



**GENERAL BOARD MEETING
WEDNESDAY, DECEMBER 20, 2006**

QUESTIONS & ANSWERS

Submitted by Lynn Peachey

Q

Why is there not a Client Relations Manager for the Central Region like there is in the South Island Region? I am aware that there is a person designated to be the "intake" person but to my understanding there is not a Client Relations Manager to manage the function like there is in the South Island Area?

A

The Client Relations Office was originally established and resourced in the former Capital Health Region, prior to the island wide amalgamation of six healthcare entities into VIHA on December 12, 2001. Although there were no formalized Client Relations Offices in the other five health entities that formed VIHA, this service was provided in other ways.

A recent reorganization of some of our corporate services has resulted in the establishment of a centralized intake function to receive and route concerns from across VIHA through the Client Relations Office, which is located in Victoria. The Client Relations Office works with the appropriate program staff to ensure each concern is reviewed and followed-up in an appropriate manner. Expansion of the Client Relations Office in the past few years has been deferred due other competing health care priorities. At this time we feel we can deliver the required service through the expanded scope of responsibility of the current manager and our centralized intake function.

Q

Are the staff who are part of the mobile Crisis Response Team in Nanaimo considered VIHA Psychiatric Nurses and therefore they must be CRPNBC registered?

A

Nurses working in Mental Health and Addiction Service programs, including the Nanaimo Crisis and Access Team, may be qualified as either RNs or RPNs, and must be registered with the appropriate professional body (CRNBC or CRPNBC).

Q

Your response to questions submitted in September 2006 mentioned Child and Youth Mental Health as being in charge of the project to enhance Crisis Intervention in the Central Area. What I do not understand is...Is the Child and Youth Mental Health you mention a Division of VIHA or is it a Provincial Ministry?

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A Child and Youth Mental Health is a program within the Vancouver Island Health Authority's Child, Youth and Family Health portfolio. It is not a provincial ministry. Ultimately, the Ministry of Health (a provincial government ministry) is the main funding source for all VIHA program and services.

Q **The field of Child Psychiatry for the ages of 6-11 years old is one of the fastest changing in terms of recognition of symptoms and the types of early interventions that can be applied. My understanding is that the Crisis Response Team for the Central Area is primarily dispatched by volunteers who help with the Crisis Line and primarily help with Suicide Prevention. Is it fair to expect them to function at the same level as a specifically trained Psychiatric Triage Nurse?**

A The use of community-based Crisis Lines to support the dispatch of Crisis Teams is not uncommon. Highly trained psychiatric professionals are not only in short supply (both in BC, across Canada and around the world), but they are also costly. These specialized resources must be used to provide services and care where they are most needed and have the greatest impact. It is highly unlikely that smaller communities would be able to staff a Crisis Response Team – let alone their dispatch function – with dedicated child psychiatry expertise. Nor would that be desirable, as it would remove a valuable, highly trained Clinical Specialist from providing direct patient care and assessment.

Crisis response should focus on assessing current and anticipated danger to a child or others and the safe containment of individuals until they can be referred to appropriate resources.

Nanaimo has a Child Mental Health Team (through the Ministry of Children and Family Development) and two Child Psychiatrists with access to inpatient beds in the Pediatric Unit at NRGH. Children and youth throughout VIHA's service area have equal access to the tertiary beds at Queen Alexandra Centre for Children in Victoria, and approximately 50% of admissions are from outside the Victoria area.

Q **My understanding is that recognizing the symptoms of early Psychosis is a much more complex matter than was originally thought. It is also my understanding that it is imperative to intervene early so that these patterns do not become established in the brain. What funding has been allocated so that the Crisis Response Team has access to the most recent training and information in these matters?**

A The VIHA Early Psychosis Intervention network connects psychiatrists, physicians, nurses and other mental health practitioners with an on-going program of information and education. A special Early Psychosis Intervention training event for workers on

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Vancouver Island was held earlier this month led by Dr. Richard Williams, a Victoria-based psychiatrist who specializes in the treatment of early psychosis and schizophrenia.

VIHA's Early Psychosis Intervention program is part of a provincial network that provides information, education and service coordination to clients, families, health, education and social service workers. An excellent website with valuable general information is maintained by the Fraser Health Authority at <http://www.psychosissucks.ca/epi/>.

Q

As a member of the public who lives in the Central Area of Vancouver Island am I entitled to see the detailed budget for the Island? If so how may I access it?

A

VIHA is committed to openness and transparency, and that includes information of a financial nature. Extensive financial information about the Vancouver Island Health Authority is available on our website at:
www.viha.ca/about_viha/accountability/financial_reporting.htm

It is important to note that VIHA is organized, and our budgets are developed, along programs lines, not along geographic lines or by facility.

Q

In your opinion upon what date is it reasonable for the stakeholders to have been consulted?

A

This question is broad in nature, so a general response is provided. VIHA consults with a variety of stakeholders, both external (e.g. members of the public) and internal (e.g. staff and physicians) on a variety of issues and to a variety of degrees of detail, depending on the issue.

For example, prior to the finalization of our Five Year Strategic Plan in March 2006, VIHA underwent a thorough and extensive consultation process involving both internal stakeholders and, in recognition of the importance of health care services to VIHA residents, members of the public.

The draft strategic plan was release in October 2005. This was followed by months of consultation from October 2005 to February 2006. The consultation included presentations, open houses, written correspondence and an on-line feedback mechanism. In total VIHA held 25 open houses in 14 communities for members of the public. Throughout the consultation process, we heard from staff, physicians, Regional Hospital Districts, municipalities, First Nations groups, community groups, MLAs, the Ministry of Health, and of course, members of the general public.

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Submitted by Joanne Moe

Q

Since there is a shortage of family physicians in BC, what is VIHA doing to utilize Nurse Practitioners?

A

Nurse Practitioners were first licensed in the province of British Columbia in 2005 and to date there are 38 fully licensed Nurse Practitioners working throughout the province. In VIHA we have an interdisciplinary steering group that is responsible for creating opportunities for Nurse Practitioners on the Island. The model that we have developed is one where Nurse Practitioners are part of an interdisciplinary team that includes physicians. The purpose of this approach is to ensure that all members of the team are doing work that is most appropriate to their skills and knowledge. For example, in Ladysmith we have a Nurse Practitioner who is part of a primary health care practice and is able to apply skills and knowledge that are complimentary to those of the family practitioner. We also have Nurse Practitioners working at the James Bay Clinic in Victoria and in the End of Life Program in Courtenay.

The Vancouver Island Health Authority is actively recruiting for Nurse Practitioners, provincially, nationally and internationally, to work in a variety of areas throughout the health authority, with particular focus on areas where access to care is difficult due to factors such as remoteness, limited number of care providers and populations with special needs.