Symposium on Implicit Bias and Racial Disparities in Obstetrical Care

Promising Practices & Recommendations

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Symposium on Implicit Bias and Racial Disparities in Obstetrical Care

- November 1, 2018
- Convened at the request of Governor Cuomo
- Included 50 multidisciplinary healthcare providers and stakeholders from across New York State
- Co-hosted by ACOG DII, HANYS, GNYHA
- Goal: to identify concrete strategies to reduce racial disparities and their negative health impacts, with a direct emphasis on the hospital setting.
Conduct Implicit Bias Trainings in Healthcare

“They look at your skin color and your pocket and judge you based on that.”—Listening Session Participant

Promising Practice Example

- Mount Sinai Health System: partnered with Cook Ross to employ a train-the-trainer model of unconscious bias training
- Designated team received training off-site, and returned to offer training to multidisciplinary teams

Recommendations from Symposium Participants

- Deploy a state funded pilot project for hospitals to conduct multidisciplinary implicit bias training
- Enhance medical school, nursing school, midwifery school, and residency training program curricula on implicit bias
Enhance Hospital and Community Partnerships, Support, & Trust

“We used to have a village and today it’s gone.” -Listening Session Participant

Promising Practice Example

• Northwell Health System: Piloting the AIM Reduction of Peripartum Racial/Ethnic Disparities bundle

• First efforts include building partnerships with community-based organizations (CBOs) to engage women in defining equity at the hospital system, prioritize strategies, and enhance community trust

Recommendations from Symposium Participants

• Develop partnerships/collaborations among healthcare institutions and CBOs to define equitable care and prioritize interventions

• Make it a strategic priority to diversify the healthcare system workforce
Improve Communication and Cultural Competency Training

“I was never told why I was high risk.” - Listening Session Participant

Promising Practice Example

• Dr. Angela Wright Marshall: presented a cohesive framework for providers to promote cultural competency and compassion: listen more, show more empathy, avoid assumptions, “gut check” any generalizations, understand wide variations between cultures, and commit to explaining more

Recommendations from Symposium Participants

• Implement cultural competency education across the entire healthcare team, understanding the historical context of mistrust in various communities

• Enhance medical school, residency training, midwifery, and nursing program curricula on respectful, trauma-informed communication techniques and listening exercises

• Increase the diversity of medical, midwifery, and nursing students in training, and other healthcare providers in the workforce
Initiate a Multi-pronged Approach to Address System Issues

“You never really see your doctors.” – Listening Session Participant

“…you’re just on your own.” – Listening Session Participant

Promising Practice Examples

• Mount Sinai: Educating frontline staff on how to collect consistent and meaningful REAL (Race, Ethnicity, and Language) data, and why it is being collected

• Women in the Listening Sessions reported consistently positive experiences with community health workers, along with home visiting programs, and a desire for expansion of these services
Initiate a Multi-pronged Approach to Address System Issues

Recommendations from Symposium Participants

• Establish a statewide maternal mortality review board
• Invest in data infrastructure to enhance surveillance of racial disparities and better identify gaps in care
• Identify opportunities to optimize postpartum care, with a corresponding reimbursement system that recognizes postpartum care as a patient-centered, ongoing process
• Increase Medicaid coverage to one-year postpartum and develop policies to increase provider/facility acceptance of Medicaid to help expand access to care in this population
• Increase accessibility by patients to their medical records, and pursue secure sharing of medical records seamlessly between facilities to improve continuity of care
In Summary

• Health disparities based on race/ethnicity are a critically important issue in maternal health
• Additional provider education and organizational based solutions are required
• Development and promotion of workforce wellness initiatives may be an important investment to improve patient care
• Ultimately, a combination of strategies is necessary as women from all racial and ethnic backgrounds deserve compassionate, equitable obstetric care