

“It’s improving screening rates, it’s catching things early, and it’s empowering people”:

A qualitative evaluation of the BETTER WISE study

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Background

- Chronic diseases such as cancer, heart disease, and diabetes account for almost 70% of all deaths worldwide.
- Integrated and comprehensive prevention and screening strategies are needed in primary care.
- BETTER WISE (Building on Existing Tools to Improve Cancer and Chronic Disease Prevention and Screening in Primary Care for Wellness of Cancer Survivors and Patients) is a comprehensive and structured approach that proactively addresses chronic disease prevention, screening and cancer survivorship, including screening for poverty and addressing lifestyle risks.
- Prevention visits are provided by a healthcare professional, the Prevention Practitioner (PP).



- PPs are trained in the BETTER WISE tools & approach and Brief Action Planning. In a 1-hour visit with the patient, the PP reviews the patient’s health status, including family history and health behaviors. The PP then informs patients about eligible screening, and guides patients towards healthy lifestyle modifications.

Objective

- This qualitative evaluation is a sub-component of the BETTER WISE study and aims to describe the impact, barriers and facilitators of the BETTER WISE study.

Impact on Patients

Patients reported improved lifestyle changes, feeling supported, and catching health concerns

Impact on Providers

PPs enjoyed their role
Physicians appreciated PPs’ support

“Holistic approach; continuity of planning. Insightful practitioner able to supply instant resource source to meet needs” [Patient, female, NL]

“[PP] took the time to listen to what was going on in my life and I didn’t feel rushed. [PP] recognized that mental health is just as important as physical health” [Patient, female, AB]

“I felt that the interactions with our PP worked very well and very smoothly.” [Physician, ON]

“The [PP] picked up on the poverty screen a couple [of patients] that I had no idea (...) because there’s a space and time for when you’re asking the question and I would have never known to ask the question because they don’t tell you and you wouldn’t guess.” [Physician, AB]

Barriers

COVID-19 pandemic changed in-person visits to phone visits, put screening tests on hold, and added hardship on patients and PCPs as focus shifted to emergencies, acute care, and COVID-19 screening and vaccinations

“It seems we’re seeing people presenting with more advanced disease because of delays over the last 18 months. Delays in healthcare, but also just delays in people just didn’t even try and access because their perception was it wasn’t a safe thing to do” [Physician, NL]

“I found it difficult with COVID to do visits over the phone (totally unpreventable, I know).” [Patient, female, AB]

Facilitators

Buy-in from PPs, physicians, and patients, good relationships and positive team culture within primary care teams

“It was just really important to have supportive physicians and supportive managers to go through this process and a supportive team as well” [PP, K1033, AB]

“It’s a great project. It really helps a lot of patients put the whole picture together for their health and really identify their risk factors and achieve better health goals.” [PP, ON]

Methods

Setting

- Thirteen primary care settings (urban, rural, and remote) in Canada (6 in Alberta (AB), 4 in Ontario (ON), and 3 in Newfoundland and Labrador (NL))

Participants

- Primary care providers (N = 132; including all 13 PPs) participated in 17 focus groups and 48 key informant interviews. They were asked about implementation, uptake, impact, and sustainability of BETTER WISE.
- We received 585 feedback forms from patients (40-65 years of age) who attended a 1-hour visit with their PP. They were asked about demographic details, expectations from the visit, what they liked and what they would like to be different about the visit, and any other comments.

Analysis

- Qualitative data was analyzed employing thematic analysis using the constant comparative method.

Results

Four themes (Figure 1) were identified:

1) Impact on Patients

Patients appreciated the BETTER WISE visit and found it empowering. They caught health concerns that were overlooked and reported improved lifestyle changes.

2) Impact on primary care providers (PCPs)

PCPs reported improved teamwork, better knowledge on and healthcare for patients.

3) Barriers

The main barrier was the onset of the COVID-19 pandemic, which changed in-person visits to phone visits, put screening tests on hold, and added hardship on patients and PCPs as focus shifted to emergencies, acute care, and COVID-19 screening and vaccinations.

4) Facilitators

Buy-in from PPs, physicians, and patients, good relationship and positive team culture within primary care teams.

Conclusion

Despite the interruption of the COVID-19 pandemic, the participating primary care clinics completed the BETTER WISE study and the BETTER WISE approach had a positive impact on patients and PCPs.

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Figure 1. Themes and quotes for identified themes from patients and primary care providers on a BETTER WISE prevention visit