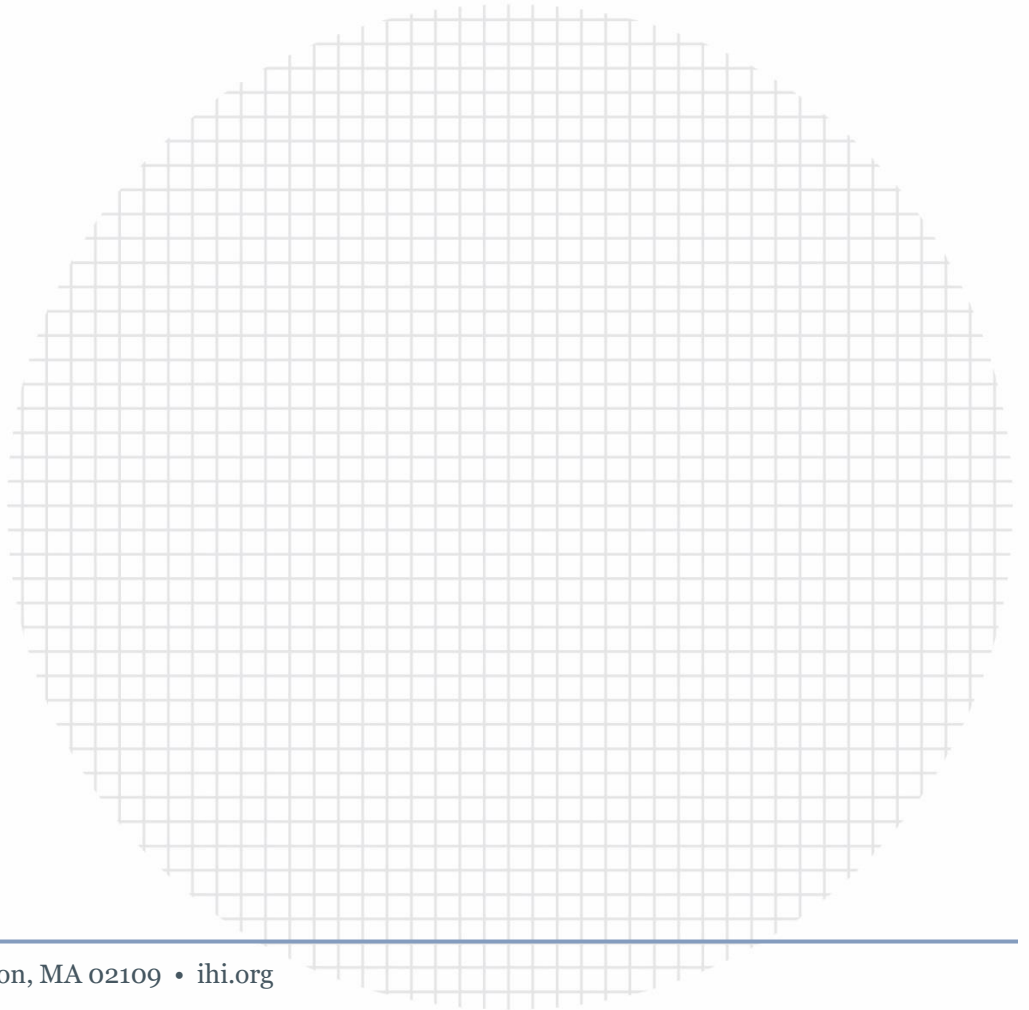




# Improving Health Equity: Assessment Tool for Health Care Organizations



AN IHI RESOURCE

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# Improving Health Equity: Assessment Tool for Health Care Organizations

The Institute for Healthcare Improvement (IHI) developed this assessment tool to help health care organizations evaluate their current health equity efforts and determine where to focus improvement efforts. Teams use this assessment to provide direction for building an equity strategy and promote conversations within the organization to improve health equity.

The assessment was developed by working and learning alongside eight US health care systems participating in the two-year Pursuing Equity initiative (2017–2019) to understand key actions to make equity sustainable and impactful. The process of improving health equity is not linear; however, in using this assessment, your organization will be able to identify current achievements and opportunities to take action to further improve equity.

## Definitions

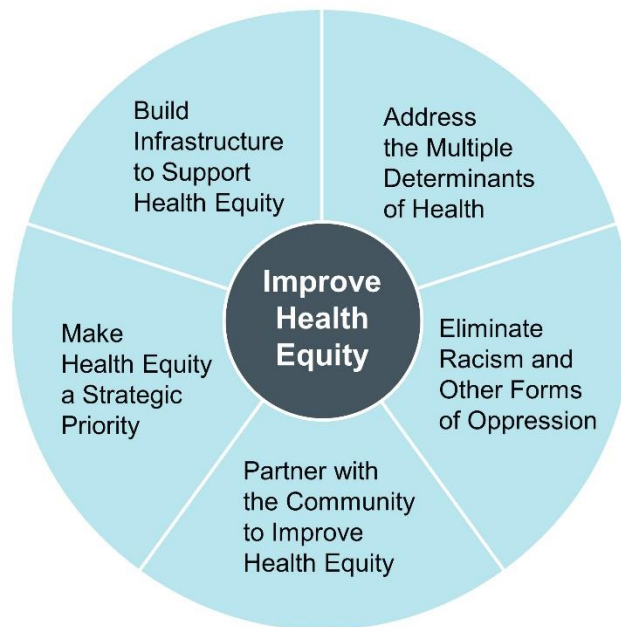
It is important to establish explicit definitions of several terms used in the assessment.

- **Health equity:** “Health equity is achieved when every person has the opportunity to attain their full health potential and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.”<sup>1</sup>
- **Health inequity:** Differences in health outcomes that are systematic, avoidable, and unjust.<sup>1</sup>
- **Institutional (or institutionalized) racism:** The differential access to the goods, services, and opportunities of a society by race.<sup>2</sup>
- **Multiple determinants of health:** The range of personal, social, economic, and environmental factors that influence the health status.

## Background

The 2016 IHI White Paper, *Achieving Health Equity: A Guide for Health Care Organizations*,<sup>3</sup> describes a five-component framework to guide equity improvement efforts (see Figure 1). Our work with the eight Pursuing Equity health systems validated the five components of the framework and added nuance. This assessment tool uses this revised five-component framework and our learnings from working with the eight health systems to enhance the initial assessment tool included in the white paper. This updated assessment tool went through several iterations of feedback from health system end-users and we expect the assessment, as a living document, will continue to evolve and be improved with continued testing and feedback.

**Figure 1. IHI Framework for Health Care Organizations to Improve Health Equity**



- **Make Health Equity a Strategic Priority**

Organizational leaders commit to improving health equity by including equity in the organization’s strategy and goals. Equity is viewed as mission critical — that is, the mission, vision, and business cannot thrive without a focus on equity.

- **Build Infrastructure to Support Health Equity**

Operationalizing a health equity strategy requires dedicated resources, including human resources and data resources, as well as an organizational infrastructure.

- **Address the Multiple Determinants of Health**

Health care organizations must develop strategies to address the multiple determinants of health, including health care services, organizational policies, the organization’s physical environment, the community’s socioeconomic status, and encouraging healthy behaviors.

- **Eliminate Racism and Other Forms of Oppression**

Health care organizations must look at their systems, practices, and policies to assess where inequities are produced and where equity can be proactively created.

- **Partner with the Community to Improve Health Equity**

To support communities to reach their full health potential, health care organizations must work in partnership with community members and community-based organizations that are highly engaged with community members.

## Instructions

In the assessment tool, there is a list of individual elements for each of the five framework components. Using a 1-to-5 scale, organizations rate their level of progress for each element to assess current health equity efforts and identify where opportunities to improve exist. The assessment can serve as a useful starting point for discussions among health system leaders about health equity within the organization.

- Select a group of 3 to 8 senior leaders who have broad responsibility for health equity in the organization to complete the assessment.
- Each person should complete the assessment individually.
- For the five framework components, review each individual element and indicate a rating of 1 to 5 or “Do not know.”
- Use the comments box for each framework component to note specific examples, achievements, challenges, questions, next steps, and any other important items. Identify key supporting documents in the comments box that show how that component has been operationalized in your health system.
- Convene the group of senior leaders to review and discuss all individual assessment scores and comments. Note the similarities and differences across individual responses and where there are opportunities to improve in each component (i.e., elements with low scores can be used to prioritize areas in which to begin or strengthen your work).
- Review the 1-to-5 ratings for each element. Discuss the following questions:
  - For which elements do our individual scores vary the most? Discuss the variation to understand differences in scores.
  - In which components (and individual elements) do we have little or no progress (i.e., elements rated a 2 or 1)?
  - What would it take for us to rate ourselves a “5”?
- Elements with a “Do not know” response should be discussed further with your team:
  - Why don’t we know how the organization rates on the element?
  - How can we find out the status?
  - Why is it important for us to find out?
- Summarize the assessment findings as a group and use the following questions to formulate next steps:
  - What are the top two or three findings that are most important for us to address in the near term?
  - Who should we meet with to begin to act on our findings?
  - Where are our strengths and where do we have the greatest opportunities for improvement?
- Review the accompanying IHI guides for each of the five framework components to review examples and identify specific tactics for next steps.<sup>4</sup>

### IHI Framework Component: Make Health Equity a Strategic Priority

Element	Level of Progress Assessment scale: 1 = No work in this element. 5 = The organization consistently executes on this element.					
Health equity is articulated explicitly as a priority in key strategy documents (e.g., organizational strategic plan, fiscal plan, annual plan) and there is a clear case for how equity relates to the organization's mission, vision, and values.	1	2	3	4	5	Do not know
The organization has a plan for operationalizing the health equity strategy, tracking progress over time, and reviewing health equity data at the board, leadership, and team levels.	1	2	3	4	5	Do not know
The organization builds staff awareness, will, and skills to improve health equity.	1	2	3	4	5	Do not know
Senior leaders and the board regularly communicate the importance of health equity as a strategic priority to staff and empower staff at all levels to act on the vision.	1	2	3	4	5	Do not know
Executive compensation is tied to improving health equity processes and outcomes.	1	2	3	4	5	Do not know
Equity is a consideration in hiring decisions and improving health equity is part of senior leader job descriptions and responsibilities.	1	2	3	4	5	Do not know
Health equity is articulated as an explicit priority across business units.	1	2	3	4	5	Do not know
<b>Comments</b> (note examples, achievements, challenges, questions, next steps, key supporting documents, etc.)						

### IHI Framework Component: Build Infrastructure to Support Health Equity

Element	Level of Progress Assessment scale: 1 = No work in this element. 5 = The organization consistently executes on this element.					
The organization stratifies workforce data and patient data for key outcome measures by REaL (race, ethnicity, and language) factors to identify potential inequities.	1	2	3	4	5	Do not know
Data demonstrating health equity gaps (i.e., REaL-stratified workforce, patient experience, outcomes, and quality data) are shared transparently using data dashboards and communicated broadly to key audiences.	1	2	3	4	5	Do not know
People impacted by inequities are directly engaged as key partners in work to improve equity.	1	2	3	4	5	Do not know
Staff are trained to build their capability to improve health equity and to advance equity improvement work for which they are responsible.	1	2	3	4	5	Do not know
There is a clear institutional department/office with reliable funding that is responsible for improving health equity (beyond internal diversity and inclusion of our staff).	1	2	3	4	5	Do not know
<b>Comments</b> (note examples, achievements, challenges, questions, next steps, key supporting documents, etc.)						

### IHI Framework Component: Address the Multiple Determinants of Health

Element	Level of Progress Assessment scale: 1 = No work in this element. 5 = The organization consistently executes on this element.					
The organization uses stratified data to identify clinical areas where inequities exist, has set aims to address major gaps, and is implementing efforts to close those gaps.	1	2	3	4	5	Do not know
The organization has a system in place to screen for social determinants of health and connect patients to services to support their social needs.	1	2	3	4	5	Do not know
The organization uses its economic power as a large employer in the community to pay employees a living wage.	1	2	3	4	5	Do not know
The organization uses its purchasing power to buy locally and procure supplies and services from women- and minority-owned businesses to promote economic development in the community.	1	2	3	4	5	Do not know
The organization creates programs for its employees and the community to promote health and healthy behavior changes.	1	2	3	4	5	Do not know
The organization makes financial investments in the community and sponsors improvements in surrounding neighborhoods by creating parks, walking trails, and community spaces.	1	2	3	4	5	Do not know
<b>Comments</b> (note examples, achievements, challenges, questions, next steps, key supporting documents, etc.)						



### IHI Framework Component: Eliminate Racism and Other Forms of Oppression

Element	Level of Progress Assessment scale: 1 = No work in this element. 5 = The organization consistently executes on this element.					
The organization's leaders articulate the importance of addressing the health system's role in dismantling racism and other forms of oppression.	1	2	3	4	5	Do not know
Leadership provides formal opportunities for staff to engage in conversations about how racism and other forms of oppression impact their services, their lives, and their patients' lives.	1	2	3	4	5	Do not know
The organization reviews policies, practices, and norms in human resources, business units, clinical care, and other organizational areas to assess for potential inequitable impact on communities of color and other marginalized populations, and to redesign where needed.	1	2	3	4	5	Do not know
The organization accepts Medicaid and other health insurance that serve predominantly marginalized populations as it would other types of insurance.	1	2	3	4	5	Do not know
<b>Comments</b> (note examples, achievements, challenges, questions, next steps, key supporting documents, etc.)						

### IHI Framework Component: Partner with the Community to Improve Health Equity

Element	Level of Progress Assessment scale: 1 = No work in this element. 5 = The organization consistently executes on this element.					
The organization partners with community-based organizations to address the social needs of patients and families.	1	2	3	4	5	Do not know
The organization works with its community partners to identify and invest in community development.	1	2	3	4	5	Do not know
The organization participates in community-based coalitions and has established reliable governance and systems for improving health equity, including shared decision making.	1	2	3	4	5	Do not know
<b>Comments</b> (note examples, achievements, challenges, questions, next steps, key supporting documents, etc.)						

## References

- <sup>1</sup> *NCHHSTP Social Determinants of Health: Definitions*. Centers for Disease Control and Prevention. <https://www.cdc.gov/nchhstp/socialdeterminants/definitions.html>
- <sup>2</sup> Jones CP. Levels of racism: A theoretic framework and a gardener's tale. *American Journal of Public Health*. 2000 Aug;90(8):1212-1215.
- <sup>3</sup> Wyatt R, Laderman M, Botwinick L, Mate K, Whittington J. *Achieving Health Equity: A Guide for Health Care Organizations*. IHI White Paper. Cambridge, MA: Institute for Healthcare Improvement; 2016. <http://www.ihl.org/resources/Pages/IHIWhitePapers/Achieving-Health-Equity.aspx>
- <sup>4</sup> *Improving Health Equity: Guidance for Health Care Organizations*. Boston: Institute for Healthcare Improvement; 2019. <http://www.ihl.org/resources/Pages/Publications/Improving-Health-Equity-Guidance-for-Health-Care-Organizations.aspx>