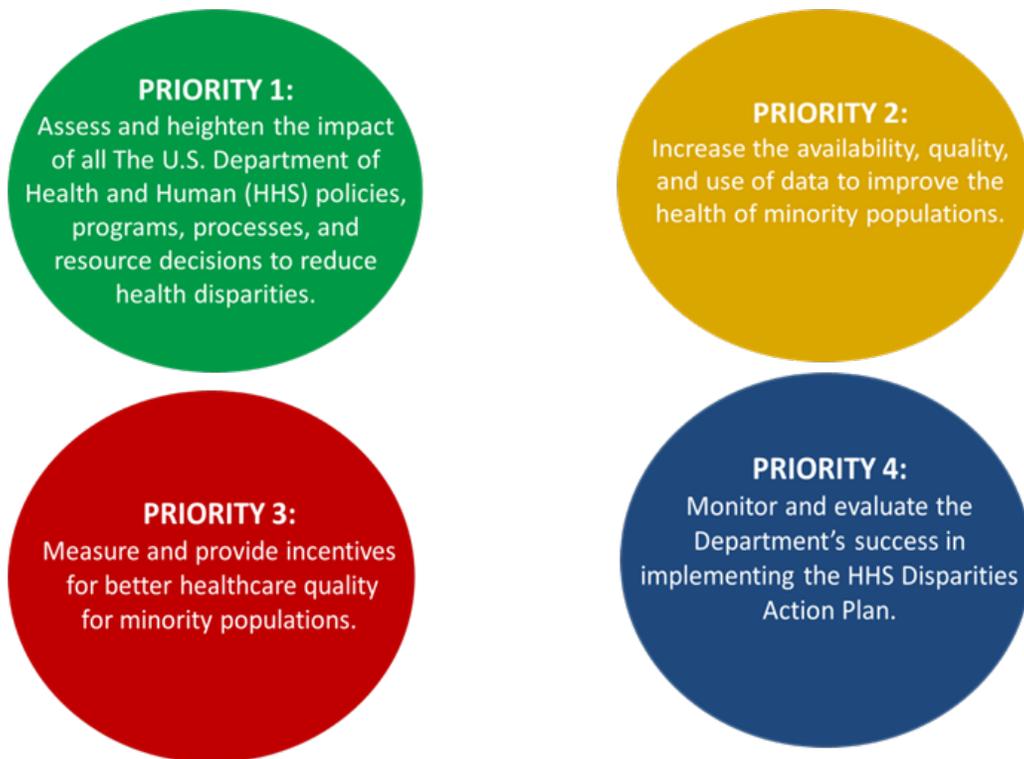


The HHS Action Plan to Reduce Racial and Ethnic Health Disparities (DAP)

Published in April 2011, the HHS Action Plan to Reduce Racial and Ethnic Health Disparities also referred to as the Disparities Action Plan (DAP), outlines the goals and actions HHS will take to reduce health disparities among racial and ethnic minorities. The DAP proposes a set of Secretarial priorities, pragmatic strategies and high impact actions to achieve five strategic goals: 1) Transform health care; 2) Strengthen the nation's Health and Human Services infrastructure and workforce; 3) Advance the health, safety and well-being of the American people; 4) Advance scientific knowledge and innovation; and 5) Increase the efficiency, transparency, and accountability of HHS programs. The five goals from the HHS Strategic Plan for Fiscal Years (FY) 2010-2015 provide the framework for the HHS Disparities Action Plan.

OVERARCHING SECRETARIAL PRIORITIES



The Office of Health Equity (OHE) is the chief coordinating office within HRSA that manages the Agency's response to the HHS DAP to eliminate health disparities. The following is a summary of activities HRSA is implementing as it pertains to the four overarching HHS Secretarial priorities. These investments aim to achieve a measurable impact on reducing and/or eliminating health disparities, as well as build the capacity to promote positive health outcomes, and attain health equity among racial/ethnic minority populations. For full access to the HHS DAP: http://www.minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS_Plan_complete.pdf

The HHS Action Plan to Reduce Racial and Ethnic Health Disparities (DAP)

Secretarial Priority 1

Assess and heighten the impact of all HHS policies, programs, processes, and resource decisions to reduce health disparities

- **NHSC Loan Repayment and Scholarships Program**

Health Resources and Services Administration's (HRSA) Bureau of Health Workforce (BHW) implements recruitment and outreach activities to encourage the interest of students from underrepresented backgrounds into the healthcare workforce. The National Health Service Corps (NHSC) loan repayment and scholarships program administered by BHW has methods in place to assess the results of their targeted recruitment and outreach strategies. The NHSC's partnerships are critical to reaching both minority students and clinicians. Partner organizations work with the NHSC to disseminate information to their networks via social media, articles and newsletters, and encourage their constituency groups (students/clinicians) to pursue opportunities in the National Health Service Corps. In FY 2013, HRSA disseminated 25 presentations to minority serving institutions (which included over 330 contacts), and minority partner organizations, conferences and meetings. As of July 2014, eight of the sixteen NHSC's closest partners are minority-focused and represent over 150,000 minority clinicians, students and faculty. HRSA communicates with students, faculty and school administrators regarding scholarship and loan repayment programs through e-blasts, exhibits and presentations and direct outreach.

- **NHSC Jobs Center Website**

In addition to recruitment efforts of students, BHW through the NHSC aims to fill health professional vacancies at Indian Health Services Sites. As of the end of June 2014, there were 131 open positions listed on the NHSC Jobs Center website. The website is a free, on-line recruitment resource where all NHSC-approved sites can post job positions connecting Tribal sites to primary care professionals seeking employment throughout the United States. In addition, 7,362 NHSC sites currently have a Jobs Center profile and thousands of primary care professionals access the site each month. The link to the NHSC Jobs Center is: <http://nhscjobs.hrsa.gov/external/search/index.seam>. <http://www.hrsa.gov/publichealth/healthliteracy/index.html>

- **Management Information System Solution**

BHW plans to expand its National Health Service Corps (NHSC) Program; by placing more primary care providers in communities with designated health professional shortage areas. BHW maintains a Management Information System Solution (BMISS) which collects data on the NHSC Loan Repayment and Scholarships program. According to BMISS data reporting dates October 1, 2012 - September 30, 2013, the NHSC through scholarship and loan repayment agreements achieved field strength of 8,899. The BMISS system helps BHW measure NHSC progress with recruitment and retention of providers.

- **Healthy People 2020 LGBT Health Workgroup**

HRSA leads the Healthy People 2020 LGBT Health workgroup. The workgroup will be monitoring the progress of surveys that collect LGBT focused data and updating objectives to capitalize on current data availability.

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- **BPHC Data Collection**

In the 2014 Health Center Patient Survey, the Bureau of Primary Health Care (BPHC) will be aligning racial and ethnic data collection according to the Affordable Care Act (ACA), Section 4302.

Secretarial Priority 2	Increase the availability, quality, and use of data to improve the health of minority populations
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- **HAB's SPNS for Transgender Women of Color**

HRSA's HAB has another SPNS titled, "Enhancing Access to and Retention in Quality HIV Care for Transgender Women of Color", which is in its second year of implementation. The initiative will identify, evaluate, and disseminate successful strategies to outreach, recruit, and retain HIV positive transgender women of color in primary care, and also build capacity in organizations seeking to serve this population. Nine demonstration project grants were awarded in four cities: 2 in New York, 2 in Chicago, 2 in Los Angeles and 3 in the San Francisco Bay Area. The Evaluation and Technical Assistance Center (or ETAC) is the University of California at San Francisco. In 2013, the ETAC, HRSA SPNS staff, and the principal investigators and evaluators of the demonstration projects worked collaboratively on the design of the multisite evaluation. Following submissions to and approval by their respective Institutional Review Boards, the project sites began implementing their interventions.

- **HAB'S SPNS Initiative**

HRSA's HIV/AIDS Bureau (HAB) will fund a Ryan White HIV/AIDS Program Special Projects of National Significance (SPNS) Latino/a Initiative which is a multi-site evaluation to assess innovative culturally appropriate service delivery models of outreach, access to care and retention among HIV infected Latino/a populations. Ten demonstration site projects were awarded in FY 2013. One Evaluation Center was awarded to conduct a rigorous evaluation; provide technical assistance to demonstration site organizations and coordinate publication and dissemination efforts. The project start and completion date for this initiative is September 1, 2013 - August 31, 2018.

- **OHE Factsheets**

HRSA's Office of Health Equity (OHE) coordinates HRSA bureau and office responses for reporting and inquiries relevant to minority health and health disparities. OHE coordinates with HRSA bureaus and offices to generate the Minority Health Factsheets. The Factsheets are a compilation of all Health Resources and Services Administration (HRSA) programs that impact and/or serve African American, Asian American/Pacific Islander (AAPI), American Indian/Alaska Native (AI/AN), Hispanic, and Lesbian, Gay, Bi-sexual, and Transgender (LGBT) populations. These Factsheets contain quantitative data and will be used as an information resource on the HRSA website, which will be accessible to the public.

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- **OHE Diversity Report**

OHE also produces the HRSA Health Disparities and Diversity Report, which highlights HRSA programs that address health disparities and promote diversity among the health professions. The Factsheets and Diversity Report can be used to identify gaps in services, programs, funds, and/or actions to effectively address health disparities.

Secretarial Priority 3	Measure and provide incentives for better healthcare quality for minority populations
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- **Health Center Outreach and Enrollment Assistance**

Health Centers are employing many strategies to address the increased demand for assistance, including triaging consumers to make sure they are getting the enrollment assistance they need (general education vs. technical questions about plan options) and using classroom assistance formats, where as many people as possible are at secure computer terminals, enrolling at the same time. Outreach and Enrollment funding allows health centers to implement more of these and other strategies to increase efficiencies in the enrollment process. As a result of the targeted investment in outreach and enrollment activities, through the end of March 2014, health centers reported supporting nearly 14,500 (14,445) trained outreach and enrollment assistance workers and assisting more than 4.7 million people in their efforts to become insured.

- **MCHB's Training and TA Performance Measure**

The Maternal and Child Health Bureau (MCHB) developed a performance measure in their data collection tool that measures the extent of training and technical assistance (TA) provided and the degree to which grantees have mechanisms in place to ensure quality in their training and TA activities. The goal of this measure is to increase the number of MCHB grantees that are using needs assessments, evaluation tools, and applying the results of the evaluation for quality improvement in their training and technical assistance (TA) efforts.

The measure has two components: A) The number of individuals who were provided training and TA by types of target audiences; and B) The degree to which grantees have put in place key elements to improve the quality of their short- and long-term training and TA activities designed to promote professional and leadership development for the MCH community. The National Maternal and Child Oral Health Resource Center (OHRC) conduct annual reporting on this performance measure.

- **NHSC Incentive and Recruitment Efforts**

In efforts to expand HRSA's NHSC, the NHSC will provide physicians, nurse practitioners, and dentist's payments as an incentive through the NHSC Loan Repayment Program that will help satisfy their educational loans in return for providing health care in underserved communities. HRSA will also develop a plan for targeted recruitment of students from backgrounds that are underrepresented in the healthcare workforce. Activities will include implementing innovative strategies to encourage student interest in primary care and application to the NHSC scholarship program. In FY 2013, 4,505

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providers received new or continuation NHSC loan payment awards. Also in FY 2013, 196 students received a new or continuation NHSC scholarship award.

Secretarial Priority 4	Monitor and evaluate the Department's success in implementing the HHS Disparities Action Plan
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- **MCHB Home Visiting Program**

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program facilitates collaboration and partnership at the federal, state, and community levels to improve health and development outcomes for at-risk children through evidence-based home visiting programs. MIECHV includes grants to states and six jurisdictions. In FY 2014, 56 states and territories received funds to implement home visiting programs. HRSA's Maternal and Child Health Bureau (MCHB) does not have a unified set of national outcome measures on the disparities affecting the populations served through the home visiting program. Each state has approved benchmark plans which allow the state the flexibility to report on their own indicators for the 35 constructs within the six benchmark domains. The program will focus on revising the current benchmark reporting system to streamline, simplify, and unify reporting.

- **OHE's Biannual DAP Reporting**

OHE will collect and coordinate updated data from HRSA bureaus and offices every 6 months in efforts to assess progress with reported activities in implementing the DAP.