

# Empowering the Citizen Patient

Actionable Tips, Information & Resources to Support  
Your Health & Health Care

## Article #1

Healthy People, Healthy Communities  
What's Happening in Health Care



View It Online at [kbpacc.ca](http://kbpacc.ca)!

*"Knowledge is the cornerstone of empowerment. As a community member and patient, I want to reassure community members that the voice of patients is being heard. I want to tell people about all the amazing, collaborative efforts going on to make our health system work better for us, and that we can get involved ourselves to help improve our health and health care in Kootenay Boundary. That's what being a citizen patient is all about."*

*PACC CoChair, and Grand Forks resident, Leora Gesser*

## **We all benefit from access to the information we need for our health & health care.**

The 'Empowering The Citizen Patient' series shares practical information to help community members better understand our health care system, alongside tips & resources to support health & navigate care in Kootenay Boundary.

Access to health care is difficult for some and confusing for others; many people don't have ongoing access to a family doctor or nurse practitioner (referred to as "Attachment"). Health care leaders - those people entrusted with overseeing and improving health care - are working hard to find solutions so that high-quality culturally safe health care is available for all. In this first article we'll take a look at the current health care system in the Kootenay Boundary (KB) and provide a number of resources to help you better understand and navigate the system.

## **Understanding Our Health Care System**

The graphic and descriptions on the following pages give you a quick and easy way to explore the different organizations involved in planning and delivering health care in the KB.

*"The visual graphic was very helpful for understanding the health care system. It is very complex but that's because the work is all collaborative. I can see that the government, doctors, health authorities and others are working together to improve the system. That's a good thing."*

*PACC Member and Trail Resident, RaNae Nicholls*



## Right Place, Right Time, Right Practitioner

Right now in the KB we have 26 family practice clinics that provide primary care. We know that about 12,000-18,000 people in the Kootenay-Boundary area are actively seeking a Family Doctor or Nurse Practitioner (NP) and can't get one. We also know that more practitioners will retire in the next two years. All of the organizations in the graphic above are working hard to fix this problem.

Over the past 5 years, with funding from the Ministry of Health, the KB Collaborative Services Committee (CSC) created the Primary Care Network (PCN) which has introduced over 40 registered nurses, social workers, physiotherapists, occupational therapists, respiratory therapists, registered dietitians, a clinic pharmacist, and Aboriginal Health Coordinators now all working alongside physicians and nurse practitioners in our region. While the full impact of the Kootenay Boundary Primary Care Network will take time to realize, some physicians and nurse practitioners have taken on more patients, and both patients and practitioners alike agree it has improved the quality of care.



Alongside these efforts, the CSC is collaborating with KB communities to explore the possibility of creating not-for-profit Community Led Clinics, similar to Community Health Centres (CHCs). Some of these proposed clinics will be community-governed and not-for-profit, providing patients with access to a team of health care providers working together to care for patients of all ages and abilities. Working with Aboriginal organizations, settlement services and other groups to provide a culturally-safe space, these clinics will also integrate other health care and social

services that focus on the needs of all members of our community. For a model currently under development in the Lower Columbia region, please refer to: <https://www.kootenayclinics.org>

## Patients who don't have a family doctor or nurse practitioner

For patients needing a family doctor or nurse practitioner, you are encouraged to sign up for the KB Health Connect Registry, a region-wide patient registry ([kbhcr.ca](http://kbhcr.ca)).



The Health Connect Registry is the best way to find a family doctor or NP in the region. Once registered, you will be added to the list in chronological order and contacted directly when a primary care provider is available.

## Expanding Care Options

In 2021, the KB region launched the “KB Health Primary Care Clinic,” a virtual clinic designed to assist patients who are most in need of health care but lack a primary care provider. Patients listed on the KB Health Connect Registry ([kbhcr.ca](http://kbhcr.ca)) receive prioritized support from KB Health, based on referrals from emergency care practitioners, specialized community services (such as an Aboriginal Health Coordinator, maternity clinic, or Mental Health & Substance Use), or specialist physicians.

## **KB Residents Can Now See a Pharmacist for Minor Ailments and Contraception!**

New to KB residents is the ability to book an appointment online to see a pharmacist (<https://www.bookapharmacist.gov.bc.ca>) or by phone 1-833-882-0022 for 21 minor ailments and prescription contraceptives.

- Mild acne
- Allergies (allergic rhinitis)
- Pink eye (conjunctivitis)
- Skin rash (dermatitis)
- Menstrual pain
- Indigestion (upset stomach)
- Heartburn (acid reflux)
- Fungal infections
- Headaches
- Hemorrhoids
- Cold sores
- Impetigo
- Oral ulcers (canker sores)
- Oral fungal infections (thrush)
- Musculoskeletal pain (sore joints/muscles)
- Nicotine dependence
- Shingles
- Threadworms or pinworms
- Uncomplicated urinary tract infection
- Itching, including from bug bites
- Vaginal candidiasis (yeast infection)

For those who are interested in sexual health care, including birth control, pregnancy support, and screening for sexually-transmitted illnesses, Options for Sexual Health is a good resource (<https://www.optionsforsexualhealth.org/care/>).

There are also plans to expand care options further with more paraprofessionals such as community paramedics in Kaslo, and more outreach workers like patient navigators. Navigators are already in place through the Circle of Indigenous Nations Society (<https://coinations.net/programs/aboriginal-patient-navigator/>) and BC Cancer Agency (<http://www.bccancer.bc.ca>).



In the last four years, we've seen an expansion of resources to support culturally-safe care for Aboriginal people. This includes two Aboriginal Health Coordinators, the creation of the KB Cultural Safety website (<https://kbculturalsafety.org/>), a full-time Aboriginal Patient Navigator (funded by Interior Health), and ongoing opportunities for health providers to participate in cultural awareness education.



## Improving Technology

In the realm of technology, patients have greater access to their health care information through online platforms like Health Gateway (<https://www.healthlinkbc.ca/more/health-features/your-health-information>) and MyHealthPortal (<https://www.interiorhealth.ca/YourHealth/MyHealthPortal/Pages/default.aspx>). These platforms enable secure and direct access to health records, test results, and much more. Communication with clinicians expanded fast during the COVID pandemic, with more telephone and video calls (remote care or telehealth). Work is ongoing to find the right mix of in-person and telehealth visits within practices.



KB FETCH (<https://kb.fetchbc.ca/> – For Everything That's Community Health) is a rich source of information about KB community resources, listing many programs and services including local health and mental health services, basic needs support like food and housing, employment, children and family agencies, and help for seniors. Health Link BC is another great website with information about local resources.

## After Hours Care / Patients without a Primary Care Practitioner

For immediate health care support outside regular clinic hours, or for those without a primary care clinician, various options are available. Residents can dial 8-1-1 or 604-215-8110 for medical information and advice from registered nurses, dietitians, and pharmacists. Several urgent and emergency care facilities are also available in the region:

- **Ancron Medical Centre, Nelson:** walk-in clinic on first-come, first-serve basis (Hours: 10 am-2 pm Saturday and Sunday)
- **Arrow Lakes Hospital, Nakusp:** 250-265-3622 (24h emergency care)
- **Boundary Hospital, Grand Forks:** 250-443-2100 (24h emergency care)
- **Castlegar Urgent and Primary Care Centre (UPCC):** 250-365-7711 (care for non-life threatening illness or injuries - for residents of Castlegar. Hours: 8 am-8 pm daily. Go to the Emergency Department. You will receive care in either Emergency or the UPCC, depending on urgency and need.)
- **Kootenay Boundary Regional Hospital, Trail:** 250-368-3311 (24h emergency care)
- **Kootenay Lake Hospital, Nelson:** 250-352-3111 (24h emergency care)
- **Slocan Community Health Centre, New Denver:** 250-358-7911 (Hours: 8 am-8 pm daily)
- **Victorian Community Health Centre, Kaslo:** 250-353-2291 (Hours: 9 am-5 pm Monday-Friday)
- For further assistance, you can also use Telus Health's phone-in service Telus Health (<https://www.telus.com/en/health/my-care>) which provides some primary care services at no cost and additional services for a fee.



**Sign Up to Get “Empowering the Citizen Patient”  
Direct to Your Inbox!**



# Appendix A – Collaborating Health Care Organizations

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## Doctors of BC

Doctors of BC is a voluntary association of more than 16,000 physicians, medical residents and medical students in British Columbia that collaborates with doctors and the health care system to provide all British Columbians with the highest standard of medical care. This group helps doctors through supporting their work and clinics with things like education sessions, technical support, help with recruiting new physicians, help with hiring new team members to expand their services, training and data collection to improve the care that they provide, and physician wellness through access to professional coaches and peer support.

Finally, they are engaged in outreach to their patients and the communities that they serve to bring patient voices into their work and new initiatives.

## Ministry of Health

The BC Ministry of Health has overall responsibility for ensuring that quality, appropriate, cost effective and timely health services are available for all British Columbians.

One way the Ministry supports health care improvement is through Joint Collaborative Committees (JCCs), a partnership with Doctors of BC. The four JCCs are: the Family Practice Services Committee (FPSC), Shared Care Committee (SCC), Specialist Services Committee (SSC) and the Joint Standing Committee on Rural Issues (JSC). What makes these committees unique is that the representatives on them – physicians, government and health authority representatives – make decisions collaboratively.

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## Physician Master Agreement

The Physician Master Agreement (PMA), negotiated by Doctors of BC and the BC government, is the document that governs

compensation and benefits for Fee for Service and Alternatively Paid Physicians in BC.

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## **Family Practice Services Committee**

The Family Practice Services Committee (FPSC) is a province-wide collaboration between the Doctors of BC and the BC Ministry of Health. It works on behalf of doctors to strengthen full-service family practice and patient care in BC. It provides family doctors with practice support, technology, and works on creating Patient Medical Homes and Primary Care Networks to support practice.

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## **Shared Care Committee**

The Shared Care Committee is a BC-wide committee that has supported physicians, and partners, to work together on over 450 projects across the province. The mandate of this Joint Collaborative Committee (a partnership of Doctors of BC and the BC government), is to support family and specialist physicians to improve

the coordination of care from family practice to specialist care.

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## **Specialist Services Committee**

The Specialist Services Committee (SSC) improves patient care by engaging physicians to collaborate, lead quality improvement and deliver quality services with SSC supports and incentives. SSC is one of four joint collaborative committees of Doctors of BC and the BC government and includes regular representation from health authorities.

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## **Joint Standing Committee on Rural Issues**

The Joint Standing Committee on Rural Issues (JSC) was established under the Rural Subsidiary Agreement (RSA) in 2001. It's made up of representatives from Doctors of BC, the BC Ministry of Health, and the health authorities. The JSC advises the BC government and Doctors of BC on matters pertaining to rural medical practice. Its goal is to enhance the availability and stability of physician services in rural and remote areas of British

Columbia by addressing the unique and challenging circumstances faced by physicians.

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## **Interior Health**

Interior Health is a regional health authority in British Columbia. It is one of the five publicly-funded regional health authorities, serving the southern Interior region of British Columbia.

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## **Practice Support Program**

FPSC's Practice Support Program (PSP) offers services for family physicians to optimize their practice, improve their use of health technology, and more effectively manage their patient caseloads. The PSP team helps physician practices become more efficient, creating more time for physicians to dedicate themselves to patient care. Services are customized to meet specific practice needs and accommodate physicians' schedules.

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## **Kootenay Boundary Division of Family Practice**

The Kootenay Boundary Division of Family Practice is a hub of local innovation in health care, and part of a province-wide initiative designed to strengthen health care in BC. KB Division operates as a Community Service Cooperative and its' membership encompasses all family physicians and nurse practitioners across the region. KB Division goal is equitable, resilient and vibrant primary care for all in Kootenay Boundary.

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## **Kootenay Boundary Shared Care**

Shared care projects are collaborations between general practice (GP) and specialist practice (SP) physicians and nurse practitioners aimed at improving patient care. The KB Division of Family Practice hosts the Shared Care initiative, which currently includes focused care improvement projects for Chronic Pain, Gender Affirming Care, the Social Determinants of Health, Regional Oncology, Telepsychiatry, Complex

Medical Frail, Telehealth, Emergency Medicine, and GP/SP Consults. Scroll down to Shared Care on this page for more information on each Shared Care project.

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## Facility Engagement

Facility Engagement was launched by the Specialist Services Committee in 2016 as a BC-wide initiative to strengthen communication, relationships and collaboration between facility-based physicians and their health authorities. The goal is to increase meaningful physician involvement in health authority decisions about their work environment and the delivery of patient care.

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## Physician Quality Improvement

This BC-wide Physician Quality Improvement initiative of the Specialist Services Committee works to enhance physician capacity in quality improvement by providing training and hands-on learning experiences, to ultimately promote a culture of learning, openness, and dedication to improving the health care system.

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## West Kootenay-Boundary Regional Hospital District (WKBRHD)

Funding for hospitals is shared between the province and regional hospital districts, with the West Kootenay- Boundary Regional Hospital District covering the KB region. The main purpose of the WKBRHD is to provide funding for hospital equipment and capital projects. Projects and priorities are proposed each year by Interior Health, with a list developed in consultation between IH and WKBRHD. The hospital district typically pays for 40% of the cost of approved projects while the remaining 60% is funded by the BC Government or through donations provided by local hospital foundations.

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## Collaborative Services Committee

Across BC since 2010, each Division of Family Practice has worked in collaboration with their area's health authority and the BC Family Practice Services Committee (FPSC) through

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a local Collaborative Services Committee (CSC) to find and fix gaps in the local health care system. The Kootenay Boundary CSC meets monthly to discuss concerns with patient care and to find and prioritize solutions. The KB CSC is led by a three-way partnership between Interior Health, the KB Division of Family Practice and Aboriginal partners (Ktunaxa and Syilx). Three Patient Partners have participated as members since 2015 to make sure everyone is included in these decisions. (the CSC also founded the Patient Advisory Committee & Community – in 2018).

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### **Kootenay Boundary Patient Advisory Committee & Community (PACC)**

The Kootenay Boundary Patient Advisory Committee & Community (PACC) is a group of people working together to bring patient voices on important issues to health care providers & policymakers in our region and at a provincial level. PACC members bring their experiences as patients & community members to help move

the health care system towards a patient & family-centred, equitable place where all people can get the timely help & information they need to optimize their health. The PACC is a working group of the KB Collaborative Services Committee and has its own Strategic Plan, website, and semi-annual newsletter emailed free to subscribers.

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### **Kootenay Boundary Aboriginal Services Collaborative (KBASC)**

The Kootenay Boundary Aboriginal Services Collaborative is a recommendation-making body to the Primary Care Network and, to date, has been funded by KB Division of Family Practice and the Nations themselves. KBASC members include (listed alphabetically) Ktunaxa, Metis Chartered Community, Secwepemc, Sinixt, Syilx, and COINS as an Aboriginal Service Provider. The work of the Collaborative is currently focused around Primary Health Care Planning in the Kootenay Boundary – in particular the provision of culturally safe,

culturally relevant care for Aboriginal people living in the region.

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## **Kootenay Boundary Facility Engagement**

Facility Engagement engages physicians, hospital administration and other key players in identifying, prioritizing, and carrying out projects that improve patient care, and support medical staff and the running of the hospitals in the Kootenay Boundary Region.

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## **Primary Care Network**

In BC, each geographical area has a Primary Care Network (PCN) of local primary care service providers who provide care for patients over their lifetime (longitudinal care). In Kootenay Boundary, the Primary Care Networks is governed by a three-way partnership between the KB Division of Family Practice, Interior Health, and Aboriginal partners (Ktunaxa and Syilx). One of the key features of the PCN is Team Based Care. Kootenay Boundary's PCN includes family physicians, nurse practitioners, registered nurses, social workers, physiotherapists,

occupational therapists, respiratory therapists, registered dietitians, a clinic pharmacist, and Aboriginal Health Coordinators.

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## **Community Led Clinics or Community Health Centres (CHCs)**

Patients have led efforts over the past 4 years to start a Community Led Clinic / CHC to serve Rossland, Warfield, Trail, Montrose, Fruitvale, and Areas A and B of the Regional District of KB. The Lower Columbia CHC Network Working Group includes community members, nurse practitioners and doctors. The clinic will join the Primary Care Network to add care for more people.

Kootenay Boundary Division of Family practice is also working with practitioners and community groups to explore introducing Community Led Clinics in multiple other communities throughout the region.