CARE TRANSFORMATION COLLABORATIVE RHODE ISLAND

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ADVANCING INTEGRATED HEALTHCARE

# Demographic Data Collection Pilot Opportunity

## HIT Steering Committee 3/16/23

*Care Transformation Collaborative of RI*

# Opportunity

The Rhode Island Department of Health (RIDOH) has been granted the Center for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities among Populations at High-Risk and Underserved, including Racial and Ethnic Minority Populations and Rural Communities Award.

As part of this grant, CDC has identified improving health outcomes with priority given to increasing and improving demographic data collection and reporting.

**Populations of focus:** Black, Indigenous, and  people of color (BIPOC), Groups effectively served in language other than English, veterans, people housing insecure, LGBTQ, people living with disability or in rural communities

# CDC Guidance

Important activities associated with this strategy include:

- **Build on plans:** for collecting and reporting timely, complete, representative and relevant data;
- **Educate:** providers, community partners and programs on the importance of data and how to collect it;
- **Disseminate:** health equity-related data and related materials tailored to be culturally and linguistically responsive;
- **Resources:** for collecting, analyzing, reporting and disseminating health equity-related data;
- **Resources:** for data infrastructure and workforce.

# Project Goals

**Goal 1 Primary care Focus**

Provide the primary care practice community with “Train the Trainer” funding and technical assistance to support their efforts at improving their ability to collect high quality accurate demographic data and report it effectively. This project will focus on disproportionally affected populations, with the aim of promoting health equity and addressing COVID-19 health disparities.

**Goal 2 State-wide Focus (pending funding)**

Provide opportunity for health plans/other interested parties to participate in a NCQA training program to support their efforts for achieving Healthy Equity recognition.

# Planning Committee Charter

## Improving Demographic Data Collection Planning Committee

### Goal

To increase capacity of primary care provider organizations to collect high quality data and report it effectively, with a focus on populations experiencing a disproportionate burden of COVID-19 infection including medically underserved, BIPOC (Black, indigenous and People of Color) community members, and people living in rural communities, groups that are more effectively served in a language other than English, veterans, people who are unhoused or housing insecure, the LGBTG+ community and people living with disability.

### Roles and Responsibilities

The committee assists the Executive Office of Health and Human Services and CTC-RI project management with planning and evaluating the activates that will be accomplished through the Care Transformation Collaborative of Rhode Island (CTC-RI) approved  Scope of Work. CTC-RI will report to and utilize the expertise of the Health Information Technology (HIT) Steering Committee to assure alignment with the state's health care transformation goals.

# Planning Committee Charter

## Specific Responsibilities

a. Providing input and expertise on demographic data collection work plan that assesses current state of demographic data collection capacity, identifies gaps, proposes technical assistance needs and policy and process improvements;
b. Reviewing and making recommendation on the design, implementation and evaluation of Train the Trainer program that seeks to build internal organization capacity through understanding baseline staff knowledge attitude and skills in collecting demographic data in a culturally sensitive ways, reporting and using data to recognize and address health disparities and identifying areas for improvement including staff education and training, utilization of technology to enhance self-reporting, data validation and improve performance;
c. Reviewing and making recommendations on the design, implementation and evaluation of Train the Trainer program that addresses the staff training needs;
d. Reviewing and making recommendations on other strategies based on funding availability

## Timeline

- Kick off meeting: March 29th
- Monthly meetings starting in May

# Project Plan: April 2023-May 2024

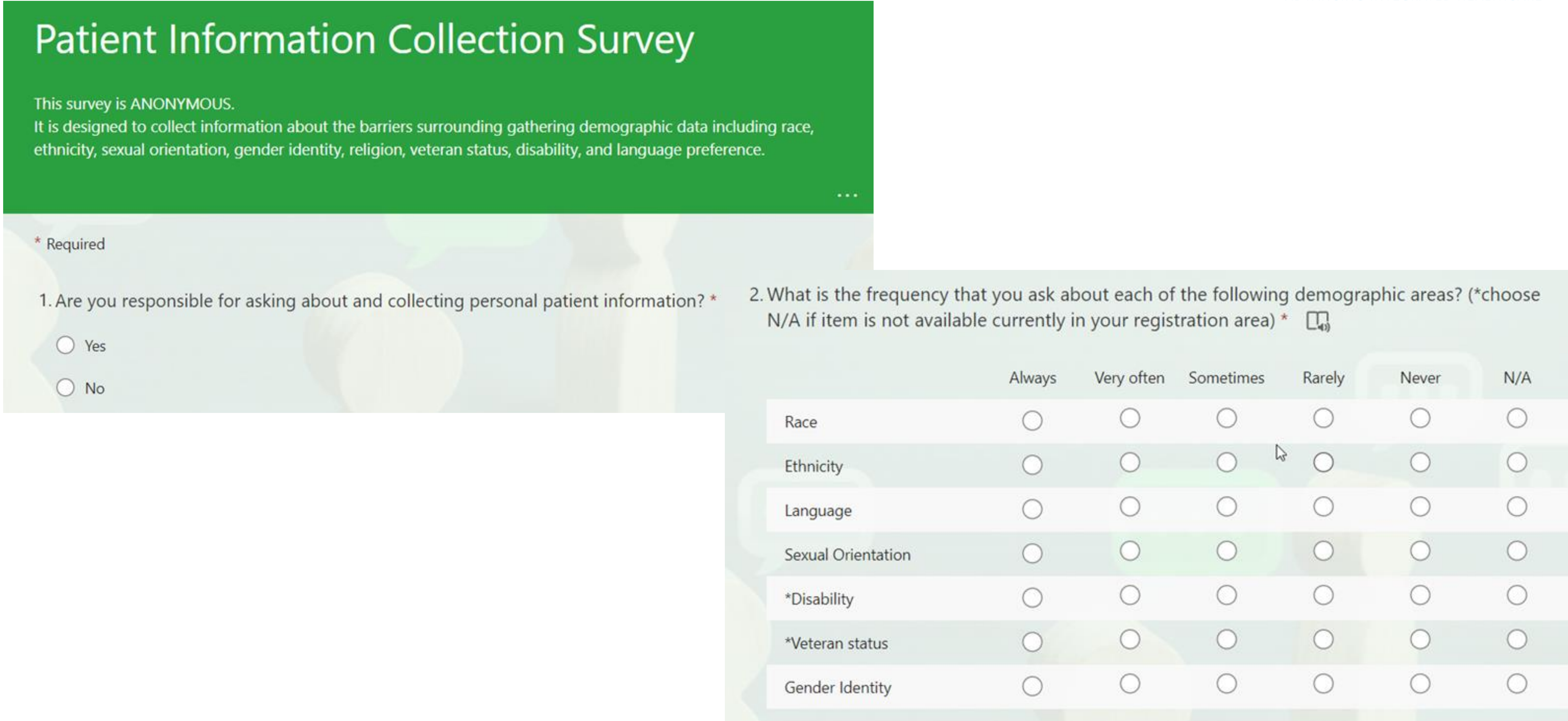
**Environmental Scan:**
Best Practice, Current/Anticipated Regulations, Present RI Demographic Data Performance

**Training:** Call for Applications using Train the Trainer strategy

- Baseline Demographic Data Collection Needs Assessment
- Training (Webinar series)
- Quality Improvement (pending availability of funding)
- NCQA Health Equity (pending availability of funding)

**Technical Enhancements** (pending availability of funding)

# Lifespan staff survey



## Patient Information Collection Survey

This survey is ANONYMOUS.
It is designed to collect information about the barriers surrounding gathering demographic data including race, ethnicity, sexual orientation, gender identity, religion, veteran status, disability, and language preference.

* Required

1. Are you responsible for asking about and collecting personal patient information? *

○ Yes

○ No

2. What is the frequency that you ask about each of the following demographic areas? (*choose N/A if item is not available currently in your registration area) *

| | Always | Very often | Sometimes | Rarely | Never | N/A |
|---|---|---|---|---|---|---|
| Race | ○ | ○ | ○ | ○ | ○ | ○ |
| Ethnicity | ○ | ○ | ○ | ○ | ○ | ○ |
| Language | ○ | ○ | ○ | ○ | ○ | ○ |
| Sexual Orientation | ○ | ○ | ○ | ○ | ○ | ○ |
| *Disability | ○ | ○ | ○ | ○ | ○ | ○ |
| *Veteran status | ○ | ○ | ○ | ○ | ○ | ○ |
| Gender Identity | ○ | ○ | ○ | ○ | ○ | ○ |

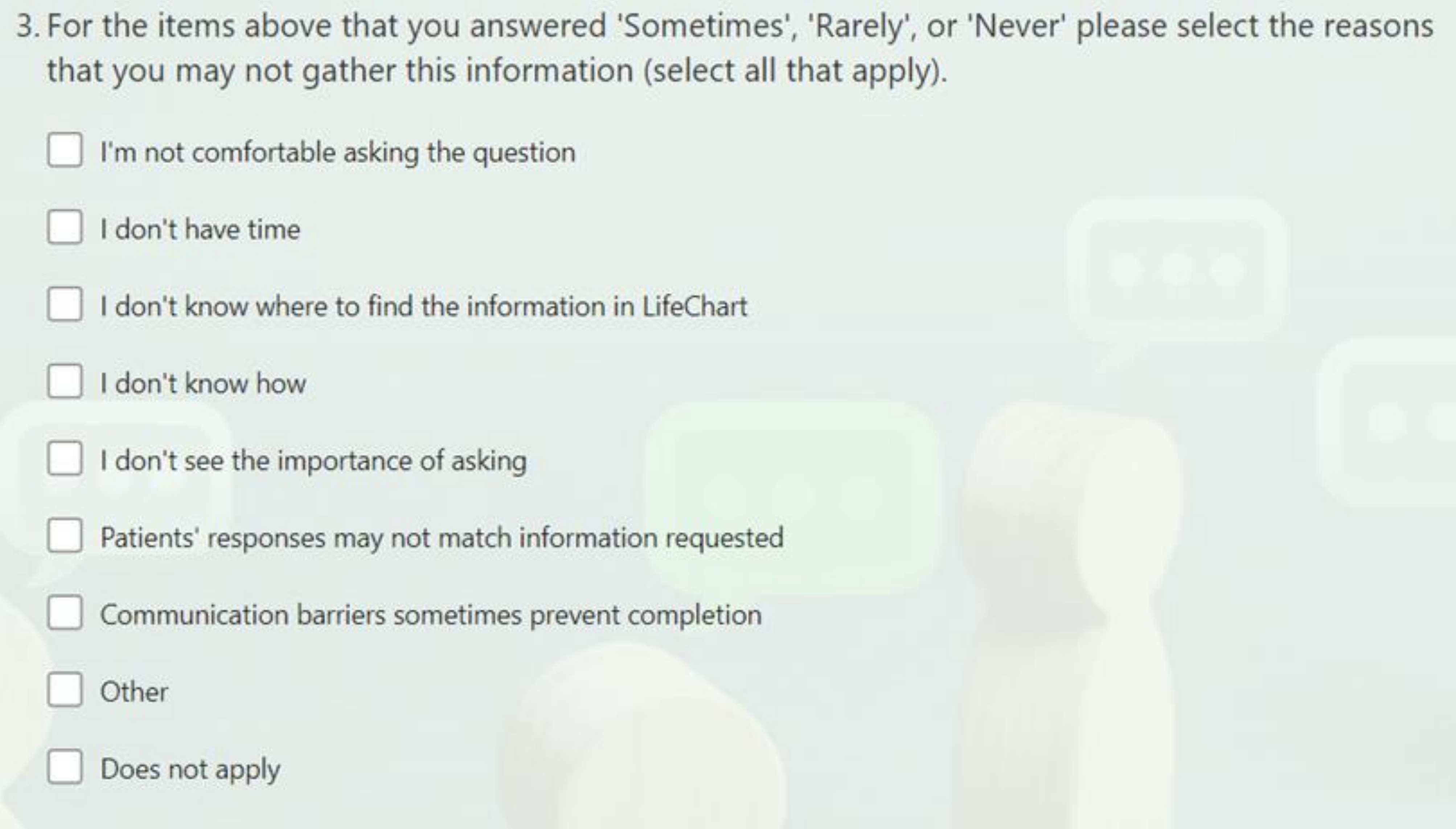
# Lifespan staff survey

Common Themes (from preliminary data):

- **Most frequently ask about:** language, race, ethnicity
- **Rarely, never, or N/A ask about**: disability, veteran status, gender identity, sexual orientation
- **Reasons information not gathered**:
    - Not comfortable asking personal questions
    - Communication barriers
    - Don't have time

**Comments:**

- Need private space to ask/answer questions
- Keep the gender identity/sexual orientation questions separate from registration
- Phrase questions in "non-shameful" way
- Respect patient identity by using their preferred pronouns /name
- Have patients fill out ahead of appointment, on portal



3. For the items above that you answered 'Sometimes', 'Rarely', or 'Never' please select the reasons that you may not gather this information (select all that apply).

☐ I'm not comfortable asking the question
☐ I don't have time
☐ I don't know where to find the information in LifeChart
☐ I don't know how
☐ I don't see the importance of asking
☐ Patients' responses may not match information requested
☐ Communication barriers sometimes prevent completion
☐ Other
☐ Does not apply

**Would your organization be willing to do a similar survey? If no, what are barriers?**

# Discussion/Recommendations

1. Are practices/systems of care/health plans internally generating demographic data reports to assess and monitor performance?
- If yes, are you using own EHR to generate report and/or using quality reporting system (IMAT)?
- What are you finding?
- What strategies have been helpful in improving performance?
- What additional strategies would be helpful to improve performance?

2. Are there any other suggested organizations or resources that could help contribute to the development of the environmental scans?

3. What can we focus on to help you prepare for the transition to the proposed standard changes?

*CTC will be offering a Webinar Series with topics selected based on the feedback we get from practices who participate in the baseline needs assessment.*

4. Do you have suggestions/feedback on what you see as potential learning needs that could be addressed in the Improving demographic data collection Webinar series?

# Discussion/Next Steps