



# Health Equity Council at UCSF Health: FY21 Health Equity Inventory Session Summary

January 7th, 2021

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# Section 1 – Background

## What is the Health Equity Council?

- A committee established in 2018 at UCSF Health, based on recommendations from the School of Medicine’s Differences Matter Clinical Health Equity Action group.
- The committee is sponsored by Dr. Josh Adler and uses a medical staff committee reporting structure to Quality Improvement Executive Committee, which then tiers to the Executive Medical Board.
- The committee focuses on embedding health equity as an operational and strategic priority for UCSF Health through the following workstreams:
  - Increasing awareness of the importance of health equity and building a culture of equity
  - Developing increased capacity to better identify disparities through data and analytics
  - Driving disparity improvement in clinical outcomes, patient experience, and access
  - Integrating health equity as a component of Vision 2025, our health system’s five-year strategic plan
- The Health Equity Council works in concert with equity councils: UCSF Benioff Children’s Hospitals Diversity, Equity, and Inclusion Council (BCH DEI), Zuckerberg San Francisco General’s Equity Council, and San Francisco VA Equity Council.

## What was the purpose of the FY21 UCSF Health Equity Inventory Session?

- Share the range and status of major initiatives across UCSF that impact the pursuit of health equity at UCSF Health.
- Enable the organization to support critical alignment of the diverse health equity efforts across the enterprise to drive collective impact and more effectively advance health equity at UCSF Health.

## What methods were used to complete the inventory?

- A Smartsheet (online collaborative tool for work management) was used to collect descriptive submissions of initiatives impacting health care equity at UCSF Health.
- The scope of the project included health system leadership driven initiatives at the executive, director and vice president levels of the organization.
- This inventory does not yet include departmental or unit level initiatives.

- The submissions were categorized by the following domains of health equity:
  - Access
  - Clinical Outcomes
  - Culture/Awareness and People Development
  - Environment, Safety, and Policy
  - Language
  - Patient Experience and Engagement
  - Race in Medicine
  - Social Determinants of Health and Community Engagement

What is the purpose of this document?

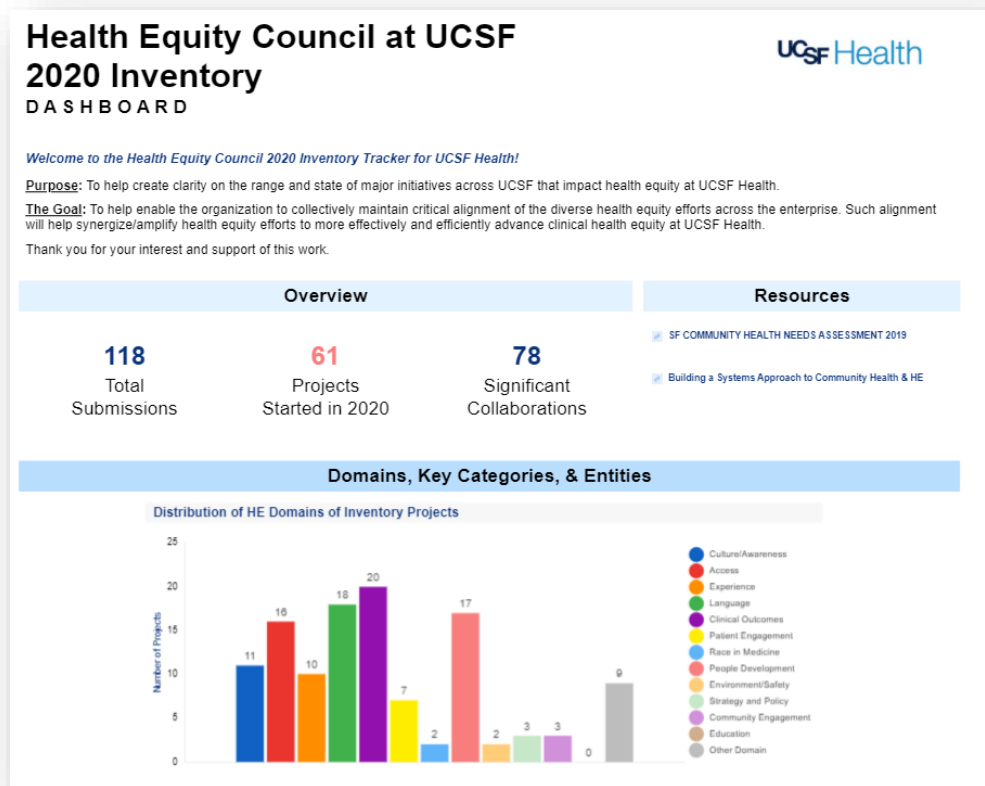
- Provide a summary report of the major findings of the inaugural UCSF Health Equity Inventory Session for broader dissemination and ongoing dialogue.

## Section 2 – Submission Highlights

Explore all of our [Inventory Submissions](#).

Submitted by	Project	Project Status	Health Equity Domain	Health Equity Domain_Final
<b>Health Equity Domain_Final</b>				
<b>Access</b>				
1 Weston Fisher	Increase equitable access to care for the department of psychiatry and behavioral sciences at UCSF Health.	Not Started	Equitable Health Care – Access	Access
2 Leah Karliner	Addressing the growing COVID telehealth digital divide: a pilot program to provide technology and digital literacy training to elderly patients	Not Started	Equitable Health Care – Access	Access
3 Diana Vaughn (on behalf of Susan Smith for A	Understand access metrics by race and ethnicity. Report monthly on two access metrics: referrals scheduled in 0-5 calendar days and new	In Process	Equitable Health Care – Access	Access
4 Megumi Okumura	Pediatric Chronic Illness Center: Transition Work Group	In Process	Equitable Health Care – Access	Access
5 Sara Buckelew	UCSF Adolescent and Young Adult PRIDE Clinic	Not Started	Equitable Health Care – Experience	Access
6 Susanne Martin Herz	Evaluation of Care Coordination needs following Developmental-Behavioral Assessment at Benioff Children's Hospital Oakland	Not Started	Equitable Health Care – Access	Access
7 Honora Burnett	Are We Reaching Everyone? Patient Visits to an Academic Pediatric Primary Care Site during the COVID-19 pandemic.	In Process	Equitable Health Care – Access	Access
8 Meredith Russell, MSN, AC-CNP	Increasing Access to Care for Transgender/Gender Diverse Youth Using Telehealth: A Quality Improvement Project	In Process	Equitable Health Care – Access	Access
9 Sara Murray	Health Equity Dashboards and Data Visualization	In Process	Equitable Health Care – Access	Access
<b>Health Equity Domain_Final</b>				
<b>Clinical Outcomes</b>				
10 Gina Intinarelli	Office of Population Health - Health Equity Workgroups	In Process	Equitable Health Care – Clinical Outcomes	Clinical Outcomes
11 Sarah Lahidji (on behalf of HEC Leadership T	Disparity Improvement Taskforce	In Process	Equitable Health Care – Clinical Outcomes	Clinical Outcomes
12 Sarah Lahidji (on behalf of HEC Leadership T	Data Equity Taskforce	In Process	Equitable Health Care – Clinical Outcomes	Clinical Outcomes
13 Sarah Lahidji on Behalf of Matt Wolden	DoQS and Equity Integration	In Process	Equitable Health Care – Clinical Outcomes	Clinical Outcomes

## Explore our [Inventory Dashboard](#).



## Dashboard Highlights

- More than 100 submissions received
- Breadth of project distribution across health equity domains
- Large jump in in 2020 in number of projects initiated

## Opportunities

- Increase alignment to drive increased effectiveness
- The success of each health equity domain is dependent on the success of the others
- Cross-domain collaboration is critical for success
- Further work needed to request inventory submissions from a broader audience to create a more complete picture of efforts that impact the pursuit of health equity at UCSF Health.

## How can the Health Equity Council better support those doing the work?

- **Make connections** between groups with overlapping efforts
- **Help to communicate internally and externally** about the value and current state of this work
- **Share inventory results across UCSF Health**
- **Provide content expertise and consultation**
- **Advocate for health system wide adoption** of best practices
- **Influence prioritization** of equity related efforts for strategic alignment
- **Influence resourcing** to support achievement of equity goals

## Section 3 – Domain Submission Summary

*Thanks to the Subject Matter Experts that provided the following 2-minute report outs on each equity domain.*

- **Access** – Susan Smith, MD and Diana Vaughn
  - **Clinical Outcomes** – Sarah Lahidji
  - **Culture/Awareness and People Development** – Nancy Duranteau
  - **Environment, Safety, and Policy** – Rita Ogden
  - **Language** – Susan Pappas
  - **Patient Engagement and Experience** – Jason Phillips
  - **Race in Medicine** – Kirsten Bibbins-Domingo, MD
  - **Social Determinants of Health (SDoH) and Community Engagement** – Wylie Liu
- 
- **Access** projects include: improving access for targeted communities, such as youth seeking gender affirming medications or Black and Latinx patient pursuing behavioral health needs, and building access related dashboards
  - **Clinical outcomes** projects include: increasing availability and integration of equity-related variables into analytic tools (UCSF-derived race/ethnicity, language, sexual orientation, gender identity, financial class, etc.), activating disparity improvement efforts spotlighted on Enterprise True North scorecard (COVID, ACP, Flu, HTN), increasing integration of equity into existing Quality and Safety infrastructure (True North, safety reporting, etc.), increasing competency to do equity specific analysis and improvement work, and expanding connections (specifically, access, patient experience, SDoH, and community engagement efforts)
  - **Culture and Awareness and People Development** projects include: building a culture of equity through programs like: BCH DEI’s website, heritage month celebrations, Food for

Thought sessions, and UCSF's racial equity accountability challenge, and expanding awareness through Learning and Organizational Development's efforts to build a strength-based organization, training initiatives for faculty and staff, and roll out of the mandatory UCSF Foundations of DEI training

- **Environment, Safety, and Policy** projects include: implementing the de-escalation effort at Mission Bay and Parnassus (similar to an expanded Behavioral Emergency Response Team model), spreading training for employees around using de-escalation, and partnering with the UCSF Safety Task Force to collect data, change the security uniform, and increase training for officers
- **Language** projects include: expanding language accessibility in communication channels (particularly website and patient education materials), providing translation and interpreter services, and managing bilingual certification program
- **Patient Experience and Engagement** projects include: developing an equity-focused Patient and Family Advisory Council and a system for online patient engagement as advisors, analyzing patient surveys and patient complaints by equity-related variables, and completing the annual Health Equity Index survey (an evaluation tool for the LGBTQ+ community)
- **Race in Medicine** projects include: defining when to use race/ethnicity in clinical algorithms, hosting a symposium to discuss race-conscious medicine ([Racism and Race: The Use of Race in Medicine and Implications for Health Equity Event Series](#)), and providing research examples of how we evaluate the ethics and clinical purpose of race in medicine
- **Social Determinants of Health (SDoH) and Community Engagement** projects: represent a snapshot of the many efforts that are detailed in the School of Medicine's Strategic Plan and these efforts focus across Anchor Institution ([UCSF Anchor Institution Initiative Report](#)), community benefit, and engagement strategies

## Section 4 – Engagement

- **Question:** Are you satisfied with the number and breadth of submissions?
- **Answer:** We found a fair number of participants were satisfied with the number and breadth of submissions. We want to amplify the voices of numerous participants that named that the need far outweighs the number of projects and speed of work and that acceleration is required.

- One word to describe how you feel after seeing the result of our inventory assessment.





# Section 5 – Best Practices and Themes Identified in Discussion and Breakouts

## Walk the Talk

- We must live our PRIDE values among one another if we hope to provide this to our patients.
- What are our stated values? What are our lived values as seen through our daily actions?
- Do we demonstrate organizational support, recognition, and value for those that do this work?
- Do we have an organizational and funding structure that incentivizes collaboration?

## Centering Patient and Family Voices

- Pay attention to who is at the table. What does this say about whom we value?
- Nothing for us without us.
- Support teams in bringing in the voice of patients, families, and communities earlier.
- Focus on what patients, families, and communities tell us is their biggest challenge.

## Strategy

- Integrate equity into our core operations instead of separating it out as a siloed initiative or program to ensure sustainability and a broader uptake of the work.
- The train has left the station. Equity efforts will continue to amplify – we as a health system must determine how we will be engaged.
- Don't get stuck in analysis paralysis. Move to action for our patients and their families and the broader community. Value those with operational expertise.

## Spread and Sustainability

- How do we broaden engagement in equity work among everyone working at UCSF Health? How do we connect equity to an individual's daily work?
- Every initiative should be evaluated with an equity impact assessment.
- Ensure that the institution rewards collaboration and has organizational structures that enable system-wide spread.
- Make consistent and aligned progress across both the campus and the health system

# Section 6 – Cross-Cutting Recommendations for UCSF Identified in Submissions, Discussion, and Breakouts

- **UCSF Health should stay closely aligned to our institutional equity roadmap to dismantle patterns of racism and injustice.**
  - UCSF Health to outline how this strategy will tier within our clinical mission, particularly across our entities and equity councils, and how alignment will be maintained.
  - Leaders need to walk the talk by continually sharing the roadmap, restating our future state, and making ongoing commitments to the work.
- **Further integrate our equity strategy into incentive goals, Enterprise True North, and Vision 2025 to demonstrate clear strategic prioritization.**
  - Activate annual planning for incentive goals and True North earlier in the calendar year (approximately February) to allow for sufficient equity-related discussions.
  - Ensure goals are motivating across clinical services.
  - Ensure we can support the stated goals, such as sufficient analytic capacity and strategic focus to enable success, to ensure action and combat burnout.
  - Be able to state how each Vision 2025 pillar supports our work to become an anti-racist, equity promoting organization.
- **Demonstrate resourcing and funding commitment to this work.**
  - Establish a transparent system to escalate resourcing and funding needs.
  - Document how resourcing and funding decisions are made.
  - Compensate those doing the work as opposed to treating as a ‘passion project’.
  - Identify clear governance and accountability structures to support this work and acknowledge that current needs from the Health Equity Council outweigh that of a committee structure.
  - Resourcing and funding should be given to a wider-range of individuals to support sustainability, growth opportunities, and succession planning.
  - Share a compiled list of resources for DEIB equity-related funding sources, such as available grants.

- **Clearly and consistently communicate about health equity topics and activities at UCSF Health to internal audiences (learners, staff, and faculty) and external audiences (patients, families, and communities) to ensure a broader awareness and visibility of ongoing efforts.**
- **Use power and privilege to advocate for increased awareness of existing equity needs and efforts.**
- **Facilitate more ongoing, equity-focused learning environments such as a UCSF Health forum for operational leaders seeking to support anti-racist and equity-promoting practices in their clinical or functional areas.**
- **Share the results of the UCSF Health Equity Inventory for FY21 more broadly and support ongoing additions to the content.**

## Section 7 – Spotlighting Recommendations for UCSF In Language Access, Patient Engagement, and Our People as Identified in Submissions, Discussion, and Breakouts

### Language Access

- Prioritize Top 10 Strategies for Limited English Proficiency<sup>1</sup>
- Prioritize multilingual signage across our campuses for wayfinding and to support a more welcoming environment
- Expand translational and interpreting services to serve multiple modes of communication
  - Patient-facing websites
  - Real time translation for patient communications

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<sup>1</sup> Top 10 Strategies for Limited English Proficiency is available in the resources section of the Inventory Dashboard

- After visit summary translations
- Messages in MyChart
- Phone trees
- Increase awareness of existing resources, such as: tip sheets for working with interpreters and accessing on-demand interpreters for video visits

## Patient Engagement

- Support efforts to increase diversity among Patient Family and Advisory Councils in addition to creating systems for focus groups and one to one interviewing to gather patient voice
- Advocate for funding to overcome common barriers to participation in advisory councils, such as reimbursement for time, cost associated with transportation, need for childcare support, language access, etc.
- Facilitate strong community ties to increase likelihood of patient engagement across a multitude of communities
- Shift culture to one that centers voice in problem identification and development of countermeasures

## People Development

- Advocate for a common ADA training across UCSF Health managers, such as an expansion of the BCH sponsored 90-minute training
- Develop a coordinated, system-wide strategy of mentorship that amplifies and expands existing programming, such as pipeline development from Historically Black Colleges or Universities and existing Office of Diversity and Outreach programming focused on BIPOC communities
- Facilitate greater awareness among hiring managers of equity focused programs, such as Advancing Black and Latinx Career Pathways, efforts to accelerate intentionality around equity in pursuing workforce planning
- Advocate for a protected time model across UCSF Health for faculty and staff in completing anti-racism curriculum training
- Identify roles and functions within UCSF Health that are prime opportunities for career pathing through programs like EXCEL Alumni Network Development Program through LinkedIn Learning Program
- Facilitate connection to operational leaders around UCSF DEI Foundational training to drive completion and understand feedback

## Section 8 – Wrap-Up and Next Steps

What is one word to describe how you feel after this session?



### Your Next Steps:

- Keep the lessons from the session top of mind by printing out Best Practices and Themes (Page 8) for your work space. Continue to reflect and go back to these tips.
- Continue the conversation. Reach out to other participants.<sup>2</sup>
- Spread awareness. Share this report with others.

### Health Equity Council Leadership Team's Next Steps:

- Launched the Disparity Improvement Taskforce to **create a learning community** for those working on disparity improvement in clinical outcomes as spotlighted on the Enterprise True North FY21.
- Partnering with our operational partners in video visits to assemble an **improvement group focused on emerging disparities in virtual access.**

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<sup>2</sup> See Appendix for a list of connections identified during breakout report outs as high-value follow-ups.

**Increasing awareness** of HEC efforts through participation in the UCSF Anti-Racism Town Hall focused on the health system on March 25<sup>th</sup>, 2021.

- **Advancing language access** through the HEC-sponsored COVID Equity Workgroup that has accelerated access of our COVID website in Spanish and is supporting vaccine PSAs in various languages.
- **Sharing this report with our leaders**, including:
  - Health Equity Council's Executive Sponsor, Dr. Josh Adler
  - UCSF Health's Senior Leadership Committee
  - Chancellor's Anti-Racism Committee
- **Continue inventory report maintenance** through a quarterly push to collect further initiatives and updates to the dashboard that are available on-demand for users.
- **Currently developing a recommendation for quality-related equity priorities in FY22** using this report to influence priority areas, such as:
  - Quality Improvement Expertise
    - Cross-cutting, centralized initiatives
    - Support localized service-line specific initiatives
    - Drive health equity competency in improvement teams more broadly
  - Analytics Expertise
    - Consultation to localized service-line specific initiatives
    - Driving health equity competency in analytic teams more broadly
- **Ongoing commitment to our Council's existing efforts** to:
  - Increase awareness of the importance of health equity and building a culture of equity
  - Develop increased capacity to better identify disparities through data and analytics
  - Drive disparity improvement in clinical outcomes, experience, and access
  - Integrate health equity as a component of Vision 2025, our health system's five-year strategic plan

# Appendix

List of connections identified during breakout report outs as high-value follow-ups:

- Language and Access and Telehealth
- Language and Center for Digital Health Innovation
- Language and Patient Experience & Engagement
- Language and Culture and Awareness
- Language and APeX
- Access and Patient Experience & Engagement and Clinical Outcomes
- Clinical Outcomes and SDoH & Community Engagement
- Clinical Outcomes and Environment, Safety, & Policy
- Clinical Outcomes and Race in Medicine
- Culture and Awareness & People Development and SDoH & Community Engagement
- Environment, Safety, & Policy and Culture and Awareness & People Development
- Environment, Safety, & Policy and Patient Experience & Engagement

## Thanks & Acknowledgments

Many thanks to:

- All who participated in the Inaugural Health Equity Council at UCSF Health Equity Inventory Session. It was truly an interactive, collegial, inspiring, and productive session.
- The inventory participants and teams for all the submission and incredible work being done to advance diversity, equity, inclusion, and belonging in the service of the care of our patients and community.
- Lei Choi, Emily Ko, and the rest of the Continuous Improvement team who supported planning and facilitation of the Inventory Session.
- All of you doing the great work of advancing health equity at UCSF Health – those captured in the FY21 Inventory and the innumerable others occurring across our institution and campuses.



**THANK YOU!**

**Together, we will eliminate health care disparities at UCSF Health.**

*Please commit to advancing diversity, equity, and inclusion in healthcare by keeping Health Equity in Focus and participating in the [“Health Equity in Focus” pledge campaign](#) to EDUCATE, ADVOCATE, and ACT on these issues!*