

ResearchBrief

JANUARY 2007

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Addressing Disparities and Serving Diverse Patient Populations

The National Association of Public Hospitals and Health Systems (NAPH) represents more than 100 major public hospitals and health systems across the country. Although NAPH members make up only two percent of the nation's acute care hospitals, they deliver 25 percent of the uncompensated care provided by U.S. hospitals. NAPH members provide more than 35 million ambulatory care visits each year—averaging more than 400,000 visits per member annually. NAPH members also provide high volumes of inpatient services, averaging more than 18,000 discharges per member annually.

As part of their mission, NAPH members care for an extremely diverse patient population, many of whom are foreign-born with limited English proficiency. Consequently, NAPH members are leaders in efforts to reduce disparities in health. To complement member efforts to eliminate health care disparities, NAPH and the National Public Health and Hospital Institute (NPHHI) support a number of research projects, educational

programs and activities focused on cultural competency, language access, health care quality, and related efforts to eradicate health disparities.

Quality and performance improvement will be a major focus for NAPH and NPHHI over the next several years. NPHHI recently received support from Kaiser Permanente's Community Benefits Program to plan research and educational activities that will assist member efforts to improve performance in safety net hospitals. Many of the activities described in this *Research Brief* will develop within the framework of NAPH's quality improvement agenda for 2007 and beyond.

Research

NPHHI received a \$250,000 grant from the U.S. Department of Health and Human Services' Office of Minority Health to work with the Institute of Healthcare Improvement (IHI) to identify a "change package" for eliminating health care disparities. IHI has developed a methodology to formulate replicable quality improve-

ment practices. NPHHI and IHI will identify a small initial group of hospital leaders, senior practitioners, and researchers from around the country to participate in a one-day meeting on reducing health disparities. The session will be held in the spring of 2007 and will frame appropriate goals for reducing specific disparities, identify interventions that have demonstrated improved outcomes, and construct a methodology for measuring the impact of these interventions.

The project's goal is to develop a strategy to enhance the way safety net hospitals and health systems across the country address health disparities. It will link the experience of safety net hospitals with the structure of the quality improvement process in applying tested concepts and practices to enhance care of racial and ethnic minorities. The initial steps of this initiative include collecting expert opinion and best practices at the one-day session, analyzing and synthesizing ideas, and developing an implementation plan for testing best practices in NAPH member organizations.

Conferences

The Fifth National Conference on Quality Health Care for Culturally Diverse Populations was held in Seattle in October 2006. NAPH

co-sponsored the conference and was represented on its national advisory committee. The theme of this year's conference was "Building the Link between Quality, Cultural Competence, and Disparities," and its objective was to identify and highlight leading work in the areas of health care quality, cultural competence and disparities reduction. Conference attendance has grown considerably each year, along with increased interest by experts in the field to present at this national conference. Of the 250 proposals submitted, only 39 were accepted for presentation. Over the years, this conference has become the leading national conference on quality health care for diverse populations and is distinguished by a number of elements:

- The ability to draw prominent health leaders to frame cultural competence in the context of national health issues:
- A highly interactive format that promotes learning, discussion and debate among cultural competence experts and participants from multiple disciplines and varied skill levels;
- Presentations that range in focus from intensive skills-building workshops to international perspectives on key implementation issues; and
- A diverse and committed base of financial and advisory support, including an active advisory committee that meets regularly to review advances in the field and recommend themes and topics for each conference.

NPHHI and several senior executives from NAPH member organizations participated in two panels at the October conference. First, NPHHI staff worked with the California Association of Public Hospitals' Safety Net Institute and their LEADing Change project on the panel, Leadership Insights: Framing and Integrating Cultural Competence into Strategic Priorities. The panel featured Lynda D. Curtis, MS, New York Health and Hospitals Corporation—Bellevue Hospital Center (New York, NY); Susan Murphy, MHA, Santa Clara Valley Medical Center (Santa Clara, CA); Johnese Spisso, RN, MPA, Harborview Medical Center (Seattle, WA); and Nancy Steiger, RN, MS, San Mateo Medical Center (San Mateo, CA). The second presentation, Designing Quality Improvement Strategies for Culturally Diverse Populations, was part of a panel with the National Initiative for Children's Healthcare Quality.

For more information on this series of national conferences, please visit www.diversityrx.org/ccconf/.

Advisory Panels

NAPH continues to take part in a number of national advisory panels and initiatives focused on quality of care to diverse patient populations. Our participation in these activities brings a safety net perspective to the development of regulatory standards, policies, legislation, and programs that focus on improving access and care for diverse patient populations.

AHA Institute for Diversity in Health Management

The American Hospital Association's Institute for Diversity in Health Management focuses on expanding health care leadership opportunities to reflect the diversity of communities served by our hospitals. Its mission is to increase the number of racial and ethnic minorities in health services administration and to improve opportunities for professionals already in the health care field. To accomplish this, the Institute has designed several initiatives to generate significant long-term results through educational programs, a summer enrichment internship, professional development opportunities, and leadership conferences.

NAPH is represented on the Institute by NAPH member Vincent H. Lee, Regional CEO, Hawaii Health System Corporation and member of the Institute's Board of Directors, and Edward Martinez, MS, NAPH Senior Consultant. For more information about the Institute, please call (800) 233-0996 or visit www.diversityconnection.org/.

American Medical Association (AMA) Institute on Ethics-Ethical Force Program

The AMA Ethical Force Program was initiated in 1997 to improve health care by advancing ethical behavior among all participants in the health care system. It is a collaborative research program directed by an oversight body of 21 leaders from organizations representing major stakeholders in the health care system.

Among other activities, the Ethical Force Program uses a standardized, consensus-building process to create self-assessment toolkits that are practical, inexpensive and ready-to-use. These toolkits are based on reports designed to help health care organizations evaluate internal climate and target quality improvement efforts in specific domains that are critical to ethical, high-quality health care. Ron Anderson, MD, CEO of the Parkland Health and Hospital System, also represents NAPH on the Ethical Force Program Oversight Body. The Ethical Force Program recently produced a consensus report, Improving Communication—Improving Care: How health care organizations can ensure effective, patient-centered communication with people from diverse populations. Some of the background source material for this report comes from NAPH/ NPHHI publications and research in which NAPH members are cited as having implemented promising practices in this area.

For more information on the work of the AMA Institute on Ethics-Ethical Force Program, please visit www.EthicalForce.org. Copies of Improving Communication—Improving Care: How health care organizations can ensure effective, patient-centered communication with people from diverse populations, are available at www.ama-assn.org/ama/pub/category/16245.html.

Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) Project: Hospitals, Language, and Culture: A Snapshot of the Nation

Initiated in January 2004, Hospitals, Language, and Culture: A Snapshot of the Nation (HLC) is a 2½ year research project funded by The California Endowment. It is designed to assess how hospitals across the nation provide health care to diverse populations. Through this initiative, JCAHO is exploring the challenges that hospitals face in caring for a multicultural patient base and how those challenges are being addressed. NAPH member, Sandral Hullet, MD, MPH, CEO and Medical Director, Cooper Green Hospital in Birmingham, AL, represented safety net organizations on the technical advisory panel for this project.

The focus of the HLC is to better understand the current state of practice, develop recommendations, and explore emerging activities that can be shared with the field and can be replicated. A new document outlining 2006 Joint Commission standards that support the provision of culturally and linguistically appropriate services and the 2006 Crosswalk of Joint Commission and Culturally and Linguistically Appropriate Services (CLAS) standards are now available on the HLC Web site at www.jointcommission.org/

HLC project staff has reported that 60 hospital site visits have been successfully completed, bringing the data collection phase to a close. Project staff is well into the data coding and To complement member efforts to eliminate health care disparities, NAPH and the NPHHI support a number of research projects, educational programs and initiatives focused on cultural competency, language access, health care quality and related efforts to eradicate health disparities.

analysis phase and look forward to sharing results with the public in 2007.

For more information, please visit the HLC project Web site at www.jointcommission.org/hlc.

Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) Initiative: Health Literacy and Patient Safety

The Joint Commission hosted a national symposium on health literacy and patient safety in June 2006. Information gained from the symposium will inform the content of a white paper to be released in 2007. NAPH participates on the symposium's planning committee and has committed to disseminate the findings and results of the meeting.

For more information on the JCAHO initiative, please visit www.jointcommission.org/
PublicPolicy/health_literacy.htm

National Language Access in Health Care (NLAHC) Coalition

NAPH, with support from counsel Powell Goldstein, LLP, has been an active member of the NLAHC coalition since its inception two years ago. The coalition, coordinated by the National Health Law Program and supported by The California Endowment, has worked to develop the Language Access in Health Care Statement of Principles.

This Statement of Principles springs from the work of numerous national organizations to develop an agenda to improve policies and funding for access to health care for individuals with limited-English proficiency. Participants in this effort included health care provider organizations, advocates, language companies, interpreters and interpreter organizations, and accrediting organizations. It is the intent of the coalition members that the Statement of Principles will be useful to health care organizations dealing with these issues in their respective state and local communities. NAPH is encouraging members to use these Principles in their work and disseminate them to others.

For more information on the work of this coalition and to access the *Language Access in Health Care Statement of Principles*, please visit www.healthlaw.org.