Low Barrier Access to Healthcare

Presented by Lucksika Sivakumar RN
Health services to downtown Toronto’s homeless and under-housed population
Major barriers to staying healthy when you are homeless

Poverty

Discrimination

High barrier services
Barriers to Health Care

• Lack of accessibility
  – Location of clinics & hours of service

• Limited populations reached

• Difficulty accessing primary health care
Evaluating the nursing role

- Listening and responding to changing needs of our clients
- Implementing suggestions made by clients
- Evaluating where and when nursing services were provided
What changes were made?

- Cancelled certain clinics to start new ones
- Targeted under-served sub-populations
  - After hours clinic for women in progress
  - Outreach after hours for isolated clients
- Implemented NP role to increase access to primary health care
Nurse Practitioner Role

- Targets those that have difficulty accessing mainstream services
- Treating acute issues and infections
- Supplements the care of complex clients by liaising with existing providers
Advocacy

• Participating in both individual and systemic advocacy

• Individual advocacy
  – Accompaniments, letters of support

• Systemic Advocacy
  – Healthy public policies and adequate resources
Building Partnerships

• Collaboration with other agencies
  – Increases accessibility of nursing services

• Collaboration with other health care and social service providers
  – Comprehensive health care
Barriers and strategies in implementing new roles

- **Barriers**
  - Lack of infrastructure
  - Inadequate resources

- **Strategies**
  - Seeking assistance from organizations with similar roles already put in place
  - Delegating tasks among nursing team to accommodate needs of new role
We’d love to hear from you!

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