

# THE Value Initiative

## Members in Action: Improve Quality and Patient Outcomes

### Parkland Health & Hospital System – Dallas, Texas *Using SDOH Data to Reduce Breast Cancer*

The AHA's Members in Action series highlights how hospitals and health systems are implementing new value-based strategies to improve health care affordability. This includes work to redesign the delivery system, manage risk and new payment models, improve quality and outcomes, and implement operational solutions.

#### Overview

**Parkland Hospital & Health System uses social determinants of health data to guide prevention and clinical efforts to reduce incidents of breast cancer.**

Using data generated by the Parkland Center for Clinical Innovation (PCCI), an independent collaborator, Parkland identified women at risk for breast cancer who are economically vulnerable and experience challenges accessing care. The initiative is part of AHA's *Hospital Community Cooperative*, and is focused on reducing cancer disparities by addressing health-related social needs.

Through the lens of housing stability, access to transportation, food security, household income and other social determinants, PCCI used data from Parkland's electronic medical records (EMR), a cancer registry, focus group feedback and its community health needs assessments to pinpoint several zip codes in Dallas County with higher number of late breast cancer diagnoses.

PCCI also discovered a large number of incarcerated women for whom Parkland provides health care were overdue for mammograms. These data help guide Parkland's health equity

#### Impact

**Parkland provides information to case managers, nurses and clinicians on which patients may need food pantry vouchers, housing referrals or transportation assistance to supplement clinical and pharmacological interventions.**

Geographically pinpointing where patients with the most need live led Parkland to revamp its community outreach campaigns. For example, it sends its mobile mammography units to neighborhoods and community-based organizations in six zip codes where the impact is likely to have the greatest impact. The current phase of the project is focused on increasing community demand through education, patient reminders, and media, while increasing community access by deploying a mobile unit to expand the number of alternative screening sites in the target ZIP codes. The second intervention focuses on strengthening the breast cancer continuum of care to ensure patients remain in care until clear or treatment is completed. Parkland has embedded the project into their Community Health Needs Assessment Implementation Plan.



outreach efforts with an aim toward increasing early diagnosis, preventing hospitalizations and mitigating avoidable readmissions.

## Lessons Learned

Using comments from women in focus groups helped Parkland drill down on root causes of barriers to care. For example, by delving into the topic of access they learned of patients' challenges applying for coverage, as well as transportation challenges and lost time from work getting to mammography sites at the hours care is available. Through a Community Based Participatory Research process, Parkland learned that there is a higher number of women led households in these zip codes, highlighting the importance to deploying outreach campaigns that are tailored to the unique needs of these communities.

The focus groups also shed light on the value of listening to patients in their own languages versus reading transcripts to identify the most appropriate medical terms to effectively communicate in various languages.

Feedback from focus groups also revealed patients erroneously believed the purpose of mammograms was to confirm a breast cancer diagnosis rather than offer early detection. In addition, Parkland learned which community-based organizations make the best partners to reach targeted populations.

"We learned the value of including the perspective of our patients throughout our decision-making process and partnering with those local organizations that deal on a daily basis with these populations," said Teresita Oaks, director of Parkland's community health programs.

## Future Goals

Parkland aims expanded its outreach efforts to reduce health disparities from two to six targeted zip codes and use PCCI's data-driven analytical foundation with other hospitals and collaborators in the region on conditions beyond breast health, such as pre-term births and postpartum depression. In addition, it is considering dispatching a mammography mobile unit to local correctional facilities to perform screenings.

"We have uncovered the complex realities faced by these communities, and there are so many opportunities to improve our outreach and engagement strategies," said Oaks. "We have raised the bar on how we can really improve our outreach and use data to make decisions in designing interventions to reduce disparities."



## The populations that experience high rates of late breast cancer diagnosis are also experiencing higher rates of COVID-19.

The mobile mammography units continue visiting the target communities, which serves a dual purpose of screening for breast cancer and ensuring that residents stay connected to health care services. Parkland is also building a network of community partners to increase access to mammogram screenings and has established an educational campaign to highlight the importance of annual mammograms while safeguarding the health of women seeking it. A key feature of this effort is the Patient Family Advisory Committee which was established as a venue to learn and understand the breast health journey experienced by these women and as a conduit to educate community members.

**Contact:** Teresita Oaks, Director of Parkland Hospital's Community Health Programs

**Telephone:** (214) 590-1069

**Email:** [Teresita.Oaks@phhs.org](mailto:Teresita.Oaks@phhs.org)