

# Reflections



## Northern Interior Rural Division of Family Practice - Newsletter

BURNS LAKE - FORT ST. JAMES - FRASER LAKE - ROBSON VALLEY - MACKENZIE - VALEMOUNT - VANDERHOOF

## Welcome!

Welcome to the first issue of your Northern Interior Rural Division newsletter.

The Northern Interior Rural Division (NIRD), established in July of 2012, has a growing membership and professional kinship between its 53 members representing physicians throughout the communities of Burns Lake, Fort St. James, Fraser Lake, Robson Valley, Mackenzie, Valemount, and Vanderhoof.

The Division began the implementation phase of the A GP for Me project in March 2015, effectively launching the Division's year one business plan. During extensive consultation across the region, we heard from Division members who are anxious to learn more about the Division and the multiple initiatives happening throughout the region.

The Division plans to produce this newsletter quarterly as a way to communicate more effectively with our members, partners and other stakeholders. The newsletter will profile a variety of people/faces, activities and projects in the Northern Rural Interior region.

If you have a story idea or comments please contact Anneli Rosteski at [arosteski@divisionsbc.ca](mailto:arosteski@divisionsbc.ca)

We look forward to hearing and reflecting your voice.

- Dr. Sean Ebert, Board Chair

## In this issue...

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# Summer 2016

# Northern Interior Rural Division of Family Practice

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## What's new with NIRD?

### A GP for Me Initiative

After a comprehensive assessment and planning process with physicians, community members, and partners, NIRD successfully submitted a proposal to implement the A GP for Me project. A GP for Me was launched in the NIRD region in March 2015. Here are some highlights of what we've achieved so far:

### Strategy 1: Recruitment and Retention

Over the past year, 13 new physicians were recruited to communities in the NIRD region. 6 new physicians took over patient panels from physicians who were transitioning out of practice, preventing an estimated 9000 patients from being orphaned! Behind each successful recruitment was a lead physician who championed the recruitment process.

The team recently conducted several interviews with medical students and residents to learn more about factors that influence their decision about where to practice. It is hoped that this will help focus recruitment efforts with new grads.

"Compensation is something I would look at but not the first thing... work life balance is way more important to me."

- Northern Medical Program Resident

### Strategy 2: Rural Locum Program

The team submitted a proposal, which has been conditionally approved, to the Joint Standing Committee on Rural Issues to create a position for a rural floating physician who will rotate between communities according to their need. We know this need varies across communities and that there's seasonal variation in patient volume/need, so we are working hard to try and get our physicians more support.



"I think A GP for Me actually allowed us to start focusing our work, and it gave us the appropriate resources to develop and grow our division. I know some divisions were up and running but this project really allowed our division to grow and develop."

- Division Board Member

### Strategy 3: Sustainable Rural Communities

Through this strategy, we're supporting our physicians in Burns Lake with the process of implementing an EMR. This is a lot of work, especially when it comes to migrating paper charts to MOIS. So we're working closely with the Practice Support Program (PSP) to support Burns Lake as much as possible- they've already done a training session on the EMR and are working to be fully operational by September!

## Strategy 4: CME “Pills of Knowledge for Best Evidence Rural Practice”

On May 7, 2016 we hosted a full day learning event in Vanderhoof in partnership with Northern Partners in Care (NPiC), titled, “The Pills of Knowledge – Best Evidence for Rural Practice.” 47 participants attended including GPs, Specialists, NPs, health authority partners, and many others.

During the morning session, participants learned about partnership projects that are occurring throughout the North, including the Videoconferencing Project, the Secure Texting Project, and the Northern Clinical Simulation Centre.

During the afternoon session, 5 specialists (respirology, dermatology, psychiatry, pediatrics, cardiology) and 3 representatives from AMCARE/Health Data Collective rotated between tables in a World Cafe style and presented three ‘clinical pearls’.

A month later, we surveyed physicians and learned that 100% of respondents who attended the Pills of Knowledge CME had made a change to their practice as a result of having attended the event!

[CLICK HERE](#) to see a short video about the first Pills of Knowledge CME event!

### The information I learned at the Pills of Knowledge event will be useful in my practice

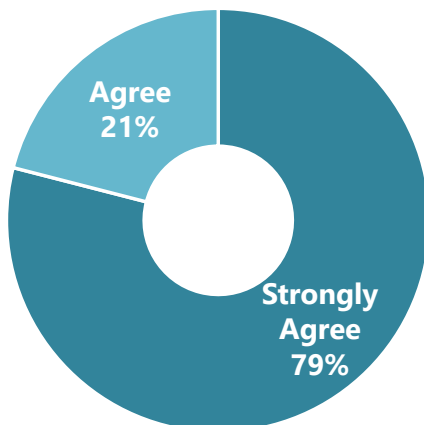


Photo above: Professional archers showing off at Family Camp Fun Day

## Family Camp Fun Day

A family camp day was held at Echo Lake Bible Camp to coincide with the Pills of Knowledge CME event so that participants' families could attend and have fun! We want to make sure that physician wellness is incorporated into all events.

The camp included wall climbing, archery, a scavenger hunt, and games/field activities.

[CLICK HERE](#) to see more photos from the family camp!

*“We have to text in the north. We have to send EKGs. We have to send photos. If we don't have secure texting, doctors are going to do it anyways. There should be a Northern solution with high uptake.”*

*“I now have better connections with local specialists, which will help with future referrals.”*

*- GPs who attended Pills of Knowledge*

## What's Next?

Feedback from physicians helped shape our plans for the next event. We are working with our partners to deliver a hands-on training event through the Northern Clinical Simulation Centre in Prince George in Fall 2016. We will be sending out invites as soon as we finalize a date and location!

## Child Youth Mental Health Substance Use (CYMHSU) Collaborative

A CYMHSU Collaborative meeting was held in Vanderhoof to correspond with the Pills of Knowledge CME event. 18 Local Action Team (LAT) members, including 4 physicians, attended and discussed concerns about CYMHSU issues with a psychiatrist from Prince George (Dr. Barb Kane). A common theme was the severe shortage of human resources and widespread communication challenges throughout the system.

Dr. Kane offered to tour the region with other psychiatrists to provide mental health and substance use information and support to local physicians in the NIRD region. This tour has been delayed due to staffing changes. The Division continues to work on a Psychiatry initiative at the Inter-divisional table and will provide an update in our fall newsletter.

## Northern Partners in Care (NPiC) Projects

NIRD has formed a strategic partnership with NPiC to collaborate on projects that aim to improve outcomes for rural family physicians, other health care practitioners, and patients:

### Northern Rapid Access to Consultative Expertise (NRACE)

Northern RACE provides family physicians with enhanced telephone access to specialist physicians for non-emergent health concerns throughout Northern BC. NRACE has grown from a single specialty area (cardiology) to 11 specialty areas.

### Telehealth Videoconferencing

This project is currently in the pilot stage. Two approaches are being trialed:

1. Specialists provide GPs and patients in small communities with support around complex health issues via videoconference.
2. A provincial chronic pain team provides support to GPs and other providers by videoconference

### Secure and Mobile Messaging

NIRD has partnered with NPiC, Northern Health, the University Hospital of Northern BC Physician Improvement Committee (UPIC), and the Prince George Division to collaboratively research and trial software to enable secure text messaging. We are currently wrapping up the first phase of the pilot.

## Get Involved!

During our recent Strategic Planning session, the Board identified member engagement and communication as two areas we want to build out. As a result, the Division is asking physician members for micro-projects that are driven by a specific area of interest or passion.

Watch for this newsletter monthly, it will profile a variety of people/faces, places and projects.

Contact NIRD Executive Director Errol Winter with your ideas or questions, and stayed tuned for more information in our next newsletter.

## Useful resources for physicians:

Link to NRACE page  
Info about Uptodate  
Link to BC Guidelines





## Community Sustainability Implementation Plan

The Community Sustainability Implementation Plan (CSIP) is a partnered initiative between Northern Health, NIRD, First Nations Health Authority, local physicians, and the Village of Burns Lake.

The CSIP will help support the Burns Lake physicians modernize their practice, which includes fully implementing an EMR, moving towards an inter-professional model of practice, and incorporating technologies such as videoconferencing and telehealth to improve access to primary care.

## Innovation Funding

The Division received Innovation Funding from Doctors of BC to support the Robson Valley Virtual Medicine project, which is being implemented in partnership with many organizations.

The project will establish infrastructure to support telemedicine consultations within the Robson Valley and Vanderhoof, connecting to Prince George and St. Paul's Hospital. This project is funded until March 2017.

We'll be sharing our learnings about the effectiveness of telemedicine in rural and remote areas as we roll out the project!

## Strategic Planning Process

The Northern Interior Rural Division held a strategic planning session on May 6, 2016. The session was attended by facilitated by Paula Carr, Physician Engagement Lead with Doctors of BC.

The current mission, vision and values provide guidance and direction to the Board and members and act as a rudder.

After reviewing the strategic plan, it was determined that the plan appropriately reflects the NIRD's purpose and work, and is still relevant at this time.

### Vision

To create healthy communities connected by a solid, collaborative physician community within a stable network of health care.

### Mission

Rural physicians supporting rural physicians helping to build healthier communities – together.

### Values

Collaborative  
Authentic  
Acting with Integrity and accountability  
Respectful  
Proactive

### Value Propositions for Members



## Contact Us

We want to hear from you! Send us your comments or questions about the work we're doing, or let us know if you want to get involved with any of our projects.

Email (Errol Winter, NIRD Executive Director): [ewinter@divisionsbc.ca](mailto:ewinter@divisionsbc.ca)

Phone: 250-626-7056 <https://www.divisionsbc.ca/nird/home>

## 2016 AGM

Join us on September 9 2016 @ 5:30pm for our 2016 Annual General Meeting at the Treasure Cove in Prince George. Dinner will be provided. Please email Carmen Funk ([cfunk@divisionsbc.ca](mailto:cfunk@divisionsbc.ca)) to register or for more information.