

March RWC Update

RWC Chairs:

I am emailing you to provide an update on some of the work completed in March. It was a busy month for many, with organizational requirements alongside extracurriculars outside the office, including March Break for students, the Arctic Winter Games for NWT athletes, and spring carnivals across the territory. I hope you all had a pleasant month.

Across the NTHSSA, progress was made on several of my workplan priorities, including the Dehcho small communities project, the medical travel rapid improvement project and improving access to primary care.

For the Dehcho project, I am pleased to share that two Nurse Practitioners (NPs) have finalized and implemented a formal job-share arrangement. Under this model, all cabin communities in the Dehcho region received an initial in-person NP visit in January and February. The next round of in-person clinics is scheduled for late March through April.

The NP currently on rotation has fully established virtual service capabilities, including the use of cameras, headsets, and Zoom for Health Care in all Dehcho cabin communities. Each cabin community is equipped with otoscopes for ear examinations, stethoscopes, and a Point-of-Care Test Lab to support virtual clinical assessments. To enhance confidence and proficiency in the virtual care workflow, the Clinical Education Team and the NPs will conduct mock sessions with Community Health Workers (CHWs) during onsite visits in March and April.

Under the medical travel rapid improvement project, work has been ongoing, and I am pleased to share that progress has been made to implement the nursing case manager pilot project. This two-year pilot project is designed to improve the experience of clients/patients who need to travel for medical care and will ensure dedicated positions to review medical referrals requiring travel and proactively support care planning. The primary objective is to reduce the burden of travel on patients while making each required trip as efficient and coordinated as possible. This includes:

- 1. Better coordination of care**

Where feasible, Nursing Case Managers will coordinate related or unrelated medical appointments (for example, by bundling appointments). This helps patients make the best use of each trip and reduces the number of times they need to travel away from home.

- 2. Avoiding unnecessary travel**

Nursing Case Managers will assess whether travel can be avoided by using alternative effective options, such as remote or virtual care, or by aligning appointments with upcoming visits from specialists. This approach minimizes disruption to patients' lives while still ensuring they receive appropriate care.

And finally, related to primary care, work is ongoing in collaboration with NTHSSA and DHSS to advance primary health care reform and improve access to primary care. Later this month there is a full-day working session with the Yellowknife Region Chief Operating Officer and Physician Leadership, in partnership with project staff from the DHSS Community Culture and Innovation Team, demonstrating collaborative efforts to move this work along. As we move through the next few months, you can expect to continue to receive updates on improvements to Primary Care access in Yellowknife during future monthly updates from me.

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March also marked the end of the fiscal year, and April marked the start of a new one. I am excited to see what lay ahead for the NTHSSA during this fiscal year and suspect much progress and some new and exciting projects ahead.

As always, if you have any questions about this work or future work, please do not hesitate to reach out.

Thank you,

Dan