The Importance of Lived-Experience in Achieving Health Equity

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about us

- 181 beds
- Serving 20 county area in SW Ohio
- 398,000+ visits/year
  - 11,200+ surgeries
  - 76,500+ ED visits
- 50+ pediatric specialties
- Magnet designated
- Trauma 1 verified
- 1 of 6 children’s hospitals in Ohio
our mission and vision

our mission is the relentless pursuit of optimal health for every child within our reach.

our vision is reinventing the path to children’s health for families throughout our region and beyond.
The Children’s Hospital Association asserts, the “science of disparity points us to where health happens for families; increasingly, that is outside of the hospital walls.”

Therefore, understanding families and how their lived-experience impacts their health is critical in improving health outcomes.
our story: shifting the power dynamic

• Equity cannot happen without authentically engaging community voice

• Community Health refocused on improving health outcomes

• Internal, external and institutional components
Dayton Children’s Center for Health Equity
Advancing health equity solutions so all children can thrive.

Health Equity Data, Outcomes and Evaluation
Achieving health equity through new approaches anchored to data, outcomes and evaluation
• Create a health equity dashboard for accountability and benchmarking with internal and external indicators
• Create framework(s) to standardize and measure interventions (i.e. QI best practices, data collection, etc)
• Build clearinghouse of ideas and disseminate best practices (internal and external) via research to advance health equity (i.e. health equity symposium)

Hospital as Healthcare Provider
Promoting optimal health through equitable solutions in the clinical environment and hospital policies
• Identify and implement standardized best practices that prevent challenges in community health
• Utilize disaggregated data and patient/family input to identify disparities in clinical care/health outcomes
• Build interventions that focus on most common causes of mortality and chronic disease where health disparities exist (i.e. Asthma, Sickle Cell, etc)

Hospital as Community Partner
Building a path to prevent adverse outcomes and advance equity
• Address the SDoH with greatest impact on health equity through partnership and community engagement (i.e. housing, food access, etc.)
• Engage community partners to build trust in health care system and inform health equity strategies (i.e. CHNA, outreach, etc.)
• Build strategic presence in the community to achieve specific health equity goals (i.e. kindergarten readiness, career readiness, etc)

Hospital as Anchor Institution
Modeling leadership and inspiring action
• Champion equitable business practices as a large, regional employer (i.e. purchasing from minority-owned businesses, living wage, childcare, etc.)
• Invest in economic improvement initiatives in the Greater Old North Dayton neighborhood, and beyond. (i.e. community benefit, housing investments, etc.)
• Advocate for changes in public policy that address the root causes of health disparities.

Catalyzing Values
Data-informed, community-enhanced strategies that authentically incorporate the voice of those with lived-experience
Interdisciplinary learning and ownership to solidify culture of equity and accountability
Health Equity Council
Interdisciplinary and strategic applying a health equity lens
Strategizes and prioritizes outcomes based on available data
Removes barriers for actions and initiatives
Reviews health equity initiatives for continuous improvement
Identifies and empowers health equity action lab teams*
Accountable via the Health Equity Dashboard

Key Contributors
Clinical Excellence/Quality Improvement
Health Informatics
Diversity & Inclusion
Patient Experience
Outcomes Research
Population Health/PFK
Community Health/CHNA
Patient Family/Parent
Senior Leader Champion
defining “community” broadly

• Both inside and outside the walls of the hospital
• Being an authentic, trustworthy and dependable partner
• Challenging ourselves to keep building relationships beyond the common “go-to’s”
community advisory board re-design

• Lift the voice of the vulnerable, underrepresented, and underserved community members about their current needs and concerns related to their health and health care.

• Learn from diverse community stakeholders about their perceptions of the healthcare system.

• Build capacity in stakeholder engagement with health care professionals in work that addresses socioeconomic determinants of health.
Ideas in practice: equity rounds

Perception and Level of Awareness

Health Equity
Inclusive and Equitable Workplace

Culture
### by the numbers

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<tr>
<th>Count</th>
<th>Description</th>
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<tbody>
<tr>
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<td>total number of staff interviewed</td>
</tr>
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<td>38</td>
<td>total number of staff who wish to be updated</td>
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<td>1,090</td>
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<td>35</td>
<td>total number of hours spent on data collection</td>
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a shift in research focus

Advancing equity means bringing in voices that have traditionally been left out...

• Community Engaged Research
  • Leverages methodologies that place an emphasis on inclusion of the community and those with lived experience

• Health Outcomes Research
  • Focuses on the outcomes that matter and make a difference to patients
“hard-wiring” patient and community voice

• Institutional Review Board engagement
  • Community members as co-PIs
  • Updated materials to reflect qualitative work
  • CITI training re-design to engage more community members in research

• Collaboration with community engagement/outreach team
  • Team and community training
  • Data collection by community members and staff

• Building systems to compensate those with lived experience
Ideas in practice: equity action labs

**Prep Phase (2-3 months)**
- Data Collection
  - Needs
  - Interventions and ideas
- Team formation
- Narrowing the focus

**Action Lab! (1.5-2 days)**
- Set ambitious goal (aim)
- Develop potential solutions (ideas to test)
- Develop action plan

**Sprint Phase (approx. 100 days)**
- Implement plan (test ideas)
- Adapt (change plan) as needed to achieve goal
- Weekly team meetings

**Sustain, improve or scale**
- Momentum Lab (1 day)
  - Solidify gains
  - Set new goals

Goal Achieved
# Ideas in Practice: Equity Action Labs

## Prep Phase
- Data Collection (Baseline)
- Focus groups & interviews completed with patient families
- Team formation of clinic champions (see above)

## Action Lab
- Set goal of 90% compliance
- Co-design of process with stakeholders
- Surveys completed with patient families

## Sprint Phase
- Small tests of change (PDSA ramps)
- Adjust process flow as needed
- Weekly team meetings to check in

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**Momentum Lab**
- 1 day
- Reviewed progress and wins

**Sustain, Expand Criteria, and Scale**
accountability: health equity dashboard

One more step in reinventing the path to help children achieve optimal health

Dayton Children’s Center for Health Equity takes commitment to optimal health for all children to the next level with a deep investment in resources, research, strategy and structure. The goal is to better understand the health disparities that exist amongst our children, identify the reasons behind why a child is not thriving and work with the community to provide the support necessary at a much earlier point.

A person’s health shouldn’t depend on their skin color, zip code, level of education or income. Yet so often these factors, sometimes called “social determinants of health,” are what get in between many children in the Dayton area and optimal health, putting them at high risk for diseases such as obesity, diabetes and uncontrolled asthma.

Equity Dashboard Draft V2
- This is not final version for release
- Data on this dashboard does not represent actual data or metrics
- Tables may contain incomplete data
social needs
partnership strength
Questions