

**PHC & CDM Initiatives  
October 2008**

---

**1. VIHA Five-Year Plan**

- Our Five-Year Strategic Plan (September 2008) identified Comprehensive Primary Care as one of nine strategic priorities.
- VIHA is developing a Primary Health Care system that is in accord with the recently developed provincial Primary Health Care Charter.
- *We will build partnerships with ... family doctors, nurse practitioners, community groups and governments ... to meet the needs of individuals and communities throughout VIHA.*

**2. VIHA PHC Strategy: 2006/07 – 2008/09**

- Objective to create comprehensive, seamless and locally accessible primary health care services delivered by a network of provider teams integrated into a regional health care system that supports populations to stay healthy, get better, manage illness and disease, and cope with the end of life.
- Key principle of general practice as the cornerstone of all primary health care service.
- Model to augment gaps in service already provided through GP offices.
- Strategy refresh occurring this year and will have extensive GP engagement in its development.

**3. VIHA Family Practice Council**

- VIHA forming the first HA-wide Department of Family Practice.
- In 2006, VIHA formed an island-wide Family Practice Council (Site Chiefs of Family Practice, Chiefs of Staff in smaller facilities, and community liaison GPs) to act as an Advisory Committee to the PHC & CDM Program on Provincial, Regional and local issues.
- The Council meets monthly and has strong participation.
- The Chief Medical Officer has recognized the value of this Committee and will be formalizing its structure in the near future. This will allow three Council members to participate on HAMAC.

**4. General Practice Services Committee Initiatives**

- VIHA has participated as a non-voting member of General Practices Services Committee since April 2007.

#### **4.1 Practice Support Program**

- VIHA successfully exceeded all the deliverables set forth in the first Practice Support Program Bilateral Agreement with the BCMA (one of only two health authorities to do so), reaching 271 GP practices by September 30, 2008 (original target was 225).
- VIHA has signed the second Bilateral Agreement with BCMA to continue this support to March 31, 2010, with a new stretch target of 420 GPs.

#### **4.2 Divisions of Family Practice**

- Currently three physician communities have expressed interest in forming Divisions of Family Practice:
  - Duncan (Lead Dr. Jonathan Griffin) – meeting with GPSC October 7, 2008)
  - Parksville / Qualicum (Lead Dr. Steve Noble) - meeting to be arranged this month
  - Victoria Western Communities (Lead Dr. Robin Saunders) – letter received by BCMA in September)

### **5. Specialist Services Committee Funding**

- VIHA has been successful in securing funding for twelve shared care proposals totaling \$313,000 from the SSC RFPs.
- All submissions are coordinated through the VIHA PHC & CDM Office and vetted by representatives of the Family Practice Council to ensure they met identified population health needs.
- Projects funded through RFP #1 include:
  - *Mental Health and Addictions Services to the Vancouver Island First Nations Communities of Ahousaht and Kingcome Inlet* (including neighbouring communities of Tofino and Ucluelet).
  - *North Island Regional Eating Disorder Program*
  - *Ladysmith Mental Health and Addictions Services Shared Care Model*
  - *A VIHA Enhanced Skills Training Approach to Collaboration: Urban (Downtown and Community) and Rural Community of Sooke.*
  - *VIHA Consultation/Liaison Approach to Collaboration: Urban and Rural Downtown and Community – Adult and Older Adult. RFP 2*
- Projects funded through RFP #2 include:
  - *Enhancing Psychiatric Care for Children and Youth Collaborative Outreach*
  - *Geriatric Medicine Consultation for SARIN Primary Health Care Network*
  - *Sessional Paediatric Satellite to First Nations Communities*
  - *Partners in Kidney Care - A Primary Care Specialist Collaboration*

- *Off the Beaten Track* - Medical Genetics
- *Internal Medicine Involvement in an Advanced Access and Discharge Initiative* at Nanaimo Regional Hospital
- *Internal Medicine Telehealth Collaborative Care*

## 6. PITO

- VIHA PHC Director and PSP staff, and IM/IT Medical Lead meet with PITO Executive Director and Relationship Managers to discuss PITO rollout opportunities every two months.

## 7. Integrated Health Networks

- An Integrated Health Network (IHN) is a formal partnership between a patient, his /her family doctor, and selected health care practitioners to work as an integrated team in order to: (1) provide planned, proactive care, (2) provide timely interventions at time of disease exacerbation, and (3) to increase patient self-management capacity / confidence.
- The current IHNs within VIHA (Campbell River, Oceanside, Port Alberni/West Coast, Nanaimo, Victoria and Sooke) are part of a group of 29 IHNs across the province.
- To date we have engaged 220 GP practices, with room for about 30 more. We hope to support upwards of 15,000 at-risk patients by March 31, 2010.
- Funding for the IHNs is provided through a Bilateral Agreement between the BC Ministry of Health and the Vancouver Island Health Authority. The term of the current Agreement is from April 1, 2008 – March 31, 2010.
- GP supports include a VIHA-employed multidisciplinary team (nurse, dietitian, social worker, medical office assistant) that act as an integrated extension of the host physician and whose work the host physician leads.
- Also group visit space in local communities has been secured and dedicated videoconferencing units will be in place by December 2008.
- Patient information remains the property of the physician. The IHN will document patient consultations in the clinic's patient file or database for ease of standardization and communication

## 8. Chronic Disease Management Forums

- Since 2003, with the inception of the Diabetes Outcome Improvement Team (DO-IT) VIHA has been a leader in GP Collaboratives.
- A South Island Collaborative focusing on diabetes, CHF, depression, and chronic kidney disease operated until March 31, 2008.
- With the PSP investment, VIHA saw the opportunity to keep graduates of PSP modules engaged in quality improvement practices by offering the opportunity to have remunerated quarterly local meetings called CDM Forums.

- To date two forums have been held and well attended. A dedicated group of specialists (to date endocrinology, cardiology and nephrology consultants) have been working with GP peer champions to design and deliver the sessions.
- Three more sessions are planned for this year.

## **9. Nurse Practitioner Demonstration Projects**

- VIHA is working with three fee-for-service physician practices on integrating VIHA-employed Nurse Practitioners into services the practices offer.
- Mutually agreed upon indicators of success (access, efficiencies, revenue neutrality, provider satisfaction, patient confidence) are being tracked and will be reported by end of March 2009.
- Practices participating include Medical Arts (Nanaimo), Valley Care Medical (Courtenay), and Seawatch Medical (Campbell River).

## **10. Primary Mental Health Care Task Force**

- The VIHA Primary Mental Health Care Taskforce is comprised of representatives for VIHA PHC & CDM Program, VIHA Mental Health and Addictions Program, psychiatry consultant, GP and CMHA.
- The Taskforce has been successful in securing Specialist Services Committee funding for building mental health capacity in GP practices in the South Island and in Aboriginal Communities in our North Island and remote communities (Ahousaht).
- The Taskforce is also leading the uptake of the new CMHA Bounce Back program (VIHA a pilot site for its roll out in November 2008) and the GPSC funded CHARD pilot in VIHA (roll out January 2009).

## **11. Service Redesign**

### **11.1 Home and Community Care Partnerships**

- VIHA is working with interested GP practices to shift Home and Community Care workload from a patient address catchment area to a GP Practice catchment area, thus reducing the number of HCC contacts to one, allowing for better care coordination.

### **11.2 Polyclinic Development**

- VIHA is developing patient focused polyclinics to reduce the number of referrals GPs (and patients) need to make for newly diagnosed patients and patients who need extra support through exacerbations.
- Our first areas of integration are around cardiovascular clinics (diabetes, cardiac, renal) in the Victoria, Nanaimo, Oceanside and Campbell River areas.

## 12. Primary Health Care Organizations

VIHA operates 4 PHCOs:

- Health Point Care Centre - located at the Hillside Seniors Health Centre in Victoria, serving the needs of frail and hard-to-serve seniors aged 70 years and older through a multidisciplinary team of GPs, NP, primary health care nurses and medical office assistants. The Hillside Seniors Health Centre is also the home of the Piercy Respite Hotel, the Yakimovich Wellness Centre, and a community bathing program.
- Ladysmith Family Practice - located at the Ladysmith Community Health Centre, serving patients of all ages through a multidisciplinary team of GPs, NPs, primary health care nurses, licensed practical nurses and medical office assistants. The Ladysmith Community Health Centre is also home to VIHA mental health, home and community care, public health, laboratory, diagnostic and urgent care services.
- Comox Valley Nursing Centre - located in Courtenay, servicing a diverse range of hard-to-serve patients through specialized programs such as chronic pain, eating disorders and men's health. The Centre also provides a drop in service for episodic care. Services are provided by nurses, physiotherapists, sessional GPs, community pharmacy and volunteers.
- Port McNeill Interdisciplinary Practice - located in Port McNeill, providing enhanced primary health care services to patients living with chronic diseases and well as maternity services via GPs, a primary health care nurse and a medical office assistant.

VIHA also holds contracts for the services provided by three additional PHCOs:

- University of Victoria Student Health Services - located at the UVic campus, providing primary health care services to students and faculty through a team of GPs, primary health care nurses, mental health workers and medical office assistants.
- Cool Aid - located in downtown Victoria serving marginalized patients (homeless, street involved) through the provision of clinic based primary health and dental services, as well as street outreach through GPs, NPs, primary health care nurses, dental hygienists, pharmacists, and medical office assistants.
- James Bay Community Project - located in Victoria's James Bay community, VIHA provides a contract for a chronic disease management nurse who works with the Project's GPs and medical office assistants.