

Table Recorder Notes

1. What does acceptable access to primary health care services look like to you?

- Having acceptable access to family doctor care
- Having acceptable access to allied care professional in a reasonable period of time
- All services offered OT and physio
- Drug card – balance what they qualify for and what is prescribed
- Decreased wait-times/ manpower
- Correct utilization of manpower
- Shorter wait-times for routine care
- Standardization of primary care
- Drug card – more should be added – copds have to be in stages, more preventative
- Not seeing a different doctors every time you go to out-patients
- More fee for service doctors/less depended on RHA
- Adequate resources and equipment – dialysis
- Adoption of modern technology – Rosie? Telehealth
- No physio
- Chain of professionals should be in place
- Physio – no support in the area after surgery
- Physio – cannot be released because of this
- OT as well
- Being able to access a core group – family practice, pharmacist, in a reasonable amount of time (3 weeks) and able to access urgent care as quickly as possible.
- People need to be more aware of the services, a lot of people don't go to hospital until they are sick, not aware of services within the community or the services not available
- Coming into hospital, may not have to go into hospital if you could see a nurse or other provider in the community.
- Accessibility and education and more aware of services
- Lack of Physiotherapists in the community – have to have hip replacement in the city and no access to a therapist at home so has to stay in town and incur expense for living before coming home
- Consistency with health care provided – a long wait time for wait time
- Can access other providers but they can't prescribe pain medication that is needed and has to then wait a long time for a doctor
- Given the non-continuity of physicians and not having a consistent doctor, accessing needed pain medication is an issue as doctors will not prescribe meds if they don't know you – consistency in doctors is major especially for a person with chronic pain
- Takes a team to run – wait list is huge – a lot of people who need access to pain clinic go cannot get access....need to be able to get right services at the pain clinic, physiotherapist especially – people may be able to manage their own pain if the right

services were available such as in a gravity free way e.g., pool which are only open in the summer– more ways to be able to manage own pain which a lot of the services are not available – easier access to get grants for things like yoga, pools.

- Food costs a lot of money – very expensive – milk very expensive so makes it very difficult to manage weight – a lot that can be done outside of the hospital
- Not being able to access physiotherapist - closest therapist is 5 hours down the coast – having to drive back after may mean undoing the work of the physiotherapist – on the other hand staying in the community means being taken away from family
- Wait time for specialists out of town – sometimes specialists don't realize that you are in St. Anthony and call the day before the appointment in St. Johns' which is impossible to get to.
- Early access – working as a pub health nurse – we need to start with health promotion right from the beginning – resources and support within communities and school system – in schools – police officers in schools – registered nurses should be placed in the community – not just in school but in communities – lifestyle clinics to check weights, glucose – these clinic have been available with mental health services as well, however the mental health and addictions services were pulled from the community clinics and now are only accessed in the hospital this is a gap. Big impact in the community
- Not using the emergency room as a clinic – more clinics in the community – pools are only summer pools – people with chronic pain worst part of the year is winter and they need to access to pool – fewer children growing to be life guards – better access to pools with all round access – could be part of school curriculum
- Surrounded by water therefore more of a need of access to pools with swimming lessons
- Groceries are very expensive – almost 5 dollars for milk.
- Physiotherapist issue – very problematic

2. What kind of supports/ services do you need to help you stay healthy?

- Family doctor – continuous
- Physio is very important
- Pool and other fitness facilities year round
- Quit smoking program needs to be updated/changed
- Grass root campaigning in schools – sneak it in program
- Cafeteria service in schools need to change
- Kids eat smart
- Consistency in family doctor
- Fee for service
- More access to dietitians, nutritionist
- Pulmonary rehab programs – team approach
- More funding for more RTs - waitlists are huge
- Professionals to run recreational facilities

- Walking groups should be used- facilitated
- Walking track in arena closed during lunch
- Healthy eating
- Prices for food milk fruits and vegetables
- System is ancient – need 2 of every professionals
- If equipment is put in clinic should have manpower to run it –recruitment and retention
- Make use of family doctors as family doctors not to be used to assist other doctors
- More access to public buildings like schools – not always accessible to public – should be open to public to use facilities – gym – like Placentia
- More group activity
- Should be more community gardens – accessibility to healthy foods
- Access to dieticians and nutritionists – more info on portion size
- More community services within hospital more family practitioners providing services outside emergency room - year round services pool
- Community clinics should have other professionals – dieticians, mental health councilors – holistic approach
- Community groups – family resource centers
- Communication and education – a lot of seniors don't have computers – may not access – many access the awareness flu vaccine clinics – how do we find a way to communicate with people who may not have computers
- Chronic pain support group – important for people to know they are not alone and everyone supports each other
- Pain clinic – keep active and keeps on top of meds – physiotherapy need long term
- Recreation – need pool all year round
- Soft stretch classes
- Family doctor – great pharmacist in St. Anthony and will answer all questions
- Pain clinics need extended services – someone with a chronic illness not acceptable to have a long wait time. Need to be well staffed and available – need consistency with who you we are speaking to about your conditions –
- consistency and early access –
- has to come from school and pre-school to look at things about healthy eating – availability to recreational facilities – part of curriculum – build on healthy living
- Social activities are important – people young need these activities to stay active - people who are sick need to know they have support – having a social activity and being a part of that group
- We know we have an aging population – shingles increases suffering – need shingles vaccine – preventative item
- Support groups for mental health issues – until in situation you don't realize how many are in same situation – more promotion of these groups and support for more groups
- Doctors need to recommend more people to support groups
- Availability and where – what – a lot of places outside of St. Anthony don't know what is going on in St. Anthony – need to promote these groups outside of St. Anthony so they know they are available....

- Children should be made aware of what it means to be healthy, taught by teachers and public health nurses
- More communities should be involved - dieticians – access to dieticians – they are not referring patients to dieticians
- Education and availability
- Still don't know if getting right checks at right time – not a constant provider –lack of coordination
- Joy fellowship –people with different challenges – socialization for people who are developmentally challenged – could be modelled across the province – capture a lot of people to help them feel good
- Elderly - what kind of support are they getting in their home – are they availing of help they need and how do they get it. They need support but sometimes it's not all available. How do we get them to talk to each other. A lot of services require forms to be filled out and people don't know how to access the forms.
- People don't know services are available

3. What do you think needs to change in primary health care? In what ways does primary health care work well for you?

- Good handling critically ill/emergencies
- Not well – chronic patients – drug card, sleep apnea machines should be covered by MCP or drug card,
- Change - Family practice building outside the hospital – fee service
- Change- blood work – outpatients registers big jam in outpatients, big jam in lab, Flow of patients
- Wait-times is very bad
- Getting patients out in a timely manner
- Adequate staffing – dietician
- Drug Card increased coverage
- Critical care is good
- Long term and home care needs to change – people waiting in beds
- Triage system is missing for this hospital
- Try to promote change but not happening
- Patients occupying beds waiting for long term care
- Management and professionals don't see eye to eye
- Dialysis, lab, surgery – hospital water system depended on the town's system needs to change
- Infrastructure in town is very old
- Wait-time on specialists – dermatologist
- Specialist on a routine basis

- If referred to corner brook and I have to go to physiotherapists– no hostile or low expense accommodations – expense incurred by individual – big cost to go out of community for services.
- Well – Anyone who has received services in St. Anthony – excellent providers, wait times compared to other facilities
- Can improve – increasing services such as mental health services, getting sent out of hospital and back in the community, therefore need more supports in the community to support this (e.g., mental health and addictions, dressing changes)
- Works well – Nurse practitioner program – serves a great function especially routine services and they listen
- Health care in this area and professionals second to none wait times reasonable – money and funding for programs is an issue in particular mental health– also for some services like MRI have to go to Corner Brook and it's important to have these services within the community somewhere where we are regionalized and a lot of surrounding community rely on our services – incurs significant stress to go get these services
- Incredible array of services for such a small area
- Gaps – are we using resources in right way? We have increased mental health and addictions resources but have we utilized them in the right way
- Starts in school – gym twice in a two week cycle – learn to run program that is supportive
- No outside play space – new school
- Dental Delivery not working well – back logs – great network of registered nurses doctors, when it comes to physiotherapists, occupational therapists, psychiatrists, not so great.
- More investment – more tele health –no need to travel with more tele health
- People like nurse practitioners – better continuity of care – encourage registered nurses to become nurse practitioners
- A lot of excellent care – with regard to nurse practitioner – not as accessible as we would like – if go in for appointment and she wants to see you six months you must make appointment right away – wait time an issue – need more nurse practitioner – travel and expenses for going to corner brook for appointments – a lot of people with regard to physio - when going to corner brook then you can be paying a lot of money – a lot don't have private travel and appointments can be very expensive or they just don't go
- When we have health insurance it's fine but a lot of people don't have insurance so having to pay is quite costly, therefore we need more physiotherapists within the community as well as within the hospital.
- Health care professionals say go to physiotherapist, a lot of times they say you need to ome come back 8 months
- There is a difference between having all equip available and having tests, if we don't have a team approach to this service it doesn't work well –

- health care workers need to work together and give the patient a better outlook of what patient is experiencing – cooperation and contact between all medical personnel. All people and talent, need more working together – everyone talking to each other.
- Every time going to hospital seeing a different person – very little consistency. If going to different hospitals – everywhere they create a file –
- having an electronic medical record is key. A lot of expense incurred when more services could
- Patients and clients have to be accountable for their own health care as well. Have to enable people to take care of themselves. As health care providers there is only so much we can do. More awareness campaigns for people to take more responsibility of their own care.
- More cooperation between doctors because equipment not available in the community
- Sometimes we have equipment but do not have the providers
- Are we using money wisely

4. Is there anything else you would like to add to today's discussions on primary health care?