



Linking Quality and Equity

Facilitator's Guide

Finding Answers

Disparities Research for Change



Robert Wood Johnson Foundation

Session 1 Overview

Objectives

At the end of this session, participants will be able to:

1. List characteristics of quality care.
2. Describe equitable care.
3. Explain the relationship between quality care and equitable care.
4. Recall recent wins for equity.

Section	Slides	Length
Welcome and Overview of the Training Series	1-7	10 minutes
Linking Quality Improvement and Equity	8-22	30 minutes
Instructions for SWOT Analysis	23	2.5 minutes
Exercise 1: SWOT Analysis	24	25 minutes
Report Back: SWOT Analysis	25	20 minutes
Wrap-Up	26-28	2.5 minutes

Welcome

1

Facilitator:

Slides 1-2:
1-2 minutes



Hello! My name is [insert name] and I will be facilitating today's session [with the assistance of [insert name(s)]].

We are thrilled to have you here with us, and we're looking forward to starting this important work together. It's an exciting time to be working in health care, when there's significant momentum and political will to improve our care system. Your efforts to deliver high-quality, equitable care are especially important today.

This is the first of six training sessions where you'll learn techniques for incorporating equity into ambulatory quality improvement. Today's discussion will focus on the relationship between quality and equity, and how that relationship affects your practice.

Welcome

2

Facilitator:

Slides 1-2:
1-2 minutes

Linking Quality and Equity

Agenda

- **Overview of the Training Series**
- **Linking Quality Improvement and Equity**
- **Exercise 1: SWOT Analysis**
- **Putting It Into Practice**
- **Feedback Survey**

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Here's our agenda for the session. We'll briefly go over the goals and some logistics for the training before we begin with today's topic: linking quality and equity.

Then we'll break out into small groups so that your team has time to work together on a brainstorming exercise. We'll send you home with a practice exercise to continue building on the work we do today.

Overview of the Training Series

3

Facilitator:

Slides 3-7:
7-8 minutes

Overview of the Roadmap to Reduce Disparities
Training Series

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Let's get started with an overview of the training series.

Overview of the Training Series

4

Facilitator:

Slides 3-7:
7-8 minutes

Introducing the Training Series

Logistics



- [Insert session dates, times, and locations]
- Exercises
- [Insert name of the person who will provide individualized feedback on the exercises]

Finding Answers
Disparities Research for Change

Linking Quality and Equity

After today's session, our training will be held [insert location and time frame].

You will receive an exercise at the end of each session that will build on the tools and information you learn in that session. As much as possible, you should complete these exercises as a team. They are intended to help you move through the steps of designing and implementing your equity activities.

[Insert name] will provide individualized feedback on your exercise, each week. About a third of every training session will be dedicated to discussing the exercise with the group, so that you can learn from each other as you refine your equity plans.

Overview of the Training Series

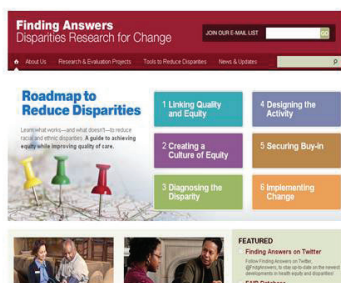
5

Facilitator:

Slides 3-7:
7-8 minutes

Introducing the Training Series

For Additional Information



Visit the Finding Answers' website:
www.solvingdisparities.org

Throughout the training series, we'll be referring to the work of the *Finding Answers: Disparities Research for Change* program. They created the “Roadmap to Reduce Racial and Ethnic Disparities in Health Care” upon which this training is based.

Finding Answers is a national program of the Robert Wood Johnson Foundation, tasked with identifying and evaluating promising strategies to reduce racial and ethnic disparities in health care.

They funded 33 grantee projects across the country, conducted 11 systematic reviews of the disparities intervention literature, and provided technical assistance to clinics and practices planning and implementing disparities-reduction programs.

Throughout the training series, feel free to visit their website at www.solvingdisparities.org for additional tools and resources.

Overview of the Training Series

6

Facilitator:

Slides 3-7:
7-8 minutes

Introducing the Training Series

Training Objectives



- Define culture of equity and its importance.
- Gain buy-in from stakeholders.
- Diagnose causes of a disparity in a practice.
- Assess existing organizational resources.
- Design and implement equity intervention tailored to your setting and population.

Finding Answers
Disparities Research for Change

Linking Quality and Equity

It's our goal that by the end of the training, you will:

<Click> Understand the definition and importance of a culture of equity and how to help your organization foster that culture in practice;

<Click> Effectively address key stakeholders to gain buy-in to reducing disparities;

<Click> Conduct a root cause analysis to diagnose the causes of a documented disparity at your organization;

<Click> Assess the strengths and challenges of your health care organization as they relate to equity;

<Click> Leverage results of the root cause analysis and organizational assessment to design and implement an effective equity intervention that is tailored to your setting and priority population.

Overview of the Training Series

7

Facilitator:

Slides 3-7:
7-8 minutes



The materials that we cover during the webinar series are designed to provide you with a guide - or roadmap - for incorporating equity into your quality improvement work. Each of you will find your unique path-- the one best suited to your patients and organizations.

We will provide you with signposts along the way to signal best practices for reducing disparities.

Linking Quality and Equity

8

Facilitator:

Slides 8-22:
30 minutes

Linking Quality and Equity

Finding Answers
Disparities Research for Change

Linking Quality and Equity

The first step on the Roadmap to Reduce Disparities is linking quality and equity.

Linking Quality and Equity

9

Facilitator:

Slides 8-22:
30 minutes

Linking Quality and Equity

What is Quality Care?

Finding Answers
Disparities Research for Change

Linking Quality and Equity

So, let's start at the beginning: What is quality care?

Ask participants to share their ideas and record responses (on the slide, on a whiteboard, etc.).

5 minutes allotted for discussion.

Linking Quality and Equity

10

Facilitator:

Slides 8-22:
30 minutes

Linking Quality and Equity

Quality Care is

“...doing the right thing for the right patient, at the right time, in the right way to achieve the best possible results.”

Agency for Healthcare Research & Quality

Finding Answers
Disparities Research for Change

Linking Quality and Equity

AHRQ defines quality care as “doing the right thing for the right patient, at the right time, in the right way to achieve the best possible results.”

Linking Quality and Equity

11

Facilitator:

Slides 8-22:
30 minutes

Linking Quality Improvement and Equity

Quality Health Care is



- Safe
- Effective
- Patient/family-centered
- Timely
- Efficient
- Accessible

Finding Answers
Disparities Research for Change

Linking Quality and Equity

These are the pillars of quality care. Quality care is:

<Click> Safe

<Click> Effective

<Click> Patient/family-centered

<Click> Timely

<Click> Efficient

<Click> Accessible

Linking Quality and Equity

12

Facilitator:

Slides 8-22:
30 minutes

Linking Quality and Equity

What is Equitable Care?

Finding Answers
Disparities Research for Change

Linking Quality and Equity

What is equitable care?

Ask participants to share their ideas and record responses (on the slide, on a whiteboard, etc.).

5 minutes allotted for discussion.

Linking Quality and Equity

13

Facilitator:

Slides 8-22:
30 minutes

Linking Quality and Equity

equitable care ~~≠~~ same care

equitable care = same QUALITY of care

sometimes...

equitable care = different care

Finding Answers
Disparities Research for Change

Linking Quality and Equity

<Click> It's a common misconception that equitable care means the same care for everyone, but this is not true.

<Click> Equitable care means the same **QUALITY** of care regardless of race, gender, sexual orientation, income or location.

<Click> Equitable care may mean different care, because quality care—the right thing, at the right time—is different for different people. Equitable care ensures optimal outcomes for all patients regardless of their background or circumstances.

So you can see here how quality and equity relate to one another. This is a fundamental concept of our training, so I'll pause here for questions or comments.

Linking Quality and Equity

14

Facilitator:

Slides 8-22:
30 minutes

IOM Quality Framework

Crosscutting Dimensions	Components of Quality Care	Type of Care		
		Preventive Care	Acute Treatment	Chronic condition management
EQUITY VALUE	Effectiveness			
	Safety			
	Timeliness			
	Patient/family-centeredness			
	Access			
	Efficiency			
	Care Coordination			
	Health Systems Infrastructure Capabilities			

Graphic from Institute of Medicine, *Future Directions for the National Healthcare Quality and Disparities Reports* (April 2010)

Finding Answers
Disparities Research for Change

Linking Quality and Equity

In its Future Directions Report, the Institute of Medicine moved Equity from being a single component of quality care to a cross-cutting dimension.

In practice, this means that each component of quality-- effectiveness, safety, timeliness, and the rest-- can be different for different patients. And we need to consider these differences as we address each component of quality care.

Linking Quality and Equity

15

Facilitator:

Slides 8-22:
30 minutes

Linking Quality Improvement and Equity



- QI affects different populations differently.
- “One size fits all” can widen the disparities gap.

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Because equity is a cross-cutting component of quality, it also needs to be a cross-cutting component of quality **improvement**.

<Click> Quality Improvement also affects different populations in different ways, and what works well for one group may not be beneficial for others.

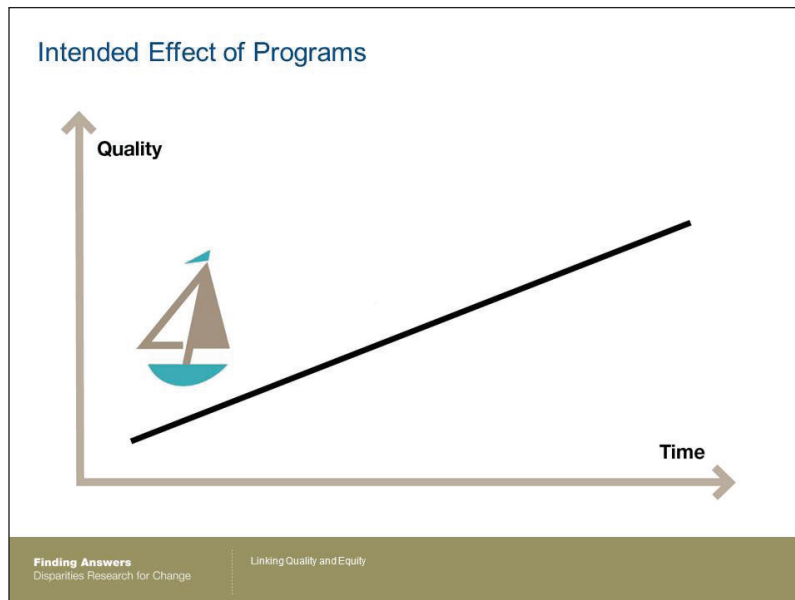
<Click> In fact, we’ve learned that a “one size fits all” approach can actually widen the gap in outcomes.

Linking Quality Improvement and Equity

16

Facilitator:

Slides 8-22:
30 minutes



[Automatic Animation]

You may have heard the phrase, “a rising tide lifts all boats.”

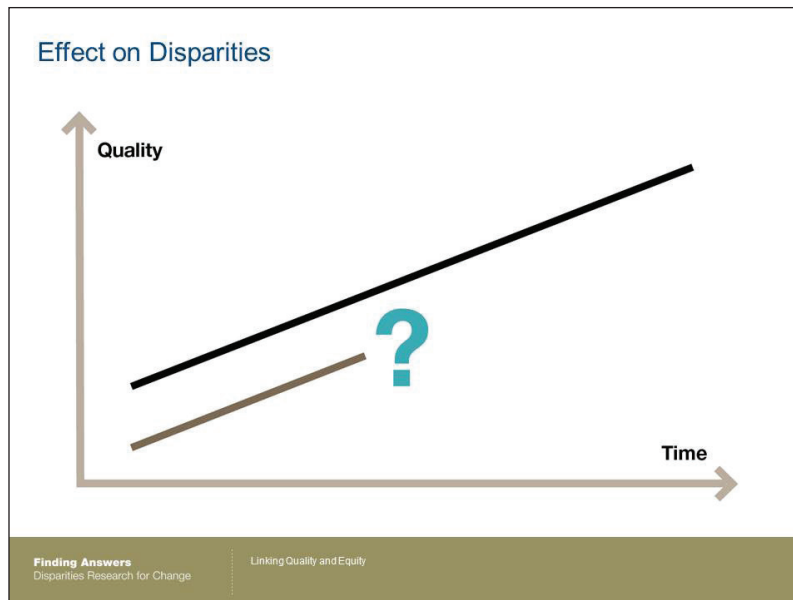
That is, quality improvement is intended to improve outcomes for all patients over time.

Linking Quality Improvement and Equity

17

Facilitator:

Slides 8-22:
30 minutes



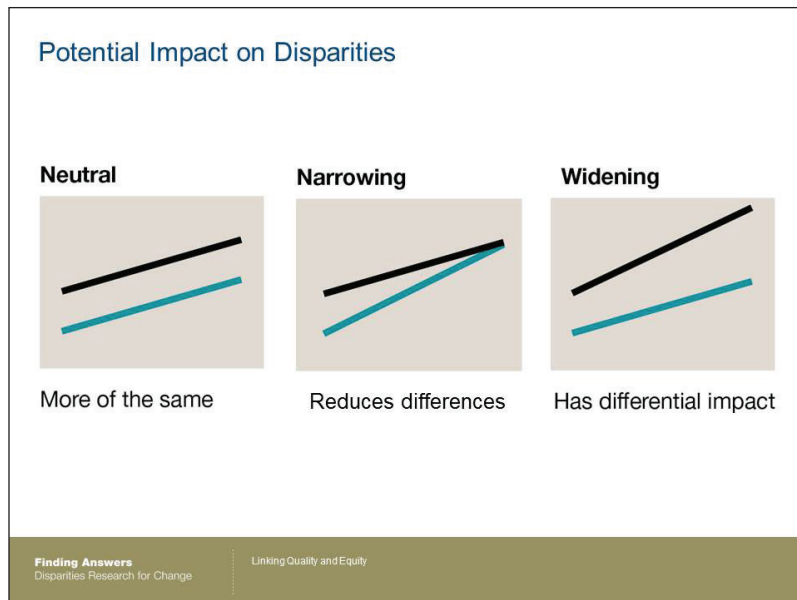
But that may not be true. When we implement QI initiatives, what actually happens to the gap in quality between white and minority patients? Even if health outcomes improve overall, does the difference in outcome remain?

Linking Quality Improvement and Equity

18

Facilitator:

Slides 8-22:
30 minutes



Here are some possible scenarios.

<Click> The gap could remain the same over time.

<Click> Or it could narrow over time, with minority patients' outcomes coming closer to those of whites.

<Click> Or the gap could widen.

Linking Quality Improvement and Equity

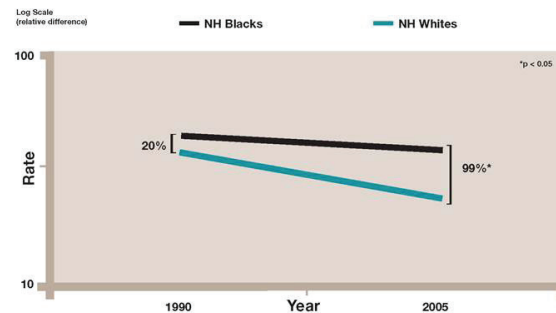
19

Facilitator:

Slides 8-22:
30 minutes

Female Breast Cancer Mortality

Breast Cancer Mortality Among Non-Hispanic Blacks and Non-Hispanic Whites in Chicago: 1990-2005



Finding Answers
Disparities Research for Change

Linking Quality and Equity

Let's look at a specific example.

This graph shows the rate of breast cancer mortality in 1990 and 2005 in Chicago. On the Y axis you have rate of death from breast cancer and on the X axis you have time.

On this graph lower is better – it means that fewer people died. The black line represents Non-Hispanic Blacks and the teal line, Non-Hispanic Whites.

You can see from the downward slope of both lines that mortality related to breast cancer decreased for both white and black patients.

However, the gap between white and black patients grew significantly, from 20% to 99%.



Linking Quality Improvement and Equity

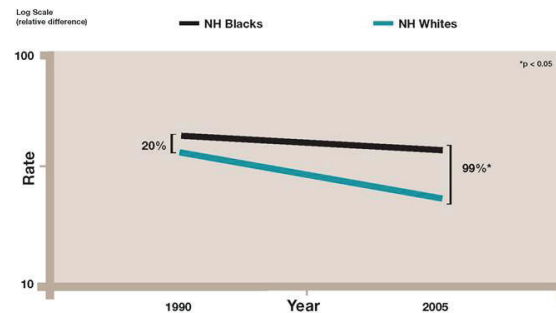
19

Facilitator:

Slides 8-22:
30 minutes

Female Breast Cancer Mortality

Breast Cancer Mortality Among Non-Hispanic Blacks and Non-Hispanic Whites in Chicago: 1990-2005



Finding Answers
Disparities Research for Change

Linking Quality and Equity

These findings demonstrate that you can improve outcomes for all patients but the disparities between racial and ethnic groups can still widen.

The gaps remain invisible unless they are specifically examined.

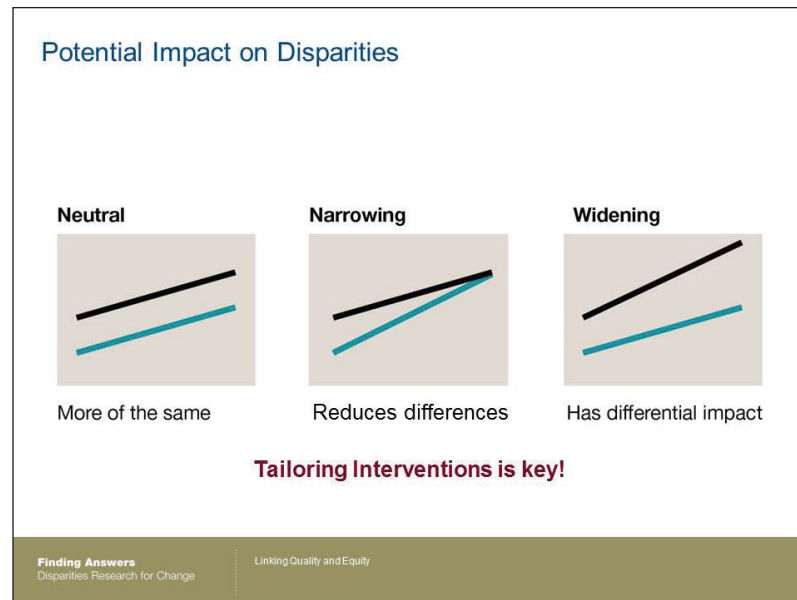
In this example, if we just measured breast cancer mortality across the entire patient population, we would be thrilled to see an overall decrease. But that tells an incomplete story.

Linking Quality Improvement and Equity

20

Facilitator:

Slides 8-22:
30 minutes



As you evaluate the impact of your quality improvement activities, be sure to measure its effect on different groups of patients. How is the program affecting the gap?

And you can't just stop at measurement. To close the gap, we need to tailor interventions to the needs of diverse patients.

<Click>

Tailoring is key in improving equitable care, and we'll talk more throughout the series about concrete methods to design and tailor equity activities for your patient population.

Ask if there are any questions or comments so far.

Linking Quality Improvement and Equity

21

Facilitator:

Slides 8-22:
30 minutes

Challenges to Addressing Equity

- Race/Ethnicity/Language data collection and stratification
- Resources
- Staff attitudes and beliefs
- Aligning priorities

Finding Answers
Disparities Research for Change

Linking Quality and Equity

We want to acknowledge up front that this work can be challenging.

<Click> We all know that REL data collection and stratification is not always smooth.

<Click> Reducing disparities requires time and resources, both of which can be in short supply.

<Click> Staff attitudes can also be challenging. In the course of doing this work, you may encounter people who don't believe that disparities exist-- or at least not in their own clinics.

- o Even those who recognize disparities among their own patients may believe the causes are not under their control.



Linking Quality Improvement and Equity

21

Facilitator:

Slides 8-22:
30 minutes

Challenges to Addressing Equity

- Race/Ethnicity/Language data collection and stratification
- Resources
- Staff attitudes and beliefs
- Aligning priorities

Finding Answers
Disparities Research for Change

Linking Quality and Equity

<Click> Additionally, it's not easy to align priorities among different stakeholders. Equity efforts involve participants from across the health care system with competing demands.

If these challenges sound familiar to you, you are not alone - they are common issues facing organizations that are interested in reducing disparities.

If you plan to provide opportunities for peer support: One of the major strengths of this training series is that the practices are set-up to learn from and support one another as you work through the issues.

Linking Quality Improvement and Equity

22

Facilitator:

Slides 8-22:
30 minutes

Recent Wins for Equity

- **ACA:** Evidence of political will
- **CMS Demonstration Projects:** Testing regional approaches
- **ACOs and PCMH:** Coordinating care and linking the community
- **EMR's and Meaningful Use:** Improving data quality
- **AF4Q:** Focusing on disparities

Your participation is important!

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Edit based on the resources/strengths/initiatives you know your audience has access to.

In addition to the partners sitting next to you today, you're part of a larger, national movement to address inequalities in our health care system.

There's a lot of momentum to improve our care system and equity, specifically, has had some major wins.

<Click> We're seeing evidence that there's political will at the highest level to address disparities. The "Affordable Care Act" will:

- o Expand insurance coverage
- o Create programs to increase diversity in the healthcare workforce
- o Mandate REL data collection and reporting



Linking Quality Improvement and Equity

22

Facilitator:

Slides 8-22:
30 minutes

Recent Wins for Equity

- **ACA:** Evidence of political will
- **CMS Demonstration Projects:** Testing regional approaches
- **ACOs and PCMH:** Coordinating care and linking the community
- **EMR's and Meaningful Use:** Improving data quality
- **AF4Q:** Focusing on disparities

Your participation is important!

Finding Answers
Disparities Research for Change

Linking Quality and Equity

<Click> CMS demonstration projects, like Cincinnati's community-based care transitions, can help improve outcomes for Medicaid patients at the regional level. They test large scale interventions that could improve care for many minority patients.

<Click> Accountable Care Organizations and Patient Centered Medical Homes are helping to coordinate care and link the care system with the communities they serve. We've learned that programs that link the care system to the community are especially promising for improving minority health.



Linking Quality Improvement and Equity

22

Facilitator:

Slides 8-22:
30 minutes

Recent Wins for Equity

- **ACA:** Evidence of political will
- **CMS Demonstration Projects:** Testing regional approaches
- **ACOs and PCMH:** Coordinating care and linking the community
- **EMR's and Meaningful Use:** Improving data quality
- **AF4Q:** Focusing on disparities

Your participation is important!

Finding Answers
Disparities Research for Change

Linking Quality and Equity

<Click> Electronic Medical Records and Meaningful Use are helping providers to standardize data collection and improve data quality, which in turn will allow us to stratify data by race, ethnicity, and language.

<Click> Finally, national coalitions—such as AF4Q—have made equity an integral part of the quality improvement agenda

We see these developments as a hopeful sign that we're moving in the right direction.

<Click> Your participation in this movement is important!

Instructions for Group Exercise

23

Facilitator:

Slide 23:
2.5 minutes

Exercise 1: SWOT Analysis

For the rest of this session, we'd like to explore the practical application of these ideas in your practices. How does equity fit into quality improvement efforts at your organization? Where are there opportunities to integrate your quality and equity work?

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Instructions for Group Exercise

24

Facilitator:

Slide 24:
20 minutes

Group Exercise: SWOT Analysis

- Strengths
- Weaknesses
- Opportunities
- Threats

Finding Answers
Disparities Research for Change

Linking Quality and Equity

We'll break out into practice teams and conduct a SWOT analysis. If you haven't seen a SWOT analysis before (or if it has been a while), SWOT stands for: Strength, Weakness, Opportunity, Threat.

Strengths and weaknesses are internal to your organization. They are things within your control. Which resources do you have that you can build on?

Opportunities and threats are external factors. They are out of your control, but can impact your work. You'll want to consider which external factors you can leverage to your advantage, and which you should try to avoid or minimize.



Instructions for Group Exercise

24

Facilitator:

Slide 24:
20 minutes

Group Exercise: SWOT Analysis

- Strengths
- Weaknesses
- Opportunities
- Threats

Finding Answers
Disparities Research for Change

Linking Quality and Equity

The goal of the exercise is to help you identify which resources you have--and which ones you'll need-- to make your equity efforts successful.

Think of this as an organizational scan. We don't want you to get caught up envisioning what your equity intervention will look like - we'll get to that later. For now, think broadly about all the factors affecting your organization, equity-related or not.

By taking inventory of your general QI infrastructure, you can begin to identify ways to link quality and equity at your practice.



Instructions for Group Exercise

24

Facilitator:

Slide 24:
20 minutes

Group Exercise: SWOT Analysis

- Strengths
- Weaknesses
- Opportunities
- Threats

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Give instructions:

- o [Insert name here] will work with you to help facilitate the discussion
- o Use flipcharts to record ideas
- o One person from the team will record and report back
- o Facilitator(s) will circulate and spend time with each team, listening for common themes that affect the teams.
- o Facilitator Tip: It is best to have one facilitator per team to help generate ideas if teams are having a slow start.
- o 25 minutes. Then reconvene to discuss.

Group Exercise: Report Back

25

Facilitator:

Slide 25:
20 minutes

Group Exercise: SWOT Analysis

- What was this process was like? Did you find it challenging or did you have an easy grasp on the internal and external factors affecting your practice?
- Which of the factors in your SWOT are most relevant to the priority population or disease condition you have identified for this equity project?
- Next step: Share your SWOT analysis and get additions/feedback from 3 people at your organization.

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Report back for 20 minutes.

Have teams report results and facilitator(s) share any common themes or issues they heard.

Report Back Prompts:

- What was this process was like? Did you find it challenging or did you have an easy grasp on the internal and external factors affecting your practice?
- Which of the factors in your SWOT are most relevant to the priority population or disease condition you have identified for this equity project?

As much as possible, frame the report back in terms of our theme: linking quality and equity.

Next Steps

- Download the SWOT analysis and **get additions/feedback from 3 people at your organization**. Update your SWOT Analysis and bring it to the next session.

Facilitator(s) can write up each team's SWOT analysis and return it to them later. Otherwise, teams should take pictures or notes of their flipchart discussion.

Present your SWOT to at least three other people at your organization. Ask for their additions and feedback.





We'll meet next on [insert date and time]. We'll be discussing concrete actions you can take to foster a culture of equity at your organizations.

Just as a culture of quality is key for effective quality improvement, a culture of equity will lay the foundation for a successful equity program.

Wrap-Up

28

Facilitator:

Slides 26-28:
2.5 minutes

Thanks for participating! (Please fill out the survey!)

Finding Answers
Disparities Research for Change

Linking Quality and Equity

Remember to complete your feedback survey.
Thanks for participating!