
POSTER ABSTRACT

All talk...only a little action: a reflection on embedding equity into integrated care models in Ontario, Canada

23rd International Conference on Integrated Care, Antwerp, Flanders, 22-24 May 2023

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Background: Ontario Health Teams (OHTs) are a recently introduced model of delivery intended to integrate services to deliver connected care to defined populations in Ontario, Canada. The Quadruple Aim advocates for improving patient experience, reducing cost, advancing population health, and improving the provider experience; it is meant to be a guide for OHTs for performance outcomes and as a framework for evaluation and reporting. The Quintuple Aim, incorporating an added focus on health equity, has recently been introduced to OHTs, where equity is also built into continuous quality improvement requirements. As embedded OHT research fellows, we recognize our key role in supporting equity in healthcare delivery and programs. However, we also observe the challenges to generating actionable initiatives to integrate equity into OHTs.

Objective: The objective of this presentation is to describe equity initiatives being incorporated in four OHTs in Ontario, Canada and to identify the barriers and facilitators at the micro, meso and macro levels. This presentation is aimed at those involved in integrated care research, policy, practice, and education.

Methods: We will use a multiple case study design to describe the contexts of four integrated care models representing large, mid, and small urban regions of the province. This work is guided by the Rainbow Model for Integrated Care, which conceptualizes different domains of integrated care. We will include multiple data sources from each OHT, including key documents, formal and informal community partnerships, the level and nature of engagement with equity-deserving groups in governance processes, the extent to which equity is emphasized in strategic plans and other documents, and the resources available, we share insights gleaned on barriers and facilitators to applying an equity lens.

Key Results: We identify challenges related to data availability for health equity decision making and health systems planning. Specifically, difficulties exist in accessing meaningful and linked data to understand OHT attributed populations; these difficulties are compounded when seeking data specific to equity deserving groups and when attempting to link equity relevant indicators to health system indicators. Furthermore, meaningful engagement with equity deserving groups in

order to build relationships requires time and resources that are difficult to source; such engagement is particularly challenging in an environment of limited financial resources, where frequent reporting and pressure to quickly deliver outcomes is emphasized. OHTs are collaborative governance models composed of representation from member organizations, patients, and academics; this collaborative approach to governance can be a facilitator to embedding equity deserving groups into the structure of OHTs.

Next Steps: Ontario Health Teams require support in creating comprehensive equity approaches that are specific to the needs of their communities and teams; further work is needed to better understand the needs of OHTs in this regard.