Healthcare Equity Education and Training (HEET): An anti-racism initiative for enhancing accountability for cancer care

Christina Yongue-Hardy, MPH & Jennifer Schaal, MD
There is a National Problem: Racial Disparities in Cancer Treatment

Completion of recommended treatments

Stage I/II Breast Cancer (lumpectomy & radiation)

- 85% of Whites vs. 77% Blacks

Stage I/II Lung Cancer (surgical resection)

- 78% Whites vs. 64% Blacks

Greensboro Health Disparities Collaborative

Our mission is to establish structures and processes that respond to, empower, and facilitate communities in defining and resolving issues related to disparities in health.
ACCURE Research Partnership:

- The Partnership Project
- Greensboro Health Disparities Collaborative
- UNC Center for Health Promotion and Disease Prevention
- UPMC Life Changing Medicine
- Cone Health - The Network for Exceptional Care
- Sisters Network Inc. Greensboro Affiliate Chapter
**ACCURE Intervention**

**Transparency Components**

- **Retrospective** analysis, by race, of EHR data from 2007-2011
- Automated **Real-Time** Registry with **warnings** for missed appointments and unachieved milestones
- Automated **prospective** analysis, by race, of EHR data
- **Power analysis** of cancer care system for “pressure points”

**Accountability Components**

- **ACCURE Navigator** specially trained in exploring and responding to patients’ social and belief-specific barriers, and using ACCURE’s Real-time Registry
- Site-specific **Clinical Feedback** Reports, according to race and co-morbidity status, delivered by ACCURE Physician Champion to clinicians
- **Healthcare Equity Education and Training (HEET) +** quarterly booster sessions for providers
“If racism was constructed, it can be undone. It can be undone, if people understand when it was constructed, why it was constructed, how it functions, and how it is maintained.”

Ron Chisom, Executive Director and Co-Founder
New Orleans, LA
Planning and Evaluating Healthcare Equity Education and Training

Planning Committee Members
- Physician Champions, Site Directors for community & academic partners, REI consultant, GHDC members

Process Evaluation Instruments
- Participant survey questionnaire
- Observation checklist
- Debriefing interview with HEET presenters and ACCURE observers

Responsibilities
- Publicizing & recruitment strategies
- Content & presenters
- Process evaluation data collection & analysis
SESSION I: Exercise in shifting the paradigm and thinking “outside the box” about causes of cancer health outcomes

SESSION II: Examine race-specific findings from their own cancer center’s patients’ “Power Analysis”

SESSION III: Introduce concepts of Implicit Bias

SESSION IV: Examine race-specific findings from their own cancer center’s past cancer registry data and engage staff in “Power Analysis” of their own system of cancer care

SESSION V: Examine manifestations of implicit bias in their own cancer center through gatekeeping

SESSION VI: Examine the role of gatekeeping in more depth

Overview of ACCURE Healthcare Equity Education & Training
Question #5 – “To what extent do you agree this session changed the way you think about clinical care/professional responsibilities?”

1= Strongly Disagree; 5= Strongly Agree
UPMC Participant Survey Results

Question 5 – “To what extent do you agree this session changed the way you think about clinical care/professional responsibilities?

1= Strongly Disagree; 5= Strongly Agree

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Cone Health Participant Survey Results

Question 6 – “As a result of participating in this session, I have a better understanding of the power associated with my role and responsibilities within my healthcare institution.”

1= Strongly Disagree; 5= Strongly Agree
UPMC Participant Survey Results

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In what ways do you plan to use the information presented to improve patient outcomes?

**Knowledge**

• Raise Awareness of racial disparities within institution

**Practice**

• Cone Session 2: Share Data with Colleagues
• Cone Session 4: Consider how I make decisions & who I involve
• UPMC Session 2: Identify implicit bias, remain cognizant of it to provide equal patient care
Conclusion

Application of anti-racism principles with a broad team approach can effectively diminish implicit bias within the medical system, and lead to the elimination of health disparities.
For further reading of publications from the Greensboro Health Disparities Collaborative and the ACCURE team:

www.greensborohealth.org

Thank you!