

## Workshop Summary Report: Integration of Novel Inequity Measurement Practices in Hospital Reporting

### Event Overview

**Dates:** April 17<sup>th</sup> and 18<sup>th</sup>, 2024.

**Venue:** Institute for Better Health Office, Mississauga, Ontario

### Introduction

It is well established that there are deeply rooted inequities within our healthcare systems in Canada and globally. Recognizing these inequities has led to many efforts to explore how inequities can be measured so that they can be addressed and ultimately reduced over time. While many steps have been taken across different jurisdictions to measure these inequities, no single agreed-upon approach exists to measure inequities in healthcare service delivery or design. Recognizing this, researchers at the Institute for Better Health (IBH) at Trillium Health Partners (THP), one of Canada's largest health systems, hosted a two-day inequity measurement workshop in April 2024 which aimed to:

- Gain insight into the inequity measurement processes currently being implemented in health systems across Canada and internationally to understand what works and what the challenges are;
- Share how equity data is being collected, shared, and used to reduce inequities, and;
- Discuss next steps, including how to move forward to meaningfully integrate inequity measurement processes within health systems.

Understanding gaps in service use is critical, and we believe every hospital and health system should be able to report on who is, and is not, being served within their system and where disparities exist to better plan and orient services to reduce these disparities. At our inequity measurement workshop, we learned more about the efforts being made across different jurisdictions and health systems in this area, and shared what THP has been doing to measure inequities. This report summarizes key learnings from this workshop to inform ongoing efforts related to inequity measurement within our health systems to ultimately reduce disparities and improve health service delivery. We thank every attendee for their valuable contributions to this workshop and look forward to continued, collaborative efforts to advance inequity measurement across our systems.

### Workshop Profile:

On April 17<sup>th</sup> and April 18<sup>th</sup> 2024, researchers at IBH hosted a two-day inequity measurement workshop in Mississauga, Ontario, funded by the Canadian Institutes of Health Research

(CIHR). The workshop brought together community-based organization representatives, researchers, health equity leaders, health system leaders, academic partners, students and more from across Canada and the United Kingdom to discuss new and existing approaches to measuring inequities and potential next steps that can be taken to develop an approach that can be used across systems to increase system accountability and reduce existing disparities. Through enriching discussions, participants learned about local and international processes for inequity measurement, how to support the communities they serve, and how we can integrate inequity measures into reporting metrics as health systems. We hope that the conversations we had here will lead to work toward having an accepted approach to inequity measurement, and we see this workshop as the beginning of an ongoing discussion about how we can work collaboratively across systems to reach this goal.

**Attendees:**

The workshop hosted 45 individuals from across Canada (Nova Scotia, British Columbia, and across Ontario) and the United Kingdom, who attended the workshop on both days. These individuals represented community-based organizations, provincial health systems, research institutions, and more, including:

- Toronto Metropolitan University, School of Medicine
- Northern Ontario School of Medicine (NOSM) University
- Dalla Lana School of Public Health, University of Toronto
- Healthy Populations Institute, Dalhousie University
- Wilfrid Laurier University
- Newcastle University, England
- The Black Health Equity Lab, University of Toronto Scarborough
- Western University
- Temerty Medicine, University of Toronto
- Office for Health Improvement and Disparities, England
- Institute of Health Policy, Management and Evaluation, University of Toronto
- Indus Community Services
- Brampton Senior Citizens Council
- LAMP Community Health Centre
- Regional Diversity Roundtable
- Canadian Mental Health Association (CMHA) Peel-Dufferin
- CarePoint Health
- Roots Community Services
- Partners Community Health
- Fraser Health Authority
- Thunder Bay Regional Health Services Centre
- Peel Public Health
- Public Health Ontario
- University Health Network
- Ontario Health
- Trillium Health Partners
- Canadian Institute for Health Information (CIHI)
- Ontario Hospital Association (OHA)
- Nova Scotia Health

## Workshop Themes

Over the course of two days, we explored various themes related to inequity measurement. Each theme is described in further detail below.

### **Theme I: Current Gaps and Approaches to Inequity Measurement in Canadian Health Systems**

In this theme, we covered examples and experiences of measuring inequities across different jurisdictional contexts in Canada, and barriers and facilitators to inequity measurement within these settings. Speakers included Geoff Hynes (CIHI), Brianne Wood (Thunder Bay Regional Health Services & NOSM University), Shehzad Ali (Western University), and moderator Laura Rosella (IBH).

### **Spotlight Panel: Community-Based Organization Perspectives on the Need for Inequity Measurement**

This spotlight panel raised critical perspectives on the importance of inequity measurement in health systems and how measurement can be carried out responsibly to ensure accountability and transparency. Speakers included Keddone Dias (LAMP CHC), Arvind Krishendeholl (Indus Community Services), Myrna Adams (Brampton Senior Citizens Council), Varsha Naik (Regional Diversity Roundtable), and moderator Dianne Fierheller (IBH).

### **Theme II: International Approaches to Equity Measurement: An Example from England**

In this session, we examined examples of inequity measurement work conducted in the United Kingdom, presented by Sarah Sowden (Newcastle University & Hon Consultant in Public Health, Office for Health Improvement and Disparities, North East England).

### **Theme III: Integrating Equity into Hospital Decision-Making and Service Design**

In theme III, we moved from concept to action, and discussed how to implement inequity measures in different jurisdictional contexts and hospitals. We also unpacked the realities and complexities of inequity measurement work in practice. Speakers included Andrew Boozary (University Health Network), Corey Bernard (Ontario Health), Nakia Lee-Foon (IBH) and moderator Laura Desveaux (IBH).

### **Theme IV: So, Where do we go from Here? Discussion of the Widespread, Systematic Integration of Inequity Metrics into Hospital Reporting**

The final session focused on the processes integrated at THP to measure inequities across services and discussed what needs to be done to further integrate inequity measurement

as a staple in performance reporting across health systems. Speakers included Shalu Bains (THP), Karen Rai (THP), Robert Reid (IBH), and moderator Walter Wodchis (IBH).

### Context-Setting and Research Presentations

In addition to themed panels and presentations, this workshop also included various presentations. The workshop began with a presentation from Nakia Lee-Foon (IBH), which covered the importance of defining equity and the recipe for true equity in healthcare.

Joanna Dos Santos and Aliya Allen-Valley (IBH), presented an ongoing IBH research study exploring how inequity is being measured in institutions across Canada and abroad. Jessica Morgan (University of Toronto) presented research with Walter Wodchis on quantifying health inequities in Ontario's local health systems by comparing several metrics, including the Relative Index of Inequality (RII), Relative Gradient Index (RGI), Slope Index of Inequality (SII) and the Absolute Gradient Index (AGI). Aliya Allen-Valley (IBH) also presented recently [published work](#) on integrating the RII at THP, and additional tools being used to explore inequities within Peel Region and our health system.

Following panel discussions, participants took part in working sessions exploring themes ranging from current practices and challenges related to overcoming inequities to collaboratively discussing the next steps that can be taken to advance inequity measurement practices across health systems. Key takeaways from these discussions are discussed in further detail below.

## Workshop Outcomes

Each workshop objective and its associated outcomes are detailed below.

Objectives	Outcomes
<p>Gain insight into the inequity measurement processes currently being implemented in health systems across Canada and internationally to understand what works and what the challenges are.</p>	<p>This workshop brought together leaders from diverse systems to discuss and share meaningful insights on inequity measurement.</p> <p>Through panels and individual presentations, participants heard about different approaches used to measure inequity across different health systems in Canada and abroad.</p> <p>International examples from the U.K. set the groundwork for potential next steps that can be taken within the Canadian context to advance inequity measurement, while examples of current work being conducted at THP provided insight into how a Canadian health system integrated inequity measures into their reporting metrics.</p>
<p>Share how equity data is being collected, shared, and used to reduce inequities.</p>	<p>Through panels and small group discussions, participants spoke about different approaches to equity data collection and discussed what these processes looked like within their contexts.</p>
<p>Discuss next steps, including how to move forward to meaningfully integrate inequity measurement processes within health systems.</p>	<p>We heard from representatives from community-based organizations about how inequity measurement should be conducted in partnership with communities. In addition, our final panel focused on learnings from THP's integration of inequity measures into their health system and next steps that can, and should, be taken to advance inequity measurement in different settings.</p> <p>We gained support around the concept of moving forward on inequity measurement, with many participants noting that they were reflecting deeply on all the conversations at the workshop. Many expressed interest in continuing the discussions and establishing collaborations. This enabled us to set the groundwork for future opportunities to learn from each other and gain resources to push this work forward.</p> <p>We also fostered collaboration and partnership between leaders from diverse systems in Canada and abroad, and collected various resources from attendees to continue learning from each other.</p>

## Key Takeaways

Some key takeaways from the workshop are summarized below:

1. **Building meaningful connections and partnerships with the community is foundational.** Partnering with the diverse communities health systems serve is essential to effectively address barriers to accessing vital services. These partnerships enable the co-design of solutions that directly tackle the disparities identified through measurement processes. Establishing authentic relationships with communities is foundational for any health system committed to reducing health inequities.
2. **Fostering collaboration both within and across specializations and services is required.** Partnerships with other organizations that serve our communities, such as healthcare providers, community-based organizations, primary care, food banks, housing resources, faith-based groups, and more, are vital. Each of these entities plays a key role in supporting the overall well-being of our communities. By working together, we can more effectively address the upstream factors that contribute to the inequities present in the health system.
3. **The necessity of both zooming in and zooming out when measuring inequities.** This workshop underscored the importance of understanding local-level gaps and context related to existing inequities and inequity measurement, in addition to conducting higher-level analyses (i.e., provincial level) to create a well-rounded picture of existing gaps that considers the variation in needs and experiences across different settings. Each level of analysis provides a critical perspective that informs solutions.
4. **The need to work collaboratively across sectors to implement inequity measurement practices across different settings.** Addressing diverse and complex needs that contribute to health inequities requires tailored measures and targets based on local contexts and populations. This can sometimes present challenges as provincial or sector-specific standards may not align with local needs, requiring flexibility and variation. Addressing this challenge requires new collaborations and working outside of typical sector practices.
5. **Moving beyond the collection of data.** Achieving meaningful outcomes requires careful navigation of the interests of various leaders, and data collection alone does not inherently translate into tangible benefits for the communities we aim to support. A plan for data collection must be accompanied by a transparent and accountable plan for how inequity measurement will be used to drive change in the system.

6. **Standardization of measurement with the addition of local context.** While standardization of inequity measurement is important for consistency and comparability, it is equally crucial to incorporate a ‘plus’ section within frameworks to effectively accommodate local and contextual needs and inform local solutions that are more likely to have an impact.
7. **Building an inequity measurement system.** The success of inequity mitigation efforts relies on a robust support system encompassing dedicated financial resources, clear accountability structures, and comprehensive training and capacity-building initiatives. Additionally, it is crucial to foster a culture of continuous learning and adaptability, where feedback from communities and frontline workers informs ongoing improvements. This ensures that interventions remain relevant, responsive, and effective in addressing the evolving needs of those most impacted by inequities.
8. **Mindful engagement with communities.** When engaging with communities, a reflective approach is necessary. Clearly articulating intentions, being receptive to feedback, and demonstrating readiness to adapt plans based on community responses are crucial. To ensure sustainability and inclusivity, genuine community engagement should involve offering paid positions and co-designing initiatives with community members.

## Summary

Facilitating meaningful discussions with representatives from diverse health systems has illuminated the barriers and enablers of integrating inequity measures across different settings. Gaining insights from communities, health systems, and organizations across Canada and internationally was instrumental in understanding what is possible and identifying practical steps to measure and address inequities within our unique contexts. We are committed to nurturing this community of practice and will continue to share learnings as we work toward creating a more equitable health system.



## Post-Event Resources

During and following the workshop, many participants provided great resources being used in their organizations. These resources are shared below with an aim to increase collaboration, knowledge sharing, and partnership among organizations. They include:

- [Presentation from Sarah Sowden](#) covering approaches to health equity measurement in England, including the UNFAIR research program to improve and promote health care equity.
- Strategies and indicators to integrate health equity in health service and delivery systems in high-income countries: [a scoping review](#).
- [Integrating equity indicators for hospital reporting metrics](#), which discusses the integration of routine inequity reporting at Trillium Health Partners.
- The [Diversity and Inclusion Charter](#) led by the Regional Diversity Roundtable.
- [We are all Accountable: Collective Action Through Data to Co-design a More Equitable and Integrated Health System in Peel Region](#), an IBH led-report on how healthcare and community organizations safely collect and integrate individual-level data that capture the social determinants of health (SDoH) from across sectors.
- [We Ask because We Care Report](#), the tri-hospital (St. Michaels Hospital, Centre for Addiction & Mental Health, and Mount Sinai Hospital) and Toronto Public Health (TPH) health equity data collection research project report.
- Sociodemographic data collection for health equity measurement: [a mixed methods study examining public opinions](#).
- Ontario Health's [Equity, Inclusion, Diversity and Anti-Racism Framework](#), with a focus on addressing anti-Indigenous and anti-Black racism.
- Nova Scotia Legislation, [Dismantling Racism and Hate Act](#).
- Nova Scotia's, [Health Equity Framework](#).
- [Health Equity Toolkit](#), Implementation Science Centres in Cancer Control (ISC<sup>3</sup>).
- [Understanding our Community Tool](#), Mississauga Ontario Health Teams (MOHT).



Social Media Mentions

[IBH hosts its first Inequity Measurement Workshop – Institute for Better Health](#)

[Trillium Health Partners on LinkedIn: #healthequity #inequitymeasurement  
#communityengagement](#)

[Professor Laura Rosella Hosts Inequity Measurement Workshop at the Institute for Better Health - Population Health Analytics Laboratory | Toronto, ON \(pophealthanalytics.com\)](#)