

# Working Together for a Healthy Kootenay Boundary

"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." – RaNae Nicholls

#### **Doctors of BC**

<u>Doctors of BC</u> 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.

Some of this work is accomplished through partnerships with BC Ministry of Health in 4 Joint Collaborative Committees (JCCs). 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 – practitioners, government and health authority representatives – make decisions collaboratively.

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. Learn more about local work done by the Kootenay Boundary Division of Family Practice at <u>https://divisionsbc.ca/kootenay-boundary/current-projects</u>

### **Ministry of Health**

The <u>BC Ministry of Health</u> 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.

#### **Physician Master Agreement**

The <u>Physician Master Agreement (PMA)</u>, 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.

**Return to Graphic** 

#### **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 work on creating Patient Medical Homes and Primary Care Networks to support practice.

#### **Shared Care Committee**

The <u>Shared Care Committee</u> 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.

**Return to Graphic** 

#### **Specialist Services Committee**

The <u>Specialist Services Committee (SSC)</u> 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.

### 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.

**Return to Graphic** 

#### **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.

#### **Practice Support Program**

FPSC's <u>Practice Support Program</u> (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.

**Return to Graphic** 

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

The <u>Kootenay Boundary Division of Family Practice</u> is a hub of local innovation in health care, and part of a province-wide initiative designed to strengthen health care in BC. We operate as a Community Service Cooperative and our membership encompasses all family physicians and nurse practitioners across the region. Together, we envision equitable, resilient and vibrant primary care in Kootenay Boundary.

**Return to Graphic** 

### **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.

### **Facility Engagement**

Facility Engagement was launched by the <u>Specialist Services Committee</u> 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.

**Return to Graphic** 

#### **Physician Quality Improvement**

This BC-wide <u>Physician Quality Improvement</u> 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.

#### **Return to Graphic**

# West Kootenay-Boundary Regional Hospital District (WKBRHD)

Funding for hospitals is shared between the province and regional hospital districts, with the <u>West Kootenay-</u> <u>Boundary Regional Hospital District</u> 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.

**Return to Graphic** 

#### **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 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 <u>Patient Advisory Committee & Community</u> – in 2018) to make sure everyone is included in these decisions.

**Return to Graphic** 

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

The <u>Kootenay Boundary Patient Advisory Committee & Community (PACC)</u> 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 <u>Strategic Plan</u>, website, and <u>semi-annual newsletter</u> emailed free to subscribers (click here to subscribe)

**Return to Graphic** 

# Kootenay Boundary Aboriginal Services Collaborative (KBASC)

The <u>Kootenay Boundary Aboriginal Services Collaborative</u> 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.

**Return to Graphic** 

# Kootenay Boundary Regional Hospital Facility Engagement (KBPA)

Facility Engagement at <u>Kootenay Boundary Regional Hospital</u> supports collaboration between physicians, hospital administration and other key players to prioritize and carry out projects that improve the quality of patient care, and support medical staff and the running of the hospital.

# Kootenay Lake Hospital (KLH) Facility Engagement

Facility Engagement at KLH 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 <u>Kootenay Lake Hospital</u>.

**Return to Graphic** 

### West Boundary Facility Engagement

West Boundary 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 <u>Boundary District Hospital</u> in Grand Forks.

**Return to Graphic** 

#### **Arrow Lakes Facility Engagement**

Arrow Lakes 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 <u>Arrow Lakes Hospital</u> in Nakusp.

#### **Primary Care Network**

In BC, each geographical area has a <u>Primary Care Network</u> (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, physical therapists, a clinic pharmacist, and an Aboriginal Health Coordinator.

**Return to Graphic** 

#### **Community Health Centres**

Patients have led efforts over the past 4 years to start a <u>Community Health Centre (CHC)</u> 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 Community Health Centre 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 Clinics in multiple other communities throughout the region.