

Fraser Northwest Division of Family Practice

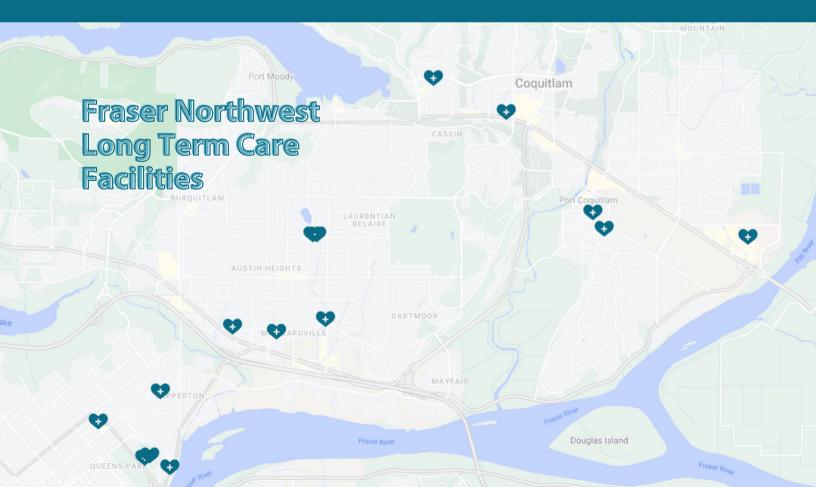
LONG TERM CARE INITIATIVE YEAR IN REVIEW

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ABOUT US

The Fraser Northwest Division of Family Practice (FNW DoFP) encompasses family physicians in New Westminster, Coquitlam, Port Coquitlam, Port Moody, and parts of Burnaby, representing the traditional catchment area of the Royal Columbian and Eagle Ridge Hospitals. Together, members and division staff work to improve patient access to local primary care, increase local physicians' influence on health care delivery and policy, and provide professional support for physicians.



BACKGROUND & CONTEXT

With the partial program launch in October of 2015, the FNW DoFP began the work of the Long Term Care Initiative (LTCI) in the long-term care facilities within the communities of New Westminster, Coquitlam, Port Moody, and Port Coquitlam with program implementation in January 2016. These communities consist of 15 facilities with a total of 1722 residents. The LTCI has intended to ensure that all residents in a facility have a dedicated MRP committed to providing the 5 best practice deliverables which include:

- 1. Participation in one of two on-call groups
- 2. Proactive visits to residents (minimum once every 3 months)
- 3. Meaningful medication reviews (twice per year)
- 4. Attendance at care conferences (once per year)
- 5. Provide completed resident documentation

Building on our previous year-end evaluation reports, this report provides an overview on the last year's activities, milestones and challenges faced by physicians, patients, family members and the community.

The LTCI was renamed in November 2019 from the original name of "Residential Care Initiative" in recognition of the Truth and Reconciliation process in Canada and with BC's Indigenous people, and the importance of supporting the provision of patient-centered culturally safe care.

INITIATIVE IMPACT

Since the LTCI inception in 2014, the metrics measuring the 5 best practices have shown significant impact. There has been a 300% increase in the number of MRPs practicing in the LTC since its inception, with a notable 1800% increase in female MRPs. Additionally, the median number of residents per MRP has decreased by over half.

Data received from GPSC



Proactive Visits

Average non-urgent visits per resident increased by 23% ↑
The % of residents who did not have a proactive visit decreased by 70% ↓



Case Conferences

The % of residents who had a case conference increased by 38% 1



Meaningful Medication Reviews

Average number of ordered drugs per resident decreased by 13% ↓ The % of residents prescribed 9+ medications decreased by 39% ↓

LTCI IMPACTS SINCE IMPLEMENTATION

FNW LTCI program data

of MRPs practicing in LTCI

1 300%

Median # of residents per MRP

519

Average years of practice per MRP

J 63%

Female MRPs

1 1800%

ENGAGEMENT

PHYSICIAN ENGAGEMENT

LTCI Medical Advisory Committee (MAC) Meetings

MAY2021 JUNE 2021

SEPT 2021

 $N \cap V$ 2021

JAN 2022

CME Canadian

MARCH 2022

CME Anxiety and

Depression in

Dementia



CME Covid 19 Recovery & Physician Burnout

Competency Assessments **New to Long Term** Care event

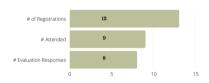
Medical Protective Association

CME Wound Care Basics

CME Suturing workshop

New to Long Term Care | Event Evaluation

November 16, 2021



Impact to practice:

- Great overview of LTC conditions, resources and protocols
- · Increased understanding of background information and helpful tips in providing LTC
- Understanding goals of care discussion with families

Key take aways from dicussion:

- · Reviewing guidelines for common LTC clinical situations
- · Having a quick review of common conditions in LTC

Which portion of tonight's session did you feel was more informative to you?



"The overview of the clinical and logistical part of the presentation and exploring useful websites logistics was great."



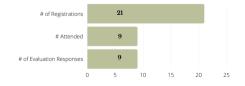
November 25, 2021

Member feedback:

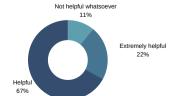
- · Incorporating IUD insertions and associated minor surgeries for future workshops
- · Including wound care as it relates to long term care and practicing skills for lumps and bumps

Impact to practice:

- · Increased confidence with performing onsite suturing procedures and applying new techniques
- Expanded suturing knowledge and willingness to perform procedures in the future



How helpful was having an event with practical and hands-on review of suturing skills?



"It was good practice which is always needed to keep up those skills"



my sutures"

Feedback From Facilities

In January 2022 we introduced an ongoing mechanism for feedback collection from facilities to strengthen the real-time quality-improvement work that the initiative can attend to. Questions on the survey focus on arising issues and areas for feedback from facilities.

- Jan 14: Facilities provided feedback around emergency response planning and access to interpretation services.
- Feb 14: Facilities provided feedback regarding their suture kit location.
- Mar 12: Facilities provided feedback regarding specialized medical equipment at their facility that the on-call physicians should be aware they can access.



Long Term Care Hub



www.fnwltc.com

The FNW Long Term Care Hub was developed in 2020 in response to the pandemic which brought the need for physicians to provide virtual care. Before 2021, the hub was only used to house the physician's Doxy.me accounts for virtual care. The Division revamped the hub to make it a full website with various other categories of information so that facilities can now refer to this website if they are looking for LTCI information or resources. Having this information stored in one place has been useful in our interactions with new

LTCI physicians as it gives them an idea of what the Division does and how we can support them.

Key data:

- There was an average of 4.8 pageviews per month from April 1 2021 - March 31 2022.
- The homepage had the highest page views (49) followed by the On Call Doctors page (29) which contains the Doxy.me links to virtual care for on-call physicians.



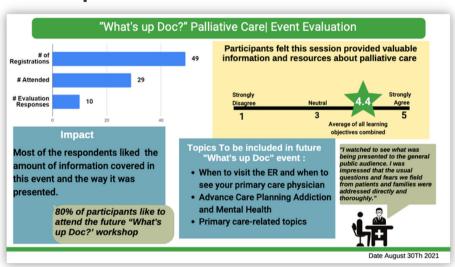
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ENGAGEMENT

PUBLIC ENGAGEMENT

What's Up Doc was an educational webinar series hosted by the FNW Division, with each webinar being led by a local family physician from our community. These events provided an opportunity for patients to engage in a dialogue with local health experts, and allowed family physicians to share their expertise on medical topics.

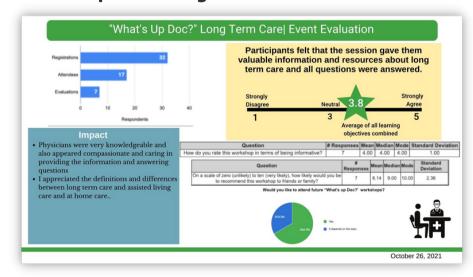
What's Up Doc - Palliative Care





What's Up Doc - Long Term Care





RECRUITMENT

Our recruitment process was improved to track physicians we are recruiting and currently available placements. We began advertising positions in the MD Update (a weekly email sent to our members), and developed a <u>recruitment video</u>. Our Division also worked with the Fraser Health Authority to improve the process for Return of Service (ROS) physicians - addressing some challenges with work permits. Additionally, changes were made to the LTCI onboarding process, as outlined below:

LTCI Onboarding Process:

- On-call manual & orientation process
- Orientation Manual
- Checklist for Division staff to follow throughout the onboarding process
- Checklist for items to discuss during onsite orientation
- Annual meeting for all new to LTC
- Whatsapp Group for new to LTC
- Check-in meeting after completing first year in LTC
- · Exit Plan including exit survey



QUALITY IMPROVEMENT

Work was done to implement an improved SBAR format at LTCI facilities. As well, the <u>SBAR</u> information page on the Long Term Care hub was updated with the relevant form and procedures. Further work was done to coordinate access to Point/Click Care (PCC) for the on-call physicians at all facilities.



FEEDBACK

The idea was suggested at a summer 2021 MAC meeting to coordinate tech support for Point/Click Care (PCC) for the on-call physicians at all facilities.



IMPLEMENTATION

Prior to implementation, on-call physicians would need to do paper charting. After implementation, with access to PCC, they can chart directly and see patients' histories, making it easier for physicians to cover other physicians when needed.



ACCOMPLISHMENT

All facilities are now on board with PCC and the call system was improved.



FUTURE

Future state planning to continually improve the PCC experience: At one of the MAC meetings a PCC representative attended and discussed capacity, and from that discussion, physicians identified areas of improvement for what PCC could do.

