EQUIP Health Care
Equipping Health & Social Services for Equity

Rate Your Organization

10 Strategies to Guide Organizations in Enhancing Capacity for Equity-Oriented Health Care

Please review the "Key Dimensions of Equity-Oriented Health Care" Tool on the EQUIP Health Care website.

On the **Key Dimensions of Equity-Oriented Health Care Tool**, you'll see 10 Strategies to Guide Organizations in Enhancing Capacity for Equity-Oriented Services. Use this worksheet to assess your own organization, agency, or setting in terms of the 10 strategies below. The goal is to support dialogue and action among all staff to enhance capacity for equity-oriented health care.

This is designed as a group activity, with all staff. It can be used across organizations, and is intended as a prompt for discussion and action-planning among people within the same organization or unit. It is intended to contribute to processes of organizational change by

(a) creating space and opportunity for ongoing collective and individual reflection and input,

(b) assessing where the organization or unit is 'at' with respect to health equity, and

(c) engaging in priority-setting, action planning, and monitoring.

Instructions:

Take about 10 minutes to individually score your organization on each strategy. After everyone is done:

1. Each person identifies whether they would like to start discussion with the first strategy, or another strategy, and why (less than 1 minute per person).
2. Aim for group consensus about the first strategy for discussion.
3. Each person gives their rating, and why, on the first strategy (~1 minute each). Ideally, the order of speakers should be volunteer-based, and nobody should be forced to speak – it's important for people to feel safe and comfortable from the start!
4. As a group, consider the following questions:
   - What are the similarities among ratings?
   - What are the differences among ratings, and what accounts for these differences?
   - What does the group learn from the discussion of ratings?
   - What are the implications for action?
5. After about 10 minutes, repeat with a second strategy, ensuring that each person can discuss their rating and rationale, if they wish. Depending on the group and time available, work through the strategies in order, OR focus on two or three strategies that are most relevant.
6. A next step can be to conduct and "Equity Walk-Through" and/or start to gather the insights gained from this discussion into a SWOT (Strengths, Weaknesses, Opportunities and Threats) format or SOAR (Strengths, Opportunities, Aspirations and Results) format.

To further discussion and planning, take guidance from experts, including people who access and/or have accessed care. An example of a patient experience survey, the Equity-Oriented Health Care Scale, can be found here.

EQUIP Health Care
Equipping Health & Social Services for Equity

Rate Your Organization

10 Strategies to Guide Organizations in Enhancing Capacity for Equity-Oriented Health Care

Rate your organization, where 0 = "not at all attending to this strategy", and 10 = "fully attending to this strategy".

1 Explicit commitment to equity

Equity is identified as a strategic priority of the organization and leadership is committed to improving equity at all levels of the organization.

2 Supportive structures, policies, and processes

Structures, policies, and processes related to hiring, performance evaluation, recognition, rewards and compensation, continuing education, and staff meetings all are viewed with respect to equity. For example, staff whose values align with the commitment to equity are recruited, hired and retained. There are also dedicated resources in the budget to support equity work.

3 Re-envision how time is used

For example, flexibility with scheduling appointments recognizing patients facing structural vulnerabilities may not arrive on time, or keep scheduled appointments, or may only seek emergency care. How well does the practice accommodate patients seeking more time for procedures? How well are the tensions between the need to produce (efficiencies) and the needs of priority patient groups (appropriateness) planned and accounted for?

4 Attend to power differentials

In your organization, this refers to all staff having some influence on how the organization's work activities are carried out. During interactions with patients, this means paying attention to how you might be perceived as intimidating to patients, regardless of your intention or actions that are aimed at making patients feel comfortable and welcome.

5 Tailor care, programs and services to context

Context refers to the broader cultures, structures, political systems, and local communities within a particular place. It is important to know and understand these to effectively tailor services to local contexts. How well has the organization tailored care to uniquely address the known barriers to access care for underserved populations? How distinct is the organization from mainstream practices? For example, how well are financial barriers addressed for people without benefits or with public plans and experiencing poverty?

EQUIP Health Care
Equipping Health & Social Services for Equity

Rate Your Organization

10 Strategies to Guide Organizations in Enhancing Capacity for Equity-Oriented Health Care

Rate your organization, where 0 = "not at all attending to this strategy", and 10 = "fully attending to this strategy".

6 Actively counter racism and discrimination

For example, staff members actively respond to discriminatory comments when they encounter them. Claims of discrimination are also considered seriously, regardless of intention. Practice is free of discrimination and differential treatment based on income level and source of income and health benefits. Practice is free of discrimination based on social location, life histories and health challenges such as substance use, experiencing homelessness, poor hygiene or less-typical appearance or behaviours.

0 10

7 Promote community + patient participatory engagement

Patients and community members have an active voice in their care and are encouraged to provide feedback to the organization. Does the organization have deliberate practices to engage patients in planning processes or through a patient committee?

0 10

8 Tailor care, programs and services to histories

Some people may be survivors of multiple forms of violence with traumatic effects, while still experiencing current and ongoing interpersonal violence (including racial violence and intimate partner violence), and ongoing structural violence (such as systemic and organizational racism, absolute poverty, etc.). How well is this reflected in the care and services provided? What is the history with First Nations peoples in that area? How well does your organization know the local context? How well is that reflected in the care and services provided?

0 10

9 Enhance access to social determinants of health

Some aspects of people's everyday lives have major impacts on health – for example, access to affordable, safe housing, income level above the poverty line (social assistance/disability incomes are not), and interactions in the social world that are respectful, non-stigmatizing, and non-discriminatory. How well do payment policies and practices respond to economic vulnerabilities and the limitations of public policy plans? How are the determinants of health acknowledged as part of treatment and prevention? How are Electronic Medical Records used to document the social determinants of health?

0 10

10 Optimize use of place and space

What messages are reflected in the way the space is designed? Is the space designed to be inclusive of those who typically are marginalized? Would people from priority populations see themselves reflected in the design of the space? Are services located in the neighborhoods where people who are underserved may likely reside? Are transportation issues (including cost) considered?

0 10

Key Dimensions of Equity-Oriented Health Care

Published in: Browne, A. J., Varcoe, C., Ford-Gilboe, M., Wathen, C. N., Smye, V., Jackson, B. E., . . . Blanchet Garneau, A. (2018). Disruption as opportunity: Impacts of an organizational health equity intervention in primary care clinics. International Journal for Equity in Health, 17(1), 154. doi:10.1186/s12939-018-0820-2

10 Strategies to Guide Organizations in Enhancing Capacity For Equity-Oriented Services

- Explicitly commit to equity
- Develop supportive organizational structures, policies, and processes
- Re-vision the use of time
- Attend to power differentials
- Tailor care, programs and services to local contexts
- Actively counter racism and discrimination
- Promote meaningful community + patient engagement
- Tailor care to address inter-related forms of violence
- Enhance access to the social determinants of health
- Optimize use of place and space

References

The evidence-base for this exercise is based on research published in:

Browne, A. J., Varcoe, C., Ford-Gilboe, M., Wathen, C. N., Smye, V., Jackson, B. E., . . . Blanchet Garneau, A. (2018). Disruption as opportunity: Impacts of an organizational health equity intervention in primary care clinics. International Journal for Equity in Health, 17(1), 154. doi:10.1186/s12939-018-0820-2

Browne, A. J., Varcoe, C., Lavoie, J., Smye, V., Wong, S., Krause, M., . . . Fridkin, A. (2016). Enhancing health care equity with Indigenous populations: Evidence-based strategies from an ethnographic study. BMC Health Services Research, 16(544). doi:10.1186/s12913-016-1707-9

Browne, A. J., Varcoe, C., Ford-Gilboe, M., & Wathen, C. N., on behalf of the EQUIP Research Team. (2015). EQUIP Healthcare: An overview of a multi-component intervention to enhance equity-oriented care in primary health care settings. International Journal for Equity in Health, 14(152). doi:10.1186/s12939-015-0271-y

Browne, A. J., Varcoe, C., Wong, S. T., Smye, V. L., Lavoie, J. G., Littlejohn, D., . . . Lennox, S. (2012). Closing the health equity gap: Evidence-based strategies for primary health care organizations. International Journal for Equity in Health, 11(59), 1-15. doi:10.1186/1475-9276-11-59

How to cite this document

EQUIP Health Care. (2021). Rate Your Organization: 10 Strategies to Guide Organizations in Enhancing Capacity for Equity-Oriented Health Care. Vancouver, BC. Retrieved from www.equiphealthcare.ca

Version | November 2023

To learn more about EQUIP Healthcare, please visit www.equiphealthcare.ca

CIHR IRSC
Canadian Institutes of Health Research
Instituts de recherche en santé du Canada