Achieving Health Equity: Tools to Move Forward

MN Health Plans Collaborative

Hennepin Health

ucare.

South Country Health Alliance

HealthPartners

BlueCross BlueShield Minnesota
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Promoting Maternal Respectful Care

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Disclosures

I have no financial disclosures related to the content of the lecture today

Objectives

- Understand how quality links to equity
- Discuss the importance of looking through a lens of equity
- Describe barriers to providing equitable, respectful care
- Identify practical steps to be undertaken in quality improvement to support equitable and respectful care through a quality collaborative
Linking Quality to Equity

• The Institute of Medicine defines quality as “the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge”

• Health disparities are the health outcome measure of progress toward health equity

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Equal Care is NOT Equitable Care

Ref “Interaction Institute for Social Change” Artist: Angus Maguire
Equitable Care Is the same QUALITY of care

*Finding Answers: Solving Disparities through Payment and Delivery System Reform; solvingdisparities.org

Maternal and Infant Health Disparities

- Nationally, Black women are four times more likely to suffer a maternal mortality than white women
- The rate of preterm birth among Black women is 50% higher than that of white women
- The infant mortality rate for Black infants is 2.3 times higher than that of non-Latino white infants
- The Severe Maternal Morbidity (SMM) rate for a Black woman with a college degree is 2 times higher than that of a white woman with a high school diploma
Why do we have inequitable care?

Health Disparities vs. Health Care Disparities

• Health Disparities
  – “A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage” the Healthy People 2020

• Health Care Disparities
  – “…Differences in health care quality, access, and outcomes adversely affecting members of racial and ethnic minority groups and other socially disadvantaged populations” National Quality Forum
Examples of Inequitable Care

- Black individuals are less likely to be offered preventive services such as cancer screening and influenza vaccine
- Black individuals are less likely to have adequate treatment of pain
- Blacks and Hispanics are less likely to receive bypass surgery even when medically indicated
- Women are less likely to undergo appropriate cardiovascular testing

Implicit Bias Defined

- Implicit bias, also known as unconscious bias, is defined as “the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner”

- Kirwan Institute for the Study of Race and Ethnicity
Moment of Reflection

Distorted self-reflection hinders growth.

Causes of Implicit Bias

- We like to take shortcuts
- We tend to seek out patterns
- Experience and social conditioning
Bias Beliefs about Black Women

• Bias beliefs about Black women are founded in four archetypes
  – Mammy
  – Sapphire
  – Jezebel
  – Welfare Queen

Bias Beliefs About Black Women

• Mammy
  – Stereotyped Black women as obese, dark-skinned, maternal figures, desexualized, loyal to white families
  – Stereotyped as taking care of the white family’s children but not her own
  – Dark-skinned was also seen as ugly
  – Stereotyped Black women as only being domestic workers
  – Perpetuated in art, literature, and media

Bias Beliefs About Black Women

- Sapphire archetype
  - Sassy Mammies
  - Black women portrayed as rude, loud, stubborn and overbearing
  - Led to Angry Black Woman stereotype
  - Not wanting to fulfill this stereotype, Black women often remain silent


- Jezebel archetype
  - Stereotyped Black women as hypersexual
  - Began when Europeans began to travel to Africa. African women were scantily clothed compared to European women
  - Used to justify slave owners raping slaves
  - Perpetuated in art, novelties, and media

Bias Beliefs About Black Women

- Welfare queen archetype
  - Stereotype that Black women are uneducated, single mothers who have children to take advantage of public assistance
  - Reality is, according to the Nutrition Assistance Program Report Series, in 2013, 34% of White households participated in SNAP compared to 23% of Black households

An Example of Implicit Bias in Medicine

THEN...

NOW...

Microaggressions

• “A comment or action that subtly and often unconsciously or unintentionally expresses a prejudiced attitude toward a member of a marginalized group (such as a racial minority)

- Merriam-Webster

Types of Microaggressions

• Microassaults
  – Conscious and intentional actions or slurs

• Microinsults
  – Verbal and nonverbal communication that subtly conveys rudeness and insensitivity that is demeaning to a person’s race, ethnicity, or gender

• Microinvalidations
  – Communications that subtly, exclude, negate or nullify the thoughts, feelings or experienced reality of an individual
An inmate gave birth alone in jail. Lawmakers want changes to ensure it doesn’t happen again.

By SKYLER SWISHER
SOUTH FLORIDA SUN SENTINEL | FEB 18, 2020 AT 7:01 PM
“I’m not concerned with you liking or disliking me... All I ask is that you respect me as a human being.”

-Jackie Robinson

“Respect for ourselves guides our morals, respect for others guides our manners.”

-Laurence Sterne
Respectful Care is Patient-Centered Care

- “Providing care that is respectful of, and responsive to, individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions.”

- Institute of Medicine

Picker Institute’s Eight Principles of Patient-Centered Care

- Respect for patients’ preference
- Coordination and integration of care
- Information and education
- Physical comfort
- Emotional support
- Involvement of family and friends
- Continuity and transition
- Access to care
Obstacles to Respectful Care

- Bias
- Culture of a Healthcare System
- Time
- Not using the RESPECT model

Culture of a Healthcare System

- Respect
  - In a culture of respect, people perform better, are more satisfied, innovative, and display greater resilience
  - Respect for colleagues and respect for patients

- Equity
  - Has to be an integral part of our values
    - Acknowledging disparities exist
    - View of inequity as an injustice
Disrespectful Culture in Healthcare

- Passive-Disrespect
  - Procrastination, resist safe practices, chronic tardiness
- Dismissive treatment
  - Gossip, impatience, constant refusal to value, recognize, acknowledge contributions of others
- Nonverbal Insidious behavior
  - Sighing, staring or glaring, making faces, rolling eyes
- Systemic disrespect
  - Making patients wait, excessive workloads, requiring long work hours
- Disruptive behavior
  - Angry or rude outbursts, verbal threats, pushing or throwing objects
- Demeaning behavior
  - Shaming, censuring staff in front of others, insensitive jokes, sexual harassment
- Intimidating behavior
  - Arrogance, sarcasm, invading one’s personal space intentionally
- Passive-Aggressive behavior
  - Refusal to do tasks, unreasonable criticism of authority, willful workarounds

Culture of Equity in Healthcare

- Blacks account for only 5% of all active physicians
- Hispanics account for only 5.8% of all active physicians
- Of all physicians, 64.1% are male
Culture of Equity in Healthcare

- Of 200 hospitals and health systems surveyed, 55% reported women were overlooked for executive leadership positions.

- Almost 80% of the healthcare workforce is women, only 19% of hospitals are led by women, and only 4% of healthcare companies have a female CEO.

Not Enough Time...

- 27% of OBGYNs spend 17-24 minutes, 35% spend 13-16 minutes, and 27% spend 9-12 minutes.
  - Physicians report the lack of time with patients causes decreased job satisfaction and physician burnout.
**RESPECT Model**

- Rapport
- Empathy
- Support
- Partnership
- Explanations
- Cultural Competence
- Trust

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**Pathway to Change**

- Patient and Community Partners
- Healthcare Systems
- Policy Makers

**Equity and Respectful Maternity Care**
Pathway to Respectful Care: Health Care Providers

- Change starts with me
  - 60% of providers believed that quality of care is different by race but only 40% thought that difference applied to their patient panel

- Acknowledge your own bias
  - Implicit Association Test: [https://implicit.harvard.edu/implicit/takeatest.html](https://implicit.harvard.edu/implicit/takeatest.html)

- Address your bias
  - See people as individuals
  - Recognize your belief as a stereotype
  - Increase opportunities to have contact with individuals from different groups
  - Empathy

Pathway to Respectful Care: Patient Partnership

- Keep patients at the center of innovations of care
- “Family Centered Care is not something you do for a family, it’s something you do WITH a family”
  - Latoshia Rouse
Tools to Measure Respectful Care

- Mothers Autonomy in Decision Making Scale (MADM)
- Mothers on Respect Index (MOR)
- The Mistreatment Index (MIST)

Patients as Partners in Decision Making

- **Prescriptive**: Healthcare provider creates the care plan and provides to the patient, which she may or may not follow.
- **Shared**: Healthcare provider and patient develop the care plan together, but patient’s roles and responsibilities are not included.
- **Partnership**: There is mutual agreement on the plan and decisions, including shared accountability.
Pathway to Respectful Care: Health Care Systems

- Explore different pay models for care. Move from volume-based care to value-based care
- Create systems that promote a culture of respect
  - Accountability
  - Engage and Support
  - Partner with Patients and Families

Pathway to Respectful Care: Policy Makers

- Review maternal policies through a lens of equity
  - Ex: California bill requiring implicit bias training for physicians, nurses and allied health professionals
- Black Maternal Health Momnibus
  - Grow and diversity the perinatal workforce to ensure that every mom in America receives culturally congruent maternity care and support
  - Ex: Louisiana has created a Doula Registry
Linking Quality to Equity

• **Louisiana Maternal Mortality Review Report**
  – Leading causes of pregnancy-related maternal mortality: hypertension and hemorrhage
  – 4 Black women die at a rate of every 1 white woman

• **RMMI Aims**
  – achieve a 20% reduction in severe maternal morbidity in patients who experience a hemorrhage and/or severe hypertension in participating birth facilities between August 2018 and May 2020.
  – narrow the Black-white disparity in these outcomes in the same time period.

Designing Equity into the Activity

• **Reliable Clinical Process**
  – Must stratify data to determine if a disparity exists

• **Respectful patient partnership**
  – Design for partnership in care delivery and transparent communication for trust

• **Effective Peer Teamwork**
  – Addressing microaggressions and creating a culture of respect

• **Engaged Perinatal Leadership**
  – Investing resources for change
Creating a Culture of Equity

• Making equity a priority

• Getting on the same page and speaking the same language
  – Learning Session on Health Equity
    • Surveyed hospitals about Health Equity and Patient Partnerships
    • Acknowledging Implicit Bias
    • Panel discussion including a patient partner

Making Equity a Priority

• Charter Chats
  – 30-60-90 Day Plan
    • Patient Partnership and Equity Goal

### Aim and 30-60-90 Plan

This document, based on your 20x2020 Charter, is to help you clarify your team aim, and plan for the next 90 days of improvement work with the LaPCC network.

#### Focus of Your Work

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<td>Patient Partnership and Equity Goal</td>
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#### Last Quarter

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#### Next Quarter – January-March 2020

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Making Equity a Priority

- Louisiana Birth Ready Designation
  - Designation distinguishes those birthing facilities committed to practices that promote **safe, equitable and dignified births**
  - Five Key Areas
    - Participation
    - **Addressing Health Disparities and Patient Partnership**
    - Policy and Procedures
    - Structure Measures and Education
    - Outcome and Process Measures

Summary

- **Respectful maternity care** is necessary for quality and safety
- Re-center the work to the **who** and the **why**
- Make care **equitable** by making care **better** and **consistent**
References


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References


Thank You!

EVALUATION LINK AT SIGN-OFF

CERTIFICATE OF PARTICIPATION UPON COMPLETION OF EVALUATION