Advancing Health & Racial Equity
Health Care Homes

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October 9, 2024

PROTECTING, MAINTAINING AND IMPROVING THE HEALTH OF ALL MINNESOTANS

Land Acknowledgement

Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment. In Minnesota, we are standing on the ancestral lands of the Dakota people. We want to acknowledge the history of this land, including the Dakota, the Ojibwe, the Ho-Chunk, and the other nations of people who also called this place home. Native peoples were removed unjustly, and we in this space are the beneficiaries of that removal. At MDH, as we understand that land is related to health, we want to be a good steward of the land we are on. This acknowledgement is just one piece of that. We understand the systemic racism, historic trauma, and genocide that has impacted Indigenous communities and peoples in our state.

We recognize that a land acknowledgement is a first step. We support this action with resources and shared decision-making to meet Tribal public health priorities and needs. With our Indigenous neighbors and coworkers, we can advance health equity and work to ensure all communities across the state are thriving and all people have what they need to be healthy.

We encourage state employees and the public to research the history of the lands we are on and if you are able, find Native-led events to attend, organizations to support, and causes to champion.

- What does health equity look like in your clinic?

  - Why is health equity important within health care?

DEPARTMENT OF HEALTH

Health Equity: "Health equity is achieved when systems truly support all people and communities to have the opportunity to be as healthy as possible no matter who they are or where they live. This requires understanding the social inequities that impact health in communities, and actively working on those inequities. Every Minnesota community and Tribal nation experience different inequities and require different solutions."
Minnesota Health Equity Network

Structural Racism: "A system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity."
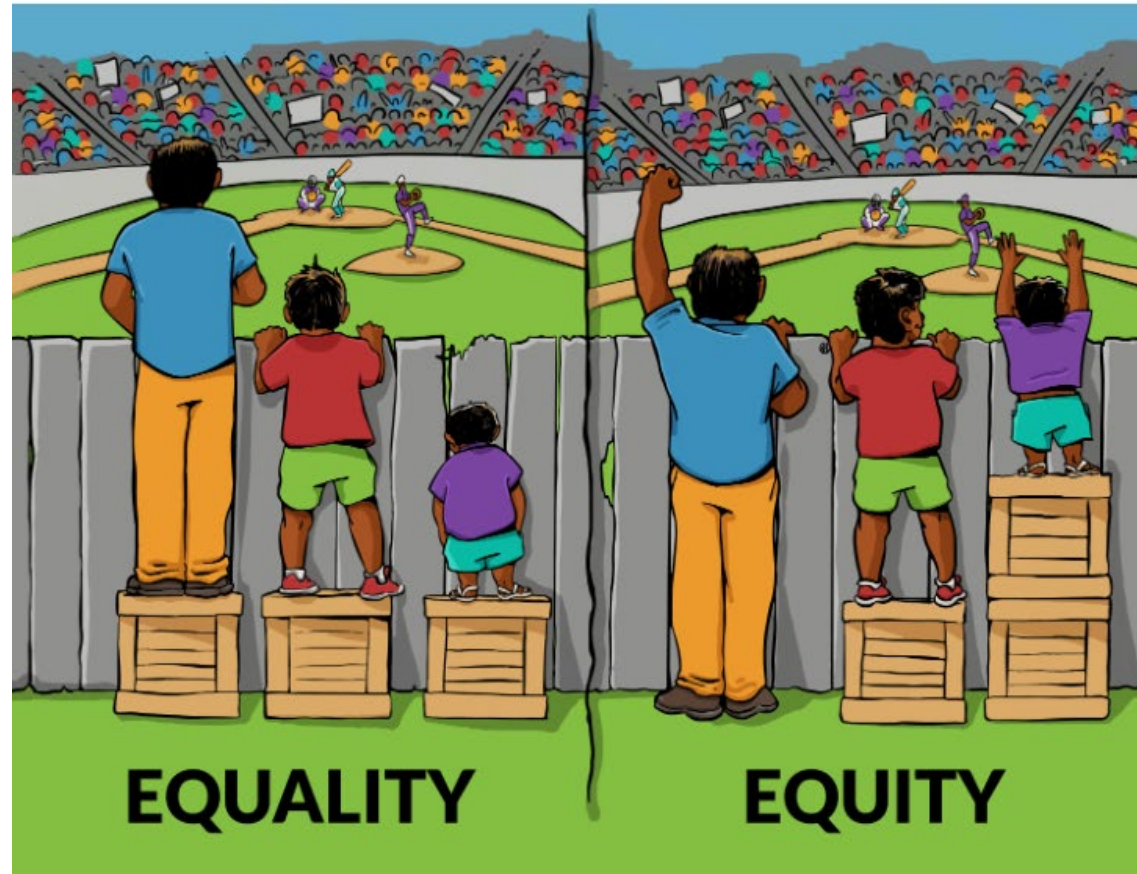
The Aspen Institute. Glossary for understanding and dismantling structural racism

Racial Equity: "Closing the gaps so that race does not predict one's success, while also improving outcomes for all."
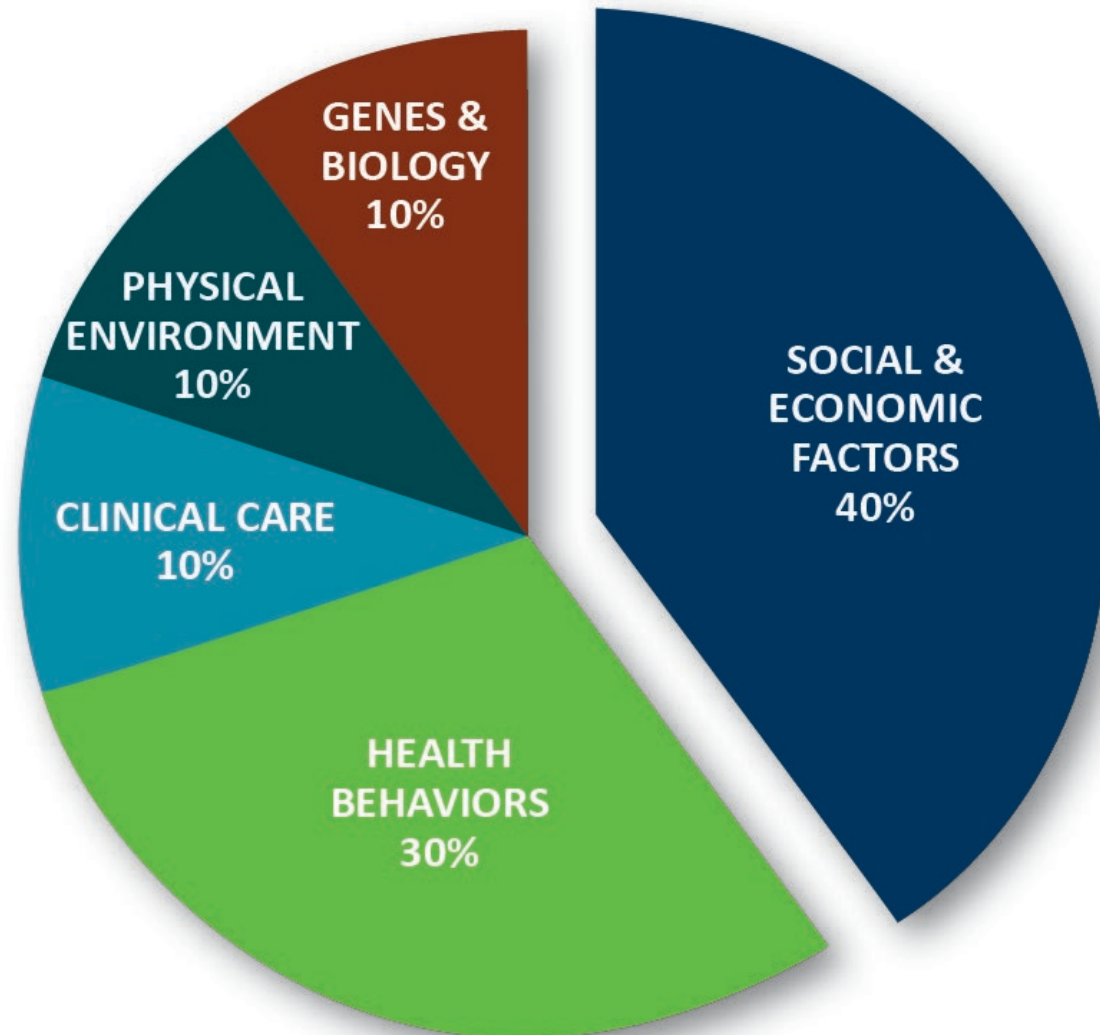*The Aspen Institute. Glossary for understanding and dismantling structural racism*

Interaction Institute for Social Change | Artist: Angus Maguire
interactioninstitute.org and madewithangus.com.

DETERMINANTS OF HEALTH

Necessary conditions for health (WHO)

- Peace
- Shelter
- Education
- Food
- Income
- Stable eco-system
- Sustainable resources
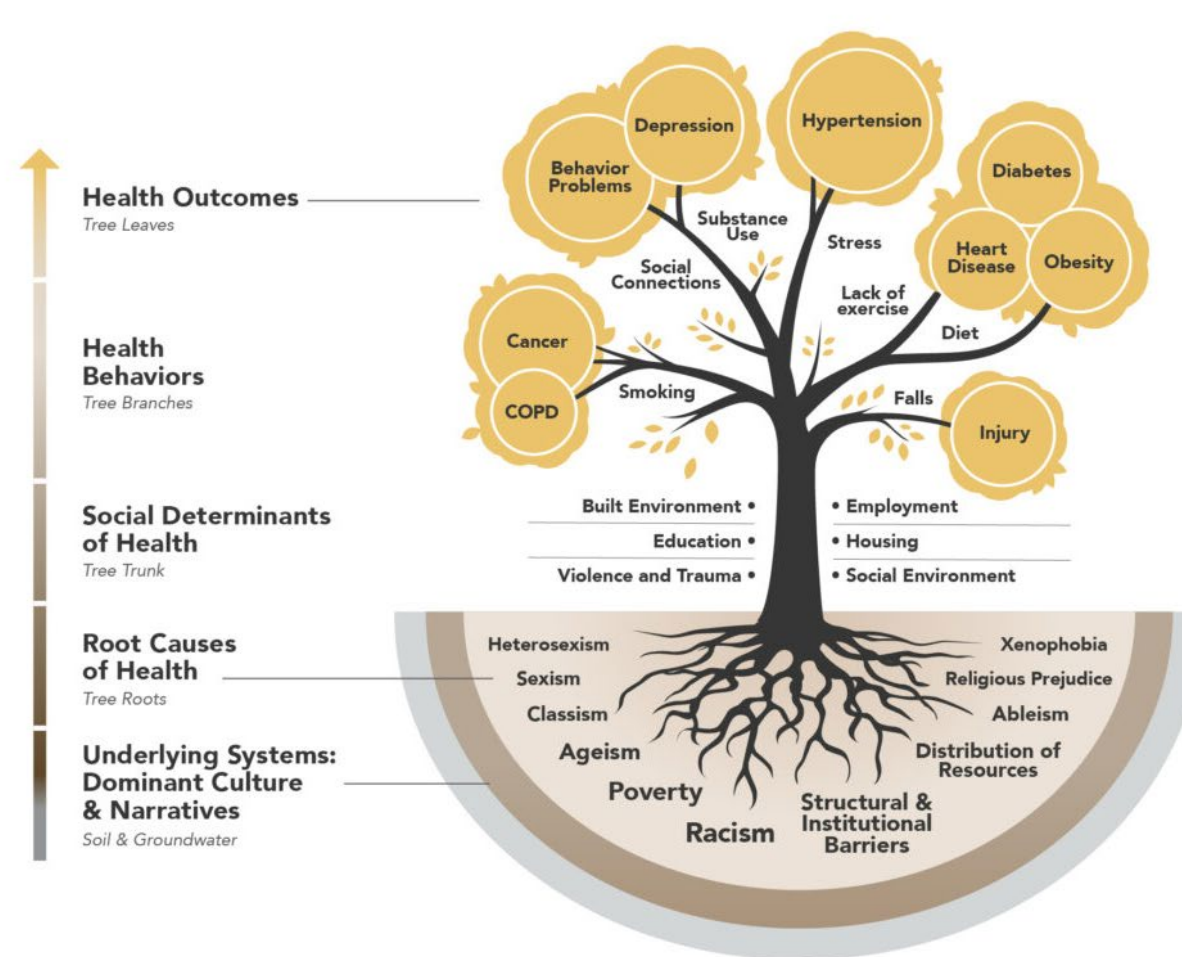- Mobility
- Health Care
- Social justice and equity

Tarlov:
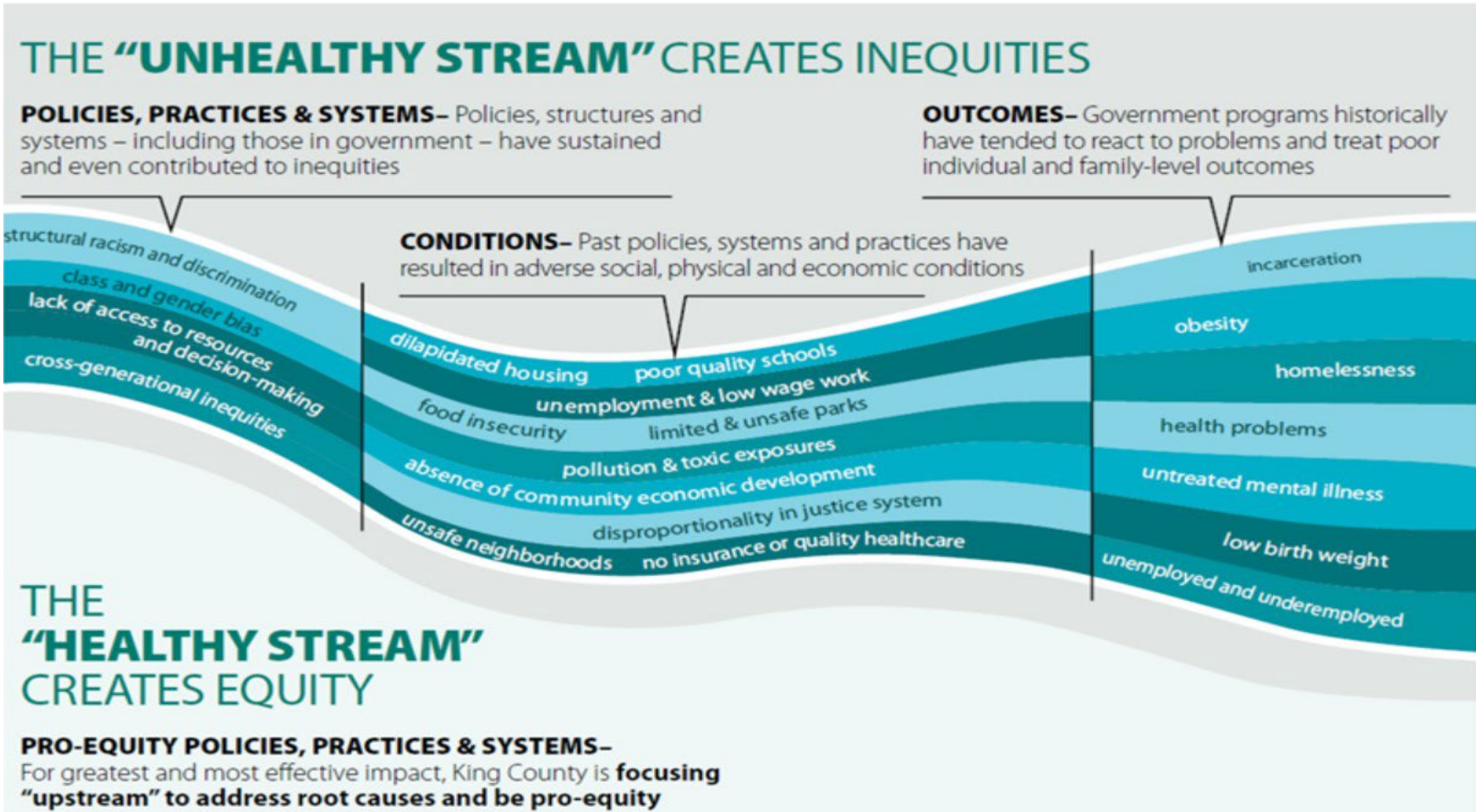https://pubmed.ncbi.nlm.nih.gov/10681904/

Kindig et al:
https://pubmed.ncbi.nlm.nih.gov/18460667/

The Health Tree is adapted by Health Resources in Action from the Human Impact Partners
https://mahealthfunds.org/what-we-fund/

What components of the Health Care Home (HCH) Model advances equity?

HCH Standards

Standard 1 – Access and Communication

Standard 2 – Patient Registry and tracking Patient Care

Standard 3 – Care Coordination

Standard 4 – Care Plan

Standard 5 – Performance Reporting and Quality Improvement

Embedding equity within health care

- Buy-in and continued engagement from leadership

- A shared understanding and use of explicit language to define structural racism

- Effective organizational infrastructure

- Clearly defined metrics

- Building internal capacity and professional development

Source: Harvard Kennedy School: Antiracist Institutional Change in Healthcare Institutional Antiracism and Accountability (IARA) One-Year Study (March 2023)

Antiracist accountability compass
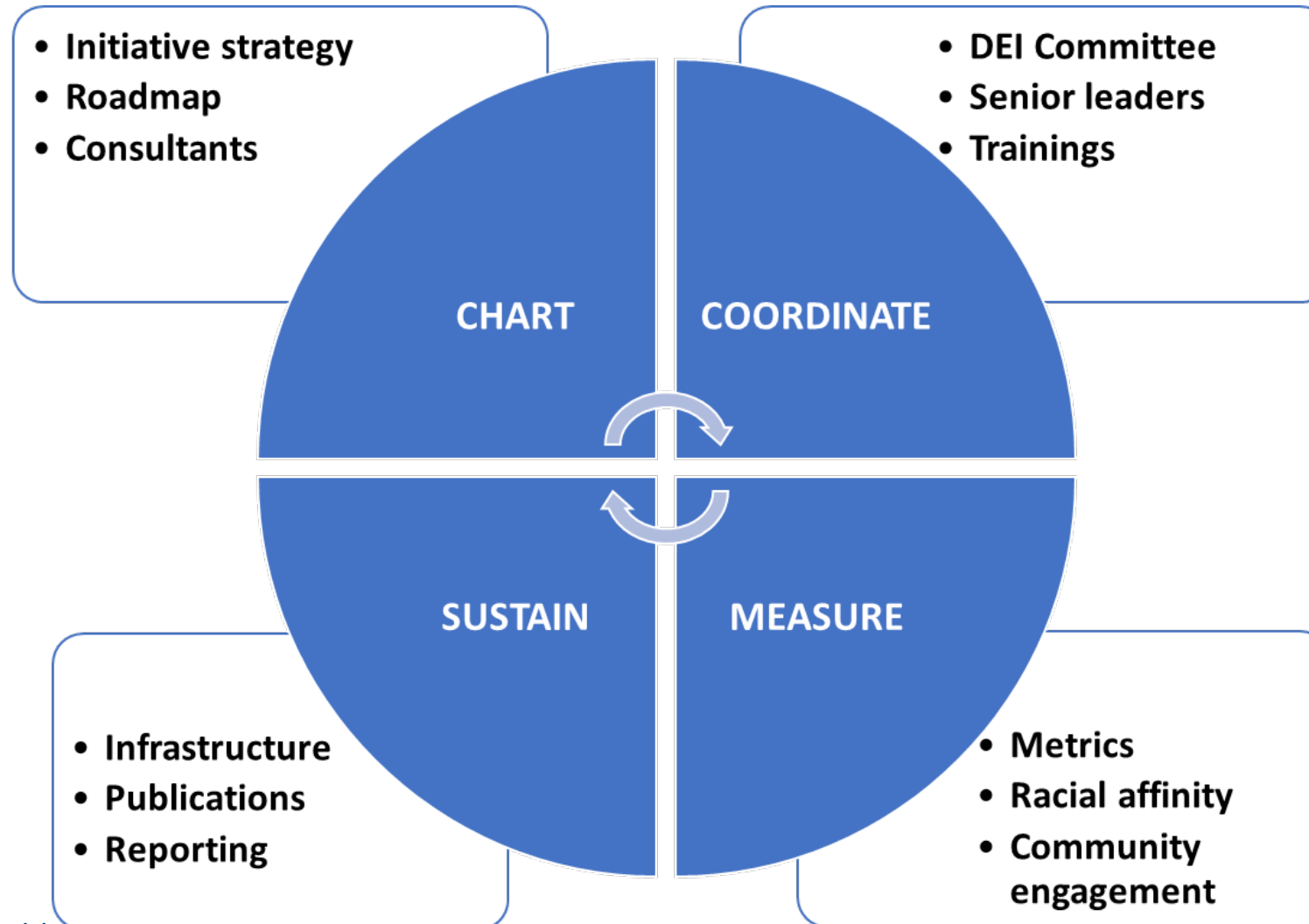
- **Promote patient-centered, culturally humble care**

  - Involving patients in decision making, offering flexible scheduling options, and considering how their needs beyond the medical setting drive their care plans.

  - Training staff

  - Recruiting diverse staff

  An Action Guide to Disrupt Inequitable Health Outcomes

Address the social determinants of health in care model

- Understand how social and economic factors impact patient's lives

  - Create equitable access and quality care

  - Utilize community health worker

An Action Guide to Disrupt Inequitable Health Outcomes

Invest in the wellness of health care professionals

- Constraints of resources and stress
- Exhaustion may reflect the quality of care
- Provide tools and resources for burn out

Embedding equity within health care (cont.)

Take action!

Ensuring that community members and leaders are at the table

Prioritize health equity within HCH's strategic plans, equitable care, target health disparities

Monitor and measure health outcomes, policies and practices

Hold health care leaders and staff accountable

An Action Guide to Disrupt Inequitable Health Outcomes

A moment of reflection

What can YOU do to advance health equity in your workflow and with patient interactions?

Resources

- Health Care Homes

- Adaptive Leadership – NACCHO

- Antiracist Institutional Change in Healthcare – Ash Center (harvard.edu)

- Practice innovation strategies: Physician burnout | American Medical Association (ama-assn.org)

- Resources | Pathways to Population Health Equity (publichealthequity.org)

- Studio Profile (pfizer.com)

- An Action Guide to Disrupt Inequitable Health Outcomes

- Session 2: Tuesday October 22, Noon – 1:00 pm

Fostering Belonging within the Workplace and within Health Systems

- Session 3: Thursday November 7, Noon – 1:00 pm

Opportunities for Community Engagement in Health Care Systems

Thank you!

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