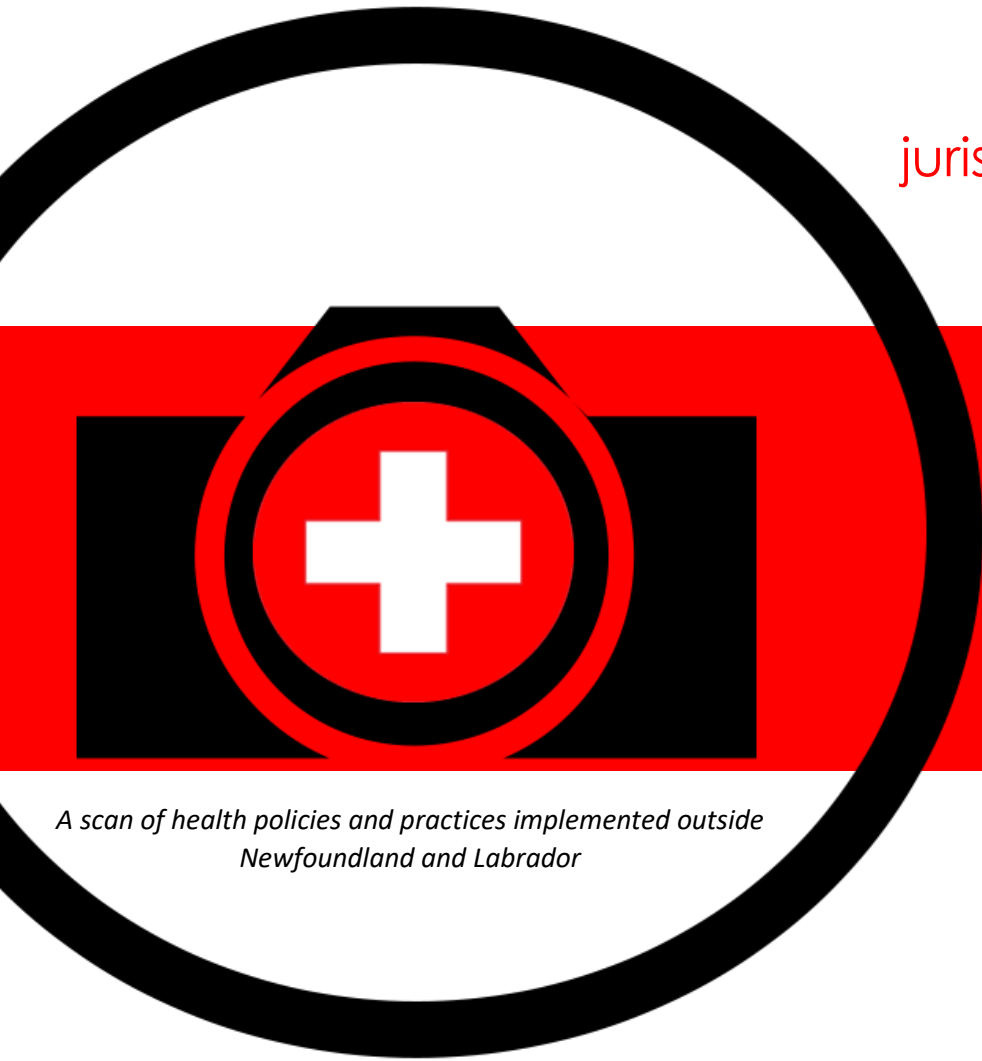


jurisdictional snapshot



Transportation Access to Rural Primary Care: A JURISDICTIONAL SCAN

February 2023 | Colin Walsh

*A scan of health policies and practices implemented outside
Newfoundland and Labrador*

Newfoundland & Labrador Centre for
**APPLIED
HEALTH
RESEARCH**
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To support our Health System Partners, NLCAHR's Contextualized Health Research Synthesis Program (CHRSP) has produced this Snapshot Report of healthcare practices, programs, and policies inside and outside of Canada. NLCAHR designed Snapshot Reports to inform decision makers about the healthcare landscape across jurisdictions, particularly with respect to practice variation and policy initiatives. Snapshot Reports might also help guide topic selection for other CHRSP products, such as our Evidence in Context and Rapid Evidence Reports.

1. About Snapshot Reports

Snapshot Reports provide health system decision makers with a brief scan of health practices, models of care, programs, or policies, and a summary of established or emerging interventions from jurisdictions outside of Newfoundland and Labrador on the issue in question. NLCAHR created these reports to meet health system demand for timely information about practices/programs/policies that might potentially be adapted for use here in Newfoundland and Labrador. Each *Snapshot Report* responds to a specific request from CHRSP's health system stakeholders for information on a topic identified as being of priority interest. The results of a given *Snapshot Report* may provide these stakeholders with all the information they require; the reports may also be a catalyst for more in-depth study on the issue, possibly in the form of a CHRSP *Evidence in Context Report* or *Rapid Evidence Report*.

Snapshot Reports are not a comprehensive or exhaustive evaluation of the practice or policy under study; rather, they offer a brief overview that includes:

- an executive summary;
- an overview of the research objective with a clear description of the policy or practice under consideration;
- a statement of the focus and scope of the report;
- a summary of key descriptive findings;
- tables listing the practices/policies/models identified in other jurisdictions, with web links to each, where available; and
- appendices containing more detailed information.

Given the limitations of this approach, decision makers should not construe this *Snapshot Report* as a recommendation for or against the use of any particular healthcare intervention or policy.

2. Executive Summary

Topic:

Newfoundland and Labrador has a highly dispersed population living across a vast geography. Transportation challenges to access primary care are exacerbated by geography, by high rates of chronic disease and by an aging population. Given that equitable access to healthcare is a priority concern, health system partners asked researchers with the Contextualized Health Research Synthesis Program (CHRSP) at the NL Centre for Applied Health Research to tell them how other jurisdictions have implemented programs (apart from virtual care or telehealth) to improve access to primary care for people facing transportation barriers. This report highlights 22 such programs, including Mobile Clinics (bringing the care provider to the patient) and Transportation Programs (bringing the patient to the care provider). The jurisdictions included in this report were chosen based on their comparability to the Newfoundland and Labrador context and include other Canadian provinces, the United Kingdom, Australia, the United States, and Ireland.

Key findings:

Common features of **Mobile Clinics** include:

- Providing a variety of primary care services to rural areas, including check-ups or physicals, chronic disease care, health promotion, and education;
- Generally having at least one of the following professionals providing care: a Registered Nurse, a General Practitioner, or a Nurse Practitioner;
- Often targeting Indigenous populations;
- Having a wide range of financial support.

Common features of **Transportation Programs** include:

- Providing access to transportation services to underserved areas and/or to those who cannot access transportation (e.g., those with physical or functional disabilities, aging individuals, and low-income individuals);
- Often providing accessibility services such as wheelchair access and free access for support persons and/or service animals;
- Offering flexibility in pick-up/drop-off, either being a door-to-door service or allowing routing adjustments to accommodate passengers;
- Often offering transportation and/or reimbursement for any type of travel—although some programs require a specific rationale for travel with medical appointments being the most commonly accepted reason;
- Tending to be government funded at the municipal, provincial or federal level and not being expected to recover operating costs.

3. Background & Research Objective

Background

When it comes to accessing primary care, transportation can be a challenge in rural and remote areas, whether for patients who must travel to primary care clinics and facilities or for primary care providers who must travel to rural and remote communities to provide healthcare. Transportation barriers in rural and remote places include limited access to, or a complete lack of, public transportation. Moreover, for individuals with disabilities and for those who are aging and/or have lower incomes, access to personal vehicles may pose an additional challenge. Here in Newfoundland and Labrador, accessing transportation to care can be especially difficult – the province has a widely dispersed population living in rural and remote communities, many of whom are aging and/or burdened with high rates of chronic disease.

Research Objective

Given that equitable access to healthcare is a priority concern in this province, our partners in the Newfoundland and Labrador healthcare system asked researchers with the Contextualized Health Research Synthesis Program (CHRSP) to identify programs that have been implemented in other jurisdictions to improve access to primary care (apart from virtual care or telehealth) for people facing transportation barriers.

4. Focus & Scope of this report

The focus of this report is to identify programs used in Canadian and other select international jurisdictions that improve access to primary care services for rural and remote populations facing transportation barriers. In conducting this jurisdictional scan, we sought examples that:

- Help transport patients to primary care services; or
- Help bring primary care services to patients; and
- Focus on rural and/or remote populations.

This report excludes virtual care solutions, such as telehealth.

Search Parameters

Table 1 below outlines the search parameters for this report that were defined in consultation with our CHRSP partners in Eastern Health.

Table 1: Overview of Search Parameters, Inclusion Criteria, and Exclusion Criteria

Parameter	Inclusion criteria	Exclusion criteria
Population Served	<ul style="list-style-type: none"> Rural and/or remote populations Comparable population density to NL areas 	<ul style="list-style-type: none"> Work/office populations Urban populations Populations and population densities larger than what might be found in NL
Program Components	<ul style="list-style-type: none"> Improves access to primary care services Transports patients to care or brings care to patients 	<ul style="list-style-type: none"> Telehealth Programs only focusing on other, non-primary care healthcare services (e.g., podiatry, dental care, cancer care, vaccinations)
Program Status	<ul style="list-style-type: none"> Must be currently active 	<ul style="list-style-type: none"> Inactive programs
Jurisdictions	<ul style="list-style-type: none"> Canada, U.K., Ireland, Australia, and select programs in the U.S.A. 	<ul style="list-style-type: none"> Other jurisdictions

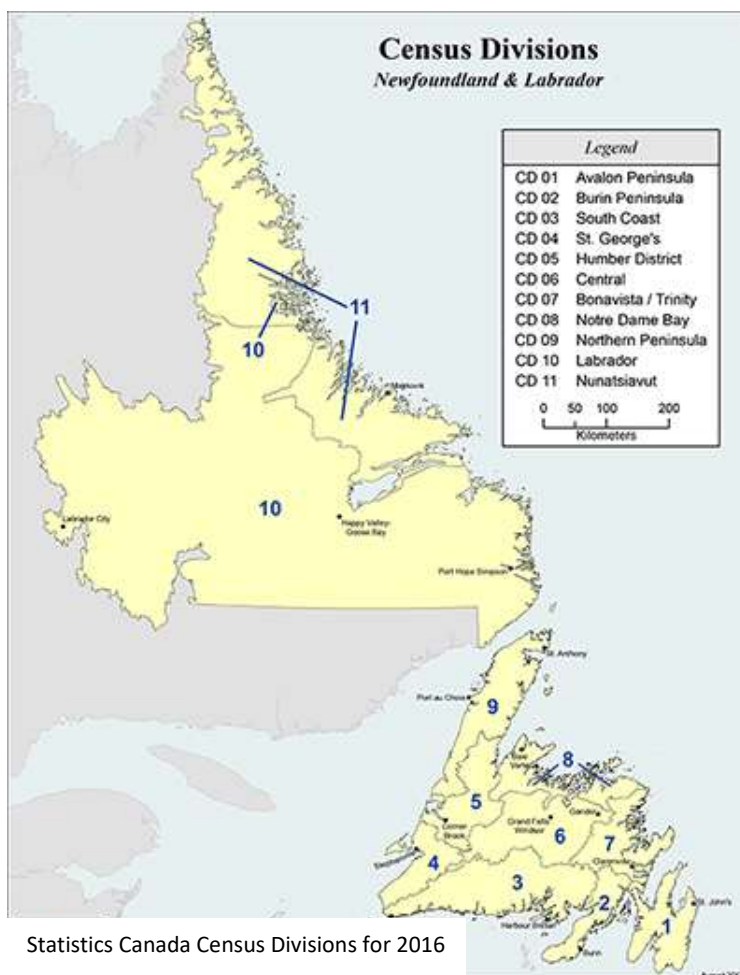
Defining Mobile Clinics

We collected information from other jurisdictions that provide primary care Mobile Clinics in rural areas, including Mobile Clinics that might provide other services in addition to primary care. Mobile Clinics that exclusively provide services outside the purview of primary care (e.g., dental clinics or public health vaccination clinics) were excluded from this report. City-based clinics that target urban populations were also excluded as this report is intended to focus on rural populations. These parameters resulted in the exclusion of several Mobile Clinics from this report, most notably a national TELUS-funded program of Mobile Clinics across Canada, all of which are located in cities and are intended to target vulnerable populations.¹

Defining Population and Population Density

In this report, population and population density were used to compare the selected jurisdictions to Newfoundland and Labrador. These measures helped us to exclude any Transportation Programs intended for populations that are either too large or too dense to be good comparators to the NL population. There is limited evidence for the use of population density as a determining factor for the suitability of a municipality to receive public transit networks or programs (1). Some studies suggest that maintaining a minimum population density requirement to determine the eligibility of a community for public transit often justifies providing the lowest level of public transportation possible; others argue that considering more nuanced

¹ Telus Health for Good Program: <https://www.telus.com/en/social-impact/innovating-healthcare/health-for-good>



features of a given jurisdiction— its status as an emerging or developing city, peak passenger volumes, or average trip length –will produce stronger effects (1). However, readers should note that determining the appropriate characteristics of municipalities to qualify them for public transportation programs or looking at ways to develop municipal public transportation program infrastructure are beyond the scope of this report.

When looking at population density in this report, we focused on jurisdictions with lower population density— fewer than 40 people per km². However, we included some programs aimed at higher population density, if:

- the community population was ~ 50,000 or lower;
- the community was on an island; or
- the program was innovative/interesting.

We also compared population density in communities with transit programs against those served by Mobile Clinics and found that Mobile Clinics are more often used to serve low density areas, especially those areas with less than 10 people per square kilometer. When we consider NL population density, it is notable that our remote populations trend towards having lower density (i.e., fewer people spread across more land). To ascertain a representative population density for the province, two methods were taken. First, we used the current Regional Health Authority boundaries (Eastern Health, Central Health, Western Health, and Labrador-Grenfell Health) as a way to divide the population within a set geographical area. Next, we used Statistics Canada Census Division numbers 1 through 11 to ascertain smaller geographical areas within the health regions.² Results from using both of these methods indicate

that, with the exception of the Avalon Peninsula (Census Division 1), Newfoundland and Labrador’s population most closely resembles areas that have been targeted by Mobile Clinics in other jurisdictions.

² <https://www.stats.gov.nl.ca/maps/>

Table 2: Transportation Programs, Mobile Clinics, and Population Density: A Comparison with NL Regions

<u>Jurisdictional Scan Results</u> Population Density for programs included in this report				<u>Closest Comparators in NL</u> Provincial regions with comparable population density		
Type of program	Program/ Country	Population Served	Population Density Estimate (/km ²)	NL Regional Health Authority (RHA) or Census Division (CD)	Population of the RHA/CD	Comparable Population Density in NL
Mobile Clinic	Bega Garnbirringu Mobile Clinic, Australia	57,330	0.06	Labrador-Grenfell Health	36,072	0.1
				Labrador CD10	24,332	0.1
				Nunatsiavut CD11	2,323	<0.1
				South Coast CD3	13,920	0.7
Mobile Clinic	The GRAMS Mobile Clinic, Australia	52,000	0.11	South Coast CD3	13,920	0.7
Mobile Clinic	The Mobile Medical Clinic, Australia	45,000	0.62	Northern Peninsula CD9	14,733	1.1
Mobile Clinic	Manitoba Mobile Health Clinics I-E RHA, Canada	127,601	1.6	Central Health	92,690	2.2
				Census Division No. Central NL CD6	37,339	2.3
				Western Health	77,687	2.5
				St. George’s CD 4	19,253	2.7
Mobile Clinic	Tulku wan Wininn: Budja’s mobile clinic van, Australia	32,113	3.2	Burin Peninsula CD2	19,392	3.3
				Bonavista Trinity CD7	33,044	3.4
				Notre Dame Bay CD 8	33,940	3.7
				Humber District CD 5	40,396	3.9

Jurisdictional Scan Results Population Density for programs included in this report				Closest Comparators in NL Provincial regions with comparable population density		
Type of program	Program/ Country	Population Served	Population Density Estimate (/km ²)	NL Regional Health Authority (RHA) or Census Division (CD)	Population of the RHA/CD	Comparable Population Density in NL
Mobile Clinic	Manitoba Mobile Health Clinics PMH, Canada	167,121	3.3	Burin Peninsula CD2	19,392	3.3
				Bonavista Trinity CD7	33,044	3.4
				Notre Dame Bay CD 8	33,940	3.7
				Humber District CD 5	40,396	3.9
Mobile Clinic	TCRHCC Community Health’s Mobile Medical & Dental Unit and the USA and the Winslow Indian Health Care Centre Medical Mobile Vehicle, USA	108,147	4.1	Notre Dame Bay CD 8	33,940	3.7
				Humber District CD 5	40,396	3.9
Mobile Clinic	Manitoba Mobile Health Clinics SH-SS, Canada	204,274	7.1	Humber District CD 5	40,396	3.9
Mobile Clinic	The Health Bus, Canada	344,458	10.7	Eastern Health	313,267	16.2
Mobile Clinic	The University of Queensland’s Indigenous Health Mobile Training Unit, Australia	175,316	13.51	Eastern Health	313,267	16.2
Transportation Program	The Specialized Transportation Fund (STF), Canada	60,599	15.4	Eastern Health	313,267	16.2
Transportation Program	Rural and Community Connection, Canada	60,600	15.4	Eastern Health	313,267	16.2

Jurisdictional Scan Results Population Density for programs included in this report				Closest Comparators in NL Provincial regions with comparable population density		
Type of program	Program/ Country	Population Served	Population Density Estimate (/km ²)	NL Regional Health Authority (RHA) or Census Division (CD)	Population of the RHA/CD	Comparable Population Density in NL
Transportation Program	Easy Ride, Canada	99,432	17.8	Eastern Health	313,267	16.2
Transportation Program	Ride Norfolk, Canada	67,490	39.8	Avalon Peninsula CD1	271,878	29.9
Mobility as a Service Provider	GO-HI Initiative, Scotland	500,000	67.2	Avalon Peninsula CD1	271,878	29.9
Mobile Clinic	The Bay Clinic Mobile Health Unit, USA	44,186	307.6	Avalon Peninsula CD1	271,878	29.9
Transportation Program	LIMO Specialized Transit, Canada	20,713	1330.8	Avalon Peninsula CD1	271,878	29.9
Transportation Program	Lanark Transportation, Canada	53,475	2281.4	Avalon Peninsula CD1	271,878	29.9

**Not included in this table is OurBus Barton transit which operates in a 15-mile radius around Middle Barton, England. It was not possible to find an accurate indicator of population density for this region as it is not operated within a regional division defined by U.K. data providers.*

Search Strategy and Results:

We used the following strategies to search for relevant information for this report:

- We completed a literature search using PubMed, Google Scholar, and Cochrane databases. We combined search terms with one another (“transportation rural”, “rural healthcare”, “mobile clinic”, “primary care”, “improve access”, “mobile care unit”, “remote”, “NOT Telemedicine”).
- The exclusion criteria of “NOT telemedicine” was used whenever available. We found relevant published literature using these search terms that led to information about related programs for improving access to primary care for those with transportation barriers.
- We also searched public websites, health authority websites, and more general search engines using combinations of search terms similar to those above. We combined these terms with each jurisdiction of interest.
- We conducted a general Canada-wide search and we also searched for examples from Australia, Ireland, and the United Kingdom. We also considered other relevant programs outside these jurisdictions if they were highly relevant to the rural, remote context.³
- Additionally, whenever we would find a helpful search term, organization, or website, we would follow-up or cross-reference previous searches.

In total, this report highlights **22 examples** of programs that improve access to primary care for those facing transportation barriers:

- 9 from Canada (7 Transportation Programs; 2 Mobile Clinics)
- 7 from Australia (1 Transportation Programs; 5 Mobile Clinics; 1 air medical service)
- 2 from the U.K. (2 transportation program)
- 1 from Ireland (1 transportation program)
- 3 from the U.S.A. (3 Mobile Clinics)

We outline the key features of these examples in the following pages. Appendix A (page 42) includes more detailed information on each of the 22 examples as well as references and links.

³ *In particular, we decided to include a number of Mobile Clinics designed for Indigenous populations. We also included an island population that came to light through our searching process. All were from the United States.*

5. Summary of Key Findings

In general, the information included in this report was found within government websites, brochures, health system information websites, and community group websites. However, these online sources often provided only limited descriptions of key program details, offering only broad or vague descriptions of the services offered. Some sources only provided information on how to contact the services or their schedules. As a result, in some cases, we collected additional information from news articles, case studies, annual reports, and guidance documents. Most of the information we include here about Mobile Clinics comes from healthcare system or community healthcare group websites and brochures. Most information for Transportation Programs is available through provincial or jurisdictional websites, or websites dedicated to the programs. Perhaps the greatest limitation of this report is the limited information available on many programs and the lack of consistency in what information is provided and how.

The report summarizes both the 11 programs in this report that are designed to bring primary care to the patient (Mobile Clinics) and the 11 programs that bring patients to primary care (Transportation Programs).

Programs Available in Labrador Grenfell Health:

Before we detail the findings of this report from other jurisdictions, we wish to highlight a number of programs operated by the Labrador-Grenfell Health Authority that improve access to primary care and other health services for their rural and remote populations. While our CHRSP reports generally focus on programs outside of the province, Labrador-Grenfell Health has advised CHRSP about their substantial work in improving access to care. Please refer to Appendix B of this report for a series of tables with information on the programs available to access healthcare in the Labrador-Grenfell Health region. In the appendix, we also include programs with similar aims that have been established in some other areas of the province.

The sections below outline the key findings for Transportation Programs and for Mobile Clinics included in this report.

Transportation Programs

Transportation Programs in this report aim to provide access to transportation services to underserved areas and/or those who cannot access transportation (e.g., those with physical or functional disabilities, aging individuals, and low-income individuals). They generally offer accessibility services such as wheelchair access and free access for support persons and/or service animals. Some programs require advance notice to be able to offer these accessibility options. As well, all but one program (the Mobility as a Service program, see below) offer some form of flexibility in pick-up/drop-off, either being a door-to-door service or allowing routing adjustments in order to accommodate passengers who might be unable to reach fixed-route pick-up/drop-off locations. Many programs offer transportation or reimbursement for any type of travel, while some require specific reasons for requiring travel. Medical appointments are the most commonly accepted reason, while two programs also provide reimbursement or services for those traveling to work, school, child care, shopping (Specialized Transport Fund), adult day programs, counselling services, and social services (Lanark Transportation).

Overall, we found four types of Transportation Programs, often overlapping in terms of the types of programming offered. Some provided features from two or more of: (a) Transportation Reimbursement Programs (TRPs), (b) Demand-Responsive Transit (DRT) programs, or (c) Fixed-Route Transit (FRT). Descriptions of the types of Transportation Programs we located for this report are detailed below.

Types of Transportation Programs:

Transportation Programs took three common types:

- Transportation Reimbursement Programs (TRP): programs that reimburse patients for their travel costs, often up to a certain amount. The reimbursements are usually provided after the patient has travelled. They sometimes cover accommodations as well.
- Demand-Responsive Transit (DRT): programs that only operate when scheduled or booked in advance. Some of these programs aim to bundle trips to reduce overhead costs. This transportation program is designed to limit the time a transit vehicle is driving without passengers.
- Fixed-Route Transit (FRT): programs that follow set schedules with set pick-up/drop-off locations.

Some Transportation Programs are hybridizations of Demand-Responsive and Fixed-Route Transit with a regular fixed schedule that also allows for deviations to pick-up/drop-off passengers at more accessible locations (sometimes door-to-door). One program Victorian Patient Transport Assistance Scheme in Australia (VPTAS) has a secondary arm of its Demand Responsive Transit that includes a Transportation Reimbursement Program.

One less common transportation program being used in jurisdictions in the UK is called Mobility-as-a-Service (MaaS). This innovative program aggregates all of the various transportation services in a given area and helps users book the most efficient and affordable travel according to their own needs. This approach helps alleviate the pressures of having to search different routes and services across different apps and websites; however, given the limited transportation service landscape in NL, a program like MaaS may not be appropriate for use here.

Another interesting transportation program from Australia targets the remote Australian Outback. The Royal Flying Doctor Service (RFDS) operates in Australia to bring doctors to the Outback because available flight routes are limited. The Australian Outback, in its vastness and limited accessibility, is similar to remote locations in NL that allow for only fly-in/fly-out or vessel access. However, readers should note that the RFDS is one of the largest and most comprehensive aeromedical organizations in the world, receiving considerable private and government funding.

Transportation Program Components

All Transportation Programs included in this report offer assistance to people traveling for medical appointments. Seven of the eleven Transportation Programs are operated for any type of trip. All programs are wheelchair accessible (excluding the aforementioned MaaS which connects the passenger to any kind of transportation available but is not in and of itself a transportation program). Six programs specifically state that service animals are allowed, while six programs specifically state that a support person is allowed. More programs might conceivably allow service animals or support persons, but they do not explicitly state so. Only one program (OurBus Barton) did not mention offering routing adjustments for easier pick-up and/or drop-off of passengers. Five programs offered door-to-door transportation service while four offered flex/flag stops where they adjust their pick-up/drop-off locations to better suit the passenger. See Table 3 for an overview of transportation program features.

Table 3: Types of Trips and Accessibility Features of Transportation Programs

Transportation Program	Reason for Travel	Accessibility	Door-to-Door or Flex/flag stops
GO-HI Initiative	Anything	n/a	n/a
The Specialized Transportation Fund (STF)	Medical; School; Work; Child Care; Shopping	Wheelchair Accessible; Service Animals	Door-to-Door
Rural and Community Connection	Anything	Wheelchair Accessible (with notice); Service Animals; Support Person	Flex/flag stops
Easy Ride	Anything	Wheelchair Accessible	Door-to-Door
Lanark Transportation	Medical; Adult Day Programs; Counselling Services; Social Services; Food Programs	Wheelchair Accessible; Support Person	Flex/flag stops
Ride Norfolk	Anything	Wheelchair Accessible; Service Animals; Support Person	Flex/flag stops
LIMO (Lindsay Mobility)	Anything	Wheelchair Accessible; Service Animals; Support Person	Flex/flag stops
OurBus Barton	Anything	Wheelchair Accessible; Service Animals	Neither
Wheels for Wellness Society	Medical	Wheelchair Accessible; Service Animals; Support Person	Door-to-Door
VPTAS	Medical	Wheelchair Accessible; Support Person	Door-to-Door
Local Link	Anything	Wheelchair Accessible	Door-to-Door

Mobile Clinics

For the purposes of this report, we focused on Mobile Clinics that provide primary care services to rural areas. The most common services provided by Mobile Clinics are check-ups or physicals, chronic disease care, and health promotion or education. All clinics (except one that did not list any care providers) have at least one of the following professionals providing care to patients: a Registered Nurse, a General Practitioner, or a Nurse Practitioner. All but one of the Mobile Clinics target Indigenous populations and half of the Mobile Clinics receive additional funding from Indigenous groups.

Mobile Clinic Components/Services

The Mobile Clinics included in this report have stated that their goals include providing primary care to underserved areas in culturally appropriate ways and closing social, economic, and geographic disparity gaps. All included Mobile Clinics offer primary care services as well as some form of regular check-up/physical (e.g., health assessment, general medical care). Nine out of ten Mobile Clinics offer chronic disease services, as well as health promotion or education. Other common features include offering referrals (8 out of 10), examination rooms (7 out of 10)⁴, diagnostic tests/lab services (7 out of 10), screenings (6 out of 10), and immunizations (6 out of 10). Surprisingly other services were infrequently offered. Wheelchair lifts/ramps were only included in three clinics. Half were able to prescribe medications (5 out of 10). Only a few offer sexual healthcare (3 out of 10), wound management (3 out of 10), minor surgical procedures (3 out of 10), medical training (training a new health provider; 2 out of 10), mental health (2 out of 10), prenatal care (1 out of 10), and data collection (1 out of 10).

Table 4 below summarizes services and components of included Mobile Clinics.

⁴ Although it is likely that all included Mobile Clinics have examination rooms, only 7 either expressly mentioned or pictured an examination room.

Table 4: Services and Components of Mobile Clinics

Services & Components	The Health Bus	Manitoba Mobile Health Clinics	Bega Garrbiringu Mobile Clinic	The Mobile Medical Clinic	Community Health Mobile Medical & Dental Unit	Winslow Indian Health Care Centre Medical Mobile Vehicle	The Bay Clinic Mobile Health Unit	University of Queensland Indigenous Health Mobile Training Unit	Tulku wan Wininn	The GRAMS mobile clinic	Totals
Primary Care	X	X	X	X	X	X	X	X	X	X	10
Regular Check-up	X	X	X	X	X	X	X	X	X	X	10
Chronic Disease	X	X	X	X	X		X	X	X	X	9
Health Promotion/ Education	X	X	X	X		X	X	X	X	X	9
Referrals	X	X	X	X	X	X	X		X		8
Exam Room(s)	X	X	X		X	X		X	X		7
Diagnostic Tests/ Lab Services	X	X	X	X	X	X	X				7
Screenings		X	X	X	X	X	X				6
Immunizations	X	X	X		X	X	X				6
Prescribe Medications	X	X			X	X				X	5
Women's Health			X	X	X		X				4
Wheelchair Lift/ Ramp	X	X				X					3
Wound Management	X		X				X				3
Sexual Health	X		X	X							3
Minor Surgical Procedures	X	X									2
Medical Training				X				X			2
Mental Health	X								X		2
Prenatal Care		X									1
Data Collection								X			1
Totals	14	13	12	10	10	10	10	7	7	5	

Mobile Clinic Care Providers

While most Mobile Clinics included in this report noted the care providers on staff, three websites were vague about staffing, although some information could still be gleaned from other sources (The Bay; The GRAM; Tuba). Only one mobile clinic had no information available about the

qualifications of its care providers (Winslow). All other Mobile Clinics listed at least one of: a General Practitioner (6 out of 9), a Registered Nurse (6 out of 9), or a Nurse Practitioner (3 out of 9). Two Mobile Clinics specifically mentioned having an Indigenous health practitioner and five clinics listed other healthcare workers such as dentists (TCRHCC/Bay Clinic), podiatrists (GRAM), health practitioners (Bega), or simply “other health professionals” (Tulka). For a summary of providers staffing included Mobile Clinics, see Table 5 below.

Table 5: Healthcare Providers in Mobile Clinics

Care Providers↓	The University of Queensland Indigenous Health Mobile Training Unit	The Bay Clinic Mobile Health Unit	The Mobile Medical Clinic (MMC)	Manitoba Mobile Health Clinics	Bega Garbarringu mobile clinic	Tulku wan Winninn (mobile clinic van)	The GRAMS mobile clinic	TCRHCC Community Health's Mobile Medical & Dental Unit	The Health Bus	Winslow Indian Health Care Centre Medical Mobile Vehicle	Totals
Registered Nurse	X		X	X	X	X		X			6
General Practitioner	X	X	X		X	X	X				6
Other Health Workers		X			X	X	X	X			5
Unclear		X					X	X		X	4
Nurse Practitioner		X		X					X		3
Aboriginal Health Practitioner	X		X								2
Community Health Nurse				X							1
Paramedic								X			1
Primary Health Worker	X										1
Totals	4	4	3	3	3	3	3	3	2	1	

Characteristics of Both Transportation Programs and Mobile Clinics

Funding Sources

Some programs provided more information on funding and partnerships than others. Based on the available funding and partnership information, Mobile Clinics tend to have a wider range of support. Almost all programs (Transportation Programs and Mobile Clinics) receive some form of government funding, either at the municipal, provincial/state, or the federal/national level. Non-profits were the next most frequent source of funding after the different levels of government funding, and were listed as a funding source for four Mobile Clinics and four Transportation Programs. Most of the Mobile Clinics from Australia receive some support from Indigenous organizations.

Overall, considerable efforts are being made to deliver Transportation Programs at affordable rates for passengers, especially in rural areas. All included Transportation Programs are subsidized, quite often substantially, by provincial, federal, or equivalent governments, as well as by municipalities and community groups. Generally, it has been accepted that Transportation Programs will never be able to reach self-sufficiency in cost recovery and will always require some amount of subsidization (2). Canadian programs often use “Gas Tax” funds to help fund transit-like programs (2). See Table 6 below for summary of the type of funding programs received.

Table 6: Transportation Program and Mobile Clinic Funding Sources

Programs↓ Funders →	Provincial (or equivalent)	Federal	Municipal	Non-profit	Private	Indigenous Organisation	National Organization	Trust	International Organisation	Totals
Blue= Mobile Health Clinic Green= Transportation Program Yellow= Air Transportation										
The Health Bus	X	X		X		X	X			5
Bega Garnbirringu mobile clinic	X	X	X		X	X				5
The Mobile Medical Clinic (MMC)	X	X	X		X	X				5
Tulku wan Wininn (Budja’s mobile clinic van)		X	X		X	X				4
The Bay Clinic Mobile Health Unit		X	X	X				X		4
Easy Ride	X	X	X	X						4
The University of Queensland’s Indigenous Health Mobile Training Unit	X	X			X					3
OurBus Bartons			X	X			X			3

Table 6: Transportation Program and Mobile Clinic Funding Sources | Continued from previous page...

Programs↓ Blue= Mobile Health Clinic Green= Transportation Program Yellow= Air Transportation	Funders →	Provincial (or equivalent)	Federal	Municipal	Non-profit	Private	Indigenous Organisation	National Organization	Trust	International Organisation	Totals
The GRAMS mobile clinic					X		X				2
TCRHCC Community Health’s Mobile Medical & Dental Unit			X	X							2
GO-HI Initiative			X							X	2
Lanark Transportation				X	X						2
LIMO Specialized Transit		X		X							2
The Wheels for Wellness Society					X	X					2
Manitoba Mobile Health Clinics		X									1
Winslow Indian Health Care Centre Medical Mobile Vehicle					X						1
Transport for Ireland (TFI) Local Link			X								1
Rural and Community Connection		X									1
Ride Norfolk		X									1
Victorian Patient Transport Assistance Scheme (VPTAS)		X									1
Royal Flying Doctor Service						X					1
Specialized Transportation Fund (STF)		X									1
Totals		11	10	9	8	6	5	2	1	1	

Users/Eligibility

The only eligibility restriction for accessing the Mobile Health Clinics included in this report is that patients must live within the target region. For the included Transportation Programs, in addition to being limited to patients within the target region, many had fairly loose eligibility criteria and tried to reach as many users as possible. Some restrictions included eligibility only to the following groups: persons with disabilities (physical or functional); people without access or with only limited access to transportation; older adults; and individuals with low income.

6. Summary Tables

The following tables (Tables 7 to 28) provide a summary of the 11 Transportation Programs and 11 Mobile Clinics included in this jurisdictional scan:

Transportation Program Tables

- Tables 7-13 : Transportation Programs from Canada
- Tables 14-15 : Transportation Programs from the UK
- Table 16 : Transportation Program from Ireland
- Tables 17-18 : Transportation Programs from Australia, with Table 18 being an Air Service

Mobile Clinic Tables

- Tables 19-23 : Mobile Clinics from Australia
- Tables 24-25 : Mobile Clinics from Canada
- Tables 26-28 : Mobile Clinics from USA

Appendix A provides more detailed descriptions of these programs and their components, as well as any available research or additional program links.

Transportation Programs

Canada



Table 7: Easy Ride, OneCare Home & Community Support Services, Perth and Huron, Ontario, Canada ([LINK](#)) (3)

<p>Program Type: Demand Responsive Transit Program Description: EasyRide™ is a transportation service shared by Community Support agencies. By teaming up and sharing their vehicles and drivers they can offer flexible door to door service SEE PAGE 49 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Offer door-to-door transportation to seniors and others without access to transportation or difficulty accessing transportation 	<ul style="list-style-type: none"> • Relies on a central dispatch coordination system that leverages the fleet resources of the partner agencies to provide “frequent and flexible door-to-door service” • High percentages of seniors 64+ • User data: the types of trips include approximately 1/3 health related appointments (specialist appointments, treatments, dialysis, discharges /admissions to/ from hospitals, long term care facilities & retirement homes). 1/3 provides transportation for adult day programs & 1/3 of trips are for shopping, employment & social purposes. • resources: 8 wheelchair-accessible buses; 8 full-size wheelchair-accessible buses; 5 low-floor wheelchair-accessible minivans; 3 seven-passenger minivans • Fare: Rates vary and subsidies may apply. Call 1-877-502-8277 for more details. Clients are invoiced monthly 	<p>Clients may access ONE CARE or EasyRide transportation services for any purpose (medical, shopping/errands, social) if they are:</p> <ul style="list-style-type: none"> • Must live in Huron or Perth County or be traveling to a destination in Huron or Perth County • A senior (65+) OR adult with a disability • An individual with a short or long term disability (i.e. broken bone, convalescing from surgery) • An individual who requires specialized transportation 	<p>ONE CARE; Ontario Trillium Foundation; Community Support Agencies across Huron & Perth Counties; gas tax funding</p>



Table 8: Lanark Transportation, Lanark County and Town of Smith Falls and Carleton Place, Ontario, Canada ([LINK](#)) (4)

<p>Program Type: Fixed-Route Transit with some Demand Responsive Transit Program Description: They are a grassroots, not-for-profit association that connects people with life-enhancing community supports and services. SEE PAGE 51 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> Individuals living in small towns or in the country need the same access to necessary services and appointments as those in urban centers Provide reliable transportation services and doing so with care 	<p>Transportation to attend:</p> <ul style="list-style-type: none"> Medical appointments Day programs Counseling services Social service appointments Food programs Help people return home from hospital. (non-emergency / non-stretcher transportation) Have 14 vehicles, including four accessible vehicles to accommodate wheelchairs and other mobility devices Support person can ride along Fares: \$2 per person 	<ul style="list-style-type: none"> Families, seniors, children, youth and others living in Lanark County and the Town of Smiths Falls Register by phone Eligibility criteria unclear 	<p>Lanark County Mental Health, The Table Community Food Centre, Royal Ottawa Hospital, Algonquin College Community Employment Services, Dignity House Day Program, Town of Smith Falls, Lanark County</p>



Table 9: LIMO (Lindsay Mobility) Specialized Transit, City of Kawartha Lakes, Ontario, Canada [\(LINK\)](#) (5)

<p>Program Type: Demand Responsive Transit</p> <p>Program Description: LIMO Specialized Transit is a shared door to door public transit service for people with physical or functional disabilities who are not able to use conventional public transit. It operates in the town of Lindsay. SEE PAGE 52 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To provide demand responsive travel options to people with physical or functional disabilities unable to use conventional public transit in the Town of Lindsay 	<ul style="list-style-type: none"> Shared service: Other riders may be on board during trip; route of travel may be altered so another rider(s) can be accommodated; the vehicle may stop and pick up other riders as it travels to riders’ destinations Bookings offered on first come first serve basis Four kinds of bookings: <ul style="list-style-type: none"> Subscription/pre-booked; Reservation; Same Day Trips; Charter Trips Buses designed to assist customers using wheelchair, scooter, cane, walker and most mobility aids Support person can ride along Service animal can ride along 	<ul style="list-style-type: none"> Physically/ functionally disabled, Unable to use public transit Eligibility considered on case-by-case basis (not based on a particular disability/ income level/ lack of accessible public transit) Must complete a two part application form prior to using LIMO Specialized Transit; prospective rider can fill out section A of the form, but must have health care professional fill out section B 	<p>Operated by the City of Kawartha Lakes</p>



Table 10: Ride Norfolk, Norfolk County, Ontario, Canada [\(LINK\)](#) (6)

<p>Program Type: Fixed-Route Transit Program Description: Ride Norfolk is a fixed route bus service, established in 2011. SEE PAGE 56 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To provide reliable, affordable and accessible transportation options to residents of Norfolk County 	<ul style="list-style-type: none"> Operates Monday-Friday Daily Simcoe route and daily Brantford route (servicing various other communities each day of the week) Buses have air conditioning, heating, seating for 10, and a capacity of 20 Accessibility Lift, usable platform for lift is 30" x 44" and weight limit is 800 lbs. Priority Seating reserved for people of all ages with disabilities and mobility challenges Transit Stops: when transit stop is temporarily inaccessible, people with disabilities are able to board or exit the bus at closest available safe location Storage of Assistive Devices/Mobility Aids/Strollers/Bikes: Where room is available and safe storage is possible, operator will safely secure mobility aids Service Animals allowed Support Persons: Support persons permitted for persons with disability at no charge Operates from 7:45 am to 6:30 PM, Monday to Friday, year round (no Saturday, Sunday, Statutory Holiday or Civic Holiday service) 	<ul style="list-style-type: none"> Anyone 	Funding from Ontario Government and partnered with the Southwest community Transit Association



Table 11: Rural and Community Connection, Community Services and Support, District of Muskoka, Ontario, Canada ([LINK](#)) (7)

<p>Program Type: Fixed-Route Transit Program Description: The Rural and Community Connection transportation service connects communities east and west across the District, while also providing passengers connections to other transportation services within and beyond Muskoka. Part of the Community Transportation Plan. SEE PAGE 57 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To develop accessible, affordable, sustainable transportation solutions for both urban and rural residents, including services that move residents east and west within Muskoka 	<ul style="list-style-type: none"> Book "flex stops" and request "flag stops" to help accommodate those who can't access scheduled stops District Transit Pass (free to low income earners) valid for use on Rural and Community Connection buses Service operates on two routes operated once per week on two different days - Tuesdays and Thursdays Hammond Transportation has an accessible vehicle available to use Accessible vehicle available with notice Support person can ride along Service Animal can ride along Fares range from \$5 to \$15 	<ul style="list-style-type: none"> Anyone 	Funding from Government of Ontario and is operated by Hammond Transportation Ltd.



Table 12: The Specialized Transportation Fund (STF), District of Muskoka Community Services and Support, Community Transit, Ontario, Canada [\(LINK\)](#) (8)

<p>Program Type: Transportation Reimbursement Program Program Description: The STF reimburses eligible individuals for the eligible travel expenses up to \$2,000 per year. SEE PAGE 58 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To assist people who need financial support for transportation and have no access to public transportation services 	<ul style="list-style-type: none"> Transportation that qualify for reimbursement: <ul style="list-style-type: none"> Taxis; buses; trains; agency-provided transit (e.g. Red Cross, Muskoka Seniors); and invoiced rides from neighbours or friends. Includes trips for purposes such as: <ul style="list-style-type: none"> travel to medical appointments; work, school, or child care; weekly grocery shopping Pending availability of funds, individuals can receive up to \$2,000/year 	<p>To qualify for the STF, residents must show that they:</p> <ul style="list-style-type: none"> Have a financial need Do not live in an area served by public transportation (or the existing public transportation does not meet needs); and Have explored accessing other community-based transportation agencies and are ineligible or need financial assistance with the fees; and no regular access to a vehicle 	<p>Government of Ontario through the Community Transportation Grant Program at the Provincial Ministry of Transportation</p>



Table 13: Wheels for Wellness Society, Vancouver Island, British Columbia, Canada [\(LINK\)](#) (9)

<p>Program Type: Demand Responsive Transit</p> <p>Program Description: Wheels for Wellness Society will take rider to any out of town medical appointment (for example, Victoria, Nanaimo, Campbell River) that exceeds 60 km (one way) from point of departure SEE PAGE 59 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Provide transportation to centralized medical appointments for those requiring it • To successfully build, promote, and provide a quality service for the patients of Vancouver Island requiring transportation to medical appointments • Provide safe, friendly on-time service to appointments from home • Provide “door-to-door” service 	<ul style="list-style-type: none"> • Fully insured • Volunteer drivers • Drivers are ‘Professionals’: <ul style="list-style-type: none"> ○ have criminal records checks, and ○ 10 year clean driving record • Driver may accept donations for WFWS • Home pick up, wait for rider after drop-off and return to home; door-to-door • Exceptions: those in Tahsis, Zeballos, or any other off main road community <ul style="list-style-type: none"> ○ Rider will be given designated pickup and drop-off spot by dispatcher • Support person allowed if space available • Service animal allowed with notice 	<ul style="list-style-type: none"> • WFWS take Social Services and First Nations Health Authority clients, although require the mileage allowance given by these agencies be paid to driver (with confirmation from those departments, they can invoice) • Anyone going to any out of town medical appointment 60km (one way) from departure point • Requires advanced notice (48 hours) • Needs to know about physical handicaps in advanced in order to provide adequate vehicles 	<p>Corporate donors: Waypoint Insurance; Comox Valley Toyota; Comox Valley Dodge Chrysler Jeep; and fueled by Co-op Mid Island</p>

United Kingdom



Table 14: GO-HI Initiative, Highlands and Islands Transport Partnership (HITRANS), Scotland ([LINK](#)) (10)

<p>Program Type: Mobility as a Service (MaaS) Program Description: The GO-HI initiative, produced by HITRANS with MaaS technology platform Mobbileo, provides users with the ability to utilize a range of public transport, car sharing, and cycling services across northern and northwestern Scotland through a one-stop mobile app. Covers close to 50% of the country’s landmass, much of which is rural, mountainous, and difficult to navigate. SEE PAGE 61 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding/partnerships
<ul style="list-style-type: none"> • Provide streamlined access to transportation services through smartphones • Promote accessible and sustainable mobility options in communities • Centralize finding, booking, and paying for transportation in one digital application • Reduce barriers to mobility in rural regions of the country • Offer end-to-end journey connectivity • Provide convenience, reassurance, and information that improves customer experience 	<ul style="list-style-type: none"> • Provides access to a wide range of travel modes and services, including buses, trains, ferries, taxis, bike hire, car club, car hire, flights, and hotels • App is free, simple, and quick to register • Pay with debit, credit, or PayPal • Dedicated customer support team available in app • Journey personalization based on fastest, most economic, most comfortable, or most eco-friendly travel options 	<ul style="list-style-type: none"> • Residents • Visitors 	<p>Supported by the Scottish Government’s MaaS Investment Fund and the EU North Sea Region Stronger Combined project</p>



Table 15: OurBus Bartons, Middle Barton, United Kingdom ([LINK](#)) (11)

<p>Program Type: Fixed-Route Transit (some DRT for groups)</p> <p>Program Description: OurBus Bartons is a registered company and registered charity and provides timetabled Community Transport links within a 15 mile radius of Middle Barton on a Section 22 Permit. It was established in 2016, by a group of dedicated volunteers responding to cuts that left their local community without public transport.</p> <p>SEE PAGE 63 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To respond to local need for public transport 	<ul style="list-style-type: none"> Provides services which are fully accessible Assess requirements, reconfigure vehicle & ensure the driver is ready to assist Assistance Dogs are welcome Can hire vehicles for: <ul style="list-style-type: none"> Social events (e.g., bridal party) Schools and community groups (at a reduced rate) 	<ul style="list-style-type: none"> Anyone When possible, participants call and give 48 hours' notice for wheelchair, or if in need extra support 	<p>It is a charity and part of the Community Transport Association UK (http://www.cta.uk.org/)</p>

Ireland



Table 16: Local Link, Transport for Ireland (TFI), Rural Ireland ([LINK](#)) (12)

<p>Program Type: Fixed-Route Transit & Demand Responsive Transit</p> <p>Program Description: TFI Local Link bus services connect communities throughout rural Ireland as part of the TFI Public Transport Network. They form a network of affordable bus services for everyone who wants to travel to or from local towns and villages. They have two different types of Local Link service: Regular Rural Bus Services and Door-to-Door Bus Services.</p> <p>SEE PAGE 60 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • To provide safe and accessible transport for rural communities throughout Ireland 	<ul style="list-style-type: none"> • Regular Rural Bus Services <ul style="list-style-type: none"> ○ Operate a fixed route between towns and villages ○ Run a scheduled timetable ○ Timetables are designed to easily connect with state-owned busses, coach operators, commercial bus services, and other networks • Door-to-Door Bus Services <ul style="list-style-type: none"> ○ Work along fixed routes ○ Can divert to collect or drop off at home (where possible) ○ Must pre-book, ideally at least a day before travelling ○ Timetables may change and frequency can vary daily to fortnightly • Accept Free Travel Passes on all TFI Local Link services or cash on all busses (currently expanding payment services to allow riders pay with TFI Go app) • Provide accessible buses across day and evening services • Can divert routes for pick-ups with mobility difficulties, if pre-booked by phone • 90% of TFI Local Link bus services can handle children’s buggies and wheelchairs 	<p>Anyone</p>	<p>National Transport Authority</p>

Australia

Table 17: Victorian Patient Transport Assistance Scheme (VPTAS), Central Highlands Rural Health, Rural Victoria, Australia [\(LINK\)](#) (13)



<p>Program Type: Demand Responsive Transit & Transportation Reimbursement Program</p> <p>Program Description: Central Highlands Rural Health provides volunteer transport for medical and related appointments for older people or younger people with disabilities and their carers Monday to Friday</p> <p>SEE PAGE 48 FOR DETAILS</p>			
Goals	Components	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Provide transportation for older people and people with disabilities and their care-givers in Rural Victoria for hospital, doctor’s, dental, and other allied health appointments 	<ul style="list-style-type: none"> • Volunteer transport requests can be made through reception of the four community health centres • Operates Monday to Friday • A minimum of two working days’ notice required and a donation is requested based on the distance traveled • This is a door-to-door service for hospital, doctor’s, dental and other allied health appointments and includes appointments in Melbourne • Service is dependent on volunteer and vehicle resources (not guaranteed that all requests can be accommodated) • VPTAS provides some financial assistance for travel and accommodations • Provides subsidies to eligible patients living in rural and regional Victoria who need to travel long distances to access specialist services • Support available for passenger support person 	<p>Transport assistance</p> <ul style="list-style-type: none"> • Older people • People with disabilities <p>Subsidies (Financial assistance for travel and accommodations):</p> <ul style="list-style-type: none"> • Rural Victorians traveling more than 100 km one way for specialist medical treatment <ul style="list-style-type: none"> ○ Recipients must pay first \$100 each treatment year, except for primary card holders of a Pensioner Concession Card or Health Care Card 	<p>State funding – it is provided by the Victoria State Government</p>

Transportation Program- Air Medical Service



Table 18: Royal Flying Doctor Service, Australia [\(LINK\)](#) (14)

<p>Program Type: Air Medical Service</p> <p>Program Description: The Royal Flying Doctor Service of Australia (RFDS, informally known as The Flying Doctor) is an air medical service in Australia. It is a non-profit organization that provides emergency and primary health care services for those living in rural, remote and regional areas of Australia who cannot access a hospital or general practice due to the vast distances of the outback. It is one of the largest and most comprehensive aeromedical organizations in the world.</p> <p>SEE PAGE 45 FOR DETAILS</p>				
Goals	Components	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To prevent chronic illness, disease and mental health problems 	<ul style="list-style-type: none"> Services delivered on day-to-day basis by six RFDS operating sections: Central Operations, Queensland Section, South Eastern Section, Tasmania Section, Victoria Section and Western Operations. Deliver ~65 primary health care clinics on daily basis, with ~1000 patient contacts a day. Primary health care services operate differently depending on location and needs of community. Regular medical assistance for people living and working remote Australia: <ul style="list-style-type: none"> immunizations, health check-ups, referrals, or management of chronic conditions such as diabetes, cardiovascular illness general lifestyle issues Fleet of 79 aircraft, 23 air bases, 183 healthcare service road vehicles. 	<ul style="list-style-type: none"> Regular fly-in-fly-out: <ul style="list-style-type: none"> General Practitioner, Nursing and, Allied Health Clinics 23,633 Nurse, GP and Dental clinics were conducted across Australia in 2019/20. 	<p>Patients in Rural Australia who have to deal with the great distances of the Outback to get to healthcare</p>	<p>RFDS made up of seven legal entities operating around Australia, under a federated structure, and working under a joint venture agreement.</p>

Mobile Clinics

Australia



Table 19: Bega Garnbirringu Mobile Clinic, Bega Garnbirringu Health Service ([LINK](#)) (15)

<p>Jurisdiction: Goldfield, Australia Program Description: Bega mobile clinic is a team of General Practitioners, Registered Nurses, and Health Practitioners who provide primary health care to Aboriginal and Torres Strait Islander people in the Central, Northern and Southern Goldfields. SEE PAGE 42 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To provide an accessible healthcare service and a culturally safe environment within the Goldfields working towards closing the gap and achieving healthy outcomes 	<p>Services:</p> <ul style="list-style-type: none"> Primary health care Wound management Chronic health care Sexual health screening Pathology service General health checks 	<ul style="list-style-type: none"> General Practitioners Registered Nurses Health Practitioners 	Aboriginal and Torres Strait Islander people in the Central, Northern and Southern Goldfields	Bega Garnbirringu Health Service



Table 20: The GRAMS (Geraldton Regional Aboriginal Medical Service) mobile clinic ([LINK](#)) (16)

<p>Jurisdiction: remote areas in the Mid-West and Murchison region, Australia Program Description: A mobile clinic providing general medical care, chronic disease clinic, health promotion and dispensing of medication for those in remote areas of the Mid-West and Murchison region. SEE PAGE 43 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
To provide health services to patients in remote areas in the Mid-West and Murchison	<p>Services:</p> <ul style="list-style-type: none"> Primary health care Disease prevention General Medical Care Chronic Disease Clinic Health checks Health Promotion Dispensing of Medication Men’s and women’s health 	<ul style="list-style-type: none"> A male and female health worker Doctor Podiatrist 	Residents of Mt. Magnet, Yalgoo, Pia Wadjarri, Kardaloo Farm, Sandstone (by appointment), Meekatharra, Yulga Jinna & Cue	Geraldton Regional Aboriginal Medical Service



Table 21: | The Mobile Medical Clinic (MMC) ([LINK](#)) (17)

<p>Jurisdiction: Goondir service region, Australia</p> <p>Program Description: The Mobile Medical Clinic (MMC) is part of a proactive strategy to combat the rise in chronic disease amongst Aboriginal and Torres Strait Islander people across the Goondir service region SEE PAGE 44 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Improve the prevention and management of chronic disease through early intervention and improved access to culturally appropriate medical services. • Vision: Improve the health and wellbeing of Aboriginal and Torres Strait Islander people to a standard at least equal to that of the wider Australian community by providing holistic health care and medical services that meet best practice standards. • Mission: Equip the organization with appropriate medical facilities and resources to deliver programs in culturally appropriate and sensitive manner 	<p>Components:</p> <ul style="list-style-type: none"> • Clients have right to a second opinion • Staff have access to continual education and training and are committed to improving quality of service delivery <p>Services:</p> <ul style="list-style-type: none"> • Health Checks and follow-up visits • Chronic Disease Management Plans • Healthy Lifestyle Promotion and Education • Smoking Cessation Advice and Support • Referral for social, mental, and physical support • Transport for eligible Clients • Translating and Interpretive services 	<ul style="list-style-type: none"> • General Practitioner • Registered Nurse / MMC Coordinator • Aboriginal Health Practitioner • Aboriginal Health Worker 	<p>Aboriginal and Torres Strait Islander people across the Goondir service region.</p>	<p>Queensland Health (State); Australian government (federal); Goondir Health Services (municipal)</p>



Table 22: Tulku wan Wininn (Budja’s mobile clinic van) [\(LINK\)](#) (18)

<p>Jurisdiction: Ararat Rural City and Northern Grampians Shire, including Ararat, Stawell, St Arnaud and many small towns, Australia</p> <p>Program Description: This is a community-driven initiative, delivering outreach services via a mobile clinic across the Grampian region of western Victoria to improve access to culturally appropriate care for Aboriginal communities. It is the result of their collaborative partnership with Budja Budja Aboriginal Cooperative (ACCHO), based in Halls Gap.</p> <p>SEE PAGE 46 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To provide care services to underserved aboriginal communities 	<p>Components:</p> <ul style="list-style-type: none"> Available at Primary and Secondary Schools, Kinders and Child Care Centres, Neighbourhood Houses, Community events, associated with Community Health Centres and in the home <p>Services:</p> <ul style="list-style-type: none"> Services provided depend on community and individual need Hearing Optometry General health checks Health promotion and education 	<ul style="list-style-type: none"> Registered Nurse Other Health Professionals Occasionally General Practitioner 	<p>Aboriginal Community across Ararat Rural City and Northern Grampians Shire, including Ararat, Stawell, St Arnaud and many small towns.</p>	<p>Deakin University, Indigenous Affairs (Department of Prime Minister and Cabinet) and Budja Budja Aboriginal Cooperative Regional stakeholders such as East Grampians Health Services and Stawell Regional Health.</p>



Table 23: The University of Queensland’s Indigenous Health Mobile Training Unit, University of Queensland ([LINK](#)) (19)

<p>Jurisdiction: Aboriginal and Torres Strait Islander communities outside the Toowoomba area, Australia Program Description: The clinic focuses on providing culturally safe, primary health care with a holistic approach to early detection and prevention. SEE PAGE 47 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Principal aim: to assess, evaluate and provide on-going primary care for local patients, and educate indigenous families in healthy lifestyle choices • Secondary aim: to collect primary health care service delivery data • Goal: to improve chronic disease management by addressing barriers to accessing primary health care from Indigenous communities. 	<p>Components:</p> <ul style="list-style-type: none"> • GP room • RN room • Small kitchenette area • Fully enclosed annex weather-proof waiting area • Data collection • Medical training <p>Services:</p> <ul style="list-style-type: none"> • Primary care • GP assessment /health checks • Chronic disease • Health education 	<ul style="list-style-type: none"> • General Practitioner • Registered Nurse • Primary health workers • Local Aboriginal Medical Service provider Carbal Medical Services 	<p>Aboriginal and Torres Strait Islander communities outside the Toowoomba area</p>	<p>The university of Queensland; Health Workforce Australia [federal], Queensland Health [State]</p>

Canada



Table 24: The Health Bus, Saskatoon Health Region ([LINK](#)) (20)

<p>Jurisdiction: Saskatoon, Saskatchewan, Canada</p> <p>Program Description: The vision of the Health Bus is to provide a mobile primary health centre that creates health equity and closes the disparity gap for people who are geographically, socially, economically and/or culturally isolated.</p> <p>SEE PAGE 51 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Provide high quality primary health care to the public in the communities of Saskatoon • Create health equity • Close disparity gaps: <ul style="list-style-type: none"> ○ Geographical ○ Social ○ Economic ○ Cultural 	<p>Components:</p> <ul style="list-style-type: none"> • No charge for services • No appointment necessary <p>Services:</p> <ul style="list-style-type: none"> • Diagnose and treat common illness and injuries • STI testing • Birth control • Free condoms • Education/ counselling • Chronic disease monitoring • Wound care and management • Stitches and removal of stitches • Addictions • Social Work • Mental Health • Other community services • Telehealth (during the pandemic) 	<ul style="list-style-type: none"> • Nurse practitioner • Paramedic 	<p>Residents of the Saskatoon Health Region</p>	<p>Based on partnerships between Saskatoon Health Region, M.D. Ambulance [national org], CUMFI [Indigenous org], First Nations agencies, and the Ministry of Health</p>



Table 25: Manitoba Mobile Health Clinics, Prairie Mountain Health, Southern Health-Santé Sud, Interlake-Eastern Regional Health Authority ([LINK](#)) (21)

<p>Jurisdiction: Manitoba, Canada</p> <p>Program Description: Manitoba’s Mobile Clinics are buses that have been specially designed to be fully functional primary care clinics. People living in or near a community served by one of Manitoba’s Mobile Clinics can use the clinic as their 'Home Clinic'- the place where they receive most of their health care, or access it for some of everyday health care needs. SEE PAGE 54 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Improve access to local primary care services for Manitoba’s smaller underserved communities • Help these communities receive ongoing health care and support close to home • Save people time and money in transportation costs 	<p>Components:</p> <ul style="list-style-type: none"> • Two exam rooms • wheelchair lift • medical equipment and technology found in any clinic <p>Services:</p> <ul style="list-style-type: none"> • Prescribe medications • Order and manage results of screenings and diagnostic tests • Minor surgical procedures • Regular check ups • Physical exams • Treatment for minor ailments • Help managing chronic disease or condition • Lab services • Health promotion and education • Immunizations • Referrals • Prenatal care • Well baby/child care • Ankle Brachial Index (ABI) 	<ul style="list-style-type: none"> • Registered nurses (PMH, SH) • Nurse practitioners (PMH, SH) • Community Health Nurse (SH) 	<p>Prairie Mountain Health region:</p> <ul style="list-style-type: none"> • Birdtail Sioux First Nation, Keeseekoowenin Ojibway First Nation, Ebb and Flow First Nation, O-Chi-Chak-Ko-Sipi First Nation <p>Southern Health:</p> <ul style="list-style-type: none"> • mobile health clinics were suspended because of COVID-19 and do not have information on the communities they service. <p>Interlake-Eastern Regional Health Authority:</p> <ul style="list-style-type: none"> • Manitoba’s main health site (https://www.gov.mb.ca/health/primarycare/access/index.html) states that the I-E RHA has a mobile health clinic, but the CHRSP researchers could not find any more information on it. 	<p>Manitoba Health</p>

USA



Table 26: The Bay Clinic Mobile Health Unit, Bay Clinic ([LINK](#)) (22)

Jurisdiction: East Hawai'i, USA Program Description: The Mobile Health Unit is essentially a comprehensive mobile health center SEE PAGE 64 FOR DETAILS				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> To deliver excellent patient-centered health care services for families living in the most rural East Hawai'i communities with limited or no access to health care in their immediate hamlet 	<ul style="list-style-type: none"> Primary Medical Services <ul style="list-style-type: none"> Preventive Care Treatment of Routine Illnesses Urgent Care Immunizations and Vaccinations Management of Chronic Diseases Physicals (work and annual) Dental Services <ul style="list-style-type: none"> Screenings Comprehensive Exams Recalls Cleanings Emergency Dental (pain relief & extractions) An app showing deployment schedule and contact information 	<ul style="list-style-type: none"> Medical Provider Medical Dentist Dental Assistant Patient Care Coordinator Driver 	Families living in the most rural East Hawai'i communities with limited or no access to health care in their immediate hamlet Health Centers like Bay Clinic Mobile Health accept all individuals regardless of ability to pay. All payer mixes; those uninsured, underinsured, and self-pay are welcome	Non-profit donors: The Harry & Jeanette Weinberg Foundation, Inc. Hearst Foundations Atherton Family Foundation HDS Foundation Ouida & Doc Hill Foundation Federal/Municipal: USDA/Rural Development County of Hawai'i Trust: McInerney Foundation The Shippers Wharf Committee Trust

Table 27: Community Health’s Mobile Medical & Dental Unit, Tuba City Regional Health Care Corporation (TCRHCC), TCRHCC Health (LINK) (23)



Jurisdiction: Western Navajo Chapters, Arizona, USA Program Description: A mobile health program that provides primary health care and dental care to Western Navajo Chapters in Arizona SEE PAGE 65 FOR DETAILS				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Provide primary healthcare and dental screenings to the community 	<p>Components:</p> <ul style="list-style-type: none"> • The Mobile Medical & Dental Unit coordinates with community agencies, such as schools, chapter houses, and senior centers <p>Services:</p> <ul style="list-style-type: none"> • Medical Services <ul style="list-style-type: none"> ○ Primary Care ○ Immunizations ○ Well-child exams ○ Patient Case Management ○ Pharmacy - By prescription only ○ Behavior Health - Referral ○ Sports Physicals • Dental Care <ul style="list-style-type: none"> ○ Exams ○ X-Rays ○ Fluoride ○ Sealants • Referrals 	<ul style="list-style-type: none"> • Registered Nurse Practitioners • A certified Medical Support Assistant • Technicians 	Seniors, teens and families who do not have access to medical care at different sites throughout Western Navajo	Federal government; Tuba City Regional Health Care Corporation (TCRHCC); and federal funding from the HRSA

Table 28: WIHCC Medical Mobile Vehicle, Winslow Indian Health Care Centre ([LINK](#)) (24)



<p>Jurisdiction: Eight different chapters in the southwest region of the Navajo Nation, Arizona, USA</p> <p>Program Description: Winslow Indian Health Care Centre crafted a mobile medical vehicle to reach out to their most vulnerable patients. The functional interior design of WIHCC’s medical vehicle thoroughly reflects the experience of a brick-and-mortar medical office into a mobile setting. The tasteful color palette found inside also helps create a calm atmosphere for their patients.</p> <p>SEE PAGE 67 FOR DETAILS</p>				
Goals	Components/ Services	Providers	Users/ Eligibility	Funding
<ul style="list-style-type: none"> • Provide exceptional medical and preventive care while reaching patients who would otherwise be too remote to obtain these services 	<ul style="list-style-type: none"> • Braun wheelchair lift • Waiting area complete with a lavatory • A rear exam room • A lab area for blood draws 	<ul style="list-style-type: none"> • Unclear 	<p>Residents of eight different chapters in the southwest region of the Navajo Nation</p>	<p>Unclear beyond being “crafted” by Winslow Indian Health Care Center, which is a non-profit</p>

Appendix A: Data Extraction | Details from Program Websites and Other Sources

This section is a companion to the Summary Tables from the main report. The tables below contain detailed information from online assessment materials. Available website links and references are included. Information was obtained from websites, reports, guidance documents, pamphlets, or newsletters/articles. As often as possible, the information included in the data extraction tables is taken verbatim from program materials.

Data Extraction – Australia

Bega Garnbirringu mobile clinic (Goldfields, Australia)

Name of program	Bega Garnbirringu mobile clinic
Jurisdiction	Goldfields, Australia
Main Source	https://bega.org.au/bega-clinical-services/mobile-clinic/ (15)
Program type/ description	Mobile Clinic Bega mobile clinic is a team of GP’s, Registered Nurses and Health Practitioners who provide primary health care to Aboriginal and Torres Strait Islander people in the Central, Northern and Southern Goldfields.
Goals of program	<ul style="list-style-type: none"> • Service endeavours to provides an accessible healthcare service and a culturally safe environment to clients within the Goldfields working towards closing the gap and achieving healthy outcomes
Program Components	Services: <ul style="list-style-type: none"> • Primary health care • Wound management • Chronic health care • Sexual health screening • Pathology service • General health checks
Service users/ eligibility	<ul style="list-style-type: none"> • Aboriginal and Torres Strait Islander people in the Central, Northern and Southern Goldfields.
Service providers	<ul style="list-style-type: none"> • General Practitioners, • Registered Nurses, and • Health Practitioners
Funding	Bega Garnbirringu Health Service [Funding for Bega Garnbirringu Health Service: Government of Western Australia; Australian Government: National Indigenous Australian Agency; NIAA; Government of Western Australia Mental Health Commission; Australian

	Government: Department of Health; Government of Western Australia WA Country Health Service; Aboriginal Health Council of Western Australia; Rural Health West; WA Aboriginal Environmental Health; NACCHO; National Disability Insurance Scheme]
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25) https://bega.org.au/bewp/wp-content/uploads/2022/10/Annual-Report-2022_FOR-WEB.pdf (26)
Web links	
Contact	Bega Garnbirringu Health Service, Clinical Service: <ul style="list-style-type: none"> • (08) 9022 5500

The GRAMS mobile clinic (Remote areas in the Mid-West and Murchison region, Australia)

Name of program	The GRAMS (Geraldton Regional Aboriginal Medical Service) mobile clinic, Murchison Outreach Service
Jurisdiction	Remote areas in the Mid-West and Murchison region, Australia
Main Source	https://www.grams.asn.au/murchison-outreach-service.aspx (16)
Program type/ description	Mobile Clinic A mobile clinic providing general medical care, chronic disease clinic, health promotion and dispensing of medication for those in remote areas of the Mid-West and Murchison region.
Goals of program	<ul style="list-style-type: none"> • To provide health services to patients in remote areas in the Mid-West and Murchison.
Program Components	<ul style="list-style-type: none"> • general medical care, chronic disease clinic, health promotion and dispensing of medication
Service users/ eligibility	<ul style="list-style-type: none"> • residents of Mt Magnet, Yalgoo, Pia Wadjarri, Kardaloo Farm, Sandstone (by appointment), Meekatharra, Yulga Jinna & Cue
Service providers	<ul style="list-style-type: none"> • A male and female health worker, • Doctor, and • Podiatrist
Funding	GRAMS (Geraldton Regional Aboriginal Medical Service) “Geraldton Regional Aboriginal Medical Service (GRAMS) is an Aboriginal Community Controlled Health Organisation (ACCHO) established in 1978, offering affordable and culturally appropriate health services to the Mid-West and Murchison communities.” [https://www.naccho.org.au/members_affiliates/geraldton-regional-aboriginal-medical-service/]
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25)
Web links	
Contact	Murchison Outreach Service:

	<ul style="list-style-type: none"> • (08) 9940 3222
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The Mobile Medical Clinic (Goondir service region, Australia)

Name of program	The Mobile Medical Clinic (MMC)
Jurisdiction	Goondir service region, Australia
Main Source	http://www.goondir.org.au/pdfs/Doc669_Mobile%20Medical%20Clinic%20Practice%20Information%20Sheet_V6.pdf (27)
Program type/ description	<p>Mobile Clinic</p> <p>The Mobile Medical Clinic (MMC) is part of a proactive strategy to combat the rise in chronic disease amongst Aboriginal and Torres Strait Islander people across the Goondir service region.</p>
Goals of program	<ul style="list-style-type: none"> • Service is dedicated to improving the prevention and management of chronic disease through early intervention and improved access to culturally appropriate medical services. • Vision: To improve the health and wellbeing of Aboriginal and Torres Strait Islander people to a standard at least equal to that of the wider Australian community by providing holistic health care and medical services that meet best practice standards. • Mission: To equip the organisation with the appropriate medical facilities and resources to deliver programs in a culturally appropriate and sensitive manner to improve the health and wellbeing of all Aboriginal and Torres Strait Islander people in the service region.
Program Components	<ul style="list-style-type: none"> • Health Checks and follow-up visits. • Chronic Disease Management Plans. • Healthy Lifestyle Promotion and Education. • Quit Smoking Advice and Support. • Referral for Counselling and Social and Emotional Wellbeing Support. • Referral to Specialist & Allied Health services (such as Physio, Podiatrist, Dietician). • Transport available to eligible Clients. • Translating and Interpretive services available. • Clients have the right to a second opinion. • Staff have access to continual education and training and are committed to improving quality of service delivery.
Service users/ eligibility	<ul style="list-style-type: none"> • Aboriginal and Torres Strait Islander people across the Goondir service region.

Service providers	<ul style="list-style-type: none"> • General Practitioner • Registered Nurse / MMC Coordinator • Aboriginal Health Practitioner or • Aboriginal Health Worker
Funding	Queensland Health (State); Australian government (federal); Goondir Health Services (municipal)
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25)
Web links	http://goondir.org.au/service/mobile-health-promotion-van
Contact	<ul style="list-style-type: none"> • 0427 000 912 • 1800 GOONDR • 1800 466 637

Royal Flying Doctor Service (Australia)

Name of program	Royal Flying Doctor Service
Jurisdiction	Australia
Main Source	https://www.flyingdoctor.org.au/about-the-rfds/ (14)
Program type/ description	<p>Air Medical Service</p> <p>The Royal Flying Doctor Service of Australia (RFDS, informally known as The Flying Doctor) is an air medical service in Australia. It is a non-profit organisation that provides emergency and primary health care services for those living in rural, remote and regional areas of Australia who cannot access a hospital or general practice due to the vast distances of the outback. It is one of the largest and most comprehensive aeromedical organisations in the world.</p>
Goals of program	<ul style="list-style-type: none"> • The prevention of chronic illness, disease and mental health problems, is what drives RFDS operations.
Program Components	<ul style="list-style-type: none"> • Services are delivered on a day-to-day basis by six RFDS operating sections – Central Operations, Queensland Section, South Eastern Section, Tasmania Section, Victoria Section and Western Operations. • They are now delivering some 65 primary health care clinics on a daily basis, with about 1000 patient contacts a day • Their Primary health care services look and operate differently, depending on location and the needs of the community. • From immunisations, health checkups, referrals or management of chronic conditions such as diabetes, cardiovascular illness general lifestyle issues, RFDS primary health services mean there is regular medical assistance when needed for people living and working remote Australia.
Service users/ eligibility	<ul style="list-style-type: none"> • Patients in Rural Australia who have to deal with the great distances of the Outback to get to healthcare

Service providers/ Services (?)	<ul style="list-style-type: none"> The Flying Doctor provides regular fly-in-fly-out General Practitioner, Nursing and Allied Health Clinics to rural and remote communities. Whether on a weekly, fortnightly or monthly basis, these clinics provide all services that an individual or family will need, often looking after several generations of a family from birth through to the end of life care. 23,633 Nurse, GP and Dental clinics were conducted across Australia in 2019/20. Fleet of 79 aircraft, 23 air bases, 183 healthcare service road vehicles.
Funding	The Royal Flying Doctor Service (RFDS) is made up of seven legal entities operating around Australia, under a federated structure, and working together under a joint venture agreement.
Other references	https://en.wikipedia.org/wiki/Royal_Flying_Doctor_Service (28)
Web links	
Contact	<p>General enquiries Email: rfd_bne@rfdsqld.com.au Telephone: 07 3860 1100</p>

Tulku wan Wininn (Budja’s mobile clinic van) (Ararat Rural City and Northern Grampians Shire, including Ararat, Stawell, St Arnaud and many small towns, Australia)

Name of program	Tulku wan Wininn (Budja’s mobile clinic van)
Jurisdiction	Ararat Rural City and Northern Grampians Shire, including Ararat, Stawell, St Arnaud and many small towns, Australia
Main Source	https://budjabudjacoop.org.au/new-mobile-clinical-health-van-april-2019/ (18)
Program type/ description	<p>Mobile Clinic</p> <p>This is a community-driven initiative, delivering outreach services via a mobile clinic across the Grampian region of western Victoria to improve access to culturally appropriate care for Aboriginal communities. It is the result of our collaborative partnership with Budja Aboriginal Cooperative (ACCHO), based in Halls Gap.</p>
Goals of program	<ul style="list-style-type: none"> To serve care services to underserved aboriginal communities
Program Components	<ul style="list-style-type: none"> Services available include hearing, optometry, general health checks and health promotion and education. Services provided depend on Community and individual need Services are available to be provided at Primary and Secondary Schools, Kinders and Child Care Centres, Neighbourhood Houses, Community events, associated with Community Health Centres and in the home
Service users/ eligibility	<ul style="list-style-type: none"> Aboriginal Community across Ararat Rural City and Northern Grampians Shire, including Ararat, Stawell, St Arnaud and many small towns.
Service providers	<ul style="list-style-type: none"> Registered Nurse, Other health professionals,

	<ul style="list-style-type: none"> Occasionally General Practitioner
Funding	Deakin University, Indigenous Affairs (Department of Prime Minister and Cabinet) and Budja Budja Aboriginal Cooperative Regional stakeholders such as East Grampians Health Services and Stawell Regional Health.
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25) https://www.deakin.edu.au/health/deakin-rural-health/our-research/indigenous-health (29) https://www.rwav.com.au/budja-budja-mobile-clinic/ (30)
Web links	
Contact	Budja Medical reception: <ul style="list-style-type: none"> 5356 4751

The University of Queensland’s Indigenous Health Mobile Training Unit (Aboriginal and Torres Strait Islander communities outside the Toowoomba area, Australia)

Name of program	The University of Queensland’s Indigenous Health Mobile Training Unit
Jurisdiction	Aboriginal and Torres Strait Islander communities outside the Toowoomba area, Australia
Main Source	https://www.uq.edu.au/news/article/2013/02/mobile-indigenous-health-clinic-reaches-out-underserviced-communities (19)
Program type/ description	Mobile Clinic The clinic will focus on providing culturally safe, primary health care with a holistic approach to early detection and prevention.
Goals of program	<ul style="list-style-type: none"> principal aim is to assess, evaluate and provide on-going primary care for local patients, as well as educate indigenous families in healthy lifestyle choices, we have a secondary aim to collect primary health care service delivery data One goal is to improve chronic disease management by addressing barriers to accessing primary health care from Indigenous communities.
Program Components	<ul style="list-style-type: none"> The clinic encompasses one GP room, a RN room and a small kitchenette area, and a fully enclosed annex will provide a weather-proof waiting area.
Service users/ eligibility	<ul style="list-style-type: none"> Aboriginal and Torres Strait Islander communities outside the Toowoomba area
Service providers	<ul style="list-style-type: none"> General Practitioner, Registered Nurse, primary health workers, in conjunction with local Aboriginal Medical Service provider Carbal Medical Services

Funding	The university of Queensland; Health Workforce Australia (federal), Queensland Health (State)
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25)
Web links	

Victorian Patient Transport Assistance Scheme (Rural Victoria, Australia)

Name of program	Victorian Patient Transport Assistance Scheme (VPTAS)
Jurisdiction	Rural Victoria, Australia
Main Source	https://www.chrh.org.au/consumer-information/transport-assistance/ (13)
Program type/ description	Demand Responsive Transit & Transportation Reimbursement Program Central Highlands Rural Health provides volunteer transport for medical and related appointments for older people or younger people with disabilities and their carers Monday to Friday.
Goals of program	<ul style="list-style-type: none"> • Provide transportation for older people and people with disabilities and their carers in Rural Victoria for hospital, doctor’s, dental, and other allied health appointments
Program Components	<ul style="list-style-type: none"> • Volunteer transport requests can be made through reception of the four community health centres. • Operates Monday to Friday • A minimum of two working days’ notice is required and a donation is requested based on the distance being traveled. • This is a door to door service for hospital, doctor’s, dental and other allied health appointments and includes appointments in Melbourne. • Provision of the service is dependent on volunteer and vehicle resources and while every effort is made, it is not guaranteed that all requests can be accommodated. • VPTAS provides some financial assistance for travel and accommodations • Also provides subsidies eligible patients living in rural and regional Victoria who need to travel long distances to access specialist services.
Service users/ eligibility	<ul style="list-style-type: none"> • Transport assistance <ul style="list-style-type: none"> ○ Older people ○ People with disabilities • Subsidies: <ul style="list-style-type: none"> ○ VPTAS provides some financial assistance for travel and accommodations for rural Victorians traveling more than 100 km one way for specialist medical treatment • People receiving VPTAS assistance pay the first \$100 each treatment year for their travel and accommodation, except for primary card holders of a Pensioner Concession Card or Health Care Card.
Funding	State funding because it’s run by Victoria State Government (31)

Other references	https://www.health.vic.gov.au/rural-health/victorian-patient-transport-assistance-scheme-vptas (32) https://www.healthtranslations.vic.gov.au/resources/victorian-patient-transport-assistance-scheme-guidelines-2015 (33)
Web links	
Contact	Phone: 1300 737 073 Email: vptas@dhhs.vic.gov.au

Data Extraction – Canada

Easy Ride (Perth and Huron, Ontario, Canada)

Name of program	Easy ride
Jurisdiction	Perth and Huron, Ontario, Canada
Main Source	https://www.onecaresupport.ca/services/active-in-your-community/transportation/ (3)
Program type/ description	Demand Responsive Transit EasyRide™ is a transportation service shared by Community Support agencies. By teaming up and sharing our vehicles and drivers we can offer flexible door to door service.
Goals of program	<ul style="list-style-type: none"> • Offer door-to-door transportation to seniors and others without access to transportation or difficulty accessing transportation.
Program Components	<ul style="list-style-type: none"> • The program relies on a central dispatch coordination system that leverages the fleet resources of the partner agencies to provide “frequent and flexible door-to-door service.” • High percentages of seniors 64+ • User data: the types of trips include approximately 1/3 health related appointments (specialist appointments, treatments, dialysis, discharges /admissions to/ from hospitals, long term care facilities & retirement homes. 1/3 provides transportation for adult day programs & 1/3 of trips are for shopping, employment & social purposes. • resources: 8 wheelchair buses; 8 full-size WC buses; 5 low floor WC minivans; 3 7-passenger minivans • [Fares in 2014 report] fares vary according to provider/location; flat fees apply for in-town trips & per-km fees for out-of-town trips. Clients responsible for parking. [In-town: \$3.50-\$5.50/in-town volunteer trip; \$3.75-\$10.00/in-town accessible trip. Long-distance fare ranges: \$0.37-\$0.46/km for out-of-town volunteer trips; \$0.40-\$0.80/km + wait time for accessible trips.]

Service users/ eligibility	<p>Clients may access ONE CARE or EasyRide transportation services for any purpose (medical, shopping/errands, social) if they are:</p> <ul style="list-style-type: none"> • Must live in Huron or Perth County or be traveling to a destination in Huron or Perth County • A senior (65+) OR adult with a disability • An individual with a short or long term disability (i.e. broken bone, convalescing from surgery) • An individual who requires specialized transportation
Funding	ONE CARE; Ontario Trillium Foundation; Community Support Agencies across Huron & Perth Counties; gas tax funding
Other references	https://www.ruralontarioinstitute.ca/uploads/userfiles/files/ARTS - Case Studies for WEB.pdf (2)
Web links	https://www.southwesthealthline.ca/display/service.aspx?id=10616
Contact	To register: 1-844-482-7800.

The Health Bus (Saskatoon, Saskatchewan, Canada)

Name of program	The Health Bus
Jurisdiction	Saskatoon, Saskatchewan, Canada
Main Source	https://www.saskatoonhealthregion.ca/locations_services/Services/Primary-Health/Pages/HealthBus.aspx (20)
Program type/ description	<p>Mobile Clinic</p> <p>The vision of the Health Bus is to provide a mobile primary health centre that creates health equity and closes the disparity gap for people who are geographically, socially, economically and/or culturally isolated.</p>
Goals of program	<ul style="list-style-type: none"> • Provide high quality primary health care to the public in the communities of Saskatoon • Create health equity • Close disparity gaps: <ul style="list-style-type: none"> ○ Geographical ○ Social ○ Economic ○ Cultural
Program Components	<ul style="list-style-type: none"> • No charge for services • No appointment necessary <p>Services:</p> <ul style="list-style-type: none"> • Diagnose and treat common illness and injuries • STI testing • Birth control • Free condoms

	<ul style="list-style-type: none"> • Education/counselling • Chronic disease monitoring • Wound care and management • Stitches and removal of stitches • Addictions • Social Work • Mental Health • Other community services • Telehealth (during the pandemic)
Service users/ eligibility	<ul style="list-style-type: none"> • Residents of the Saskatoon Health Region
Service providers	<ul style="list-style-type: none"> • Nurse practitioner • Paramedic
Funding	Based on partnerships between Saskatoon Health Region, M.D. Ambulance [national org], CUMFI, First Nations agencies, and the Ministry of Health
Other references	The Health Bus brochure: https://www.saskatchewan.ca/-/media/news-archive/2009/february/26/primary-health-bus-to-continue-serving-saskatoon-residents/7810primary-health-bus-backgrounder.pdf (34)
Web links	
Contact	<p>Call:</p> <ul style="list-style-type: none"> • (306) 380-1000 • (877) 999-6363

Lanark Transportation (Lanark County, Town of Smith Falls, and Carleton Place, Ontario, Canada)

Name of program	Lanark Transportation
Jurisdiction	<ul style="list-style-type: none"> • Lanark County, On • Town of Smith Falls, On • Carleton Place, On
Main Source	https://lanarktransportation.com/ (4)
Program type/ description	<p>Fixed-Route Transit with some Demand Responsive Transit</p> <p>They are a grassroots, not-for-profit association that connects people with life-enhancing community supports and services.</p>
Goals of program	<ul style="list-style-type: none"> • That individuals living in a small town or in the country need the same access to necessary services and appointments as those individuals living in urban centers

	<ul style="list-style-type: none"> • They pride themselves on providing reliable transportation services and doing so with care.
Program Components	<ul style="list-style-type: none"> • Weekly trips from Lanark Town Hall to either Perth or Carleton Place (alternating weeks). • Personalized pick up and drop off if you are unable to get to Lanark Town Hall. • Additional stops along the route if you have a mobility issue • They have a fleet of 14 vehicles to serve our clients, including four accessible vehicles to accommodate wheelchairs and other mobility devices. • Fares: \$2 per person
Service users/ eligibility	<p>Register by phone, unsure of eligibility criteria. They provide transportation to families, seniors, children, youth and others living in Lanark County and the Town of Smiths Falls so they may attend:</p> <ul style="list-style-type: none"> • Medical appointments • Day programs • Counseling services • Social service appointments • Food programs • And more <ul style="list-style-type: none"> ○ They also help people return home from hospital. (non-emergency / non-stretcher transportation)
Funding	<p>Lanark County Mental Health The Table Community Food Centre Royal Ottawa Hospital Algonquin College Community Employment Services Dignity House Day Program Town of Smith Falls Lanark County</p>
Other references	<p>https://www.ruralontarioinstitute.ca/uploads/userfiles/files/ARTS - Case Studies for WEB.pdf (2)</p>
Web links	
Contact	<p>Registration number: 613-264-8256</p>

LIMO Specialized Transit (Town of Lindsay, Ontario, Canada)

Name of program	LIMO Specialized Transit
Jurisdiction	<ul style="list-style-type: none"> • Town of Lindsay, Ontario, Canada
Main Source	<p>https://www.kawarthalakes.ca/en/living-here/accessible-and-specialized-transit.aspx (5)</p>

Program type/ description	Demand Responsive Transit A shared door to door public transit service for people with physical or functional disabilities who are not able to use conventional public transit.
Goals of program	<ul style="list-style-type: none"> To provide demand responsive travel options to people with physical or functional disabilities who are not able to use conventional public transit in the Town of Lindsay.
Program Components	<ul style="list-style-type: none"> Shared service: Other riders may be on board during the trip to your destination; your route of travel may be altered so another rider(s) can be accommodated; the vehicle may stop and pick up other riders as it travels to your destination. You must complete a two part application form before you can use LIMO Specialized Transit. You can fill out section A of the form yourself and must have your health care professional fill out section B. Bookings are offered on a first come first serve basis. There are four kinds of bookings: Subscription/pre-booked; Reservation; Same Day Trips; Charter Trips Their buses are designed to assist customers using a wheelchair, scooter, cane, walker and most types of mobility aids.
Service users/ eligibility	<ul style="list-style-type: none"> Physically/functionally disabled unable to use public transit. [Eligibility considered on case-by-case basis & is not based on a particular disability/ income level/ lack of accessible public transit]
Funding	Operated by the City of Kawartha Lakes
Other references	https://www.kawarthalakes.ca/en/living-here/resources/Transit/LIMO-USER-GUIDE-2018-Accessible_2020.pdf (35) https://www.ruralontarioinstitute.ca/uploads/userfiles/files/ARTS - Case Studies for WEB.pdf (2)
Web links	
Contact	Transit Telephone: 705-324-9411 LIMO Specialized Transit: 705-324-3331

Manitoba Mobile Health Clinics (Manitoba, Canada)

Name of program	Manitoba Mobile Health Clinics
Jurisdiction	Manitoba, Canada <ul style="list-style-type: none"> Prairie Mountain Health Authority Southern Health-Santé Sud Health Authority Interlake-Eastern Regional Health Authority
Main Source	https://www.gov.mb.ca/health/primarycare/access/index.html (21)

<p>Program type/ description</p>	<p>Mobile Clinic</p> <p>Manitoba’s Mobile Clinics are buses that have been specially designed to be fully functional primary care clinics. People living in or near a community served by one of Manitoba’s Mobile Clinics can use the clinic as their 'Home Clinic'- the place where they receive most of their health care, or just access it for some of their everyday health care needs.</p>
<p>Goals of program</p>	<ul style="list-style-type: none"> • Improve access to local, on the spot, primary care services for people living in Manitoba’s smaller underserved communities • Help people living in these communities receive ongoing health care • Help people living in these communities receive support close to home • Save people time and money in transportation costs
<p>Program Components</p>	<ul style="list-style-type: none"> • Manitoba’s MHCs are buses that come complete with two exam rooms, a wheelchair lift, and the same medical equipment and technology you would find in any other clinic <p>Services:</p> <ul style="list-style-type: none"> • Prescribe medications • Order and manage the results of screenings and diagnostic tests • Minor surgical procedures • Regular check ups • Physical exams • Treatment for minor ailments • Help with managing a chronic disease or condition • Lab services • Health promotion and education • Immunizations • Referrals to other health services or specialists • Prenatal care • Well baby/child care • Ankle Brachial Index (ABI)
<p>Service users/ eligibility</p>	<ul style="list-style-type: none"> • Prairie Mountain Health region: Birdtail Sioux First Nation, Keeseekoowenin Ojibway First Nation, Ebb and Flow First Nation, O-Chi-Chak-Ko-Sipi First Nation. • Southern Health’s mobile health clinics were suspended because of COVID-19 and do not have information on the communities they service

	<ul style="list-style-type: none"> Manitoba’s main health site (https://www.gov.mb.ca/health/primarycare/access/index.html) states that the Interlake-Eastern Regional Health Authority has a mobile health clinic, but the researcher could not find any more information on it.
Service providers	<ul style="list-style-type: none"> Registered nurses (PMH, SH) Nurse practitioners (PMH, SH) Community Health Nurse (SH)
Funding	Manitoba Health [provincial]
Other references	Prairie Mountain Health Mobile Clinic brochure: https://www.prairiemountainhealth.ca/images/MobileClinic/Mobile-Bus-handout-r-002.pdf (36)
Web links	<p>Prairie Mountain Health Mobile Clinic: https://www.prairiemountainhealth.ca/mobile-clinic</p> <p>Southern Health Mobile Clinic: https://www.southernhealth.ca/en/finding-care/find-a-service/clinics/mobilc-clinic/</p> <p>Interlake-Eastern Regional Health Authority: http://www.ierha.ca/</p>
Contact	1-877-378-3077

Ride Norfolk (Norfolk County, Ontario, Canada)

Name of program	Ride Norfolk
Jurisdiction	Norfolk county, Ontario, CA
Main Source	https://www.norfolkcounty.ca/transit/ (6)
Program type/ description	<p>Fixed-Route Transit</p> <p>Ride Norfolk is a fixed route service, for which the hub-and-spoke configuration of the towns in Norfolk, connected by pre-existing transportation corridors, is particularly suited.</p>
Goals of program	<ul style="list-style-type: none"> The Ride Norfolk bus service was established in 2011 to provide reliable, affordable and accessible transportation options to residents of Norfolk County.
Program Components	<p>Ride Norfolk operates a Monday-Friday bus service with a daily Simcoe route and daily Brantford route. We service various other communities each day of the week. Our buses have air conditioning and heating, have seating for 10 and a capacity of 20. All our buses are accessible and are bike and service animal friendly.</p> <ul style="list-style-type: none"> Accessibility Lift with usable platform for the lift is 30” x 44” and the weight limit for the lift is 800 lbs. Priority Seating reserved for people of all ages with disabilities and mobility challenges. Transit Stops: In cases where a transit stop is temporarily inaccessible, people with disabilities will be able to board or exit the bus at the closest available safe location.

	<ul style="list-style-type: none"> Storage of Assistive Devices/Mobility Aids/Strollers: Where room is available and safe storage is possible the operator will ensure that mobility aids are safely secured within the bus. Service Animals able to ride Support Persons: A person with a disability who is accompanied by a support person will be permitted to have that person accompany them at no charge Ride Norfolk operates from 7:45 am to 6:30 pm Monday to Friday year round. There is no Saturday, Sunday, Statutory Holiday or Civic Holiday service.
Service users/ eligibility	<ul style="list-style-type: none"> Anyone
Funding	By Ontario Government
Other references	https://www.ruralontarioinstitute.ca/uploads/userfiles/files/ARTS - Case Studies for WEB.pdf (2)
Web links	
Contact	Call: 519-428-3178 Email: transit@norfolkcounty.ca

Rural and Community Connection (Muskoka, Ontario, Canada)

Name of program	Rural and Community Connection
Jurisdiction	Muskoka, Ontario, Canada
Main Source	https://www.muskoka.on.ca/en/community-services-and-support/rural-and-community-connection.aspx
Program type/ description	Fixed-Route Transit The Rural and Community Connection transportation service connects communities east and west across the District, while also providing passengers connections to other transportation services within and beyond Muskoka. Part of the Community Transportation Plan.
Goals of program	<ul style="list-style-type: none"> To develop accessible, affordable, sustainable transportation solutions for both urban and rural residents, including services that move residents east and west within Muskoka.
Program Components	<ul style="list-style-type: none"> Allows you to book "flex stops" and request "flag stops" to help accommodate those who can't access the scheduled stops. The District transit pass (free to low Income earners) is valid for use on the Corridor 11 and Rural and Community Connection buses. The service will operate on two routes. Each route is operated once per week on two different days - Tuesdays and Thursdays Hammond Transportation has an accessible vehicle available to use for the service when a passenger requires one.

	<ul style="list-style-type: none"> Fares range from \$5 to \$15
Service users/ eligibility	<ul style="list-style-type: none"> Anyone
Funding	The Rural and Community Connection service is funded by the Government of Ontario and is operated by Hammond Transportation Ltd.
Other references	https://www.muskoka.on.ca/en/community-services-and-support/Transit-Documents-and-Forms/Rural-and-Community-Connection-Schedule_Rv-Oct-21.pdf (37) https://www.bayshorebroadcasting.ca/2021/01/14/108358/ (38)
Web links	
Contact	Jacque Evans, Muskoka Transportation Network Coordinator 705-645-6764 ext. 4419 jacque.evans@muskoka.on.ca

The Specialized Transportation Fund (District of Muskoka, Ontario, Canada)

Name of program	The Specialized Transportation Fund (STF)
Jurisdiction	District of Muskoka, Ontario, Canada
Main Source	https://www.muskoka.on.ca/en/community-services-and-support/specialized-transportation-fund.aspx#Eligibility-requirements (8)
Program type/ description	Transportation Reimbursement Program Reimburses eligible individuals for the eligible travel expenses up to \$2,000 per year.
Goals of program	<ul style="list-style-type: none"> To assist people who need financial support for transportation and who do not have access to public transportation services.
Program Components	<ul style="list-style-type: none"> Modes of transportation that qualify for reimbursement: Taxis; buses; trains; agency-provided transit (e.g. Red Cross, Muskoka seniors); and invoiced rides from neighbours or friends. Includes trips for purposes such as: travel to medical appointments; work, school, or child care; weekly grocery shopping. Pending the availability of funds, individuals can receive up to \$2,000 per year
Service users/ eligibility	<ul style="list-style-type: none"> To qualify for the STF, residents must show that they: <ul style="list-style-type: none"> Have a financial need (Registered recipients of Social Assistance, either on Ontario Works or Ontario Disability Support Program, will qualify if they need to take a trip that is not covered by financial supports provided through these programs; Residents who are not currently on Social

	Assistance but can demonstrate they meet the Federal Government’s Low Income Measure will also qualify); and DO NOT live in an area served by public transportation or that the existing public transportation does not meet their needs; and Have explored accessing other community-based transportation agencies, such as Red Cross, Helping Hands, and/or Muskoka Seniors, and are either ineligible or need financial assistance with the fees; and DO NOT have regular access to a vehicle.
Funding	Government of Ontario through the Community Transportation Grant Program at the Provincial Ministry of Transportation
Other references	https://www.engagemuskoka.ca/community-transportation (39)
Web links	
Contact	The District Municipality of Muskoka <ul style="list-style-type: none"> • Phone: (705) 645-2100

The Wheels for Wellness Society (Vancouver Island, British Columbia, Canada)

Name of program	The Wheels for Wellness Society
Jurisdiction	Vancouver Island, British Columbia, Canada
Main Source	https://wheelsforwellness.com/about-us/
Program type/ description	Demand Responsive Transit Wheels For Wellness Society will take you to any out of town MEDICAL appointment, for example, Victoria, Nanaimo, Campbell River that exceeds 60 KM (one way) from your point of departure.
Goals of program	<ul style="list-style-type: none"> • The purpose is to provide transportation to centralized medical appointments for those requiring it. • To successfully build, promote, and provide a quality service for the patients of Vancouver Island who require transportation to their medical appointments. • To provide safe, friendly on-time service to appointments from your home. • To provide “Door to Door” service.
Program Components	<ul style="list-style-type: none"> • WFWS will take Social Services and First Nations Health Authority clients, although will require the mileage allowance given by these agencies be paid to your driver. With confirmation from those departments, we can invoice. • Wheels for Wellness Society is fully insured • “Volunteer driver will be a polite and courteous individual with excellent driving skills and knowledge of routes to your appointment. Drivers are ‘Professionals’, have criminal records checks, and a 10 year clean driving record.” <ul style="list-style-type: none"> ○ Driver may accept donations for the society.

	<ul style="list-style-type: none"> • The Society will pick you up at your home, take you where you need to go, wait for you and return you to your home. • The exceptions are: If you live in Tahsis, Zeballos, or any other off main road community you will be given a designated pickup and drop-off spot by the dispatcher.
Service users/ eligibility	<ul style="list-style-type: none"> • Anyone going to any out of town medical appointment 60km (one way) from your departure point • Requires advanced notice (48 hours) • WFWS needs to know about physical handicaps in advanced in order to provide adequate vehicles
Funding	Corporate donors: Waypoint Insurance; Comox Valley Toyota; Comox Valley Dodge Chrysler Jeep; and fueled by Co-op Mid Island
Other references	https://comox-valley.pathwaysbc.ca/programs/1360 (40) http://achn.ca/wp-content/uploads/wheels_for_wellness_program_info_one_pager.01.pdf (41)
Web links	
Contact	Telephone: (250) 338-0196 Can contact through website: https://wheelsforwellness.com/contact-us/

Data Extraction - Ireland

Transport for Ireland (TFI) Local Link (Rural Ireland)

Name of program	Transport for Ireland (TFI) Local Link
Jurisdiction	Rural Ireland
Main Source	https://www.transportforireland.ie/tfi-local-link/ (12)
Program type/ description	Fixed-Route Transit & Demand Responsive Transit TFI Local Link bus services connect communities throughout rural Ireland as part of the TFI Public Transport Network. They form a network of affordable bus services for everyone who wants to travel to or from local towns and villages. They have two different types of Local Link service: Regular Rural Bus Services and Door-to-Door Bus Services.
Goals of program	<ul style="list-style-type: none"> • To provide safe and accessible transport for rural communities throughout Ireland.
Program Components	<ul style="list-style-type: none"> • Regular Rural Bus Services <ul style="list-style-type: none"> ○ Operate a fixed route between towns and villages ○ Run a scheduled timetable

	<ul style="list-style-type: none"> ○ Timetables are designed to make it easy to connect with Bus Éireann (state-owned bus and coach operator), commercial bus services, and Larnród Éireann networks ● Door-to-Door Bus Services <ul style="list-style-type: none"> ○ Work along fixed routes ○ Can divert to collect you or drop you off at your home (where possible) ○ Must pre-book, ideally at least a day before travelling ○ Timetables may change and frequency can vary from daily to fortnightly ● Free Travel Passes are accepted on all TFI Local Link services and you can also pay with cash on all of our busses. They are currently expanding our payment services to allow passengers pay with the TFI Go app. ● TFI Local Link provides accessible buses across our day and evening services and we can divert our routes for pick-ups where residents have mobility difficulties, if pre-booked by phone. 90% of TFI Local Link bus services can handle children’s buggies and wheelchairs.
Service users/ eligibility	<ul style="list-style-type: none"> ● Anyone can use it
Funding	National Transport Authority (https://www.nationaltransport.ie/)
Other references	https://www.nationaltransport.ie/public-transport-services/rural-transport-programme/ (42)
Web links	
Contact	Local Link offices operate Monday to Friday, 9am to 5pm, and can be contacted by phone, email or by dropping in within office hours. Click here to find your closest TFI Local Link office.

Data Extraction – United Kingdom

GO-HI Initiative (Northern and Northwestern Scotland, UK)

Name of program	GO-HI Initiative
Jurisdiction	<p>Northern and Northwestern Scotland</p> <ul style="list-style-type: none"> ● GO-HI’s jurisdiction encompasses a large portion of the country’s landmass—close to 50 percent, much of which is rural, mountainous, and difficult to navigate. ● Despite the size, it is home to only about 10% of the nation’s population
Main Source	https://gohi.app/ (10)
Program type/ description	Mobility as a Service (MaaS)

	The GO-HI initiative, produced by HITRANS with MaaS technology platform Mobbileo, provides users with the ability to utilize a range of public transport, car sharing, and cycling services across northern and northwestern Scotland through a one-stop mobile app.
Goals of program	<ul style="list-style-type: none"> • Give residents streamlined access to public and private transportation services through their smartphones • Promote accessible and sustainable mobility options in their communities • Centralize finding, booking, and paying for transportation in one digital application • Reduce barriers to mobility in rural regions of the country • Offer end-to-end journey connectivity • Provide convenience, reassurance, and information that improves the customer experience
Program Components	<ul style="list-style-type: none"> • Provides access to a wide range of travel modes and services, including buses, trains, ferries, taxis, bike hire, car club, car hire, flights, and hotels • The app is free, and it is simple and quick to register for it • Can pay with debit, credit, or PayPal • A dedicated customer support team is available in app • The site says that you can “personalise your journeys based on the fastest, most economic, most comfortable, or most eco-friendly travel options available”
Service users/ eligibility	<ul style="list-style-type: none"> • Residents • Visitors
Service providers	GO-HI App
Funding	Supported by the Scottish Government’s MaaS Investment Fund and the EU North Sea Region Stronger Combined project
Other references	https://nationalcenterformobilitymanagement.org/blog/maas-scotland/ (43)
Web links	
Contact	Call: 01463 719002 Email: info@hitrans.org.uk

OurBus Bartons (Middle Barton, UK)

Name of program	OurBus Bartons
Jurisdiction	15 mile radius of Middle Barton, UK
Main Source	https://ourbusbartons-org-uk.stackstaging.com/ (11)
Program type/ description	Fixed-Route Transit

	“OurBus Bartons belongs to our (Barton) community. OurBus Bartons is a registered company and registered charity and provides timetabled Community Transport links within a 15 mile radius of Middle Barton on a Section 22 Permit”
Goals of program	<ul style="list-style-type: none"> • OurBus Bartons was established in 2016, by a group of dedicated volunteers responding to cuts that left their local community without public transport.
Program Components	<ul style="list-style-type: none"> • OurBus Bartons is committed to providing services which are fully accessible. • If you use a wheelchair or need extra support getting on or off please call giving 48 hrs notice where possible. • They assess your requirements, reconfigure vehicle & ensure the driver is ready to assist. • Assistance Dogs are welcome. • Can hire their vehicles for: <ul style="list-style-type: none"> ○ Social events (e.g., bridal party) ○ Schools and community groups (at a reduced rate)
Service users/ eligibility	<ul style="list-style-type: none"> • Anyone
Funding	It is a charity. Part of Community Transport Association UK (http://www.ctauk.org/)
Other references	
Web links	https://www.facebook.com/OurBusBartons/
Contact	Contact numbers: <ul style="list-style-type: none"> • Sheila Tumman: 01869-340635 • Martin Roberts: 01869-347188 • Richard Brown: 07775-538229

Data Extraction – United States of America

The Bay Clinic Mobile Health Unit (East Hawai’i, USA)

Name of program	The Bay Clinic Mobile Health Unit
Jurisdiction	East Hawai’i, USA
Main Source	http://www.bc2.bayclinicinc.org/locations/392-mobile-health-unit (22)
Program type/ description	Mobile Clinic The Mobile Health Unit is essentially a comprehensive health center on wheels

Goals of program	<ul style="list-style-type: none"> • The team partners with local churches, community centers, and organizations to deliver excellent patient-centered health care services for families living in the most rural East Hawai'i communities with limited or no access to health care in their immediate hamlet.
Program Components	<ul style="list-style-type: none"> • Primary Medical Services <ul style="list-style-type: none"> ○ Preventive Care ○ Treatment of Routine Illnesses ○ Urgent Care ○ Immunizations and Vaccinations ○ Management of Chronic Diseases ○ Physicals (work and annual) • Dental Services <ul style="list-style-type: none"> ○ Screenings ○ Comprehensive Exams ○ Recalls ○ Cleanings ○ Emergency Dental (pain relief & extractions) • Has an app showing deployment schedule and contact information
Service users/ eligibility	<ul style="list-style-type: none"> • families living in the most rural East Hawai'i communities with limited or no access to health care in their immediate hamlet (Health Centers like Bay Clinic Mobile Health accept all individuals regardless of ability to pay. All payer mixes; those uninsured, underinsured, and self-pay are welcome)
Service providers	<ul style="list-style-type: none"> • Medical provider, • A dentist, • One medical and one dental assistant, • A patient care coordinator, and • A driver.
Funding	<p>Donors:</p> <p>The Harry & Jeanette Weinberg Foundation, Inc. [Non-Profit] Hearst Foundations [non-profit] Atherton Family Foundation [non-profit] HDS Foundation [non-profit] USDA/Rural Development [federal] County of Hawai'i [municipal] McInerney Foundation [Trust] Ouida & Doc Hill Foundation [non-profit]</p>

	The Shippers Wharf Committee Trust [Trust]
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25)
Web links	https://www.healthcenterclinics.org/center/bay-clinic-mobile-health/ https://connector.hrsa.gov/connector/site-profile/2D03F2E4-546E-47C8-9E64-ED97DC5DC420 https://programportal.hrsa.gov/site-poc-api/public/employer-site-profiles/3140453C-9D53-4392-B40F-2251C833ADE9/brochures/0DB7D239-84ED-4775-8FD6-3ED7CCD36D2F/content
Contact	For clinical screening: <ul style="list-style-type: none"> • 808-333-3600 For administrative and other information: <ul style="list-style-type: none"> • 808-930-0499

Tuba City Regional Health Care Corporation (TCRHCC) Community Health’s Mobile Medical & Dental Unit (Western Navajo Chapters, Arizona, USA)

Name of program	Tuba City Regional Health Care Corporation (TCRHCC) Community Health’s Mobile Medical & Dental Unit
Jurisdiction	Western Navajo Chapters, Arizona, USA
Main Source	https://www.tchealth.org/mobilehealth/ (23)
Program type/ description	Mobile Clinic A mobile health program that provides primary health care and dental care to Western Navajo Chapters in Arizona.
Goals of program	<ul style="list-style-type: none"> • The primary goal of the Mobile Medical and Dental is to provide primary healthcare and dental screenings to the community.
Program Components	<ul style="list-style-type: none"> • The Mobile Medical & Dental Unit coordinates with community agencies, such as schools, chapter houses, and senior centers to reach the people who need these services the most — seniors, teens and families who do not have access to medical care. • Medical Services <ul style="list-style-type: none"> ○ Primary Care ○ Immunizations ○ Well-child exams ○ Patient Case Management

	<ul style="list-style-type: none"> ○ Pharmacy - By prescription only ○ Behavior Health - Referral ○ Sports Physicals ● Dental Care <ul style="list-style-type: none"> ○ Exams ○ X-Rays ○ Fluoride ○ Sealants ● Referrals
Service users/ eligibility	<ul style="list-style-type: none"> ● seniors, teens and families who do not have access to medical care at different sites throughout Western Navajo: <ul style="list-style-type: none"> ○ Cameron ○ Bodaway/Gap ○ LeChee ○ K'ai'bi'To' (Kaibeto) ○ Tonalea ○ Coalmine Canyon ○ Coppermine ○ and surrounding communities.
Service providers	<ul style="list-style-type: none"> ● A Registered Nurse Practitioners, ● A certified Medical Support Assistant, and ● Technicians staff the van
Funding	<p>Federal government [2012; https://tchealth.org/press/pr_2012_0628.html]; Tuba City Regional Health Care Corporation (TCRHCC) [Joint Commission accredited health centre].</p> <p>Also federal as the article indicates funding from the HRSA which is a federal granting organization: https://www.hrsa.gov/sites/default/files/hrsa/about/strategic-plan/hrsa-strategic-plan-2019-2022.pdf (44)</p>
Other references	<p>https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25)</p>
Web links	<p>https://www.tchealth.org/mobilehealth/calendar.html</p>
Contact	<p>To schedule an appointment please call:</p> <ul style="list-style-type: none"> ● 928-283-1421 or 928-283-2604

Winslow Indian Health Care Centre Medical Mobile Vehicle (Eight different chapters in the southwest region of the Navajo Nation, Arizona, USA)

Name of program	Winslow Indian Health Care Centre Medical Mobile Vehicle
Jurisdiction	Eight different chapters in the southwest region of the Navajo Nation, Arizona, USA

Main Source	https://www.wihcc.com/new-medical-vehicle.html (24)
Program type/ description	Mobile Clinic The functional interior design of WIHCC’s medical vehicle also thoroughly reflects the experience of a brick-and-mortar medical office into a mobile setting. With a distinct waiting area complete with a lavatory, a rear exam room, and a lab area for blood draws, patients who use the vehicle feel like they are in an office. The tasteful color palette found inside also helps create a calm atmosphere for their patients.
Goals of program	<ul style="list-style-type: none"> • main focus is providing exceptional medical and preventive care while reaching patients who would otherwise live too remotely to obtain these services.
Program Components	<ul style="list-style-type: none"> • Braun wheelchair lift, waiting area complete with a lavatory, a rear exam room, and a lab area for blood draws.
Service users/ eligibility	<ul style="list-style-type: none"> • eight different chapters in the southwest region of the Navajo Nation
Service providers	<ul style="list-style-type: none"> • unclear
Funding	Unclear beyond being “crafted” by Winslow Indian Health Care Center, which is a non-profit (https://projects.propublica.org/nonprofits/organizations/810549382).
Other references	https://equityhealthj.biomedcentral.com/counter/pdf/10.1186/s12939-020-01306-0.pdf (25)
Web links	https://www.ldvusa.com/truck/winslow-indian-healthcare-center/
Contact	Winslow Indian Health Care Centre: <ul style="list-style-type: none"> • (928) 289-4646

Appendix B:

Primary Care Access Programs in Newfoundland and Labrador

This section presents a number of programs, most of them operated by the Labrador-Grenfell Health Authority, that are designed to improve access to primary care and other health services for their rural and remote populations. While the CHRSP *Snapshot Reports* were designed to focus on programs outside of the province, CHRSP researchers wish to draw our readers’ attention to the substantial work undertaken in Labrador- Grenfell Health and elsewhere in the province to improve access to care. In order to supplement the discussion on improving access to care, partners in Labrador-Grenfell assisted us in compiling the following list of examples.

Ambulatory Care Clinics

Name of Program	Ambulatory Care Clinics
Description	Ambulatory care clinics continue to improve access for clients within five sites, Northwest River, Roddickton, Happy Valley Goose Bay, St. Anthony and Labrador West. The ambulatory care departments offer a walk-in service and appointment system. Ambulatory care provides a patient centered approach to care in a comfortable place with decrease wait times to receive treatments. This has also decreased the number of visits to the Emergency depts.
Website	https://www.lghealth.ca/your-health/programs-and-services/population-health/ambulatory-care/

Community Supports Program

Name of Program	Community Supports Program
Description	LGH clients may avail of services to support them within their home communities through Community Supports Program including home support services, home care nursing (as above), Special Assistance Program (medical supplies, equipment, home oxygen), behaviour management services, etc.
Website	https://www.lghealth.ca/your-health/programs-and-services/therapeutic-intervention-and-rehabilitation-services/

Eastern Health Rehabilitation Team Collaborative Clinics

Name of Program	Eastern Health Rehabilitation Team Collaborative Clinics
Description	Collaborative clinics are being held with the Adult Rehabilitation Program at Eastern Health (EH) to provide opportunities to deliver specialized seating, spasticity and other clinics not previously offered within the LGH region. Such efforts promote access to services closer to home, while eliminating the need to travel outside the region for these services.
Website	https://phc.easternhealth.ca/health-clinics/metro-clinics/collaborative-team-clinic-ctc/

Home-Based Dialysis

Name of Program	Home based Dialysis
Description	Working in partnership with Indigenous and other community partners, a regional home-based dialysis (HBD) training center has been established at the Labrador Health Centre in Happy Valley-Goose Bay and work continues on the expansion of HBD in remote communities. As a result, client was supported to return to the community of Natuashish, while plans are underway to expand to clients from Shetshatshiu in early 2023. This approach will provide the opportunity for clients to receive services within their communities, thus avoiding relocation of clients and families to larger centres.
Website	https://www.gov.nl.ca/hcs/files/Labrador-Grenfell-Health-Annual-Report-2019-20.pdf [page 41]

Home Care Program

Name of Program	Home Care Program
Description	LGH provides nursing care in clients home for assessments, wound care, follow-up post discharge, injection and other nursing tasks.
Website	https://www.lghealth.ca/wp-content/uploads/2018/04/home-support-program-client-handbook_opt.compressed.pdf https://www.lghealth.ca/your-health/programs-and-services/therapeutic-intervention-and-rehabilitation-services/

Home IV Program

Name of Program	Home IV Program
Description	LGH provides home IV therapy to client who are non-ambulatory and are unable to come to the clinic. Nurses can provide the services and can also teach family and client to self-administer IV meds with support from the health care team.
Website	https://www.lghealth.ca/your-health/programs-and-services/population-health/ambulatory-care/

Janeway Lifestyle Clinic

Name of Program	Janeway Lifestyle Clinic
Description	The Janeway Lifestyle Program works with families whose children have been identified as having a risk factor for the development of a chronic disease such as high cholesterol, high blood sugars, high blood pressure, liver disease and weight concerns. Through coordination with LGH, the team travels to Central Labrador twice a year.
Website	Janeway Lifestyle Program – Children and Women's Health Program (easternhealth.ca)

The Labrador Friendship Center Seniors Bus (Happy Valley-Goose Bay)

Name of Program	The Labrador Friendship Center Seniors Bus (Happy Valley-Goose Bay)
Description	The Senior's Van Service has an open door policy and is available to aboriginal and non-aboriginal alike for a minimal charge per run. The seniors use the service for transportation to and from medical appointments, shopping, errands, visiting friends and relatives, paying bills, taking part in traditional activities and community events plus others.
Website	Labrador Friendship Center Seniors Van

Personal Care Home visits

Name of Program	Personal Care Home visits
Description	The Nurse Practitioner visits the personal care homes (PCH) to support end of life and palliative care on the Northern Peninsula. PCHs are also monitored and supported by the Community Supports Program team including social work, nursing, behaviour management services, rehabilitative services etc.

Website	https://www.lghealth.ca/your-health/programs-and-services/population-health/community-health/palliative-care-home-and-public/ https://www.lghealth.ca/your-health/programs-and-services/therapeutic-intervention-and-rehabilitation-services/ https://www.lghealth.ca/your-health/programs-and-services/therapeutic-intervention-and-rehabilitation-services/
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Schedevac

Name of Program	Schedevac
Description	Labrador-Grenfell Health offers an air “Schedevac” service to the Labrador coast for scheduled medical appointments and discharge home. This service generally operates Monday, Wednesday and Friday.
Website	https://www.lghealth.ca/improvements-to-labrador-grenfell-health-medical-transportation-beginning-july-1-2019/

Senior Bussing Partnership

Name of Program	Senior Bussing partnership
Description	LGH has partnered with community organizations to encourage community usage of the seniors bus located at the Labrador South Health Center and John M Gray in St. Anthony. Through this partnership, seniors have access to the bus to attend appointments and other social activities.
Website	

Support for the Housing Hub Emergency Shelter

Name of Program	Support for the Housing Hub Emergency Shelter
Description	A Nurse Practitioner, Licensed Practical Nurse and a Mental Health and Addictions Counsellor provide support to clients of the Housing Hub once per week.
Website	https://www.gov.nl.ca/exec/las/august-5-2022-the-housing-hub/

Trust Transit (Labrador West)

Name of Program	Trust Transit (Labrador West)
Description	Provides transportation services for residents of Labrador west for \$4 round trip. Trips need to be booked 24 hours in advance with appointments being priority
Website	Trust Transit Facebook Page

Appendix C: References

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