



Improving Primary Care in our Communities

The Central Interior Rural Division of Family Practice is a group of family doctors committed to improving primary care in our communities. We are working together with Interior Health, First Nations Health Authority, Provincial Health Services Authority and with local health services and First Nations communities to help more residents have access to primary care and maintain the best possible health.



Learning About Local Primary Care

Through 2014, we consulted with local residents, patients, doctors, medical office staff, health service providers, First Nations groups, seniors groups and other health care professionals to learn more about our local health care needs. Some of the key challenges we identified:

- There is poor access to quality primary care for vulnerable populations, particularly for First Nations communities, people with mental health and substance use challenges and frail seniors.
- Central Interior residents have slightly higher rates of certain diseases than the provincial average, including hypertension, mental health issues, osteoarthritis, lung disease and diabetes.¹
- Ten percent percent (an estimated 3,800) of Central Interior residents are considered to be living in a high or very high state of ill health.²
- The supply of family doctors is a significant concern in the region.



Addressing Our Challenges

Together with partners, the Central Interior Division has set out the following strategies to improve care quality and people's access to local primary care by:

- Improving access to primary care for First Nations people and those rural communities through telehealth services.
- Enhancing the quality of patient care and creating capacity to take on more patients through improved family doctor practice supports and greater efficiencies .
- Improving continuity of care through an expanded physician coverage program.

About Our Community

- Communities include 100 Mile House, Williams Lake and Tatla Lake with a population estimated at 38,865.²
- Of 48 family physician members:
 - 71 percent work in Williams Lake across 6 clinics with 1 hospital.
 - 27 percent work in 100 Mile House across 3 clinics and 1 hospital with 1 family doctor working in a clinic in Tatla Lake.
 - 59 percent have a full-time practice and 9 percent have a part-time office practice.³
- Nurse practitioners work in Williams Lake, Chilcotin and a rural Cariboo-Chilcotin First Nations community.

About A GP for Me

A GP for Me is a joint effort of the Government of BC and Doctors of BC, and is one part of an integrated provincial approach to provide primary health care services for all British Columbians.

Together, we are working to provide more accessible, effective, patient-focused health care, so that patients achieve their best possible health close to home.

² BC Stats (2011a). Municipal Census Populations.

³ A GP for Me Physician Practice Survey.

¹ PHSa, 2013a, BC Community Health Atlas

² BC Ministry of Health. (2013c). Resource Utilization Band. Primary Health Care and Specialist Services Branch. Unpublished Report.



British Columbia Medical Association



Projects in our Communities

Access for First Nations and Rural Communities through Telehealth

We are working to enhance access and quality of care for First Nations and rural communities by:

- Partnering with First Nations Health Authority to expand patient access to services remotely, by equipping five physician practices with the technology to hold video appointments with patients who visit health centres in select First Nation communities.
- Enhancing telehealth access. The Division is working with one rural physician to improve access to primary care through telehealth services for patients living in our most remote locations.
- Promoting Indigenous Cultural Competency Training for family doctors and medical office staff in the area.

Practice Support and Efficiency

We are supporting family doctors in their practices to enhance the quality of services to their patients, accomplished by:

- Optimizing the use of electronic medical records (EMR) by family doctors and medical office assistants with training provided by EMR experts.
- Providing education on new models of care, including team-based care.
- Building community linkages between clinics and community services. This includes the November 2015 launch of the FETCH (For Everything That is Community Health) database that lists community health services, making it easier for doctors to find, refer and/or recommend local supports for patients.

Physician Coverage Program

We are working to provide continuity of patient care through an enhanced physician coverage program when family doctors take time off, and to make working in the community more attractive to potential new family doctors. This includes various activities:

- Producing promotional materials to reach out to locum doctors, coverage strategies and incentive programs promoting a financial and business model for returning residents/student/locums. Implementing a strategy for family doctors who leave the community.
- Engaging the services of a professional recruiter.
- Engaging retiring family doctors in locum opportunities.
- Creating promotional videos to aid in physician recruitment efforts.

Activity Timeline

