

Advancing Health Equity at the Hospital for Sick Children

Task Force Migration, Equity & Diversity

International Workshop on the Management of Diversity in Healthcare

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Outline

1. Context
2. Frameworks for Quality and Health Equity
3. Key Initiatives
 - Indigenous Health Strategy
 - Language Services
 - Socio-demographic Data Collection
 - Cultural Competence Education
4. Moving Forward

Immigration and Ethno-cultural Diversity in Canada



- More than 1 in 5 Canadians are foreign-born
- 2 in 5 Canadian children have an immigrant background
- 22.3% of the total population speak a language other than English or French as their mother tongue
- Visible minorities represent one-fifth of Canada's population (22.3%)

Health Disparities and Inequities in Canada

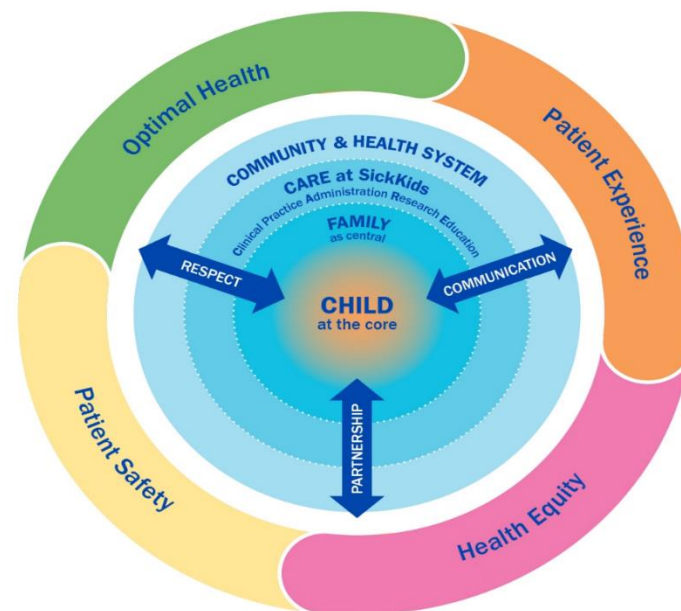
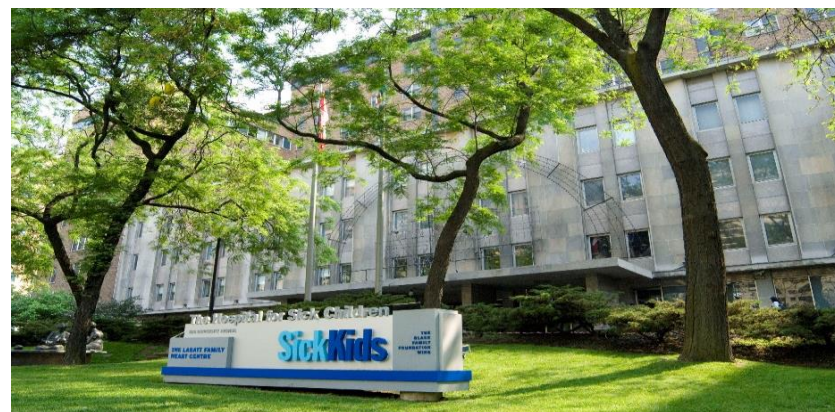
- Canadians are among the healthiest people in the world, but the benefits of good health are not equally enjoyed by all Canadians
- There are significant inequalities in health outcomes and health determinants among socially disadvantaged groups
 - Indigenous Peoples
 - Sexual and racial minorities
 - Immigrants
 - People living with functional limitations
 - Low income, education, and employment
- Health inequities are a public health concern because “are inconsistent with Canadian values, threaten the cohesiveness of community and society, challenge the sustainability of the health system, and have an impact on the economy”



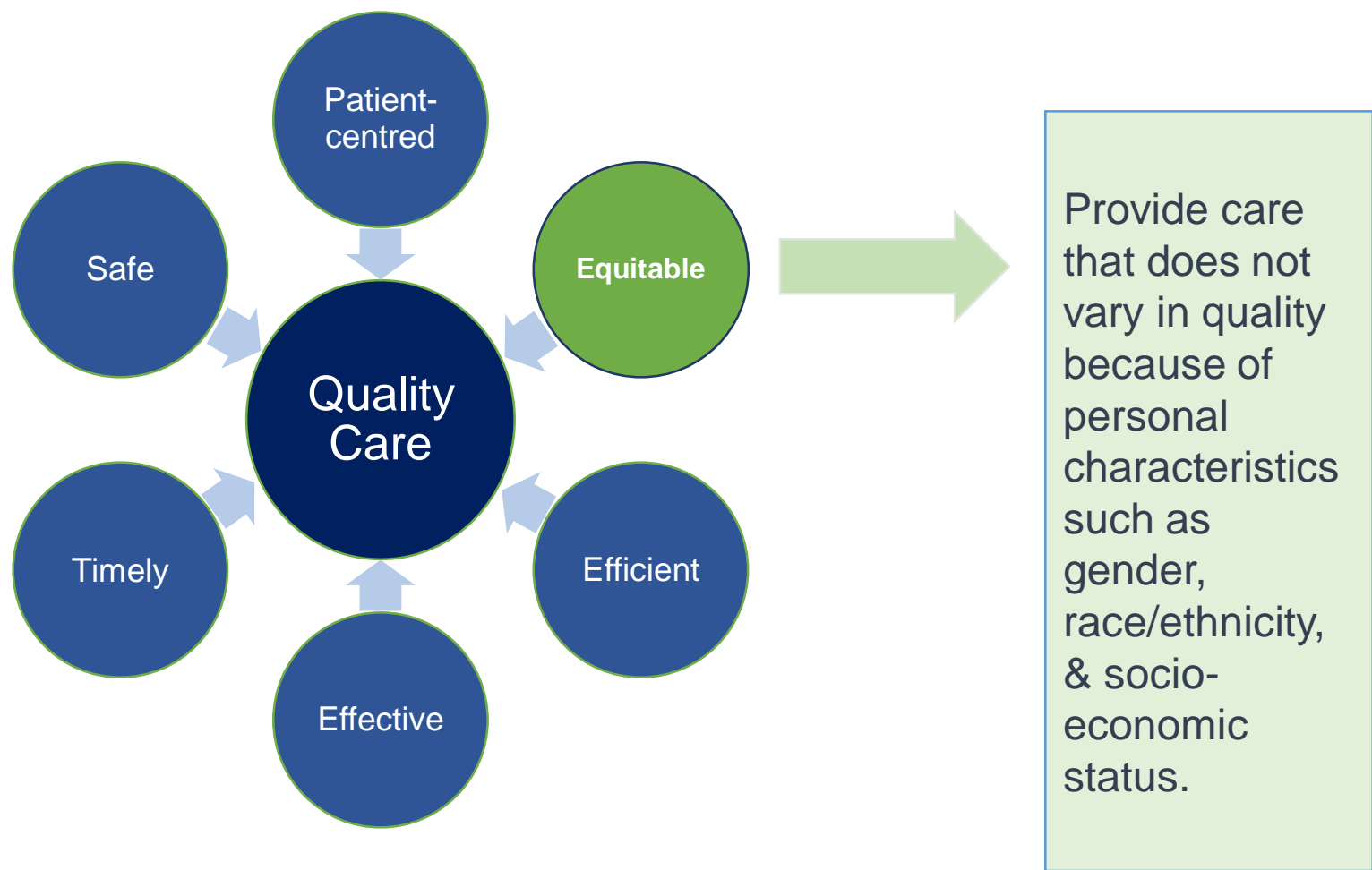
Source: Information from the Pan-Canadian Health Inequalities Reporting Initiative: A collaborative undertaking by the Public Health Agency of Canada, the Pan-Canadian Public Health Network, Statistics Canada, the Canadian Institute for Health Information and the First Nations Information Governance Centre

The Hospital for Sick Children - Toronto, Canada

- The largest centre dedicated to improving children's health in Canada
- Canada's most research-intensive hospital
- Provides the best in complex and specialized child and family-centred care
- Located in Toronto, which is one of the most diverse cities in the world

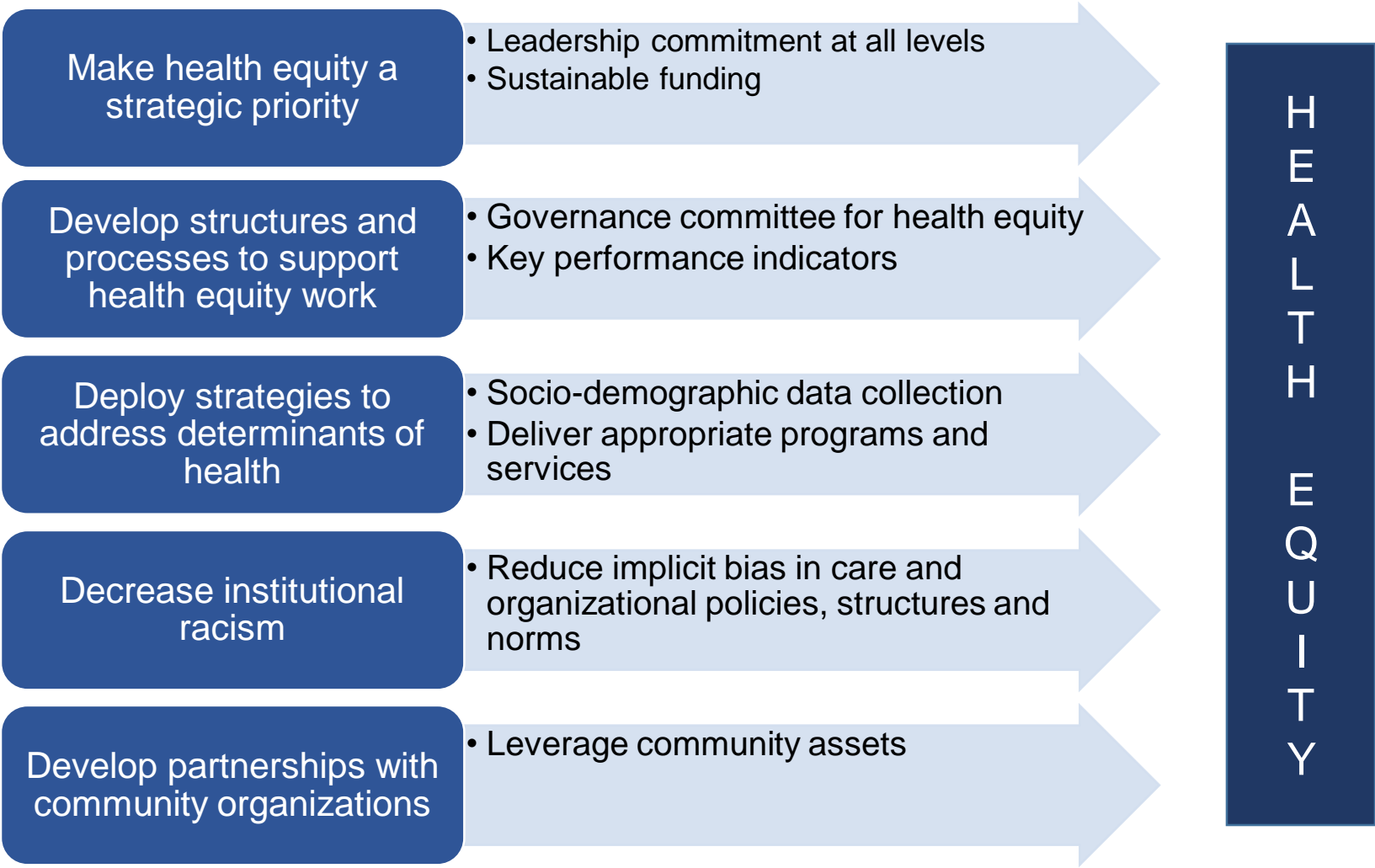


Institute of Medicine's Framework for Quality Care



Adapted from the Institute for Medicine's, Crossing the Quality Chasm: A New Health System for the 21st Century

Institute of Health Improvement's Framework for Advancing Health Equity





HPH Task Force MFH
Migrant
Friendly
Hospitals and Health Services



International Network of
Health
Promoting
Hospitals & Health Services

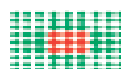
Standards for equity in health care for migrants and other vulnerable groups

Self-Assessment Tool for Pilot Implementation

2014



CANADA KOREA FRANCE
AUSTRIA **AUSTRALIA**
 JAPAN DENMARK CZECH REPUBLIC
ITALY GERMANY
NORWAY CHINA
 BRASIL SLOVAKIA SPAIN
 THE NETHERLANDS SLOVENIA
USA SINGAPORE TAIWAN
 FINLAND SLOVENIA
 POLAND SWEDEN ESTONIA ISRAEL
 PORTUGAL SCOTLAND INDONESIA
 IRELAND MALTA GHANA BELGIUM
 SAUDI ARABIA THAILAND



SERVIZIO SANITARIO REGIONALE
 EMILIA-ROMAGNA
 Azienda Unità Sanitaria Locale di Reggio Emilia



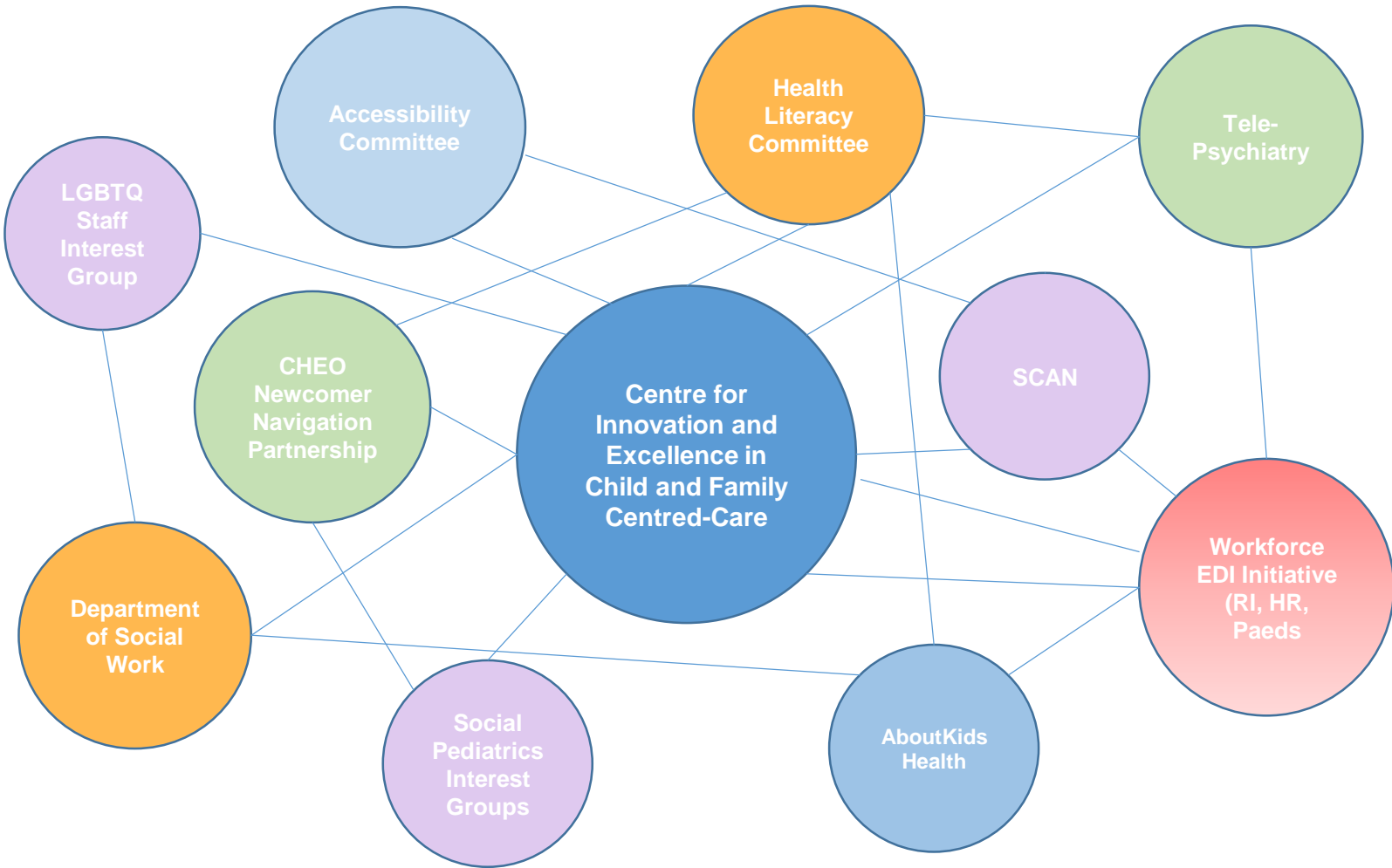
CLINICAL HEALTH PROMOTION CENTRE



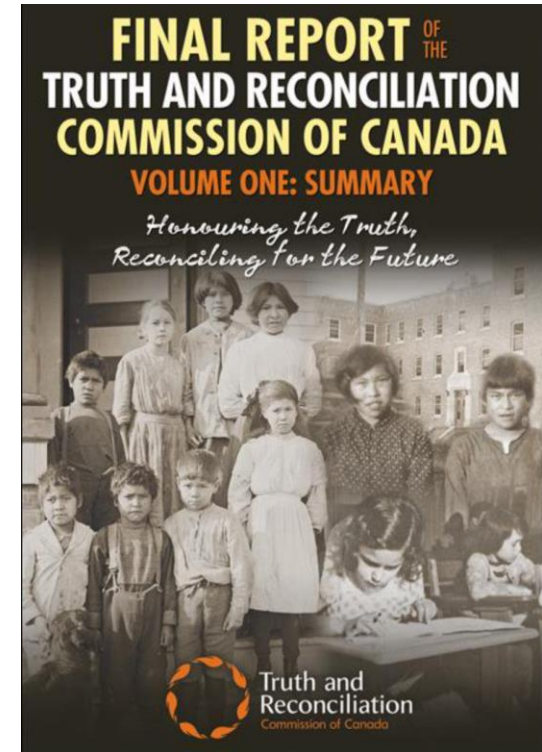
Alcohol & Drugs | Tobacco | Nutrition | Physical Activity | Co-morbidity

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SickKids' Health Equity Ecosystem



Indigenous Health Strategy: Phase 1



Land Acknowledgement

I would like to begin by acknowledging the land on which SickKids operates. For thousands of years it has been the traditional land of the Huron-Wendat, the Seneca, and most recently, the Mississaugas of the Credit River. Today, Toronto is home to Indigenous Peoples from across Turtle Island. SickKids is committed to working toward new relationships that include First Nations, Inuit, and Métis peoples, and are grateful for the opportunity to share this land in caring for children and their families.



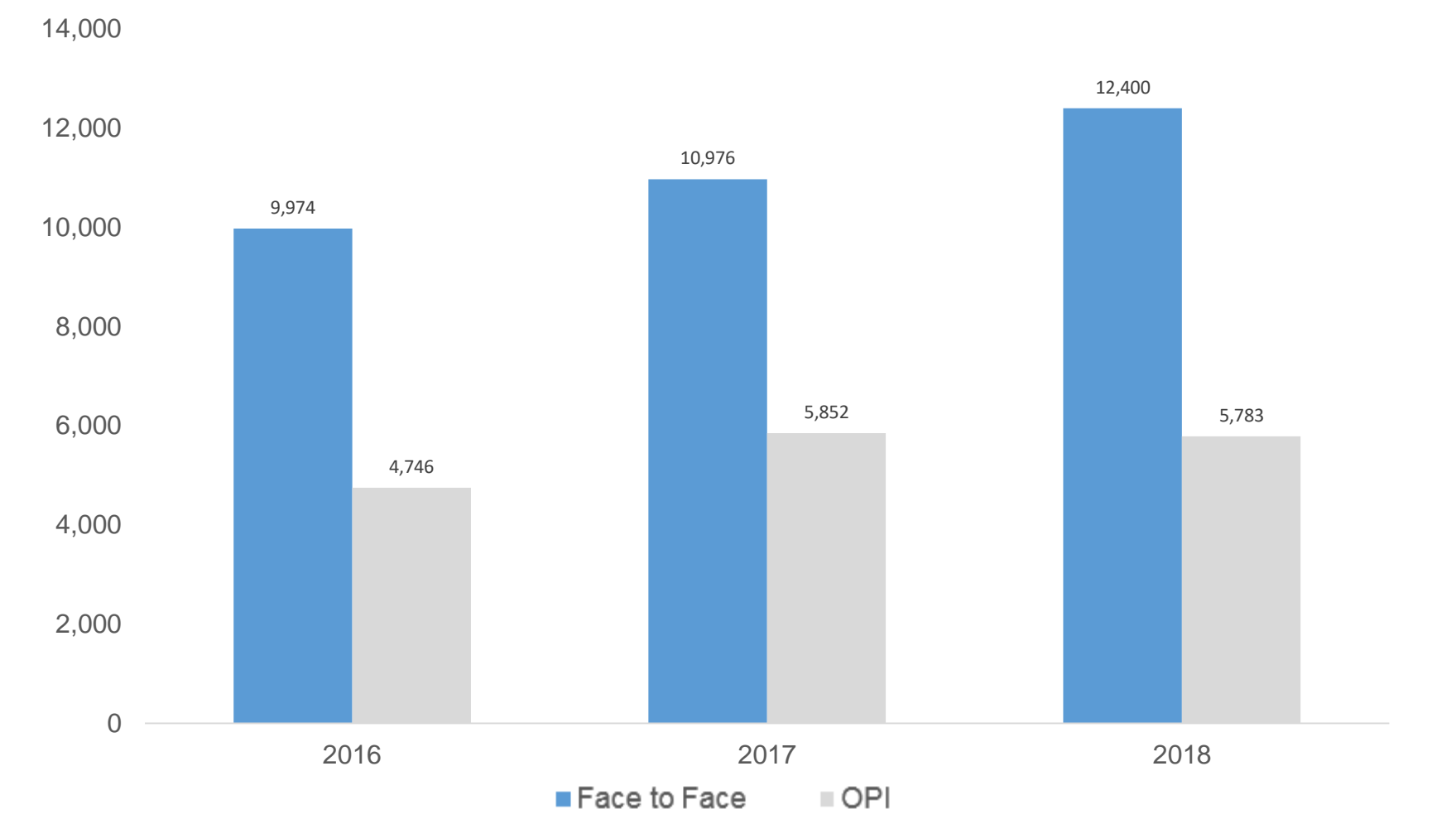
Racial and Language Diversity

- According to Statistics Canada (2016 Census) 51.5% of Toronto's population is composed of visible minorities compared to 49.1% in 2011, and 13.6% in 1981.
- 140 languages spoken in the GTA.
- Growing body of evidence suggesting a link between language barriers and patient safety.

Top Ten Languages at SickKids 2018/19

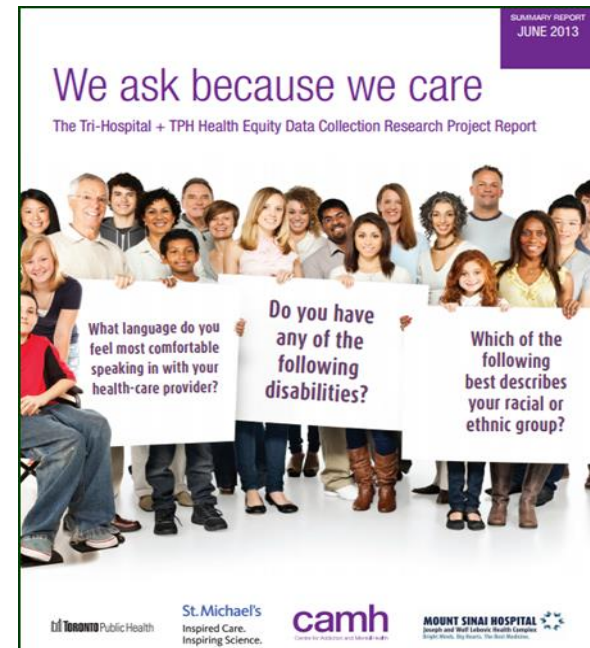
1. Arabic
2. Mandarin
3. Cantonese
4. Spanish
5. Tamil
6. Urdu
7. Vietnamese
8. Farsi
9. ASL
10. Punjabi

Requests for Interpretation Rising



Socio-demographic Data Collection Pilots

- In 2014, the local health authority for Toronto mandated the collection of socio-demographic data in all hospitals and community health centres.
- The aim was to connect patient-level demographic data to patient-level health outcomes to identify health disparities and develop programs that address these disparities.
- Tool was not tested with paediatric populations and some questions not measurable or relevant for paediatric patients.
- Decision to develop and test a paediatric instrument.



The adult tool included 8 core questions:

- | | |
|-----------------------------------|----------------------------------------------|
| 1. Born in Canada/Year of arrival | 5. Sexual orientation |
| 2. Spoken Language | 6. Disability |
| 3. Race/Ethnicity | 7. Income |
| 4. Gender Identity | 8. # of Individuals supported by that income |

Findings and Conclusions

1. Registration is an optimal point in the healthcare visit to collect socio-demographic information. With training and practice, clerical staff can become comfortable and competent with data collection
 - Of 4409 visits to the pilot sites, clerical staff completed tracking forms for 3562 patients (81% compliance rate for survey distribution)
2. Patients and their caregivers are comfortable and willing to provide their socio-demographic information
 - 71% caregivers and 79% of patients completed the survey
 - 97% of caregivers and 94% of patients reported being comfortable providing their demographic information to clerical staff
3. The Paediatric Instrument generated quality socio-demographic data
 - Most questions yielded high response rates
 - 95% of caregivers and 88% of patients reported that they understood the questions
 - 88% of caregivers and patients indicated they felt that the questions were asked in the right way

Final Paediatric Socio-demographic Data Collection Instrument

Caregiver Health Equity Survey

About the Caregiver

- 1. Caregiver present
- 2. Canadian-born
- 3. Housing
- 4. Spoken Language
- 5. Race/Ethnicity
- 6. Religion
- 7. Education
- 8. Gender
- 9. Sexual Orientation
- 10. Disability
- 11. Income that supports the child
- 12. Number of people supported by income

About the Child

- 13. Canadian-born
- 14. Spoken Language
- 15. Race/Ethnicity
- 16. Disability

Youth Health Equity Survey

- 1. Income that supports the child
- 2. Number of people supported by income
- 3. Caregiver present
- 4. Canadian-born
- 5. Housing
- 6. Spoken Language
- 7. Race/Ethnicity
- 8. Religion
- 9. Gender
- 10. Sexual Orientation
- 11. Disability

Cultural Competence Education

- Over 170 workshops; 3000 staff attended
- Series of e-learning modules
- Evaluation results indicated shifts in practice to more culturally competent care
 - Substantial increase in requests for face-to-face interpretation and doubling of telephone interpretation usage
 - Increase in patient satisfaction (from 69% to 82%)
 - Recognition by Accreditation Canada

Moving Forward

1. Clear commitment to equity in the new strategic plan
2. Establish key performance indicators to measure progress
3. Prioritize the collection of socio-demographic data
4. Develop a plan for regular cultural competence/safety education
5. Establish a health equity council and coordinate with emerging HR initiatives

QUESTIONS?