

Taking Action to Raise the Bar

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# Healthcare Practitioners

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Supported by the **Robert Wood Johnson Foundation**, *Raising the Bar* provides an actionable framework for the entire healthcare sector to embed equity and excellence throughout its work. In this first part of the project the **National Alliance to impact the Social Determinants of Health** (NASDOH) convened extensive discussions with providers, hospitals, payers, and community leaders to develop foundational principles, essential roles, and concrete actions for the sector to help achieve optimal health for all. A second part, led by the National Partnership for Women & Families, is exploring more detailed guidance for maternal health.

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## Practitioners are critical to the *Raising the Bar* mission

Every type of healthcare stakeholder has a role to play in raising the bar—in their own organization and in support of others. This begins with an individual commitment to a mission of improving health and well-being, and to institutionalizing health equity as part of their organizational strategy. While coordinated commitments from payers and large healthcare organizations are essential to realizing the transformative change championed by *Raising the Bar*, practitioners—whether practicing individually, in small or large group practices, or employed in larger health systems—impact how healthcare is delivered every day. Practitioners can embrace the *Raising the Bar* framework to deliver high quality, accessible, comprehensive, and integrated person-centered care, and to better serve individuals and their communities.

## Practitioners have unique roles and responsibilities

Individual practitioners can help accelerate the transformation of healthcare in several ways. Depending on their role within an organization, important focus areas for practitioners include:

### 1) **Addressing equity and excellence in individual interactions with patients.**

*Raising the Bar's* actions 1-3 focus on the experience of patients, and each practitioner plays an important role in building trust and ensuring that patients are treated with dignity and respect. This involves listening, engagement with families and caregivers, attention to screening for non-medical needs that affect care and well-being and facilitating planning that goes beyond an immediate encounter to build a holistic care plan that meets the needs and priorities of individuals.

The following highlights draw from additional examples identified during the development of the *Raising the Bar* Principles and are intended to illustrate the practices that align with the actions included in *Raising the Bar*.

- Provide or connect individuals to essential healthcare services to meet their unique needs; for example, ensure that LGBTQ+ individuals, individuals with disabilities, people of color, and other people that have unique care needs can receive competent and respectful care.
- Provide any clinical materials—including signage, educational pamphlets and follow up care instructions—in multiple languages which align to the needs of patients and caregivers in your region and patient panel.
- Seek patient feedback on their care experience; review and develop interventions to address any identified issues. For example, use comment boxes in the lobby, and assign a staff member to regularly review, catalog, and respond to feedback.
- Ensure appointments are used to engage in a dialogue about their health needs and have adequate time to answer patient questions.
- Use shared, decision-making protocols to co-create a care plan that is responsive to and driven by patients personal and cultural needs and preferences.
- Use standardized tools to screen for mental, behavioral, and social needs, and develop a care plan which encompasses the whole person.

- Work in partnership with caregivers to ensure care plans can be implemented effectively. For example, understand caregiver and patient constraints and design a plan around them, and take the time to ensure caregivers and patients understand and agree with the care plan.
- Seek out training in providing trauma informed and culturally congruent care.
- Use continuing medical education opportunities to keep abreast of advancements in medicine, particularly as it relates to equitable and unbiased care.

## 2) Transforming the business model of practices they lead.

Achieving equity and excellence in healthcare requires transformation of organizations and systems. Health professionals and other practitioners often manage or help govern group practices, clinics, or other organizations, giving them an opportunity to commit their organizations to *Raising the Bar's* principles and actions.

- Accepting Medicaid and other forms of publicly funded payment systems and participating in payment models that facilitate *Raising the Bar* principles.
- Understanding and meeting the preferences and needs of patients regarding access, hours of operation, ease of appointments, and other factors.
- Ensuring that screening is conducted for language preference when appointments are made, and have timely, high-quality interpreter services available during the appointment.
- Ensuring that caregivers and families can accompany individuals to appointments when they need or ensure individuals have needed privacy to discuss their individual preferences and needs without familial or caregiver influence.
- Building connections to social service providers that enable referrals and follow-up.
- Building a diverse workforce that reflects the communities served, including community health workers and others into care teams to ensure holistic care for individuals.
- Supporting the workforce with pay and benefits that allow employees to be healthy and thrive.
- Assessing procurement and spending patterns to identify ways to build equity in the communities served.

The following highlights draw from additional examples identified during the development of the *Raising the Bar* Principles, Roles, and Actions and are intended to illustrate the practices that align with the actions included in *Raising the Bar*.

- Set affordable prices, including sliding scale pricing, and commit to not use predatory collections practices.
- Adjust hours of operation and increase availability of appointments to accommodate diverse work schedules and life experiences—for example, offer more appointments earlier in the morning, later in the evening, or on weekends.
- Make physical accommodations to ensure that all healthcare settings are accessible—including using inclusive medical equipment—to provide care to people with disabilities.
- When appropriate, offer telehealth services.
- Create an environment that is clean, safe, and private for individuals and their families when they are receiving care.
- Consider design and physical infrastructure needs—for example, paint color, furniture, gowns, and check in areas that can set individuals and their patients at ease.
- Hire diverse and representative providers and administrative staff and ensure that all are trained and held accountable for providing appropriate, respectful, and culturally congruent service to individuals and their families in every interaction. Interactions should be free of microaggressions and implicit or explicit bias, and all patients should feel that they were treated with respect in your office.

- Invest in technology that facilitates patient scheduling, access to treatment information, and information sharing between service providers. For example, use interoperable electronic health records (EHRs) which can easily transmit information to other providers, health information exchanges, social care provider platforms, or other data systems in your community which would facilitate coordinated care between providers. Use well developed patient portals to ensure that patients can easily access their medical records, including clinical notes. Use Fast Healthcare Interoperability Resources (FHIR) application programming interfaces to ensure patients can connect to and download their own data when they wish and for whatever purposes they deem necessary; provide education to patients on privacy and security concerns when appropriate.
- Monitor data, including claims or survey data and performance measures, and stratify performance by demographic data to identify and address disparities in care or outcomes. Where needed, develop protocols or interventions to address disparities by race, ethnicity, and other demographic factors.
- Seek employee input on organizational initiatives—this includes professional and support staff like medical assistants and technicians, nurses, physician assistants, administrative assistants and office staff, environmental services, who bring valuable insights from working directly with patients. Input can be collected through forums, or facilitated meetings, suggestion boxes, surveys, and more.
- Participate in community-wide health initiatives, surveillance, and policy development and advocacy.

### 3) Engaging as an advocate within larger organizations in which they practice.

Individual practitioners often serve within hospitals or broader health systems and can play a critical role in motivating the transformation of those institutions. Practitioners can be internal advocates for adopting *Raising the Bar* Principles and seek opportunities to engage with decision-makers, administrators, and governance structures to help shape organizational culture and strategy.

Practitioners can also use their standing in the community to be a positive voice for equity and for health systems transformation. Practitioners can identify opportunities to speak or write about the importance of health equity, inclusion, and antiracism, using their professional standing to “change hearts” in the broader community. They can participate in community initiatives seeking to improve health equity and help build connections between institutions and community-based organizations.

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- Meet regularly with representative community leaders in a location of their choosing to understand their work, and how you can partner with or support existing efforts that relate to health outcomes.
- Participate in payment models from both public and private payers, that focus on population health and can improve health equity.
- Educate the public more broadly on health inequities and their root causes, and social determinants of health and their health impacts.
- Whether at the city, state, or federal level, advocate for health-promoting public policy and public and private investment in health-promoting infrastructure. This could include coverage and payment policy that increase access, quality and equity in healthcare, and community safety and healthfulness, like safe and affordable housing, food access, school quality, neighborhood, built environment, workforce protections and more.

# Resources for Practitioners That Want to Raise the Bar

*Raising the Bar* acknowledges that broad-based reform of payment systems, including public policies that advance *Raising the Bar's* principles, will make transformation easier—but important progress can be made now. These transformational steps are achievable—and are being pursued by practitioners delivering care now across the country. See examples of those raising the bar in the [Framework in Practice: Bright Spots](#) or by reviewing the chapters on the four *Raising the Bar* Roles: [Provider](#), [Employer](#), [Partner](#), and [Advocate](#).

The following are a set of curated resources particularly relevant for practitioners looking for a place to start, or to accelerate ongoing work aligning with the *Raising the Bar* Actions. To see the full set of *Raising the Bar* resources, visit the [Resources](#) chapter.

## Aligned Resources

### [Assessing Meaningful Community Engagement: A Conceptual Model to Advance Health Equity through Transformed Systems for Health](#)

National Academy of Medicine Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies (2022)

- This resource offers a conceptual model that illustrates the dynamic relationship between community engagement and improved health and healthcare outcomes. It can be used to assess meaningful community engagement.

### [Better Care Playbook](#)

Arnold Ventures, The Commonwealth Fund, The John A. Hartford Foundation, The Milbank Memorial Fund, Peterson Center on Healthcare, The Robert Wood Johnson Foundation, The SCAN Foundation (n.d.)

- The Better Care Playbook is a resource on evidence-based practices to improve care for people with complex health and social needs. The Playbook provides a compendium of resources by topic.

### [Pathways to Population Health – An Invitation to Healthcare Change Agents](#)

Institute for Health Improvement, 100 Million Healthier Lives (2020)

- This resource supports healthcare professionals in identifying opportunities for their organizations to make practical, meaningful, and sustainable advancements in improving the health and well-being of the patients and communities they serve. The guide is composed of three sections: Foundational Concepts and Creating a Common Language, Portfolios of Population Health, and Levers for Implementation.

### [Steward's Pathway](#)

ReThink Health (n.d.)

- ReThink Health hypothesizes that active, interdependent stewardship by people and organizations in a region is the most promising path to equitable health and well-being. Stewards are people and organizations who take responsibility for working with others to create the conditions that all people need to thrive, beginning with those who are struggling and suffering. This set of Steward's resources helps organizations become and sustain active roles as Stewards in their region. More information about hospital Stewards can be found [here](#).

## PROVIDER ROLE Resources

### [Better Care Playbook: Mental Health and Substance Use](#)

Better Care Playbook (n.d.)

- The Better Care Playbook page on Mental Health & Substance Use is a compendium of resources focused on care models that integrate behavioral health into a whole-person approach, as well as policy initiatives to advance these models.

### [Better Communication, Better Care A Provider Toolkit for Serving Diverse Populations](#)

LA Care Health Plan (2019)

- This toolkit provides recommendations and resources to help providers and care teams offer culturally and linguistically competent care.

### [The Building Blocks of High Performing Primary Care](#)

University of California San Francisco Center for Excellence in Primary Care (2012)

- This resource outlines the Building Blocks identified by UCSF through site visits to high-performing primary care practices and clinics in 2010-2011 and provides tools to discuss the Building Blocks within a medical practice.

### [Center of Excellence for Integrated Health Solutions](#)

National Council for Mental Wellbeing (n.d.)

- This resource provides evidence-based resources, tools, and support for organizations working to integrate primary and behavioral care. The Center has a team of experts in organizational readiness, integrated care models, workforce and clinical practice, health and wellness, and financing and sustainability that partner with organizations to create customized approaches to advance integrated care and health outcomes. This program is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA).

### [Cultural Competence and Patient Safety](#)

Agency for Health Research and Quality (AHRQ) Patient Safety Network (2019)

- This perspective piece explains the links between cultural competence and patient safety and provides guidance for how to improve cultural competence.

### [The Cycle to Respectful Care: A Qualitative Approach to the Creation of an Actionable Framework to Address Maternal Outcome Disparities](#)

National Birth Equity Collaborative (2021)

- This resource utilizes focus groups and interviews from communities in the United States identified as having higher density of Black births to create a framework for training on anti-racist maternity care.

### [Financial Barriers to Healthcare Access](#)

American Medical Association Code of Medical Ethics (n.d.)

- This resource outlines physicians' obligations to address financial barriers to healthcare access. It encourages physicians, health facilities, health insurers, professional medical societies, and public policymakers to work together to ensure sufficient access to appropriate healthcare for all people.

### [Getting grounded: Building a Foundation for Health Equity and Racial Justice Work in Healthcare Teams](#)

New England Journal of Medicine Catalyst, Innovations in Care Delivery (2022)

- This article provides concrete recommendations for how to prepare healthcare teams to begin addressing health inequities in their relationships, processes, and outcomes based on a learning and action network that the Institute for Healthcare Improvement (IHI) facilitated from 2017-2019.



### **Guide to Implementation Social Risk Screening and Referral-Making**

Kaiser Permanente Center for Health Research, OCHIN (2022)

- This resource provides practical guidance to help practices implement social risk screening and referrals. The guide uses a five-step roadmap for implementing or improving social risk screening and related activities within a clinic or practice and provides tools, materials, and resources to support each step.

### **Implementation Guide: Patient Centered Interactions**

Safety Net Medical Home Initiative: Qualis Health, The Commonwealth Fund, GroupHealth (2013)

- This resource provides guidance on addressing measurement of patient satisfaction and experience and describes other mechanisms to gain and use patient and family feedback. The guide provides a format for the structure and flow of patient visits to optimize positive patient health outcomes, lower costs, and enhance experience.

### **Implementing High-Quality Primary Care: Rebuilding the Foundation of Healthcare**

National Academies of Sciences, Engineering, and Medicine (2021)

- This implementation plan includes five objectives to make high-quality primary care available for everyone in the United States. The implementation strategy includes an implementation framework, an accountability framework, and a public policy framework.

### **Patient Centered Medical Home Assessment**

Safety Net Medical Home Initiative: Qualis Health, The Commonwealth Fund, GroupHealth (2014)

- This resource is designed to help healthcare organization sites understand their current level of “medical homeness” and identify opportunities for improvement. This assessment can also help sites track progress toward practice transformation when it is completed at regular intervals.

## **EMPLOYER ROLE Resources**

### **Amplifying Black Voices: What Healthcare Organizations Can Do to Advance Diversity, Equity, and Inclusion in the Workforce**

Deloitte (2021)

- This resource summarizes Deloitte’s recent research showing that improving DEI in the workforce can support quality of care and financial performance goals. The research found that addressing racism and other biases can give organizations a competitive advantage, helping them attract the best talent and elevate their brand and reputation.

### **Paid Leave: Workplace Policy**

Paid Leave for the United States (n.d.)

- The resource offers an FAQ on paid leave, a toolkit and template proposal to achieve a quality paid family leave policy, cost benefit analysis resources, and paid family and medical leave trends.

## **PARTNER ROLE Resources**

### **Community Health Assessment Toolkit**

AHA Community Health Improvement (2017)

- This toolkit offers a nine-step pathway for conducting a community health assessment and developing implementation strategies.

### [Engaging People with Lived Experience Toolkit](#)

Community Commons (2019)

- This toolkit was developed to help conveners effectively engage people with lived experience of a core issue and/or inequity to create lasting community transformation.

### [Inclusion: The Starting Point for Effective Teams](#)

Patient-Centered Outcomes Research Institute (2021)

- This resource outlines strategies for effective stakeholder engagement, especially regarding trust and inclusivity.

## **ADVOCATE ROLE Resources**

### [Advancing Health Equity through APMs](#)

Health Care Payment Learning & Action Network, Health Equity Advisory Team (2021)

- This resource provides stakeholders with actionable guidance on how they can leverage Alternative Payment Models (APMs) to advance health equity in ways that are both aligned and tailored to meet their communities' needs to ensure that health equity and person-centeredness are prioritized throughout the design, implementation, and evaluation processes.





**Raising  
the Bar**  
Healthcare's Transforming Role

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