



**Emerson Health:**  
**Health Quality and Equity Strategic Plan**  
Annual Evaluation CY 2024



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## **A. Executive Summary of the Health Quality and Equity Strategic Plan**

Emerson Health, in affirming its mission to “provide exceptional patient-centered care that is highly reliable, safe, compassionate, equitable, efficient and coordinated”, acknowledges the organizational priority to intentionally implement care initiatives that address health care disparities and remove barriers to equitable access or care delivery within the organization for the communities we serve.

Emerson Health utilizes the CDC definition of health equity, “the state in which everyone has a fair and just opportunity to attain their highest level of health” in creating its organizational vision statement.

*“Emerson Health strives to be a trusted healthcare provider, valued community partner, and creator of positive change for all people in our region to achieve their full potential for health and well-being throughout their lives.” – Emerson Vision Statement 2023*

Equity in healthcare includes embracing patient centered care that is informed by understanding race, ethnicity, language, disability, sexual orientation/gender identity demographics and health related social needs of individual patients and then utilizing this data to evaluate potential disparities in outcomes for populations of patients. We believe Emerson Health will take a leadership role in the delivery of equitable care for patients in the communities it serves.

In CY 2022, Emerson affirmed its Leadership vision for equitable healthcare by appointing two senior leaders into key roles to execute the tasks associated with equitable support of staff and patients. The Vice President of Human Resources was appointed as the Chief Diversity Officer and tasked with developing a workforce focused group to address Diversity, Equity and Inclusion of the staff. The Vice President of Quality and Patient Safety was appointed as the Chief Health Equity Officer and created the Patient Safety Subcommittee on Equity, Access and Quality to ensure equitable care of patients.

The Subcommittee on Equity, Access and Quality completed a comprehensive gap analysis of current state in CY 2023 to build a framework for the four-year plan submitted to the state as a part of the 1115 MassHealth waiver. Emerson’s four-year Health Equity Strategic Plan has 5 goal pillars:

- 1. Leadership Commitment**
- 2. Data Collection**
- 3. Community Collaboration**
- 4. Staff Education**
- 5. Quality/Safety Measure Evaluation**



These pillars have detailed measurable goals that will be completed in the next 4 years to enhance the patient-centered equitable care delivered at Emerson.

In CY 2023, the interdisciplinary Subcommittee completed extensive work building demographic data collection fields and training staff to obtain the information that will form the foundation of equity analysis. Emerson Health now collects race, ethnicity, language, disability, sexual orientation/gender identity and health related social needs data for admitted patients. In CY 2024, the Subcommittee worked on data integrity and used process improvement methodology to eliminate “blank” or “unknown” responses within our data sets.

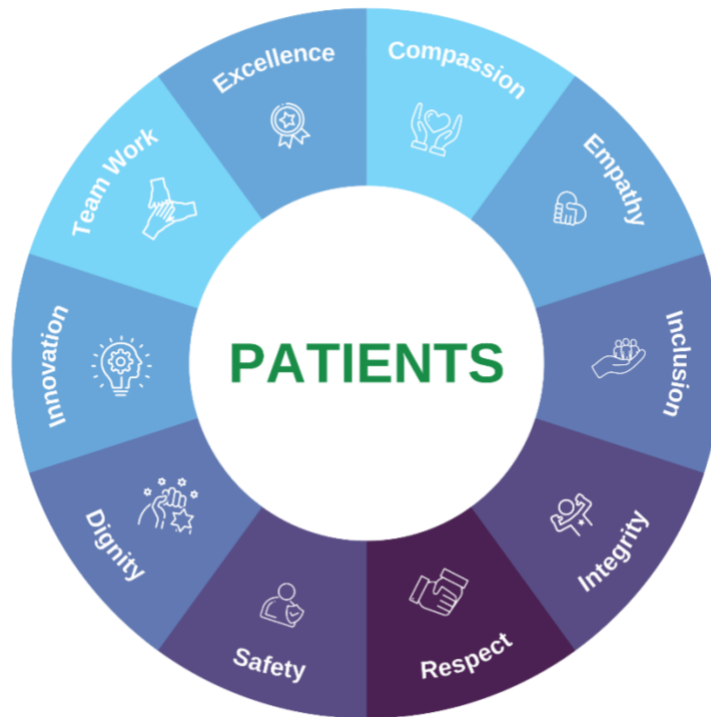
Emerson utilizes groups that are populated with community members to ensure that the voices of the community we serve are reflected in our health equity strategic planning and implementation efforts. These groups include: Emerson Corporators, Emerson Foundation Board, Emerson Patient and Family Advisory Council (PFAC), and Emerson volunteers. To seek a diverse group for input, Emerson completed a Community Health Needs Assessment (CHNA) in CY 2024 which included focus groups from across the towns served. Emerson Health always welcomes feedback from patients, support persons and concerned community members regarding the Health Equity Strategic Plan and/or personal experiences with care delivered at Emerson to assist us in our equity-informed high reliability improvement journey.

## **B. Overview of the Strategic Plan and Equity Framework**

Each year, Emerson Health reviews the mission, vision and values statements for the organization to ensure that the guiding framework remains contemporary and true to the focus of healthcare for the organization and the community. In 2021, the long held values of equity and inclusion and references to the foundation of high reliability were incorporated into the core statements to further clarify the commitment to these ideals.

The current mission statement is: “Emerson Health delivers exceptional patient-centered care that is highly reliable, safe, compassionate, **equitable**, efficient and coordinated.” The mission statement, as noted, includes the value of equitable health care. Town Hall meetings with the President in June 2022 included discussions of fulfilling our mission regarding equity, and encouraged front line staff members to join the Diversity, Equity and Inclusion Committee to support a workforce that was aligned to these values.

The mission statement is further reflected in what Emerson calls the “Values Wheel.” This image shows patients at the center of all we do and shares the values of the organization as components surrounding care of the patient (Figure 1.). Values of Inclusion, empathy and respect highlight the importance of patient centered, inclusive care delivery.



*Figure 1. Emerson Health Values Wheel with Patient at center of care*

Emerson’s vision statement is, “Emerson Health strives to be a trusted healthcare provider, valued community partner, and creator of positive change for all people in our region to achieve their full potential for health and well-being throughout their lives.” The CDC definition of health equity, “the state in which everyone has a fair and just opportunity to attain their highest level of health” is reflected in this Emerson vision statement. There is a long historical connection within Emerson to serving the community and supporting optimal health for all persons.

To ensure that these values were easily identified for our community, in CY 2023 Emerson created a public statement of Commitment to Equity which was reviewed and approved at Board Quality and Senior Leadership, and shared with the Leadership group, the staff and PFAC Committee in November 2023. The Commitment to Equity was then translated and posted to the external hospital web page.

This public statement reads:

*At Emerson Health, our mission is to deliver exceptional patient-centered care that is highly reliable, safe, compassionate, and equitable. We are committed to a culture of belonging, inclusivity, diversity and equity. We value and appreciate individuality and diversity of thought, experience, and perspective.*

*Emerson Health believes that all patients have the right to care regardless of race, color, creed, religion, national origin, age, disability, sex, sexual orientation, gender identity or expression, marital status, veteran status, ability to pay, membership or activity in a local commission, political affiliation, or place of residence. We support a culture where every person is respected and treated fairly.*

*Emerson Health is committed to health equity and works within our organization and our community to ensure that everyone has a fair and just opportunity to attain their highest level of health and well-being.*

Emerson Health, in affirming its mission to “provide exceptional patient-centered care that is highly reliable, safe, compassionate, equitable, efficient and coordinated”, acknowledges the organizational priority to intentionally implement care initiatives that address health care disparities and remove barriers to equitable access or care delivery within the organization.

To ensure that this organizational priority is met, a framework for data driven quality analysis was developed. As part of that framework, in 2022, the organization created the Office of Equity and Inclusion and assigned a Chief Diversity Officer and Chief Health Equity Officer for oversight of this work (Figure 3.). Previously established roles such as the ADA Coordinator were aligned under this new framework.

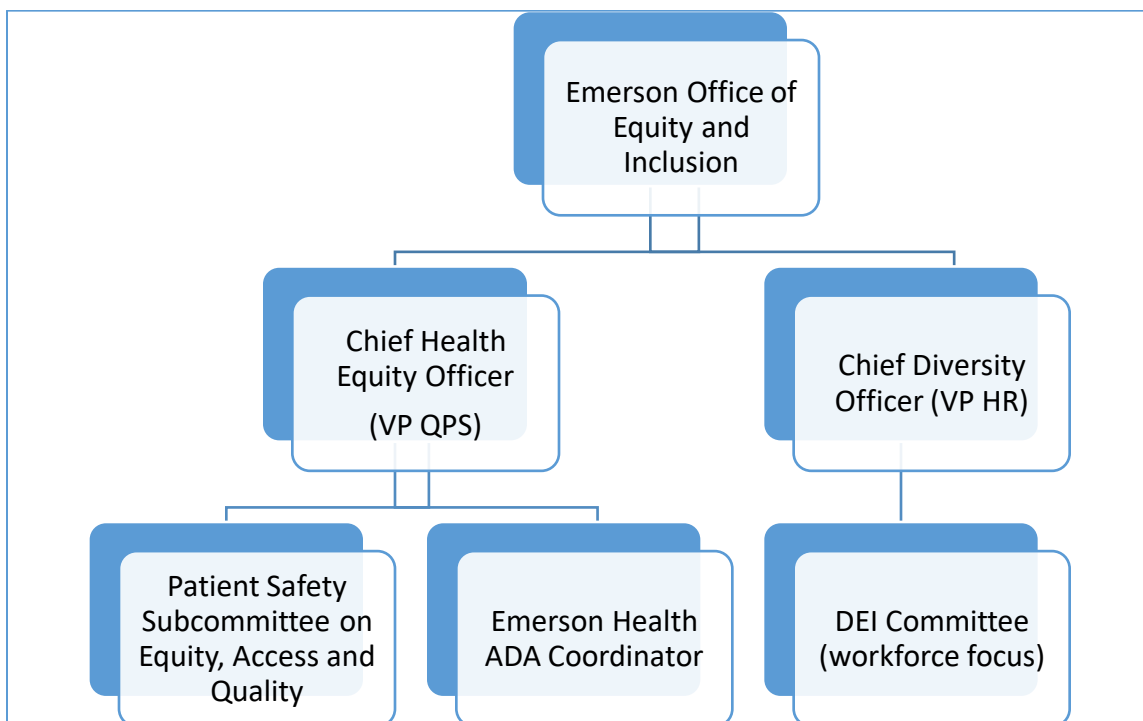


Figure 3. Emerson Health Equity Framework and Organizational Structure

The Patient Safety Subcommittee on Equity, Access and Quality was tasked with addressing the health care equity issues of patients through data analysis and developing and implementing the annual action plan.

### **C. Health Equity Strategic Goals: CY 2023 – CY 2027**

Emerson Health identified the following 5 Health Equity Strategic pillars that will span the 2023 to 2027 timeframe based on a gap analysis conducted in 2023, a review of health equity framework best practices and with a vision toward ensuring the organization meets its patient centered vision to deliver highly reliable equity informed safe, high quality care. The organization acknowledges that as data collection is validated, and as community needs change, these goals may be modified over time.

Progress on the goals is noted.

#### **1. Demonstrate Leadership Commitment**

GOAL: Emerson Health will demonstrate the Leadership Commitment to Health Equity internally to Leadership and staff, and externally to the community.

- a. Create a Board Quality goal (FY 2023) regarding Health Equity and review progress on the 1115 Waiver deliverables, Health Equity improvement plan and goal at least quarterly with the Board Quality Committee starting in CY 2023.

**GOAL MET 2023**

- b. Enhance the external facing (website) source for community awareness of equity work in CY 2024. Post the public statement of commitment to equity and the Executive summary of the Health Quality and Equity Strategic plan on this site.

**GOAL MET 2023-2024**

- c. Complete Joint Commission Health Care Equity Certification by CY 2025.

**IN PROCESS**

#### **2. Enhance Data Collection**

GOAL: Emerson Health will obtain patient and staff demographic data and validate completeness/data integrity to ensure patient centered care and equitable population care.

- a. Develop structured RELD SOGI fields and validate data collection in CY 2023.

**GOAL MET 2023**

- b. Build RELD SOGI fields into reports and extracts for all hospital acquired conditions and stratified quality measures in CY 2023 and CY 2024. Perform data validation and monitor collection performance in Subcommittee at least

quarterly. **GOAL MET 2023-2024**; validation of data and quality improvement efforts to ensure complete data sets continue as a focus of the Subcommittee to ensure accuracy in understanding the population of Emerson patients.

- c. Complete the CY 2024 CHNA by Q3 2024. Incorporate results into Equity Strategic plan. **GOAL MET 2024**
- d. Obtain Staff diversity data and include equity assessment questions into the CY 2024 Culture of Safety survey. **GOAL MET 2024**
- e. Incorporate results into Equity Strategic plan in CY 2025. **IN PROCESS**
- f. Repeat survey in CY 2026.

### 3. Support Community Collaboration

GOAL: Emerson Health will include the experience of patients and their supports in health equity planning.

- a. Review Health Equity Strategic goals and work of the Health Equity Subcommittee at PFAC at least annually starting in CY 2023. Ensure PFAC representation on the Subcommittee in CY 2024. **IN PROCESS**
- b. Incorporate the voice of the community into the focus groups and survey work associated with the CHNA in CY 2024. **GOAL MET 2024**
- c. Review the public facing equity content with community stakeholder groups including PFAC and Foundation Board in CY 2024. **GOAL MET 2024**
- d. Continue to address Community needs including evolving healthcare access for patients at shelter locations served by Emerson starting in CY 2023. **GOAL MET 2024**; note the work to address evolving healthcare access and treatment needs for patients within the community is ongoing.
- e. Stratify HCAHPS Patient Satisfaction data for reporting internally to Board Quality and externally to Board of Registration in Medicine PCAP Annual report in CY 2024. **GOAL MET 2024**
- f. Stratify Complaints/Grievances and Compliments data and incorporate data into external report to Board of Registration in Medicine (PCAP Annual report) starting in CY 2025. **IN PROCESS**

### 4. Provide Staff Education

GOAL: Emerson Health will provide specific education based on data analysis to address risk points for staff in equitable delivery of care.

- a. Assign required annual training to all staff and medical staff members in CY 2023 to address education regarding “qualified interpreters” and operational use of the interpreter services. **GOAL MET 2023**
- b. Build staff accessible resources for equity into HUB intranet location in CY 2023. Publicize location and use through internal communication, hospital orientation, and staff outreach in CY 2023. **GOAL MET 2023**



- c. Establish a Board Quality goal in FY 2024 to include 100% completion for Leadership staff of Bias Training. **GOAL MET 2024**
- d. Assign unconscious bias and equity-informed high reliability as required annual training to all staff and medical staff members in CY 2024. **GOAL MET 2024**
- e. Develop Board Quality goal and educational content based on disabilities assessment and accommodation once data extraction is collected for at least one year (CY 2025). **IN PROCESS**
- f. Develop Board Quality goal and educational content based on HRSN resources once assessment and data extraction is collected for at least one year (CY 2026).

#### 5. Evaluate Quality/Safety Measures

GOAL: Emerson Health will stratify high risk quality measures to assess health equity issues and impacts creating disparities of care, when present, for the patients it serves.

- a. Evaluate OB Measure: NTSV **IN PROCESS**
- b. Evaluate Behavioral Health/Substance Use Measure: SUB 2/2a and SUB 3/3a **IN PROCESS**
- c. Develop joint ACO/Hospital Quality and Equity performance improvement project (PIP) to potential disparities of care in the OB and Behavioral Health/Substance Use populations within Emerson's MassHealth admitted patients. **IN PROCESS**
  - i. PIP 1 (SUB 2/2a and SUB 3/31)
    - 1. Planning and Baseline (CY 2023)
    - 2. Implementation (CY 2024)
    - 3. Closeout (CY 2026)
  - ii. PIP 2 (NTSV)
    - 1. Planning and baseline (CY 2024)
    - 2. Implementation (CY 2025)
    - 3. Closeout (CY 2027)

As noted, each of Emerson's strategic pillars has a defined goal and specific, measurable, achievable, relevant and time bound actions that are inclusive and equitable. These are the actions that the organization will complete in each calendar year to make progress toward the goal. The key performance indicators are identified as the deliverable metrics of each action. Emerson's predominant strength is its tradition of individualized high quality care that is aligned with delivery of equitable patient centered care. The values of the organization and its staff are synonymous with ensuring equitable care for its patients and community.

Vulnerability lies in the challenges of an independent community hospital in the current healthcare fiscal environment. There is also vulnerability in the limits of community hospital population groups and data analysis. The overall patient population is smaller and variation

within it then is at times single digit numbers for persons or events. It is difficult to ascertain significance, particularly statistical significance, when the population is small.

There are also threats to delivering the intended changes due to competing priorities and limited resources. Healthcare answers to multiple regulators and a community hospital faces bandwidth challenges in having the same small number of Leaders address each requirement, quality metric or improvement opportunity. Emerson however, believes that our strength and opportunity is in seeing equity work not as a separate 'project' but instead as an established component of our high reliability journey to deliver the safest, highest quality care to all patients. The work we do toward high reliability equitable care may take longer due to resource constraints, but is already the work necessary to ensure the care we deliver matches our mission, vision and values.

#### **D. Health Equity Strategic Plan: Evaluation of CY 2024**

##### **ASSESSMENT AND COMMUNITY INVOLVEMENT**

In CY 2024, the Patient Safety Subcommittee on Equity, Access and Quality leveraged a multidisciplinary team of hospital stakeholders, and used existing data sources (medical record registration data, interpreter request data) to refresh the Department of Public Health Language Needs Assessment (LNA) and to review goals and priorities for the 2024 year based on the Health Quality and Equity Strategic Plan. The updated LNA was submitted to DPH in 7/3/2024. Emerson completed a refreshed 2024 Community Health Needs Assessment (CHNA) using community survey data and focus group interviews. The Emerson PFAC participated as a focus group in the CHNA process. Additional focus groups included food pantry recipients, adults in community mental health initiatives, and area youth. Qualitative data was collected March-April 2024. Subject matter experts and community leaders were interviewed (Advocates, Bedford Health Department, Ayer District Court, Sudbury COA, Boys and Girls Club of Assabet Valley, Making Opportunities Count). Emerson also used MA DPH Community Health Equity Survey data conducted on-line in summer and fall of 2023. The 3 key themes identified were mental health, financial stability and healthcare access. The Community Advisory Board then participated in the 3 virtual planning sessions June 2024 to create the Strategic Implementation Plan (SIP) for the CHNA.

The 2024 CHNA was finalized and presented to the Emerson Board of Directors on 10/22/2024, the Patient Safety Subcommittee on Equity, Access and Quality (Emerson's HQEC) on 11/12/2024 and the Emerson Quality Council on 11/25/2024. The CHNA is posted here: <https://www.emersonhospital.org/community-programs/community-needs-assessment>. The CHNA and LNA are two formal ways that the organization continues to assess the health equity needs of our patients including those insured by MassHealth.

## DATA

Over the past 2 years Emerson has continued to work on data capture and validation. The most mature data, as it has been collected for many years prior to 2021, is race, ethnicity and language (REL). The work to clarify the responses recorded as “unknown” has been part of the HQEC data integrity QAPI in the past year. The Subcommittee on Equity, Access and Quality created smaller workgroups to enhance data collection and data integrity in CY 2023 and CY 2024. Incremental changes to the coded fields in EMR, to the process steps of staff collecting data and to the risk intelligence (‘why this matters’) have been part of the work plan to decrease “blank”, “unknown” and “declined” responses. Given the relatively small numbers of patients within data sets at a community hospital, we need to build highly reliable data capture to ensure we understand the patients we serve and their needs.

## MILESTONES 2024

The Subcommittee on Equity, Access and Quality met or exceeded goals established in the Health Equity Strategic plan in CY 2024. All deliverables (in blue below) for the MassHealth 1115 Hospital Quality and Equity Incentive Program CY 2024 were completed, submitted on time and accepted. The Subcommittee made great strides forward in data completeness and enhanced the foundational structure of equity within the organization with a focus on cognitive bias training. The milestones of the committee work are presented below.

[1/31/24 Disability Competency Care Training Plan submitted for 1115 waiver](#)

3/21/24: Full day Bias Training on site using High Reliability Framework. Board Goal: Emerson Leadership group to complete formal bias training to expand and deepen HRO foundation. Completed 64 Leaders trained.

4/8/24: Disability data collection implemented for ED patients.

[4/9/24 Required TJC Equity Certification webinar attended by QPS](#)

[4/10/24 DCCT Disabilities Training plan submitted and approved](#)

5/2024: Updated race structured fields to federal specifications.

5/2024 Hospital Orientation/virtual Orientation QPS slides updated to reflect integration of equity work.

6/14/24: Subcommittee received full funding of \$1,500 for car seats for families in need (Auxiliary Car Seat Grant). ED and OB areas to use as needed to support safe discharge planning for parents with minor children and newborns. 16 car seats were ordered 9/6/24.

6/17/24: Language and Interpreter structured fields updated and built as mandatory to support high reliability data collection.

[6/28/24 Stratified Quality Data Reporting submitted](#)

7/3/2024 Submitted 2024 Language Needs Assessment (LNA) to DPH.

7/2024 TJC Equity Certification Gap analysis started

7/2024 QEIP PIP social work survey and patient interviews for PIP#1

[7/28/24 HQEIP Attestation](#)

[8/27/24 RELD SOGI HCAHPS MAPPING Deliverable submitted](#)

10/2024: Assigned Unconscious Bias training to all staff as part of Annual Education. Staff have until 12/31/24 to complete required module.

[11/8/24 PIP#2-ACO OB plan submitted](#)

11/26/24: Joint Commission Equity Certification application submitted. Gap analysis and quality data analytics completed in the year prior to application.

12/18/24: REL SOGI data built into Feedback module for compliments, complaints/grievances. This will support analysis of equity variables in patient and family feedback.

12/17/24: Additional modifications of EMR go-live to enhance data collection and integrity

- Preferred language for healthcare information updated to preferred written and preferred spoken language
- Disability accommodations screening added to inpatient, observation and outpatient radiology
- HRSN screening added to inpatient nursing admission assessment changing process from social work consult and screening to all patient screening with social work referral to positive screen

12/18/24: Joint Commission Equity Certification preparation call with TJC Account Rep. Target site visit for Certification set for April 2025.