

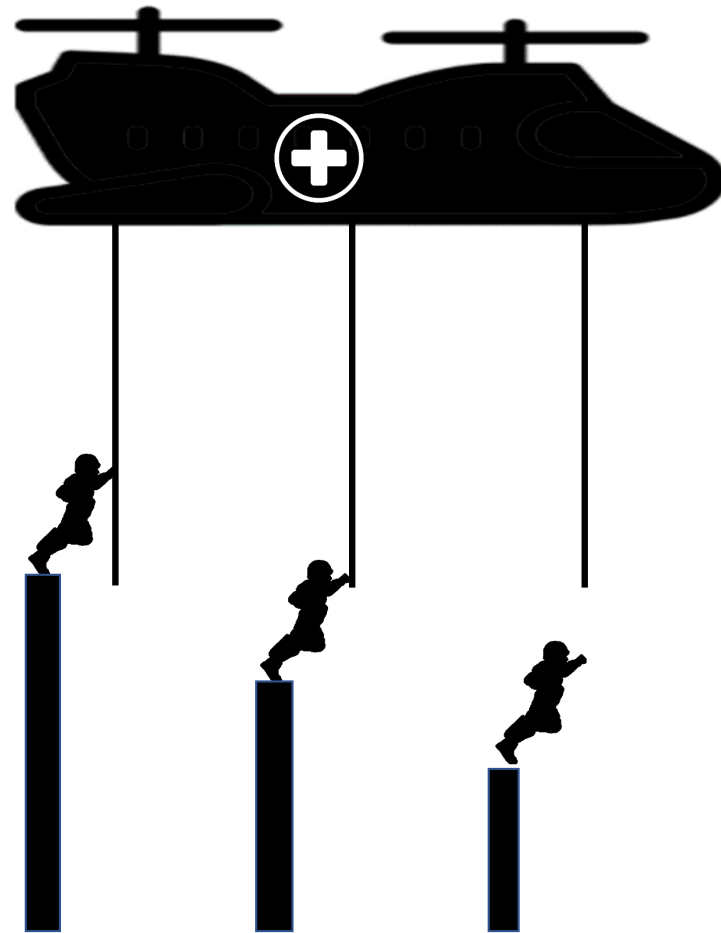
# Putting Health Equity to Work to Improve Cancer Care at VA

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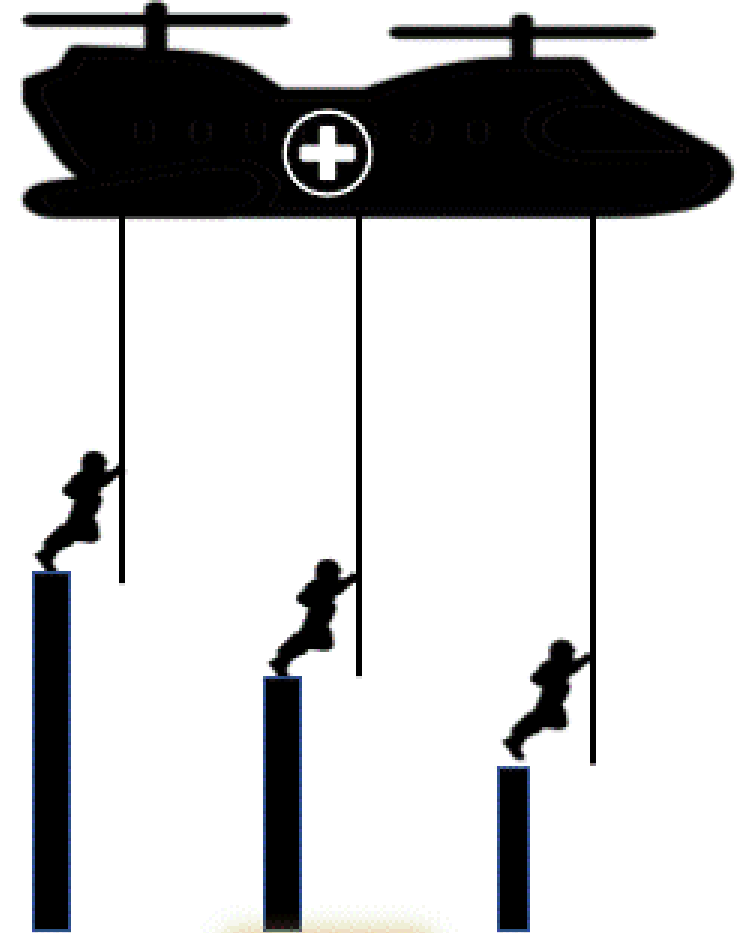
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Health Equity = All Veterans get support that helps them achieve their highest level of health

We're not all in the same place.  
**Equity** is reaching out to those in need, so no one is left behind.



Equality

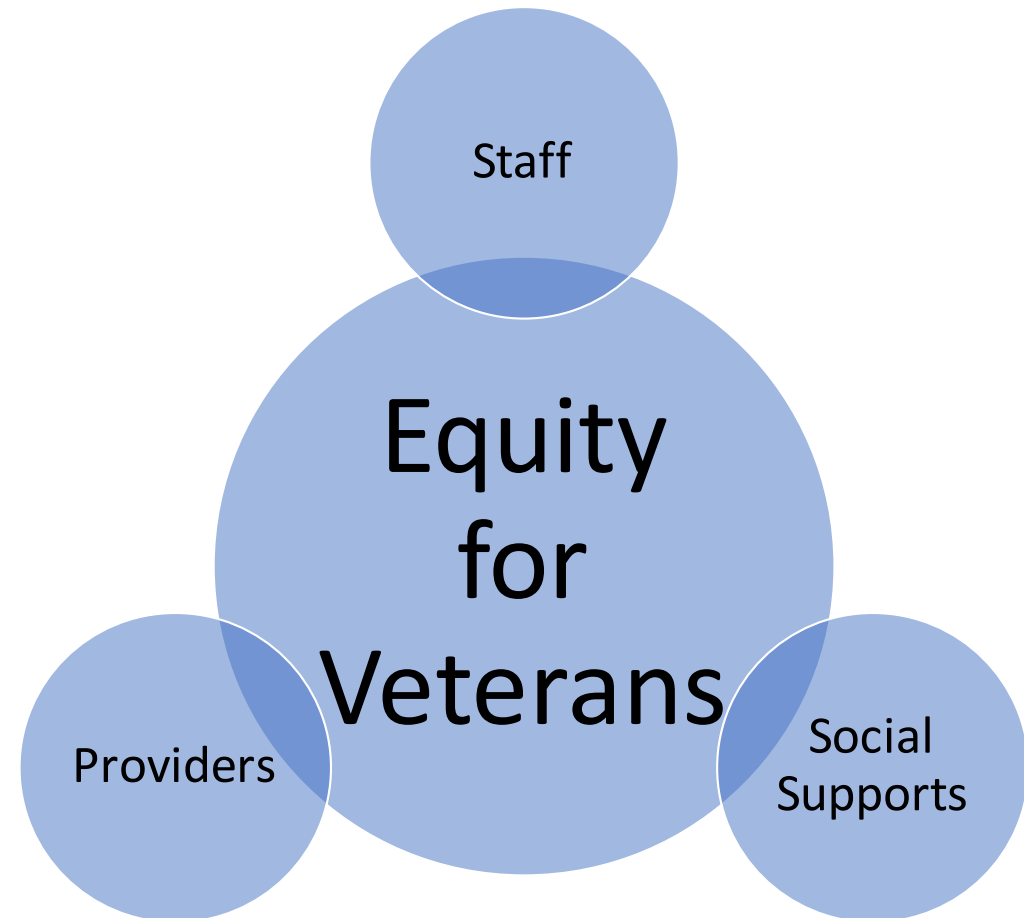


Equity

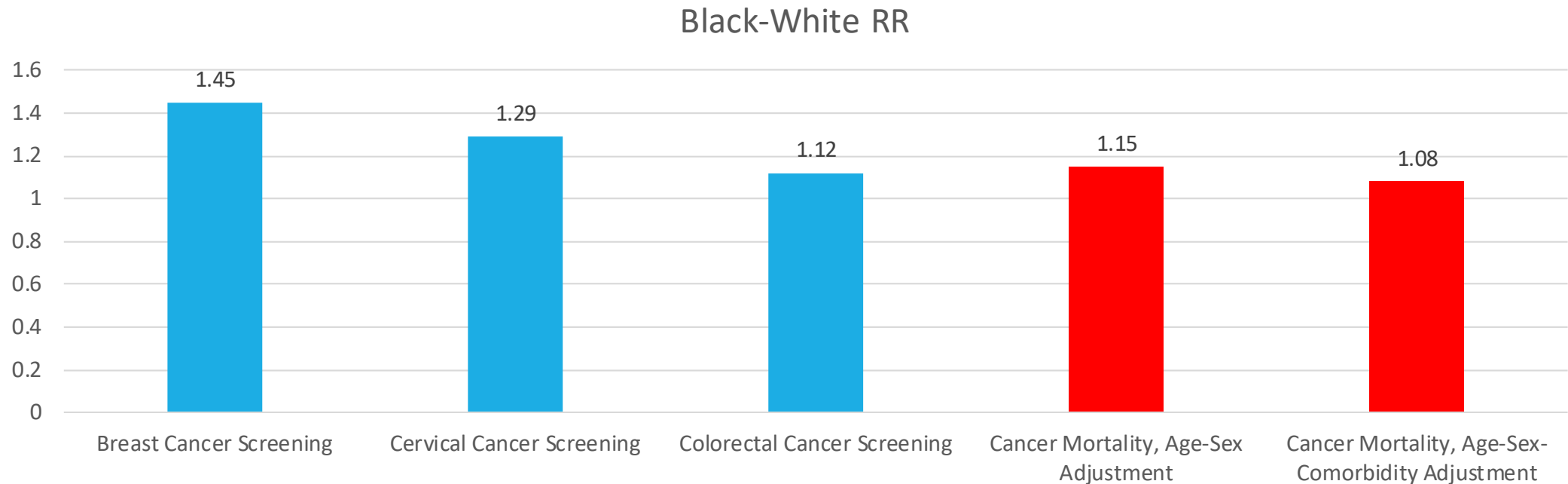
Leave No Veteran Behind

# What is VA doing to promote equity?

1. We work with **Staff** to ensure a diverse and inclusive environment.
2. We work with **Social Supports** to address social risks.
3. We work with **Providers** to reduce health inequities in health care.

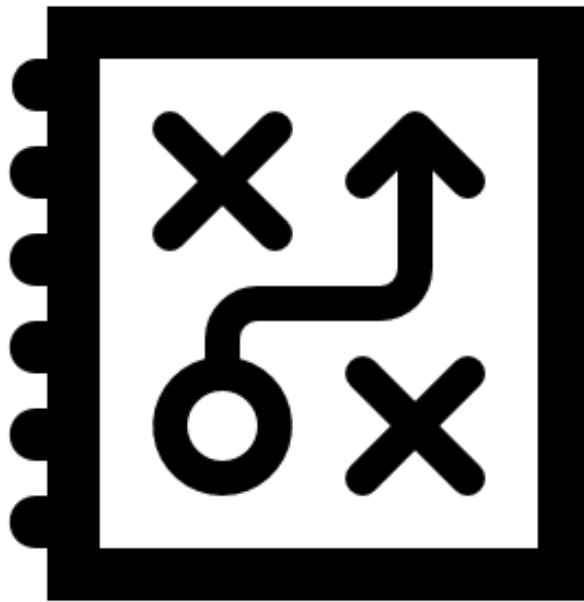


# Cancer Disparities Among Black and White Veterans



VA Greater Los Angeles Office of Health Equity-Quality Enhancement Research Partnered Evaluation Initiative analyses of External Peer Review Program (EPRP) chart review data.

Wong MS, Hoggatt KJ, Steers WN, Frayne SM, Huynh AK, Yano EM, Saechao FS, Ziaeeian B, Washington DL (2019) Racial/ethnic disparities in mortality across the Veterans Health Administration, Health Equity 3:1, 99–108, DOI: 10.1089/heq.2018.0086



# Elements of the Equity Quality Improvement Playbook

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1. Goals:
  - Every VA patient and employee knows they are valued and respected.
  - They work together to keep every Veteran as healthy as possible.
2. Philosophy: High Equity Reliability Organization (Moy E, Hausmann LRM, Clancy CM. From HRO to HERO: Making Health Equity a Core System Capability. Am J Med Qual. 2021 Sep 8.)
3. Strategic Assessment Tool: Equity Guided Improvement Strategy
4. Operational Support Tool: Primary Care Equity Dashboard

VA has

- ✓ Data to examine disparities.
- ✓ Providers committed to delivering optimal care.
- ✓ Researchers who have identified successful interventions.
- ✓ Quality improvement infrastructure to guide change.
- ✓ Few financial barriers to care.
- ✓ Social supports to address social determinants of health.

#### Measure

- ☐ Avoid PSA Screening Men Age 70+
- ☐ Diabetes: Avoid Poor HbA1c Control
- ☐ Diabetes: BP < 140/90
- ☐ Diabetes: HbA1c < 7
- ☐ Diabetes: HbA1c Testing
- ☐ Diabetes: Renal Testing
- ☐ Diabetes: Statin Adherence
- ☐ Diabetes: Statin Therapy
- ☐ Heart Disease: Statin Adherence
- ☐ Heart Disease: Statin Therapy
- ☒ Hypertension: Good BP Control
- ☐ Influenza Immunization Age 19-65
- ☐ Influenza Immunization Age 66+

#### Interpretation:

All Blue/Green =  
Good Quality/Few Disparities ->  
Keep Doing Great

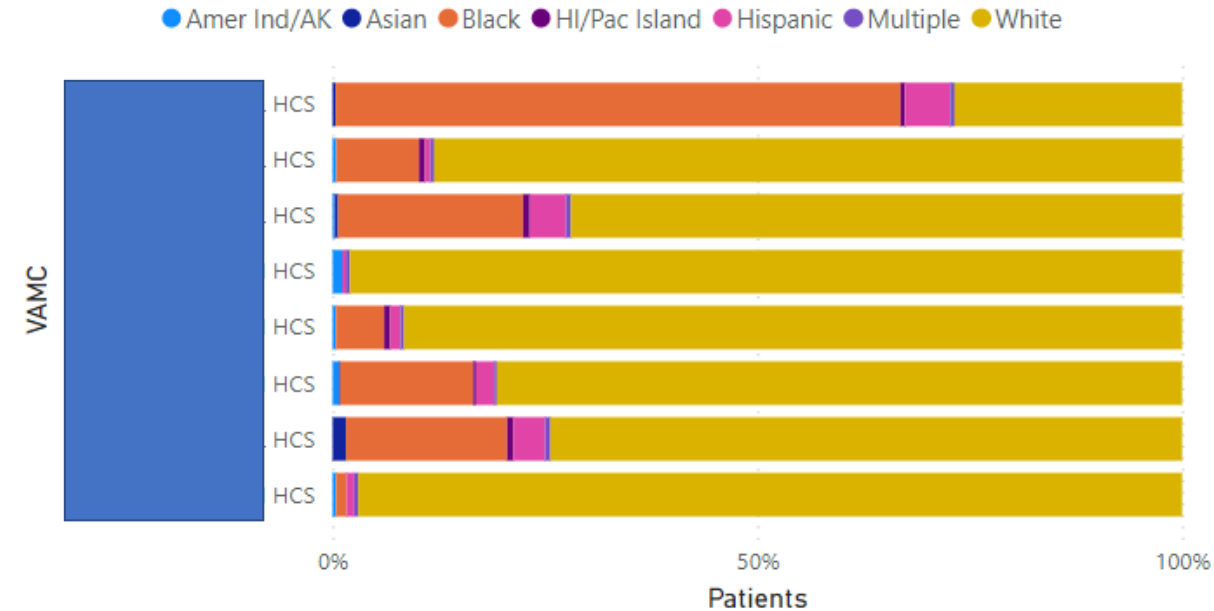
All Yellow/Pink =  
Quality Problem Affecting All  
Groups ->  
Consider General Quality  
Improvement

Mix of Blue/Green & Yellow/Pink =  
Disparities Problem ->  
Consider Quality Improvement  
Targeting Specific Groups

- ☐ All
- ☐ Amer Ind/AK
- ☐ Asian
- ☒ Black
- ☐ HI/Pac Island
- ☒ Hispanic
- ☐ Multiple
- ☒ White

- ☒ Top 10%
- ☒ 10%-25%
- ☒ 50%-25%
- ☒ Bottom 50%

Patients by Race/Ethnicity: Rollover to see performance for selected groups.



Racial/Ethnic Group	Black		Hispanic		White	
VAMC	Patients	% Meeting Goal	Patients	% Meeting Goal	Patients	% Meeting Goal
	7,021	67.1%	562	71.6%	2,827	77.5%
	732	69.6%	48	72.5%	6,601	74.8%
	2,633	67.8%	516	74.1%	8,697	77.4%
			21	53.3%	4,759	66.6%
	352	66.4%	75	66.9%	5,660	72.0%
	2,006	59.3%	273	57.3%	10,321	72.7%
	873	66.3%	173	67.7%	3,419	73.2%
	69	67.9%	51	73.6%	5,402	75.7%
Total	13,686	66.2%	1,719	69.3%	47,686	73.8%

When VAs have focused on reducing disparities, equity is improved, and overall quality is improved.

Burkitt KH, Rodriguez KL, Mor MK, Fine MJ, Clark WJ, Macpherson DS, Mannozi CM, Muldoon MF, Long JA, Hausmann LRM. Evaluation of a collaborative VA network initiative to reduce racial disparities in blood pressure control among veterans with severe hypertension. *Healthc (Amst)*. 2021 Jun;8 Suppl 1:100485.

