



# CENTRAL INTERIOR RURAL PRIMARY CARE NETWORK

“Optimizing accessible primary care service delivery  
with coordinated, team-based, culturally safe approaches.”

## MESSAGE FROM THE CO-CHAIRS

This is a time when we normally try to make the most of those last few long, hot days of summer before fall is upon us. This year as we think of our families, friends and colleagues who are affected by the devastation of wildfires, cooler weather can't come soon enough. We hope everyone finds safety for themselves and their loved ones.

As we start to transition into fall, our Primary Care Network is beginning a transition of its own. This year is our 4th and final year of PCN implementation, and we will be looking ahead to our PCN's future. The PCN steering committee continues sustainability planning, and met over the summer to discuss unfilled positions, change management and governance options going forward. The current proposal for ongoing governance is to downsize the change management activities to what is manageable by the PCN Lead and other division positions. Additionally, the PCN steering committee will meet quarterly as a sub-committee of the Collaborative Services Committee.

It's also been an exciting year for hiring! We have filled more than 50% of our allotted positions from the service plan and are working hard on plans for the remaining unfilled positions. You will meet 5 new PCN clinicians on page 3-4 with more hires coming soon as we expand the PCN RN program in the region. We look forward to sharing updates with our stakeholders as we plan for the sustainable future of our PCN.

As always, let us continue this work together.

Jill & Kelly  
CIR PCN Steering Committee Co-Chairs

## WHAT'S INSIDE?

**DAHOOJA / DZIN GUZUN / WEYT-KP / GOOD DAY!**

DAKELH / TSILQOT'IN / SECWEPEMC / ENGLISH

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**The Central Interior Rural  
(CIR) Primary Care  
Network (PCN) is situated  
on the ancestral,  
traditional and unceded  
territories of the  
Secwepemc, T̓silhqot'ín  
and Dakelh Dene  
(Ulkatcho) Nations.**

“

## REMINDER:

PLEASE USE THE ZERO-FEE  
ATTACHMENT CODE [97630](#) WHEN  
ATTACHING ANY NEW PATIENTS.

# PCN UPDATES



**1.** Hired for vacant Williams Lake Social Worker and Mental Health Clinician; started in May/June.

**2.** Hired for Williams Lake PCN Dietitian; started in May.

**3.** Hired for OMH Aboriginal Patient Navigator; started in May.

**4.** Hired RN Diabetes Educator for Secwepemc Nation; started July.

**5.** As of April 2023, we have hired for 49% of allotted PCN positions.

**6.** PCN Hub Clinic is busy and receiving upwards of 60+ referrals weekly

**7.** Took Drs. Knuff and Arani to Dog and Canoe Creek for a cultural experience on June 28th.

**8.** Took OMH providers & Shared PCN resources to White Feather Health Centre in Canim Lake for a cultural experience July 27th.

**9.** Launched CIR Culture Kit website to support cultural safety learning for PCN employees.

**10.** Working with community MSHU to delineate between PCN and community scope for mental health and define 'moderate' more clearly for clinics.





# WELCOME NEW PCN CLINICIANS!

## **RENELLE HUNTER: WL REGISTERED DIETITIAN**

Renelle grew up in Saskatoon where she attended the University of Saskatchewan. After completing her nutrition degree, she moved to BC to start her career as a dietitian. Renelle feels that dietetics perfectly combines her passion for food and interest in science. She has experience working in a variety of settings, including primary care, long-term care, and private practice. Her goal is to help people develop sustainable, healthy eating patterns while still enjoying all the foods they love.



Food and nutrition have always been important to Renelle. She grew up spending a lot of time in the kitchen and still enjoys trying new recipes and flavours. She knew she wanted to be a dietitian from a young age and feels grateful to be able to pursue her dream. When she is not working, Renelle spends time hiking with her dog, playing tennis, and baking tasty treats. She loves living in BC and is looking forward to exploring the Cariboo area!

## **GUNREET BRAR: WL MENTAL HEALTH & SUBSTANCE USE CLINICIAN** (PREVIOUSLY CHELSEY MILLER)



Gunreet was born and raised in Surrey, B.C., commonly known as 'little India' by the Indo-Canadian community. During high school Gunreet took a psychology course that she really enjoyed. Though she took a few turns along the way to nursing and even a make-up course, she found her way back to a passion for psychology. She went on to complete her Bachelor of Psychology in 2022 at Douglas College. Since completing her Bachelor of Psychology, Gunreet has worked with at risk youth, as a behavioral interventionist, and as a mental rehab worker.

Throughout her journey, Gunreet has come to recognize the pivotal role of trauma in many people's lives and its effects at an individual, family, cultural, societal, and even global level. She aspires to be a positive symbol for others with similar backgrounds and hopes she can encourage people to pursue similar paths and embrace their potential for healing and growth.

Beyond her professional life, Gunreet loves being in nature, hiking, and is training her cat to walk on a leash so her cat can join her on outdoor adventures in the Cariboo this summer.

## **BARB JONES: WL SOCIAL WORKER** (PREVIOUSLY JANE BARNETT)

Barb Jones is a registered social worker with over 25 years of combined experience working with families in Williams Lake and the surrounding area. She is proud to say that she is Williams Lake born and raised, and so are her children and grandchildren!

Barb has a passion for alternative dispute processes that lead her to do a MA in Conflict Analysis and Management through Royal Roads University and get involved in restorative justice and family mediation.



# WELCOME NEW PCN CLINIICIANS!

## **BARB JONES: WL SOCIAL WORKER CONT.**

Her roots, and family, are deeply embedded in the Williams Lake community, and she has a vested interest in helping make Williams Lake a place where everyone can thrive.

In her spare time, Barb enjoys exploring the outdoors, such as boating on Quesnel Lake and quadding the endless trails the Cariboo has to offer. She is looking forward to working with PCN and being part of a team that can positively make a difference in people's lives.

## **JILLIAN NEUNER: THREE CORNERS ABORIGINAL DIABETES NURSE EDUCATOR**



Jillian Neuner is a registered nurse and certified diabetes educator and has been employed by the Interior Health Authority since completing her BSN in 2004. In her 19 years of nursing, she has gained valuable experience in many areas including long-term care, maternity, palliative care, medical/surgical, and community nursing. Since 2012 she has been working exclusively at the Diabetes Education Centre (DEC) as the Diabetes Nurse Educator for Williams Lake and surrounding areas.

Jillian gained extensive knowledge and experience at DEC, where she was an effective leader in developing the program and ensuring clients received prompt diabetes management support in a multidisciplinary team approach. Observing the many challenges that impact health outcomes unique to Indigenous populations affected her deeply. These experiences urged her shift to a new position as Aboriginal Diabetes Nurse Educator in hopes of having a positive impact on supporting diabetes management in the Secwépemc communities.

Jillian, her husband, and two children live in 150 Mile House and when not working she enjoys hiking, paddle boarding, fishing, soccer, watching her son play hockey and spending time at her recreational property in the beautiful Tatlayoko Valley.

## **SHERRI FLEMING: 100 MILE HOUSE ABORIGINAL PATIENT NAVIGATOR**

Sheri just relocated to 100 Mile House from Thunder Bay, ON. Previously, Sheri was the Communicable Disease Coordinator for a mobile clinic, where she was part of a team who serviced and traveled to nine First Nations communities. Prior to that, Sheri worked with the Family Health Team clinic for 7 years. During that time, she often volunteered for many duties outside of her job description, like evacuating fly-in communities from flooding and fires in Ontario, and providing nursing care and meals while the evacuees were in her small city.



Sheri has a love for traveling, learning and helping First Nations communities in any way that she can, which motivated her to return to school for nursing. During the pandemic, Sheri decided to further her education and has now nearly completed her degree in Gerontology – all while working full-time! She has also helped her partner start up a small business and is excited to get their brand out in BC.

She loves playing both indoor and outdoor sports, hiking and exploring the area. She is looking forward to exploring BC and joining the community of 100 Mile House.



# PATIENT IMPACT STORY

As the primary health care system evolves, we continue to explore how we all work together to care for patients in the Cariboo and integrate our Primary Care Clinicians as we build our Primary Care Network. A successful example of this involves our Clinical Pharmacist, Nadheen, and our Occupational Therapist, Bebe, who collaborated to care for a person with chronic pain, achieving positive outcomes.

Initially the patient was referred to Nadheen by a primary care provider due to chronic pain and neurodegenerative disease of the cervical spine and mid-back. The chronic pain was severely impacting their quality of life and contributing to debilitation in activity. When referred to Nadheen, the patient was taking transdermal fentanyl combined with IR hydromorphone 5-6 times per day for pain control.

Nadheen's schedule allows for 1-hour appointments where she does a thorough medication review and comprehensive history, which revealed that the patient was experiencing significant hyperhidrosis, or excessive sweating, leading to the fentanyl patches falling off and needing to be taped back on. This meant the patient was not getting a full dose of their medication. Nadheen recommended they replace the fentanyl with an oral, controlled-release hydromorphone and referred them to the PCNs OT, Bebe.

In Occupational Therapy Bebe found that the patient's pain was significant but like many people, they were compelled to push through the pain in their daily life. The pain was so intense they couldn't tolerate any touch and even gentle manual therapy techniques could not be used. The patient described their pain as, "I'm using 8+ because that's about as high as I can go without laying in the bed and screaming."

Bebe's first approach was to reduce the strain on the affected muscles as much as possible. She recommended the patient be referred for a cervical orthotic device fitted to reduce the compression of the cervical nerve root. Recognizing that orthotics can take a long time, and as an interim measure to help relax the muscles so Bebe could start manual therapies sooner, she suggested they buy a soft cervical collar and thoracolumbar postural support device online.

After several weeks of treatment, the patient is feeling better and there is a noticeable improvement in their mood and quality of life. Pharmaceutically, the patient has reduced their use of IR hydromorphone and their total daily use of opiates has reduced from 415 morphine equivalents (MME) to 250 MME. Physically, after wearing the soft cervical collar and lumbar support, the patient's muscles on the right side show normal muscle tone, and the left side is much more pliable. In OT, Bebe can now use normal pressure during manual therapy. If the patient continues to progress well, they may not need a cervical orthotic at all.

Most importantly though, their pain is significantly reduced which has allowed them to gradually return to golfing and gardening. Recently they said to Bebe "Something's working." They felt they were "down 1 point" on the pain rating scale and that it was "amazing how much difference one point can make." The patient feels relieved overall that something is finally having a positive effect on their pain.

This collaborative approach to care between Nadheen and Bebe is a great example of team-based, wrap-around care and the combination of their expertise resulted in tangible, functional improvements for the patient. As the primary care landscape continues to evolve, these success stories underscore the profound impact that collaboration and innovation through team-based care can have on patient outcomes.



Bebe Makena  
Primary Care Occupational Therapist



Nadheen Murray  
Primary Care Clinical Pharmacist

# CULTURAL SAFETY CORNER

Over the Summer, Division staff took 2 different groups of providers out to First Nations communities for cultural safety learning experiences, and there are plans for a 3rd trip in the Fall. The trips provided invaluable learning experiences for the providers, who came out with a better understanding of what it is like to live in a rural First Nations community, what services are available at the Nation health centres, and traditional medicines and healing practices. The Division was also able to share information with the health centres on healthcare resources First Nations community members can access in Williams Lake and 100 Mile House, like the PCN clinicians, the NP virtual walk-in clinic, and the new maternity clinic.

**WE WOULD LIKE TO EXPRESS DEEP GRATITUDE TO THE COMMUNITIES, HEALTH CENTRES AND HEALTH CENTRE STAFF FOR HOSTING US, AND A BIG THANK YOU TO OUR FIRST NATIONS PCN PARTNERS WHO HELP ORGANIZE THE TRIPS!**

Drs. Knuff & Arani Tour  
Health Centres in  
Xgat'tem and  
Stswecem'c & Visit  
Letwilc Recovery Centre  
in Esk'etmc!



OMH PCN Providers  
Visit Tsq'Escen and Tour  
White Feather Health  
Center!



**These trips aim to enhance understanding, cultural safety and awareness for primary care providers through experiential learning.**



## UPCOMING EVENTS

September 8-9: **Speaking our Truth Competition Pow Wow** at the Chief William Pow Wow Arbour hosted by Williams Lake First Nation

September 30: **Truth & Reconciliation Day and Orange Shirt Day.** Keep your eyes on the Orange Shirt Society Facebook page for activities.