

ORGANIZATION	WHO THEY ARE	HOW ARE THEY ADDRESSING DISPARITIES?	CHALLENGES	SUCCESES	KEY INGREDIENTS
<p>1. Baylor Health Care System Dallas, TX</p>	<p>A non-profit, faith-based health care system providing health care, educational, research, and community services throughout North Texas</p>	<p>Stratify data by race/ethnicity, payer proxy, and gender Create the Office of Health Equity to address disparities in health access, health care delivery, and health outcomes Business case: address disparities by identifying inefficiencies and waste</p>	<p>Embed disparity issues in the quality and patient-centered frameworks Ensure accurate data collection Measure and report data: identify disparities within the data and develop appropriate quality improvement programs</p>	<p>Within Office of Health Equity improved access (charitable clinics, link high risk patients to community health worker), delivery (reporting and monitoring disparities), and outcomes (diabetes coaching program) Restructure registration system for collecting patient information</p>	<p>Following the IOM's <i>Crossing the Quality Chasm</i>, a system-wide cultural transformation to adopt the six pillars Getting senior level buy-in and proactive leadership that understands how inequity impacts overall quality Develop the business case to address disparities</p>
<p>2. Contra Costa Health Services Martinez, CA</p>	<p>A comprehensive and integrated county health system that provides health care services, community improvement, and environmental protection</p>	<p>Developing a system-wide goal to reduce health disparities via the Reducing Health Disparities (RHD) Framework: Key components include: enhancement and development of organizational supports, linguistic access, staff education and development, and community engagement and partnerships</p>	<p>Creating change across the entire organization to address disparities Establishing understanding of RHD framework, and how core principles are critical to providing culturally and linguistically appropriate services Influencing key CCHS decision makers to integrate RHD principles into their existing efforts Providing resources to assist in RHD efforts Establishing benchmarks to measure the success of RHD efforts</p>	<p>Creating the Reducing Health Disparities 5-year plan Creating the Reducing Health Disparities Unit Partnering in a multi-county live Health Care Interpreter Network Equipping Contra Costa Regional Medical Center and 8 Health Centers with interpretation equipment & training for staff Launch of training for all CCHS managers and supervisors to promote Service Excellence standards Creation and distribution of Community Health Indicators highlighting population health and disparities Promulgation of formal policies for Linguistic Access, Service Excellence and Reducing Health Disparities Monthly highlights of RHD efforts in employee newsletter</p>	<p>Identifying key senior-level champions Marrying RHD efforts with division interests/needs Committing resources Identifying disparities through accurate data Developing RHD measures of success and benchmarks Developing organizational supports for data collection, linguistic access, end user and staff feedback mechanisms End user engagement Developing local partnerships Implementing cultural competency and communication training for staff Developing a shared vocabulary and understanding</p>

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<p>3. Cooper Green Mercy Hospital Birmingham, AL</p>	<p>Only county hospital in metro area providing inpatient and outpatient services, without regard for a patient's ability to pay</p>	<p>Diversifying leadership</p> <p>Developing and implementing community-based disparities initiatives (e.g. African-American Health Initiative)</p> <p>Implementing programs to train their own community health workers</p> <p>Monitor outcomes through their IT systems</p>	<p>Addressing and embedding disparities in a quality framework</p> <p>Addressing disparities in communities where there are no primary care providers</p> <p>Securing funding for interpreter services</p> <p>Addressing social factors that influence health (e.g. transportation, education)</p>	<p>Development of partnerships: Interpreter services via collaboration with university and a mechanism to train community health workers via Minority Health Program at University of Alabama (UAB)</p> <p>Developing IT system to measure and report disparities</p> <p>Having specialty care facilities in communities lacking services</p> <p>Creation of Wellness Centers (online health and prevention resources for patients)</p>	<p>Developing partnerships with UAB, other hospitals, and local faith-based groups</p> <p>Educating leadership about patients' diverse backgrounds and experiences</p> <p>Identifying key senior-level champion</p> <p>Getting staff buy-in</p> <p>Explanation of business case to leadership and staff (e.g. makes daily jobs of staff easier)</p>
<p>4. Duke University Health System Durham, North Carolina</p>	<p>An academic health care system comprising of three main hospitals including the Duke University Medical Center, and several primary and specialty care clinics throughout North Carolina</p>	<p>Participating as one of the hospitals in RWJF's Expecting Success: Excellence in Cardiac Care Program</p> <p>Stratifying performance scorecards by race and ethnicity</p> <p>Implementing extensive organization-wide training on culturally competent care delivery and workplace diversity</p>	<p>Getting physician buy-in</p> <p>Collecting of reliable and accurate patient information</p> <p>Addressing disparities in a large complex comprehensive healthcare delivery system with multiple locations</p>	<p>Re-structuring registration system for collecting patient information: shift to patient self-identification</p> <p>Comprehensive education and training program for all staff addressing workplace diversity and conflict</p> <p>Interactive Grand Rounds professional development /cultural competence care delivery for clinical staff and faculty</p>	<p>Identifying senior- and clinician-level champions</p> <p>Identifying disparities through strong and accurate data</p> <p>Integrate disparities efforts with existing performance improvement infrastructure</p>

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<p>5. Henry Ford Health System Detroit, MI</p>	<p>Nonprofit integrated health system which includes six hospitals, medical centers, health plan, community services, and community partnerships</p>	<p>Developing and implementing wellness efforts in minority communities Support from senior leadership to do research that identifies disparities and gaps in care</p>	<p>Integrating disparity efforts into the entire system Proving to leadership that disparities exist</p>	<p>Establishing the Institute on Multicultural Health: focus on clinical guidance and community outreach Establishing the Health Disparities Research Collaborative to identify opportunities for research and collaboration</p>	<p>Getting key senior-level buy-in and champions Having a critical mass of influential investigators interested in disparities Identifying disparities through strong and accurate data Developing partnerships with other organizations</p>
<p>6. Los Angeles County and U of Southern California Healthcare Network Los Angeles, CA</p>	<p>Partnered with the Keck School of Medicine of USC One of the largest teaching and acute care hospitals in the country servicing central Los Angeles County</p>	<p>Focusing on improving communication with emphasis on cultural and linguistic issues Collecting data on race and ethnicity, country of origin, and language Training bilingual staff and develop collaborations</p>	<p>Embedding disparities issues in the quality and patient safety frameworks Securing leadership buy-in Educating leadership about patients' diverse backgrounds and experiences Demonstrating that disparities issues are addressable and solvable</p>	<p>Developing and implementing rigorous data collection methods</p>	<p>Identifying disparities through rigorous data collection methods Getting senior-level buy-in Developing Collaborations</p>

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<p>7. Massachusetts General Hospital Boston, MA</p>	<p>A private, non-profit, academic health center providing health care, education, research, and community services throughout the greater Boston area</p>	<p>Collecting patient race/ethnicity data</p> <p>Stratifying quality measures by race/ethnicity</p> <p>Monitoring for disparities through routine release of a Disparities Dashboard for hospital leadership</p> <p>Developing interventions to address disparities in diabetes management and colon cancer screening</p> <p>Creating several efforts to raise awareness and educate hospital faculty and staff about disparities</p>	<p>Developing additional measures to identify disparities</p> <p>Better monitoring of patient experience by race/ethnicity</p>	<p>Developing Disparities Committee</p> <p>Developing Disparities Dashboard</p> <p>Reporting equity measures publicly available on web</p> <p>Developing and implementing Chelsea Diabetes Management Program</p> <p>Developing and implementing Colorectal Cancer Screening Navigator Program</p>	<p>Following the IOM's <i>Crossing the Quality Chasm</i></p> <p>Having senior level buy-in and proactive leadership that understands how disparities impacts overall quality</p> <p>Using an action-oriented approach</p> <p>Seeding money for interventions</p> <p>Identifying and having champions, expertise, and cross-institutional support</p>
<p>8. Montefiore Medical Center Bronx, NY</p>	<p>An integrated healthcare delivery system of hospitals, primary care sites, home health, post-acute, and community programs throughout the Bronx</p> <p>The university hospital for the Albert Einstein College of Medicine</p>	<p>Participating as one of the hospitals in RWJF's Expecting Success: Excellence in Cardiac Care Program</p> <p>Implementing standardized training and IT mechanisms for collecting patient demographics</p> <p>Developing and implementing community-based programs in an ethnically and culturally diverse community</p> <p>Focusing on conditions prevalent in the community, such as diabetes and cardiovascular disease</p>	<p>Extending and integrating quality improvement efforts into post-acute and community settings</p>	<p>Implementing extensive changes to registration systems to collect patient race, ethnicity, and language information</p> <p>Improving cardiovascular care</p> <p>Physician leadership and engagement</p> <p>Interdisciplinary teamwork</p>	<p>Senior Executive stewardship</p> <p>Collecting input from "front-line" staff at an early stage</p> <p>Involving a broad number of disciplines in the implementation design process</p> <p>Embedding a cognizance of disparities into quality and service improvement efforts</p>

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<p>9. Seattle Children’s Hospital</p> <p>Seattle, WA</p>	<p>A leading children’s academic hospital that offers advanced in-patient, surgical, emergency, and, specialty care and child advocacy programs</p>	<p>Evaluate hospital goals, family satisfaction, and clinical outcomes by race/ethnicity and language</p> <p>Creation of The Center for Diversity and Health Equity</p> <p>Creation of Patient and Family Relations Program</p> <p>Participant in RWJF’s Speaking Together: National Language Services Network</p>	<p>Getting physician- and staff-level buy-in: shifting provider behavior to engage in active communication with patients and family</p> <p>Identify key leaders in disparities to spearhead efforts at the hospital</p> <p>Diversify leadership, faculty, and staff</p>	<p>Center for Diversity and Health Equity has increased diversity, improved linguistic services, and mandated cultural competency training</p> <p>Extensive interpreter services</p> <p>Strategic Plan for Diversity approved by board and institutionalized a long-term commitment to diversity</p>	<p>Getting buy-in from key leadership champions</p> <p>Having the commitment from the Board of Directors</p> <p>Institutionalized Initiatives</p> <p>Identifying disparities through rigorous data collection methods</p> <p>Developing partnerships between data analysts and clinical champions</p>
<p>10. University of Mississippi Medical Center</p> <p>Jackson, MS</p>	<p>As the health sciences campus of the University of Mississippi, the Medical Center focuses on teaching, research, service, and leadership in the health sciences</p>	<p>Participating as one of the hospitals in RWJF’s Expecting Success: Excellence in Cardiac Care program</p> <p>Participating in the AMA’s Patient-Centered Communication Program</p> <p>Participating in Jackson Heart Study in collaboration with Jackson State Univ., Tougaloo College, and NIH</p> <p>Participating in the Delta Health Alliance: partnerships with universities to improve access and availability of care</p>	<p>Creating a continuity between educational and hospital-centered disparities initiatives</p>	<p>Enhancing research resources at minority institutions, and increased opportunities for minority students in health sciences through the Jackson Heart Study, which is the largest investigation of cardiovascular disease (CVD) in African-Americans</p> <p>Continuation of the Patient-Centered Communication Program at the hospital</p> <p>Organization-wide priority and goal to increase underrepresented minorities at the medical school</p>	<p>Getting key senior-level buy-in and support</p> <p>Developing partnerships and collaborations such as the Mississippi Institute for the Improvement of Geographic Minority Health and Delta Health Alliance</p>