



Health Care Strategy Insights: Health System CSO Approach to Addressing Drivers of Health and Equity

About the author: Josh Lee leads the Health Care Provider Strategy practice at Deloitte Consulting LLP. This editorial represents insights gleaned from discussions Josh held with health system Chief Strategy Officers (CSOs) to discuss how organizations are addressing racial inequity, key challenges in implementing programs to achieve meaningful change, and the degree to which action is a priority for these organizations.

The COVID-19 pandemic has brought into greater prominence the racial inequities that have been ingrained in our culture, organizations, and in health care for centuries. Racism is a public health crisis in America – this is an undeniable truth that CSOs and the organizations they represent are committed to addressing to make strides against racism for the communities that they serve.

Although CSOs agree unanimously that addressing these issues is paramount, they also acknowledge that permanent and lasting change is challenging to achieve. Ultimately, health care organization leaders cite two key barriers that impede the ability to address racism as a driver of health and inequity:

- 1. Systematic racism and its implications:** Institutional racism is built into the fabric of how we do business, including how we deliver care. Racism, not race, continues to disproportionately segregate communities of color, especially Black communities, directly impacting their health and wellbeing. This has been seen first-hand by the disproportionate impact of COVID-19 against Black communities; Black Americans are 3x more likely to be infected and 2x more likely to die from COVID-19.
- 2. Health disparities are exacerbated by a growing divide between public and private health care:** The imbalance in accessing basic rights such as health care and education is a key driver of inequity. For example, concierge care is a powerful revenue tool, but it exacerbates inequality. We live in a time where separate hospital floors are being dedicated for cash payers, which pushes us further toward a 2-tier system, further paving the way for inequities in our health care system.

In addition, CSOs are wrestling with organizational challenges in more fully addressing racism and inequity. One challenge is patient **access to care**. This ranges from physical and technological barriers (one CSO cited lack of roads that prevent access to care) to inadequate health care coverage. Another such challenge is a **lag or discrepancy in available data** to understand **why** outcomes are occurring and **how** to better solve for inequity. CSOs noted that a myriad of non-medical factors can impact the outcome of a person's health and it is critical to better understand these underlying issues specific to their health system before they can holistically address them. For example, infant death rates are 30% higher for Black American vs Caucasian infants in one health system, but there is lack of clarity as to **why** this is the case, and as a result, **how** to address the challenge.

Despite these challenges, CSOs are (and have been) taking action to address diversity, inclusion, and health inequity within their health systems. **Organizations are appointing Chief Diversity and/or Chief Equity Officers, holding employees accountable to maintain a culture of respect, and engaging in candid conversations on racism.** Several stakeholders noted that while relevant programming was established a few years ago with varying levels of consistency, senior leaders are now making this a board-level priority.

Furthermore, CSOs are looking beyond the four walls of their organizations to identify what can be done directly within the community and in conjunction with policymakers. These leaders recognize that although health systems are only a part of the health care ecosystem, they have an opportunity and responsibility to improve not only themselves, but also their greater communities.

As history has proven time and time again, changing a broken system is not easy, but it is imperative to change to drive to a culture of anti-racism. There are significant challenges, but the meaningful actions CSOs and their health systems are taking to improve themselves, their communities, and the greater health care ecosystem are tangible steps toward progress. We have a long road ahead of us, but we are in it together.

Thank you, and please let us know if you have feedback or suggestions. We look forward to hearing from you!

Author contact info:

Josh Lee

Principal

joshlee@deloitte.com

Contributors:

Asif Dhar, Kulleni Gebreyes, Eileen Schreiber, Bill Laughlin, Elizabeth Baca, Michael Schwartz, Paul Atkins, Adam Hewson, Olga Karlinskaya, Karalyn Smith, Marjorie Weiner, Kalie Gorman, Tanuka Raj, Julia Kenney

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