

Promising Practices for Strengthening Primary Care

Mobile Care for Screening and Treatment



The challenge

Rural, remote and northern communities in Labrador experience **inequitable access to sexually transmitted and blood borne infections (STBBI) education, screening, treatment and follow-up.**

The promising practice

A mobile team including physicians, nurse practitioners, laboratory staff, and Opioid Dependence Treatment team members deliver culturally safe, wrap-around services including:

- Harm reduction education and supplies.
- Point-of-care (POC) testing, and onsite specimen collection.
- Treatment and follow-up as necessary.

Example impacts

Since March 2024, the mobile team has provided care for the patients in Labrador West and Happy Valley-Goose Bay area. Of the patients served:

- 30 percent received a diagnosis and were referred to treatment and follow up.
- All patients received education.
- 60 percent of patients indicated that they would not have received STBBI services had they not been offered via the mobile health team.
- Patients had improved experience of care. 100 percent of patients felt their concerns were heard and that their questions were answered.
- 89 percent of patients utilized harm reduction education materials and supplies.

"I love that I can get my bloodwork done right away instead of having to wait at the hospital."

- NLHS patient

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Keys to success

- **Funding** of \$40,000 for travel, personnel, and supplies.
- **Champions** to establish inclusive and non-stigmatizing care. This included community patient partners who guided how to set up and locate the mobile clinic. This was especially helpful when working with individuals and communities who face barriers to care.
- **Flexibility** to adjust how low-barrier access to STBBI testing, treatment, and follow-up is used to meet community needs.
- **Meaningful partnerships** with communities to monitor and share what's working well, what could be better, and ways to improve over time to better enable safe and high-quality healthcare.

Lessons learned

- Validating POC tests will take time as rural and remote areas may not have the population to test the validity.
- There are stigma challenges in small communities. Most people know each other and it can create a barrier for someone to get tested.
- Mobile teams can be an effective strategy to improve access to STBBI testing in rural and remote areas.

How can I learn more?

Contact the organization.

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"Everyone has been so respectful; it's been so great!"
- NLHS patient

Why was this summary created?

Newfoundland and Labrador Health Services (NLHS) participated in **Healthcare Excellence Canada's (HEC) Strengthening Primary Care (SPC) program**. SPC brought together 20 primary care organizations from across Canada to advance practices to improve access to safe, including culturally safe, team-based primary care.

This promising practice summary was co-produced with NLHS to help others learn about their work and generate discussion about how similar approaches could be adapted and applied elsewhere.

