Report: PHP-IDS-24-001

Region of Waterloo

Public Health and Paramedic Services

Infectious Disease

To: Community and Health Services Committee

Meeting Date: January 16, 2024

Report Title: 2023 Infectious Diseases Mobile Outreach Clinical Services

1. Recommendation

For information.

2. Purpose / Issue:

This report shares information about Public Health's mobile outreach Clinical Services, specifically the Neighbourhood Nursing Program (which consists of the Neighbourhood Nursing Team and the Neighbourhood Bus), and plans to enhance Public Health outreach clinical services in the future.

3. Strategic Plan:

This report relates to the following strategic priorities: Resilient and Future Ready Organization, and Equitable Services and Opportunities of the 2023-2027 Strategic Plan.

4. Report Highlights:

- To bridge gaps in connection to equity-deserving communities identified during the COVID-19 response, Public Health developed a pilot neighbourhood strategy which is comprised of a Neighbourhood Nursing Team and a Neighbourhood Bus. The Neighbourhood Nursing Team provides access to many public health services, like vaccines, sexual health, harm reduction, prenatal health and other supports for people who experience barriers to health care. The Neighbourhood Bus provides residents with easy access to vaccines, close to home.
- Evaluation of the neighbourhood strategy to date indicates the program has increased access to service, has positively influenced the quality of life for clients in equity-deserving communities, and is a step towards building trust with communities.
- Building on the success of the neighbourhood strategy pilot, Public Health has approved ongoing mobile outreach and clinical services through the

Neighbourhood Nursing Team and Neighbourhood Bus, now combined together as the Neighbourhood Nursing Program. To advance this work, the Infectious Disease division is also shifting resources toward integrated clinical services in all modalities, including a dedicated outreach clinical services team as part of a divisional restructure.

- This restructure will provide increased flexibility and agility to respond to emerging needs among equity-deserving communities. The approach will also help enhance surge capacity for urgent Public Health responses.
- Public Health will continue to build community partnerships and conduct ongoing evaluation of the neighbourhood strategy and integrated outreach clinical services to identify and remove barriers to clinical service access for equitydeserving communities.

5. Background:

In alignment with the Ontario Public Health Standards, Public Health provides clinical services, including sexual health services and vaccinations, to those with barriers to access.

To bridge gaps in reaching equity-deserving communities, and build on lessons learned during the COVID-19 response, Public Health launched a pilot neighbourhood strategy, including the Neighbourhood Nursing Team and Neighbourhood Bus. The Neighbourhood Nursing Team pilot program has been engaging equity-deserving communities to provide customized, small-scale, "micro" mobile clinics since January 2023. Inspired by the success of the COVID-19 vaccination bus, the Neighbourhood Bus has been providing service to populations with significant barriers to accessing vaccines since October 2022. Research shows that providing mobile healthcare services that are customized and flexible to community needs invites opportunities to address systemic healthcare disparities felt by minority populations¹.

The Neighbourhood Nursing Team has successfully provided collaborative service with 29 community partners and served more than 2,000 clients. Partner feedback indicates that this program has not only increased access to service for clients facing sociodemographic barriers, but has also positively impacted the quality of life for clients and is a step to building trust with many local equity-deserving community groups and partners.

The Neighbourhood Bus has made over 70 visits to community locations, providing over 2,000 doses of vaccine.

¹ Wicke, A. (2023). Mobile Health Clinics as a Tool in Addressing Health Disparities. Wilfrid Laurier University

As part of a Divisional restructure, the Infectious Diseases division plans to implement integrated clinical services during 2024 in all modalities (fixed site, mobile, micromobile) to bridge gaps in services, provide more opportunities to access clinical services, build trust with equity-deserving communities and improve the client experience. The restructure will also provide additional surge capacity to help respond to emerging diseases through cross training of all divisional nurses.

6. Communication and Engagement with Area Municipalities and the Public

Area Municipalities:

Following the success of the mobile vaccination bus in rural and underserved communities during COVID, ongoing communications to coordinate the Neighbourhood Nursing Program are occurring with operators of city recreation complexes and libraries. Operators are supportive of the initiatives and some have requested additional visits.

Public:

Residents with clinical services access issues (including language barriers, transportation, and safe/affordable childcare, among others) are engaged through surveys and promotional materials communicated via the Neighbourhood Bus and/or Neighbourhood Nursing Team host sites. Almost half of the clients who participated in the evaluation of the Neighbourhood Nursing Team indicated they would not have otherwise accessed health services. Clients also shared that resources and information shared by nurses have been helpful.

Internal Region partners (such as Cultural Services, Regional Strategic Planning Groups, and The Plan to End Chronic Homelessness team) and Health System partners (such as KW4 and Cambridge North Dumfries Ontario Health Teams) have utilized the Neighbourhood Nursing Team to bridge gaps and connect with community partners.

7. Financial Implications:

The Neighbourhood Nursing Program initiative included a total 2023 budget of \$346,148 and was funded from one-time equity funds. Expenditures included the cost of 1 temporary full-time Community Development Specialist as well as two 0.6 temporary full-time equivalent Registered Practical Nurse positions.

Starting in 2024, \$250,000 of base equity funds will be provided to support the Neighbourhood Nursing Program initiative. Expenditures incurred above \$250,000 will be fully absorbed within the Public Health cost-shared budget with zero levy impact.

8. Conclusion / Next Steps:

Building on the success of the Neighbourhood Nursing Program initiative, Public Health is expanding outreach clinical services to provide access to equity-deserving communities as part of a divisional restructure. The divisional restructure will also help provide additional flexibility and surge capacity to respond to community needs and emerging infectious diseases.

9. Attachments:

Nil

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