



THE DISPARITIES SOLUTIONS CENTER

One Goal – High Quality Care for All



CELEBRATING 10 YEARS OF ELIMINATING
RACIAL AND ETHNIC DISPARITIES IN HEALTHCARE

2014–2015 Annual Report

THE DISPARITIES SOLUTIONS CENTER ANNUAL REPORT | JULY 2014-JUNE 2015

OVERVIEW

Welcome	1
Overview	2
Major Accomplishments and Partnerships	4
NATIONAL	4
Disparities Leadership Program	4
Planning, Designing, Implementing, and Evaluating Programs: Reducing Health Disparities through Quality Improvement	9
Interprofessional Curriculum: Providing Safe and Effective Care for Patients with Limited English Proficiency	9
DSC Web Seminar Series	10
LOCAL: MGH/PARTNERS HEALTHCARE SYSTEM.	10
DSC and CCHI Joint Anniversary: “Celebrating MGH’s Commitment to Community and Equity”	10
Racial and Ethnic Disparities: Keeping Current Seminar Series	11
DSC/MGH Center for Diversity and Inclusion Film Series	11
Stand Against Racism	12
MGH Committee on Racial and Ethnic Disparities	12
Harvard Medical School Cross-Cultural Care Committee	14
Dissemination	15
Funding and Donations	16
Academic Publications	19
Media and Sponsorships	20
Awards and Recognition	21
Faculty and Staff	22
DSC Associates Program	26



It is with great pleasure that we present The Disparities Solutions Center's Tenth Annual Report.

This is an important time for us to celebrate what we've accomplished with our partners, and redouble our efforts to expand our portfolio as we strive to improve quality and achieve equity in an exciting time of healthcare transformation. Our work with health plans, hospitals, and health centers, among others, continues to grow, momentum is building, and we are creating a movement among organizations nationally and internationally dedicated to high-quality care for all.

Over the course of our tenth year we are pleased to report many significant accomplishments. These include:

- ★ With our partnership, Massachusetts General Hospital receiving the American Hospital Association's inaugural Equity of Care Award for efforts to reduce health care disparities and promote diversity within the organization's leadership and staff.
- ★ Celebrating our 10th Anniversary in joint partnership with Center for Community Health Improvement's 20th Anniversary.
- ★ Conducting our ninth Disparities Leadership Program, targeting leaders from hospitals, health plans, and community health centers from around the country.
- ★ Leading several national web seminars on prominent and timely topics, including one in collaboration with the Symposium for Leaders in Healthcare Quality, a forum of the American Hospital Association.
- ★ Publishing eight papers in national and international journals.

- ★ Continuing our local portfolio of programs that includes our Racial and Ethnic Disparities Keeping Current Seminar Series, Film Series, and Stand Against Racism Events.
- ★ Welcoming our new research assistant, Bryan Yanez, to the DSC team.

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 eleventh 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 is dedicated to the development and implementation of strategies that advance policy and practice to eliminate racial and ethnic disparities in health care.



We will achieve our mission by:

- ★ **Creating change** by developing new research and translating the findings into policy and practice.
- ★ **Finding solutions** that help health care leaders, organizations, and key stakeholders ensure that every patient receives high-value, high-quality health care.
- ★ **Encouraging leadership** by expanding the community of health care professionals prepared to improve quality, address disparities and achieve equity.

ABOUT THE CENTER

The Disparities Solutions Center (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. Launched in 2005, 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.

Through the DLP, we aim to create leaders prepared to meet the challenges of health care transformation by improving quality for at-risk populations who experience disparities.

The program has three main goals:

- ★ To arm health care leaders with a rich understanding of the causes of disparities and the vision to implement solutions and transform their organization to deliver high-value health care. Solutions are specifically focused on identifying disparities impacting the quality and value of care within high-cost, high-risk areas such as preventing readmissions and avoidable hospitalizations; improving patient safety and experience; and excelling in population health.
- ★ To help leaders create strategic plans or projects to advance their work in reducing disparities in a customized way, with practical benefits tailored to every organization.

- ★ To align the goals of health equity with health care reform and value-based purchasing. We support the organizational changes necessary to respond to national movements including health care reform, value-based purchasing, as well as exceeding quality standards (such as the CLAS standards) and meeting regulations (such as those from the Joint Commission, the National Committee for Quality Assurance, and the National Quality Forum).

The DSC has the unique advantage of nine years of experience developing, coordinating and operating the DLP, the only program of its kind in the nation. To date, the DLP has trained nine cohorts that include a total of 312 participants from 142 organizations (77 hospitals, 31 health plans, 21 community health centers, 8 professional organizations, 1 pharmaceutical company, 1 school of medicine, 1 trade organization, 1 federal government agency, 1 city government agency) representing 31 states, the Commonwealth of Puerto Rico, Canada and Switzerland. The DLP underwent a robust external evaluation that was extremely positive and is available upon request.

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.



DISPARITIES LEADERSHIP PROGRAM BY THE NUMBERS

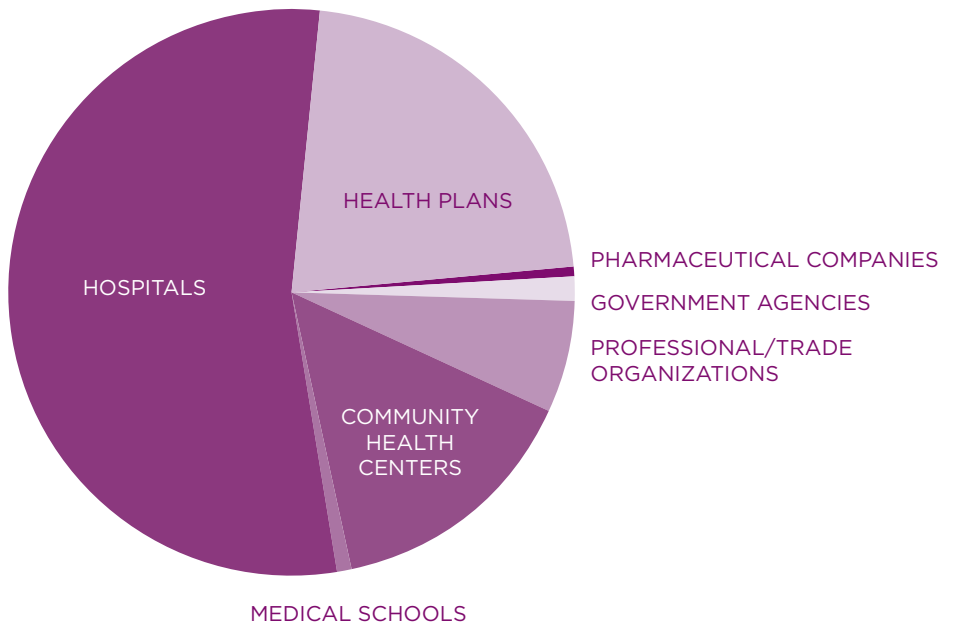
9
Cohorts

312
Participants

142
Organizations

31
States

4
Countries and Territories



2014–2015 DLP Class

The DSC hosted the closing meeting of the 2014–2015 Disparities Leadership Program on February 24–25, 2015 in Santa Monica, CA. Participants began the program in May of 2014 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 19 organizations—including 6 health plans, 9 hospitals, and 4 pediatric hospitals from 10 different states and Canada. 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, 2 teams from the 19 healthcare organizations around the US and Canada were selected from the DLP Class of 2014–2015 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:

- ★ Nemours/Alfred I duPont Hospital for Children, Wilmington, DE
- ★ St. Christopher's Hospital for Children, Philadelphia, PA

2015–2016 DLP Class

The DSC launched the 2015–2016 class by hosting the first meeting on May 19–20, 2015 at the Seaport Hotel in Boston, Massachusetts. At this meeting there were 61 participants from 21 organizations:

HOSPITALS

Allina Health, Minneapolis, MN
Cone Health, Greensboro, NC
Florida Hospital, Orlando, FL
Lehigh Valley Health Network, Allentown, PA
Mayo Clinic Health System, St Peter, MN & Mankato, MN
Memorial Hermann Healthcare System/Memorial Hermann Medical Doctors, Sugar Land, TX
Presence Health, Chicago, IL
St. Francis Care, Hartford, CT
Trinity Health, Livonia, MI
University of Chicago Medicine and Biological Sciences, Chicago, IL
University Of Pennsylvania Health System and the Perelman School of Medicine, Philadelphia, PA
University of Texas Medical Branch-Center to Eliminate Health Disparities, Galveston, TX
University of Washington Medicine, Seattle, WA

PEDIATRIC HOSPITALS

Holland Bloorview Kids Rehabilitation Hospital, Toronto, Canada
Nemours/Alfred I duPont Hospital for Children, Wilmington, DE
St. Louis Children's Hospital, St. Louis, MO

HEALTH PLANS

Blue Cross Blue Shield of Minnesota, Minneapolis, MN
Health New England, Springfield, MA
San Francisco Health Plan, San Francisco, CA

OTHER

Biogen Idec, Cambridge, MA
University of Arizona College of Medicine, Tucson, AZ



Through the Disparities Leadership Program we aim to create leaders prepared to meet the challenges of health care transformation by improving quality for at-risk populations who experience disparities.



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 9, 2014, in Orlando, FL. Presenters included Aswita Tan-McGrory, MBA, MSPH and Lenny López, MD, MDiv, MPH of the Disparities Solutions Center, Hans Kersten, MD, of St. Christopher's Hospital For Children and Karoline Pierson, MA, of Hennepin County Medical Center.

Pediatric Health Equity Collaborative

On October 19–21, 2014, 15 leaders in health equity and academic medicine and pediatrics across the United States met for the second time at the Children's Mercy Hospitals and Clinics in Kansas City, MO. The purpose of this meeting was to establish recommendations on how to best to collect, interpret, and understand race and ethnicity data to inform the development of national standards for excellence in pediatric healthcare. This group, which first convened in 2013, came together with the goals of establishing sample practices, lessons learned, and recommendations for the field with regard to race, ethnicity, language, and other demographic data collection in pediatric care settings.

Web Seminar: *Analyzing and Comparing Your Race and Ethnicity Data*

The web seminar *Analyzing and Comparing Your Race and Ethnicity Data: How to Compile Your Data in a Meaningful and Effective Way*, held on October 16, 2014, focused on the common pitfalls of quality measurement and the importance of understanding quality reporting data. Lenny López, MD, MDiv, MPH, Senior Faculty at the Disparities Solutions Center, DLP alumni Laura Archbold, RN, MBA, and Shannon Porenta, MPH presented the steps and common challenges of analyzing quality data through the use of a real world example from CHE Trinity Health.

Planning, Designing, Implementing, and Evaluating Programs: Reducing Health Disparities through Quality Improvement

Centers for Medicare and Medicaid Services and the National Opinions Research Center aim to plan, design, implement and evaluate effective culturally and linguistically appropriate programs, interventions and initiatives to reduce health disparities for vulnerable Medicare and dual eligible populations.

The DSC has been subcontracted to do the following:

- ★ Identify current and emerging programs and initiatives to reduce disparities that can be replicated by CMS
- ★ Implement interventions to improve quality and reduce health disparities
- ★ Design an evaluation plan tailored to each intervention
- ★ Develop and disseminate recommendations to reduce readmissions for the top conditions within the CMS Hospital Readmissions Reduction program

As part of this project, the DSC conducted an environmental scan and needs assessment to identify the gaps in national disparities focused interventions. In addition, the team developed a *Guide to Preventing Readmissions among Racially and Ethnically Diverse Medicare Beneficiaries*, which provided recommendations for organizations to reduce readmissions within the top conditions in the CMS Hospital Readmissions Reduction Program.

Interprofessional Curriculum: Providing Safe and Effective Care for Patients with Limited English Proficiency

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 Limited English Proficiency (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 were used to refine and finalize the curriculum, which is available to other institutions at no cost via the DSC website. Available materials include the e-learning modules, classroom session guides, tools to evaluate the student learning experience, and recommendations for implementing the program as a formal part of medical and nursing school curricula.

A key theme that arose during pilot testing was the need to provide training on this topic for health care providers, in addition to students in the health professions. As a result, the DSC adapted the e-learning program for health care providers at MGH.



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.

Making Data Meaningful: Monitoring Performance and Quality and Equity, October 14, 2014

This HPOE webinar held by the Institute for Diversity and Symposium for Leaders in Healthcare Quality highlighted key lessons learned from the Disparities Solutions Center (DSC) at Massachusetts General Hospital (MGH), the 2014 AHA Equity of Care award winner in regards to dashboards and reports. DSC Disparities Leadership Program alumnus Laura Archbold, RN, MBA of CHE Trinity Health also shared lessons learned, key do's and don'ts, as well as practical steps to both get started and advance ongoing initiatives in equity measurement and monitoring.

Presenters:

- ★ Joseph R. Betancourt, MD, MPH, Director, Disparities Solutions Center at MGH
- ★ Aswita Tan-McGrory, MBA, MSPH, Deputy Director, Disparities Solutions Center at MGH
- ★ Laura Archbold, RN, MBA, Vice President, UCO Operations, CHE Trinity Health

LOCAL: MGH/PARTNERS HEALTHCARE SYSTEM

DSC and CCHI Joint Anniversary: “Celebrating MGH’s Commitment to Community and Equity”

The MGH Center for Community Health Improvement (CCHI) and the Disparities Solutions Center (DSC) celebrated 20 and 10 years respectively of addressing healthy communities and health care equity with a joint event on June 4, 2015 at Massachusetts General Hospital. Both the DSC and CCHI exemplify MGH’s nationally-recognized leadership in efforts to reduce health care disparities and to improve the health of the local communities MGH serves. The MGH Center for Community Health Improvement was founded in 1995 to partner with underserved communities to make measurable improvements in social and economic determinants of health, and to reduce barriers to care for vulnerable populations. Since 2005, the DSC has worked around the country to improve health care quality for every patient, regardless of race, ethnicity, culture, class, or language proficiency. The event was well attended with over 400 attendees from MGH and other local organizations. Speakers included:

- ★ Garth Graham, MD, MPH, President of the Aetna Foundation and Former Deputy Assistant Secretary at the U.S. Department of Health and Human Services
- ★ The Honorable Martin J. Walsh, Mayor of Boston
- ★ Victoria Reggie Kennedy, Co-Founder & President of the Board, Edward M. Kennedy Institute for the United States Senate
- ★ Nicole Bourgeois, Recovery Coach at Massachusetts General Hospital

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.

Musculoskeletal Health Disparities: The Role of Language and Psychosocial Factors in Determining Upper Extremity Disability, October 30, 2014

This seminar was presented by David Ring, MD, PhD, Chief of the Hand and Upper Extremity Service at Massachusetts General Hospital and Mariano Menendez, MD, Research Fellow at the Department of Orthopaedic Surgery at Massachusetts General Hospital. The presentation examined whether a patient's primary native language is an independent predictor of upper-extremity disability and whether there are any differences in the contribution of psychological factors to disability between native Spanish-speaking and English-speaking patients.

The Use of Interpreters by Physicians for Hospitalized Limited English Proficient Patients and Its Impact, April 30, 2015

This seminar was presented by Dr. Lenny López, MD, MDiv, MPH, Assistant at the Mongan Institute for Health Policy and Senior Faculty at the Disparities Solutions Center. Few studies have explored clinician use of interpreter services in academic hospitals and the effect of interpreter encounters on the inpatient outcomes of LEP patients. This seminar explored the impact of inpatient interpreter use for LEP patients on length of stay, 30-day post discharge emergency department visits and 30-day hospital readmission rates.

DSC/MGH Center for Diversity and Inclusion Film Series

The DSC and the Center for Diversity and Inclusion (CDI) launched the film series in 2007 with the goal of engaging participants in topics that impact the quality of medical care. The film series aims to raise awareness of health disparities and cross-cultural care through the screening of popular documentary films, followed by an expert panel discussion and audience Q&A.



Pediatric Health Disparities: Providing Cross-Cultural Family Centered Care, January 29, 2015

This event focused on disparities in pediatric health care, with an emphasis on cross-cultural family-centered care and featured a segment from the highly acclaimed documentary series, *Worlds Apart*, which follows the story of Justine Chitsena, a four year old from Laos with an atrial septal defect, a congenital heart abnormality. The screening was followed by a panel discussion with Oscar J. Benavidez, MD, MPP, Chief of the Division of Pediatric Cardiology and Alexy Arauz-Boudreau, MD, MPH, Assistant Professor of Pediatrics and MGHfC Medical Home Transformation Coordinator.

Stand Against Racism

The Disparities Solutions Center, the Center for Diversity and Inclusion, 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 within our communities. The objective of these "Stands" is to bring organizations around the nation together to unite and eliminate racism.



Annual YMCA Stand Against Racism Event, April 23, 2015

Monica Bharel, MD, MPH, Commissioner of the Massachusetts Public Health Department, presented on how healthcare institutions can incorporate strategies to address social determinants of health that disproportionately impact minority populations. The event also featured an interactive audience discussion on the impact of structural, social, and economic factors on health outcomes.

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 and the Edward P. Lawrence Center for Quality and Safety developed and disseminated the hospital's seventh Annual Report on Equity in Health Care Quality (AREHQ). The goal of the AREHQ, formerly called the Disparities Dashboard, is to monitor key components of quality by race, ethnicity, and language, 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 and 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, including measures identified in collaboration with the Department of Pediatric and the Department of Obstetrics.

Information from the AREHQ is available publicly on the MGH Quality and Safety website: qualityandsafety.massgeneral.org



Improving Care for Patients with Limited English Proficiency

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 and safety rounds focused on LEP; and 3) training initiatives for interpreters.

INTERPRETER ROUNDS

With oversight and training from the Director 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. During rounds, interpreters ask patients questions about medical interpretation availability, whether their language needs are being met, and ability to understand and communicate with caregivers. We also ask questions about the use of interpreter services during "high risk" scenarios that include medication reconciliation, informed consent, surgical care instructions, and discharge instructions and/or emergency room care. To date, 70 surveys have been completed, and this work is ongoing.

EXECUTIVE QUALITY AND 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. The Director of Interpreter Services returns to the unit for follow-up education related to the specific issues that are raised by clinical staff during these rounds.

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.

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.

**Through the Cross-Cultural Care Committee,
DSC staff members work 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.**

DISSEMINATION



Website

The DSC website provides information about the DSC team, its background and mission, current projects, awards, and several resources for the public. The website has had over 31,669 visits in the past year. DSC resources and tools continue to be downloaded from the website. The AHRQ guide, *Improving Patient Safety Systems for Patients with Limited English Proficiency: A Guide for Hospitals* is one of our most downloaded accessed resources. During this year, it was downloaded over 3,000 times.

www.mghdisparitiessolutions.org


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 5,600 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.

Social Media

The DSC also has begun to build an active presence in social media. To date, our Facebook page has over 280 likes and over 370 persons and organizations follow us on Twitter. Posts include organizational updates as well as disparities related news and research.

 facebook.com/disparitiessolutionscenter

 twitter.com/MGHDisparities

FUNDING AND DONATIONS

The DSC was founded with a \$3 million grant from Massachusetts General Hospital and Partners Healthcare in 2005. The Center has been awarded additional grants and contracts, which are listed below. Please note that these awards may be for multiple years, but each is listed only once in the reporting period that it was granted.

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
TOTAL	756,173

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
TOTAL	1,048,005

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
TOTAL	387,077

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
TOTAL	482,847

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
TOTAL	982,335

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
TOTAL	138,985

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
TOTAL	919,451

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
TOTAL	329,965

Year 9: July 2013–June 2014

AAMC	5,000
Amgen Inc.	343,093
Aetna	35,000
BCBS of MA Inc	10,000
The California HealthCare Foundation	15,000
CHE Trinity Health.	5,000
DentaQuest	24,999
The Gold Foundation.	150,000
Harvard Pilgrim	15,000
Health Leads	1,000
Kaiser Permanente	5,000
Language Access Network	5,000
Language Line/Pacific Interpreters	3,500
Macy Foundation.	10,000
Monroe Carell Jr. Children's Hospital at Vanderbilt.	3,500
Neighborhood Health Plan	3,000
North Shore LIJ Health System	2,000
Office of Minority Health at CMS.	25,000
One Step Foundation.	23,000
UnitedHealthcare.	10,000
TOTAL	694,092

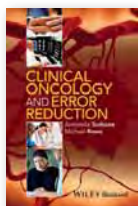
Year 10: July 2014–June 2015

Amgen, Inc.	100,000
National Opinion Research Center and Centers for Medicaid and Medicare Services	2,577,325
TOTAL	2,677,325

ACADEMIC PUBLICATIONS



Betancourt JR, Tan-McGrory A. Addressing language barriers and improving quality of transitions and discharge. *Israel Journal of Health Policy Research*. September 2014 3:31.



Betancourt JR, Green AR, Schapira L. “Do cross-cultural differences influence the occurrence and disclosure of medical errors in oncology?” *Clinical Oncology and Error Reduction*. Wiley Blackwell. 2014. Pp 111–127. (Chapter 8)



López L, Peralta CA, Lee A, Haan MN. Impact of Acculturation on Cardiovascular Risk Factors Among Elderly Mexican Americans. *Ann Epidemiol*. 2014 Aug 1. pii: S1047-2797(14)00361-5.



López L, Golden, S. A New Era in Understanding Diabetes Disparities Among US Latinos—All Are Not Equal. *Diabetes Care*. 2014 Aug;37(8):2081-3.



López L, Huerta D, Soukup J, Rodriguez F, Hicks L. Use of Interpreters by Physicians for Hospitalized Limited English Proficiency Patients and Its Impact on Patient Outcomes. *J Gen Intern Med*. 2015 Feb 10.

Cooper ZR, Hernandez RA, **López L,** Hevelone ND, Finlayson SRG. Variations in the Utilization of Life-Sustaining Treatments Following Major Surgery by Patient Race. *Am J Surg*. 2014 Oct 13. pii: S0002-9610(14)00519-4.

El-Jawahri A, Mitchell SL, Paasche-Orlow MK, Temel JS, Jackson VA, Rutledge RR, Parikh M, Davis AD, Gillick MR, Barry MJ, Shin J, **López L,** Cooper Z, Walker-Corkery ES, Chang Y, Cheng XS, Bazari H, Finn K, Coley C, Volandes AE. A Randomized Controlled Trial of a CPR and Mechanical Ventilation Video Decision Support Tool for Hospitalized Patients. *J Gen Intern Med*. 2015 Feb 18.

Meigs JB, Grant RW, Piccolo R, **López L,** Florez JC, Porneala B, Marceau L, McKinlay JB. Association of African Genetic Ancestry with Fasting Glucose and Hemoglobin A1c Levels in Non-Diabetic Individuals: The Boston Area Community Health (BACH) Prediabetes Study. *Diabetologia*. 2014 Sep;57(9):1850-81.

MEDIA AND SPONSORSHIPS

POPULAR MEDIA COVERAGE

American Hospital Association—July 8, 2014
“AHA Recognizes Hospitals with Equity of Care Award”

Hospitals and Health Networks Daily—July 22, 2014
“Reducing Disparities of Care”

American Hospital Association News—August 29, 2014
“Massachusetts General Hospital provides models for delivering equitable care”

Modern Healthcare—August 30, 2014
“Hospitals often Ignore policies on using qualified interpreters”

Health Leaders Media—January 19, 2015
“Why Cultural Competency Matters in Hospitals”

AARP—February 20, 2015
“African American Change Makers”

Equity of Care—March 23, 2015
“Creating a Movement: Achieving Equity in Quality”

SPONSORSHIPS

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

- ★ California Pan Ethnic Health Network
- ★ Latino Caucus for Public Health at the APHA

AWARDS AND RECOGNITION

2014 American Hospital Association's Equity Of Care Award

Massachusetts General Hospital (MGH) in Boston received the American Hospital Association's (AHA) inaugural Equity of Care Award for its efforts to reduce health care disparities and promote diversity within the organization's leadership and staff. The MGH Committee on Racial and Ethnic Disparities, in partnership with the DSC, has implemented programs that have improved outcomes and eliminated racial and ethnic disparities related to diabetes management, colorectal and breast cancer screening, patient experience, as well as quality and safety for patients with limited English proficiency. The award was presented on July 21 at the Health Forum-AHA Leadership Summit in San Diego.

2014 Clarion Award for Health Promotion and Education

Dr. Joseph Betancourt, MD, MPH, Director of the Disparities Solutions Center, has been honored with the 2014 Albert Schweitzer Clarion Award for Health Promotion and Education. The Clarion Award honors significant achievements in bringing public awareness to the issues and solutions that can help to improve the health and well-being of vulnerable populations locally, nationally, and across the globe. Dr. Betancourt received this award for his work advising federal, state, and local governments, foundations, health plans, hospitals and health care organizations on how to address racial and ethnic healthcare disparities.



2015 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. The honorees selected for the list have made substantial impact within the Hispanic community and the community at large.

FACULTY AND STAFF



Joseph Betancourt, MD, MPH | Director

Dr. Betancourt is the director of the Disparities Solutions Center, which works with healthcare organizations to improve

quality of care, address racial and ethnic disparities, and achieve equity. He is Director of Multicultural Education for Massachusetts General Hospital (MGH), and an expert in cross-cultural care and communication. Dr. Betancourt is also a co-founder of Quality Interactions, Inc., an industry-leading company that has created and deployed a portfolio of e-learning programs in the area of cross-cultural care and communication to over 125,000 health care professionals across the country. 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 also actively serves as an advisor to the government, healthcare systems, as well as the public and private sector on strategies to improve quality of care and eliminate disparities. He is a practicing internist, co-chairs the MGH Committee on Racial and Ethnic Disparities, and sits on the Boston Board of Health. Dr. Betancourt is on the Boards of Trinity CHE, a large, national healthcare system, as well as Neighborhood Health Plan, based in Boston. He practices Internal Medicine at the MGH Internal Medicine Associates.



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

Ms. Tan-McGrory is the Deputy Director at the Disparities Solutions Center. She is a key member

of the senior management team and supervises the broad portfolio of projects and administration of the Center. These include a collaboration with Center of Quality and Safety at MGH to develop the Annual Report on Equity in Healthcare Quality to analyze key quality measures stratified by race, ethnicity, and language; the Boston Public Health Commission on developing and implementing a city-wide disparities dashboard; and the Pediatric Health Equity Collaborative to develop recommendations on collecting race, ethnicity and language from pediatric patients. Ms. Tan-McGrory also oversees the Disparities Leadership Program, an executive-level leadership program on how to address disparities. 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.



**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 an Associate Professor and 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. In July of 2013, he was awarded The Arnold P. Gold Foundation Professorship for humanism in medicine.



Roderick King, MD, MPH | Senior Faculty

Dr. King is currently faculty in the Department of Global Health and Social Medicine at Harvard Medical School, Senior Faculty at the

Massachusetts General Hospital Disparities Solutions, and a Fulbright Regional Network for Applied Research (NEXUS) Scholar. In 2014, he was appointed Chair of the Advisory Committee on Minority Health in the Office of Minority Health (OMH) at the U.S. Department of Health and Human Services. He is also Executive Director of the Florida Public Health Institute and Associate Professor in the Department of Public Health and Epidemiology at the University of Miami's Miller School of Medicine. His academic work/teaching and key consulting roles focus on improving the health of underserved communities via leadership and organizational development, and human capital development. In particular, Dr. King has worked to improve the health of communities nationally and internationally via training and facilitating collaborative leadership efforts to support leaders in creating aligned actions and measurable

results for underserved communities. Prior to his current work, Dr. King was the New England Regional Director for the Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services, a Commander in the U.S. Public Health Service and former Senior Advisor to the Bureau of Primary Health Care, HRSA.



Lenny López, MD, MDiv, MPH | Senior Faculty

Dr. López is Senior Faculty at the Disparities Solutions Center. Dr. López is an internist trained at the Brigham and Women's

Hospital (BWH), is an Assistant Professor at Harvard Medical School, and is an Assistant at the Mongan Institute for Health Policy at Massachusetts General Hospital (MGH). Dr. López 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 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. López received his medical degree from University of Pennsylvania in 2001, completed his residency Brigham and Women's Hospital, Boston, in 2004, and received a Master of Divinity from the Harvard Divinity School in 1999 and a Master of Public Health in 2005.



**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 Manager**

Ms. Kenst is the Project Manager at the Disparities Solutions Center. She joined the DSC in 2012 with ten years of

professional experience in the areas of international humanitarian response, LGBT health, and sexual violence prevention and response. At the DSC, she manages a range of projects, including: production of MGH’s Annual Report on Equity in Healthcare Quality; research on sexual orientation and gender identity data collection in clinical settings; and development and implementation of an educational program on providing safe, effective care for patients who speak limited or no English. She is dedicated to working with institutions and communities to advance health equity and believes in collaborative, interdisciplinary approaches that reach beyond clinical settings to address the social determinants of health. She earned her Master of Public Health with a concentration in Social and Behavioral Sciences from the Boston University School of Public Health and holds a Bachelor of Arts in sociology from the University of Wisconsin.



**Sarah Beiter
Staff Assistant**

Ms. Beiter is the Staff Assistant at the Disparities Solutions Center and the Mongan Institute for Health Policy. She received

her Bachelor of Arts in Sociology and English from Suffolk University. Prior to this, she interned with the Schwartz Center for Compassionate Healthcare, which works to increase the patient-caregiver relationship. She also conducted research on the portrayal of female offenders in crime television shows and presented at the American Society of Criminology’s Annual meeting in Washington, DC in 2011. During her undergrad, she tutored international students at the Writing Center, advocated for LGBT rights in Detroit for Alternative Spring Break, and designed a collaborative art project for V-Day, a national project which works to end gender violence.



Andrea Madu
Research Assistant

Ms. Madu is a Research Assistant for the Disparities Solutions Center. She received her Bachelor of Arts in Psychology

and Studies of Women, Gender, and Sexuality from Harvard University. Prior to working with the DSC, she interned at the Harvard Center for AIDS Research, developing a national survey to uncover the behaviors, stigmas, beliefs, and education surrounding HIV/AIDS within the black community. In 2011, she also volunteered with Health Leads at Boston Medical Center, providing food, employment, education, and housing resources for low-income mothers in the nursery. As an undergrad, she both authored and edited stories for children in orphanages around the world.



Adriana Lopera
Research Assistant

Ms. Lopera is a Research Assistant at the Disparities Solutions Center. She received her Bachelor of Arts in Latin American and

Caribbean Studies from Columbia University. While at Columbia, she was a member of the Intercultural Resource Community and co-coordinated educational field trips for neighborhood children as part of a student led volunteer group. She also interned at MADRE, an international women's rights organization. Prior to working at the DSC, Ms. Lopera served as a Peace Corps Volunteer in Costa Rica. As part of the Rural Community Development program, she worked with community organizations to increase their organizational capacity and project design skills. She also facilitated young women's empowerment workshops on health and life skills and a local women's group greenhouse project.



Bryan Yanez
Research Assistant

Mr. Yanez is a Research Assistant for the Disparities Solutions Center. He received his Bachelors of Science in Biology

and Biomedical Engineering Systems from Tufts University. While at Tufts he presented a pathology and prevention outline for high risk behaviors of Latino MSM. He was active in the LGBT center as a member of Team Q, a group dedicated to providing cultural competency training to professors and administrators. He was also active in the Student Advisory Board for the Center for STEM Diversity to help increase retention of students of color in the STEM fields. Prior to working with the DSC, he worked at TRIO Upward Bound Pre-College Program as a Supplemental Instructor, at MD Anderson Cancer Center as an Oncology Research Assistant, and at the Fenway Institute as a Data Team Research Assistant. He currently works additionally as a Dormitory Manager for an International English Language School and volunteers as a speaker for the Greater Boston PFLAG organization.

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 are eligible for two-year renewable appointments, and benefit from access to new funding opportunities and center expertise for project collaboration.

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
- ★ An MD, RN, PhD or similar degree (note that extensive experience will be taken into consideration in place of degree)

2014–2015 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

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
Alpha Omega Alpha Visiting Professor,
Health Policy, Meharry Medical College

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

Medical Director, Primary care Clinician Plan
Senior Associate Medical Director, Office of
Clinical Affairs, Office of Medicaid-MassHealth
Instructor, Department Health
Policy and Management
Harvard School of Public Health

AREAS OF INTEREST: Health policy and concerns
impacting African American and other disadvantaged
minorities in the United States health system

Karen Donelan, ScD, EdM

Mongan Institute for Health Policy and the
Massachusetts General Hospital Institute for
Technology Assessment, Assistant Professor
of Medicine, Harvard Medical School

AREAS OF INTEREST: Patient and provider
experience, barriers in healthcare delivery

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.

Nicte Mejia, MD, MPH

Assistant Professor of Neurology
Director, Neurology Community Health Diversity and
Inclusion Initiatives, Massachusetts General Hospital

AREAS OF INTEREST: Interventions to provide timely
neurological diagnoses, excellent neurology care,
and optimal neurologic health to people from non-
English speaking and other minority communities.

Joan Quinlan, MPA

Vice President for Community Health,
Massachusetts General Hospital

AREAS OF INTEREST: Community health,
socioeconomic barriers to health care access.

Fatima Cody Stanford, MD, MPH

Obesity Medicine and Nutrition Clinical and Research Fellow, Massachusetts General Hospital/ Harvard Medical School

AREAS OF INTEREST: Obesity (Adult & Pediatric), Health Policy, Health Disparities, Minority Health, Exercise (Physical Activity), Nutrition

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

Elsie Taveras, MD, MPH

Chief, Division of General Pediatrics, Department of Pediatrics
Director, Pediatric Population Health Management, Mass General Hospital for Children
Associate Professor of Pediatrics and Population, Medicine Harvard Medical School

AREAS OF INTEREST: Understanding determinants of obesity in women and children and developing interventions across the lifecourse to prevent obesity, especially in underserved populations.

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 underserved populations, and using complementary and alternative treatment for mood disorders



With each passing year, efforts to improve quality and achieve equity are garnering increasing attention locally and nationally. The DSC aims to stay on that cutting edge, working with anyone who is interested in achieving high-value healthcare.



www.mghdisparitiessolutions.org

 facebook.com/disparitiessolutionscenter

 twitter.com/MGHDisparities

MONGAN INSTITUTE FOR HEALTH POLICY
MASSACHUSETTS GENERAL HOSPITAL • PARTNERS HEALTHCARE
50 STANIFORD STREET, 9TH FLOOR • BOSTON, MA 02114