# FROM ACCOUNTABILITY ANALYSIS TO INSTITUTIONAL ACTION

This tool supports healthcare institutions to translate accountability analysis into concrete, power-shifting actions. It is designed to be used after teams have engaged accountability tools, including power analysis, the 4D/5D framework, and the Acknowledge–Redress–Closure process.

## ACTION DOMAINS FOR HEALTHCARE ACCOUNTABILITY

1. **Shifting Control of Resources:** moving from healthcare-defined allocation of capital and assets to community-defined priorities and control.

### REFLECTION PROMPTS

- What resources are currently controlled exclusively by our institution?
- What decisions could be shared, delegated, or transferred?
- What risks are we unwilling to let communities hold—and why?

### ILLUSTRATIVE ACTIONS

- Establishing participatory budgeting processes for community health funds
- Creating shared governance structures for pooled or braided funding
- Shifting from restricted, short-term grants to flexible, multi-year funding tied to community-defined outcomes

2. **Reconfiguring Decision-Making & Priority Setting:** moving from advisory or consultative roles for community to real decision-making authority.

### REFLECTION PROMPTS

- Where are community voices currently consulted but not decisive?
- What decisions could be delayed or redirected to allow community leadership?
- How does race, professional status, or institutional authority shape whose priorities prevail?

### ILLUSTRATIVE ACTIONS

- Community-led agenda setting for population health initiatives
- Formal voting roles for community representatives in governance bodies
- Decision rules that require community agreement, not just input

3. **Redistributing Power Over Data, Information, and Narrative:** moving from institutional data and story to shared or community ownership and narratives.

| REFLECTION PROMPTS | ILLUSTRATIVE ACTIONS |
|---|---|
| • Who decides what data matters?<br>• Who has access to raw data versus summarized findings?<br>• How might current metrics distort or erase lived experience? | • Shared data governance agreements with community partners<br>• Co-creation of success metrics grounded in community-defined outcomes<br>• Community authority over how data is communicated publicly |

4. **Shifting Investment and Funding Flows:** moving from institution-led investments to community-aligned and community-governed capital.

| REFLECTION PROMPTS | ILLUSTRATIVE ACTIONS |
|---|---|
| • What assumptions shape how we define "risk" and "return"?<br>• How might those assumptions disadvantage community-led organizations?<br>• What role could participatory investing play here? | • Aligning with participatory investing or community-governed funds<br>• Redesigning procurement and contracting to reduce administrative burden<br>• Using balance sheets and the full breadth of capital assets, not just grantmaking, to support community-defined outcomes |

5. **Repairing Harm and Rebuilding Trust:** moving from defensiveness and silence toward accountability, repair and shifts in practice.

| REFLECTION PROMPTS | ILLUSTRATIVE ACTIONS |
|---|---|
| • What harm has already occurred that has not been acknowledged?<br>• What would meaningful redress look like from the community's perspective?<br>• How will we close the loop and remain accountable over time? | • Public acknowledgment of harm paired with concrete institutional changes<br>• Resource reallocation as a form of repair<br>• Ongoing accountability check-ins with community partners |