Leaping Forward: Designing a Health Equity Data Roadmap

Kathi Dangerfield, MS, CPHQ | Linda Staubli, MSN, RN, CCRN-K, ACCNS-AG

uchealth

Objectives

- List health equity data tracked by national quality organizations.
- Understand how to develop an equity data road map.
- Explain collection and analysis of hospital data for performance improvement opportunities.

Background

Reducing patient health inequities is a national priority.[1] Equity data is required by national quality organizations with the overarching goal to gain valuable insights into areas where disparities exist and design targeted interventions to improve outcomes for all patients.

- The Joint Commission added a national patient safety goal and enacted requirements to reduce health care disparities.[2]
- CMS's inpatient quality reporting program finalized the mandatory reporting of 2 equity structural measures and added the collection and reporting of social drivers of health measures.[3]
- U.S. News and World Report began reporting on 3 health equity measures with Top Hospital rankings and also began collecting stratified quality outcomes for the Top Maternity Hospital survey.[4]
- Commercial payer incentive programs and registries have begun requesting stratified outcomes
- Vizient Q&A stratifies measures for equity
- The Agency for Healthcare Research and Quality (AHRQ) offers resources and tools for tracking and addressing disparities, such as the National Healthcare Quality and Disparities Report.

Hospitals must be intentional in not only meeting all the new equity data requirements but ensuring that data is useful and integrated into improvement work.

Purpose

"Every roadmap in life begins with a challenge" – Amar Narayan

The purpose of this presentation is to define and describe the key steps that healthcare facilities can take to effectively incorporate health equity metrics.
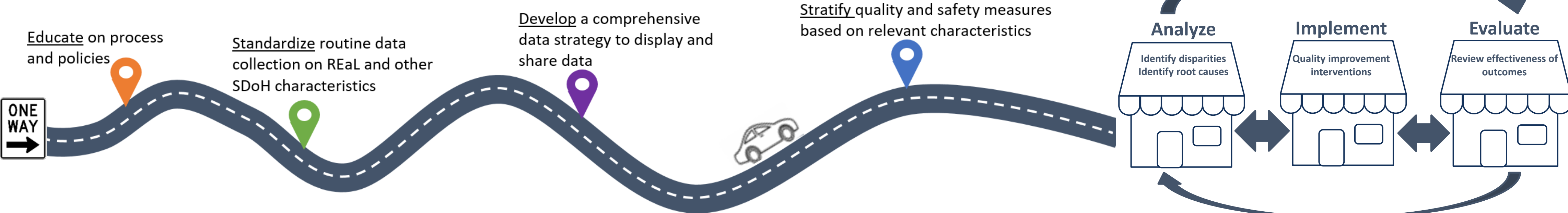
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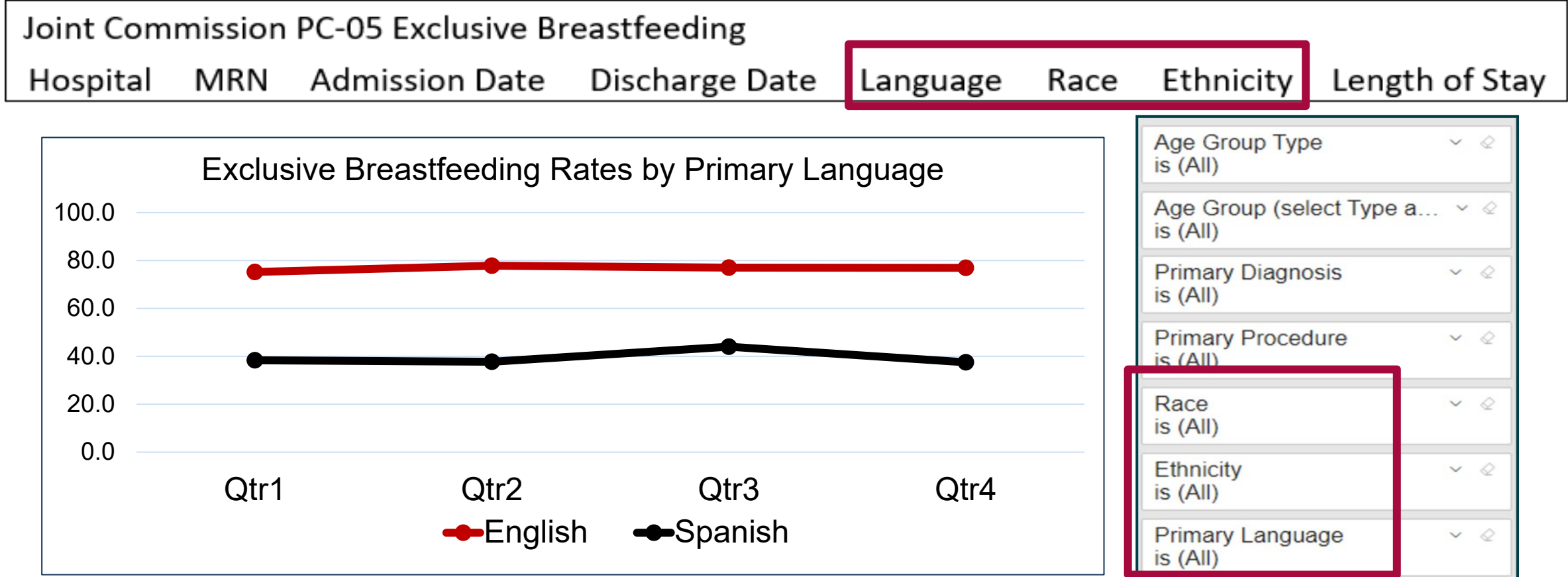Kathi.Dangerfield@uchealth.org

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Interventions

1. Educated staff after adapting health equity language into policy and process.
2. Standardized routine data collection on patient race, ethnicity, and language preferences (REaL) through Health Equity Initiative Project, and then expanded to include gender identification, sexual orientation, disability and military status.
3. Developed a comprehensive data strategy to integrate this information into standard reports and dashboards.
   a. Include REaL categories on all case-level reports (micro).
   b. Include filters on current local and metric specific dashboard (mezzo).
   c. Redesign Board Quality and Safety Dashboard to include equity filters (macro).
4. Stratified key quality outcomes by REaL on internal dashboards:
   a. Combined electronic health record (EHR) and Vizient outcome data on mortality and readmission dashboards.
   b. Created an analytic tool for the obstetric service line that includes race, primary language and ethnicity at patient level for perinatal core measures. Allows us to identify healthcare disparities in c-section, breastfeeding and newborn complication rates.
   c. Developed a SDoH dashboard used by the care management team.

Educate on process and policies

Standardize routine data collection on REaL and other SDoH characteristics

Develop a comprehensive data strategy to display and share data

Stratify quality and safety measures based on relevant characteristics

Analyze — Identify disparities, Identify root causes
Implement — Quality improvement interventions
Evaluate — Review effectiveness of outcomes

Examples

Joint Commission PC-05 Exclusive Breastfeeding

Hospital | MRN | Admission Date | Discharge Date | Language | Race | Ethnicity | Length of Stay

Exclusive Breastfeeding Rates by Primary Language

— English — Spanish

Age Group Type is (All)
Age Group (select Type a... is (All)
Primary Diagnosis is (All)
Primary Procedure is (All)
Race is (All)
Ethnicity is (All)
Primary Language is (All)

Outcomes and Impact

- Quantifying disparities by collecting and stratifying outcomes is a crucial part of the health equity journey and should drive quality improvement initiatives.
- By designing our EHR and dashboards to gather and display outcomes by REaL we are now able to move forward with this work.
- Data needs to be analyzed in synchrony with other collaborative tools (such as the Vizient Equity Collaborative, the Vizient Quality and Accountability equity measures, the Health Equity Alignment Tool and Vizient Vulnerability Index) to better understand our patients and their individual needs. This also helps identify root causes to appropriately focus interventions.
- Identifying disparities and targeting interventions is just the beginning. We must understand the potential impact that socioeconomic, cultural or staff biases may have on the care we provide.
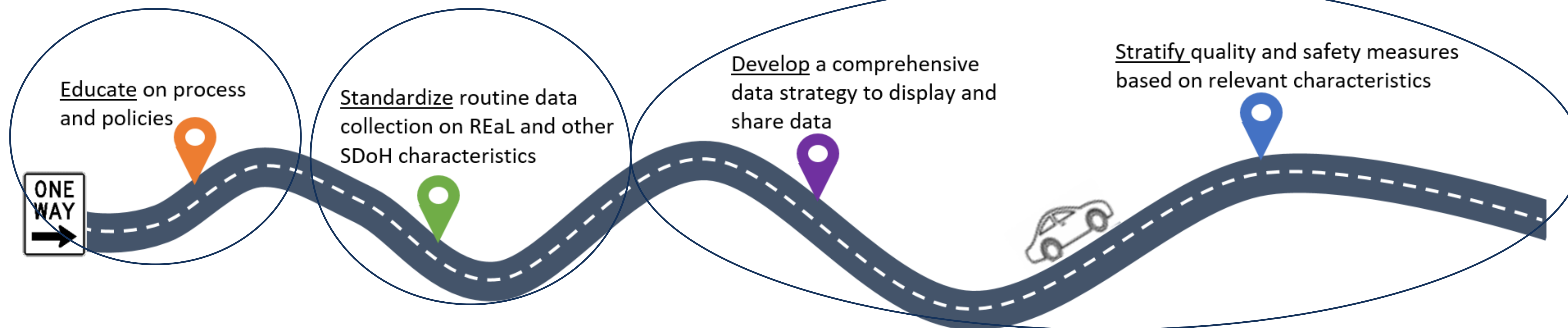
Conclusions

Healthcare organizations can take meaningful steps toward reducing healthcare disparities, promoting health equity, and ensuring all patients receive equitable and high-quality care by tracking health equity data and designing targeted interventions.

References

1. Federal News Network (2022, July 8). *Health equity takes center stage in President Biden's 2023 budget request* Website. https://federalnewsnetwork.com/federal-insights/2022/07/health-equity-takes-center-stage-in-president-bidens-2023-budget-request/
2. Joint Commission (2022, June 20). *R3 Report: Requirement, Rationale, Reference* Website. https://www.jointcommission.org/-/media/tjc/documents/standards/r3-reports/r3_disparities_july2022-6-20-2022.pdf
3. CMS (2023, July 13). *CMS Framework for Health Equity* Website. https://www.cms.gov/about-cms/agency-information/omh/health-equity-programs/cms-framework-for-health-equity
4. Binger, T. (2022, July 26). *Methodology U.S. News & World Report 2022-2023 Best Hospitals Health Equity Measures* Website. https://health.usnews.com/media/best-hospitals/Best-Hospitals-Health-Equity-2022-23

Educate on process and policies

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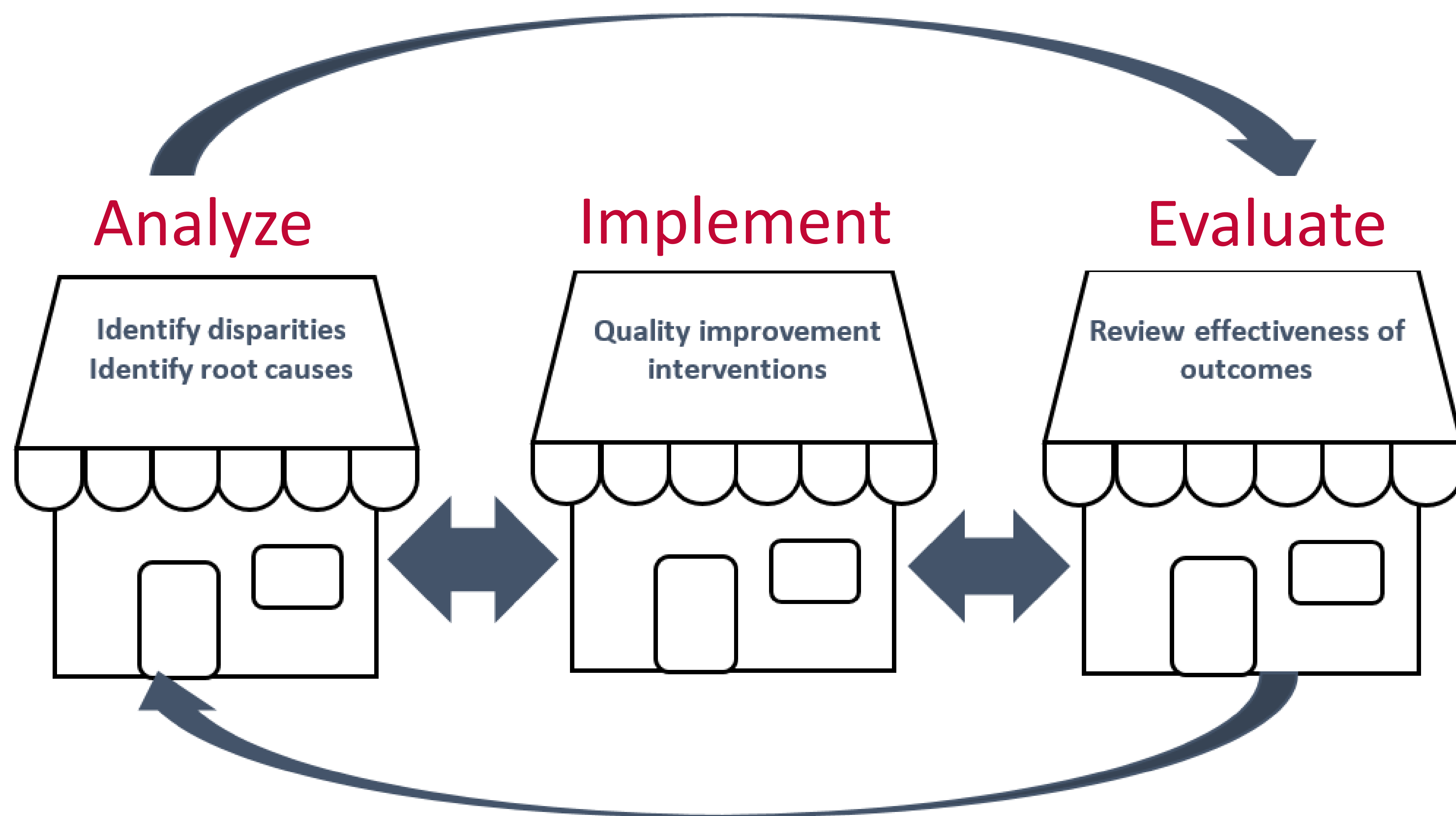**Stratify** quality and safety measures based on relevant characteristics

ONE WAY →

- Prepare our people and process.

- Dedicate leadership and staff resources to our equity goals.

- Adapt health equity language into training, process and policy.

- Improve language services, including certification and tracking and access to bilingual providers.

- Provide ability for patients and staff to provide feedback on equity concerns.

- Focus on building a strong foundation with our employees:
  - Unconscious Bias

- Health Equity Initiative Project to standardize collection of demographics from our patients. This includes patient race, ethnicity, and language preferences, but we also expanded to include gender identification, sexual orientation, disability and military status.

- Provide FAQs and annual training to patient access team members on importance of culturally sensitive collection of these demographic and/or Social Drivers of Health (SDoH) information.

- Expand collection of SDoH information in CY2024.

- Quantify inequities by collecting and stratifying data is a crucial part of the health equity journey and guides our quality improvement initiatives.

- Design new dashboards/ reports, and enhance current dashboards/ reports to allow filtering by additional patient characteristics.

- Once we were confident that we had a standardized method to collect data we moved to adding these patient characteristics to data flows, data sets and dashboards. This included combing Vizient and EPIC data to allow us to capture additional non-Vizient fields like primary language.

- FY24 Board Quality Dashboard will expand to include measures by race/ethnicity – allowing our leaders access to stratified key performance indicators.

- Provide transparency to these dashboards to staff, leaders and board members.

Analyze

Identify disparities
Identify root causes

Implement

Quality improvement interventions

Evaluate

Review effectiveness of outcomes

- Must be completed with context:
  - What is the population size?
  - Is there opportunity over time?
  - Is it statistically significant- does it need to be?
  - How many patient's are impacted?
  - What is the level of harm?

- Be preoccupied with identified opportunity.

- Partner with clinical experts.

- Tailor to unique challenges faced by each care area and population.

- Could require knowledge of broader community influences.

- Determine if interventions needs to be changed, enhanced or added.

- Ensure improvement is sustained.

Healthcare organizations can take meaningful steps toward reducing healthcare disparities, promoting health equity, and ensuring all patients receive equitable and high-quality care by tracking health equity data and designing targeted interventions.

"Every patient deserves the right to safe, equitable health care. All health care organizations have a responsibility to identify and address the disparities that their unique patient populations face."

Dr. Jonathan B. Perlin, M.D., Ph.D. - President and CEO - The Joint Commission

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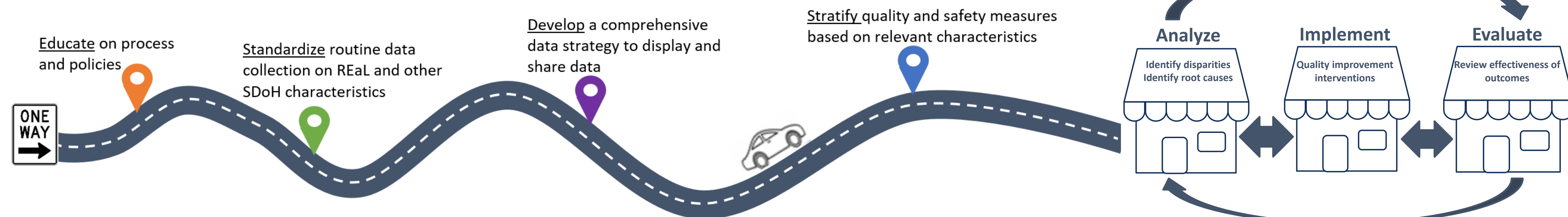
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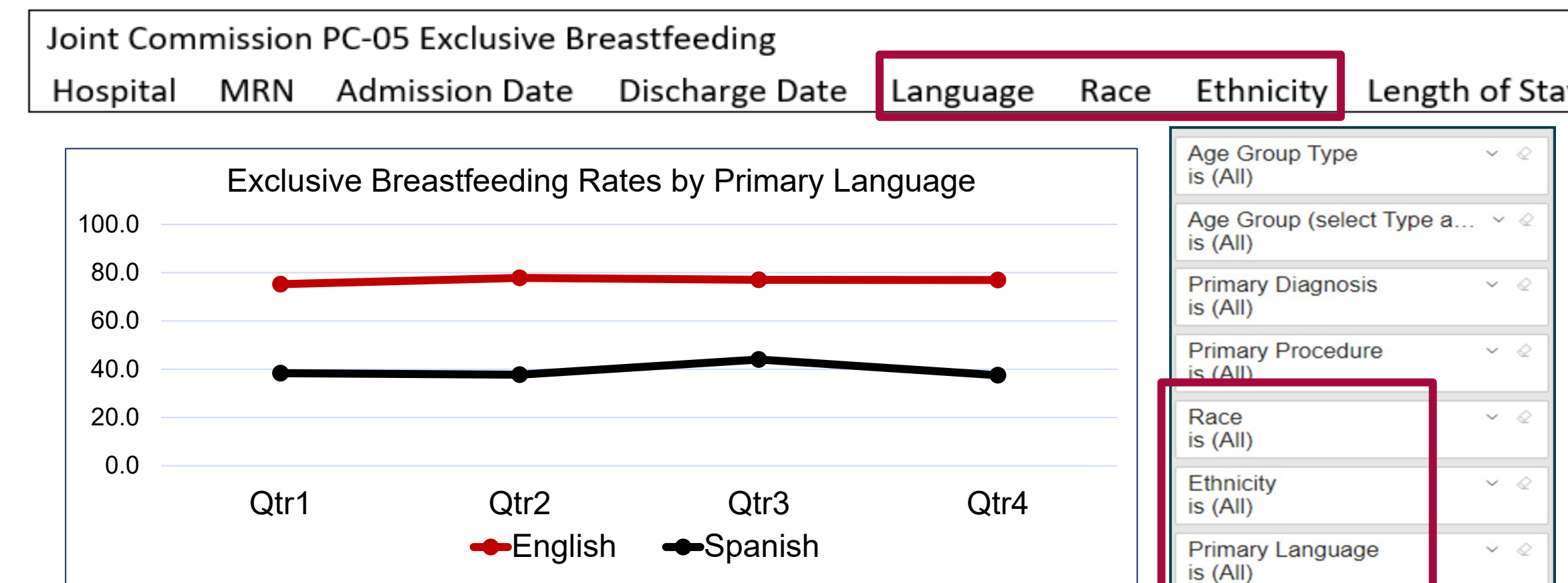O: 720-848-6180
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