

In Person Navigation Services Embedded in Primary Care: A Randomized Controlled Trial

Authors

Simone Dahrouge PhD, Alain Gauthier PhD, Francois Durand PhD, Jessica Malek, Shankar Sethuraman MD(c), Denis Prud'homme M.D., Manon LeMonde PhD, Kamila Premji M.D, PhD(c), Claire Kendall M.D, Justin Presseau PhD, Marie-Hélène Chomienne M.D, Carolyn Warnet MBE, Darene Toal-Sullivan PhD, Patrick Timony PhD (c).

Background (75)

Access to Resources in the Community (ARC) is a whole-patient navigation service offered to primary care practices to assist their patients access health enabling resources (HERs) to address health and social needs ranging from support for achieving healthy lifestyle to income stabilization. We compared ARC to the Ontario-211 web and telephone navigation services in enabling access to HERs to address needs documented on a referral form sent to the study and shared with the patient.

Approach (50)

Prospective, mixed method, patient level randomization to ARC vs 211. A 3-months post-intervention survey captured the main outcomes: Number of HERs accessed, At least one HER accessed. Multivariate intent-to-treat Poisson and logistic regressions were used to compare these outcomes while adjusting for patient socio-demographic and health factors.

Results (75)

458 patients were referred; 326 (72%) participated; 237 (73%) completed the post-intervention survey (76%/69% for ARC/211). The mean number of HER accessed was 0.92/0.67 for ARC/211; adjusted relative risk (95% confidence intervals): (0.27 (0.01-0.52)). The proportion of patients accessing at least one HER was 50%/36% for ARC/211; Odds Ratio: 1.83 (1.12-2.99)). Other factors associated with at least one of these outcomes were: University education, more needs identified, Francophone, Being married.

Conclusion (50)

The overall proportion of individuals accessing a resource was higher than anticipated based on the literature on compliance with provider recommendations. The potential that completing and sharing a referral form with the patient might have promoted patient compliance should be explored. ARC is currently being studied for COVID related needs.

ORAL PREFERENCE