

## New report outlines strategies to address racial, ethnic health care disparities

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An analysis of survey data from participants in the Massachusetts General Hospital (MGH)-based Disparities Leadership Program - a yearlong executive education initiative designed to help health care leaders address racial and ethnic disparities in health care services - has identified five important strategies that helped participants implement successful projects for their institutions. The report from members of the MGH Disparities Solutions Center, which conducts the program, appears in the June issue of *Health Affairs*, which focuses on issues of health equity.

"Unlike other areas of quality improvement that might be straightforward to execute, addressing disparities is a more sensitive, hotbutton issue and requires greater attention to organizational changemanagement strategies," says Joseph Betancourt, MD, MPH, director of the MGH Disparities Solutions Center (DSC) and corresponding author of the report. "Leaders need to understand that disparities are closely linked to quality, safety, cost and value and that, if they take this issue on, they can be recognized and rewarded for their work."

Launched in 2007, the Disparities Leadership Program remains the first and only program of its kind. Executives from a broad range of <a href="health">health</a> care-focused organizations - including hospitals, health centers, medical schools and public health departments - across the U.S. and from other countries participate in a two-day training session in Boston that focuses on defining disparities and their causes, developing strategies to identify and address disparities and fostering the leadership and change-



management skills to implement those strategies.

Over the following months, teams based at the participating organizations work to develop and implement plans and projects customized to each institution. During that time participants provide updates and receive feedback from DSC staff and members of other teams at three group webinars. Two additional webinars focus on delivering specific content requested by the teams, and each participating organization receives two additional assistance calls. At the end of the year a closing meeting, held in Santa Monica, California, allows participating teams to present the results of their projects, the lessons they learned and receive additional assistance and training. To date, Disparities Leadership Program teams have come from 31 states, Puerto Rico, Canada and Switzerland.

The current report is based on surveys completed by each participating team at the end of the program year and covers responses from 119 teams at 97 organizations that participated from 2007 to 2016. The analysis was restricted to teams from hospitals, health plans and community health centers, since other participating organizations had significantly different organizational structures.

The overall analysis identified five essential domains for successfully addressing disparities and improving the quality of care:

- Know who to involve Lack of leadership buy-in was a common challenge; useful strategies included identifying executive champions, presentations to leadership and early involvement of midlevel and front-line staff.
- Shape organizational culture Barriers included lack of awareness of disparities and difficulty integrating disparities reduction into current work; strategies included identifying and emphasizing elements of organizational culture aligned with



change.

- Create urgency and a vision to make a rational and emotional case Leadership needs to help create a sense of urgency; strategies include communicating what other institutions are doing, integrating patient stories into communication vehicles and sharing information about progress.
- Engage your organization and your audience Include both internal partners and community stakeholders and employ constant communication to ensure that senior leaders incorporate changes into their day-to-day behavior.
- Harness the power of a collaborative network Working with collaborators improves the ability to anticipate a changing environment and access the latest evidence on disparities. Such a network can help leaders promote a culture of change, challenge assumptions and encourage divergent points of view.

"There remains a strong demand among health care leaders to better understand this issue, and how to address it, given the link between disparities, quality, safety, cost and value," says Betancourt, who is an associate professor of Medicine at Harvard Medical School. "We now have assembled a large and powerful network of DLP alumni dedicated to identifying and addressing disparities in health care. Creating a movement of this nature is unprecedented, and we plan to continue to build and expand it so we can shape <a href="health care">health care</a> delivery and policy as we've done over the years."

**More information:** Joseph R. Betancourt et al, Organizational Change Management For Health Equity: Perspectives From The Disparities Leadership Program, *Health Affairs* (2017). <u>DOI:</u> 10.1377/hlthaff.2017.0022



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