

### **Breakout Room Instructions:**

1. Everyone should introduce themselves by stating their first and last name and where they work in the hospital.
2. One volunteer will read the case aloud.
3. A different volunteer will read the case discussion questions aloud.
4. The group will have several minutes for discussion in response to the questions.
5. Once prompted by a message into the Breakout Room, please pause discussing the case and shift to discussing these questions: **What did you notice worked well for your team? Where did you find this tool to be effective or fall short?**
6. Upon returning to the main room, please have one volunteer be ready to add a sticky note to the whiteboard with ONE response/tip/suggestion from your breakout session.

### **Purpose:**

The aim of this breakout session is to adapt the principles of the Health Equity Rounds (HER), established at Boston Medical Center (2016), to an interaction with Academy educators. As with HER, we hope to use this interaction as a tool to **increase our own and our learners' awareness of personal and structural biases and their impact on patient care.**

We acknowledge that <10 minutes is a short amount of time for this exercise. Realistically, these facilitated discussions are intended to be conversation starters that will increase comfort with, and frequency of, dialogue around biases in patient care.

### **Guiding Principles:**

- We will engage actively and respectfully with the aim of understanding others' views and experiences
- We will trust that people are always doing the best they can
- We will respect confidentiality
- We will avoid blaming or shaming
- We will embrace discomfort in the spirit of growth

### **Case**

Emily is an 8-year-old who has recurrent upper respiratory infections and asthma. Emily's mother brought her to the clinic with complaints of persistent cough, intermittent wheezing, and difficulty breathing for the past three months. She has missed several days of school due to her symptoms, and her mother is concerned about her overall health. Emily was prescribed an inhaler by Dr. Janes during a previous visit but has had trouble obtaining refills because of insurance-related challenges. Her mother also mentions that they have been struggling financially, making it difficult for them to afford Emily's medications consistently. She reports living in a densely populated neighborhood with poor air quality due to nearby industrial facilities.

## **Case Discussion Questions**

*Identities: considering our own biases in approaching this case*

- Are any assumptions made about this family? If so, why? Are you actively listening to all the needs of the family? Are you asking questions to understand the strengths and barriers of the family?
- Take a moment to imagine yourself in this family's shoes. What would your goals be for this visit? How would you want the medical team to respond to your concerns?
- What are effective ways you have seen clinical teams discuss with patients and family members environmental factors impacting health outcomes? Financial resources?

*Concrete: considering social determinants of health*

- What social determinants of health may be contributing to Emily's health disparities?
- What challenges might Emily's family face in obtaining her medications?
- How does the neighborhood's air quality impact Emily's respiratory health? What strategies or resources can be recommended to address environmental factors affecting Emily's health?
- What resources can you provide to promote health literacy and self-advocacy for Emily's family? How can you support long-term empowerment in managing Emily's health?

## **At Pause\***

What did you notice worked well for your team?

Where did you find this exercise to be effective or fall short?

**\*One person should jot down a few notes to add to the whiteboard in the main room.**