

**April 25<sup>th</sup>, 2003**

**Meeting One:**

**Present:** Peter Slavin, Joseph Betancourt, Joan Quinlan, Valerie Stone, Deb Washington, Roger Pasinski, Liz Mort, Nancy Connery, Allison Rimm, Evelyn Bonander, Brian French, Anne Richmond, Isaac Schiff, Nakela Cook, Laura Riley, Andrea Reid, Rosalia Chow

The first meeting of the MGH Disparities committee was called to order by Co-Chairs Joan Quinlan and Joseph Betancourt. They welcomed all in attendance and requesting that everyone introduce themselves briefly to the group. The meeting was then turned over to MGH President and CEO Peter Slavin. Dr. Slavin described that he had become increasingly aware of the national data supporting the existence of racial/ethnic disparities in health care—the fact that patients of different racial/ethnic backgrounds, particularly minorities, may be receiving lower quality care than their white counterparts—even when insured and in the health care system. He mentioned recently attending a meeting of the CEO’s of the Council of Boston Teaching Hospitals that was called by Boston Mayor Thomas Menino in which the Mayor encouraged all present to develop a plan to identify and address racial/ethnic disparities in health care within their own institutions. As such, Dr. Slavin had appointed Joan Quinlan, Director of MGH Community Benefits, and Dr. Joseph Betancourt of the Institute for Health Policy and the Multicultural Affairs Office, to co-chair a new “Disparities Committee” that would bring opinion leaders together to discuss potential ways to address this problem. The charge of the Disparities Committee was thus to meet monthly and develop a blueprint to address the issue of racial/ethnic disparities in healthcare at MGH.

Dr. Slavin also stated that there were three potential ways to address this issue.

- ❑ Embark on an initiative to identify whether disparities in fact do exist at MGH
- ❑ Assume that disparities that have been identified nationally are also likely to occur at MGH and thus begin targeted efforts to address them
- ❑ Third, some combination of the first two, in which we try to identify disparities while simultaneously developing projects to address them.

The committee seemed to favor the third option in which action was not precluded by lack of data, and data collection and interventions might occur at the same time.

Dr. Betancourt, who sat on the Institute of Medicine Committee that released a major report in 2002 on racial/ethnic disparities in health care entitled “Unequal Treatment” then presented an overview of racial/ethnic disparities in health and health care, and what we know about our local environment (powerpoint presentation included here). The presentation concluded with various areas where disparities had been proven to exist, and posited several areas and approaches for interventions.

Joan Quinlan then led a committee discussion on how we might address the issue of disparities, including potential target areas, and a process for achieving our work. The summary of the possible approaches to addressing disparities at MGH is presented in table format here.

The meeting was adjourned as Joan Quinlan and Joseph Betancourt promised to check-in with several committee members on possible next steps, in addition to gathering any other baseline information that might be helpful for the committee as it moves ahead on its task.