

HPOE *Live!*

2016 Webinar Series

The presentation will begin shortly.

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Achieving Health Equity

HPOE *Live!* Webinar
October 12, 2016

Brian Donley, MD
Chief of Staff

Le Joyce Naylor, MA, CCDP/AP
Chief Diversity Officer

Charles Modlin, MD, MBA, FACS
Director, Minority Men's Health Center, Cleveland Clinic Glickman Urological &
Kidney Institute

Objectives

- Provide an overview about Cleveland Clinic
- Discuss alignment with the goals of the American Hospital Association's Call to Action and the #123ForEquity Pledge
- Describe key programs implemented to decrease disparities in care



<https://youtu.be/gCi2BMty78Q>

About Cleveland Clinic

MORE THAN **150** NORTHERN OHIO OUTPATIENT LOCATIONS,
 INCLUDING **18** FULL-SERVICE FAMILY HEALTH CENTERS
 AND **3** HEALTH AND WELLNESS CENTERS



9 REGIONAL HOSPITALS

Akron General Hospital	Lodi Hospital	South Pointe Hospital
Euclid Hospital	Lutheran Hospital	AFFILIATE HOSPITAL –
Fairview Hospital	Marymount Hospital	Ashtabula County
Hillcrest Hospital	Medina Hospital	Medical Center

VITAL STATISTICS:

2015 ANNUAL REPORT DATA FROM ACROSS THE CLEVELAND CLINIC HEALTH SYSTEM

PEOPLE:

		3,432 PHYSICIANS AND SCIENTISTS
		14,107 NURSES
		49,166 EMPLOYEES

PATIENT CARE:

6.62 million	OUTPATIENT VISITS
164,704	ACUTE ADMISSIONS
208,807	SURGICAL CASES
1,437	BEDS ON MAIN CAMPUS
4,362	BEDS SYSTEM-WIDE



“Patients First” is

- Safe Care
- High Quality Care
- Patient Satisfaction
- High Value Care





Mission, Vision & Values

Our Mission

To provide better care of the sick, investigation into their problems, and further education of those who serve.

Our Vision

Striving to be the world's leader in patient experience, clinical outcomes, research and education.

Our Values

- Quality
- Teamwork
- Integrity
- Innovation
- Service
- Compassion

2016 Cleveland Clinic

U.S. News & World Report

- Ranked #2 nationally; #1 in Ohio; #1 in Cleveland
- #1 in Cardiology & Heart Surgery; 22nd consecutive year
- 9 specialties ranked in top 3
- Ranked in 14 specialties
- Cleveland Clinic Children's ranked in 9 pediatric specialties



2016 Awards & Recognitions

Becker's Hospital Review/Becker's ASC Review
150 Great Places to Work in Healthcare

2016 WORLD'S MOST **ETHICAL COMPANIES**™
WWW.ETHISPHERE.COM

LEADER IN **LGBT HEALTHCARE EQUALITY**
HUMAN RIGHTS CAMPAIGN FOUNDATION 2016
HEALTHCARE EQUALITY INDEX™

DiversityInc
2016 TOP 10
HOSPITALS AND HEALTH SYSTEMS



AMERICAN INDIAN SCIENCE AND ENGINEERING SOCIETY
TOP 50 STEM WORKPLACES
WINDS OF CHANGE MAGAZINE
2016

ERG & Council Honors Award™
Top 25 RECIPIENT
2016

North Coast 99
HONORING 99 GREAT WORKPLACES FOR TOP TALENT IN NORTHEAST OHIO

 **MSDC** | OHIO MINORITY SUPPLIER DEVELOPMENT COUNCIL

 **CareerSTAT**
JOBS FOR THE FUTURE AND THE NATIONAL FUND FOR WORKFORCE SOLUTIONS


Recognition Professionals International

Diversity & Inclusion Integration



REaL Data Collection & Use

Multidisciplinary
Collaboration

—

Electronic Medical
Records (EMR)
Best Practice

CC Children's
School-Based Health



Taussig Cancer Institute
Community Outreach



REaL
Data

Developing Our Pipeline



Healthcare+
Pathways



NEOREMA



Science
Internship
Program



Clinic
Solutions



Aspiring
Physicians
& Research
Scientists
Conference



Cultural Competence

GOAL:
Provide Best Care,
Improve Outcomes &
Promote Engagement

**Online &
Instructor-Led
Trainings**

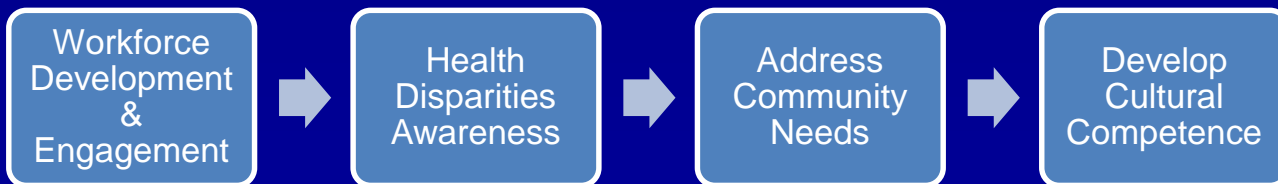
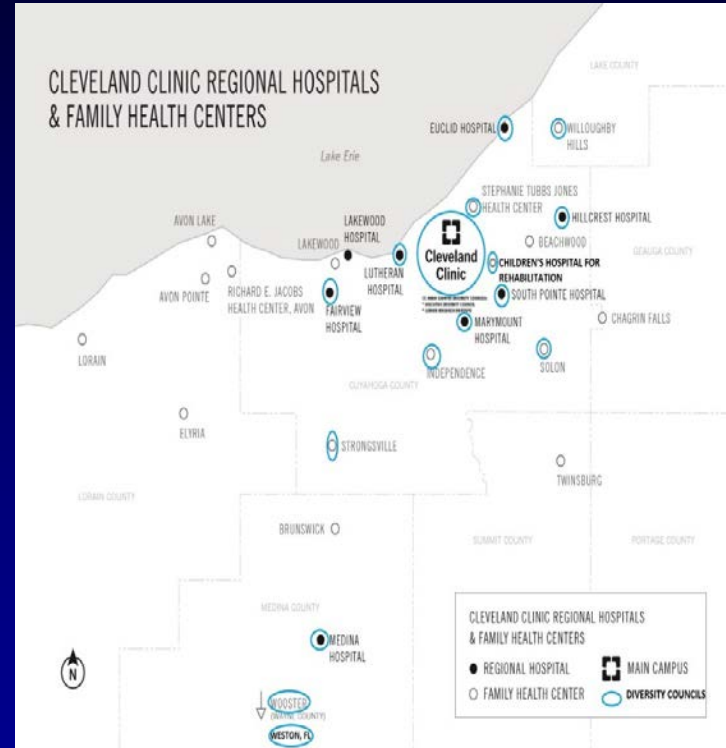
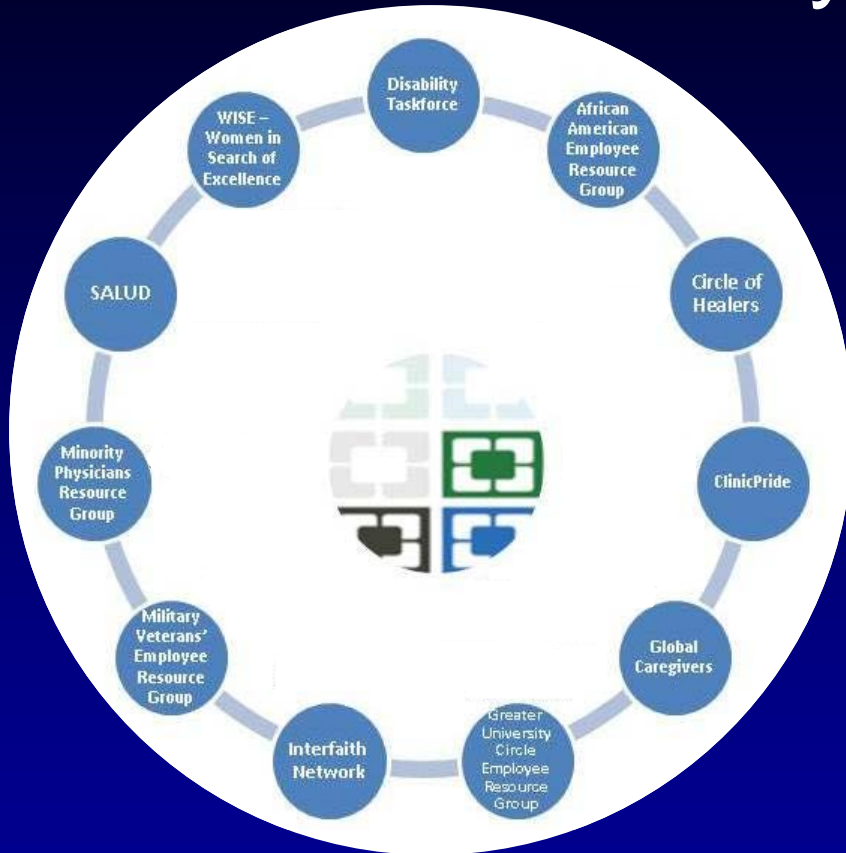
2016

- Unconscious Bias
- Health Equity
- Health Disparities
- Population Health

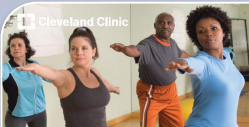
**Language
Enrichment
Programs**

- Spanish
- Arabic
- Accent Modification
- English as a Second Language

Employee Resource Groups & Diversity Councils



Employee Resource Group-Led Initiatives



Save the Date
Thursday, October 29th
AAERG and SALUD
Employee Health and Wellness Dialogue

Did you resolve to get healthier in 2016?
Do you know the steps needed to receive your healthcare premium discount?
Need information on how to reduce your healthcare premiums?
Understand the flu shot requirement and your options?

Event Details
When | Thursday, October 29th, 2015
Where | Lerner Research Institute
Room NA1-140 (first floor)
Time | 12noon to 1pm
Parking validation will be provided

This event is brought to you by the African American Employee Resource Group and SALUD in collaboration with Employee Health and Wellness.

For more information email SALUD@ccf.org or call 216.445.7318

Look no further and register today. Hold your seat and enter for a chance to win a \$75.00 Gift Card

Click [here](#) to confirm your registration for this event.

Winners must be present for the duration of dialogue to qualify. Gift cards will be awarded at this event.



Lesbian, Gay, Bisexual and Transgender Health

Mission

We provide comprehensive and compassionate care for all patients regardless of sexual orientation or gender identity. Lesbian, gay, bisexual, and transgender (LGBT) patients have historically been an underserved community with unique health needs. We aim to eradicate long-standing health disparities while furthering the care, research, educational, and service goals of the Cleveland Clinic enterprise.



[Overview](#) [Health Care Disparities](#) [For Patients](#) [Contact](#)

We provide world-class healthcare through a multidisciplinary, team-based approach for LGBT patients in partnership with our clinical Institutes. Our providers are committed to creating a safe environment that maintains the respect and dignity of all patients.

Minority Health Taskforce AAERG / SALUD

To improve future health outcomes and health engagement for our caregivers and their families.

ACTiVHOS SALUD

The only fully bilingual health and wellness program for children in region to combat risks of asthma, diabetes, obesity & malnutrition.

LGBT Health Site ClinicPride

Information on health disparities in LGBT population, community resources, and list of CC physicians with specialty interest.

Community-Based Programs



Glickman Minority Health Center

Minority Men's Health Fair



City & County Health Coalitions



Langston Hughes Center

Why Healthcare Disparities?

- Patient and Provider Factors
 - Cultural Competence
 - Health Literacy
 - Historical Factors/Unconscious Bias
 - Socioeconomic
 - Health Insurance
 - Access
 - Education
 - Environment
- Systemic Factors
 - Genetics/Biology
 - Diversity of Healthcare Workforce
 - Minority Patients in Research Trials
 - Awareness of Disparities

Health Disparities in African Americans (AA)

- Compared to general population
 - 44% more AA die from cancer
 - 30% more AA die from heart disease
 - 180% more AA die from stroke
 - Incidence of kidney failure is 4 times greater for AA
- Race/ethnicity influence a patient's chance of receiving procedures and treatments
 - AA are 13% less likely to have coronary angiography
 - AA are 33% less likely to have bypass
- Among appropriate candidates for transplantation, African Americans
 - Are less likely to be referred for evaluation
 - Are less likely to be listed (account for only 28% of new listings)
 - Are less likely to receive a transplant
 - Have higher wait times, rejection rates (50% higher), lower survival

CC Minority Men's Health Center

- Clinical delivery of patient care
- Facilitated patient access/clinical community outreach
 - Geared toward disease prevention & patient recruitment
- Health disparities social determinants of health research
 - Encourage minority participation in research
 - Encourage partnerships with investigators
- Education outreach
 - Patient, community & health providers
 - Cultural competency Training
- Mentorship and training of minority candidates
 - Physician recruitment
 - Student health professions careers mentorship

Minority Men's Health Fair

2012 MINORITY MEN'S HEALTH FAIR

at the Cleveland Clinic

Video courtesy of Greg Lockhart, Frame By Frame Video Productions

<https://www.youtube.com/watch?v=SCwPYxzd4cA>

Best Practice #1

- Recognize existence, causes & impact of health disparities in minority populations



Congressman Louis Stokes,
Health Equity Lecture Forum, Established 2006

Best Practice #2



THE CLEVELAND CLINIC
FOUNDATION

MINORITY HEALTH
MENTor

A Publication of The Cleveland Clinic Glickman Urological Institute No. 1 2004

Dear Friends,
Welcome to the first issue of our newsletter devoted to improving the health of minority men.

This newsletter will inform you about community events as well as the activities and services available to you at the Cleveland Clinic Glickman Urological Institute Minority Men's Health Center.

Our goal is to be your mentor on the road to improved health, but we cannot do this without you.

We encourage you to take advantage of the screening services, patient education and community outreach that will be available to you through the Minority Men's Health Center.

In addition, be aware of the lifestyle choices you make that increase your risk for prostate cancer, high blood pressure, diabetes, kidney and heart disease. To reduce your risk for these diseases, avoid a diet high in fat and salt, don't smoke, get regular exercise, and see a physician or health care professional on a regular basis.

We hope this newsletter is helpful to you. Please share it with your family and friends.

Charles Modlin, M.D.
Oluwanti Aladesanmi, M.D.
Co-medical directors,
Minority Men's Health Center

Minority Men's Health Center Established

On June 30, 2004, The Cleveland Clinic took a bold step. It became one of the first major medical centers in the country to create a Minority Men's Health Center.

Housed in the Glickman Urological Institute, the new Center is dedicated to eliminating racial and ethnic inequalities in health. It intends to accomplish this goal with a team of physicians and other health professionals who are culturally competent. In other words, these medical professionals are sensitive to the differences that exist between racial and ethnic groups and know how to address them. They also know the importance of patient education and community outreach. Finally, they are committed to effective treatments that can be developed.

For far too long, the health concerns that are unique to minority men have not been addressed. These facts cannot be disputed:

- African-American men are 66% more likely than Caucasian men to develop prostate cancer. African-American men also are more likely to suffer serious complications from the disease and, ultimately, to die from it.
- In addition, African-American men have higher rates of high blood pressure.

The Minority Men's Health Center will initiate a number of community outreach efforts designed to educate and benefit minority men.

We are committed to helping minority men gain access to the services they need. For more information, please call 216/444-6400.



Retired U.S. Congressman Louis B. Stokes (left) was a special guest at the dedication of the Minority Men's Health Center. Mr. Stokes is pictured with Congresswoman Stephanie Tubbs Jones and Charles Modlin, M.D., co-medical director of the Health Center.

- Vision, commitment & institutional/self-belief that *You Can Make A Difference*

Best Practice #3

- Develop health provider/organizational cultural competence
 - Culture strongly influences communication & interactions between patients and their health providers



Best Practice #4

- Minority physician leadership visibility & availability

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"With early detection, more and more cancers can be cured."
—Charles Modlin, M.D.

Spring Screening

Annual checkups help ensure early cancer detection—and cures

Although some forms of cancer can afflict individuals of any age, some become more prevalent as people get older. Consequently, physicians stress the need for older persons to get cancer screenings and pay extra attention to their overall health.

"Historically, if you were told you had cancer, you thought it was your death sentence," says Charles Modlin, M.D., director of the Cleveland Clinic Glickman Urological Institute at Huron Hospital. "But that doesn't have to be the case today. With early detection, more and more cancers can be cured. We have more sophisticated diagnostic tools, treatments and surgical techniques. And a lot of money can be saved in healthcare costs."

Case in Point
In general, by age 50, men should get screened for prostate and colon cancers, and women for breast and cervical cancers. Smokers should be screened for lung cancer. Some cancers exhibit no or very subtle symptoms until they are to advanced stages, so screenings help with early detection. Also, because of the higher rate of cancers among African Americans, due to more prevalent risk factors, screenings for prostate cancer should begin by age 40, Dr. Modlin adds. Those risk factors include genetics, lack of accessible and affordable healthcare, smoking, dietary habits, and environmental issues. Early screenings also are warranted for anyone else with such risk factors, he says.

Get Involved
It is essential that patients play a more active role in maintaining their health, Dr. Modlin says. "Patients need to become empowered, knowledgeable and proactive. They need to understand the role and benefits of screenings, the risk factors for cancers, and the tests involved, and have knowledge about the diseases."

During screenings, an individual's medical and personal information is gathered for use by physicians to determine whether more in-depth examinations are needed for a potential medical problem. People need not be fearful about screenings because of concerns about a cancer diagnosis, he says.

Only a few decades ago, cancers were discussed in hushed tones among patients, physicians and family members. Many feared cancer was contagious, given lack of knowledge about causes and lack of effective treatment. Those days are over.

Dr. Modlin says, "Many types of cancer can be 100 percent curable if detected early," he says.

The American Cancer Society recommends that all men, beginning at age 50, have an annual prostate screening. African American men should begin at age 40. To schedule a screening, contact your primary care physician. If you do not have a physician, please call Medline at 440.312.4533 or go to www.huronhospital.org.

Screening Process
In preparation for your annual screening, be sure to locate detailed information about your family's medical history to help your physician understand your healthcare needs.



Charles Modlin, M.D., urges patients to play a more active role in maintaining their health.

4 | healthwise connection | spring 2007

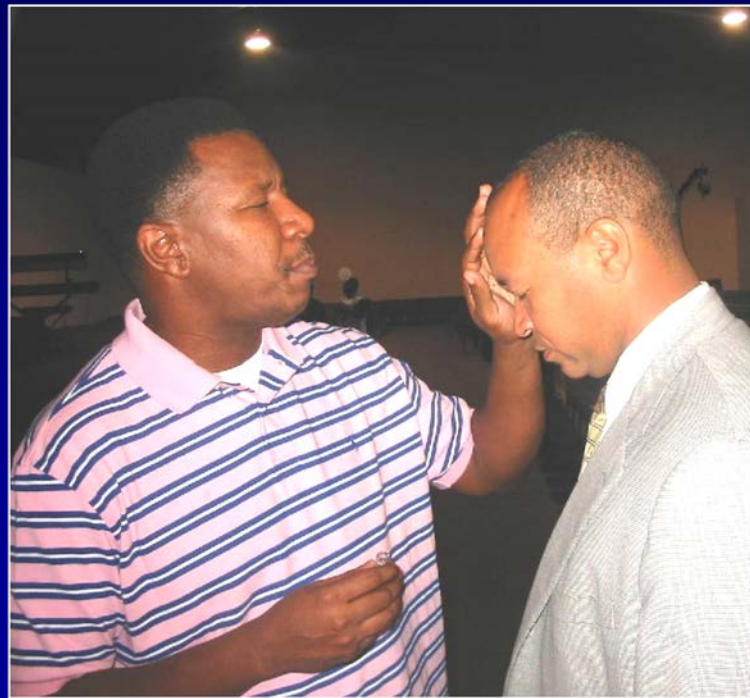
www.clevelandclinic.org/hwc | spring 2007

www.clevelandclinic.org/hwc | spring 2007

healthwise connection | 5


Best Practice #5

- Become part of the community; build trusting relationships



Best Practice #6

- Develop community partnerships & collaborations with church, fraternities & corporations



100 Black Men Walk to Better Health


Join the Cleveland Clinic along with 100 Black Men of Greater Cleveland and the United Pastors in Mission in a walk to greater health for Black men.

Men from all over the Greater Cleveland area will be walking to the 6th Annual Minority Men's Health Fair, hosted by the Minority Men's Health Center and Charles Modlin, M.D., of the Cleveland Clinic. By becoming involved you are making awareness for an often overlooked problem—disparities in minority men's health.

WHO:
The Glickman Urological & Kidney Institute's Minority Men's Health Center, Cleveland Clinic, 100 Black Men of Greater Cleveland, United Pastors in Mission

WHAT:
A Walk to the Minority Men's Health Fair. The fair will include free preventative screenings for prostate cancer, heart disease, diabetes, lung health, and more.


WHEN/WHERE:
The walk is scheduled to begin 6:30 p.m. at the Antioch Baptist Church, located at 4800 Cedar Ave (corner of 9th and Cedar). The walk route will run from 9th to Carnegie and Carnegie to E. 190th street.



The 6th Annual Minority Men's Health Fair will run from 5 p.m. to 8 p.m. April 19, in the Lobby of Cleveland Clinic's CofC Building, also known as the A Building, located on East 190th Street between Build and Carnegie Avenues.

To register for the fair, visit www.clevelandclinic.org/mmh
If you have a question, call 216-444-1286.

Please join us in making Cleveland a healthier place.



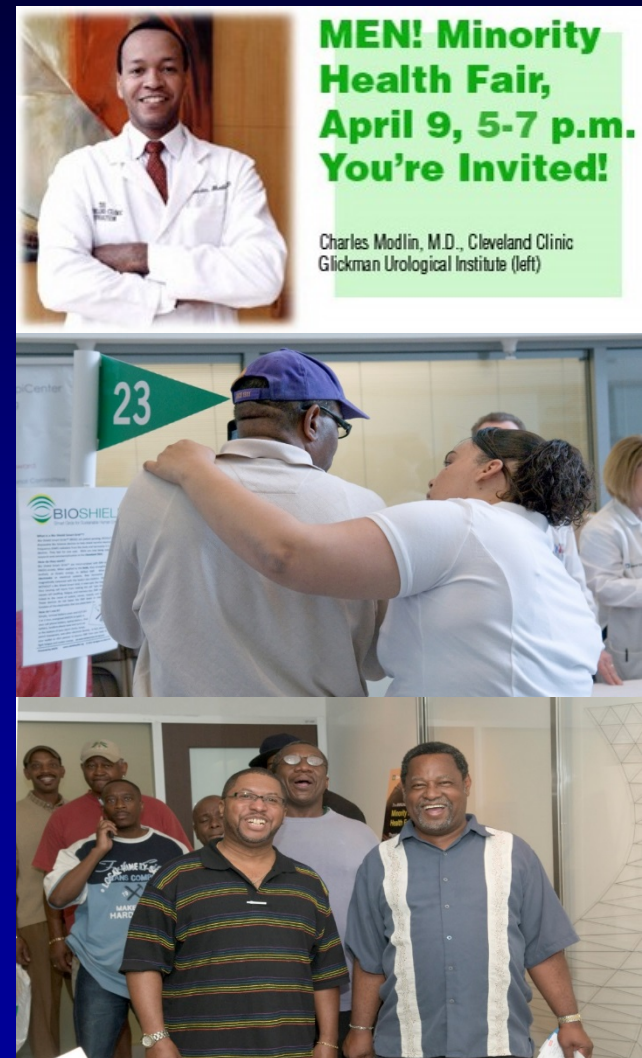
Best Practice #7

- Build teamwork & volunteerism
 - Urology
 - Nephrology
 - Medicine Institute
 - Wellness Institute
 - Pastoral Care Services
 - Social Work
 - Pharmacy
 - Division of Nursing
 - Nutrition Services
 - Governmental & Community Relations
 - Diversity
 - Bioethics
 - Biostatistics
 - Cleveland Clinic Lerner College of Medicine
 - Lerner Research Institute



Best Practice #8

- Facilitate patient access with preventive health screenings & health education
 - Only source of health assessments for many men
 - Opportunity for early detection of disease & connection to care



“Every Life Deserves World Class Care”



- Empower minority men to take action
- Provide patient navigation
- Enhance the patient experience
- Foster individual & institutional commitment
- Build trust & relationships



Best Practice #9

- Provide health education outreach to improve health literacy
 - Increase awareness of preventive health
 - Promote healthy lifestyles
 - Promote participation in clinical trials by minorities
 - Promote awareness of family medical history



Best Practice #10

- Create a communications strategy & marketing campaign to increase awareness about health disparities

Have a health issue?
Don't keep it from your doctor.

MENTion It.

This survey was given to 502 U.S. men aged 18 and older from June 9 to 12, 2016. The sample's margin of error is +/-4.37% at the 95% confidence level.

 Cleveland Clinic

health.clevelandclinic.org



**The First Step to Correcting
Health Disparities is to
Know They Exist**

“Dr. Charles S. Modlin Jr., MD, F.A.C.S., MBA, Transplant Surgeon”



Best Practice #11

- Empower the community to be an advocate for health



Cleveland Clergy Ambassadors
Health Education Program

Best Practice #12

- Leverage translational medicine expertise & coordination to address health disparities



Best Practice #13

- Encourage Minority Patient Participation in Clinical Research Trials
 - Genetics, environmental & cultural factors may lead to racial differences in response to medications



Best Practice #14

- Develop future healthcare leaders through mentorship programs



Best Practice #15

- Support community leadership to become health advocates



2012 Minority Men's Health Center
Community Health Advocates

Best Practice #16

- Promote health policy advocacy



**United States Congressional Black Caucus,
U.S. Capital, Washington, D.C.**

Best Practice #17

- Increase awareness & knowledge about family support systems of family medical history



Best Practice #18

- Develop & evaluate research strategies to improve health outcomes



Modlin CS. Addressing Disparities in Health Care Cleveland Clinic Journal of Medicine January 2012 vol. 79 (1): 44-45.

Best Practice #19

- Be innovative. Look to see *how you can* improve outcomes
 - Kidney transplantation surgical techniques to expand donor pool
 - Promote organ donation
 - Race/ethnicity & patient experience

Best Practice #20

- Put it all together



Never Give Up

Lessons Learned

- Achieving equity of care is a collaborative multi-year process
- Conducting baseline gap assessment is critical
- Relationship-building & being inclusive in process = buy-in
- Provide ongoing education about health equity
- Integrate health equity goals into organizational strategies
- Highlight and leverage successes
- Meet patients/community where they are



Cleveland Clinic

Every life deserves world class care.

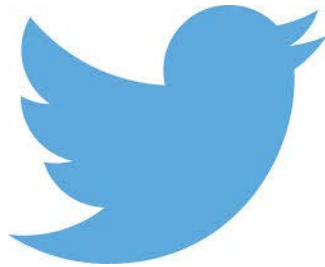
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<https://www.surveymonkey.com/r/hpoe-webinar-10-12-16>

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2016 Webinar Series

Upcoming HPOE Live! Webinars

- November 2
 - [The Quality Journey of AHA's Quest for Quality Honorees](#)
- November 8
 - [A Look Behind the Curtain: Health Care Reform and the Path to Equity](#)

For more information go to www.hpoe.org