**MCDHHS Equity Principles and Standards**

**I. Equity Value**

Equity refers to fair policies, decisions, and actions by the Montgomery County Department of Health and Human Services when impacting the lives of people.

Equity is a value of fairness that guides the way that Montgomery County Department of Health and Human Services works with customers, staff, and community to promote health, safety, well-being and self-sufficiency.

**Charge and Role -** To work collaboratively with DHHS and with community partners to build a culture of inclusion that promotes and sustains equitable outcomes for all DHHS stakeholders. The Equity Work engages in systematic planning, implementation, and evaluation of activities that embed equity as a core value for all the department’s operations, workforce, and seeks community input in the development and implementation of equity initiatives.

**EQUITY WORKGROUP MEMBERS**

**Pazit Aviv**, *Aging & Disability*

**Dr. Bridgers, Acting Director***, Health and Human Services*

**Rita Deng,** *Healthy Montgomery*

**Karen Gutierrez,** *Office of Community Affairs*

**Mark Hodge,** Office of the*Chief Operating Officer*

**Betty Lam**, *Chief*, *Office of Community Affairs*

**Mariana L. Serrani,** *Latino Health Initiative*

**Sanjana Quasem,** *Asian American Health Initiative*

**Christopher Rogers**, *Public Health Services*

**Rebecca F. Smith,** *Office of Community Affairs*

**Adriene Schifrien**,*Human Resources*

**Susan Seling**,*Chief,**Human Capital Management and Organizational Development*

**Patricia Spann***, Child Welfare Services*

**Pearline Tyson**, *Neighborhood Opportunities Network*

**Arlee Wallace**, *African American Health Program*

**TBD**, *Planning Accountability and Customer Service*

**II. Equity Principles**

**Dignity** – We believe that all individuals should be treated

with dignity and respect.

**Elimination of Disparities** – We believe in preventing and

eliminating social and health disparities to achieve optimal

health and well-being.

**Access** – We believe in ensuring access to effective

and high quality services that meet people’s needs, when

they need them, delivered by a professional workforce

which is competent to provide those services in a caring

and respectful manner.

**Distribution of Resources** – We believe that the resources

of the Department should be distributed in a manner that

maximizes the health, safety, well-being and self-sufficiency

of the community as a whole.

**Community Engagement and Participation** – We believe

that our diverse communities should be meaningfully

engaged in providing input and feedback on policies,

practices and services.

**III. Equity Standards**

The MCDHHS Equity Standards are intended to

operationalize the Equity value and principles for the

department. The standards will guide our actions to

improve quality, expand access and eliminate inequities.

By these standards, we will measure impact, advocate for

resources and maximize health gain for the whole

population.

1. An integrated service delivery system equitably supported

by technology, which enables staff to share information

and work collaboratively for improved client outcomes.

1. Recruit, develop and maintain a workforce that is engaged, accountable, responsible, respected, recognized and

 prepared for changing roles within the department and representative of the community we serve.

1. Working in partnership with the community, focus on the promotion of community health and well-being and the

 prevention of adverse outcomes.

1. Services to customers are delivered in a respectful manner and in the context of the customer's culture, language,

 values, and beliefs.

1. Print and multimedia communication materials and forms are developed in easy to understand language, taking into

consideration literacy level, cultural and linguistic appropriateness and people with other forms of communication

needs.

1. Program hours are accessible to customers, wait time for walk in services will be reasonable, appointments will be kept

on time.

1. Locations for direct services have adequate parking and are accessible by public transportation with the physical layout

of the exterior and interior adopting a universal design approach to accommodate people of diverse ability.

1. Each employee understands disparities, inequities, the social determinants of health and well-being and is

knowledgeable about community issues, needs and resources.

9. Data Standards are in place to accurately describe, measure, and evaluate disparities and inequities in ways that are compliant with federal and other funding requirements.

10. Decision tools supported by quantitative and qualitative data are applied to assist in determining policies and equitable distribution of resources.

11. Clear strategies for community engagement that focus on capacity building, creation of public policy, data collection

 and data sharing that supports health and equity across communities.