

Race and Language in Healthcare: The Impact on Quality of Care

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Outline

- My journey
- What is happening nationally in the field of disparities
- The importance of monitoring & reporting
- Developing interventions @ MGH



Stereotyping

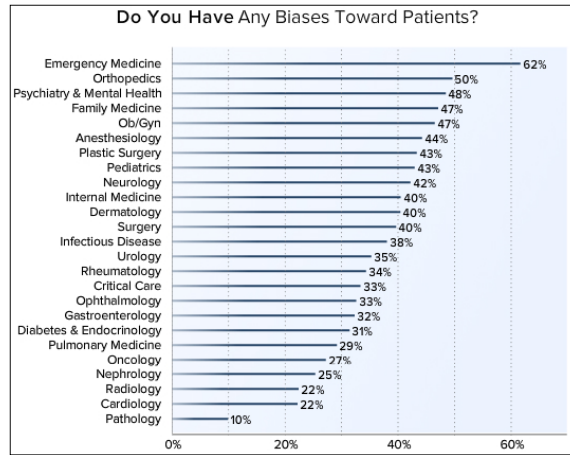


Kaiser Family Foundation Survey of Americans on Race

- **35%** of Blacks and **26%** of Hispanics reported personally experiencing discrimination because of their racial or ethnic background - either being denied a job for which they were qualified, being denied housing they could afford, or being prevented from voting or having their ballot challenged. **11%** of Whites reported such experiences.
- **53%** of Blacks and **36%** of Hispanics said that, in the previous month, they've experienced unfair treatment because of their race, either in a store where they were shopping; at work; in a restaurant, theater or other entertainment establishment; in dealings with the police; or in getting health care. Among Blacks ages 18-34, **67%** report such recent experiences of unfair treatment.
- **45%** of Blacks said they have at some point been afraid their life was in danger because of their racial or ethnic background, compared to **27%** of Whites and **20%** Hispanics.



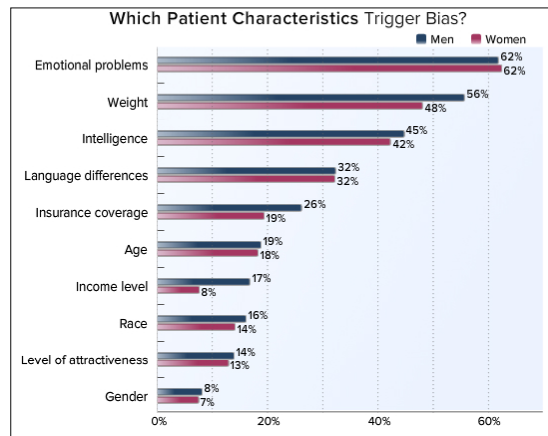
Medscape Lifestyle Report 2016: Physician Bias



Source: Medscape Lifestyle Report 2016: Bias and Burnout. <http://www.medscape.com/features/slideshow/lifestyle/2016/>



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Where do we see minority patients at MGH?

	Race/Ethnicity				
	White	African American	Hispanic	Asian	Other/Unknown
Inpatient Care					
Inpatient Discharges	76.2%	6.1%	8.0%	4.1%	5.6%
Emergency Department					
Emergency Department Visits	68.9%	9.6%	12.0%	4.3%	5.2%
Outpatient Primary Care					
All Locations	67.0%	7.3%	15.6%	5.9%	4.2%
Health Center	57.5%	7.0%	25.3%	5.6%	4.6%
On-Campus Satellite Practices	74.5%	7.6%	8.0%	6.0%	3.9%
Outpatient Specialty Care					
Specialty Care Visits	78.7%	4.7%	8.5%	4.5%	3.6%

Health Centers include Back Bay, Charlestown, Chelsea, and Revere.



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Patient Distribution among MGH Inpatient Services in CY 2014

	White	African American	Hispanic	Asian	Other/Unknown
Inpatient Service					
Percent of Admissions					
Burns	75.3%	10.9%	8.1%	3.8%	1.9%
Medicine	83.0%	6.9%	6.3%	3.0%	0.8%
Obstetrics/Gynecology	61.4%	6.6%	21.2%	9.7%	1.1%
Pediatrics	60.5%	10.7%	21.1%	5.8%	1.8%
Psychiatry	77.5%	8.6%	10.6%	2.1%	1.2%
Oral Maxillofacial	75.6%	6.1%	9.7%	6.6%	2.0%
Orthopedics	89.2%	3.8%	3.9%	2.1%	1.0%
Neurosurgery	88.6%	4.2%	3.6%	2.5%	1.1%
Neurology	84.9%	5.1%	4.9%	3.6%	1.5%
Surgery	84.6%	5.1%	6.3%	2.8%	1.3%
Urology	88.7%	5.1%	4.7%	1.2%	0.3%



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What Are Disparities?

Gaps in quality of health and health care due to differences in race, ethnicity, socioeconomic status, sexual orientation, gender identity, and/or ability

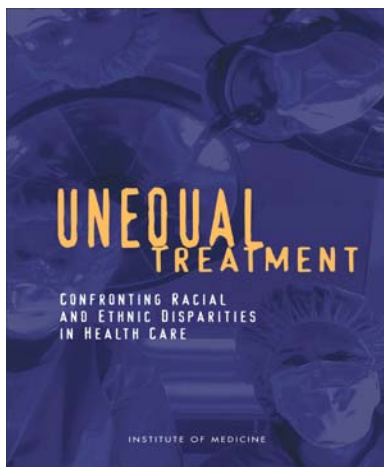
Examples of Racial & Ethnic Disparities in Health Care:

- African Americans and Latinos receiving less pain medication than Whites for long bone fractures in the Emergency Department and for cancer pain on the floors
- African Americans with end-stage renal disease being referred less to the transplant list than Whites
- African Americans being referred less than Whites for cardiac catheterization and bypass grafting



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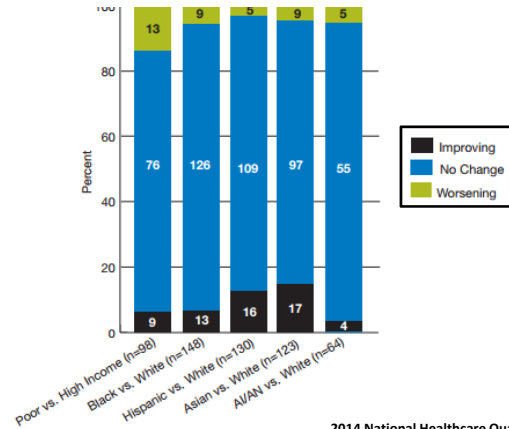
Racial & Ethnic Disparities in Health Care



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National Healthcare Disparities Report

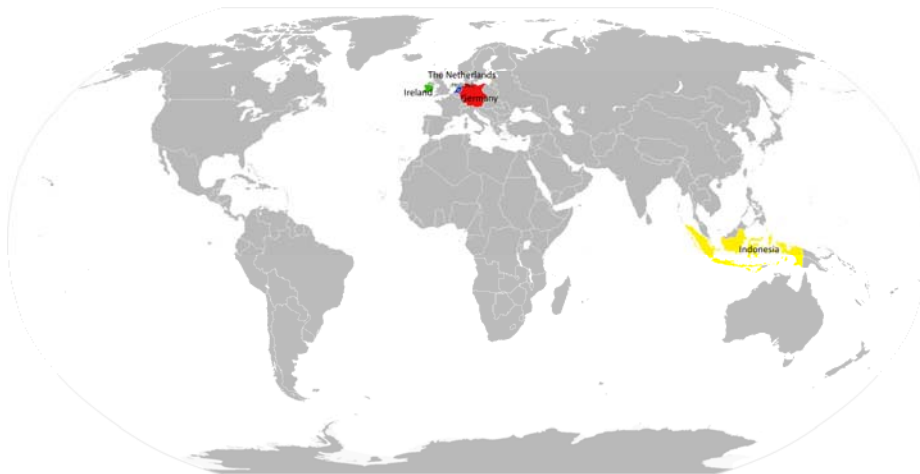
Change in Disparities: Number and percentage of quality measures for which disparities related to race, ethnicity, and income were improving, not changing, or worsening, through 2012



2014 National Healthcare Quality & Disparities Report. June 2015.
Agency for Healthcare Research and Quality, Rockville, MD.



A Growing Multi-Racial Population



Race and Ethnicity

- **Race** – group or groups with whom a patient identifies
 - “A category of humankind that shares certain distinctive physical traits”*
 - Examples: Asian, Black, White, etc
- **Ethnicity** – background, heritage, culture, ancestry. May also include country where the patient was born
 - “Being a member of a specified ethnic group”*
 - Examples: Haitian, Vietnamese, Brazilian, etc.

*Source: Merriam Webster Dictionary



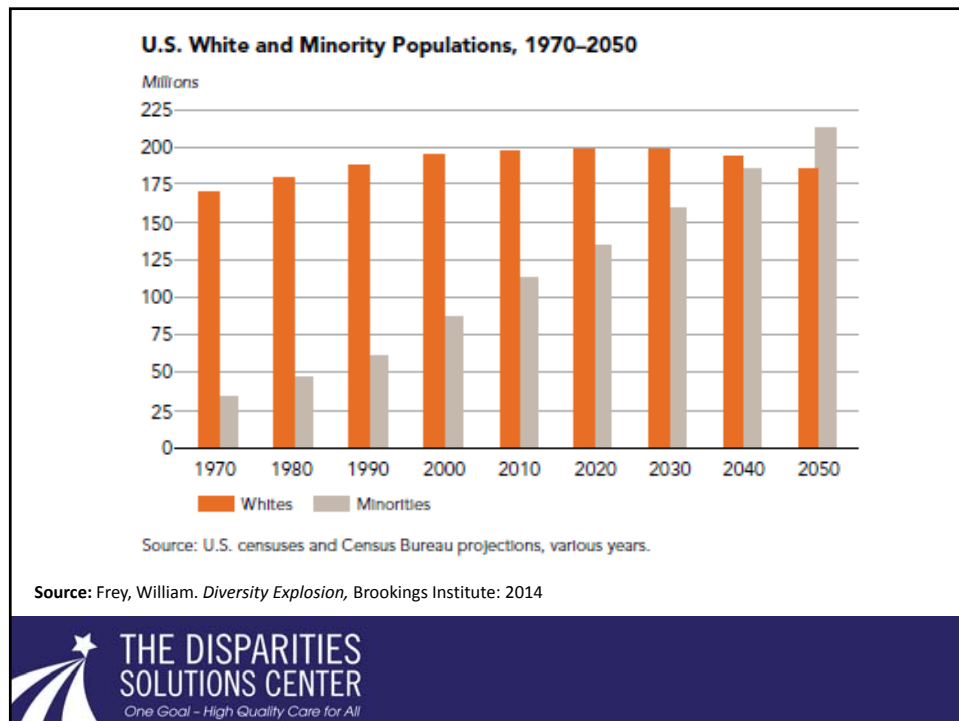
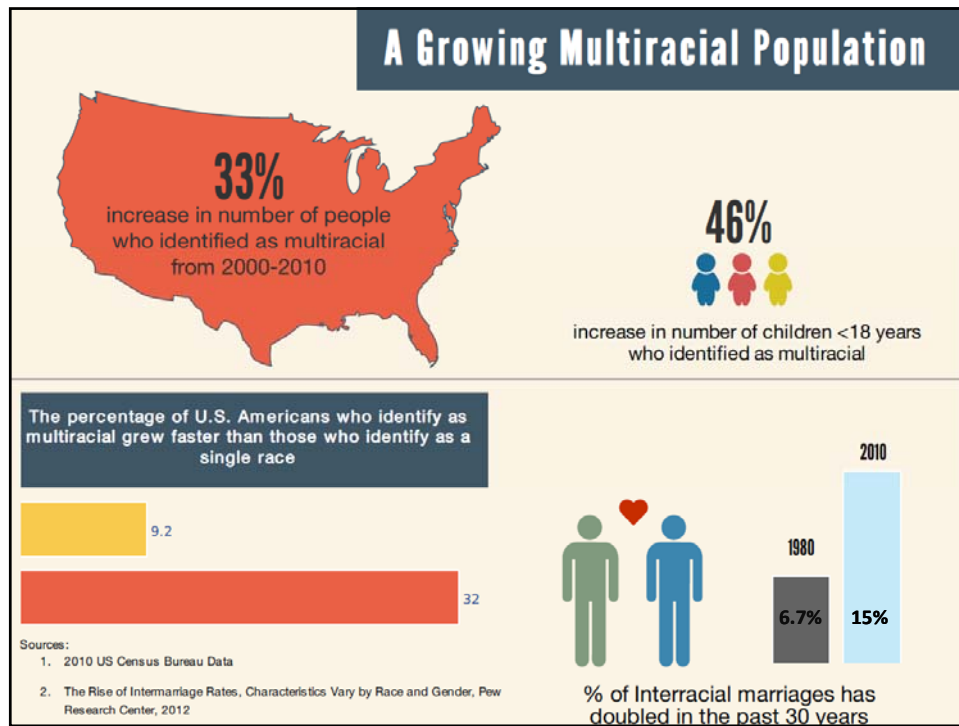
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Office of Management & Budget (OMB) Categories

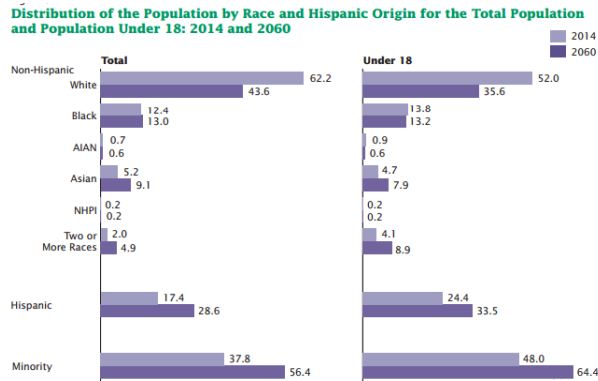
- Race:
 - ☐ American Indian or Alaska Native
 - ☐ Asian
 - ☐ Black or African American
 - ☐ Native Hawaiian or Other Pacific Islander
 - ☐ White
- Ethnicity:
 - ☐ Hispanic or Latino
 - ☐ Not Hispanic or Latino



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According to the US Census report of 2014 the child population is projected to be a majority-minority in 2020, and the US will be a majority-minority population by 2044.



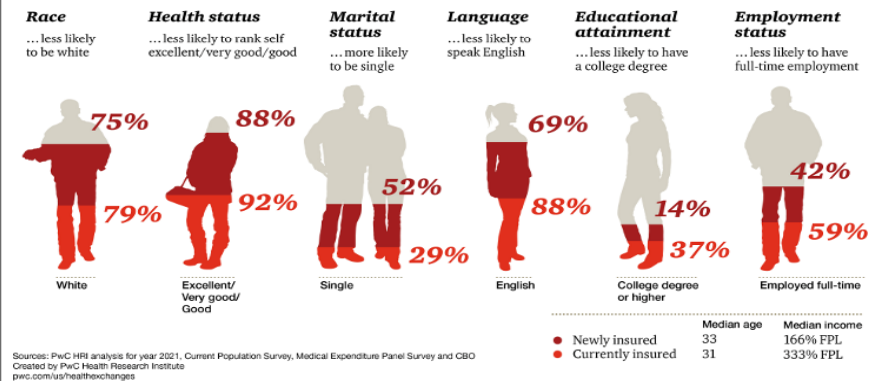
Source: Colby SO, JM. *Projections of the Size and Compositions of the US Population: 2014 to 2060, Current Population Reports*. Washington, DC: US Census Bureau; 2014. P25-1143

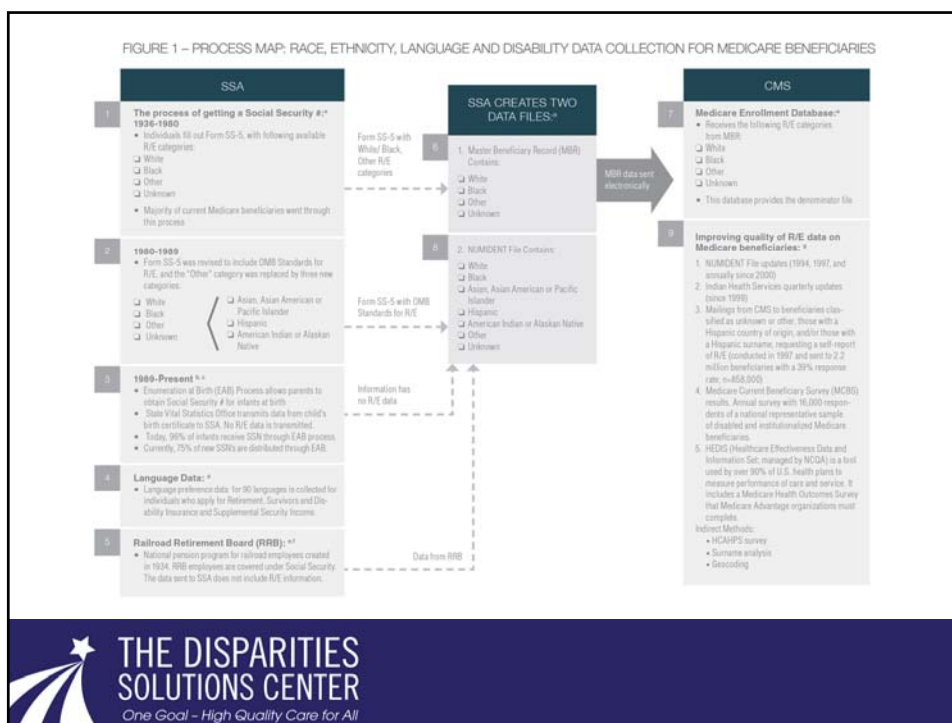


The Newly Insured Population: ~50% Minority

What will the newly insured look like?

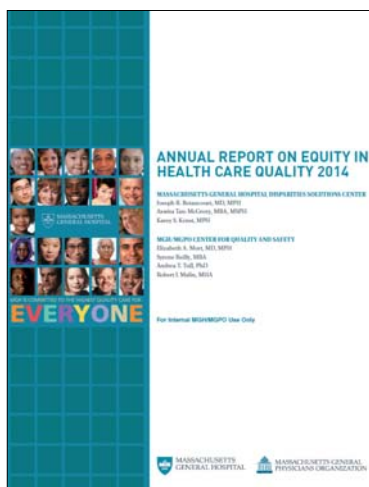
The newly insured compared to the currently insured are...





Monitoring Our Performance at MGH and Developing Interventions

Annual Report on Equity in Health Care Quality



MGH Leading the Nation on Equity in Health Care Quality

- Since 2006 MGH has released the Annual Report on Equity in Health Care Quality (formerly the Disparities Dashboard)
- In 2013, MGH received the AAMC Learning Health System Challenge Award for our efforts to reduce disparities through data collection & quality improvement
- In July of 2014, MGH will receive AHA's inaugural Equity of Care Award. The AHA Equity of Care Award was created to recognize outstanding efforts among hospitals and care systems to advance equity of care to all patients, and to spread lessons learned and progress toward achieving health equity.

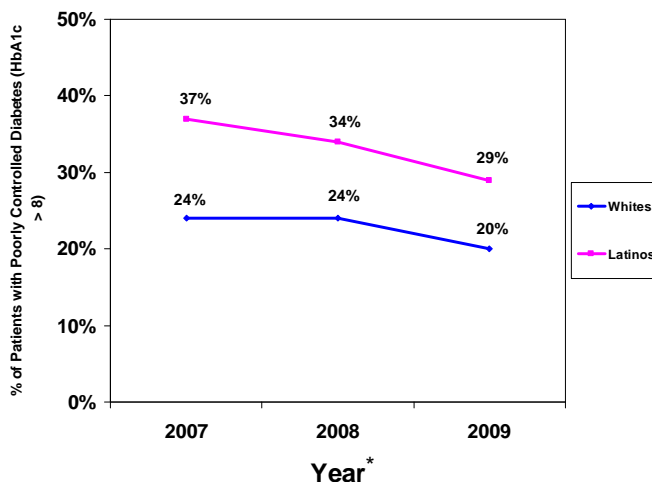


Contents of AREHQ

- **Includes all previously reported measures**
 - National Hospital Quality Measures (NHQM)
 - Healthcare Effectiveness & Data Information Set (HEDIS)
 - Patient Experience (HCAHPS & CG-CAHPS)
 - Physician/Practice linkage data
- **Department-Level Measures**
 - OB (new in 2013)
 - Pediatrics (new in 2013)
- **Caring for Patients with Limited English Proficiency**



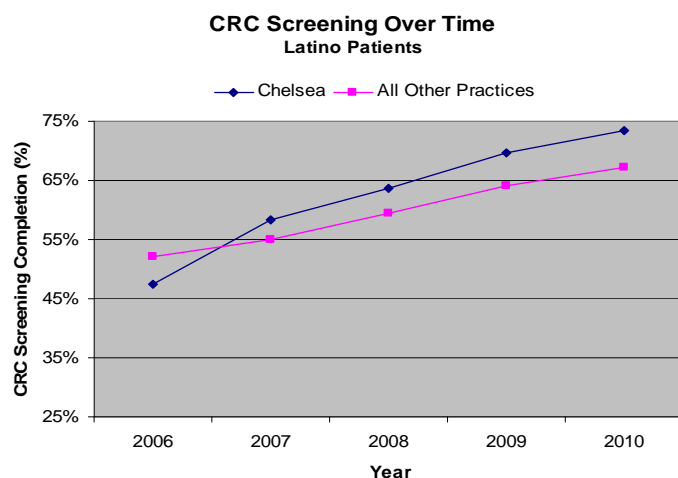
Diabetes Control Improving for All: Gap between Whites and Latinos Closing



* Chelsea Diabetes Management Program began in first quarter of 2007; in 2008 received Diabetes Coalition of MA Programs of Excellence Award



MGH Chelsea Colorectal Cancer (CRC) Screening Program started 2006



Patient Safety & Patients with Limited English Proficiency

- Adverse events affect patients with limited English Proficiency (LEP) **more frequently** and **severely** than English speaking patients
- Patients with LEP **are more likely to experience medical errors** due to communication problems
- Patients with LEP **are more likely to suffer physical harm** when errors occur (49.1% vs. 29.5%)*

*Divi C, Koss RG, Schmaltz SP, Loeb JM. Language proficiency and adverse events in US hospitals: a pilot study. Int J Qual Health Care. Apr 2007;19(2):60-67.



E-learning Program

The screenshot shows a web-based e-learning program interface. On the left is a 'Menu' with options: 'Voice Over Text', 'Module 1', 'Module 1 Learning Goal', 'Number of Medical Errors', 'Real Examples', 'Case Study 1', 'Percentage of Patients with LEP th...', 'The Basics of Patient Safety', 'Key Principles of Patient Safety', 'Video Case Vignette', 'Short Answer Response', and 'Module 1 Summary'. The main content area is titled 'Module 1' and 'Providing Safe and Effective Care for Patients with Limited English Proficiency'. It includes a sub-header 'Module 1: The Evidence for Disparities and the High Rate of Medical Errors for Patients with Limited English Proficiency' and a small image of a young child. Below this is a button that says 'Click Here to Begin the Module'. At the bottom, there is a disclaimer: 'This interactive e-learning program was made possible by a grant from the Macy Foundation and was created by the Disparities Solutions Center at Massachusetts General Hospital (MGH) in collaboration with the MGH Institute of Health Professions.' Logos for The Disparities Solutions Center, J. Morgan Macy Jr., and MGH Institute of Health Professions are displayed.



Through the Veil of Language

Addressing the Hidden Curriculum to Promote Quality, Safety and Humanism in the Care of Patients with Limited English Proficiency

Funded by the Arnold P. Gold Foundation

Phase 1

- ◆ Qualitative interviews with Macy curriculum students
- ◆ Language champions groups

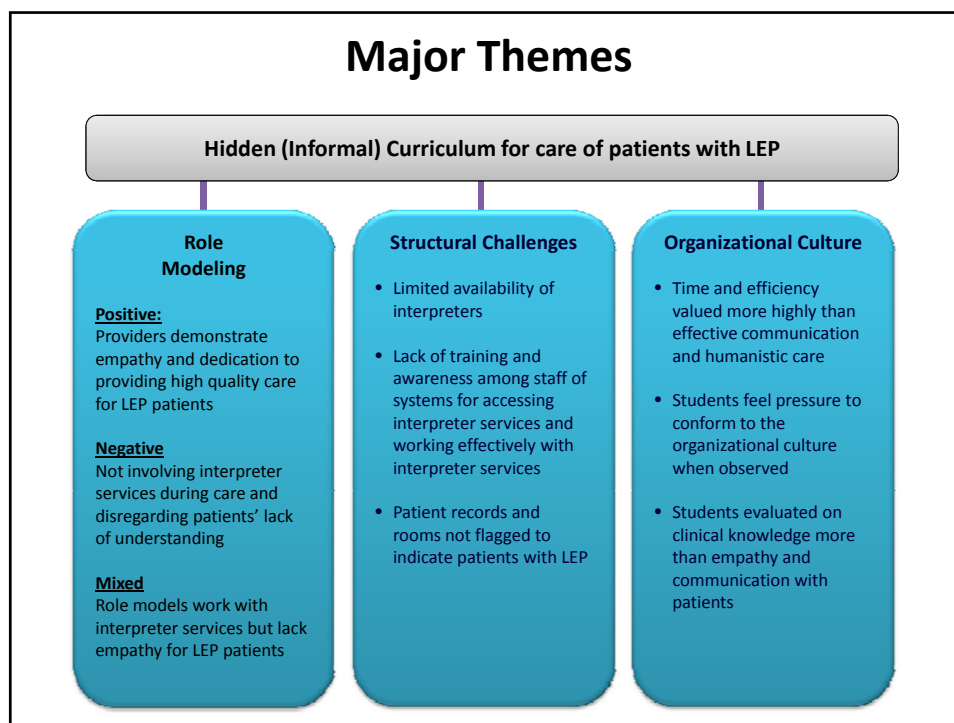
Phase 2

- ◆ Development of tool to assess the hidden curriculum as it relates to the care of patients with LEP within a clinical setting

Phase 3


- ◆ Development and pilot of system based interventions to change organizational culture and the hidden curriculum to promote humanism and professionalism in the care of patients with LEP





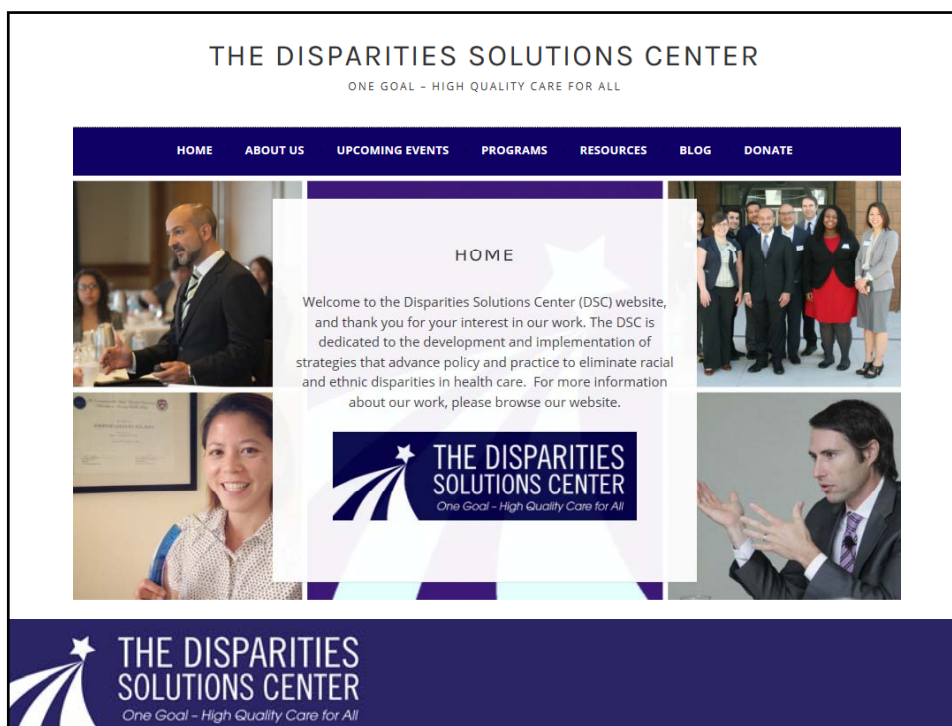
Summary

- Strong and growing link between LEP and medical errors
- Hospitals can play a major role in safe care for LEP by building safety systems with attention to LEP issues
- Hospital Guide and TeamSTEPPS training provide guidance and some practical tools
- Focus on how to change the culture early through Macy interprofessional curriculum and Gold Professorship work



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In Summary

- Create **awareness** – both self and for others
- **Leadership** includes being able to address the business/operational side of things
- Don't underestimate **the value of data**, or **personal stories**
- Tap into **WHY** you went into healthcare/public health into the first place (personal stories)
- **Be vulnerable**, be human
- But be **strategic**

Questions?



Thank You

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