



Diversity & Disparities: A Benchmark Study of U.S. Hospitals

<http://www.hpoe.org/diversity-disparities>



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Executive Summary

- In 2011, the Institute for Diversity in Health Management, an affiliate of the American Hospital Association (AHA), commissioned the Health Research & Educational Trust (HRET) of the AHA to conduct a national survey of hospitals to determine the actions that hospitals are taking to reduce health care disparities and promote diversity in leadership and governance. Additional funding was made possible from the ARAMARK Charitable Fund at the Vanguard Charitable Endowment Program, Health Forum and HRET.
- The survey results offer a snapshot of some common strategies used to improve the quality of care that hospitals provide to all patients, regardless of race or ethnicity.

Executive Summary (cont.)

- The survey results highlight that, while more work needs to be done, advancements are being made in key areas that can promote equitable care, such as collecting demographic data, providing cultural competency training, and increasing diversity in leadership and governance.
- This overview provides data to help the health care field focus attention on areas that will have the most impact and establish a benchmark to gauge hospitals' progress in the coming years.



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Survey Methods

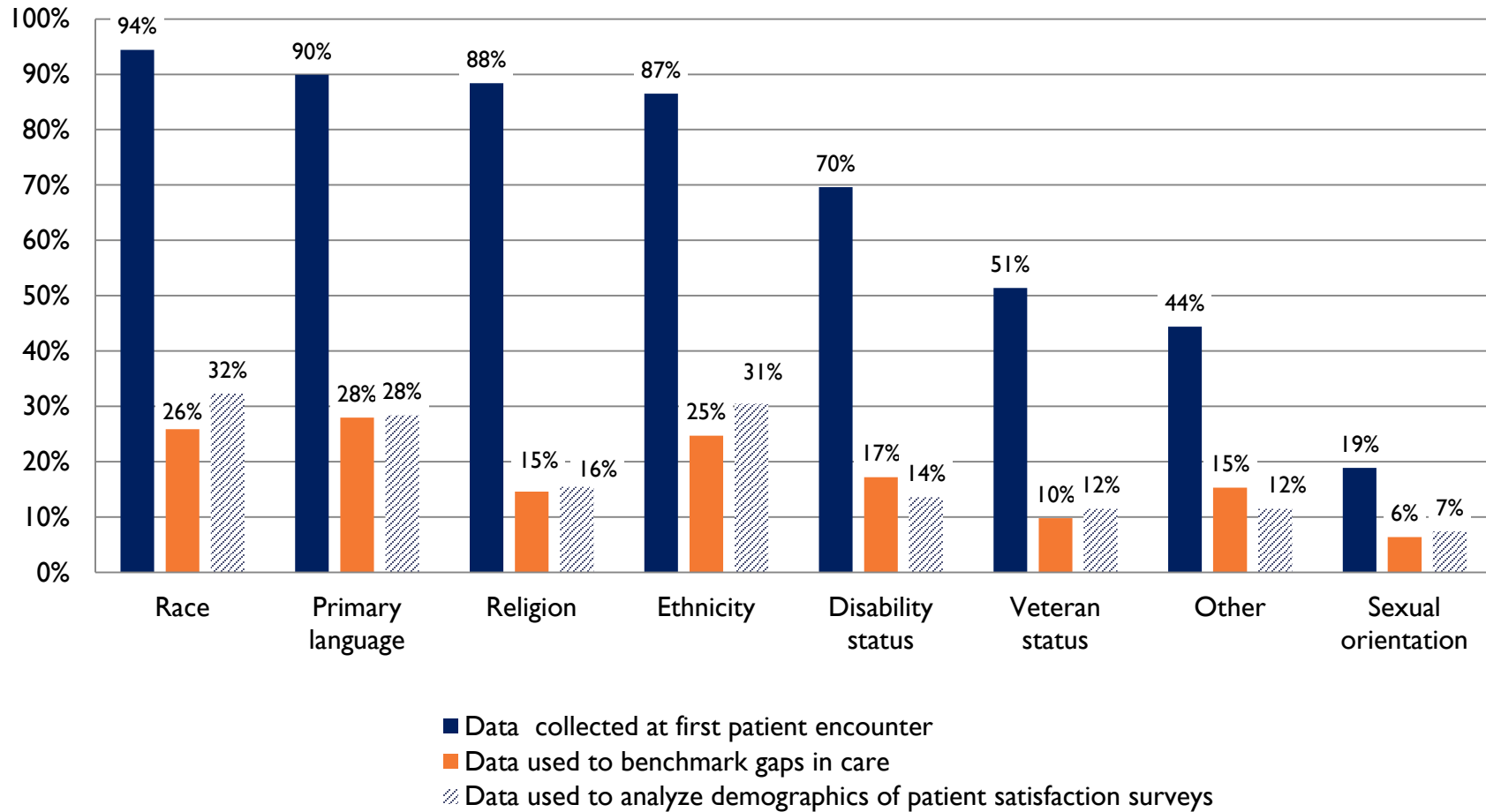
- Data for this project were collected through a national survey of hospitals mailed to the CEOs of 5,756 institutions, which represented all U.S. registered hospitals at the time of the survey.
- The response rate was 16% (924 hospitals), with the sample generally representative of all hospitals.
- All data are self-reported.

Collection and Use of REAL Data

- Overall, hospitals appear to be actively **collecting** patient demographic data, including:
 - race (94%);
 - ethnicity (87%); and
 - primary language (90%).
- **Use** of REAL is just beginning.
 - Data used to benchmark gaps in care for:
 - race (26%);
 - ethnicity (25%); and
 - primary language (28%).

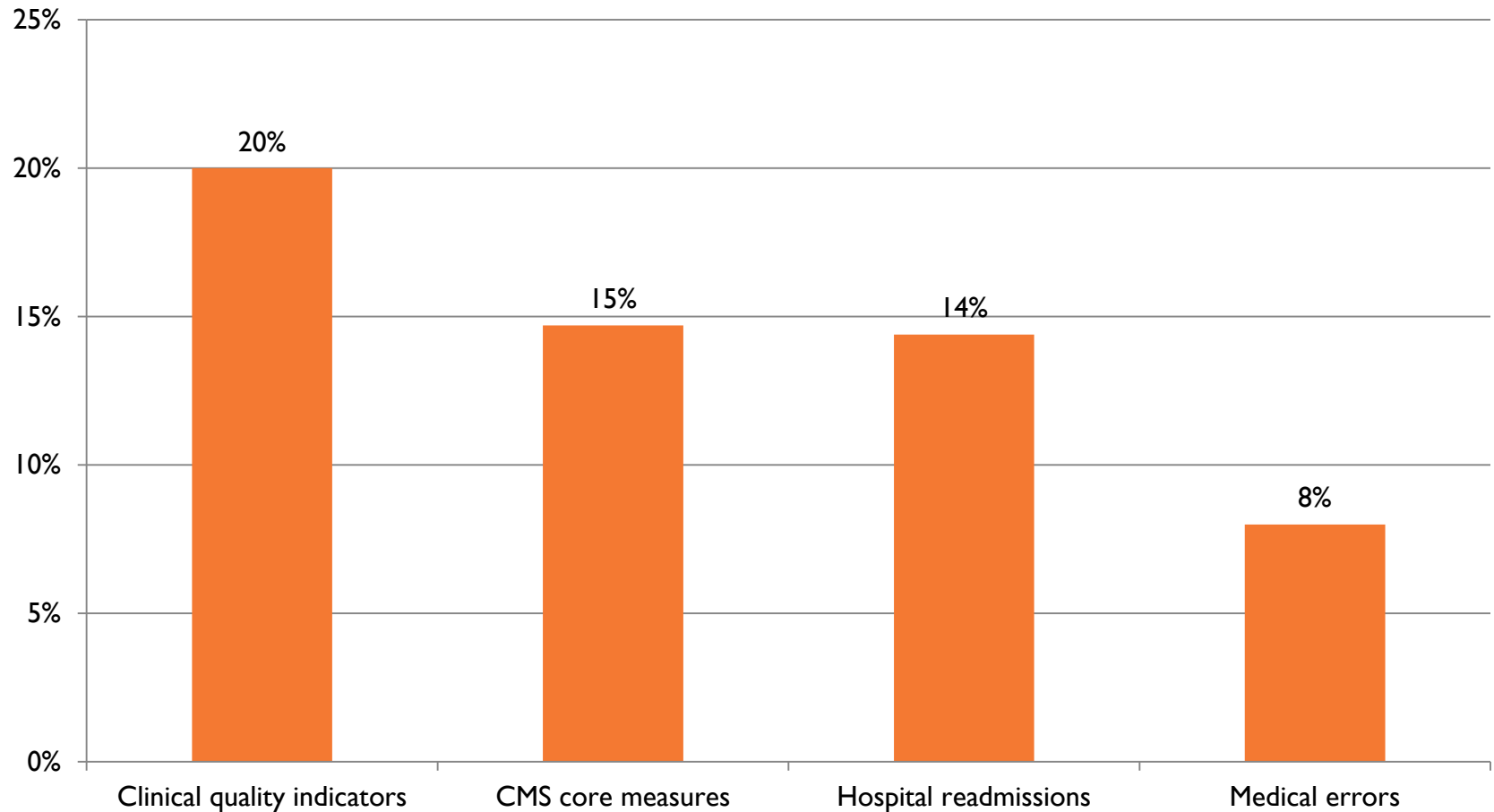
Collection and Use of REAL Data (cont. I)

Collection and Use of Patient Demographic Data



Collection and Use of REAL Data (cont. 2)

Hospitals' Analysis of Data by Race/Ethnicity to Identify Patterns

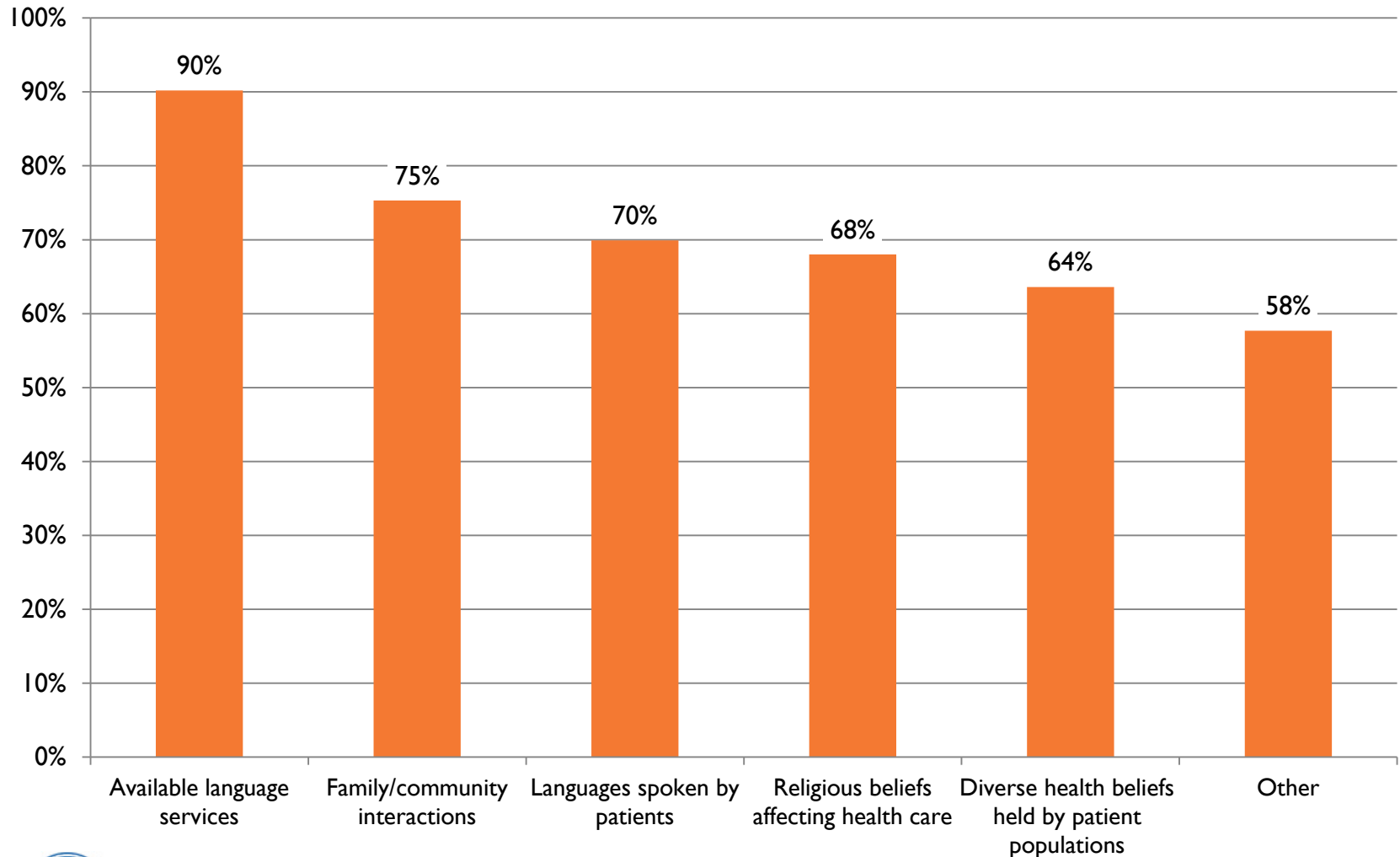


Cultural Competency Training

- 81% of hospitals educate all clinical staff during orientation about how to address the unique cultural and linguistic factors affecting the care of diverse patients and communities.
- 61% of hospitals require all employees to attend diversity training.

Cultural Competency Training (cont. I)

Cultural Content Areas Included in Hospital Orientation



Leadership and Governance

- Although minorities represent a reported 29% of patients nationally, they comprise only:
 - 14% of hospital board members;
 - an average of 14% of executive leadership positions; and
 - 15% of first- and mid-level management positions.

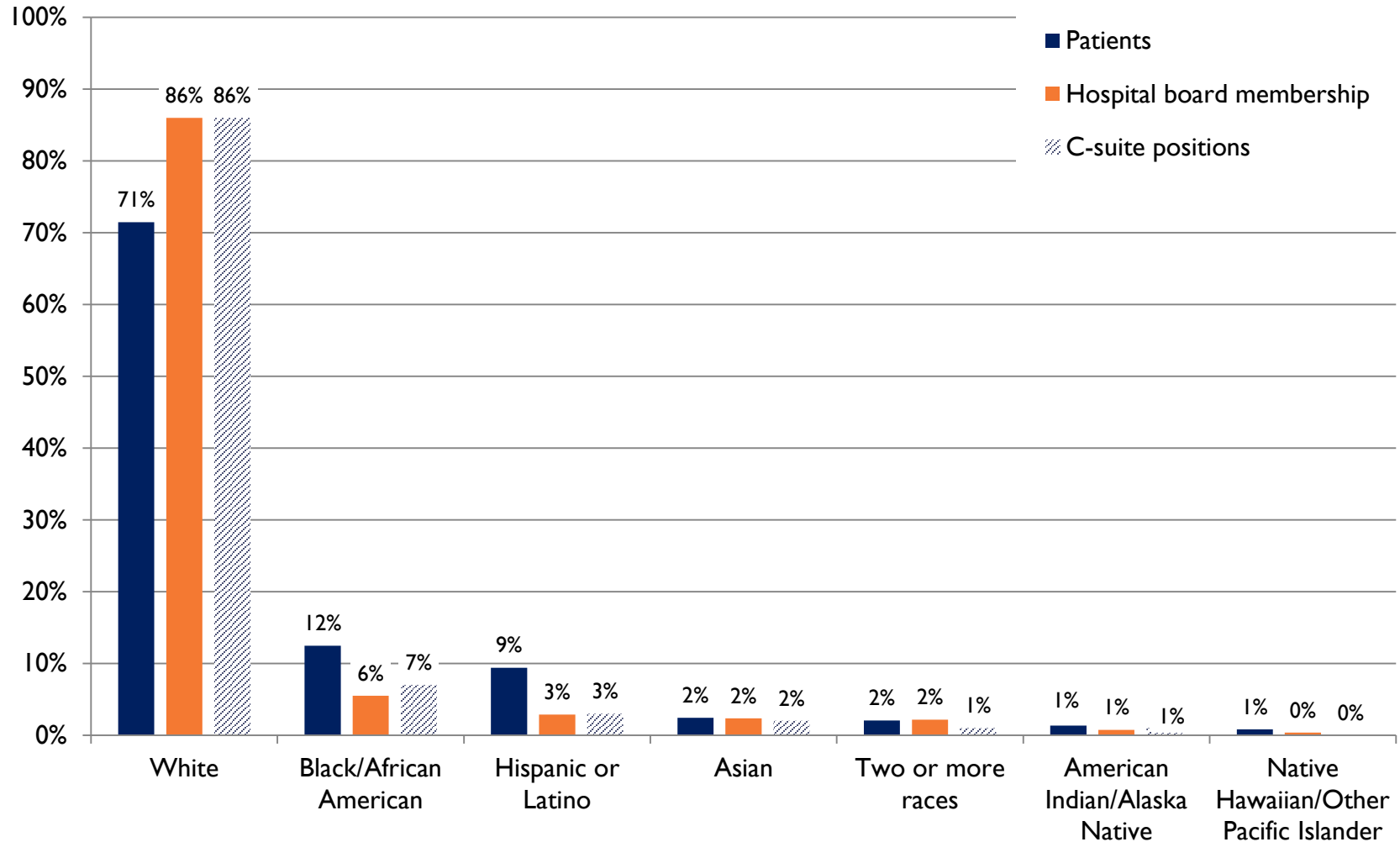


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Leadership and Governance (cont. I)

Minority Representation in Hospital Leadership and Governance



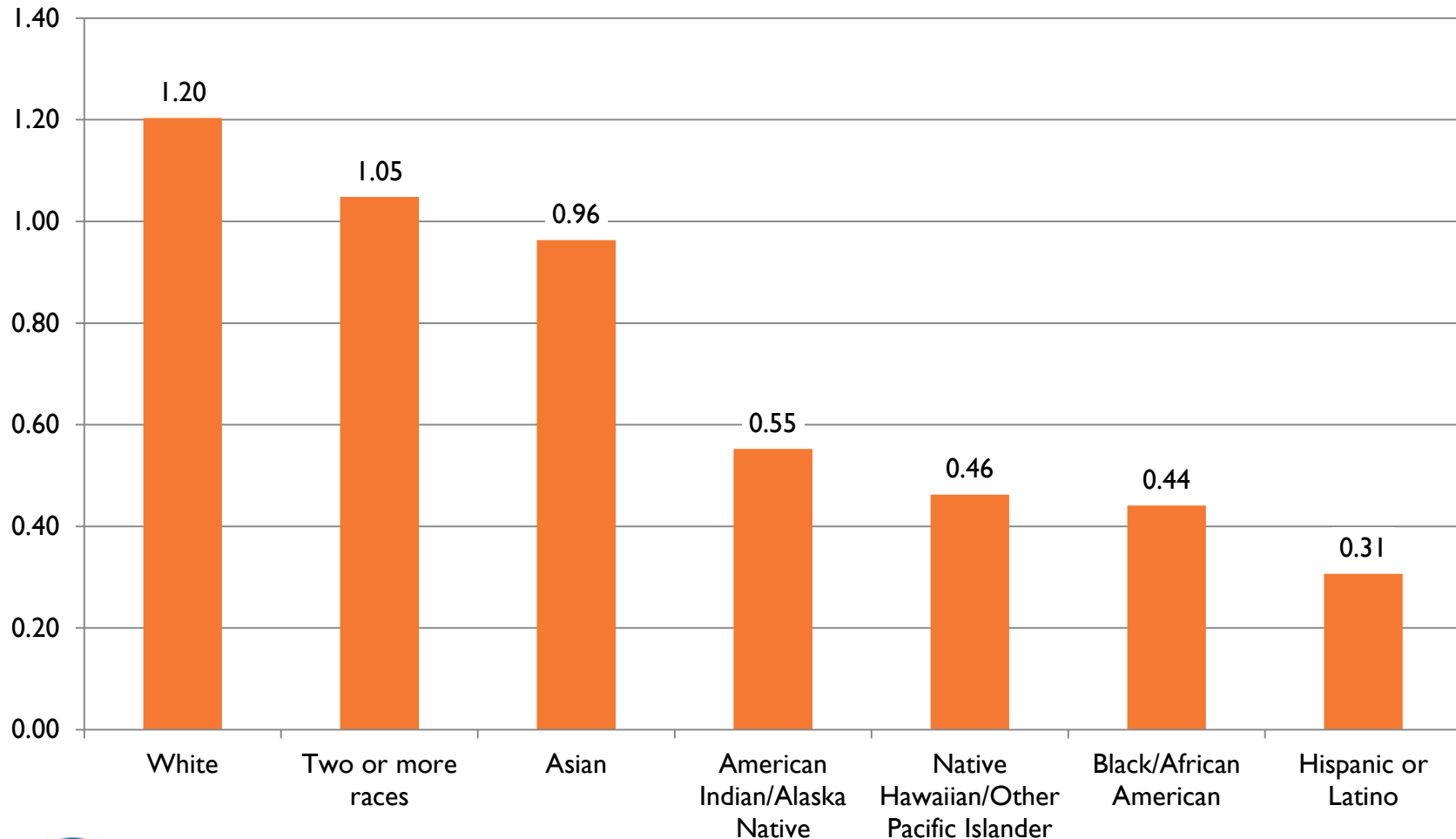
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Leadership and Governance (cont. 2)

**Ratio of Board Representation to Patient Population
(A group is underrepresented if the value is less than one.)**



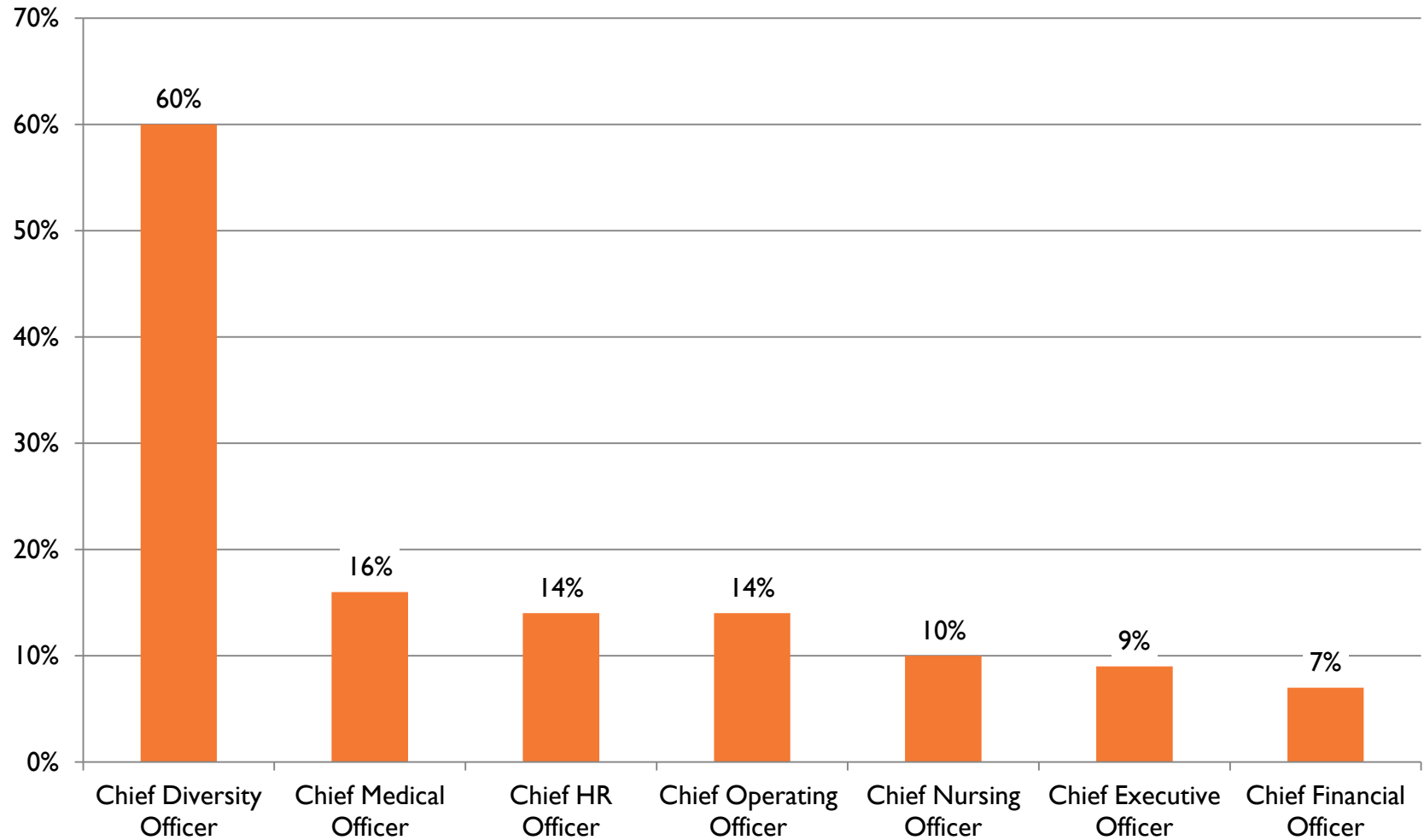
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Leadership and Governance (cont. 3)

Minority Representation in Executive Leadership Positions



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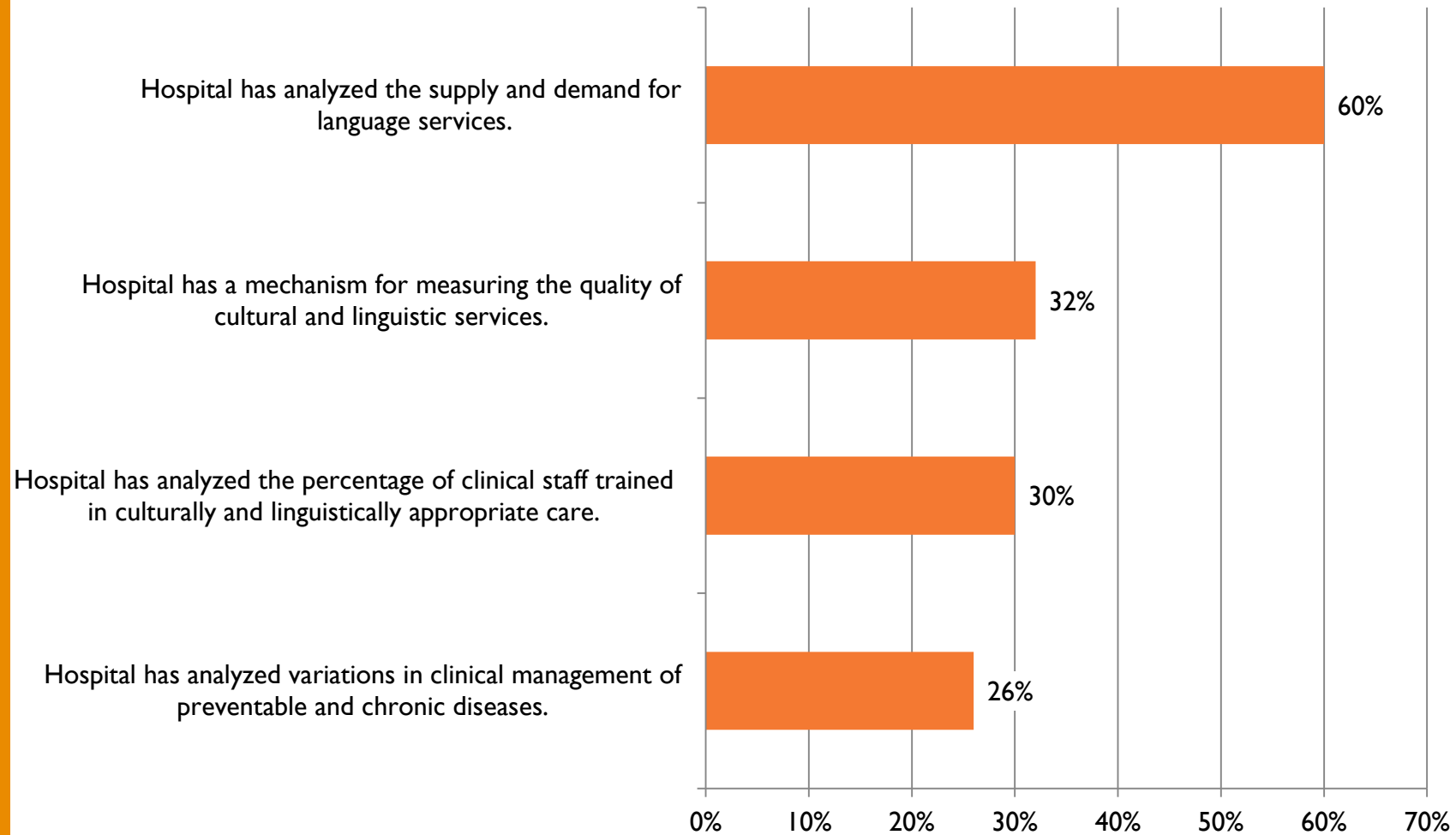
Summary Findings

- Collection of all REAL data – 77%
- Use of all REAL data to benchmark gaps in care – 18%
- Cultural competency training – 45% train in all five cultural competency areas (languages spoken by patients, available language services, diverse health beliefs held by patient populations, religious beliefs affecting health care, and family/community interactions)
- Diversity in governance – 14% minority
- Diversity in management – 15% minority



Appendix A: Data Utilization

Hospitals' Utilization of Data to Address Health Care Disparities

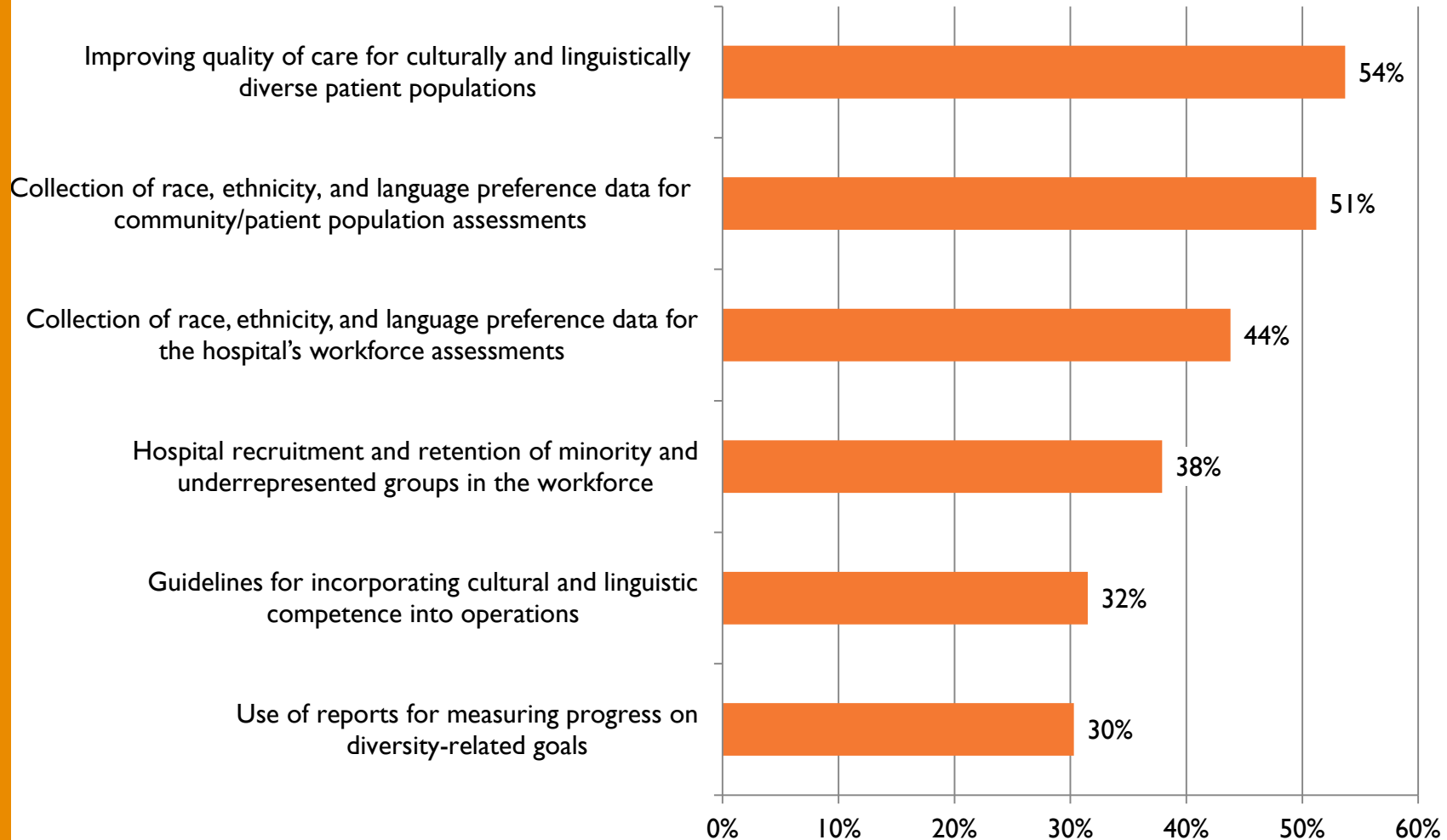


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Appendix B: Strategic Goals

Inclusion of Goals within Hospitals' Strategic Plans

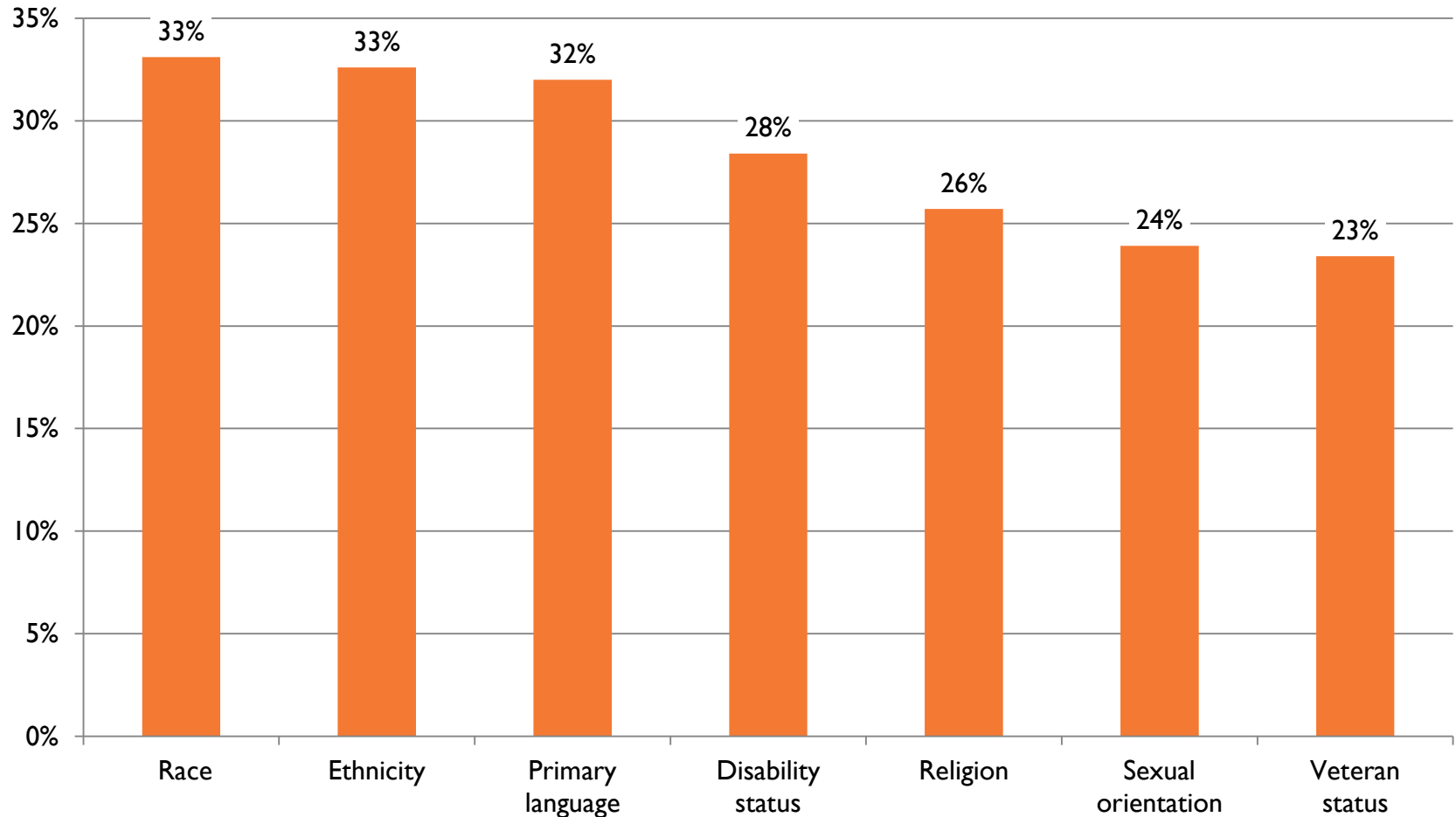


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Appendix C: Strategic Goals

Percentage of Hospitals Using Patient Characteristics Data to Establish a Disparities Reduction Goal



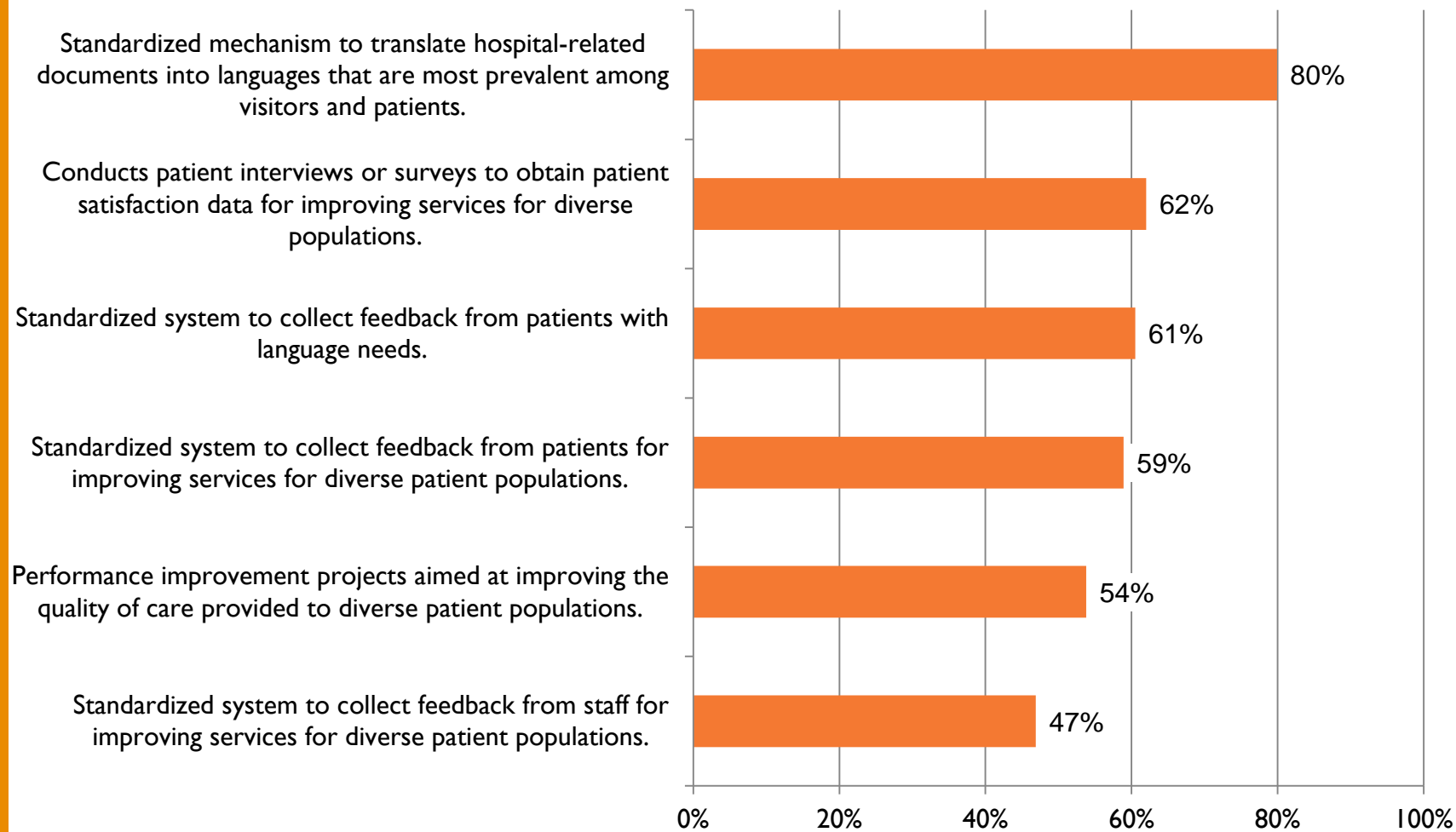
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Appendix D: Reducing Disparities

Hospitals' Efforts to Reduce Racial/Ethnic Health Care Disparities

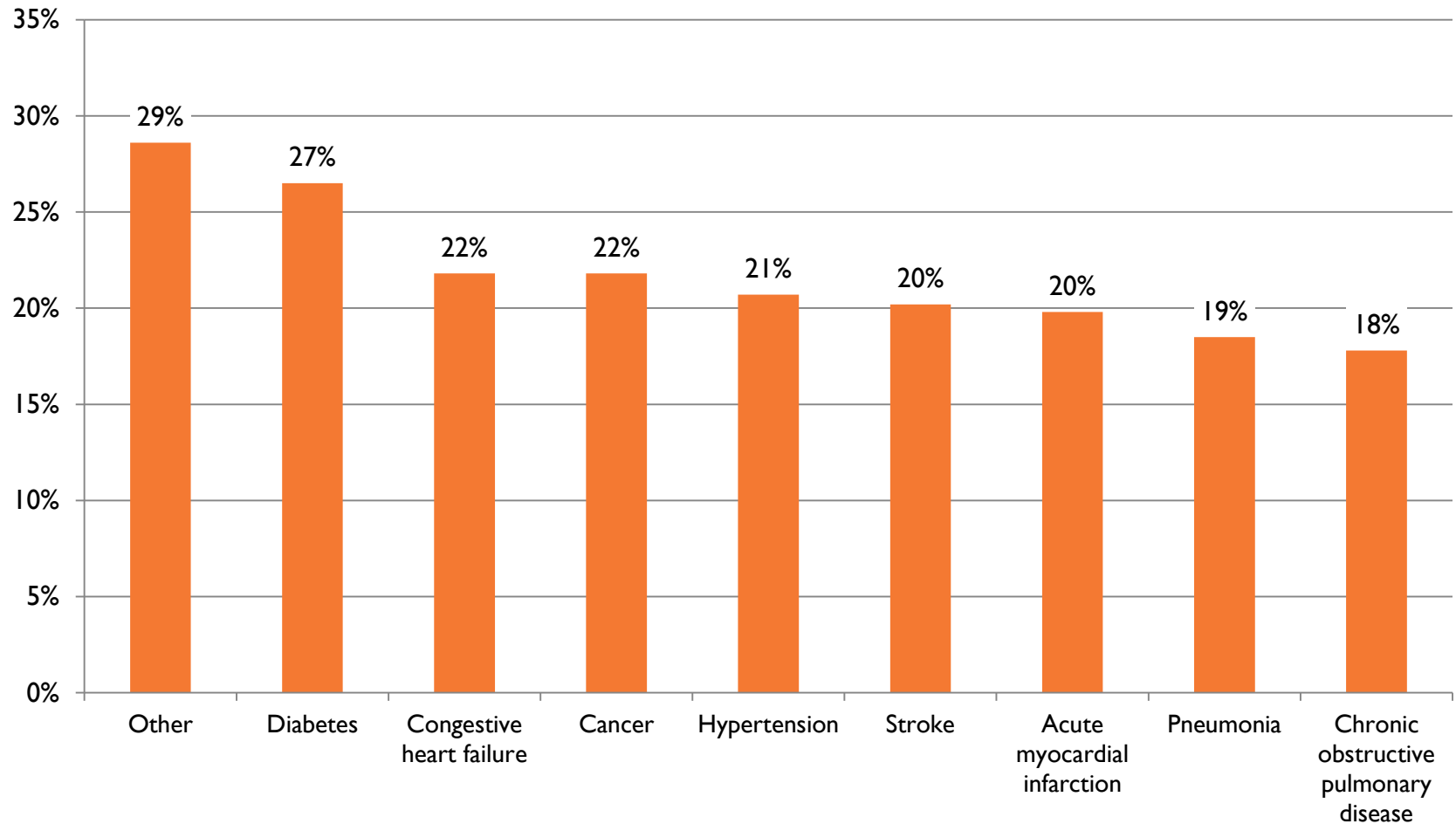


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Appendix E: Reducing Disparities

Disease-Specific Interventions Planned or Implemented by Hospitals to Reduce Racial/Ethnic Disparities



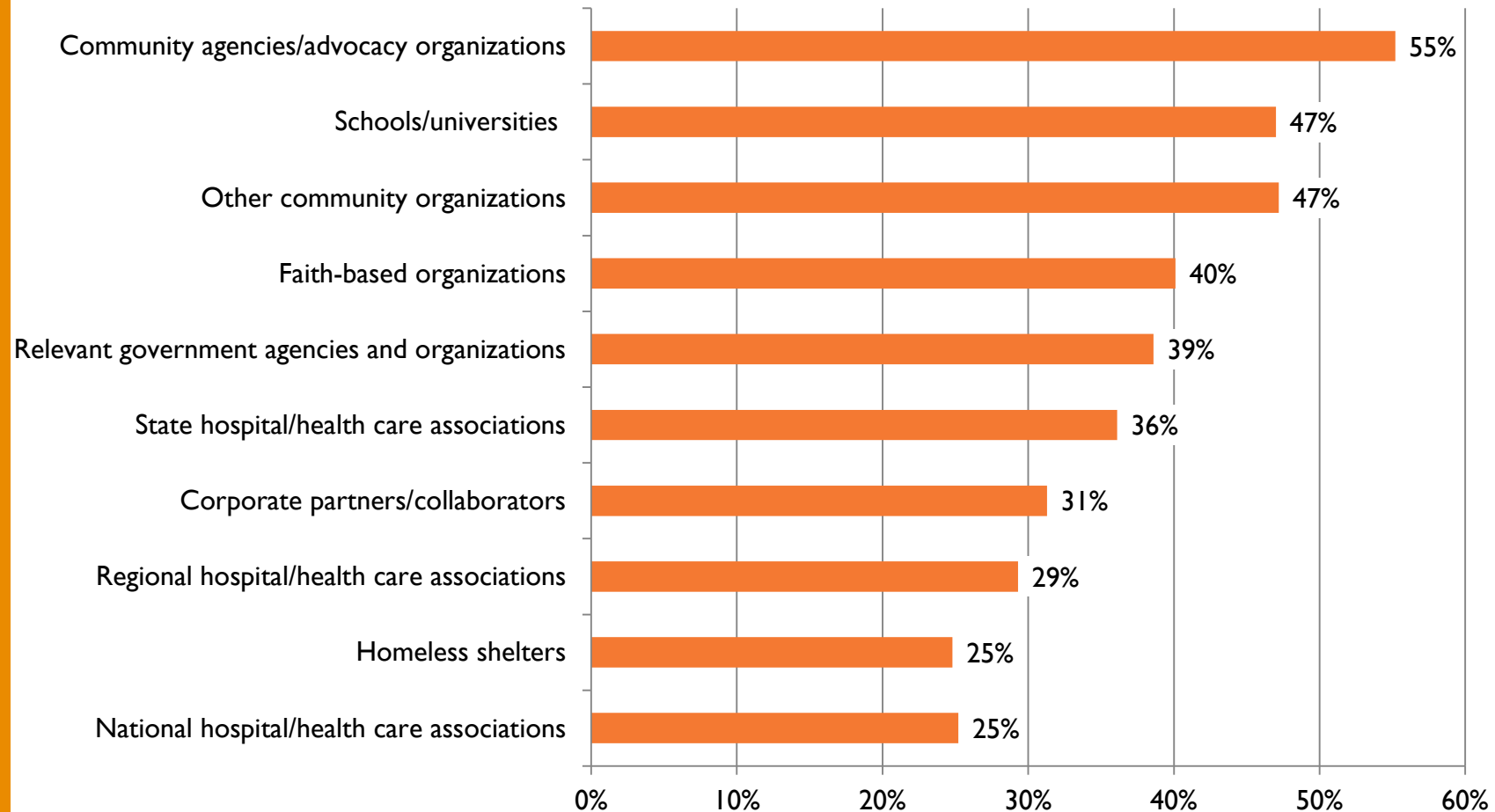
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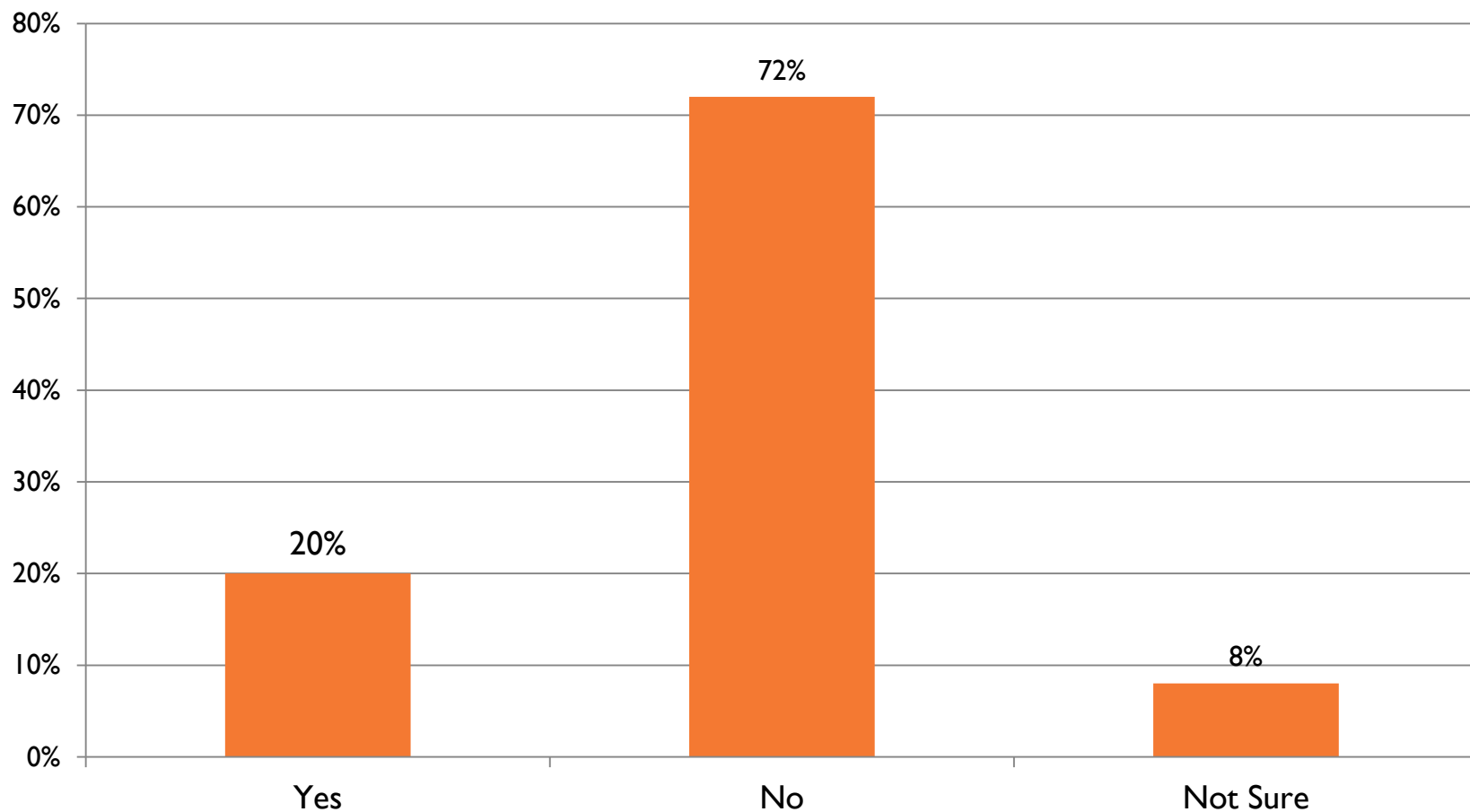
Appendix F: Reducing Disparities

Hospitals' Collaboration with External Organizations to Reduce Disparities



Appendix G: Reducing Disparities

Does Your Organization Have a Community-based Diversity Advisory Council or Committee?

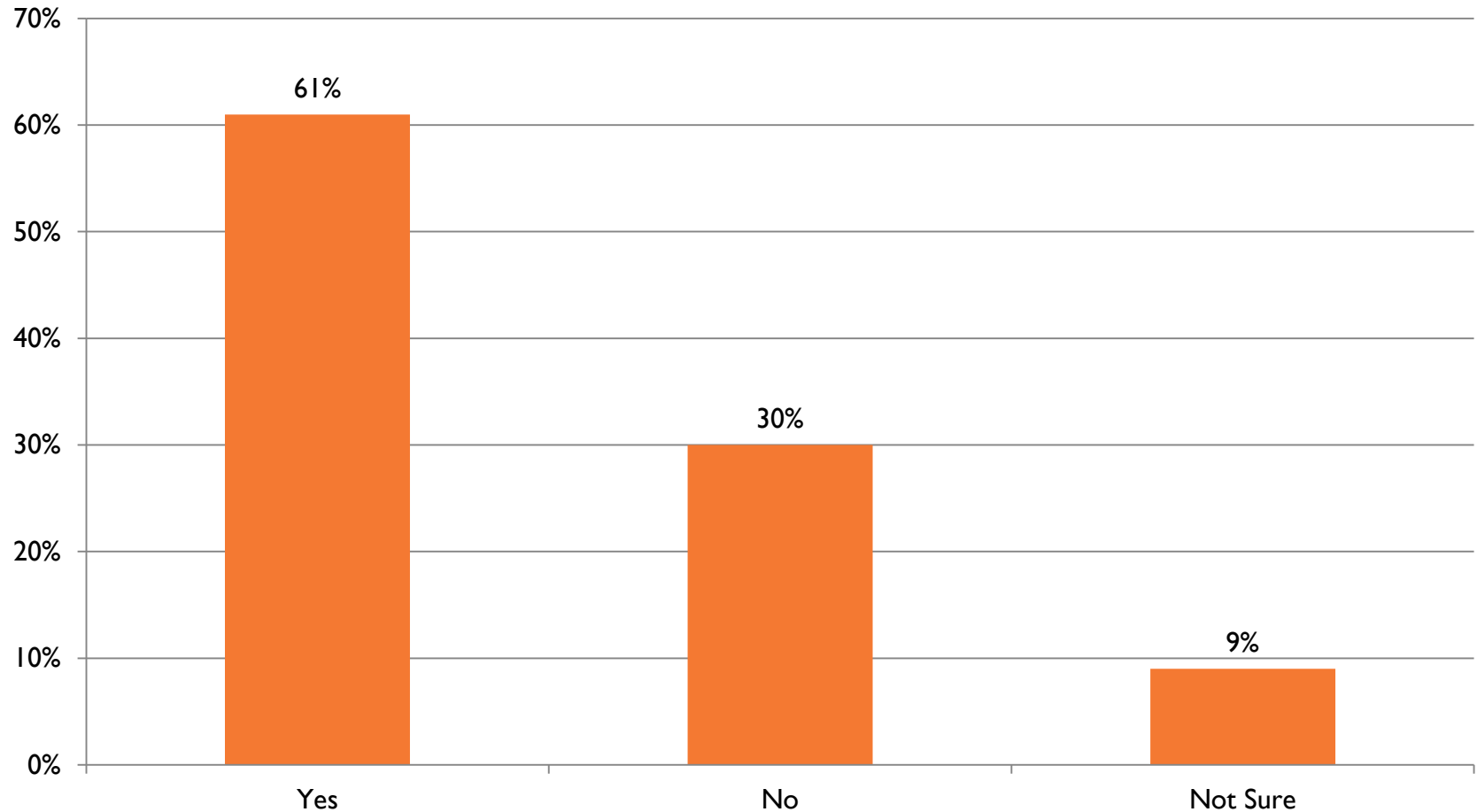


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Appendix H: Cultural Competency

Has Your Hospital Conducted an Assessment of the Racial and Ethnic Demographics of Your Community in the Past Three Years?

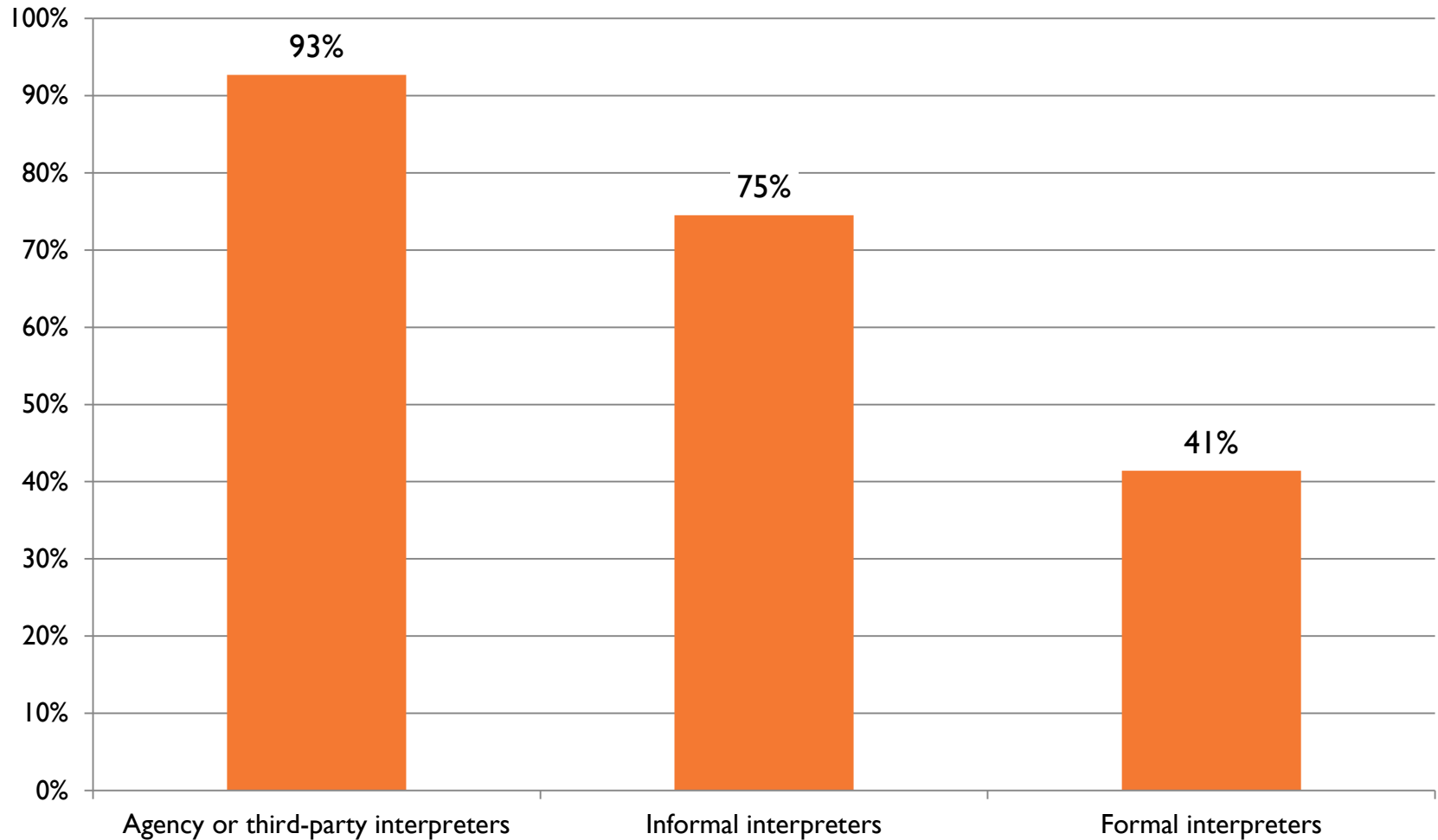


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Appendix I: Cultural Competency

Types of Interpreters Used by Hospitals



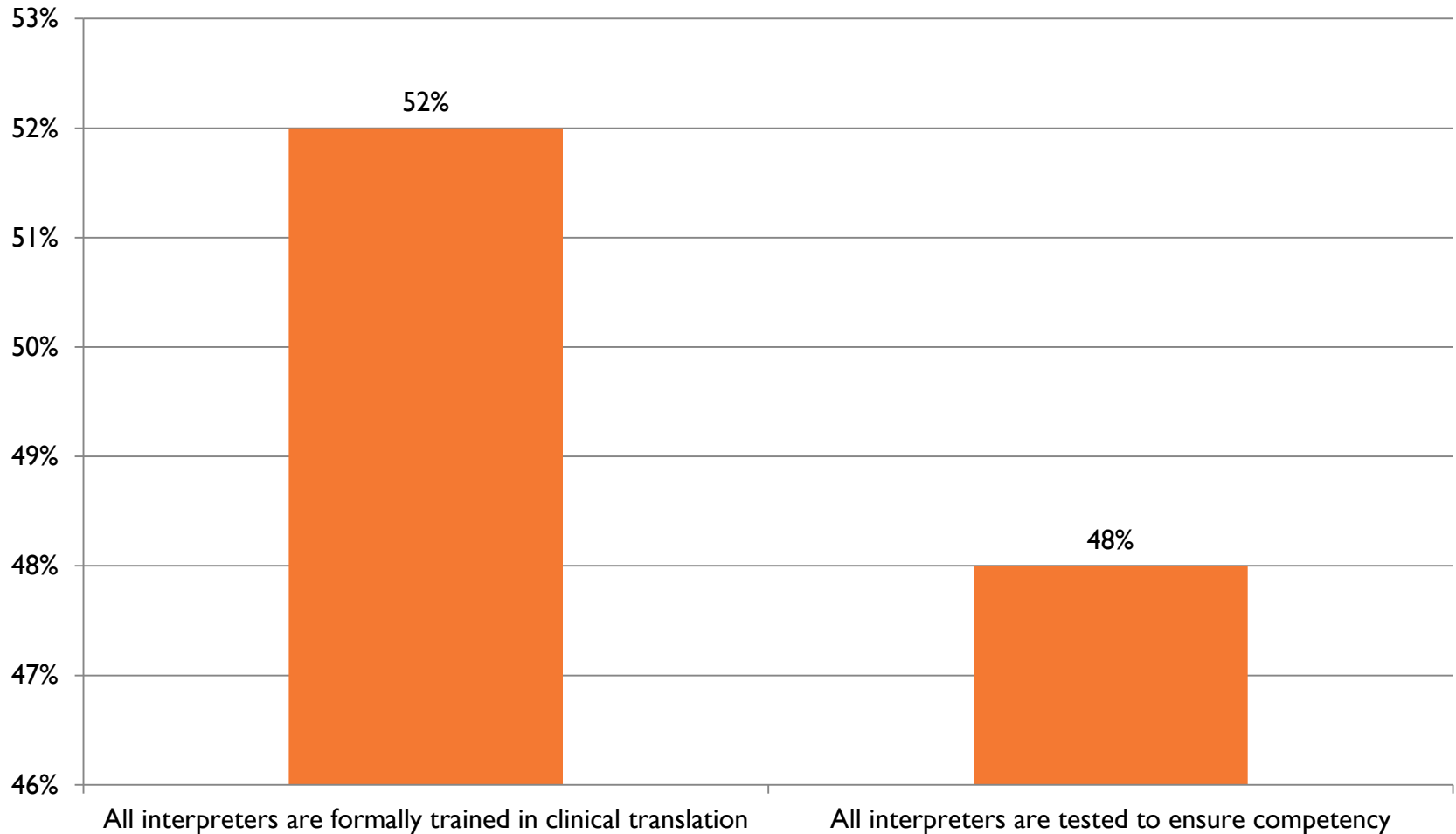
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Appendix J: Cultural Competency

Hospitals' Verification of Interpreter Quality



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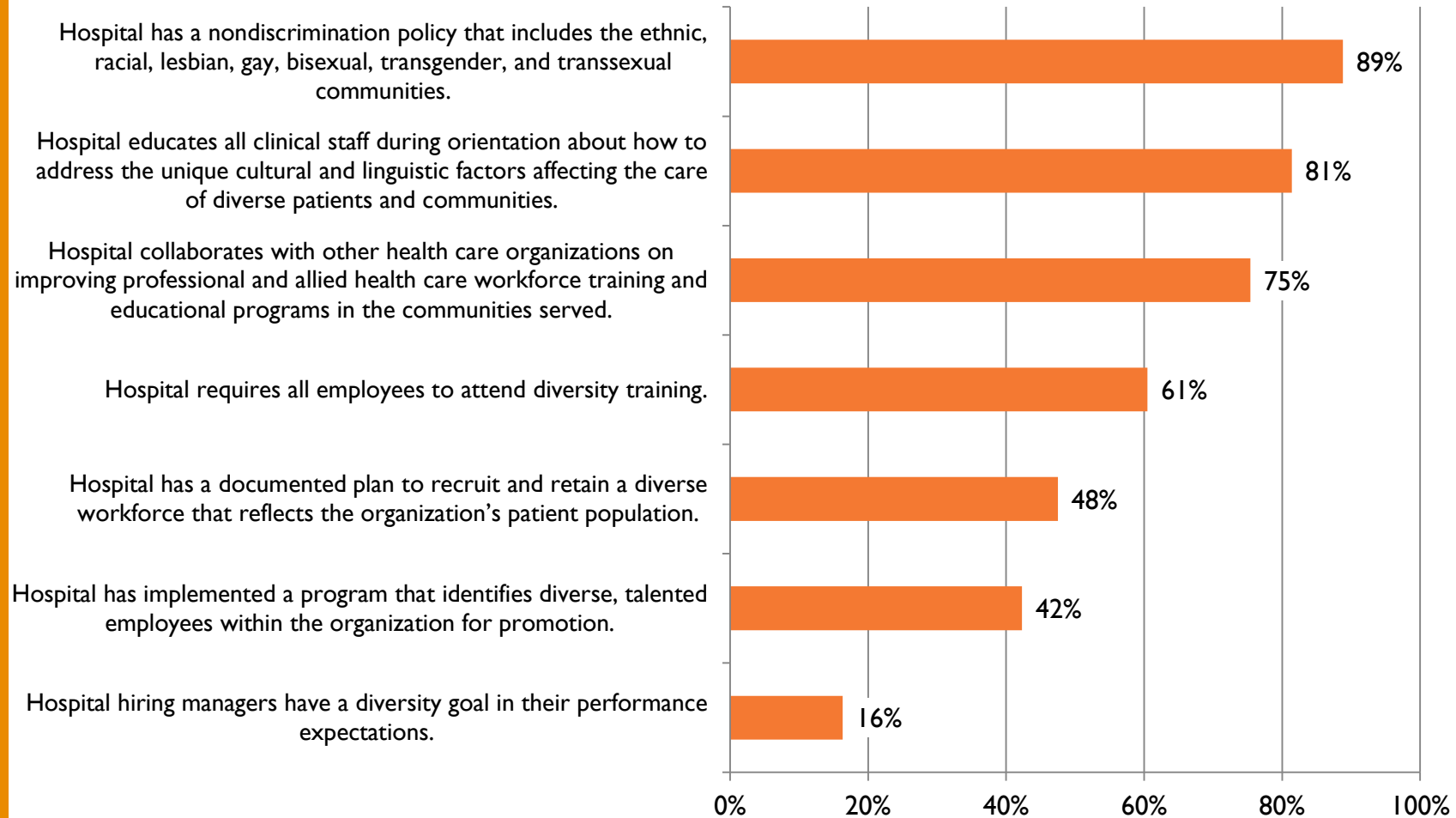
Appendix K: Leadership

Hospitals' Leadership Goals



Appendix L: Diversity Management

Percentage of Hospitals Participating in Diversity Improvement Plans

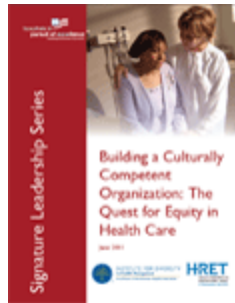


Equity of Care www.equityofcare.org

The AHA is a proud partner of the National Call to Action to Eliminate Health Care Disparities. Under the *Equity of Care* platform's goals to increase:

- The collection and use of race, ethnicity and language preference data,
- Cultural competency training, and
- Diversity in governance and leadership

AHA's *Hospitals in Pursuit of Excellence* will produce reports and guides in support.



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