

**July 25th, 2003**  
**Meeting Three:**

**MGH Disparities Committee Meeting**  
**Minutes July 25th, 2003**

**Present:** Joseph Betancourt, Joan Quinlan, Deb Washington, Roger Pasinski, Liz Mort, Nancy Connery, Allison Rimm, Evelyn Bonander, Brian French, Anne Richmond, Isaac Schiff, Nakela Cook, Brit Nicholson, Paul Nordberg, Wanda McClain (Guest), Gregg Meyer, Angela Maina

1. Welcome and Introductions

The meeting was called to order at 12:10PM by Joan Quinlan. Brief introductions of the group members were made. Among the members was a special guest, Wanda McClain from Brigham and Women's.

2. External Updates

**Mayor:** Joan updated the group on the mayor's meeting with CEO's from Boston area hospitals. The CEO's are in the process of nominating one of their own to head the CEO's health disparities committee.

**State:** Rep. Peter Koutoujian (Newton) will be sponsoring a statewide committee to address the health disparities from a state level. Joe testified at the statehouse earlier on this month on health disparities.

**AHA:** The American Hospital Association had a disparities conference call at which Joe, Joan and Peter Slavin had the opportunity to sit in. There was a consensus that MGH is way ahead of the game when compared to other hospitals nationwide.

3. Internal Updates

Joe Betancourt updated the group on the IOM's Unequal Treatment report and emphasized the Quality Improvement issue, which reflects the direction the committee is moving towards. He reminded members of the group of the six pillars that are required in order for quality to be achieved. Quality can be achieved if health care systems are Safe, Effective, Patient Centered, Timely, Efficient and Equitable. At present, the equitable issue is very important.

Brit Nicholson indicated that this committee will present to the Board of Trustees in 2004 within the framework of Quality and Safety and thus it is important to start/continue working on these issues.

Gregg Meyer discussed the Management of Asthma program at MGPO. Efforts have been made to care for all patients with the illness instead of just those with a certain health plan.

Henry Chueh (diabetes laboratories) and Tim Ferris are working together on this as well. QI initiatives include working together with United National Organizational Standards (UNOS) and Consumer Assessment of Human Patient Services (CAHPS).

Paul Nordberg presented on the link to quality measures using patient satisfaction surveys, JCAHO cardiac co-measures. Paul and Katherine Flaherty have adopted the six-pillar format, however collaboration with the disparities committee would be helpful.

Joe Betancourt then presented on additional meetings that he and Joan had attended. The meetings included meetings with, Tim Ferris- MGPO Asthma QI Initiative, Richard Grant- Diabetes Disease Management Program, Valerie Stone- Brainstorming: HIV/ AIDS, Win Williams - Brainstorming: ESRD, Jeff Weilburg, Mike Barry, Nancy Gagliano and Susan Levitan - Brainstorming. There was a consensus that these meetings have brought up several important issues.

#### 4. Priority Setting and Next Steps

Joan Quinlan and Joe Betancourt discussed the priorities that the group needs to set before taking the next step. The proposed next steps include:

- ❑ Imbedding race/ethnicity data collection in all QA and QI projects (DM, Asthma, CHF)- Short term.
- ❑ Link efforts to strategic planning initiative and quality chasm (Short term)
- ❑ Explore patient experiences, satisfaction (short term)
- ❑ Identify additional disparities initiatives and develop funding plan (Long term)

The group discussed the value of these priorities. However, the committee would like to work on a major group activity such as education/awareness to the MGH community in order to let people know that these disparities do exist. This will be discussed further at the next meeting.

Meeting adjourned at 1:30PM. **Next meeting September 26<sup>th</sup> 2003.**