## Looking at COVID-19 Disparities

## Project Aim

Decrease the pediatric URM patient positive
COVID testing rate to $4 \%$ by reducing the disparity ratio from 3.9 to 1.0 by 2022.

## $3.9 \longrightarrow 1.0$

Decrease the disparity ratio of pediatric URM patients' positive tests per 1000 from 3.7 to 1.8 by 2022.

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3.7 \longrightarrow 1.8
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## Key Drivers \& Interventions



SDH/Community Supports \& Partners

- Link identified patient-family-parents to Healthy Neighborhoods Healthy Families (HNHF) employment program
- Provide HNHF housing information to patient families at check-in/-out
- Supply care packages to partner community agencies
- Link COVID education with Nationwide Children's virtual mentoring


Policy - Paid Leave, Child Care, Broadband Access

- Work with Government Relations to establish community coalition to lobby for effective, local/state policy changes
- Partner with business community to lobby for policy change within companies
- Increase quality, safe child care slots



## Follow up and data/outcomes tracking

- Link families of positive patient screen to follow-up family testing \& spread prevention education
- Establish feedback loop to track family positive test rate
- Review testing data monthly to identify spikes/ decreases



## Accessibility of healthcare resources for those with greatest need

- Assess testing algorithms, looking at bias, social/economic factors, housing situation, etc.
- Instructions for isolation while awaiting testing results, with special focus on at-risk populations
- Identify on-demand provider option for disproportionately-impacted families exposed to COVID
- Craft scripts for triaging COVID calls that are grounded in empathy

