

2016–2017 ANNUAL REVIEW



We are **157 MEMBERS** strong, with
12 CHAPTERS collaborating
with **5 HEALTH AUTHORITIES**

FROM THE BOARD CHAIR: REBECCA LINDLEY



Ski day — Rebecca Lindley (right) with husband Jel Coward

Welcome to the 2017 Annual Review of the Rural & Remote Division of Family Practice (often just called “R&R”):

These are interesting times for health care in BC! The Ministry of Health has reinforced a clear message about the need for a 'connected' health care

system to be led by and rooted in strong, community-based primary care teams.

How that shifts and supports health care in each of our communities has yet to be seen. What is clear is that many rural communities have always provided comprehensive, coordinated care. There are barriers and challenges to the care we provide and they are quite different to non-rural areas; therefore, the changes needed are also quite different. We need to connect and communicate, from the ground up, a clearer understanding of what services and changes are needed.

So, our work as a division must continue at the grassroots, community level, and build momentum and collaboration with and through local, regional, and provincial relationships. Other organizations such as the First Nations Health Authority, other rural divisions, different levels of government, and

community groups are critical partners in the work to strengthen the rural voice and continue the improvements in rural and remote health care.

Meanwhile, as an organization, we continue to evolve in what work we do and how we do it. This year will see some changes in our board membership and the relationship between members, communities, and the board.

Enjoy a quick read of some of the division activities in our Annual Review including some fun photos of our hard-working practitioners 'hard-at-play' across this beautiful province!

And please continue to make your voices and needs heard within R&R and beyond. Your hard work, commitment to care, and to your communities is so appreciated.

Rebecca

OUR 2016–2017 HIGHLIGHTS BASED ON OUR STRATEGIC THEMES

The following activities highlight a sampling of Division and Chapter initiatives that are enabling a brighter and stronger future for rural health care.

1. Healthy and Engaged Rural Physicians

Sharing Rural Perspectives

In November, 60 physicians, staff, and other partners from across BC attended our **fall Forum on Rural Health** to explore and share how rural communities are advancing and innovating around the patient medical home/primary care home (PMH/PCH) models of care and integrated rural health services.

In February, our Division partnered with the Rural Coordination Centre of BC (RCCbc) to host the **3rd annual Rural Locum Forum**. This event brought together about 120 rural locums, residents, recent medical graduates, experienced physicians, rural leaders, and organization representatives for networking, learning, and exploring opportunities for supporting rural locums.

Continuing Professional Development and Networking

Chapters hosted a variety of physician engagement and continuing professional



Kayaking around Salt Spring Island — Paula Ryan

development events in their respective communities.

North Vancouver Island coordinated training modules to strengthen physicians' First Nations cultural awareness, and their ability to provide culturally safe and respectful environments. Additionally, the Chapter worked with the Child and Youth Mental Health and Substance Use (CYMHSU) Collaborative Local Action Team (LAT) to host presentations for physicians and providers by Dr. Bruce Perry, child psychiatrist, on the impacts of early childhood trauma.

Western Interior (formerly Lillooet & Area Chapter) coordinated the delivery of The CARE Course for local physicians, locums, nurses, and paramedics to enhance rural emergency skills.

Revelstoke and Western Interior

implemented a Clinical Coaching Pilot program for physicians for Family Practice Anesthesiology (FPA) and Enhanced Surgical Skills (ESS) and an operating room coaching program for nurses. This is a key pillar of the Rural Surgical and Obstetric Network (RSON), an initiative in development with the RCCbc.

Hazelton delivered ACLS, PALS, Fetal Health Surveillance, Neonatal Resuscitation, and SHOCK.

Physician billing webinars offered in partnership with the Society of General Practitioners of BC. Piloted by Salt Spring Island and then made available across our Division and to other rural divisions.

Collegiality, Mentorship, and Support

Through the **Rural Locum Teams** initiative, the Division, RCCbc, and Health Match BC, partnered to provide community support and practice coverage to communities in need of physician coverage, and to support new physicians interested in rural practice including increasing their comfort in rural practice. We are currently working with four communities in Interior Health and Northern Health areas.

2. Comprehensive Rural Health Services

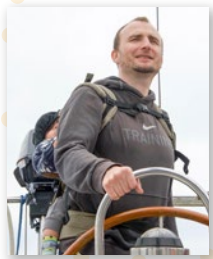
Primary Care & Interprofessional Teamwork

Enhancing longitudinal health care services to patients along the continuum of care through a team-based approach is being explored in all of our communities.

Supported by Island Health, **Gabriola** integrated a social worker following the success of their A GP for Me initiative.

Through Impact Funding, **Long Beach** worked with Island Health to implement and evaluate a social work position as part of an interprofessional team.

Long Beach also piloted a project to increase support for individuals living with chronic pain. The project included a variety of organizations and community partners to identify and deliver multiple services including education for physicians, health care providers, and patients, as well as movement and relaxation classes for patients.



Sailing around Gabriola — Maciek Mierzewski

Gabriola Island physicians hosted an education series with local paramedics to improve emergency care and team collaboration.

Western Interior developed a plan and evaluation framework for integrating a pharmacist in a physician's clinic to provide medication reviews for chronic and complex care patients.

Bella Bella was supported in their chronic disease nurse project, which is funded by the Joint Standing Committee on Rural Issues. The goal of this project is to enhance longitudinal care and improve outcomes for patients living with chronic disease.

Hazelton is working interdivisionally within the Northern Health region to redesign the delivery of psychiatric services.

North Vancouver Island is a partner in the Mount Waddington Collaborative Working Group, which is reviewing current health care delivery and identifying redesign to a sustainable model of care based on enhanced patient experience, affordability, and accessibility in rural and remote settings.

Salt Spring Island's Effective Access to Specialists project introduced two visiting specialist services and created



Fishing in Bella Coola — Julia Low Ah Kee and family

two new tools with the potential for spread. Evaluation data of the visiting psychiatry program highlighted the travel burden for rural patients. Over a 1.5-year period, locally provided psychiatry saved about 2,700 hours of patient travel, \$20,000 in ferry fares, and up to \$68,000 in lost income for patients.

Telehealth

The Division is working with health authority partners on a number of telehealth projects to improve access to care.

Clearwater piloted a monthly telehealth clinic for Blue River patients.

North Vancouver Island, Island Health, and FNHA utilized telehealth in the Port McNeill Collaborative Clinic to augment outreach to remote communities.

Gabriola Island's geriatric psychiatry clinics offered via telehealth have been an outstanding success.

Telehealth projects are underway in the **Western Interior** connecting psychiatry, orthopedic, internal medicine and general surgery specialists with the Lillooet site for virtual follow-up with patients. Plans are underway to set-up Lillooet physicians with surrounding remote First Nations bands for outreach and virtual follow-up.

Community Health and Wellness Collaboratives

The formation of the Gabriola Community Health and Wellness Collaborative on **Gabriola Island** has enabled the reach of primary care services to include prevention, promotion, and self-development in priority populations including mental health, substance use, and the elderly.

Child and Youth Mental Health and Substance Use (CYMHSU) Collaborative Local Action Teams

Our Division was pleased to support twelve communities participating in the CYMHSU Collaborative. Through the LATs, the communities developed local solutions to address gaps in mental health and substance use care for children, youth, and their families.

Salt Spring Island LAT developed a Suicide Intervention Toolkit which is being implemented by a number of communities.

Bella Coola LAT hosted a three-day workshop on Indigenous Tools for Living for front-line and support workers working with a complex trauma population.

Pemberton LAT launched Plan Y, a web-based wellness directory that acts like a mobile application and features youth-focused programs and services.

In **Hazelton**, through the Upper Skeena LAT, a video was created to celebrate and strengthen culturally relevant care for children and youth and to help others connect to them.

With the support of the LAT, **Western Interior** began monthly mental health clinician huddles in Lillooet and Ashcroft.

Gabriola Island delivered a workshop on Trauma Based Care for health professionals and community.

Rural Maternity and Surgical Services

With the goal of providing access to a single, coordinated maternal/child program for **North Vancouver Island** and low-risk births in Port McNeill, physicians are collaborating with the FNHA Maternity Steering Committee; Kwakwaka'wakw Maternal, Child, and Family Health Project; MORE-OB Learning Modules; and the Mobile Maternity Program for Mount Waddington.



Surfing in Long Beach — Carrie Marshall's boys



Hiking Hermit Trail in Rogers Pass — Victoria Vogt Haines (left)

Revelstoke and **Western Interior** are working with the RCCbc, Interior Health, and UBC to deliver enhanced surgical services and team coaching as part of a Rural Surgical and Obstetrical Network for BC.

Seniors

Revelstoke is working closely with Interior Health to establish a Seniors Health and Wellness Clinic to provide improved assessment and linkage with the interdisciplinary health care team and best possible outcomes for the senior population.

Gabriola Island collaborated with Island Health and community partners to offer and expand a peer-led exercise program for frail seniors and those with disabilities. Additionally, Gabriola Island collaborated with the local not-for-profit social services agency to initiate an Adult Day Program.

Building on the pilot project initiated through funding from the provincial A GP for Me initiative, **North Vancouver Island** focused

on developing and securing sustainable funding for their Adult Day Program.

Revelstoke, Western Interior, and North Vancouver Island are participating in the Residential Care Initiative to increase the quality of care of residential care patients.

Practice Improvements

A Practice Toolkit created by South Island Division was implemented in **Clearwater** and **Pemberton**.

Various supports and resources through the Practice Support Program are being accessed by the respective chapters.

3. Strong Collective Rural Physician Voice and Influence

Rural Divisions Network

A significant part of our work this past year has been facilitating a rural Divisions network in BC, through the leadership of Rebecca Lindley, our board chair; and Ray Markham, executive director of RCCbc, in partnership with Doctors of BC. This has involved engagement and presentations on “the rural lens” relating to the patient medical home/primary care home models of care.

Rural Patient Transport

Our Division commissioned and released a report by UBC’s Applied Policy Research Unit — “Rural Patient Transport and Transfer: Findings from a Realist Review” — and is contributing to a newly established provincial working group on rural patient transport.

Telehealth

A Division Telehealth Working Group provides leadership and support within our organization and with partners in developing and evaluating telehealth projects in rural communities.

Small Communities

Preliminary work has begun exploring the needs, priorities, and opportunities relating to small communities. Our Division led a process with the Northern Gulf Island communities and Gold River and facilitated a partnership with Campbell River and Comox Valley Divisions, Island Health, and the Shared Care Committee to develop a comprehensive plan and proposal for a rural mental health service model.

Western Interior participated in the formation and the ongoing activities under the Regional Alliance for Rural Health, formed by Interior Health, and is involved with a regional Rural Issues Working Group.

What’s Next?

The coming year will be an important one as we further develop our work within and across our rural communities and strengthen our partnerships with health authorities through local collaborative tables. Pathways will be implemented in our communities. In particular, we are excited about further building our working groups to support and advance key areas such as the patient medical home, rural maternity, and seniors’ services.

OUR TEAM

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Jenny Lee*, Hazelton
Erika Cheng and Amber Bacenas, Bella Coola
Francois Bosman, Gabriola Island

Jel Coward* and James Fuller, Pemberton
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Stuart Iglesias and Lauri-Ann Shearer, Bella Bella
Nancy Humber, Western Interior
Paula Ryan, Salt Spring Island
Stefan Grzybowski, Open Chapter
Victoria Vogt Haines, Revelstoke

Small Communities Physician Lead

Dana Hubler, Port Alice

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Helen Truran, Project Manager
Diana Hardie, Finance Coordinator
Katherine Brine, Project Coordinator
Jenny Chiu, Administrator

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Chellie Dickinson and Nicole Hochleitner-Wain, Western Interior
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Julia Sundell, Hazelton
Laura Soles, Clearwater
Nancy Rowan, Gabriola Island
Nicole Fricot, Revelstoke

Patti Murphy, North Vancouver Island
Rae McDonald, Pemberton, Bella Bella, and Bella Coola

A special thank you to everyone who has contributed to moving the Division and our Chapters forward including our partners: Island Health, Vancouver Coastal Health, Interior Health, Northern Health, First Nations Health Authority, Rural Coordination Centre of BC, Doctors of BC, Health Match BC, other divisions of family practice, and our funders: the General Practice Services Committee, Joint Standing Committee on Rural Issues, and Shared Care Committee.

*Interdivisional representatives

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

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