

**The Committee on Racial and Ethnic Disparities**  
**Minutes June, 3<sup>rd</sup> 2005**

**Present:** Joseph Betancourt, Joan Quinlan, Robin Weinick, Gregg Meyer, Paul Nordberg, Karen Donelan, Michael Barry, Deborah Washington, Anne Richmond, Thomas Sterne, Ellen Forman, Allison Rimm, Donna Perry, Joel Weissman, Jackie Somerville, Isaac Schiff, Gregory Fricchione, Tavinder Phull, Michael Watkins, Roger Pasinski, Win Williams, Paul Nordberg, Angela Maina, Tracy Wimbush

1. Welcome and introductions

2. Committee updates

Quality Subcommittee

- a. Latino Diabetes Initiative: Disparities in diabetes control and management have been identified between whites and Hispanics in Chelsea. A disease management program is under development to address these disparities. A draft proposal has been submitted to the Chelsea group for discussion and input. Key contacts are Drs. Alex Green, Robin Weinick, Sarah Oo and Andrea Avidano (check spelling) from Chelsea.
- b. Disparities Dashboard - The hospital monitors key quality indicators on a quarterly basis and disseminates the findings to hospital leaders. The Committee is working with Decision Support to develop a complementary dashboard that will monitor key disparities indicators. The Dashboard would be issued regularly with approximately 20 measures. The goal is to release the first issue of the Dashboard during the first quarter of the fiscal year 2006.
- c. The **Education and Awareness** subcommittee will have the 3<sup>rd</sup> Annual disparities forum on June 27<sup>th</sup>. The forum, "Racial and Ethnic Disparities in Healthcare: A Patient's Experience with Renal Transplantation", is geared to continue to increase awareness of disparities among MGH providers and staff. A portion of the documentary "Worlds Apart" by filmmakers, Maren Grainger-Monsen, M.D., and Julia Haslett will be featured. It highlights the experiences of Robert Phillips, an African-American patient undergoing dialysis and on the waitlist for a kidney transplant. The documentary feature will be followed by panel presentations by **Mr. Robert Phillips** himself, **Winfred Williams, M.D.**, Director, MGH Interventional Nephrology, Transplant Unit and Chair of the Minority Affairs Committee on the United Network for Organ Sharing (UNOS) and **Angelleen Peters-Lewis, R.N., Ph.D.** (c) Nurse Manager for the MGH Gastrointestinal Endoscopy Unit.
- d. The **Multicultural Advisory Committee**, an outgrowth of the Patient Experience of Care (PCS) and Access subcommittees has met 3 times. A key issue that is raised is the first point of contact at the MGH entrance. The committee feels that this should be addressed to reflect a welcoming hospital. This will be the first thing the committee works on at the next meeting.

Another issue that was raised by Karen Donelan and Jackie Somerville at the cancer center was that support staff seems to say that they actually need help coping with patient loss at

the center. The cancer center training model was suggested as a great training model for support staff training.

### 3. Presentation

- a. Dr. Barry presented on “outpatient quality measures by race using loyal methods”. The study was part of the Primary Care Operations Improvement (PCOI) project. The study surveyed 18 PCPs in 2003 to review their own patient lists over a 3 year period. PCPs were given a choice of “yes, my patient”, “yes, my patient but non-compliant”, “no, not my patient”. A total of 18,529 patients were reviewed. The study then linked patients with PCP or Practice. It also linked patients with cohorts by practice. The study found that patients with a PCP link were more likely to receive preventative screening than patients with a practice link or no link at all. Those patients with no link were least likely to receive preventive screening such as pap smears, mammography or CRC. When the study looked at diabetes implications, patients with a PCP were able to manage their LDL and HbA1c levels better than those with a practice link or no link at all. The study also stratified the PCP and Practice links by race and found disparities exist within MGH.

The study found that adjusting for patient provider type, visits, age, and state, White, non-Hispanic, have the highest proportion of MD linked patients (68%) while Hispanics have one of the highest proportions of practice linked patients (34%) and not linked patients (17%). By linked cohort, non-Whites have higher rates of mammography and cervical cancer screening in the MD linked and most practice linked groups. Colorectal cancer screening is lowest among Hispanics including Chelsea and excluding Chelsea.

### 4. Announcements

- a. MGH has funded a Disparities Center that will be housed at the Institute for Health Policy, MGH and directed by Dr. Betancourt. The RWJF had also shown their support by giving another \$2 million for disparities efforts at the Disparities Center. A formal announcement will be made later this summer.
- b. Congratulations to Michael Watkins, MD, of the MGH Vascular Surgery Department, who has been elected president of the Society of Black Academic Surgeons. This organization is focused on stimulating, mentoring and inspiring young African American surgeons and medical students to pursue careers in academic medicine.

**Meeting adjourned 1:30PM**  
**Next Meeting: November 18<sup>th</sup> 2005**  
**Sweet Room 432 (Gray Bigelow 4<sup>th</sup> Flr.)**