

## NAPCRG Oral Presentation on Completed Research:

### **The ARC Navigation Model a whole-person navigation program serving primary care practices – A randomized Controlled Trial**

**Context:** Existing patient navigation models focus on specific populations (e.g. refugees, mental health, post-hospitalization). In partnership with patients, health planners and care providers we established a generalist, whole-person navigation model attached to primary care practices (Practices) to optimize Access to Resources in the Community (ARC) for both Canadian official language groups. **Hypothesis:** ARC is more effective in assisting individuals to access resources that address health/social needs than the provincial telephone and web portal service (Ontario211.ca). **Study Design:** Patient randomized (1:1) controlled trial comparing ARC and Ontario211. **Setting:** Two Ontario regions: Ottawa and Greater Sudbury. **Study Population:** Medically stable primary care patients with health/social need(s). **Intervention:** Primary care providers (PCP) referred patients by completing a referral from and identifying the health/social need(s). Patients randomized to Ontario211 were verbally provided with a brief description of the service and their contact information. Those randomized to the ARC arm were linked to the ARC Navigator. The Navigator offered patient-centered support to identify the resource(s) most suitable to their needs and to help patients overcome barriers to access the needed resource. Encounters were face-to-face and virtual. Patients completed a baseline and post-intervention survey 3 months later which assessed, for each need identified in the referral form, whether a resource was accessed. **Outcomes:** Primary: Count of resources accessed, Secondary: Number of patients accessing 1+ resource. **Results:** 57 PCPs from 12 practices (Ottawa: 8, Sudbury: 4) referred 458 patients. 326 patients (71%) were enrolled. **Participant profile:** Education <University: 72%, Female: 68%, Ages 30-64 y: 67%, Income <\$50,000: 60%, Unemployed/Unable to work: 35%, Francophones: 32%, Immigrants: 11%. **Most common barriers:** Costs: 75%, Lack of support: 34%, Transportation: 32%, Going to new places: 31%. **Most common health conditions:** Depression/Anxiety: 74%, Pain: 43%. **Status:** Completed study: 234 (73%), Dropped out/deceased: 85 ((higher in 211 (31%) than ARC (24%) arm)). **Outcome:** Intent-to-treat analysis (where dropped out/deceased are attributed "0"): 1) Number of resources/patient was: ARC: 0.77, 211: 0.53; Relative rate: 1.45, p=0.35. 2) # of patients accessing 1+ resources: ARC: 46%, 211: 31%; Relative risk: 1.47, p=0.004). **Conclusions:** Multivariate analyses adjusting for patient profile, including number of needs will be presented.