

Health Equity by Design (HEBD) Task Force 2024

Hannah Galvin, Task Force Co-Chair Hung Luu, Task Force Co-Chair

November 13, 2024



Call to Order/Roll Call

Seth Pazinski, Designated Federal Officer, ASTP



Health Equity by Design Task Force 2024 Roster

Name	Organization	Name	Organization
Hannah Galvin* (Co-Chair)	Cambridge Health Alliance	Susan M. Jenkins	HHS Assistant Secretary for Planning and Evaluation (ASPE)
Hung S. Luu* (Co-Chair)	Children's Health	Meagan Khau	Centers for Medicare & Medicaid Services (CMS)
Shila Blend*	North Dakota Health Information Network	Kikelomo Oshunkentan*	Pegasystems
Medell Briggs-Malonson*	UCLA Health	Rochelle Prosser*	Orchid Healthcare Solutions
Kristie Clarke	Centers for Disease Control and Prevention (CDC)	Belinda Seto	National Institutes of Health (NIH)
Sooner Davenport	Southern Plains Tribal Health Board	Christopher St. Clair	U.S. Food and Drug Administration (FDA)
Derek De Young*	Epic	Naresh Sundar Rajan*	Neantix Inc.
Sarah DeSilvey*	Gravity Project	Janice Tufte	Hassanah Consulting
Steven Eichner*	Texas Department of State Health Services	Janée Tyus	IMPaCT Care Inc, University of Michigan- Flint and Michigan Health Information Network (MiHIN)
Cynthia Gonzalez	RAND Corporation		



Opening Remarks

Hannah Galvin, Task Force Co-Chair Hung Luu, Task Force Co-Chair



Agenda

1:30 PM	Call to Order/Roll C	al
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Seth Pazinski, Designated Federal Officer, ASTP

1:35 PM Opening Remarks

- Hannah Galvin, Task Force Co-Chair
- Hung Luu, Task Force Co-Chair

1:40 PM HEBD Principles, Considerations, and Challenges

- Hannah Galvin, Task Force Co-Chair
- Hung Luu, Task Force Co-Chair

1:45 PM Task Force Worksheet

- Hannah Galvin, Task Force Co-Chair
- Hung Luu, Task Force Co-Chair

2:45 PM Public Comment

Seth Pazinski, Designated Federal Officer, ASTP

2:55 PM Next Steps

- Hannah Galvin, Task Force Co-Chair
- Hung Luu, Task Force Co-Chair

3:00 PM Adjourn



HEBD Task Force Charge

Incorporating HEBD Principles in Health IT

Provide ASTP with recommendations on promising practices, challenges, and resources to support health and human services organizations to incorporate HEBD principles into the design, build, implementation, use, and monitoring of health IT

- The recommendations should include:
 - Considerations that health and human services organizations can use to include HEBD in health IT
 - Recommendations for ASTP on potential next steps to advance the implementation of HEBD principles in the design, build, implementation, use and monitoring of health IT

• Recommendations Due: May 2025



HEBD Principles, Considerations, and Challenges

Hannah Galvin, Task Force Co-Chair

Hung Luu, Task Force Co-Chair



What Components should be included in our HEBD Framework?

Identifying the key pieces that will organize our work:

- High-level Goals / Aims
- Common Principles
- Terminology
- Actions Involved / Considerations



Example Consideration Themes

- Involvement of Interested Parties, Community Members, Staff, and Patients
- Governance and leadership
- Policy and Legal Compliance
- Feasibility and Sustainability
- Infrastructure and Workflow
- Privacy/Security (HIPAA/non-HIPAA covered entities)
- HEBD Awareness and Training
- Monitoring, Reporting, and Analytics



Discussion Questions

- 1. What are current challenges?
- 2. What are the impact/consequences of current challenges?
- 3. What are some real-world examples of solution archetypes to these challenges?
- 4. What are some novel solutions for challenges that do not currently have solutions?
- 5. What are recommendations for next steps?



What principles should guide our work?

Examples / Ideas

- Center Those We Are Serving
- Improve Personal Health Outcomes
- Advance Population Health Equity and Justice
- Ensuring Personal Control
- Design Inclusive Solutions
- Ensure Accountability
- Mitigate Bias and Discrimination in Health Technologies
- Prevent, Reduce, and Remediate Harm

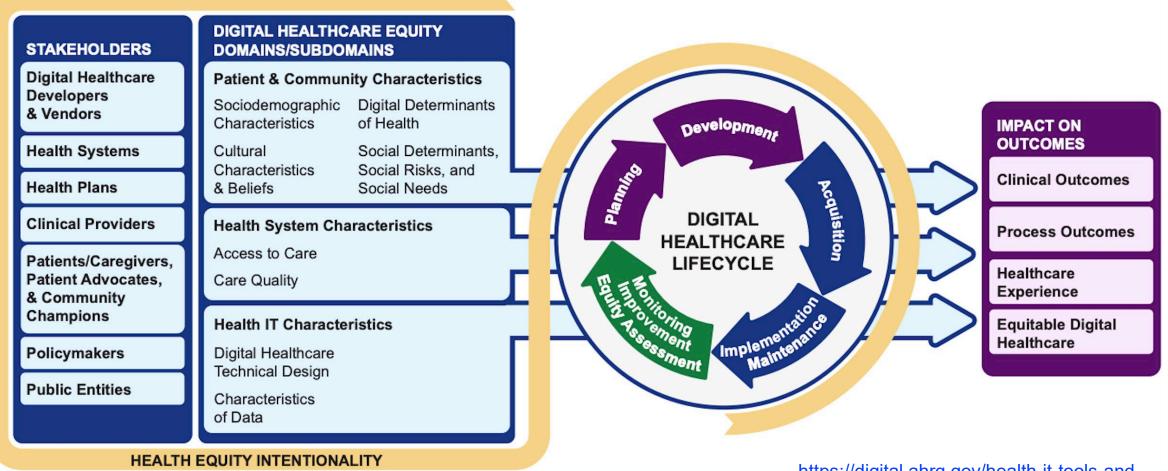


Task Force Worksheet Discussion

Hannah Galvin, Task Force Co-Chair Hung Luu, Task Force Co-Chair



AHRQ Resource: "A Practical Guide for Implementing the Digital Healthcare Equity Framework"





Health Equity by Design Task Force 2024

https://digital.ahrq.gov/health-it-tools-andresources/digital-healthcare-equity/digitalhealthcare-equity-framework-and-guide

From AHRQ Resource: "A Practical Guide for Implementing the Digital Healthcare Equity Framework"

Key Principles

Six key principles guided development of the framework:

- 1. Ensure digital healthcare solutions that involve digital technologies ameliorate, not exacerbate, inequities.
- 2. Represent equity through person-centeredness.
- 3. Encourage inclusivity and participatory creation of digital healthcare solutions.
- 4. Support effective implementation in diverse settings.
- 5. Ensure specific attention to policy/regulatory relevance or impact of the proposed solutions.
- 6. Focus on impact and outcomes for patients, health systems, and communities.

Key Aims

An intentional approach to considering equity throughout the digital healthcare lifecycle aims to promote improvement in

- Clinical outcomes such as mortality, morbidity, and health/quality of life
- Process outcomes such as care continuity, care coordination, and care quality
- Healthcare experiences such as patient satisfaction/engagement and provider satisfaction/engagement

It also seeks to achieve equitable access to and equity in the quality of healthcare solutions involving digital technologies.

https://digital.ahrq.gov/health-it-tools-andresources/digital-healthcare-equity/digitalhealthcare-equity-framework-and-guide



Environmental Scan

Environmental Scan to Determine the Current State of Existing, Related Frameworks and Best Practices for Creating Equitable Healthcare Solutions Involving Digital Technologies

Prepared for:

Agency for Healthcare Research and Quality 5600 Fishers Lane Rockville, MD 20857 www.ahrq.gov

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Public Comment

Seth Pazinski, Designated Federal Officer, ASTP



Public Comment

To make a comment please Use the Hand Raise Function

If you are on the phone only, press "*9" to raise your hand

(Once called upon, press **"*6"** to mute/unmute your line)

All public comments will be limited to three minutes

You may also email your public comment to <u>onc-hitac@accelsolutionsllc.com</u>

Written comments will not be read at this time, but they will be delivered to members of the Task Force and made part of the public record



Next Steps

Hannah Galvin, Task Force Co-Chair Hung Luu, Task Force Co-Chair





Meeting Adjourned