Collecting Race, Ethnicity and Language Data

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Outline

- Case Study
- Importance of self-report data
- Some challenges, lessons learned and resources
- How can you use the data?



Office of Management & Budget (OMB) Categories

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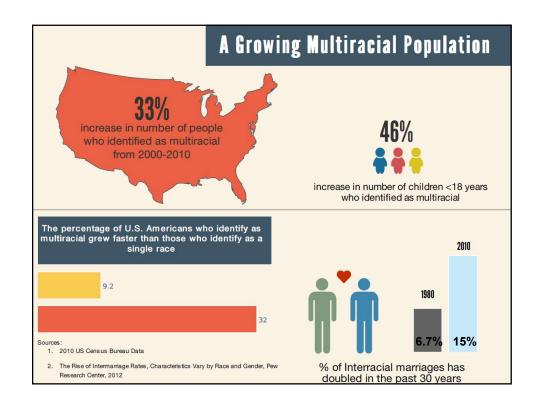
- ☐ American Indian or Alaska Native
- □ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- White

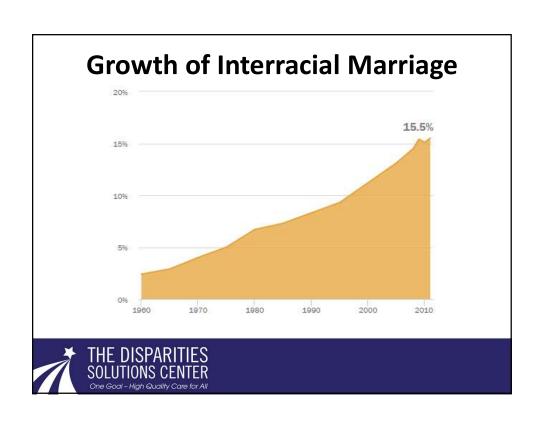
• Ethnicity:

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

*OMB is seeking public comments and changes to this 1997 Federal standard

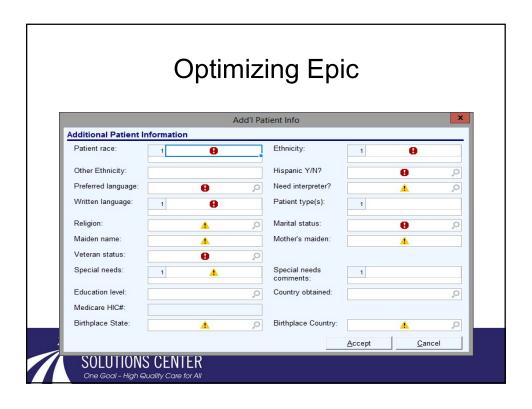


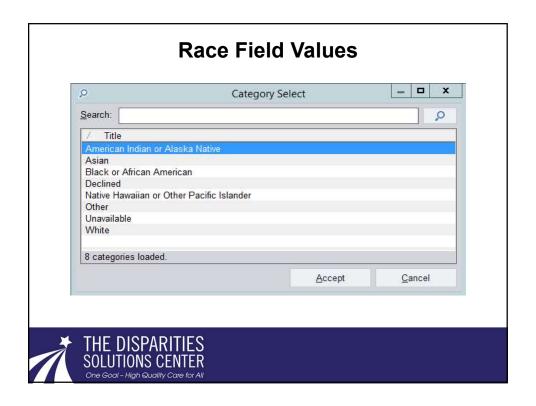


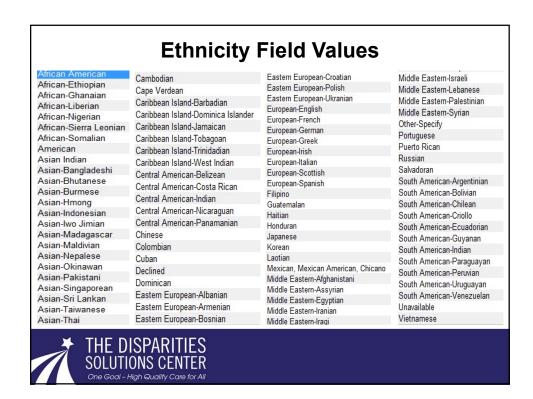


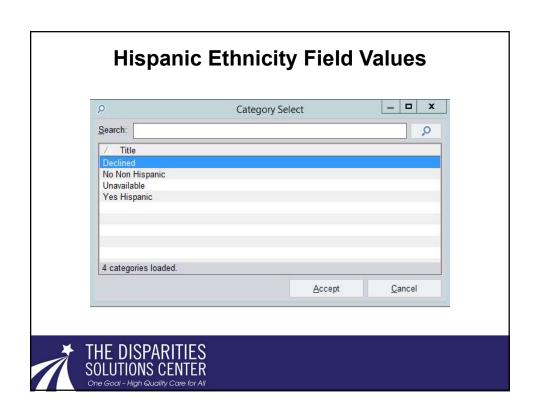










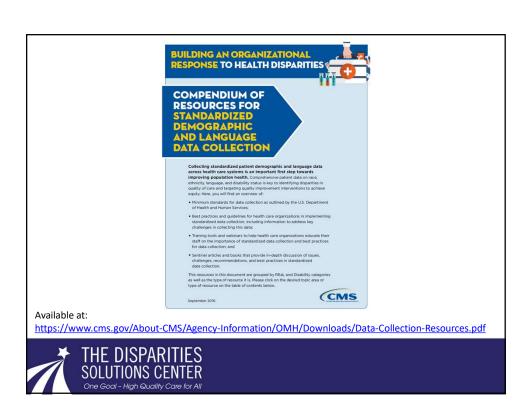


Improving Data Collection

- Training and scripting for central and on-site Registration staff
- Survey to assess
 Accuracy of REaL data &
 Mitigation

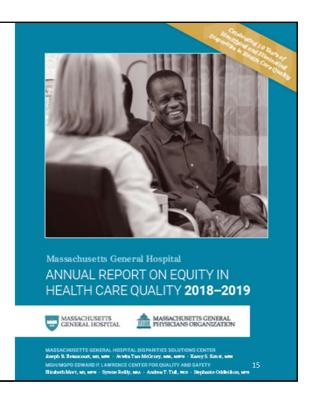
"Next I will ask you some more personal questions. We use this information to make sure all of our patients receive the best care possible, regardless of their personal background. The information is kept confidential and is used to develop programs to improve care for our diverse patients."



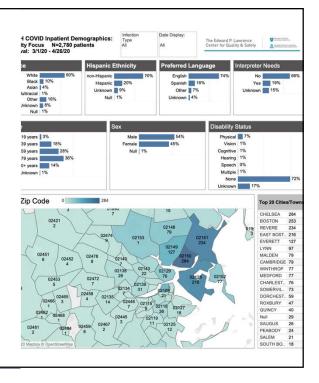


10 Years of AREHQ at Mass General

- Stratifying quality metrics by race, ethnicity, language, etc. to highlight and uncover disparities in care
- Partnering with clinical colleagues to design interventions to alleviate disparities
- Listening to patients and learning from their shared experiences
- Monitoring post-intervention to ensure effectiveness
- Sharing these findings with the Mass General community and the public



You Need Racial, Ethnic and Language Data to Determine Where to Focus Your Mitigation Efforts



Thank You

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