



**Reducing the Days Children Spend
in the Hospital:
Creation of a
Health Equity Collaborative**

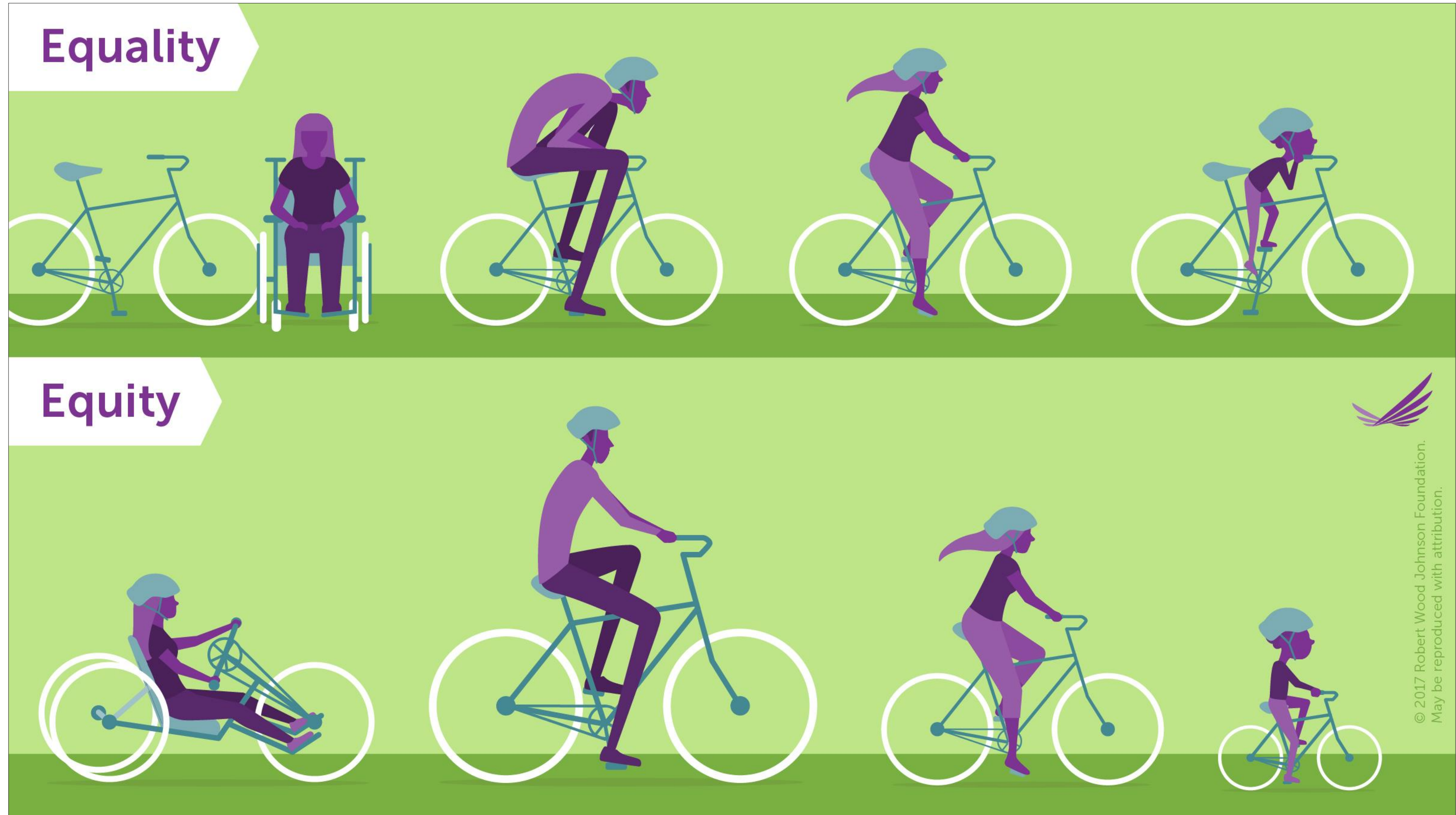
Cincinnati Children's
December 2019



BACKGROUND



GOAL
move
toward
equity



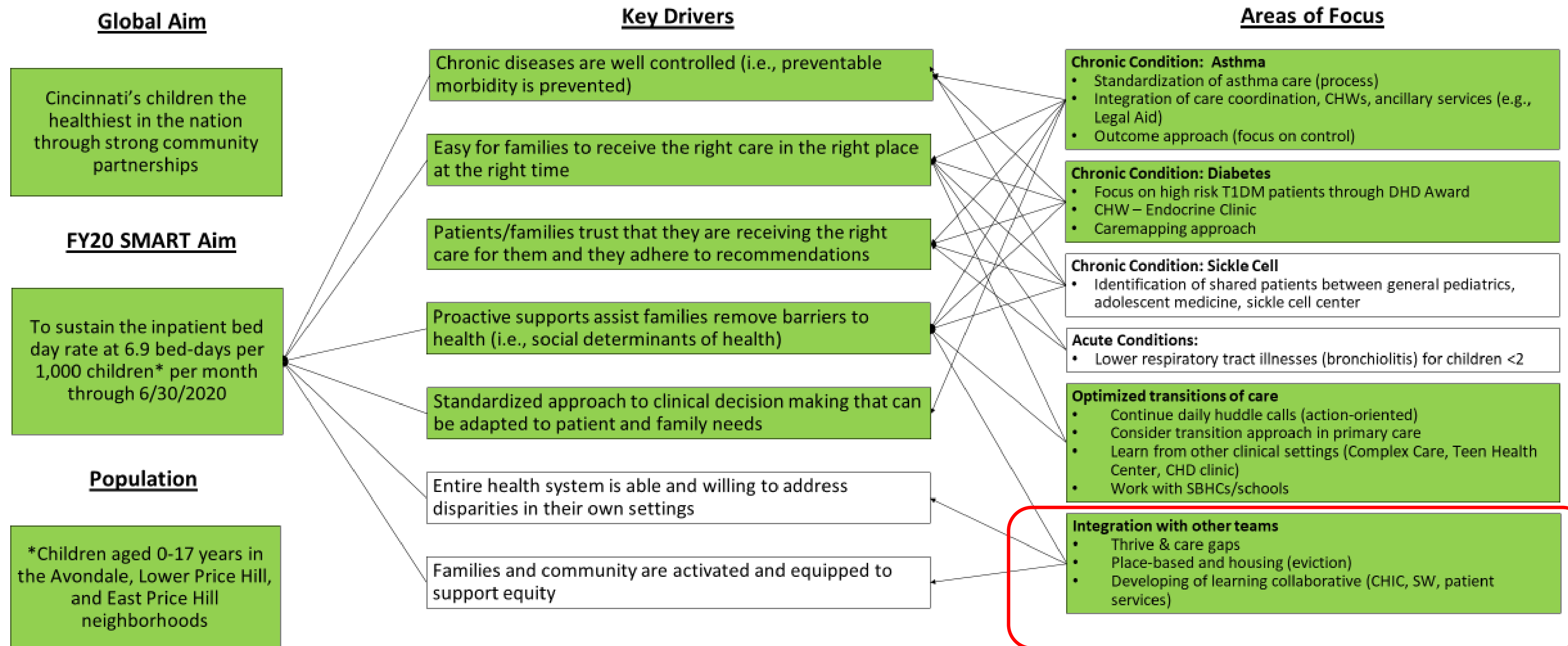
THEORY



Inpatient Bed Day Disparity Reduction Key Driver Diagram (KDD)

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Revision Date: 07.26.19



Creating a Health Equity Collaborative

Initial Target Divisions/Conditions

- ✓ Endocrine | Diabetes
- ✓ Hematology | Sickle Cell
- ✓ Adolescent Medicine
- ✓ Trauma
- ✓ Asthma

WHAT IS THE HEALTH EQUITY COLLABORATIVE?

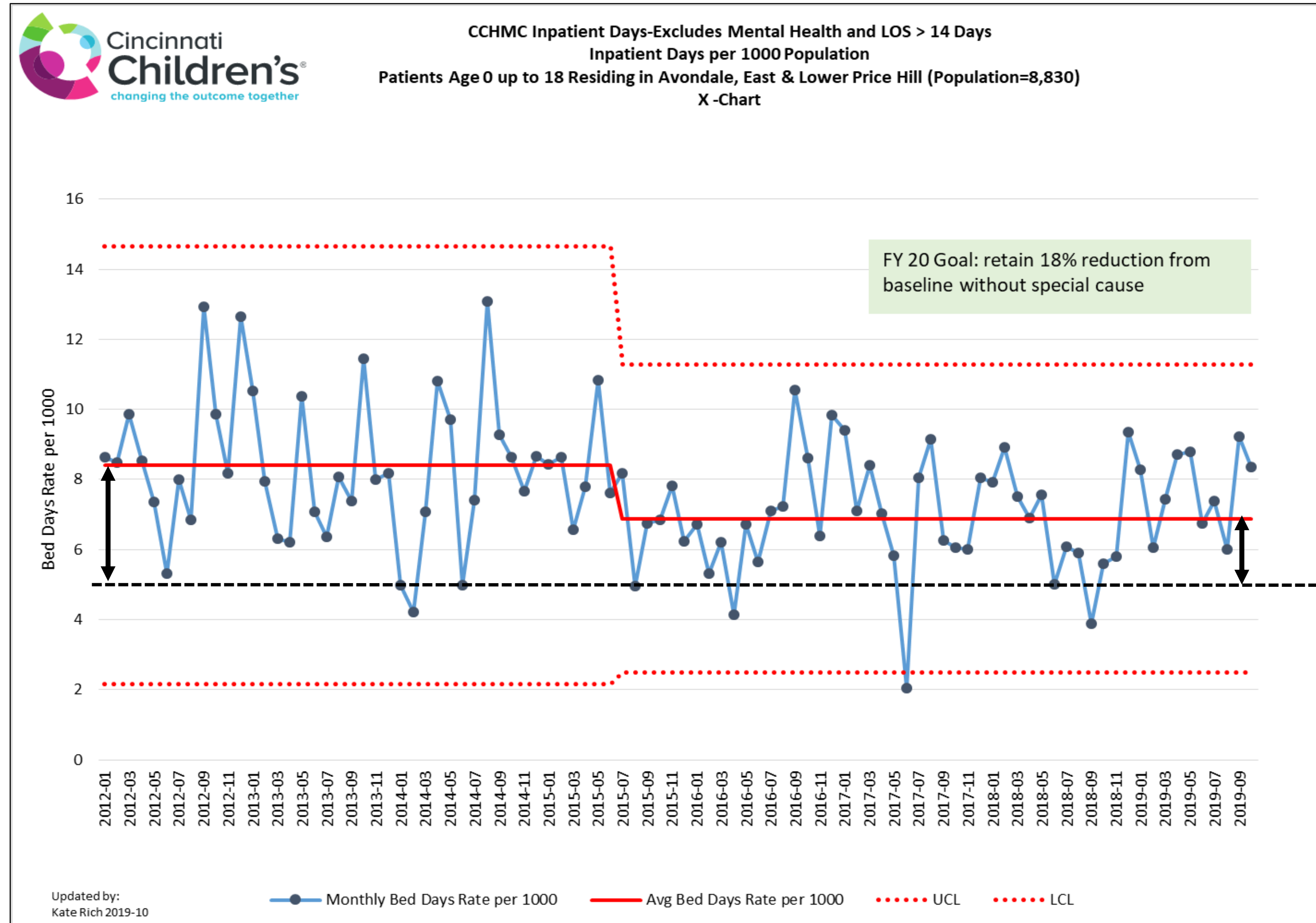


- A chance for divisions interested in achieving better, more equitable outcomes for their patients to come together and share best practices (*All Teach, All Learn*)
- An opportunity for agreed upon measures to be looked at in new ways thereby informing new care strategies
- A way to re-think how we provide care so as to ensure that the right child gets the right care at the right time and place
- A chance for us to see where there are internal equity gaps in how resources are distributed
- Opportunities for true partnership and expertise alignment

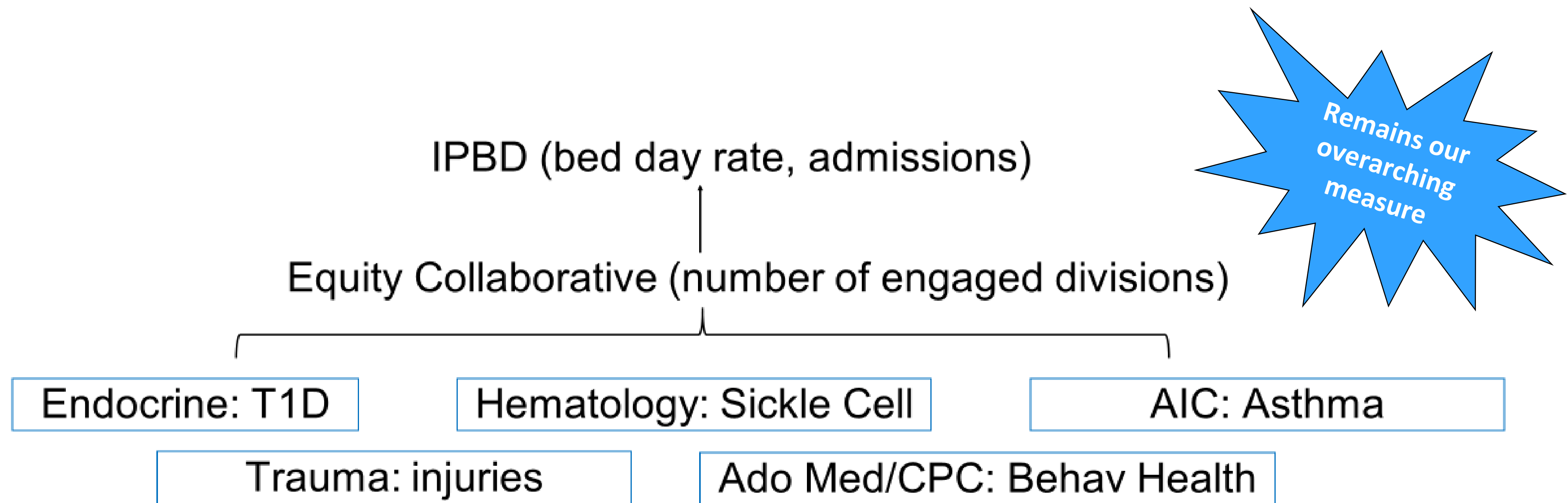
OVERARCHING MEASURE



Reducing days children spend in the hospital



MEASURES FOR THE EQUITY COLLABORATIVE



Remains our overarching measure

- For each condition, measure Admissions and ED encounters for a cohort of patients in our target IPBD neighborhoods (Avondale, EPH, LPH) and beyond
- Additional possible measures of disease control:
 - ✓ For Diabetes: HgA1c, weight
 - ✓ For Sickle Cell: HgbF, ANC, medication adherence (Hydroxyurea, PCN), connection to primary care
 - ✓ For Asthma: ACT score, medication adherence (if can be obtained), symptom-free days
 - ✓ For behavioral health: ED visits, readmissions
 - ✓ For trauma: ED visits, admissions, loss to follow up



We asked each subspecialty to complete a baseline assessment across 4 domains. *Preliminary results:*

Data and Measurement Domain

- ✓ Assesses what type of data is accessible to the team and how often is it reviewed
- Learned that there is a **WIDE RANGE!** Some with no ability to subdivide population data to full capabilities.

Equity Mindset Domain

- ✓ Assesses the team's awareness of health disparities and their ability to act to narrow them
- Learned there is variability in how and when social and medical complexity risk stratification occurs
- Very **LITTLE** to **NO** Social Determinant of Health and Cultural Competency/Implicit Bias training

QI and Change Management Domains

- ✓ Assesses teams QI bench-strength and their corresponding readiness to change
- Most with some QI capability and QI support; all listed **LIMITED TIME** as a big barrier to this work

DATA + STORY



- ✓ We will look at data through an **EQUITY** lens
- ✓ We will leverage the **POWER** in **STORY** (n of 1)
- ✓ We believe we will **LEARN** with & from each other



TEAM MEMBERS

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