2. Coordination of Care

Vision

All Yukoners can access the medical services they need, regardless of where those services are provided. These services coordinate and share information critical to care as Yukoners transition between services and levels of care.

Why coordination of care is important

For Yukoners, coordination of care often combines two closely related issues: the coordination of social and medical care (collaborative care); and the coordination of appointments and travel to access care outside of home communities (medical travel).

Yukon’s many health and social programs service a remote and relatively small population. Given this context, Yukoners have a lot to be proud of. By many measures, Yukoners have access to the same medical services as any resident of a major metropolitan area. However, to truly realize our vision, we will need to focus on treating individuals according to their level of need, system sustainability, and support during transitions in care.

How our system works now

Using technology for remote access

Yukon continues to make significant investments in telemedicine and other systems and technologies that allow services to be provided from a distance. For example, Telehealth is a dedicated videoconferencing system that is accessed through community health centres, hospitals, and other locations like the Mental Wellness and Substance Use buildings. It is currently used to connect clients to some services inside and outside of Yukon. Other government departments use similar systems.

Yukon hospitals

The Yukon Hospital Corporation operates three acute care hospitals in Whitehorse, Dawson City and Watson Lake. Whitehorse General Hospital is Yukon’s primary acute care centre, providing a full range of care, including 24/7 emergency care, inpatient and ambulatory care, surgical services, cancer care, visiting specialist clinics, First Nations health programs, therapy and lab services, and advanced diagnostic imaging. Community hospitals in Dawson City and Watson Lake allow many Yukoners to receive care closer to home through access to 24/7 emergency care, inpatient and ambulatory care as well as many lab and diagnostic imaging services.
Community Nursing

Community Nursing provides community health, preventative healthcare, health promotion, and emergency treatment services 24/7 in 11 rural communities. Nurses working in the Primary Health Care Nurse role function in an expanded scope of practice supported by employer policy, guidelines and advanced training programs. The program mandate is to promote and protect health of the individual, family and community to improve mental and physical health and wellness.

In the communities the Health Centres are responsible for approving and coordinating both urgent and non urgent medical travel for local residents. Physicians travel to communities on a regular basis and work with the Health Centres to offer a clinic.

Medical travel and air ambulance

Due to Yukon’s small population and large geographical size it is not possible to provide all services in every Yukoner’s home community. The medical travel program assists Yukoners when they are required to travel outside of their home community to receive medically necessary services. Airfare is 100 per cent paid for and mileage is reimbursed when clients travel by road. Clients are provided a subsidy of $75 per day to assist with other travel costs. The medical travel program is not income tested – all eligible Yukoners receive the same coverage.

The air ambulance (medevac) program is key to the delivery of emergency medical services in the territory. It ensures that there is an aircraft and crew available at any time to transfer patients to the nearest hospital that can provide the treatment they need. Yukon Emergency Medical Services employs specially-trained paramedics and nurses to provide patient care in flight.

Income support

Income Support Services provides financial assistance to people who do not have enough money to live on. The program is to be used only as a last resort after all other possible sources of income have been explored. The program provides enrolled individuals with funds so that they can attend medical travel appointments.

Continuing care

There are five long term care homes in Yukon with a total of 322 private rooms. Four of the homes are located in Whitehorse, and one in Dawson City. The care provided is broad in scope – from personal care to extended care. The department of Health and Social Services provides a range of programs to support clients in long term care as well as those who live independently in their homes.

See the Aging in Place chapter for more information on continuing care.
First Nations Health Programs

Operated by the Yukon Hospital Corporation, First Nations Health Programs recognizes the impact of residential school and colonialism on health and well-being and strives to improve the accessibility and acceptability of the hospital services and environment. Self-identified First Nations, Inuit and Metis individuals are eligible for a wide range of services that are designed to help them navigate the system and honour traditional knowledge.

Possible ways forward for Yukon

Here are some of the ideas that were suggested to the panel:

Explore the creation of a client coordination unit

Improvements in planning for when people transition between health services can dramatically reduce length of stay and improve efficiency. This can reduce re-admission rates and produce cost savings. Within Yukon, steps can be taken to integrate planning for transitions in service into care plans as soon as someone enters the system. A dedicated “medical travel customer services” resource unit would support people with medical travel and transitions in service within Yukon and outside. This unit would review and plan health services from rural communities, to Whitehorse to out of territory and returning home. This could improve outcomes, access, client experience and efficiency.

Improvements to the medical travel program

There are options for providing these services more efficiently and equitably. Such options could improve patient care and experience. For example:

- Income-testing the medical travel program could provide more equitable financial support for all Yukoners when they are away from their communities.
- Explore more flexible ways to provide advanced payments to people travelling for medical care.
- Provide a travel service within Yukon to ensure people can get to and from appointments.
- Review the medevac service to ensure appropriate usage.

Expanded use of technology

There are a number of options to explore that could improve access to services and the sharing of client information. For example:

- Telehealth – Yukon has already invested in placing telemedicine capabilities in service sites across the territory. This program needs to modernize the telehealth program to best meet the needs of individual clients, such as connecting more with medical specialists both within and outside the territory.
Yukon has technology that will allow people to take measurements and access medical services directly from their homes. Multiple programs will be able to deliver services using this technology, but work is required to realize the platform's potential.

Offer incentives for specialists to travel to communities so clients can be seen without having to travel.

**A residence for medical travel**

A number of other Canadian jurisdictions with medical travel programs operate residences that their beneficiaries can use when on medical travel. Yukon could purchase or rent housing in one or more of its gateway cities (Vancouver, Kelowna, Calgary, Edmonton), to create such a residence.

**Questions for discussion**

1. If a health practitioner was not available in your home community, would you be interested in meeting with your physician or specialist via technology either in the local health centre or via the internet from your home?

2. Some Yukoners can’t afford to travel for medical appointments while others are able to comfortably budget for it. How do we allow those with the most need to access medical care and travel without increasing the program’s budget? Should the government stop paying for medical travel for routine appointments and screenings not available in the community for those making a comfortable living?

3. If you have had a recent medical travel experience, what worked well? What would have made it better?

4. Could you have had care closer to home if you or your doctor or nurse had phoned, emailed or had a video consultation with a specialist who had access to your secure health records?

5. A collaborative care unit is a clinic where you can access doctors, nurses, dieticians, physiotherapists, mental health specialists, as well as other health care professionals all in the same building. This would result in one team in one location that would have a full picture of your health history all in the same space. Would you support a change to our existing health care structure to allow for a collaborative care approach?

6. What’s the single most important thing that could be different about coordination of care in Yukon?