

**Investigation of the impact of patient insurance status on the delivery of health care to uninsured patients visiting the St. Joseph's Health Centre emergency department**

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# Introduction

- **St. Joseph's Health Centre:** acute care hospital in the Toronto Central LHIN that provides accessible high-quality hospital services

- **Health Equity:** promotion of comprehensive and culturally sensitive health care for all

- **Health Insurance Status:** uninsured patients and the role of status on the quality of care received

## Background: St. Joseph's Health Centre (SJHC)

- Acute care community hospital
- Provides services to the diverse communities of southwest Toronto
- Committed to the vulnerable and disadvantaged
- Enables the delivery of quality service and health care and promotes respect, dignity and compassion



## Background: Determinants of Health Equity

- Toronto Central LHIN: “Create a healthcare system in Toronto where all receive high-quality healthcare and support, and systemic and avoidable health inequalities are steadily reduced”

- People experience different physical and social environments, lifestyle and behavioural risk factors, and access to care, with consequences for health equity

- Lack of health insurance or the funds to support a private health insurance an important determinant of access to care

# Background: Health Insurance Status

- Who are the uninsured?
  - Uninsured residents of Ontario:
    - no OHIP (eg lost card), or 3-month waiting period in OHIP application
    - people living outside Ontario for more than 6 months a year
    - refugee claimants awaiting permanent status
  - Insured residents of other provinces
  - Non-residents of Canada

## Background: Who Lacks Health Insurance?

- 519 722 new immigrants to Canada in 2008
  - 247 202 permanent residents
  - 193 061 temporary foreign workers
  - 79 459 foreign students
- 519 722 new Canadians may be at risk of receiving inadequate care due to the barrier to health that health insurance status creates in the current health care system
  - ~200,000 in Ontario alone
- Unknown number of Ontario residents uninsured (eg. due to lack of health card)

# Background:

## Health Insurance Status & Health Care Access

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### Climbing the walls

*Structural barriers to accessing primary care for refugee newcomers in Canada*

Baukje Miedema PhD Ryan Hamilton MSc Julie Easley MA

For newcomers to Canada, health care delivery varies from province to province. In New Brunswick, Ontario, Quebec, and British Columbia, newcomers are required to wait 3 months before they can enrol in a provincial health insurance program. Many newcomers purchase private health insurance to ensure health care coverage; however, those in one group of newcomers—refugees—are often unable to purchase

under the provincial health insurance programs, for a set period of time.

#### Barriers

A refugee settlement agency in New Brunswick approached the Fredericton-based Dalhousie University Family Medicine Teaching Unit to explore the difficulties they experience with refugee clients and the IFH

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Can J Nurs Res. 2009 Sep;41(3):186-206.

### **Equitable health-care access: the experiences of refugee and refugee claimant mothers with an ill preschooler.**

Wahoush EO.

School of Nursing, Offord Centre for Child Studies, McMaster University, Hamilton, Ontario, Canada.

Little is known about access to health services for preschool children in refugee or refugee claimant families living in Canada. This mixed-methods study collected information from a purposive sample of 55 mothers living in a second-tier city in the province of Ontario. The findings raise questions about equitable access to primary health care for these families. Factors other than need determined whether a mother was able to access care for her child. Although all the children had been seen by a doctor during the preceding year and 78% had a regular care provider, mothers faced difficulties accessing care when needed. These difficulties were related to low income, problems with health insurance, lack of knowledge about available services, fear of being judged as a parent, and perceived discrimination. The findings have implications for care providers, including those working in settlement services, child protection, and public health.

- Discrepancy in the delivery of care to children of refugee and refugee claimant mothers in Ontario due to problems with health insurance, fear of being judged, and perceived discrimination



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- Results of previous observational study at SJHC:
  - Uninsured patients reluctant because of fear and lack of funds
  - Patient's health deteriorates along with his/her capacity to function
  - Patient requires more treatment and longer length of stay upon hospital admission
  - No access to home care, rehab or nursing homes and will not be able to afford the required medications and dressings once discharged

# Background: Study Context

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- Uninsured patients would benefit from identification and removal of the barriers that delay diagnosis and impede full recovery
- TCLHIN Health Equity context
- St. Joseph's commitment
- What are the barriers at St. Joseph's and what might be done to ameliorate them?

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## Objective:

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- To investigate how patient insurance status impacts the delivery of health care to uninsured residents of Ontario and non-residents of Canada visiting the emergency department at St. Joseph's Health Centre

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## Methodology: Qualitative Study

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- Key – informant study
- Participants
- Semi-structured interview
- Analysis

# Methodology: Qualitative Study

- Key – informant study
  - All participants must be current employees of St. Joseph’s Health Centre
  - Must play a critical role in the management of uninsured patients through and out of the emergency department
- Participants
- Semi-structured interview
- Analysis

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## Methodology: Qualitative Study

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- Key – informant study
- Participants
  - Physicians
  - Nurses
  - Accounts administrators
  - Diagnostic imaging department
  - Registration clerks
- Semi-structured interview
- Analysis

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## Methodology: Qualitative Study

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- Key – informant study
- Participants
- Semi-structured interview
  - Open-ended question format permits the interviewee to incorporate experience and personal insight to their responses
  - Experiences of these health care professionals will act as proxies to the experiences of uninsured patients in the ED at SJHC

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## Methodology: Qualitative Study

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- Key – informant study
- Participants
- Semi-structured interview
- Analysis
  - Descriptive thematic and constant comparative analyses



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## Limitations:

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- Collection
  - Recall bias
  - Emotional challenges
- Analysis
  - Low sample number

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## Significance:

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- Clinical and administrative staff will be
  - Aware of the barriers at multiple points in the delivery of health care to uninsured patients
  - Better able to coordinate their treatment of uninsured patients
- Patients will be
  - Better cared for

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## Current Status:

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- REB approved

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- Recruiting study participants

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*Thank you*