Finding Answers
Disparities Research for Change

Lessons From Interventions
to Reduce Racial and Ethnic Disparities in Health Care

Marshall H. Chin, MD, MPH
University of Chicago
Roadmap

- About Finding Answers
- Conceptual model
- 6 key components for reducing disparities
- Systematic review of interventions
- Lessons from grantees
- Integrating health care system and community approaches
Finding Answers

- A national program supported by the Robert Wood Johnson Foundation with direction and technical assistance provided by the University of Chicago.
Goals of Finding Answers

- Grant funds to evaluate practical solutions to reduce racial and ethnic health care disparities.
- Conduct systematic reviews of racial and ethnic health care disparities interventions.
- Disseminate results to encourage health care systems to address racial and ethnic gaps in care.
Dissemination & Translation

- Provide valuable information about what works—and what doesn’t
- Create resources and toolkits that organizations can use to implement promising interventions
Integral Components of Systems Approach to Reducing Disparities

1) Examine your performance data stratified by insurance status, race/ethnicity, language, and socioeconomic status.

2) Get training for your staff to work effectively with diverse populations.

SGIM Goals for Courses on Health Disparities

- Existence of disparities, etiologies, solutions
- Mistrust, subconscious bias, stereotyping
- Communication, trust building
- Commitment to reduce disparities
Univ. of Chicago Course – Monica Vela, MD

- Self-insight exercises
- Field trips & Chicago hx
- Group disparities project
- Reflective essays and discussion
- Individual patient care (e.g. interpreters) and policy (e.g. Medicare)
- Instructors skilled in facilitation on challenging topics (e.g. race, ethics)
3) Make reduction of inequities in care for vulnerable populations an integral component of quality improvement efforts.
Bud Billiken Parade
# New IOM Framework

## Components of Quality Care

<table>
<thead>
<tr>
<th>Crosscutting Dimensions</th>
<th>Components of Quality Care</th>
<th>Type of Care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Preventive Care</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Effectiveness</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Safety</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Timeliness</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Patient/family-centeredness</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Access</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Efficiency</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Care Coordination</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health Systems Infrastructure Capabilities</td>
<td></td>
</tr>
</tbody>
</table>
Systems Approach 3

4) Provide models of care and infrastructural support to enable organizations to improve the quality of care for vulnerable patients.

5) Align incentives to reward providers and health care organizations for providing high quality care to vulnerable populations.
HRSA’s Health Disparities Collaboratives in FQHCs

Systems Approach 4

6) Allocate more resources for the uninsured with chronic diseases.
Systematic Reviews

- Reviewed 200+ articles
  - Cardiovascular disease
  - Diabetes
  - Depression
  - Breast cancer
  - Cultural leverage
  - Pay-for-performance incentives
- FAIR Database
Systematic Review Lessons

- Multifactorial interventions that address multiple leverage points along a patient’s pathway of care
- Culturally tailored QI > generic QI
- Nurse-led interventions with multidisciplinary teams and close tracking and monitoring of patients.

**Review of Pediatric Literature**

- Asthma care
- Immunizations
- Recommendations
  - Measure and improve structural aspects of care experience that impact outcomes.
  - Incorporate families into interventions.
  - Integrate non-health care partners into QI interventions.

28 Interventions
Lessons from Grantees

- Knowledge/attitude interventions helpful but not sufficient
- Disparity data interventions helpful but not sufficient
- Context and tailoring are critical
- Multifactorial, multitarget interventions
- Buy-in, incentives, sustainability, system
Knowledge, Attitudes, Data Helpful but not Sufficient

- Harvard Vanguard – Cultural competency and disparity report cards
  - Increased acknowledgement of disparities
  - No change in clinical outcomes

- Morehouse – Health literacy training and literacy screening
  - 1/3 patients have limited health literacy
  - No change in outcomes
Provider / System

- Westside – Concurrent Peer Review
  - Decreased blood pressure
  - Increased medication intensification
  - Widespread provider support
Provider - Patient

- Duke – Nurse over-the-phone medication management and behavioral modification

- UPenn – Phone-based peer support and clinic visits with nurse educators
Context and Tailoring are Key – Telephone Example

Promising
- UPenn – phone based peer support
- UArizona – Virtual depression visits

Challenging
- Neighborhood Health Plan of RI – care management
- Mobile County – glucose monitoring
Community Health Workers

- Univ of California, Irvine
  - Patient activation – improve sugar control
- Choctaw
  - Time, training, verbal culture
- Mass. League of Community Health Ctrs
  - Time, integration with health care team
Patient

- Cooper Green – Jeroan Allison, MD, Sandral Hullett, MD
Incentives

- Baylor VA (Laura Petersen, MD, LeChauncy Woodard, MD) – P4P

- Cigna – Patient incentive for office visit

- Aaron E. Henry CHC – Patient incentives for weight management, exercise, med adherence
Lessons from Grantees

- Model interventions that can be tailored
- Interventions have to be intensive – knowledge and data are insufficient
- Multifactorial, multitarget interventions
- Intervention and process of implementation
- Buy-in, incentives, sustainability, system
WELCOME!
Improving Diabetes Care and Outcomes on the South Side of Chicago
Monica Peek, MD, MPH
Intervention Components

- Patient activation/communication training
  - Culturally tailored diabetes education
  - Patient empowerment
  - Shared decision-making

- Provider communication training
  - Cultural competency
  - Behavioral change
  - Continuing education
Intervention Components 2

- Clinic Redesign
  - Quality improvement collaborative
  - Plan-Do-Study-Act cycles
  - Chronic Care Model
Community Connections

- Patient advocates/community health workers
- Community resources re: nutrition, exercise, diabetes support
- Partnerships w/ CBOs
IMPROVING DIABETES CARE AND OUTCOMES ON THE SOUTH SIDE OF CHICAGO

South Side Chicago

Urban Health Initiative

South Side Persons with Diabetes

6 Clinics

• Patients
• Clinicians
• Systems

Patient Advocates

Community-Based Organizations

Improved Processes of Care and Outcomes
Collaborative QI meetings

- First kick-off meeting
- August 20, 2009
- Kennedy King College
- Goals:
  - Re-introduce the grant
  - Partnership building
  - Organize QI teams
  - Introduce clinic redesign
  - Identify top challenges in providing DM care
Kick-off Meeting!
Collaborative QI Meetings

- Second meeting
- September 29, 2009
- The Little Black Pearl
- Goals:
  - Community partnerships
  - Health systems redesign
  - Planning 1st PDSA
  - Community Health Workers
Challenges for South Side Diabetes Project

- Organizational readiness to change - Coaching
- Ambitious scope
- Health care system – community divide
- Multiple audiences
- Need for multiple skills
- Financial models
Ongoing Efforts

- Dovetailing with Urban Health Initiative
Johnny “Kool-Out” Starks, WVON, and Chicago CAN-TV
Diabetes Awareness Month
First Collaborative Health Fair

November is National Diabetes Awareness Month !!!
Please Join Us for a Private Screening:
The 2009 Diabetes Health Symposium:
Diabetes Prevention and Control Workshop
FREE
Blood Glucose
Cholesterol and Blood Pressure Checks
BMI
Raffle and Giveaways
Diabetes Health Education & Wellness Booth

Physical Activity Demonstration
featuring Siddiqui "The Personal Trainer" @ 2pm

WHEN: Saturday, November 21st 2009
12 noon - 4:00pm
WHERE: Chatham Ice Theater (lobby)
210 West 87th Street
Chicago, IL 60620

Sponsored by:
The University of Chicago Department of Medicine
Improving Diabetes Care and Outcomes On The South Side of Chicago
Discussions with Public and Private Entities

- Chicago Department of Public Health
- Grocery store chains
- Farmer market programs

Amazing interest and enthusiasm for improving South Side of Chicago health
Grant Support

- NIH/NIDDK
  - K24 DK071933
  - R18 DK083946-01A1
  - P60 DK20595

- The Merck Company Foundation