	Metric	Metric Description	Strategic Ideas
1.	**Data Collection**	***Basic:*** Hospital uses self-reporting methodology to collect race, ethnicity and language Race, Ethnicity, Age and Language (REAL) data for all patients. ***Intermediate:*** Hospital collects REAL data for at least 95% of their patients with opportunity for verification at multiple points of care (beyond just registration) to ensure accuracy of the data and to prevent any missed opportunities for data collection (e.g., pre-registration process, registration/admission process, inpatient units, etc.). ***Advanced:*** Hospital uses self-reporting methodology to collect additional demographic data (beyond REAL) for patients such as disability status, sexual orientation/gender identity (SOGI), veteran status, geography and/or other social determinants of health (SDOH) or social risk factors.	Basic: Utilizing EHR to collect data
2.	**Data Collection**	***Basic:*** Workforce training is provided to staff regarding the collection of patient self-reported REAL data. ***Intermediate:*** Hospital evaluates the effectiveness of workforce training on an annual basis to ensure staff demonstrate competency in patient self-reporting data collection methodology (e.g., observations, teach back, post-test, etc.). ***Advanced:*** Workforce training is provided to staff regarding the collection of additional patient self-reported demographic data (beyond REAL) such as disability status, sexual orientation/gender identity (SOGI), veteran status, geography and/or other social determinants of health (SDOH) or social risk factors.	Basic: MHA sponsored Center for Health Policy training
3.	**Data Validation**	***Basic:*** Hospital has a standardized process in place to both evaluate the accuracy and completeness (percent of fields completed) for REAL data and a process to evaluate and compare hospital collected REAL data to local demographic community data. ***Intermediate:*** Hospital addresses any system-level issues (e.g., changes in patient registration screens/fields, data flow, workforce training, etc.) to improve the collection of self-reported REAL data. ***Advanced:*** Hospital has a standardized process in place to evaluate the accuracy and completeness (percent of fields completed) for additional demographic data (beyond REAL) such as disability status, sexual orientation/gender identity (SOGI), veteran status, geography and/or other social determinants of health (SDOH) or social risk factors — and has a process in place to evaluate and compare hospital collected patient demographic data to local demographic community data.	

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4.	**Data Stratification**	**Basic:** Hospital stratifies at least one patient safety, quality and or outcome measure by REAL. **Intermediate:** Hospital stratifies more than one (or many) patient safety, quality and or outcome measure by REAL. **Advanced:** Hospital stratifies more than one (or many) patient safety, quality and/or outcome measure by REAL and other demographic data (beyond REAL) such as disability status, sexual orientation/gender identity (SOGI), veteran status, geography and/or other social determinants of health (SDOH) or social risk factors.	Basic: MHA sponsored readmission real data reports
5.	**Communicate Findings**	**Basic:** Hospital uses a reporting mechanism (e.g., equity dashboard) to routinely communicate patient population outcomes to hospital senior executive leadership (including medical staff leadership) and the Board. **Intermediate:** Hospital uses a reporting mechanism (e.g., equity dashboard) to routinely communicate patient population outcomes widely within the organization (e.g., quality staff, front line staff, managers, directors, providers, committees and departments or service lines). **Advanced:** Hospital uses a reporting mechanism (e.g., equity dashboard) to share/communicate patient population outcomes with patients and families (e.g., PFAC members) and/or other community partners or stakeholders.	Basic: report readmission REAL data outcomes to leadership/board Intermediate: report readmission REAL data outcomes to staff Advanced: report readmission REAL data outcomes to patient and family advisors and other community stakeholders
6.	**Address and Resolve Gaps in Care**	**Basic:** Hospital engages multidisciplinary team(s) to develop and test pilot interventions to address identified disparities in patient outcomes. **Intermediate:** Hospital implements interventions (e.g., redesigns processes, conducts system improvement projects and/or develops new services) to resolve identified disparities and educates staff/workforce regarding findings. **Advanced:** Hospital has a process in place for ongoing review, monitoring, recalibrating interventions (as needed) to ensure changes are sustainable.	Basic: Use readmissions REAL data to develop and test pilots to address gaps in care.
7.	**Organizational Infrastructure and Culture**	**Basic:** Hospital has a standardized process to train its workforce to deliver culturally competent care and linguistically appropriate services (according to the CLAS standards). **Intermediate:** Hospital has named an individual (or individuals) who has leadership responsibility and accountability for health equity efforts (e.g., manager, director or Chief Equity, Inclusion and Diversity Officer/Council/Committee) who engages with clinical champions, patients and families (e.g., Patient and Family Advisory Councils (PFACs)) and/or community partners in strategic and action planning activities to reduce disparities in health outcomes for all patient populations. Note: This does not have to be a member of the C-Suite. **Advanced:** Hospital has made a commitment to ensure equitable health care is prioritized and delivered to all persons through written policies, protocols, pledges or strategic planning documents by organizational leadership and Board of Directors (e.g. mission/vision/values reflect commitment to equity and is demonstrated in organizational goals and objectives). Example: #123forEquity Pledge	Advanced: If hospital signed the #123forEquity pledge (in addition to completing basic and intermediate tasks)