Atlantic Health dives deep on data to advance health equity

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Leaders at Atlantic Medical Group, a multispecialty physician network that is part of Atlantic Health System, in New Jersey, couldn’t figure out why the response rate for a patient-experience survey was so low among Spanish-speaking patients.

Scott Lauter, MD.
The survey was in Spanish, but the response rate was just 8%, less than half the rate from the general population, said the medical group’s chief medical officer Scott Lauter, MD. Some digging revealed that the survey’s promotional materials were written in English.

“We realized we weren’t hearing the voices of our patients who speak Spanish,” he said.

The physician network took immediate steps to translate the materials into Spanish.

“It’s a little story that speaks to what we’re doing about health equity,” said Dr. Lauter. It’s an ongoing journey about unlearning and becoming more aware of unconscious biases.

Atlantic Health System, a large nonprofit health care network, is a member of the AMA Health System Program, which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.
Christina Johnson, MD, PhD.

Atlantic Health System was also one of eight inaugural participants in the AMA Advancing Equity Through Quality and Safety Peer Network Program. Through Atlantic Medical Group, the health system is the only participant that is directing its efforts to the medical group ambulatory care context. The program equips participants with the knowledge and tools to identify and reduce health inequities through implementation of equity-informed strategies and approaches in patient safety and quality operations.

In an AMA Insight Network webinar, Dr. Lauter joined Christina Johnson, MD, PhD, Atlantic Medical Group’s health equity lead physician and Karthik Sivashanker, MD, vice president for equitable health systems for the AMA Center for Health Equity to discuss Atlantic Health System’s involvement in the Peer Network and its emphasis on “whole person care.”

The AMA Insight Network helps?AMA Health System Program?members gain early access to innovative ideas, get feedback from their peers, network, and learn about pilot opportunities.?Learn more.

Using keywords to identify biases

To identify health inequities among patients, Atlantic Health System data analysts have been reviewing event reports to find specific cases of potential inequity-related harms and incorporate this information into risk-management software. The goal is to find inequities or biases related to race, gender, individual demographics, age or language disability.
“We can search for certain keywords ... and if we find something, do a deeper dive into the case,” said Dr. Lauter.

To get more detailed information, Atlantic Health System expanded its keywords from simple terms to words that described what patients were experiencing in a practice.

“We looked at whether or not people made statements about language or voice or being heard,” said Dr. Johnson.

“I felt disrespected,” is an example of these statements. By reading the cases more carefully and expanding language definitions, Atlantic Health System was able to triple the number of cases in which potential inequities were at play—inequities that would have been missed.

This is one of the pivotal elements of Atlantic Health System’s work in health equity, noted Dr. Johnson.

“We’ve been working with a diverse team who have had their own personal experiences with this, and a lot of patient contact,” she said in an interview with the AMA.

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The story behind the data

Approaching data through the lens of quality and safety makes you more aware of biases, said Dr. Lauter. It also helps you understand the patient’s perspective and gives you a better sense of their experience of care. Physicians and other clinicians start to see the patient as a whole patient—not just as a person who, say, missed an appointment.

Perhaps the bus that patient had to catch wasn’t running the day of the appointment, he emphasized during the webinar. Maybe the patient has multiple chronic conditions. What’s the story behind the data and the patient? This the direction Atlantic Health System is heading in—collecting data and seeing what’s behind it, he added.

Population studies

Population practice-level evaluations is another focus area for Atlantic Health System.
“We can look at maps of whole patient-population regions to look for certain medical conditions, see what practices they identify with, and then develop partnerships to see where these patients are,” said Dr. Johnson.

One pilot study launched late last year took a systemwide look at Atlantic Health System’s patient population, breaking it down by social determinants of health. Dr. Johnson and her team discovered that patients from historically marginalized communities had poorer control for type 2 diabetes or high blood pressure.

The pilot included 50 patients with type 2 diabetes from these communities who had heart or kidney disease. A team of Atlantic Health System physicians, specialists and pharmacists performed direct outreach with these patients, updating any laboratory work and medication dosages and offering new medications to medically eligible patients.

The active pilot has seen some early successes. HbA1c levels decreased in half the population, “and we got more touches in the office space,” said Dr. Johnson. Twenty-six percent of eligible patients started regimens with anti-hyperglycemic agents.

The next phase will expand the population to more than 200 patients. The effort aligns with other goals with patients who have type 2 diabetes, “to navigate and improve patient outcomes,” Dr. Johnson said during the webinar.

**Looking beyond silos**

For Dr. Johnson, Atlantic Health System’s initiatives to address health inequities have completely changed the way she practices medicine, forcing her “beyond the silo I’m working in.”

Everyone in the organization must be on the same page, the Atlantic Health physician leaders said. Are people sitting at the same table? Is everyone contributing? “It’s helped me to recognize the power of collaboration. You don’t get as burned out or tired,” she said.

Looking ahead, a health equity institute is in the early planning stages. “This reflects the commitment of senior leadership in the system to address health equity by forming an institute as part of refreshing of our strategic plan on health equity over the next five years,” said Dr. Lauter.