



NIH-ACS SURGICAL DISPARITIES SYMPOSIUM

National Research Agenda Launch Webinar

ATTENDANCE: HAPPY ARANETA, LD BRITT, CLAUDETTE BROOKS, NAVIN CHANGOOR, ALI CHAUDHARY, IRENE DANKWA-MULLAN, GIANA DAVIDSON, JIMMY EFIRD, SALLY GARNESKI, DARRYL GRAY, ADIL HAIDER, ROMANA HASNAIN-WYNIA, RAHEL JINDAL, RACHEL KELZ, LISA KODADEK, ELIZABETH LILLEY, ANDREW LOERHER, ELHAM MAHMOUDI, MAYUR NARAYAN, MARIA PROVOST, ANJU RANJT, ALLYSHA ROBINSON, JOHN ROSE, DIANE SCHNEIDMAN, FADIA SHAYA, IRENE STEPHENS, NATHANIEL STINSON, BETH SUTTON, CHARLES THOMSON, GARY TIMMERMAN, JOEL WEISSMAN, EMILY WILSON, MARTIN ZIELINSKI (AND OTHERS ON THE CALL ONLY)

PURPOSE OF WEBINAR ON MARCH 16

Today's webinar coincides with the *JAMA Surgery* publication of the National Research Agenda set at the 2015 NIH-ACS Symposium on Surgical Disparities Research. During the webinar, we will further discuss the agenda, its dissemination and next steps re: potential funding opportunities.

TOPICS FOR DISCUSSION:

I. Recap of Symposium Findings (*Dr. Haider and Dr. Robinson*)

- a. Five themes of surgical disparities research
- b. Five research questions per theme
- c. Five overall research questions
 - Hasnain-Wynia: Wonderful to see. Aligns with health disparities literature and broad themes seen in other conditions and specialties. Inquired about specific interventions and clinical trials, wonders about specific conversations within each theme
 - Haider: The themes speak to patient engagement and keeping patients at the center. Included in the paper are examples of research that needs to be done, not specifically clinical trials. However, some of the research questions can only be answered by clinical trials – ex. two different methods tested for improving provider-patient communication
 - Britt: The next iteration will be more granular
 - Dankwa-Mullan: In terms of patient-centeredness, a lot of clinical decision-making is impacted by provider bias. Scope of the disparities

is broad, evidence-based and patient-centered research to improve surgical care. Integrated approach.

- Britt: Who is going to address health literacy?
- Haider: The individual questions cover improving health literacy. Community outreach, patient engagement
- Kelz: It's time for surgeons to take action in the community to improve health literacy, reach out to patients where they are.
- Weissman: Minority patients are concentrated in minority areas/providers. How should this be addressed?
- Haider: Covered by #3, improving quality in hospitals especially those serving minority and low-income communities
- Loehrer: How are insurance cost, upstream policy, payment model etc. incorporated in the priorities? (other population-level factors)
- Haider: #1 in systemic factor
- Efird: Found in a recent paper that blacks that have PAD more likely to die than whites; transportation to follow up an issue
- Haider: Covered by #4, to look at the longer-term impacts. Brief explanation of authorship determination

II. Dissemination of Symposium Findings (*Dr. Haider*)

- a. Lit review of surgical disparities
 - *Under review at J Am Coll Surg*
- b. NIH-ACS symposium findings
 - *Published in JAMA Surgery on March 16*
- c. Britt: Have the college incorporate the findings in upcoming meetings and events
- d. Haider: Help surg. departments conduct research by spreading awareness about it. Britt to send paper to chairs of surg. departments through network of surg. chairs
- e. Kelz: Potential dissemination through surgical outcomes clubs and Deans of Diversity and Inclusion at medical schools
- f. Gina: Distribute short summaries and send to dean and surg chair at respective institutions
- g. Hasnain-Wynia: Subspecialty societies
- h. Britt: Advisory council of Subspecialties to facilitate this; Contact AAMC to get list of deans of diversity and inclusion and also send to AAMC for distribution

III. Additional Dissemination Opportunities

- a. Webinar Participants

IV. Next Steps from the Symposium (*Dr. Britt and Dr. Haider*)

- a. NIH Funding Priorities

- Dankwa-Mullan: Following symposium, this was presented to national council and approved as a concept; working on a funding opportunity to fund surgical disparities research; broad collab across NIH and AHRQ, significant interest expressed, office on women's health, neurologic and stroke; to fund clinical trials and evidence based research to address surgical disparities

- b. ACS Research Priorities

- c. Other steps moving forward

V. Comments from Collaborators (*Dr. Britt and Dr. Haider*)

- a. Questions and feedback

- Weissman: Upcoming young researchers; Any plan for training programs to train the next generation of health disparities researchers?

- Britt: The College will make efforts to train; it is a long term goal of the ACS

- Weissman: CMS makes data available

- Rose: Funding mechanisms, such as the F32 through AHRQ, incredibly important in training next generation of researchers in surgery

- Obesity paper?

- b. Final comments

- Gray: Shared draft of NIH announcement with AHRQ to potentially co-fund this; topics covering things like surgical complications can be funded within the patient safety area

- Britt: ACS would like to be a partner, with joint grants and the like. There's not one aspect of surgery that doesn't have health care disparities. This is our focus.

- c. Thank you and wrap-up