



# THE DISPARITIES SOLUTIONS CENTER

*One Goal - High Quality Care for All*

ANNUAL REPORT

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Mongan Institute for Health Policy  
Massachusetts General Hospital  
Partners Healthcare  
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**THE DISPARITIES  
SOLUTIONS CENTER**

*One Goal - High Quality Care for All*

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# Welcome

IT IS WITH GREAT PLEASURE that we present The Disparities Solutions Center's eighth Annual Report. We continue to expand our portfolio as our team meets the needs of this exciting time in health care. Our partnerships with health plans, hospitals, and health centers, among others, are yielding impressive results and we are helping create a movement to improve quality and achieve equity.

Over the course of our eighth year we are pleased to report many significant accomplishments.

These include:

- ▶ Conducting our seventh Disparities Leadership Program, targeting leaders from hospitals, health plans, and community health centers from around the country with support from The Amgen Foundation, the Agency for Healthcare Research and Quality, and a private donor
- ▶ Developing tools to help identify and address medical errors affecting hospitalized limited-English proficient patients
- ▶ Leading several national web seminars on prominent and timely topics in collaboration with the Health Research and Educational Trust of the American Hospital Association
- ▶ Publishing twelve papers in national and international journals
- ▶ Continuing our local portfolio of programs that includes our Racial and Ethnic Disparities *Keeping Current* Seminar Series and the *Stand Against Racism™* Event

We also continue to play a role in the media, with quotes from the Disparities Solutions Center Staff in several newspapers and trade publications. We are pleased to report that we continue to add to our seed funding graciously provided to us by Partners HealthCare and Massachusetts General Hospital.

Special thanks go to MGH President, Dr. Peter Slavin, and Dr. Lisa Iezzoni, Director of the Mongan Institute for Health Policy, for their continued support of the DSC.

We remain very optimistic about the course this work is taking. With each passing year, efforts to improve quality and achieve equity are garnering increasing attention locally and nationally. We aim to stay on that cutting edge, working with anyone who is interested in achieving high-value healthcare. As we approach our ninth year, we are as committed as ever to this principle.

Thank you for your support and interest in our work.



Joseph R. Betancourt, MD, MPH  
*Director, The Disparities Solutions Center*

# Overview

## Mission

The Disparities Solutions Center (DSC) is dedicated to the development and implementation of strategies that advance policy and practice to eliminate racial and ethnic disparities in health care. The DSC will achieve this mission by:

- Serving as a change agent by developing new research and translating innovative research findings into policy and practice
- Developing and evaluating customized policy and practice solutions for health care providers, insurers, educators, community organizations, and other stakeholders
- Providing education and leadership training to expand the community of skilled individuals dedicated to eliminating health care disparities

## About The Center

The DSC is the first disparities action-oriented center to be based in a hospital, which supports its practical focus of moving the issue of disparities in health care beyond research and into the arenas of policy and practice. The Center serves as a national, regional, and local resource for hospitals, physician practices, community health centers, medical schools, other health professions schools, health plans and insurers, consumer organizations, state and local governments, foundations, and other key health care stakeholders.

The DSC received an initial funding commitment from Massachusetts General Hospital (MGH) and Partners HealthCare. Housed within the Mongan Institute for Health Policy, the Center is affiliated with Harvard Medical School's Department of Medicine and the MGH Division of General Medicine.

## Motivation

The creation of the DSC builds upon a commitment by MGH to eliminate racial and ethnic disparities in health care. MGH first established a system-wide Committee on Racial and Ethnic Disparities in 2003 to focus internal attention on the challenge of disparities, improve the collection of race/ethnicity data, and implement quality improvement programs to reduce disparities. The Center was established in response to national and local calls to address disparities in health care.

### National

In March 2002, the Institute of Medicine (IOM) released the landmark report *Unequal Treatment: Confronting Racial/Ethnic Disparities in Health Care*. The IOM report revealed striking disparities in the quality of health care services delivered to minority patients, when compared to the majority. As a result, the IOM urged the development of interventions and educational efforts to eliminate disparities.

### Boston

Following a two-year process involving health experts, community leaders, and city residents, on June 23, 2005, Boston Mayor Thomas M. Menino launched a citywide project aimed at eliminating disparities in health care. The Mayor's recommendations included concrete action steps for hospitals and other health care organizations.



# Major Accomplishments and Partnerships

## National

### Disparities Leadership Program

To address the need for leaders with expertise in addressing racial/ethnic disparities in health care, the DSC created The Disparities Leadership Program (DLP) in 2007. The DLP is a year-long executive education program designed for leaders from hospitals, health plans and other health care organizations – such as executive leaders, medical directors, directors of quality, directors of community benefits or multicultural affairs offices – who wish to implement practical strategies to eliminate racial and ethnic disparities in health care, particularly through quality improvement.

The goal of the DLP is to create a cadre of health care leaders who have:

- An in-depth knowledge of the causes and research surrounding health care disparities
- Cutting-edge, quality improvement strategies and skills to address disparities
- The tools to help their organizations prepare to meet new standards and regulations from the Joint Commission, the National Committee on Quality Assurance, and the Patient Protection and Affordable Care Act
- The leadership skills to implement solutions and help transform organizations

The DSC is helping individuals from organizations – who may be at the beginning stages or in the middle of developing or implementing an action plan or project to address disparities – to further advance or improve their work in a customized, tailored fashion.

The DLP is jointly sponsored by the National Committee on Quality Assurance and supported by Joint Commission Resources (an affiliate of the Joint Commission). This year, the Disparities Leadership Program received external funding to support the program from The Amgen Foundation and the Agency for Healthcare Research and Quality (AHRQ)

### 2012-2013 DLP Class

The DSC hosted the closing meeting of the 2012-2013 Disparities Leadership Program on February 26th and 27th in Santa Monica, CA. Participants began the program in May of 2012 and re-convened to present their projects, progress to date, challenges, successes, and next steps to the entire group. The meeting was attended by 38 participants from 16 organizations including 4 health plans, 8 hospitals, 1 community health center, and 3 professional organizations from 11 different states and Switzerland. The meeting also included presentations by DLP faculty on leading organizational change and providing participants with tools to move forward with their projects upon returning to their organizations.

At the February meeting, 4 teams from the 16 health care organizations from around the United States were selected from the DLP Class of 2012-2013 to receive a Best Overall Project Award.

Recipients were selected based on various criteria, including the trajectory of the project since its starting point and the breadth of impact of the project on the organization. Additionally, these projects demonstrated the greatest progress, clarity, and overall achievements over the course of the year. Recipients of this award include:

- Kaiser Permanente, Oakland, CA
- University of California, Davis Health System, Sacramento, CA
- Mount Carmel Health System, Columbus, OH
- Texas Health Resources, Arlington, TX

# Major Accomplishments and Partnerships

## *2013-2014 DLP Class*

The DSC launched the 2013-2014 class by hosting the first meeting on May 21st and 22nd, 2013 at the Le Meridian Hotel in Cambridge, Massachusetts. Twenty-one participants from 11 organizations attended the opening meeting:



## *Community Health Centers*

Bessie Mae Women's Health Center,  
East Orange, NJ  
Manchester Community Health Center,  
Manchester, NH  
North Texas Area Community Health Centers,  
Fort Worth, TX

## *Health Plans*

Geisinger Health Plan, Danville, PA  
San Francisco Health Plan, San Francisco, CA  
Blue Cross Blue Shield of Massachusetts,  
Boston, MA

## *Hospitals*

Hartford Hospital, Hartford, CT  
Massachusetts General Hospital,  
Department of Neurology, Boston, MA  
University of New Mexico Hospitals,  
Albuquerque, NM  
Trinity Health, Livonia, MI

## *Professional Organizations*

Latino Health Care Forum, Austin, TX

## *DiversityRx 2013: The Eighth National Conference on Quality Health Care for Culturally Diverse Populations*

On March 11-14, 2013, 10 alumni, participants and DSC/DLP faculty participated in nine panels and six poster sessions at the DiversityRx Conference in Oakland, California. The DSC also hosted an informal networking dinner with six representatives from five DLP classes.

## *Disparities Leadership Program: Strategies to Address Disparities in Health Care*

The DSC and two DLP participants presented their projects at the Institute for Healthcare Improvement's Annual National Forum on Quality Improvement in Healthcare on December 11, 2012 in Orlando, FL. Presenters included Alexander Green, MD, MPH, of the Disparities Solutions Center, Mina Kini, MSW, MS, of Texas Health Resources, and Marbella Sala and Angela Gandolfo, MBA, of University of California, Davis Health System.

## **Building Leadership to Promote Equity in Health Care: Evaluating the Impact of the DLP**

With support from the Aetna Foundation, in 2012 the DSC commissioned an external evaluation to assess the impact of the DLP over the past five years on participating organizations' efforts to address healthcare disparities.

The formal, external evaluation of the DLP, funded by The Aetna Foundation, found that:

- The DLP has been a key factor for health plans, community health centers, and hospitals to make progress on identifying and addressing disparities. It has provided the focus, structure, and support that organizational teams needed to make strides forward.
- The DSC faculty and staff are highly regarded by those in the program for their passion and commitment and for what they have achieved and model for others. They have provided unwavering support to DLP alumni and their organizations.



- Significant progress is being made by DLP organizations to integrate health equity into their strategic plans and to develop systems to achieve equity.

In summary, the DLP evaluation highlighted the need to both expand the program, and broaden participation in the program among a diverse group of health care leaders.

**The Healthcare Quality and Equity Action Forum: Preparing for a Changing Healthcare System**

The inaugural Healthcare Quality and Equity Action Forum took place in Boston, MA on September 24th and 25th, 2012. The Forum had over 150 attendees and served as a dissemination and implementation conference developed and led by the DSC, as well as alumni from the Disparities Leadership Program. The goal of the forum was to provide the background, key drivers and essential strategies to improve quality and achieve equity in a time of rapid healthcare system change. It provided participants with the tools and skills to identify and address racial and ethnic disparities in health care within their organizations, with the goal of empowering them to implement these strategies and transform their organizations to focus on quality and equity.

The agenda included Grounding Sessions, Action-Oriented Workshops, and From the Front Line Learning Panels. Topics from the conference included:

- Setting the Stage: Equity and Quality in a Time of Healthcare System Change
- Moving from the Margin to the Mainstream: Understanding the Equity Drivers
- Being Prepared for the Future: Moving beyond Knowledge to Action

**Centers for Medicare and Medicaid Services – Data for Race and Ethnicity (DARE)**

Congress enacted the Medicare Improvement for Patients and Providers Act of 2008 (MIPPA) which requires the Department of Health and Human Services to evaluate how Centers for Medicare & Medicaid Services (CMS) currently collects race, ethnicity and gender data on Medicare beneficiaries. The DSC has been subcontracted to do the following:

- Review and compile CMS’ current policies, procedures, methods and sources for the collection of Medicare race and ethnicity data
- Recommend standardized methods and sources for collecting Medicare race and ethnicity data
- Recommend standardized methods and sources for the collection of data for gender, primary language and disability status of Medicare beneficiaries

As part of the Data for Race and Ethnicity (DARE) project, the DSC is collaborating with Innovative Management Strategist and HCD International to conduct an environment scan and an extensive literature search focusing on current methods for collecting data. The team will also develop a business process model that will include recommendations for cost-effective methods and sources for collecting data for race, ethnicity, gender, primary language, and disability status of Medicare beneficiaries.



# Major Accomplishments and Partnerships

## **Improving Patient Safety – System Implementation for LEP Patients**

The Disparities Solutions Center, in collaboration with Abt Associates, Inc. in Cambridge, MA, was awarded a four-year contract by the Agency for Healthcare Research and Quality (AHRQ) to develop tools to reduce medical errors and improve care for limited English proficiency (LEP) patients in hospitals. The project used a robust mixed methods approach to 1) identify the role of language and cultural barriers on patient safety events; 2) document how hospitals are addressing the safety of LEP and culturally diverse patients; and 3) provide guidance and tools for how hospitals can address these issues. The final products include a Hospital Guide and a TeamSTEPPS Training Module focused on improving team communication to reduce medical errors for LEP patients.

The Hospital Guide provides quality and safety leaders within hospitals a variety of key guidelines and strategies for identifying, reporting, and addressing medical errors that occur as a result of language barriers in LEP and culturally diverse patients. The Guide will provide hospital leaders with systems-level information on how to develop reporting systems that can successfully capture medical errors that predominantly affect LEP patients, as well as modalities that can be implemented to prevent errors for LEP and culturally diverse patients. The TeamSTEPPS training module is designed for the full interprofessional care team, including interpreters, and includes a case-based video vignette of an LEP patient in the emergency room. The goal of the Module is to help the interprofessional care team acquire the knowledge, attitudes and behaviors needed to reduce the number and severity of patient safety events that affect LEP and culturally diverse patients. These tools are available on the DSC website: <http://www2.massgeneral.org/disparitiessolutions/resources.html#LEPGuide>

## **Interprofessional Curriculum: Providing Safe & Effective Care for Patients with LEP**

Health professions students do not typically receive formal training on the key principles of patient safety and the prevention of medical errors, and there exist few, if any, curricula that focus on safety for patients with LEP. The lack of training in this area affects the preparedness of medical and nursing students, residents, and ultimately practicing clinicians to care for the growing number of patients with LEP in the U.S.

To address this, the Disparities Solutions Center, in collaboration with the MGH Institute of Health Professions and with the support of The Josiah Macy Jr. Foundation, developed an interprofessional curriculum to educate students in the health professions to:

- Understand the evidence of disparities and high rate of medical errors, particularly for patients with limited English proficiency
- Work effectively with interpreters and other care team members to ensure safe, high quality care for patients with LEP
- Explore how systems of care can be improved to ensure quality and safety for patients with LEP in a team environment

The curriculum is built on a web-based teaching platform with associated classroom sessions and online group assignments. Curriculum content and teaching approaches were developed based on focus group feedback from Harvard Medical School and MGH IHP School of Nursing students and faculty.

The course was pilot tested in 2013 with an interprofessional group of students from Harvard Medical School and the MGH IHP School of Nursing. Results of the pilot testing will be used to refine the curriculum and develop a set of recommendations for implementation as a formal part of medical and nursing school curricula.

### **DSC Web Seminar Series**

In an effort to disseminate the latest information on disparities interventions, findings from important disparities research, and health policy updates regarding disparities reduction efforts, the DSC hosts regular web-based seminar series. The series is comprised of web seminars that feature informative presentations from leaders in the field. Following the presentation is a facilitated discussion and question-and-answer session with panelists and audience members.

#### *Identifying and Preventing Medical Errors in Patients with Limited-English Proficiency: New Tools for the Field - October 16, 2012*

To date there has been no specific guidance or tools to assist healthcare organizations to prevent medical errors in patients with limited-English proficiency. With support from the Agency for Healthcare Research and Quality, a new Hospital Guide and TeamSTEPPS training tools have been developed for exactly this goal. As part of the

field testing process, two organizations have implemented several key action steps from this portfolio of tools. This presentation highlighted the key aspect of the Hospital Guide and TeamSTEPPS module, as well as lessons learned to date from implementation on the frontline.

The panel of experts included:

- Joseph Betancourt, MD, MPH – Director, The Disparities Solutions Center at Massachusetts General Hospital, Boston, MA
- Cindy Brach, MPP – Senior Health Policy Researcher, Agency for Healthcare Research and Quality
- Anabela Nunes, MBA – Director of Medical Interpreter Services, Massachusetts General Hospital
- John Cowden, MD, MPH – Interim Section Chief, General Pediatrics, Medical Director, Office of Equity and Diversity, Children’s Mercy Hospitals and Clinics

# Major Accomplishments and Partnerships

## **Local: Massachusetts General Hospital/ Partners Healthcare System**

### **Racial and Ethnic Disparities: *Keeping Current Seminar Series***

The DSC hosts regular discussion forums to disseminate the latest information on interventions, findings from research, and health policy updates regarding disparities efforts. These discussion forums feature informative presentations from experts in the field as well as context, perspectives, and opinions from key healthcare stakeholders. Following the presentation is a facilitated discussion period between presenters and attendees.

### *Professional Language Interpretation and Inpatient Length of Stay and Readmission Rates – August 7th, 2012*

Mary Lindholm, MD, Clinical Associate Professor of Family Medicine and Community Health at the University of Massachusetts Medical School in Worcester, Massachusetts, and Lee Hargraves PhD, Research Associate Professor of Family Medicine and Community Health at the University of Massachusetts Medical School discussed their recently published paper “Professional Language Interpretation and Inpatient Length of Stay and Readmission Rates.” Their research indicates that the length of a stay in the hospital for LEP patients was significantly longer when professional interpreters were not used at admission and/or discharge.

### *Hearing All Voices: Race, Ethnicity, Language, and the MGH Patient Experience – April 4, 2013*

This seminar featured a presentation by Karen Donelan, ScD, EdM, Senior Scientist at the Mongan Institute for Health Policy at Massachusetts General Hospital. The presentation explored the trends in patient satisfaction over time, as well as opportunities for institutionalizing continual assessment of patient satisfaction in domains connected to racial, ethnic, and linguistic disparities in health care.

### ***Stand Against Racism***

The Disparities Solutions Center, the Multicultural Affairs Office, and the Center for Community Health Improvement came together to host this year’s Annual YWCA Stand Against Racism Event. *Stand Against Racism™* is a national movement that was initiated in 2007 to raise awareness that racism still exists in our communities. The objective of these “Stands” is to bring organizations around the nation together to unite and eliminate racism.

### ***Annual YWCA Stand Against Racism Event – April 23, 2013***

This event featured a segment from the critically acclaimed 2012 documentary, *The House I Live In*, which recognizes drug abuse as a public health concern while also examining the disproportionate impact of the U.S. war on drugs on people and communities of color. The film segment was followed by an audience discussion facilitated by Alexander R. Green, MD, MPH, Associate Director of the Disparities Solutions Center and Deborah Washington, PhD, RN, and Director of Diversity for Patient Care Services at MGH.

### **MGH Committee on Racial and Ethnic Disparities**

The MGH Committee on Racial and Ethnic Disparities in Health Care was created in 2003 with the goal of identifying and addressing disparities within MGH. Dr. Joseph Betancourt co-chairs the committee with Joan Quinlan, MPH, of the MGH Center for Community Health Improvement. Faculty and staff from the DSC provide staffing and technical support to the Committee, which meets twice a year. The Committee oversees various hospital-based efforts to identify and reduce health care disparities, as outlined below.



### *Annual Report on Equity in Health Care Quality*

Under the auspices of the Massachusetts General Hospital Committee on Racial and Ethnic Disparities, the DSC helped develop and disseminate the hospital's sixth *Annual Report on Equity in Health Care Quality*. The goal of the AREHQ, formerly called the Disparities Dashboard, is to monitor key components of quality by race and ethnicity, identifying key areas for quality improvement, and reporting on the progress of initiatives addressing disparities at MGH. The AREHQ provides an overview of the diversity of the hospital's patients and data regarding interpreter service use, clinical quality measures for both inpatient and outpatient services by race/ethnicity, and patient experiences with care for different racial and ethnic groups. The AREHQ was expanded in 2013 to include data on racial and ethnic disparities at a departmental level.

Equity measures are posted externally on the MGH Quality and Safety Website: <http://qualityandsafety.massgeneral.org/>

### *Improving Care for Patients with Limited English Proficiency (LEP)*

As part of the DSC's efforts to develop strategies and systems to prevent medical errors among patients with LEP, we continued to support the following initiatives at MGH: 1) interpreter rounds; 2) executive quality & safety rounds focused on LEP; and 3) training initiatives for interpreters.

- Interpreter Rounds – With oversight and training from the Manager of Interpreter Services, select interpreters have been trained to conduct rounds on a random sample of patients with LEP. The purpose of these rounds is to assess patients' knowledge of interpreter services and whether patients' language needs are being met during inpatient hospital stays. Results are pending, and data from this project will be used to inform further quality and safety initiatives focused on LEP patient care.

- Executive Quality & Safety Rounds – The Director of Interpreter Services accompanies the Center for Quality and Safety team and Senior Executive on an intermittent basis on Walk Rounds to various inpatient and ambulatory practice units. The rounds include targeted questions for staff on their concerns and questions regarding care for patients with LEP. If a number of issues are raised, the Director of Interpreter Services returns to the unit for follow-up education.
- Training Initiatives – The DSC also developed a training initiative for interpreters that focused on improving care for patients with LEP. The goal is for interpreters to be aware of patient safety events and to feel empowered as critical members of the care team. We have seen an increase in safety reports filed by interpreters and other interpreter services staff to raise awareness of quality and safety issues pertaining to patients with LEP. These reports have provided the opportunity to offer education and training in specific areas to enhance services to the LEP patient population.

### *Exploring Patient Experience: Racial and Ethnic Minority Patients*

In 2012, the DSC conducted a targeted survey of racial/ethnic minority patients that included questions related to standard patient experience domains (e.g. experience of scheduling, health care services, referrals, unmet needs) and disparities-related issues (e.g. experiences of perceived discrimination or unfair treatment). This survey was based on a previous survey conducted in 2004 among racial and ethnic minority patients at MGH and included questions drawn from a number of national surveys on patient experience, cultural competency, bias and discrimination, and patient/provider communication.

# Major Accomplishments and Partnerships

Key findings trended from 2004 to 2012 showed great progress. Overall, the findings reveal a very positive climate for racially and ethnically diverse patients at MGH. The perceptions of minority patients that minority patients receive a lower quality of care than White patients at MGH have declined since 2004, most notably among Black/African American and Hispanic/Latino patients.

## *Colorectal Cancer Screening Disparities Program*

In 2006, MGH found disparities in colorectal cancer (CRC) screening between Latinos and whites at the MGH Chelsea Health Care Center. To address this disparity, the DSC, the MGH Gastroenterology Unit, the Center for Community Health Improvement, and MGH Chelsea Health Care Center designed the Chelsea Colorectal Cancer Screening Program, a quality improvement and disparities reduction intervention. The program focuses on patient education, and overcoming logistical, financial, and other system barriers to colonoscopy screening. Outreach workers and interpreters at the health center were trained to become navigators. Results from a randomized control trial show that patients in the intervention group (receiving navigator services) were more likely to undergo CRC screening than patients receiving usual care services, and the higher screening rate resulted in the identification of more polyps in the intervention group. The CRC navigator program is currently available to all patients at MGH Chelsea.

## **Harvard Medical School Cross-Cultural Care Committee**

Dr. Alexander Green is chair and Dr. Joseph Betancourt is vice-chair of the Cross-Cultural Care Committee at Harvard Medical School (HMS). DSC staff members provide support for the activities of the committee. The mission of the Cross-Cultural Care Committee (CCCC) is to foster the development of curricula and faculty to prepare Harvard medical students with the knowledge, skills and attitudes needed to provide the highest quality of care for patients of all social and cultural backgrounds, and to work towards the elimination of disparities in health and health care.

## *Educational Experiences*

The CCCC developed a range of learning experiences on cross-cultural care and integrated them into several required courses, including: the Introduction to the Profession sequence for all entering Harvard medical students; the Patient-Doctor course sequence focusing on history taking and communication skills; and Pathophysiology. Using simulated patient cases, the CCCC teaches cross-cultural issues to students who now complete a 2-hour interactive e-learning program on cross-cultural care. In addition, the CCCC educates teachers by providing several faculty development seminars and workshops on cross-cultural care each year. This has led to a core group of highly trained faculty with expertise in teaching these issues.

## *Harvard Medical School Student Survey*

Dr. Green led the development of a four-year survey to assess HMS students' preparedness and skill to provide cross-cultural care, and to assess the educational curriculum at HMS. The electronic survey was distributed to all HMS students in the fall of 2009, 2010, 2011 and 2012 with an overall response rate of 60.2 percent. The survey tracked students' attitudes, skills, and level of preparedness, across different levels of medical education, regarding the provision of cross-cultural care. The role of the HMS curriculum in shaping students' perspectives and experiences in this area are also being explored. Findings from the survey were shared internally and will be used to inform further development of the HMS curriculum. Publications using the survey data are in process.

## Dissemination

### Website

The DSC website, [www.mghDisparitiesSolutions.org](http://www.mghDisparitiesSolutions.org), provides information about the DSC team, its background and mission, current projects, awards, and several resources for the public. The website has had over 42,000 visits in the past year. DSC resources and tools continue to be downloaded from the website. Improving Quality and Achieving Equity: A Guide for Hospital Leaders was one of our most downloaded and accessed resource. During this year, it was downloaded over 1,400 times.

### Distribution List and E-Newsletter

The DSC distributes its monthly e-newsletter to inform interested parties of upcoming events, recent developments, and other news from the DSC. The number of subscribers continues to grow and this year we have over 4,400 members from the health care community throughout the country. The distribution list allows us to provide pertinent announcements from other leading health care organizations and is a mechanism for the national dissemination of disparities-related news and events.

**The Disparities Solutions Center at Massachusetts General Hospital**  
152 likes · 5 talking about this · 1 was here

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Non-Profit Organization  
The Disparities Solutions Center (DSC) is dedicated to the development and implementation of strategies that advance policy and practice to eliminate racial and ethnic disparities in

About   Photos   Likes   Map   Events

# Funding and Donations

The DSC was founded with a \$3 million grant from Massachusetts General Hospital and Partners Healthcare in 2005. In addition, the Center has been awarded the following grants and contracts\*:

## I. Year 1: July 2005 - June 2006

Blue Cross Blue Shield of Massachusetts Foundation	123,818
Boston Public Health Commission	25,000
Harvard Medical School	15,000
The California Endowment	14,427
The Robert Wood Johnson Foundation	511,250
The Robert Wood Johnson Foundation	
Cultural Competence Consultation	15,000
The State of Delaware	51,678
<b>Total</b>	<b>756,173</b>

## II. Year 2: July 2006 - June 2007

Aetna Foundation	300,000
HMS Academy Center for Teaching and Learning	10,000
Jane's Trust	125,000
Merck, Inc.	50,000
National Committee for Quality Assurance	23,361
Patient Donation	40,000
Robert Wood Johnson Foundation	499,644
<b>Total</b>	<b>1,048,005</b>

## III. Year 3: July 2007 - June 2008

HMS Academy Center for Teaching and Learning	15,000
Jane's Trust	100,000
Massachusetts Department of Public Health	7,500
Merck	50,000
MGH Multicultural Affairs Office	15,700
Patient Donations	55,250
Tufts Health Plan Foundation	99,979
University of Puerto Rico	43,648
<b>Total</b>	<b>387,077</b>

## IV. Year 4: July 2008 - June 2009

Aetna Foundation	199,200
Boston Public Health Commission	7,500
HMS Academy Center for Teaching and Learning	15,000
MGH Multicultural Affairs Office	10,000
Patient Donations	86,159
Schwartz Center	14,998
Tufts Health Plan Foundation	149,990
<b>Total</b>	<b>482,847</b>



**V. Year 5: July 2009 - June 2010**

AHRQ	240,000
AHRQ/Abt	224,055
Aligning Forces For Quality	27,000
Amgen Foundation	249,386
Centers for Medicare and Medicaid Services	36,689
HMS Academy Center for Teaching and Learning	15,000
Merck, Inc.	48,205
MGH Multicultural Affairs Office	10,000
Patient Donations	132,000
<b>Total</b>	<b>982,335</b>

**VI. Year 6: July 2010 - June 2011**

HMS Academy Center for Teaching and Learning	15,000
MGH Multicultural Affairs Office	7,000
National Quality Forum	34,995
Patient Donations	81,990
<b>Total</b>	<b>138,985</b>

**VII. Year 7: July 2011 - June 2012**

Aetna Inc.	25,000
Aetna Foundation	199,504
Amgen Foundation	313,168
California HealthCare Foundation	20,000
DentaQuest	25,000
The Commonwealth Fund	19,875
Macy Foundation	289,779
Merck	27,125
<b>Total</b>	<b>919,451</b>

**VIII. Year 8: July 2012 - June 2013**

American Cancer Society	10,000
Amgen Inc.	40,000
Centers for Medicare and Medicaid Services	208,150
Daniel Hanley Center for Health Leadership	35,000
Language Line	5,000
Office of Minority Health	31,815
<b>Total</b>	<b>329,965</b>

\*Please note that these awards may be for multiple years, but each is listed only once in the reporting period that it was granted.

# Academic Publications

## Academic Publications

Awosogba T, Betancourt JR, Conyers FG, Estape ES, Francois F, Gard SJ, Kaufman A, Lunn MR, Nivet MA, Oppenheim JD, Pomeroy C, Yeung H. Prioritizing health disparities in medical education to improve care. *Ann N Y Acad Sci* 2013;1287(1):17-30.

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## Media

### *Popular Media Coverage*

*DiversityInc* – April 29, 2013

“Massachusetts General Hospital: No. 7 in The DiversityInc Top 10 Hospital Systems”

*Catholic Health World* – November 1, 2012

“Forum Advances Equity in Healthcare Reform Implementation”

# Awards, Recognition and Sponsorships

## Awards and Recognition

### *2012 Poder Latino Special Recognition Award from ¿Oíste?*

¿Oíste? is a non-partisan organization founded in 1999, by several Latino leaders from across Massachusetts. The mission of ¿Oíste? is to advance the political, social, and economic standing of Latinos and Latinas in the state.

**Dr. Joseph Betancourt** received this award from the board of the Latin Civic Education Initiative for his impact on the Latino community.

### *2012 Health Care Leadership Award from the Massachusetts Health Council*

The Massachusetts Health Council Award has been presented annually since 1988 to individuals who have made outstanding contributions to the advancement of the general health and well-being of the residents of the Commonwealth.

**Dr. Betancourt** received this award for his expertise and dedication to eliminate racial and ethnic disparities in health care.

### *2012 Senior Cobb Fellow in Health Disparities from W. Montague Cobb/NMA Health Institute*

The National Medical Association (NMA) launched the William Montague Cobb/NMA Health Institute in December 2004 to develop, evaluate, and implement strategies to promote wellness and eliminate health disparities and racism in medicine. **Dr. Betancourt** is a 2012 Senior Cobb Fellow. Fellows are individuals who have distinguished themselves in addressing healthcare disparities.

### *2012 Powermeter Award from El Planeta*

*El Planeta*, the largest Hispanic newspaper in Massachusetts, named **Dr. Betancourt** of the Disparities Solutions Center one of the Most Influential Individuals in the Massachusetts Hispanic Community. Dr. Betancourt has been on the Powermeter since its inception in 2005. Recipients were selected based on their achievements and contributions through their work and fields to the advancement of the Hispanic community in Massachusetts in 2012.



### *2013 Gold Professorship from the Arnold P. Gold Foundation Professorship Program*

The Gold Foundation, a non-profit organization dedicated to enhancing the doctor-patient relationship, awarded **Dr. Green**, Associate Director of the Disparities Solutions Center, a Gold Professorship. The goal of the award is to honor faculty at the Assistant or Associate Professor level who promote the importance of humanistic medicine and the values of professionalism in medical education. This grant will support Dr. Green as he develops and tests educational strategies to ensure that medical and nursing students learn to provide safe, effective, and humanistic care for patients with limited English proficiency.

### *2013 Provider of the Year Award from International Medical Interpreters Association*

The IMIA established this award in 2011 to recognize a healthcare professional who has made a lasting impact in the field of medical interpreting. This award also recognizes the need for outstanding healthcare provider champions who take the IMIA's mission as their mission for the patient safety of those patients who have a language barrier to healthcare. **Dr. Green** is a community leader who has joined the interpreter community to fight for universal language rights.

## Sponsorships

The DSC provided financial support in sponsorship of the following events:

- BWH Women's After Care Clinic - Donation in honor of Tommye Reede
- Massachusetts Public Health Association - 11th Annual Spring Awards Breakfast
- Susan G. Komen for the Cure - Donation in honor of Vicki Street

# Faculty and Staff

## **Joseph Betancourt, MD, MPH – Director**

Dr. Betancourt directs the Disparities Solutions Center, which works with healthcare organizations to improve quality of care, address racial and ethnic disparities, and achieve equity.



He is an Associate Professor of Medicine at Harvard Medical School, Director of Multicultural Education for Massachusetts General Hospital (MGH), Senior Scientist at the Mongan Institute for Health Policy at MGH, and an expert in cross-cultural care and communication.

Dr. Betancourt served on several Institute of Medicine committees, including those that produced *Unequal Treatment: Confronting Racial/Ethnic Disparities in Health Care* and *Guidance for a National Health Care Disparities Report*. He has also advised federal, state and local government, foundations, health plans, hospitals, health centers, professional societies, trade organizations, pharma, and private industry on strategies to improve quality of care and eliminate disparities. He has received grants from foundations and the federal government, and published extensively in these areas. He is a practicing internist, co-chairs the MGH Committee on Racial and Ethnic Disparities, and sits on the Boston Board of Health as well as Health Equity Committee and the Massachusetts Disparities Council.

## **Alexander Green, MD, MPH – Associate Director**

Dr. Green is the Associate Director of the Disparities Solutions Center and Senior Scientist at the Mongan Institute for Health Policy at Massachusetts General Hospital. He is also Chair of the Cross-Cultural Care Committee at Harvard Medical School. His work focuses on programs



designed to eliminate racial and ethnic disparities in care, including the use of culturally competent quality improvement interventions, leadership development, and dissemination strategies. He has studied the role of unconscious biases and their impact on clinical

decision-making, language barriers and patient satisfaction, and innovative approaches to cross-cultural medical education. He has also served on several national panels on disparities and cultural competency including the Joint Commission's "Hospitals, Language, and Culture" project.

## **Aswita Tan-McGrory, MBA, MSPH – Deputy Director**

In her role as Deputy Director at the Disparities Solutions Center, Ms. Tan-McGrory is a key member of the senior management team and supervises the



broad portfolio of projects and administration of the Center. In addition, she works closely with the Director to chart the DSC's future growth and strategic response to an ever-increasing demand for the Center's services. Her interests are in providing equitable care to

underserved populations and she has over 19 years of professional experience in the areas of disparities, maternal/child health, elder homelessness, and HIV testing and counseling. She received her Master of Business Administration from Babson College and her Master of Science in Public Health, with a concentration in tropical medicine and parasitology, from Tulane University School of Public Health and Tropical Medicine. Ms. Tan-McGrory is a Returned Peace Corps Volunteer where she spent 2 years in rural Nigeria, West Africa, on water sanitation and Guinea Worm eradication projects.



### **Roderick King, MD, MPH – Senior Faculty**

Dr. King is currently Senior Faculty at the Disparities Solutions Center and an Instructor in the Department of Global Health and Social



Medicine at Harvard Medical School. Dr. King's work focuses on leadership & workforce development, and improving health systems performance as they relate to addressing health disparities and improving the health of underserved populations.

In addition, Dr. King was selected as one of two Inaugural Institute of Medicine Anniversary Fellows, where he serves on the Board on Global Health, which oversees the study, "The US Commitment to Global Health." In addition, he also serves on the Board on Population Health and Public Practices which oversees the IOM "Roundtable for Racial and Ethnic Disparities." He most recently served as the Director for the Health Resources and Services Administration, Boston Regional Division and as a Commander in the US Public Health Service, U.S. Department of HHS.

### **Lenny Lopez, MD, MPH, MDiv – Senior Faculty**

Dr. Lopez is Senior Faculty at the Disparities Solutions Center, an internist trained at the Brigham and Women's Hospital (BWH) and an Assistant at the Mongan Institute for Health Policy at Massachusetts General Hospital (MGH). Dr. Lopez was the former Aetna/Disparities Solutions Center (DSC) Healthcare Disparities Fellow and completed the Commonwealth Fund Fellowship in Minority Health Policy at



the Harvard School of Public Health and received his MPH in 2005. He joined the Mongan Institute for Health Policy in 2008 after his two year fellowship in epidemiology and statistics at the Harvard School of Public Health. His research interests

extend across a range of issues relating to racial and ethnic disparities including language barriers and patient safety, quality measurement and improvement in hospital care and the impact of health information technology on disparity reduction. He has several publications from his fellowship research on these topics, as well as publications relating to his interests in the ethics of health care delivery and graduate medical education. Dr. Lopez received his medical degree from University of Pennsylvania in 2001, completed his residency at Brigham and Women's Hospital, Boston, MA in 2004, and received a Master of Divinity from the Harvard Divinity School in 1999.

# Faculty and Staff

## **Alden Landry, MD, MPH - Senior Faculty**

Dr. Landry is Senior Faculty at the Disparities Solutions Center at Massachusetts General Hospital, and an emergency medicine physician at Beth Israel Deaconess Medical Center. He also holds other academic positions including Associate Director of the Office of Multicultural Affairs at Beth Israel Deaconess Medical Center and Faculty Assistant Director of the Office of Diversity Inclusion and Community Partnership at Harvard Medical School. He received his BS from Prairie View A&M University in 2002, MD from the University of Alabama in 2006 and completed his residency in Emergency Medicine at the Beth Israel Deaconess Medical Center in 2009. In 2010, he earned an MPH from the Harvard School of Public Health. He completed the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy in 2010 as well. He was also awarded the Disparities Solutions Center/Aetna Fellow in Health Disparities award in 2010-2011. In addition to his clinical interests, Dr. Landry is involved in research on emergency department utilization trends, disparities in care and quality of care. He co-instructs two courses at Harvard School of Public Health and teaches cultural competency to residents. He works with numerous organizations to eliminate health disparities and increase diversity in the health care workforce. Dr. Landry mentors students from high school to medical school encouraging careers in the health professions.



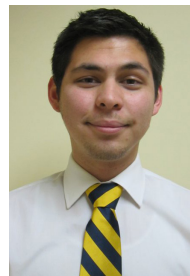
## **Karey Kenst, MPH - Project Coordinator**

Ms. Kenst is the Project Coordinator at the Disparities Solutions Center. She joined the DSC with ten years of professional experience in areas of international humanitarian response and development, LGBT health, and sexual violence prevention and response. She is dedicated to implementing policy and practice improvements to advance health equity and enjoys working collaboratively across disciplines and departments to further this work. Her areas of expertise include project management, qualitative research, and capacity building. She earned her Master of Public Health with a concentration in Social and Behavioral Sciences from the Boston University of Public Health and holds a Bachelor of Arts in sociology from the University of Wisconsin.



## **Jason Duong - Research Assistant**

Mr. Duong is a Research Assistant at the Disparities Solutions Center. He received his Bachelor of Science in Health Promotion and Disease Prevention Studies and his Bachelor of Arts in Spanish from the University of Southern California (USC). While at USC, he was the director of the Political Student Assembly, coordinating events for the student body, including a visit from President Barack Obama. Mr. Duong was also actively involved in community health efforts in the Los Angeles area, serving as a Spanish language interpreter and health liaison for a student-run community health clinic in East Los Angeles and a sexual health course instructor for juvenile offenders at a central Los Angeles probationary school. Before joining the DSC, he researched the use of web-based interactive multimedia for HIV prevention in the minority MSM community.



### **Matthew Bondaryk – Research Assistant**

Mr. Bondaryk is a Research Assistant at the Disparities Solutions Center. He received his



Bachelor of Arts in Political Science from Davidson College in North Carolina. As a registered Emergency Medical Technician, Mr. Bondaryk volunteered in a variety of community health efforts in both Boston and Davidson, North Carolina.

Prior to joining the Center, he served as a Peace Corps Volunteer in the southern African country of Mozambique. He worked with a community-based association that organized home-based care visits for People Living with HIV/AIDS. In 2011, he led a youth HIV prevention and communications project that offered HIV educational services to over 600 Mozambicans across the country.

### **Sarah Beiter – Staff Assistant**

Ms. Beiter is a Staff Assistant for the Mongan Institute for Health Policy and the Disparities



Solutions Center. She received her Bachelor of Arts in Sociology and English from Suffolk University. Prior to working at the DSC, she interned with the Schwartz Center for Compassionate Healthcare, working to increase the quality

of the patient-caregiver relationship in health systems across America and the U.K. In 2011, Miss Beiter conducted research on the portrayal of female offenders in “non-fiction” crime television shows, which she presented at the American Society of Criminology’s Annual meeting in Washington, DC. While at Suffolk, Miss Beiter tutored students from across the globe at Suffolk’s Writing Center, advocated for LGBT rights in Detroit as a service member for Alternative Spring Break, and designed a collaborative art project on display at Suffolk’s annual V-Day performance which works to end gender violence.

### **Maria Rios – Research Assistant**

Ms. Rios is a Research Assistant at the Disparities Solutions Center. She received her Bachelor of Arts in Anthropology and Community



Health from Tufts University. While at Tufts, she completed a year-long research project for a non-profit based in the Dominican Republic whose mission is to provide quality primary health care to underserved patients by leveraging local community

resources and partnering with international medical service trips. She also worked for a human rights NGO preparing research reports for lawyers representing refugees seeking asylum in Spain. Prior to joining the DSC, Maria completed her AmeriCorps residency at a non-profit in Cambridge that helps at-risk high school students start and run their own businesses.

# DSC Associates Program

## Program Description

In order to respond to national and local calls to action to address disparities in health care, it is essential for the DSC to build a strong network of experts and researchers to broaden its skill set and talents. As a result, the DSC has developed an Associates Program, following the principles of partnership and collaboration.

The DSC Associates are a diverse group of health care professionals – including health policy experts, health service researchers, among others – who are committed to developing concrete, practical solutions to reduce racial and ethnic health disparities. The Associates work with the DSC Senior Staff on projects that build on their joint expertise, and serve to meet the needs of the field.

DSC Associates benefit from:

- Access to new funding opportunities
- Access to center expertise for project collaboration
- 2-year renewable appointments

DSC Associates responsibilities include:

- Attending one meeting per year with DSC Faculty and other Associates
- Attending major DSC sponsored events
- Promoting the DSC and the Associates Program when opportunities arise
- Initiation of at least one collaborative project with DSC during 2-year tenure

To enter the Program, potential Associates must be recommended by a DSC faculty member and:

- Must have a demonstrated interest in eliminating disparities through research, quality improvement, leadership, or other efforts that can build on the DSC's efforts
- Must have either MD, RN, PhD or similar degree (note: extensive experience will be taken into consideration in place of degree)

## 2012-2013 DSC Associates

*Alexy Arauz-Boudreau, MD, MPH*

Instructor, Harvard Medical School

Assistant in Pediatrics, Massachusetts General Hospital

*Areas of Interest:* Determining effective means to reduce health care disparities for vulnerable children through the structure of health care systems and provider level interventions

*Steven J. Atlas, MD, MPH*

Director, Practice-Based Research & Quality Improvement Network  
General Medicine Division

Associate Professor of Medicine,  
Harvard Medical School

*Areas of Interest:* Understanding patterns of care and designing efficient models of care to improve quality for patients seen in primary care practice networks

*Allison Bryant Mantha, MD, MPH*

Instructor, Harvard Medical School

Assistant in Gynecology and Obstetrics,  
Massachusetts General Hospital

*Areas of Interest:* Improving interconception health and health care, including achieving adequate birth spacing, to reduce racial/ethnic and socioeconomic disparities in birth outcomes.

*Jay Bhatt, DO, MPH, MPA*

Fellow, University of Michigan

Dept. of Geriatrics/Internal Medicine

*Areas of Interest:* Improving care for vulnerable populations through strengthening primary care, advocacy, systems redesign, quality improvement, and community engagement.



**W. Michael Byrd, MD, MPH**

Director, Institute for Optimizing Health and Health Care (IOHHC)  
Health Policy Researcher,  
Harvard School of Public Health  
Clinical Instructor, Department of OB/GYN,  
Beth Israel Deaconess Medical Center  
Harvard Medical School

*Areas of Interest:* Health policies and concerns impacting African American and other disadvantaged minorities in the United States health system

**Eric G. Campbell, PhD**

Senior Scientist, Institute for Health Policy  
Massachusetts General Hospital  
Associate Professor of Medicine  
Harvard Medical School

*Areas of Interest:* Science policy, academic industry relations

**Linda A. Clayton, MD, MPH**

Senior Associate Medical Director  
Office of Clinical Affairs/Office of  
Medicaid and MassHealth  
Health Policy Researcher  
Harvard School of Public Health  
Clinical Instructor, Department OB/GYN  
Beth Israel Deaconess Medical Center  
Harvard Medical School

*Areas of Interest:* Health policy and concerns impacting African American and other disadvantaged minorities in the United States health system

**Katherine L. Flaherty, ScD**

Principal Associate, Public Health & Epidemiology  
Health Division, Abt Associates, Inc.

*Areas of Interest:* Access to health services for low-income and uninsured populations, program development, management and evaluation, and public policy development and analyses in areas such as maternal and child health and disease management

**Clemens S. Hong, MD, MPH**

Instructor  
Harvard Medical School  
Assistant in Medicine  
Massachusetts General Hospital

*Areas of Interest:* Developing primary care integrated care management strategies (including the use of community health workers) to address disparities in health care; primary care transformation and the patient centered medical home with a focus on community health centers and safety-net systems; limited English proficiency and disparities in health care; incarceration and health and post-release health care delivery to formerly incarcerated patients.

**Inyang Isong, MD, MPH, SM**

Health Services Researcher  
The Center for Child and Adolescent Health Policy  
Massachusetts General Hospital

*Areas of interest:* Evaluating family and community determinants of children's oral health status and access to care, and understanding their role in oral health disparities

**Sanja Percac-Lima, MD, PhD, DMD**

Instructor, Department of Medicine  
Harvard Medical School  
Assistant Physician, Medicine  
Massachusetts General Hospital

*Areas of Interest:* Improving colorectal cancer screening rates by lowering barriers in low income and non-English speaking populations

**Andrew Loehrer, MD**

Surgical Resident  
Massachusetts General Hospital  
Research Fellow  
Massachusetts General Hospital Codman Center for Clinical Effectiveness in Surgery

*Areas of Interest:* Measurement of surgical quality and the impact of health policy reform on the delivery of surgical care for low-income and minority populations.

# DSC Associates Program

## *Fidencio Saldana, MD, MPH*

Faculty Assistant Dean for Student Affairs in the Office of Recruitment and Multicultural Affairs  
Harvard Medical School

Attending Physician in Medicine and Cardiology  
Brigham and Women's Hospital

*Areas of interest:* Racial disparities and outcomes in cardiovascular disease, and recruitment of underrepresented minorities to the health professions

## *Nhi-Ha Trinh MD, MPH*

Post-Doctoral Fellow  
Harvard Medical School

Graduate Assistant  
Massachusetts General Hospital

Geriatric Psychiatry Fellow  
McLean Hospital

*Areas of Interest:* Mental Health Disparities for Depression in Minority Patients, Geriatric and Community Psychiatry

## *Winfred W. Williams, MD*

Co-Chair, Multicultural Affairs Office Advisory Board, Massachusetts General Hospital

Associate Faculty Member

MGH Center for Human Genetic Research  
MGH Transplant Center/Broad Institute of MIT and Harvard

*Areas of Interest:* Genetics of renal disease (genetics of diabetic nephropathy, end stage renal disease, and transplant organ rejection and tolerance); liver transplantation (extracorporeal liver assist device therapy) and racial and ethnic disparities in renal transplantation and health policy in transplantation

## *Albert Yeung, MD, ScD*

Director of Primary Care Studies at the MGH Depression Clinical and Research Program

Assistant Professor of Psychiatry  
Harvard Medical School

*Areas of Interest:* Integrating primary care and mental health services to improve treatment of depression, mental health issues of under-served populations, and using complementary and alternative treatment for mood disorders







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