MODULE THREE PART ONE:
Evidence-Informed Planning and Implementation using an Equity Lens
Acknowledgements

Thank you to our Coaches:
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Who Are We?

Health Equity Project Leader
Access Alliance Multicultural Health and Community Services

Health Equity Project Capacity Building Partner
AOHC

Health Equity Project Champions
Chigamik, Planned Parenthood; North Lambton; Rideau; Somerset West; Témiskaming; and Women’s Health in Women’s Hands Community Health Centres

Health Equity Project Cross-Sector Partners
OCASI and Centre Francophone de Toronto
What We Are Doing Together

At the Champion level...

• Build organizational level knowledge, commitment and capacity to routinely use a health equity framework and evidence geared at overcoming systemic inequities in healthcare access, healthcare quality and health outcomes.

And beyond...

• Drive system-level leadership in equity focused planning and evaluation practices.
• Mobilize a community of practice within the CHC sector and across sectors (e.g. settlement) to inspire shared visions and actions for advancing health equity.
Health Equity Framework

- Establish it as a strategic priority
- Develop structures & processes
- Implement specific strategies on SDOH
- Decrease organizational discrimination/oppression
- Cultivate partnerships & coalitions
- Community Engagement
Learning to Advance Health Equity

Module One:

Health Equity 101
Learning to Advance Health Equity

Module Two:

Evidence-informed use of data for Health Equity
Learning to Advance Health Equity

Module 3:

Planning & evaluating HE improvements
Module Three: Learning Objectives
Planning and Evaluating Health Equity Strategies

- Planning to address inequities & prioritizing impactful, & feasible solutions
- Design & implement strategies to advance health equity
- Monitor, measure and evaluate the strategies
Planning and Evaluation Cycle to Advance Health Equity

1. Strategic Priority for Health Equity
2. Equity-Focused Strategy Development
3. Implementation
4. Program Evaluation & Performance Measurement
5. Accountability
Strategic HE Priority Planning Steps

1. Establish a planning team
2. Identify key stakeholders
3. Identify & review evidence to generate potential strategies/solutions
4. Identify & prioritize impactful & feasible strategies
5. Develop the implementation plan
6. Identify risks & plan response strategies
Planning Step 2: Stakeholder Engagement in Developing & Prioritizing Health Equity Strategies

Example: Community Reference Group for Quality Improvement
Planning Step 3: Use of HEIA to Help Identify & Review Evidence, Generate Potential Strategies/Solutions

• The **Healthy Equity Impact Assessment** (HEIA) is used to support the strategy development step. It can also be used for the risk management and response step.

• As a decision support tool it walks users through the steps of identifying how a program, policy, initiative or strategy will impact population groups in different ways.

• It is also a useful asset in identifying unintentional impacts of health equity improvement efforts.
HEIA Questions to Guide the Planning Process

Equity Considerations:

• How does/will your strategy affect health equity for the identified vulnerable or marginalized populations?
• Do/will some people or communities benefit more from the strategy than others, and why?
• Do/will some clients have different access to care?
• Do/will some clients have different overall health outcomes than others?
• How does/will the strategy affect the quality and responsiveness of care for different communities/clients?
Prioritizing Impactful and Feasible Strategies

Feasibility:
- Can it be delivered on time and under budget?
- Does it match with staff capacity?
- Do we have the necessary internal support structures?

Impact:
- Short/med/long term benefits?
- Visibility
- Value
- Alignment with mandate
Case Story 1: Rideau Community Health Services

Health Equity Goal:

How to implement an equity informed planning process for all of its programs, starting with its Footcare Program. The purpose of the footcare program is to reduce and prevent amputations.

Steps:
1. Establish a planning team
2. Identify key stakeholders
3. Use of HEIA tool for situational analysis
4. Identification and prioritization of impactful and feasible strategies
Planning Step 3: Use of HEIA to Help Identify & Review Evidence, Generate Potential Strategies/Solutions

• Who is being served RCSC’s footcare program?
  – Review of RCHC client data in terms of age, gender/gender identity, income, race/ethnicity, geographic location, etc.
  – Are there clients who are not being served?
  – Are there clients who can afford to receive services elsewhere?

• Who is at risk for ulcerations and amputations?
  – Review of LHIN level data regarding prevalence of amputations and ulcerations?
  – What evidence indicates that all diabetes clients benefit?
Stakeholder Analysis

Who are the other footcare providers in the region?

What is the capacity/interest of other providers to work in partnership with RCHS? (i.e., direct referrals, co-location, etc.).

What Private Home Support is available in Smith Falls, Merrickville, Carlton Place and Kemptville?
Planning Step #4: Prioritize Impactful & Feasible Strategies

Example of 6 strategies identified by Rideau CHS included:

1. Changing the eligibility criteria and policies
2. Ensuring consistent use of new intake forms (which specifically collect demographic data) for equity-informed monitoring and evaluation
3. Development of direct referral partnerships
4. Reallocation of program hours based on client data
5. Staff training and support for data collection
6. Stakeholder communication and engagement plan
Planning Step #4: Prioritize Impactful and Feasible Strategies

**Reflection Exercise: Impact & Feasibility Tool**

1. Look at the 6 strategies/solutions generated by Rideau Community Health Services.
2. Take a few moments to map them into the Impact & Feasibility Grid.
3. Are any Strategies/Solutions in the top right quadrant (Highly feasible and Highly impactful)?
4. If yes, what are they and why are they there?
Planning Step 5: Implementation Planning

Implementation Stages: Planning for System Change

**Exploration**
- Engage stakeholders
- Conduct Needs Validation
- Identify a system level gap
- Select a system level intervention

**Installation**
- Identify Implementation Teams
- Develop system and agency level plan
- Includes evaluation, KTE and sustainability planning.

**Initial Implementation**
- Identify Agency Implementation Teams
- Put intervention into practice.
- Monitor at agency and system level.
- Identify barriers and possible solutions.

**Full Implementation**
- Evaluation
- Transition sustainability responsibility to agencies
Iterative Strategy Implementation

The PDSA CYCLE

[Diagram showing the PDSA cycle: Plan, Do, Study, Act]
Case Story 2: North Lambton CHC

Health Equity Issue:
How to implement an equity-informed planning process to address health inequities in cancer screening rates (e.g., by age, income, education, Indigenous identity) in the short and long-term.

Steps:
1. Establish a planning team
2. Identify key stakeholders
3. Use of data to identify barriers to cancer screening for different groups
4. Prioritize impactful and feasible intervention strategies
5. Conduct PDSA cycles to examine impact of strategies on cancer screening
Use of Data

**Education**

- Other Education Level Has the Highest Percentage of Clients Due for Screening
  - Site = EL

- Number of Clients Screened by Age
  - No
  - Yes

**Site**

- WL Has the Highest Percentage of Clients Due for Cervical Cancer Screening
  - Percent of Clients Screened and Due for Cervical Screening Within Each Income Level
    - Site = NL

**Income**

- Percent is calculated within levels of Income Recoded.
Identification of Key Barriers

# of Unscreened & Screened By Mental Health Dx

<table>
<thead>
<tr>
<th>Mental Health Dx</th>
<th>Screened</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>39</td>
<td>19</td>
<td>20</td>
</tr>
<tr>
<td>EL</td>
<td>91</td>
<td>6</td>
<td>85</td>
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<tr>
<td>Yes</td>
<td>57</td>
<td>14</td>
<td>43</td>
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% of Unscreened & Screened By Mental Health Dx

<table>
<thead>
<tr>
<th>Mental Health Dx</th>
<th>Screened</th>
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<th>Yes</th>
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<tbody>
<tr>
<td>Site</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>57.79%</td>
<td>52.20%</td>
<td>78.14%</td>
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<tr>
<td>EL</td>
<td>73.13%</td>
<td>26.86%</td>
<td>71.87%</td>
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<tr>
<td>Yes</td>
<td>67.91%</td>
<td>32.09%</td>
<td>60.14%</td>
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% of Unscreened & Screened By Sexual Abuse Assessment

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<thead>
<tr>
<th>Sexual Abuse</th>
<th>Screened</th>
<th>No</th>
<th>Yes</th>
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</thead>
<tbody>
<tr>
<td>Site</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>No</td>
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<td>81</td>
<td>56</td>
</tr>
<tr>
<td>EL</td>
<td>21</td>
<td>6</td>
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<td>Yes</td>
<td>12</td>
<td>11</td>
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% of Unscreened & Screened By Transportation Issue

<table>
<thead>
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<th>Transportation Issue</th>
<th>Screened</th>
<th>No</th>
<th>Yes</th>
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<tbody>
<tr>
<td>Site</td>
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<td></td>
<td></td>
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<tr>
<td>No</td>
<td>62.38%</td>
<td>37.62%</td>
<td>67.67%</td>
</tr>
<tr>
<td>EL</td>
<td>63.91%</td>
<td>36.09%</td>
<td>62.33%</td>
</tr>
<tr>
<td>Yes</td>
<td>64.27%</td>
<td>35.72%</td>
<td>55.73%</td>
</tr>
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</table>

Percent is calculated within levels of Site, Mental Health Dx, Sexual abuse, and Transportation Issues.
Step 6: Risk Identification & Response Planning

Step 1 – Identify all potential risks

Step 2 – Apply a health equity lens to each risk:
- key populations affected?
- think of risk in terms of healthcare access, quality, and health outcomes
## Risk Assessment Matrix

### Step 3 – Measure risks --->

<table>
<thead>
<tr>
<th>IMPACT (I.e. Consequence/severity)</th>
<th>Risk Assessment Matrix (3X3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High (Based on the current mandate of the organization - this is not a viable option)</td>
<td>(3) Considerable management and monitoring required</td>
</tr>
<tr>
<td>(6) Manage and monitor risks (inform senior management)</td>
<td></td>
</tr>
<tr>
<td>(9) Management (extensive senior management involvement)</td>
<td></td>
</tr>
<tr>
<td>Medium (We could still function)</td>
<td>(2) Risk may be worth accepting with monitoring</td>
</tr>
<tr>
<td>(4) Management effort worthwhile, mitigate and monitor risks</td>
<td></td>
</tr>
<tr>
<td>(6) Must manage and monitor risk (inform senior management)</td>
<td></td>
</tr>
<tr>
<td>Low (Normal)</td>
<td>(1) Accept risks</td>
</tr>
<tr>
<td>(2) Accept, but monitor risks</td>
<td></td>
</tr>
<tr>
<td>(3) Manage, mitigate and monitor risks</td>
<td></td>
</tr>
</tbody>
</table>

### Step 4 - Plan Risk Response Strategies:
- Prevent
- Mitigate
- Transfer
- Cope

<table>
<thead>
<tr>
<th>LIKELIHOOD (i.e. probability of occurrence)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low (Normal or unlikely)</td>
</tr>
<tr>
<td>Medium Likely</td>
</tr>
<tr>
<td>High (Very Likely)</td>
</tr>
</tbody>
</table>
Risk Management Case Example

Strategy identified by Rideau: Changing the eligibility criteria and policies for their Footcare Program as a means to ensure access by those who need it most.

Potential Risks:

1. Conflict with **organizational mandate**, e.g. to provide access to all with no barriers
2. Low quality data, e.g. income data lacking number of dependents, may exclude potential participants
3. Other barriers faced by ineligible client such as transportation, disability, discrimination (**Client Attributes**)  
4. Increase in referrals to comparable external service providers (**External Stakeholders**)
Risk Management Activity

1. Pick one potential risk that we have provided

1. Are there additional implications in terms of health equity?

1. Score the risk using the Risk Assessment Matrix

1. Decide which response strategy is most appropriate

1. Share!
Project Charter

• A document that demonstrates organizational support for the project, authorizes the project manager to lead the project and allocate resources as required.
• Signed by senior management of the responsible organization and the partner organizations.
• Should be distributed widely - to anyone with an interest in the project – to help build momentum, reinforce the project manager's role and authority, and possibly draw other interested and valuable team members into the project.
Organizational Change Management

Things do not change; we change.  Henry David Thoreau
The key to change... is to let go of fear.  Rosanne Cash
Our only security is our ability to change.  John Lilly
Successful Organizational Change Management

Perspectives are clear and understood, as part of pre-planning

Leadership is engaged and leveraged

Reinforcement of outcomes and clear performance management

Celebrations at key milestones

Strong communication and stakeholder engagement plans

Coaching and mentoring

Team members trained

I. PREPARE TO LEAD THE CHANGE

II. CREATE ORGANIZATIONAL VISION, COMMITMENT, AND CAPABILITY

III. ASSESS THE SITUATION TO DETERMINE DESIGN REQUIREMENTS

IV. DESIGN THE DESIRED STATE

V. ANALYZE THE IMPACT

VI. PLAN AND ORGANIZE FOR IMPLEMENTATION

VII. IMPLEMENT THE CHANGE

VIII. CELEBRATE AND INTEGRATE THE NEW STATE

IX. LEARN AND COURSE CORRECT

HEAR THE WAKE-UP CALL
In Conclusion: Planning and Evaluation Cycle to Advance Health Equity

Strategic Health Equity Improvement Planning Steps

1. Establish a planning team
2. Identify key stakeholders
3. Identify and review evidence to generate potential strategies/solutions
4. Prioritize impactful and feasible strategies
5. Develop the implementation plan
6. Identify risks and plan response strategies
Tools and Resources

Establish Planning Team
- Research to Practice (R2P) Protocol

Stakeholder Analysis & Engagement
- Stakeholder Analysis Tool
- Stakeholder Engagement Plan Template
- HQO - Guide to engaging patients

Reviewing Evidence to Generate Solutions
- Research to Practice (R2P) Protocol
- R2P Mapping Tool

Prioritizing Solutions
- Risk Assessment Framework

Planning Intervention
- Equity-Informed Project Charter
- Sample Project Charter
- Logic Model Template
- Equity-Informed Program Plan
- HEIA online course (English) – open using Internet Explorer
- HEIA online course (French) – open using Internet Explorer
- HEIA workbooks and templates

Change Management
- NCCSDO Organizational Change A review for health care managers, professionals and researchers