

# Primary Health Care Utilization in All Nations Health Partners Ontario Health Team: Assessing Preventative Services, COVID-19 Impacts and Recommendations for Improving Access

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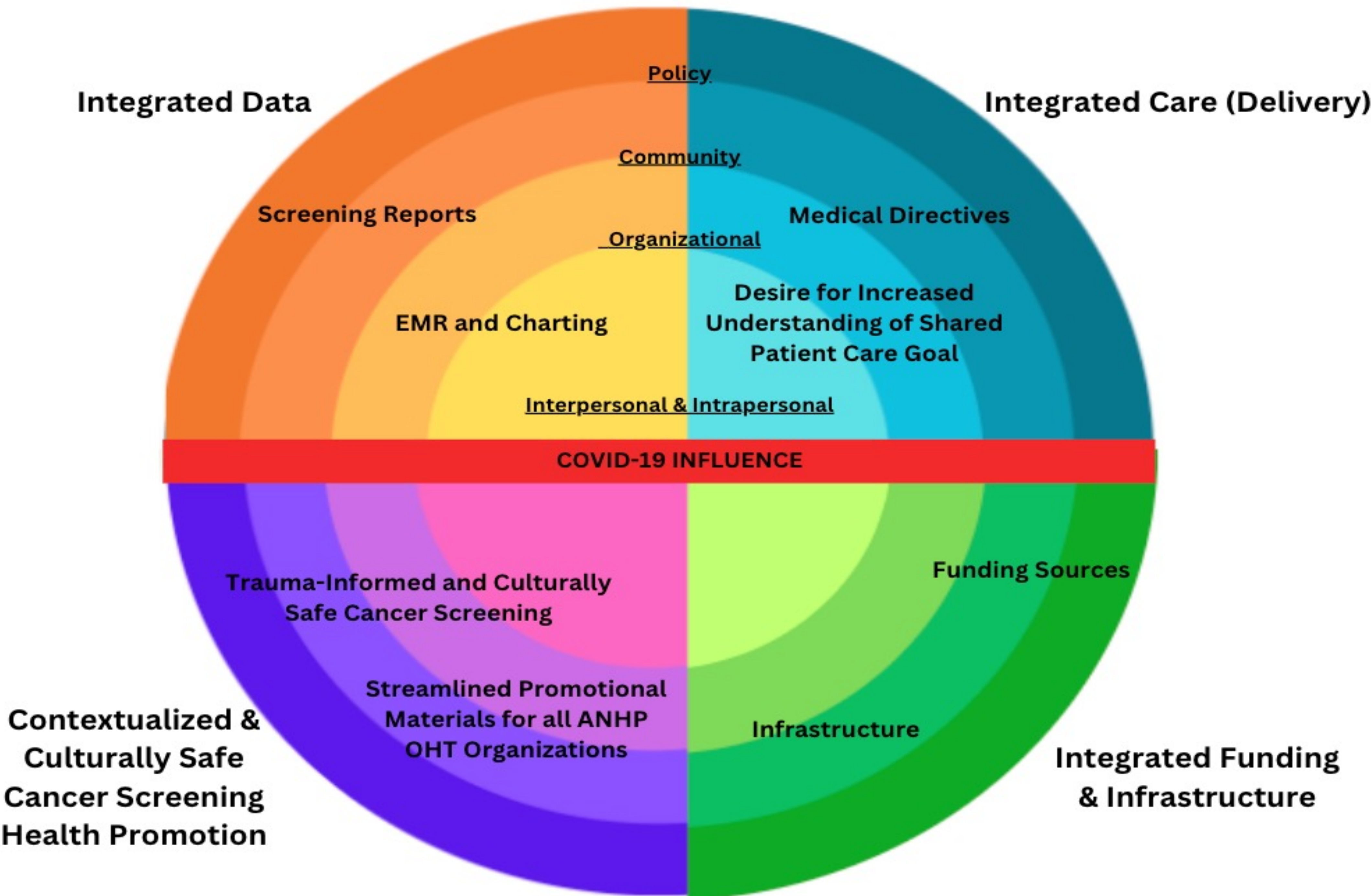


## About the ANHP OHT

The All Nations Health Partners Ontario Health Team (ANHP OHT) was the first Northern OHT. It services the Kenora and twelve communities outside of the Kenora region, and services approximately 29,000 patients for primary care services.

## Objectives

- 1: To describe primary health care utilization in ANHP, with a sub-analysis of preventive health care services
- 2: To describe the interventions/policies/programs that might have influenced access/utilization of primary care from January 2019 to August 2023.
- 3: To identify specific recommendations to improve primary health care delivery in the Kenora region.



## Recommendations

### Integrated Data

- Recommendation 1:** Advance the “one record” transformation, allowing data sharing among organizations.
- Recommendation 2:** Streamline cancer screening charting mechanisms across practitioners and organizations.

### Integrated Care (Delivery)

- Recommendation 3:** Increase transparency of who and how cancer screening services are delivered to individuals who live within the ANHP region and NWO.
- Recommendation 4:** Create streamlined cross-organization medical directives for nurses working under an expanded scope of practice to carry out cancer screenings.

### Contextualized and Culturally Safe Cancer Screening Health Promotion

- Recommendation 5:** Strengthen collaboration between ANHP OHT and other supports to and promote patient-centred resources that are culturally safe and contextualized to the unique to the region.
- Recommendation 6:** Provide incentives for practitioners to engage in trauma-informed cultural safety training .

### Integrated Funding and Infrastructure

- Recommendation 7:** “Single comprehensive funding envelope.” ANHP OHT and their partners have strong, established relationships and shared priorities.

## Findings and Discussion

### Integrated Data

**Screening Reports**  
Within the ANHP OHT, many practitioners (including expanded scope of practice RNs, and NPs and physicians working in a non-rostering model) do not have access to provincial data sets including the SAR.

**EMR and Charting**  
Two distinct instances of the local EMR databases exist. No editing or extraction can occur between instances.

### Integrated Care (Delivery)

**Desire for Increased Understanding of Shared Patient Care Goals:**  
There is a desire to better understand what the other primary care services are doing across stakeholders.

**Medical Directives:**  
Formal medical directives streamlined across organizations are not currently in place.

### Contextualized & Culturally Safe Cancer Screening Health Promotion

**Streamlined Promotional Materials for all ANHP OHT Organizations:**  
Some patients, do not know information pertaining to cancer screenings in the region.

**Trauma-Informed and Culturally Safe Cancer Screening:**  
Patient-specific barriers identified: patients opting out due to fear, trauma, a lack of knowledge, or other priorities taking precedence.

### Integrated Funding & Infrastructure

**Infrastructure:**  
Infrastructure barriers: physical buildings and examination rooms, the personnel within communities, and poor internet connection.

**Funding Sources:**  
Interviewees shared that a mix of funding sources increases the complexity of care delivery across the ANHP OHT.

**Covid-19 Influence:**  
Misconceptions regarding the primary care offered during the pandemic. To reiterate clearly and concisely: “Other than following the regulations set by the federal and provincial governments and other regulatory bodies such as Indigenous Services Canada for certain organizations, the ANHP OHT continued all services deemed safe. Delivery of services were modified according to regulations”.