FY26 PHE Grantee Workplan: Racial Equity Guidance

The following Racial Equity Considerations were developed by the Shared Services Unit (SSU), with input from the Office of Health Equity (OHE), the Culturally and Linguistically Appropriate Services (CLAS) Initiative, the Office of Local and Regional Health (OLRH) including the Racial Equity Steering Committee, Growing a New Heart (GANH), Health Resources in Action (HRiA), and the New England Rural Health Association (NERHA).

Grantees are encouraged to either select from the following model activities or tailor the activities below, according to specific needs within their respective SSA. For additional support on drafting racial equity activities, please contact Amparo Cruz, Racial and Public Health Equity Program Manager at Growing a New Heart, directly via email: acruz@growinganewheart.org.

A racial equity theme must be selected for each objective selected under **Sustainability**, **Performance Standards**, and **Elective**. **Ensure at least one activity relates to the racial equity theme selected for the respective objective**. You may enter more than one racial equity activity but only one theme – please select the leading theme.

Model Racial Equity Activities			
#	**Themes**	**Recommended Considerations**	**Model Activities**
1	Linguistic Justice	Address the fundamental right of all people and communities to understand and meaningfully participate in programs and services, in their preferred languages.	1. Conduct language needs assessment to understand which populations are in the region and which languages are most used in your target area. 2. Ensure language assistance services (oral interpretation, written translation, ASL, Braille etc.) to expand or improve public health services. 3. Make public health flyers and other printed materials more accessible to a broader audience by including visual icons, plain language, screen-reader accessible PDFs, and by considering font choice, font size, and reading level. 4. Use visuals and plain language in public service announcements and during in-person assistance related to public health initiatives and functions. 5. Use an inspectional software that incorporates Spanish, Portuguese, Haitian Creole translation, and other languages as appropriate for the region.

			6. Translate signage and health education materials and other vital documents to Spanish, Portuguese, Haitian Creole, and other languages as appropriate for the region (E.g. Cyanobacteria warning placards, billboards). 7. Provide required trainings in Spanish, Portuguese, Haitian Creole, and other languages as appropriate for the region. 8. Provide on-site, in-person interpretation services, such as hoarding, food inspection, nursing, and mental-health challenges. 9. Consider language and other accessibility needs when selecting online permitting options.
2	Environmental Justice	Address the right for all people to live, work and play in safe, healthy environments, including by equitably allocating resources to close gaps in environmental protections and access.	1. Identify environmental justice populations in the region and reach out to organizations that provide direct services to Environmental Justice Block Grant (EJ BGs), in order to better understand unmet needs and explore opportunities to collaborate on addressing environmental injustices. 2. Attend immigrant-centered meetings to help identify and meet the needs of EJ BG areas. 3. Prioritize working with the most rural towns and ones with EJ BGs. 4. Educate landlords/property owners in EJ areas about housing codes and their responsibilities. Encourage pre-rental inspections of vacant units with Health Inspector, Building Commissioner and Fire Department to help ensure more equitable treatment in environmental justice areas. 5. Ensure that Local Board of Health members understand their role in enforcing Tobacco Regulations and other related issues (violence, substance misuse, mental health) to ensure standard follow up on violations, especially in communities serving EJ BGs.

3	Workforce Diversity	Cultivate a work culture of diversity and belonging, that values different viewpoints and lived experiences, in order to improve employee satisfaction and retention, and to improve the positive impact on communities served.	1. Review requirements on all job descriptions to include focus on range of experiences, including lived experience, rather than a primary focus on education/degree requirements. 2. Review job descriptions for an emphasis on equity and inclusion, for example, by prioritizing experience working collaboratively with diverse teams; serving diverse populations; and developing cultural competence and humility. 3. Review all job descriptions to ensure language that carries bias (e.g., "ambitious," "assertive," "takes risks," binary pronouns) is eliminated; and inclusive language is integrated (e.g., "adaptive," "collaborative," "self-aware"). 4. Incorporate diversity in hiring panels, both to address bias in hiring process and to provide professional development for diverse staff. 5. Involve community-based organizations in review of job descriptions and in promoting open positions through a variety of channels, rather than simply posting on Indeed and the town website. 6. Make sure all candidates are being interviewed with the same interview questions and provide those questions to all candidates ahead of time. 7. Avoid conversational interviews, which lead to connecting to and selecting people similar to ourselves. 8. Include diversity and inclusion interview questions, such as, "What values drive your efforts toward equity and inclusion, and how do those values translate into action?" 9. Hire staff who belong to the same ethnic and/or linguistic community represented in your region. 10. Develop systems and protocols for providing support and mentorship during the workday for employees with targeted identities. 11. Build iterative performance review processes; make it a continuous two-way conversation. 12. Provide ongoing required racial equity training for shared services staff and municipal staff. 13. Provide ongoing training about cultural humility, culturally responsive services, and trauma-informed services for shared service staff and municipal staff.

4	Community Engagement	Honoring "nothing about us without us," partner with community based and/or representative organizations to extend reach to historically under-resourced populations, with a focus on enhancing FPHS delivery capabilities.	1. Identify who is in the community and who has not been historically served among them. 2. Engage historically under-resourced populations in your SSA, including to help identify common barriers to engagement. 3. Form Community Advisory Boards (CABs); include people with lived experiences and intersectionality of identities. 4. Develop relationships with Community Based Organizations, Faith Based Organizations, community health centers and Tribal and Indigenous People Serving Organizations across the SSA. 5. Expand programming location/delivery method to reach historically under-resourced populations (e.g. running vaccine clinics in an Affordable Housing or Senior Living Community). 6. Collaborate on racial equity learning opportunities with other SSAs and their CABs to build a community of practice centering racial equity. 7. Hold public forums/listening sessions early in the process and at a variety of times and locations, while you can still act on community feedback. 8. Be clear about how you're going to act on and be accountable to community feedback and input. 9. Provide childcare at public forums/events, including at meetings of municipal bodies that are seeking public engagement (public hearings, town meeting, etc.). 10. Publicize public forums/events broadly, in multiple forms, and in multiple languages. 11. Invite community partners to governing board meetings. 12. Ensure community engagement activity across the continuum of the Quality Improvement process. 13. Be intentional about relationship building when working with Cultural Brokers, to ensure your services or information distributed are linguistically and culturally appropriate.

5	CLAS Standards	At MA DPH, CLAS Standards are used as a Program Management Quality Improvement (PMQI) tool to advance health and racial equity, by collecting and analyzing data, engaging communities authentically, diversifying workforce to represent community, and ensuring language access and meaningful, two-way communication.	1. Get an overview of the 15 federal CLAS standards principles and learn the 6 CLAS-related Areas for Action. 2. Understand the importance of integrating CLAS. Define common terminologies, including health equity, health inequities, social determinant of health, structural and institutional racism. 3. Utilize learnings and resources from CLAS to develop standards of practice and policies that support integration of CLAS across workplan activities, such as developing language access plans or communication standards for all public-facing documents. 4. Identify 2-3 CLAS Areas for Action and assess the current state of implementation in your service area. 5. Develop a plan for monitoring CLAS implementation by contracted vendors and train relevant staff on CLAS standards [offer training options]. 6. Use CLAS standards as a Quality Improvement tool to find where gaps exist in the implementation of your services.

Racial Equity Resources *Revised April 2, 2025*		
DPH Offices and Bureaus: ● Office of Health Equity (OHE) ● State Office of Rural Health (SORH) ● Root Cause Solutions Exchange ● Bureau of Community Health and Prevention (BCHAP) ● Bureau of Substance Addiction Services (BSAS) **Additional Resources:** ● New England Rural Health Association	**Racial Equity Tools and Resources:** ● Racial Equity Data Roadmap ● PCES & ACES Data ● Community Health Equity Initiative ● Massachusetts Population Health Information Tool ● Environmental Justice Populations in Massachusetts ● Interactive Map of 2022 EJ Populations in Massachusetts ● The Health Equitree ● Health Equity Policy Framework ● Cultural Competency Program for Disaster Preparedness and Crisis Response ● Improving Cultural Competency for Behavioral Health Professionals ● Culturally and Linguistically Appropriate Services (CLAS) in Nursing ● Making CLAS Happen: Six Areas for Action ● Preferred Terms for Select Population Groups and Communities	**Continuing Learning:** ● Community Commons BIPOC Health Equity Library ● Public Health Accreditation Board IDEA Glossary ● Six Guiding Principles to a Trauma Informed Approach ● Trauma Informed Community Building and Engagement ● Countering the Production of Health Inequities ● How History Has Shaped Racial and Ethnic Health Disparities ● Coming Down For Justice ● MPHA Health Equity Policy Framework. ● Pathways to Health Equity ● PHIWMA Race and Health Equity Resource Guide ● Health Equity and Community Partnerships for Local Public Health ● Massachusetts | County Health Rankings & Roadmaps

Appendices:
Appendix I: DPH 2044 Strategic Plan to Advance Racial Equity
Appendix II: OLRH Racial Equity Statement