

# Person and Family Engagement and Health Equity



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Hospital safety and quality outcomes show that care is not provided equally across all populations. For example:

- Minority and other vulnerable populations are more likely to be readmitted to the hospital within 30 days of discharge for chronic conditions.<sup>1</sup>
- The risk of death from COVID-19 is greater for racial and ethnic minority groups living in rural areas compared with urban areas.<sup>2</sup>

Person and family engagement (PFE) is recognized by the Centers for Medicare & Medicaid Services (CMS) as a promising way to address health and health care disparities and achieve equity in quality and safety. **Applying PFE equitably means including patients and families from all backgrounds as equal and active partners in their health care.** Doing so can help ensure that all patients reap the benefits of engagement in their healthcare. Equity in PFE means that hospitals:

- Consider the needs, perspectives, interests, values, and beliefs of all patients and families, including those from vulnerable populations in the community.
- Implement actions that reflect what matters most to all patients at each level of hospital care (i.e., direct care/point of contact, hospital policy and procedure, governance, and public and community policy).

The table below describes six strategies for engaging with patients and families in equitable and meaningful ways. Although the order of the strategies in the table is based on hospitals' experiences, hospitals do not need to implement all six strategies at once, or in this order. The order in which a hospital implements the strategies will depend on its needs, circumstance, and resources. However, the strategies are interrelated, and should be implemented iteratively to inform future efforts to engage all patient populations.

## Key Terms

**Health Equity** is the “attainment of the highest level of health for all people,” which requires addressing health disparities, with particular attention to vulnerable populations.

## Health and Health Care Disparities

are the differences in access to, delivery of, or quality of health and health care between population groups. Commonly recognized disparities in health include a higher burden of illness or higher likelihood of death for one population relative to another. Disparities in health care include differences in insurance coverage, access to care, or quality of care between groups.

<sup>1</sup> Center for Medicare & Medicaid Services. (2021). *Paving the way to equity: A progress report (2015–2021)*. <https://www.cms.gov/files/document/paving-way-equity-cms-omh-progress-report.pdf>

<sup>2</sup> Iyanya, A. E., Boakye, K. A., Lu, Y., & Oppong, J. R. (2021, February). Racial/ethnic heterogeneity and rural-urban disparity of COVID-19 case fatality ratio in the USA: A negative binomial and GIS-based analysis. *Journal of Racial and Ethnic Health Disparities*. <https://doi.org/10.1007/s40615-021-01006-7>

**Table 1. Strategies to Engage All Patient Populations and Improve Health Equity**

What?	How?
<b>Know your patient population:</b> Regularly collect and assess data (e.g., demographic data) on your patient population to identify and address health disparities	<ul style="list-style-type: none"> <li>• Collect race, ethnicity, and language (REAL) data from your patient population</li> <li>• Examine health outcomes by different subgroups of patients</li> <li>• Use a community needs health assessment to identify other factors, like social determinants of health that may contribute to health disparities</li> </ul>
<b>Partner with community and cultural leaders:</b> Develop partnerships with community-based organizations and cultural leaders to include diverse perspectives, experiences, and values in addressing health disparities	<ul style="list-style-type: none"> <li>• Reach out to social services agencies, nonprofits (e.g., advocacy groups), and community and social institutions (e.g., churches and schools) that can help identify root causes of health disparities and connect you with community members who can share their perspectives and experiences on health care</li> </ul>
<b>Create patient-, family-, and community-centered policies and practices:</b> Create policies and implement redesigned care practices that directly address patient-, family-, and community-identified needs	<ul style="list-style-type: none"> <li>• Partner with community-based organizations to identify the needs of patients and families—including barriers to health care and engagement in their care</li> <li>• Invite patients and families—who are representative of your patient population—to co-create patient education materials and redesign care practices that address the needs of patients and families</li> </ul>
<b>Prepare leaders, clinicians, and staff to partner with diverse patient populations:</b> Provide education and training to help leaders, clinicians, and staff engage with diverse populations of patients and families to provide patient-and family-centered care	<ul style="list-style-type: none"> <li>• Acknowledge and address implicit biases about specific populations</li> <li>• Providing training on how to use culturally competent communication and deliver culturally competent care</li> <li>• Engage with community-based organizations to be better educated about cultural traditions, beliefs, and values in your community</li> </ul>
<b>Prepare patients and families to be partners in their care:</b> Provide information to help patients and families feel prepared and confident to engage in their care	<ul style="list-style-type: none"> <li>• Provide educational materials—using plain and positive language—with clear examples of what engagement in care means at critical points of care (e.g., admission, discharge)</li> <li>• Ensure that all patients and families know about and can access services (e.g., language interpreters, patient navigators) to help them participate in their care</li> </ul>
<b>Communicate openly and consistently with leaders, clinicians, staff, patients, and families:</b> Share information about hospital performance and health equity efforts to build trust and confirm commitments to addressing disparities	<ul style="list-style-type: none"> <li>• Share quality and safety data with patient, family, and community partners on your website or in a newsletter</li> <li>• Facilitate a culture that is committed to health equity by acknowledging challenges and celebrating successes</li> </ul>

For more information, see “How Person and Family Engagement (PFE) Can Help Hospitals Achieve Equity in Health Care Quality and Safety” in the IPRO HQIC [Resource Library](#).



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