



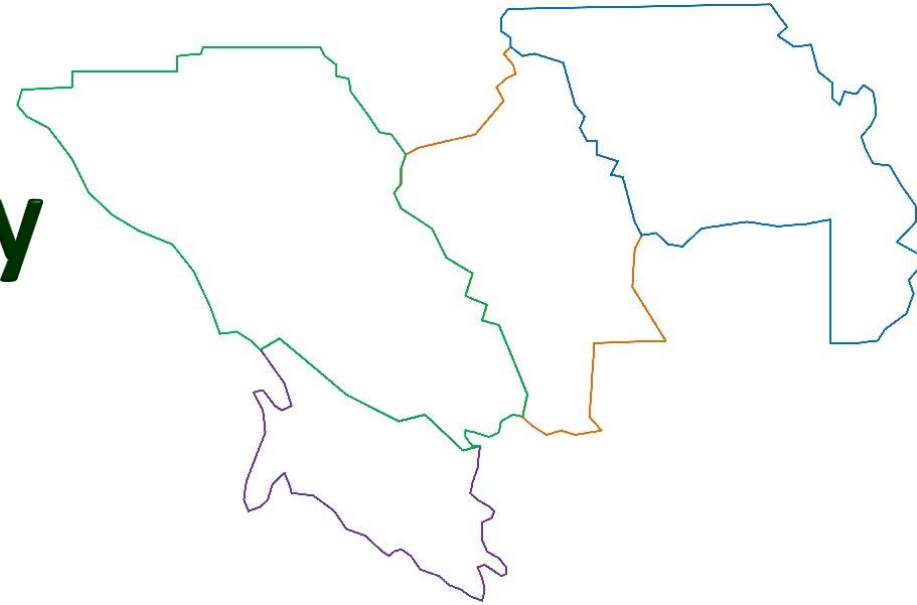
*Serving Sonoma, Napa, Marin & Yolo Counties*

# Moving Toward Health Equity

**Redwood Community Health Coalition**

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# Our vision is to return to high levels of BP & A1c control as seen pre-Covid

## Current Aim Statements:

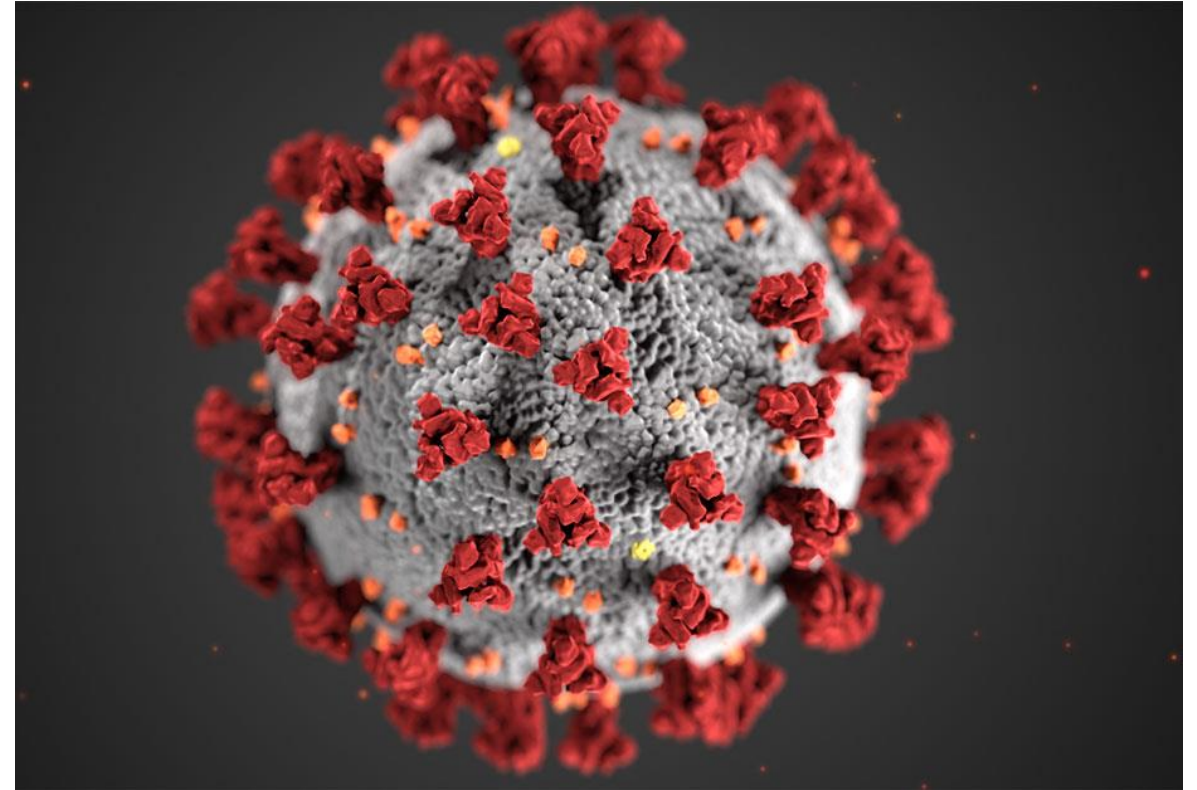
- #1. RCHC will improve health equity among health center patients by increasing the rate of uninsured patients with controlled diabetes (A1c of < 9%) from 62%\* to 71% by March 31st 2021.
- #2. RCHC will improve patient-team partnership, as defined in the 10 Building Blocks of Primary Care, by increasing the RCHC aggregate health center self-assessed score of the patient-team partnership domain by one level from 7.6 (Level B) at baseline in 2019\* to 8.6 (Level B) by the final assessment at the end of the grant period.

## New Aim Statement

- To increase the rate of blood pressure and A1c control among health center patients\* to pre-Covid levels by March 31<sup>st</sup>, 2022 through bringing patients back into care.
- \*RCHC's health equity subpopulation is the uninsured, which we will continue to monitor.

# Why It's Not Possible Now

- ▲ Stay-at-home orders
- ▲ Patient fears of coming into clinic
- ▲ Lack of virtual health connection due to low tech literacy among patients or living in a tech desert
- ▲ Increased in food insecurity, chronic stress, and a decrease in physical activity levels
- ▲ Continued transition to and support for offering virtual care
- ▲ Covid-19 vaccine administration



<https://www.cdc.gov/dotw/covid-19/index.html>

# Learnings that Will Inform Our Desired Future

## Bright Spots/Accomplishments

- ▲ Executed PHASE workplan, including trainings
- ▲ Hosted virtual quality tours
- ▲ Rolled out SMBP machine expense reimbursement
- ▲ Hosted first ever Food Champion Roundtable

## Activities We will Keep Doing Based on Learnings

- ▲ Provide telehealth support including:
  - ▲ Telehealth/virtual care office hours
  - ▲ Telehealth billing webinar
  - ▲ Vendor demonstrations
- ▲ Record and publish QI Chat Room podcast episodes
- ▲ Facilitate health equity workgroup

# What Else is Possible?

- ▲ Support the rollout and continued screening of patients using ACEs Aware for referral to services.
- ▲ Host another Food Champion Roundtable for health centers to collaborate on their food access and nutrition initiatives. This roundtable will now include Community-Based Organizations.
- ▲ Offer tobacco cessation QI intervention project opportunity



# Benefits of Achieving Desired Future



Health disparity gaps will shrink for patients



Increased patient engagement may lead to higher performance on numerous measures and a more satisfied health center workforce



Overall health of the community will improve with the control of BP and A1c

- ▶ Patients were experiencing feelings of **isolation, loneliness, and boredom.**
- ▶ Patients **blamed** their lack of self control (i.e. overeating) for their poor health and **struggled** to think of a time they were feeling healthy.
- ▶ Patients were **reluctant or unable to find community.**
- ▶ Patients **felt disempowered** in themselves to make changes.

# Challenges if We Don't Move Forward with Solution

- ▲ Health disparity gaps will continue to widen
- ▲ Health centers will continue to struggle with performance
- ▲ Health care services will not meet patient needs



<https://ixceed-solutions.co.uk/2020/12/17/top-5-recruitment-challenges-to-tackle-in-2020/>

# What We Need from Our Leaders to Make it Happen



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Dedicated time for RCHC staff to work on cardiovascular initiatives and QI work

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Inclusion of Social Determinants of Health and Health Equity in the strategic plan, and the continuation of the Health Equity Peer Group

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Continued provision of local and national cardiovascular resources





# Thank you for your time!

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