Closing Disability Disparities: EHR Data as First Step

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Data Class	Goal	Use	Who Completes
Disability Status	 Identify and address care inequities and improve care outcome Examine role of SDoH on care Identify patients who require healthcare accommodations 	Demographic/ Social	Patient reported
Functional Status	 Care planning Clinical assessments Connecting to medical, social or educational services 	Medical	Patient reported or clinical assessment
Mental Status	 Care planning Clinical assessments Connecting to medical, social or educational services 	Medical	Patient reported or clinical assessment

<u>**1 in 4</u>** Have a Disability</u>



Significant Health and Healthcare Disparities



Disability Data Gaps Limit the COVID-19 Response



EHR data is needed to track COVID-19 infection, vaccination, outcomes, and care/equipment allocation

We can't improve what we don't measure

Data needs:

Quality of health and healthcare

Effects of equity interventions

Provision of disability accommodations

Documenting Disability Status in EHR



Legal requirement

Identified as top research and policy priority

Health systems struggling to implement





ACS and Washington Group Questions

- 1. Are you <u>deaf</u> or do you have serious <u>difficulty</u> <u>hearing</u>?
- 2. Are you <u>blind</u> or do you have <u>difficulty seeing</u>, even when wearing glasses?
- 3. Do you have serious <u>difficulty walking or climbing</u> <u>stairs</u>?
- 4. Do you have <u>difficulty concentrating</u>, <u>remembering</u>, <u>or making decisions</u>?
- 5. Do you have <u>difficulty dressing or bathing</u>?
- 6. Do you have difficulty doing <u>errands alone</u> such as visiting a doctor's office or shopping?
- 7. Using your usual language, do you have <u>difficulty</u> <u>communicating</u> (for example, understanding or being understood)?

Recommended Future Question Categories

- 1. Learning Disability
 - a) Do you have serious <u>difficulty learning</u> how to do things most people your age can learn?
- 2. Mental Health Disability
 - a) Do you have serious difficulty with the following: <u>mood</u>, <u>intense feelings</u>, <u>controlling your behavior</u>, <u>or</u> <u>experiencing delusions or hallucination</u>s?
- 3. Autism/Social Disability

- 4. Health Care Accommodations
- 5. Caregiver

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- 1. Caregiver's disability
- 2. Caregiver regularly attend appointment with patient

No Perfect Disability Questions

Disability is a socially constructed concept

Not everyone will an impairment will identify as having a disability

Language changes over time

<u>Despite challenges, people</u> <u>with disability cannot wait</u> <u>any longer</u>

Reasons for Urgency

- COVID-19 & Public Health Emergencies: lack of disability information negatively impacted access to PPE, vaccination prioritization, critical support persons, and the ability to recover health
- Lack of disability demographic ID means less funding, less understanding, less inclusion, and greater stereotypes
- Health Equity and SDoH discussions happening now
- Lawmakers, policymakers and lawyers need facts and evidence of disparities
- Non-white racial/ethnic and other populations need to know how their disabled members experience discrimination and health/healthcare disparities
- Prepares the way for documenting accommodations and providing higher quality care

Recommended Action Steps

#1

Include Washington Group and ACS disability questions in EHR (demographic)

#2

Ensure a patientreported data collection approach is used

#3

Recognize this is first step. Future efforts should focus on accommodations Support use of disability data to improve clinical care and address healthcare inequities

#4

References

- https://www.cms.gov/files/document/federaldatadisability508.pdf
- Gleason J, Ross W, Fossi A, Blonsky H, Tobias J, Stephens M. (2021) <u>https://catalyst.nejm.org/doi/full/10.1056/CAT.21.0051</u>
- https://www.healthaffairs.org/do/10.1377/hblog20210325.480382/full/
- lezzoni L. Eliminating health and healthcare disparities among the growing population of people with disabilities. *Health Affairs*. 2011 30(10)
- Varadaraj V, Deal JA, Campanile J, Reed NS, Swenor BK. National Prevalence of Disability and Disability Types Among Adults in the US, 2019. JAMA Netw Open. 2021;4(10):e2130358.
- The Joint Commission. Advancing effective communication, cultural competence, and patient- and family-centered care: A roadmap for hospitals. Oakbrook Terrace: The Joint Commission; 2010.
- Bartlett G, Blais R, Tamblyn R, Clermont RJ, MacGibbon B. Impact of patient communication problems on the risk of preventable adverse events in acute care settings. CMAJ 2008;178:1555-62.
- <u>https://aspe.hhs.gov/basic-report/hhs-implementation-guidance-data-collection-standards-race-ethnicity-sex-primary-language-and-disability-status</u>
- <u>https://ncd.gov/progressreport/2021/2021-progress-report#:~:text=KEY%20FINDINGS%3A%20NCD%20found%20that,report's%20seven%20areas%20of%20 focus.</u>
- <u>https://www.statnews.com/2020/06/12/dearth-disability-related-covid-19-data-confound-response-efforts/</u>
- Morris MA, Lagu T, Maragh-Bass AC, Liesinger J, Griffin JM. Development of disability status questions to address equity in care. (2017) *Joint Commission Journal for Quality and Safety.* 43(12):642-650.
- Morris MA, Hamer MK, Eberle K, Jensen KM, Wong AA. Implementation of collection of patients' disability status by centralized scheduling. (2021). *Joint Commission Journal for Quality and Safety.* 47(10):627-636.
- Morris MA, Kho A. Silence in the EHR: Infrequent documentation of aphonia in the electronic health record. (2014) *BMC: Health Services Research.* 14:425.
- Morris MA, Hasnain-Wynia R. Documenting disability status to detect disparities: Challenges faced by healthcare organizations. (2014) *Journal for Healthcare Quality.* 36(2): 7-13.

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Appendix

Benefits of the Washington Group and ACS Questions

Standard across other public health surveys (e.g., CDC surveys)

Culturally and linguistically tested

Pilot tested in large health system with no patient complaints

Coded in LOINC

Disability	American Community Survey (ACS) Disability Questions	Washington Group (WG) Disability Questions
Hearing	Are you <u>deaf</u> or do you have serious <u>difficulty hearing</u> ?	Do you have <u>difficulty hearing</u> even if using a hearing aid?
Seeing	Are you <u>blind</u> or do you have <u>difficulty seeing</u> , even when wearing glasses?	Do you have <u>difficulty seeing</u> , even if wearing glasses?
Mobility	Do you have serious <u>difficulty</u> walking or climbing stairs?	Do you have <u>difficulty walking or</u> <u>climbing stairs</u> ?
Cognitive	Do you have <u>difficulty</u> <u>concentrating, remembering, or</u> <u>making decisions</u> ?	Do you have <u>difficulty remembering,</u> or concentrating?
Self-Care	Do you have <u>difficulty dressing or</u> <u>bathing</u> ?	Do you have <u>difficulty with self-care</u> such as washing or dressing?
Independent Living	Do you have difficulty doing <u>errands alone</u> such as visiting a doctor's office or shopping?	N/A
Communication	N/A	Using your usual language, do you have <u>difficulty communicating</u> , for example, understanding or being understood?

Disability	Survey Source	Hybrid Approach - Oregon System <u>https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivisio</u> <u>n=4206</u>
Hearing	ACS	Are you deaf or do you have serious difficulty hearing?
Seeing	ACS	Are you <u>blind</u> or do you have <u>difficulty seeing</u> , even when wearing glasses?
Mobility	ACS	Do you have serious difficulty walking or climbing stairs?
Cognitive	ACS	Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?"
Self-Care	ACS	Do you have difficulty dressing or bathing?
Independent Living	ACS	Because of a physical, mental, or emotional condition, do you have difficulty doing <u>errands alone</u> such as visiting a doctor's office or shopping?
Communicatio n	WG	Using your usual language, do you have serious <u>difficulty</u> <u>communicating</u> , (for example understanding or being understood by others)?
Learning	Additional domain	Do you have serious <u>difficulty learning</u> how to do things most people your age can learn?
Psychological	Additional domain	Do you have serious difficulty with the following: <u>mood,</u> intense feelings, controlling your behavior, or experiencing <u>delusions or hallucination</u> s?

88% of ALL patients believe collection of disability status is important

1,894 patients asked disability questions during registration

> ZERO complaints

Disability status is <u>rarely</u> collected or documented

EHR

Patient experience surveys

Big Data (e.g., Claims data)

Patients' disability status rarely collected

Seldom captures disability

~70% miss disability diagnosis





ICD-10 XXX.XX



Opportunities

We know which questions to ask

Patients are okay disclosing disability status

We can integrate collection with other demographic characteristics