



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

PRESENTATION OF FINDINGS

Athabasca Health Authority (AHA)

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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.

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

Availability of
Services

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



SASKATCHEWAN POPULATION HEALTH AND EVALUATION RESEARCH UNIT

Successes

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