Identifying Opportunities for Growth and System Alignment by Evaluating Graduate Medical Education Programs through a Health Equity Lens

Elizabeth Beiter, MD – Associate Program Director, Family Medicine Residency Program

Becky Fleig, MEd – Administrative Director, Medical Education

Nima Patel, MD, MS – Program Director, OB/GYN Residency Program

TriHealth
Be seen. Be heard. Be healed.℠

Session Overview

Why this topic?

- "Addressing Health equity" is a broad and complicated topic that intersects with GME and healthcare in countless places.
- There are various levels of engagement and support depending on factors we in GME have no control over.
- It feels overwhelming.

Goals:

- To introduce concepts of health equity and health disparities as they relate to GME
- To include a health equity lens in your program assessment and identifying opportunities for future improvement.
- To identify current opportunities for incorporating health equity principals and education in your program.

TriHealth

Health Equity

EQUALITY:
Everyone gets the same—regardless if it's needed or right for them.

EQUITY:
Everyone gets what they need—understanding the barriers, circumstances, and conditions.

Copyright 2022 Robert Wood Johnson Foundation

Be seen. Be heard. Be healed.℠

TriHealth

Health Equity

- "Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health." - CDC

- "Primary Health Care" - Alma Ata Conference, WHO

TriHealth

Factors Affecting Health Equity

- Social determinants of health
    - Social & community context
        - Discrimination
    - Healthcare access/use
    - Environment
    - Literacy
    - Income/Work

TriHealth

Figure A. Final form of the CSDH conceptual framework
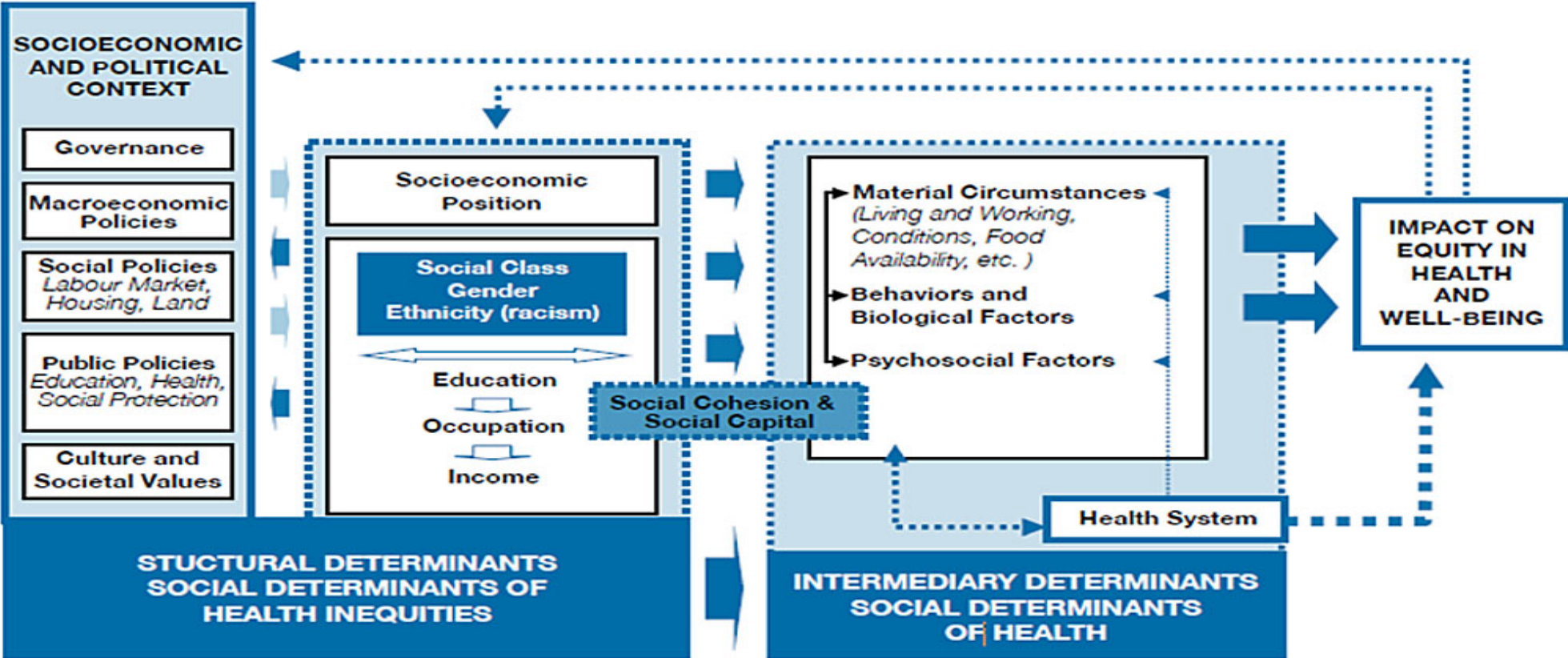
Ref: Solar O, Irwin A. *A conceptual framework for action on the social determinants of health. Social Determinants of Health* Discussion Paper 2 (Policy and Practice). Geneva, WHO, 2010

Be seen. Be heard. Be healed.℠

The IHI Framework for Achieving Health Equity

- Five key components:
    1. Make health equity a strategic priority
    2. Develop structure and processes to support health equity work
    3. Deploy specific strategies to address the multiple determinants of health on which health care organizations can have a direct impact
    4. Decrease institutional racism within the organization
    5. Develop partnerships with community organizations to improve health and equity

Wyatt R, Laderman M, Botwinick L, Mate K, Whittington J. *Achieving Health Equity: A Guide for Health Care Organizations*. IHI White Paper. Cambridge, MA: Institute for Healthcare Improvement; 2016. (Available at ihi.org)

Be seen. Be heard. Be healed.℠

TriHealth

ACGME Guidelines

- Common Program Requirement

- Program Specific

TriHealth

ACGME's CLER Pathways

DEI Pathway 1: Clinical learning environment ensure diversity, equity, and inclusion across the clinical care team to optimize learning and patient care

DEI Pathway 2: Clinical learning environment creates and maintains interprofessional education and training and facilitates learning on diversity, equity, and inclusion

DEI Pathway 3: Clinical learning environment maintains the necessary support systems to ensure diversity, equity, and inclusion

DEI Pathway 4: Clinical learning environment creates and maintains diversity among the clinical care team to optimize learning and patient care

DEI Pathway 5: Clinical learning environment monitors effectiveness and outcomes of its efforts to integrate and achieve diversity, equity, and inclusion

TriHealth

Small Group work

Put on your health equity hat

A "health equity lens" refers to a perspective that intentionally examines how policies, programs, and practices might impact different populations based on factors like race, ethnicity, socioeconomic status, gender, and geographic location, with the aim of identifying and addressing potential disparities to achieve equitable health outcomes for all people; essentially, it's a way of looking at issues through the lens of fairness and justice in healthcare access and outcomes.

TriHealth

SWOT ANALYSIS

Small Group Work

STRENGTHS

- What do we do well?
- What internal resources do we have?
- What do we already do in this space?
- Where do we have alignment with system priorities?
- What key personnel do we have?

WEAKNESSES

- What is our data landscape (do we have equity data?)
- What support do we have from the organization?
- Do we have a content expert/interest?

OPPORTUNITIES

- What work is being done in other departments/programs? (who could answer this?)
- Is there low hanging fruit?
- What resources do we have available to leverage?
- Where do we have alignment with system priorities?

THREATS

- What are the system/regional/political hurdles?
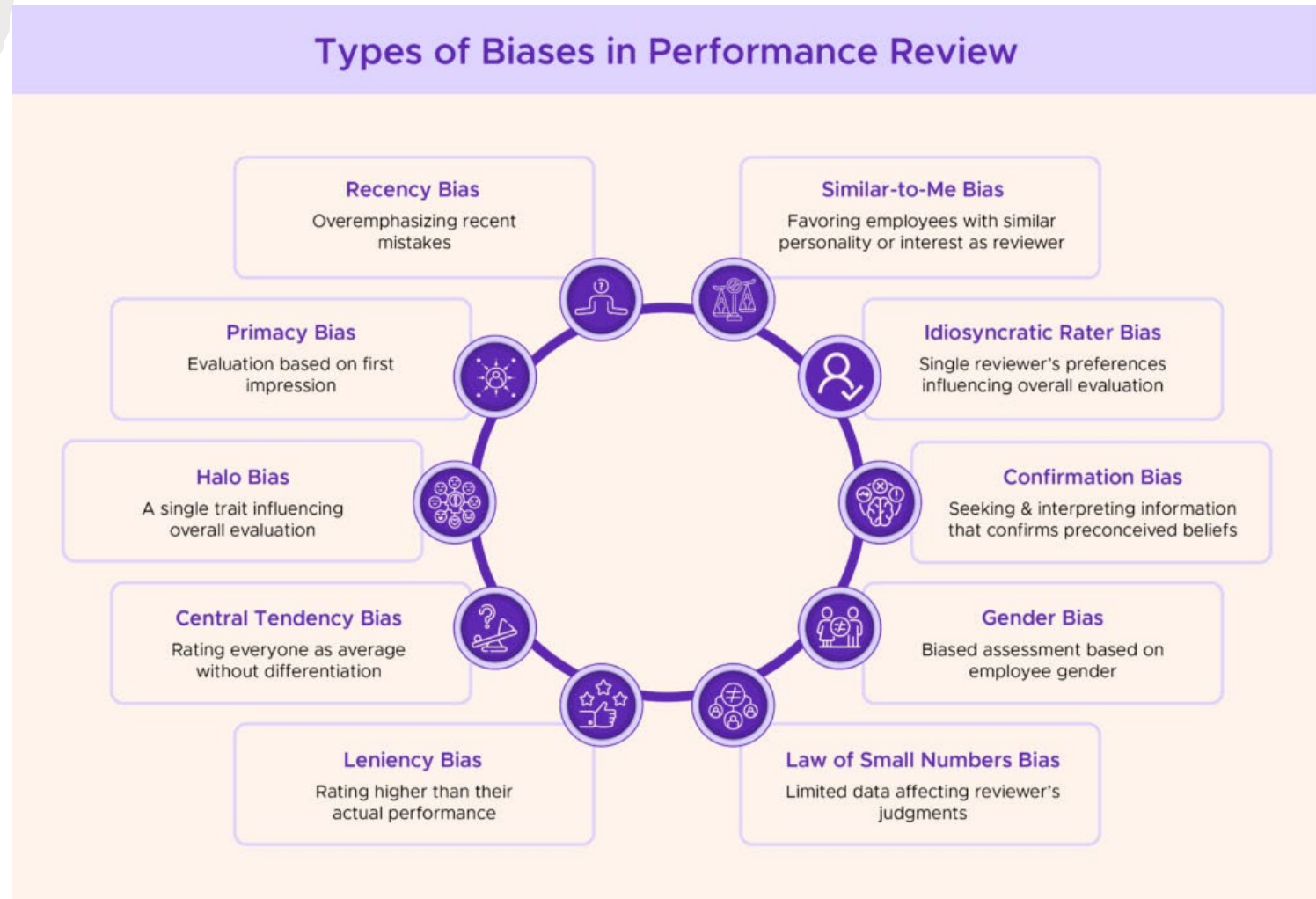
Be seen. Be heard. Be healed.℠

TriHealth

Small Group Report Out

GME & Health Equity

- Representation in Health Care
- Curriculum Development
- Patient Centric Care & Outcomes
- Scholarly Activities
- Evaluation and Advancement
- Mentorship
- System Alignment
- Community Engagement

TriHealth

What we do

- Small examples:
  - Start each CCC meeting with a reminder of common educational and evaluation biases.

  - Create policies when we see different responses to same issue.

Types of Biases in Performance Review

Recency Bias
Overemphasizing recent mistakes

Similar-to-Me Bias
Favoring employees with similar personality or interest as reviewer

Primacy Bias
Evaluation based on first impression

Idiosyncratic Rater Bias
Single reviewer's preferences influencing overall evaluation

Halo Bias
A single trait influencing overall evaluation

Confirmation Bias
Seeking & interpreting information that confirms preconceived beliefs

Central Tendency Bias
Rating everyone as average without differentiation

Gender Bias
Biased assessment based on employee gender

Leniency Bias
Rating higher than their actual performance

Law of Small Numbers Bias
Limited data affecting reviewer's judgments

GME Health Equity Initiatives

- Representation
  - Partner with local high school and help teach advanced biology class during community medicine month
  - Holistic application review process NI-8

- Curriculum
  - created longitudinal health equity curriculum
    - Utilize AAFP FREE health equity curriculum through the everyone project for introductory online lectures/modules
    - Development of neighborhood windshield assessment where residents evaluate local neighborhood looking for specific social drivers of health
  - Intentionally include equity and disparity data in disease specific lectures.
    - I.e. the impact of diabetes in African American patients nationally and including our local and practice data.
  - Local FM educational consortium
    - 5 local programs collaborate for lecture series quarterly with topics with equity focus

TriHealth

GME Health Equity Initiatives

- Scholarly Activity
  - Diabetes Equity Project: AIM statement: "To achieve an A1c Reduction of at least 1% in 75% of African American and Hispanic patients with an A1c >9% in six months
  - CareSource Care Guide Project
    - Integration of CareSource care guide in Family Medicine practice to help address SDOH and improve outcomes in patients with CareSource insurance
      - Studying resource engagement, disease outcomes, no show rates, and provider satisfaction with CareSource compared to other Medicaid providers
  - NI-9
    - looking at integration of food pantries on patient no show rates and provider satisfaction
  - Concordance patient-provider
    - Assessing improvement in no show rates with race concordant care
  - Anemia in AA pregnant women
    - Treating, referral to anemia clinic to improve outcomes

TriHealth

Team Based Care Model

- Case management, including High Risk specialist support

- Psychiatry

- CenteringPregnancy®

- Social Work support

- M-HeLP program (legal services)

- Financial counseling

- Lactation consulting

- Community health worker support

- Free interpreter services for multiple languages

- Dietician support

- Bereavement care

- Tobacco treatment specialist

- HOPE program (addiction support)

- NICU Follow-up clinic

- Diabetes and Pregnancy program

- Specialty clinics for colposcopies

- Specialty clinics for preterm labor, diabetes, and high-risk partnership with Maternal Fetal Medicine

- Transportation coordination with Uber Health and Cincinnati Metro

TriHealth

TriHealth Community Relationships and Initiatives

- Cincinnati Children's Hospital *Fetal Care Center* Partnership for high-risk deliveries and rare fetal conditions
- Cincinnati Children's Hospital Breastfeeding Continuous QI
- Legal Aid of Greater Cincinnati
  - *M-HeLP program*
- March of Dimes *March for Babies*
- Cradle Cincinnati *Back to Sleep & Infant Mortality Reduction Initiatives*
- **Freestore Foodbank** food pantry at resident ambulatory sites

- **Community Education Classes** in partnership with community agencies
- Childbirth Education Association in-person breastfeeding classes
- bi3 funded diversity training: Implicit bias, trauma informed care, and crucial conversation
- **Reach Out and Read**
- **Underserved Community Clinical Sites**
- **Volunteerism with Community Events** Black Family Reunion, Hispanic Heritage month, Pride Month, MLK jr. day outreach activities, among others.

TriHealth

Welcome to Equity Centered Maternal Care

We are here to provide power and choice to Black moms so that they can make informed decisions about their birthing experience. Mama Certified's purpose is to provide them with a way to assess and understand the maternal equity-related efforts of local hospital networks. Your commitment is the first step in advancing maternal health equity for Black families.

Mama Certified
Equity Centered Maternal Care

TriHealth is proud to be a founding Mama Certified member. **This special designation means that our staff and providers understand that Black women are 2.5 times more likely to die from childbirth and nearly three times more likely to experience infant loss in Ohio than any other race, regardless of education or socioeconomic factors.** Through training and action plans to improve these statistics, we are committed to reducing health disparities among our Black mothers and babies.

Visit Mama Certified to review TriHealth's pregnancy and birth outcomes data.

System Initiatives

- TriHealth's Center for Health Equity

Small Group Work

Wrap-up/Conclusion

- Health equity is a BIG topic.

  - Interventions don't have to be big.

- Look for low hanging fruit in domains you control!

- Look for places where you have system and program alignment

- "We" issue
  - Focus on gains
  - Not a "zero-sum" outcome
  - Destigmatize

- Make it achievable
  - Use action terms
  - Avoid previous assumptions

- START SOMEWHERE!!

TriHealth

Resources

- [Animated Health Equity Series - YouTube](#)
- [Health Equity Video Series | Health Equity | CDC](#)
- [ACGME's Equity Matters Toolkit (LEARN@ACGME)](#)
- [ACGME's CLER Pathways](#)
- [ACGME's Common Program Requirements](#)
- [AAFP's The Everyone Project - Resources](#)
- [AAFP's The Everyone Project – Education Modules](#)

TriHealth