

MD TopLine

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Project Title

Subspecialty Practice Equity Metrics

Project Summary

NewYork-Presbyterian Hospital, Columbia and Weill Cornell are committed to equitable access to care across all subspecialty practices. This project aims to create Epic-based dashboards of selected equity metrics for the Ambulatory Care Network and Faculty Practice clinical settings across the three institutions. These dashboards will include both practice-wide and subspecialty-specific metrics, and will help identify possible inequities and promote equitable care on an ongoing basis.

Project Details

Equitable healthcare is fundamental to equitable health outcomes. NewYork-Presbyterian Hospital (NYPH), Columbia, and Weill Cornell are committed to ongoing measurements of equity in the subspecialty setting; this is particularly relevant in the context of Ambulatory Care

Network (ACN) and Faculty Practice redesigns, which offer a unique opportunity to improve upon equitable care.

We join the Dalio Center for Health Justice in the effort to identify subspecialty-specific metrics and to create an automatic, internally-facing dashboard tracking these metrics. This dashboard would allow potential inequities to be identified and support the ongoing development of targeted interventions to address equity issues. Core considerations for metrics are that they are meaningful to providers; mineable in Epic; and mutually agreeable among providers in the same specialties.

Institution-wide measures being considered include access to appointments (including scheduling, virtual care, insurance, and interpreter services), patient experience measures, and employee engagement (bias training and capture of various social determinants of health, race and ethnicity).

Subspecialty-specific metrics are developed in partnership with clinical leads at Columbia and Weill Cornell. We are currently focused on Neurology metrics regarding access to care, such as time from provider order to completion of a specific, frequently ordered test, or time to follow-up in the practice after hospital discharge. In addition, there are ongoing conversations with practices to see if it is feasible to include certain outcomes measures of particular interest.

As we work with provider groups to identify and validate candidate metrics, we collaborate with a team of Dalio Center data specialists to mine the data for these metrics and create a dashboard.