



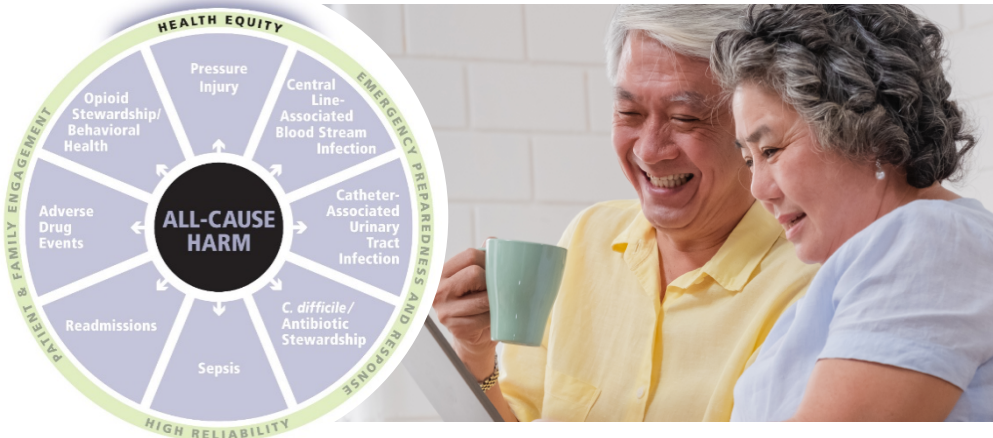
- Healthcentric Advisors ■ Qlarant
- Kentucky Hospital Association
- Q3 Health Innovation Partners
- Superior Health Quality Alliance

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HEALTH EQUITY GUIDE

January 2022



January is Cervical Cancer Awareness Month

Hispanic/Latina women have the highest cervical cancer rates, followed by Black/African American women. The OMH knowledge center features [several resources](#) on disparities for cervical cancer prevention and treatment.

AHRQ Releases the annual National Healthcare Quality and Disparities Report

The Agency for Healthcare Research and Quality released its annual “[National Healthcare Quality and Disparities Report](#)” which provides an overview of access, quality, and disparity measures to highlight key trends and gaps in care prior to the COVID-19 pandemic. Key findings and trends include:

- Leading causes of death in the United States are heart disease, cancer, and unintentional injuries. Rates of suicide have also been rising.
- Significant disparities by race, ethnicity, household income, and location of residence persist for access to health insurance and access to dental insurance despite overall access to care improving.
- Disparities by race, ethnicity, household income, location of residence, and insurance type exist for having an ongoing source of care, receiving timely care, and receiving care when needed.
- People in urban cores, medium and small cities, and nonmetropolitan areas all experience worse care on more measures than better care.
- The opioid and mental health crisis worsened in the years leading up to COVID-19. Opioid-related hospitalization rates increased faster in suburban communities than in urban cores.
- Significant disparities persist for Black, Hispanic, American Indian and Alaska Native communities in all domains of healthcare quality e.g., HIV death rates in Black populations, incident rates of end stage renal disease due to diabetes for American Indian/Alaskan Native and Hispanic communities.
- Lack of racial and ethnic diversity persists within the healthcare workforce, notably among psychologists, therapists, dentists, advanced practice nurses, physician assistants, emergency medical technicians, and registered nurses.

The report helps identify opportunities to improve quality and reduce disparities such as disparities in maternal health and birth outcomes, the opioid crisis, and equitable access to high-quality and affordable care. It also highlights the impact of the COVID-19 pandemic which has disproportionately impacted racial and ethnic groups, and notes that future versions of the report will track the effects of COVID-19 on healthcare quality and disparities.

In the News

[CMS Encourages Hospitals to Implement Patient Safety Best Practices to Improve Maternity Care and Outcomes](#)

In support of delivering equitable, high-quality maternity care, CMS encourages hospitals to review their policies and procedures for incorporation, where appropriate, of best practices. One such evidence-based practice for improving patient safety and quality of care, referred to as “maternal safety bundles,” has been successful in driving improvements – particularly with obstetric hemorrhage, severe hypertension in pregnancy, and non-medically indicated Cesarean deliveries. CMS also [announced](#) the intent to propose a “Birthing-Friendly” designation to further drive hospital improvements in perinatal health outcomes and maternal health equity.

[New Guidance to Boost Accessibility and Equity in COVID-19 Vaccine Programs](#)

The Office for Civil Rights (OCR) issued guidance tied to legal standards and best practices for improving access to COVID-19 vaccine programs and ensuring nondiscrimination on the basis of race, color, and national origin. The new guidance states that providers should partner with civil rights organizations, faith-based groups, civic organizations, researchers, and advocacy groups to create effective outreach for medically underserved groups.

[Use of Race in Clinical Diagnosis and Decision Making: Overview and Implications](#)

This Kaiser Family Foundation policy brief examines the use of racial classification in medical care and teaching and identifies how these practices can contribute to ongoing racial disparities in health and health care. The brief summarizes four key areas: provider bias and discrimination, disease stereotyping and nomenclature, use of race in clinical algorithms, tools and guidelines, and race-based pharmacological prescribing guidelines.

[Case Study: Atrium Health’s Proactive Approaches to Advancing Health Equity](#)

Atrium Health (Charlotte, NC) received the American Hospital Association’s 2021 Carolyn Boone Lewis Equity of Care Award. It surpassed a 97% collection rate for race, ethnicity and language preference (REaL) patient data. It created a “demographic data wall” – an electronic scorecard – that includes selected population health, quality and clinical outcome measures, along with staff and patient experience data.



For more health equity news: <https://qi.ipro.org/health-equity-resources/>

Upcoming Events

[Measuring Impact for Health Equity](#)

National Academy of Medicine

Date: January 25 - 26

[Tools to Increase COVID-19 Vaccine Uptake: Substance Use Disorder Populations in Rural Communities](#)

Center on Rural Addiction

Date: January 26

Time: 12:00 – 1:00 PM EST

[Creating an Equitable Telehealth System for a Diverse Patient Population](#)

Becker’s Hospital Review

Date: January 28

Time: 12:00 PM – 1:00 PM CT