

# 2017–2018 Annual Review

We are **162 members** strong, with  
**13 chapters** collaborating  
with **5 health** authorities

## OUR VISION

Sustainable quality rural health services aligning local innovation within regional and provincial contexts.

## OUR MISSION

Our division supports and enables rural physicians to optimize health care services in their rural communities.

## OUR VALUES

- Strength of Community
- Integrity of Care
- Collaboration
- Diversity
- Innovation
- Transparency
- People — patients, families, providers

Bella Bella



**Rural and Remote**  
**Division of Family Practice**

A GPSC initiative

# From the Board Chair: Rebecca Lindley



Rebecca Lindley

Welcome to the 2018 Annual Review of the Rural & Remote Division of Family Practice. This review covers activities for the period of April 1, 2017 through March 31, 2018 (although March 2018 already seems like so long ago!!)

It has been a busy year. Beyond the ongoing demands of rural clinical care, the introduction of the Primary Care Network (PCN) planning process was a significant addition to the newer work of the Patient Medical Home (PMH) in our communities.

Hellos and Good-byes:

This spring, we welcomed Merritt as the newest Chapter to the R&R Division.

We have said farewell to Kathy Copeman-Stewart, who was widely respected and well-connected, in her five+ years as our Executive Director (ED). Kathy was an integral part of the growth of our Division from a small group of physicians in two communities, years ago, into an organization that now stretches the province. Kathy has an incredible ability to connect with people, support their thinking, and always see the positive side of things. Her tireless hours of effort to further our Division's work was so appreciated. We wish her well in her future endeavours.

We welcome Terrie Crawford as our Interim ED. Terrie was the former ED of South Okanagan Similkameen Division. Terrie is

rolling up her sleeves to understand how our Division works and meet the many faces of our members.

Our Division continues to advocate for the needs and differences of health care delivery in small rural communities. Our work is to collaborate at the local, regional, and provincial levels to navigate and strengthen rural voices in system redesign and resource allocation. Never a dull moment, and no shortage of work to be done, but onwards we go!

Huge thanks to all who have contributed over the past year, and especially to all our members, for their ongoing work in rural communities. Your dedication, commitment to community, and unflagging advocacy for improved care of rural patients is inspirational.

Rebecca

## Our 2017–2018 Highlights

*Through the lens of our three strategic themes, the following activities showcase key Division and Chapter initiatives enhancing the delivery of rural health care.*

### 1. Healthy & Engaged Rural Physicians

#### SHARING PERSPECTIVES

In November, our **fall Physician Leadership Retreat** with Vantage Point explored how we effectively engage physician leaders within and across our organization amidst board transitions.

In June, our **Division Retreat** focused on advancing rural practice within the Patient Medical Home concept with four rural Divisions of Family Practice, Vancouver Coastal Health, and First Nations Health Authority (FNHA). This was an important first step in dialogue and planning together.

#### CONTINUING PROFESSIONAL DEVELOPMENT

**Gabriola Island** hosted five paramedic and physician team-building and education sessions in the urgent care room. Physicians also completed the three-part series on palliative and end-of-life care.

**Hazelton** delivered PALS, CASTED, and Neonatal Resuscitation courses.

**Long Beach** and **Gabriola Island** hosted education sessions on suboxone and opioid guidelines.

**North Vancouver Island** coordinated the delivery of PAD Hypertension in Primary Care, Rural OB Emergencies, and a session on Suboxone.

**Physician billing webinars** were hosted in partnership with the Society of General Practitioners for rural physicians across our Division and in other rural divisions.

#### GROWING PARTNERSHIPS

**North Vancouver Island** and Campbell River Division partnered to improve access to maternity care services through building strong relationships between families, local health care providers, and the physicians and team from the Campbell River Maternity Clinic. To reduce transportation and other patient challenges, physicians from the maternity clinic travel to Northern Vancouver Island once per month for appointments in a team-based care environment with NVI health care providers.

The **Division** partnered with the Campbell River and District and the Comox Valley Division of Family Practice in a Shared Care initiative to improve the delivery of mental health and substance use services to five isolated rural communities. This initiative involves creating new relationships among the GPs, psychiatrists, and Island Health mental health workers to deliver accessible, coordinated, and comprehensive MHSU services to patients in their home communities. The use of telehealth to support these services is being explored.



Gabriola Island



The Hazeltons

#### RECRUITMENT AND RETENTION

**Clearwater** welcomed three Practice Readiness Assessment (PRA) physicians and has been actively engaged with the Rural Locum Teams initiative, hosting physicians new to rural practice. These new physicians are teamed with a mentor physician in the community or another locum physician.

**Western Interior** welcomed two PRA physicians and is partnering with Thompson Region and rural communities to explore innovative ways to encourage new grads to locum in remote areas.

## 2. Comprehensive Rural Health Services

### PATIENT MEDICAL HOME

To strengthen the rural PMH, the Division is focusing on two main strategies: supporting our newer communities through assessment, and planning and implementation of community-specific interdisciplinary team-based initiatives and working with the Practice Support Program on the PMH Assessment and Panel Clean-up processes.

**Long Beach** developed care-planning tools and communications channels with a focus on vulnerable patients.

**Gabriola Island** implemented monthly interdisciplinary rounds with physicians, a mental health nurse, a social worker, a home care nurse, a case manager, and visiting rehabilitation professionals. Community paramedics were also welcomed and integrated in health care delivery. Additionally, two pathways for vulnerable populations (seniors and mental health) were developed to enable the right care by the right provider at the right time to facilitate early intervention, harness local resources, and provide a seamless continuum of care.

### TEAM-BASED CARE

**Western Interior** ran a pilot to demonstrate the effectiveness of having a pharmacist working in the clinic to complete medication reviews and medical management for complex patients.

**Long Beach** implemented, evaluated, and sustained the role of a social program officer in partnership with Island Health.

With JSC funding, **Bella Bella** evaluated a Chronic Disease Nurse position to support coordinated care for patients by physicians, specialists, and First Nation-funded services, which resulted in Vancouver Coastal Health's continued support for this role.

### SENIORS

**Revelstoke** initiated a Seniors Health and Wellness Centre to benefit those with age-related frailty and complex medical conditions through an interdisciplinary, team-based approach.

### MATERNITY

**North Vancouver Island** physicians participated in First Nations Health Authority's (FNHA) Kwakwaka'wakw Maternal, Child and Family Health project that will provide an interdisciplinary model

of maternity care, including midwifery. Additionally, Building Blocks for Sustainable Rural Maternity Care is in progress—a JSC funded North Island project with FNHA, Island Health, physicians, and others working together on rural sustainable maternity care.

**Salt Spring Island** worked with Island Health on seeking a more sustainable midwifery model for the community.

Through the Rural Surgical and Obstetrical Network (RSON), **Revelstoke** and **Western Interior** are involved in expanding surgical services and strengthening the network between rural communities and regional referral centres.

### ENHANCING ACCESS

**Salt Spring Island's** Effective Access to Specialist Services project funded by Shared Care concluded and their visiting Specialist Toolkit is being adopted and adapted in northern BC.

To enhance patient care, **Pathways** was implemented across the Division and a video was created to demonstrate how physicians can use the resource.

### VIRTUAL CARE

Physicians from the **Port McNeill Medical Collaborative** worked with Island Health and First Nation partners to plan and implement virtual primary care in Sointula and Zeballos, with the goal of informing a broader implementation on the North Island and the rest of the health authority.

**Western Interior** trialed virtual peri-operative clinics to have entire surgical teams present at virtual intake meetings, during which patients remained at their rural site and only needed to travel for the actual procedures. This project has completed and is now running independently.

In conjunction with Interior Health, **Clearwater** developed a strategic marketing and promotion plan to increase uptake of available telehealth primary care to patients in Blue River during the winter.

**Gabriola Island** continued offering virtual geriatric psychiatry clinics, BC Cancer services and other specialty care services for seniors.



Clearwater



Salt Spring Island

### CHILD AND YOUTH MENTAL HEALTH AND SUBSTANCE USE (CYMHSU) COLLABORATIVE LOCAL ACTION TEAMS

The two-year provincial CYMHSU Collaborative wrapped up at the end of 2017. The Division was pleased to support twelve communities in the development of local solutions to increase access to mental health and substance use supports and services.

**Salt Spring Island's** Suicide Intervention Toolkits have spread to 11 other communities in BC and were featured in the BCMJ.

**Western Interior** organized child and youth psychiatry visits to three communities, complemented by virtual follow-up appointments.

**Pemberton** developed a web-based mobile app called Plan-Y.ca, a directory of wellness services and supports for children and youth in the community.

**Bella Coola** and **Gabriola Island** hosted community-wide trauma-informed workshops.

**Revelstoke** hosted motivational speakers and educators including Dr. Martin Brokenleg (youth at risk), Dr. Lee Brown (emotional competency), and Victoria Maxwell (mental health, disability, and self-expression).

**Long Beach** developed a referral matrix for physicians to help navigate local and non-local programs and services.



Bella Coola



North Vancouver Island

### COMMUNITY HEALTH AND WELLNESS COLLABORATIVES

The Gabriola Health and Wellness Collaborative (representing over 20 local organizations and groups) created under A GP for Me, uses principles of collective action to address the social determinants of health and gaps in primary care. Developments included continuation of an adult day program, peer-led exercise programs, yoga for recovery, mental health week events, SAD light installment at the library, and selected community reading programs.

**Western Interior** has partnered with representatives from Ashcroft's Wellness Action Health Coalition, Interior Health, and FNHA to join the CHANGE BC Interdivisional Council. These partners are co-developing a Shared Care proposal to pilot an innovative Metabolic Syndrome and type 2 diabetes care pathway in four communities.

**Long Beach** participates in the Coastal Family Resource Coalition and the West Coast Harm Reduction Working Group and hosted a local Substance Use Summit to discuss West Coast priorities with service providers and stakeholders.

**North Vancouver Island** physicians participated in a RCMP-sponsored Youth Anxiety Awareness event, as well as district meetings, council meetings, and strategic planning sessions on addressing the concerns of marginalized populations and the social determinants of health.

### 3. Strong Collective Rural Physician Voice and Influence

#### RURAL FORUM

In December, the **Division** hosted a Rural Divisions Forum with approximately 80 people representing our Division (physician leaders, members, coordinators, and staff), other rural Divisions, GPSC, Ministry of Health, and health authority partners. A number of key areas were explored, including First Nations health and partnerships, rural maternity services, social workers as part of rural interdisciplinary teams, community paramedicine in our communities, rural seniors' services, and Pathways.



Revelstoke

## Our 2017–18 Team

#### BOARD OF DIRECTORS

Rebecca Lindley, Chair  
David Whittaker, Vice-Chair  
David Butcher, Treasurer

#### PHYSICIAN LEADS

Greg Kutney, North Vancouver Island  
Francois Bosman, Gabriola Island  
Carrie Marshall, Long Beach (Board Secretary prior to Sept 2017)  
Lauri-Ann Shearer, Bella Bella  
Amber Bacenas, Bella Coola  
William Ho, Pemberton  
Jenny Lee, Hazelton  
Godwin Ameh, Hazelton (April 2018)  
Nancy Humber, Western Interior  
Safi Saeed, Western Interior (June 2018)  
John Soles, Clearwater  
Vikki Vogt-Haines, Revelstoke  
Kate McCarrroll, Revelstoke (October 2017)  
Manya Sadouski, Salt Spring Island  
Stefan Grzybowski, Open Chapter  
Jel Coward, VCH Regional Physician Lead

#### BOARD DEVELOPMENT COMMITTEE

John Soles, Chair  
Dana Hubler, BDC Member  
Rebecca Lindley, Board Chair

#### FINANCE COMMITTEE

David Butcher, Treasurer  
Rebecca Lindley, Board Chair  
Joanne Wall, Accountant

#### DIVISION TEAM

Kathy Copeman-Stewart, Executive Director  
Leanne Morgan, Director of Operations (November 2017)  
Diana Hardie, Finance Coordinator  
Helen Truran, Project Manager  
Terrie Crawford, Project Manager (June 2018)  
Harpreet Kullar, Operations Coordinator (July 2018)

#### CHAPTER COORDINATORS

Abbie MacPherson, Long Beach  
Chellie Dickinson, Western Interior  
Tawanda Hatendi, Western Interior (May 2018)  
Patti Murphy, North Vancouver Island  
Nancy Rowan, Gabriola Island  
Janine Gowans, Salt Spring Island  
Julia Sundell, Hazelton  
Katherine Brown, Revelstoke  
Laura Soles, Clearwater  
Laurie Stewart, Rural Locums/Open Chapter (November 2017)  
Rhonda Orobko, Bella Bella (May 2018)

**Thank you** to our GPSC Community Liaison Paula Carr, and consultants Susan Climie (governance), Kylie Hutchison (evaluation), and Lori Graham (communications).

**A special thank you** to everyone who has contributed to moving the Division and 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: General Practice Services Committee (Doctors of BC and the Government of BC), Joint Standing Committee on Rural Issues, and Shared Care Committee.



Lillooet

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.

[www.divisionsbc.ca/rural-remote](http://www.divisionsbc.ca/rural-remote)

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