

---

# Race, Ethnicity, Language, Disability - REALD

(the last!) REALD Lessons Learned



# Housekeeping

- While we wait to get started...
- We are recording this session.
- Captioning has been enabled within this meeting and will appear at the bottom of your screen.
- For ASL interpreter access, click on the three dots next to the interpreter's name and select "spotlight".
- Contact Tom ([thomas.cogswell@dhsoha.state.or.us](mailto:thomas.cogswell@dhsoha.state.or.us)) if you are having technical challenges.

# Welcome

- **Last Lessons Learned – seeking feedback about future offerings**
- **General REALD Questions**
  - E-mail [OHAREALD.Questions@dhsoha.state.or.us](mailto:OHAREALD.Questions@dhsoha.state.or.us)
- **Questions about today's topics**
  - Put questions in the chat
  - Raise hand
- **Today's meeting**
  - Poll Everywhere

# Agenda

- **Updates**
  - REALD legislation update
  - REALD Phase 2 Provider extension request
  - REALD reporting materials updates
- **Using REALD data:** OHA data report and process
- **Feedback requested:** Data reports for submitters
- **Feedback requested:** The future of OHA REALD Resource gatherings

# Updates

- 2021 legislative session introduced HB 3159 REALD/SOGI (sexual orientation and gender identity)
- Phase 2 extension request
- REALD Reporting material updates
  - CSV numbering corrected
  - OCRP Organization type (required) added
  - Sign up to receive updates on reporting materials

# COVID-19 REALD Report: Review

- REALD data from COVID-19 cases and encounters in 2020
- Discussion of both data quality and descriptive epi
  - Interested in customizing future reports to specific audiences
- Application of the methodology we'll discuss today:
  - Iterative data cleaning
  - Creation of composite variables for analysis

---

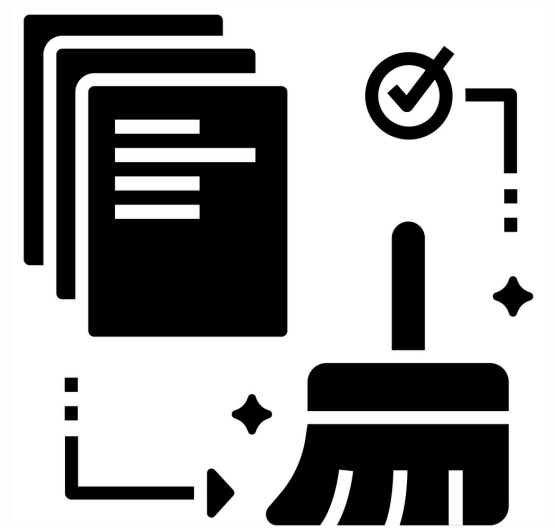
# Considerations when cleaning, aggregating REALD Data

Marjorie McGee, Ph.D. Policy Data Analyst  
Marjorie.g.mcgee@dhsosha.state.or.us  
April 2021



# Goals

- **Standardize** information for analysis
- **Maximize** information for analysis
- Create **calculated composite fields** for additional insight





# Standardize information for analysis

- **Duplicates:** Deduplicate multiple REALD records for the same person or case
  - Utilize multiple personal identifiers (e.g., record ID, name, date of birth or age, ZIP code)
- **Open-text fields:** Align responses across fields for later coding
  - Remove punctuation, group alternate spellings and closely related responses
- **Distinguish between truly missing and not applicable data**
  - Under age 5 for all language questions and all but two disability questions – these are ‘not applicable’ (hearing/vision are applicable under age 5)
  - Language spoken at home is English (only) – responses to interpreter and preferred spoken/written language would not be applicable
  - If says does not need an interpreter – would not expect response to type of interpreter

# Maximize information for analysis

- **Open-text fields:**
  - Use Tableau Prep or other tools to code up race/ethnicity open-text responses to 39 categories
- **Minimize missing data:**
  - Use language information to impute missing race/ethnicity
  - Impute aggregate level race/ethnicity data, if available, where no disaggregated REALD race/ethnicity was specified
- **Cascading of calculated variables:**
  - Use temporal element to 'cascade' and fill in missing values for calculated variables  
*(do not change original data)*

# Calculated composite fields for additional insights

- **Primary race/ethnicity:** Impute missing r/e with most identify/rarest group method (after cascading primary identity if indicated)
  - Assign those who indicate having two or more racial/ethnic identities but did not indicate a primary group
  - Increases chance of discovering the health needs of groups who are typically underrepresented in health data
- **English Proficiency:**
  - Two ways to create Limited English Proficiency (LEP variables) using English proficiency question (How well do you speak English? (“very well”, “well”, “not well”, “not at all”))
    - “well”, “not well”, “not at all” = limited in English proficiency (Census approach)
    - “not well”, “not at all” = limited in English proficiency

# Calculated composite fields for additional insights

- **Disability** – 2 of various possibilities
  - Map the **four** domains of disability (i.e., vision, hearing, mobility and cognitive) and **proxies for severity represented** in the disability questions
    - See page 99 in the [REALD Implementation Guide](#) for example (Table 14a)
  - **Combine age-acquired with type of disability.** See the [February REALD Covid Report for 2020](#) – page 19 for an example
    - Non-disabled
    - Acquired disability before age 19:
      - Acquired cognitive/mental health disabilities
      - All others
    - Acquired disability between age 19-49
    - Acquired disability after age 49

# Next steps

- OHA is developing REALD guidance
  - Standard coding and mapping of REALD race/ethnicity categories to OMB, HRSA standards building on conventions used for ONE-IE by OEI
  - Syntax for processing and cleaning in a variety of languages (e.g., with Stata, Tableau Prep)
  - Share data dictionary and codebooks
- **Future state:** Report REALD using composite (calculated) variables in the same manner across datasets

# Poll Everywhere

- Access the poll
  - When the poll is active, go to:  
<http://www.PollEv.com/thomascogswe491>, or text THOMASCOGSWE491 to 22333 to join
- Technical difficulties?
  - E-mail: THOMAS.COGSWELL@dhsoha.state.or.us

# Feedback requested: REALD Reporting Measures

# Evaluating REALD Data: completeness and analysis

- Initial proposal for people to react to – **we welcome your ideas and input!**
- **We will assess what's feasible to provide and be in touch**

## Questions to keep in mind:

- Has your organization looked at the completeness of your REALD data?
- Would your organization be interested in receiving a report from OHA evaluating the completeness of your REALD data?
- How often would you like to receive a report?



# Proposed metrics in a semiannual report

- Number of REALD reports, total
  - By organization type (health systems, hospitals, FQHC, LTCF)
  - By encounter type (tests, deaths, hospitalizations, MIS-C)
  - By disaggregated race/ethnicity
  - By language
  - By disability
- % missing/unknown/declined for each question
- Recommendations for improving data quality

## Questions:

- Have you looked at the completeness of your REALD data?
- Want a report of your REALD data from OHA?
- What report frequency would be useful?

**Feedback requested:  
Future REALD Gatherings**

# What's next for REALD Resource gatherings?

## Past OHA REALD Technical Assistance:

- REALD Technical Work Group
- REALD Lessons Learned
- REALD Office Hours

## Future OHA REALD Technical Assistance?

- What topics do you want to hear about?
- Would your organization be willing to present at a future meeting?

# What's next for OHA REALD Resource gatherings?

- A Community of Practice: Using REALD data?
  - OHA/Providers co-develop REALD CoP, focusing on topics such as:
    - Sharing knowledge, resources and expertise
    - How best to ask REALD questions
    - Effective practices for workflow
    - Data cleaning protocols
    - Data analysis approaches
    - Explore opportunities for automation to improve efficiency
- Networking opportunities with same EHR organizations?

# REALD Resources

- HB 4212 and REALD:  
<https://www.oregon.gov/OHA/OEI/Pages/REALD-Providers.aspx>
- REALD Response Guides: Asking REALD Questions  
<https://www.oregon.gov/oha/OEI/Pages/REALD.aspx>
- COVID-19 Reporting Portal - [healthoregon.org/howtoreport](http://healthoregon.org/howtoreport)
- REALD CSV File [Specifications](#)
- [Listserv](#) to receive updates on changes to REALD reporting materials  
On the page REALD Reporting for COVID-19 Encounters