

DEI and Patient Safety



SITUATION: Fulfilling the promise of diversity, equity and inclusion (DEI) in health care demands a consumer-centered approach in which all available options are presented to patients, even when they do not align with the training or personal philosophies of providers. In short, trusting and well-informed patients allow health care providers to deliver higher-quality, safer care.



BACKGROUND: Beyond traditional racial and ethnic disparities in care, today we are seeing growing evidence of disparate care for women, older adults, people with disabilities and other minority groups. This was highlighted in 2003 by the Institute of Medicine (now the National Academy of Medicine) in “Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care.”¹ Not recognizing health care ecosystem bias toward the familiar adds to patient safety risks.



ASSESSMENT: When patients are provided with all of their care options, risks and benefits, they feel more comfortable taking treatment advice. DEI in health care calls on us to recognize negative behaviors and attitudes resulting from cultural disconnects between patients and providers. These lead to misunderstandings, mistrust, and communication errors in providing treatment instruction and health literacy.

RECOMMENDATIONS:

Review and implement the July 2023 Joint Commission National Patient Safety Goal to Improve Health Care Equity.² This goal has six elements of performance—most importantly, to designate an individual(s) to lead activities to improve health care equity. Others focus on assessing health-related social needs and providing information about community resources and support services; becoming more data driven, analyzing outcomes to meet needs equitably; and action planning to mitigate these disparities.

In *NEJM Catalyst*,³ Tejal Gandhi, MD, of Press Ganey Associates outlines four areas that can serve as a framework: 1) culture, leadership and governance, 2) learning systems, 3) workforce safety and 4) patient engagement.

¹ Institute of Medicine. (2003). *Unequal treatment: Confronting racial and ethnic disparities in health care*. The National Academies Press. <https://doi.org/10.17226/12875>

² The Joint Commission. (2022, December 20). National patient safety goal to improve health care equity. *R³ Report: Requirement, Rationale, Reference, 38*. https://www.jointcommission.org/-/media/tjc/documents/standards/r3-reports/r3_npsg-16.pdf

³ Gandhi, T. (2021, May 27). Achieving zero inequity: Lessons learned from patient safety. *NEJM Catalyst*. <https://catalyst.nejm.org/doi/full/10.1056/CAT.21.0078>