

Diversity & Disparities: A Benchmark Study of U.S. Hospitals

http://www.hpoe.org/diversity-disparities





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Executive Summary

- In 2011, the Institute for Diversity in Health Management, an affiliate of the American Hospital Association (AHA), commissioned the Health Research & Educational Trust (HRET) of the AHA to conduct a national survey of hospitals to determine the actions that hospitals are taking to reduce health care disparities and promote diversity in leadership and governance. Additional funding was made possible from the ARAMARK Charitable Fund at the Vanguard Charitable Endowment Program, Health Forum and HRET.
- The survey results offer a snapshot of some common strategies used to improve the quality of care that hospitals provide to all patients, regardless of race or ethnicity.





Executive Summary (cont.)

- The survey results highlight that, while more work needs to be done, advancements are being made in key areas that can promote equitable care, such as collecting demographic data, providing cultural competency training, and increasing diversity in leadership and governance.
- This overview provides data to help the health care field focus attention on areas that will have the most impact and establish a benchmark to gauge hospitals' progress in the coming years.





Survey Methods

- Data for this project were collected through a national survey of hospitals mailed to the CEOs of 5,756 institutions, which represented all U.S. registered hospitals at the time of the survey.
- The response rate was 16% (924 hospitals), with the sample generally representative of all hospitals.
- All data are self-reported.





Collection and Use of REAL Data

- Overall, hospitals appear to be actively collecting patient demographic data, including:
 - race (94%);
 - ethnicity (87%); and
 - primary language (90%).

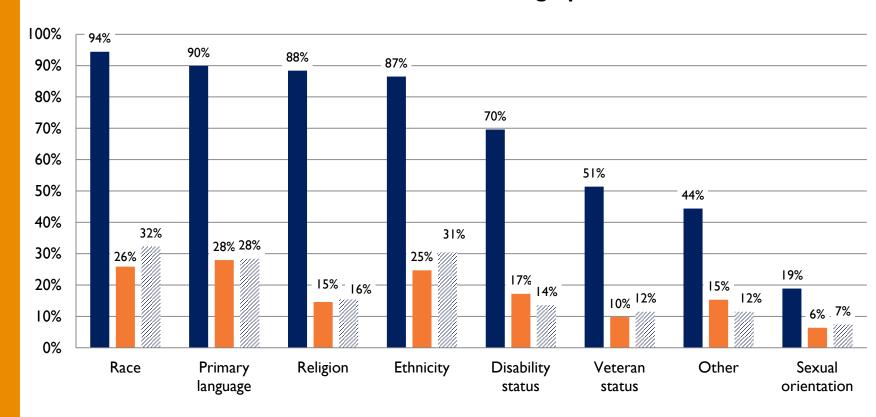
- Use of REAL is just beginning.
 - Data used to benchmark gaps in care for:
 - race (26%);
 - ethnicity (25%); and
 - primary language (28%).





Collection and Use of REAL Data (cont. I)

Collection and Use of Patient Demographic Data



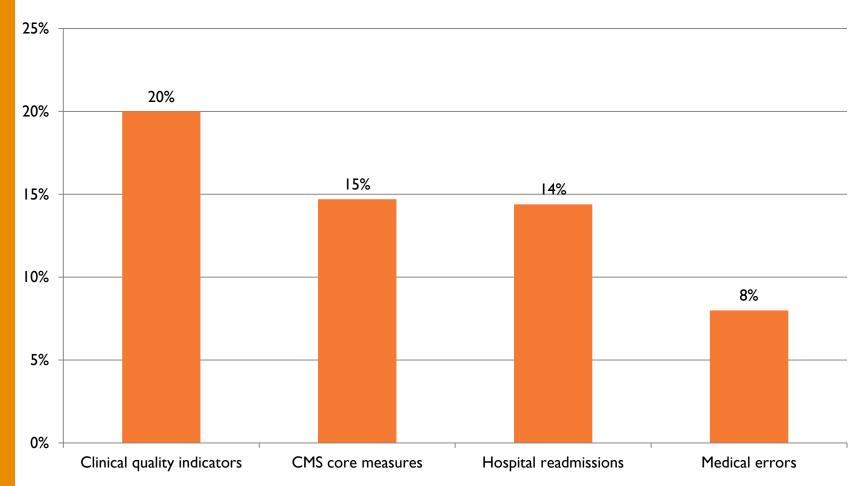
- Data collected at first patient encounter
- Data used to benchmark gaps in care
- Data used to analyze demographics of patient satisfaction surveys





Collection and Use of REAL Data (cont. 2)

Hospitals' Analysis of Data by Race/Ethnicity to Identify Patterns







Cultural Competency Training

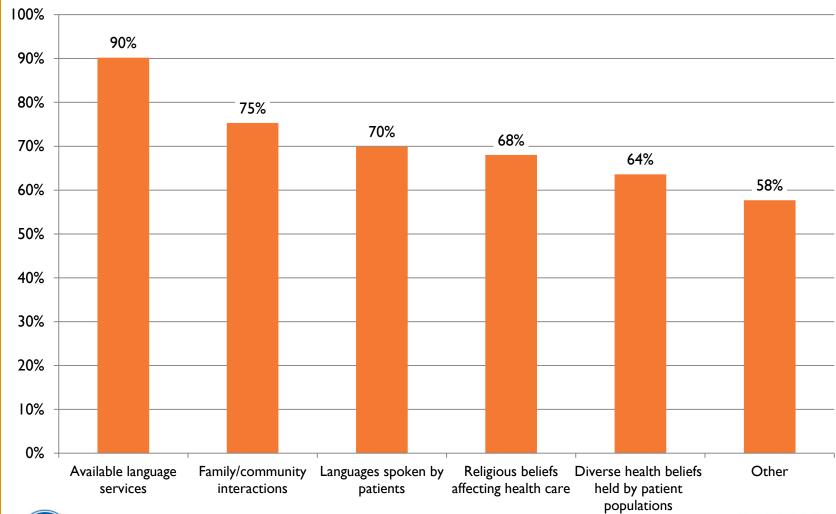
- 81% of hospitals educate all clinical staff during orientation about how to address the unique cultural and linguistic factors affecting the care of diverse patients and communities.
- 61% of hospitals require all employees to attend diversity training.





Cultural Competency Training (cont. I)

Cultural Content Areas Included in Hospital Orientation







Leadership and Governance

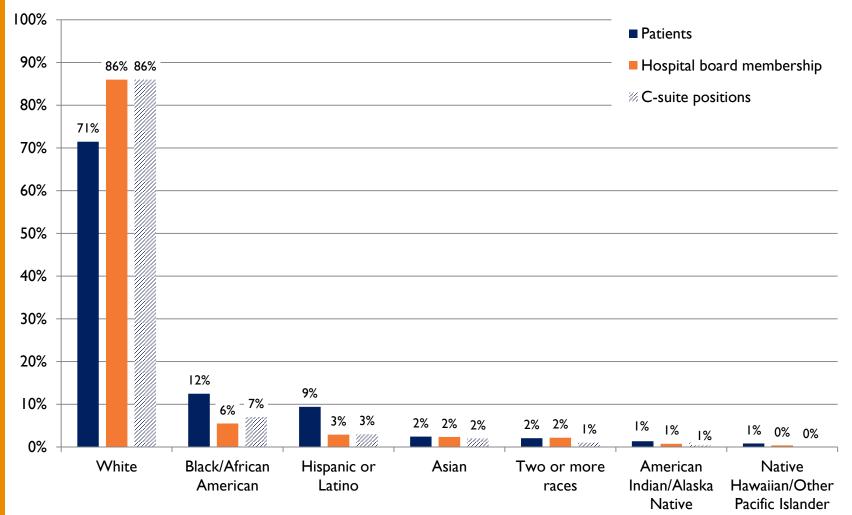
- Although minorities represent a reported 29% of patients nationally, they comprise only:
 - I4% of hospital board members;
 - an average of 14% of executive leadership positions; and
 - I5% of first- and mid-level management positions.





Leadership and Governance (cont. I)

Minority Representation in Hospital Leadership and Governance

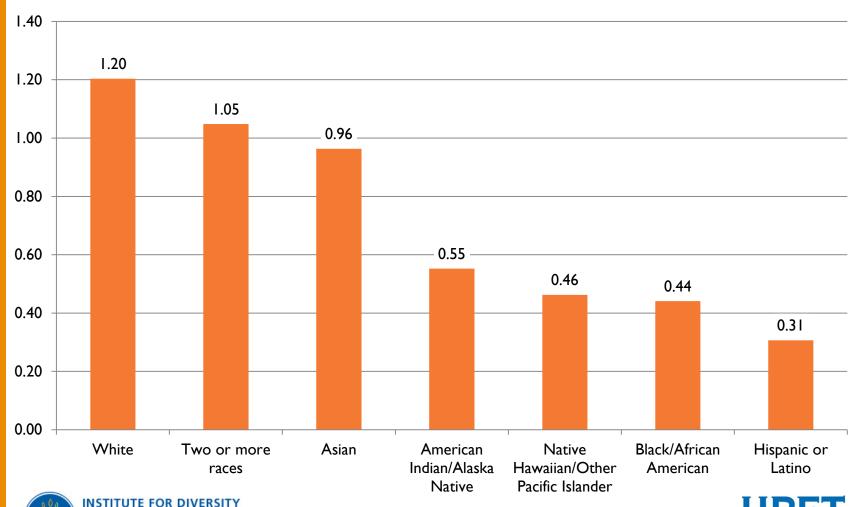






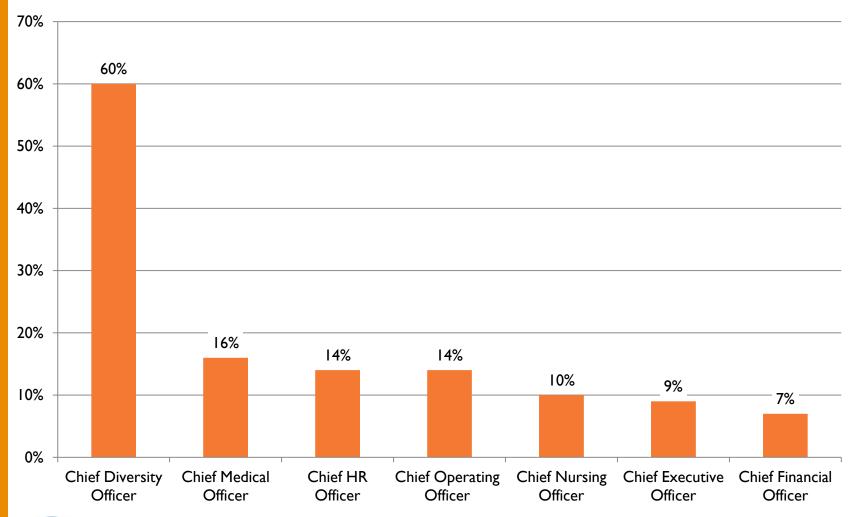
Leadership and Governance (cont. 2)

Ratio of Board Representation to Patient Population (A group is underrepresented if the value is less than one.)



Leadership and Governance (cont. 3)

Minority Representation in Executive Leadership Positions







Summary Findings

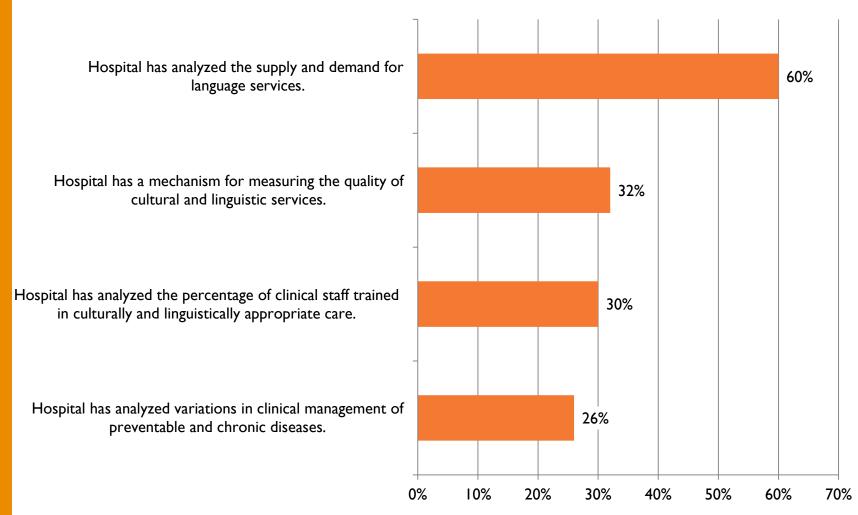
- Collection of all REAL data 77%
- Use of all REAL data to benchmark gaps in care 18%
- Cultural competency training 45% train in all five cultural competency areas (languages spoken by patients, available language services, diverse health beliefs held by patient populations, religious beliefs affecting health care, and family/community interactions)
- Diversity in governance 14% minority
- Diversity in management 15% minority





Appendix A: Data Utilization

Hospitals' Utilization of Data to Address Health Care Disparities

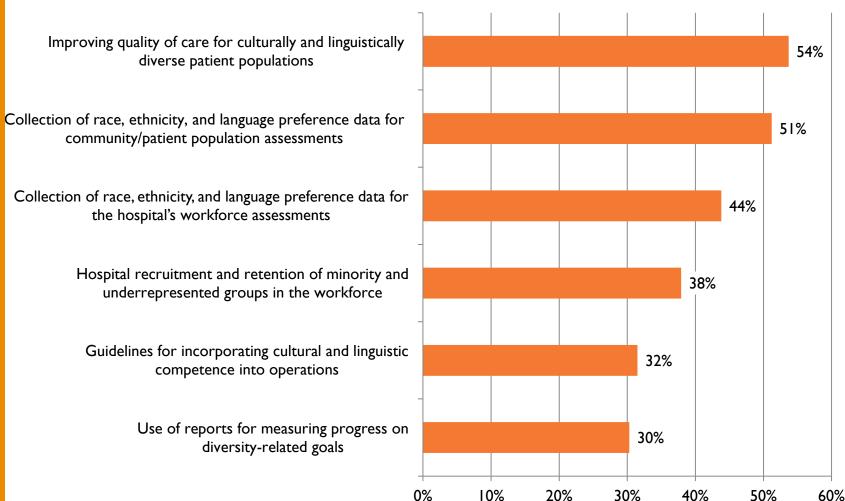






Appendix B: Strategic Goals

Inclusion of Goals within Hospitals' Strategic Plans

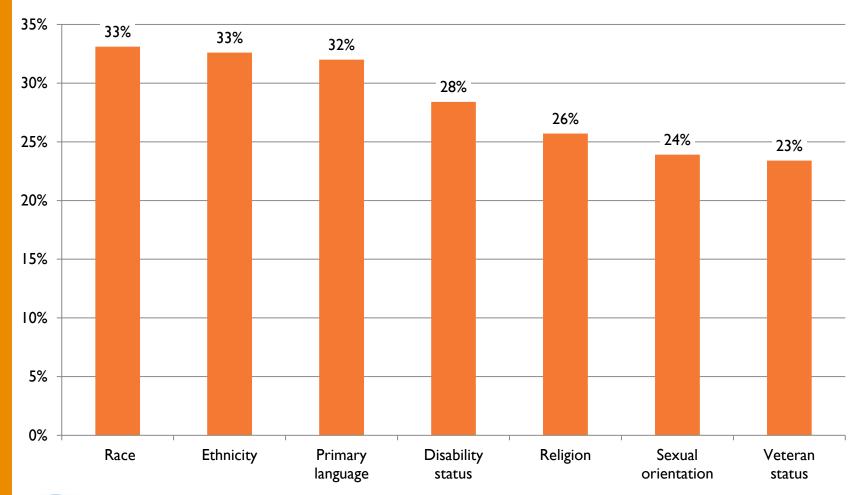






Appendix C: Strategic Goals

Percentage of Hospitals Using Patient Characteristics Data to Establish a Disparities Reduction Goal







Appendix D: Reducing Disparities

Hospitals' Efforts to Reduce Racial/Ethnic Health Care Disparities

Standardized mechanism to translate hospital-related documents into languages that are most prevalent among visitors and patients.

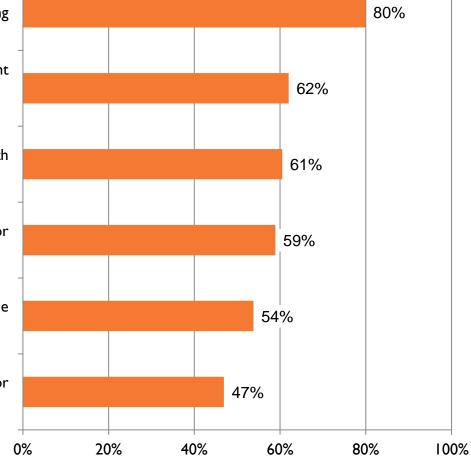
Conducts patient interviews or surveys to obtain patient satisfaction data for improving services for diverse populations.

Standardized system to collect feedback from patients with language needs.

Standardized system to collect feedback from patients for improving services for diverse patient populations.

Performance improvement projects aimed at improving the quality of care provided to diverse patient populations.

Standardized system to collect feedback from staff for improving services for diverse patient populations.

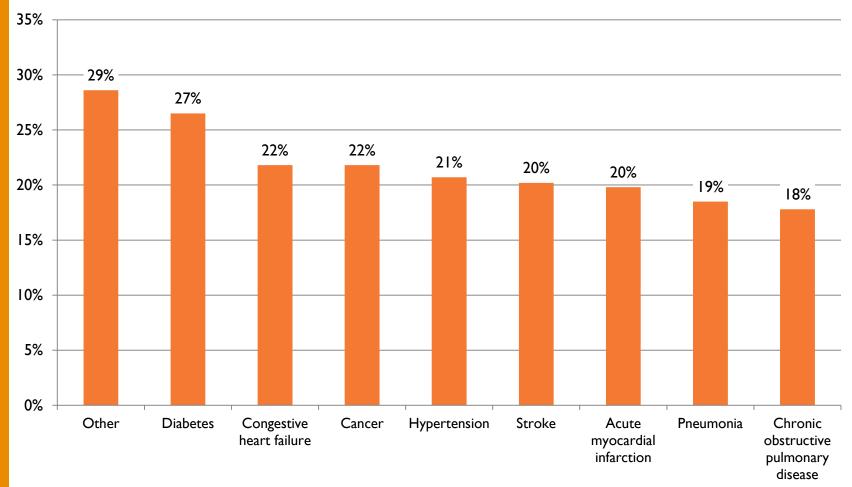






Appendix E: Reducing Disparities

Disease-Specific Interventions Planned or Implemented by Hospitals to Reduce Racial/Ethnic Disparities

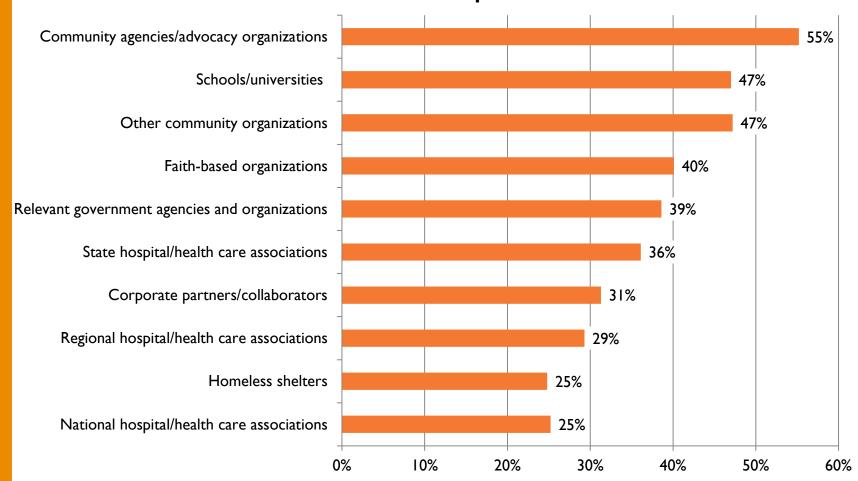






Appendix F: Reducing Disparities

Hospitals' Collaboration with External Organizations to Reduce Disparities

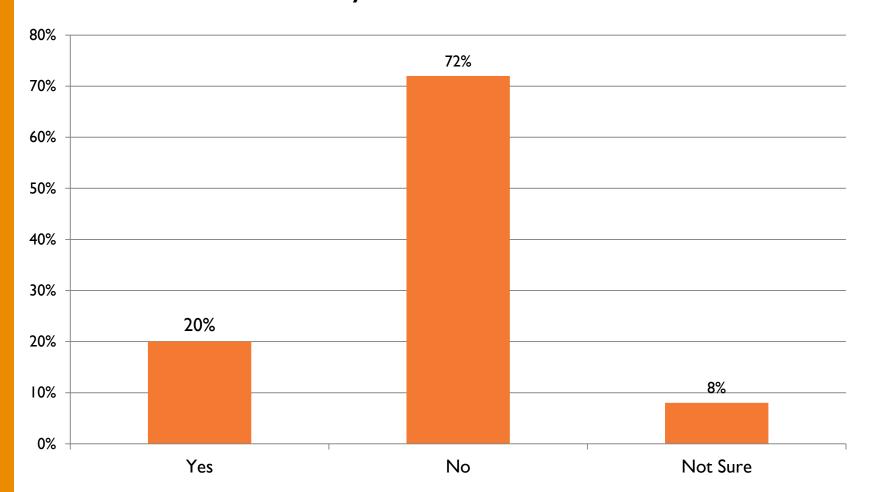






Appendix G: Reducing Disparities

Does Your Organization Have a Community-based Diversity Advisory Council or Committee?

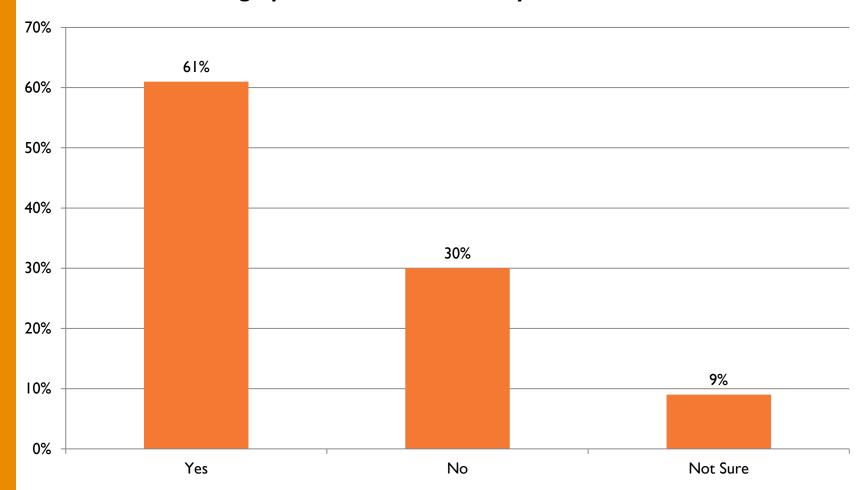






Appendix H: Cultural Competency

Has Your Hospital Conducted an Assessment of the Racial and Ethnic Demographics of Your Community in the Past Three Years?

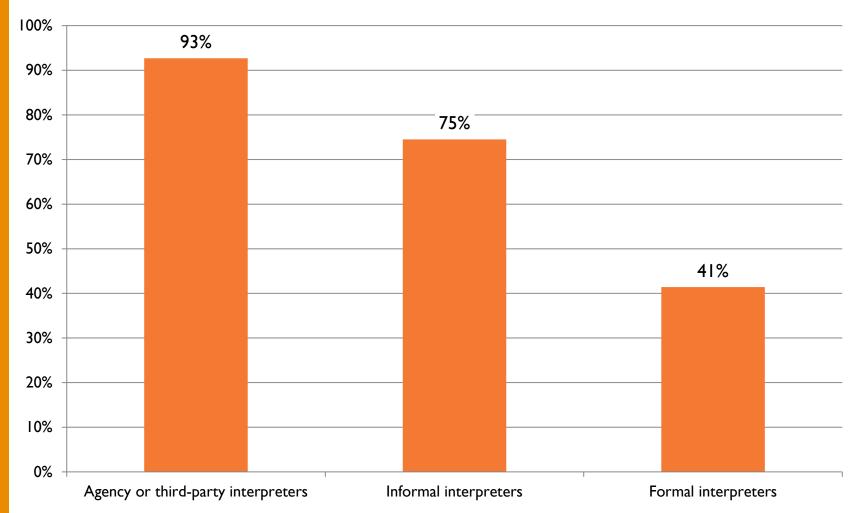






Appendix I: Cultural Competency

Types of Interpreters Used by Hospitals

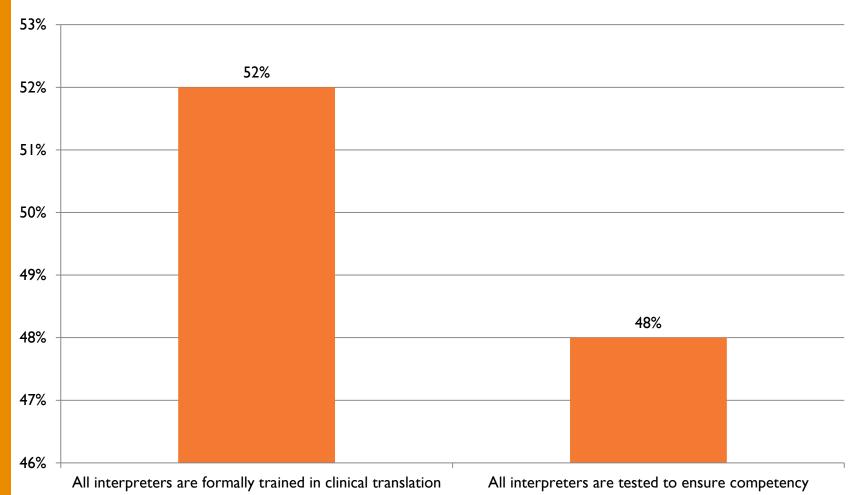






Appendix J: Cultural Competency

Hospitals' Verification of Interpreter Quality

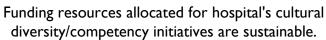






Appendix K: Leadership

Hospitals' Leadership Goals



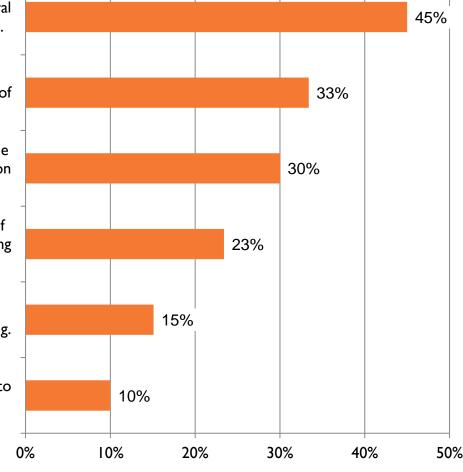
Hospital governing board has set goals for creating diversity within its membership that reflects the diversity of the hospital's patient population.

Hospital incorporates diversity management into the organization's budgetary planning and implementation process.

Hospital has a plan to specifically increase the number of ethnically, culturally, and racially diverse executives serving on the senior leadership team.

Hospital governing board members are required to demonstrate that they have completed diversity training.

Hospital ties a portion of executive compensation to diversity goals.







Appendix L: Diversity Management

Percentage of Hospitals Participating in Diversity Improvement Plans

Hospital has a nondiscrimination policy that includes the ethnic, racial, lesbian, gay, bisexual, transgender, and transsexual communities.

Hospital educates all clinical staff during orientation about how to address the unique cultural and linguistic factors affecting the care of diverse patients and communities.

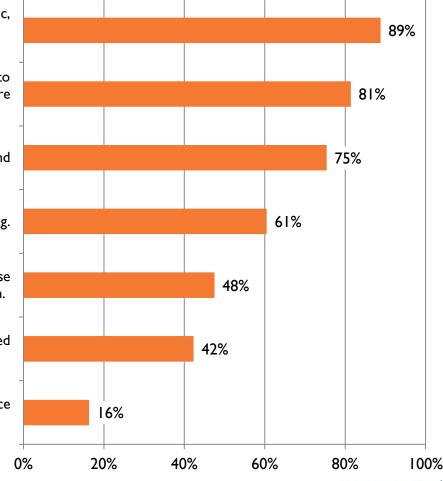
Hospital collaborates with other health care organizations on improving professional and allied health care workforce training and educational programs in the communities served.

Hospital requires all employees to attend diversity training.

Hospital has a documented plan to recruit and retain a diverse workforce that reflects the organization's patient population.

Hospital has implemented a program that identifies diverse, talented employees within the organization for promotion.

Hospital hiring managers have a diversity goal in their performance expectations.





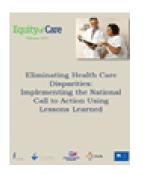
Equity of Care www.equityofcare.org

The AHA is a proud partner of the National Call to Action to Eliminate Health Care Disparities. Under the Equity of Care platform's goals to increase:

- The collection and use of race, ethnicity and language preference data,
- Cultural competency training, and
- Diversity in governance and leadership

AHA's Hospitals in Pursuit of Excellence will produce reports and guides in support.













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