LEAD Collaborative

Best Practice Webinar #3

February 14, 2023

LEAD Information Session Housekeeping

Session will be 60 minutes.

Session is being recorded.

Participants will be muted upon entry. Please keep microphone muted unless you are speaking.

Use the Chat feature to post comments or ask questions. You can also use the "Raise Hand" feature to ask questions.

When speakers are presenting, it is suggested that "Speaker View" is used. Otherwise, "Gallery View" is suggested.
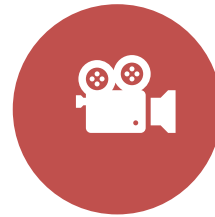
Please ensure your Zoom screen name reflects how you wish to be identified.

Keep video on (if possible).

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Agenda

2:00-2:05 PM: Welcome/Introductions

2:05-2:25 PM: Featured Presentation

2:25-2:35 PM: Q & A

2:35-2:45 PM: Breakouts

2:45-2:55 PM: Report Out/Commentary

2:55-3:00 PM: Thank You/Wrap Up

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Constructive Disruption in Health Systems

Leon Caldwell, Ph.D.

Senior Director Health Equity Strategies and Innovation

Institute for Diversity and Health Equity

American Hospital Association

Leaders in Equity and Diversity (LEAD) Collaborative: Constructive Disruption in Health Systems

Leon D. Caldwell, Ph.D.
Senior Director, Health Equity Strategies and Innovation
Institute for Diversity and Health Equity
American Hospital Association

The Journey

- Welcome
- Constructive Disruption defined
- The Societal factors and the need for solutions
- The IFDHE Resources: The Health Equity Roadmap
- Open Commentary

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Health is More Than Health Care

80 percent of our health is determined by societal factors

40%
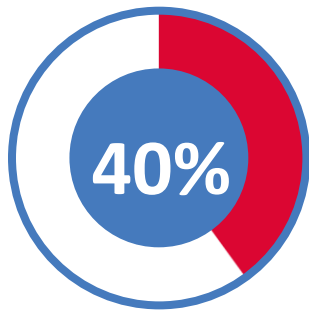
Socioeconomic Factors
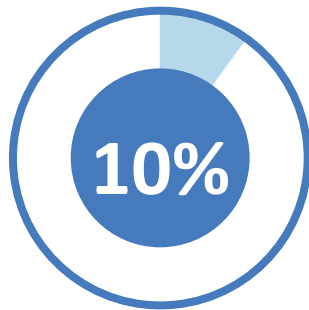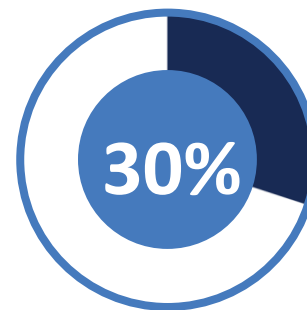
Education | Job Status | Family/Social Support

Income | Community Safety

10%

Physical Environment

Environment

30%

Health Behaviors

Tobacco Use | Diet & Exercise

Alcohol Use | Sexual Activity

20%
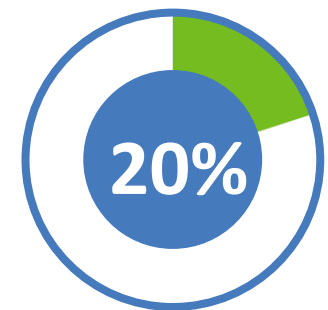
Health Care

Access to Quality Care

Source: http://www.countyhealthrankings.org/county-health-rankings-model

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Societal Factors Impact Health Outcomes

Impact an individual's health regardless of age, gender, race or ethnicity

Economic Stabilty:	Neighborhood & Physical Environment:	Education:	Food:	Community & Social Context:	Health Care Systems:
» Employment	» Housing	» Literacy	» Hunger	» Social Integration	» Health Coverage
» Income	» Transportation	» Language	» Access to Healthy Options	» Community Engagement	» Provider Availability
» Expenses	» Safety	» Higher Education		» Support Systems	» Provider Linguistic & Cultural Competency
» Debt	» Parks	» Vocational Training		» Discrimination	
» Medical Bills	» Playgrounds	» Early Childhood Education			» Quality of Care
» Support	» Walkability				

Health Outcomes:

» Mortality   » Life Expectancy   » Health Care Expenditures   » Health Status   » Functional Limitations

Source: Kaiser Family Foundation. Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity

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Societal Factors that Influence Health

A Framework for Hospitals

Social Needs

Individuals' non-medical, social or economic circumstances that hinder their ability to stay healthy and/or recover from illness.

Social Determinants of Health

Underlying social and economic conditions that influence people's ability to be healthy.

Systemic Causes

The fundamental causes of the social inequities that lead to poor health.

SYSTEMIC

COMMUNITY

PERSON
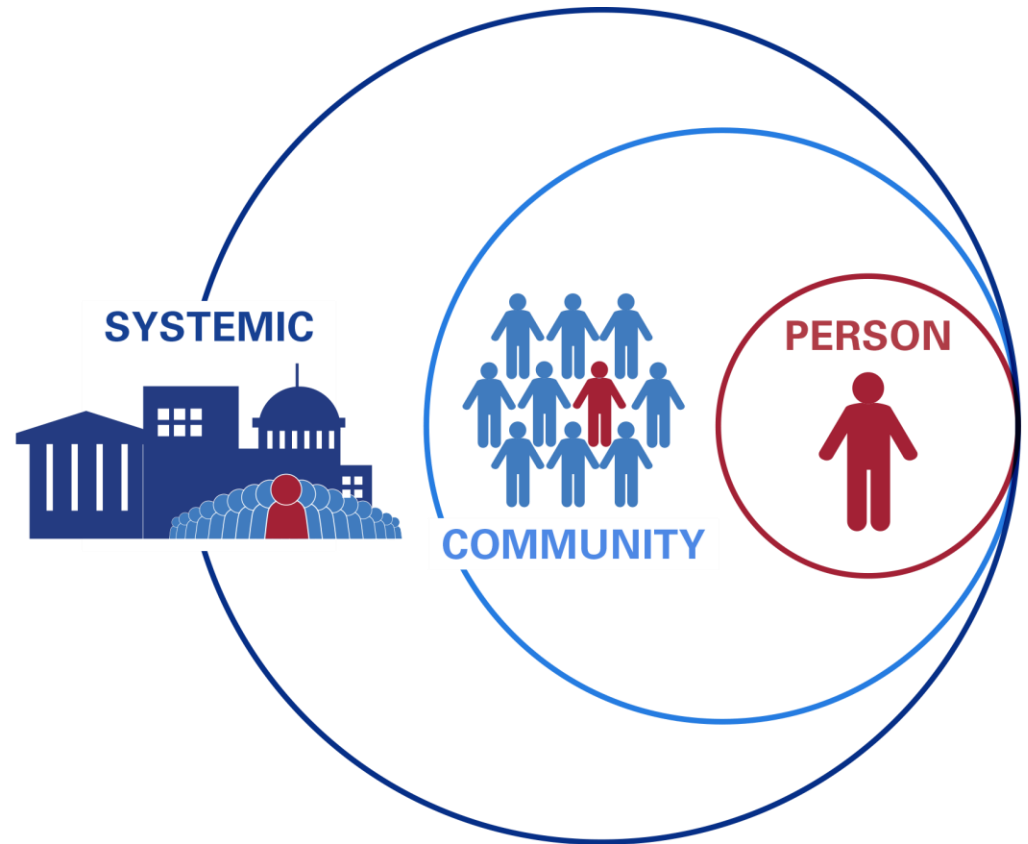
Societal Factors that Influence Health

Social Needs
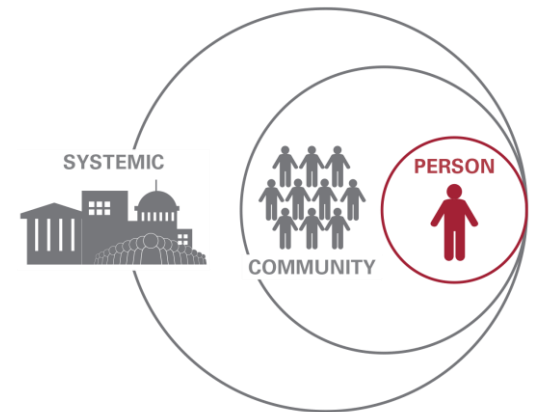
Who: Individuals who present for health care services Setting: Patient encounter at a point of care.

Examples: Lack of stable housing, limited access to healthy food, loneliness, unsafe home.

Strategies: Screening and documenting, referrals, food pharmacies, temporary supportive housing, signing up for benefits.

Societal Factors that Influence Health

Social Determinants of Health
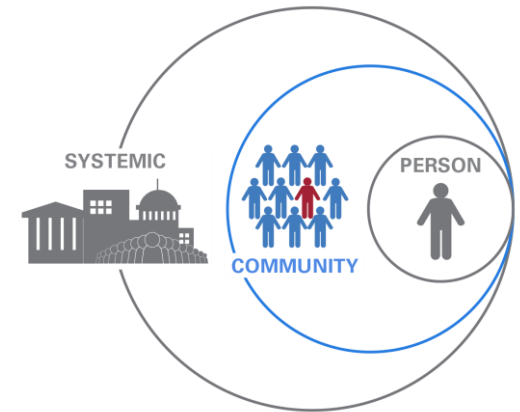
Who: The community served by a hospital
Setting: In the community

Examples: Food deserts, lack of affordable housing, community violence

Strategies: Partner with community-based organizations and multi-sector stakeholders, support food banks, build grocery stores, invest in affordable housing, create employment opportunities.

Societal Factors that Influence Health

Systemic Causes
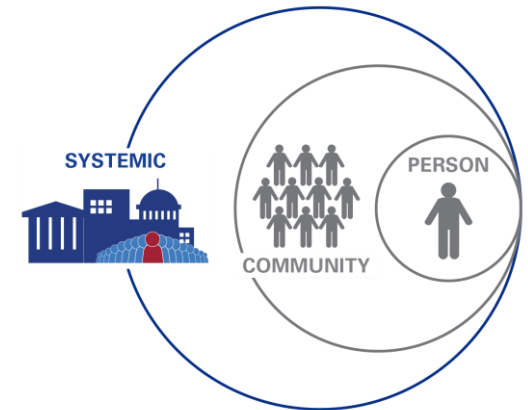
Who: Anchor organizations such as hospitals and health systems, community leaders, legislators or policy makers
Setting: Community, state or national

Examples: Systemic inequities such as racism, sexism, generational poverty, redlining, environmental injustice

Strategies: Support and affect policy, system and environmental changes, incentivize investments, support higher wages, advocate for child tax credits.

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Strategies Related to Societal Factors Must be Driven by Data

- **Identify** social needs that impact patients and connect with community resources
- **Aggregate** data across patients to focus a social determinants strategy

- **Track** trends or risks in the community
- **Guide** community partnerships and CHNAs

- **Enable** system-wide research at the national level to understand the social needs of communities
- **Tailor** state and federal programs to meet those needs
- **Support** policy and payment reforms

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Macro	Micro
Federal housing policies – tax credits – HUD, VA and Treasury	State and Local Government Policies
Food - USDA	Hospital and Health System Policies
CMS and Joint Commission –	Education policy –
Labor policy	Hiring Policy

AHA Health Equity Roadmap

The Health Equity Roadmap is a framework to help hospitals and health care systems chart their own paths toward transformation — thus becoming more equitable and inclusive organizations.

The Six Levers of Transformation

Research and experience show that leading health equity strategies cut across six levers of transformation within health care organizational structures.

Culturally Appropriate Patient Care

Equitable and Inclusive Organizational Policies

Collection and Use of Data to Drive Action

Diverse Representation in Leadership and Governance
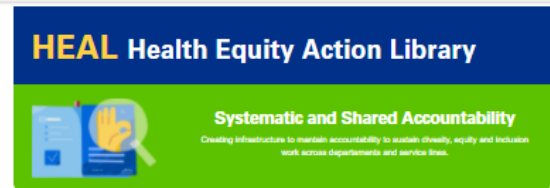
Community Collaboration for Solutions

Systemic and Shared Accountability

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Health Equity Roadmap: How to Participate (Process Steps)

1 Visit equity.aha.org to sign up (the HETA is designed to be completed at the individual hospital level).

2 Identify and gather internal team to complete the HETA.

3 After completing the HETA you will receive a Profile (data visualization) with embedded Transformation Action Planners to begin the work of transformation.

4 Search for tools and resources on the Health Equity Action Library to implement strategies to advance health equity.

5 Join the Journey Virtual Community to share information, resources and organizational insights on transformation.

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The Continuum

Hospitals and health systems can be in any of the following positions along the continuum.

Exploring ●

Exploring the values and resources needed to publicly **commit** to embarking upon a journey toward health equity.

Committing ●

Committing the resources to listen, learn, train and **implement policies and practices** that establish equity as the standard practice.

Immersing ●

Immersing the leadership and system into **accountability** for implementing policies, procedures and cultural structures that support diversity, equity and inclusion.

Affirming ●

Affirming a just, equitable system culture with **continuous equity self-assessments** of policies and practices that remove structural barriers to equity.

Transforming ●

Transforming beyond the system toward **supporting a sustainable and equitable ecosystem** of health care within the community.

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Health Equity Transformation Profile

Transformation Action Planners

Transformation Action Planners (TAP)

Health Equity Action Library

Questions and More Questions

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Let's Share: Breakout Groups

1. Introduce selves in the chat

2. Select **ONE** person to guide breakout discussion and **ONE** person to share discussion highlights

3. Discuss **ONE** challenge:

   Challenge #1: *Public health data for your community indicates that 15% of people in one zip code have a challenge in access to healthy food.*

   Challenge #2: *For the 2,000 people living with diabetes that your organization serves, there's a 10% disparity in blood sugar control (HgA1c) between whites (85% with their blood sugar in control) and nonwhite (75% with their blood sugar in control).*

   Challenge #3: *Of your 200 leaders (supervisors, managers and directors), 15% are nonwhite and in the community you serve it is 30% nonwhite.*

Meritus Health

How might we ?

Let's Share: Report Out

Share the Challenge your group selected and comment on highlights of discuss and next steps.

Challenge #1: Public health data for your community indicates that 15% of people in one zip code have a challenge in access to healthy food.

Challenge #2: For the 2,000 people living with diabetes that your organization serves, there's a 10% disparity in blood sugar control (HgA1c) between whites (85% with their blood sugar in control) and nonwhite (75% with their blood sugar in control).

Challenge #3: Of your 200 leaders (supervisors, managers and directors), 15% are nonwhite and in the community you serve it is 30% nonwhite.

Meritus Health

Testing Grant

- CareFirst has awarded a grant to Meritus Health for LEAD Collaborative participating organizations to further efforts in :
  - **Leadership diversity**
  - **Addressing social determinants of health**
  - **Mitigating health disparities**
- Will be distributed to LEAD Collaborative Participants in 2 ways:
  - **Up to 25 Testing Grants of $1,000**
  - **Up to 10 Sustainability Grants of $2,000**
- Sustainability Grants to be made available in second half of 2023 (October – November)
- For questions or more information, contact Ethan Feldmiller at Ethan.feldmiller@meritushealth.com

Applicants will be asked to:

1. Provide a crisp, measurable aim statement

2. Describe 3 cycles of PDSA learning and the action items that resulted from them

3. Provide description of how funds will be used

Meritus Health

Funding Request Timeline

Testing Grant Timeline				
	13-Feb	24-Feb	1-Mar	8-Mar
Form Made Available to Participants	🟩			
Request Submissions Due		🟩		
Approval Notification			🟩	
Funds Distributed				🟩

Reminders and Updates

2/17/23:   Deadline to submit *Period 4 PDSA*

3/3/23:   Deadline to submit *Period 5 PDSA*

3/17/23:   Deadline to submit *Period 6 PDSA*

Submit all PDSAs and updates to lead@advancingsynergy.com.

3/22/23:   **In-Person Learning Session, 8:30 AM – 3:30 PM**
Meritus Health
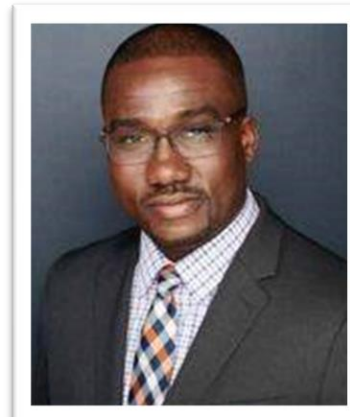Hagerstown, MD

LEAD Organizations

LEAD Collaborative Core Team

Maulik Joshi
Meritus Health
LEAD Chair

Deneen Richmond
Luminis Health
LEAD Co-Chair

Jean Accius
AARP SVP

Lynn Mertz
AARP LEAD
Project Officer

Arti Varanasi
Advancing Synergy
LEAD Operational &
Strategic Support

LEAD Collaborative

Contact Us

LEAD Website:

www.meritushealth.com/partnerships/aarp-lead/

LEAD Inbox: lead@advancingsynergy.com

For more information contact:

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Ms. Deneen Richmond, President, Luminis Health Doctors Community Medical Center, deneen.richmond@luminishealth.org

Dr. Arti Varanasi, President & CEO, Advancing Synergy, avaranasi@advancingsynergy.com

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