

Research on Health Care Services in Western Newfoundland

Purpose of the project.

People living in rural and remote areas of Canada face unique difficulties when trying to access health services. To help research these issues, an independently led project was carried out from December 2012 to March 2013, by the Health Research Unit at Memorial University with support from the Rural Secretariat Regional Councils in Western and Southwestern Newfoundland. The aim was to collect information on reasons why people found it difficult to access health services, as well as ideas about possible solutions. This research also helped the Regional Councils develop advice for the Provincial Government on ways to improve access to health services. Additionally, the research built on a needs' assessment study carried out by Western Health, and reached out to people who may not have taken part in this assessment.

How the research was conducted.

Paper as well as online surveys and kitchen table talks - informal focus groups held in people's homes - were used to collect the information for this project. In the surveys, people were asked questions about their access to health services. 1049 surveys were received from community members across western and southwestern Newfoundland.

Kitchen table talks were held in 10 communities across the regions: Flat Bay, Francois, Port aux Basques, Stephenville, Benoit's Cove, Deer Lake, Jackson's Arm, Norris Point, and Parson's Pond. During these conversations, people were asked to share their stories of accessing health services, including any problems they may have faced and ideas they had to improve access.

What we heard from the surveys.

Doctors

- 12% of people surveyed did not have a family doctor. The main reasons provided were that the physician had left the area, retired or that family doctors in the area are not taking new patients.
- 36% of people surveyed did not have a family doctor located in their community.
- 20% of people surveyed travelled more than 30 minutes to see a doctor.
- People from the Corner Brook and Bonne Bay areas were least likely to have a family doctor.

Main Health Contacts

- 69% of people said their main contact for health concerns was a doctor and 14% said the Emergency Room or Hospital. The use of the ER/ Hospital as a main contact was much higher for people responding from the Port au Port Peninsula.
- Nurse practitioners were used much more frequently in the Stephenville-Port aux Basques area than in the Corner Brook–Rocky Harbour area.

Access to Services

- The two least accessible services were cardiac bypass surgery and radiation therapy.
- People from the Stephenville-Port aux Basques region reported particularly poor access to maternal and child health services.
- The two most accessible services were reported as breast/cervical screening.

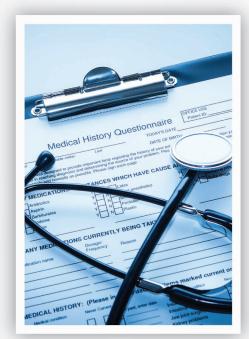
Why people are not accessing health care services.

The top 3 reasons were

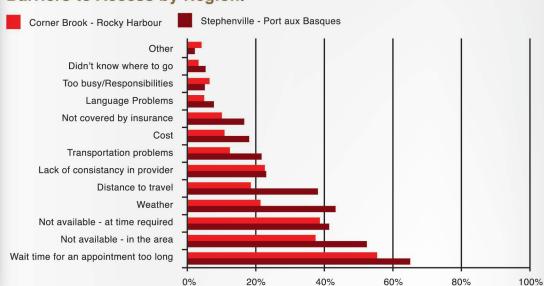
- Length of wait time for an appointment;
- The service not being available in the area;
- The service not being available at the time needed.



Distance to travel, costs, transportation and weather were listed as a challenge much more often for the Stephenville-Port aux Basques region than the Corner Brook – Rocky Harbour region.



Barriers to Access by Region.



Other comments from the surveys and kitchen table talks.

Doctor shortages

Participants indicated they were unable to find a family doctor taking new patients or that the wait time to see their doctor was too long. They also said that because they could not access a family doctor, they were forced to use emergency services for non-emergency situations:

It is impossible to get in to see our family doctor on short notice.

If I wake up in the morning with tonsillitis,
I have to go to the emergency room for treatment.

- Participant quote



Difficulty accessing specialist services and professionals

Participants in several of the kitchen table discussions noted a lack of health service professionals including pharmacists, dentists and nurse practitioners. Survey respondents highlighted that more specialist services should be available in their community; these services included heart specialist services and diabetes services. Many respondents living outside of Corner Brook commented on the lack of obstetric services, and access to mental health services was also seen as a challenge.

"...Mental Health support is VERY hard to find. There are only a few specialists within the Corner Brook and Newfoundland areas."

- Participant quote





Difficulty accessing emergency services

Comments were often made about long wait times in the emergency room or in the case of rural/ remote communities; a lack of facilities in the community.

Consistency of care

Many people expressed frustration that doctors seemed to 'come and go' from their community, leading to delays in the diagnosis and treatment of conditions. As a result there is a desire for more consistent care, in particular by family doctors.



Difficulty with travel and the cost of travel

People commented that it was difficult to travel to access specialist services for a number of reasons: cost for travel and accommodation was the top reason followed by poor weather and needing time off work.

10 hour drive which you then need a minimum of 3 days off work to get to an appointment.

- Participant quote

Wait times

Frustration with wait times was a common issue – this included wait times for emergency services, tests, doctor's appointments; and specialists.

44 I find it hard to get a doctor's appointment without waiting 3-4 weeks."

- Participant quote

The potential role of nurse practitioners

Many people said that they had positive experiences with nurse practitioners when this service was available in their area. Others indicated that nurse practitioners were not available in their area but were needed and could be a potential solution to non-emergency use of emergency rooms.

The lack of access to a family physician is a big barrier,

but when nurse practitioner services have been available here, patient satisfaction with the service has been VERY high.

It makes much more sense to invest in nurse practitioners in rural areas..."

- Participant quote



Areas for further exploration.

A number of possible solutions to address the issues associated with access to health services were identified and are worthy of further exploration including:

Recruit more rural and remote physicians

Medical students who are from rural areas or are taught about practising in rural areas are more likely to work in rural communities. Additional steps may be needed by rural communities to help recruit and retain graduate doctors.

Adopt a nurse practitioner model

Nurse practitioner models can be a solution to health services shortages. Ways to attract nurse practitioners to work in rural areas need to be explored by community and government.

Assist individuals with travel cost and develop specialist outreach services

Assistance with the costs of travel and accommodation is a solution that was suggested by people in this research. The benefits of specialist outreach services include more patients seen, less disruption to families and work, reduced cost of transport, improved doctor-patient communication, and improved cultural appreciation.

Increase the use of tele-health services

Tele-health (including access to health services via phone and video conference) can provide quicker access to specialist services and reduce patient travel times and costs.

Carry out more rural and remote health services research

More research could help to develop strategies to improve access to services that are well suited for specific communities or groups with unique needs for example, women or Aboriginal individuals.

Additional solutions identified in the kitchen table talks included improved access to midwifery practitioners, more community wellness programs, patient navigators to help patients needing medical treatment, more home care and care for seniors, as well as increased hours and on-call availability of physicians. In addition, Aboriginal individuals expressed a desire for wellness programs specific to their needs.

Next Steps with the Research.

The research report and recommendations have been submitted by the Regional Councils to the Department of Health and Community Services and Western Health. A follow-up piece of research on enhancing roles for Nurse Practitioners will take place in winter 2013 and spring 2014.







This research was conducted by Dr. Victor Madalena, Memorial University Health Research Unit, with support from the Rural Secretariat Regional Councils in the Corner Brook-Rocky Harbour and Stephenville-Port aux Basques regions.

For the full research report from this project, please visit www.exec.gov.nl.ca/rural/whatweredoing/research.html

For any other information, please contact the Office of Public Engagement Regional Partnership Planners:

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