

# SCC Meeting – November 1, 2016 Summary of Key Items

#### **Funding Decisions**

### 1. Thompson Region; Breast Health – Anne Marie Locas, SCC Liaison

- Prioritization of patients for breast diagnostic imaging in the region can result in confusion, as criteria for determining urgency of diagnostics can feel disconnected when referrals come from different sources.
- GPs and specialists involved in the Kamloops Breast Health clinic have agreed to work together to improve communication between patients, GPs, Specialists and Diagnostic Services to clarify the pathways to care.
- The committee approved EOI funding for the group to facilitate leveraging of related activities between physicians and BC Cancer Agency in other communities.

# 2. EOI - Rural Surgical Networks; An opportunity for inter-professional Collaboration – Anne Marie Locas, SCC Liaison

- Family Physicians with Enhanced Surgical Skills (FSESS) who have been trained in a set of procedural skills including appendectomy, caesarean section and others, are encountering barriers to practice in rural communities. One barrier identified, is a lack of confidence in skills, due to issues around regulation, accreditation and volumes to maintain competency.
- The project aims to provide a forum for concerns to be discussed and collaborative solutions developed in support of FSESS and the rural surgical network for a win-win scenario for all.
- The committee asked that the project ensures anesthesia is included as part of the surgical strategy, and patients have the opportunity to provide feedback on their outcomes. Funding was approved.

## 3. EOI, Chronic Pain; Vancouver and Powell River, Bethina Abraham, SCC Liaison

- Chronic pain has been shown to be the main reason for visits to the ER in Powell River. This is consistent with national data showing up to 78% of visits to ERs are due to chronic pain.
- The goal of the proposed project is to develop and strengthen the local network of allied healthcare, community organizations, Vancouver Coastal Health, the City of Power River, and GPs and Specialists, to combat chronic pain and increase patients' self-management capacity. Also to continue to encourage physicians to take the Pain PSP module, which many physicians have completed to date. The second part of the project will focus on spread and sustainability.
- It was suggested a composite journey map be established as a baseline. Funding was approved.

## 4. CYMHSU Collaborative Update - Val Tregillus, Project Director

- Val referred to a 'Draft Sustainability and Transition Plan' for the Collaborative, including embedding representation from individuals with lived experience in all JCCs through the Physician Master Agreement. It was agreed that this principal will be brought forward to the next JCC meeting.
- Another 'sustainability' component is the creation of local pathways in as many communities as possible through the 64 local action teams. Currently there is no wraparound model for CYMHSU in Primary

Care. Val will connect with Shelley Ross to discuss addressing this gap through linking to Patient Medical /Primary Care Homes as they develop.

## 5. Northern Region & Smithers Local Action Team Update, Caitlin Blewitt and Cheryl Hofweber

- Caitlin reported that there are 15 Local Action Teams in the North from Haida Gwaii to Valemount and Dawson Creek. Teams have been up and running from 6-9 months.
- Some great partnerships have been developed which have been instrumental in effecting change, especially in education with the involvement of teachers, School Districts, and superintendents.
- There are also great partnerships with physicians. In Haida Gaia a physician now practices in the local school bi-monthly, and they are looking to increase to weekly. Additionally, physicians hold co-chair roles on two of the teams, and have been engaging uninvolved physicians through the CYMH PSP program.
- Cheryl provided an update on the Smithers LAT. Since its inception, "mental health has come out of the closet". The LAT is engaged in numerus activities with a strong focus on schools, as student mental health issues were identified as a priority in the region.
- Activities include; Grade 8 mental health toolkits; a district conference on trauma-informed schools; piloting the ER protocol; increasing participation in the 'Indigenous Cultural Competency' program; and increasing capacity for local physicians through a meeting with outreach psychiatrist, Dr. Rishi Kapur from BC Children's Hospital, and more. Efforts are also concentrated on the creation of local pathways to ensure sustainability of the work.
- Learning Sessions have had a profound impact, especially on the youth, by increasing their confidence in assuming leadership positions on the LAT.