

# How to Run Health Equity Data

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American  
Heart  
Association.

# Health Equity Data Elements in the CRF

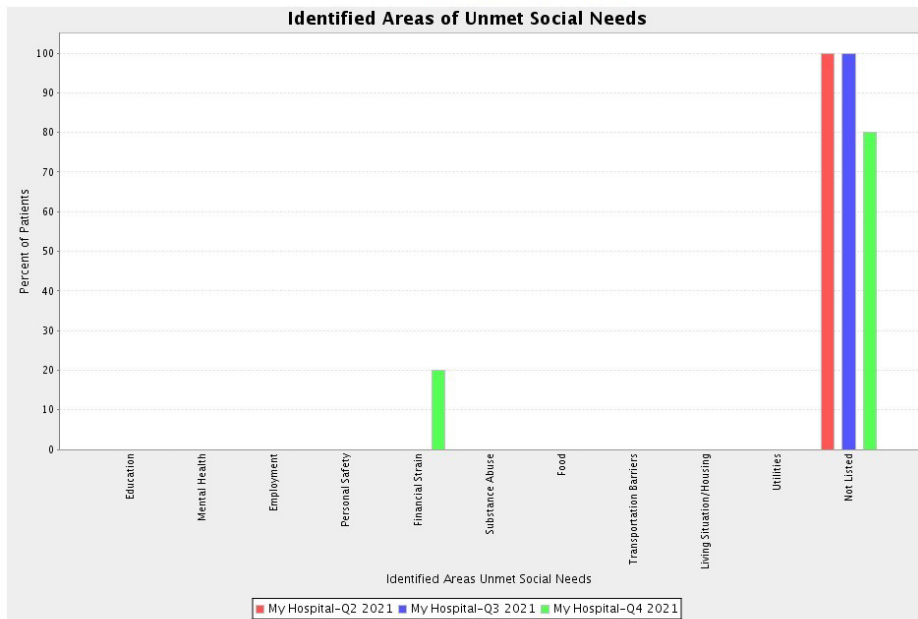
In line with the latest science and our guidelines, all GWTG registries have new and revised field names and options. You may run reports using these new field names as filters. Below are screenshots of the patient's case report form (CRF) where you can find the data elements relating to health equity:

RACE AND ETHNICITY			
Race (Select all that apply):	<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Black or African American	
	<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian or Pacific Islander	
	<div style="display: flex; justify-content: space-between;"> <div> <p>[if Asian selected]</p> <input type="checkbox"/> Asian Indian  <input type="checkbox"/> Chinese  <input type="checkbox"/> Filipino  <input type="checkbox"/> Japanese  <input type="checkbox"/> Korean  <input type="checkbox"/> Vietnamese  <input type="checkbox"/> Other Asian </div> <div> <p>[if native Hawaiian or pacific islander selected]</p> <input type="checkbox"/> Native Hawaiian  <input type="checkbox"/> Guamanian or Chamorro  <input type="checkbox"/> Samoan  <input type="checkbox"/> Other Pacific Islander </div> </div>		
Hispanic Ethnicity:	<input type="radio"/> Yes <input type="radio"/> No/UTD		
If Yes,	<input type="checkbox"/> Mexican, Mexican American, Chicano/a <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Another Hispanic, Latino or Spanish Origin		

DEMOGRAPHICS		Demographics Tab
Sex	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Unknown	
Patient Gender Identity	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Female-to-Male (FTM)/Transgender Male/Trans Man <input type="radio"/> Male-to-Female (MTF)/Transgender Female/Trans Woman <input type="radio"/> Genderqueer, neither exclusively male nor female <input type="radio"/> Additional gender category or other: _____ <input type="radio"/> Did not disclose	
Patient-Identified Sexual Orientation	<input type="radio"/> Straight or heterosexual <input type="radio"/> Lesbian or gay <input type="radio"/> Bisexual <input type="radio"/> Queer, pansexual, and/or questioning <input type="radio"/> Something else, please specify: _____ <input type="radio"/> Don't know <input type="radio"/> Declined to answer	
Date of Birth:	____/____/____	Age: _____
Zip Code:	_____ - _____	<input type="checkbox"/> Homeless
Payment Source	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Medicare Title 18  <input type="checkbox"/> Medicaid – Private/ HMO/ PPO/ Other  <input type="checkbox"/> Self Pay/ No Insurance </div> <div> <input type="checkbox"/> Medicaid Title 19  <input type="checkbox"/> Private/ HMO/ PPO/ Other  <input type="checkbox"/> Other/ Not Documented/ UTD </div> <div> <input type="checkbox"/> Medicare – Private/ HMO/ PPO/ Other  <input type="checkbox"/> VA/ CHAMPVA/ Tricare </div> </div>	
What is the patient's source of payment for this episode of care?	<input type="radio"/> Medicare <input type="radio"/> Non-Medicare	

# Identified Areas of Unmet Needs

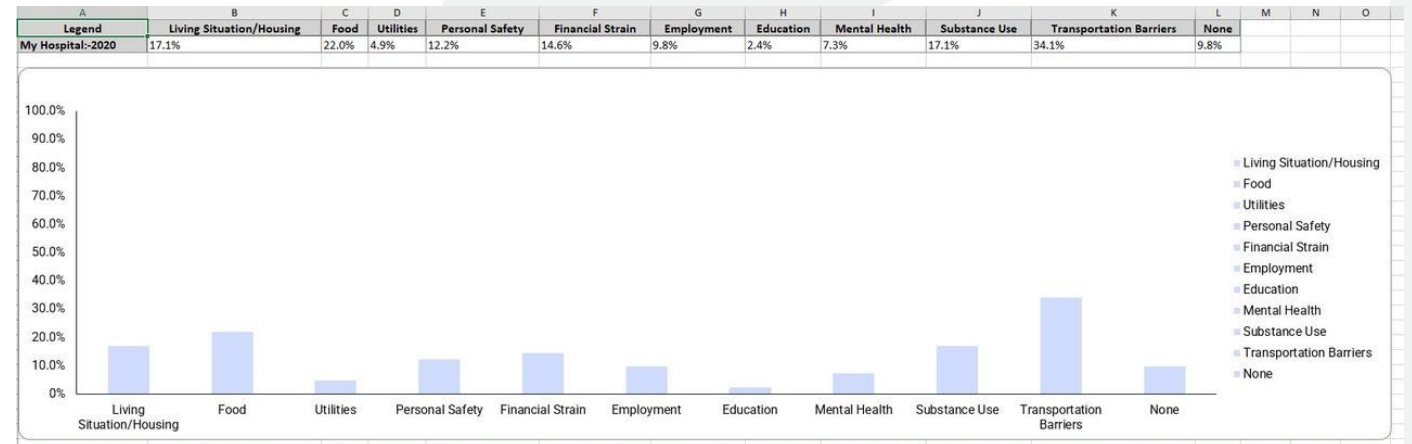
**Identified Areas of Unmet Social Needs**  
Histogram breakdown of Identified Areas of Unmet Social Needs  
Time Period: Q1 2021 - Q4 2021; Site



**Identified Areas of Unmet Social Needs**  
Note: Time periods/Categories at the end of the graph and data table have been omitted because there were no patient records during that time.

Benchmark Group	Time Period	Education	Mental Health	Employment	Personal Safety	Financial Strain	Substance Abuse	Food	Transportation Barriers	Living Situation/Housing	Utilities	Not Listed	Total
My Hospital	Q2 2021	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	4 (100%)	4
	Q3 2021	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	9 (100%)	9
	Q4 2021	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (20%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	4 (80%)	5

You can find the Identified Areas of Unmet Needs based on the Health-Related Social Needs Assessment in the “Reporting Measures” bundle.\*



\*HF Limited Form Users may not have access to these bundles

# PMT

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# Running Demographics

## Configurable Measure Reports

Generate Report

TIME PERIOD	
Interval:	Annually <input type="checkbox"/> Aggregate
From:	2022 <input type="button" value="Jan"/>
To:	2022 <input type="button" value="Jan"/>

REPORT 1	
<b>GWTG Standard Measures:</b>	Select Measure
<b>GWTG Additional Patient Population Measures:</b>	Smoking Cessation Therapies Prescribed
<b>Historic Measures:</b>	Statin Prescribed at Discharge
<b>Format:</b>	Time to Intravenous Thrombolytic Therapy - 30 min
	Time to Intravenous Thrombolytic Therapy - 45 min
	Time to Intravenous Thrombolytic Therapy Times
	Thrombolytic Complications
	Thrombolytic Therapies
	Weight Recommendation
	<b>Descriptive</b>
	Age
	Diagnosis
	Dysphagia Screening Results
	<b>Gender</b>
	Initial Exam Findings
	LOS
	Medical History
	Race
	Risk-Adjusted Mortality Ratio (Global Stroke Model)
	Risk-Adjusted Mortality Ratio (Ischemic-Only model)
	Symptom Duration if diagnosis of TIA
	Data Quality
<b>Compare to:</b> (ctrl-click to select multiple)	Select Measure

**FILTER OPTIONS** HIDE

Note: "Compare selections" only apply

To run general demographic data, you may select them through the "Descriptive Measures" located in the first dropdown menu labeled "GWTG Standard Measures"

# Filters

Click "Show" next to "Filter Options" to show you all the options available as comparison variables. To see them compared visually in a graph, be sure to also check "Compare Selections". I've used gender here as an example. After you've made your selections, click "Generate Report" to see the bar graphs.

**FILTER OPTIONS** [HIDE](#)

Note: "Compare selections" only apply to the "My Hospital" comparison group.

☐ Include Only Complete Records

**Patient Population**  
 Adult  
 Pediatric  
 Neonate  
☐ Compare selections  
 (ctrl-click to select multiple)

**Form Type**  
 CPA  
 ARC  
 MET  
 PCAC  
☐ Compare selections

**Form Exists**  
 CPA  
 ARC  
 MET  
 PCAC  
☐ Compare selections

**Form Group**  
 CPA Event  
 CPA: Newly Born Event  
☐ Compare selections

**Discharge Status**  
 Dead  
 Alive  
 Disposition Ending  
☐ Compare selections

**Sex**  
 Male  
 Female  
 Unknown  
☐ Compare selections

**Race**  
 American Indian or Alaska Native  
 Black or African American  
 White  
 Asian  
 Native Hawaiian or Pacific Islander  
 UTD  
☐ Compare selections

**FILTER OPTIONS** [HIDE](#)

Note: "Compare selections" only apply to the "My Hospital" comparison group.

☐ Include Only Complete Records

**Diagnosis**  
 Ischemic Stroke  
 Transient Ischemic Attack (< 24 hours)  
 Subarachnoid Hemorrhage  
 Intracerebral Hemorrhage  
 Stroke not otherwise specified  
 No stroke related diagnosis  
☐ Compare selections

**Patient location when stroke symptoms discovered**  
 Not in a healthcare setting  
 Another acute care facility  
 Chronic health care facility  
 Outpatient healthcare setting  
 Stroke occurred after hospital arrival (in ED/Obs/inpatient)  
 ND or Cannot be Determined  
☐ Compare selections

**Arrival Day**  
 Sunday  
 Monday  
 Tuesday  
☐ Compare selections

**Not Admitted?**  
 Yes, not admitted  
 No, patient admitted as inpatient  
☐ Compare selections

**Reason Not Admitted**  
 Transferred from your ED to another acute care hospital  
 Discharged directly from ED to home or other location that is not an acute care hospital  
 Left from ED AMA  
 Died in ED  
 Discharged from observation status without an inpatient admission  
 Other  
☐ Compare selections

**Department**  
 Neuro Admission  
 Other Service Admission  
 Stroke Consult  
 No Stroke Consult  
 In Stroke Unit  
 Not in Stroke Unit  
☐ Compare selections

**Physician**  
☐ Compare selections

**Gender**  
 Male  
 Female  
 Unknown  
☒ Compare selections

**Hispanic Ethnicity**  
 Yes  
 No  
☐ Compare selections

**Race**  
 American Indian/Alaska Native  
 Black or African American  
 White  
 Asian  
 Native Hawaiian/Pacific Islander  
 UTD  
☐ Compare selections

# Filters Cont.

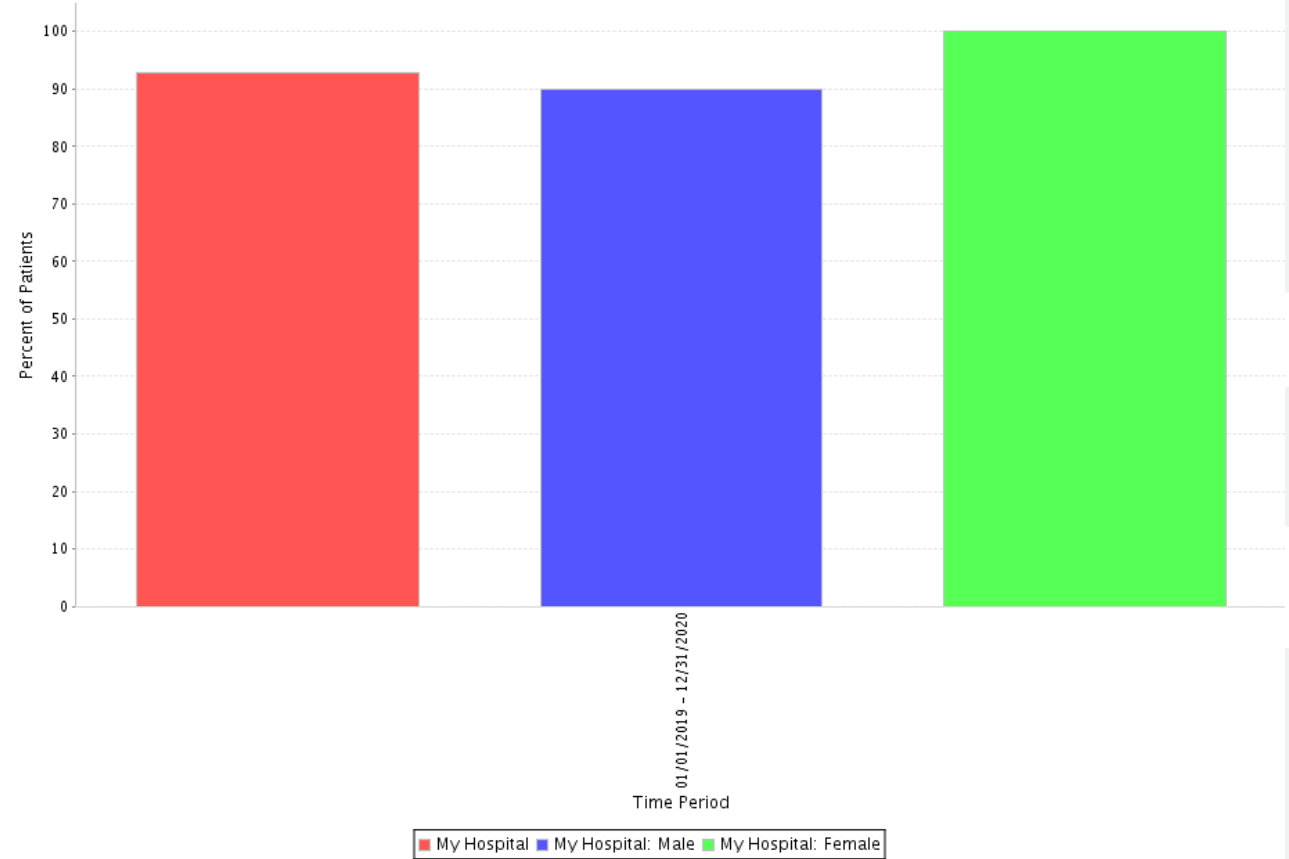
In this example, you can see the measure “Early Antithrombotics” is compared by Sex as well as to the full population together.

## Early Antithrombotics

Percent of patients with ischemic stroke or TIA who receive antithrombotic therapy by the end of hospital day two.

Time Period: 01/01/2019 - 12/31/2020; Site: AHA Demo test-Stroke + EMS (88271)

Gender: Male; Female; Unknown;



Early Antithrombotics				
Benchmark Group	Time Period	Numerator	Denominator	% of Patients
My Hospital	01/01/2019 - 12/31/2020	13	14	92.9%
My Hospital: Male	01/01/2019 - 12/31/2020	9	10	90.0%
My Hospital: Female	01/01/2019 - 12/31/2020	4	4	100.0%



# Benchmarking

## Configurable Measure Reports

[Generate Report](#)

### TIME PERIOD

Interval:  ☐ Aggregate

From:

To:

### REPORT 1

GWTC Standard Measures:

GWTC Enhanced Version & Special Initiative Measures:

GWTC Additional Patient Population Measures:

Historic Measures:

Format:

Measure group with 7 of the 10 Consensus Measures by Clinical Diagnosis (including Stroke and TIA) for GWTC Recognition

Compare to:  
(ctrl-click to select multiple)

Select benchmarking regions by clicking the desired group and holding "Ctrl" on your keyboard simultaneously

[Add Another Report](#)

[FILTER OPTIONS](#) [SHOW](#)

[DISPLAY OPTIONS](#) [SHOW](#)

As another option, you can use the "Benchmarks" tool to see how your site is doing on any measures compared to other GWTC participating sites across the nation, in your region, or many other options!

Here, I've selected to see how My Hospital compares to all other GWTC-Stroke participating hospitals in the nation on our Achievement Recognition Measures.

Note: checking a larger region benchmark (like "All Hospitals" may take up to 20 min to load

# IRP

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# Running Demographics

## Parameters

Reporting Period

Annually

From

2022

To

2022

☐ Aggregate Data

Saved Reports

Select

## Measures:

- ☐ STEMI Composite Measures
- ☐ STEMI Receiving Center Achievement Measures
- ☐ STEMI Receiving Center Quality Measures
- ☐ STEMI Receiving Center Reporting Measures
- ☐ STEMI Referring Center Achievement Measures
- ☐ STEMI Referring Center Quality Measures
- ☐ STEMI Referring Center Reporting Measures
- ☐ STEMI Risk-Adjusted Mortality Measures
- ☐ NSTEMI Achievement Measures
- ☐ NSTEMI Reporting Measures
- ☒ Descriptive Measures
  - ☒ AHACAD40: Diagnosis
  - ☐ AHACAD41: Gender
  - ☒ AHACAD39: Identified Areas of Unmet Social Needs (NSTE-ACS)
  - ☒ AHACAD20: Identified Areas of Unmet Social Needs (STEMI)
  - ☐ AHACAD42: Length of Stay
  - ☒ AHACAD43: Race

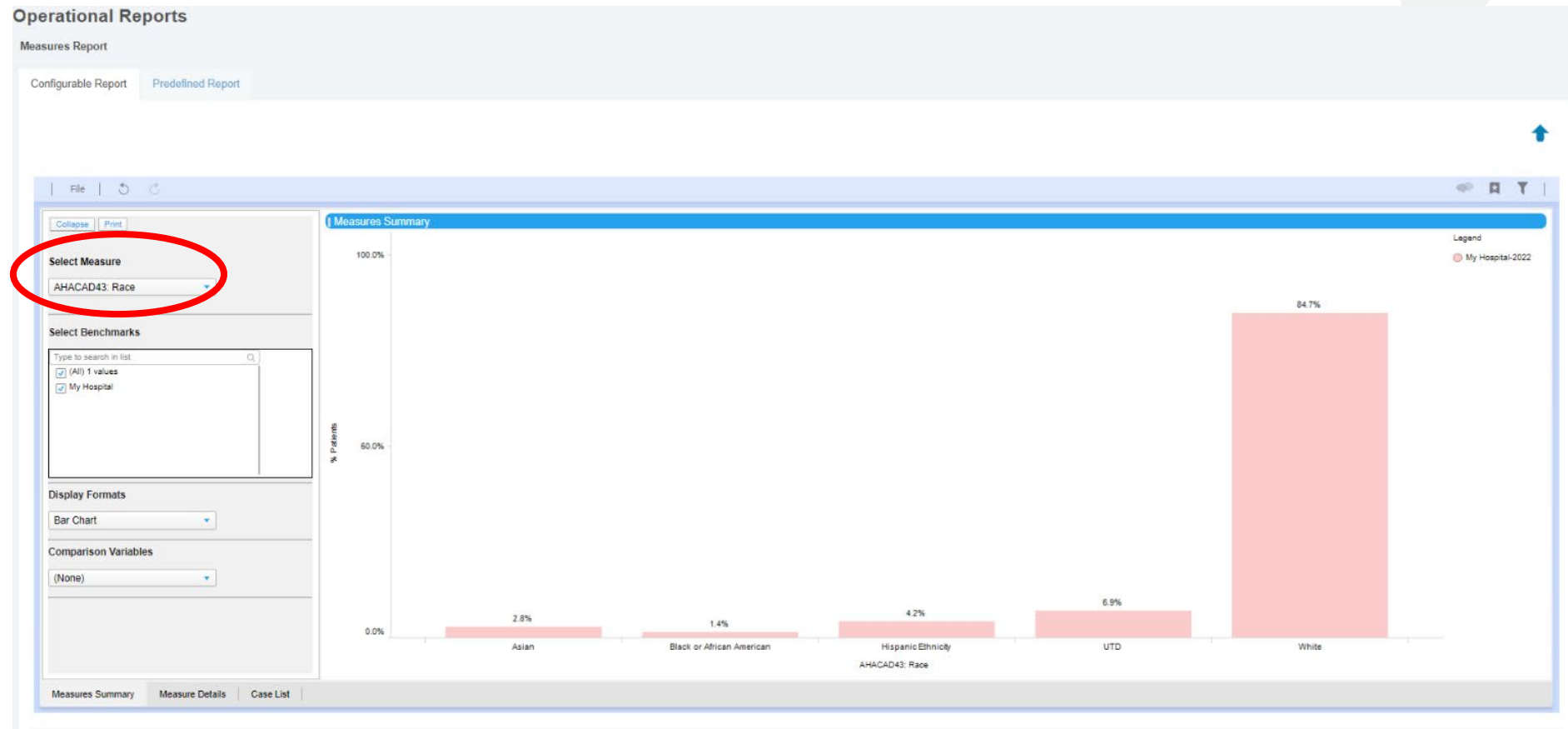
## Benchmarks:

- ☐ My Hospital
- ☐ All Hospitals
- ☐ 0-100 Discharges
- ☐ 0-74 Beds
- ☐ 24 Hour PCI Capable Center
- ☐ Academic Hospitals
- ☐ M:L Accredited Hospitals
- ☐ Middle Atlantic
- ☐ New York
- ☐ Non-Critical Access Hospitals
- ☐ Northeast
- ☐ Primary Heart Attack Certification
- ☐ STEMI Receiving Center
- ☐ AHA\_Health\_System\_Demo

To run general demographic data, you may select them through the “Descriptive Measures” bundle in the Operational Reports section, which can be found on the grey bar on the lefthand side of the screen.

# Running Demographics Cont.

Select the measure you'd like to display on the graph, and you should be able to see the demographic breakdown from there



# Filters

**Parameters**

Reporting Period:  From:  To:   Record Status:

☐ Aggregate Data

Saved Reports:

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**Measures:**

- ☐ STEMI Composite Measures
- ☒ STEMI Receiving Center Achievement Measures
- ☐ STEMI Receiving Center Quality Measures
- ☐ STEMI Receiving Center Reporting Measures
- ☐ STEMI Referring Center Achievement Measures
- ☐ STEMI Referring Center Quality Measures
- ☐ STEMI Referring Center Reporting Measures
- ☐ STEMI Risk-Adjusted Mortality Measures
- ☐ NSTEMI Achievement Measures
- ☐ NSTEMI Reporting Measures
- ☐ Descriptive Measures
- ☐ BPCI STEMI Measures
- ☐ BPCI NSTEMI Measures
- ☐ BPCI Defect-Free Composite Measures
- ☐ Historic Measures
- ☐ Diabetes Measures - AMI Patients
- ☐ Diabetes Composite Measure - AMI Patients
- ☐ Diabetes Reporting Measure - AMI Patients

**Benchmarks:**

- ☐ My Hospital
- ☐ All Hospitals
- ☐ 0-100 Discharges
- ☐ 0-74 Beds
- ☐ 24 Hour PCI Capable Center
- ☐ Academic Hospitals
- ☐ M.L. Accredited Hospitals
- ☐ Middle Atlantic
- ☐ New York
- ☐ Non-Critical Access Hospitals
- ☐ Northeast
- ☐ Primary Heart Attack Certification
- ☐ STEMI Receiving Center
- ☐ AHA\_Health\_System\_Demo

**Filters:**

Standard Fields (Multiselect):

Multiselect Fields (Standard and Custom):

Custom Fields (Single Selection):

☐ Number of Sites

**1. Select measure bundle**

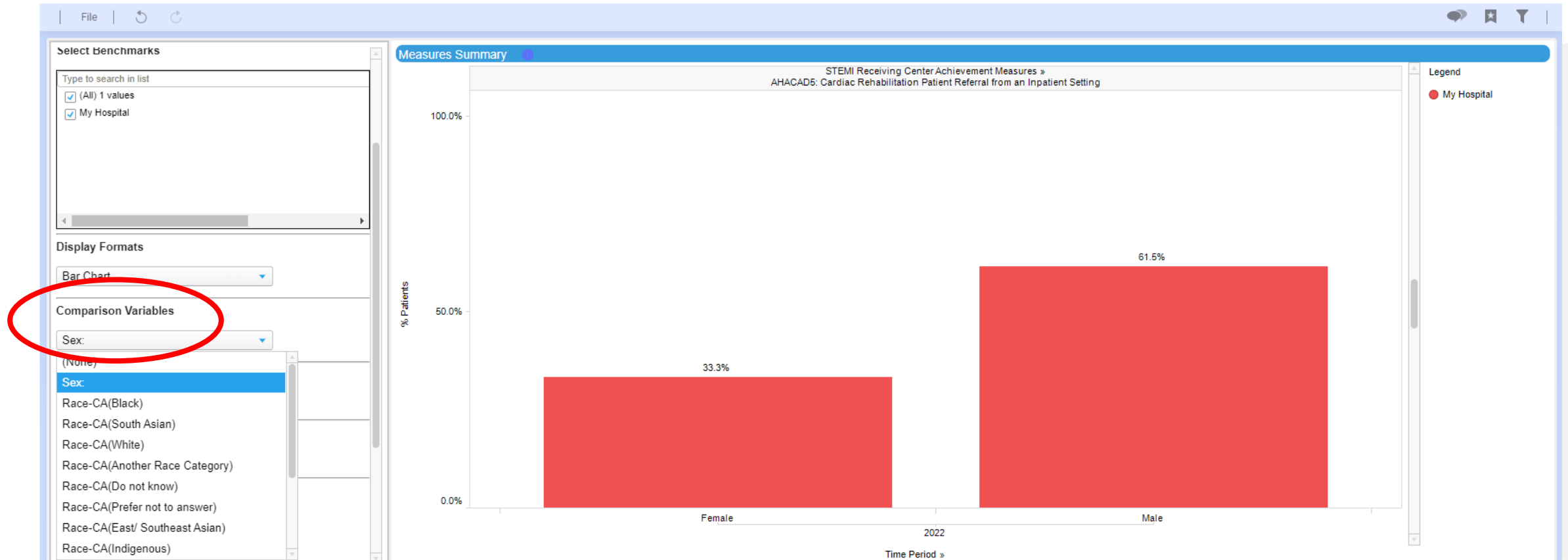
**2. Type in desired filters**

**4. Apply Parameters**

You can see how your site is performing for each measure set by using the “Filter” options to the right of the measure bundles. Type in your desired field names to search which filters you’d like to apply (e.g. sex, gender identity, race, age, etc.) after selecting the measures you’d like to compare. Then, select “Apply Parameters” to graph the measures.

# Filters Cont.

From here, you can see the comparisons in the measures by selecting the variable you would like to compare in the lefthand side labeled “Comparison Variables”. This will populate a bar graph that compares the measure by the selected filter.



# Benchmarking

**Parameters**

Reporting Period:  From:  To:   Record Status:

☐ Aggregate Data

Saved Reports:

## Measures:

- ☐ STEMI Composite Measures
- ☒ STEMI Receiving Center Achievement Measures
- ☐ STEMI Receiving Center Quality Measures
- ☐ STEMI Receiving Center Reporting Measures
- ☐ STEMI Referring Center Achievement Measures
- ☐ STEMI Referring Center Quality Measures
- ☐ STEMI Referring Center Reporting Measures
- ☐ STEMI Risk-Adjusted Mortality Measures
- ☐ NSTEMI Achievement Measures
- ☐ NSTEMI Reporting Measures

## Benchmarks:

- ☐ My Hospital
- ☐ All Hospitals
- ☐ 0-100 Discharges
- ☐ 0-74 Beds
- ☐ 24 Hour PCI Capable Center
- ☐ Academic Hospitals
- ☐ M.L Accredited Hospitals
- ☐ Middle Atlantic
- ☐ New York
- ☐ Non-Critical Access Hospitals
- ☐ Northeast
- ☐ Primary Heart Attack Certification
- ☐ STEMI Receiving Center
- ☐ AHA\_Health\_System\_Demo

Check desired benchmarking regions

- ☐ BPCI Direct-Free Composite Measures
- ☐ Historic Measures
- ☐ Diabetes Measures - AMI Patients
- ☐ Diabetes Composite Measure - AMI Patients
- ☐ Diabetes Reporting Measure - AMI Patients

## Filters:

Standard Fields (non-Multiselect):

Multiselect Fields (Standard and Custom):

Custom Fields (Single Select):

☐ Number of Sites

Check "Number of Sites" to see how many sites are participating in each selected benchmarked region

As another option, you can use the "Benchmarks" tool to see how your site is doing in any measures compared to other GWTG participating sites across the nation, in your region, or many other options!

Note: checking a larger region benchmark (like "All Hospitals" may take up to 20 min to load

# Using Health Equity Data

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# Examples of Research/PI Questions

Reminder: Research using only GWTG data does NOT require IRB approval!\*

\*Note: this only applies to data collected at your individual hospital and NOT using any Benchmark data from other hospitals/regions

## General Demographic Information

1. What are the unmet social needs of your patient population?
2. Are there are any disparities in CVD diagnosis between sex/race?

## Process Improvement

1. Are there health disparities between race/sex in prescribing [X] medication at discharge?
2. What population
3. Are there are any delays to care that specifically impact [X] patient populations?
4. Are there any differences in education provided at discharge by gender identity or sexual orientation?

## Outcomes Research

1. Are there health disparities between race/sex in Discharge Disposition?
2. Is the average length of stay the same among differing sex/racial groups?