Boston Medical Center Health Equity Accelerator

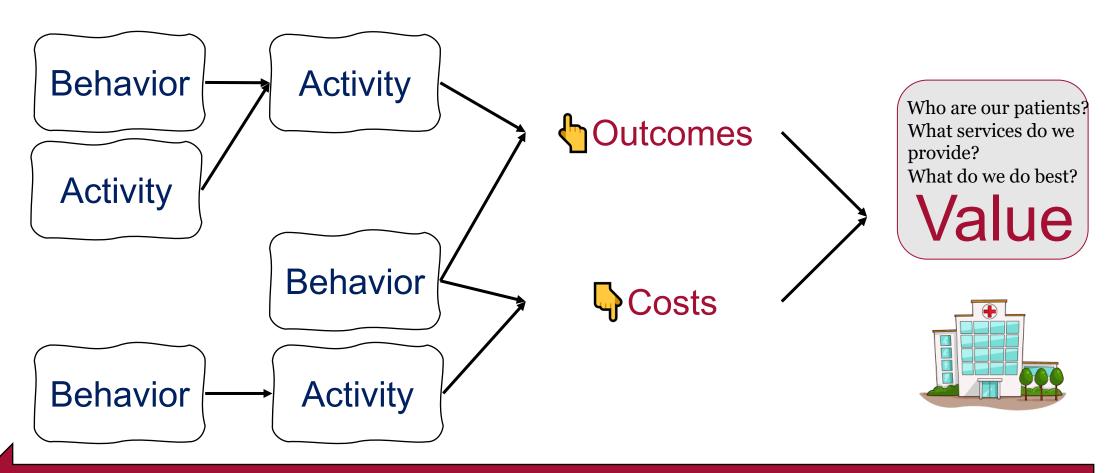
Intensive Seminar on Value-Based Health Care

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What is Your Theory of Value Creation?



Reverse-Engineering



Pick Something to Work On

We have **limits** on what we can do, what we can provide, what our bandwidth is. The core tenet of any type of meaningful clinical or non-clinical intervention is to be **tailored to the patient population**.

When you are not specific about your **patient population**, you can't be specific about your **interventions**, and your **results** are only as specific as your intervention is.



Strategic Fingerprint for Health Equity

START

Source of Inequity:

- Economic status
- Gender
- Race/Ethnicity
- Language
- Sexual orientation
- Immigration status
- Disability
- Mental health
- Substance use disorder

Hospital Expertise:

- Clinical care
- Social work
- Research
- Education
- Advocacy

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Infectious diseases (COVID)

Cancer

Conditions:

Diabetes

Pregnancy

Behavioral Health

Interventions:

Standardized

Tailored

Research approach

Operational

approach

Integration:

Health Equity
as a project

 Health Equity as a strategy



Three Criteria for Prioritization

1. What matters to our patient population?

2. Where does BMC has the expertise to develop a solution?

3. Where can BMC make a difference?

