# Demographic Data Collection Pilot Train the Trainer Webinar Series – Session 2

## Demographic Data Standards

November 14th, 2023

# Shared Learning Experience

This is a safe space

Be in the moment

Ask questions or share ideas

Listen curiously

Be respectful and kind

Keep cameras on if possible

# Improving Race & Ethnicity Demographic Data Collection at Providence Community Health Centers

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# Agenda

| Item | Time |
|------|------|
| *Review of Organization Baseline Assessments* | 9:00 – 9:10 |
| *Review of OMB Standards* | 9:10 – 9:20 |
| *Development & Review of Intervention* | 9:20 – 9:40 |
| *Establishing Oversite & Accountability Mechanisms* | 9:40 – 9:50 |
| *Next Steps and Q & A* | 9:50 – 10:15 |

# Objectives

1. Understand race and ethnicity demographic data collection standards

2. Understand race and ethnicity as part of demographic data collection and how that process informs patient interactions.

3. Increase comfort and capacity for front desk interactions when asking race and ethnicity questions.

4. Increase understanding of organizational oversite and accountability mechanisms related to the collection of race and ethnicity

## PCHC Demographic Data Collection

PCHC is a Federally Qualified Health Center (FQHC)

- Required to collect and report patient demographic data

**2021 UDS Report** % of patients that <u>refused</u> to report, or field is unknown:

- Race: 27.7%

- Ethnicity: 4.2%

- Income: 80.8%

# Standards

## Previous State: *OMB 1997 Standards*

1. Please select the **ethnicity** that describes you best:

   □ Latino/Hispanic/Latinx
   □ Not Hispanic/Latino
   □ Other
   □ Prefer not to say at this time

   *Your ethnicity is different than your race (for example, you can be black or white, but also Hispanic or not)*

2. **Race** generally comes from where the generations of your family have lived. **Please select the race that describes you best.**

   □ Caucasian/White
   □ Black/African American
   □ Asian
   □ Other Pacific Islander
   □ American Indian or Alaskan Native
   □ I don't know my race
   □ I don't want my race known to PCHC at this time

## Current State: *based on EHR capabilities*

1. Please select the **ethnicity** that describes you best:

   □ Cuban
   □ Mexican, Mexican American, Chicano/a
   □ Puerto Rican
   □ Other Hispanic, Latino/a, or Spanish origin
   □ Not Hispanic, Latino/a, or Spanish origin
   □ Puerto Rican
   □ I don't know my ethnicity
   □ Prefer not to say at this time

   *Your ethnicity is different than your race (For example, you can be black or white, but also Hispanic or not)*

2. **Race** generally comes from where the generations of your family have lived. **Please select the race that describes you best.**

   □ Caucasian/White
   □ Black/African American
   □ Asian Indian
   □ Chinese
   □ Filipino
   □ Guamanion or Chamorro
   □ Japanese
   □ Korean
   □ Vietnamese
   □ Other Asian
   □ Native Hawaiian
   □ Other Pacific Islander
   □ Samoan
   □ American Indian or Alaskan Native
   □ I don't know my race
   □ I choose not to answer
   □ Other _____

## *Future State:* 2023 OMB Proposed Race and Ethnicity Stratification

**What is your race or ethnicity?**
*Select all that apply* **AND** *enter additional details in the spaces below.*
*Note, you may report more than one group.*

☐ **WHITE** – *Provide details below.*

☐ German ☐ Irish ☐ English

☐ Italian ☐ Polish ☐ French

*Enter, for example, Scottish, Norwegian, Dutch, etc.*

☐ **HISPANIC OR LATINO** – *Provide details below.*

☐ Mexican or Mexican American ☐ Puerto Rican ☐ Cuban

☐ Salvadoran ☐ Dominican ☐ Colombian

*Enter, for example, Guatemalan, Spaniard, Ecuadorian, etc.*

☐ **BLACK OR AFRICAN AMERICAN** – *Provide details below.*

☐ African American ☐ Jamaican ☐ Haitian

☐ Nigerian ☐ Ethiopian ☐ Somali

*Enter, for example, Ghanaian, South African, Barbadian, etc.*

☐ **ASIAN** – *Provide details below.*

☐ Chinese ☐ Filipino ☐ Asian Indian

☐ Vietnamese ☐ Korean ☐ Japanese

*Enter, for example, Pakistani, Cambodian, Hmong, etc.*

☐ **AMERICAN INDIAN OR ALASKA NATIVE** – *Enter, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Tribal Government, Tlingit, etc.*

☐ **MIDDLE EASTERN OR NORTH AFRICAN** – *Provide details below.*

☐ Lebanese ☐ Iranian ☐ Egyptian

☐ Syrian ☐ Moroccan ☐ Israeli

*Enter, for example, Algerian, Iraqi, Kurdish, etc.*

☐ **NATIVE HAWAIIAN OR PACIFIC ISLANDER** – *Provide details below.*

☐ Native Hawaiian ☐ Samoan ☐ Chamorro

☐ Tongan ☐ Fijian ☐ Marshallese

*Enter, for example, Palauan, Tahitian, Chuukese, etc.*

*Front Desk Staff Experience Collecting REL, Income and SOGI Data*

**Feedback**

- About 50% of staff said they would like additional training on how to engage patients to best collect REL & SOGI data

**Responses:**

- Patients want to know why we need this information
- "That is too personal"
- "Do I have to tell you?"

**Challenges:**

- Patients want to know why we need this information
- "That is too personal"
- "Do I have to tell you?"

**Resources:**

- Prefer dry erase board to complete information confidentially
- Difference between race and ethnicity
- Communication skills

# Race and Ethnicity Data Standards

| Roll Up Category | Federal | | | | | | | State | | Behavioral Health | | Clinical Quality Measures | | NCQA | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | OMB (Current State) 1997 | OMB (Future State) 2023* | HHS | CMS Medicare (Medicare Advantage) | CMS Medicaid (Future State) | HRSA UDS | Census | RI Medicaid (Non-FQHC) | RI Medicaid (FQHC) | SAMHSA | BHOLD | NCQA HEDIS | CMS ECQM | PCMH Recognition | Health Equity Accred. |
| **Multiple Selection** | No | Yes | No | No | *TBD* | No | Yes | No | No | Yes | Yes | No | No | Yes | Yes |
| **Race** | | | | | | | | | | | | | | | |
| American Indian or Alaska Native | American Indian or Alaska Native | American Indian or Alaska Native | American Indian or Alaska Native | American Indian or Alaska Native | *TBD* | American Indian/Alaska native | American Indian or Alaska Native | American Indian/Aska Native | American Indian/Alaska Native | Alaska Native (Aleut, Eskimo)<br><br>American Indian or Alaska Native | Native Alaskan/American Indian | American Indian or Alaska Native | American Indian or Alaska Native | American Indian or Alaska Native | American Indian or Alaska Native |
| Asian | Asian | Asian | Asian Indian<br>Chinese<br>Filipino<br>Japanese<br>Korean<br>Vietnamese<br>Other Asian | Asian Indian<br>Chinese<br>Filipino<br>Japanese<br>Korean<br>Vietnamese<br>Other Asian | *TBD* | Asian Indian<br>Chinese<br>Filipino<br>Japanese<br>Korean<br>Vietnamese<br>Other Asian | Asian | Asian | Asian | Asian | Asian | Asian | Asian | Asian | Asian |
| Black or African American | Black or African American | Black or African American | Black or African American | Black or African American | *TBD* | Black/African American | Black or African American | Black or African American | Black/African American | Black or African American | Black | Black or African American | Black or African American | Black or African American | Black or African American |
| Native Hawaiian/ Other Pacific Islander | Native Hawaiian/ Other Pacific Islander | Native Hawaiian/ Other Pacific Islander | Native Hawaiian<br>Guamanian or Chamorro<br>Samoan<br>Other Pacific Islander | Native Hawaiian<br>Guamanian or Chamorro<br>Samoan<br>Other Pacific Islander | *TBD* | Native Hawaiian<br>Guamanian or Chamorro<br>Samoan<br>Other Pacific islander | Native Hawaiian/ Other Pacific Islander | NativeHawaiian and Other Pacific Islander | Native Hawaiian<br><br>Other Pacific islander | Native Hawaiian or Other Pacific islander<br><br>Asian or Pacific Islander | Hawaiian/ Pacific Islander | Native Hawaiian or Other Pacific Islander | Native Hawaiian or Other Pacific Islander | Native Hawaiian or Other Pacific Islander | Native Hawaiian or Other Pacific Islander |
| Middle Eastern / North African | N/A | Middle Eastern or North African | N/A | N/A | *N/A* | *N/A* | N/A | *N/A* | N/A | *N/A* | N/A | *N/A* | *N/A* | *N/A* | *N/A* |
| White | White | White | White | White | *TBD* | White | White | White | White | White | White | White | White | White | White |

# Race and Ethnicity Data Standards

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | OMB (Current State) 1997 | OMB (Future State) 2023* | HHS | CMS Medicare (Medicare Advantage) | CMS Medicaid (Future State) | HRSA UDS | Census | RI Medicaid (Non-FQHC) | RI Medicaid (FQHC) | SAMHSA | BHOLD | NCQA HEDIS | CMS ECQM | PCMH Recognition | Health Equity Accred. |
| | N/A | N/A | N/A | N/A | N/A | More Than One Race | N/A | Two or More Races | More Than One Race | Two or More Races | N/A | Two or More Races | N/A | All that Apply | One or More Races |
| | N/A | N/A | N/A | N/A | N/A | N/A | N/A | Unknown | N/A | Unknown | N/A | Unknown | N/A | N/A | N/A |
| | N/A | N/A | N/A | N/A | N/A | N/A | Some Other Race | Some Other Race | N/A | Other Single Race | N/A | Some Other Race | Other Race | Other Race | Some Other Race |
| | N/A | N/A | N/A | Form left blank | N/A | N/A | N/A | N/A | N/A | Not Collected | N/A | N/A | N/A | N/A | N/A |
| **Ethnicity** | | | | | | | | | | | | | | | |
| Hispanic/ Latino | Hispanic/ Latino | Hispanic/ Latino | Mexican, Mexican American, Chiano/a; Puerto Rican; Cuban; Another Hispanic, Latino/a or Spanish Origin | Mexican, Mexican American, Chicano/a; Puerto Rican; Cuban; N/A | TBD | Mexican, Mexican American, Chiacno/a; Puerto Rican; Cuban; Another Hispanic, Latino/a, or Spanish Origin | Mexican, Mexican Am, Chicano; Puerto Rican; Cuban; Another Hisptanic, Latino, or Spanish origin | Hispanic/Latino | Hispanic/Latino | Puerto Rican; Mexican; Cuban; Other Specific Hispanic or Latino; Hispanic or Latino - specific origin not specified | Hispanic | Hispanic or Latino | Hispanic or Latino | Hispanic or Latino | Hispanic or Latino |
| Not Hispanic or Latino | Not Hispanic or Latino | N/A | Not of Hispanic, Latino/a, or Spanish origin | Not of Hispanic or Latino/a or Spanish Origin | TBD | Not Hispanic, Latino/a, or Spanish Origin | No, not of Hispanic, Latino, or Spanish origin | Not Hispanic/Latino | Non-Hispanic/Latino | Not of Hispanic or Latino Origin | Not Hispanic | Not Hispanic or Latino | Not Hispanic or Latino | Not Hispanic or Latino | Not Hispanic or Latino |
| | N/A | N/A | N/A | I choose not to answer | N/A | Unreported/ Chose Not to Disclose Race and Ethnicity | N/A | Declined | Unreported/ Refused to Report | N/A | N/A | Asked but No Answer | N/A | Declined | Declined |
| | N/A | N/A | N/A | N/A | N/A | N/A | N/A | Unknown | N/A | Unknown | N/A | Unknown | N/A | N/A | N/A |
| | N/A | N/A | N/A | Form left blank | N/A | N/A | N/A | N/A | N/A | Not Collected | N/A | N/A | N/A | N/A | N/A |

*Can choose to answer Race OR Ethnicity

# Development of Intervention

*Qualtrics Survey*
 o Text message survey sent out to patients with unknown REL and SOGI data

*Training Curriculum*
- Standardize Demographic Data Collection to **yearly**

- Training created through collaboration of **trauma informed** trainer using gaps in both HRSA data and needs assessment related to REL & SOGI knowledge gaps

- Training targeted to support adult learners to shift thinking around **patient centered care** & **gender affirming/ equitable care** starting the moment a patient enters our clinic(s).

- Build foundational **understanding** of REL & SOGI, Pronouns, Preferred Name, and Special Populations. Increase knowledge, understanding, and comfort

- Increasing understanding of bias in health care systems and how customer service interactions can make/ break a patient's experience before they engage with care teams.

- Increasing understanding of how these positive or negative interactions create a system of fear and avoidance for patients impacting health disparities.

# Development of Intervention

## Laminated Front Desk Tool



**Demographic Update:** We collect race, ethnicity, language, sexual orientation, and gender identity information from all of our patients. By knowing more about your background, we can get a better idea of health concerns you may have and be generally sensitive to your needs.

**1. Please select the ethnicity that describes you best:**
- Latino/Hispanic/Latinx
- Not Hispanic/Latino
- Other
- Prefer not to say at this time

*Your ethnicity is different than your race (for example, you can be black or white, but also Hispanic or not)*

**2. Race generally comes from where the generations of your family have lived. Please select the race that describes you best.**
- Caucasian/White
- Black/African American
- Asian
- Other Pacific Islander
- American Indian or Alaskan Native
- I don't know my race
- I don't want my race known to PCHC at this time

**3. Which language is best for you?**
- English
- Spanish
- Portuguese
- Khmer
- French Creole
- Portuguese Creole
- Other _____

**4. Please choose the Gender Identity that best describes how you feel inside:**
- Male
- Female
- Transgender Male/ Female-to-male
- Transgender Female/ Male-to-Female
- Nonbinary Genderqueer (Neither exclusively male nor female)
- Other _____
- Prefer not to say at this time

**5. What sex were you assigned at birth on your original birth certificate?**
- Female (assigned female at birth)
- Male (assigned male at birth)
- Unknown

**6. Please select the sexual orientation that best describes which gender(s) you are attracted to:**
- Straight
- Gay
- Lesbian
- Bisexual
- Other _____
- I do not want to answer at this time

**7. Is there a different name that you would like us to use when talking with you? If so, indicate below.**
_____

**8. What pronouns do you use?**
- She/her/hers
- He/him/his
- They/them/theirs
- Other: _____

## EHR Reference Guide



### REL & SOGI Reference Guide

Please collect REL & SOGI information for all new patients **AND** for patients that have missing or unknown fields.

**Race** — When updating a patients race, use the drop down to *remove* the previous selection and *select* the updated race.

**Ethnicity** — When updating a patient's ethnicity, select the updated ethnicity from the drop down and click OK. **IMPORTANT:** If you do not use the drop down and input the codes in the ethnicity field, remember N= refused and X=not hispanic or latino.

## Self - Assessment



**REL, SOGI & Income Training Pre-Evaluation**

1. What are your expectations of this training? What are you looking to get out of it? What do you hope to learn?

2. How would you rate your current knowledge of the following topics (being able to explain what they mean to patients and provide examples)?

| | Excellent | Good | Fair | Poor |
|---|---|---|---|---|
| a. Race | ☐ | ☐ | ☐ | ☐ |
| b. Ethnicity | ☐ | ☐ | ☐ | ☐ |
| c. Language | ☐ | ☐ | ☐ | ☐ |
| d. Sexual Orientation | ☐ | ☐ | ☐ | ☐ |
| e. Gender Identity | ☐ | ☐ | ☐ | ☐ |
| f. Income | ☐ | ☐ | ☐ | ☐ |

3. How would you rate your comfort level when discussing the following topics with patients?

| | Very comfortable | Comfortable | Not Comfortable |
|---|---|---|---|
| g. Race | ☐ | ☐ | ☐ |
| h. Ethnicity | ☐ | ☐ | ☐ |
| i. Language | ☐ | ☐ | ☐ |
| j. Sexual Orientation | ☐ | ☐ | ☐ |
| k. Gender Identity | ☐ | ☐ | ☐ |
| l. Income | ☐ | ☐ | ☐ |

4. How would you rate your current understanding as to why we collect REL, SOGI and Income information from patients?

| | Excellent | Good | Fair | Poor |
|---|---|---|---|---|
| a. Race | ☐ | ☐ | ☐ | ☐ |
| b. Ethnicity | ☐ | ☐ | ☐ | ☐ |
| c. Language | ☐ | ☐ | ☐ | ☐ |
| d. Sexual Orientation | ☐ | ☐ | ☐ | ☐ |
| e. Gender Identity | ☐ | ☐ | ☐ | ☐ |
| f. Income | ☐ | ☐ | ☐ | ☐ |

# Race & Ethnicity Training

## Why is Understanding & Collecting REL, SOGI and Income Demographics Important?

- By understanding the specific attributes of our patients, we can interact with them in a more **sensitive**, **inclusive**, and **respectful** manner

- As a Federally Qualified Health Center collecting and reporting patient demographic data is required for on-going funding

- Collecting this demographic data:
  - Ensures hiring that is reflective of our patients and direct supports that address disparities outside of our clinics
  - Allows for better identification and understanding of our patient population and what types of health issues they might be more at risk for developing
  - Encourages new and on-going programming to best support our diverse patients and their needs
  - Increase quality of care & patient centered care

## Racial/Ethnic
### Disparities In Healthcare

- Across the country, racial and ethnic minority populations experience higher rates of poor health and disease in a range of health conditions, including diabetes, hypertension, obesity, asthma, and heart disease, when compared to their white counterparts.

- The life expectancy among Black/African Americans is four years lower than that of White Americans.

- Though health indicators such as life expectancy and infant mortality have improved for most Americans, some minorities experience a disproportionate burden of preventable disease, death, and disability compared with non-minorities. * Office of minority health and health Equity (OMHHE)

## Introduction to
## Ethnicity, Race, Language, and Income

- **Ethnicity** is the ethnic ancestry or origin of a person or group of people:
  - Hispanic or Latino (a/x), Non-Hispanic or Latino, Other (identify multiple areas, ex. Black and Hispanic/ Latino)
  - *Ethnicity is different than race (for example, you can be black or white, but also Hispanic or not)*

- **Race:** generally, comes from where the generations of family have lived.
  - Ex) Caucasian/White, Black/African American, Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaskan Native

- **Language:** spoken/preferred language identifies critical barriers to care.
  - English, Spanish, Portuguese, Khmer, French Creole, Portuguese Creole, Other

o Staff self-identification

o Older standards not including indigenous groups

o Staff understanding of ethnicity and race for themselves

o "I don't know"

# Establishing Oversite & Accountability Mechanisms

*Front Desk Exception Report*

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Report data time period: 3/19/2023 - 3/25/2023** | | | | | | | | | | | | | | | |
| Staff Name | Sites | Check in Count | Ethnicity Missing Count | Eth % Completed | Race Missing Count | Race % Completed | Language Missing Count | Language % Completed | GI Missing Count | GI % Completed | SO Missing Count | SO % Completed | PP Missing Count | PP % Completed | IEY_ Exception | IEY_ Exception -% Completed |
| John Doe | Atwood | 1 | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 1 | 0.00% | 0 | 100.00% |
| Jane Doe | Atwood | 57 | 3 | 94.74% | 0 | 100.00% | 0 | 100.00% | 7 | 87.72% | 8 | 85.96% | 16 | 71.93% | 0 | 100.00% |
| Maria Smith | Atwood | 101 | 3 | 97.03% | 0 | 100.00% | 0 | 100.00% | 11 | 89.11% | 11 | 89.11% | 65 | 35.64% | 0 | 100.00% |
| Manny Smith | Atwood | 28 | 2 | 92.86% | 0 | 100.00% | 0 | 100.00% | 2 | 92.86% | 2 | 92.86% | 19 | 32.14% | 0 | 100.00% |
| X | Atwood | 9 | 2 | 77.78% | 0 | 100.00% | 0 | 100.00% | 1 | 88.89% | 1 | 88.89% | 8 | 11.11% | 0 | 100.00% |
| X | Atwood | 113 | 5 | 95.58% | 4 | 96.46% | 0 | 100.00% | 13 | 88.50% | 13 | 88.50% | 42 | 62.83% | 4 | 96.46% |
| X | Atwood | 94 | 7 | 92.55% | 0 | 100.00% | 0 | 100.00% | 2 | 97.87% | 2 | 97.87% | 59 | 37.23% | 0 | 100.00% |
| X | Atwood | 32 | 0 | 100.00% | 1 | 96.88% | 0 | 100.00% | 7 | 78.13% | 9 | 71.88% | 9 | 71.88% | 3 | 90.63% |
| X | Atwood | 79 | 3 | 96.20% | 1 | 98.73% | 0 | 100.00% | 5 | 93.67% | 6 | 92.41% | 51 | 35.44% | 0 | 100.00% |
| X | Atwood | 1 | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 1 | 0.00% | 0 | 100.00% |
| X | Atwood | 11 | 2 | 81.82% | 0 | 100.00% | 0 | 100.00% | 2 | 81.82% | 2 | 81.82% | 8 | 27.27% | 0 | 100.00% |
| X | Atwood | 12 | 2 | 83.33% | 0 | 100.00% | 0 | 100.00% | 4 | 66.67% | 4 | 66.67% | 6 | 50.00% | 0 | 100.00% |
| X | Atwood | 1 | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 1 | 0.00% | 0 | 100.00% |

# Demographic Data Pre & Post Intervention

*Results*

**Ethnicity:**
  4.46 % increase

**Race:**
  15.42 % increase

**Gender Identity:**
  29.3 % increase

**Sexual Orientation:**
  34.72% increase

**Income:**
  28.63% increase

### Data period: 08/28/22-09/03/22

| Site | Total Checkin Count | Ethnicity Missing Count | Eth Complete % | Race Missing Count | Race Complete % | Language Missing Count | Language Complete % | GI Missing Count | GI Complete % | SO Missing Count | SO Complete % | PP Missing Count | PP Complete % | IEY Exception Count | IEY Complete % |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Prairie | 1516 | 121 | 92% | 525 | 65% | 0 | 100% | 686 | 55% | 755 | 50% | 978 | 35% | 400 | 74% |
| Atwood | 684 | 38 | 94% | 57 | 92% | 0 | 100% | 340 | 50% | 376 | 45% | 491 | 28% | 50 | 93% |
| Crossroads | 49 | 6 | 88% | 4 | 92% | 0 | 100% | 28 | 43% | 34 | 31% | 4 | 92% | 0 | 100% |
| Roger | 35 | 4 | 89% | 3 | 91% | 0 | 100% | 6 | 83% | 6 | 83% | 18 | 49% | 3 | 91% |
| North | 43 | 4 | 91% | 3 | 93% | 0 | 100% | 18 | 58% | 21 | 51% | 39 | 9% | 1 | 98% |
| Capitol | 644 | 74 | 89% | 98 | 85% | 0 | 100% | 177 | 73% | 200 | 69% | 481 | 25% | 10 | 98% |
| Mount | 41 | 8 | 80% | 17 | 59% | 0 | 100% | 24 | 41% | 24 | 41% | 36 | 12% | 6 | 85% |
| Central | 492 | 24 | 95% | 29 | 94% | 0 | 100% | 43 | 91% | 49 | 90% | 374 | 24% | 3 | 99% |
| Chafee | 666 | 62 | 91% | 112 | 83% | 0 | 100% | 385 | 42% | 426 | 36% | 545 | 18% | 4 | 99% |
| Olneyville | 223 | 17 | 92% | 12 | 95% | 1 | 100% | 132 | 41% | 141 | 37% | 168 | 25% | 8 | 96% |
| Hepatitis | 3 | 0 | 100% | 1 | 67% | 0 | 100% | 1 | 67% | 2 | 33% | 3 | 0% | 0 | 100% |
| Randall | 642 | 60 | 91% | 55 | 91% | 0 | 100% | 103 | 84% | 120 | 81% | 503 | 22% | 4 | 99% |
| **PCHC Averages** | | | 90.94% | | 83.89% | | 99.96% | | 60.65% | | 53.98% | | 28.28% | | 94.48% |

### Data period: 9/24/23--9/30/23

| Site | Total Checkin Count | Ethnicity Missing Count | Eth Complete % | Race Missing Count | R Complete % | Language Missing Count | L Complete % | GI Missing Count | GI Complete % | SO Missing Count | SO Complete % | PP Missing Count | PP Complete % | IEY Exception Count | IEY Complete % |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Prairie | 1175 | 53 | 95.49% | 13 | 98.89% | 0 | 100.00% | 194 | 83.49% | 222 | 81.11% | 475 | 59.57% | 164 | 86.04% |
| Atwood | 398 | 13 | 96.73% | 2 | 99.50% | 0 | 100.00% | 19 | 95.23% | 22 | 94.47% | 239 | 39.95% | 0 | 100.00% |
| Randall Specialty | 137 | 7 | 94.89% | 0 | 100.00% | 0 | 100.00% | 16 | 88.32% | 16 | 88.32% | 75 | 45.26% | 0 | 100.00% |
| North | 33 | 1 | 96.97% | 0 | 100.00% | 0 | 100.00% | 0 | 100.00% | 1 | 96.97% | 28 | 15.15% | 1 | 96.97% |
| Capitol | 598 | 46 | 92.31% | 1 | 99.83% | 0 | 100.00% | 9 | 98.49% | 12 | 97.99% | 320 | 46.49% | 4 | 99.33% |
| Central | 557 | 15 | 97.31% | 4 | 99.28% | 0 | 100.00% | 14 | 97.49% | 17 | 96.95% | 247 | 55.66% | 4 | 99.28% |
| Chafee | 366 | 26 | 92.90% | 5 | 98.63% | 0 | 100.00% | 91 | 75.14% | 95 | 74.04% | 197 | 46.17% | 9 | 97.54% |
| Olneyville | 318 | 8 | 97.48% | 1 | 99.69% | 0 | 100.00% | 66 | 79.25% | 72 | 77.36% | 84 | 73.58% | 5 | 98.43% |
| Prairie Dental | 373 | 3 | 99.20% | 0 | 100.00% | 0 | 100.00% | 9 | 97.59% | 10 | 97.32% | 16 | 95.71% | 3 | 99.20% |
| Crossroads Dental | 67 | 8 | 88.06% | 1 | 98.51% | 0 | 100.00% | 18 | 73.13% | 19 | 71.64% | 49 | 26.87% | 13 | 80.60% |
| Express | 788 | 31 | 96.07% | 10 | 98.73% | 0 | 100.00% | 105 | 86.68% | 116 | 85.28% | 303 | 61.55% | 48 | 93.91% |
| Randall | 587 | 44 | 92.50% | 1 | 99.83% | 0 | 100.00% | 15 | 97.44% | 23 | 96.08% | 344 | 41.40% | 6 | 98.98% |
| **PCHC Averages** | | | 95.40% | | 99.31% | | 100.00% | | 89.95% | | 88.70% | | 56.91% | | 95.36% |

# Pre and Post Training Assessments

## Knowledge Attainment

**89 Staff Responses**

Post training data on staff that reported excellent or good knowledge of the following:
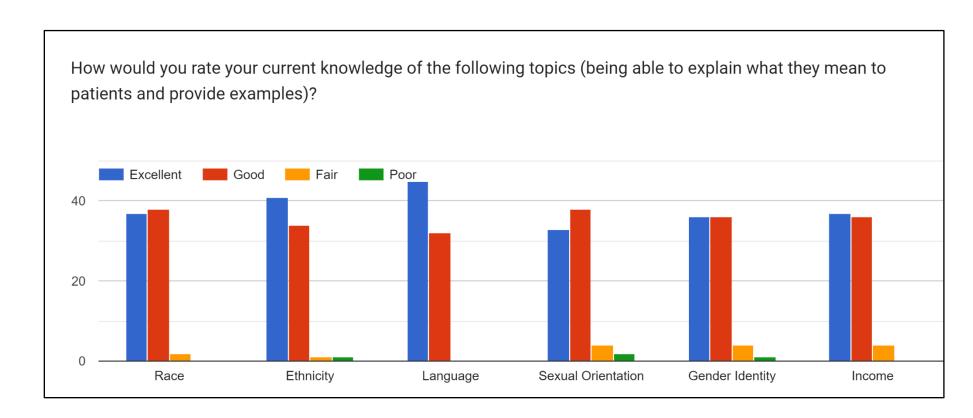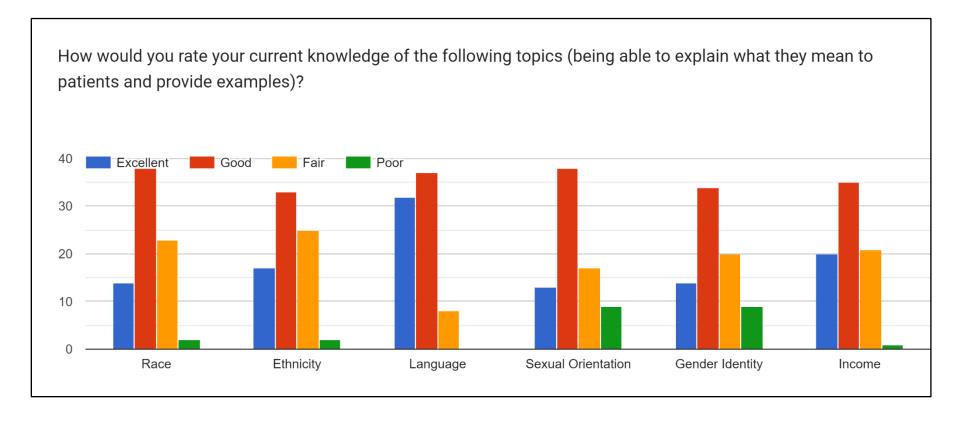
     Race: 28.1% increase

     Ethnicity: 32.5% increase

     SO: 23% increase

     GI: 29.2% increase

     Income: 21.3% increase

**100%** of staff reported the training met their expectations



How would you rate your current knowledge of the following topics (being able to explain what they mean to patients and provide examples)?



How would you rate your current knowledge of the following topics (being able to explain what they mean to patients and provide examples)?

# *Next Steps*



# *Questions & Answers*

- Office of minority health and health Equity (OMHHE)
- Flexibilities and Best Practices for Implementing the Office of Management and Budget's 1997 Standards for Maintaining, Collecting, And Presenting Federal Data on Race and Ethnicity (Statistical Policy Directive No. 15)- TheWhiteHouse.gov. (n.d.). https://www.whitehouse.gov/wp-content/uploads/2022/07/Flexibilities-and-Best-Practices-Under-SPD-15.pdf
- US Center for Disease Control. Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12: Youth Risk Behavior Surveillance. Atlanta, GA: U.S. Department of Health and Human Services, 2016.
- The Trevor Project. 2020 National Survey on LGBTQ Youth Mental Health. New York, New York: The Trevor Project, 2020.
- McLaughlin KA, Hatzenbuehler ML, Keyes KM. Responses to discrimination and psychiatric disorders among black, Hispanic, female, and lesbian, gay, and bisexual individuals. *Am J Public Health*. 2010;100(8):1477-84.
- Hatzenbuehler ML, Nolen-Hoeksema S, Erickson SJ. Minority stress predictors of HIV risk behavior, substance use, and depressive symptoms: results from a prospective study of bereaved gay men. *Health Psychol*. 2008;27(4):455-462.

# THANK YOU

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