



# Annual Report 2018/2019



Chilliwack  
Division of Family Practice  
A GPSC initiative



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*Front cover image: Fred Meyerink Photography  
Wildflower Meadow in Manning Park.*

**Chilliwack Division of Family Practice**  
2018 - 2019

# About the Division

## Background

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

114 Family Physician members and 14 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



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



# Vision & Mission

**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

**LEADERSHIP TABLES:**

**COLLABORATIVE SERVICES COMMITTEE**

- Chilliwack Division of Family Practice
- Fraser Health
- First Nations Health Authority
- Local Indigenous Organizations
- City of Chilliwack
- Patients

**DIVISION BOARD OF DIRECTORS**

- Family Physicians
- Community

**MEDICAL STAFF ASSOCIATION**

- Physicians
- Specialists
- Fraser Health

**STRATEGIC OPERATIONS COUNCIL**

- Division Board
- Physician Program Leads

**STRATEGIC PRIORITIES:**

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

**BOARD OF DIRECTORS**

**The Board holds the big vision and is responsible for:**

- Organizational health
- Fiscal stewardship
- Risk management

**We need to ensure that we:**

- Keep connected, even if meetings are infrequent
- Stay at the strategic level
- Seek the information needed to make decisions

**STRATEGIC OPERATIONS COUNCIL**

**The Strategic Operations Council is priorities focused and is responsible for:**

- Alignment and opportunities with the big vision between Board, Members, and Partners
- Making connections
- Knowledge translation

**We need to ensure that we:**

- Bring the membership voice, not just our own lens
- Listen for understanding – inquire (ask) before we advocate (persuade)

Chilliwack Primary Care Clinic

Chilliwack Youth Health Centre

Community Engagement

Hospital Care Program

Pathways

Patient Attachment Mechanism & Waitlist

Primary Care Seniors Clinic

Recruitment, Retention, Retirement

Long-Term Care Initiative

Shared Care

In-Practice Support

**MEMBERSHIP**

**The Membership carries out the big vision and is responsible for:**

- Giving input to influence decisions
- Providing feedback on current programs

**We need to ensure that we:**

- Create an inclusive space for members to provide input
- Connect with members to seek input



# A Message from the Board Chair

Dr. Josh Greggain



Thank you to all our Division members and staff for a year of progress, collegiality, and partnership.

As the future of health care is unfolding, the Division is being asked to help lead family physicians, nurse practitioners and allied health care providers into a model of care that includes team-based care and well supported Patient Medical Homes, joined together in Primary Care Networks. The fall of 2018 and spring of 2019 was heavy with physician, practice, and community consultation as we drafted our Primary Care Network Service Plan.

The ongoing programs in the Division continue to have success, including the Long-Term Care Initiative, the Chilliwack Youth Health Centre, and the Chilliwack Primary Care Clinic. Our Patient Attachment Mechanism (PAM) and Waitlist continues to function and is looked upon by the province as a model for attachment mechanisms. The Recruitment, Retention, and Retirement Committee is continually looking at how to meet the physician supply needs in our communities and has had great success this year.

We are privileged to work in communities where GPs are sought after; by the hospital, the community, by allied health workers, and by the health authority: for our skills, our care, and our leadership. As has always been, family medicine is the foundation of care in Chilliwack, Agassiz-Harrison, Hope, Boston Bar and all the communities in between.

With our strong physician leaders, our continued community focus, and our hardworking GPs and NPs, there is opportunity to develop models of care that included true integration, collaboration, and innovation, while keeping the health and well-being of our providers at the forefront.

Thank you for allowing me to serve as chair and thank you for all the exceptional things that you do, as members of our Division, and integral members of the medical community.

With gratitude,

Dr. Josh Greggain

## Board of Directors



**Dr. Joshua Greggain**  
*Board Chair*



**Dr. Lori Laughland**  
*Vice Chair*



**Dr. Dominic Black**  
*Secretary/Treasurer*



**Dr. Shaik Fida Ali**  
*Director*



**Dr. Mark Ballard**  
*Director*



**Joanne Cecchi**  
*Director*



**Diane Janzen**  
*Director*

# A Message from the Executive Director

Katrina Beppe



As I reflect on the past year, I am inspired by the work of our members, team, and partners. From the clinics that serve some of our most vulnerable (youth and young adults, street entrenched, addictions, frail elders) to programs that support patients throughout their health care journey (maternity, inpatient, palliative), the scope of practice and dedication to patient care in our communities is awe-inspiring.

This year we had the privilege of working with our members, partners, and patients to develop our Primary Care Network Service Plan. Three distinct networks, serving over 116,000 people, will help us to realize our vision of an integrated, collaborative community-based system for health that supports wellness and care.

While change is rarely easy, I believe this work, led by physicians, is going to enable a better system of care. A system where care is delivered by the right person, at the right time, in the right place. A system that values family physicians and nurse practitioners, and supports them to provide comprehensive services in a sustainable way. A system that supports the wellbeing of the patient and the provider.

Thank you. To our members for making our medical community a strong and vibrant one. To our team for your expertise and support. And to our partners for being willing to do things differently.

Sincerely,

Katrina Beppe



# Meet the Division Team



**Katrina Bepple**  
Executive Director



**Tracey Arsenault**  
Project Manager



**Shannon Beer**  
Medical Office Assistant



**Janetta Cook**  
Medical Office Assistant



**Jennica Grenier**  
Patient Attachment Admin



**Melanie Harrop**  
Medical Office Assistant



**Elly Meyerink**  
Operations Lead



**Paula Reguly**  
Project Manager



**Preet Toor**  
Project Coordinator



**Carol Van Muyen**  
Administrative Assistant



**Naomi Wiebe**  
Medical Office Assistant

45600 Menholm Road, Chilliwack, BC V2P 1P7  
604-795-0034 | fax: 604-795-4111  
chilliwackdfp@divisionsbc.ca

[www.divisionsbc.ca/chilliwack](http://www.divisionsbc.ca/chilliwack)  
[www.facebook.com/cdofp](https://www.facebook.com/cdofp)

# Patient Medical Home & Primary Care Network

Our Primary Care Network service plan is the culmination of partnerships that have grown and strengthened over many years. These include Fraser Health, Indigenous, community and patient partners. All have enabled the coordination and implementation of strategic primary care initiatives which have aimed at addressing gaps in healthcare. Several key initiatives have already contributed to developing a cohesive, integrated system of community health, and are highlighted throughout this report.  
**This may be new language, but it is not new work.**

Focussing on a relationship-based model of primary care, our goal is to build upon the foundational work we have been doing in our communities through three distinct Primary Care Networks (PCNs) in Chilliwack North, Chilliwack South, and Fraser Health Rural. These three PCN's embody four strategies which include: supporting access and attachment, building interdisciplinary teams, supporting patients to transition between community-based services and the specialized community service continuum, and incorporating traditional healers and specific resources into our Indigenous communities.

These strategies will support patients to receive the care and services they need in a timely manner, and support our existing providers in the work that they do. Working in teams will improve communication and collaborative care planning, decrease the burden of supporting patients alone, and enable providers to work to their full scope of practice.

We are looking forward to the positive impact our PCNs will have on our practices, our communities, and our patients in the months and years to come.

Dr. Joshua Greggain (*Fraser Health Rural*) Physician Lead  
Dr. Scott Markey (*Chilliwack*) Physician Lead  
Katrina Bepple, Chilliwack Division Executive Director  
Preet Toor, Division Project Lead



**VISION**  
An integrated, collaborative community-based system for health that supports wellness and care.

**MISSION**  
To build and strengthen partnerships for sustainable, quality team-based health care that is person-centred, culturally safe and fosters shared responsibilities.

## THE FOUNDATION

Together, PMHs and PCNs position primary care at the centre of an integrated, team-based health care system.



**PATIENT MEDICAL HOME (PMH)**  
A team-based family practice operating at an ideal level where patients get the majority of their care and their primary care providers focus on diagnoses, patient relationships and longitudinal care.

**PRIMARY CARE NETWORK (PCN)**  
A clinical network of physicians and other providers in a geographic area who work together in new ways to expand team-based supports for GPs and patients.



- BETTER FOR PROVIDERS**
- Shifts focus to diagnoses and patient relationships.
  - Brings services together around GPs and patients.
  - Eases the burden of doing it alone.
  - Attracts and retains GPs.
- BETTER FOR PATIENTS**
- Increases attachment to a primary care provider.
  - Increases access to a broad range of services.
  - Coordinates care and services.
- BETTER FOR THE SYSTEM**
- Maximizes health care roles and resources.
  - Reduces hospital visits.
  - Builds sustainable, quality health care.



# 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. Thank you once again to all who continue to make this possible. Your commitment to patient care is what makes our communities a place that so many of us are proud to call home.

Fantastic Five Divisions MOA Team: Shannon Beer, Janetta Cook, Jennica Grenier, Melanie Harrop & Naomi Wiebe.

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

The Chilliwack Primary Care Clinic (CPCC), in its eighth 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.

Dr. Robert Brooks, Physician Lead

"Thanks again Jennica and Janetta for the quality of the CPCC referrals. The information from the doctors and NPs there is always very comprehensive but not excessive. Having the charts from the previous doctor also makes the transfer process so much easier. Your efforts and those of the team are appreciated!"

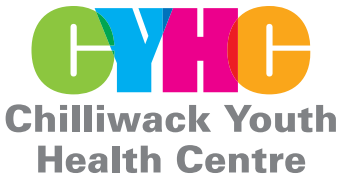
Dr. Dominic Black

## 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



ANNUAL VISITS				
	2015	2016	2017	2018
Counselling - NLC	461	493	805	1,202
Medical - NLC	0	231	286	290
Counselling - Stó:lō	79	108	260	523
Medical - Stó:lō	213	211	279	359
TOTAL VISITS	753	1,043	1,630	2,374

**WHEN:** 1pm-7pm every Tuesday  
**WHERE:** Neighbourhood Learning Centre, 46361 Yale Rd.  
**PHONE:** 604-819-4603

**WHEN:** 2pm-7pm every Wednesday  
**WHERE:** Stó:lō Primary Health Care Clinic, 7201 Vedder Rd.  
**PHONE:** 604-824-3219

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

chilliwackgendercare@divisionsbc.ca  
604.795.0034

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## Chilliwack Gender Care Clinic (Referral Needed):

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](mailto:chilliwackgendercare@divisionsbc.ca); fax to 604-795-4110; or call 604-795-0034.

## 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. Launched Wednesday service days in July 2019, we have already expanded to offer services on Fridays, beginning November 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



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](mailto:chilliwackdfp@divisionsbc.ca).



# Fraser Health Rural Addictions Network

From a recommendation from the Fraser Health Rural Primary Care Providers meeting in May 2018, we have established a Fraser Health Rural Addictions Working Group which encompasses communities from Sts’ailes to Boothroyd. The Working Group takes a broad view of addictions, which includes 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.

Since the Working Group was convened in the September 2018 it has:

- Become 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;
- Connected primary care providers and community service mental health clinicians for the purpose of providing co-located team-based care for addictions treatment at the Hope OAT Clinic (including but not limited to opioids) and provided project management support for evaluation activities;
- Embarked on planning and hosting a Fraser Health Rural Addictions Meet & Greet in September 2019 that will further advance the establishment of the Fraser Health Rural Addictions Network.

### Mental Health & Substance Use Services in the Primary Care Network

**Date:** Thursday, October 25<sup>th</sup>  
Dinner 5:30pm. Event 6-9pm

**Location:** Chilliwack Cultural Centre, Rotary Hall,  
9201 Corbould Street, Chilliwack, BC

Join us for an evening that will include a review of mental health and substance use services in Chilliwack, Agassiz-Harrison, and Hope. This will be followed by a world café session focused on how we will integrate additional mental health resources into our Primary Care Network, building on the Primary and Community Care Team/Hub model. There will also be time to network with local psychiatrists, physicians, nurse practitioners, and mental health clinicians, so register and secure your spot today!

**RSVP:** Online: <https://surveys.divisionsbc.ca/MHSUS.aspx>  
Email: [Jennifer.Shelford@fraserhealth.ca](mailto:Jennifer.Shelford@fraserhealth.ca)

Please respond by October 18<sup>th</sup>, include any dietary requests.

Chilliwack Division of Family Practice

fraserhealth

Paula Reguly, Division Project Lead



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

# Hope & the Fraser Canyon

The 2018/19 year been one of continued evolution in #FraserHealthRural.

This “hashtag” has become a banner for us to help support one another in our communities, while looking to the future of what the Primary Care Network (PCN) could accomplish in our rural and remote communities.

Seabird Island opened three recovery homes this year and continues to be a beacon of light for addictions in the region, thanks to Dr. Fox and his team. Seabird continues to provide exceptional service to many First Nations patients in the region, including outreach to three adjacent communities.

Agassiz Community Health Center saw the addition of Dr. Nicola Cohen to bring the community up to four physicians and two Nurse Practitioners. This has greatly improved the opportunity to attach and see new patients from Agassiz and Harrison Hot Springs.

Hope continues to have success in offering family practice services to the communities of Hope, Boston Bar, Spuzzum and Boothroyd. Those services include full-service family practice, walk-in, 24/7 emergency, inpatient, hospice and residential care. The complement of specialist and specialized services that are offered on an outreach model from Chilliwack have greatly increased as well, which now includes: OB/GYN, prenatal outreach, pediatrics, orthopedics, general surgery, respiratory therapy, physiotherapy, as well as our mental health partners with psychiatry, geriatric psychiatry, and child and youth psychiatry. This year, Dr. Alison Henry from the Chilliwack Obstetrics Group (COG) has started a shared care with Winnifred Angus, one of our local midwives.

As we move into our PCN implementation, we hope to further strengthen the care provided to all 18,000 patients who live in #FraserHealthRural.



Dr. Josh Greggain, Physician Lead



Fraser Canyon Hospital



# Patient Attachment Mechanism & Waitlist

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 at [www.divisionsbc.ca/chilliwack/PAM](http://www.divisionsbc.ca/chilliwack/PAM) or those without internet access can call 604-795-0034 to register over the phone. When there is capacity in their community, in established or new practices, we attach them directly off the waitlist.

Between July 2018 - June 2019, we attached 1,654 patients through PAM, bringing our grand total to 6,492 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.

Jennica Grenier and Melanie Harrop, Division Project Leads

**Looking for a Family Doctor or Nurse Practitioner?**

Live in the Chilliwack, Hope, or Agassiz-Harrison area?

**Sign up for the PAM waitlist!**  
*(Patient Attachment Mechanism)*

**Register online:**  
[divisionsbc.ca/chilliwack/pam](http://divisionsbc.ca/chilliwack/pam)

**How does it work?**

Go online and register at [divisionsbc.ca/chilliwack/pam](http://divisionsbc.ca/chilliwack/pam)

Then you'll receive an email to confirm you're on the waitlist.

We'll be in touch when there is capacity to attach you.

In the meantime, visit [www.medimap.ca](http://www.medimap.ca) for walk-in clinic locations and wait times.

This service is only available for those who do not already have a family doctor/nurse practitioner.  
If you don't have internet access, call 604-795-0034.







If you have room to take on patients, contact Jennica at [jgrenier@divisionsbc.ca](mailto:jgrenier@divisionsbc.ca).

# In-Practice Support

## Pathways

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 contains all the needed information to make an efficient, ‘first time right’ referral.
- 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.
- It is a living, growing platform supported by countless administrators who work intricately with Physicians, Specialists, and MOAs. These administrators constantly strive to ensure Pathways meets the needs of its users, and when it doesn't, or there is room to improve, they make changes.

Locally, we have 145 specialists, 39 clinics, 6 patient info content items and 38 community services listings for Chilliwack, Agassiz-Harrison and Hope. **And we now have 132 users - just over a 30% increase from last year!**



Judy Hamel  
Pathways Administrator

## Coming soon to Pathways ... the e-Referral Tracker and Community Services Directory!

The NEW Referral Tracker offers a collaborative dashboard where both GP 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.

Pathways Community Services consolidates a wide variety of services in one place, inside of the existing Pathways web platform. It is intended to be an enabler of high-quality patient care, complementing or providing alternatives to purely medical treatments, including a focus on the social determinants of health.

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](mailto:chilliwack@pathwaysbc.ca) to be registered for free access, or to set up a training time.

Judy Hamel, Pathways Administrator  
Paula Reguly, Division Project Lead

## Member Learning Events

**Disability Benefits & Legal Reports** was held on April 9, 2019 with 16 GPs in attendance.

**Physician Office Security Safeguards 101** workshop was held March 7, 2019 with 42 GPs, Surgeons, and MOAs in attendance.

**Taxation & Professionals** was held on February 11, 2019 with 23 GPs, Specialists, Office Managers and Bookkeepers in attendance.

## MOA Practice Support Program

In 2019, we kicked off an MOA practice support program by offering training opportunities focused on the needs of MOAs. All GP MOAs who attended these events received sessional payments because we know their time is valuable and we value their commitment to their ongoing professional development.

**Instrument Sterilization & POMDRA** (Physician Office Medical Device Reprocessing Assessments) Workshop was held on January 30, 2019 with 25 MOAs attending.

**Responding With Respect** workshop was held on April 6, 2019 with 30 MOAs in attendance.

**San'Yas Indigenous Cultural Safety Training** - We have had 3 MOAs complete this healthcare focussed online cultural training. The Division covers the course fee for any MOAs interested in completing the course. Contact Carol at [cvanmuyen@divisionsbc.ca](mailto:cvanmuyen@divisionsbc.ca) to register your MOA today!

Paula Reguly, Division Project Lead



# Physician Practice Support & Coaching

Here are some highlights of the last year’s PSP activity in the Chilliwack Division area and what’s coming soon:

**New PSP (Human) Resources for Chilliwack Division!** FH PSP recently added Karen Steegstra dividing her time between Chilliwack & Abbotsford Divisions. Welcome Karen!



GPSC Panel Development Incentive Fee process (*previously "Understanding Your Patient Panel"*): Almost entirely our focus this year! In September 2018, GPSC changed the process from data clean-up with sessional payments to a full-blown \$6000 Incentive Fee paid in 3 Phases as GPs navigate a Workbook. It includes updating demographic data, cleaning up 10-15 disease registries, establishing care planning & recall systems for CDM patients, documenting these processes and describing planned sustainment. Finally, GPs initiate 5 cycles of Data-Informed Quality Improvement (QI).

55+ Division GPs are engaged in some way and at varying stages of completion with the goal of providing even better pro-active care and enabling Team Based Care and collaboration in the future. 42 are registered for the Incentive Fee (first \$2000) 25 are in Phase 1, 8 are in Phase 2, 10 received the 2nd (\$1000) Installment and are in Phase 3 and 12 completed the Workbook (last \$3000.)

For OSCAR 12 users, Dr. Page created queries to improve the process. Wolf and OSCAR 15 users have PSP "Dashboards" to help by enabling mass additions to registries and mass inactivation of patients not part of practice. Please contact Ron for support and with any panel related questions.

**GPSC Patient Medical Home Assessments:**  
40 were completed this year for a total of 55. GPs answer practice and community-based questions which are then compared to the 12 attributes of the Patient Medical Home. It’s designed to be helpful at the practice level for QI, at the Division level for community planning and at the provincial level for determining broader system supports.

**Electronic Medical Record Peer Mentor support:**  
Peer Mentors were again very busy helping bring new tools and tricks to the community. Thanks to Drs. Page, Robertson, Ross, Smith, Low and Dodds and MOA Janetta Cook for all your work! Contact Ron when you need a Peer Mentor or if you’d consider becoming one!

**Where were the Small Group Learning Sessions (SGLS) and Modules?**  
On hold to accommodate all the Panel Management work! Module content was revamped so it could be delivered multiple ways and in smaller chunks but still be accredited. As we move to Primary Care Networks, watch for potential SGLS in Team Based Care (7-part), Practice Improvement (4-part), Dementia, and new areas: EMR, Substance Use and ACEs.

**New Payment Structure:**  
GPSC recently announced a new compensation structure to accompany our coaching model and to use with learning session content. GPs and staff are eligible for up to 15 hours compensation for going through a Practice Facilitation Cycle in a QI area they choose from Engagement through Assessment, Action Planning, Testing and Measuring Impact, Implementation and Sustainment. Contact Ron for details!



Ron Plowright



Karen Steegstra

Ron Plowright, Practice Support Specialist  
Karen Steegstra, Practice Support Specialist

Contact Ron or Karen for further info  
or any Panel Management questions at  
[Ron.Plowright@fraserhealth.ca](mailto:Ron.Plowright@fraserhealth.ca) or  
[Karen.Steegstra@fraserhealth.ca](mailto:Karen.Steegstra@fraserhealth.ca).

# Recruitment, Retention & Retirement

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 seven family physicians in 2019
  - Mentorship and support of new physicians to their practices, hospital work and the Chilliwack community (including our soon-to-be and newly practicing residency graduates!)
  - Successful support of IMG’s sitting their Canadian Exams – WAY TO GO!!!
  - Close collaboration with the Chilliwack Economic Partners Corporation (CEPCO)
  - Great attendance at social events to support work-life balance, relationships, and communication.
  - Celebration of the careers of 10 of our retiring physicians at the Fall 2018 Retirement Gala.

- New Initiatives:
- Recruit Canadian Medical Students training abroad by providing local electives and supporting their return to Canada
  - Reviving the Annual Cheam Hike for family medicine preceptor and residents
  - Further engagement with local community groups to assist with recruitment efforts (e.g. Rotary).

Finally, 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 when your colleagues are outstanding. Keep up the great work and please, say hello to a strange face when you see one – you never know if that smile "seals the deal" for new physician recruits to our communities!

Dr. Allison Salter, Physician Lead  
Elly Meyerink, Division Project Lead

## Maintaining Wellness in Practice



The Division is thrilled to have the opportunity to address the wellness of our members as part of our strategic priorities. With extensive burnout rates amongst physicians, addressing the various aspects of wellness has become one of our strategic priorities.

In 2019 the Division, in partnership with the Chilliwack Medical Staff Association (CMSAi) launched this initiative with the first annual Physician & NP Wellness Retreat. Over two days, nearly 60 Family Physicians, Specialists and Nurse Practitioners gathered to explore ways to increase professional and personal resiliency. Highlights from the weekend included an interactive workshop by Dr. Elizabeth Froese and the opportunity to build relationships across specialties. The providers equally appreciated the opportunity to bring their families with them, as this allowed them to fully engage in the workshop content knowing that their families were nearby and taken care of in their absence.

We look forward to continuing to partner with the CMSAi for more activities, including the next Wellness Conference February 28 - March 1, 2020.

Tracey Arsenault, Division Project Lead



# Long-Term Care Initiative

The Long-Term Care Initiative (LTCI, previously Residential Care Initiative) has seen great growth in the past year. There are currently 27 physicians providing clustering care (10+ patients in at least one facility) for nearly 300 residents within the six Chilliwack facilities. The percentage of residents being cared for by clustering physicians has increased from 42% in 2018 to 53%. In a recent survey, clustering physicians indicated they enjoyed the ease of having most of their patients in a more central location, as well as building relationships with the staff at their chosen facility.

In addition to the excellent care being offered by all physicians attending to their residents, the facilities themselves have stepped forward with some innovative ideas to improve on the best practices and system-level outcomes of the LTCI. The Division has granted one-time, up to \$10,000 grants for these projects which include: purchasing multi-sensory mobile carts to help with agitated patients, providing dementia patients with recorded messages on iPads from their loved ones encourage calmness and cooperation with facility staff, creating soothing environments for patients, and developing a palliative room specifically for patients and families who wish to have a private space available during their last days.

In the upcoming year we will be offering education sessions for clustering physicians related to wound care, dementia behaviours and palliative care, as well as continuing to work closely with the facilities and physicians to increase the effectiveness of the program. We are extremely grateful to our dedicated community of clustering physicians and welcome more interest in the program.

Dr. Erin Lynch, Physician Lead  
Tracey Arsenault, Division Project Lead



Chilliwack & Agassiz Care Homes

# Hospital Care Program

The Chilliwack Hospital Care Program redesign has been running the Enhanced House Doc Program for over 16 months. 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. Reports for patient and provider satisfaction are positive...

*"The support of the House Doc and the NP's are a huge benefit to the unit. They are accessible to the unit PCCs to assist with issues such as paperwork and dc orders for short notice Residential Care admissions, and to discuss urgent issues that need to be addressed by a physician. It is a valuable service, especially in that it is 7 days per week. It would be a loss to the site if it were discontinued."*

Margot Dyble, RN, BSc,  
Patient Care Coordinator, NU3/Medicine/Palliative/Telemetry

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.

Dr. Paul Graham, Physician Lead  
Elly Meyerink, Division Project Lead



Chilliwack General Hospital

## DID YOU KNOW WE HAVE...

- 63 family physicians with active hospital privileges
- 35 of those care for unattached patients in hospital (F-call)
- 27 family physicians in the community (with associate hospital privileges)
- 23 locums on our list



# 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

The palliative care system in our region has gone through numerous changes over the past year. As a result, the initial trajectory of the Palliative Shared Care Project (PSCP) has also changed and we have received a project extension.

Moving forward we will be focusing largely on improving the referral pathways for palliative patients and developing a system for the attachment of orphaned palliative patients. We are working closely with our dedicated physicians and teams within Primary & Community Care and the Palliative Care team. There are also plans to coordinate and host a LEAP Palliative session in fall 2019.

In the first year of our project, we hosted a public education session with an expert panel to answer questions related to "a good death". Another small event was hosted in July - the Hospice Open House for providers, with positive feedback regarding the usefulness of touring the hospice and being able to relay this information to patients. Finally, a working group has developed a succinct "Dying-at-home Conversation Guide" for providers, which outlines key considerations and important discussion topics for patients and families.

We are grateful for the continued collaborative efforts of our community to improve the process of this very intimate stage in our patient's lives.

Dr. Melanie Madill, Physician Lead  
Dr. Chantal Chris, Specialist Lead  
Tracey Arsenault, Division Project Lead

## Adult Mental Health Substance Use Collaborative

The way the current system is structured makes it difficult for primary care providers to access care for patients with mild to moderate mental health and substance use challenges. Referral and communication pathways create barriers to sharing appropriate information for improve patient care and outcomes. With lack of support in community for patients with Mental Health Substance Use (MHSU) challenges, physicians and nurse practitioners who are already at capacity are hesitant to take on more unattached patients with MHSU challenges. This results in a large proportion of patients, both attached and unattached, who are trying to access the MHSU support they need through walk-in clinics and in the Emergency Department.

In October 2018, the Division partnered with Fraser Health to host a large stakeholder event that brought together family physicians, nurse practitioners, psychiatrists, mental health clinicians, and substance use clinicians, in addition to leadership from the Division, Fraser Health, and Ministry of Children and Family Development. Themes that came to the top were around access, collaboration, communication and information sharing, and roles and responsibilities of the team.

From this stakeholder event, we are developing prototypes to model a new way to deliver integrated, team-based care for these patients. Building on the Primary and Community Care team and hub model, which focuses on relationships, the intent is to have mental health clinicians in community, assigned to a group of primary care providers and their patients. The MHSU clinicians would be able to deliver clinical services in community in addition to helping the patient to navigate the MHSU system as they require more resources.

These prototypes will inform the new resources that are coming to our community through the Primary Care Network and Specialized Community Service Programs funding.

Drs. Rosanna Switzer, Melanie Madill, Scott Markey and Ralph Jones, Physician Leads  
Drs. Mohamad Lilla and Naveed Almas, Specialist Leads  
Sue Lawrence, Nurse Practitioner Lead  
Preet Toor, Division Project Lead

## Maternity Project

The past year has seen great developments within the Shared Care Maternity Project.

Phase II of the project launched summer 2018 with the development of new, local maternity websites "pregnantinchilliwack.ca" and "pregnantinfraserhealthrural.ca". The websites contain perinatal information for expecting and new mothers, as well as relevant local information including pathways to maternity care, links to the Chilliwack Obstetrics Group (COGs) referral form, local midwifery clinics, delivering at CGH and information on community support programs for mothers and new families.

A January 2019 gathering of physicians providing obstetrics care, local midwives and OBs opened the discussion of collaborative care models. The physician and midwife leads from the Comox Division were guest speakers and presented on their success in offering GP/Registered Midwife (RM) collaborative care to a pilot group of patients. There was interest from many physicians and midwives present to further explore the potential to adopt this model in the future.

Finally, an 8-week perinatal education program was developed with the first pilot running April - July 2019 and the second set for September - November 2019. The Chilliwack Childbirth Program aims to provide low barrier, subsidized (referral based), provider-led perinatal group education. Each cohort will include a mix of high and low risk mothers. The two facilitators are a Public Health and Maternity nurse, and a variety of health care professionals co-facilitate the sessions including GPs, OBs and RMs. This wide-range of expertise provides mothers and their partners with a unique experience of wrap around care – they are being given the opportunity to learn from and engage with various perinatal providers in a safe and inclusive group environment. The feedback from the initial pilot group has been very positive. The Division is currently exploring sustainability options and has the commitment of some community partners offering to cover the cost in full for their high-risk mothers.

June 2019 also launched the GP/RM shared care maternity clinic in Hope BC and we believe this project was integral to supporting the development of this working arrangement.

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



## Chronic Pain Project

The newly established Shared Care Project launched with a large stakeholder engagement event June 2019. A group of nearly 50 Physicians, Nurse Practitioners, frontline staff and allied health professionals joined together to discuss the current state of the local chronic pain system. Patient stories were shared and barriers to care were highlighted. There were several active discussion groups brainstorming recommended project action items around stigma, increasing team-based care, addressing the lack of available resources and offering more options for patient and provider education.

This project will continue to actively engage with the Chilliwack Medical Staff Association initiative (CMSAi), the Eastern Fraser Valley Pain collaboration (EFVPC), Fraser Health (FH), various allied health professionals and patients and caregivers. This is a timely project in which local supportive actions align with both the FH regional and provincial focus on improving, building and coordinating chronic pain resources and services with a focus on closer to home access. We aim to align with regional and provincial pain initiatives to improve resources, knowledge and increase collaborative team-based pain care practice in Chilliwack and Fraser Health Rural.

Dr. Ralph Jones, Physician Lead  
Dr. Petrus Retief, Specialist Lead  
Tracey Arsenault, Division Project Lead



Building on current initiatives and existing partnerships, 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. We have enhanced partnerships with organizations to accomplish this, namely in supporting joint programs through funding and promotion, and dissemination of information through online links and printed materials through community partners.

Walk With Your Doc

Walk With Your Doc ran again this year in partnership with Doctors of BC. Doctors, NPs, Nurses, and MOAs across the province host free walking events for their patients and community members throughout the second week of May. Separate events were hosted in Chilliwack, Agassiz, and Hope.

Walk with your Doc is an opportunity to promote healthy lifestyles in our communities, and for health care professionals to connect with their patients in a non-clinical environment. This event allows less active patients who want to begin an exercise regimen the starting point to do so in a friendly environment, and enables doctors to Walk the Talk when it comes to prescribing exercise for their patients while also discussing the benefits of being more active.



Mini Med 2019 Panel

Mini Medical School

The 11<sup>th</sup> annual Mini Med School series took place in March over two sessions. The first session was focused around “Understanding the Opioid Crisis” and gaining a better understanding about addictions, fentanyl and naloxone. The following week, we partnered with the Shared Care Palliative Project to put on a session called, “Is There Such a Thing As a Good Death?” Both evenings began with a 30-minute resource fair full of local community partners, followed by a one-hour presentation by physicians, a pharmacist and residents. The evening ended with a 1-hour question and answer period with a panel of relevant professionals.

With over 65 attendees at each session, this year was our most engaged Mini Med School series! We would like to thank all our presenters, panel members, and community organizations for their participation. As well as a special thank you to the Fraser Valley Health Care Foundation for being our co-sponsor for both evenings.



Great turnout at our Annual Walk With Your Doc events



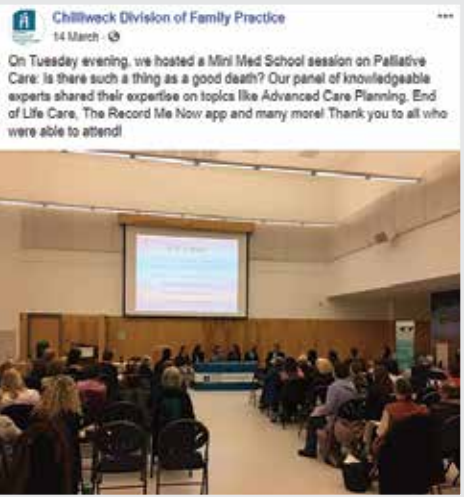
Be Active Every Day

Our annual challenge for local students to be active for at least 60 minutes every day, was well received this past October. We had 4 schools in Chilliwack and Agassiz participate - reaching over 750 students!!

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



Preet Toor and Carol Van Muyen, Division Project Leads







**Chilliwack**

**Division of Family Practice**

A GPSC initiative

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