

Introduction

Vanderbilt University Medical Center (VUMC) is a multi-hospital health system based in Middle. The Office of Health Equity (OHE) at VUMC is the institutional home for catalyzing and enabling initiatives to prevent and address inequities in health among marginalized, minoritized, and socially disadvantaged populations.

Middle Tennessee is home to a diversifying population, as evidenced by VUMC's patient data and other sources. However, legacy race and ethnic reporting options do not appropriately capture all populations. For example, Nashville is home to the largest Kurdish population in the United States, but it is challenging to understand this population linguistically and ethnically given current data collection approaches. OHE and other departments at VUMC sought to remedy these gaps in internal data collection. As of December 2022, the approach to collecting patient race and ethnicity data in VUMC's electronic medical record was updated.

Detailed Ethnicity/Ethnic Background (Select all that apply):

- | | | | |
|---|-------------------------------------|---|---|
| <input type="checkbox"/> Unable to provide | <input type="checkbox"/> Ecuadorian | <input type="checkbox"/> Laotian | <input type="checkbox"/> Quapaw |
| <input type="checkbox"/> None of these | <input type="checkbox"/> Egyptian | <input type="checkbox"/> Lebanese | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Prefer not to answer | <input type="checkbox"/> English | <input type="checkbox"/> Luba | <input type="checkbox"/> Salvadoran |
| <input type="checkbox"/> Afghani | <input type="checkbox"/> Ethiopian | <input type="checkbox"/> Marshallese | <input type="checkbox"/> Samoan |
| <input type="checkbox"/> African American | <input type="checkbox"/> Fijian | <input type="checkbox"/> Mestizo | <input type="checkbox"/> Saudi Arabian |
| <input type="checkbox"/> Afro-Caribbean | <input type="checkbox"/> Filipino/a | <input type="checkbox"/> Mexican | <input type="checkbox"/> Shawnee |
| <input type="checkbox"/> Argentinean | <input type="checkbox"/> French | <input type="checkbox"/> Mongol | <input type="checkbox"/> Somali |
| <input type="checkbox"/> Armenian | <input type="checkbox"/> German | <input type="checkbox"/> Muscogee | <input type="checkbox"/> Spaniard |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Guatemalan | <input type="checkbox"/> Natchez | <input type="checkbox"/> Spanish American |
| <input type="checkbox"/> Australian | <input type="checkbox"/> Guamanian | <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Sudanese |
| <input type="checkbox"/> Bamar | <input type="checkbox"/> Haitian | <input type="checkbox"/> Nepali | <input type="checkbox"/> Taiwanese |
| <input type="checkbox"/> Black | <input type="checkbox"/> Hmong | <input type="checkbox"/> Nicaraguan | <input type="checkbox"/> Tahiti |
| <input type="checkbox"/> Brazilian | <input type="checkbox"/> Honduran | <input type="checkbox"/> Nigerian | <input type="checkbox"/> Tongan |
| <input type="checkbox"/> Catawba | <input type="checkbox"/> Indian | <input type="checkbox"/> Other Asian | <input type="checkbox"/> Turkic |
| <input type="checkbox"/> Chamorro | <input type="checkbox"/> Iraqi | <input type="checkbox"/> Other Pacific Islander | <input type="checkbox"/> Ukrainian |
| <input type="checkbox"/> Cherokee | <input type="checkbox"/> Irish | <input type="checkbox"/> Pakistani | <input type="checkbox"/> Venezuelan |
| <input type="checkbox"/> Chiaha | <input type="checkbox"/> Italian | <input type="checkbox"/> Palestinian | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Chickasaw | <input type="checkbox"/> Jamaican | <input type="checkbox"/> Panamanian | <input type="checkbox"/> White American |
| <input type="checkbox"/> Chilean | <input type="checkbox"/> Japanese | <input type="checkbox"/> Paraguayan | <input type="checkbox"/> Yuchi |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Kenyan | <input type="checkbox"/> Persian | |
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Kosati | <input type="checkbox"/> Peruvian | |
| <input type="checkbox"/> Costa Rican | <input type="checkbox"/> Kongo | <input type="checkbox"/> Polish | |
| <input type="checkbox"/> Cuban | <input type="checkbox"/> Korean | <input type="checkbox"/> Portuguese | |
| <input type="checkbox"/> Dominican | <input type="checkbox"/> Kurdish | <input type="checkbox"/> Puerto Rican | |

The new approach includes:

- The addition of Middle Eastern or North African (MENA) as a race/ethnicity option
- The addition on Hispanic/Latino as an option under race
- The addition of a detailed ethnicity category comprised of 91 ethnicities identified based on VUMC's geographic service area

Internal Communication Strategies

To give registration and scheduling teams throughout Vanderbilt Health a high-level overview of health inequities, race and ethnicity as social constructs, and the importance of patients self-reporting their race and ethnicity, the following materials were developed:

- Scripting for conversations with patients
- A learning module
- "We ask because we care" campaign
- VUMC Newsletter announcement
- Email communications from leadership and managers
- Presentations with front end personnel

Internal partnerships supporting these efforts include:

- Health IT
- Quality, Safety, and Risk Prevention
- Human Resources- Learning Solutions Team
- Registration staff and managers



At Vanderbilt Health, we want to find ways to collect a patient's race and ethnicity in the different ways that individuals identify and want to share. There are more than 200 ethnicities in the world, and outside the U.S., many countries use ethnicity or ethnic background.

By asking about your race, ethnicity and language, we are better able to give every patient the best care possible.

Respecting every difference, providing the highest quality care.

Update your race, ethnicity and language in the My Health at Vanderbilt portal at anytime.

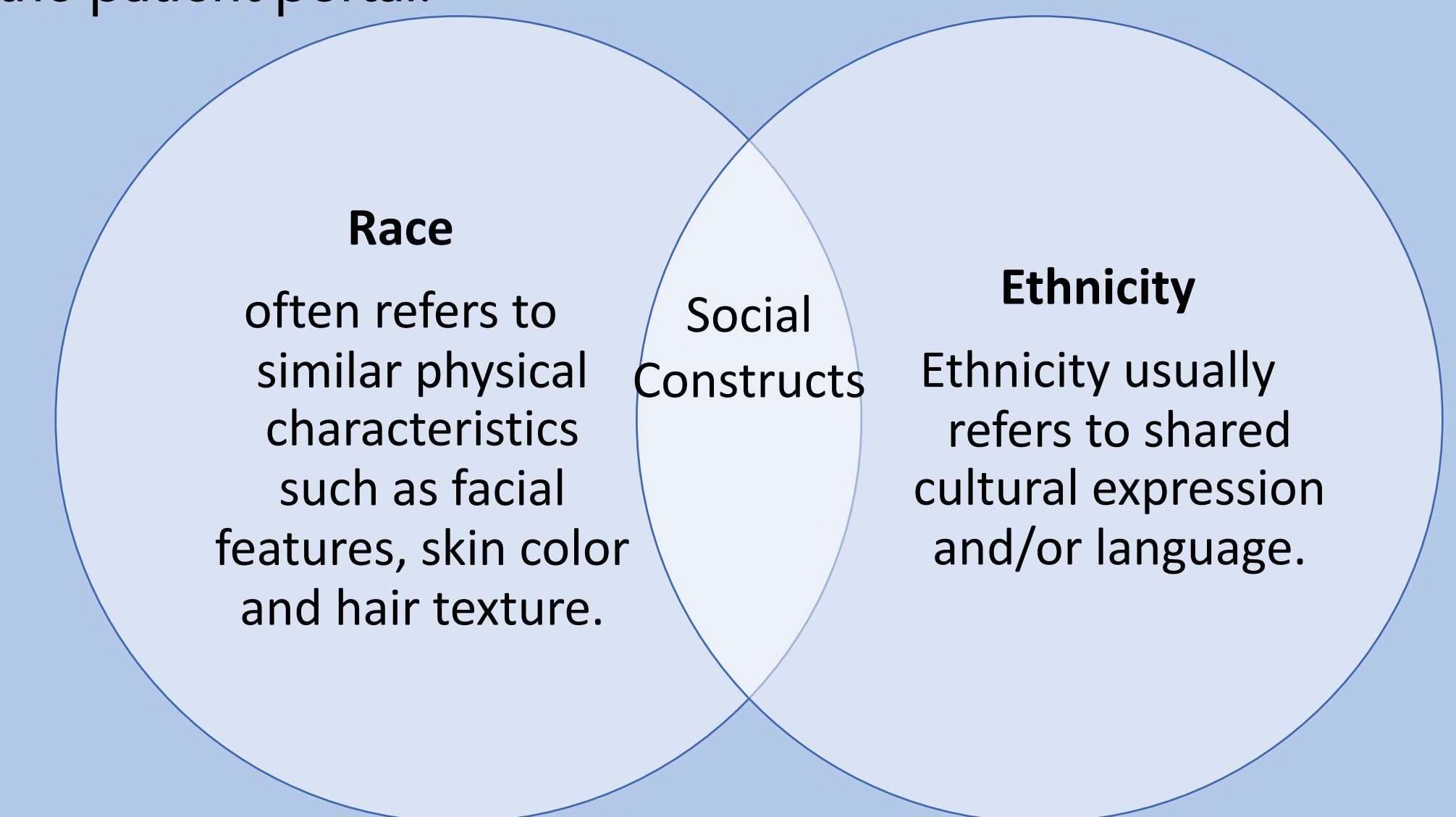
MyHealthatVanderbilt.com/Authentication/Login

VANDERBILT HEALTH

Adapted from "We Ask Because We Care." Copyright 2010, Robert Wood Johnson Foundation. Used with permission from the Robert Wood Johnson Foundation.

Engaging Patients

Vanderbilt Health patients were engaged through pilots in clinics and a survey through a VUMC advisory group to pilot the "We ask because we care" campaign, understand how patients feel about sharing their race, ethnicity, and language and how they prefer to report this information. The "We ask because we care" campaign was adapted from the Robert Wood Johnson Foundation campaign to communicate the new race, ethnicity, and detailed ethnicity field options. The combination of the campaign with messaging sent out to patients in Vanderbilt's patient portal informed patients of the why behind these changes and encouraged them to self-report in the patient portal.



Next Step: One Combined Race and Ethnicity Question

One area that will require additional consideration by policymakers is harmonization with existing regulatory reporting requirements. Voluntary adoption of a one question format by providers has created the need to establish "parallel" methods of presenting the information, one to facilitate regulatory reporting and one for internal reporting.

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