

EQUITY WALKTHROUGH POCKET CARDS FOR EMERGENCY

*Look at your environment to
assess the extent to which
equity is promoted.*

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LOOK. LISTEN. FEEL.

What do you notice as you
approach the building?
Enter the building? The ED?



THINK ABOUT IT.

What is welcoming or
unwelcoming as you enter the
Emergency Department?



LOOK. LISTEN. FEEL.

What do the staff (clerk, security,
triage nurse, volunteer) convey?
Observe facial expressions,
tone of voice, body language,
what is said.



THINK ABOUT IT.

How do staff engage with people
who appear to have some
challenges focusing on questions
being asked?

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Hospital Entrance

Triage



LOOK. LISTEN. FEEL.

If you had to describe the space to
someone in two words, what
would you say?



THINK ABOUT IT.

Who would feel least comfortable?
Why?

Waiting Areas

3



LOOK. LISTEN. FEEL.

What happens in the hallway?



THINK ABOUT IT.

How is privacy respected in
this space?

Hallways

4



LOOK. LISTEN. FEEL.

What does each form draw
attention to?
What does each form overlook?



THINK ABOUT IT.

How does the form position you in
relation to the patient?

Forms & Documentation

5

Triage Additional Questions

LOOK. LISTEN. FEEL.

- Where is triage located within the ED? How do people know where it is and how they are supposed to go there?
- How are people greeted and by whom?
- How many people do you notice in triage? Who are the people? What staff are there? Are there nurses? Security guards? Clerks?
- What questions are asked and in what order? Review the intake form. What does it draw attention to? From what does it detract attention?

THINK ABOUT IT.

- When staff engage with patients and families do you think that they consider what is affecting people's health? For example, do you think staff take into consideration the challenge someone might have faced in traveling to the ED?
- How do staff engage with people who do not speak English as a first language? Does anything about their communication change?
- Do the staff take into consideration age or level of physical ability in their interactions? For example, how do they speak with elderly patients? Are patients able to sit at triage or are they standing?

Hospital Entrance Additional Questions

LOOK. LISTEN. FEEL.

- Is it clear how you are supposed to enter?
- Who is present? Speaking? What do you observe about people? What do you notice about people's facial expressions, their posture, or how they are sitting, laying or standing?
- Who is communicating with whom? How are people communicating? What is their tone of voice?
- Are people making eye contact? If so, who is making eye contact with whom?

THINK ABOUT IT.

- Who would feel welcome here? Do you feel welcome here? Why?
- What tone does the signage convey? Who do you imagine decides about the signage? What influences those decisions?
- What things or people in the space might deter people from engaging with triage or reception to get the care they need?

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For more information about EQUIP Health Care please visit:
www.equiphealthcare.ca

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Forms & Documentation Additional Questions

LOOK. LISTEN. FEEL.

- Review the intake sheet.
- What language/terminology is used to describe patients?

THINK ABOUT IT.

- What do the forms guide you to say?
- Whose interests/concerns are prioritized?
- How does the form shape your perspective of power/authority?
- What does the form tell you about the health care system?

Hallways Additional Questions

LOOK. LISTEN. FEEL.

- Who and what do you see?
- What do you see that is influencing what happens in the hallway?
- What does the area look like? What is the noise level?
- What kinds of signs are in the hallway and what do they say?
- Is there emergency equipment in the hallway? If so, what does it look like? How accessible is it?
- What, if any, staff are in the hallway? What are they doing?
- What do patient-staff encounters look like in the hallway? What are they doing?
- If there are any patients and/or family members in the hallway what are they doing?

THINK ABOUT IT.

- Who would feel comfortable in this space? Why?
- How is privacy and confidentiality protected in this space?

Waiting Areas Additional Questions

LOOK. LISTEN. FEEL.

- What is the strongest feeling you have as you enter the waiting room? What does it look like?
- Are snacks, water, and washrooms available and accessible?
- What do you notice about the patients waiting here? Do they seem comfortable to you? Are they talking to one another?
- Notice who is helping people. Who is talking to the patients? Who is helping if someone appears distressed or uncomfortable?
- What do you see that is relevant to think about for people's privacy about their identity or health issue that brought them to the ED?

THINK ABOUT IT.

- What does the signage convey?
- Where are the security personnel in relation to this space?



LOOK. LISTEN. FEEL.

How would you describe the space? Warm, cold, cozy, sterile?

Treatment Areas

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THINK ABOUT IT.

Are the rooms set up to best serve patients or staff? Whose priorities are given precedence here?



LOOK. LISTEN. FEEL.

How do people access the bathroom?

Bathroom

7



THINK ABOUT IT.

What is the tone of signage here? Why might this tone be used in this area?



LOOK. LISTEN. FEEL.

What types of interactions happen between staff in this area?

Staff Charting Area

8



THINK ABOUT IT.

How much consideration do staff give to how their interactions may be interpreted by patients nearby?



LOOK. LISTEN. FEEL.

How does discharge typically happen? Is it rushed? Planned? Abrupt? Calm?

Discharge

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THINK ABOUT IT.

How do you think patients are left feeling after discharge?

Staff Charting Areas Additional Questions

LOOK. LISTEN. FEEL.

- How are the charting areas set up? Who can see whom? Who and what are they designed for?
- What sort of desk exists and how open is the space between staff and patients?
- Who can read the charts?
- What is readily visible on computer screens or other displays as you walk through these areas?
- Are any smart phones visible? How are they being used?
- What type of access do patients and/or family members have to the charting areas?

THINK ABOUT IT.

- How aware are patients of the work required for charting? Do they understand why the staff are there?
- How are patients being discussed in the charting areas? How are they referred to?

Bathroom Additional Questions

LOOK. LISTEN. FEEL.

- Where are the bathrooms? To whom are they accessible?
- Is a key needed?
- How would you describe this space?
- Are there adequate hygiene supplies in the bathroom?
- Is there a safe space to dispose of sharps?
- Are the bathrooms gendered? Is there a nongendered bathroom?
- Is the bathroom clean?
- Is there any readily available information about how to obtain assistance when in the bathroom?
- What is outside of the bathroom? Who is outside the bathroom?

THINK ABOUT IT.

- Who might feel uncomfortable in this space? Why?

Treatment Rooms Additional Questions

LOOK. LISTEN. FEEL.

- What is the layout of the rooms? Who is in the rooms?
- Are there different treatment rooms for various patient health issues (e.g. gyne rooms, mental health observation and treatment rooms)?
- How do patients get transferred to the rooms? Who accompanies them? Who is allowed with them?
- How are staff identified to patients in the rooms?
- How are decisions made about who physicians will see first in the treatment rooms? For example, how are patients prioritized? In order of arrival or do nurses set a priority rating for how patients are seen?

THINK ABOUT IT.

- Who would feel respected in these spaces? Why?
- What small thing could be changed to make it a more welcoming space?
- Whose priorities are given precedence here?
- If patients have the same CTAS scores, how are they seen? In order of admission or some other way. Who decides?

Discharge Additional Questions

LOOK. LISTEN. FEEL.

- What is the process for discharge?
- How are people provided with information for follow up?
- Do conversations about safety and supports at "home" happen on discharge?
- Are harm reduction resources/supplies provided as necessary?

THINK ABOUT IT.

- What might patients be experiencing and thinking about as they are being discharged? Do they seem to just want to get out of the ED or are they engaged as part of the discharge process?
- Do the staff check in with patients to see how well they understand the discharge information? Do they provide opportunity for questions?
- What do patients require as part of a safe and realistic discharge plan?