

Frameworks for Accessible and Equitable Implementation

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Disclosures:

I am a member of the NIH Office of Research on Women's Health (ORWH) Advisory Committee on Research in Women's Health (ACRWH).

Materials provided in this presentation reflect my individual views and do not represent the views or recommendations of the NIH ORWH/ACRWH. The overall presentation should not be attributed to the ORWH ACRWH.

Objectives:

1. To define health inequities
2. To describe potential for inequities in implementation of psychedelic treatments and related treatments
3. To discuss how implementation science approaches and how they can be applied to mitigate health inequities

So...let's start with some definitions and framing

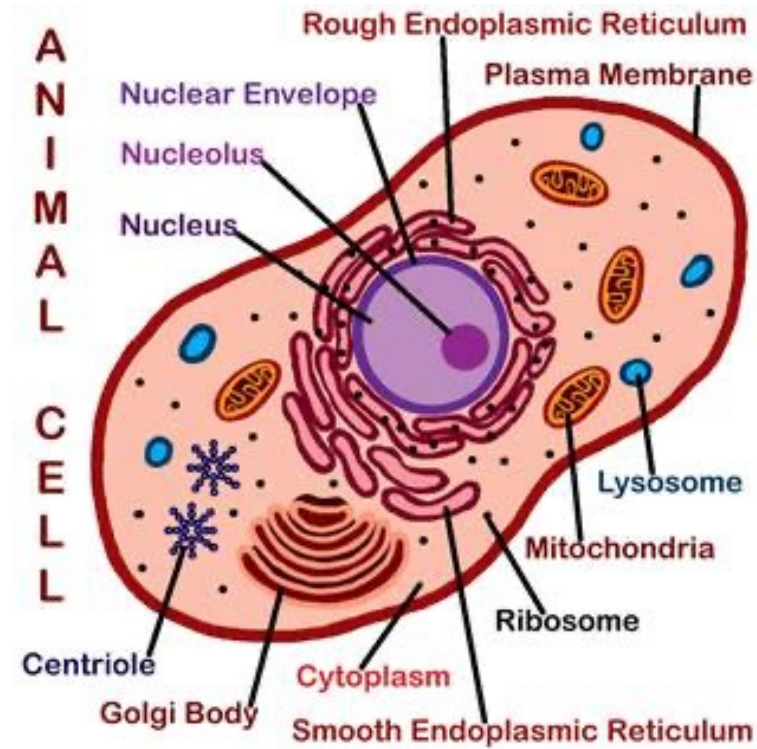


We are at such an important time in history.

This is our moment to advance health justice.

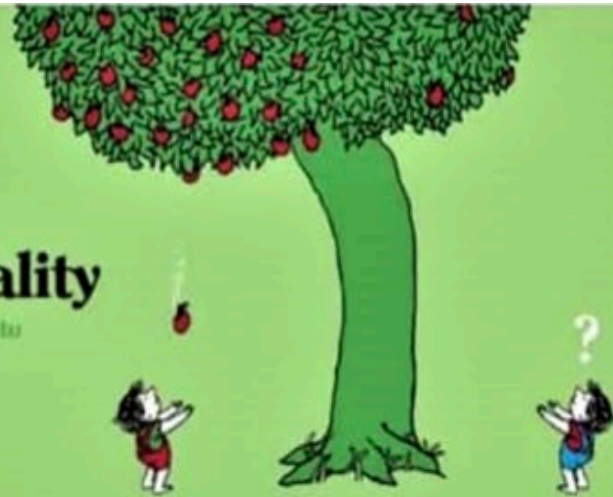


Architecture and Design Matter



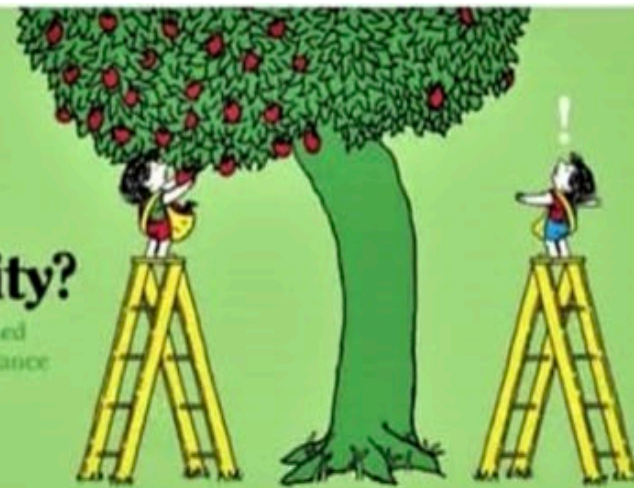
Inequality

Unequal access to opportunities



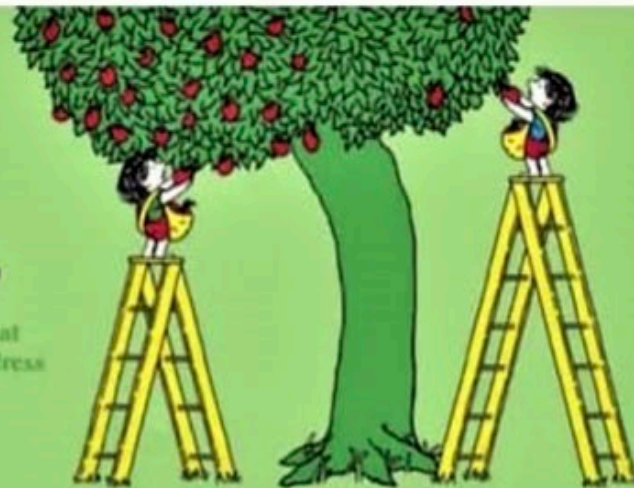
Equality?

Evenly distributed tools and assistance



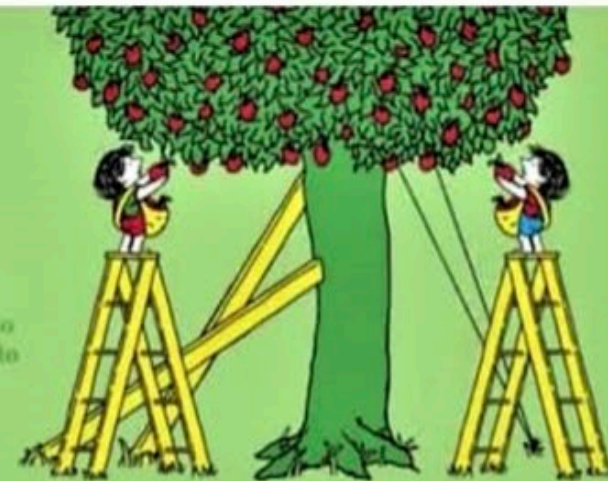
Equity

Custom tools that identify and address inequality



Justice

Fixing the system to offer equal access to both tools and opportunities



Look under the hood of the car

In order to truly embed equity into cancer care delivery- to ensure every person in the US receives consistent high-quality care, we have to scrutinize all related processes and structures

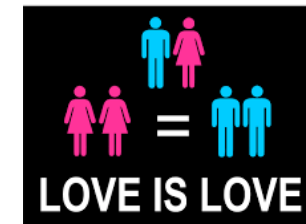


So... Let's look under the hood of the car with respect to considering implementation for psychedelic medicines and related treatments



History

Deep and long history of slavery, racism, discrimination



History of Egregious Experimentation

J. Marian Sims,
"Father of American GYN"
Vesico-vaginal and
Rectovaginal fistulae
12 enslaved women
including:
Lucy,
Anarcha Westcott (30),
Betsey
1844-1849
No anesthesia



Puerto Rican Women and the Birth Control Pill 1950s

Enovid the first birth control pill

Women were given high dose formula

Not told they were a part of a trial

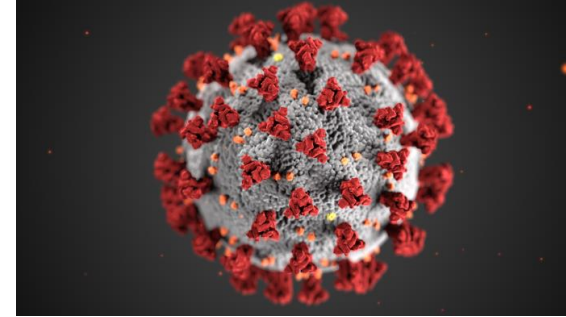
3 women died- no investigation

1/3 of Puerto Rican women had been sterilized prior



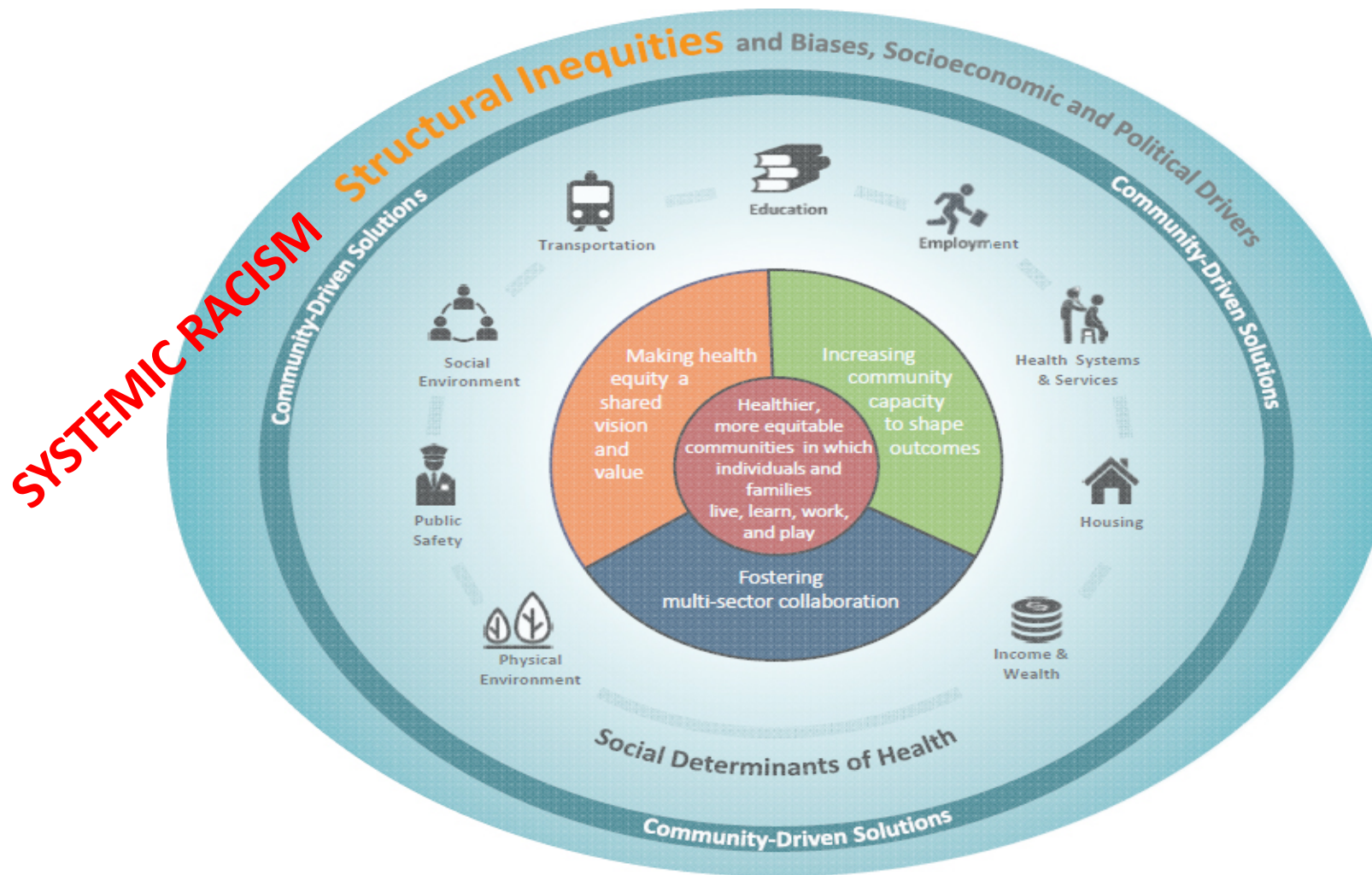
Gregory Pincus
And Clarence Gamble

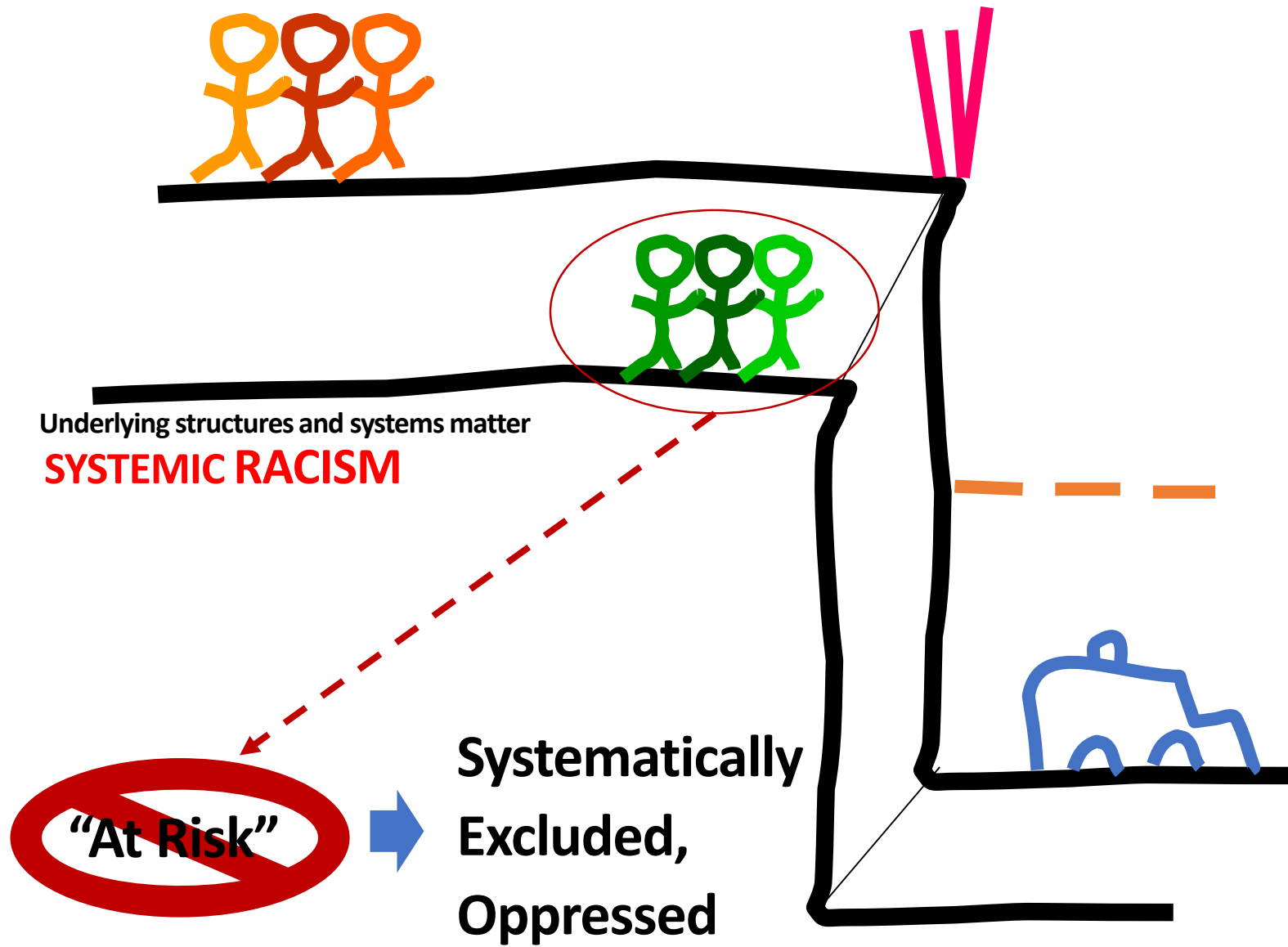
Today



Covid-19 has exposed existing health inequities and exacerbated them across the board







You can apply this design thinking to many domains/aspects across medicine- but especially to therapeutics and treatments.

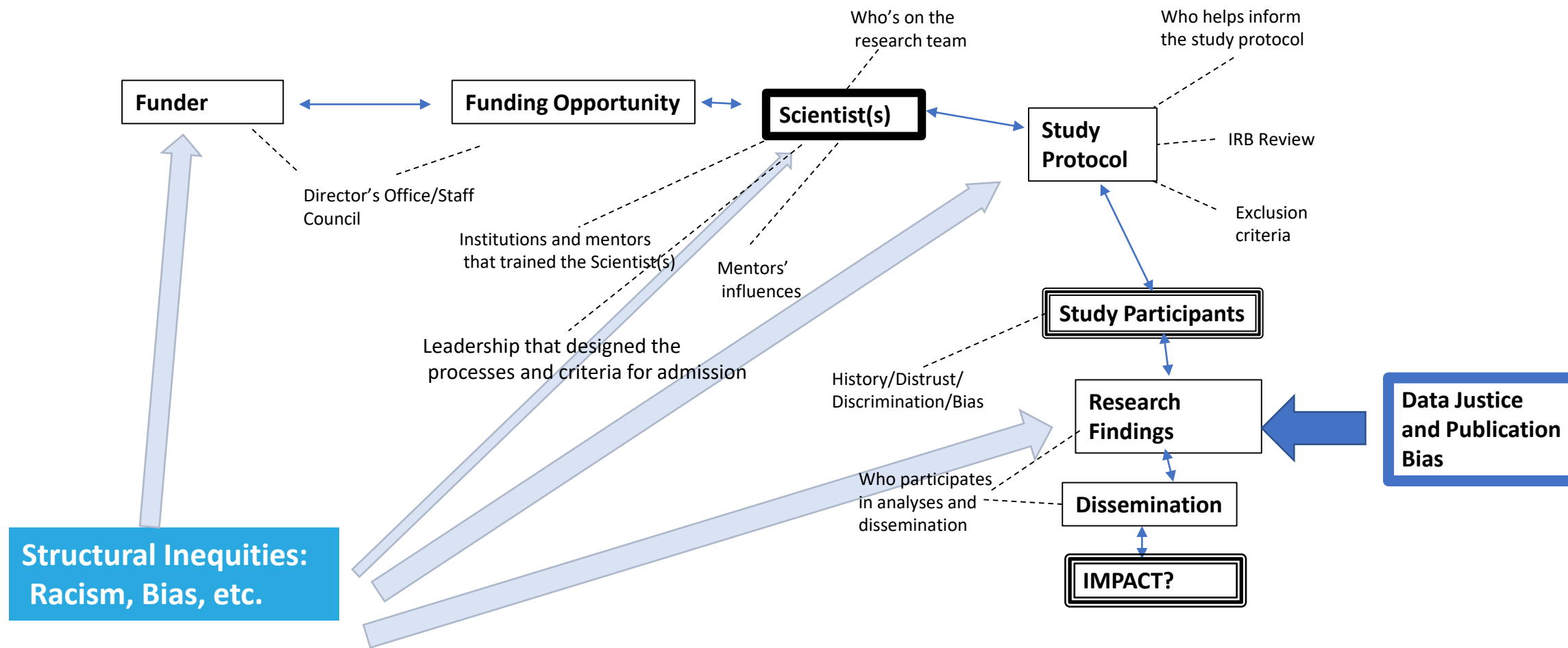


The Research Pipeline



The Evolving Demography in about 20 years

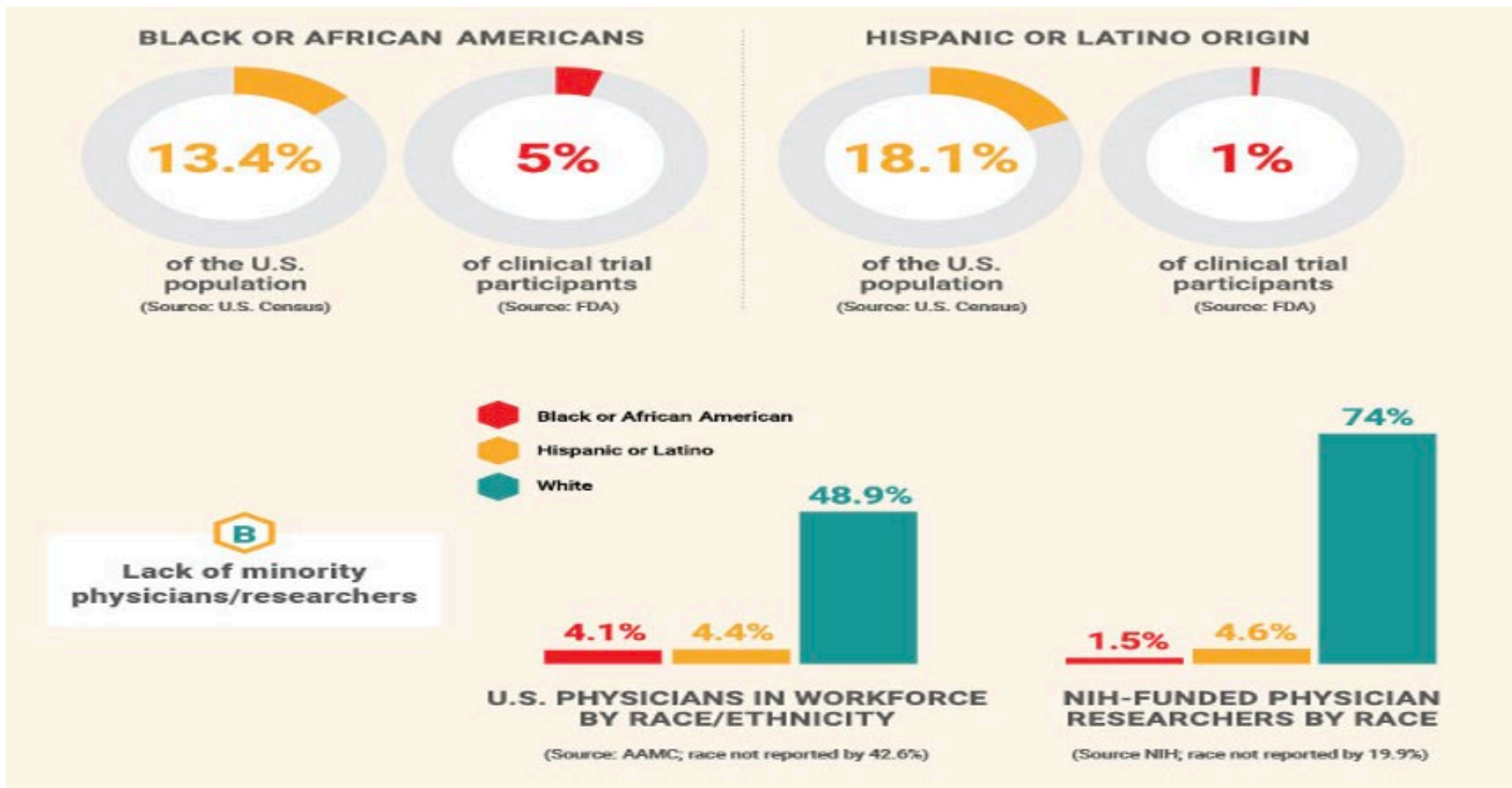
The Structure/Design of the Research Pipeline





Diversity Matters in Clinical Trials

(federal mandate 1993, with multiple subsequent updates)



<https://grants.nih.gov/policy/inclusion/women-and-minorities.htm>

<https://grants.nih.gov/policy/inclusion/women-and-minorities/guidelines.html>

<https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-014.html>

Clinical trials are research to find new ways to prevent, detect, or treat disease. These studies help doctors find better medical treatments for all people.



Click on a topic below to learn more:

Clinical trial basics

Trusting clinical trials

Diversity in clinical trials

Pros & cons of clinical trials

Healthy people in clinical trials

Sign up for our newsletter

Enter your email address to learn more

Signup



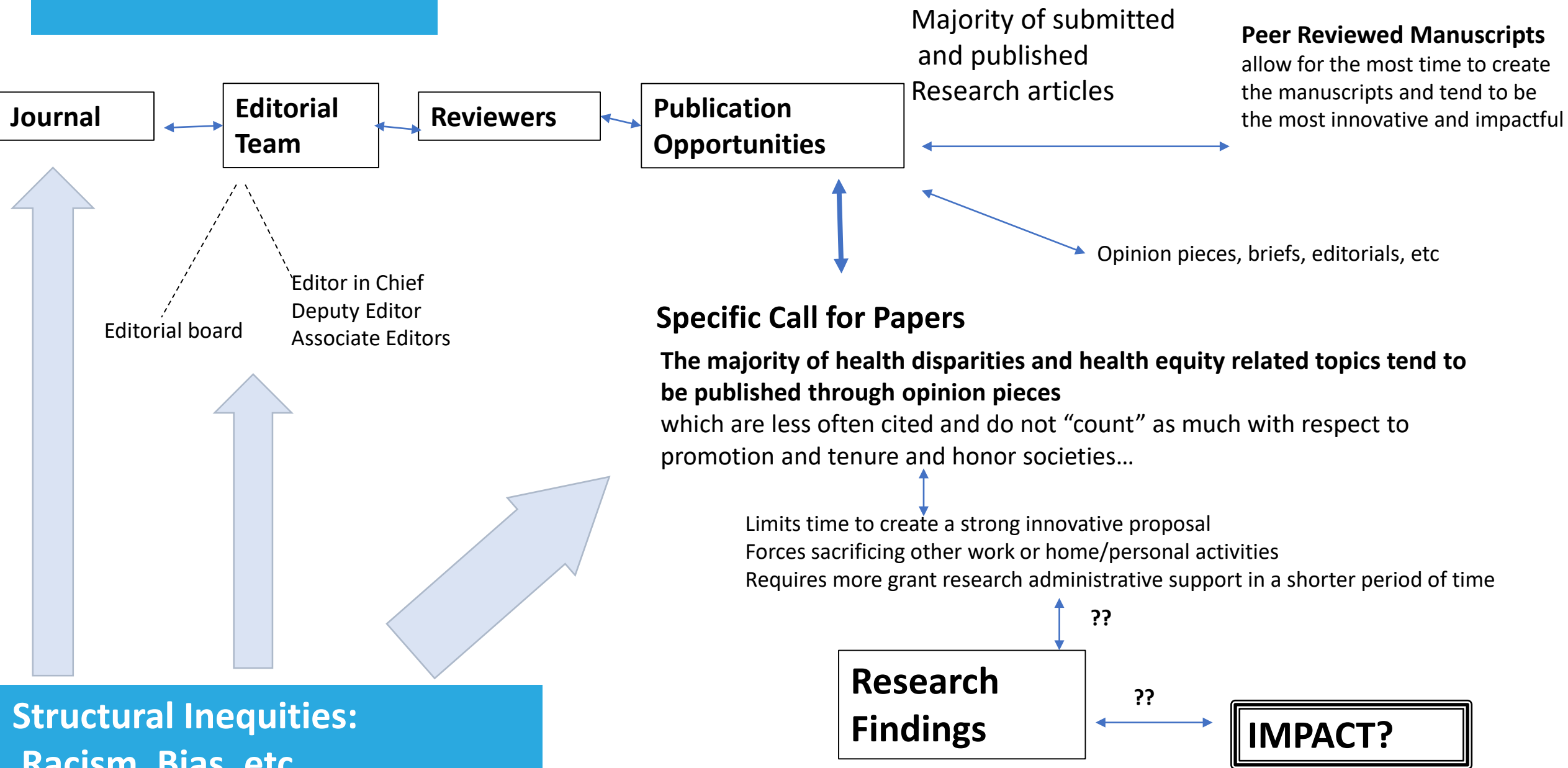
Frequently Asked Question



Glossary of Terms

The Evolving Demography in about 20 years

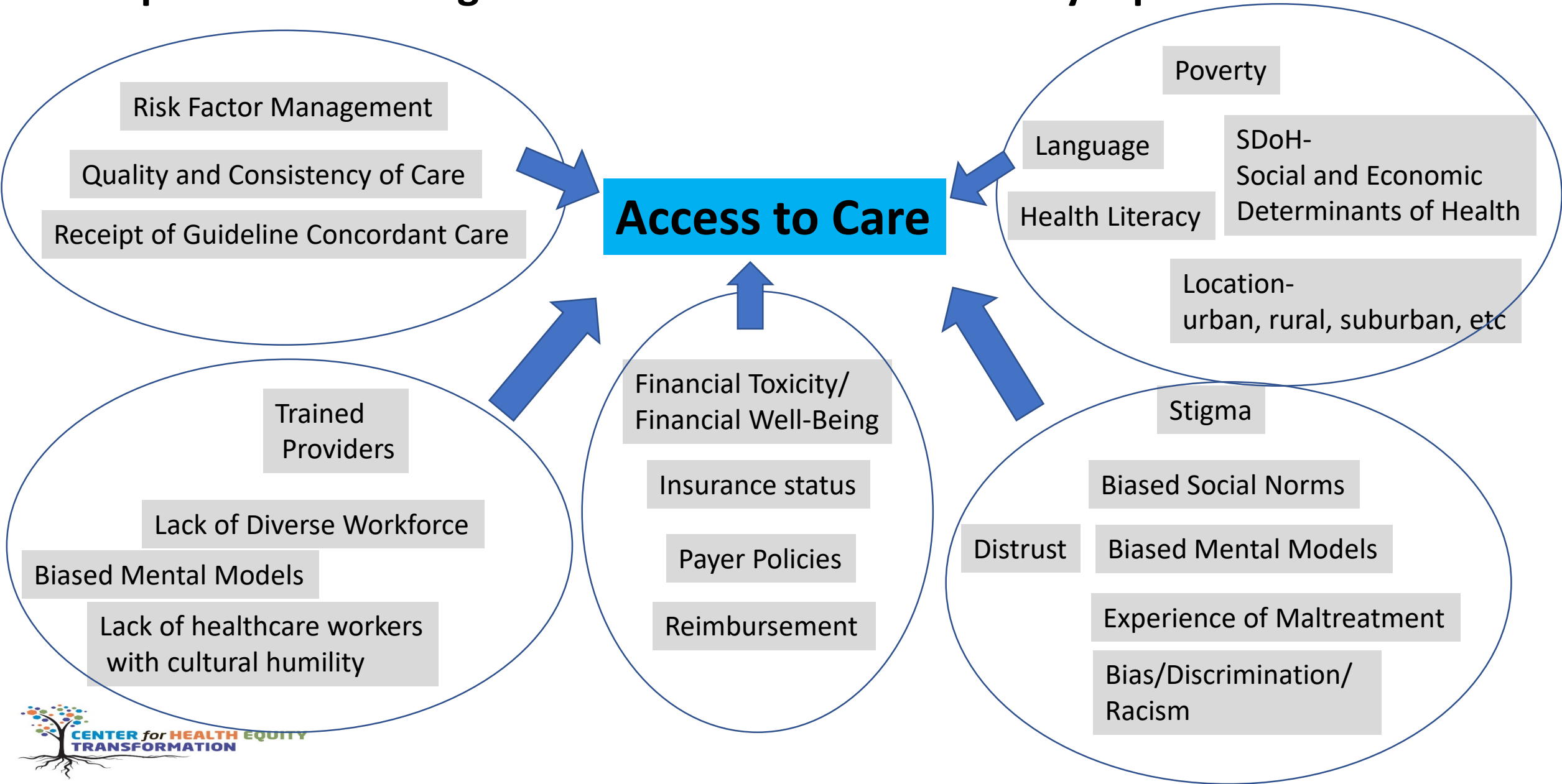
The Structure/Design of the Publication Pipeline



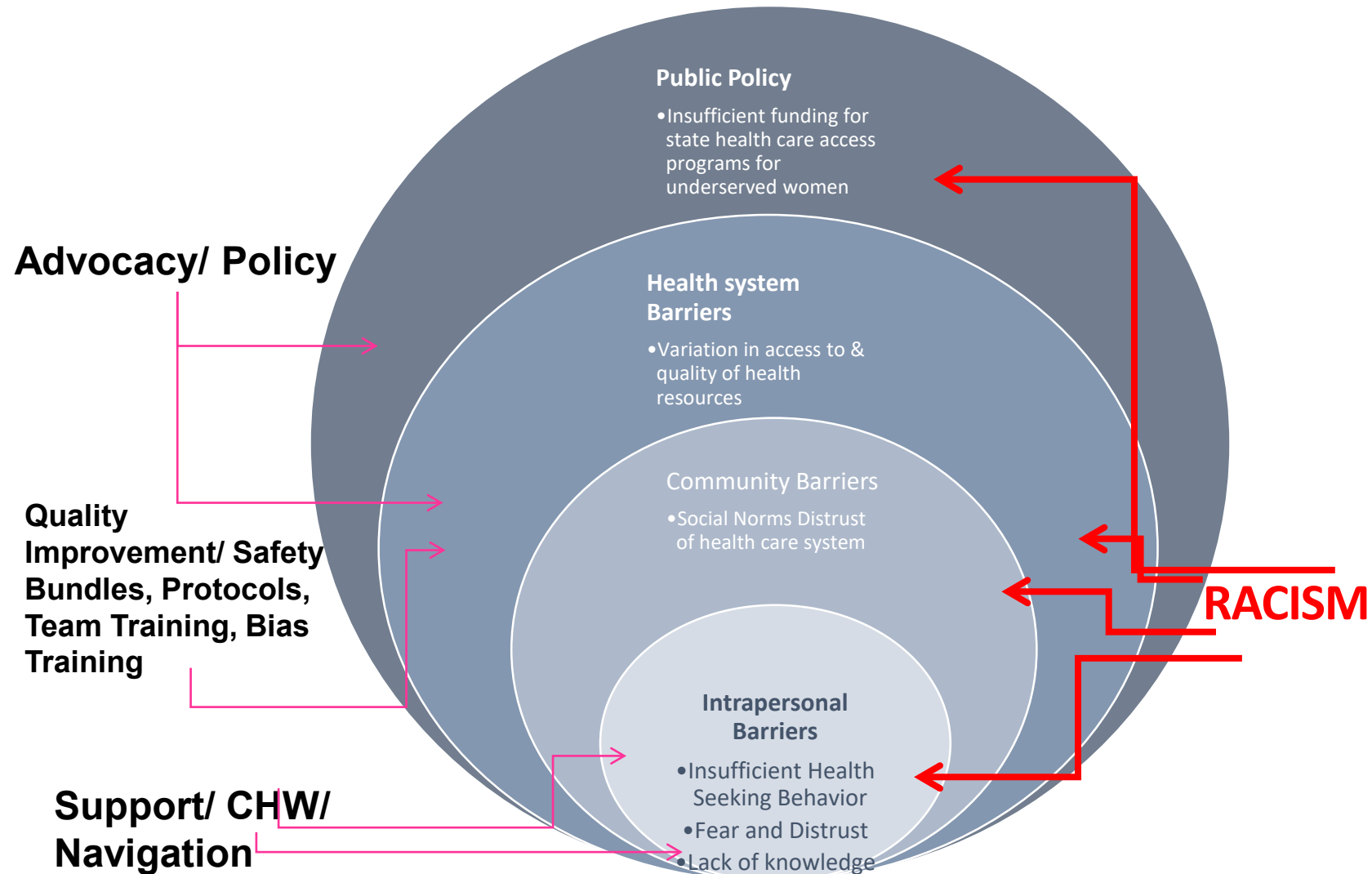
Access to Care



Inequities Exist Along the Entire Health Care Delivery Pipeline



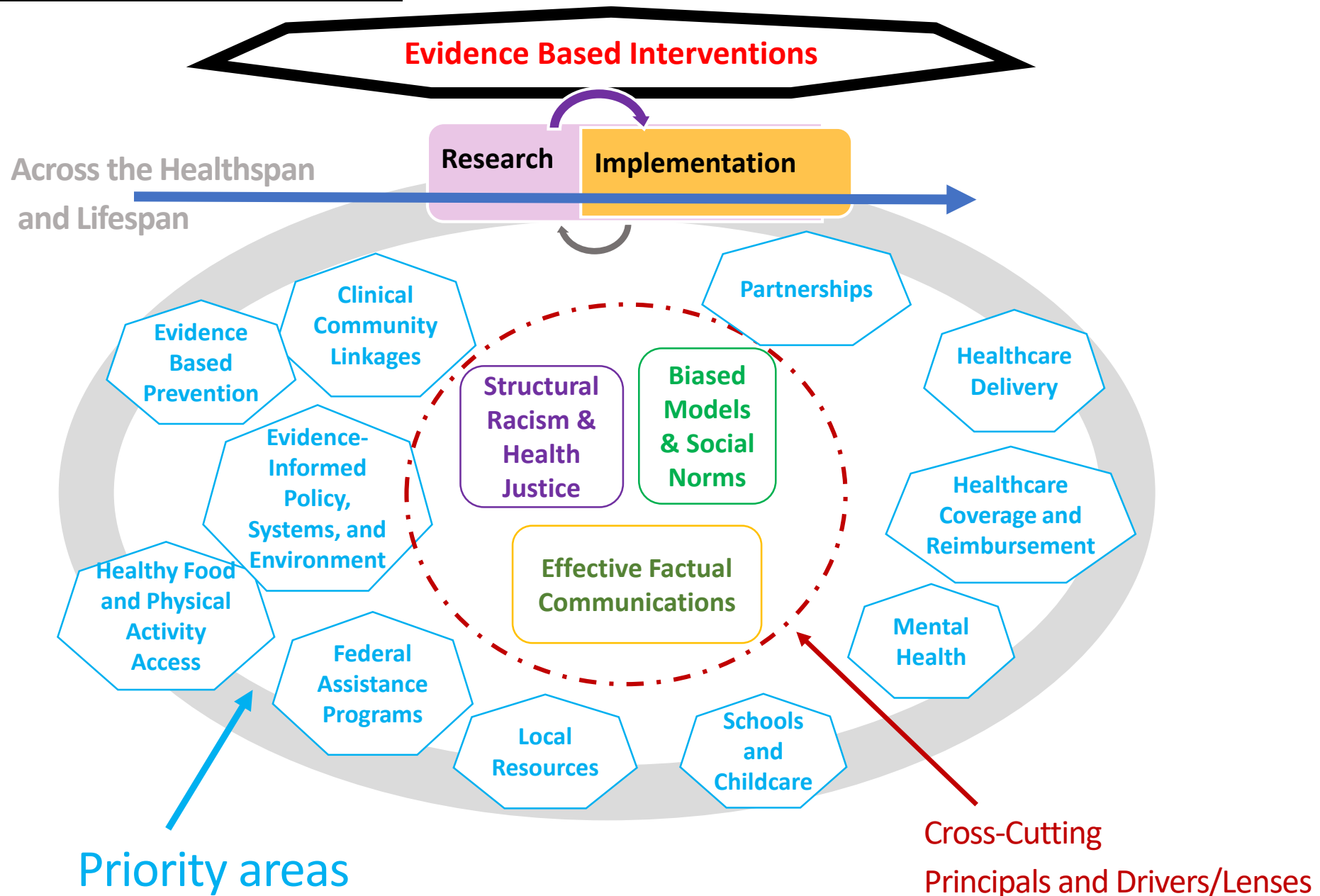
Structural Elements of the Ecology of Inequities and Strategies to Address



**Let's consider 2 integrative
and multilevel approaches that can embed
health equity-
systems thinking
and
implementation science**

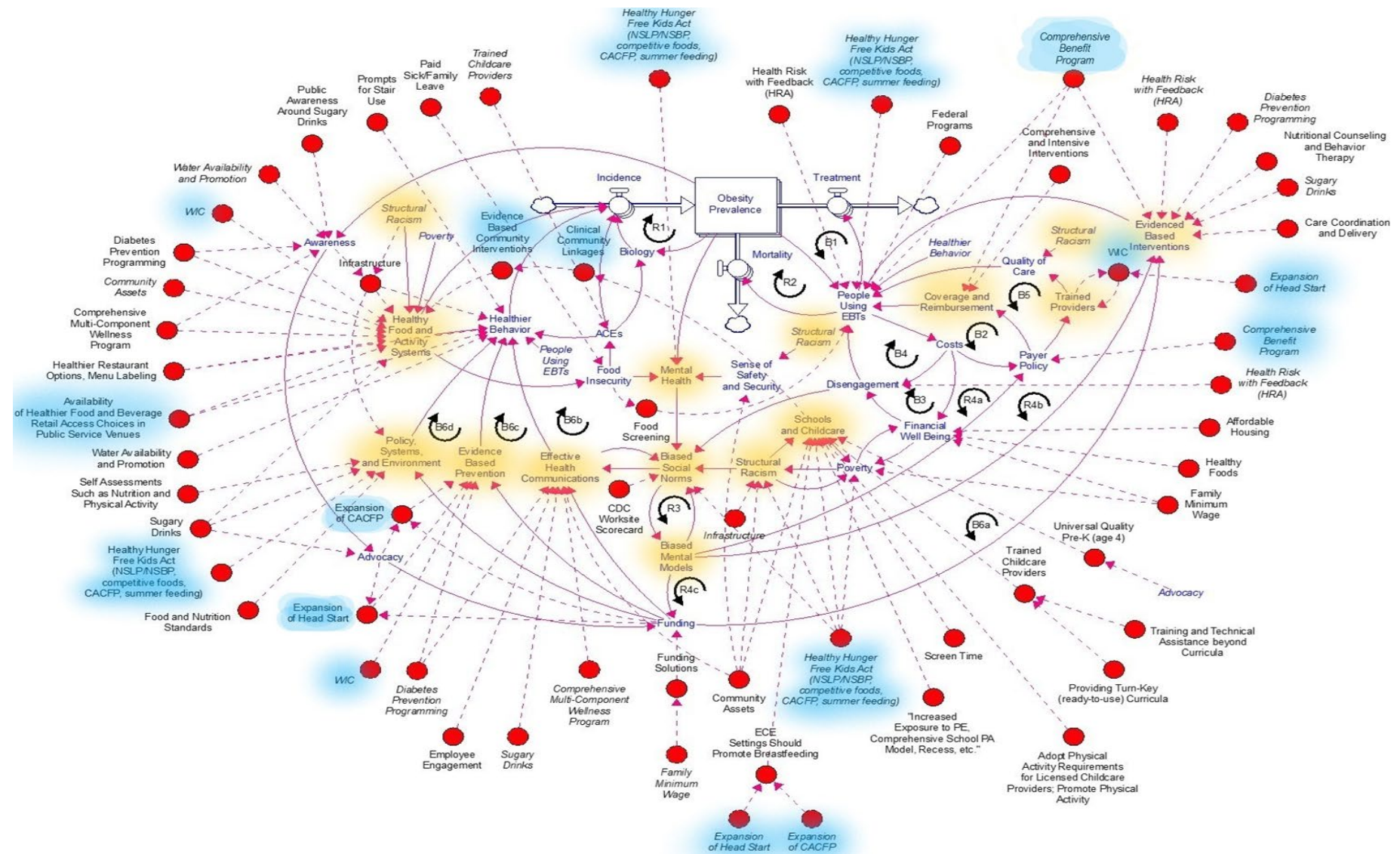


SYSTEMS THINKING: Environments and Contexts and Structures Matter



NASEM Roundtable on Obesity Solutions – Systems Map combining systems and solutions

In January 2020, the National Academy of Sciences, Engineering, and Medicine's Roundtable on Obesity Solutions (ROOS) used group model building [1,2,3] to support the strategic planning efforts of the Roundtable and its work to address obesity solutions and health inequities in obesity prevention, treatment, and management. During this collaboration, ROOS members generated a system map of drivers of obesity.



<https://www.nationalacademies.org/our-work/roundtable-on-obesity-solutions>

Editorial

Welcome to *Implementation Science*

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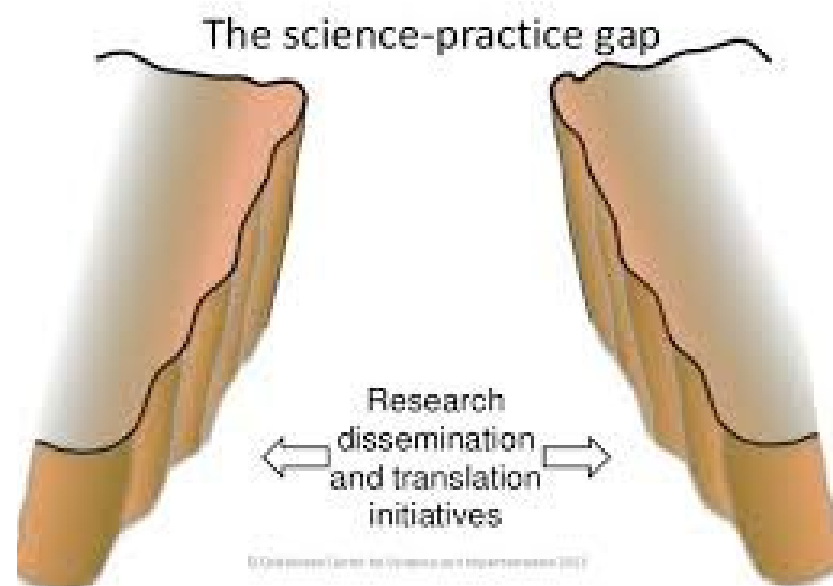
Received: 03 February 2006

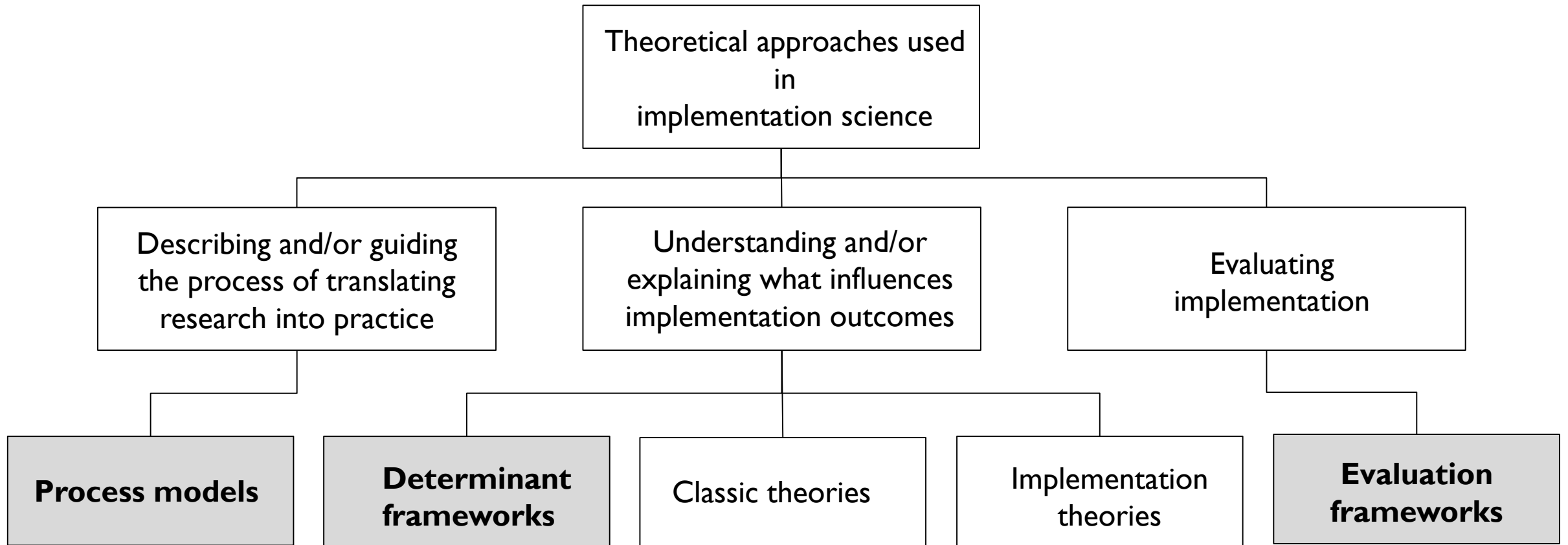
Accepted: 22 February 2006

Open Access

“Implementation science is defined as the scientific study of methods to promote the systematic uptake of research findings and other EBPs into routine practice to improve the quality and effectiveness of health services and care.”

The Promise of Implementation Science

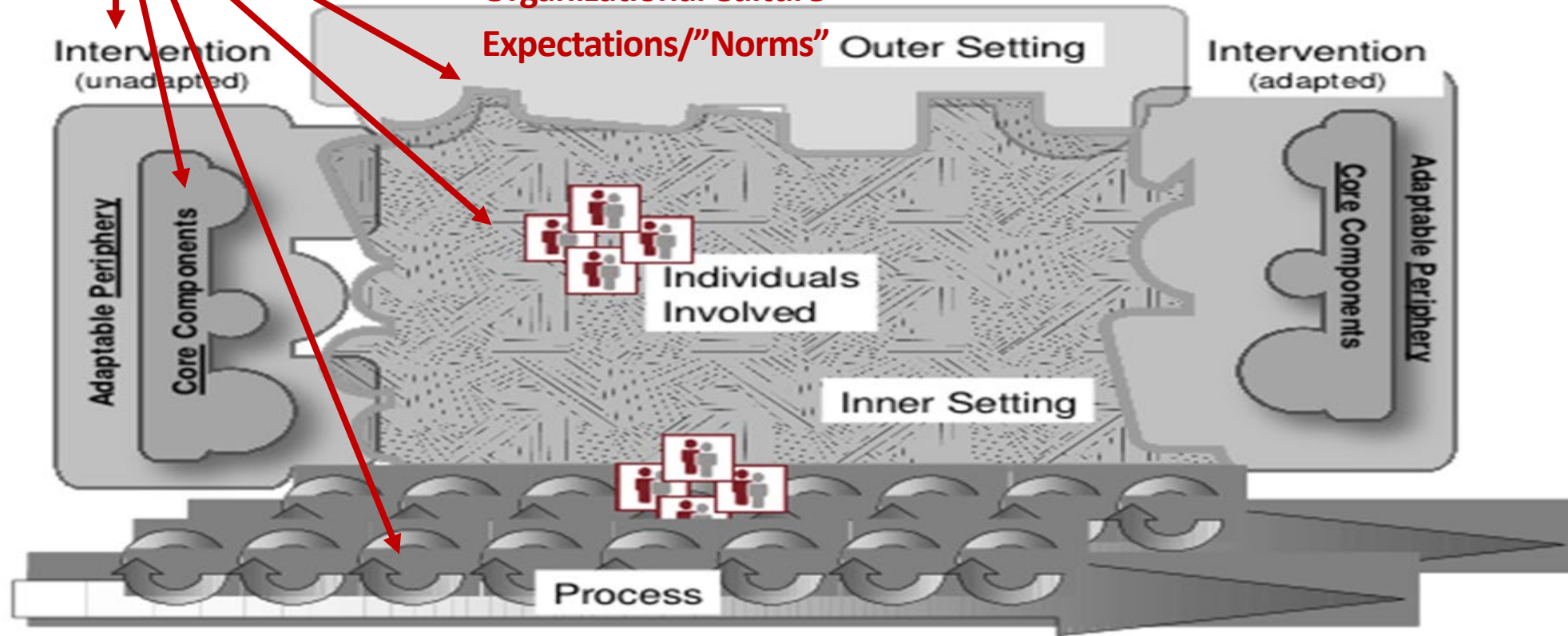




Consolidated Framework for Implementation Research (CFIR)

SYSTEMIC RACISM

Society
Sociopolitical Structures
Policies/Practices
Organizational Culture
Expectations/"Norms"



Who is the funder? What is the content of the Request for Proposals/FOA?

Who is on the research team? Who is funding the research team?

Which journals are publishing the research?

Implementation Science to Address Inequities

- *Implementation science and disparities research aim to ensure all patients received the highest quality health care

- *Implementation science offers methods to test strategies intended to reduce disparity

This includes frameworks that focus on important (often not considered) areas of focus. including reach, strategies to adapt interventions thoughtfully, a priori design of interventions and implementation with dissemination in mind,

- *There are methods such as hybrid designs that focus on examining effectiveness and implementation at the same time. This allows one to examine the underpinnings of why something is working vs. not.

- *There also is an opportunity in implementation science approaches to engage all stakeholders across the entire Adaptation, implementation and dissemination process

- *there is a focus on sustainment

- *the science of deimplementation (de-escalation) is also integral to implementation science

Baumann AA, Cabassa LJ. Reframing implementation science to address inequities in healthcare delivery. BMC Health Services Research 2020;20:190.

Chinman M, et al. Harnessing implementation science to increase the impact of health disparity research. Med Care 2017;55(Suppl 9):S16-S23.

4R Care Sequence® Plans



Example of 4R Sequence® - Breast Cancer, Surgery first

Front Page

Sequence of Care Surgery before Therapy v8.02.17		Northwestern Medicine	Robert H. Lurie Comprehensive Cancer Center at Northwestern
Name _____ DOB _____ MRN _____ Today's Date _____			
Breast Cancer Type _____ Clinical Stage _____ Hormone Receptor Status: ER _____ PgR _____ HER2 _____			
Size of breast tumor _____ # and size of Positive Lymph Nodes _____			
Initial Goal of Care <u>CURATIVE</u> Quarterback physician and nurse _____			
Care Plan	Order / Sequence of Care (arrows show required order)		Immediate Next Steps: Make Appt; Note Date/Time
<input checked="" type="checkbox"/> Checked care is in your care plan	Approximate timeline		
	w1	w2 w3 w4 w5 w6 w7 w8 m3 m4 m5 ... m9	
Breast Surgery and Care			
<input checked="" type="checkbox"/> Breast surgeon consult; care planning			<input checked="" type="checkbox"/> Today
<input type="checkbox"/> Additional imaging and/or biopsies (call Radiology / Mammography)			<input type="checkbox"/>
<input type="checkbox"/> Address emotional, practical/family and/or financial needs			<input type="checkbox"/> Social Worker <input type="checkbox"/> Navigator
<input type="checkbox"/> Reconstructive surgeon consult			<input type="checkbox"/>
<input type="checkbox"/> Fertility consult; fertility preservation			<input type="checkbox"/> If checked, schedule ASAP
<input type="checkbox"/> PCP or GYN visit: Immunization, Checkup, PAP test, other			<input type="checkbox"/>
<input type="checkbox"/> Dental consult and indicated care			<input type="checkbox"/>
<input type="checkbox"/> Genetic counseling & testing: Prior auth for test; Lab runs test. Genetic Counseling visit to discuss results			<input type="checkbox"/> If checked, schedule ASAP
<input type="checkbox"/> Surgical decision with breast surgeon (with genetic results, if tested)			<input type="checkbox"/>
<input type="checkbox"/> Schedule medical oncologist consult for one week after surgery			<input type="checkbox"/> If checked, schedule as soon as you know surgery date
<input type="checkbox"/> Medical clearance prior to surgery:			<input type="checkbox"/> Pre-Operative Clinic <input type="checkbox"/> PCP
<input type="checkbox"/> Surgery; recovery (per discharge instructions)			<input type="checkbox"/>
<input type="checkbox"/> Post-surgical breast imaging (before post-surgical, med oncology, radiation oncology consults)			<input type="checkbox"/>
<input type="checkbox"/> Post-surgical consult			<input type="checkbox"/>
<input type="checkbox"/> Physical therapy evaluation			<input type="checkbox"/>
Medical Oncology Therapy, Care			
<input type="checkbox"/> Medical oncologist consult and care; symptom management			<input type="checkbox"/>
<input type="checkbox"/> Additional tests, imaging as indicated			<input type="checkbox"/>
Radiation Therapy			
<input type="checkbox"/> Radiation oncologist consult and care			<input type="checkbox"/>
Transition to Survivorship Care			
<input checked="" type="checkbox"/> Survivorship visit to plan survivor care			<input checked="" type="checkbox"/>
<input type="checkbox"/> Breast imaging, per survivor plan			<input type="checkbox"/>
<input type="checkbox"/> Med oncology visits, per survivor plan			<input type="checkbox"/>
<input type="checkbox"/> Other visits and care, per survivor plan			<input type="checkbox"/>





Example of 4R Sequence® - Breast Cancer, Surgery first

Back Page

THE CANCER CENTER'S MAIN NUMBER IS (312) 695-0990 or (866) LURIE-CC (587-4322)		
	Contacts (check-mark your doctor/clinician)	More information about this care
Medical Oncology	Call 312.695.0990 for: <input type="checkbox"/> William Gradishar, MD <input type="checkbox"/> Massimo Cristofanilli, MD <input type="checkbox"/> Lisa Flaum, MD <input type="checkbox"/> Regina Stein, MD <input type="checkbox"/> Claudia Tellez, MD	¹ https://www.nccn.org/patients/ "Guidelines for Patients" - Chemotherapy and HER2 inhibitors; Hormone therapy sections ² Breast Cancer Treatment Handbook, chapter 10
Breast Surgery	Call (312) 695-0990 for doctors (ask for their nurse): <input type="checkbox"/> Seema Khan, MD <input type="checkbox"/> Nora Hansen, MD <input type="checkbox"/> Swati Kulkarni, MD <input type="checkbox"/> Kevin Bethke, MD	¹ https://www.nccn.org/patients/ "Guidelines for Patients": Breast surgery and reconstruction section ² Breast Cancer Treatment Handbook, Ch. 6, 8
Radiology / Mammography	<input type="checkbox"/> For imaging, call 312.926.5522 <input type="checkbox"/> For biopsy, call 312.472.4237 <input type="checkbox"/> For MRI, call 312-926-9000	¹ https://www.nccn.org/patients/ "Guidelines for Patients", PP 18, 21.
Plastic Surgery / Reconstruction	Call 312.695.6022 for a plastic surgeon. <input type="checkbox"/> Note the name of plastic surgeon	¹ https://www.nccn.org/patients/ "Guidelines for Patients" - Breast surgery and reconstruction ² Breast Cancer Treatment Handbook, Ch. 7, 8
Pre-Operative Clearance	<input type="checkbox"/> Call 312.926.4566	To receive medical clearance to proceed with surgery
Financial / Insurance	<input type="checkbox"/> Call Social Workers: 312.472.5820	http://www.cancer.net/navigating-cancer-care/financial-considerations
Practical/family, emotional	<input type="checkbox"/> Social Workers: 312.472.5820, <input type="checkbox"/> Spiritual care 312.926.2028	² Breast Cancer Treatment Handbook, Ch. 1-4, 14 http://www.cancer.gov/about-cancer/coping
Navigator	<input type="checkbox"/> Call Lynn Galuska Elsen, RN BSN at 312.472.5821 or lygalusk@nm.org	Nurse navigators serve as educators, advocates and guides for patients and their families.
Fertility Clinic	<input type="checkbox"/> Call Kristin Smith, Fertility navigator 312.503.3378 or 866.708.FERT. preservefertility.northwestern.edu	¹ https://www.nccn.org/patients/ "Guidelines for Patients" - Treatment Planning, Fertility ² Breast Cancer Treatment Handbook, chapter 17
Primary Care; Gynecologist	<input type="checkbox"/> Contact your PCP, or ask for a referral <input type="checkbox"/> Contact your Gynecologist, or ask for a referral	http://www.cancer.org/ at How can we help you? Type vaccination during cancer treatment; search
Dental Care	<input type="checkbox"/> Contact your dentist, or Naz at 312.926.4804. Northwestern Dental (private practice)	http://www.nidcr.nih.gov/oralhealth/Topics/CancerTreatment/ThreeGoodReasons.htm
Cancer Genetics	<input type="checkbox"/> Call 312.695.0320. Mention that you need a timely appointment for a surgical or treatment decision	¹ https://www.nccn.org/patients/ "Guidelines for Patients" - Treatment Planning, Genetics ² Breast Cancer Treatment Handbook, appendix A - Breast Cancer Genetic Testing
Radiation Oncology	Call Charlotte Jones 312.472.4640 for: <input type="checkbox"/> Jonathan B Strauss, MD or <input type="checkbox"/> Eric Donnelly, MD or <input type="checkbox"/> John Hayes, MD or <input type="checkbox"/> David Gius, MD For treatment in Lake Forest: 847.535.6135 <input type="checkbox"/> Joy Coleman or <input type="checkbox"/> Marc Posner	¹ https://www.nccn.org/patients/ and select "Guidelines for Patients" - Radiation Therapy section ² Breast Cancer Treatment Handbook, chapter 11
Nutrition	<input type="checkbox"/> Call 312.472.5823 - Mary Reher, MS, RDN, LD	² Breast Cancer Treatment Handbook, chapter 21 http://www.cancer.org/ at How can we help you? type nutrition during treatment and click search
Symptom Care	Call 312.695.0990 <input type="checkbox"/> For chemo side effects, ask your chemo nurse <input type="checkbox"/> For chronic pain or neuropathy, ask for an appointment with Judith Paice, PhD, RN	² Breast Cancer Treatment Handbook, chapters 10, 11
Look Good... Feel Better	<input type="checkbox"/> Call 800-227-2345 to schedule American Cancer Society session.	https://cancer.northwestern.edu/pdfs/lookgood_feelbetter.pdf
Survivorship Clinic	<input type="checkbox"/> Email Megan Oden Slocum, PA-C moden@nm.org	http://cancer.northwestern.edu/public/why_northwestern/specialty_programs/programs/womens.cfm
Gilda's Club	<input type="checkbox"/> Gosha Thornton, 312.464.9900	http://www.gildasclubchicago.org/

¹NCCN Guidelines for Patients * <https://www.nccn.org/patients/>; ²Breast Cancer Treatment Handbook by Judy C. Kneese (Hardcopy), 8th edition
 For a glossary of breast cancer words go to: <http://www.lbbc.org/learn/basic/words-to-know>
 Sign up at www.mychart.mynm.org to access some of your medical records



Quality of Care



Crossing the Quality Chasm- Principles of Health Care Redesign- using systems thinking

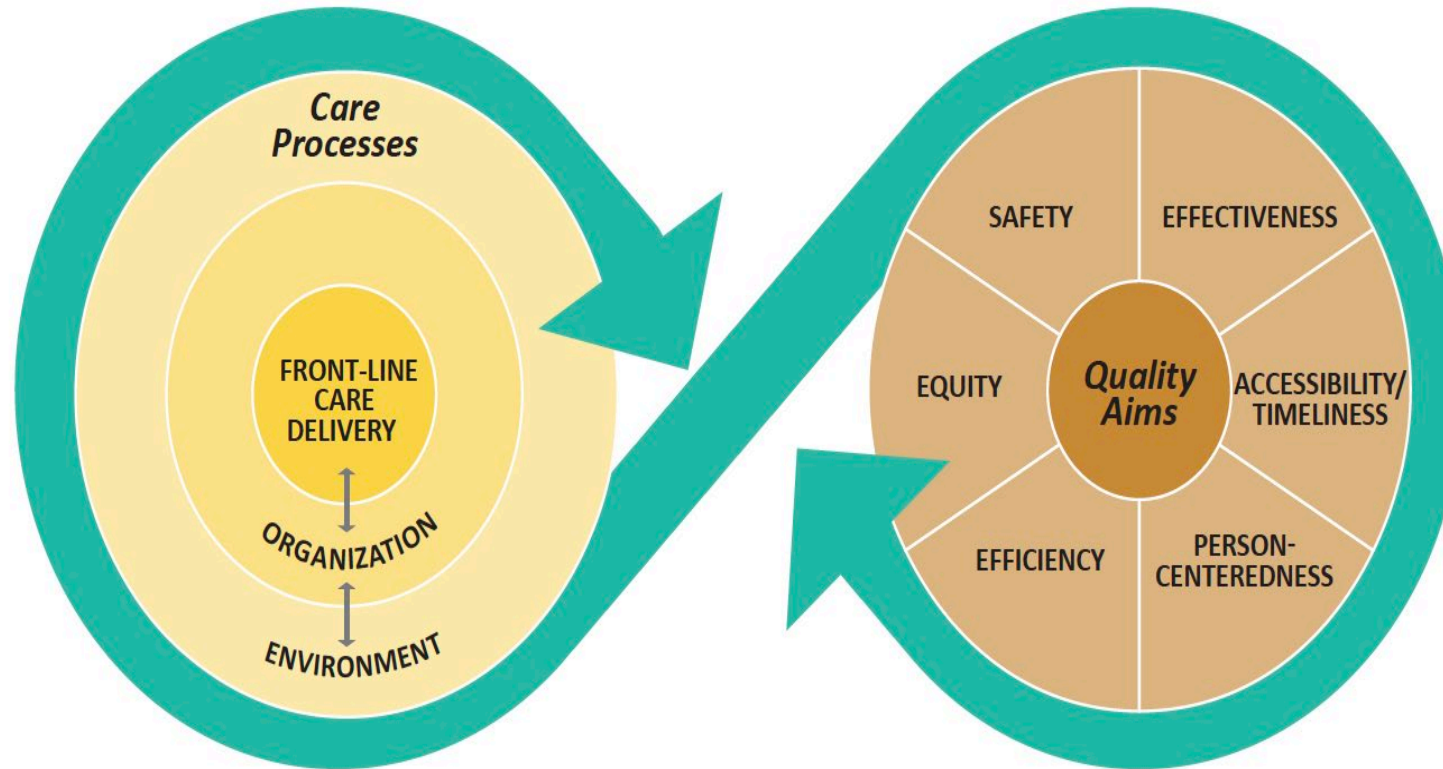


FIGURE S-2 Guiding framework for the transformation of care delivery.

Crossing the Quality Chasm- Principles of Health Care Redesign- using systems thinking

- *Care delivery prioritizes the needs of patients, health care staff and the larger community
- *Decision making is evidence based and context specific
- *Trade-offs in health care reflect societal values and priorities
- *Care is integrated and coordinated
- *Integrity, stewardship and accountability
- *Navigating the health care delivery system is transparent and easy
- *Patients and health care staff co-design care delivery and engage together
- *Care delivery is driven by continuous feedback, learning and improvement



Thank you! Join Me!!!

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<http://labs.feinberg.northwestern.edu/simon/>

Center for Health Equity Transformation

www.feinberg.northwestern.edu/sites/chet/

@HealthEquityNU

Massive Open Online Course

<https://www.coursera.org/course/healthcarejobs>

Chicago Cancer Health Equity Collaborative

www.chicagochec.org

Podcast --Skinny Trees

www.skinnytreespodcast.com



**Career 911: Your future job
in medicine and healthcare**

T37MD14248; NCI P20 233304; R01 MD014068; R01CA163830; U54 CA203000; CA2022995; CA2022997

U54CA221205; G08 LM012688; HD050121; P30 CA060553; NCI NCORP 1UG1 CA189828; NIH P30 AG059304

G08 M013188; R34 MH100443 MH100393; R24MD001650; UG3OD023189; Pritzker Foundation; Merck Foundation/ NCCN

Pfizer Foundation; Avon and Komen Foundations Lynn Sage Cancer Research Foundation, Friends of Prentice

Illinois Department of Health and Family Services, Illinois Breast and Cervical Cancer Program; American Cancer Society

