

WE'RE ALL IN THIS TOGETHER

Annual Report
2019/2020



Chilliwack
Division of Family Practice
A GPSC initiative

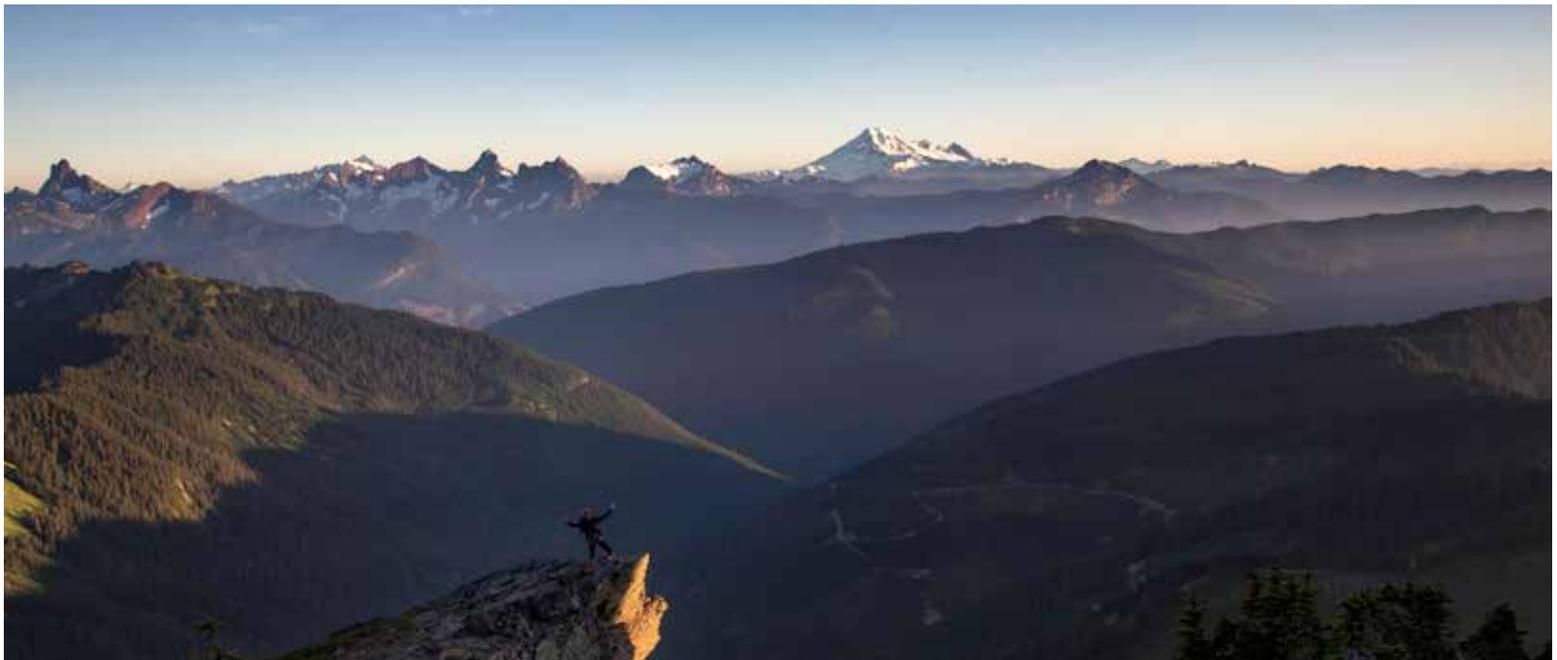
We work on the traditional, ancestral, and unceded territory of the Coast Salish, Stó:lō, and Nlaka'pamux peoples.

Table of Contents

We are the Division of Family Practice	3
Message from the Board Chair	4
Board of Directors	5
Message from the Executive Director	6
Meet the Division Team	7

TOP 4 Highlights of the YEAR

04		In the Community	8
03		Member Support	11
02		Primary Care Network	16
01		Covid-19 Response	17



*Front cover image, pages 2, 3 and 5: Fred Meyerink Photography
Peak of Mount Cheam, featuring Elly Meyerink*

Chilliwack Division of Family Practice
2019 - 2020

WE ARE the Chilliwack Division of Family Practice

The Divisions of Family Practice initiative is sponsored by the General Practice Services Committee, a joint committee of the BC Ministry of Health and the Doctors of BC.

The purpose is to improve patient care, increase family physicians' influence on health care delivery and policy, and provide professional satisfaction for physicians.



Membership

123 Family Physician members and 12 Nurse Practitioner associate members representing primary care providers in communities within the local health areas of Chilliwack, Agassiz-Harrison, and Hope/Fraser Canyon. The population served is over 116,000, and over 40% of the geography of Fraser Health.

Our Areas of Practice

Serving Chilliwack, Hope, District of Kent, Harrison Hot Springs and communities in the Fraser Canyon, including 22 First Nation communities.

VISION & MISSION



Chilliwack
Division of Family Practice
A GPSC initiative

VISION: Extraordinary health care by engaged family practice providers.

MISSION: To empower family practice providers to deliver, in partnership, access to longitudinal, comprehensive health care.

WE ARE:

- Innovators • Influencers • Facilitators • Synthesizers
- Implementors • Coordinators • Connectors • Translators

WE WORK IN PARTNERSHIP COLLABORATIVELY WITH:

- Physicians • Nurse Practitioners • Specialists
- Health Authorities • Patients • Community

OUR DECISION MAKING IS GUIDED BY BEING:

- Expansive • Adaptive • Time Efficient • Supportive of Work/Life Balance
- Information and Data • Priority Driven • Good Governance

STRATEGIC PRIORITIES:

1. Team Based Care
2. Human Resources
3. Wellness
4. Full-Service Family Practice
5. Leadership



A Message from the BOARD CHAIR



Dr. Josh Greggain

Extra-ordinary times. Extra-ordinary work. Extra-ordinary people.

It is a challenge to reflect about the pre-COVID period, only 7 months ago. A time when we could gather somewhere other than Zoom, when we could see a spectrum of patients in our offices, and we could shake hands and hug one another. Last November 2019, we were able to celebrate our AGM at the Coast Hotel with nearly all of our members and partners. This year has been extra-ordinary, on so many levels.

In February of 2020, we gathered for a Wellness retreat, where physicians, nurse practitioners, specialist colleagues and families learned mindfulness for the sake of our ongoing well-being. As wellness is a core value of the Division, it was fortuitous that we had set our compass before we knew the extra-ordinary work that lay ahead.

Over the last 6 months, the Chilliwack Division of Family Practice has empowered family practice providers to deliver longitudinal, comprehensive health care, in these extra-ordinary times. From reshaping Hospital Care, redesigning Long-Term Care, securing PPE, offering high-risk clinics, and facilitating a massive pivot to virtual care in our offices. This has taken our values of responsiveness and collaboration to a whole new level.

At the same time, in April 2020, we were formally approved for our three Primary Care Networks and have put a team together including several new members: physicians, nurse practitioners, allied health and staff. Some of our inaugural working groups including Indigenous and Mental Health are beginning to address the extra-ordinary needs of the communities, and the health care needs that have been amplified through the pandemic. With the most providers the Chilliwack Division has ever seen and the foundation of our Patient Attachment Mechanism, our ability to attach new patients has never been more productive.

None of this extra-ordinary work, in these extra-ordinary times, could have happened without you, the extra-ordinary people. I reflect the willingness for the physicians to cohort into call groups during the week, to reduce the COVID-risk at our inpatient units. I admire your adaptability to shift your work onto telehealth and virtual care. I am in awe of Katrina Beppe, our Executive Director, in the herculean effort she has put forth in leadership. I commend all our division staff who have worked tirelessly in a whole new context. I exalt the courage that has taken each of you to maintain your personal, familial, professional, financial, and mental well-being during this last year, while acting as stabilizing forces for your patients and your loved ones.

You are all extra-ordinary.

As I complete my term as board chair, I am fiercely proud of what we have been able to do, together, while we have been apart. It has been an honour to serve as chair and look forward to the next chapter of the Division.

Although I long for the end of the pandemic so we can be in-person again, I believe that the Chilliwack Division of Family Practice, all of our members, and partners truly do provide extra-ordinary health care, no matter the circumstance.

With gratitude,

A handwritten signature in black ink, appearing to read 'Josh Greggain'.

Dr. Josh Greggain

BOARD of DIRECTORS

Board of Directors 2019-2020



Dr. Joshua Greggain
Board Chair



Dr. Lori Laughland
Vice Chair



Dr. Dominic Black
Secretary/Treasurer



Dr. Shaik Fida Ali
Director



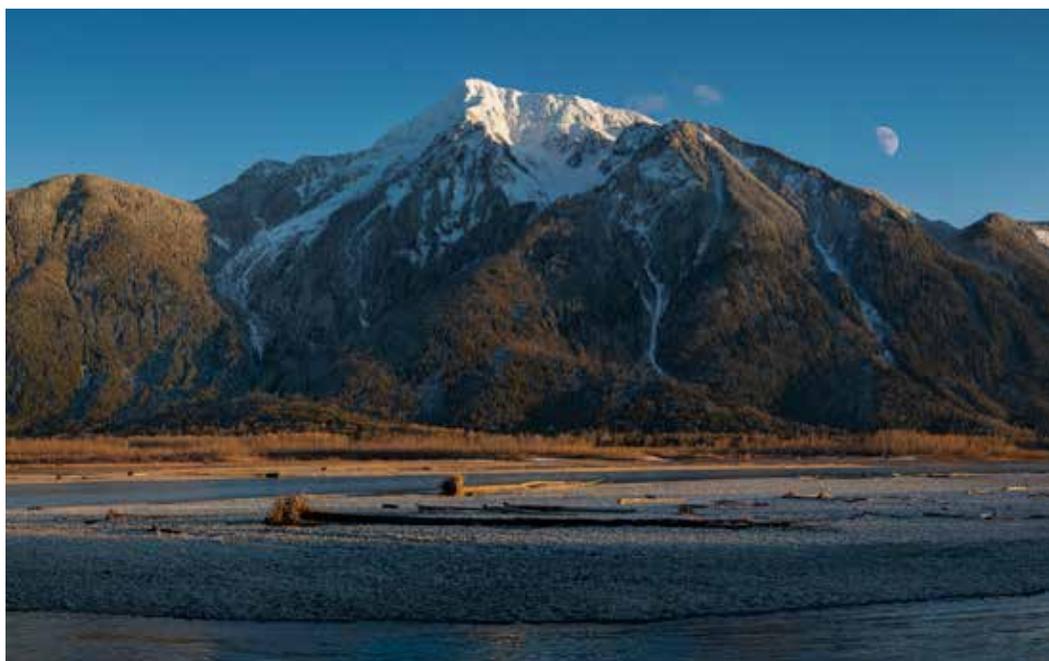
Helen Edwards
Director



Joanne Cecchi
Director



Shari Sajjadi
Director



A Message from the EXECUTIVE DIRECTOR



Katrina Bepple

To say I am privileged to be part of this team and community is the understatement of the year. And that year is 2020. While typically our annual report focuses on the last fiscal (Apr 1 – Mar 31), to ignore the last few months would do a disservice to the significant effort you, our partners, and our communities have put in to supporting each other as we live through a global pandemic. From pivoting in hospital and long-term care, a mass migration to virtual care, supporting the implementation of a self-isolation site for homeless, and ongoing internal and external communications, we've demonstrated the strength that you, our members, bring to our communities.

We wouldn't have been able to undertake the seismic change that we did without the trust, cohesion, and autonomy that I see in our medical community. Our family physicians and nurse practitioners showed up every day during a time of high stress and constant change to care for patients where ever care was needed, in acute, community, or virtually. This was also a time where kindness and support came from each other and the community to provide light in the darkness, and in fact rang quite loud at 7pm every night for a while.

The team we have at the Division is exceptional. They show up every day to support our members, their patients, and partners. When we had to pivot so significantly in March during our first response to COVID-19, they were without question all hands on deck. We learned a lot those first few months, but one of my main take-aways, this is the team dreams are made of. I am so thankful for the significant amount of work they do in the background to keep this ship sailing smoothly.

I would also like to specifically thank Dr. Josh Greggain, our outgoing Board Chair, for his ongoing leadership and commitment to community. Advocating for our communities at the regional and provincial level became an almost daily activity, and I am so thankful that we have such a strong, informed, passionate, and persuasive voice advocating for us.

Oh, and one small little thing, right before COVID-19 became a big part of our reality, we received approval for our Primary Care Networks! That is **11.5M** in family physician, nurse practitioner, nursing, and allied health resources by 2024. We are starting with RN in practice, mental health and substance use, and social work in this first year, and look forward to working with you to make sure the services are meeting the needs of your patients.

Thank you. For everything that you do, for the human that you are, together we make this medical community strong and vibrant. To our members, our partners, and my team, I am grateful.

Sincerely,

A handwritten signature in black ink that reads "Katrina Bepple". The signature is fluid and cursive.

Katrina Bepple



The DIVISION TEAM

Administration



Katrina Beppe
Executive Director



Elly Meyerink
Operations Lead



Carol Van Muyen
Administrative Assistant

Programs, Projects and Primary Care Networks



Tracey Arsenault
Project Manager



Gracie Kelly
Indigenous Relations Manager



Lara McLachlan
PCN Manager



Bonita Nath
Research Assistant



Paula Reguly
Project Manager



Preet Toor
Project Coordinator

Fantastic Five MOA Team



Shannon Beer
Medical Office Assistant



Janetta Cook
Medical Office Assistant



Jennica Grenier
Patient Attachment Admin



Melanie Harrop
Medical Office Assistant



Naomi Wiebe
Medical Office Assistant



Health Clinics

In partnership, the Division supports a growing number of health clinics that address the needs of some of the most vulnerable and complex patients. As we are all acutely aware, the capacity challenges are immense within our community. We thank all of you who already take on unattached patients from the hospital, from the community, and from the various clinics we support as a Division.

Chilliwack Primary Care Clinic (Referral through Fcall or PAM only):

Dr. Robert Brooks, Physician Lead

The Chilliwack Primary Care Clinic (CPCC), in its ninth year of operations, continues to grow its team, increasing the number of family physicians and nurse practitioners that work alongside a clinical pharmacist, psychiatrist, and mental health clinician, all supported by a fantastic team of MOAs.

A partnership between the Division and Fraser Health, we serve as both a safety net for vulnerable patients not suitable for a traditional FFS community practice and as an attachment hub for those without primary care here in our community. The CPCC also provides services to the community including:

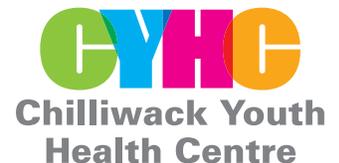


- Polypharmacy reduction and take-home naloxone training - our Clinical Pharmacist, Dr. Arden Barry, takes referrals from community providers for their patients.
- Family Medicine Discharge Clinic (FDMC) – we will see unattached patients discharged from hospital to stabilize them prior to transition to community. Since our inception in February 2019, we have been able to attach 2 out of every 3 patients referred to the FDMC to a long-term primary care provider, thanks to your ongoing support.

9,266 visits this year, serving **2,239** clients Jan - Sept 2020

Chilliwack Youth Health Centre (Drop-in):

The CYHC has two sites dedicated to wellness for youth and young adults ages 12-26 years. Youth don't need a referral—it's free, confidential, and drop-in. The team can address medical and mental health needs and can be seen for anything from acne to sexual health to counselling for issues related to anxiety, depression, substance use, gender identity, family conflict, peer conflict, school and life planning, and more!



The team includes family physicians, nurse practitioners, counselors, and a psychiatrist (referral required). The psychiatrist specializes in complex youth and young adults which could include those that are bipolar, schizophrenic, and/or have severe OCD, and likely require medication.

Dr. Melanie Madill, Physician Lead

WHEN: Tuesdays

WHERE: Neighbourhood Learning Centre, 46361 Yale Rd.

PHONE: 604-819-4603

WHEN: Thursdays

WHERE: Stó:lō Primary Health Care Clinic, 7201 Vedder Rd.

PHONE: 604-824-3219

Visit www.facebook.com/chilliwackyhc for current hours!

NLC: 348 (2019) + **104** (2020) medical visits

Stó:lō: 277 (2019) + **47** (2020) medical visits

27 (NLC) + **51** (Stó:lō) **virtual** visits this year

Jan - Dec 2019
Jan - Sept 2020

Jan - Sept 2020



Chilliwack Gender Care Clinic (Referral Needed):

Medical Advice, Peer Support,
Counselling and more ...

chilliwackgendercare@divisionsbc.ca
604.795.0034



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The Chilliwack Gender Care Clinic provides medical advice, social support, post-op care, and hormone and surgical readiness assessments by a social worker, GP and NP, to all ages of gender questioning, gender diverse, and transgender individuals. Referral is by primary care provider or patient/caregiver, and there is a waitlist.

Referrals can be made by email, fax or phone.
Email: chilliwackgendercare@divisionsbc.ca;
fax to 604-795-4110; or call 604-795-0034.

59 visits this year, serving **116** clients
75% of patients are self-referring to clinic Jan - Sept 2020

New Hope Health & Wellness Clinic (Drop-in):

The New Hope Health and Wellness Clinic has a vision to provide access to low barrier and culturally safe health care to those managing poverty, homelessness, and addiction. We will connect the most vulnerable people to local health care providers. No referral needed, we provide free, drop-in, confidential access to primary care services (family physician and nurse on site) in a non-threatening, friendly environment. Offering services every Wednesday and Friday since July 2019.

- WHEN:** 9am-12:30pm every Wednesday & Friday
- WHERE:** New Hope Health and Wellness Clinic,
Ruth and Naomi's, 46129 Princess Ave, Chilliwack
- PHONE:** 604-795-2322 ext 101



Since opening we have served **240** clients; **877** visits

These health clinics are made possible through partnership with a variety of community agencies, including:



If you are interested in working with any of the health clinics, please connect with us at chilliwackdfp@divisionsbc.ca.



Fraser Health Rural Addictions Network

FP & NP Leads: Dr. Robert Fox, Dr. Aseem Grover, Sue Lawrence (NP) and Sean Young (NP)
Division Lead: Paula Reguly

The Fraser Health Rural Addictions Working Group encompasses communities from Sts'ailes to Boothroyd, and covers a broad view of addictions, including substance dependency and misuse of illegal, controlled and legal substances.

We aim to improve:

- Addictions prevention, treatment and recovery services;
- Patient experience and outcomes;
- Provider experience;
- Networking of providers, both within and across sectors; and
- Knowledge among providers, clients/patients and public to reduce stigma and increase safe substance use practices.



A:yelexw Center for Hope and Healing - Seabird Island.

Since the Working Group has continued their work this year, they have:

- Successfully received Shared Care project funding and are moving forward with project activities.
- Remained an interdisciplinary, multi-sectoral group that includes GPs, NPs, mental health clinicians and addictions counsellors, Fraser Health leadership, Indigenous Partners, community pharmacists, leadership from community service providers and other key stakeholders;
- Supported relationship building, knowledge exchange and development of strategies for practice coverage among primary care providers who provide opioid agonist therapy;
- Following the success of last year's Meet & Greet, is excited to be offering a Virtual Gathering for the Fraser Health Rural Addictions Network on November 17th.

Community Education

Division Leads: Preet Toor and Carol Van Muyen

Community education is working to improve patient experience by raising awareness about the importance of primary health care, how to find a primary care provider, as well as how, when, and where to access primary care. As things have had to shift since March 2020, we are adjusting to the new regulations and using virtual options. We were able to host one of the two Mini Med School events - and the evening on Pediatric health was well attended!



Mini Med 2020 Presenters

Mini Medical School

The 12th annual Mini Med School series took place in March - but due to the COVID-19 regulations, we could not have had our second evening.

We had great attendance for our session on Pediatric Health! We would like to thank all our presenters for participation. As well as a special thank you to the Fraser Valley Health Care Foundation for being our co-sponsor for the evening.

Be Active Every Day

Our annual challenge for local students to be active for at least 60 minutes every day was a success again! We had great participation from 5 schools in Chilliwack, Agassiz and Harrison Hot Springs - reaching over 700 students!!

A huge thank you to the practitioners that volunteered their time to visit the schools and share some fun tips for a healthy and active lifestyle.





MEMBER SUPPORT

Our funding comes from YOU, for us to SERVE you!

Patient Attachment Mechanism & Waitlist

Division Leads: Jennica Grenier and Melanie Harrop

The Patient Attachment Mechanism (PAM) gives members, their front-line staff, and community partners a process for patients to become attached. Rather than saying, "No we are not accepting patients" or "I don't know how you'd find a family physician" they can say, "Register online with PAM, our local patient attachment mechanism and waitlist".

How does it work? Patients can register online, and when there is capacity in their community, in either established or new practices, we attach them directly off the waitlist.

We are currently attaching patients who registered THIS September!

Between July 2019 - June 2020, we attached 1,179 patients out to community through PAM (plus 1,810 attached to the CPCC awaiting transfer), **bringing our grand total to 8,392 since 2014!**

If you are looking to take on patients but don't want to be overwhelmed with new patient requests, PAM can assist in building or adding to your practice at a pace that works for you.

If you have room to take on patients, contact Jennica at jgrenier@divisionsbc.ca.

Are you looking for a Family Doctor or Nurse Practitioner?



If you live in Chilliwack, you are in luck!

New Family Physicians are coming to the community in the next few months. If you are looking for a local family practice provider, register for our PAM (Patient Attachment Mechanism) online.

Right now we are attaching people who signed up in the last month.

Don't delay, register today!

www.divisionsbc.ca/chilliwack/pam

Call 604-795-0034 if you do not have access to internet.

Virtual care options are now available.





Long-Term Care Initiative

Physician Leads: Dr. Erin Lynch, 2015-2020
& Dr. Dara Donnelly, 2020
Division Lead: Tracey Arsenault

The challenges of the past year have demonstrated the incredible adaptability and resilience of the members of our Long Term Care team.

In response to the COVID-19 pandemic, a small team of 11 physicians was quickly assembled on a volunteer basis to provide onsite, 24/7 in-person care for over 650 residents across Chilliwack & Agassiz. Working alongside the MRPs caring for their patients virtually, the pandemic team made it possible for the majority of residents to remain in their homes in lieu of hospital visits during this time, and we saw a drastic decrease in the need for ED transfers from March to August. Dr. Ralph Jones further supported the incredible team at Eden Care Centre as they dealt with an outbreak at their facility. Kudos to Dr. Jones and the amazing team at Eden for their dedication and compassion during this difficult time. We are also proud to highlight the phenomenal NP team in Hope, who banded together to ensure their residents had 24/7 access to onsite care to avoid ED transfers.

Finally, after a number of years pioneering and supporting the growth of the Long-Term Care Initiative program, Dr. Erin Lynch has stepped down in her role as physician lead September 1st. We are extremely grateful to Dr. Lynch for her wisdom and leadership over the past five years. In her stead, we are excited to welcome Dr. Dara Donnelly as LTCI physician lead and look forward to continuing the work of the program.



MEMBER SUPPORT

Chilliwack Hospital Care Program

Physician Lead: Dr. Paul Graham
Division Lead: Elly Meyerink

The Chilliwack Hospital Care Program redesign has been running the Enhanced House Doc Program for over two years. The redesign engages the House Doc and nurse practitioners working in partnership to provide extended daytime clinical support and continuity for House Doc, unattached, and IV Therapy patients.

The average acute F call census over the past several months has been approximately 48 with the highest to 62 a few weeks back. There are currently 45 family physicians working in the hospital but we are welcoming up to 6 new physicians within the next 6 months.

We continue to recruit family physicians to the community interested in in-patient care, building an even stronger network and program. This program is integral to the continued support for our family physicians to provide longitudinal care for their patients, and unattached patients in hospital. We believe if we continue to work together, we will continue to attract new physicians into the full model of care that we are so proud of here at Chilliwack General Hospital.

DID YOU KNOW WE HAVE...

- 84% of our family physicians care for unattached patients in hospital (F-call)
- 39 family physicians help support the House Doc program.
- 25 locums on our list

Recruitment, Retention & Retirement

Physician Lead: Dr. Allison Salter
Division Lead: Elly Meyerink

The Recruitment, Retention, and Retirement (RRR) Committee continues to work to attract physicians to our community, support recent residency graduates in their transition to practice, facilitate a locum pool, advise and prepare IMG physicians as they sit their Canadian exams, retain current physicians and assist retiring physician as they transition out of practice.

Successes:

- Recruitment of another seven family physicians in 2020 so far, with interest from over ten others!
- Continued mentorship and support of new physicians to their practices, hospital work and communities.
- Collaboration with the Chilliwack Economic Partners Corporation (CEPCO)
- Great attendance at the Annual Wellness Retreat at Harrison Hot Springs Resort - keeping up with our work-life balance, relationships, and communication.



The RRR Committee would like to thank YOU, the physicians and medical staff in Chilliwack, who make our job so easy. It isn't hard to promote a community like this! Please say hello to all the new faces around our medical community when you see one! Connections are very important through this time as it is harder to bring everyone together to meet and greet our new additions.

Our funding comes from YOU, for us to SERVE you!



MEMBER SUPPORT

In-Practice Support

Pathways

Pathways Administrator: Judy Hamel
Division Lead: Paula Reguly

Pathways is a web-based resource for Family Physicians, Specialists, and MOAs to facilitate optimal patient referrals. Pathways optimizes the specialist and clinic referral process by providing all the information required to make the right referral the first time.

Pathways works because:

- It uses simple, but powerful search and filtering capabilities facilitating the identification of appropriate specialists/clinics and community services within one-minute.
- It is web based and mobile-friendly, so can be used anywhere.
- It was designed by GPs for GPs - so it supports the way they work.

Locally, we have 156 practitioners using this service - including 95 FPs, 13 NPs plus local specialists, and 49 clinics! We now have 233 active users, and 10 Community Services users. Last month we hit 5,999 page views!! (Our goal was 6,000). Over 70 of our local MOAs, FPs and specialists have currently been trained.



Judy Hamel
Pathways Administrator

e-Referral Tracker and Community Services Directory!

The NEW Referral Tracker offers a collaborative dashboard where both FP and specialist offices can see the real time status of a referral (ie. sent, received, patient wait-listed, appointment booked, patient seen). The Referral Tracker platform also sends electronic notifications and reminders to patients about appointments and automatically attaches the specialist office instructions. Our local Pathways Administrator, Judy Hamel is available to come to clinic offices to give brief tutorials to you and your staff. Please contact her at chilliwack@pathwaysbc.ca to be registered for free access, or to set up a training time.

Physician Practice Support & Coaching

Practice Support Specialists:
Ron Plowright and Karen Steegstra

Fiscal 2019-20 was another great year of PSP Activity in the Chilliwack Division area. Division members were busy with Panel Management with 15 new sign-ups and 22 GPs completing the Panel Development Incentive Fee Workbook Process. We continued to dole out awesome support from our GP and MOA Peer Mentors and added a new "product" called "Practice Facilitation Action Planning Cycles" (we just call them QI Cycles though - much less of a mouthful). These cycles enable GPs and staff to be paid and accredited for up to 15 hours per cycle to do practice Quality Improvement initiatives of their choosing. 3 such cycles were completed in 2019-20 and have exploded since.



Ron Plowright



Karen Steegstra

Pandemic Update: in what seems like 2 years but is actually the last 6 months, an additional 17 GPs completed the Panel Development Incentive Fee Workbook process with new sign-ups still coming in each month! 28 QI Cycles have already been completed in this time as well with 25 of them being COVID-19 related e.g. virtual care enablement, COVID safety planning and re-engaging patients to practice.

Contact PSP Chilliwack Division Liaison Ron Plowright if any questions or looking for any support: ron.plowright@fraserhealth.ca Ron can arrange a meeting for you with himself, his PSP colleague Karen Steegstra, or a GP or MOA Peer Mentor as appropriate.



MEMBER SUPPORT

Shared Care

The Division is grateful that Shared Care is supporting multiple projects within our communities looking to address challenges in access, transitions, communication and attachment. We are thankful for the collaborative efforts of our physicians, nurse practitioners, midwives, nurses, health authority, and community partners who had a hand in making our goals for these projects a reality.

Palliative Care Project

Physician Lead: Dr. Melanie Madill
Division Lead: Tracey Arsenault

This past year we have focused on attaching orphaned palliative patients and expediting patient access to palliative benefits. With coordination between Dr. Madill and Primary & Community Care (PCC), we have been able to attached orphaned patients withing 48-72hrs of Dr. Madill being notified of their need. These patients have successfully been attached to physicians within their geographic location to facilitate access. We want to express our gratitude to the dedicated physicians who have taken on these patients and have supported them and their families through the end of their lives. Since last September, we have been able to attach 20+ unattached palliative patients to local family physicians.

In starting the wrap-up of this project, we are currently developing a comprehensive palliative folder for physicians to access through their EMR. This folder will contain all pertinent palliative documents to aid in the care of this patient population, including a resource developed through this project titled "Dying-at-home Conversation Guide" for provider use. The goal of the palliative forms is to make it easier for physicians to complete all the paperwork at one time and allow PCC to collaborate more effectively on patient care plan. Along with the organized documents, Primary and Community Care will encourage combined home visits where the paperwork can be done at that time with the PCC nurse, or the nurse can come to the office to make a treatment plan and support timely completion of the paperwork for best care.

Maternity Project 2.0

Online Perinatal Education Classes

Physician Lead: Dr. Alison Henry
Specialist Lead: Dr. John Robertson
Midwife Lead: Winifred Angus
Division Lead: Tracey Arsenault

While the maternity project was set to wrap up early 2020 with the handover over the group perinatal classes to Chilliwack Community Services, plans for the continuation of in-person classes were halted as a result of C19. We therefore reached out to Shared Care for additional funding to support a mini project to record the existing sessions for the Pregnant in Chilliwack website (www.pregnantinchilliwack.ca). The website will hold around 15-20 short videos, recorded with the help of Dr. Alison Henry (Family Physician), Dr. John Robertson (Obstetrician), Winifred Angus (Registered Midwife), Janelle Skoro (RN), Karen Bennet (RN, Maternity) and Shandalin O'Mahoney (NP). This comprehensive set of professionally recorded videos will offer viewers expert advice and education on all relevant perinatal topics from healthy eating in pregnancy, to labour & delivery, pharmaceutical & non pharmaceutical pain management and bringing baby home.





MEMBER SUPPORT

Shared Care *continued*

Physician Leads: Dr. Cameron Ross, Dr. Aseem Grover & Dr. Ralph Jones
Specialist Lead: Dr. Petrus Retief
Division Lead: Tracey Arsenault

Chronic Pain Project

The Division’s Shared Care Chronic Pain project is working directly alongside the exciting work of the East Fraser Pain Collaborative (EFPC), which is financially supported by the Chilliwack Medical Staff Association. For the past year, our funding and project management has gone towards supporting the overall mission and objectives of the EFPC: “To create, develop and implement an integrated system through which all chronic pain professionals and managers in the Eastern Fraser Valley can participate and collaborate in one united enterprise with the goal to strive for excellence in patient care, effective inter-collegial communication and optimal cooperation and collaboration with all interest groups and role players in healthcare and patient community.”

This past year has involved numerous meetings of our various working groups which include family physicians, pain specialists, Health Authority, Pain BC and allied health professionals. To date, the EFPC has been developing a chronic pain roadmap for patients, to be turned into an interactive website tool. We are also in the midst of developing a comprehensive online resource tool for physicians which will allow them to learn about pain in whatever format and time allotment they wish (e.g., articles, videos, podcasts, CME accredited courses). Both the patient and provider online platforms will be hosted by FHA on a temporary basis, with the end goal being a connection to the Pain BC website. In the past year we also hosted 2 successful provider networking events, as well as MOA education event meant to provide our frontline staff with the knowledge of the complexity of chronic pain as well as tools for managing patients who are having a difficult time.

Heading into 2021 we look forward to providing succinct education sessions for our ED colleagues around the biopsychosocial model of chronic pain, including the effects of trauma on pain. We will also be providing the ED staff with some practical resources they can share with pain patients who are frequently in and out of emergency. The main focus of our work in the next year will be in developing and delivering a CME course for physicians that will coincide with a low back pain Rapid Access Clinic that the EFPC will be modelling after the existing RAC in Ontario.





PRIMARY CARE NETWORK

We are PCN Communities!

Leadership: Dr. Joshua Greggain and Petra Pardy, Fraser Health Authority
 Implementation: Lara McLachlan, Gracie Kelly, Andrea Mainer and Preet Toor

For our Division, this is not new work, but new language. We formally began our journey to be funded Primary Care Network (PCN) communities in January 2018 by deciding we would not submit for the first round of PCNs, and instead take the time to gather information from you, our members, our partners, and the communities to build out a robust plan for the second intake of applications that was submitted in June 2019. Finally, in March 2020 we signed off on our approval.

That approval means more than 11.5M in physician, nurse practitioner, nursing, and allied health support by 2024 for our communities. From Chilliwack to Boothroyd and the 22 First Nations communities in-between, we are ready to roll up our selves with our partners and work to meet the needs you've identified.

We are excited in this first year to focus on mental health, substance work, and social work supports that will be available to all family physicians and nurse practitioners in our communities to support their patients.

Primary Care Networks

We are PCN Communities!

YEAR 1

Chilliwack North, South and Fraser Health Rural

9.5 Allied Health Providers*

Chilliwack North and South PCN

2.88 Register Nurse*

2 Family Physician Group Contract

0.5 Nurse Practitioner

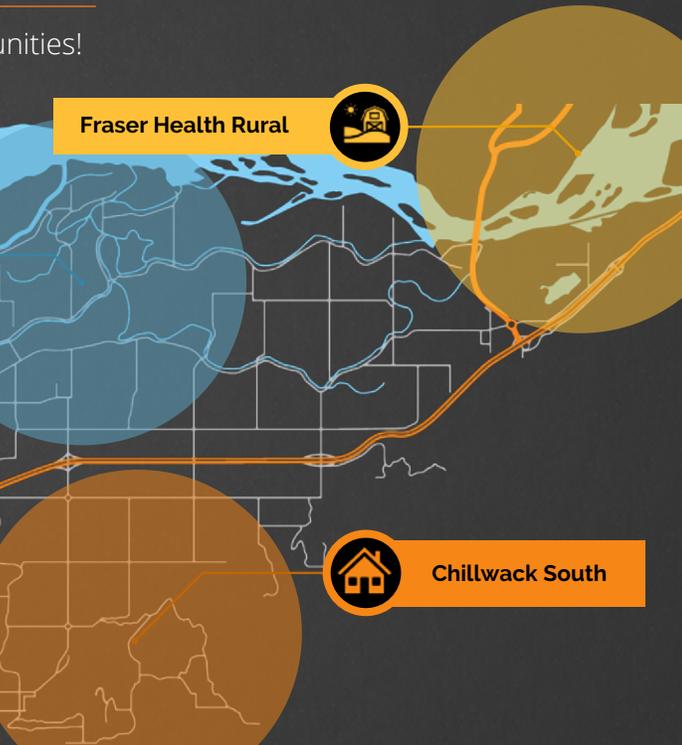
Fraser Health Rural

0.5 Family Physician

0.5 Nurse Practitioner

YEAR 4

Role	Total By Yr 4	Non-Indigenous	Indigenous
Family Physician	5.5	5.5	0
Family Physician Group Contracts	3.0	2.5	0.5
Nurse Practitioner	14.5	12.5	2
Registered Nurse	14.95	14.95	
Allied Health Provider	23.5	19.5	4
Traditional Elder	3	0	3
Clinical Pharmacist	3	3	0



**hiring currently underway*

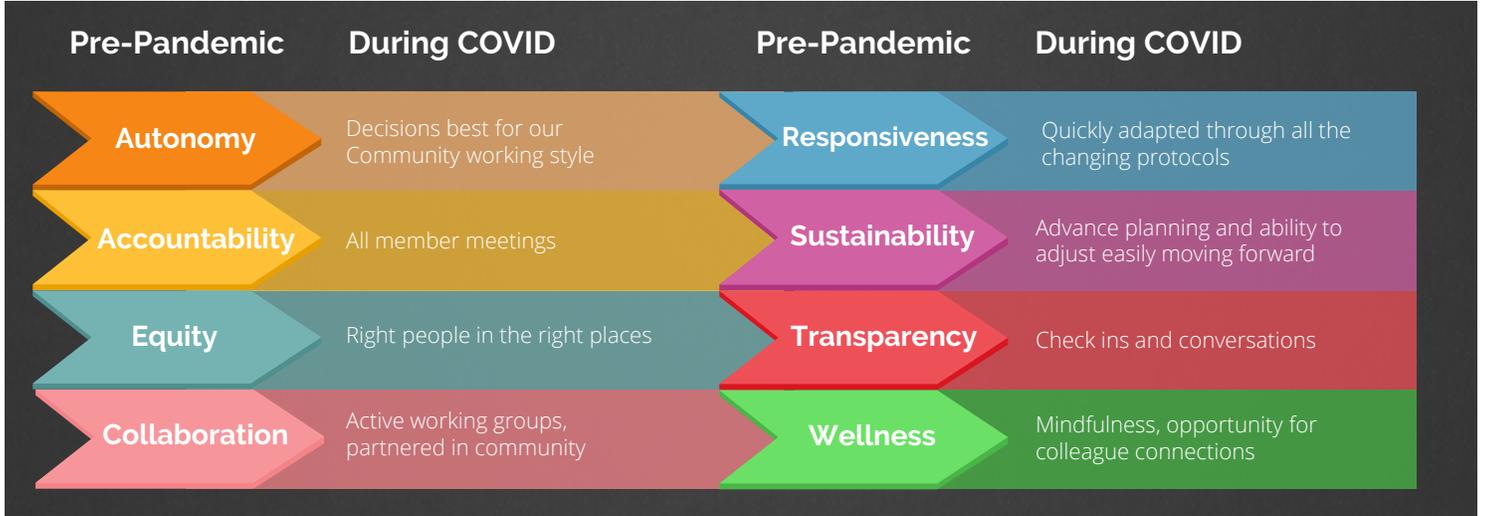
Note: decision-making processes are underway in indigenous communities on their year 1 hiring priorities. This would add additional resources to what is listed above.



COVID-19 RESPONSE

We wouldn't have been able to facilitate this seismic change without community cohesion and physician autonomy. This is what the Division does.

WE ARE who we said we are: OUR CORE VALUES



There is **STRENGTH** in our membership. We are adaptable. We are versatile. Everything we had to do, we had to do **MORE** in every way. *We did this TOGETHER!*



**We are
adaptable.**

We are versatile.

Everything we had to
do, we had to do MORE
in every way.

**WE DID THIS
TOGETHER**



Chilliwack
Division of Family Practice
A GPSC initiative

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