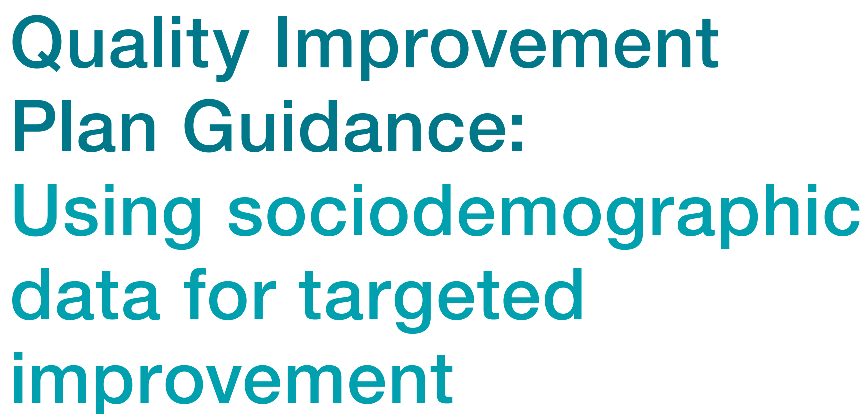

Quality Improvement Plan Guidance:
Using sociodemographic data for targeted improvement

Health Quality Ontario

Let's make our health system healthier

Purpose

The purpose of this guidance is to support organizations in collecting and analyzing sociodemographic data –on a population's social and demographic characteristics including age, sex, gender, education level, income level, race, and language – with the aim of informing targeted improvement that addresses health inequities in their Quality Improvement Plans (QIPs). Collecting and analyzing sociodemographic data is the first step toward addressing equity. It enables organizations to identify particular challenges some groups face. The next step, as we will cover in future guidance, is to implement change ideas to address these inequities identified by data.

Health Equity allows people to reach their full health potential and receive high-quality care that is fair and appropriate to them and their needs, no matter where they live, what they have, or who they are. *Read more about Health Quality Ontario's 2016-2019 Health Equity Plan here.*

Background

We know that there are large health inequities across Ontario. For example, we know that racialized people have shorter life expectancies; that low-income people have poorer health outcomes; and that many LGBTQ2S-identified people experience discrimination and challenges finding health care that meets their needs. A significant amount of work is needed to tackle these health inequities; however, currently few health care organizations have developed targeted approaches to address this problem. For many, it might be difficult to know where to begin.

Collecting and analyzing sociodemographic data on an organization's population is a useful way to identify health inequities that can then be addressed. However, many organizations have questions about how this data should be collected and analyzed to drive improvements in care.

To find out more about how organizations are working to address health equity:

- Read Health Quality Ontario's reports: Health equity in the 2016/17 QIPs | Health equity in the 2017/18 QIPs
- Use the Query QIPs tool to search the QIPs for content related to health equity or your area of interest: Query QIPs.
- Check out health equity-related posts on Quorum

Getting Started

Below are three resources that outline how sociodemographic data and evidence-based decision-making can help you to achieve targeted improvements to address health inequities.

- The Institute for Healthcare Improvement's *Achieving Health Equity: A Guide for Health Care Organizations*
  - Step three in the Institute for Healthcare Improvement's five-step framework to support organizations to achieve health equity is "Deploy specific strategies to address the multiple determinants of health on which health care organizations can have a direct impact." This step starts with collecting and analyzing data to understand where disparities exist.
- *Measuring Health Equity Report: Demographic Data Collection and Use in Toronto Central LHIN Hospital and Community Health Centres*
  - This report outlines how the Toronto Central LHIN and Sinai Health System have embedded the collection of sociodemographic data in hospitals and community health centres, and how this data is being used.
- The World Health Organization's *National Health Inequality Monitoring: A Step-by-step manual*
  - This five-step manual is an accessible and practical reference outlining how to identify and monitor health inequalities through data collection and analysis.

Understanding the problem

To address inequities, you need to fully understand the problem you are trying to solve. **This involves three steps: identifying inequities; understanding the current state; and identifying root causes that can then be addressed.**

1. Identifying inequities: How to collect data that will allow you to identify a problem that disproportionately affects a subpopulation of individuals

Collecting and examining data that illustrates the sociodemographic characteristics of who is currently seeking services helps highlight subpopulations that may be experiencing inequities. This information is essential to designing targeted quality improvement initiatives that will address these inequities.

The resources below offer guidance on how to begin to collect and/or identify data to identify inequities. Consider the various types of data that are available at your organization that might help identify populations and their needs.

Resource: The Measuring Health Equity Project developed a guide for health care organizations to consult when planning and implementing sociodemographic data collection in health care settings. This guide offers a methodology for collecting data and guidance on supporting individuals responsible for data collection to ensure questions are asked appropriately.

2. Understanding the current state: How to use stratified data to understand how access, experience, and/or health outcomes vary according to sociodemographic factors

By examining data that is stratified according to sociodemographic characteristics, you can identify subpopulations that face inequities on health and/or health care access outcomes. Here are some steps to get you started:

1. Select one or two indicators that your organization has prioritized to improve.
2. Investigate the current state/baseline of this indicator for different subpopulations.
3. Identify the differential outcomes (where present)

Read about Access Alliance's work on improving the use of data in Ontario's community health centres, including links to resources

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Resource: Sinai Health System's Human Rights and Health Equity team hosted an introductory webinar on data stratification in November 2017. The webinar outlines statistical concepts and tools to support health care organizations plan for stratifying clinical indicators.

Resource: The Canadian Institute for Health Information's Measuring Health Inequalities: A toolkit is designed to assist with measuring and reporting on health inequalities, with a focus on stratifying health indicators.

Resource: Many local health integration networks (LHINs) have developed sub-region data sets that can be used to further understand populations within an existing geography. As an example, the Common Data Deck for Central West LHIN Sub-Regions has population-level data for the following:

- Population size (overall and by age group)
- Change in total population between 2011–2015
- Family and household composition
- Language, immigration, and identity
- Education, income, and housing affordability

3. Identifying root causes: How to seek out the root causes of the inequity you are examining

The final step of understanding a problem digs deeper into identifying the root causes that are leading to the inequity you have identified. The complexity of how the social determinants of health interact with one another to create compounding inequities requires a coordinated, solutions-focused approach.

To gain a deeper understanding of these root causes, consider partnering with individuals within the subpopulations. Understanding individuals' experiences when receiving services from your organization can help you to understand root causes and the lived-experience impact on health and health care access.

Resource: The Prevention Institute's THRIVE Tool for Health and Resilience in Vulnerable Environments is a tool for engaging community members in vulnerable populations and taking action to improve health and health equity.

Resource: Health Quality Ontario's Patient Experience Mapping Guide can help you to map your existing processes and the emotions that patients feel as they move through each stage, and identify areas for improvement.

Resource: The Five Whys tool and Fishbone Diagram tool can help your team reflect on the different components of a system that may be contributing to a problem.

Design and test changes

Once you have identified the root causes of the problem, you can design changes or initiatives that address them. **It is important to test whether these changes are working by monitoring your data.**

Organizations across the health care sector are using data to drive quality improvement, taking actions including:

- Working to ensure commitment and dedicated organizational support to health equity through strategic and organizational planning
  — *Read examples from* Access Alliance *and* Toronto Grace Health Centre
- Identifying existing organizational data sources to learn about patient populations
  — Read how London Health Sciences Centre has done this
- Developing intake and/or sociodemographic data collection process led by well-trained staff to ensure data is collected sensitively and effectively
  — Read about how the Southwest Ontario Aboriginal Health Access Centre has done this
- Analyzing data that highlights the inequities that exist within and between populations
  — Read about how London Health Sciences Centre used different data to inform three different projects
- Fostering partnerships to develop population-specific indicators to be used across organizations
  — Read about how Access Alliance has done this
- Developing partnerships with community organizations to ensure that all residents and patients receive the support they need
  — Read about how Kirkland Lake Long-Term Care Home has approached this
- Continuously monitoring data and adjusting interventions as required
  — Read about how Kirkland Lake Long-Term Care Home has done this

Implement and sustain change

Consider these key actions in your QIP:

- Add process measures within another outcome metric addressing the stratified demographic data
- Test your ideas on a small scale and continually evaluate your progress
- Make modifications as necessary and prepare for your next improvement cycle
- Embed successful strategies into your processes and monitor adoption
- Record the lessons learned during implementation in your Progress Report

What's next?

This guidance document is designed to help you take the first step to better understand the scope of health inequities in the populations you serve. The next step is to start implementing change ideas to address these challenges. We encourage you to go onto Quorum where you can learn from the stories that we've linked to throughout this document, ask questions as you determine your next steps, and then share the approaches your organization is taking to reduce health inequities.