

## DEI INITIAL INDICATORS

### Numbers that we check to see if we have health disparities at UNMH:

#### Clinical (Patient care):

- **Mortality:**
  - What is it?: The number of patients who are *expected* to pass away in the hospital (because their health is so bad when they arrive) compared to the number of patients who *do* pass away in the hospital
  - Why do we check it?: We want to make sure that certain racial/ethnic groups don't pass away more often in the hospital than others
- **Potentially Avoidable Days:**
  - What is it?: The number of days that a patient has to stay in the hospital that were unnecessary.
  - Why do we check it?: We want to make sure that certain racial/ethnic groups don't stay longer in the hospital (when they didn't need to) than others
- **Average Length of Stay:**
  - What is it?: The number of days that a patient stays in the hospital.
  - Why do we check it?: We want to make sure that certain racial/ethnic groups don't end up staying longer in the hospital than others
- **Readmission Rates (overall):**
  - What is it?: How often patients have to come back to the hospital (to stay overnight, as an inpatient) within 30 days of being discharged. This does not include patients who have to come back as an inpatient for chemotherapy, radiation therapy, rehabilitation, dialysis, and delivery/birth
  - Why do we check it?: We want to make sure that certain racial/ethnic groups aren't being readmitted to the hospital (they get sick again) more often than others
- **Hospital Core measures:**
  - **Pediatric Asthma:**
    - What is it?: The number of patients (children) who got the recommended care they needed for asthma
    - Why do we check it?: We want to make sure that children from all racial and ethnic groups are receiving the same care for this very difficult disease
  - **Pneumonia:**
    - What is it?: The number of patients who got the recommended care they needed for pneumonia
    - Why do we check it?: We want to make sure that patients from all racial and ethnic groups are receiving the same care for this very difficult disease
- **Patient Centered Medical Home indicators:**
  - HgA1c levels checked
  - HgA1c levels in control

- What is it?: “HGA1c” measures the average amount of sugar in the blood. High levels means the patient may have diabetes.
- Why do we check it?: We want to make sure that patients from all racial and ethnic groups are getting their blood sugar levels checked, and that their blood sugar levels stay low. This helps prevent or control diabetes.
- LDL levels checked
- LDL levels in control
  - What is it?: “LDL” measures the amount of cholesterol in the blood. High levels means the patient may have heart disease.
  - Why do we check it?: We want to make sure that patients from all racial and ethnic groups are getting their cholesterol levels checked, and that their cholesterol levels stay low. This helps prevent or control heart disease.

### Non-clinical (Non-patient care):

#### ➤ Patient Indicators:

- Patient satisfaction rates
  - What is it?: How happy patients are with the care they receive.
  - Why do we check it?: We want to make sure that patients from all racial and ethnic groups are equally happy with their care.
- Patient no-show, bumps, and cancel rates
  - What is it?: How often patients don't come to – or cancel – their appointments. Also, how often patients are “bumped”, or rescheduled because the hospital had to move or change the appointment.
  - Why do we check it?: We want to make sure that patients from all racial and ethnic groups are able to get appointments, and come to their scheduled appointments.
- “Left without being seen” in the Emergency Department
  - What is it?: How often patients decide to leave the Emergency Room without receiving care.
  - Why do we check it?: We want to make sure that patients from certain racial and ethnic groups aren't deciding to leave more often than others.
- Demographics of patient/family complaints
  - What is it?: The race, ethnicity, language, age and sex of the people who aren't happy with the care they receive.
  - Why do we check it?: We want to make sure that all patients feel comfortable making a complaint about their care, if they need to.

#### ➤ Employee Indicators:

- Employee demographics and job position and organizational level
  - What is it?: The race, ethnicity, language, age, and sex of people in different jobs and different levels of authority.
  - Why do we check it?: We want to make sure that employees from all racial and ethnic groups are represented in different jobs and levels of authority. We want to make sure employees represent patients' race, ethnicity, language, age, and sex as much as possible.