

## Victoria Collaborative Services Committee

### Minutes FINAL

**Date: Friday, January 26, 2024**

**Time: 9:00 am – 11:00 am**

**Location: Zoom**

<b>Members Attending:</b>					
<b>Name</b>	<b>Position</b>	<b>P/R</b>	<b>Name</b>	<b>Position</b>	<b>P/R</b>
Dr. Leah MacDonald	Island Health, Executive Medical Director, Primary Care Strategy (CSC Co-chair)	<b>P</b>	Dr. Melissa Duff	VDFP Chair, (CSC Co-chair)	<b>R</b>
Dr. William Cunningham	Island Health, Medical Director, UGV	<b>P</b>	Dr. Anna Mason	VDFP Vice-chair, (CSC Co-chair)	<b>P</b>
Dr. Kelsey Louie	Indigenous Advisory Group	<b>R</b>	Dr. Kristen Iverson	VDFP Board member, Family Physician	<b>P</b>
Phil Lawrence	Island Health, Director, UGV	<b>P</b>	Dr. Aaron Childs	VDFP, Family Physician	<b>P</b>
Sarah Crawford-Bohl	Island Health, Executive Director	<b>P</b>	Dr. Steve Goodchild	VDFP Board member, Family Physician	<b>P</b>
Beth-Ann Parmar	Island Health, Site Director, (guest)	<b>R</b>	Catriona Park	VDFP Executive Director	<b>P</b>
Nicole Dehoop	VDFP Operations Coordinator (minutes)	<b>P</b>	Matt Youens	Doctors of BC, Primary Care Transformation Partner	<b>P</b>

**P = Present      R = Regrets**

<b>1.0 Welcome &amp; Introductions</b>
<ul style="list-style-type: none"> <li>• Dr MacDonal opened the meeting at 9:00 am with a welcome and land acknowledgement.</li> <li>• There were no additions to the agenda.</li> </ul>
<ul style="list-style-type: none"> <li>• Approval of Agenda</li> <li>• Consent Agenda:                         <ul style="list-style-type: none"> <li>○ VDFP projects summary</li> <li>○ PCN Progress Report</li> </ul> </li> </ul> <p><b>Decision: Approval of January 26 meeting agenda and Consent Agenda By consensus, approved.</b></p>
<b>2.0 Review of action items and approval of minutes</b>
<ul style="list-style-type: none"> <li>• November 27 Victoria CSC strategy session minutes were reviewed and there were no changes.</li> </ul> <p><b>Decision: Approval of November 27, 2023, Vic CSC minutes. By consensus, approved.</b></p>

- Review of action items from November 27, 2023:
  - #1-Exploring dedicated project management to the CSC from both Island Health and VDFP – in-progress.
  - #2 – WIC letter – on agenda for discussion
  - #3 – Circulate community respiratory services one-pager – complete – went out in VDFP NewsFlash
  - Ongoing items:
  - #1 – CSC communications
  - #2 – agenda items and CSH sharing/learnings

### 3.0 Sharing Cultural Safety and Humility Learnings

- Leah shared when offering land acknowledgement and welcome.

### 4.0 CSC Strategy session debrief

- Reviewed the November strategy session and what the CSC decided would be the focus for the next six to twelve months. There are five streams of work, but CSC would focus on opportunities for integration and coordination between four of the streams of work:
  - PCN
  - Health authority community services
  - Indigenous focused primary and community care services
  - Community-based medical specialist services
- Stream 5 – Community pharmacy services – no action at this time
- Reviewed the Draft principles below: but will refine and strengthen the language on prioritizing attachment.
  - Embed Cultural Safety and Humility
  - Ensure any changes made can be sustained.
  - Address needs of all patients – attached and unattached
  - Create an achievable workplan following SMART principles and Continuous quality improvement principles.
  - Dedicated staff resources from VDFP and Island Health required.
- Recommendations for refining/strengthening the language:
  - Improving attachment in everything we do, reduce unattachment and stabilize attachment.
  - Additional bullet needed for those waiting to be attached but will have access to excellent primary care.
  - Change *dedicated staff resources* to *dedicate staff resources*.
- Discussion/feedback on the priorities:
  - Need to further define same day access as not everything requires same day but could be access to a team member i.e. nurse.
  - Need to engage with public health CYMH.
  - We need to map CHS resources.
  - Need ongoing reminders of the resources that are out there e.g. communication from CHS with phone number to connectors, messaging to EMRs etc.
  - Have Physician Connector leaders come to CSC and provide updates on their status and call volumes
  - Pathways is an excellent resource but has become so big that it is overwhelming. It would be helpful to have them come to CSC to provide feedback for easier navigation.
  - There is a need for a patient facing web portal.

**Action #1: Refine the draft CSC priorities and create work plan.**

**Action #2: Ask Physician Connector lead to present/update to CSC.**

**Action #3: Ask Pathways lead to present/update to CSC.**

**Action #4: Continue to explore what is required from Island Health and VDFP for dedicated project management resources to the CSC.**

5.0 Episodic Care/WIC Update
<ul style="list-style-type: none"> <li>• WICs funding has been extended until September 2024. There is work being done to look at funding changes for WICs along the longitudinal model but no date and lots of uncertainty and stress for WICs.</li> <li>• Cohort model for WIC:             <ul style="list-style-type: none"> <li>○ A couple of years away from implementation which is too long.</li> <li>○ Looking at engaging with UPCCs on an interim basis as UPCCs have allied health services available to all patients regardless of if they have a FP. WICs are not aware of this; better communication needed.</li> <li>○ A suggestion to pair WICs up with a UPCC to show them what resources are available.</li> </ul> </li> </ul>
6.0 Partner updates
<p>Island Health</p> <ul style="list-style-type: none"> <li>• Organizing a dine and learn with VDFP for April with Community Health Services.</li> <li>• Liaison in ER to make formal referral for any patient who is not attached to CHS and should be.</li> </ul>
<p>VDFP</p> <ul style="list-style-type: none"> <li>• PCN Seniors Outreach Nurse initiative was a case manager position but is now being rebranded as Seniors Outreach Nurse. The issue is waiting three to six months for the job description to be finalized.</li> <li>• Island Health advised the HR issue is through HEABC, but Island Health may be able to go back and find a work around as wait is too long as AHPs available to work.</li> </ul> <p><b>Action #5: Island Health to go back to HR re: job description for Seniors Outreach Nurse.</b></p>
<p>ISC Update</p> <ul style="list-style-type: none"> <li>• No updates</li> </ul>
7.0 PCN Governance Refresh updates
<ul style="list-style-type: none"> <li>• No updates</li> </ul>
8.0 Other Business
<ul style="list-style-type: none"> <li>• Three bullets of interest to FPSC and WGs:             <ul style="list-style-type: none"> <li>○ We are interested in mapping out Community Health Services.</li> <li>○ We are exploring dedicated project management resources from Island Health and VDFP to support the CSC.</li> <li>○ A timelier process is needed for HEABC job descriptions as this is directly impacting patient care.</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• The next CSC meeting is February 23, 2024</li> </ul>
<ul style="list-style-type: none"> <li>• Meeting adjourned at 11:00 am</li> </ul>