

Why Ending Disparities in Healthcare Must Start at the Top



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The Governance Institute April Leadership Conference | April 11, 2022



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Disclosures


- Institute for Healthcare Improvement
- Merck - through IHI's Better Maternal Outcomes
- Pfizer Pharmaceuticals
- Jackson College
- Hillman Foundation
- Michigan Health Endowment Fund
- Detroit Medical Center Foundation
- Hope Starts Here (Kellogg and Kresge)
- United States Department of Agriculture
- National Institutes of Health (Co-I)
- BET Foundation
- NFL Foundation
- Sheldon Foundation



Healthcare Equity Scholars Program 2022-2023

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- \$6.5B integrated regional health system in SE Michigan
- 6 geographically distributed hospitals
- Expansive ambulatory network with 32 medical centers
- Henry Ford Medical Group with 1200 physicians
- 1800 private physicians
- Large insurance plan
- Strong academic core
- Diversified non-hospital and retail service lines

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2020-2021 Diversity & Equity Awards



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- Diversity Inc. Award
- Healthcare Equality Index (HEI) Award (2019, 2020, 2021)
 - Human Rights Campaign (HRC) Award
- Forbes Award
- Great Lakes Women Business Council 2020 Excellence in Supplier Diversity, Emerging
- 2021 and 2020 Carolyn Boone Lewis Equity of Care Award, Honoree

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Leadership

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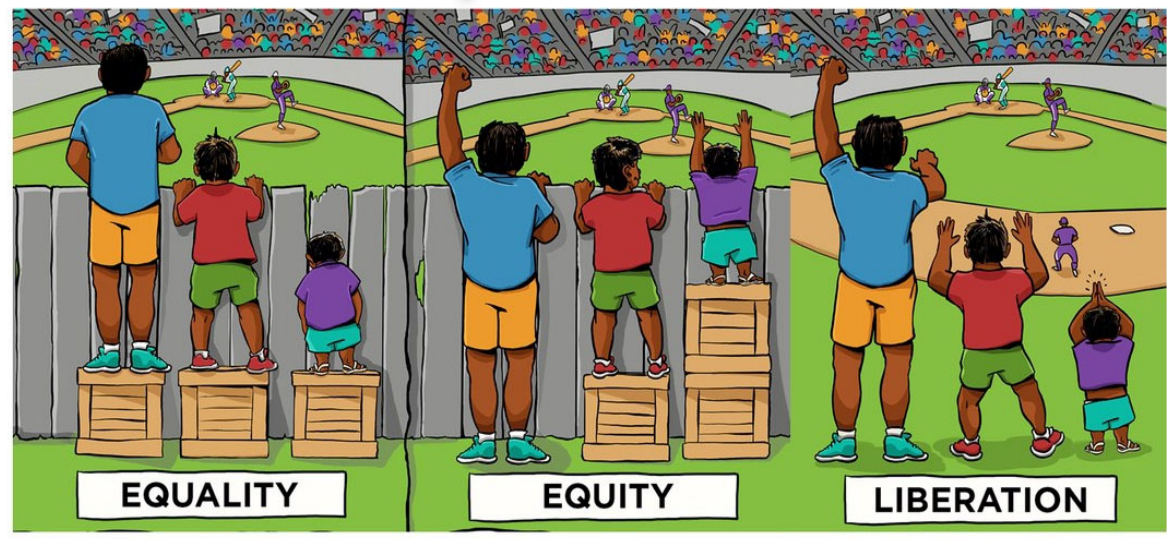
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Institute on Multicultural Health (IOMH)

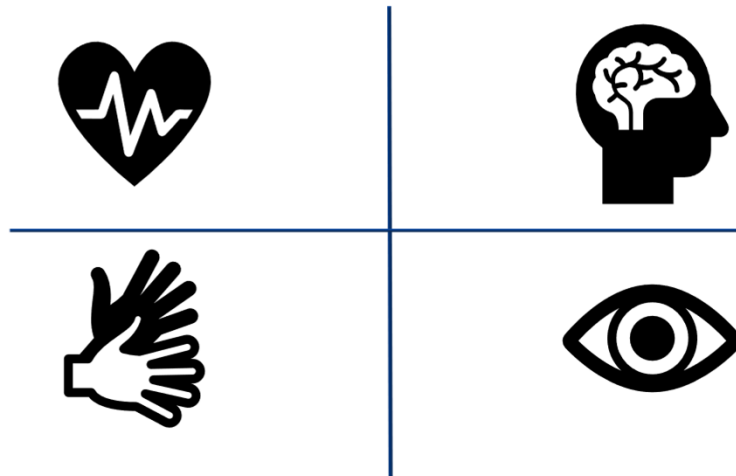
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Nomenclature: Equity



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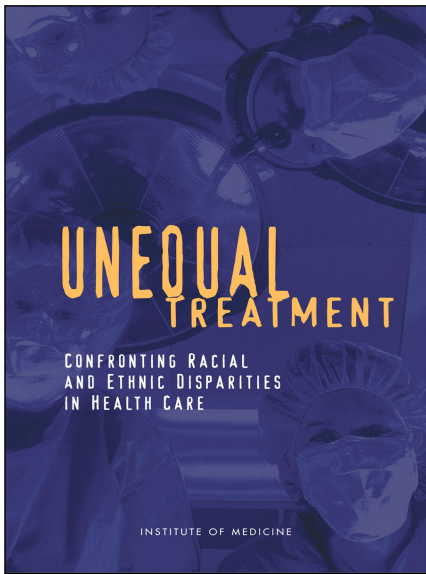
Leadership Anatomy and Physiology



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Reported significant variation in the rates of medical procedures by **race**, even when insurance status, income, age, and severity of conditions are comparable. This research indicates that U.S. racial and ethnic minorities are less likely to receive even routine medical procedures and experience a lower quality of health services.

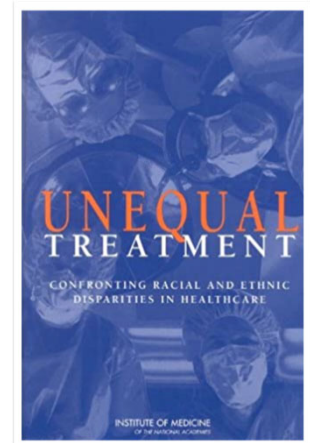


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Racial Bias in Medicine

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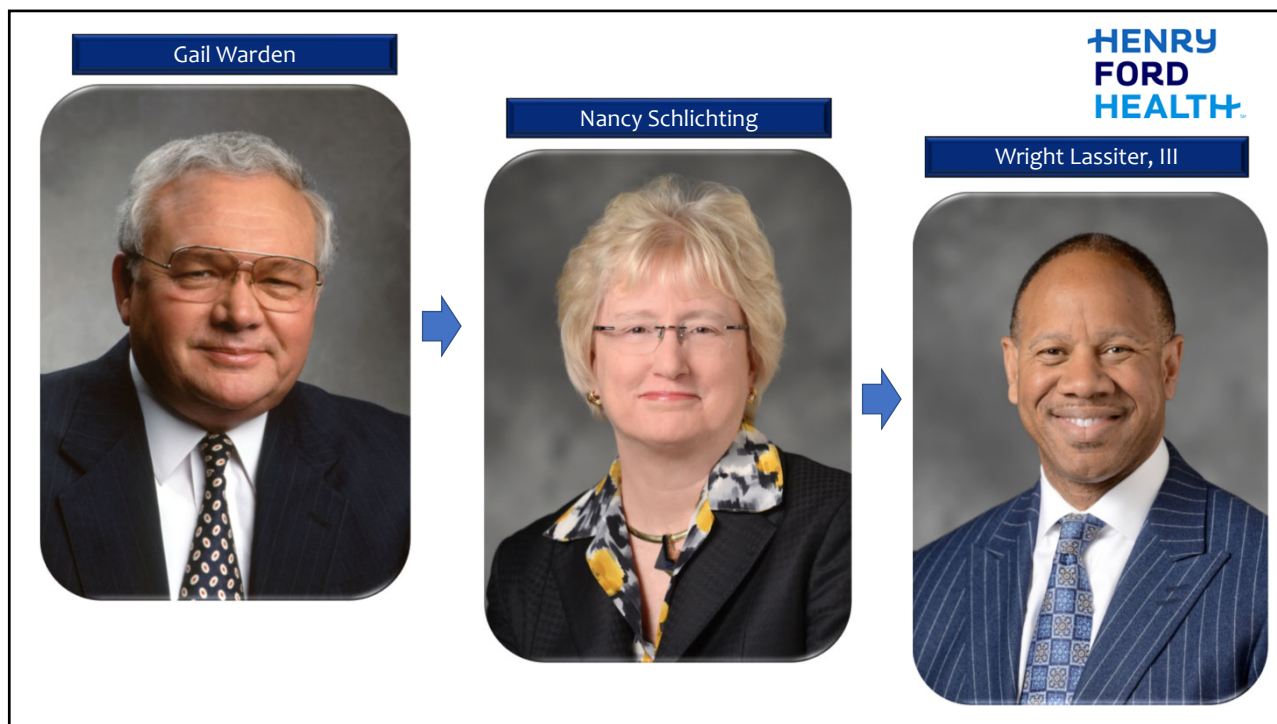
- Most health care providers appear to have **implicit bias** in terms of positive attitudes toward Whites and negative attitudes toward people of color ———> contributes to health disparities.
- From the simplest diagnostic and treatment interventions to the most high-tech ones, minorities receive **fewer procedures** and **poorer quality** medical care than whites.
- More implicit bias are associated with more clinician verbal dominance, less patient positive affect, poor patient centered dialogue, low perception of respect from clinician, less trust and confidence in clinician, less likely to recommend clinician to others.
- Studies find that most Americans have rapid and unconscious emotional and neural reactions to blacks- 100 milliseconds is how quickly an individual's race is noticed and whether or not that person is trustworthy (300 - 400 milliseconds: time for human eye to blink)



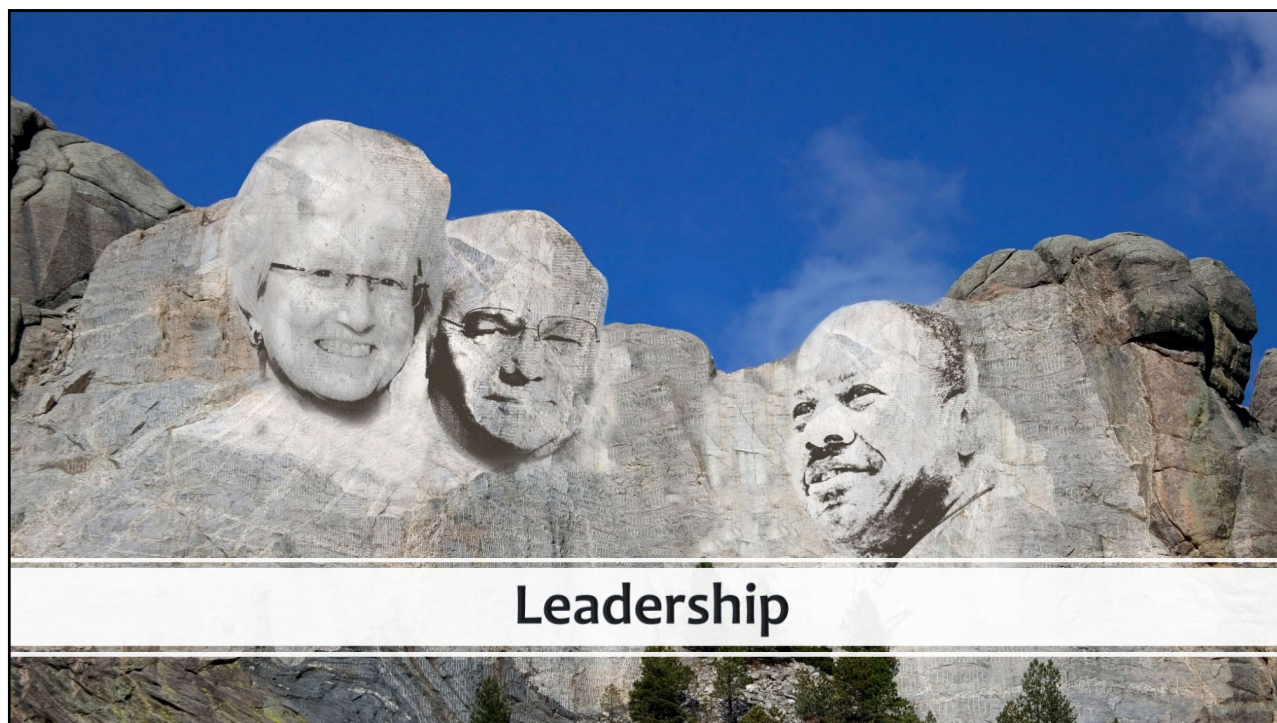
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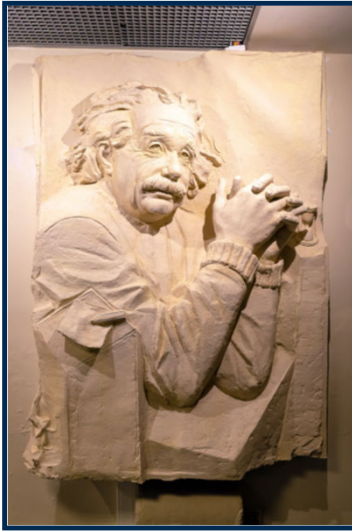
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We can't solve problems
by using the same kind
of thinking we used
when we created them.
~Albert Einstein

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Leadership - Conceptualize



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Leadership - Operationalize



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Leadership - Operationalize



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Leadership - Institutionalize



Conference Name | Date

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Leadership - Policy

Governor Granholm's Blueprint for Preventing Unintended Pregnancies



July 6, 2005
Not pictured: Barbara Flis

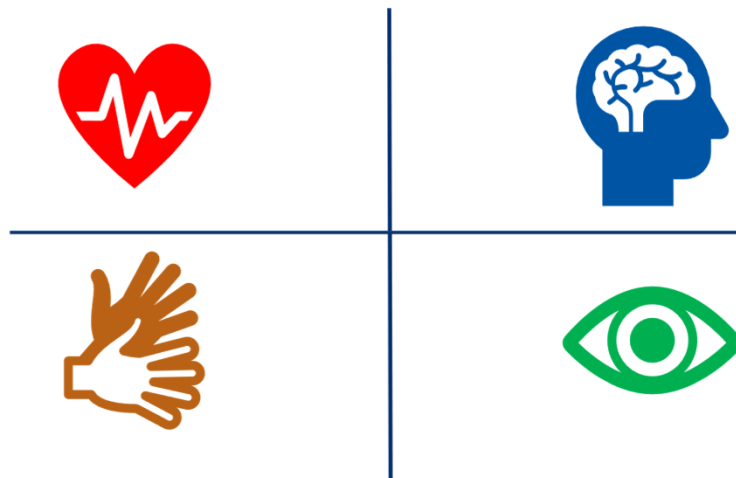
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Leadership Anatomy and Physiology

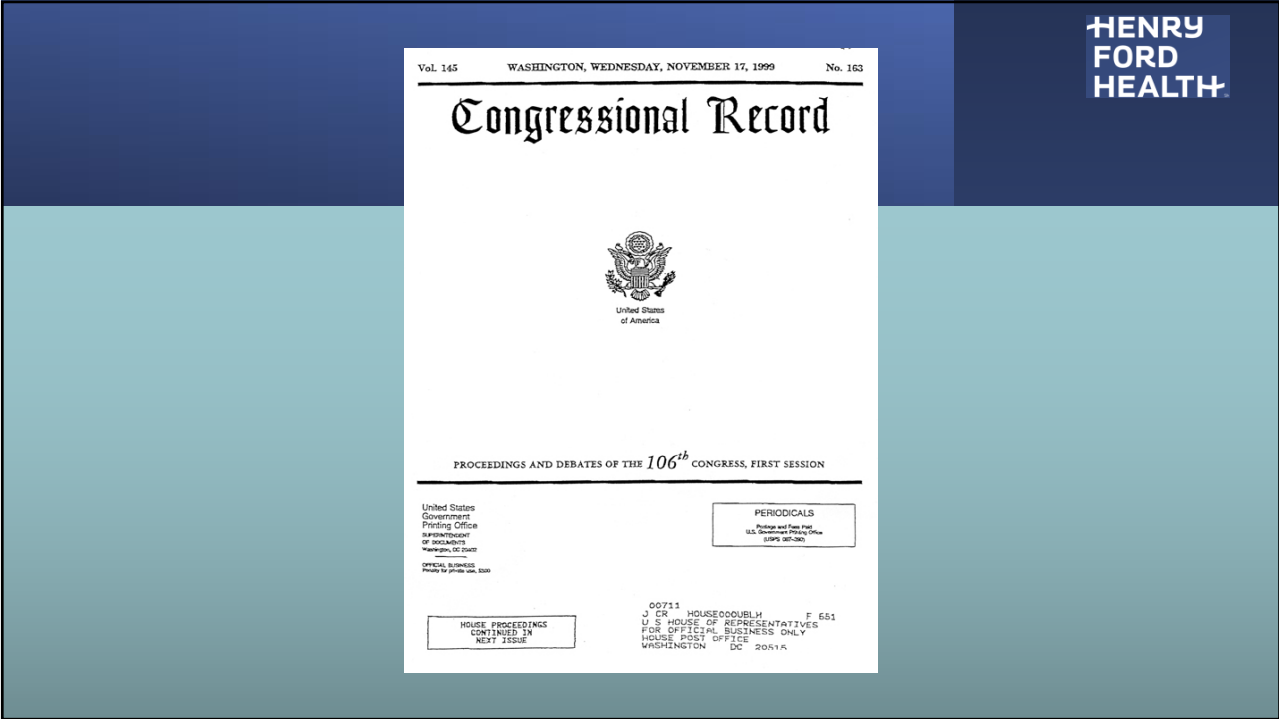


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Leadership – Transformative



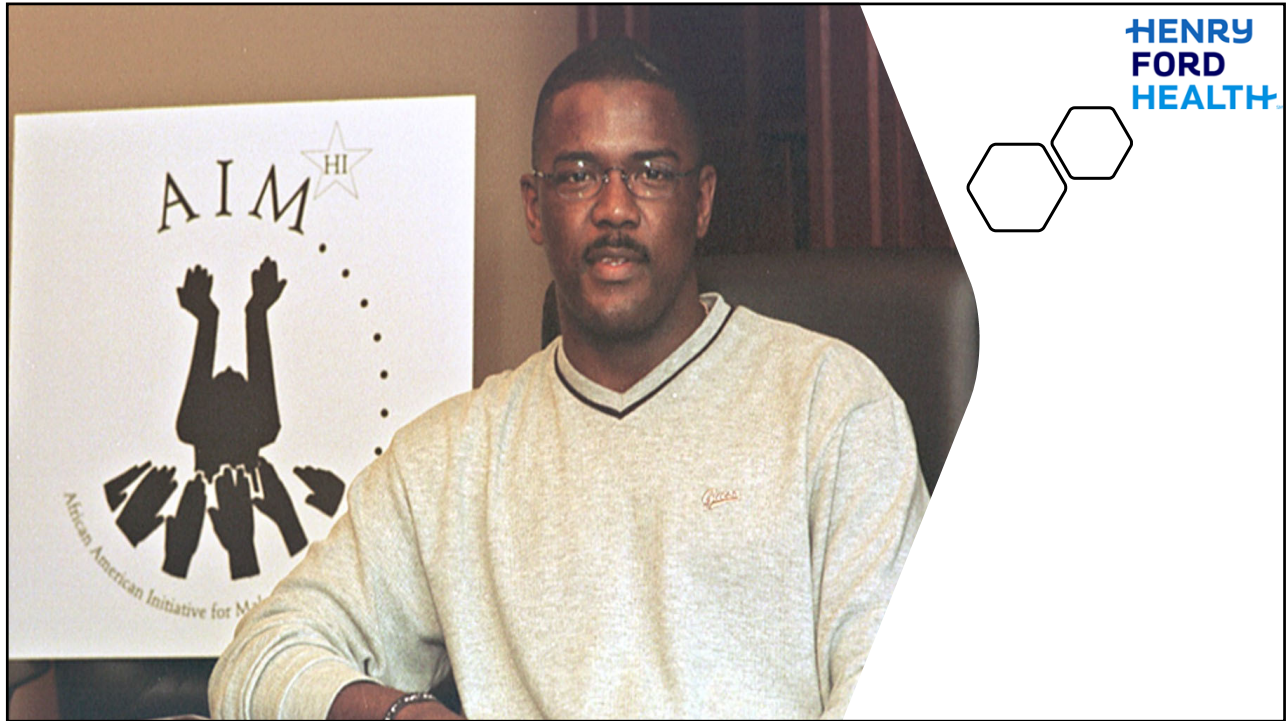
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From: Betancourt, J: Improving Quality and Achieving Equity: A guide for hospital leaders 2008

Find the report at: <http://www.henryford.com/healthcareequitycampaign>

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The Foundation: REaL Data

1. Are you of Hispanic or Latino origin?
2. Are you of Arab or Chaldean origin?
3. Which of the following best describes your race?
4. Please provide one or two nationalities or ethnic groups that best describe your ancestry
5. How would you rate your ability to speak English?
6. What language do you feel most comfortable using when discussing your health care?



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Hardwiring the Safety Net

COHORT ONE:

WIN Network: Detroit, 2012-15

- 326 babies born, av. birthweight 6.79 lbs.
- 0 preventable infant deaths in cohort

COHORT TWO:

HFMG and WIN Network Group Prenatal Care, 2016-present



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WIN NETWORK: CLEVELAND



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Food Insecurity

- 15% of residents (MI)
- 1 in 6 (MI)
- 12.7% (U.S.)

Fresh RX Network

- 1,000 patients
- Biometrics and Lifestyle Changes

Removing Barriers: Food Insecurity

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Leadership

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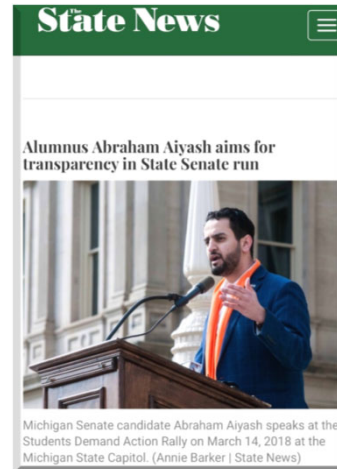
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Abraham and Travis



Abraham recently elected MI House of Representatives



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PARTNERSHIPS

i.e., Faith-based Network, UW 211, Food Banks and Farmer's Markets, PPE suppliers, policymakers, senior centers, schools, health department, businesses, etc.

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A Standout Collaboration



Competing health systems
come together as:

- leaders
 - funders
 - strategists
 - communicators
 - implementers ...
- with public health,
community & academic
partners



Michael Duggan (DMC), Brian Connolly (Oakwood), Patrick McGuire (St. John Providence), Nancy Schlichting (HFHS), April 2011



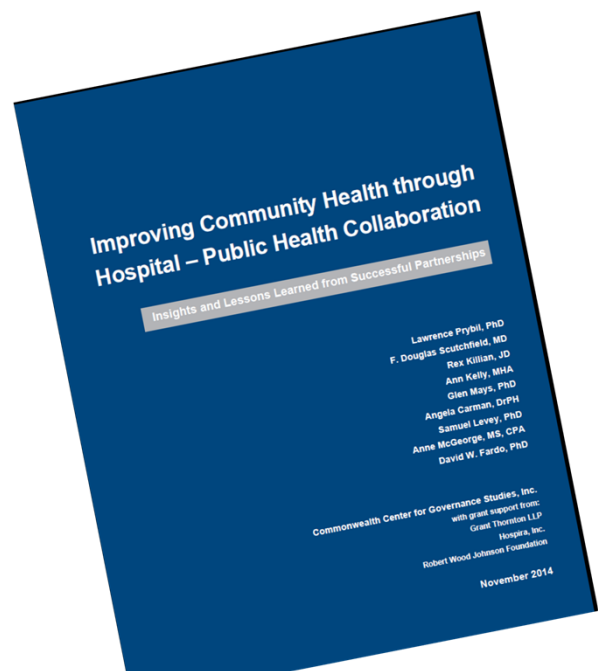
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Detroit Regional
Infant Mortality
Reduction Task Force
featured in national
study of exemplary
partnerships.



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Leadership - Policy

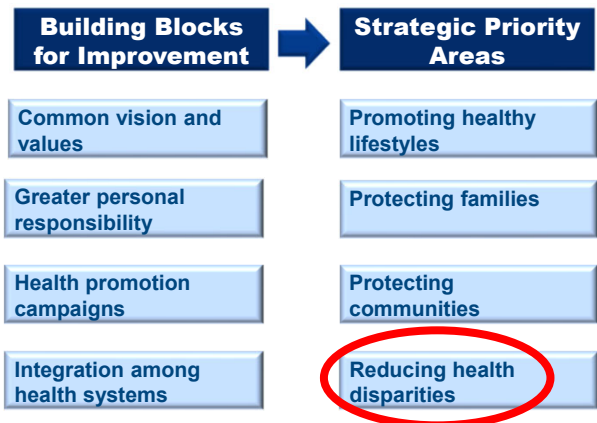
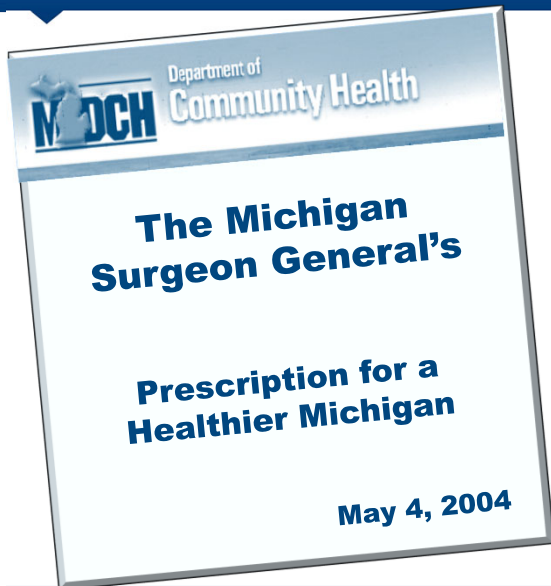
Governor Granholm Signs Four New Lead Laws



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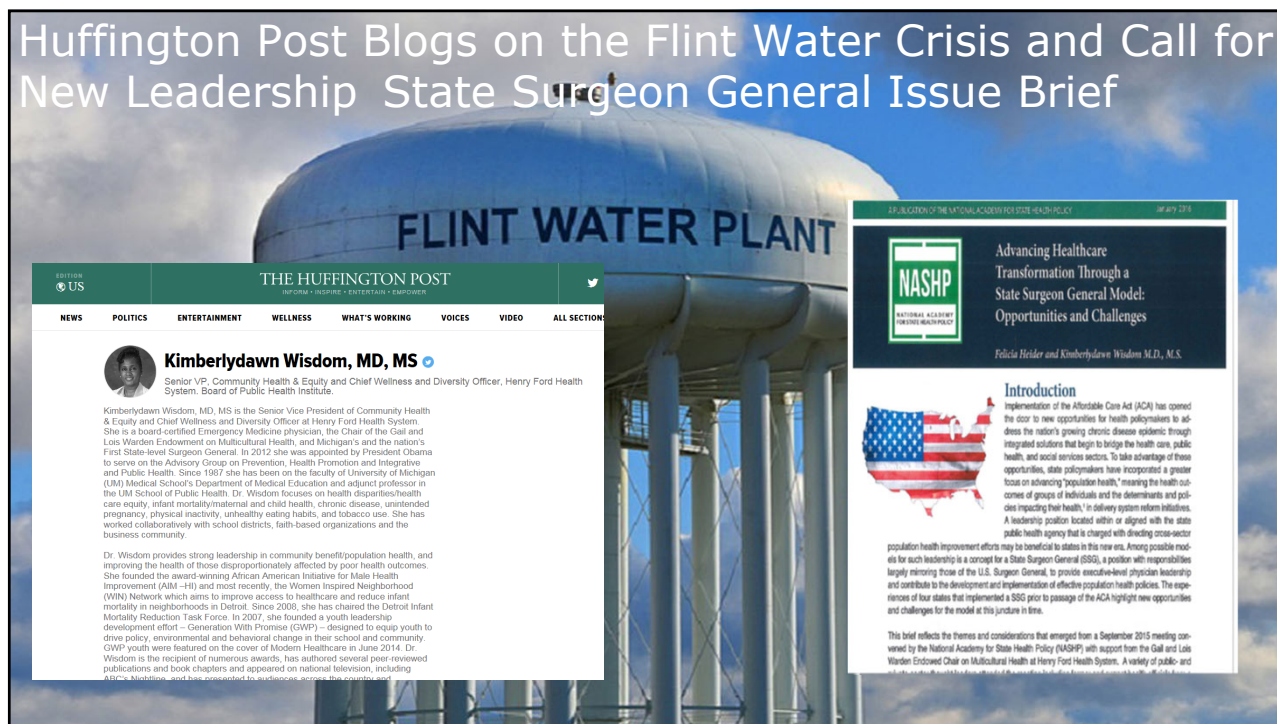
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Outcome



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Huffington Post Blogs on the Flint Water Crisis and Call for New Leadership State Surgeon General Issue Brief



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Faith-based
RCT Effort
1996

Community-based approach empowers patients



Kimberlydawn Wisdom, M.D., greets graduates of the first diabetes education class at Messiah Missionary Baptist Church in Detroit. From the left are Geraldine Johnson, Dr. Wisdom, Mattie Williams, and Thelma Finner, director of health ministries at the c

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Institute for Healthcare Improvement Pursuing Equity Initiative Key Pillars*

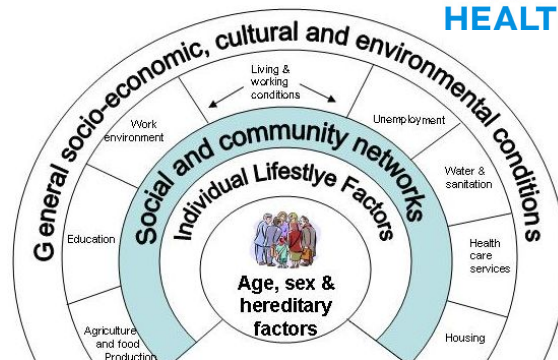
1. Make health equity a strategic priority
2. Develop structures and processes to support health equity work
3. Deploy specific strategies to address the multiple determinants of health on which the health care organization can have direct impact
4. Decrease institutional racism within the organization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



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

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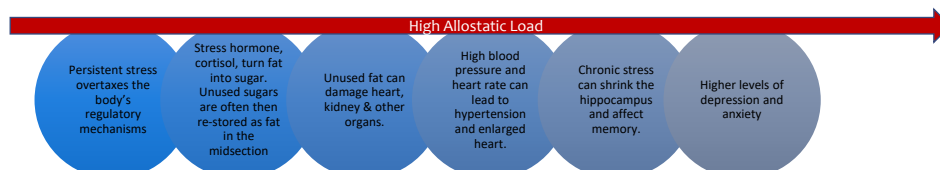
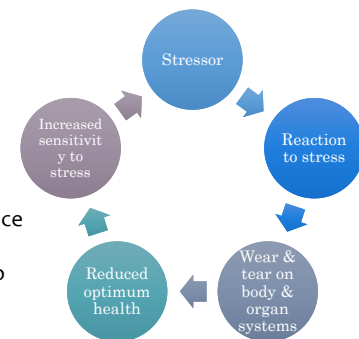


Addressing Unconscious Bias

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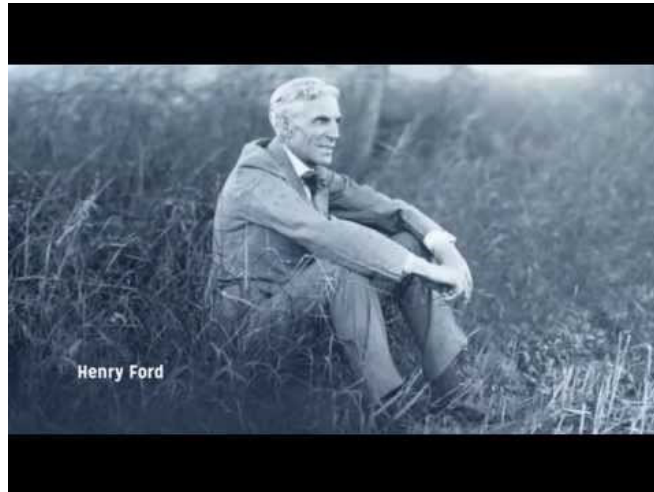
Weathering & Allostatic Load

- Weathering hypothesis details the biological effects of racism-health of African-American women may begin to deteriorate in early adulthood as a physical consequence of cumulative socioeconomic disadvantage (Geronimus et al., 1992)
- Effects of weathering: a rise in health risks at younger ages for conditions that impact pregnancy and the likelihood of experiencing complications, such as hypertension, type 2 diabetes, and high blood pressure.
- Allostatic Load:** cumulative wear and tear on the body's systems owing to repeated adaptation to stressors.
- Individuals facing severe trauma and racism and living in underserved communities experience a high allostatic load. Over time, their bodies becomes cortisol resistant and leading to attacking other cells/tissues that aren't a threat—the "cytokine storms" which have come to characterize some of the most severe COVID-19 cases .
- Black women's average telomere length is shorter than white women's and this difference is associated with exposure to social, economic, or environmental stressors. (Geronimus et al., 2010)



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The Kid Who Jumped First



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Leadership - Institutionalize

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Spatial Racism in Detroit – Prof. Peter Hammer Windshield Tour, March 9, 2018

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<p><i>Healthcare Equity Scholars Program</i></p> <ul style="list-style-type: none"> • AAMC Learning Health System Award • Yearlong program meets every month for half day CME • Equity improvement projects completed by each scholar • More than 40 scholars graduated since 2014 	<p>CEO ACTION FOR DIVERSITY & INCLUSION™ Pledge</p>	<p>HENRY FORD HEALTH</p>
<p>Henry Ford Storytelling Project – 8 Mile Wall</p>		<p>Creating a Culture of Equity</p>
<p>American Hospital Association</p> <p>Equity of Care</p> <p>#123forEquity Campaign</p> <p>Take the Pledge Report your Goals</p>	<p><i>Healthcare Equity Book Club</i></p> <p>Join the Henry Ford Health System Healthcare Equity Book Club. A new book related to culture or equity is selected each quarter. Discussions are both online and in person, and are moderated by our HFHS Healthcare Equity Team.</p>	

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2021-2025 DEI Strategic Plan

DEIJ Strategic Plan				
DEIJ Strategy Deployment Sponsors*: Dr. Kimberlydawn Wisdom & Michelle Johnson-Tidjani				
Strategic Pillar	Anti-Racism & Social Justice Advocacy	Diverse Workforce & Inclusive Culture	Community Empowerment	Healthcare Equity
Executive Council Sponsors	Heather Geisler Carladenise Edwards	Nina Ramsey Bob Riney	Robin Damschroder MJ Vogt	Dr. Adnan Munkarah Dr. Mike Genord
HFHS Commitment	We commit to rejecting and eliminating all forms of bias, racism, and violence within our organization and markets.	We commit to serving as a trusted leader in healthcare with a broadly diverse workforce who feel valued, respected and a shared sense of belonging to the HFHS community.	We commit to fostering effective partnerships and collective action that creates and sustains health in historically marginalized communities.	We commit to achieving equity in clinical outcomes and experience to empower patients to achieve optimal health and well-being.

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Healthcare Equity Scholars Program 2022-2023

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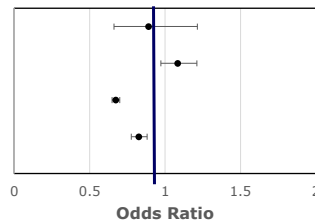
Blood Pressure < 140/90 Odds Ratio Analysis

Characteristic					
Blood Pressure < 140/90					
0	6,988 (28%)	61 (31%)	466 (27%)	9,375 (37%)	1,719 (32%)
1	17,628 (72%)	137 (69%)	1,274 (73%)	15,924 (63%)	3,581 (68%)

[†] Statistics presented: n (%)

Characteristic	OR [†]	95% CI [†]	p-value
race			
	0.89	0.66, 1.21	0.5
	1.08	0.97, 1.21	0.2
	0.67	0.65, 0.70	<0.001
	0.83	0.77, 0.88	<0.001

[†] OR = Odds Ratio, CI = Confidence Interval



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Summary of Equity Gaps*

Ambulatory Goal	Race		
A1C <= 8.0 (Diabetes)		↑	↓ ↓
BP < 140/90 (Hypertension)			↓ ↓
Breast Cancer Screening	↓		↑ ↓
Cervical Cancer Screening		↑	↑ ↓
Colon Cancer Screening	↓		↓ ↓

↑ = Race has higher performance for the ambulatory goal/metric than Whites
 ↓ = Race has lower performance for the ambulatory goal/metric than Whites
 blank = No significant difference between the selected race and Whites for the ambulatory goal/metric

*White is the reference race for identifying the equity gaps in the above table.

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OUTCOMES Summary and Take aways

- **Firsts**
- **Structure**
- **Pledge**
- **Strategy**
- **Data/dashboards**
- **Programs/policies**
- **Training**
- **Partnership**

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