

Doc Talk- March 2016

Your monthly update from the Chilliwack Division of Family Practice

Upcoming Events

March 8, 15, 22 and 29: [8th Annual Mini Medical School](#)

Time: 7 pm - 9 pm

Location: Chilliwack Cultural Centre at 9201 Corbould Street

To register, [click here](#) or call 604 702 4757

The topics for this year's Mini Medical School are:

- March 8: Have you heard of herd immunity? Public health strategies for keeping you well
- March 15: Mental Health Matters - Depression, Anxiety and More
- March 22: How to Really Talk to Your Doctor
- March 29: End of Life Care - Having an Exit Strategy for Life

For posters and online promotional content, please contact [Asma Farooq](#).

March 11: [Fetal Alcohol Syndrome Training](#)

Time: 9 am - 4 pm

Location: Neighborhood Learning Centre at 46361 Yale Road

To RSVP, [click here](#).

Chilliwack Community Services received Public Health Agency of Canada / Health Canada funding for Fetal Alcohol Syndrome (FAS) training. The facilitator is asking interested participants for feedback about what they would like to learn about at the training session (for example, prevention or helping those with FAS). If you are interested in participating, please provide your ideas / feedback to [Lana Hergott](#), Perinatal Support & Family Resource Program Practitioner, Chilliwack Community Services.

March 17: [Providing Diversity Competent Care to Refugee Clients In-Person Workshop](#)


Presented by Fraser Health Diversity Services and DIVERSEcity Community Resources Society this workshop is for healthcare staff and all those interested in learning more about refugee health issues and context from experts in the field. The workshop is open to GPs and their staff, however CME credits are not attached to this workshop. The

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Free Information Session
Talk to local doctors and other health professionals on important medical topics.

Join us for our 8th Annual Mini Med School
An evening series of informal discussions and quite possibly life-altering learning.

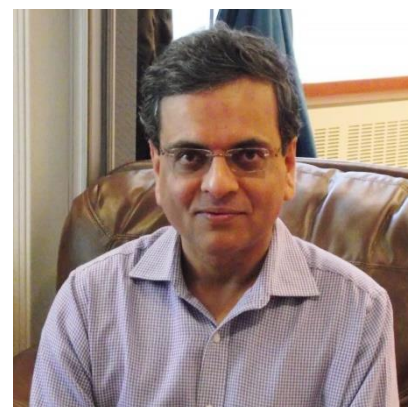
MAR 8	Heard of herd immunity? Public health strategies for keeping you well
MAR 15	Mental Health Matters: Depression, Anxiety and More
MAR 22	How to Really Talk to Your Doctor
MAR 29	End of Life Care: Having an Exit Strategy for Life

All sessions are from 7:00 – 9:00 pm at Chilliwack Cultural Centre – 9201 Corbould Street.
REGISTRATION NOT REQUIRED, BUT ENCOURAGED.
Register at: www.universe.com/minimed2016
Light refreshments and snacks will be served.

For more info please call 604-702-4757
www.divisionsbc.ca/chilliwack

Primary Sponsor:  Chilliwack Division of Family Practice
A Division of Fraser Health
 

Mar 8, 15, 22 & 29: [8th Annual Mini Medical School](#)



Doctor of the Month

two workshop facilitators are Case Managers at DIVERSEcity Community Resources Society. They work to provide support in language, cultural sensitivity, and systems navigation to the most vulnerable immigrant and refugee newcomers in the Surrey, North Delta and Langley communities, with the goal of supporting their successful integration into the community. [Click here](#) to register. For more information, email diversity.services@fraserhealth.ca or call 604-953-5112 x 768109.

March 17 & 18: [Trauma Informed Practice Workshop](#)

Time: 9 am - 4 pm
Location: Conference Room 1275, Fraser Canyon Hospital at 7 Ave, Hope
To register, [complete this form](#) and fax to Cindy Vogt 604-466-6987 or email Cindy.Vogt@fraserhealth.ca

Fraser Health Mental Health & Substance Use Services invites you to participate in this two-day workshop to increase your awareness, knowledge and skills regarding trauma informed practices. This workshop will focus on building your capacity to reduce re-traumatizing experiences for people you serve in reception, intake, triage, outreach, support, counselling, education and leadership roles. As our system recognizes the high prevalence of histories of trauma that clients and patients have experienced, the need for all service professionals to be trauma informed is vital. Thus, both clinical and non-clinical roles are encouraged to register and participate.

March 18: [Our Shared Journey: From First Responders to the Spirit World](#)

Time: 9:30 am - 4 pm
Location: Stó:lō Longhouse at 7201 Vedder Road Chilliwack
Space is limited. RSVP to Rhonda.George@fnha.ca or Jodie.Millward@fnha.ca.

This interactive gathering will bring community members and service providers together to learn about death protocols in community from a cross-cultural panel of professionals and knowledge keepers. It will outline how we can work together and respect each other's roles along the journey of an indigenous person passing away.

March 31: Local Indigenous History and Cultural Awareness Training

Time: 9:30 am - 3:30 pm
Location: Stó:lō Nation Government House
Stipends available for physicians
 This session will bring cultural safety awareness to providers working with and for aboriginal people, inclusive of the historical impacts that are cumulative and have a multigenerational impact. It will explore why as Indigenous peoples of Canada,

Dr. Deepak Grover



[Locally Produced Mental Health Awareness Video Aims to Reduce Stigma](#)

Don't have a family doctor or nurse practitioner?
 Looking for one in your community?

CALL PAM

How does PAM work?
 (Patient Attachment Mechanism)

You call and speak to our Patient Attachment Coordinator.

You fill out a Patient Intake Form. We may call you for more info once the form is submitted.

If needed, our team of family doctors and nurse practitioners will care for you until you are transitioned to a community practice.

9 am to 3 pm Monday to Friday
 1-844-795-0034 Hope and the Fraser Canyon
 604-795-0034 Chilliwack, Agassiz, and Harrison

For more information, visit www.divisionsbc.ca/chilliwack

A GP for Me Support for PAM (Patient Attachment Mechanism)

If you may be able to accept patients through PAM, please [complete this form](#) and fax to 604 795 4111, or call 604 795 0034 to speak to Patient Attachment Coordinator, Jennica Grenier.

InPHARMatIon Update Issue 10 | February 2016

The 120 mmHg SPRINT:

Can your patients' kidneys and electrolytes keep up?

February is not only famous for Valentine's Day, but also Heart Awareness Month. Hypertension affects 29% of Canadians! Over the past decade, blood pressure (BP) targets have essentially been "floating targets" for different patient populations. Current Canadian BP targets are as follows: standard <140/90 mmHg, elderly <150/90 mmHg, diabetes mellitus (DM) <130/80 mmHg, and chronic kidney disease (CKD) <140/90 mmHg.

A randomized BP control trial, SPRINT, was recently published, which assessed a target systolic BP (SBP) of <120 mmHg (intensive treatment) versus 130-139 mmHg (standard treatment) in 9,361 patients. Included patients were 250 years of age with a SBP between 130-180 mmHg and at high risk for cardiovascular (CV) events (≥75 years of age, established/subclinical CV disease (CVD), CKD, or a Framingham Risk Score of ≥15%). Excluded were patients with DM, stroke/transient ischemic attack, estimated glomerular filtration rate <30 mL/min, left ventricular ejection fraction <35%, previous SBP drop <110 mmHg, and nursing home residents. The planned trial duration was 5.6 years, but it was stopped early (median 3.8 years) due to benefit. The primary composite outcome (CV death, acute coronary syndrome, stroke, heart failure [HF]) was decreased with intensive treatment by 19% (2.7% vs 6.8%, p<0.001; number needed to treat [NNT]=43). Furthermore, HF, CV death, and all-cause mortality were also reduced with intensive treatment; however, neither myocardial infarction nor stroke were significantly different between groups. Baseline SBP was ~140 mmHg, and SBP achieved over the entire study was ~122 mmHg and ~135 mmHg with intensive and standard treatment, respectively. Patients on an average of two antihypertensive

agents at baseline, which only increased in the intensive treatment group to three agents. Furthermore, angiotensin-converting enzyme inhibitors/angiotensin receptor blockers (77% vs 55%) and diuretics (53% vs 49%) use was greater with intensive treatment. There was no difference in serious adverse events (SAEs); however, SAEs related to the intervention were increased with intensive treatment by 2.2% (4.7% vs 2.5%, p<0.001; number needed to harm [NNH]=46). Emergency department visits or SAEs were greater with intensive treatment, specifically electrolyte abnormalities (NNT=100), hypotension (NNT=71), stroke (NNT=91), and acute kidney injury (NNT=16).

SPRINT was a well-conducted trial funded by the National Institute of Health. It evaluated clinically meaningful outcomes with compelling results—a NNT=43 over 3.8 years for a composite of CV events, though at the expense of a NNH=46 for SAEs related to intervention. The treatment effect may have been exaggerated, as the study was prematurely discontinued, and the long-term effects remain unknown. Of the study population, 28% were ≥75 years of age, and a pre-specified analysis of this subgroup showed benefit; however, long-term care patients were excluded, and frailty was not assessed. Application of SPRINT in practice involves careful selection of patients (note—many "typical" patients were excluded, i.e., DM) who are willing to take, and able to tolerate, multiple anti-hypertensives. Close monitoring of BP, kidney function, and electrolytes are warranted.

References:
 1. [CMAJ 2015;188:48-56](#)
 2. [Can \(Cardiol\) 2015;13:409-48](#)
 3. [J Am Med Assoc 2015;313:2539-54](#)

Written by Martin Lefkowitz, MD, ACPC, Director of Pharmacy Resident, University of British Columbia Edited and Reviewed by Dr. John Barry, BSc, BSc(Pharm), PharmD, ACPC

Phone (604) 977-3219 Fax (604) 977-3219 Email John.Barry@fraserhealth.ca Twitter @JLefkowitz

we are where we are today, in terms of all the negative statistics regarding social and health related determinants.

April 9: Save the date - 8th Annual Fraser Valley Stroke Symposium

Location: Sheraton Guildford Hotel, Surrey

Time: 7:30 am - 12:30 pm

More information including agenda to follow. To reserve your seat, email [Kevin Harrison](mailto:Kevin.Harrison@fraserhealth.ca).

Doctor of the Month

Dr. Deepak Grover specializes in orthopedic surgery with particular interest in joint replacements and community orthopedics. He has been practicing full-time in Chilliwack for almost nine years and loves living in a small town while being only a short drive away from a big city.

Locally Produced Video Aims to Reduce Mental Health Stigma

The Chilliwack Local Action Team (LAT) for the Child and Youth Mental Health Substance Use Collaborative has joined forces with the BC Hockey League (BCHL), Chilliwack Chiefs, Canadian Mental Health Association (CMHA) and the Fraser Valley Health Care Foundation, to encourage conversations about mental health. Efforts to put mental health in the spotlight have been inspired by youth on the Chilliwack LAT, who formed a task group to develop [a mental health awareness video](#), featuring several Chilliwack Chiefs hockey players and local youth.

Resources for Physicians for Refugee Care

Useful information and links to refugee care resources for both, physicians and patients are being posted on the [Division website](#). Please [let us know](#) if you would like any additional resources shared here.

A GP for Me Update

Here's your monthly A GP for Me update on how the Patient Attachment Mechanism (PAM) has been working, for the month of January.

of calls to the PAM hotline (initial intake calls only): **178**

of completed PAM intake forms: **134**

of patients that filled out a PAM intake form but found a GP independent of PAM: **21**

of patients referred by PAM to a community GP: **120** (complex: **58**, simple healthy: **62**)

February Issue of InPHARmation on DivIT

[Log in here.](#)

Go to Your Division>Physician Resources>InPHARmation Update to access this issue.



[Video on Appropriate Access to Care: When to go Where for What type of care?](#)

Fraser Health Diversity Services In-Person Workshop:

Providing Care to Refugee Clients

Are you interested in the health issues of refugees?
Are you hoping to help refugees navigate the barriers in accessing health care?
Are you looking for relevant resources or tools to bring back to your team?

Please join InPharmCity Community Resources Society in partnership with Fraser Health Diversity Services for a workshop on understanding the context and important issues when providing care to refugee patients.

When: Thursday, March 17, 2016
Time: 1:00pm - 4:00pm
Location: Central City Office - 400 E 35th 102nd Ave
Fee: No cost

For more information:
email - diversity.services@fraserhealth.ca
phone - 604-953-3112 x 708309

To register:
<https://ccrs.uh.ca/Catalog.aspx?id=5819>

March 17: [Providing Diversity Competent Care to Refugee Clients In-Person Workshop](#)



Our Shared Journey:

From First Responders to the Spirit World

Join us for a cultural awareness and death protocols session hosted by the First Nations Health Authority and BC Coroners Service.

"Our Shared Journey: From First Responders to the Spirit World" will bring community members and service providers together to learn about death protocols in community from a cross-cultural panel of professionals and knowledge keepers. This interactive gathering will outline how we can work together and respect each other's roles along the journey of an indigenous person passing away.

We would like to take this time to gather, share death protocols, share a meal and build relationships to support each other better in the future. This gathering will provide a teaching and learning opportunity for everyone involved.

Who: Everyone Welcome
Date: Friday, March 18, 2016
Location: Sto:lo Longhouse
7201 Vedder Road
Chilliwack, BC V2R 4G5

Time: 9:30am to 4:00pm

Speakers: RCMP, BC Ambulance, Hospital and Emergency Room, BC Coroners Service, Funeral Services and local First Nations Knowledge Keepers

Lunch is provided and will be served at 12:00pm.

Space is limited, so please RSVP by February 1, 2016 to Rhonda.George@fnha.ca or Jodie.Millward@fnha.ca.

March 18: [Our Shared Journey: From First Responders to the Spirit World](#)

of Chilliwack doctors accepting patients: **13**
 # of primary care clinics directly accepting patients: **4** (Agassiz Community Health Centre, Chilliwack Primary Care Clinic, Hope Medical Centre, Stó:lō Community Health Centre)
 Total number of patients referred out so far: **1815** (complex: **953**; simple healthy: **862**)
 If you are able to accept any patients into your family practice, [please let us know](#).

Support for Patient Attachment Mechanism and the Chilliwack Primary Care Clinic

Our sincere gratitude to all the family doctors who have been able to accept patients through PAM (Patient Attachment Mechanism) and/or have provided care at the Chilliwack Primary Care Clinic! As you can see from the numbers above, we are making a significant positive impact in our communities. Your support has been crucial to making PAM the one point of contact for all patients without a primary care provider in our community and to the functioning of the Chilliwack Primary Care Clinic. As of January 2016, in collaboration with your colleagues that have agreed to take on patients, through PAM we have been successful in transferring **1,815** patients into the community, 953 of which were complex. This strategy is intended to help keep unattached, sometime difficult, patients out of F-calls in the hospital and walk-ins. Those patients determined not suitable for a family practice will remain with the Chilliwack Primary Care Clinic. If you may be able to accept patients through PAM, [please complete this form](#) and fax to 604 795 4111 or call 604 795 0034 to speak to Patient Attachment Supervisor, Jennica Grenier. If you are interested in becoming involved with the Chilliwack Primary Care Clinic, please contact [Elly Meyerink](#).

Resources for Patients

March 8, 15, 22 and 29: [8th Annual Mini Medical School](#)

Choose to Move

[Choose to Move](#) is an evidence based 6-month physical activity program for 65+ adults who are currently inactive, have a chronic condition and are medically cleared for exercise by a physician. It is an initiative under Active Aging BC from the Ministry of Health and is in partnership with the Centre for Hip Health and Mobility. Participants are connected with a Certified Kinesiologist to help create their individualized physical activity action

Choose to Move



Be active with chronic conditions

Choose to Move is a 6-month, choice-based physical activity support program informed by the best evidence. It will enhance and identify physical activity opportunities for adults 65+ who are currently inactive and living with chronic conditions. Working with a certified Activity Coach, participants develop a personalized physical activity Action Plan customized to their interests, goals, resources and abilities. Participants will be supported through regular motivational group meetings with peers in Choose to Move as well as a one-on-one consultation and regular check-ins with their Activity Coach.

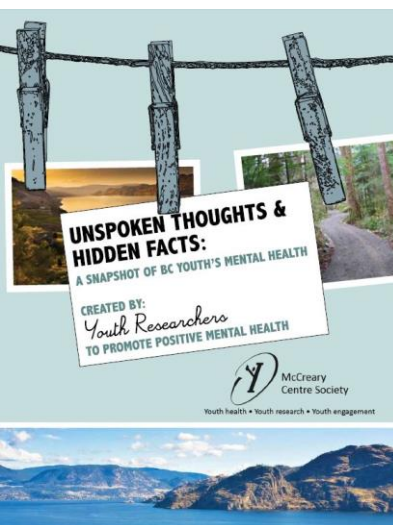
Contact us to learn more or to register!

Chilliwack Family YMCA
 Robert Lee YMCA (Vancouver)
 Tong Louie Family YMCA (Surrey)

T: 604.320.5813
 E: choosetomove@gyymca.ca
 W: gyymca.ca



Choose to Move Program



UNSPOKEN THOUGHTS & HIDDEN FACTS:
 A SNAPSHOT OF BC YOUTH'S MENTAL HEALTH

CREATED BY:
 Youth Researchers
 TO PROMOTE POSITIVE MENTAL HEALTH

McCreary Centre Society
 Youth health • Youth research • Youth engagement

Resource for Physicians:
[Unspoken Thoughts and Hidden Facts: A Snapshot of BC's Youth Mental Health](#)



Trauma Informed Practice Workshop Enhancing Physical, Psychological and Cultural Safety

March 17 & 18, 2016 from 9 am to 4 pm
 Fraser Canyon Hospital - Conference Room 1275 - 7 Ave, Hope, BC

Fraser Health Mental Health & Substance Use Services invites you to participate in two-day workshop to increase your awareness, knowledge and skills regarding trauma informed practices. Specifically, this workshop will focus on building your capacity to reduce re-traumatizing experiences for people you serve in reception, intake, triage, outreach, support, counselling, education and leadership roles. There is ample evidence to suggest that trauma informed practices has significant influence towards client and patient outcomes. As our system recognizes the high prevalence of histories of trauma that clients and patients have experienced, the need for all service professionals to be trauma informed is vital. Thus, both clinical and non-clinical roles are encouraged to register and participate.

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| <p>Using interactive presentations and breakout sessions, this workshop intends to:</p> <ul style="list-style-type: none"> increase knowledge, skills and awareness for trauma informed practice; enhance your response to trauma disclosures from clients, patients, families; increase your understanding of trauma exposure and how to support you in your practice; enhanced awareness and understanding of Aboriginal and other diverse cultures to increase cultural safety; increase capacity for welcoming spaces in reception, receiving and waiting areas. | <p>Food & Refreshments: light refreshments and lunch will be provided. Please complete the registration on the next page to ensure we have your food allergies and considerations.</p> <p>TIP Guides and Handouts: All materials will be provided to you on the first day.</p> <p>Workshop Cost: This 2-day workshop is provided free of charge with funding support from Fraser Health Mental Health & Substance Use Services & BC's Drug Treatment Funding Program (DTFP). Local support is provided by Hope and Area Transition Society (HATS).</p> <p>To Register: Register by completing the next page and emailing or faxing completed form as instructed.</p> |
|---|--|

March 17 & 18: Trauma Informed Practice Workshop

plan, are provided with monthly motivational meetings and receive regular check-ins. The program offers presentations to doctor's offices; if you are interested in hosting a presentation or would like to learn more, please contact [Stacey Stewart](#).

Videos on Appropriate Access to Primary Care

The Division has produced [a series of 10 short videos](#) on how to appropriately access primary care services. Please contact [Asma Farooq](#) if you would like to have these videos set up to play on your clinic screens.

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Chilliwack Division of Family Practice
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