

Health Equity Toolkit 2023

Patient Safety Awareness

*Your guide to raising awareness
among staff, patients, and families*



Patient Safety is Personal

Health equity means the attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes. Use the resources in this toolkit to support health for all the people served in your community.

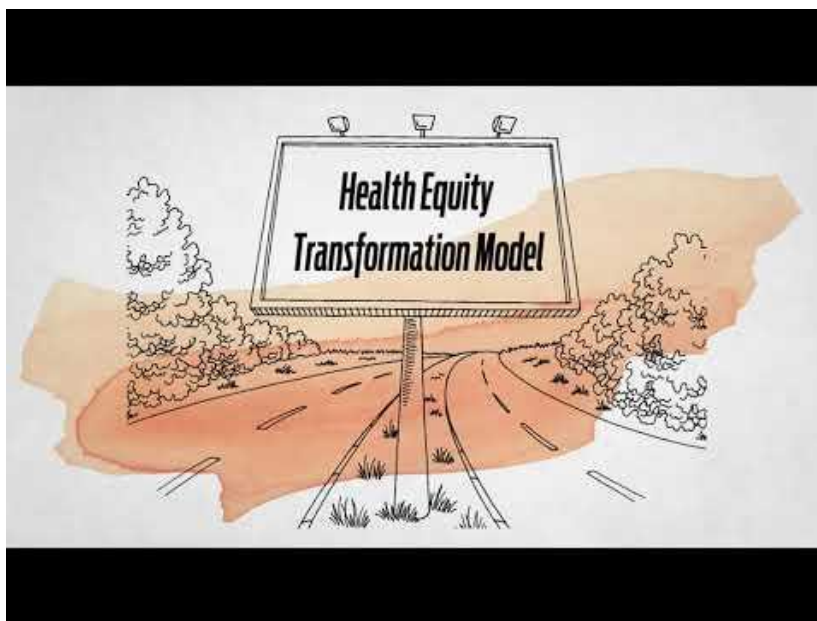
Health Equity – Use these images, messages, and links in your public and staff education.

Clinical Messages

Message 1: Through its Institute for Diversity and Health Equity, the AHA seeks to eliminate structural barriers that compromise diversity, equity and inclusion in hospitals and health care systems. Research and experience show that leading health equity strategies cut across six levers of transformation within health care organizational structures. [Explore](#) and learn what's needed to build internal capacity to improve performance and advance on the equity journey.



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Message 2: Healthy People 2030 features many objectives related to SDOH. These objectives highlight the importance of "upstream" factors — usually unrelated to health care delivery — in improving health and reducing health disparities. [Learn](#) more about how social determinants of health contribute to wide health disparities and inequities.

Social Determinants of Health

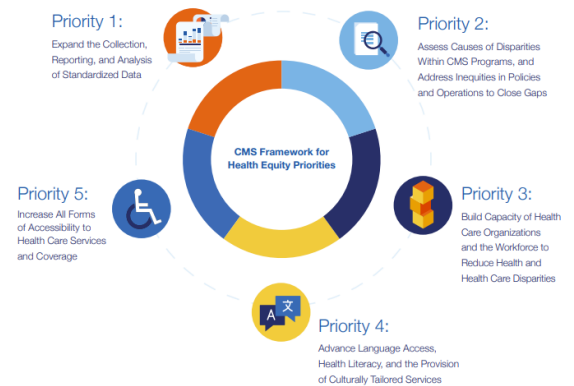


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Message 3: Social Determinants of Health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, and age. Z Codes- ICD-10-CM codes that are specific to SDOH, range from Z55-Z65, and include social influencers of housing, food insecurity, transportation, etc. To begin your data journey to better outcomes for your community, follow the steps in this [CMS Tool](#) for using Z Codes.

Message 4: The [CMS Framework for Health Equity](#) provides a strong foundation for our work as a leader and trusted partner dedicated to advancing health equity, expanding coverage, and improving health outcomes. This includes strengthening our infrastructure for assessment, creating synergies across the health care system to drive structural change, and identifying and working together to eliminate barriers to CMS-supported benefits, services, and coverage for individuals and communities who are underserved or disadvantaged and those who support them.



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Message 5: [HEAL](#) is a knowledge bank of updated information readily available for all health care organizations. It is a dynamic collection of tools and resources focusing on practical, how-to solutions to help hospitals and health systems of all sizes build more inclusive and equitable communities. Featuring a carefully curated list of top publications in the health care field, HEAL makes it easier for all health care advocates and professionals to better understand opportunities, challenges and strategies that may help them begin or advance their health equity journey.



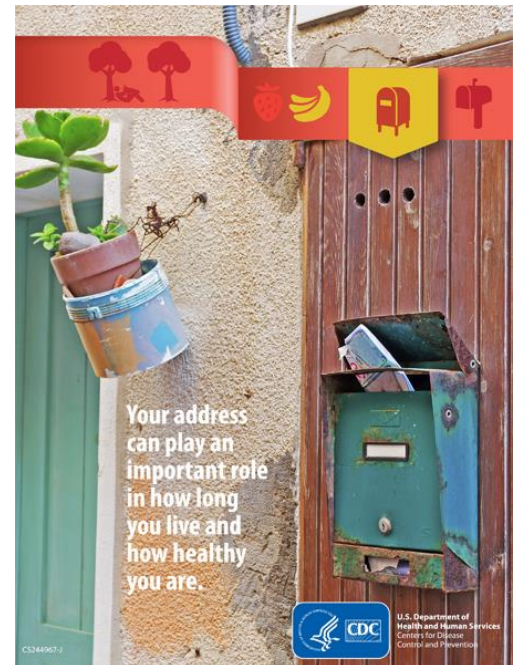
Message 6: [People with adequate levels of health literacy](#) are better able to understand their health concerns and diagnoses as well as any treatment information. [Interventions that improve personal health literacy](#) have been shown to result in better outcomes such as increased personal health knowledge and improved adherence to prescribed treatment. Learn more about developing, implementing, evaluating, and sustaining rural health literacy programs in the [Rural Health Literacy Toolkit](#).



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Community Messages

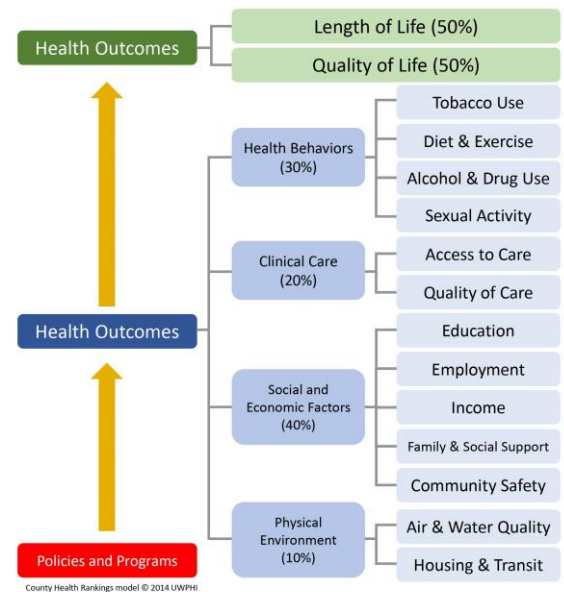
Message 7: People living just a few blocks apart may have vastly different opportunities to live a long life in part because of their neighborhood. Unfortunately, significant gaps in life expectancy persist across many United States cities, towns, ZIP codes, and neighborhoods. Use this [tool](#) to explore how life expectancy in America compares with life expectancy in your area.



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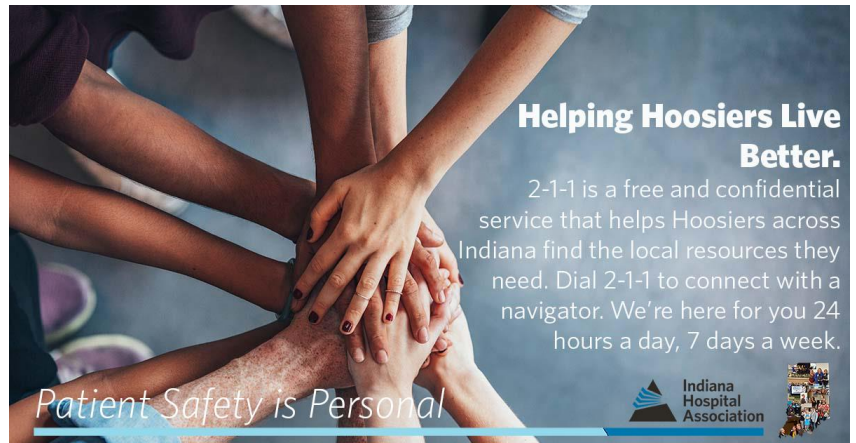
Both Clinical & Community Messages

Message 8: A wide range of factors influence how long and how well we live from education and income to what we eat and how we move to the quality of our housing and the safety of our neighborhoods. [County Health Rankings & Roadmaps](#), a program of the University of Wisconsin Population Health Institute, is working to improve health outcomes for all and to close the health gaps between those with the most and least opportunities for good health. Visit the website to learn more about your community.



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Message 9: Indiana 211 is a free service that connects Hoosiers with help and answers from thousands of health and human service agencies and resources right in their local communities - quickly, easily, and confidentially. Visit the [Indiana 211](#) Connect website for more information.



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Resources

A variety of resources are available to support your Health Equity campaign. Check out the websites below for information and tools and use the video links in your education and social media.

[10 Questions Boards Can Answer to Advance Equity | AHA Trustee Services](#)

[Mapping US Medicare Disparities | CMS](#)

[Social Determinants of Health in Rural Communities Toolkit](#)

[Hospitals and food insecurity](#)

[Understanding the Social Determinants of Health for Rural Healthcare Teams](#)

[CMS study on top 5 Z codes](#)

[AHA ICD 10 SDoH Update](#)

[2022 AHRQ National Health Care Quality & Disparities Report](#)

[Find out how your county fares with social determinants of health](#)

[Healthy People 2030 data-driven national objectives](#)

[CDC resource to help communities address social determinants of health](#)

[Health Leads Resource Library](#)

[ICD-10-CM Coding for Social Determinants of Health](#)

Printable Resources

[AHA ICD 10 SDoH Update](#)

[CMS Tool for using Z Codes](#)

Screening Tools

[PRAPARE Assessment Tool for SDOH](#)

[AAFP Social Needs Screening Tool](#)

[CMS Accountable Communities Health-Related Screening Tool](#)



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