

Opportunity Identification Matrix: Enhancing health systems performance by learning from best practice models of public health & care for refugees in Canada

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**S.M. Zeeshan Qadar
Project Manager, NCCID**



National Collaborating Centre
for Infectious Diseases
Centre de collaboration nationale
des maladies infectieuses

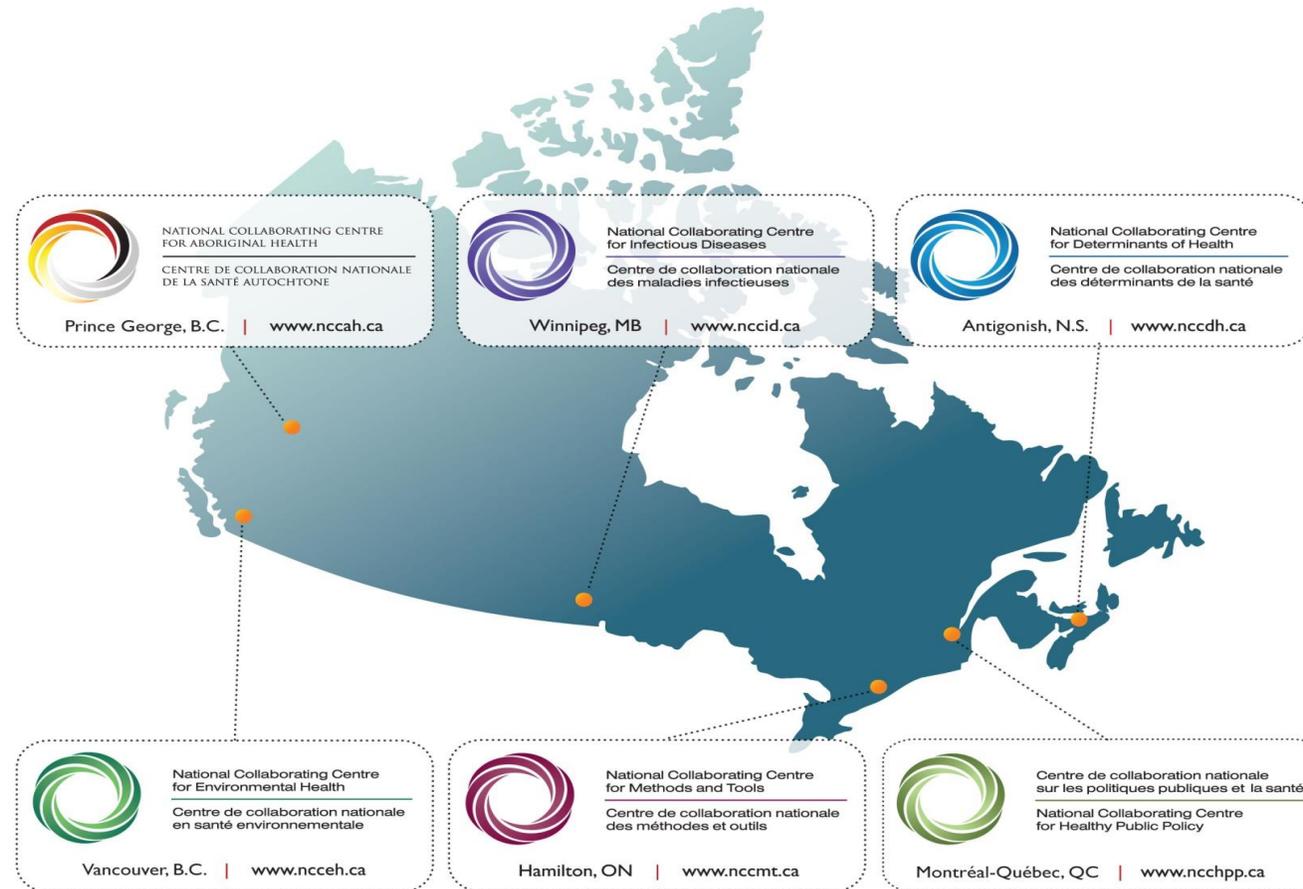
Disclosure Statement

I have no affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.

Outline

- About NCCID - Background
- Academic Health Sciences Leadership Program
- Refugees & Asylum Seekers in the Canadian context
- Needs Assessment (Environmental scan & content expert consultations)
- Opportunity Identification Matrix (OIM)
- Stakeholder Register
- Key Highlights from OIM
- Question & Answer

National Collaborating Centres for Public Health



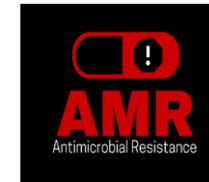


- “...identify **knowledge gaps**, **foster networks** and provide the public health system with an array of **evidence-based resources**, **multi-media products**, and **knowledge translation services**”
- “...promote the use of scientific research and other knowledge to **strengthen** public health **practices, programs** and **policies** in Canada”

NCCID

Project Streams:

- Tuberculosis
- HIV & STBBIs
- Notifiable Diseases Database
- Antimicrobial Resistance & Stewardship
- **Refugees & Public Health**
- Emerging Infectious Diseases & Outbreaks



Academic Health Sciences Leadership Program

- Project based leadership training program designed by CHI
- Offered by the University of Manitoba in collaboration with WRHA & SPOR
- Runs between September – February
- Skills such as Strategic Planning, Project Management, Health System Performance & other skills to develop a project on refugee health care model
- An Opportunity Identification Matrix was devised to investigate reportable items by refugee clinics across Canada

Situational Assessment: Refugees & Asylum Seekers in Canada

- In the record-setting year of 2016 about 47,000 newcomers, mostly from Syria landed in Canada.
Social Policy Trends, The School of Public Policy, University of Calgary, January, 2019
- “In 2018 Canada received more planned refugees than any other country, a first in 72 years of organized resettlement.” **Social Policy Trends, The School of Public Policy, University of Calgary, January, 2019**
- “Data compiled from the United Nations High Commissioner for Refugees (UNHCR), as well as other governments worldwide, show that Canada resettled just under 30,000 refugees in 2018. **The Star Edmonton – 23 January, 2019**
- Total RCMP interception during calendar year 2017 & 2018 were 20,593 & 19,419 individuals crossing into Canada. **IRCC, 2019**
- About 2,698 people crossed into Canada unofficially from U.S. in the first three months of 2019.
IRCC – 17 April 2019



CBC News

Needs Assessment: Environmental Scan & Content Expert Consultations

- Literature review from both **academic (peer reviewed)** and **non-academic (grey literature)**
- **Expert consultations** across Canada indicates lack of consistent approach in screening & patient centered approaches
- Surveillance is one of the core public health functions
- No jurisdictional scan exists in Canada which looks at healthcare services offered to refugee populations at a systems level



Needs Assessment

- The healthcare needs for refugees are unlike those for average Canadians.
- There are various kinds of healthcare delivery models that exist from coast to coast in Canada
- The problem is among these models of care some are exhausting more resources than others even though the healthcare needs are same.
- Why don't we have one single model of care for refugee population.

Knowledge Gaps in Asylum Seeking Refugees

- Currently, no published data or official statements on the asylum seekers in Canada

- Health status

- Health records

- Access to healthcare

- How continuity of care is being established

- How data are being collected? What agencies? What health services are provided for the asylum seekers? What is public health role?



Opportunity Identification Matrix (OIM)

OIM provides comprehensive analysis of health performance at three levels (person, clinician and system) to develop strategies for quality improvement and cost containment

The matrix also act to reduce communication barriers between people, processes and programs, preparing the organization to high-value care

It is objective, data-driven, facts base approach to collect existing evidence to direct towards knowledge gap in refugee public health domain

(3M Performance Matrix)

Opportunity Identification Matrix (OIM)-Process

The needs assessment clearly highlighted the necessity of Canada-wide matrix to identify factors such as

- a) Patient Engagement Strategy
- b) Infectious Diseases-related screening
- c) Mental Health

These reportable items were based on the Canadian Medical Association Journal Clinical Guidelines (CMAJ) for clinicians.

Stakeholder Register

Stakeholder Name	Location	Stakeholder Category & Action
Bridge Care Clinic	Winnipeg, Manitoba (Prairie province, Canada)	Key stakeholder & data provider
Newcomer Clinic	Halifax, Nova Scotia (Maritime Province)	Key Stakeholder & data provider
Ottawa Newcomer Clinic	Ottawa	Key Stakeholder & data provider

Key Highlights: Infectious Diseases Related Screening

Refugee Clinic: Ottawa Newcomer Clinic

Screening for Infectious Disease such as TB/LTBI, HIV/STBBI, Hepatitis, Vaccine catch-up, Strongyloides & Schistosomiasis

Offer Immunization to all children & adults (catch-up schedule if clients have no records)

ID specialist joining soon

Newcomer Health Clinic, Halifax, Nova Scotia

Screening for Infectious Diseases such as TB/LTBI, HIV/STBBI, Hepatitis, Vaccine catch-up, Strongyloides & Schistosomiasis

Vaccine catch-up is offered to both children & adults

Bridge Care Clinic, Winnipeg, Manitoba

Screening for HIV, Hepatitis B & C, **Antibody screening for Measles, Mumps, Rubella & Varicella, Strongyloides & Schistosomiasis for Asian & African cohort, IGRA for 18-49 yr. old refugees, Vision, Dental, Iron def. (anemia) for children <5 & reproductive women, cervical cancer screening**

Key Highlights: Mental Health Services

**Refugee Clinic: Ottawa
Newcomer Clinic**

Counselling services offered in partnership with a settlement agency

Psychiatrist on site for quick screening & check-up as compared to waiting for 9-12 months for an initial assessment

**Newcomer Health
Clinic, Halifax, Nova
Scotia**

Limited capacity for direct mental health care offering some services mainly referred to other clinics

**Bridge Care Clinic,
Winnipeg, Manitoba**

Remain vigilant for mental health sign & Symptoms such as PTSD, depression. Work closely with WRHA shared clinic Psychiatrist, Psychologist & counsellors. Shared care visits bridge care o provide services. Referred to Mount Carmel Counselors & Aurora Family Therapy Centre

Key Highlights: Patient Engagement Strategy

Refugee Clinic: Ottawa Newcomer Clinic

Professional medical interpretation for appointments, health navigators provide home visits & system navigation supports, educate on Canadian healthcare system, connect with primary care provider in client's community of stay

Free of cost services

Newcomer Health Clinic, Halifax, Nova Scotia

Deals with all kind of refugees (GARS, PSRs)

Still evolving strategy

Currently planning for patient & family advisor recruitment event

Bridge Care Clinic, Winnipeg, Manitoba

Language interpreters & culturally appropriate care, specialized primary care services, offer outreach services, assistance with healthcare system navigation, offer family centered care, referrals to medical specialists, connecting with a primary care provider

Next Steps



- These reportable items by clinics across Canada could help to develop multisite large data repository which can enhance system efficiency & consistency
- NCCID will design a Knowledge Exchange & Translation (KE & T) initiative on new knowledge

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Thank You!



**Questions, Comments & Suggestions
are warmly welcomed**

E mail: sheikh.qadar@umanitoba.ca



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