Equity in Hospitals: Analysis of the 2025/26 QIP Submissions

This summary shares insights from the **Equity** section of the 133 **Quality Improvement Plans (QIPs)** submitted by hospitals for 2025/26.

Progress Report

89% of change ideas included in QIPs for Access and Flow indicators were implemented.

Equity Training

Most common successes or enablers:
- Data and tracking
- Leadership engagement
- Protected time for education

Most common challenges or barriers:
- Other priorities
- Workload and time constraints

Common change ideas from teams making progress in 2024/25

Types of training: Indigenous, anti-racism

Audience for training: existing staff, senior leadership

Sickle Cell Disease

Most common successes or enablers:
- Data understanding
- Staff education
- EMR flagging

Most common challenges or barriers:
- Managing change
- Low case volume

Common change ideas from teams making progress in 2024/25

Staff education on sickle cell disease

Improving and reviewing triage processes

Workplan Report

Indicator progress

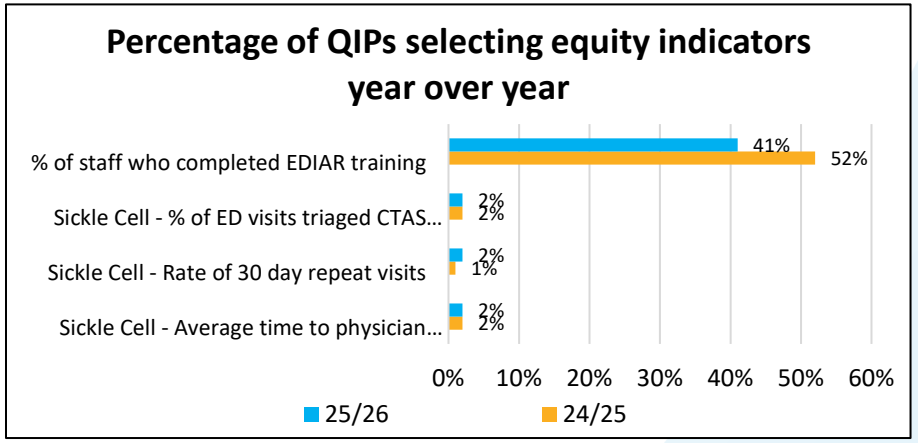
73% of staff with training completed **(↑ from 34% last year)**

79% of ED visits for sickle cell disease triaged CTAS 1 or 2 **(↑ from 72% last year)**

90 min Average ED wait time to PIA for sickle cell disease **(no change from last year)**

29% Rate of 30-day ED repeat visits for sickle cell disease **(↓ from 41 last year)**

Indicator uptake for 2025/26



Common change ideas planned for 2025/26: equity training

Types of training: Anti-racism, bias, Indigenous, 2SLGBTQIA+

Audience for training: People leaders, existing staff, senior leadership, physicians

Common change ideas planned for 2025/26: sickle cell disease

Staff education on sickle cell disease

Review data accuracy by using documentation audits

Improve or implement use of **order sets and standard work**

Improve transfers of care

Staff education on CTAS/triage

Narrative Report Themes

- Equity, inclusion, diversity, and anti-racism **training**
- **Partnerships** with health care and community organizations
- **Patient participation** in decision-making and planning with community partnership, co-design, and centring patient voices
- **Culturally responsive, inclusive programs** and services and respectful, responsive care

To review the data and learn more about the QIPs submitted, visit Query QIPs.

Abbreviations: 2SLGBTQIA+, Two-Spirit, lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, and other sexual and gender-diverse communities; CTAS, Canadian Triage and Acuity Scale; ED, emergency department; EDIAR, equity, diversity, inclusion, and anti-racism; EMR, electronic medical record.

Need this information in an accessible format? 1-877-280-8538, TTY 1-800-855-0511, info@OntarioHealth.ca. Document disponible en français en contactant info@OntarioHealth.ca

ISBN 978-1-4868-9471-0 (PDF)

Ontario Health