

## NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

**Submission Id:** 6207

### **Title**

*Innovations in providing and accessing preventative primary care for young children during COVID-19*

### **Priority 1 (Research Category)**

Healthcare Services, Delivery, and Financing

### **Presenters**

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### **Abstract**

**Context:** The COVID-19 pandemic created many barriers for clinicians to deliver primary care and for parents/caregivers to access primary care for their young children. Research has shown that in some locations, primary care services were able to resume and recover to pre-pandemic visit rates for patients < 6 years old shortly after the initial lockdown in March/April 2020. Little is known, however, about what programs or services were implemented or adapted during the pandemic to facilitate the continuation of preventative primary care services for young children, including well-baby and well-child visits.

**Objective:** To discover innovative programs or services that were adapted or created to help deliver and access primary care for children under the age of six years. **Study Design and Analysis:** A qualitative study design was employed using survey and interview methods. Data was analyzed using qualitative content analysis. Questions were structured to capture the delivery and access dimensions outlined in the Levesque conceptual framework for healthcare access. **Setting:** Ontario and Quebec, Canada.

**Populations Studied:** Primary care providers who delivered care to young children and parents/caregivers of children who were under the age of six during the pandemic. **Instrument:** An on-line survey was distributed, and subsequent semi-structured telephone or video interviews were conducted between May and December 2023. **Outcome Measures:** Innovative primary care programs and services for children < 6 years old during the COVID-19 pandemic. **Results:** 102 individuals completed the on-line survey and of those, 19 participated in the interviews (13 parents and six primary care providers). Five over-arching themes arose from the data: 1) Clear decisional guidance, 2) Virtual care integration, 3) Clinic-level adaptations, 4) Proactive communication, and 5) Flexible policies.

**Conclusions:** Participants' experiences and ideas demonstrate that creativity and an openness to adapting can help continue established care, and even improve upon how care was previously provided, even when facing a healthcare crisis such as a global pandemic. The themes presented in this study stem

from an overarching sentiment and shared desire to relieve decisional stress, and reduce the anxiety, conflict, frustration, and burden experienced by both those delivering and accessing primary care.

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