

Shared Care Meeting Summary

November, 2018

1. Approved funding proposals

i) Pain BC Proposal

- BC patients and family physicians report having poor access to pain specialists and limited capacity within primary care to address needs of patients living with chronic pain.
- On behalf of Pain BC, Maria Hudspith presented a funding request of \$251,000 over three years to support
 Project Echo which will virtually connect pain specialists with local providers in four BC communities, building
 clinical capacity and helping to strengthen interdisciplinary team based care.

ii) Coordinating Seniors Care Proposal - South Okanagan Similkameen Division of Family Practice

Shared Care approved SOS's proposal to engage GP's, Specialists, GP's with focused practice, and other health care professionals, to develop innovative and effective ways to coordinate care for older and/or frail adults with complex medical conditions.

iii) Gated funding approved for Central Okanagan participation in the Maternity Network

- 2. Presentation: Delta Assisted /Independent Living Project Dr. Maha Balakumar, Physician Lead, Dr. Katalin Balogh, Geriatric Medicine Specialist, Tomas Reyes, Project Manager, Geri McGrath, Dawn Benson, and Jackie Reiners Leads from partner organizations, Kevin Lu, Evaluator, Cecile French, St. Augustine Resident
 - The Delta Division of Family Practice identified the need to improve care and increase support for seniors in a local Assisted Living facility.
 - With the number of seniors in Delta set to increase from 15-20% 40% by 2024, the Division, in collaboration with Augustine House and Fraser Health, and other partners, saw an opportunity to develop a model that would proactively help seniors in Assisted Living to remain independent for longer, prevent visits to the ER, and provide residents with learning opportunities to self-manage their health. As a result, the Augustine House Health Hub was developed—a service available to all Augustine House residents.
 - Health Hub services include: On-site expedited self-assessments, referrals, health improvement plans, on-site follow ups, education sessions, and multi-disciplinary rounds. A team based approach is used and on-site assessments are conducted in collaboration with GPs, Geriatricians, Geriatric Nurses, Pharmacist, Home Health Supports, and other Fraser Health Programs.
 - It was noted that this project is informing how the Fraser Health Authority is providing home health, and provides a good example of how a Primary Care Network would operate.
 - Cecile, a resident of Augustine House, provided
 her perspective on the health hub and the positive impact it has had on her life. In her words
 "thank you for thinking of seniors...it was such an important journey of getting ideas and creating together."



- One challenge has been generating interest among facility residents to participate in the health hub, but, critical success factors include; connecting the health hub to Fraser Health EMR, having a common goal and vision, and the ongoing collaborative partnerships.
- Linking this project into the Primary Care Networks might be an opportunity for spread and sustainability.

3. Presentation Specialist Services Committee Surgical Optimization

- An overview of the Specialist Services Committee work on surgical optimization was provided. The work is a partnership among many existing projects and stakeholders including the JCCs, Ministry of Health (i.e., in alignment with the surgical priority), Primary Care Networks, Alberta Health Services and the Canadian Patient Safety Institute. The 11 components that impact surgical outcomes were discussed.
- Next steps include: Conversations to determine how stakeholder groups can best work together; launch of a Surgical Optimization Collaborative in April 2019 in partnership with BC Health Authorities to support sustainability; and recruitment of collaborative teams starting January 2019; and work is underway with the BC Patient Voices Network re: supporting "informed and activated patients" as an aspect of surgical optimization.
- Shared Care Committee feedback included: some aspects of surgical optimization should start upstream at the GP office as part of the referral process; incorporate the lessons learned from the surgical optimization work that has been undertaken in the BC cardiac care units.



