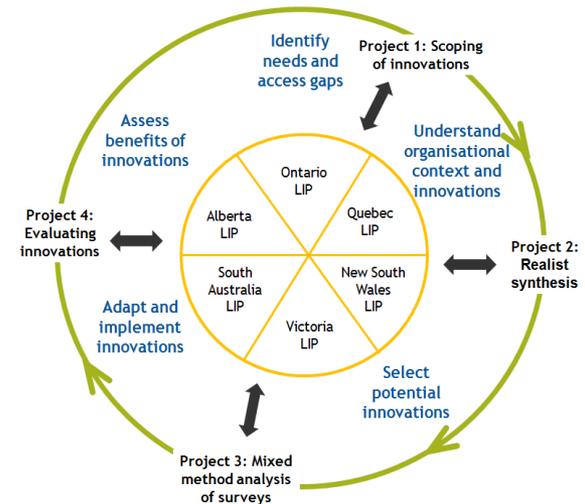
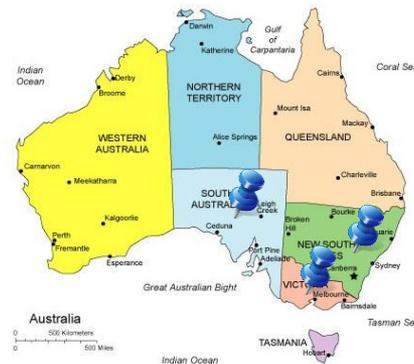
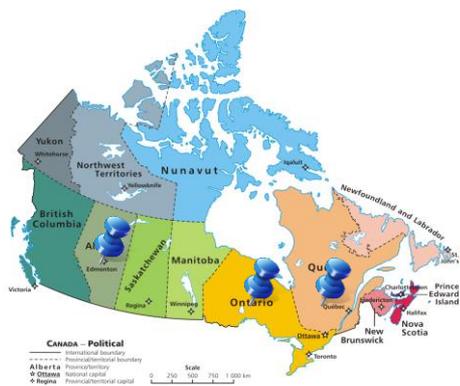


IMPACT RESEARCH PROGRAM

Innovative Models Promoting Access to Care Transformation

Identify, design, implement and evaluate **organizational innovations** to improve access to primary health care for vulnerable populations



PARTICIPATORY ACTION RESEARCH

- “Iterative research cycle of planning, action and fact finding” (Lewin 1946)
- Involving organisational partners in co-construction : 2x “extra benefits” (Bush et al. 2017)
- Need to describe process
- Influence of policy

OBJECTIVE



Describe how **policy changes** influenced the **design of an organizational innovation** to improve access to primary care for vulnerable populations





METHODOLOGY

Primary Health Care
Collaboration Improve Access
Programme de recherche international Approche intégrée de soins de santé de première ligne
Canada Communication Partenariat local pour l'innovation
Populations vulnérables Reduce Unmet Needs Hospitalisations évitables
Innovation Australia Improve Access Australie
Avoidable Hospitalizations Knowledge exchange and translation Primary Health Care
Innovative Actions Soins de santé communautaires de première ligne
Accès Réduire les besoins non comblés
Typologie des innovations Soins de santé de première ligne
Health Equity Local Innovative Partnerships Organisations
Évaluation Comprehensive Primary Health Care
Intervention Implementation Community-Based Primary Health Care
Mise en œuvre des interventions de santé communautaire

RESULTS

ACCESS NEEDS ASSESSMENT

- **Evidence:** Lack of a regular primary care provider (disadvantaged, youth, mental illness)
- **Policy:** Ministry of Health's priority of attachment through centralized waiting lists

Innovation: Help attach centralized waiting list patients from high deprivation neighborhoods to family physicians (trust, social distance, navigation)

MAIN RESOURCE

- **Evidence:** Community health worker
- **Policy:**
 - Budget cuts
 - Reallocation of social workers to Family Medicine Groups across the province

Innovation: Social workers with elements of community health worker

Ultimately unavailable → volunteers

ORGANIZATIONAL INNOVATION

- **Evidence:** Provider and practice engagement with community health worker
- **Policy:** Bill 20
 - Provider continuity (80%)
 - Attachment of 85% of the population
 - Tension and change fatigue

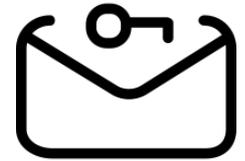
Innovation: Limited involvement of family physicians and practices in implementation of innovation

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DISCUSSION



KEY LEARNINGS



- Policy heavily influenced design of innovation
- VERY time consuming (4 years) + disruptive
- Keeping on track :
 - International research program
 - Ongoing partnership
- Value of partnering with various stakeholders
 - Relevance, acceptability and feasibility
 - May increase sustainability and spread.



Our Partners



Funding Agencies





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IMPACT

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