intersex

Group of rare conditions where the reproductive organs and genitals do not develop as expected.

### Microaggressions

Microaggressions are everyday verbal, nonverbal, and environmental slights, snubs, or insults — whether intentional or unintentional — that communicate hostile, derogatory or negative messages to individuals based solely upon their marginalized

group membership. They repeat or affirm stereotypes about minority groups, and they tend to minimize the existence of discrimination or bias, intentional or not.

## Race or racial group

Race or racial group generally refers to belonging to a group of people who share a common ancestry from a particular region of the globe.

- **White**

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicate their race as “White” or report entries such as Irish, German, Italian, Lebanese, Arab, Moroccan, or Caucasian.

- **Black or African American**

A person having origins in any of the Black racial groups of Africa. It includes people who indicate their race as “Black or African American,” or report entries such as African American, Kenyan, Nigerian or Haitian.

- **American Indian and Alaska Native**

A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment. This category includes people who indicate their race as “American Indian or Alaska Native” or report entries such as Navajo, Blackfeet, Inupiat, Yup’ik or Central American Indian groups or South American Indian groups.

- **Asian**

A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. This includes people who reported detailed Asian responses such as: “Asian Indian,” “Chinese,” “Filipino,” “Korean,” “Japanese,” “Vietnamese” and “Other Asian” or provide other detailed Asian responses.

- **Hispanic or Latino**

A person of Cuban, Mexican, Puerto Rican, South

or Central American, or other Spanish culture or origin, regardless of race. The term “Spanish origin” can be used in addition to “Hispanic or Latino.” People who identify their origin as Hispanic, Latino or Spanish may be of any race.

- **Native Hawaiian and Other Pacific Islander**

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or Other Pacific Islands. It includes people who reported their race as “Fijian,” “Guamanian or Chamorro,” “Marshallese,” “Native Hawaiian,” “Samoan,” “Tongan” and “Other Pacific Islander” or provide other detailed Pacific Islander responses.

- **Two or more races**

Two or more races refers to people who indicate their race as combinations of two or more of the following race categories: “White,” “Black or African American,” American Indian or Alaska Native,” “Asian,” Native Hawaiian or Other Pacific Islander” or “Some Other Race.”

### Racism

Racism refers to prejudicial treatment based on racial or ethnic group and the societal institutions or structures that perpetuate this unfair treatment. Racism can be expressed on interpersonal, structural/institutional, or internalized levels.

- **Interpersonal racism**

Interpersonal racism is race-based unfair treatment of a person or group by individuals; examples include hate crimes, name-calling or denying individuals a job, promotion, equal pay, or access to renting or buying a home based on race.

- **Internalized racism**

Internalized racism occurs when victims of racism internalize the race-based prejudicial attitudes toward themselves and their racial or ethnic group, resulting in a loss of self-esteem and potentially in prejudicial treatment of members of their own racial or ethnic group.

- **Structural racism**

Structural or institutional racism is race-based unfair treatment built into policies, laws, and practices. It often is rooted in intentional discrimination that occurred historically, but it can

exert its effects even when no individual currently intends to discriminate.

Sexual Orientation: How a person characterizes their emotional and sexual attraction to others.

- **Bisexual**

A sexual orientation that describes a person who is emotionally and sexually attracted to people of their own gender and people of other genders.

- **Gay**

A sexual orientation that describes a person who is emotionally and sexually attracted to people of their own gender. It can be used regardless of gender identity but is more commonly used to describe men.

- **Heterosexual (straight)**

A sexual orientation that describes women who are emotionally and sexually attracted to men, and men who are emotionally and sexually attracted to women.

- **Lesbian**

A sexual orientation that describes a woman who is emotionally and sexually attracted to other women.

### Social determinants of health

The social determinants of health are nonmedical factors such as employment, income, housing, transportation, childcare, education, discrimination, and the quality of the places where people live, work, learn and play, which influence health.

### Social exclusion or marginalization

Social exclusion or marginalization refers to barring or deterring particular social groups — based, for example, on skin color, national origin, religion, wealth, disability, sexual orientation, gender identity or gender — from full participation in society and from sharing the benefits of participation.



# Acronym key

**CBL:** Computer-based learning

**CHP:** Community Health Promotion

**DEI:** Diversity, Equity and Inclusion

**DEIC:** Diversity, Equity and Inclusion Council

**DEI Department:** Diversity, Equity and Inclusion Department

**EEO:** Equal Employment Opportunity

**HR:** Human Resources

**IHN-CCO:** InterCommunity Health Network Coordinated Care Organization

**IS:** Information Services

**LEP:** Limited English proficient

**LGBTQ+ :** Lesbian, Gay, Bisexual, Transgender, Queer and more

**NHOPI:** Native Hawaiian and Other Pacific Islander

**RBO:** Regional Business Office

**REAL-D:** Race, ethnicity, language and disability

**SDoH:** Social Determinants of Health

**SEC:** Samaritan Executive Council

**SERGs:** Samaritan Employee Resource Groups

**SHP:** Samaritan Health Plans

**SHS:** Samaritan Health Services

**SMG:** Samaritan Medical Group

**SOGI:** Sexual Orientation and Gender Identity

**TA:** Talent Acquisition







Samaritan  
Health Services

3600 NW Samaritan Drive  
Corvallis, OR 97330

154005 0124