# Washington State Department of Health Health Equity Zone for Native Communities Checklist for Submission

## Before you begin

- 1. Make sure that you meet the eligibility criteria listed on the submission form.
- 2. Name a point person to gather and/or write the required responses on the submission form

## Information and Workshop Sessions

The Indigenous Advisory Panel and HEZ staff will be available to community members to answer questions from submitters throughout the submission process. Zoom links for these sessions are available on the HEZ WA Portal Open Submissions page.

- April 18 from 12:00 2:00 PM
- May 8 from 6:00 8:00 PM

\*If you or your community would like to request support in a language other than English please reach out to <u>HealthEquityZones@doh.wa.gov</u>. We will not be able to take interpretation requests made less than 2 weeks in advance.

# Questions to Consider When Completing Form

## **Community Input**

- Have you connected with other people about how being selected as a Health Equity
  Zone could benefit your community? Other people may include elders, youth, providers, and members of organizations that also serve your community.
- □ Have you thought about your community's key characteristics and strengths?
- □ Have you thought about challenges your community faces?
- □ What have been ways you have wanted to address these challenges?
- □ How could being a HEZ impact your community?

## Data and Supporting Resources

- □ Have you identified ways to give a snapshot of health-related strengths and challenges unique to your community?
- □ Have you collected any stories, anecdotes, or reports you want to include?
- Have you removed personally identifying information from any reports or data included?
- Do you have cultural teachings or information on the community that you feel will help support your nomination?

## Submission Form Completion

When you are ready to submit your nomination, check the following to ensure you have a completed application:

## Eligibility

- Represent a Tribe (federally and non-federally recognized), Tribal Organization, Urban Indian Organization, or Collaborative of these entities.
- □ Identify as a Native-led entity.
- Use a community-driven approach.
- □ Serve and prioritize the Native population.
- □ Is the community you are nominating geographically defined and connected?
- □ Is the community small enough for focused solutions to have an impact?

## **Primary Contact Information**

- □ Have you identified a primary contact?
  - Note: the primary contact is only for the submission process. If a zone is selected the primary contact will not be expected to lead efforts.
- □ Can they be contacted via phone and email?
- □ Are they available to answer questions or do follow up during the submission and selection process?
- Does your primary contact require any language support outside of English? If yes contact the HEZ program staff at <u>healthequityzones@doh.wa.gov</u> to ensure they have the language support needed. Please provide at least 2 weeks for this request to be met.

#### Final Review Before Submission

- □ You have reviewed the scoring rubric.
- □ You have reviewed and checked all the information for accuracy.
- □ You have double checked that you have supporting documents in a file type that can be uploaded (PDF, DOC, DOCX, PNG, JPG, JPEG, GIF)
- □ You have proofread all final documents to ensure they are free of grammatical and spelling errors.