

# HAP Racial Health Equity Learning Action Network (RHELAN)

2024  
SUMMARY



---

## Introduction

In December 2021, the HAP Board approved a pathway for HAP to support Pennsylvania hospitals in advancing health equity collaboratively. Guided by a steering committee comprised of hospital-affiliated equity and DEI leaders from across the commonwealth, the Board directed HAP staff to establish a learning and action network (a dynamic collaborative like those previously established to support readmission and harm reduction as well as improvements in substance use disorder treatment) to meet hospitals where they are on their racial health equity journey and support hospitals in working together to eradicate racial inequities in health care services. Building on aligned commitment to ensuring that every Pennsylvanian receives high-quality, equitable health care, HAP established the Racial Health Equity Learning Action Network (RHELAN) to convene Pennsylvania hospitals and health systems to work collaboratively to identify and confront systemic inequality and structural racism in health care.

The following report summarizes RHELAN activities during 2024, documents HAP's support of the Pennsylvania hospital community's ongoing efforts to identify and address racial inequities in health care and discusses next steps in leveraging learning obtained and infrastructure built this year to address persistent maternal health inequities.

---

# RHELAN—Culturally Appropriate Care and Data Collection and Use Cohorts



In October 2023, HAP Health Equity Action Day supported 125 participants from 57 hospitals and health systems in applying human-centered design principles to develop actionable plans to promote equitable care delivery. Over the course of the full-day, in-person session, Pennsylvania hospitals, with support from Do Tank and the HAP staff, identified internal equity barriers (or further clarified barriers already identified via the AHA Health Equity Transformation Assessment), articulated specific and measurable initiatives to address key barriers, and shared their projects and approaches with hospital community peers.

Building on the momentum gained during the Health Equity Action Day, in 2024 HAP, with the support of Do Tank, facilitated two cohorts to help hospitals advance in the two focus areas most identified during the October Health Equity Action Day—Culturally Appropriate Patient Care and Data Collection and Use to Drive Change. The cohorts, designed to move hospitals into strategic action, provided hospital equity champions with the opportunity to strengthen the strategic planning and change management skills necessary to drive change within their organizations. The cohorts fostered peer-to-peer networking and problem solving and promoted collective accountability.

The cohort experience consisted of the following:

- Five **virtual human-centered design coaching sessions** spread over the course of five months in which participating team members used virtual design tools to define project aims and build project plans. Participants were provided with virtual access to their own mural board (which housed digital canvasses) and were able to access those of other participating teams to foster peer-to-peer sharing and knowledge transfer.
- **Monthly Office Hours** wherein the HAP and Do Tank teams were available to assist with project design work outside the cohort sessions, answer questions, and guide action. During that time, hospitals shared plans, requested peer-to-peer feedback, and worked together in an atmosphere of networking and collaboration. These facilitated conversations helped to identify real strategies to address systematic disparities in health care and further participating hospitals' success.
- **Coaching Calls** where hospitals could request individual one-to-one coaching, ask questions, report progress, discuss challenges with the HAP and Do Tank teams and brainstorm strategies.

HAP's **second Health Equity Action Day** on September 30, 2024, served as the capstone for the cohorts and the kickoff of the HAP Patient, Safety, Equity, and Quality Symposium. The full-day, in-person symposium focused on the imperative connection between health equity, patient harm, and patient safety. The event featured plenary sessions covering the following topics:

- Hands-on training on the power of storytelling and how to effectively communicate your organization's equity journey with internal and external stakeholders
- Making the business case for health equity with internal leadership
- Accreditation and certification updates for equity and hot topic standards from The Joint Commission

Additionally, the day included "Ignite Talks," 15-minute technical presentations, from five hospital cohort teams who presented on their organization's equity initiatives. Each hospital team discussed their project goals, interventions, results to date, operational considerations, and lessons learned through cohort participation. Teams from Good Shepherd Rehabilitation Hospital, Meadville Medical Center, Main Line Health, Independence Health, and Penn State Health recapped their work within their health systems to:

- Standardize culturally appropriate care across the continuum
- Integrate culturally and linguistically appropriate services into care delivery for hypertension patients
- Use culturally appropriate language system-wide
- Reimagine data systems and dashboards to support equity
- Connect vulnerable patients to primary care
- Deploy benchmarking models and research to support equity across key organizational pillars

---

## Connecting Pennsylvania Hospitals to Advance Health Equity—RHELAN Engagement by the Numbers

HAP administered an end of the year evaluation to assess participant experience of the cohorts. Seventy-eight percent of respondent teams rated their satisfaction with the cohort experience as high or extremely high. Participants valued the dedicated (protected) work time, design tools, and opportunity to engage hospital peers from across the commonwealth. Thirty-three percent of teams reported that RHELAN cohort participation helped to advance efforts or reinforce current strategies to advance equity; 8 percent of teams implemented changes based on their cohort participation. The remaining respondents indicated that they were in the planning stages of change. Respondents noted that HAP could continue to support their organization's health equity efforts and initiatives by creating space for ongoing collaborations across hospital teams and hosting co-learning sessions to hear how other health systems have implemented regulatory requirements like Health-Related Social Needs screening, and REAL/SOGI data collection and use, particularly those without regulatory guidelines for implementation.

**63** participants joined the webinar held during March 2024, in which hospitals were exposed to the use of electronic murals in human-centered design and reflected on adult learning principles, applied learning, and train-the-trainer concepts

**52** participants from 17 hospitals joined the Culturally Appropriate Patient Care cohort

**54** participants from 17 hospitals joined the Collection and Use of Data to Drive Action cohort

**117** hospital staff attended the second annual Health Equity Action Day

---

## Next Steps 2025—Addressing Disparities in Maternal Health Outcomes

HAP's commitment to racially equitable health care extends beyond 2024. HAP and the Pennsylvania hospital community are committed to the long-term work of eradicating racial inequities in health care. We continue to believe that this goal is most achievable through collaboration across the hospital community.

Ongoing collaboration will focus on the intersection of maternal health outcomes and health equity and seek to assist Pennsylvania hospitals in reducing racial and ethnic disparities in maternal morbidity and mortality rates. HAP's Maternal Health Task Force recommended HAP's ongoing support of hospital's transformation in the same foundation areas targeted in the 2024 RHELAN cohorts. The task force report outlines opportunities for HAP including:

- Supporting hospitals in including patients and families in co-designing maternal care services and improvement initiatives. Including individuals with lived experience is an essential strategy to defining and delivering culturally appropriate patient care.
- Supporting hospitals in developing strategies to collect, assess, and deploy REaL data to drive maternal health equity improvement. Leveraging data and enhancing surveillance of outcomes improves maternal health equity by identifying gaps in care among populations.

