Achieving Equitable Health Outcomes in Nebraska

An ECHO Project Funded by Nebraska DHHS through a CDC grant

Session 5 – October 18, 2023

Housekeeping Reminders

➢ Discussion makes sessions work best!
➢ Please stay muted unless you are speaking
➢ We love to see your face!
➢ Sessions will be recorded and available upon request
➢ Attendance is taken by filling the survey in the chat
➢ All the session presentation are available on our website

➢ Project ECHO collects registration, participation, questions and answers, chat comments, and poll responses for some ECHO programs. Your individual data will be kept confidential. This data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to create new initiatives.

Subject Matter Experts

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UNMC ID Health Equity and Quality Improvement ECHO Project

Conducting an Equity-focused Needs Assessment

Free Live ECHO Project
October 18, 2023
CID 59000

TARGET AUDIENCE

This accredited continuing education activity is intended for physicians, APPs, nurses, social workers, case managers, and anyone else interested in learning about health equity in underserved populations.

ACTIVITY DESCRIPTION

Achieving health equity, addressing COVID-19 disparities, and improving the health of all Nebraskans using a quality improvement approach are the goals for our newly launched educational initiative. This COVID-19-focused health equity and quality improvement educational series will use the ECHO model for training healthcare workers.

The course is being offered through the University of Nebraska Medical Center (UNMC) infectious diseases (ID) ECHO program and is funded by the Nebraska Department of Health and Human Services (DHHS) via a CDC grant.

EDUCATIONAL OBJECTIVES

At the conclusion of this live activity, the participants should be better able to:

1. Explain how a needs assessment informs the scope of a Quality Improvement project.
2. Apply definitions of reliable practice to health equity improvements.
3. Describe how system-level factors contribute to unreliability and inequity in case examples.

REQUIREMENTS FOR SUCCESSFUL COMPLETION In order to receive continuing education credit, you must:

1. Attend the live activity via Zoom,
2. Your attendance will be verified by the organizers.
3. Within 1-2 business days, you will receive an email from UNMC with a link to claim credit
   - ➢ Complete the online evaluation.
   - ➢ Save and print your certificate.

You have 20 days to claim credit for this activity. You will need to complete the evaluation and attest the time you spent participating in the activity. Your certificate will be saved in your UNMC MyCCE account under Certificates & Transcripts.

Questions regarding continuing education, please contact Valeta Creason-Wahl at vcreason@unmc.edu.

ACCREDITED CONTINUING EDUCATION

In support of improving patient care, University of Nebraska Medical Center is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

PHYSICIANS/PHYSICIAN ASSISTANTS
The University of Nebraska Medical Center designates this live activity for a maximum of 1.0 *AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

NURSES/NURSE PRACTITIONERS
The University of Nebraska Medical Center designates this activity for 1.0 ANCC contact hour. Nurses should only claim credit for the actual time spent participating in the activity.

ACCREDITED CONTINUING EDUCATION

As a Jointly Accredited Organization, University of Nebraska Medical Center is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. Regulatory boards are the final authority on courses accepted for continuing education credit. Social workers completing this course receive 1.0 general continuing education credit. **Social work level of content: Advanced**

This program has been pre-approved by The Commission for Case Manager Certification to provide continuing education credit to CCM® board certified case managers. The course is approved for 1.0 CE contact hour.
Activity code: I00056509   Approval Number: 230002958
To claim these CEs, log into your CCMC Dashboard at www.ccmcertification.org.

DISCLOSURE DECLARATION

As a jointly accredited provider, the University of Nebraska Medical Center (UNMC) ensures accuracy, balance, objectivity, independence, and scientific rigor in its educational activities and is committed to protecting learners from promotion, marketing, and commercial bias. Faculty (authors, presenters, speakers) are encouraged to provide a balanced view of therapeutic options by utilizing either generic names or other options available when utilizing trade names to ensure impartiality.

All faculty, planners, and others in a position to control continuing education content participating in a UNMC accredited activity are required to disclose all financial relationships with ineligible companies. As defined by the Standards for Integrity and Independence in Accredited Continuing Education, ineligible companies are organizations whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. The accredited provider is responsible for mitigating relevant financial relationships in accredited continuing education. Disclosure of these commitments and/or relationships is included in these activity materials so that participants may formulate their own judgments in interpreting its content and evaluating its recommendations.

This activity may include presentations in which faculty may discuss off-label and/or investigational use of pharmaceuticals or instruments not yet FDA-approved. Participants should note that the use of products outside currently FDA-approved labeling should be considered experimental and are advised to consult current prescribing information for FDA-approved indications.

All materials are included with the permission of the faculty. The opinions expressed are those of the faculty and are not to be construed as those of UNMC.

Disclosures

The accredited provider has mitigated and is disclosing identified relevant financial relationships for the following faculty, planners, and others in control of content prior to assuming their roles:

FACULTY
- Gale Etherton, MD, FACP
- Mahliqha Qasimyar, MD
- Jeff Wetherhold, M. Ed*

*faculty and planning committee member

Disclosures

PLANNING COMMITTEE

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Merck & Co, Inc: Industry funded research/investigator

Erica Stohs, MD, MPH
ReViral Ltd.: Industry funded research/investigator

The below planning committee members have nothing to disclose:

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Conducting an Equity-focused Needs Assessment

Presenters: Dr. Gale Etherton, Dr. Mahliqha Qasimyar, and Jeff Wetherhold

Objectives

1. Explain how a needs assessment informs the scope of a Quality Improvement project

2. Apply definitions of reliable practice to health equity improvements

3. Describe how system-level factors contribute to unreliability and inequity in case examples

Follow-up from Last Month

- Identify a data source that you can use to strengthen your health equity project, or

- Identify an area where you know that you need additional data sources.

Needs Assessment

1. Identifies <u>potential</u> causes of failure - the areas where a process is not reliable

2. Facilitates the prioritization of <u>potential</u> solutions to test based on their benefits and requirements

Reference: [Agency for Healthcare Research and Quality Website](#)

What makes a process "unreliable"?
21 responses

miscommunication
poor clarity on process
intimidation
inconsistency
unrealistic
unreplicable
expectations
people
delays
errors
inconsistent
teamwork
timing
effort
process
communication
small sample size

Word Cloud Exercise

What makes a process "unreliable"?

Reliable Processes

A reliable process requires a common understanding of:

1. The problem it aims to solve

2. The steps that need to happen

3. The places where errors are most likely to arise

Prerequisites

An equity-focused needs assessment requires:

1. A focused problem statement to define your objectives ([ECHO Phase 2 Session 3, August 2023](#))
2. Knowledge of what data sources are available or where data are needed to understand inequity ([ECHO Phase 2 Session 4, September 2023](#))
3. A population of focus
4. A timeframe for when you need to see results

Match the Tool to the Need

If our aim is to deeply understand the sources of error:

- A root cause analysis (RCA) can provide a systematic perspective on the sources of error (future session)

If our aim is to learn more about the sources of error quickly:

- Observation

- Process Map Review

- Fishbone Diagram

1. Observation

Key questions to consider

- Do you need to observe all or part of the process?
- At what time of the day or week can you learn the most?
- Who do you need to notify, ask for permission, or ask for help?
- Will you be silently observing or asking questions?
    - If you are asking questions, are they consistent?
- What will the outputs of your observation be, and how will you communicate them?

Adapted from Patient Care Experience Observation Exercise, Institute for Healthcare Improvement Website

Poll: Observation

How often do you observe front-line processes as part of your regular work?

- ○ Regularly
- ○ Sometimes
- ○ Infrequently
- ○ Never

Discussion: Observation

How do you (or how would you) observe front-line processes as part of your regular work?

2. Process Maps

- Visual representation of all the steps involved in a workflow for any activity
- Shows the inputs, actions and outputs of a process in a clear, step-by-step fashion
- Deeper review: ECHO Phase 1 Session 8, February 2022
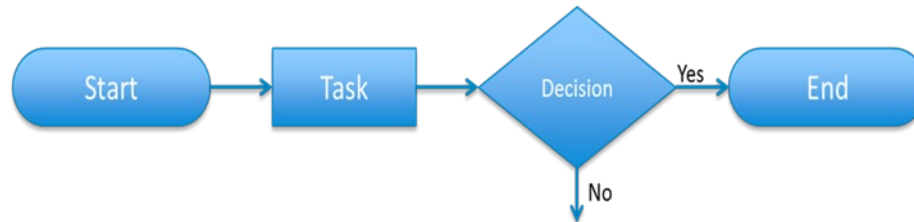
2. Process Map Review

For each step in your process, ask five users of that process:

- Who does it?
- When should it be done?
- Where is it done?
- How is it done?
- What is needed to do it?

(+1 Why is this necessary?)

Discussion: Process Review

You just found out that nobody agrees on how a step in your process should be carried out.

What would you do next?

2. Process Map Follow-up

If more than one person cannot answer a question accurately

- This is not a reliable process

- Develop a plan to fix one attribute at a time

- Use the RCA technique to learn more

- Reinforce why the process is important
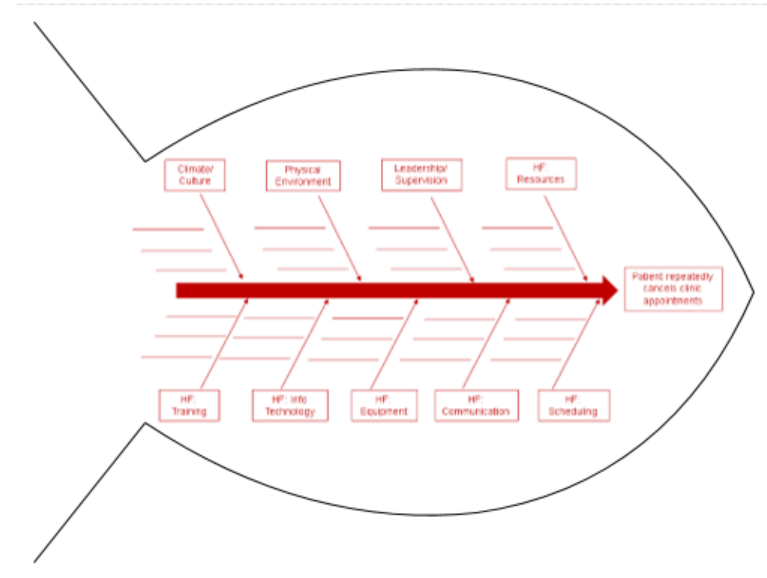
- Don't rely too heavily on training

3. Fishbone Diagram

- Also called a Cause-And-Effect diagram

- Used to generate a list of potential causes (aka "differential diagnosis") for the problem (aka "chief complaint") statement

- Prompts you to organize your brainstorming session into common categories of system error, not an individual's decision-making

- Deeper review: ECHO Phase 1 Session 9, March 2022

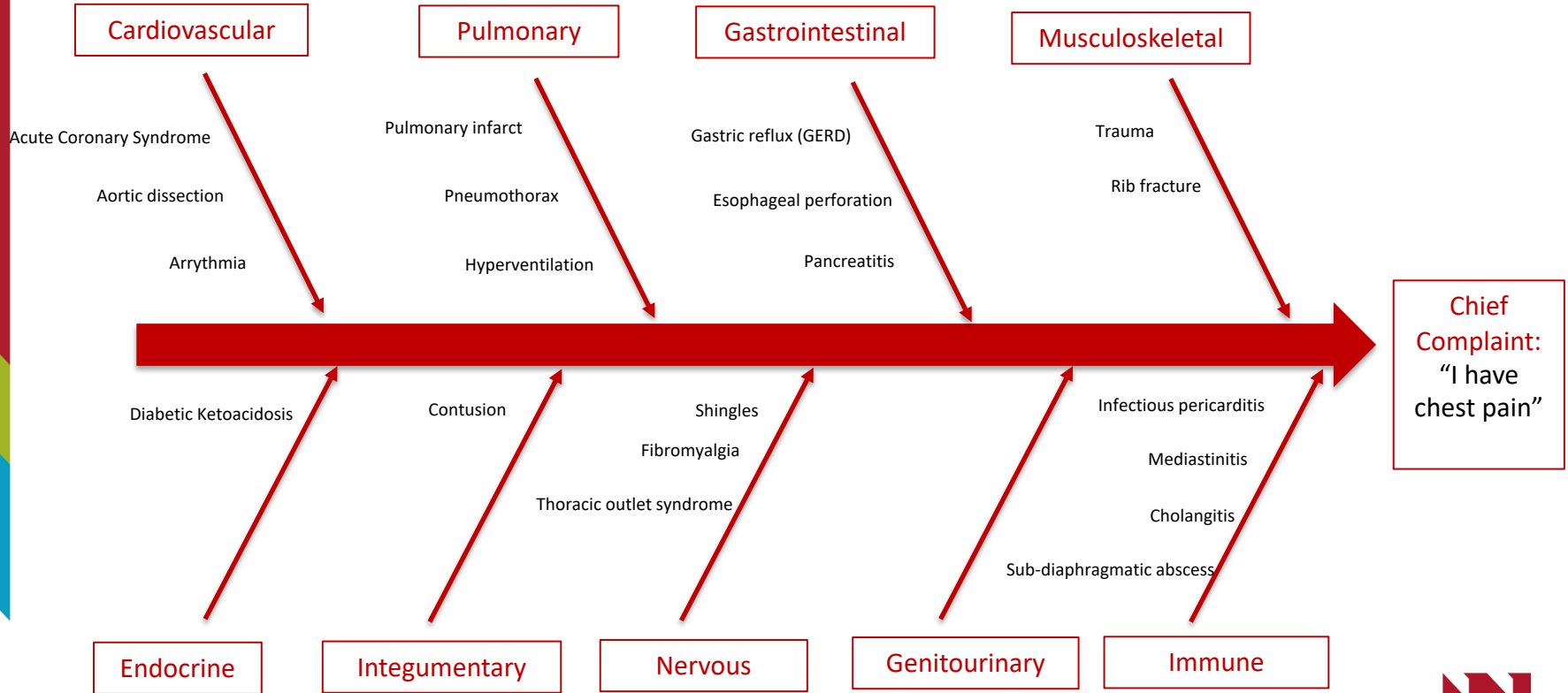# 3. Fishbone Diagram Overview

- Head: Problem statement

- Ribs: The standard categories of Root Causes with both primary and secondary causes
  - Primary cause: Leads directly to the outcome
  - Secondary cause: Leads to primary cause, but does not directly lead to the end effect

- Each industry has different buckets that are standardized for grouping the causes

3. Example - Human Systems

Cardiovascular

Pulmonary

Gastrointestinal

Musculoskeletal

Acute Coronary Syndrome

Pulmonary infarct

Gastric reflux (GERD)

Trauma

Aortic dissection

Pneumothorax

Esophageal perforation

Rib fracture

Arrythmia

Hyperventilation

Pancreatitis

Chief Complaint: "I have chest pain"

Diabetic Ketoacidosis

Contusion

Shingles

Infectious pericarditis

Fibromyalgia

Mediastinitis

Thoracic outlet syndrome

Cholangitis

Sub-diaphragmatic abscess

Endocrine

Integumentary

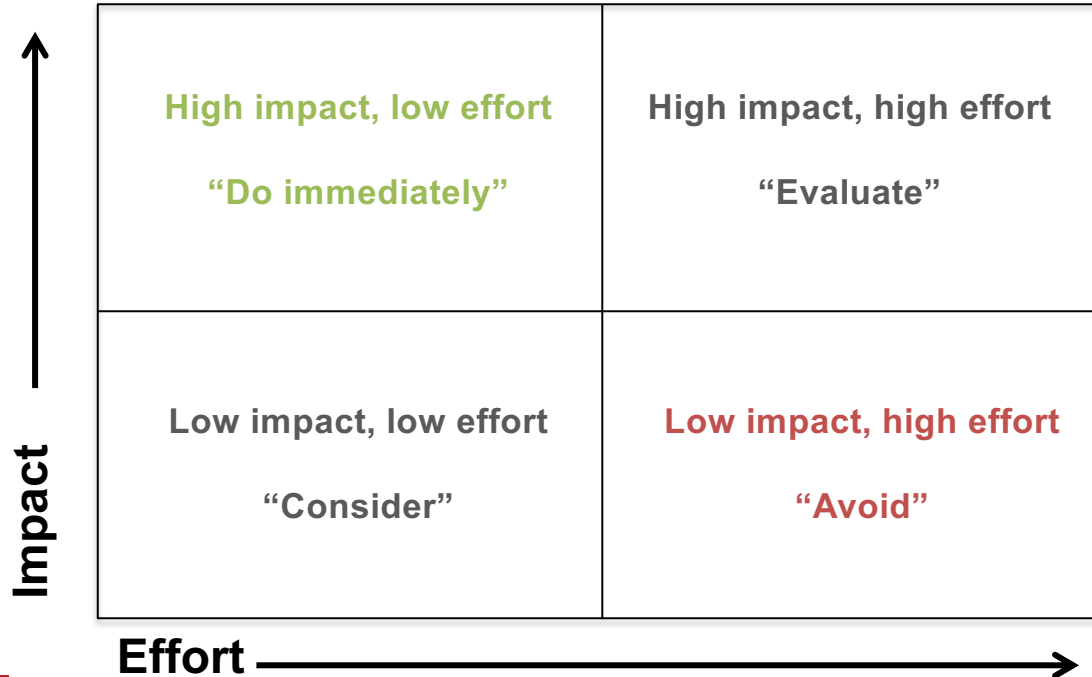**Nervous**

Genitourinary

Immune

Evaluating Potential Solutions

Always ask about:

1. The impact/benefit of each solution for your target population

2. The level of effort (time and money) required for each solution

3. The disparity that will be addressed, and hopefully improved, by this solution

Impact Effort Matrix

High impact, low effort

"Do immediately"

High impact, high effort

"Evaluate"

Low impact, low effort

"Consider"

Low impact, high effort

"Avoid"

Impact

Effort

WHEEL OF POWER/PRIVILEGE

Adapted from ccrweb.ca

Deeper review:

- [ECHO Phase 2 Session 2 (July 2023)](#)

Evaluating Potential Solutions

Consider also asking about:

1. The probability of achieving impact/benefit within your time frame

2. The implications of choosing this solution (cultural, political, etc.)

3. How this solution would position you for future tests of change

Case Discussion

Ground Rules

1. Be present & turn on your videos
2. Make Space, Take Space
3. ELMO: Enough Let's Move On
4. Take the lessons, leave the details
5. Assume positive intent
6. Be open to learning
7. Building, not selling
8. Yes/and, both/and

Discussion: Problem Statements

Our patients don't understand our COVID-19 guidance because they don't speak English.

How could you improve this problem statement?

Discussion: Data and Data Sources

Our patients don't understand our COVID-19 guidance because they don't speak English.

What data would help you to refine this problem statement?

Where might you go for these data?

Discussion:
Boiling the Ocean

We want to provide and distribute updated guidance on COVID-19 boosters in the ten most commonly spoken languages in our region.

What would you ask to sharpen this focus?

Prerequisites

An equity-focused needs assessment requires:

1.   A focused problem statement to define your objectives ([ECHO Phase 2 Session 3, August 2023](#))
2.   Knowledge of what data sources are available or where data are needed to understand inequity ([ECHO Phase 2 Session 4, September 2023](#))
3.   A population of focus
4.   A timeframe for when you need to see results

Wrap-up

What can you do this month?

- Observe or review a front-line process in your organization that is relevant to your health equity goals.

- Share what you have learned in our next session.

Our Follow-up

You will receive:

- Today's presentation
- A one-pager with key-takeaways
- Relevant supporting resources
- Next session's agenda and information
- Links to priority session recordings from Phase 1

Session 6: November 15

Having Better Conversations about Change

1. Articulate the importance of identifying and accepting ambivalence to change.

2. Identify resistance to change in case examples.

3. Practice strategies for managing resistance to change in the context of health equity.

Thank you!