



*Community Collaboration to Improve  
Health Care Access of Northern Residents  
Research Project*

**P R E S E N T A T I O N   O F   F I N D I N G S**

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**April 16, 2008**

Findings are organized into four main theme areas, with a number of sub-categories in each.

Availability of  
Services

Access to  
Services

Service  
Delivery

Additional  
Findings

A summary of issues and improvements suggested from the findings will be presented for each sub-category.

Availability of  
Services

## Local Facilities and Services

- Issues:
  - Limited capacity for advanced treatment in region means traveling out for many services
  - Need for increased mental health services in region as wait times are too long
  - Insufficient funding affects quality and availability of services (e.g., diabetes program, home care, long term care)
  - Need for community consultation when designing programs

## Local Facilities and Services

- Improvements Suggested:
  - Expand services at AHA Health Facility - prenatal and maternity, long term care
  - Improve emergency services & equipment and home care in smaller communities
  - Long term care home in communities (BL & FDL)
  - Greater cooperation among communities to increase efficiencies

## Specialist and Itinerant Services

- Issues:
  - Need for expanded specialist services
  - Improvements in specialist services are not available in all communities (e.g. dental)
  - Itinerant visits are infrequent; time spent in the community is too short
  - Lack of specialists in the region; difficulties in recruitment and retention

## Specialist and Itinerant Services

- Improvements Suggested:
  - Increase the frequency of itinerant visits and length of stay in communities
  - Expand specialist services (dental, optometry, speech therapy, diabetes related specialists)

## Health Care Providers

- Issues:
  - Recruitment challenges for long term providers, especially full-time nurses
  - High turnover rates adversely affect care and programming
  - Need for certification for CHR's

## Health Care Providers

- Improvements Suggested:
  - Recruitment strategies to attract resident providers
  - Strategies to encourage local students and residents to consider health careers
  - Expanding health education opportunities in Sask.
  - Improving access to CHR course



## Tele-Health

- Issues:
  - Limited broadband access prevents Tele-health from being used in the region
- Improvements Suggested:
  - Implementation of Tele-health
  - Tele-health seen as beneficial for consultations & follow-ups with specialists, communication between providers, health promotion and education

## Health Promotion and Education

- Issues (providers):
  - Need to increase the time allocated to health promotion
  - Need for greater health awareness among residents to reduce demand on health services
  - Need to reduce the stigma related to certain conditions so that residents will seek treatment (STIs)
  - Language of promotional materials important

## Health Promotion and Education

- Improvements Suggested (providers):
  - Take a team approach to health promotion
  - Build stronger partnerships between health care providers and community/leadership
  - Expand the role of nurses in schools
  - Prepare health promotional materials in Dene

## Cost of Accessing Care

- Issues:
  - Differential access to health care among residents (status, non-status, non-Aboriginal, social assistance clients)
  - Gaps in insured coverage; confusion over policies
  - Significant expenses related to air transportation; cost of drugs
  - Cost issues deter residents from seeking or obtaining treatment or follow-up

## Cost of Accessing Care

- Improvements Suggested:
  - Ensure that travel policies adequately cover costs

## Transportation

- Issues:
  - Isolation creates anxiety over access to care and contributes to over-utilization of services
  - Lack of all-weather roads means air travel is only option
  - Medi-vac procedures complex, delays in securing access to a pressurized aircraft

## Transportation

- Issues (continued):
  - Hardships are experienced while travelling:
    - for those with language difficulties
    - for Elders
    - for those with disabilities
    - when sick or injured (especially on poor roads)
    - after treatment, when sedated or in pain
    - for those who travel frequently, e.g. for chronic conditions or cancer treatments

## Transportation

- Issues (continued):
  - Accommodation:
    - Lack of day accommodation for those undergoing day surgery or recovering from treatment
    - Accommodation in PA and Saskatoon often inappropriate and of poor quality
    - Insufficient meal allowances



## Transportation

- Issues (continued):
  - Travel Escorts:
    - Age at which youth are expected to travel on their own is considered too young (16 years)
    - Insensitivity on part of travel administrators in south
    - Need for translation and escort services for Elders
    - Inflexible policies don't accommodate escort needs of disabled and their families, injured

## Transportation

- Improvements Suggested:
  - Pressurized aircraft dedicated to Athabasca region
  - Funded monthly air service between communities in region and AHA Health Facility
  - Accommodation facility in south dedicated to Northern residents
  - Policy improvements related to accommodation (approved hotels, checkout times, meal allowances)

## Transportation

- Improvements Suggested (continued):
  - Increase age at which youth are provided an escort (e.g. up to 18 years)
  - Assess travel escort needs on a case-by-case basis (e.g., Elders, disabled, those with language barriers)
  - Community appointed travel escort

## Coordination of Services

- Issues:
  - Underutilization of health care staff (LPN's, CHR's, home care aides, EMT's)
  - Health care providers/staff in south unaware of travel implications when scheduling appointments, cancellations

## Coordination of Services

- Improvements Suggested:
  - Increased communication between community health centres and facilities in the south to promote understanding

## Transfer of Function

- Issues:
  - Level of transfer of medical function varies by facility
  - Inconsistent transfer of function between jurisdictions
  - Limited availability of those certified to sign-off
- Improvements Suggested:
  - Funds to expand transfer of function certification

## Jurisdiction

- Issues:
  - Lack of awareness & confusion over available health services across jurisdictions
  - Health care providers employed by different authorities; negotiating discrepancies difficult
  - Need for improved communication across jurisdictions: government officials, community leadership and health staff, health authority, health care providers, facilities in region and south

## Jurisdiction

- Improvements Suggested:
  - Interagency initiatives to improve awareness of health issues & services
  - Adopting a team approach involving community and health authority staff
  - AHA & band leaders work together to develop communication strategies



## Interactions with Providers

- Issues:
  - Difficulties with language and literacy hamper communication of health problems
  - Confidentiality issues deter residents from seeking care to avoid stigmatization
  - Long term staff necessary to build relationships/trust
  - Need for providers to have an understanding of cultural background and values

## Interactions with Providers

- **Issues** (continued):
  - Health care providers need to feel welcome, respected
  - Level of professionalism at health centres
  - Appointments rushed on doctor days

## Interactions with Providers

- Improvements Suggested:
  - Expanded translation services at health centres; hire staff with knowledge of Dene/English
  - Separation of services to reduce stigma (addictions, mental health)
  - Cultural awareness training for new staff

## Successes

- Proximity of AHA Health Facility has improved access in the region
- Service improvements have been made in staffing levels, dental services (some communities), EMT's
- Health care providers seen as dedicated, caring and respectful
- Health promotion position at AHA
- AHA travel subsidies for Camsell Portage & Uranium City residents

Findings ~ AHA

Additional  
Findings



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## Successes

- Informal coordination of flights for non-status patients
- Transfer of function certification high among nurses in region