

# Improving Chronic Disease Prevention & Management: The Role of the Chronic Disease Community of Practice

November 29, 2023 | 6:30pm–8:30pm | Zoom

The Chronic Disease Community of Practice (CoP) Steering Committee held a virtual webinar to review the direction of the CoP and proposed focus groups, based on feedback and themes from the April 2023 engagement event. Here is a summary of the evening's events:

## Introduction and Land Acknowledgements

- Drs Gordon Hoag and Dan Horvat briefly introduced the session and provided a land acknowledgement, highlighting the traditional, unceded territories on which they reside and work.
- Dr Hoag went over the objectives of the webinar and the membership of the steering committee. Additionally, he provided a roadmap of recent milestones for the CoP and gave a sneak peek as to where we are today, ongoing work, and news. Feedback received from this webinar will inform the upcoming strategic plan of the CoP.
- Dr Horvat briefly summarized the CoP, what's in its purview, and how it's accomplishing its goals.

## Point of Care Access to Actionable Evidence

- Dr Elizabeth Swiggum began her and Dr Tracy Monk's presentation, titled "Point of Care Access to Actionable Evidence", with contextual background on heart failure in BC—highlighting the impact of heart failure in the province and the statistics around why it's a priority area.
- Dr Swiggum further delved into heart failure, describing its universal definition and classification.
- Dr Swiggum noted the Canadian Cardiovascular Society updated the clinical guidelines for heart failure in 2017, and the guidelines for BC were updated in the summer of 2023.
- Dr Monk provided a recap and walkthrough of the Pathways BC platform and emphasized how information is integrated into Pathways and the depth of knowledge and information that exists within the platform.

## Family Physician, Consultant Physician, and Patient Communication (Consultation to Conversation)

- Drs John Pawlovich and Daisy Dulay presented on effective communication between family physicians, consultant physicians, and patients.
- Drs Pawlovich and Dulay focused in on how primary care providers, nurse practitioners, and specialists actually communicate in the present day.
- Dr Pawlovich went through a graphic showing the traditional patient journey to accessing specialist care, pointing out that there are a lot of challenges and vulnerabilities associated with it, including:
  - Lack of autonomy for patients
  - Untimely care
  - High holistic cost to rural patients
  - Patients lost to follow-up.
  - Uncoordinated care efforts between specialists and family physicians
- Dr Pawlovich handed the presentation over to Dr Dulay, who spoke to a model they have been trialling called "Consultation to Conversation."

- In this model, the referring physician connects with the patient and physician colleague. Benefits include:
  - Helping to build a team-based, patient-centric care model.
  - Decreasing barriers to Specialist care due to its virtual nature
  - Ability to be either scheduled or unscheduled.
  - Direct, three-way communication between all patients

## Engagement of Patients and Caregivers

- Dr Joanna Cheek and her patient advocate Anne McGrath presented on Group Medical Visits through the CBT Skills Society in Victoria, BC.
- Dr Cheek provided background information on CBT Skills' origins and what gave rise to them starting this program.
- She highlighted the factors that allow group medical visits to yield results:
  - Family doctors refer to other family doctors with specialized skills.
  - A handful of physicians can serve a big population through groups.
  - Centralized administration allows for standardized referrals and processing.
- Dr Cheek went through a flowchart that described the process for a patient to get into a CBT Skills group.
- She also presented the finding of their year-one evaluation.
- Patient partner Anne McGrath shared her story and experience attending CBT Skills Groups sessions and emphasized how facilitating physicians can help provide a safe space for patients to share openly and honestly.

## Q&A and Discussion

- A Q&A session followed where participants shared knowledge and asked questions of the presenters.
- Key discussion themes included:
  - Group Medical Visits/Shared Medical Appointments for patients with chronic diseases, both virtual and in-person. Considerations included access to technology for some patients, difficulty embedding templates and resources into EMRs, and historical challenges scaling the GMVs for chronic disease.
  - Exploring the development an IT platform to enable more efficient innovation through discussion and knowledge sharing and learning from successful models in other areas.
  - Contributing to the scale and spread of the Consultation to Conversation work and working through barriers such as funding and coordination.
  - The difficulty of scaling CBT Skills training to Interprofessional Team Members due to a lack of funding.
- Following the discussion, Drs Hoag and Horvat thanked the group for their attendance and concluded the webinar.

## Evaluation

- The event was attended by over 125 participants including 70 family physicians, and 25 specialists, interprofessional team members, and other attendees involved in chronic disease care.
- 61 participants completed the evaluation:
  - 97% Agree/Strongly Agree that the event met the stated learning objectives.
  - 96% Agree/Strongly Agree that the event was a valuable use of their time.
  - 93% Agree/Strongly Agree that they support the proposed direction of the Chronic Disease CoP.
- Comments included:

- “[The event] reinforced my professional motivations as a health care leader in BC to keep pushing for sustainable health care solutions that reduce workplace burdens on physicians and their staff.”
- “I am impressed how this Zoom meeting brought people (patients and caregivers) closer together. A key area for anyone interested in System Reform.”
- “I am interested in implementing group visits into my practice!”

## Resources

- [BC Heart Failure Guidelines](#)
- [Clinical Practice Update from the Canadian Cardiovascular Society – Canadian HF Society – Treatment suggestions for patients with differing HF phenotypes CJC 2023](#)
- [Pathways BC](#)
- [Fraser Institute Wait Your Turn Report 2021](#)
- [RTVS Quick Reply Specialist](#)
- [BCMJ Article – Assessment by pit appointment as an alternative to full psychiatric consultation](#)
- [CBT Website](#)
- [CBT Publications](#)