

ACHE CHAPTER PANEL DISCUSSION TEMPLATE

#IP1: In-Person Learning Environment

For ACHE In-Person Education Credits

Equity of Care

Length: 1.5 hours

Target Audience: Mid- to- senior-level healthcare executives, including human resources professionals; clinical and administrative/operational leaders.

Description: Quality of care should not vary based on the patients' socioeconomic, racial, ethnic, gender, or geographic background. It is known however, that there is a healthcare divide in the U.S. especially in vulnerable populations including: those lacking health insurance (or are underfunded), low-income families, racial and ethnic minorities, and LGBTQ+ populations. The Affordable Care Act aimed to address access and equity of care issues by expanding health insurance coverage. Deficits in access to care change the way healthcare is delivered and financed.

Equity of care is a core principle of the healthcare management profession and is also an ethical and business imperative. Healthcare organizations must ensure their staff is educated on disparities to appropriately address the needs of patients from diverse cultural and economic backgrounds to provide equitable high-quality care to all. It has been shown that patient-centered care improves clinical outcomes and patient satisfaction while reducing medical errors and costs. Eliminating healthcare disparities provides a strategic component to ensure organizational excellence and long-term financial viability.

Faculty: *Each session should feature a moderator plus two to three panelists.*

Moderator: The Moderator must be a healthcare executive with experience with equity of care and human rights issues.

Panelists: Panelists should be executives or clinicians with experience in evaluating and executing on care access issues within their own or across an organization's care delivery system.

Interactivity: *All sessions must feature a minimum of 10 minutes of dedicated audience Q&A time at the end of the session. Additional small-group breakouts or discussions are optional but encouraged.*

Presentation: *An optional presentation template has been included for use if the Chapter sees fit. If used, the presentation should include required slides as designated in the template, and no more than 3 additional content slides.*

Questions for Discussion:

- What methods are your organization using to strengthen care delivery to vulnerable populations?
- What educational offerings has your organization provided your staff to develop skills and cultural competency to provide quality care to patients of diverse backgrounds?
- What policies have been developed to address gaps in access to and outcomes from care?
- What steps has your organization taken to expand leadership opportunities for ethnic minorities in health services management?
- Considering the pandemic, what has changed or been identified as a need to change within your organization to improve access to care?
- How can healthcare leaders set the tone in their hospitals and health systems to prioritize health equity?
- What are some of the biggest barriers that you see impacting access to equitable care in today's healthcare environment?
- Inequities in healthcare outcomes are interconnected with so many other challenges, including food insecurity, housing instability and homelessness, and unemployment. How can hospitals and health systems take a wholistic approach to improving equity?
- There is a lot of talk around data-driven decision-making with health equity. At the same time, there are disparate viewpoints on how to measure impact in this space. How do we move forward in a meaningful way?
- Addressing the numerous amount and depth of health inequities is an extraordinarily large task—what advice would you give to healthcare executives on what they can do tomorrow, this year, and over the next five years to make real progress towards this goal?

Materials for Distribution:

Brooks-Williams, D. (Winter 2022). An Effective Response to Healthcare Disparities

Begins With a Strategic Plan. *Frontiers of Health Services Management*. 39(2):27-31.

Finkel, E. (March/April 2023). Equity Is Essential to Patient Safety. *Healthcare Executive*.

Quirk, A. (Summer 2023). How An Established Health System Ventures Forth: Ochsner Invests in the Future. *Frontiers of Health Services Management*. 39(4):20-24.

Wagner, K. (March/April 2022). Health Equity as a Patient Safety Imperative. *Healthcare Executive*.

Wagner, K. (July/August 2023). "Making Progress on Health Equity, One Community at a Time." *Healthcare Executive*.

Walsh, K. (Winter 2022). Equity Rx: Boston Medical Center's Work to Accelerate Racial Health Justice. *Frontiers of Health Services Management*. 39(2): 4-16.

Additional Resources:

<https://www.ache.org/about-ache/our-story/diversity-and-inclusion/diversity-resources>

<https://equity.aha.org/>

<https://www.commonwealthfund.org/publications/scorecard/2021/nov/achieving-racial-ethnic-equity-us-health-care-state-performance>

<https://www2.deloitte.com/us/en/pages/life-sciences-and-health-care/articles/free-public-health-equity-data.html>