

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

PRESENTATION OF FINDINGS

Mamawetan Churchill River Regional Health Authority (MCRRHA)

Brenda Mishak Beckman

Ida Ratt-Natomagan April 16, 2008



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



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



Local Facilities and Services

- Issues:
 - Need for expanded local services to reduce the amount of travel for residents
 - Need for improved access to cancer treatment & services
 - Inadequate funding levels for local facilities and services



Local Facilities and Services

- Improvements Suggested:
 - Increase the <u>capacity</u> of existing facilities to allow for expanded services (e.g. addition to health centre)
 - Increase the <u>use</u> of existing facilities (e.g. more ultrasounds)
 - Increase funding for local services & facilities
 - Conduct a needs assessment to establish priorities



Specialist and Itinerant Services

- Issues:
 - Lack of specialists in the region
 - Infrequent itinerant visits
 - Difficulties in recruitment and retention



Specialist and Itinerant Services

- Improvements Suggested:
 - Increase the frequency of itinerant visits
 - Expand specialist services for seniors/Elders and diabetics
 - Expand mental health services, especially for youth



Health Care Providers

- Issues:
 - Lengthy wait times for appointments & emergency care
 - Shortage and turnover of doctors
 - Recruitment challenges (nurses, dental therapists, doctors)



Health Care Providers

- Improvements Suggested:
 - Funds to recruit more health care providers to the region
 - Fill vacant positions
 - Hire support staff at health centres to lessen the time health professionals spend on paperwork (eg. ward clerks)



Tele-Health

- Issues:
 - Tele-health is not being utilized to its full extent
 - Perception that some providers in the south are reluctant to use Tele-health
 - Inconvenient scheduling of Tele-health education sessions limits attendance



Tele-Health

- Improvements Suggested:
 - Better utilization of Tele-health for education, communication and to expand health services
 - Develop strategies to increase the use of Tele-health by providers in the south
 - Tele-health coordinator in communities



Health Promotion and Education

- Issues:
 - 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, mental health, addictions)



Health Promotion and Education

- Improvements Suggested (providers):
 - Expand the role of public health nurses in schools
 - Improve nutrition and fitness awareness
 - Expand diabetes program to target children and youth
 - Make healthy living teams available in every community
 - Funding to implement a health guide to each home



Health Promotion and Education

- Improvements Suggested (residents):
 - Target health promotion to community health issues, especially stigmatizing issues
 - Use local television for health promotion
 - Community collaboration to increase awareness of services in region (e.g. inter-agency meetings)



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



- **Cost of Accessing Care**
- Improvements Suggested:
 - Subsidize travel costs
 - Establish "Northern Health Care Plan" to:
 - Cover transportation, accommodation and prescriptions for northern residents
 - Address jurisdictional differential access to services
 - Address gaps in coverage



- Issues:
 - Hardships are experienced while travelling:
 - for those with language difficulties
 - for the elderly
 - 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



- **ISSUES** (continued):
 - Time away from family and work (patients & escorts)
 - Issues related to the quality of medical taxi service
 - Accommodation:
 - Not always accessible to those with disabilities
 - Less expensive accommodation inappropriate for people receiving medical care (e.g. hostel lacks privacy)
 - Hotel rooms in Saskatoon are frequently unavailable, especially for extended stays



- **ISSUES** (continued):
 - Travel Escorts:
 - Patients must rely on family/friends to provide escorts
 - Concerns for the safety of elderly in an unfamiliar city
 - Missed appointments when no escort is available
 - Need for translation services for Elders
 - Disabled persons and their families require more escort support



- **ISSUES** (continued):
 - Lack of funding for transportation related to specialized services (mental health and addictions, domestic abuse, sexual assault, dental services)



- Improvements Suggested:
 - Establish a transportation service to PA/Saskatoon
 - Policy to provide adequate and affordable accommodation
 - Provide travel escorts for elderly & disabled and assess escort requirements on a case-by-case basis
 - Community appointed travel escort



- Improvements Suggested (continued):
 - Improve awareness of existing travel support resources (e.g. Aboriginal relations staff at hospitals)
 - Travel coordinator in communities



Coordination of Service

- Issues:
 - Poor coordination of appointments outside of region results in increased number of trips for patients
 - Health care providers/staff in south do not consider travel implications when scheduling or cancelling appointments



- **Coordination of Services**
- Improvements suggested:
 - Providers/staff facilitate multiple appointments for those travelling long distances (when possible)
 - Both clients & providers take responsibility for improving communication (e.g. clients should confirm appointments before leaving)



Transfer of Function

- Issues:
 - Limited scope of transfer of medical function increases residents' need to travel for services
- Improvements Suggested:
 - Funds to expand transfer of function certification by training existing nurses and/or the recruitment of certified staff



- Issues:
 - Divisions within the health care system result in fragmented funding and service delivery, and affect relationships within the community
 - Sharing of health information is important, as patients move between systems:
 - between First-Nation and provincial systems
 - between local and out of region providers
 - between health centre and doctor



Jurisdiction

- Improvements suggested:
 - Improve cross-jurisdictional sharing of information
 - Creation of more formal communication channels
 - Clear communication of client discharge plans
 - Enhanced collaboration with other departments related to social issues (housing, RCMP)



Interactions with Providers

- Issues:
 - High level of commitment and sensitivity on part of providers is important
 - Residents are more likely to seek care if they are familiar with provider
 - Perception by some that unnecessary treatment recommendations being made for insured residents
 - Communication of health issues is hindered by language issues and patients' medical knowledge



Interactions with Providers

- Improvements Suggested:
 - Improved inter-personal skills for some providers
 - Participation by health care providers in community events to allow residents to get to know them
 - Increased use of health promotion and education to improve residents' knowledge of health and increase their ability to communicate health concerns



- **Other Factors Impacting Health Care**
- Issues:
 - Poverty & housing issues
 - Significant contributors to poor health
 - Related to travel costs and cost of food



- Health care providers in the region are recognized as competent, and working hard to provide the best service possible
- Service improvements have been made in the areas of mental health, child dental therapy, home care, and optometry (Pinehouse)
- Single point of entry has greatly improved home care, long term care and respite services in La Ronge



- Bi-weekly radio health promotion broadcasts that target local health issues have reduced visits to the health centre in Pinehouse
- Successful transfer of function between podiatrist and nurses in the region