

What’s the project?

The Legislature directed MDH to create and implement a plan to **stratify health care quality measures by socio-demographic factors in consultation with consumer, community, and advocacy organizations representing diverse communities** for the Statewide Quality Reporting and Measurement System. To implement these requirements, **we partnered with Voices for Racial Justice (Voices)** to obtain input from diverse communities across the state using authentic engagement methods.

Why is it important?

Our work is intended to:

- Authentically engage community members that experience disparities;
- Identify disparities and fulfill legislative requirements to stratify quality measures by socio-demographic factors;
- Strengthen the dialogue between MDH and communities and make measure data more accessible and useful to the public; and
- Implement MDH's Advancing Health Equity Recommendation #7 to strengthen the collection and analysis of data to advance health equity.

How did you accomplish it? Who were your partners?

We’re applying principles of authentic community engagement and co-creating solutions with our strong community partner, Voices.

Voices recruited health equity champions from communities impacted by health disparities, including American Indian, African-American, African immigrant, Asian and Pacific Islander, Latinx, LGBTQQ/ Two-Spirit, and people with disabilities. The champions conducted interviews with 100+ community members and convened two listening sessions.

Lessons learned

Authentic community engagement and co-creation are inherently challenging processes that require navigating not only the specific goal of the work, but also all of the history, tensions and frustrations that surround the topic and the relationship. As Voices and community partners observed,

“All participants of the project have been intentional in creating a safe space, developing trust and having a transformational experience that can allow all of us to co-create and become authentic partners, but it is still a work in progress.”

Results and next steps

We plan to release public use files (PUFs) of quality measure data stratified by socio-demographic factors and ZIP Codes for the very first time in early 2019 in response to a recommendation from Voices and community partners.

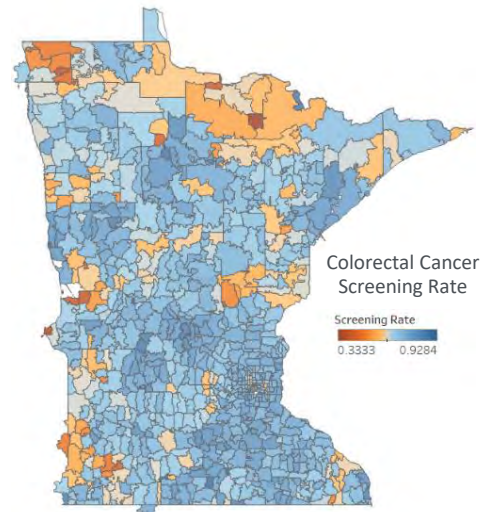
These PUFs will allow the public—including diverse communities and those representing them—to use the data to: identify trends in care quality across areas and population subgroups; supplement quantitative data with qualitative data and narratives; create graphics, charts, and maps; and develop interventions, grant applications, and other projects and funding proposals.

We hope that our work will advance health equity by illuminating the relationship between care quality and socio-demographic factors in new ways, and promoting discussion about this relationship and the overall goals of health care quality measurement and improvement.

We plan to release our first set of PUFs for the following conditions: diabetes, vascular disease, child and adult asthma, colorectal cancer screening, adolescent mental health and depression screening, and depression remission.

MDH team members

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Colorectal Cancer Screening Rates by Patient ZIP Code, 2015. Data Source: Colorectal Cancer Screening Quality Reporting System PUF