

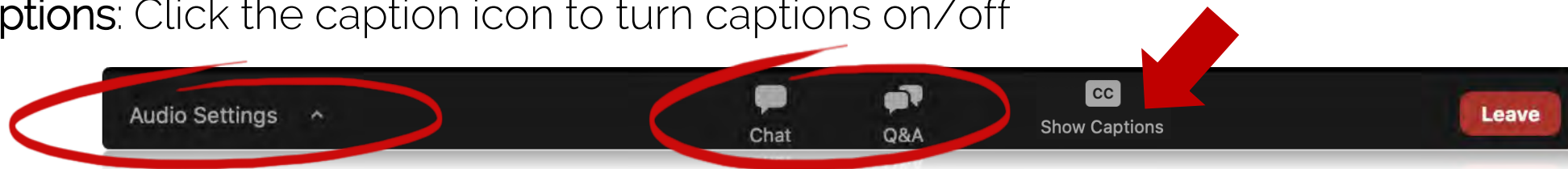
Health Equity: The Metronome for Human Centered Care

December 17, 2024



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- **Q&A:** for submitting questions to review at the end of the webinar
- **Captions:** Click the caption icon to turn captions on/off



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Our Speaker

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Senior Vice President,
Chief Experience Officer
RWJ Barnabas Health



Health Equity: The Metronome for Human Centered Care



Dwight W. McBee MBA, BSN, CPXP
Senior Vice President & Chief Experience Officer
RWJBarnabas Health



RWJBH - Statistics

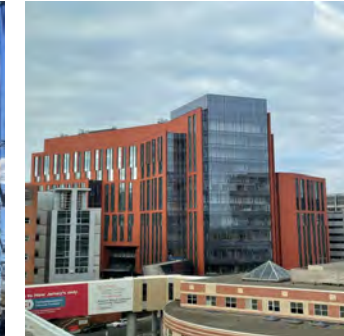
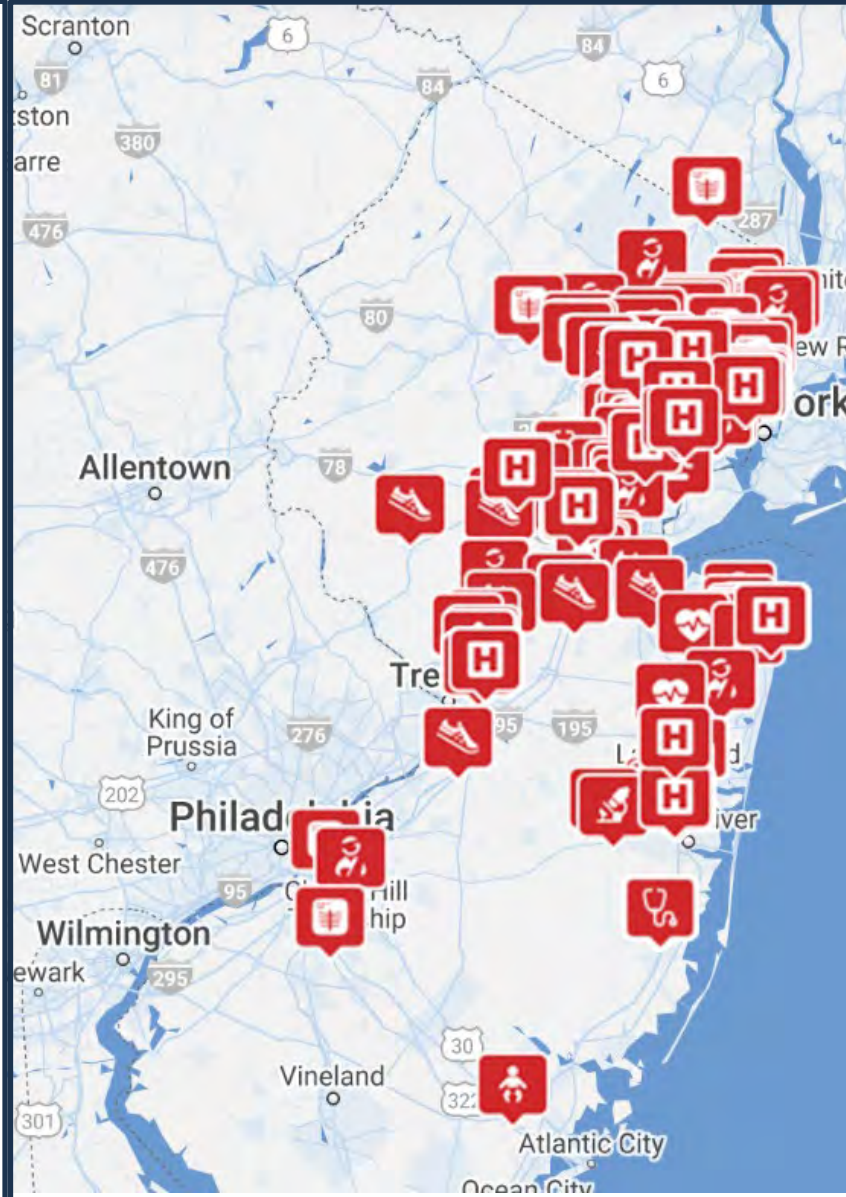
Facts & Figures

Patients Treated Per Year:

- Patients Treated: Over 3 million
- Outpatient Visits: 2 million
- Inpatients and Same Day Surgery Patients: 283,000
- Emergency Department Patients: 700,000
- Pediatric Patients: 200,000
- Births: 25,700

Staff:

- Employees: 41,000
- Nurses: 11,000
- Physicians: 9,000
- Residents and Interns: 1,000



RWJ National Awards & Recognition



CMS on Health Equity

Health equity:

The attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes.

Source: CMS.gov

My Why

- Health experiences are complex and deeply personal.
- Lived experiences, even non-healthcare experiences, last a lifetime.
- A lifetime of experiences can pass from one generation to another.



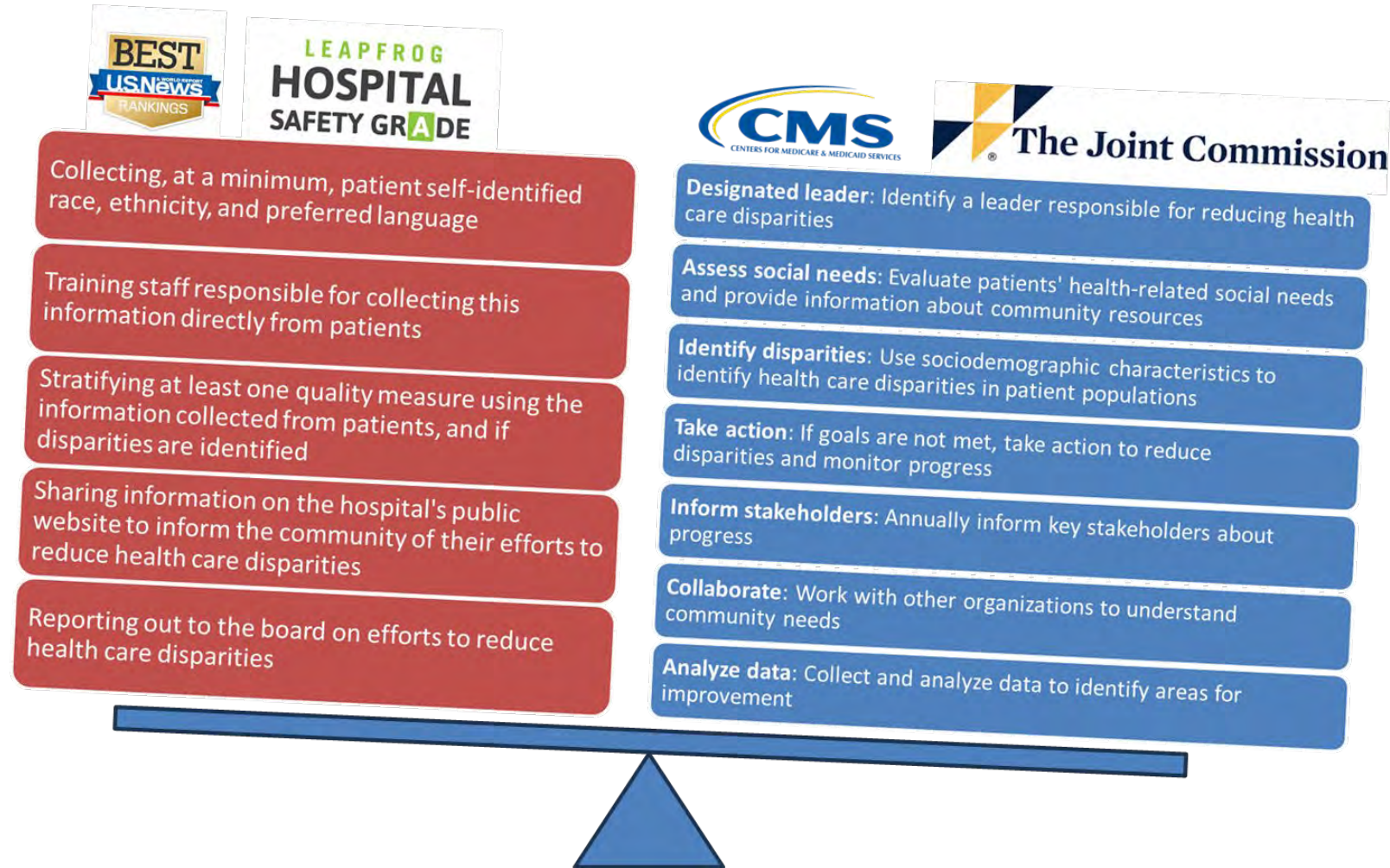
WHY?

Because it's the right thing to do.

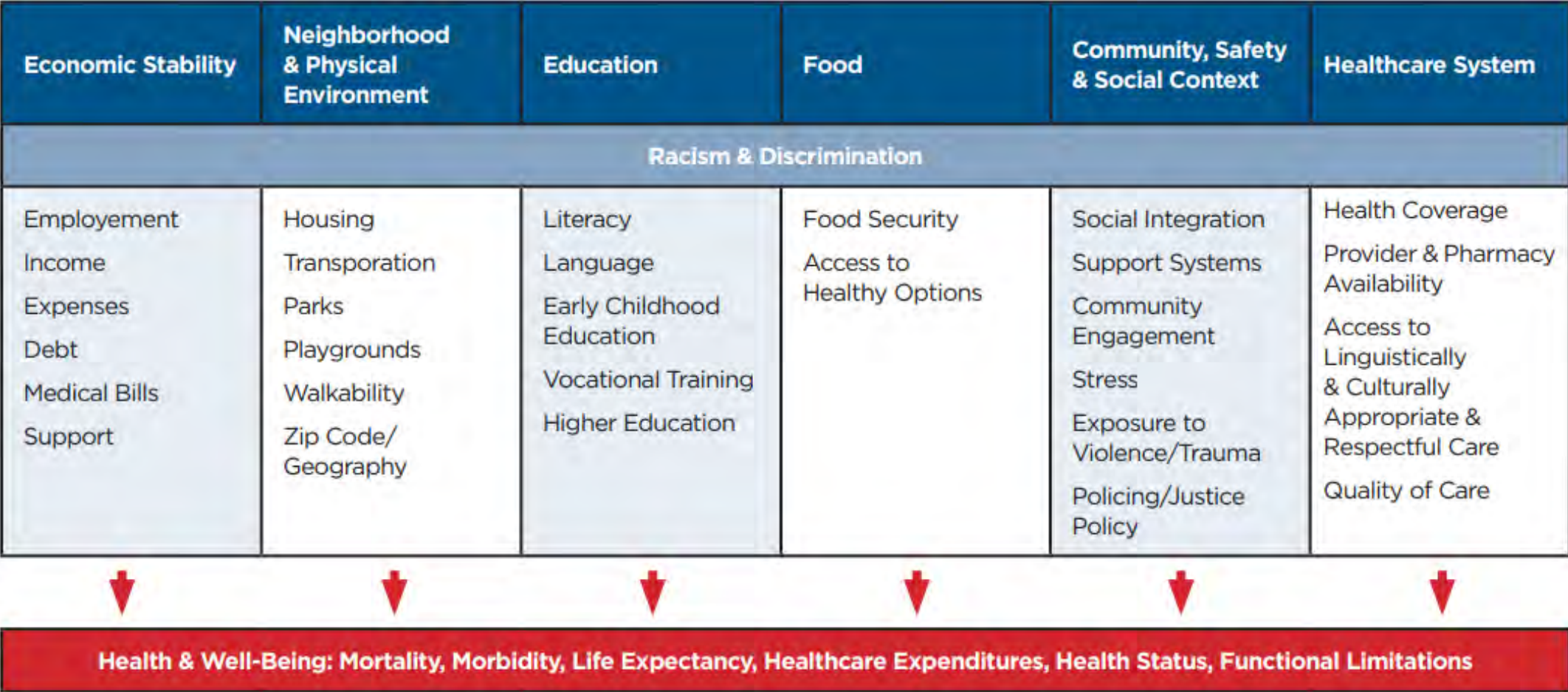


Changing Health Equity Landscape

- Health Equity is no longer an optional priority.
- The regulatory pressure to comply has caused health systems to dedicate time and effort to address gaps in care.
- We cannot allow Health Equity efforts to become “just another thing”.



Social and Economic Disparities Impacting Health Outcomes



Health-Related Social Needs Screening



4 Steps of SDOH Screening and Referral for Inpatients	
STEP 1	Complete SDOH screening upon admission The patient is screened in EPIC for social determinants of health as part of the admissions intake process.
STEP 2	Refer positive screened patients Patients who would benefit from support with their social determinants of health are referred to a Care Manager/Social Worker to follow up via EPIC.
STEP 3	Evaluate referred patients Evaluation and referrals are made through EPIC CRD by the Care Manager/Social Worker.
STEP 4	Provide referral information to patients Social Worker/Case Manager discusses the support available for and provides referral information to the patient.

Health-Related Social Needs: Which Patients Respond to Screening and Who Receives Resources?

Nazleen Bharmal, MD, PhD^{1,2,3}, Alex Rennick, BS³, Amy Shideler, MSW³, Madeleine Blazel, BS⁴, Robert Jones, MD^{2,3}, Chi' Wilson, MBA³, and Elizabeth R. Pfoh, PhD, MPH^{3,5}

“Healthcare organizations should not solely rely on HRSN questionnaire data collected through a patient-portal as an accurate representation of a population’s needs.”

Inadequacy of Current Screening Measures for Health-Related Social Needs

Arvin Garg, MD, MPH^{1,2}; Alison LeBlanc, MS, PMP^{1,2}; Jean L. Raphael, MD, MPH^{3,4}

» Author Affiliations

JAMA. 2023;330(10):915-916. doi:10.1001/jama.2023.13948

“This Viewpoint discusses recently established quality measures designed to screen patients for health-related social needs and how they may not only come up short, but impede progress in health equity.”

Metronome

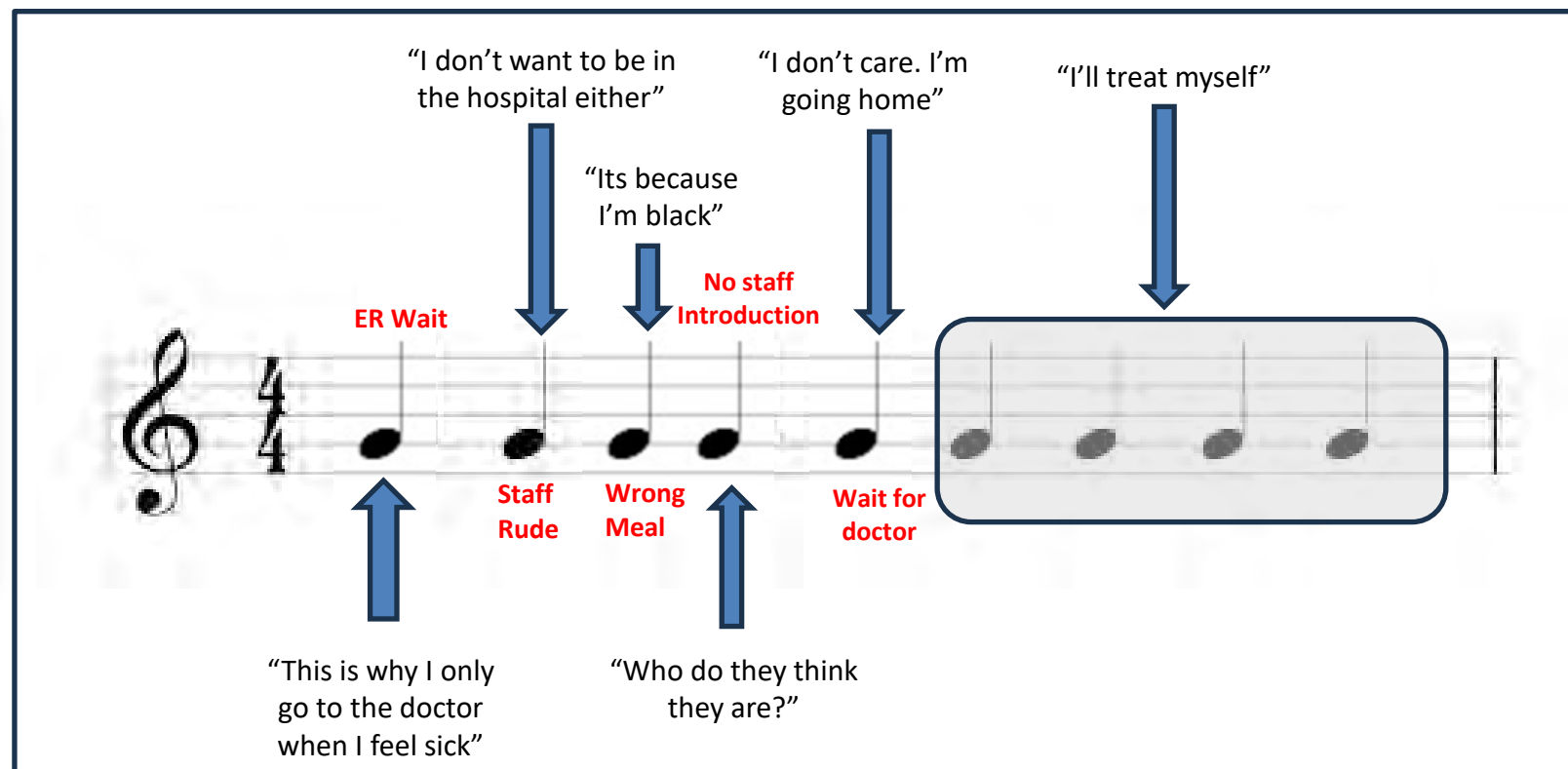


Produces an audible click at a regular interval to set the timing of a musical compilation.



- Ensures musical connectivity
- **Keeps the song moving at the right pace**
- Allows space for creative expression and interpretation
- Once understood (internalized), muscle memory takes over

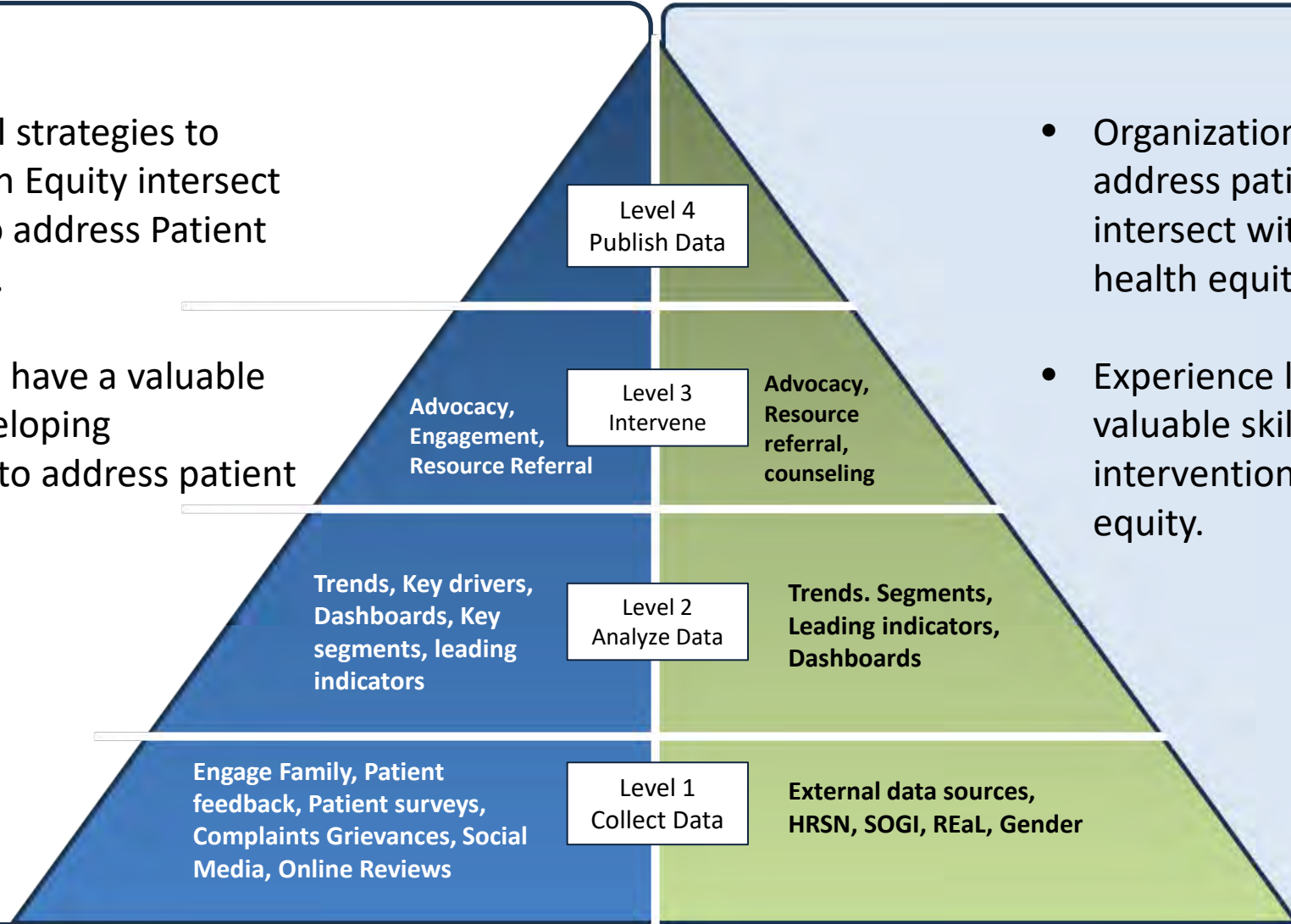
Metronome



- Our lived experiences impact the way we interpret each “beat”.
- One bad experience can cause our patients to “hear” extra noise.
- A patient will disengage due to all of the noise in the system.

The PFCC Health Equity Relationship

- Organizational strategies to address Health Equity intersect with efforts to address Patient Centeredness.
- Equity leaders have a valuable skillset in developing interventions to address patient centeredness.

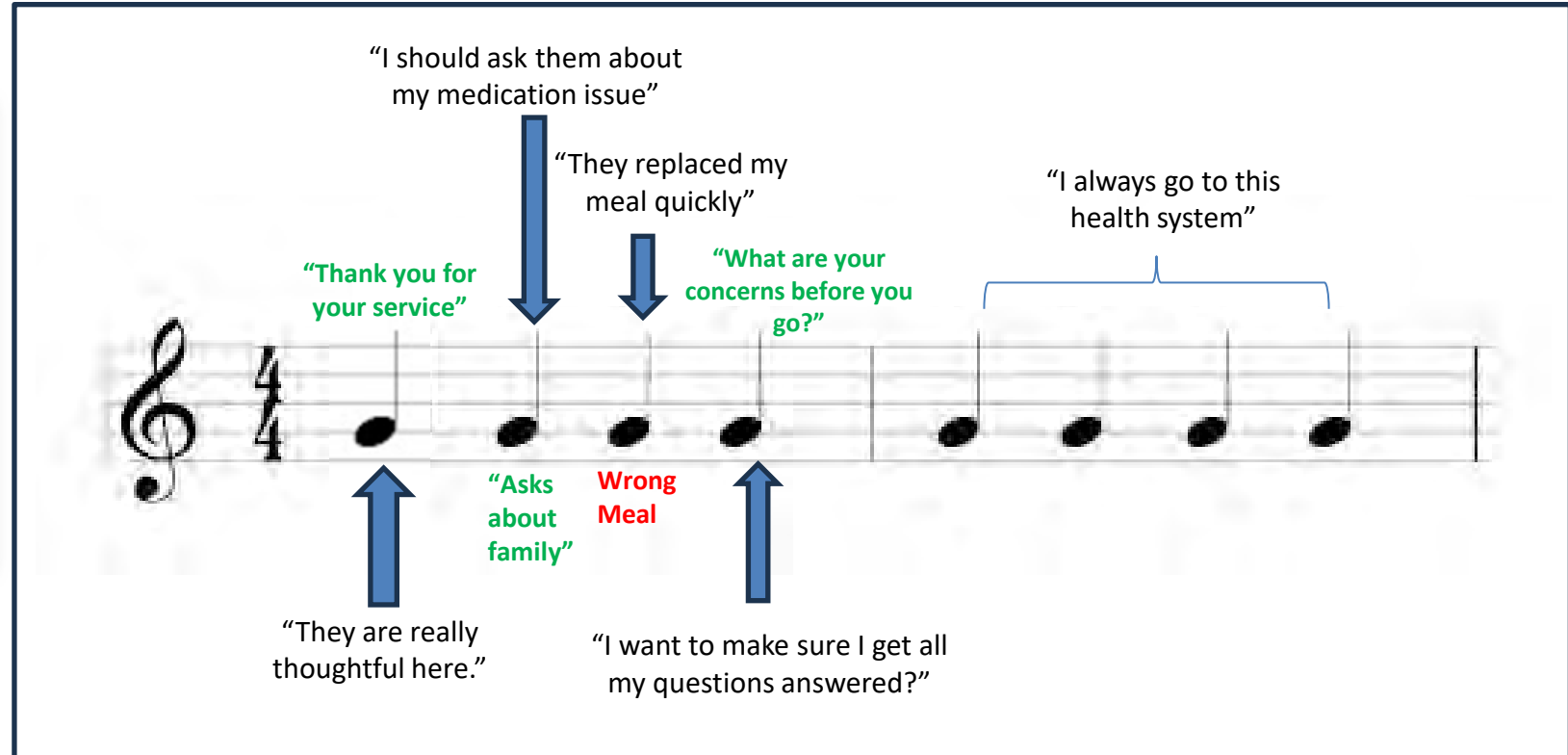


- Organizational strategies to address patient centeredness intersect with efforts to address health equity priorities.
- Experience leaders have a valuable skillset in developing interventions to address health equity.

Patient Centeredness

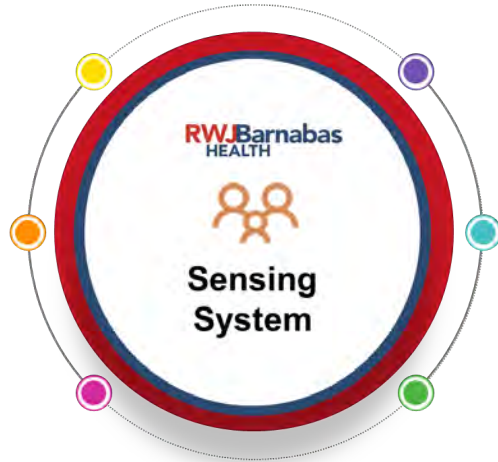
Health Equity

Metronome



- Small efforts to connect make a huge difference.
- One bad experience can easily be overcome with enough emotional capital.
- Health engagement and self management continues.

Human Systems



Sensor

Detecting human experiences.

Survey Operations

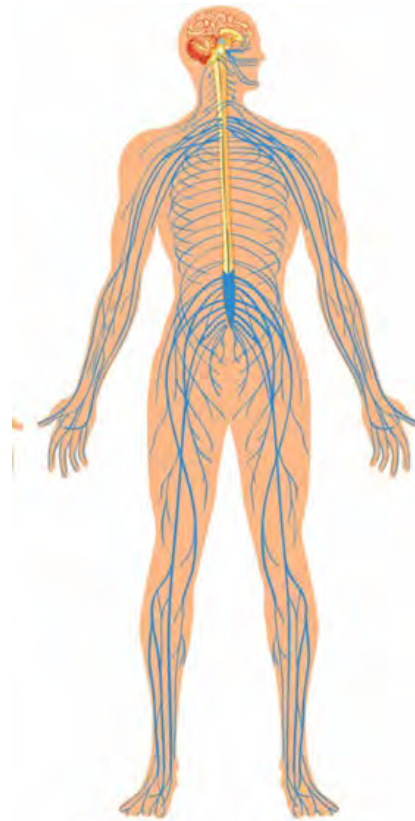
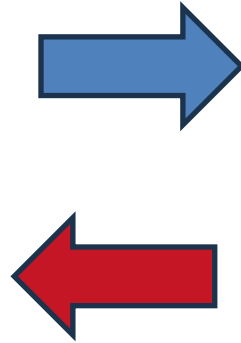
Rounding

Complaint / Grievance

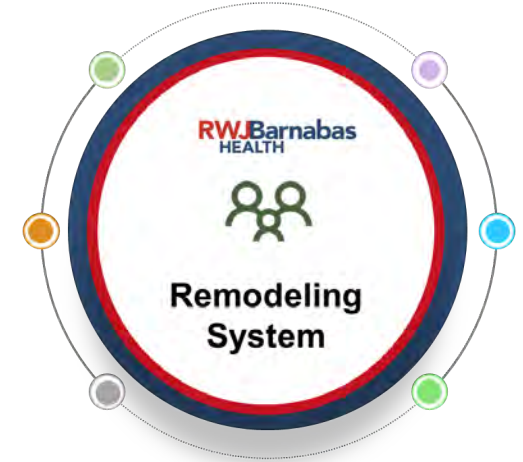
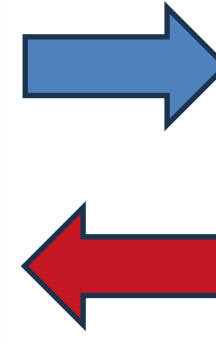
Clinical Turn Around Times

ED Hold Times

Patient Initiated Service Alerts



Nervous System



Effector

Proactive system re-design.

Service Standards

Service Learning and Development Resources

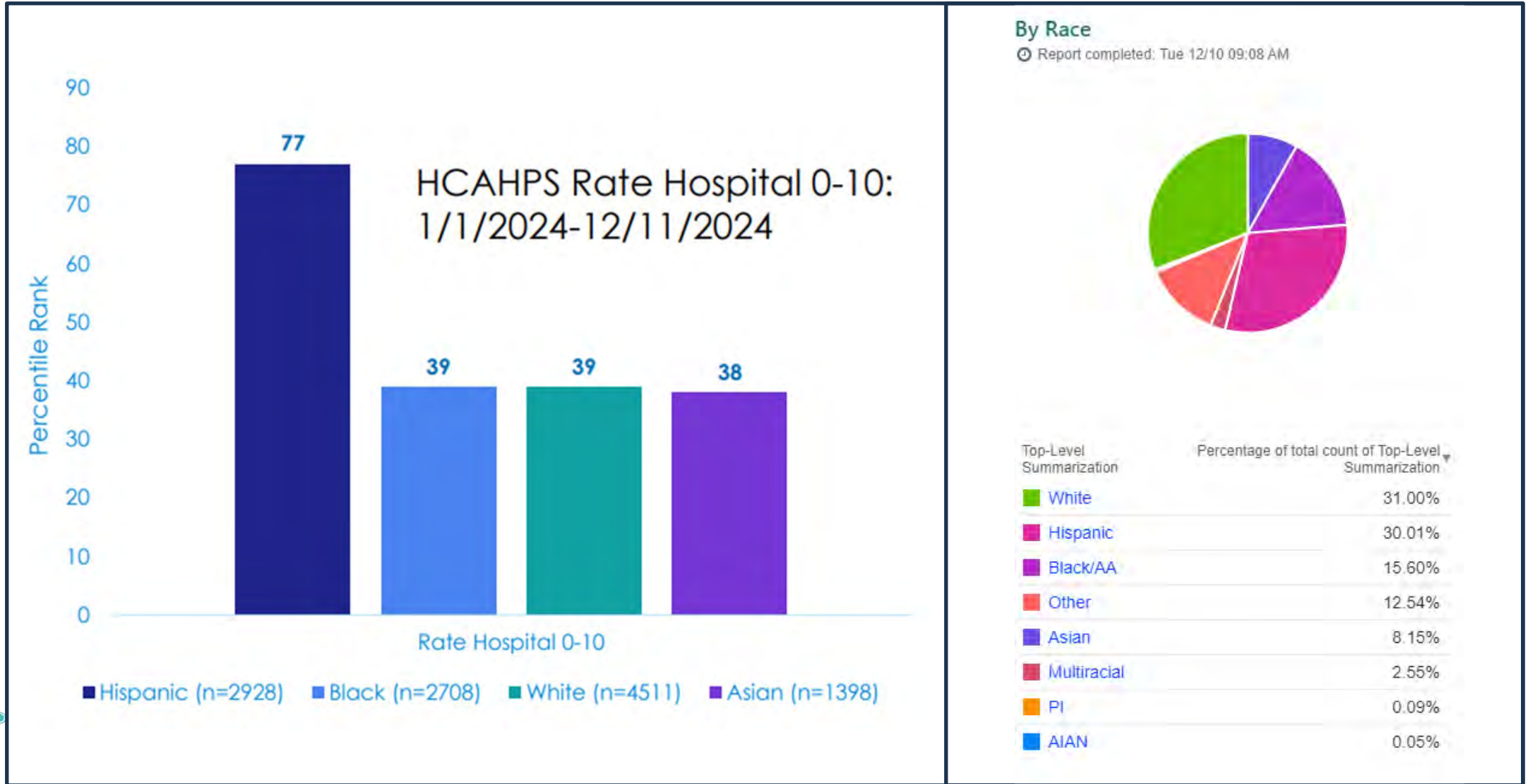
Best Practice Deployment

Service Empowerment Programs

Signature Moment Design Sprints

Service Deterioration Index

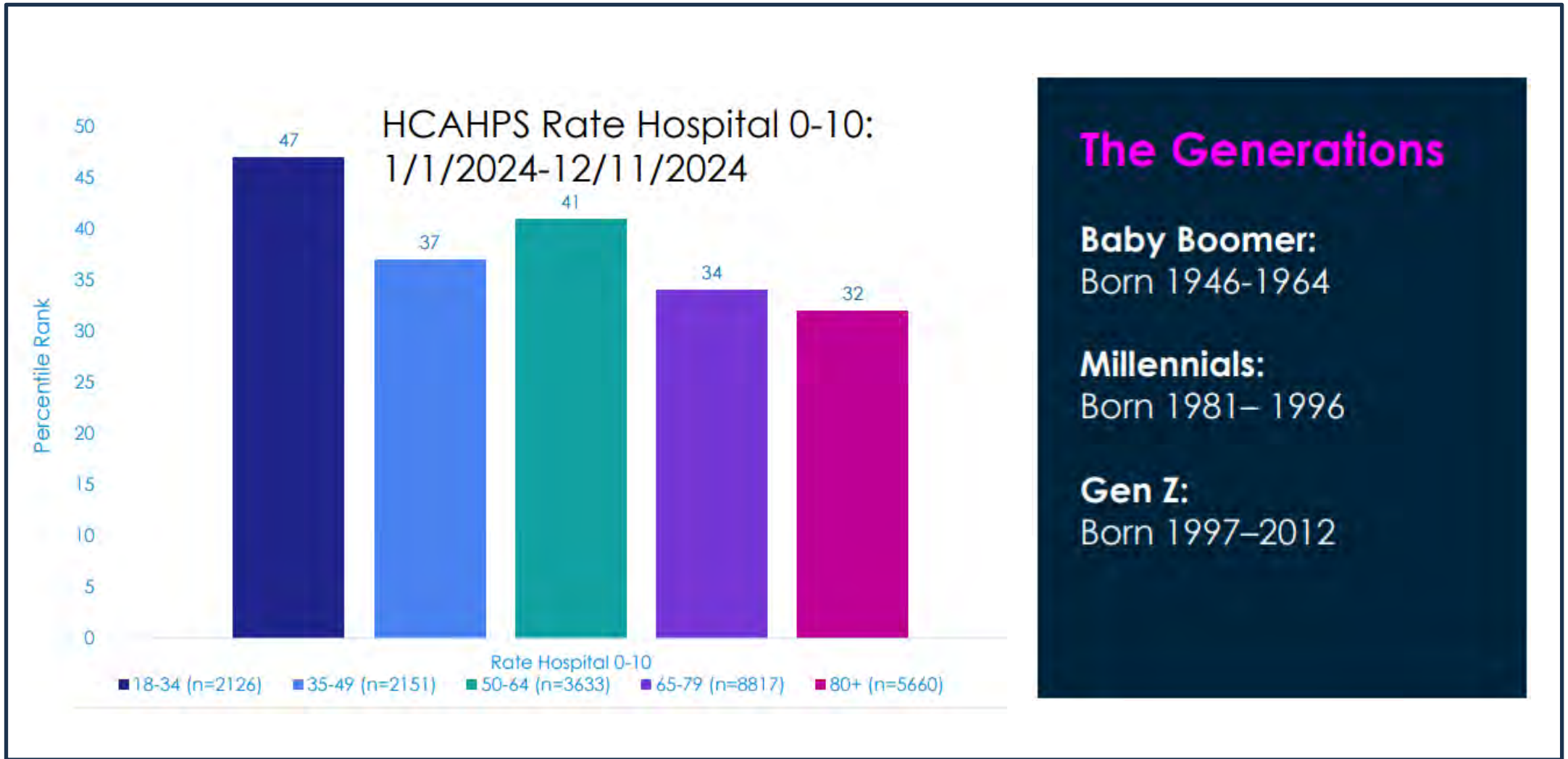
Racial Segments



Racial Segments Cont.

Survey Question	All Respondents		American Indian / Alaskan Native	Asian	Black Or African American	Hawaiian Or Pacific Islander	Spanish, Hispanic, Or Latino	White
	entityScore	All N	n = 179	n = 1,405	n = 2,726	n = 89	n = 2,947	n = 16,217
Rate hospital 0-10	67	22,412	1.4	1.7	2	2.7	11.02	-0.9
Overall rating of care	67.7	21,402	-2.4	-4.3	-0.7	-3.1	6.05	0.6
Recommend the hospital	67	22,270	1.8	4.8	2.7	5.1	10.24	-1
Likelihood of recommending	65	21,627	-1.3	-2.4	-1.4	-7.7	7.18	0.4
Staff worked together care for you	67.7	21,788	-1.6	-7.1	-3	0.9	3.15	1.5
Staff talk about help when you left	83.2	19,787	-3.4	-0.1	-2.1	-3.9	0.84	0.7
Info re symptoms/prob to look for	87.4	19,630	-5	0.8	-2.2	1.5	4.55	0.8
Good understanding managing health	50.3	22,192	-2.3	0.4	1	-0.9	7.36	0.1
Understood purpose of taking meds	57.8	18,126	-3.4	2.3	3.3	-2.5	7.95	-0.4
Nurses treat with courtesy/respect	84.5	22,570	-4.6	-4.1	1.7	3.1	0.5	0.5
Doctors treat with courtesy/respect	83.5	22,476	2.2	-1.6	2.2	0.6	4.38	0
Courtesy of person cleaning room	70.5	21,193	-1.5	-9.5	-5	-4.6	-2.37	2.3
Nurses kept you informed	65.6	21,677	-0.5	-4.3	-3.7	-5.1	2.72	1.4
Nurses expl in way you understand	74.6	22,474	0.5	-3.1	2.9	-1.6	2.41	0.2
Doctors kept you informed	54.1	21,069	4	1.9	1.4	-2.2	7.78	-0.5
Doctors expl in way you understand	72.5	22,326	-2.8	1.8	4	-2	7.02	-0.8
Tell you what new medicine was for	73.9	14,286	-7.8	-2	2.5	-2.7	4.48	-0.1
Staff describe medicine side effect	47.1	14,090	6.9	-0.3	4	7.9	10.39	-1
Call button help soon as wanted it	58.1	19,500	5.5	2.7	1	16.3	8.89	-0.7
Help toileting soon as you wanted	62.2	12,516	-7.9	-2.1	-0.4	7.4	3.45	1
Nurses listen carefully to you	76.4	22,543	-1	-0.8	2.8	-3.1	2.89	-0.2
Nurses' attitude toward requests	70.7	21,923	-2	-5.3	-4.6	-7.2	0.43	1.9
Attention to needs	66.9	21,549	-4.4	-6	-5.2	-7.9	1.17	1.8
Doctors listen carefully to you	75.5	22,423	-3.2	3.2	3.4	0.9	5.77	-0.7
Time doctors spent with you	44.8	21,770	1.2	1.9	0.2	4.6	6.59	-0.3
Doctors' concern questions/worries	53.9	21,399	-1.5	-1.6	-6.6	-5.6	5.09	0.3
Staff addressed emotional needs	57.1	20,855	-6.5	-4.5	-5.2	0	2.89	1.9
Staff concern for privacy	59.6	21,562	-3.4	-3.5	-3.9	-7.2	1.48	1.5
Staff include decisions re:trtmnt	57.6	19,723	1.6	-3.1	-3	-7.6	4.08	1.1
Hosp staff took pref into account	44.7	21,807	-3.2	0.5	-2.7	1.3	7.52	0.6
Response to concerns/complaints	56.3	20,396	-1	-4	-3.8	-0.6	2.86	1.7
Cleanliness of hospital environment	71.4	22,537	-2.1	-4.2	1.3	4.5	2.24	0.2
Quietness of hospital environment	50.8	22,203	-0.2	4.1	10.5	4.4	9.41	-2.5
Room temperature	44.7	20,628	1	1.1	-4.4	5.9	6.59	0.5
Temperature of the food	38.7	21,223	-0.5	0.5	-0.3	8.9	11.86	-0.4
Quality of the food	33.1	20,271	5.1	-1	3.1	4.6	14.89	-1.4

Generational Segments



The Generations

Baby Boomer:
Born 1946-1964

Millennials:
Born 1981-1996

Gen Z:
Born 1997-2012



Gender Segments

Sex Assigned At Birth

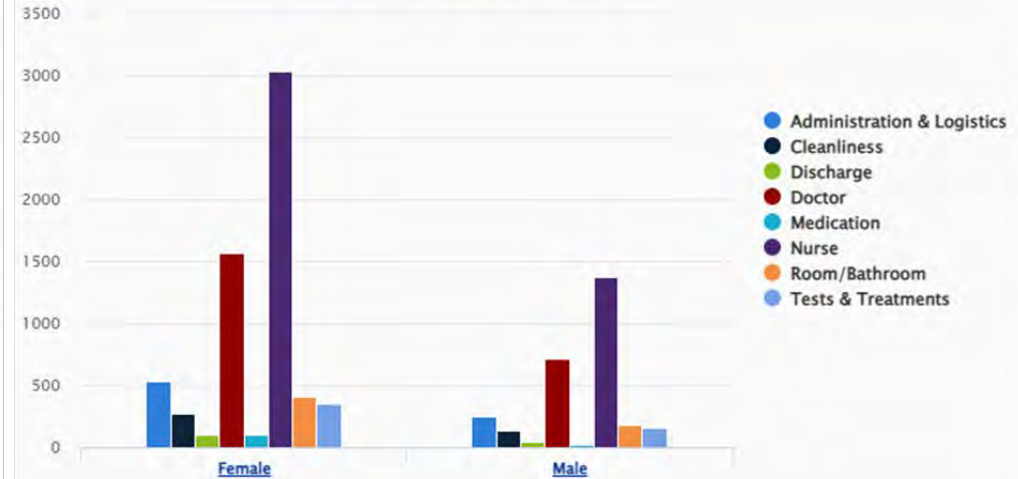
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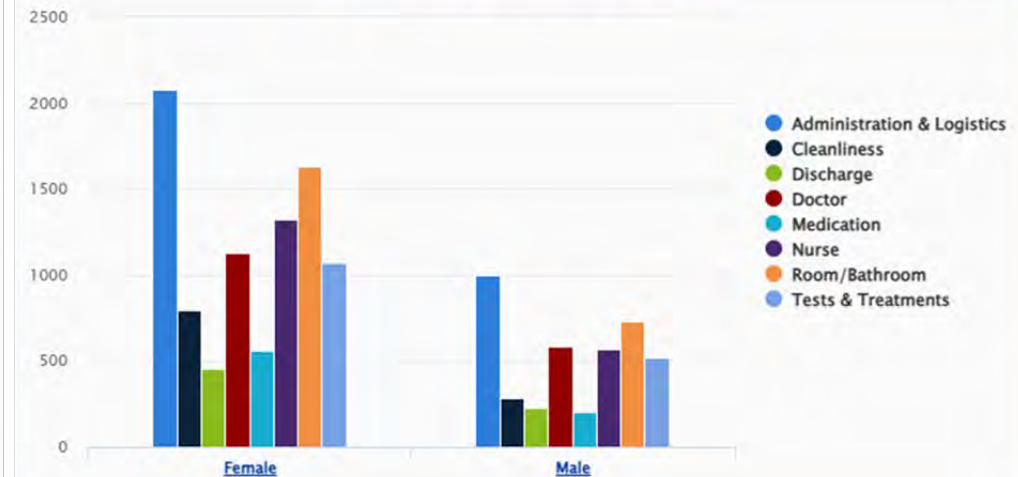
- Choose not to disclose
- Female
- Male
- Not recorded on birth certificate
- Uncertain
- Unknown
- [No Value]

Sex Assigned At Birth	% of Patients
Choose not to disclose	0.05%
Female	58.62%
Male	40.92%
Not recorded on birth certificate	0.01%
Uncertain	0.01%
Unknown	0.12%
[No Value]	0.27%

Top Positive categories by Gender

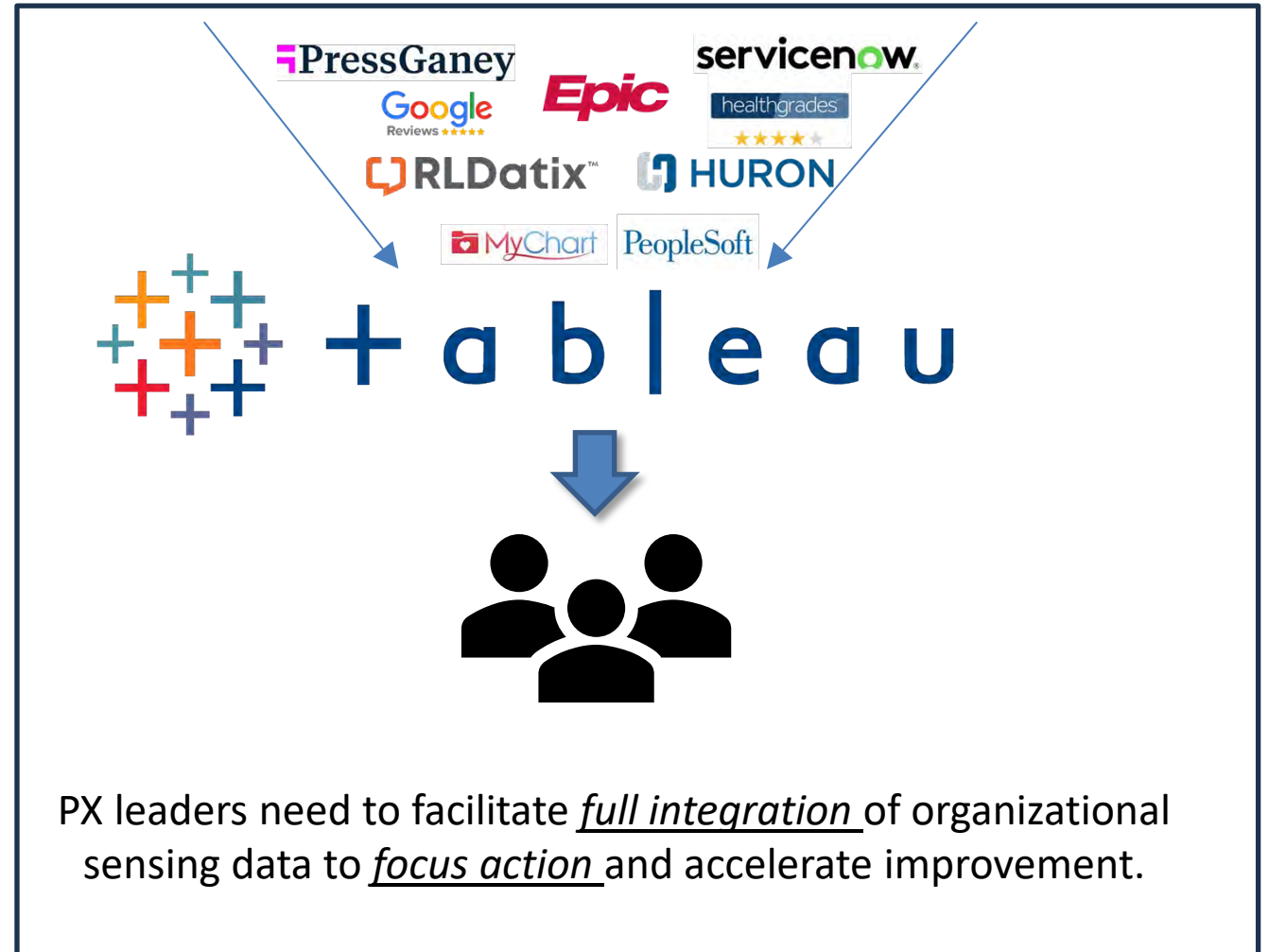


Top Negative categories by Gender



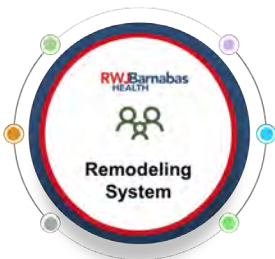
Best Practices

- The clinician experience is hampered by too many data access points.
- Experience leaders are well positioned to bring order to chaos.
- Change is difficult, multiple sources of truth is impossible.



Best Practices

- Culturally Centered Care
 - Su Salud Medical Program
 - African American Medical Program
 - Center for Asian and Chinese Health
 - Indian Medical Program
- Inpatient Health Navigator Program
- Community Health Worker Program
- RWJUH Mexican Consulate Partnership



Robert Wood Johnson University Hospital Su Salud Medical Program

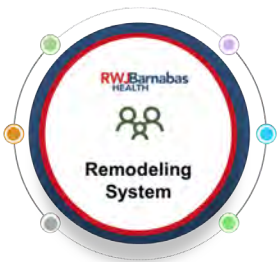


The Su Salud Program at Robert Wood Johnson University Hospital was created to extend services to the Hispanic and Latinx communities within our region to address historical barriers to health.

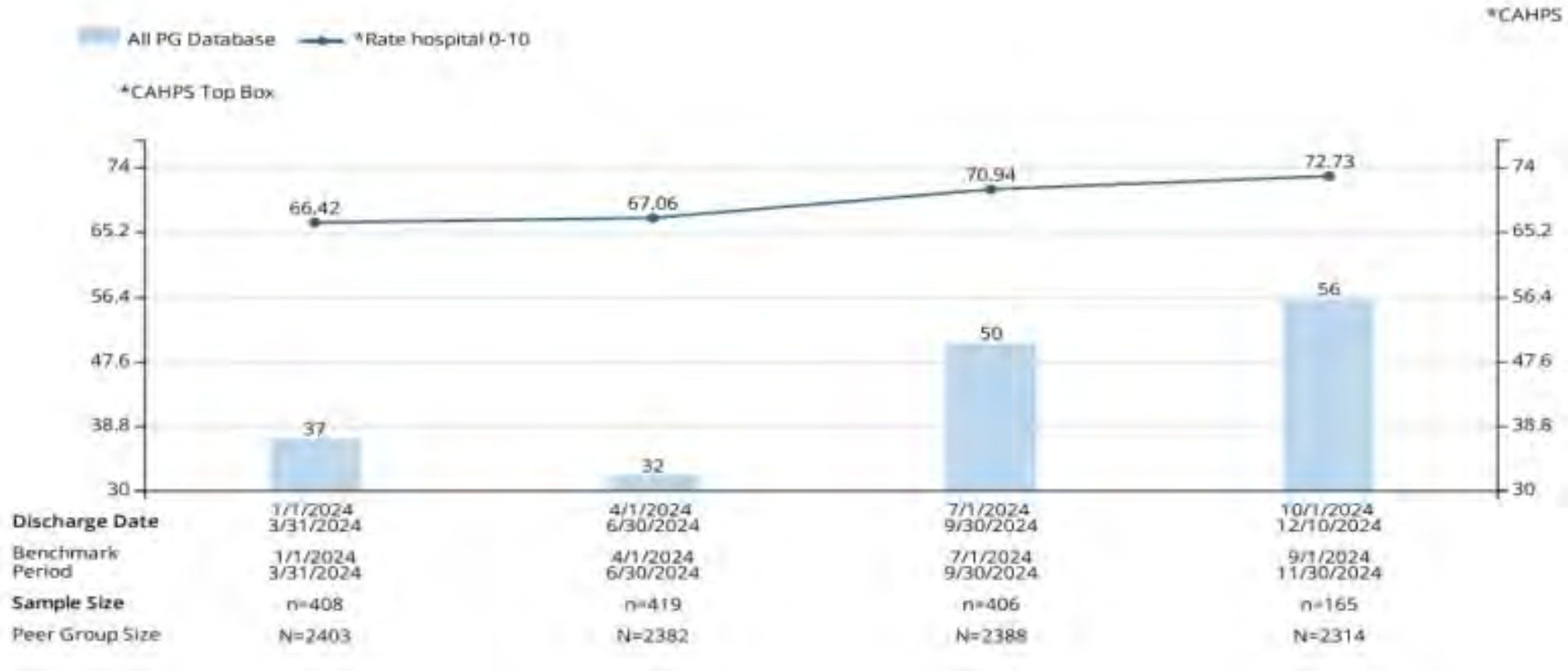
The Su Salud Medical Program offers *One-Stop Services*

- Appointment Coordination
- Finding Specialists
- Navigation for Testing/ Specialty Physician Visits
- Interpretation and Translation
- Transportation Arrangement

RWJBarnabas Health and Saint James Health Newark's New Health Clinic



RWJBH Asian Patient Experience





Questions?

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<https://www.linkedin.com/in/dwmcbee>

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Upcoming Events & Programs

WEBINARS

- January 7 | The Power of First Impressions in the Ambulatory Care Setting
- January 16 | Building Trust in Healthcare: Insights from UAB Medicine's Humanistic Care Study
- January 21 | What Healthcare Providers Need to Know About Newcomer Health Equity
- January 28 | Nonviolent Communication to Improve the Human Experience
- February 4 | Compassion Rounds: Connecting with Patients and Families Beyond a Diagnosis

CONNECTION CALLS/CHATS

- December 20 | PX Chat on PFA/PFACS: Sustaining/Growing
- January 22 | Book Club – Return on Human Experience: Eight Guiding Principles to Inspire Excellence in Healthcare



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Thank You