

## PHC & CDM PROGRAM UPDATE – January 2009

### *Realizing Possibilities Through Partnership*

#### **Events:**

Date	Name	Location	Audience	Contact Info:
January 21 2009	Complex Regional Pain Syndrome	Comox Valley	Primary Care Practitioners	Patricia Foster for details Presenter: Dr Alan Berkman
January 23, 2009	Open House	CVNC – new site	Community	Patricia Foster
February 17, 2009	Sleep Management and Chronic Pain	Comox Valley Nursing Centre	Chronic Pain clients and service providers	Brenda Bouttell CVNC
February 18, 2009	Everything You Wanted to Know About TIA's & Strokes	Comox Valley Nursing Centre	Community	Patricia Foster & Willa Cannon
February 21, 2009	Supporting Our Youth in Difficult Times Prevention and Early Intervention of Eating Disorders	Comox Valley Nursing Centre	Community (Parents/Guardians )	Lynn Redenbach, North Island Regional Eating Disorder Program
February 27, 2009	Chronic Pain Management	Comox Valley Nursing Centre	IHN staff & 3 <sup>rd</sup> yr NIC students	Brenda Bouttell
Feb 2009	Monthly calendar of events at Yakimovich Wellness Centre	Yakimovich Wellness Centre at the Hillside Seniors Health Centre	Seniors, caregivers and health care providers	Liz McCarter, Wellness Coordinator or <a href="http://www.viha.ca/hshc/yakimovich_wellness_centre.htm">http://www.viha.ca/hshc/yakimovich_wellness_centre.htm</a>
March 2009	Embrace Aging Month	Victoria- multiple sites	Seniors	Lori McLeod, Executive Director, Eldercare Foundation <a href="http://www.gvef.org">www.gvef.org</a> , click on the red Embrace Aging icon

#### **New Physician Initiatives:**

- BCMA SSC RFP – Physician Consultants Supporting Primary Health Care - submission deadline January 15, 2009
- GP Divisions – currently working with Duncan and Oceanside pilots.

### **Chronic Disease Management Forums:**

- First CDM Forum held for mid/north island practitioners October 18<sup>th</sup>, 2008. The topic was hypertension and blood pressure management; the Regional Support Team received very positive evaluations of the session; 53 GPs attended and 24 MOAs.
- Next South Island CDM Forum is being held March 11, 2009 and the next Mid/North Island Forum is tentatively set for March 28, 2009 in Nanaimo. The topic of both Forums will be Women and Heart Health.

### **Diabetes Education Centres**

- All six Diabetes Education Centres in VIHA (Victoria, Duncan, Nanaimo, Parksville, Port Alberni, Campbell River, Port McNeill/Port Hardy) have had a significant increase number of referrals in the past year.
- All centres are trialling alternate service models to keep up with demand.
- Nanaimo General Hospital has a new Pediatric Diabetes Nurse and Pediatric Diabetes Dietitian.

### **Integrated Health Networks:**

- Six Integrated Health Networks are up and running and seeing patients in conjunction with participating family physician offices. Currently there are 75 physicians involved with the teams island wide. Our target for 2008/09 is 84.
- Teams are currently working to obtain both physician and then patient "consent to evaluation" forms.
- The official launch of the provincial IHN initiative was held in Vancouver November 27<sup>th</sup> and 28<sup>th</sup>, 2008. The Minister of Health attended.

### **Nurse Practitioner Demonstration Project:**

- Evaluation of project continues with preliminary results demonstrating positive integration of NP's into clinics, excellent patient and provider satisfaction and enhanced patient care particularly in CDM

### **Nutrition Services:**

- Project underway for Nutrition Services to co-lead the replacement of the Nutrition/Food Service program at NRGH 2009
- Registered Dietitians are actively involved in the VIHA Clinical Order set project.

### **Practice Support Program:**

- The Regional Support Team has engaged approximately 250 unique physicians in the PSP to date.
- Learning modules have included; Self Management; Group Medical Visits; Chronic Disease Management; and Advanced Access. A new learning module will be available in Spring of 2009, related to Mental Health services.
- Strong results have been tabulated as a result of the Advanced Access module, resulting in many more patients being able to see their physician the same day as they call for an appointment.

## **Primary Health Care Organizations & Urgent Care Centres:**

### **Port McNeill Interdisciplinary Practice:**

- Offering education sessions on chronic pain with rehab staff in outlying communities (funding support from Canadian Pain Coalition)
- Identifying clients at risk with diabetes and renal disease
- Contact with Renal Program re outreach education for Mt Waddington (Can use videolink at new CVNC site to connect with Mt Waddington)
- Developed referral form (hospital discharge) for at-risk clients (opportunity to decrease re-admissions and enhance communication with Home & Community Care and Acute Care)

### **Comox Valley Nursing Centre:**

- Move into new site November 24, 2008; planning Open House January 23, 2009
- Preliminary dialogue with other programs re shared space
- Education Sessions: Sleep Disorders and Chronic Pain; The Health Benefits of Volunteering
- Co-located with Integrated Practice Support

### **Ladysmith Family Practice/Ladysmith Community Health Centre:**

- Ladysmith Health Fair on site @ LCHC November 1, 2008 – provided community opportunity to see their new Health Centre and learn more about their health and local programs/services with 27 booths and tours - 517 flu shots administered – 57 evaluations - positive outcomes + tips for future
- Family Practice Clinic – new half time physician started to split practice with one of the first physicians in the new model
- Seniors Risk Assessment more consistently completed in Urgent Care then weekly follow up by newly formed multidisciplinary team for referral to Health Centre services including new Falls prevention program

### **Health Point Care Centre:**

- From a prevention perspective, the clinic organized a campaign last spring 2008 to encourage our patients to update their tetanus and diphtheria vaccinations. 84 patients were vaccinated. This represents a 43% increase in the same vaccinations from 2007.
- Health Point will be hosting the “Living Well with COPD” education sessions for identified patients. This self-management program provides an eight-week course on all aspects of enabling patients to better manage their COPD exacerbations. We will be working with the Asthma clinic staff to conduct this course.
- Health Point is a key partner in the Seniors At Risk Integrated Health Network (SARIN). Over 70 patients have been through the Mobile Falls Prevention Screening clinic and those high-risk patients are being referred to the physiotherapy services at GOPC. We are also working with SARIN to plan some group visits for patients with cognitive impairment.