

**Summary of  
CENTRAL WEST LHIN's  
Diversity and Equity Core Action Group Meeting**

**Thursday, February 18, 2010**

**1. Diversity, Cultural Competency and Equity: Revised Working Definitions**

- Working definitions have been drafted (*view appendix*)

**2. Health Equity Plan**

- LHIN will expect health service providers to submit a health equity plans in the future.
- Currently the Diversity and Equity Core Action Group is advising the development of the Central West LHIN's Health Equity Plan framework.
- In the absence of a Health Equity Plan framework in the LHIN, it was recognized that it will be important for providers to find various ways to improve cultural competency.

**3. Goals for the Diversity and Equity Core Action Group**

The following articulates the Diversity and Equity Core Action Group goals moving forward.

Goal #1: Education and Training

- Develop education and training programs based on best-practices.
  - Concept of “on-going” training - integrating cultural competence into the regular functions of the organization. “Patient Centred Care”—about respecting patients’ preferences
- Establish process for sharing these programs among health service providers.
- Ensure different types of training are available for organizations to utilize
  - Governance to frontline staff
  - Identifying unique ways of training (e.g. shadowing/ mentoring between organizations)
- Develop education and training expectations/ standards recognizing that different organizations are at different stages of cultural competency
  - Identify standards that every organization should comply to ensure cultural competency

Goal #2: Health Equity Planning

- Develop Health Equity Plan framework and establish expectations/ requirements of local HSPs to submit a Health Equity Plan to the LHIN.
- Roll out the Health Equity Impact Assessment (HEIA) Tool<sup>1</sup> to all HSPs (workshops)
- Develop performance indicators to be included into future SAAs

Goal #3: Communications

- Effective communications to HSPs of the work underway by the Diversity Core Action Group. Will provide details of the upcoming training sessions, tools etc. for HSPs
- Various ways to communicate effectively include LHIN quarterly newsletter to all HSPs, LHIN Targeted Bulletins (i.e. briefing of the OHA's Diversity and Equity Conference), communiqués to other LHIN Core Action Groups, Communiques via HSP bulletins.

Goal #4: Comprehensive Inventory of Resources

- Develop and distribute a comprehensive inventory of: health service providers, ethno-cultural community organizations, diversity initiatives, services addressing needs of diverse communities, inventorying training and education resources.

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<sup>1</sup>Health Equity Impact Assessment arose out of Health Impact Assessment (HIA) methodology which has gathered considerable momentum internationally over the past decade as a decision support tool to enable “healthy public policy”. The tool helps identify potential health impacts (positive or negative) of a plan, policy or program on vulnerable or disadvantaged groups within the general population. A model of equity-focused Health Impact Assessment is currently in use in the U.K. (Wales), New Zealand, Australia and other jurisdictions.