



EQUIP Healthcare

Research to Equip Primary Healthcare for Equity

www.equiphealthcare.ca

Team Update

August 1, 2015

Hello, EQUIP team members! We hope this update finds you very well and enjoying summertime. We are pleased to have this opportunity to reconnect with you and update you on our various activities, milestones achieved and next steps. As always, please feel free to contact us at any time about any aspect of EQUIP – we welcome any comments or queries!



Last wave of patient data collection in Prince George (April 2015)

Celebrating our achievements!

Wrapping up the EQUIP Intervention

March 31, 2015 marked the official wrap-up of implementation of the EQUIP intervention at our four PHC Intervention sites: Health Zone, Cool Aid, Central Interior Native Health Society, and North Lambton CHC. This means the process of Organizational Integration and Tailoring (OIT), including Vicki's Smye's work as our Practice Consultant, is complete. Each of the PHC sites is continuing to move forward and build on the catalyst projects that were initiated as part of the OIT process – we wish them all the best as they continue to fulfill their commitment to equity-oriented care!

Patient Surveys complete!

In the spring of 2015 we completed our fourth and final wave of patient surveys at the four sites. We are extremely pleased with our retention rate of 77% (n=439, as shown in the table below). We are very grateful for the commitment of all of the EQUIP participants who generously shared their time, perspectives, and stories with us at each wave.



CINHS



Cool Aid CHC

A special thank you to the MOAs at each PHC site:

We would like to offer a special thank you to the Medical Office Assistants (MOAs) at each site for welcoming us into their workplaces, and for making it possible to stay meaningfully connected with so many clients.

We also want to thank Jo Parker and Joanne Hammerton for coordinating the work of our very talented team of research assistants at each site as they conducted a total of ~2,000 patient interviews across the four waves of data collection. The research staff played a key role in maintaining contact with our patient participants and ensuring they felt listened to, cared for and respected throughout the data collection process.



Patient surveys at Cool Aid CHC

| Site | Wave 1 Spring 2013 (n) | Wave 2 Fall 2013 (n) | Wave 3 Fall 2014 (n) | Wave 4 Spring 2015 (n) | Retention Rate (% of baseline) |
|----------------|------------------------------|----------------------------|----------------------------|------------------------------|--------------------------------------|
| Site A | 133 | 124 | 120 | 117 | 88% |
| Site B | 125 | 118 | 99 | 100 | 80% |
| Site C | 153 | 134 | 118 | 111 | 73% |
| Site D | 156 | 121 | 118 | 111 | 71% |
| Overall | 567 | 499 | 455 | 439 | 77% |

Three waves of the Staff Survey complete!

Beginning in May 2015, we invited staff at each PHC site to complete the third round of the EQUIP Staff Survey. Thank you to everyone who took part! We will be using this data to explore the impact of EQUIP on staff knowledge, confidence, attitudes and awareness related to equity-oriented primary health care.

In-depth interviews with PHC Site Staff

To deepen our understanding of how the intervention may have had impacts at the organizational level, and to expand our analysis of how each clinic's unique context might influence intervention uptake, we conducted interviews with 31 staff working in diverse roles at the four intervention sites. We are very grateful for the insights provided by these participants, who included health care and social service providers, clinic leaders and administrators.

Entering a New Phase: Analyzing our Datasets

Now that we have finished these intensive waves of data collection, we are turning our attention to analyzing our various sets of data. Featured below are some analyses we are working on in 2015. If you would like to know more or would like to play a more "hands-on" role as we move into these analyses, please don't hesitate to get in touch!

Measuring patient experiences of equity-oriented health care

One of the exciting and practical tools we are developing is a patient self-report measure of equity-oriented healthcare, which we are calling the Equity in Healthcare Scale. This scale builds on a previous study conducted by several EQUIP investigators, the *Urban Aboriginal Health Care (UAHC)* project, in which we worked with staff and patients at two PHC organizations to identify strategies to enhance the equity-orientation of healthcare and services. The scale includes 5 sub-scales that tap into interrelated dimensions of equity-oriented care:

- Non-Discriminatory Approach
- Emotional Safety and Trust
- Welcoming and Comfortable Milieu
- Tailoring to Individual Context and History
- Reducing Barriers to Access



Dr. Marilyn Ford-Gilboe

With leadership from co-PI Dr. Marilyn Ford-Gilboe (UWO), the EQUIP co-PIs have been refining this scale, and we are looking forward to more

opportunities to further test the scale for various uses. We are excited about this scale's potential to advance research evaluating the impacts of equity-oriented healthcare across diverse contexts. A paper reporting on our tool development and initial psychometric testing is coming soon. Stay tuned!

Exploring the role of funding and policy contexts

EQUIP Study C is an analysis of how policy and funding contexts shape the delivery of equity-oriented primary health care.

EQUIP Co-Investigator **Dr. Josée Lavoie** (University of Manitoba), with postdoctoral fellow **Derek Kornelsen** (U of M) and Co-PIs **Dr. Nadine Wathen** (UWO) and **Dr. Colleen Varcoe** (UBC) are co-leading an analysis of how each clinic's unique policy and funding context shapes the uptake, implementation, and potential sustainability of the EQUIP intervention. We thank each clinic for providing board minutes, financial statements and funding contracts for the analysis, which focuses on what facilitates and hinders the delivery of equity-oriented care, including things such as funding stability as well as flexibility and autonomy in decision-making. This analysis will help us to contextualize and understand Study B's findings. Between now and October, we will be interviewing administrative leads at each clinic to refine and complete the analysis.



Dr. Josée Lavoie

Exploring inequities in oral health

The EQUIP Co-PIs are working with EQUIP Co-Investigator **Dr. Bruce Wallace** (University of Victoria) to develop a description of the associations between oral health and other health indicators using the EQUIP patient dataset. Our aim is to add to the evidence arguing for more resources to address oral health in PHC settings, particularly for marginalized populations.



Dr. Bruce Wallace

One of our papers, currently in review, is titled *Self-Reported Oral Health Among a Community Sample Of People Experiencing Social and Health Inequities: Implications for the Primary Health Care Sector*. This paper situates EQUIP's baseline oral health data in relation to broader policies in Canada that contribute to oral health inequities, particularly among Indigenous peoples, people who are homeless, those classified as the working poor, and elderly persons. As we work with additional data sets from Waves 2, 3 and 4, we will continue to explore the topic of oral health inequities.

Indicators of equity-oriented healthcare

EQUIP Study A is focused on operationalizing indicators of equity-oriented healthcare for use in practice and policy. This also builds on the UAHC project, in which we identified a set of indicators of performance and capacity for equity.

In EQUIP Study A, we are working with the concepts identified in UAHC to build concrete indicators of equity-oriented care that can be used to measure and monitor the delivery of equity-oriented PHC. Working closely with EQUIP Co-Investigator **Dr. Sabrina Wong** (UBC), we are refining these indicators to mirror the type of healthcare indicators widely used to monitor healthcare delivery in Canada, e.g.,

those used by the Canadian Institutes of Health Information (CIHI). Our goal is to create a set of indicators that are measurable and consistent with existing monitoring tools, but that bring an equity lens to ensure healthcare delivery meets the needs of all Canadians.

We look forward to sharing our latest Indicator work with you in the coming year. Our hope is that the resulting set of indicators will be useful to both policymakers and practitioners in assessing their current performance and capacity related to equity, and for ongoing monitoring and quality improvement.



Dr. Sabrina Wong

Knowledge Sharing Activities

The EQUIP team has been busy sharing knowledge arising from the project. We have had great opportunities to present to policy and professional audiences, such as Annette Browne's presentation to the BC PHSA Conference on Substance Use, and a presentation at the Association of Ontario Health Centres' annual conference by Kathy Bresett, Myrna Fisk, Marilyn Ford-Gilboe and Nadine Wathen. We also continue to seek venues for reporting emerging findings that blend academic with practice/policy audiences. For example, EQUIP had a strong presence at the May 2015 Canadian Public Health Association conference, including an invited panel presentation that included Annette, a World Café Symposium including all four Co-PIs, and a data-oriented paper on oral health by Bruce Wallace.



Health Zone Nurse Practitioner-led Clinic

Internationally, the project was very well-represented at the 20th Nursing Network on Violence Against Women International Conference in Atlanta, Georgia, with three papers arising from EQUIP's work, and at the 2015 Futures Without Violence Conference in Washington DC, where Annette presented conceptual work on structural violence and trauma- and violence informed care. To see a list of all of our recent presentations, please visit the EQUIP website at:

<http://equiphealthcare.ca/reports-resources>.

We also have a number of academic papers in the review stage with various journals, or nearing submission. We welcome active engagement from all EQUIP team members in specific analyses, paper-writing, etc. We also are keen to reach the right audiences, so please send us ideas for important venues (journals, conferences, meetings, etc.) for sharing our work.

Announcements:

Event planning for 2016:

We are beginning to plan for a knowledge exchange event for Summer 2016. We'd like to use this opportunity to connect with our broader team of researchers and collaborators, to share some of our findings and work together to plan next steps. Stay tuned for more information and specific dates!

CIHR Dissemination Grant received (\$10,000):

Members of the EQUIP Research Team have just received a small grant from CIHR to help with disseminating some of our work. Our application was titled *Refining and Disseminating a Toolkit for Measuring and Promoting Equity-Oriented Care in Primary Health Care Settings*. The Toolkit will include evidence-based strategies, indicators and measures designed to foster the provision of equity-oriented care in PHC clinics, agencies and organizations. Stay tuned for more information as we move forward!

NLCHC in the media:

One of our intervention clinics, the North Lambton Community Health Centre, was recently featured in a media release by the Erie St. Clair Local Health Integration Network (LHIN). The news release highlighted NLCHC's innovative work to develop a harm reduction policy and philosophy, supported by their collaboration with EQUIP. More information is available on the EQUIP website at

<http://equiphealthcare.ca/category/news>.



EQUIP members receive funding to address family violence:

The Canadian government recently announced new funding to address family violence, totaling \$100 million to be distributed over the next 10 years. EQUIP team members Nadine Wathen (co-Lead), Marilyn Ford-Gilboe, and Colleen Varcoe are all part of the VEGA (Violence, Evidence, Guidance, Action) Project, which will develop evidence-based pan-Canadian guidance for health and social service providers in the area of family violence, based on principles of equity-oriented, TVIC-informed and culturally safe care. EQUIP co-investigator Dr. Carol Herbert is co-Chair of the National Guidance and Implementation Committee, comprised of leaders from national professional organizations, which will provide input on and facilitate uptake of the guidance and curriculum. Learn more on the Preventing Violence Across the Lifespan (PreVAiL) Research Network (www.prevailresearch.ca) website.

Questions? Comments? Please contact:

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