

Washington

PATIENT SAFETY COALITION

Addressing Stigma & Bias Workgroup Meeting Thursday, November 19th, 2020

Meeting Minutes

- 4:00 Approve November Minutes | *Anita Sulaiman*
- Approved
- 4:05 Project Plan Updates | Anita Sulaiman
- Project Plan (See Action Plan Worksheet):
 - Goal #1: Create Awareness Campaign around stigma & bias
 - ⇒ Webinar series: Completed
 - Final webinar went very well: Packed, excellent content.
 - Evaluations of all webinars are available at:
 9/1/2020: https://www.surveymonkey.com/results/SM-G75T6CKH7/
 10/9/2020: https://www.surveymonkey.com/results/SM-QSKBQD2P7/
 11/13/2020: https://www.surveymonkey.com/results/SM-DC3B7ZN67/
 - Webinars are posted on: https://wsma.org/WSMA/Education/Webinars_OnDemand/WSMA/Resources/Practice_Management/OnDemand/Webinars_OnDemand.aspx?hkey=53a67f34-e7a8-4b79-9463-6f51e1418ff5
 - ⇒ Podcast: WIP
 - SL reached out to 2 patients. No news. Will f/u with PFAC* group & speakers from last webinar. Deadline? 2nd week of January. (Meeting on 12/12).
 - * PF Engagement Network: group for all Patient & Family Engagement Directors in h/c institutions.
 - \Rightarrow Blog: TBC
 - Ginny Weir at BREE confirmed she will write 2nd blog. Anita to follow up with her.
 - ⇒ Safe Table: WIP
 - Steve contacted 5 people* & will reach out to webinar speakers. Response deadline? 12/15. to select date and send invites
 - * Including community orgs (disabilities).
 - AS Qs: Are we interested in orgs serving specific communities esp. those with medical facilities/services? E.g. MAPS (Muslim Association of Puget Sound): largest community center & mosque in WA, has a free clinic. (AS is member of their COVID-19 Task Force.) More actively engage with them? Invite to Safe Table &/or SC Meeting? Yes.
 - AS & AE to send Steve contact names from ICHS (International Community Health Services) Amy used to work there as Asst to the Medical Director; their Shoreline clinic was one of
 Amy's pilot groups & from mosque clinic.
 - Waiting to set new date, pending responses. Q1. SL will propose some dates.
 - Attendees from 15 orgs. The workgroup can also attend, at least to observe.
 - ⇒ ASBW web page idea At least a landing page. Redesign in process.
 - NL will work on this. AS happy to assist with content, layout etc.
 - All webinars, meeting materials and resources will be placed there. Additionally, there will be a public page for S&B information.

- SL walked the group through the Foundation's website; showed how Addressing Stigma & Bias is currently under Patient Safety Culture (1 of 5 tabs/headings on the Home page).
- AS: We need a tab for the ASB. Plus the library of resources per our discussion.
 - Goal #2: Identify behavioral health sub-topics:
 - (i) LGBTQIA+ Healthcare
 - (ii) Suicide Prevention
 - Discussion skipped as this is an on-going goal.
 - Goal #3: Determine areas where tools & resources already developed by BREE
 Collaborative can be implemented
 - Discussion skipped as this is an on-going goal.
 - Goal #4: Promote training for providers that will address stigma & provider bias, particularly towards people within the target communities
 - Anita added a to-do to connect with organizations that provide trainings to increase our partnering opportunities.
 - Group members welcome to suggest orgs/contacts.
 - We want to do a better job of capturing links & various resources covered in our meetings; need to improve sharing of materials on the website.
 - It's very important to create a well-done website that reflects a good image.
 - Add links to other organizations as resources on website, e.g., BREE. Consider including sites where users would want to visit for resources.
 - Ginny Weir is Interim CEO. Will be attending SC Meeting tomorrow. Has been asking: What value does the Foundation bring? SL shared that in reviewing their work, a tactic in every workplan is leveraging the website to post tools etc. Encouraged members attending to chime in on how important the website is; that it is a value to the membership.
 - AS happy to speak up, if SL invites comments on that topic. Shared experience working with a client on their corporate image & online presence. A VP of one of the satellite companies in their group almost declined their job offer, because of how they looked based on their website. It was, to him, a reflection of the org. Incidentally, we had been working on a corporate image & website redesign. When I showed him the new marketing collateral, he was visibly impressed. That is just someone you want to hire. This is your image to the world.
 - LAC: The member orgs would also likely want to link to WPSC on their websites, as a resource for providers. Her org has a link to the BREE tools under clinical practice guidelines & they have also adopted a lot of the BREE recommendations. Would be nice to add resources on stigma & bias.
 - AS: Good reminder. For everything that is brought up, (we, esp. Nick should) think about where else we ought to post that. Put yourself in the shoes of a user & consider the different entry points: Where would they look?
 - Group to submit (any) presenter ideas for Steering Committee. Anita to invite someone from mosque clinic or COVID-19 Task Force for January 15, 2021. Suggested we invite Paula Houston.
- 4:30 Annual Review: Progress of workgroup (includes work plan review) & 2021 Plan | Anita Sulaiman
 - SL: The purpose is to look at our 4 goals & decide if we want to continue, sunset &/or work on something new. It is not an evaluation. From that, decide where we want to go from here.
 - Group discussed and refined ASBW annual/year-end summary developed by Anita.
 Attached.

- LAC: We could identify additional sub-groups/communities to our focus areas. So many impacted by stigma & bias. We could continue & broaden the scope.
- Education: Flyers/shareable content: Add hyperlink to graphics & other great content shared at the last meeting. Be sure to attribute all sources.
- Podcast: WIP. If SL is unable to find a patient who is willing to share their story, AS can reach out to her communities e.g. the gay friend she interviewed for her blog piece (featured in August) how he is asked about STD testing at every medical appointment, regardless of the reason for the visit.
- LAC: Shared that providers are graded on how they close gaps in care. EMR items (missing screening/service) get flagged. And it is only for certain age groups.
- AS: Looks like a discriminatory practice. Personally, has never been asked about STD testing. If only Ginny was present. She identified as lesbian; we could ask her about her experience. LAC: EMRs need to have a way to resolve these for e.g. for 1 year, so patients are not pestered. AS: Perhaps this is something LuAnn can take to her physician groups. Physician input is always highly valued. JM: Shared that she identifies as lesbian herself & that she has never been asked that question. Does not think it is applied across the LGBT spectrum. AS: Wonder if this is done more on gay men? LAC: Women are at lower risk. SL: The issue is not whether they ask or not. It is a good thing that they ask. It is *how* they ask i.e. how it is *delivered* & how it is *perceived*. This is where training comes in. LAC: Good point.
- LAC: Question is: how to juggle what the patient is in for & the reminders that pop up on the EMR? E.g. patient has not had a flu shot esp. when you do not know the patient. AS: Sounds like the same issue that people in data collection have had to worry about how to collect personal information on patients. Hopefully, as people get used to the idea, we will make strides. Esp. with being in a pandemic, people understand the importance of being more targeted, to understand patients better.
- Identified UWMC curriculum. JM met Paula H on Monday, who will take proposal (to contract their training out) back to her org. They are still finalizing the curriculum & converting it to an asynchronous (learning) platform; months away from having it ready even internally. Note: The ask is for WSMA to host & it would be a member benefit. She was one of the presenters at the recent webinar. The content is impressive. SL: We can publicize. AS: We can add the link to our resource library.
- We could also invite her to speak at a SC meeting.
- AS would like to acknowledge team members. Everyone to send names & titles by EOD.
- 4:45 Social time
- Opportunity for introduction: SL bring wine.
 - AS: We work together, but I do not really know anyone. It would be nice to introduce ourselves & get to know a bit about each other, as individuals & professionals. Team members encouraged to share at least one personal tidbit.
 - Round of introductions & very interesting conversation continued for almost 40 minutes. ©

To-do's:

Highlighted in yellow.

Meeting minutes prepared by:

Anita Sulaiman & Steve Levy