



# Building on Health Equity Plans: Towards a Strategic Approach to Measurement of Impacts on Health Inequities

**18th International Conference On Health  
Promoting Hospitals & Health Services**

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# Background

- Toronto Central Local Health Integration Network
  - Coordinating organization
- Hospital Collaborative for Marginalized Populations
- Health Equity Templates

# Hospital Health Equity Templates

- *Provide a baseline of activity* occurring in hospitals across the LHIN to promote and advance health equity (including current practices, gaps, improvement plans, and data collected)
- Inform how health equity may be addressed in *the Hospital-Service Accountability Agreements*
- Inform how similar equity information may be gleaned from the *community sector*
- Provide critical information for *the Integrated Health Service Plan* refresh
- Provide information to hospitals about practices occurring throughout the sector, to facilitate *sharing of best practices and potential collaboration.*

# An Outline of the Health Equity Template

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Access, Priority Setting and Planning

Promising Practices

Policies, Procedures and Standards

Governance

Targets and Measurement

Communications

Potential Roles for the Toronto Central LHIN

# Definition of Health Equities

- “Health disparities or inequities are differences in health outcomes that are avoidable, unfair and systematically related to social inequality and disadvantage. “

(Gardner, 2008)

- Some definitional challenges:
  - Defining health equities at the hospital level
  - System vs. hospital level measures of health inequities
  - Performance measures of health inequities

# Challenges for Action

- The product-process tension
- The challenges of complexity
  - The need for strategic action (“careful staging,” “momentum building”)
  - Building coherence in actions
- Standardization vs. Heterogeneity
  - E.g. Runnymede or Casey House vs. Mount Sinai
- The tension between reach and performance measurement

# Taking Stock (1)

- **Hospitals are already doing a lot to address problems of health inequities.**
- Hospitals put **considerable thought and effort into developing the hospital health equity plans.**
- **Lots of promising practices – but there is a need for strategic coherence.** TCLHIN can help bring such a strategic coherence
- TCLHIN needs to **take the lead in taking a strategic approach to evaluating promising practices and identifying practices that need to be “spread”** across all of the hospitals and potentially the health care system

# Taking Stock (2)

- **Hospitals are quite varied in terms of their practices, capacities, information about equity and the nature of the issues they face.** It will therefore be a challenge to develop a standardized performance system for hospitals.
- **TCLHIN has an important role in translating provider plans into a system-wide response to health inequities including helping define success at the hospital and health care system levels, and promoting coordinated actions and accountability, chiefly through accountability agreements.**
- **In the near-term, hospitals are looking to the TC LHIN to help them incorporate health equity measurement into existing performance measurement and management processes**

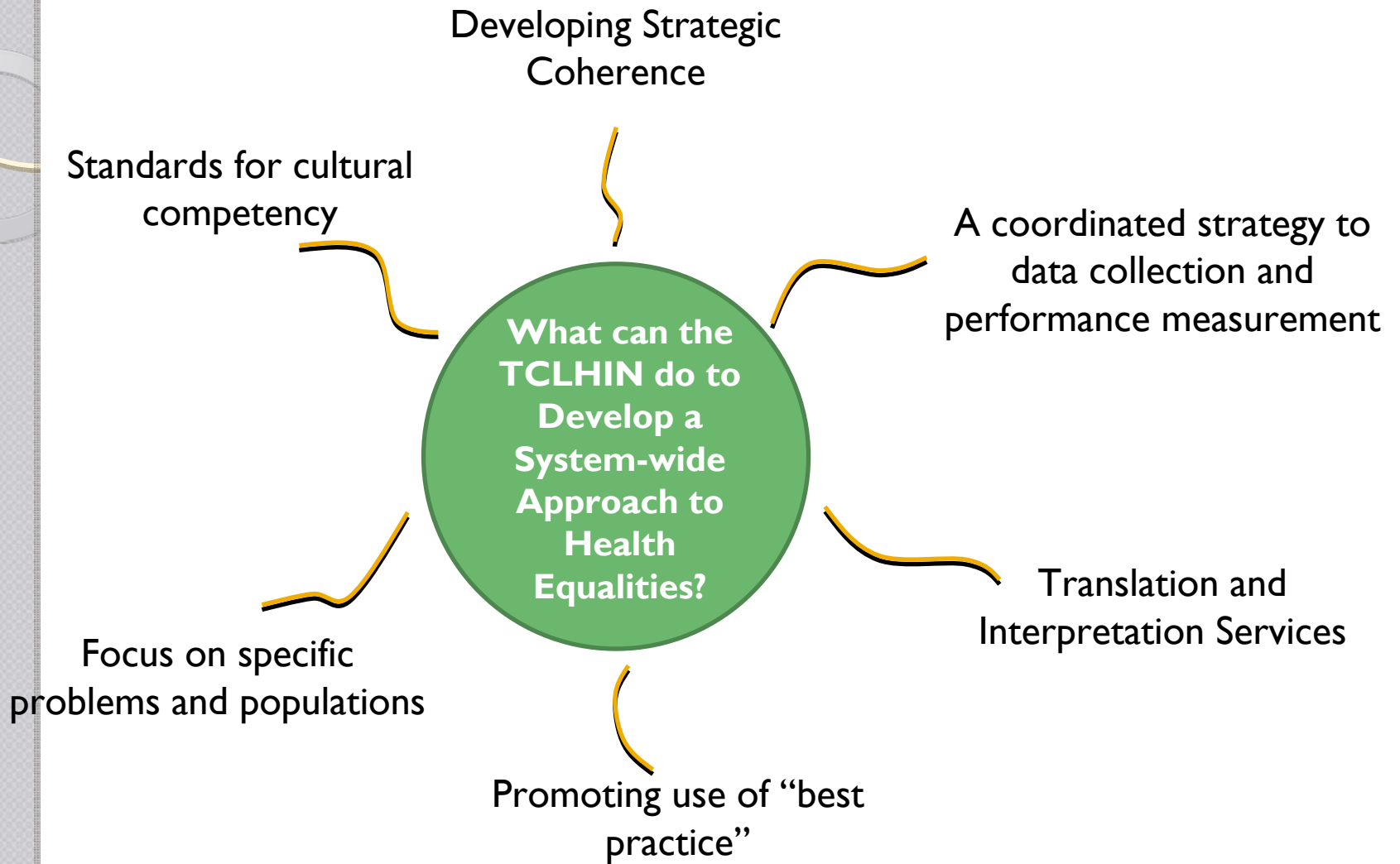
# What can the TCLHIN do to Develop a System-wide Approach to Health Equalities? (1)

- Developing Strategic Coherence
  - Short to mid-term
- A coordinated strategy to data collection and performance measurement: a coherent strategic response is dependent upon reliable and relevant data.
  - Short to mid-term
- Translation and Interpretation Services
  - Short term



## What can the TCLHIN do to Develop a System-wide Approach to Health Equalities? (2)

- Promoting use of “best practice”
  - Short to mid-term
- Focus on specific problems and populations
  - Mid to long-term
- Standards for cultural competency
  - Mid to long-term

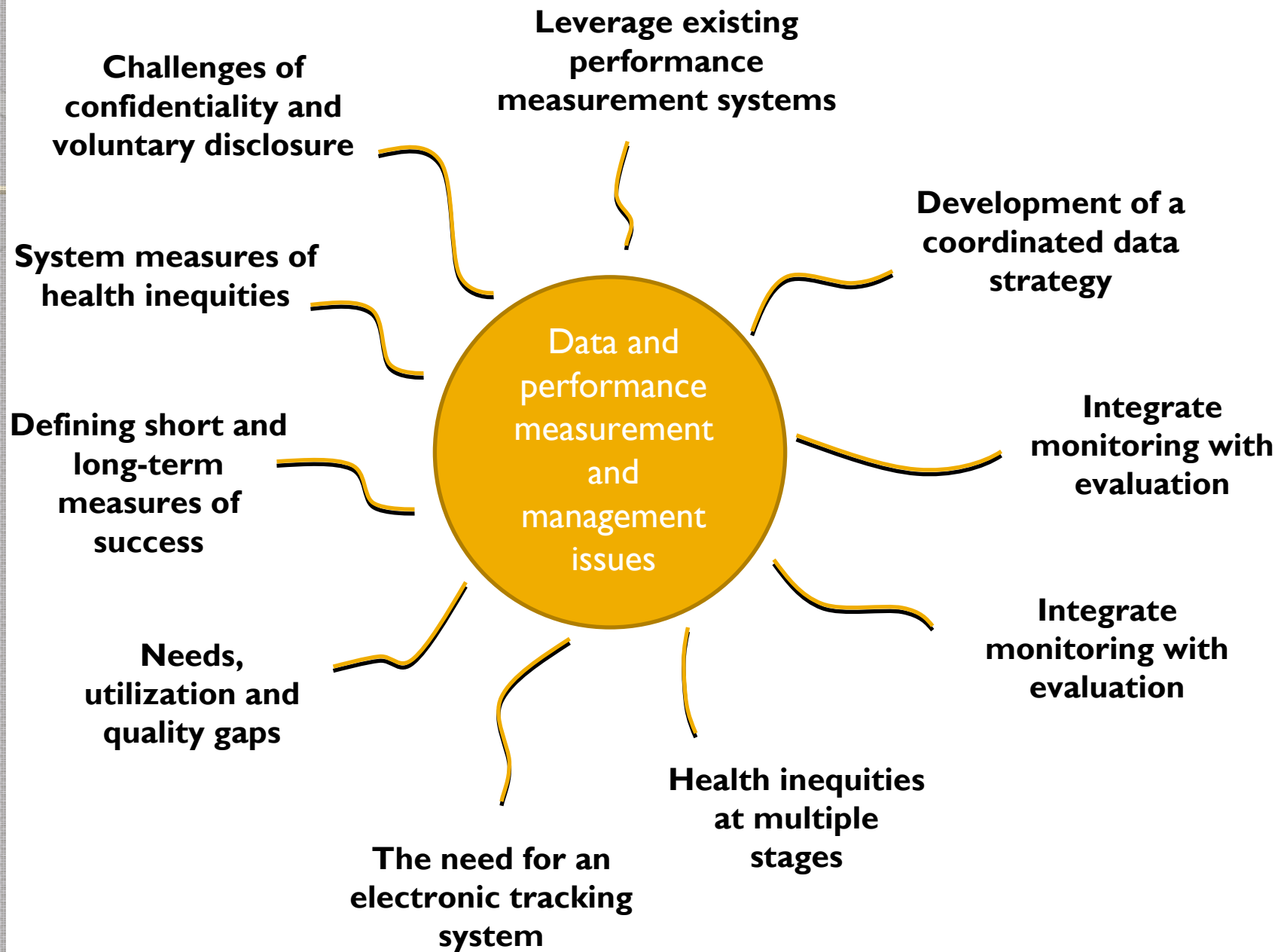


# Data and performance measurement and management issues (1)

- **Leverage existing performance measurement systems:** A key challenge is to integrate existing balanced scorecards with concepts and measurement of health equities.
  - Short to mid-term
- **Development of a coordinated data strategy:** It is critical that data is not collected piece-meal—TCLHIN has a key role in leading the development of a coordinated strategy, setting out what kinds of data are to be collected, and for what purposes.
  - Short to mid-term
- **Integrate monitoring with evaluation:** A strategic approach to performance measurement needs to include both monitoring and evaluation components
  - Mid to long-term
- **Health inequities at multiple stages:** The importance of examining inequities at multiple points of the patient flow through the health care system.
  - Mid to long-term

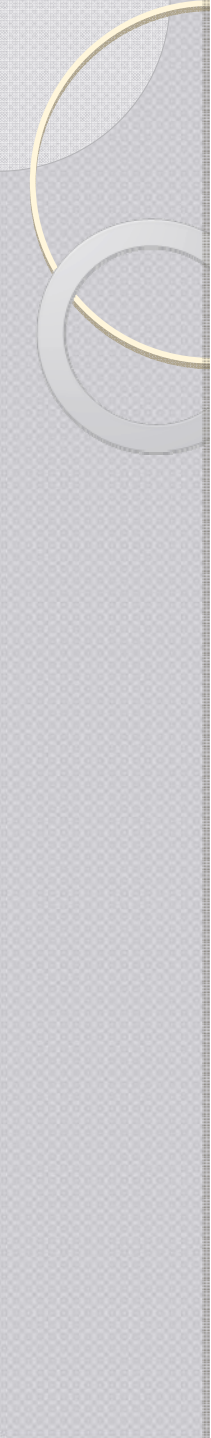
# Data and performance measurement and management issues (2)

- **The need for an electronic tracking system**
  - **Mid-term**
- **Needs, utilization and quality gaps:** Data is critically needed for examining the needs, utilization patterns and quality gaps in hospitals. Such data would not just be useful for monitoring and evaluation but would also help the hospitals **plan their health equity activities.**
  - **Short to mid-term**
- **Defining short and long-term measures of success:** A number of hospitals want guidance from the LHIN in defining success in addressing health equities both in the short and long run.
  - **Short to mid-term**
- **System measures of health inequities:** An additional question that the TCLHIN needs to focus on is measurement at the system-level
  - **Mid to long-term**
- **Challenges of confidentiality and voluntary disclosure**
  - **Short to mid-term**



# Ideas for Next Steps

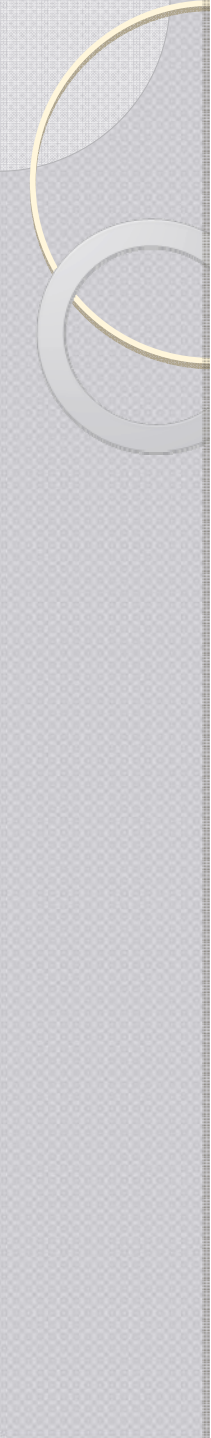
- **Potential “Quick Win” Coordination**
- TCLHIN needs to develop and implement a near-term action plan in the next six months. In addition to addressing significant issues, implementing some of these initiatives can lead to greater buy-in from hospitals for the process of addressing health inequities.
  - **Coordination of services for language interpretation/ translation services**
  - **Coordinating best practice dissemination**

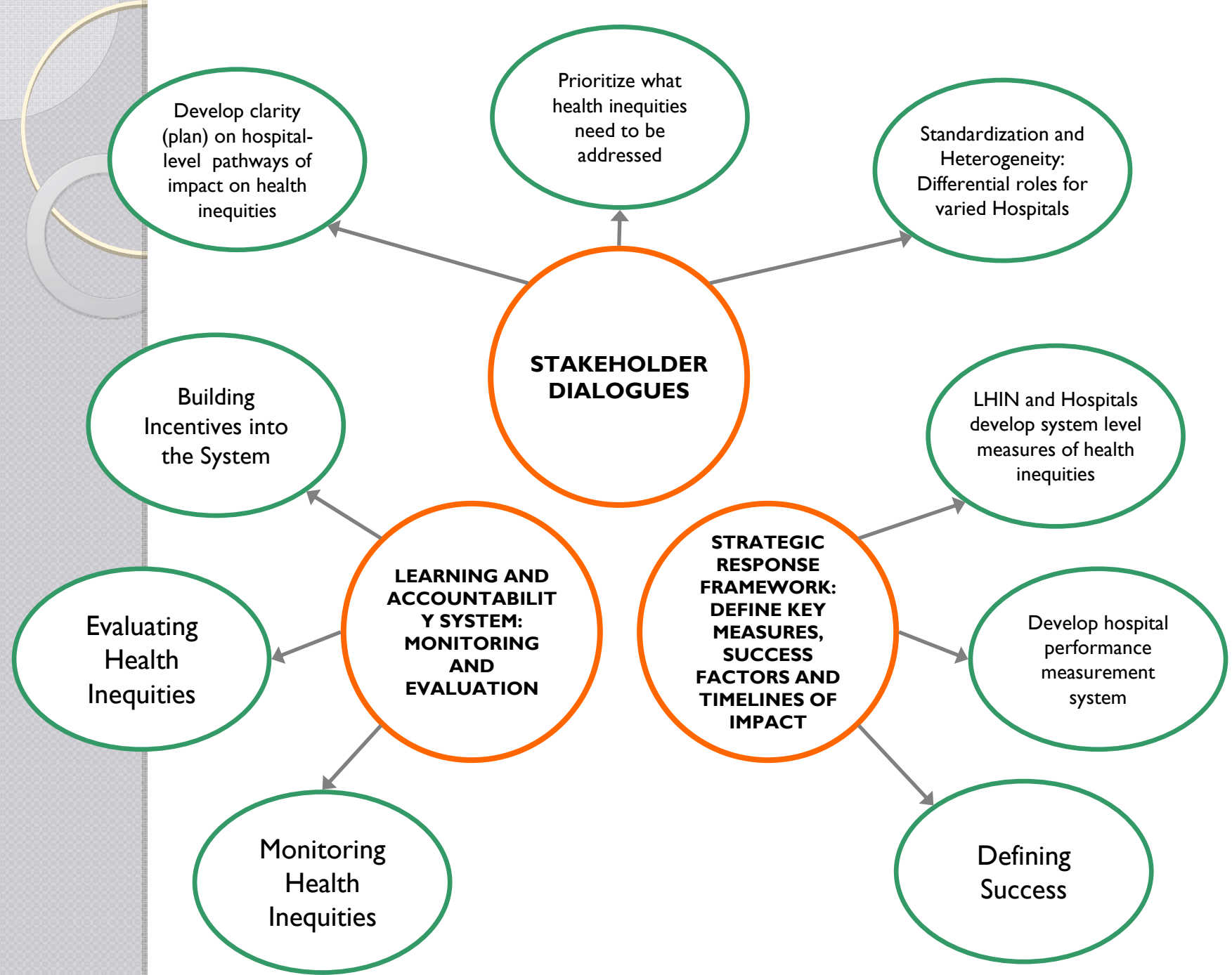
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- **Immediate action to develop a performance measurement and management system for health equity.**
  - These are all projects that could be initiated within months and have timelines of no more than a year
    - **Refresh Hospital Health Equity Plans**
    - **A coordinated data collection strategy**
    - **Build Equity Into Service Accountability Agreements**
    - **Conduct a ‘Taking Stock’ Annual Forum for Health Service Providers**
    - **Project to make recommendations on integrating health equity perspectives within existing balanced scorecards or other strategic planning and performance management tools**



## ***Building into the mid and longer term***

- Analyzing the implications of the very different missions, scope of services and resources of the various hospitals: for example, what is the most effective mix of hospital-specific and common measures?
- The TC LHIN and hospitals will need to figure out **what indicators are best to assess at an individual hospital level, and what to monitor at a system-wide level.**
- Developing better understanding of the cost of health disparities and the **cost-effectiveness** of different interventions

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- **Further developing a coherent evaluation and monitoring strategy** to be able to assess progress, identify successful and promising programs and services, and build on what works well
  - **Building effective and responsive partnerships between hospitals and community.** This includes thinking through how to use hospital and eventually community HSP health equity plans and accountability agreements as mechanisms to promote cross-sectoral partnerships



# Strategic Response Framework

- How will health inequities be measured at the overall LHIN level? How will inequities be measured at the neighborhood/community level? What is the relationship between the system level and hospital level measures of health inequities?
- What is the relationship between reach, results and resources? How does the performance measure provide incentives to increase reach? What incentives are built into the performance measure to address health inequities?
- ***What will success look like for each hospital in the short term? What will success look like in the long term? Will different hospitals have different measures of success?***

# Learning and Accountability System

- How will progress in addressing health inequities be **monitored**? How will TCLHIN provide feedback to the hospitals? **Organizational structure of such a learning and accountability system?**
- In addition to monitoring, will there be **evaluations** of specific hospital initiatives?
- What incentives are there for the system to sustain itself? What is the evidence that the system is learning?

# The Website

- The Website
  - [www.torontoevaluation.ca/tclhin](http://www.torontoevaluation.ca/tclhin)



# Analysis of the Hospital Health Equity Plans

USEFUL KNOWLEDGE

## Executive Summary



## Knowledge Nuggets



## The Detailed Report



## Appendices



This website serves to disseminate lessons learned from the Analysis of the Hospital Health Equity Plans.

We are especially keen to draw links between our findings and a performance measurement and management system for Health Equities for the Toronto Central LHIN.

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If you have about **two hours** to spend, read the **executive summary**.

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