Optimizing Social Prescribing in Ontario: Research NGO partnership

Kiran Saluja, Pam Hilier, Sherry Teeter, Simone Dahrouge

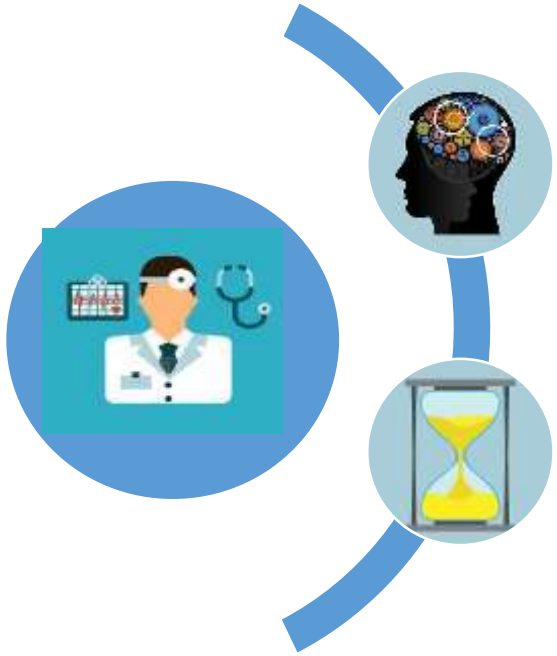
Social Prescribing Conference: Current Practices & Community Conversations (October 19, 2023)

Integrating Two Independent Social Prescribing programs in Ontario

Access to resources in the Community (ARC)

Pre ARC Consultations

Primary Care Providers



Limited **AWARENESS** of resources

Limited **TIME** to share information

Patients

Limited **AWARENESS** of resources

Limited knowledge to **NAVIGATE** a complex system

Lack of **SUPPORT** to overcome barriers

Pre ARC Consultations

Existing Navigation Models

- Specific target population
- Not commonly attached to healthcare
- Condition Specific

Single Point of Entry
for All
Health and Social Needs

Multistakeholder Commitee

Care Providers

Patient Partners

Service providers

Health Planners

Researchers

Dahrouge S, James K, Gauthier A, and Chiocchio F (2018). Engaging patients to improve equitable access to community resources, CMAJ 190 (Suppl) S46-S47. doi: https://doi.org/10.1503/cmaj.180408

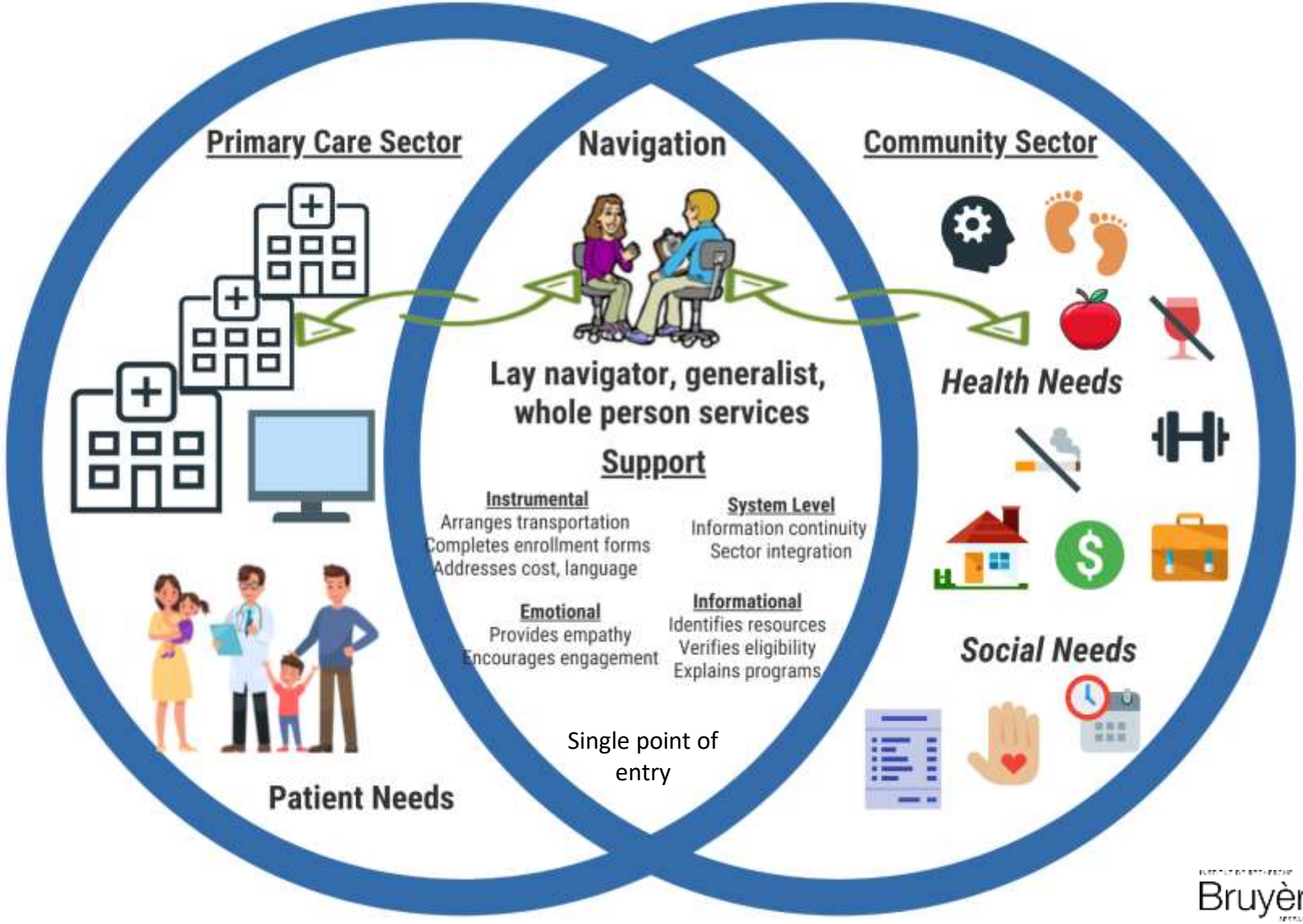
ARC Model – Primary Care Practice

Practice adaptations

- ✓ Estb. practice Champion
- ✓ Orientation
- ✓ Training
- ✓ Promotional material
- ✓ Estb. Referral mechanisms
- ✓ Physical space for navigator

Social Prescribing (provider)

- ✓ Identify patient (opportunistic)
- ✓ Engaging patients in self-care
- ✓ Referral



ARC Model – Primary Care Practice

Training

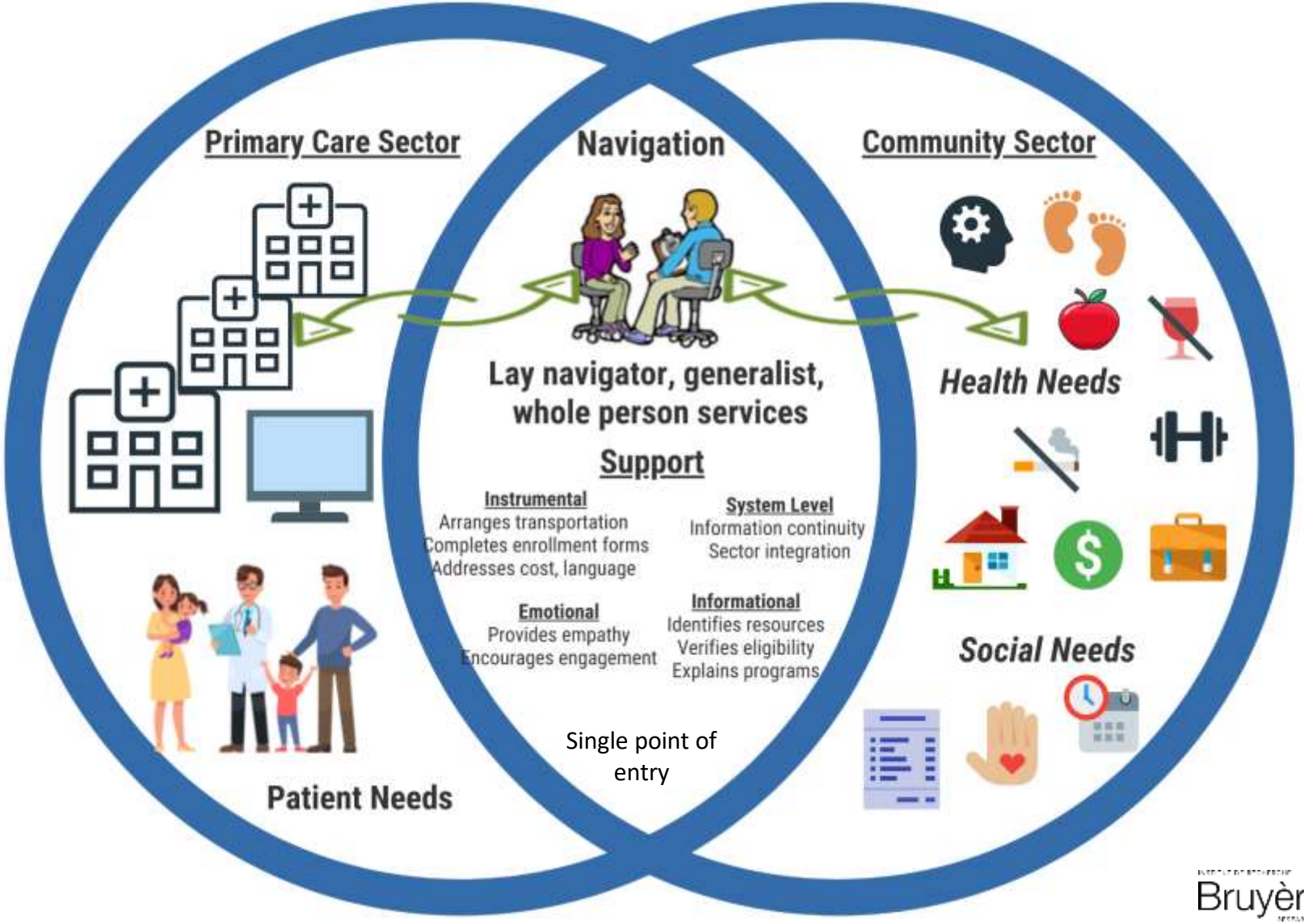
- ✓ Navigation process, core competencies

Function

- ✓ Establish relationship, MI
- ✓ Assess barriers, expectations, priorities, readiness
- ✓ Delivers support
- ✓ Reports back to PCP

Supporting their function

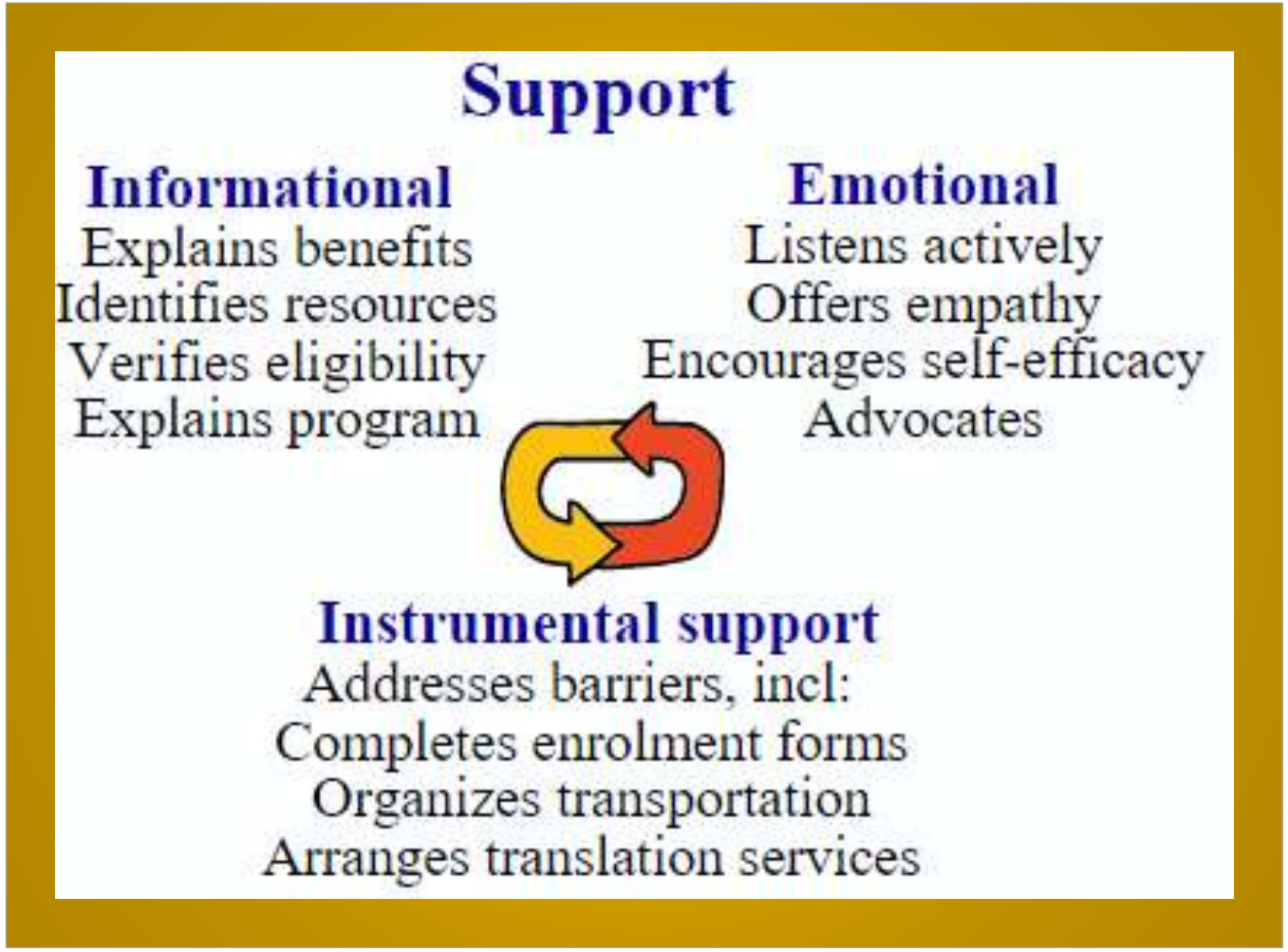
- ✓ Guides
- ✓ Scripts
- ✓ Standardized tools for data collection



ARC Navigator

- ✓ Non-clinical navigator
- ✓ Patient centered approach
- ✓ Any health or social need
- ✓ Active offer
- ✓ Motivational interviewing
- ✓ Longitudinal support

★ Ongoing Mentorship and support to Navigators



Toal-Sullivan D, Lemonde M, Gauthier AP, Dahrouge S. Adopting a lay navigator training programme in primary care. Health Education Journal. October 2020. doi:10.1177/0017896920959364

ARC SP Toolkit

Guide 1: Practice Set-Up
Guide 2: Navigator Processes
Guide 3: Navigator Training
Guide 4: Evaluation

SP Toolkit | ARC Research (arcnavigatorproject.com)

Navigator Training

Guide 3 - Navigator Training

Navigator Training Guide

Module 1 Patient Navigation in Primary Care	**Module 2** Patient Navigation & Health Disparities	**Module 3** Language, Health and Active Offer
Module 4 Chronic Diseases & Risk Factors	**Module 5** Helping with Lifestyle Change	**Module 6** Motivational Interviewing
Module 7 Cultural Competency	**Module 8** Advocacy and Empowerment	**Module 9** Navigation from the Field
Module 10 Navigator Self-care	**Module 11** Searching Community Services	**Module 12** Patient-centered Care

Activity

Case Studies and Role Play

Trained Navigators for

- CHC navigators
- Childrens Hospital of Eastern Ontario (CHEO)
- Refugee/Immigrant navigation Australia

ARC Research – Feasibility

Feasibility (Ottawa) : 2018

Single arm, Prospective,
Sequential mixed methods study

- ✓ Feasible, acceptable (PCP and patients)
- ✓ Easily integrated in PC practices
- ✓ Especially valued in the non-interprofessional practices

Demand

Implementation

Adaptation

Integration

Acceptability

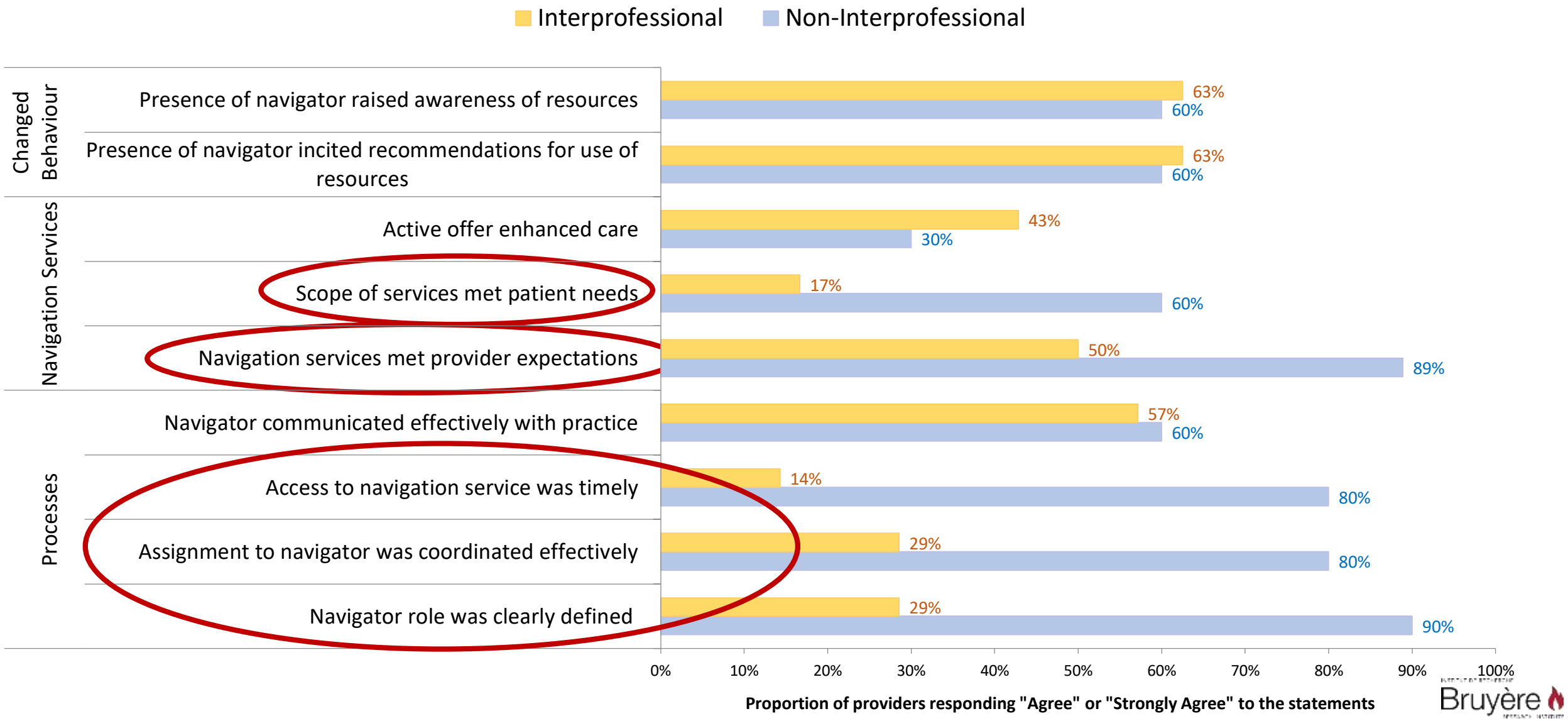
Practicality

Potential for Efficacy

Dahrouge S, Gauthier A, Chiocchio F, Presseau J, Kendall C, Lemonde M, Chomienne MH, Perna A, Toal-Sullivan D, Devlin RA, Timony P and Prud'homme D (2019). Access to Resources in the Community Through Navigation: Protocol for a Mixed-Methods Feasibility Study, JMIR Res Protoc, 8(1) e11022. doi: 10.2196/11022

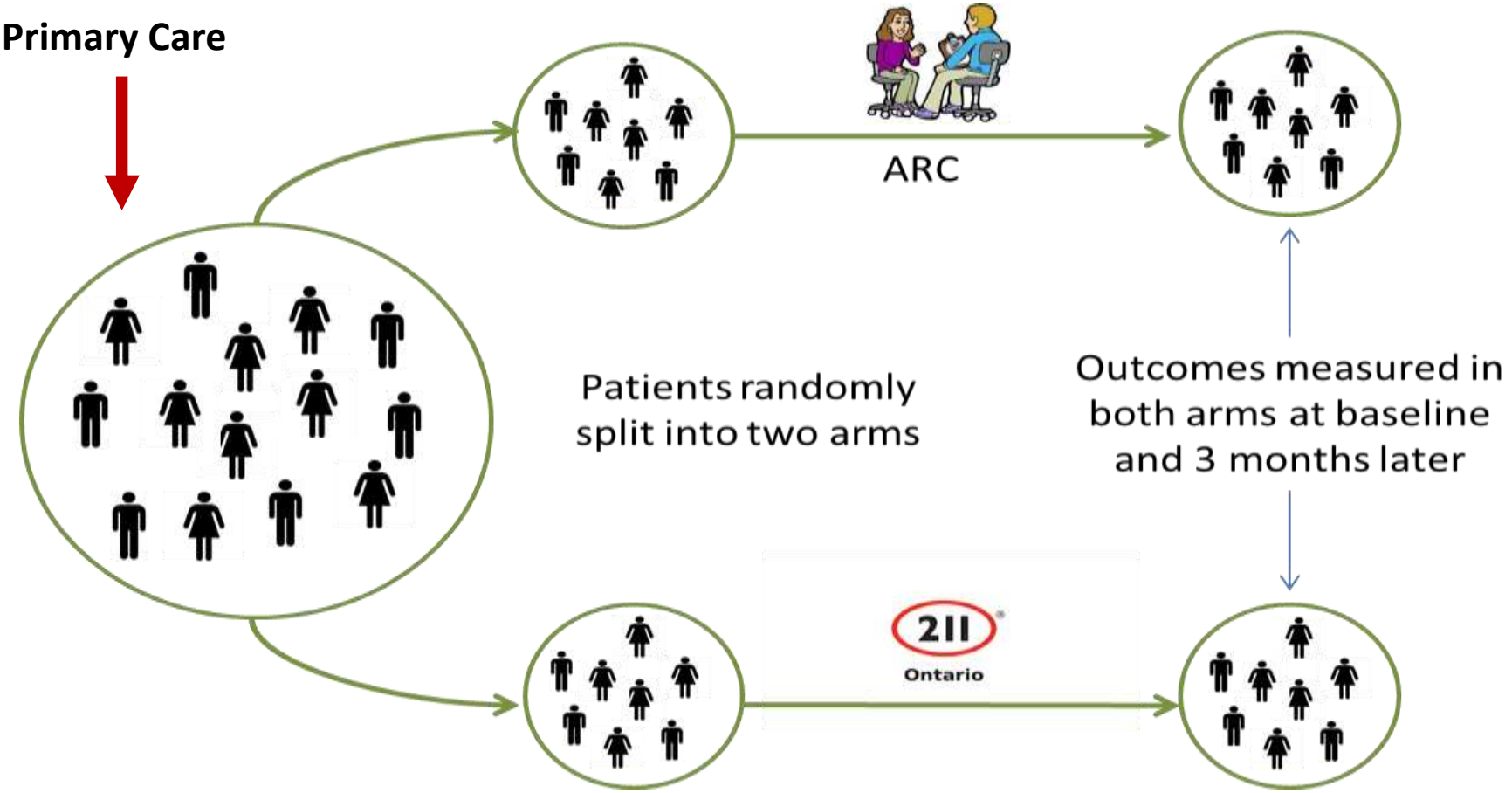
Dahrouge S, Gauthier AP, Durand F, Lemonde M, Saluja K, Kendall C, Premji K, Presseau J, Chomienne MH, Toal-Sullivan DA, Timony P, Perna A, Prud'homme D. The Feasibility of a Primary Care Based Navigation Service to Support Access to Health and Social Resources: The Access to Resources in the Community (ARC) Model. Int J Integr Care. 2022 Nov 22;22(4):13. doi: 10.5334/ijic.6500

ARC Research - Feasibility

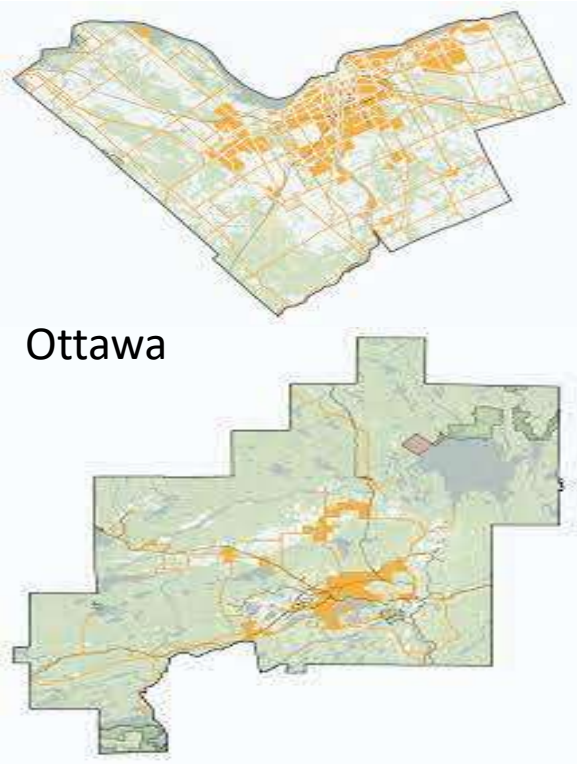


ARC Research – RCT

Referred from Primary Care



2 Regions



Ottawa

Sudbury

ARC Research – RCT

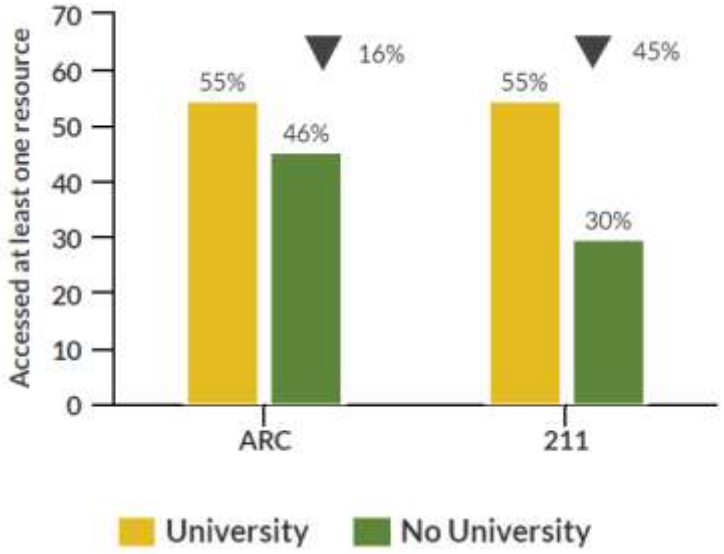
% of patients accessing at least one resource

49.7% **36.2%**

P = 0.014

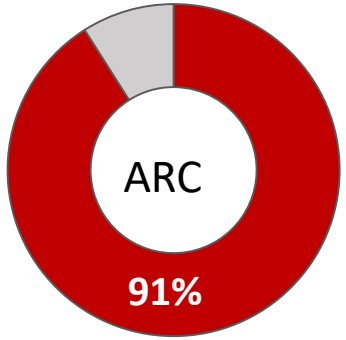
ARC Research: Improved Equity

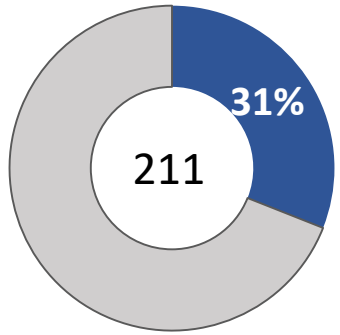
ARC reduced gap in access for individuals with lower education



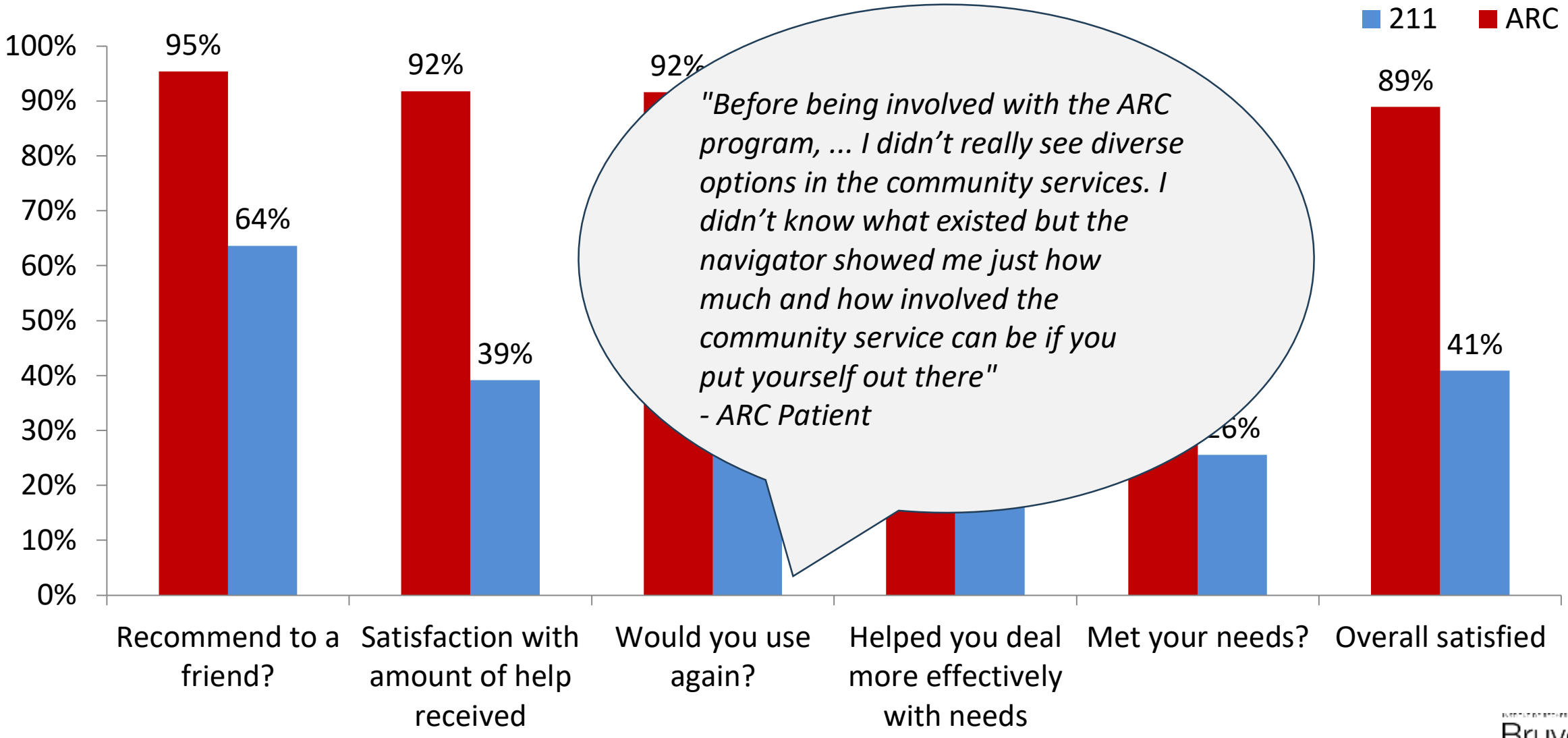
SpeakMYLanguage

Improved access to language concordant services for francophones

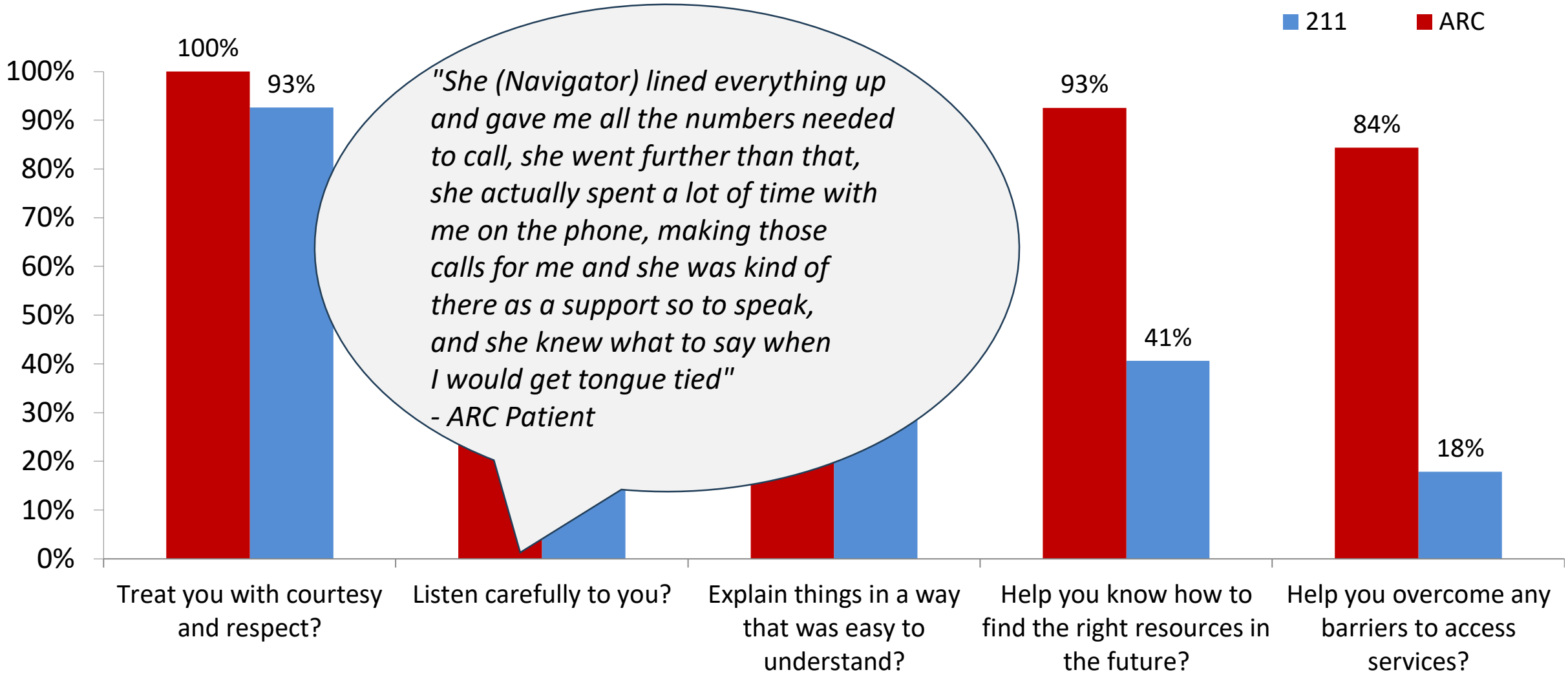




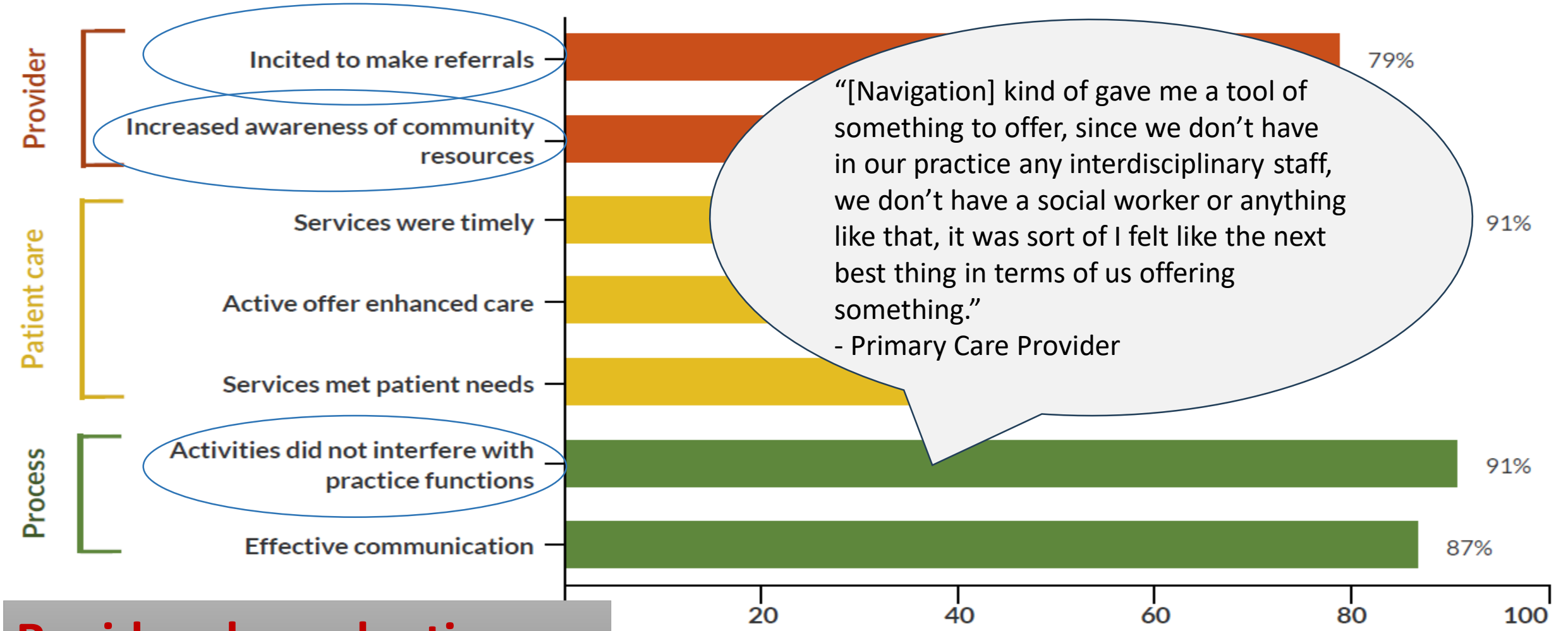
Patients Experience (ARC program)



Patients Experience (ARC Navigator)



Provider Experience



Rapid cycle evaluations

ARC - Conclusions

Findings		Recommendations
▪ Effective	⇨	✓ Improve efficiency
▪ Improves Equity	⇨	✓ 2-tiered system based on patient complexity
▪ Potential for Scale up	⇨	✓ Integrate in existing system and ensure broad reach

Recommendations: Practice screening

Based on existing knowledge

Active screening

Assisted

Community Connections- 211

Ontario 211 (Traditional)

211 Public information and referral - CRTC approval 2001, reached nationwide 2021

311 non-emergency municipal government services

411 directory assistance to find a telephone number

511 roads and traveler information

711 message relay for telephone devices for the deaf

811 non-urgent health care telephone triage - CRTC approval 2005, 9 provinces/territories

911 emergency police, fire and paramedic services

988 mental health and suicide prevention services (Nov 2023)

3-digit Dialing Codes Reduce Barriers to Essential Services

Community Connection's Role in Community

CRTC Ruling for the 211 dialing code

Assigns codes to service not to organizations; directs phone wireless companies to establish the dialing exchange

United Way Centraide Canada

Holds the 211 trademark and related licensing agreements with individual organizations

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Partnerships and initiatives with federal and provincial governments and national service organizations, including 211 US and United Way Worldwide

211 Canada

The national network of eleven licensed service providers supported by governments, United Ways and numerous partner organizations leading CoPs, committees and task groups

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Partnership contracts with the Ontario government and province-wide services related to the 211 brand

Ontario 211 Services

The transfer payment agency for MCCSS, funding agreements with the individual regional 211 service provider organizations

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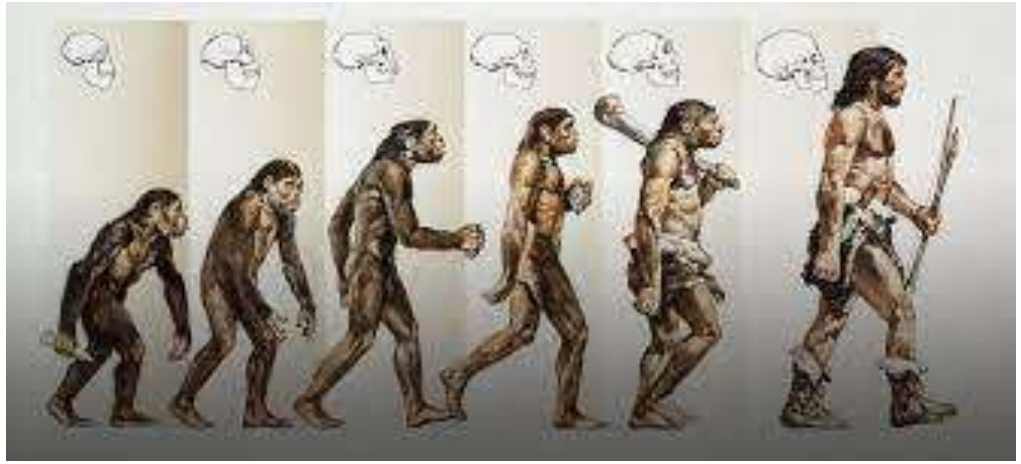
COMMUNITY CONNECTION
connecting people to services
211 Central East Ontario

- Central East Region
- Eastern Region
- Central Region
- South West Region
- Central South Region
- Northern Region

In Ontario, service providers have community-based boards of directors. They aim to develop information and referral partnerships with human service providers and larger service systems to advance an integrated service delivery system.

How Community Connection Got Started with Social Prescribing

- Community Connection – original member of the Georgian Bay Health Links
- Started as a pilot as a Central Referral Service to LHIN-funded Community Support Services
- Family Health Team physicians piloted referrals
- Health Links matured the referral form and eventually developed the outcome report

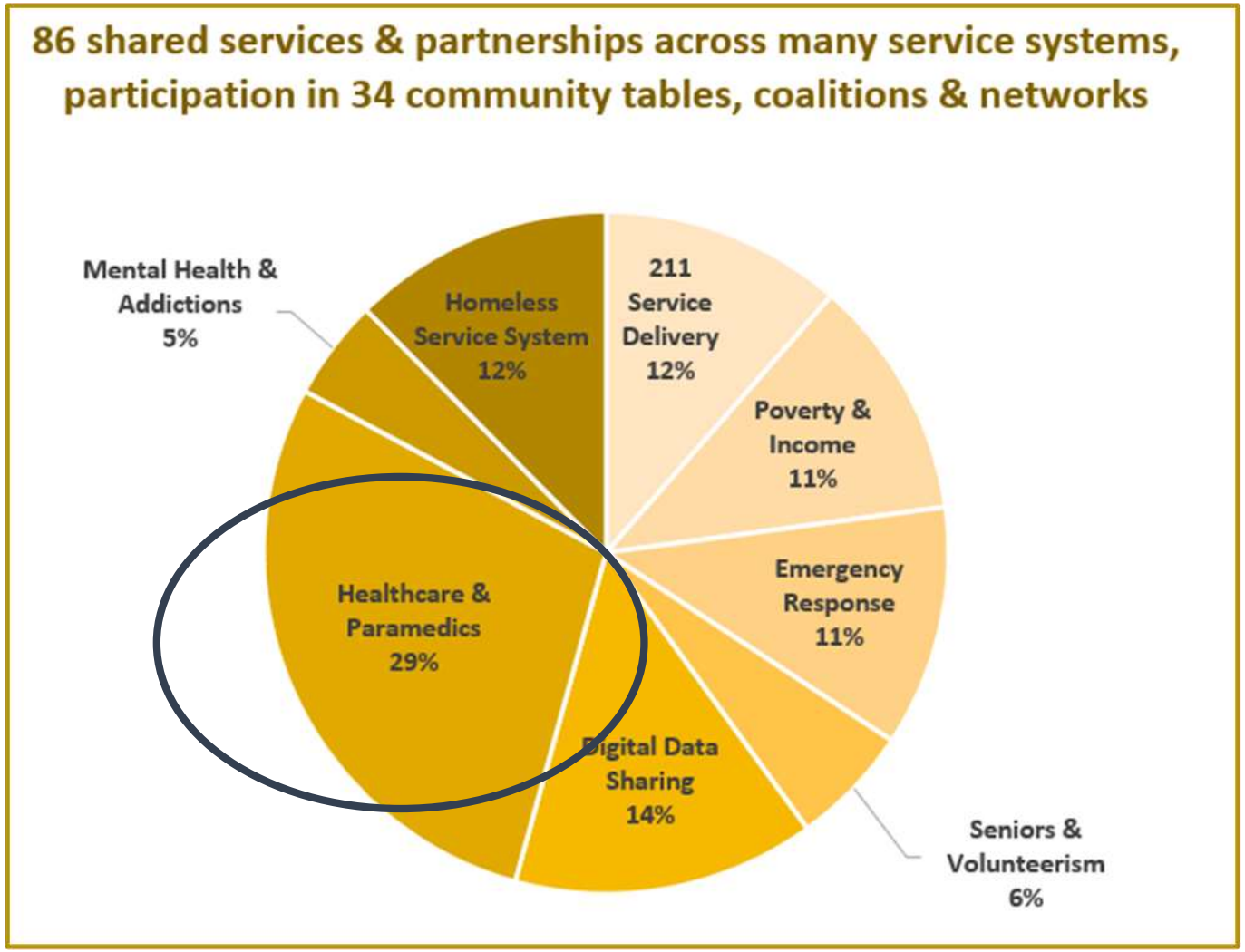


Message from Dr. Gary Bloch

Dr. Gary Bloch – 211 & Social Prescribing Video length: 1:35 min

Engagement of Physicians

- Physicians have been engaged through their Family Health Teams
- Allied health providers have been key in supporting awareness of the referral form



CC-211 Navigation Pathway and Navigator attributes

OceanMD

CC-211 Navigator

Establish Rapport

Informal Social Needs Screening

Support: Advocacy, Information and Referral, Warm transfer

Documentation

Continuous Follow-up + Support
Involve caregiver, resource

OceanMD
Final report
END

Discharge

Access achieved/ discontinued

Navigator Skill Set/ Training

Community Connection is Accredited through the international association, Inform USA

The standards met through Accreditation are the foundation of information and referral service quality

Inform USA offers a credentialing program for practitioners in the field of information and referral

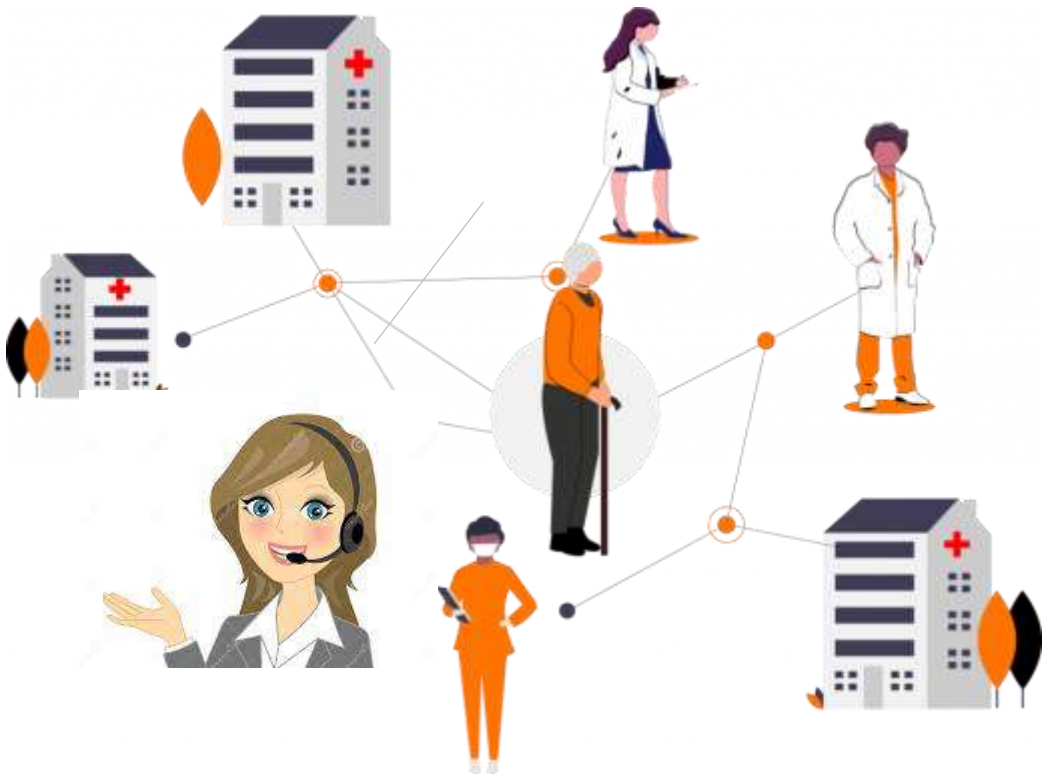
Our social prescribing program evolved from our goal to improve service for vulnerable populations; these include:

- ü Trauma informed principles
- ü Stages of change assessments
- ü Empowerment conversations
- ü Case-conferencing

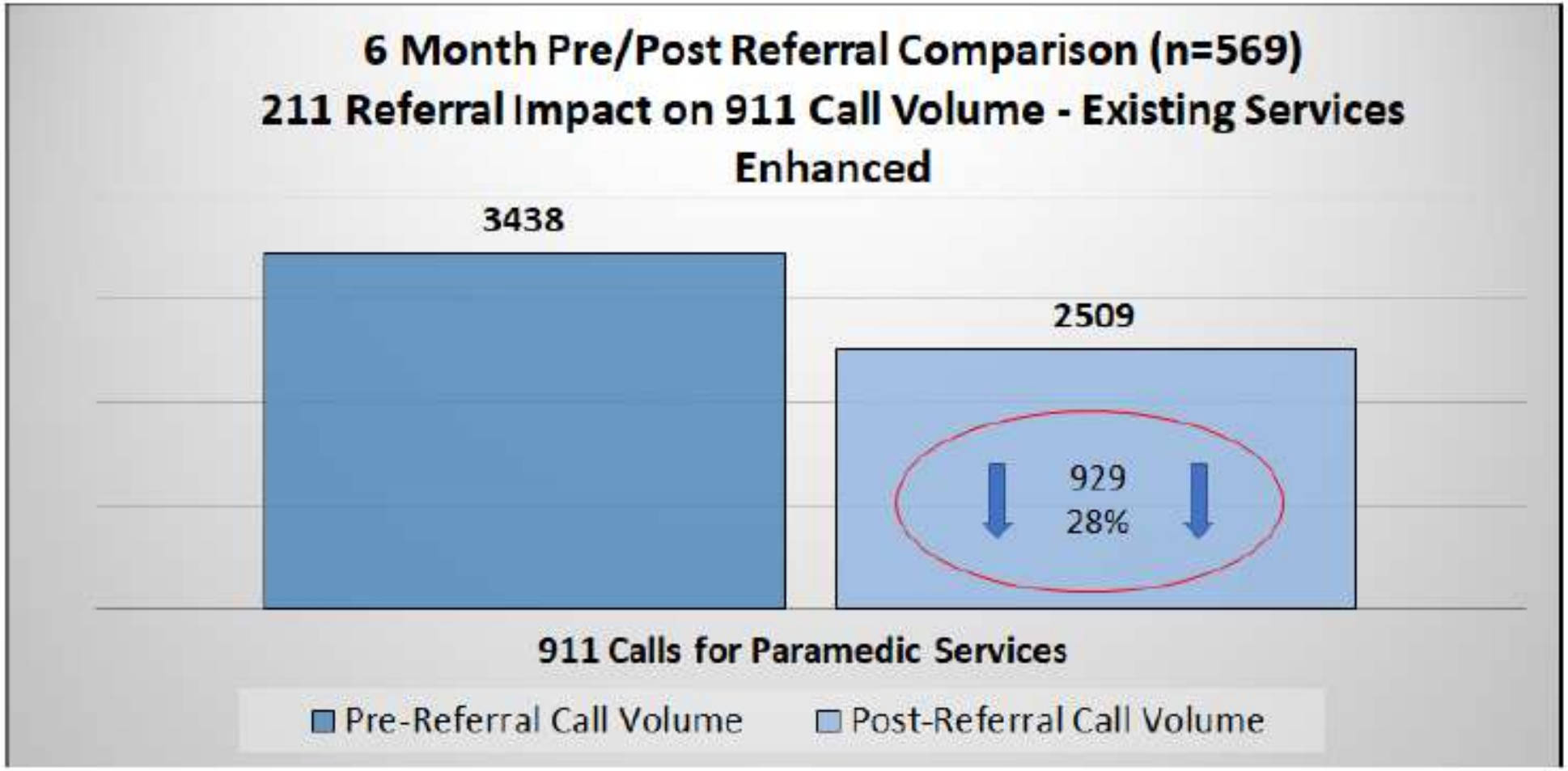
Community Connection: Impact

2017	2022	% increase
Referrals from Health Care Providers	Referrals from Health Care Providers	Referrals from Health Care Providers
596	837	**40%**
Paramedic Referrals	Paramedic Referrals	Paramedic Referrals
65	270	**315%**

5 - year total referrals = 6,706



Community Connection: Impact



Community Connection: Simcoe County data example

Category of Need	Total
Health #1	**2,944**
Housing #2	**2,908**
Income Support/Financial Assistance	2,013
Individual/Family Services	1,884
Food/Meals	1,373
Mental Health/Substance Use Disorders	1,280
Transportation	1,078
Information Services	998
Legal/Public Safety	844
Utility Assistance	830
Other Government/Economic Services	816
Community Services	736
Consumer Services	289
Arts, Culture and Recreation	265
Volunteers/Donations	201
Employment	122
Citizenship/Immigration	86
Education	79
Disaster	56

Health – Top Ten Type of Needs	Total
Medical Expense Assistance	343
Health Care Referrals	322
Home Health Care	291
Health Education	229
Assistive Technology Equipment Provision Options	227
Walk In Medical Clinics	185
Assistive Technology Equipment	172
Community Health Centres	86
Hospitals	77
Internal Medicine	70

Housing – Top Ten Type of Needs	Total
Emergency Shelter	853
Housing Search and Information	695
Housing Expense Assistance	604
Residential Housing Options	284
Landlord/Tenant Assistance	163
Subsidized Housing Administrative Organizations	104
Home Improvement/Accessibility	96
Supportive Housing	51
Transitional Housing/Shelter	25
Moving Services	15

Next Steps


QUALITY
IMPROVEMENT
CRITERIA
PERFORMANCE
EVALUATION
LOADING...
ANALYSIS
RESULTS
ASSESSMENT
AUDIT


Workshop
Development
Learn
TRAINING
Skills
Coaching


Process
Standardization

Integrating Two Independent Social Prescribing programs in Ontario

Developing an integrated ARC- CC-211 Model

Integrated Model

Practice Adaptations:
- ✓ Estb. Practice Champion
- ✓ Orientation
- ✓ Training
- ✓ Promotional material
- ✓ Maintaining contact [letters]

OceanMD

CC-211 Navigator

Enhanced Navigator Training
- Motivational interviewing
- Standardized approach: Script, Forms, Goal setting …

Establish Rapport

Informal Social Needs Screening

Support: Advocacy, Information and Referral, Warm transfer

Documentation

Continuous Follow-up + Support
Involve caregiver, resource,

OceanMD Final report END

Discharge

Access achieved/ discontinued

Establish Rapport:
- 24-48 hrs to contact time
- Understand barriers, priorities, expectations
- Social needs risk assessment tool

Formalized Risk Rating Tool
- Determine level of complexity & immediacy

Navigator Support:
- Informational
- Address barriers
- Emotional

Longitudinal social record

Rigorous evaluation: Quintuple Aim

ARC-CC 211 partnership

- Similar vision and experience in Social Prescribing

- Standardised tools, trainings and processes – enhance fidelity and impact
- Rigorous evaluation - demonstrate the impact

- Opportunity for Scale up, embedding ARC into CC SP program
- Access to CC infrastructures, technological innovations - enhance efficiency and broad reach

Thank you

Visit us at: https://www.arcnavigatorproject.com/Community Connection – Connecting people with services

Contact us: ARC@bruyere.org; steeter@communityconnection.ca