

Equity is Excellence: Measurement

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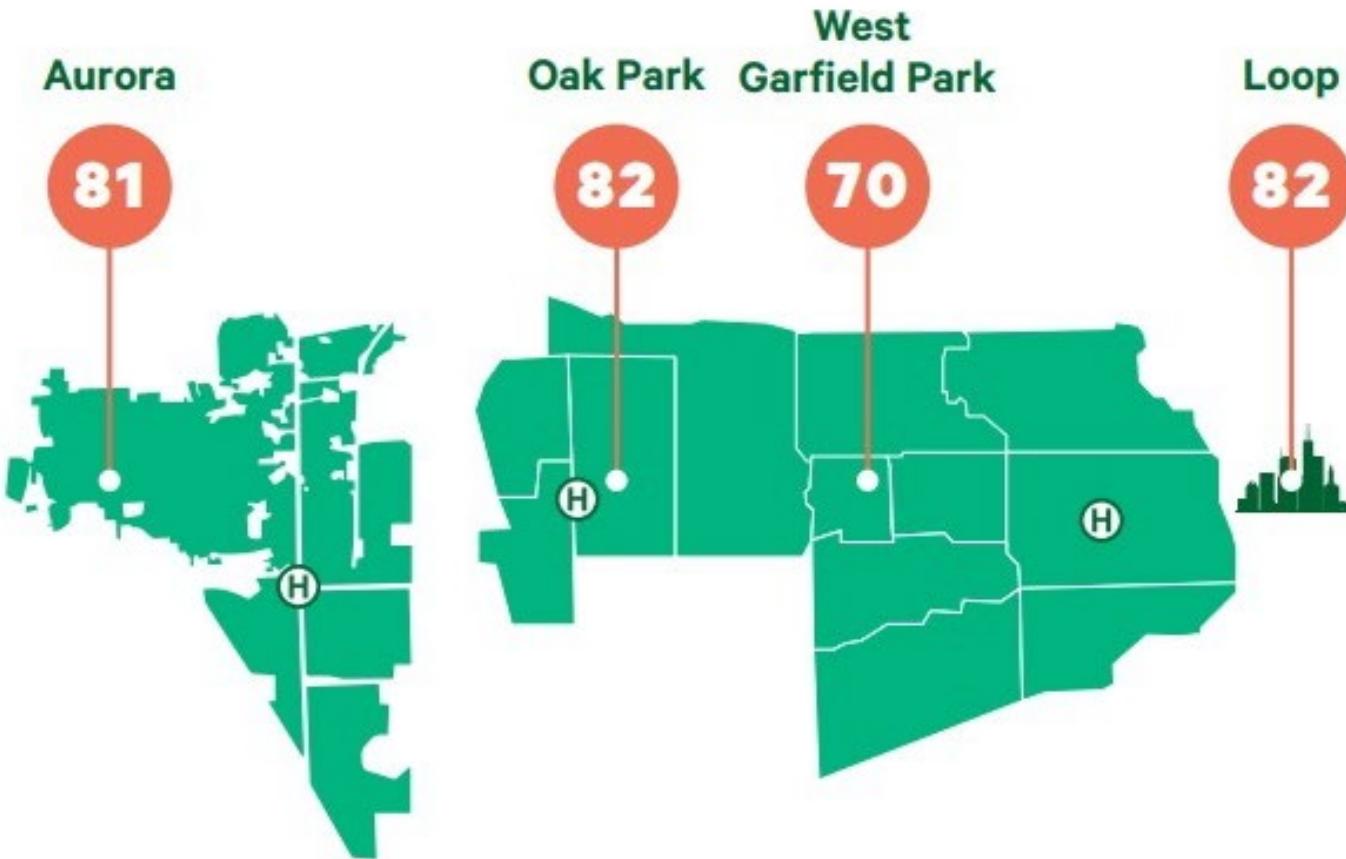


Rush University System for Health (RUSH) is an academic health system in greater Chicagoland that comprises **Rush University Medical Center**, **Rush University**, **Rush Copley Medical Center** and **Rush Oak Park Hospital**, as well as numerous outpatient care facilities.

Mission:

The mission of Rush is to improve the health of the individuals and diverse communities we serve through the integration of outstanding patient care, education, research and community partnerships.

10+ year Life Expectancy Gap between the Loop and Chicago's West Side Communities



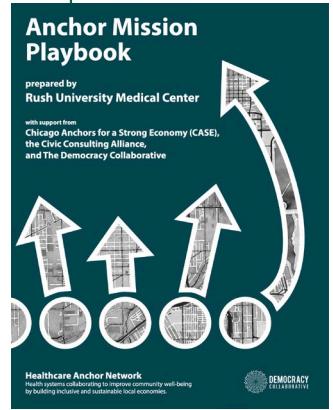
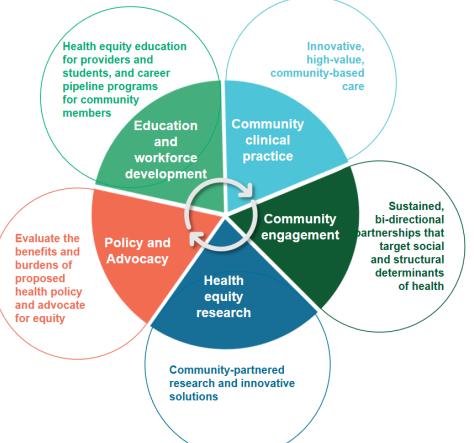
True North:

Reduce the life expectancy gap by **50%** by **2030**

More than half of premature deaths on the West Side are caused by cancer, heart disease, stroke, diabetes and infant mortality.

COVID-19 has added greater complexity and negatively impacted life expectancy for many at risk for poor health outcomes.

Health Equity | Built into RUSH Strategy

1980s to 2016	2016	2017	2018	2020	2021	2023
<p>Commitment to our Community Through RUSH's Community Affairs and RCSIP programs, Diversity Leadership Council; university-based activities and specific departments</p> 	<p>RUSH Community Strategy Four interrelated priorities to advance mission. The RUSH System will serve as a catalyst to measurably impact each of our communities</p> 	<p>Anchor Mission Invest human and economic capital in West Side communities</p> <p>Hospital Anchor Network Founded RUSH is a founding member of national healthcare anchor mission collaborative</p> 	<p>West Side United Area hospitals join to achieve collective impact for Chicago's West Side in education, economic vitality, neighborhood and physical environment, and health and health care</p>	<p>Racial Justice Action Committee Advance social and racial justice along with health equity inside of RUSH</p> <p>COVID-19 Pandemic Multi-faceted response and community impact</p> 	<p>RUSH BMO Institute for Health Equity Coordinate RUSH's health equity initiatives, across all our system hospitals, giving them the funding and resources to thrive</p> 	<p>RUSH Builds Health Equity Strategy</p>

Measurement has exploded

Table 3. Summary of Differences in Equity Metrics Across Organizations

Metric	AHA HETA	IHA Progress	Leapfrog	Lowa Hospital	USNWR Best Hospitals	Vizient AMC Q&A	Vizient AMB Q&A	CMS IQR	CMS Framework	TJC R3 Report Issue
Strategic plan for health equity	X	X						X	X	X
Designated staff to lead equity goals	X	X								X
Senior leadership and/or board engagement	X	X	X					X		
Transparency and accountability in reaching equity goals	X	X	X							X
DEI and cultural bias training in the workforce	X	X	X						X	
Quality improvement practices	X	X	X					X	X	X
Demographic profile of the organization	X	X								
Demographic profile of the patient population	X	X		X	X					
Equitable and inclusive organizational policies	X	X							X	
Pay equity	X	X		X						
Charity care			X		X	X				
Medicaid revenue and/or payor mix			X		X					
Partnerships with patients and community	X	X								
Community investment	X	X		X						
Patient demographic and social needs data collection	X	X	X					X	X	X
KPIs stratified by demographics and/or social needs	X	X	X					X		
Patient supports for social needs	X	X							X	
Culturally tailored services	X	X							X	
Access for individuals with disabilities									X	
New patient visits							X			
Unplanned readmissions						X				
Hospitalizations for ACSCs						X				
Select clinical processes							X			
Select clinical outcomes							X			



The Progress Report focuses on four areas within an institution:



Our People

Board & Leadership
All Employees



Our Patients

Health Outcomes
Access to care &
Resources
Demographics & Profile
Patient Experience



Our Organization

Strategy / Roadmap
Policies / Practices
Analytics
Operations



Our Community

Wealth
Community Engagement
& Empowerment
Philanthropy

Our People asks organizations to look in the mirror and evaluate their own boards, leadership teams and employees.

Our Patients looks at those we serve and asks if we have a strong handle on the clinical inequities exist across our patient populations within our communities.

Our Organization emphasizes the internal strategies, policies and practices that are important to advancing health equity.

Our Community asks if we are working with CBOs and other stakeholders in our communities, as we know that improving health equity must be done with, not to, the community.

Performance Improvement Plan: Patient focused Equity Measurement



Demographic
Data Accuracy
(REaL and
SOGI)



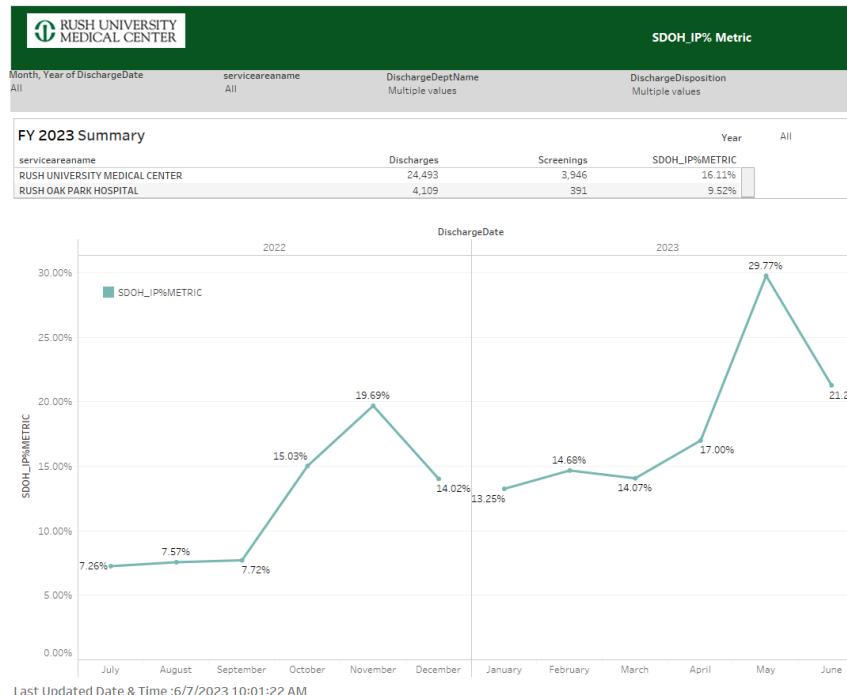
Social
Determinants
of Health



Quality,
Access and
Experience
Outcomes

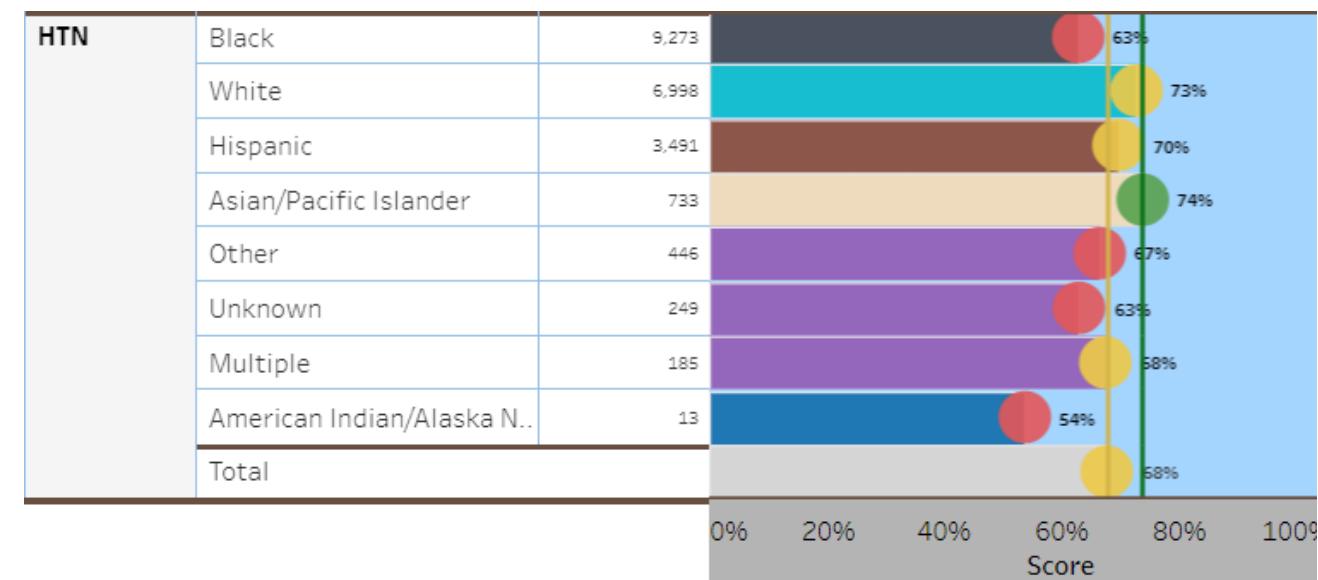
Social Determinants of Health Screening

FY23 Inpatient goal: Screen 50% of all adult patients admitted to Inpatient units and navigate those with needs to resources



Clinical Outcomes: Hypertension Control

FY23 Inpatient goal: 74% of all hypertension patients have blood pressure in control (for all race/ethnicity)



Anchor Mission Plan: Community Development & Addressing Social Determinants of Health



Hire Local



Buy Local



Invest Local



RUSH Local

To ***increase the number of new employees we hire from West Side neighborhoods*** by aligning our hiring needs with the skills of job candidates.

Key Benchmark: Hire 18%+ of the workforce from the Anchor Mission

To ***increase annual dollars spent with diverse businesses and businesses from local, anchor zip codes*** through direct procurement and subcontracting

Key Benchmark: Spend \$9M+ with businesses from the Westside annually

To ***invest in local social impact projects*** that address the ***social determinants of health***, including affordable housing, transportation and food.

Key Benchmark: \$7.5M+ invested over 5 years

To engage employees via various experiences including volunteering, supporting financial wellness, and career pathway development programs

Key Benchmark: 400 employees volunteering 1,600 hours annually; *additional metrics forthcoming*

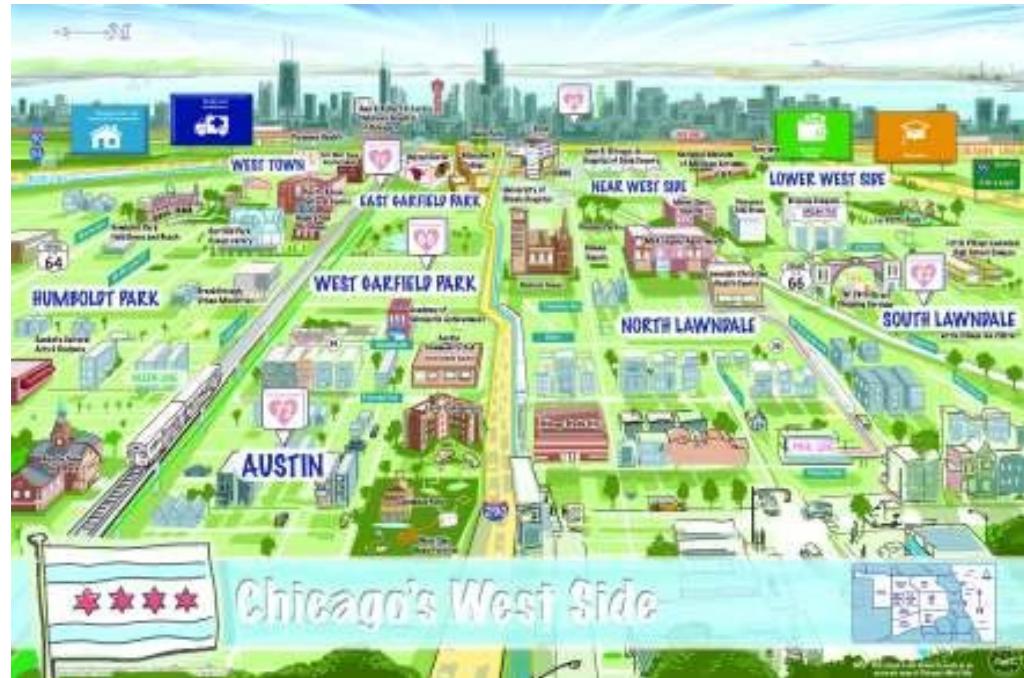
Health Equity | West Side United

RUSH collaborated with five other health systems to create West Side United, a racial-equity collaborative, to benefit Chicago's 500,000 West Side residents in 2018.

Collectively the WSU members have:

- Invested **\$10.8 million** through community development financial institutions to fund businesses, nonprofits, and affordable housing
- Raised **\$3m** to establish four health care career pathways
- Raised **\$1.9m** to support local businesses
- Provided business-development support to **150 West Side businesses and 60 community-based organizations**

WEST SIDE UNITED



Lessons Learned/Next Steps

- **Strategic, prioritized and intentional plan for reporting on equity measures**
 - Centralized Equity Dashboard with focus areas
 - Decentralized dashboards have consistent filters for data segmentation
 - *Race, ethnicity, language, age, payor, zip code, SDOH*
- **Common definitions and governance of operational definitions of metrics across institutions (system-wide)**
- **Critical collaboration across the organization with Human Resources, Supply Chain, Data Analytics teams on refined, automated data reporting**
- **Capture and quantify community contribution investments (e.g. forgivable loans, anchor mission projects)**

Appendix



Rush University Medical Center

The power of knowledge.
Excellence is just the beginning.

Ambulatory Quality- Equity

CipHelper ACO Equality Percent of total CIP

Outpatient CMS Quality Measure Equality

Race and ethnicity

NN_CDE	Race and ethnicity	A1c	Breast	Cervical	Chlamydia	Colorectal	Depression	HTN	Immunizations	Influenza	Nephropathy	Pharyngitis
NNRUMC	Hispanic	23%	73%	71%	58%	68%	86%	71%	67%	93%	88%	100%
	Non-Hispanic black	22%	76%	70%	80%	70%	88%	65%	43%	90%	89%	84%
	Non-Hispanic white	17%	75%	72%	58%	76%	84%	72%	77%	94%	88%	
	others	18%	65%	66%	69%	66%	87%	71%	67%	92%	83%	
	Unknown	18%	60%	58%	63%	57%	84%	67%	50%	83%	80%	

Language

NN_CDE	Language	A1c	Breast	Cervical	Chlamydia	Colorectal	Depression	HTN	Immunizations	Influenza	Nephropathy	Pharyngitis
NNRUMC	American Sign Language			50%		29%	92%	67%		90%		
	Arabic	33%	67%	67%		50%	76%	85%		94%	89%	
	Bilingual/Other	22%		44%		88%	87%	67%		89%	89%	
	Bilingual/Spanish	21%	70%	75%	67%	72%	85%	75%	70%	94%	91%	
	Cantonese	7%	61%	74%		68%	85%	76%		82%	89%	
	Did Not Encounter			78%		64%	89%	73%		93%		
	English	21%	75%	71%	69%	73%	86%	68%	63%	92%	87%	92%
	Farsi					78%	93%					
	Greek						81%					
	Gujarati						85%					
	Hindi						71%					
	Italian						71%					
	Korean						88%			100%		
	Lithuanian						80%					
	Mandarin	22%	60%	65%		59%	84%	78%		89%	78%	
	Polish	0%	54%	70%		55%	68%	61%		73%	89%	
	Russian						56%					
	Serbian						65%					
	Sign Language						93%					
	Spanish	18%	74%	64%		63%	84%	74%	56%	96%	91%	
	Tagalog						80%					
	Unknown	18%	72%	62%	51%	67%	86%	66%	56%	92%	86%	95%
	Urdu						93%					
	Vietnamese						60%					

Social Determinants of Health

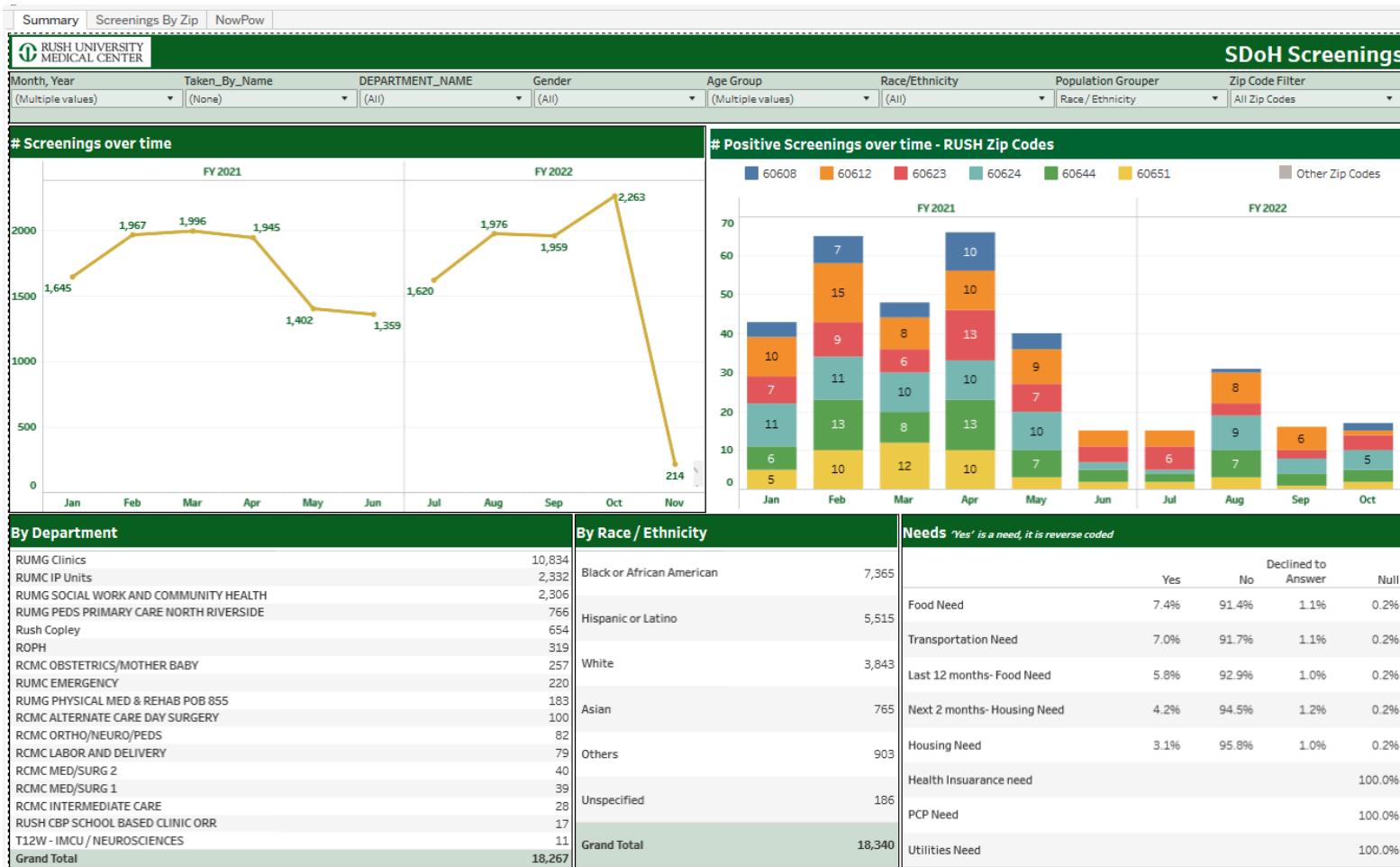
FY22 Target of 25,000 patients screened

Dashboard shows:

- **Volumes**
- **Locations of screening**
- **Positive screening zip codes**
- **Race/ethnicity**
- **Positive screening needs**

Under development

- **NowPow closed loop referrals, appointments made/kept, etc.**
- **Adding CHW efforts**
- **Can be included as filter for other clinical outcomes**

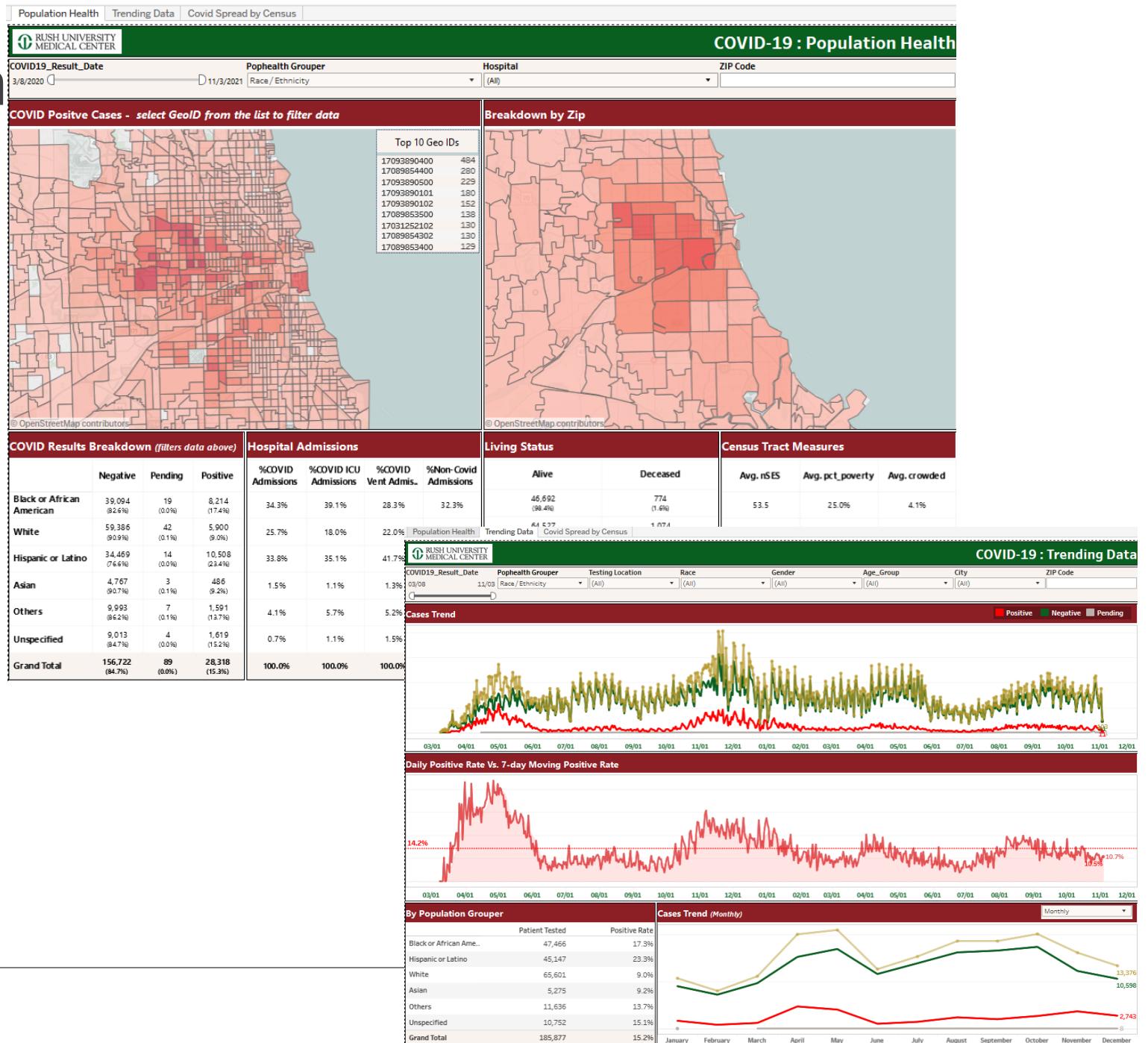


COVID-19 Population Health metrics

Positivity rate, admissions, mortality by zip codes on geo/ heat map

Trending data shows shift in neighborhood/population prevalence over time

Use to help identify neighborhoods for testing, contact tracing and vaccine efforts



FY22 YTD Anchor Spend Analysis Dashboard

Thursday, December 9, 2021

