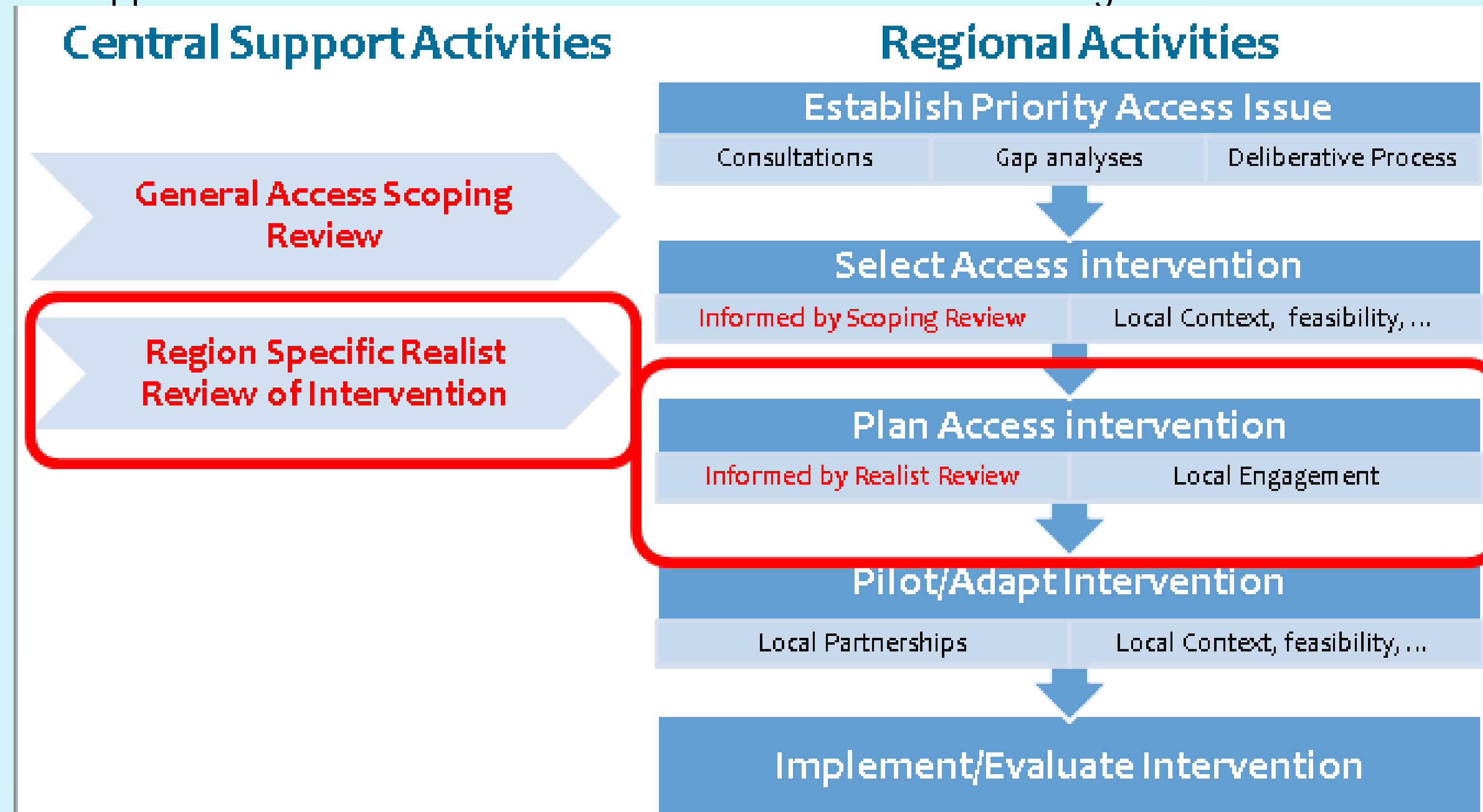


Background

The Champlain Local Health Integration Network (LHIN)¹ is one of 6 regions implementing an intervention to increase access to primary health care for vulnerable populations within the Innovative Models Promoting Access-to-Care Transformation (IMPACT) research program. We report on the experience of the Ontario region.

The approach across all six IMPACT team sites was the following:



Access intervention selected in Ontario:

- Increase referral to community health and social resources, and
- Implement a navigator in the practice to support patients access to these resources.

Realist Review Commissioned understand:

- “How can organizational change be implemented within primary care practices to improve referrals to community resources?”

Objective

Demonstrate the feasibility of using a rapid realist review to inform the development of an intervention

Methods

Why a Realist Review? To gain an understanding of the pathways through which complex interventions may be effective and under what conditions.

Pawson's³ five practical stages for the review were followed: (1) Identify the theories that underlie the intervention, (2) Search for relevant evidence tailored to the subject, (3) Select studies, (4) Extract data, (5) Synthesize data to understand the intervention.

- “WHAT is it about this kind of intervention that works, for WHOM, in what CIRCUMSTANCES, in what RESPECTS and WHY” (p. S1:31).

Rapid Realist Review

- Collaborative approach between the Local Team and the Central Expert Realist Review Team. The Local Team developed a research question and worked with the Realist Review Team to further define the need through an iterative process.
- 3547 records published between 2005-present were screened; 10 met the inclusion criteria (9 RCTs, 1 qualitative study).
- Screening focused on Randomized Controlled Trials (RCTs) and systematic reviews for feasibility, credibility and synthesis of information.
- Data based on the RE-AIM framework parameters²:
 - Reach your intended target population,
 - Efficacy or effectiveness,
 - Adoption by target staff, settings, or institutions,
 - Implementation consistency, costs and adaptations made during delivery
 - Maintenance of intervention effects in individuals and settings over time”

Characteristics of Included Studies

Interventions: Focused on training primary care providers and staff, changing referral processes, increasing access to community resources.

Conditions: Health problems or conditions varied according to the intervention specific to the population in question and included smoking, asthma, colon cancer, and partner violence.

Vulnerabilities: Populations chosen for the studies included a range of vulnerabilities including older adults (>55yrs), low income, and underserved communities.

Providers: Physicians, clinicians, nurses, medical students and other health professionals.

Outcomes: Studies reported a range of patient, service, economic and process outcomes. Our main focus was on the referral to community programs and their utilization.

Data Analysis

- Realist Review Team identified and explored patterns in the data.
- Local Team and Realist Review Team agreed on emerging themes.
- Integrated data, mapped and interpreted the findings
- Checked the themes with partners and key stakeholders
- Discussed discrepancies and reached consensus on all items

Results

Within the one year intervention planning period, the Realist Review identified process and contextual **themes** relevant to increasing primary care referrals to community resources.

Application of Realist Review Findings to Local Context: Champlain LHIN

Themes	The Ontario Local Team will:
Training relevant to the needs and preferences of primary care practices	<ul style="list-style-type: none"> Train practices to identify relevant community resources that address social barriers Provide screening and navigation tools to access community resources specific to practice and patient needs
Presence of a local champion to advocate for the initiative	<ul style="list-style-type: none"> Provide tools, practice facilitation, ongoing support to help primary care practices integrate assessment of social barriers and referral to community resources into usual care Recruit and train patient navigators who will act as champions
Use of electronic health records (EHR)	<ul style="list-style-type: none"> Explore ways to embed cues in EHR to prompt provider referral Determine what and how providers prefer to receive information about patients' involvement in community resources
Clinic processes that affect referral	<ul style="list-style-type: none"> Make screening tools and information about community resources and their benefits available to patients and providers Implement practice facilitators to support the adoption of effective screening tools and to develop referral processes suited to individual practices

Conclusion

Collaboration between the Local Team and the Central Expert Realist Review Team demonstrates the feasibility and benefits of seeking scientific evidence to support the design of a community-led intervention responding to local needs.

Strategies were identified to increase the likelihood that primary care providers' would refer patients to community resources that may address the health concerns of their most socially disadvantaged patients.

¹The Champlain LHIN is one of 14 Ontario LHINs, serving 1.2 million individuals. The LHIN is a large, geographically-delineated health jurisdiction spanning nearly 18,000km² with the most urban region of downtown Ottawa spanning over 173 km². <http://www.champlainlin.on.ca/>
² [www.RE-AIM.org](http://www.re-aim.org/); Glasgow, R. E., Vogt, T. M., & Boles, S. M. (1999). Evaluating the public health impact of health promotion interventions: the RE-AIM framework. *American Journal of Public Health, 89*(9), 1322-1327.
³ Pawson, R., Greenhalgh, T., Harvey, G., & Walshe, K. (2005). Realist review-a new method of systematic review designed for complex policy interventions. *Journal of Health Services Research & Policy, 10*, (Suppl. 1), 21-34.