

Victoria Collaborative Services Committee

Minutes FINAL

Date: Friday, July 28, 2023

Time: 9:00 am – 10:25 am

Location: Zoom

Members Attending:					
Name	Position	P/R	Name	Position	P/R
Dr. Leah MacDonald	Island Health, Executive Medical Director, Primary Care Strategy (CSC Co-chair)	P	Dr. Melissa Duff	VDFP Chair, (CSC Co-chair)	P
Dr. William Cunningham	Island Health, Medical Director, UGV	P	Dr. Anna Mason	VDFP Vice-chair, (CSC Co-chair)	R
Dr. Kelsey Louie (interim)	Indigenous Advisory Group	P	Dr. Kristen Iverson	VDFP Board member, Family Physician	R
Phil Lawrence	Island Health, Director, UGV	R	Dr. Aaron Childs	VDFP, Family Physician	P
Sarah Crawford-Bohl (guest)	Island Health, Executive Director	R	Catriona Park	VDFP Executive Director	P
Beth-Ann Parmar	Island Health, Site Director, (guest)	P	Cynthia Durand-Smith (guest)	Victoria PCN Director	P
Jennifer Zadorozniak	Island Health, PCN Project Manager	R	Annebeth Leurs	Doctors of BC, Engagement Partner	P
Kristin Atwood	Care Transitions Project Manager (guest)	P	Nicole Dehoop	VDFP Operations Coordinator (minutes)	P

P = Present R = Regrets

1.0 Welcome & Introductions

- Dr MacDonal opened the meeting at 9:00 am with a welcome and land acknowledgement.
 - There were no additions to the agenda.
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- Approval of Agenda
 - Consent Agenda:
 - VDFP projects summary
 - Query regarding Urban Locum Program from Island Health
Action #1: Send contact information of the program manager and they can confirm details about the program.
 - PCN Progress Report
 - Island Health noted that UPCC information is out of date and will revisit to determine how best to share that information.
Action #2: Provide updated information re: UPCCs for PCN report.

**Decision: Approval of July 28 meeting agenda and Consent Agenda
 By consensus, approved**

2.0 Review of action items and approval of minutes

- June 23, 2023, Victoria CSC minutes were reviewed and there were no changes.

Motion made by Dr Cunningham and seconded by Dr Duff: Approval of June 23, 2023, Victoria CSC minutes. Approved

- Review of action items from June 23, 2023:
 - #1- permanent Indigenous rep for CSC - Dr. Duff to reach out to Dr. Louie to discuss finding a more permanent rep for this table.
 - #2 – maternity specific recruitment pathway - Dr. Childs to speak to Helen Welch about setting up a maternity specific recruitment pathway.
 - #3 – report back to Care transitions PM re: Strategies for Reducing Acute Care Volume WG – complete and update on this agenda.
 - #4 – connect with SI PBH co-chair regarding new JEC structure/meeting - complete.

Ongoing items:

- #1 – Add the CSC communications strategy to a future agenda – ongoing.
- #2 – Request agenda items and volunteer for Cultural Safety & Humility sharing or any learnings/reflections from course/presentations – Complete for June

3.0 Sharing Cultural Safety and Humility Learnings

No volunteer for sharing

4.0 Shared Strategic Work

Victoria PCN

- Space update:
 - VDFP July board meeting agreed to move forward with the offer to lease process and seeking independent legal advice.
 - If successful, the target date to move into the building would be summer 2024.
 - Discussions have started with MOH to access capital funding.
 - Met with FPSC and DoBC and right now they are okay with VDFP moving forward as the leaseholder as we are not operating the staff.
 - VDFP office would also move into the space.
 - We won't know until mid-fall what all the terms are and if we continue moving forward.
 - The biggest risk is the ability to pay the lease every month.
 - Staff need to be present in the space so important to keep track of recruiting and onboarding people through this next fiscal year.
 - VDFP would be the leaseholder, AHPs would occupy the space. This would be the first hub and then another space acquired. Allows for the team to physically come together. Large enough space that potentially dine and learns or other events could be held in the space.
- Questions:
 - Is there any bridge funding available? We will pursue it with MOH because of the HR shortage. The offer to lease asks for 9 months free rent. We are asking for a 10-year term rather than the 15-year term landlord is requesting. The landlord is supportive of primary care and understands our financial situation so will pursue both options.
 - Will we try to fully staff other locations that will roll into this? 911 Yates is actively recruiting and the space in Aberdeen. Both would roll into this space. 911 Yates is lease is up October 2024 so hopefully timing will work out.
 - Will this have physician space? Division funder has indicated that we can't operate clinical space. It would take a lot of redesigning for clinical space. There is a possibility to put four to five rooms

and have plumbing to have physicians involved in the future but not at the start. Plan is to build out as a team-based care space.

- PCN staff may not always be Island Health staff? Only RNs and LPNs could be non-Island Health employees. Another shift would be the NTP contracts and NP contracts could be held by individual clinics. There are no active discussions about VDFP being the employer. Clinics would be the employer.
- Who designs the clinic? A small group would work on the design. The landlord's architect has drafted a preliminary plan to ensure the space would be able to accommodate our needs.

Maternity Update

- After the June 27 perinatal event, Drs Duff and Mason coordinated a meeting between Victoria CSC and SI PBH co-chairs to see how each stakeholder could be part of the solution.
 - The first meeting was July 11 and meeting again on August 1.
 - A letter is in development to be sent to BCFP, MOH, and DoBC to highlight the scenario in Victoria and provide specific advice to stabilize the situation.
 - Dr Benusic from public health is coming to next week's meeting to see how public health could be part of the solution.
 - The next meeting will also discuss using UPCCs for the unattached maternity patients for after six weeks post-partum care.
 - VDFP is planning a dine and learn for early October that will provide additional education to FPs on well-baby exams etc.
 - We are hearing the waitlist at VGH clinic is three months (from the initial visit until VGH clinic sees the patient).
- Action #3: Confirm with Dr Bos how soon patients are being seen at VGH clinic.**
- The divisions have sent a communication to community FPs asking them to manage the first trimester of care.
 - Annebeth advised that DoBC advocacy team is working hard on LFP model to ensure maternity is covered in a better way. There will be changes coming in the fall.
 - Even if there is funding, are there enough people to do the maternity work? Those who have recently left maternity care are being included in the workflows. Midwives do not have enough OBs to refer high risk patients to.
 - Maternity Care for BC group does have a mentor program but loosely.
 - There is lots of interest in maternity, but people don't stay.
 - We need to have a mechanism to talk and bring people into maternity. Can CSC or VDFP help? Who is reaching out to retired physicians? Create a better centralized way to manage this.
 - Maternity was left out of the PCN and hasn't been a focus for VDFP but have made it a priority to look at all trained FPs. Dr Sarah Lea will be the FP/OBs lead for the division.
 - Creation of a Maternity task force? CSC has no concerns if that group meets next week and creates such a group.
 - There needs to be better education/training. Connect through academic days, dine and learns etc. to the learners. A champion needed to fill that gap. This is on the agenda for next week's maternity meeting.
 - Is there a dedicated project manager? Not currently, but the intention behind the SCC proposal is to have dedicated staff manage this in the medium to longer term. The proposal is still in development and won't go to Shared Care until the fall. There is still work to be done as will need dedicated physician leads and staff support to move this forward.
 - We should provide feedback to the residency program. CCFP program should be training everyone to feel comfortable. Currently, residents have exposure in year one but not in year two.

Action #4: Provide feedback to the residency program.

- Health Match BC advertisements posted are generic. Postings should be more specific e.g., FP-OBs or FP-Seniors Care. Also, ads start with Sooke instead of Victoria. Aaron will discuss further with Helen to see if that can be adjusted.

Action #5: Follow-up with Island Recruitment project manager to see if Health Match BC ads can be fixed.

Care transitions/emergency department presentations update

- We thought this would be a quick quality improvement to implement in the fall, but it was not the case.
- Leah, Kristin, Phil and PCN team have had a few meetings. We have determined this is not a good fit for the PCN work due to acute care follow-up.
- Focus is on improving referrals to community health services, clarifying the focus has slowed things down. We are looking at longer term and will bring ideas to the Care Transitions SC in September instead of a separate group.
- We are looking at trying to get better data to understand what the problem is. We are unsure if we have the issue correct but Phil has found someone who can support the quality improvement. A meeting will be set up in the next few weeks to discuss this.
- Query: Have we linked with Gemma for priority attachment? The focus is on attached patients and unattached patients haven't been discussed yet. There will be more conversation on how to address unattached patients.

5.0 Partner Updates

Island Health

- Dr MacDonald reviewed the new Island Health Clinical Services Acute Care North Island & Community Services structure.
- The support for Executive Medical Directors hasn't been confirmed yet.
- Sarah Crawford-Bohl to remain Executive Director for LHA 1 that is Victoria. Sarah will also be the strategic lead for primary care.
- The expansion includes primary care e.g., UPCCs and the new is Long term Care. Previously LTC was a regional program.
- Sarah and Leah to stay with LHA 1 so no change for VDFP.
- LHAs 2, 3, and 4 will have one Executive Director and will impact SIDFP. The strategic lead is still to be determined.
- William and Phil to stay with the Victoria region as well.
- Query: The LHAs do not align with the two divisions e.g., Esquimalt and View Royal are with SIDFP but in Island Health's structure they are under Victoria. So, what happens with that area? Correct, Island Health doesn't exactly match the divisions and still needs to work through this. This is why it will be important to still have tables like the JEC to have continued collaboration.
- VDFP shared that LTCl staff and co-chairs are concerned with the change of LTC reporting locally rather than regionally. Historically, the LTCl covers the whole South Island, so divisions' involvement is with all sites across LHAs 1, 2, and 3.
- Query: why was the Western Communities and Saanich Peninsula grouped with the Cowichan Valley rather than Urban Victoria? Sometimes this is to balance portfolios but trying to have more conversations around this as this doesn't align with the Divisions.
- Island Health confirmed that Dr Manville will continue as the LTC medical director regionally and that the team will support the operations locally.

VDFP

- Any updates already covered in agenda items above.

ISC update <ul style="list-style-type: none"> An in-person meeting is being planned for October 19.
6.0 PCN Governance Refresh update <ul style="list-style-type: none"> There were no new updates.
7.0 Other Business <ul style="list-style-type: none"> Three bullets of interest to FPSC and WGs: <ul style="list-style-type: none"> We are concerned about the crisis in maternity and what work is being done by MoH, DoBC, and FPSC. VDFP and SIDFP are working closely to find immediate solutions to resolve the maternity crisis. There has been a great uptake of the Urban Local Program. The ULP is sending a letter to share why the program is attractive that can be shared provincially. All agreed to cancel the August 25 meeting. The next CSC meeting is September 22nd Meeting adjourned 10:25 am