

**PRIMARY HEALTH CARE IN SASKATCHEWAN
MEDIA BACKGROUNDER**

HIGHLIGHTS

What is primary health care?

Primary health care makes up about 80 per cent of the services provided every day in the health system such as visits to family physicians, nurse practitioners, pharmacy and therapy services, and calls to *HealthLine*.

How is strengthened primary health care different? What's new?

- Following the *Patient First Review* recommendations – patients and families are at the centre of care with an emphasis on access, superior patient experience and improved health.
- More support to enable patients to self-manage chronic conditions like Diabetes.
- Community involvement is ongoing, both in designing primary health care services and sharing in decision.
- A greater use of the health care team, maximizing their skills and abilities.
- The team working collaboratively to treat the whole patient.
- New team members and roles such as a Nurse Case Manager.
- Use of innovative new technology for enhanced patient access.
- Creating attractive work environments and better work/life balance to support recruitment and retention of physicians and other health care providers.

Strengthening Primary Health Care in all RHAs

- Funds allocated to all RHAs to assist in stabilizing health services.
- Expansion of midwifery services.
- Assist with working with communities to design primary health care services
- Assist with physician engagement
- Connecting with and ensuring appropriate alignment with First Nations delivery system.

Eight Primary Health Care Learning Sites

- *Primary health care learning sites are at different stages of development. Local announcements will follow at each location.*

 - ***Meadow Lake*** –*Clinic and service redesign resulting in improved access to all team members such as nurse case manager*
 - ***Moose Jaw*** – *Team development and a redesign to focus on an integration of services such as immunizations and well-baby clinics*
 - ***Yorkton*** – *Focus on team-based management of chronic disease and outreach to communities*
 - ***Regina Inner City*** – *Enhanced after-hours access, linking to other community services and outreach to communities*
 - ***Lloydminster*** – *Team development and work redesign, includes inter-provincial collaboration*
 - ***Leader*** – *Focus on service and team redesign and using technology to support communication between urban and rural team members*
 - ***Dakota Whitecap First Nation/Saskatoon Health Region Partnership*** – *Focus on integration of First Nation and health region delivered services*
 - ***Fort Qu'Appelle, Balcarres, Lestock – All Nations Healing Hospital Partnership*** – *Multi-community model to ensure care delivery and alignment with First Nations delivery systems*
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- All locations are increasing access to health services and improving patient experience, and have a larger role for patients and communities through continual solicitation of feedback to improve services. They reflect a variety of different models, partners and community challenges. Some examples of what they will be undertaking include;
 - Redesigning team composition, work flow and space
 - Use of continuous improvement methods such as Lean or clinical practice redesign
 - Incorporation of new roles for health providers within the team such as RN case managers, dieticians, pharmacists, and emergency medical personnel.
 - Outreach to surrounding communities
 - Enhanced after-hours care access
 - Exploring use of new technologies, particularly in rural and remote communities, to enhance access and ease burden on patient travel

Lessons learned from testing models will be shared across the province to facilitate other patients, communities and teams to work with health regions to design models that work for their area.

More Information – for patients, communities and teams is available online at www.health.gov.sk.ca/primary-health-care