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# A SAMPLING OF HOSPITAL INITIATIVES THAT ADDRESS HEALTH EQUITY

This list is meant to provide the reader with a reference outline of the wide range of programs and policies mentioned in the reports by the 18 hospitals. The initiatives have been grouped into the following four categories: i) those that primarily support particular disadvantaged populations; ii) those that primarily address particular access barriers; iii) those that primarily serve to embed equity in existing programs or service directions; and iv) those that primarily address wider organizational context or success conditions for equity-driven reform. Many of the initiatives can fit into more than one category but have been listed only once. The list is in no particular order or preference.

## SUPPORT PARTICULAR DISADVANTAGED POPULATION

Implementation of a Geriatric Emergency Medicine Nurse and monitors wait times based on age distribution.

Inner City Health: Experiences of Racialization and Health Inequity — This research project undertaken by the Inner City Health Strategy Working Group examined the impact of racism and poverty as co-determinants of health for racialized groups and communities. The results of the study reinforce the need for health services that confront racism within the health care system as well as within the social environment and structures that contribute to the health of racialized and marginalized communities. The experiences of the many participants in the study provide crucial information on the impact of racism in the health care system, and points to areas where education is needed, and where practises need to be changed.

Perinatal Mental Health Community Outreach — This collaboration between Hospital and Scadding Court Community Centre (SCCC) is targeted to new immigrant refugee populations. A psychiatrist and allied mental health professionals will provide support to depressed mothers from marginalized communities following delivery.

Young Women’s Symposium — This forum was developed as a result of needs identified by Program graduates of the Hospital’s Young Mothers Prenatal Program, giving new young mothers, particularly those from diverse ethno-racial communities, the opportunity to come together and share common worries and wisdom.

Reluctant Intervention Symposium on Violence against Women — The Hospital’s Violence Against Women Action Committee (VAWAC) in partnership with COSTI Immigrant Services held a day long symposium focused on the experiences of women from marginalized groups. Attended by 130 health care professionals, the symposium explored woman abuse from the perspectives of patients and healthcare workers. The VAWAC committee works year round developing materials to assist patients and staff, delivering training and promoting awareness of woman abuse.

Anti-Homophobia/Transphobia campaign — In response to complaints of discrimination from LGBT patients and staff, Hospital launched an anti-homophobia/transphobia campaign, including posters, FAQ posted on the internet for staff and managers, lunch and learn sessions, lobby displays and a contingent in the PRIDE parade where Hospital staff distributed stickers reading “PRIDE IS GOOD FOR YOUR HEALTH”. Hospital has drafted a Trans policy and will be undertaking community consultations over the next few months. Hospital participated in an RHO conference presentation by staff from four hospitals about Hospital’s efforts to address homophobia/transphobia in Hospital’s institutions.

AODA Customer Service standard — Hospital produced brochures, posters, and e-learning modules which were shared with many other institutions. Hospital held educational sessions for managers, staff and the community at large. The International Day for Persons with Disabilities committee organized a well-attended community event featuring a presentation by The Honourable David C. Onley.

The Emergency Department — Geriatric Mental Health (ED-GMH) Education Program — The ED-GMH Program, funded by the TC LHIN aims to improve Emergency Department flow-through with needed, appropriate, and ethnoculturally sensitive care in a timely fashion for seniors with mental health and addiction issues presenting to the ED. The program contains a care path and an interactive, online multi-modular education program with voice over and case studies. The program trains front-line Emergency staff to recognize geriatric mental illnesses and determine what to do in response to those problems. Hospital has trained over 500 clinicians in this program.

Expansion of the \_\_\_\_\_ Centre for Alzheimer's Support and Training Caregiver Support Program — The overall objective of this project is to develop evidence-based interventions, tools and resources for unpaid caregivers who are caring for a family member with dementia at home. The caregiver training program delivers skill-building interventions that will better equip family caregivers to manage the day to day care of the person, reduce levels of caregiver burden and thereby lessen caregiver reliance on primary care, mental health and institutional services. This project will expand to provide specific language and culturally appropriate services for the Chinese community over the coming year.

Geriatric Task Force — The Hospital's inter-professional Geriatric Task Force developed a geriatric strategic plan that includes linking with community partners to build relationships and improve care, taking on two advanced practice nurses devoted to improving elderly care and creating a Geriatric Consult Team to address patient needs. Hospital's medical staff includes a Chief of Geriatrics.

Home at Last — Consistent with the provincial Aging At Home strategy, Hospital has partnered with community support agencies and the Toronto CCAC to become a pilot site for a recent LHIN-funded "Home at Last" project which will facilitate discharge for older patients by providing them with personal care and community supports in order to ease their transition from hospital to home.

Hospital Family Health Team focusing on program development in Care for the Homebound Patient (typical frail seniors) and Care for Young and New Immigrant Families.

Expansion and improvements made to Red Blood Cell Program (last year services for Thalassemia and Sickle Cell adult patients identified as a gap in sufficient services).

The \_\_\_\_\_ Hospital Translation Project - a joint initiative to translate generic patient education documents into 9 languages that could be used by all 18 hospitals.

Translation of a Spiritual Care services document into multiple languages.

Aboriginal Health Community Advisory Panel to dialogue towards a welcoming, respectful and culturally appropriate centre of care and guide the development of an Aboriginal Health Strategy.

New inpatient service for Aboriginal clients in the Addiction Program with minimal dropouts.

Chinese Outreach Pilot Program for Cantonese- and Mandarin- speaking patients and their families is currently being led by an internal group of Chinese professionals.

<p>Partnering with Toronto Public Health to provide a Dental Clinic for disadvantaged children and youth in Hospital's new Family Practice location.</p>
<p>Collaboration with Sherbourne Health Centre and the Trans community to advocate for improved services across the province.</p>
<p>Lesbian and queer women's health, in response to research findings about the low rates of Pap tests among lesbian and queer women, the hospital developed the Queer Women's Health Initiative (QWHI), a collaboration with Planned Parenthood Toronto, Rainbow Health Ontario and Sherbourne Health Centre; fills one of the gaps in health-care resources and services for lesbian, bisexual, trans men with a cervix and queer women, but also demonstrates the value of service organizations working together to share their knowledge, experiences and resources. To enable more than one access point to care for this community, the Hospital's sexual and reproductive health clinic implemented dedicated drop-in clinic hours for lesbians, queer women and trans men.</p>
<p>Partnership with community partner Women's Health in Women's Hands, a community health centre, identified a lack of clinical mental health support for the immigrant and racialized communities of women they serve. In response, the hospital placed a senior resident in psychiatry (under the supervision of staff psychiatrist) at the centre to provide direct patient care, case consultation and education to centre staff. As a result of this on-site support, the centre has identified a significant decrease in their mental health consult expenditure, and the admission of their patients to psychiatric emergency service has been virtually eliminated. The hospital is continuing this partnership and using it as a model for development of other community-hospital service initiatives.</p>
<p>Mental health promotion work with African Canadian youth in a number of schools.</p>
<p>Partnership with Etobicoke Services for Seniors to hold a Chronic Disease Self Management workshop series free to participants -- trained ESS staff provide six weekly courses of 2.5 hours each for 10 to 15 participants; workshops are modeled on the Stanford methodology and will be interactive and utilize group problem-solving strategies and leader modeling as a way to pursue course goals and objectives in a culturally sensitive manner.</p>
<p>New Integrated Psycho-geriatric Outreach Team to promote healthy aging at home; outreach team visits homebound seniors free of charge.</p>
<p>New Culturally Competent Mental Health Workshop – Hospital's Mental Health &amp; Addictions Population Panel is beginning to explore the issues of racial diversity, discrimination, stigma as it relates to newcomers and mental health populations by participating in The Opening Doors Project, an interactive workshop series developed by the Canadian Mental Health Association and Across Boundaries and Access Alliance Multicultural Health and Community Services.</p>
<p>Specialty clinic in ethno-racial dermatology –the development of a national educational initiative focused on ethno-racial dermatology, responds to the differential clinical needs in ethnic dermatology, and will enhance access to services for these populations.</p>
<p>Patients receive a letter on admission that explains the Home First program [returning home safely]. This letter has been translated into 9 languages (Arabic, French, Spanish, Portuguese, Punjabi, Tamil, Urdu, Traditional Chinese, and Simplified Chinese) to ensure both patients and their families understand what they are working towards during their stay in the Sub-acute Hospital.</p>
<p>Hospital has expanded support for people with physical disabilities – specifically individuals who have experienced a lower limb amputation – with the opening of the Amputee and Assistive Devices Clinic. The Clinic provides specialized outpatient services after inpatient rehabilitation. The Amputee and Assistive Devices Clinic interprofessional team includes a physician and certified prosthetist, physiotherapists, occupational therapist and</p>

<p>registered nurse.</p>
<p>A large segment of the clients served at the new northern branch of the Day Centre for Seniors at Steeles and Dufferin are Russian speaking, reflective of the Centres' location. Meeting the needs of the clients, many staff at the northern branch are Russian speaking.</p>
<p><i>Caring for your loved one</i> manual in its second edition, offers practical advice and strategies for both caregivers and frontline health care professionals, has been translated into different languages to outreach to vulnerable isolated populations.</p>
<p>Family Caregiver Connections - There has been a steady increase in partnerships between Jewish agencies in the community and the Hospital to provide free support to caregivers of seniors living in the community who might not be aware of or engaged with formal supports.</p>
<p>Hospital's Holocaust Resource Program continues to expand -- the numbers of attendees are growing (from 60 participants to 160 in 2009) and the number of services being offered increasing. Hospital offers a bi-monthly drop in place for Holocaust survivors with declining physical and/or mental health issues to relax, socialize and access a range of services (e.g. transportation, meals, entertainment, socialization, psychosocial counseling, and referrals).</p>
<p>Communities Helping Individual Patients (CHIP) program to cover costs of telephone services, long-distance calling cards and TV service for patients who cannot afford them -- addresses social isolation for lower socio-economic status patients and helps maintain or build connections to community.</p>
<p>A new navigator role in the Musculoskeletal program serves to expedite transitions for total joint patients, who are contacted at four points in the continuum of care to enable a thorough evaluation of challenges experienced on an individual level. This initiative will help to identify bottlenecks and more efficiently meet specific patient needs.</p>
<p>In-house dental services provided inpatients and outpatients with disabilities who require special care or equipment to be seated in a dental chair. Of approximately 3616 visits last year, 42% were from the community.</p>
<p>The Cardiac Outpatient program, supported by an interdisciplinary team has expanded its offering to include specialized services in diabetes, stroke, heart failure, primary prevention and home-based programming.</p>
<p>Through funding from the Regional Geriatric Program (RGP) of Toronto, a Psychogeriatric Resource Consultant is based at the Hospital, providing education and consultation to professional caregivers in long term care homes and community agencies to enhance the quality of care and services for older adults with dementia.</p>
<p>Launch of African Canadian Addiction treatment cycle: Group therapy and all key sessions are delivered by staff who are of African descent; extensive in-service education, training and planning discussions were provided for all staff of the Addictions Program (whether working directly with this particular group or not) to ensure broader environment was supportive, welcoming and conducive to a positive treatment experience.</p>
<p>Hospital is developing a list of resources available to support vulnerable patients on their staff portal to ensure more universal awareness, knowledge sharing and access to important equity-related information.</p>
<p>95% of staff has been trained to deliver Hospital's approach to care through the lens of harm reduction. Weekly rounds are conducted to ensure staff and volunteers are supported in this approach with strategies to reach patients who use substances and who may have mental health issues.</p>

## ADDRESS PARTICULAR ACCESS BARRIER

Interpreter-Phone-on-Pole (IPOP) can be conveniently wheeled where needed, quicker access to interpreters, cost-effective alternative to face-to-face.

Interpretation and Translation — Hospital's Interpreter program continues to expand due to education of staff and physicians on when and how to utilize interpreters. Translation has been completed for Hospital's Patient Services kiosk, for community teaching in arthritis, Medical Imaging and supporting the H1N1 flu campaign. Hospital has participated in the TC LHIN Interpretation proposal aimed at creating a shared service among hospitals.

Language interpretation and translation strategy which includes ensuring ASL language interpretation in all programs, provision of telephone and on-site language interpretation supports, translation of pertinent patient care information into the top nine languages of Hospital's patient community, and in-service education of clinical staff and awareness education on competent communication and care for clients with visual and audio disabilities.

Family Health Teams in York Region — Hospital is expanding healthcare services to York Region to facilitate greater access to primary care and clinical services for the growing diverse communities in the area, building on existing community partnerships. Internal data collected regarding patient demographics indicate that there is a significant referral pattern to the hospital from York Region via the Bathurst Street corridor in Toronto.

Scadding Court Community Assessment Clinic — This initiative is designed to enhance access to musculoskeletal/joint care for underserved adults through the delivery of assessment clinics in a community setting. The target group for this initiative is adults experiencing pain in the area of the hip and/or knee, with a focus on vulnerable, hard-to-reach, marginalized populations. A physiotherapist from the Rehabilitation Department will assess patients on site at Scadding Court and refer them to relevant services at the Hospital.

Access to Perinatal and Breastfeeding Support — A recent report conducted in Toronto birthing hospitals identified that a woman's breastfeeding experience was influenced by barriers such as difficulties accessing breastfeeding services in their own language, social isolation and separation from their extended family and therefore their support system. At Queen West CHC, a Hospital RN/Lactation Consultant teaches weekly prenatal classes and provides breastfeeding support in Chinese, as part of the Canadian Perinatal Nutrition Program (CPNP).

Scadding Court Re-development — Hospital is a lead partner in planning for the revitalization and re-visioning of the Scadding Court neighbourhood. Hospital has forged a new partnership with another Hospital to develop an environmental health program using a social determinants of health framework that will facilitate greater access to health care services and improve the overall health outcomes of this extremely diverse and underserved community.

Policy for People Without Federal or Provincial Insurance — A Hospital committee was formed this year to review and enhance the existing policy for people without federal or provincial insurance to ensure improved access to care and high quality of services for those vulnerable populations affected by this issue. The work of this committee is shared and informed by the work of the Women's College Hospital Network on Uninsured Clients.

The Compassionate Care Committee is a new cross-Hospital initiative to provide necessary care to people without OHIP cards while maintaining fiscal responsibility.

The Distress Assessment and Response Tool (DART) which is automated and asks patient about physical,

<p>emotional, social, informational, spiritual and practical difficulties which may interfere with patient's ability to engage with treatment, thus identifies barriers to access health resources.</p>
<p>Surgery preparation classes provided in the community closer to home for out of area patients by partnering with community providers, such as Shoppers Home Health Care.</p>
<p>Collaboration with Centre Francophone Services to provide services to Haitians.</p>
<p>As a WHO and UNICEF designated Baby Friendly™ hospital, this Hospital offers a drop-in breastfeeding clinic that is available to all women, including those who did not give birth at this Hospital. The program has made changes designed to provide better access to the diverse patient population, which includes neighbourhoods with immigrant populations as high as 57 per cent and a recent needs assessment that suggests 90 per cent of recent births in one neighborhood in the Hospital's catchment were to immigrant mothers. As a result, the Hospital program has expanded to include breastfeeding posters in different languages, Cantonese breastfeeding classes, and a further plan to introduce classes in Urdu.</p>
<p>Hospital opened an Audiology and Hearing Aid Dispensary Clinic, in partnership with the Canadian Hearing Society.</p>
<p>Collaboration with the Canadian Working Group on HIV and Rehabilitation for the development of a web-based consumer health information database to provide people with complex chronic illness and episodic disabilities access to reliable resources, considers the needs of individuals through the continuum of health care services.</p>
<p>Completed comprehensive reviews of Autism services and Inpatient Services. Both of these reviews included engagement with clients and families, and asked specific questions about access barriers.</p>
<p>Improving community access to self-help patient education material and furthering the hospital's reach, a new link on the hospital's internet provides 'A-Z' information on Health Conditions related to disability and concerns such as returning to work, going to school, healthy eating.</p>
<p>The Spinal Cord Information and Resource Centre is an online resource developed in partnership with the Canadian Paraplegic Association Ontario. Both partners recently have partnered with George Brown College and Centennial College to modify the website, which provides individuals with spinal cord injury with current information and links to others in the broader community.</p>
<p>The Community Support Worker in the Emergency is self-identified as Aboriginal with significant years of lived experience with homelessness. His role has been to assist patients in the ED who are homeless or under housed to better navigate use of internal services and those of community partners.</p>
<p><b>EMBED EQUITY IN EXISTING PROGRAM OR SERVICE DIRECTION</b></p>
<p>Completion of the GIAP (Geriatric Institutional Assessment Profile) survey, followed by plans to benchmark against other institutions using the same profile (this is part of NICHE — Nurses Improving Care for Health System Elders)</p>
<p>Cultural Preferences in Food Choices — Hospital's Nutrition Department completed taste audits with</p>
<p>sample Halal foods this past year which will be used as a basis for expanding food choices. The department will be undertaking a project in 2011 investigating cultural preferences in food choices based on the needs of Hospital's patient population.</p>
<p>Mental Health Community Outreach — Hospital's mental health programs continue to expand their reach into the</p>

community by capacity building. Through the provision of psychiatric consultations to agencies such as Jewish Family and Child, Metro Mothers' Network, South Riverdale Perinatal Network, Canadian Centre for Victims of Torture (CCVT) and AIDS service organizations (ASOs) the Hospital provides training, education and support for staff working directly with difficult to serve populations. The Department of Psychiatry continues to reach out to immigrants and newcomers by offering culturally competent programs and services, in partnership with Hong Fook Mental Health Association, such as its Ethnocultural Assertive Community Treatment Team (ACTT) as well as an ethnocultural mental health court support program. There is also a geriatric wellness program serving the Chinese community in partnership with Yee Hong Centre for Geriatric Care. Hospital has also been an active partner in the Mental Health and Addiction ER Alliance to improve and streamline mental health and addiction service delivery across the Toronto Central LHIN Hospital Emergency Departments.

Cultural Competency Training Manual and Workshops for Law and Mental Health Professionals — In the

Hospital's Mental Health Court Support Program, conscientious efforts have led to client-centred care that includes not only culturally diverse persons involved with law and mental health, but also their families and communities. The manual is a compilation of materials and knowledge developed in the program and an effort to build discussion, skills and knowledge in this area.

MAUVE (Maximizing Aging Using Volunteer Engagement) — One of the challenges of having volunteers on Hospital's geriatric units has been their discomfort in working with seniors because of a lack of knowledge, presence of stereotypes of aging, and lack of formal structure. This program which began in October 2009 provides intensive training and support to volunteers from the clinical team. Special attention is paid to recruiting volunteers from a wide range of cultural backgrounds, reflecting Hospital's patients. Skilled actors from the Standardized Patient Program at the University of Toronto enact role-playing scenarios of eating assistance, interacting with a non-verbal patient, and a patient with dementia. Two studies are underway, looking at the satisfaction on the volunteers and how MAUVE affects the patients' experience of hospitalization.

Collection of preferred language at registration in the ED.

Cultural competency training is incorporated into Language Line training for all staff in each department that requests installation of Language Line.

Customer Service equity data collection campaign – customer service surveys will be distributed to inpatients at discharge and spot audits of outpatients asking patients to rate their experience with service, their language of preference, race, ethnicity, age and gender in order to flag potential disparities in service across diverse groups.

Developing and expanding an anti-racism strategy to support Hospital's established accessible, inclusive, strategic approach to LBGTTQQI issues.

Two Hospital offices in Peel and in Scarborough have become increasingly involved with different ethno cultural groups; an extensive service mapping initiative is underway to build strategic capacity to respond to health equity developments in the areas of health promotion, systems planning and community engagement.

Produced report "Recovery through the Lens of Cultural Diversity" that provides analysis and action plan.

Hospital's NRC Picker patient satisfaction survey has been translated into 7 languages and could be available for use by hospital community.

Advance Teams with interprofessional representation have been created to address how they will incorporate principles of client-centred care that ensures patients' cultural and spiritual beliefs are recognized and respected, and that increases patients' involvement in directing and planning their care.

Hospital implemented a weekly facilitated community meeting of residential clients to respond in a timely manner to client issues and concerns.

Hospital establishing ethno-racial programming -- e.g., aboriginal drumming in a recreational therapy program.

Augmented support toolkit for staff working with clients who have disabilities.

Service delivery was enhanced through staff training. Training was provided to clinical staff to better address the needs of two underserved populations – seniors with behavioural disorders such as aggression, and medically complex seniors who, for example, have tracheostomies or Peripherally Inserted Cardiac Catheters (PICC).

Hospital's Health Equity Working Group kicked off the Health Equity communication campaign to raise awareness for all staff and physicians on health equity and its relevance to the delivery of programs and services. This consisted of a variety of initiatives including "meet & greet" sessions, committee presentations, interactive cafeteria and hall displays, educational articles in Hospital newsletter, as well as a lunch and learn session allowing clinical staff to discuss the topic of bariatric care through a health equity lens.

## ADDRESSES WIDER ORGANIZATIONAL CONTEXT OR SUCCESS CONDITIONS FOR EQUITY-DRIVEN REFORM

Hospital has implemented a Health Equity Council (HEC) which includes members from multiple program areas. The HEC is determining additional indicators for further analysis and developing strategies for improving Health Equity (informed by a directional analysis on health indicators that has already been performed), working with Dr. D. Stewart who is internationally respected for her work in women's health to propose an indicator of gender equity for each program at the Hospital, developing a curriculum for staff and trainees to enhance capacity for providing culturally appropriate care in conjunction with Patient-Centred Care Committee and the Cultural Competence Committee. Programs and service areas in the Hospital are required to identify a health equity measure that is pertinent to their unique population that they plan to track and report on.

Tri-Hospital Health equity data collection action project is a joint project of three acute care hospitals. The literature is clear that the gold standard for measuring equity of care is to link patient-level health data to patient-level socio-demographic data. This project aims for that standard by developing a model for hospitals to gather patient demographic data to increase quality of care and patient outcomes.

The objectives of the project are:

1. To determine the key demographic characteristics of the patients being served
2. To have better data to measure patient health outcomes and health inequities
3. To develop and pilot an effective data collection methodology
4. To evaluate health equity outcomes based on clinical indicators
5. To ensure knowledge exchange of successful piloted methodologies to other institutions

Workforce census of hospital's employees; completing a study of how employees from marginalized groups experience the Hospital work environment and working to enhance diversity and inclusion in the workplace based on the report's recommendations; maintaining a Diversity & Human Rights Office; having mandatory human rights and health equity training; expanding the Hospital's recruiting practices; launching a campaign in support of LGBT employees and patients; and having all senior leaders (the CEO and Vice-Presidents) attend workshops on equity and leadership. The belief is that these efforts will result in better communication amongst interprofessional team members and contribute to all patients being treated with dignity and respect. The Diversity and Human Rights Office is surveying other human rights offices and will identify measures that will be reported internally and included in the balanced scorecard.

Workplace Violence Prevention — Hospital’s workplace safety audit focused on the safety of the most vulnerable groups in the Hospital — people with disabilities, women, and other marginalized groups. To implement the recommendations of the audit, amongst other things Hospital printed and distributed safety plans in 13 languages for women experiencing abuse and a brochure with lists of resources; conducted in-person training of 1500 staff, developed an e-learning course, organized training on identifying and addressing woman abuse; and created a safety audit tool for managers to identify personal safety risks in their departments. Hospital created and distributed posters with information for patients that state: “Violence against women is a health care issue.”

Health Equity Training — Last year, Hospital developed, piloted and began health equity training for all employees, integrating community partners as faculty and as participants in the program. The training includes self-reflection, introduction to the terminology and statistics around health equity, and how our social power affects our interactions as health care providers. The workshop integrates learning from Hospital’s community consultations and the work of Hospital’s AODA committee. Partner agencies who have participated in Hospital’s sessions include: Circle of Care, City of Toronto Public Health, York Central Hospital, Scadding Court Community Centre, Southlake Hospital, St. Christopher House and others.

“Equity is good for your health” — Over the past year, the Hospital implemented a dynamic equity communication campaign with posters, brochures and educational events to raise awareness of health equity issues and promote positive change for patients as well as staff. The poster headlines include: “Studies show homophobia and transphobia affect our health”, “Studies show that discrimination and bullying affect your mental and physical well-being”, “Access and good care for people with disabilities”.

Medical Rounds — Over the past year Hospital held health equity grand rounds in Psychiatry with a presentation by Dr. Kwame McKenzie, Psychiatrist and Senior Scientist at CAMH on “Pathways to mental health care for ethnic groups in Toronto”. In the coming year, the Hospital’s Diversity and Human Rights Committee, together with several medical departments, will present a series of medical rounds to promote discussion and clinical initiatives on health equity.

HEALING/ARTSPACE initiative — The goal of this program is to foster a creative link between staff and patients at the Hospital and to exhibit artistic works by both. The theme for Hospital’s 2011 launch of this project is ‘equity and diversity’.

Corporate Competency Framework — Hospital developed performance indicators on equity for every position at every level in the Hospital to hold everyone in Hospital accountable for the skills and knowledge needed to work with diverse patients and colleagues. These are now incorporated into and used in Hospital’s annual performance management process.

Fair Employment Opportunity Training — Hospital requires all hiring managers and supervisors to attend this training on Hospital’s comprehensive “Fair Employment Opportunity Policy” which aims to ensure recruitment of qualified individuals on the basis of merit. The training covers how to ensure equity in all aspects of the hiring process — from developing job descriptions to ensuring an inclusive work environment. In addition, HR has developed interview questions and other assessment methods to ensure that all levels of candidates have skills and knowledge related to equity and diversity.

Internationally Educated Professionals (IEPs) Strategy — Hospital has recently launched an IEP Strategy to attract, integrate and retain qualified internationally educated professionals to employment opportunities at the Hospital. Current strategies include targeted career fairs and job posting sites, methods to assist IEP’s in obtaining recognition of their foreign credentials, enhanced IEP mentorship programs, and training for staff and managers. Future planned strategies include Hospital sponsored language training, IEP specific training programs, the formation of IEP Employee Resource Groups, and Candidate Experience Surveys.

Mentoring Partnership — Over the past year, Hospital joined the Toronto Region Immigrant Employment Council

(TRIEC) Mentoring Partnership. Mentors committed to spending 24 hours with mentees in job readiness activities such as interview coaching, resume writing, assisting with networking, providing guidance and encouragement resulting in many of the mentees finding employment. Mentors appreciate the opportunity to support and learn from mentees and the Hospital will continue to expand the program.

2010-2013 Community Partnership Strategy: "Becoming a Preferred Partner to Facilitate Better Health Outcomes" — The Community Partnership Strategy was developed to support the Hospital to more effectively establish new partnerships and strengthen Hospital's relationships with existing external partners. Ultimately, the result is better patient health outcomes due to enhanced coordination of care and improved access to services. Comprised of Hospital's vision, business and enabling priorities, outcomes and values, the strategy supports Hospital's existing efforts to reduce health inequities. The Partnership strategy will be complemented by a Community Engagement Framework and a Community Health Promotion Policy.

Membership in the World Health Organization-initiated International Network of Health Promoting Hospitals — this Hospital is now part of an international network where information exchange and sharing is fostered to address the social determinants of health for many vulnerable populations around the world. Hospital is currently developing the Community Health Promotion Policy that will use a social determinants of health framework to identify emerging community health priorities to be addressed by future hospital-community partnerships, focusing on the needs of underserved populations.

SciHigh — Hospital's \_\_\_\_\_ Research Institute founded SciHigh, a priority neighbourhood outreach program that takes science out of the lab and into the classroom. The SciHigh program brings the excitement of science into the classroom with engaging, hands-on interactive activities that are grade specific. Last year, SciHigh reached almost 5,000 students in over 90 Toronto area schools, in addition to hosting science workshops for senior high school students at the RI throughout the school year. The Research Institute also provides summer internships for five highly-qualified senior high-school students.

Pathways to Education — Most recently, Hospital's researchers at \_\_\_\_\_ Research Institute have successfully partnered with Pathways to Education, a support program out of the Regent Park Community Health Centre for high school youth; Visions of Science, a not-for-profit organization that advances the educational achievements and career aspirations under-represented youth in the fields of science; and the ARC Program, a new initiative designed to help fill the gap in after-school care for children in Toronto's 13 priority neighbourhoods.

The Respect Program to support a respectful and inclusive work environment for the hospital's diverse workforce and patient population, includes a corporate code of conduct.

Health Equity Resource Exchange (H.E.R.E. Ontario) has built an electronic resource toolkit to support and facilitate better organizational change, leadership, decision-making, accountability, and planning with respect to HE in collaborative between Hospital, Scadding Court, Health Nexus, Health Equity Council and 7 other community agencies.

A two-day train-the-trainer program was offered to all hospitals and healthcare organizations across Ontario, with the sharing of resources and toolkits developed by the Hospital. All cultural competence workshop material and the e-learning modules and film were available at no cost. Also, health care professionals have access to the multilingual patient education material on the Hospital's website.

Creation of a Learning Centre for Nursing and Inter-Professional Providers--curriculum is being designed to incorporate educational modules on cultural competency, care that is sensitive to and knowledgeable about the health beliefs and behaviours, the epidemiology and disease risks, and treatment outcomes of specific patient populations.

Implementation of a Board recruitment strategy to enable a diverse Board membership reflective of the communities served and desired to serve.

Hospital supports staff involvement in key external committees that work collaboratively to address health equity issues: staff member becoming Co-Chair of Solutions, East Toronto's Health Collaborative, and representing Solutions on the Inter-Network Coordinating Group (INCG) which brings together the leadership of all four collaborative networks of health and community care organizations working to address health equity issues in Toronto; key leadership and content expert role in the development of the TC-LHIN-sponsored Healthy Connections, 'Self-Managing Care: From Ideas to Solutions' conference. The focus of the conference was on best and promising practices to support vulnerable populations to self-manage their complex chronic conditions. Hospital supported 10 staff members to this conference.

Hospital's Senior Management Team requires the use of the Health Equity Impact Assessment Tool to ensure the Hospital's health equity priorities are reflected in its policies, procedures and planning activities. Education on the use of the HEIA Tool was provided to various key groups that regularly develop policies and plans at the Hospital soon after the policy became effective. The Health Equity Working Group serves as a helpful resource to staff and physicians on the use of this Tool. As part of this policy, completed copies of the Tool are to be sent to Corporate Planning for tracking and reporting purposes. The usage of the Tool will be incorporated into regular reports of the Health Equity Working Group.

Human Resources Division held a Diversity Education Session for their Leadership group facilitated by Beeing (Building Equitable Environments), rolled out to over 50 managers, directors and senior management across the organization.

Formalized Hospital interpreter policy; the Manager of Client Appointment Services participated in the User Group created by the TCLHIN to recommend standards and policies for interpretation services; questions related to client/family need for an interpreter and the language spoken at home are required fields in the electronic medical record (EMR) -- based on the information in the EMR database, interpreters are automatically booked for medical clinic appointments; through the Hospital Collaborative, had its inpatient brochure, consent and capacity and infection control documents translated into several languages; Information Booklet, which is given to families upon admission and registration has the welcome message and information about interpretation services translated into the top 10 languages spoken by clients and families.

Enhancing Client Family Centred Care (CFCC) -- Introduced a social worker and family support specialists in the Family Resource Centre to better meet the needs of clients and families and to assist them in navigating the health care system; held two workshops attended by 134 staff facilitated by Bev Johnson, President and CEO of the Institute for Family-Centred Care with a focus on increasing staff understanding and appreciation of the client and family experience of care. Client and family representatives participated in a visioning retreat facilitated by the Family Resource Centre team and identified key resource information themes important to them. Members of the Family Advisory and Youth Advisory Committees also consulted with the FRC team on the layout of the FRC environment; feedback was used to redesign the FRC environment to be more welcoming and reorganized resource materials to reflect the diverse needs of clients and families. The team targeted outreach and support efforts to clients and families in lower socioeconomic geographic areas. The intent is to facilitate family networking and to link families with external support as well as resources in the FRC. The Family Support Fund process for accessing financial support has also been reviewed and revised to increase equitable, transparent access for families.

All staff and volunteers in the Patient and Family Learning Centre will have training on equity and knowledge of the barriers to health literacy so that they can serve the population according to their needs.

Course and workshops are being provided to build staff teaching competencies including being able to identify barriers to patient learning and respond accordingly, e.g., active listening skills and teach back technique,

knowledge of health literacy and plain language communication, using graphic illustrations, adhering to a grade 6 literacy level for all written materials, vetting materials for usability by patients and families.

Strategy to improve Aboriginal hiring with goal to increase Aboriginal staff by 14 over next 3-5 years; also included five, one-day training sessions to create inclusive environment on Aboriginal issues, events hosted by Aboriginal Services to increase awareness, communications and outreach regarding new programming within Aboriginal Services.

In preparation of Hospital's 2010 report, an internal survey to gather information on current state inventory of equity activities was completed by seven major high volume patient departments; several meetings were held with staff in clinical areas. "The consultative process used in developing the plan was a deliberate strategy to ensure that across the organizations staff had opportunities to provide direct input and to facilitate a dialogue about how equity is embedded in the work."

Hospital launched a mental health strategy targeting employees.

Clinicians are being given training on cultural competency, clear communication and writing to address health literacy levels.