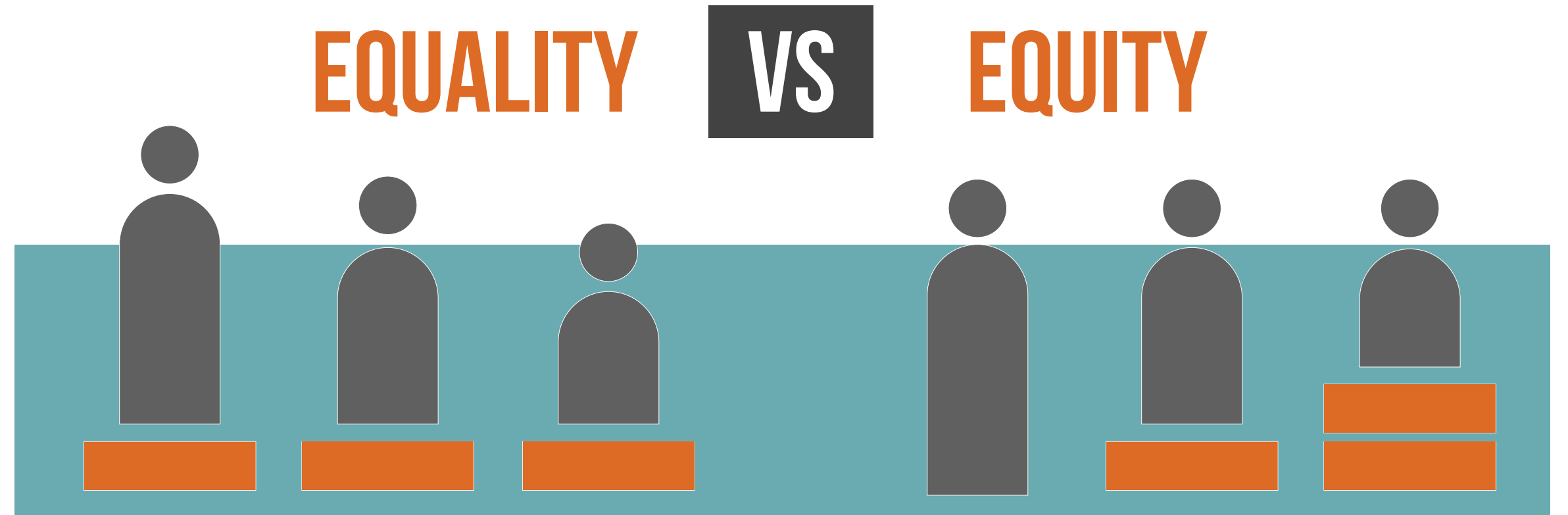




## THE PROBLEM

Health inequities exist in all races and ethnicities in St. Paul MN, which places West Side patients below optimal outcomes in clinical care measures



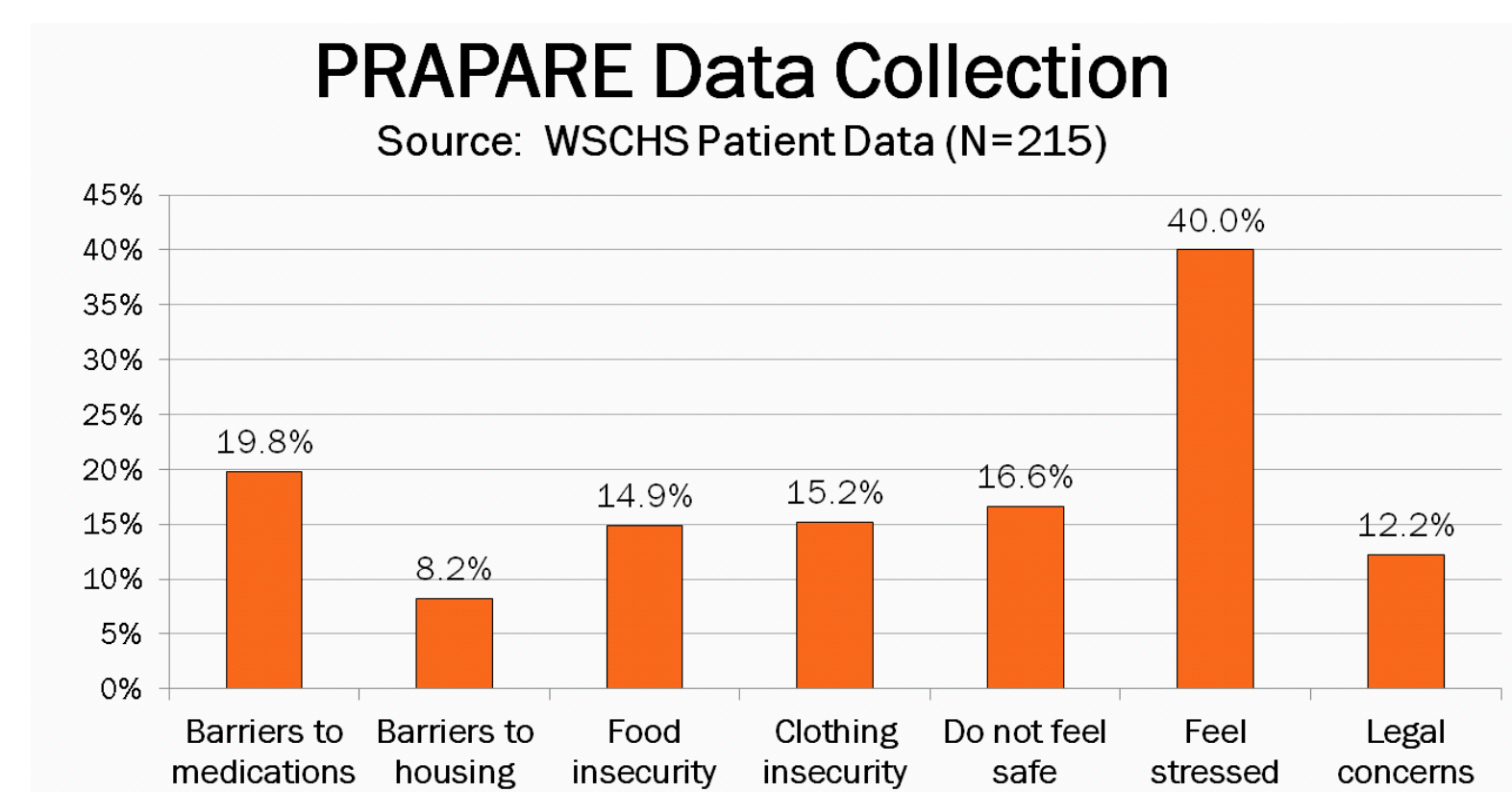
## THE MODEL

Design an organizational plan with the following key focus areas:

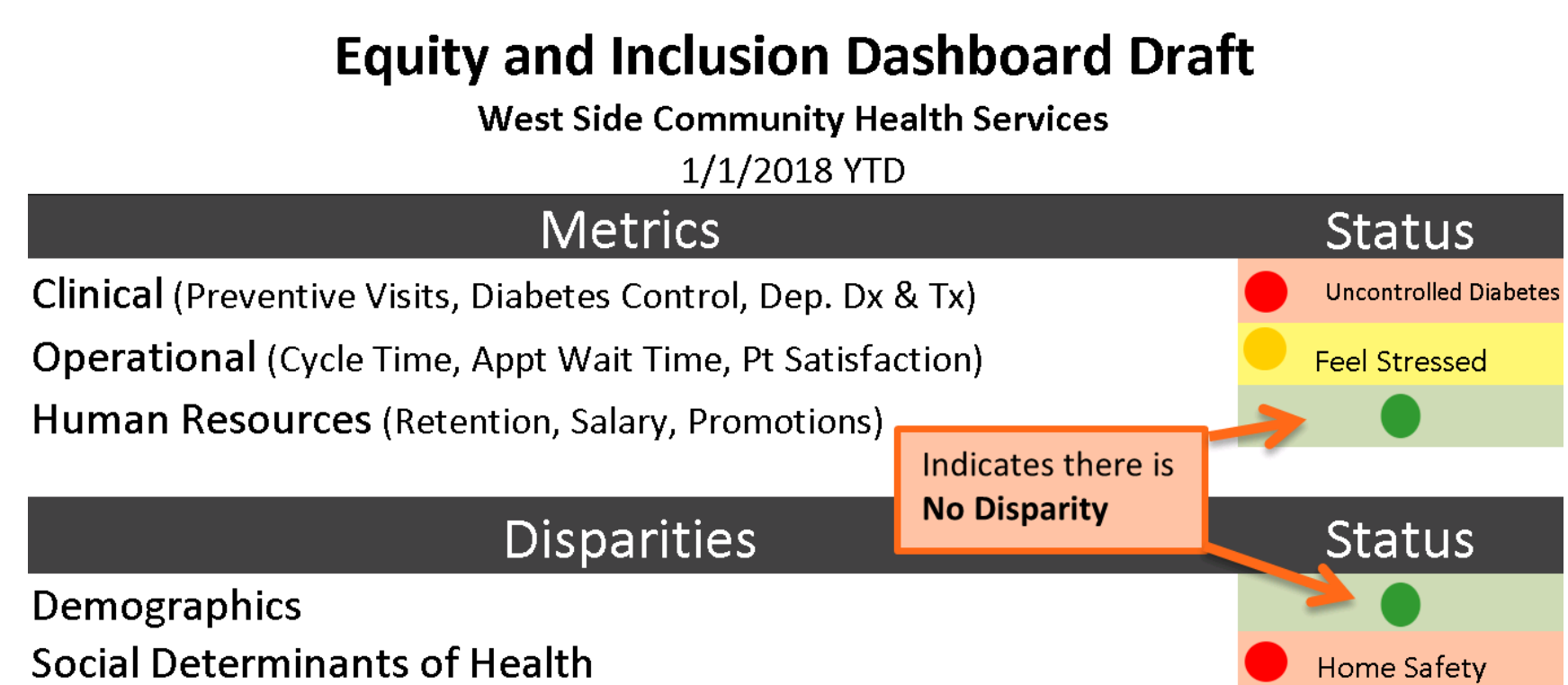


## SUCCESSSES


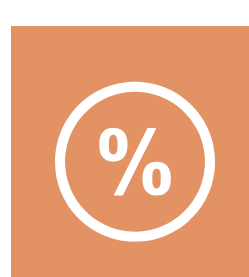


1. Established Equity and Inclusion committee to guide model.
2. Conducted organization wide training to introduce the themes of bias and cultural humility as a launch to systems level change.
3. Developed framework to collect social determinant data. themes of bias and cultural humility as a launch to systems level change.



4. Published social determinants of health (SDOH) data and began development of an equity and inclusion disparity dashboard to pinpoint specific areas for improvement.



## NEXT STEPS

-  Equity and Inclusion Committee will enact model.
-  Further develop Equity and Inclusion Committee to support model.
-  Spread PRAPARE data collection to full system. Begin plan for clinical integration.
-  Review, evaluate and routinely publish dashboard. Use dashboard to guide practice.

## ORGANIZATIONAL CHANGE

- > Conducting meaningful disparity assessment
- > Supporting patient engagement
- > Improving staff engagement
- > Ongoing practical community engagement