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Title

Beyond Education: What is required to support staff to promote equity-oriented health care in EDs?

Priority 1 (Research Category)

Acute and emergency care

Presenters

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Abstract

Context: Staff in Canadian Emergency Departments (EDs) face increasing workplace demands arising in part from system-wide shortages in primary and community care. Patients experiencing stigmatizing conditions such as chronic pain, substance use, and psychiatric disorders may turn to the ED as the only open “door” to access care in the community. Objective: To examine staff perceptions about their work and role, including how they may be prepared or not to address issues of health and health care inequities in EDs. Study Design and Analysis: Paper and online surveys were administered to staff. Data were collected as part of a larger mixed-methods organization-level intervention study aimed at enhancing capacity to provide equity-oriented health care in EDs. Pooled, cross-sectional survey data (n=393) were analyzed to examine work experiences, team effectiveness, and domains of equity-oriented care. Descriptive results from survey data are complemented by illustrative excerpts from qualitative interviews conducted with staff and administrative leadership. Setting: Three EDs in British Columbia. Population Studied: All staff working in EDs participating in the EQUIP ED study. Intervention: N/a. Outcome Measures: N/a. Results: Levels of stress, the extent of control over work, sufficient time to complete work, receive feedback about work, and ratings of the quality of care provided in the ED highlight workplace pressures, constraints, and impact on staff. The proportion of staff who have received training on and have confidence in being able to provide equity-oriented care in the ED has implications for how staff may be able to contribute to improved care for patients already experiencing the harmful effects of stigma and other forms of discrimination including fragmentation of care. Conclusions: The impacts of shortages in primary care reverberate throughout the system. EDs often prioritize efficiency, a focus which cannot adequately equip staff to promote equity. Attention and commitment to addressing structural inequities within EDs could support patients and staff to move closer to the quintuple aim.