NP4BC Summary of Approved Applications – First Intake

Fraser Health Authority

Burnaby Division of Family Practice

Target group(s): New immigrant and refugee population.

The nurse practitioner, working within a collaborative interdisciplinary team, will be integral in providing comprehensive primary health care for refugees and new immigrants at risk.

Fraser Northwest Division of Family Practice

Target group(s): Frail elderly with chronic conditions.

Through routine, preventative and urgent care the nurse practitioner will work with unattached or marginally attached patients who frequently cycle into and out of acute care at Eagle Ridge Hospital and homebound patients who seldom see their general practitioner.

Hope Family Practice Physician Group

Target group(s): Frail elderly in residential care; First Nations; Mental health and substance users; and youth.

The nurse practitioner will support rural and remote populations in the Fraser Health Authority catchment area including: unattached patients primarily in Hope and Boston Bar; frail elderly in residential care and assisted living (Agassiz and Hope); First Nations in remote setting along the Fraser Canyon Corridor; and underserved patients in Mental Health/Youth Clinic/Supported Housing settings.

Langley Division of Family Practice

Target group(s): Unattached frail elderly in hospital and post-discharge.

The nurse practitioner-medical doctor collaborative model will work to close the gap in the continuity of care which exists for unattached elderly/frail elderly patients in the hospital and post discharge by providing supported, safe and timely transitions to home or into residential care. The nurse practitioner will support the care of these unattached patients in the community while working to attach them to existing practices.

Mental Health and Substance Use – Ridge Meadows Division

Target group(s): Homeless and people living with chronic mental disorders and conditions.

The nurse practitioner will collaborate with Ridge Meadows Division of Family Practice, Mental Health and Substance Use Program, Fraser Health Authority and community stakeholders to establish medical linkages for the homeless and chronic mentally ill population in Ridge Meadows.

Surrey/North Delta Division of Family Practice

Target group(s): Marginalized substance users with chronic medical conditions/or mental illness– Quibble Creek/Recovery House.

This position aims to improve the primary care services' provision to the marginalized substance using population who have difficulty accessing services. The nurse practitioner will support more care and better care for this vulnerable population.

Surrey/North Delta Division of Family Practice
Target group(s): Urban Aboriginal Population.
There is an identified gap in the aboriginal community both off and on reserve, typically experiencing barriers to culturally appropriate primary care services. The nurse practitioner will be located at the Aboriginal Health Primary Care Centre and will also perform outreach services to outlying reserves.

Tri-Cities Residential Care, Assisted Living
Target group(s): Underserved frail elderly population with co-morbidities and chronic health disease.
The nurse practitioner will provide services to support the frail elderly population seeking placement in residential care in the Tri-Cities communities (Coquitlam, Port Coquitlam and Port Moody).

White Rock/South Surrey Division
Target group(s): Frail elderly homebound and unattached PATH (Patient Assessment and Transition to Home) patients.
The community nurse practitioner will provide primary care for frail elderly homebound patients while working collaboratively with general practitioners and care teams in the Patient Assessment and Transition Home unit to ensure continuity of care with the goal to discharge patients early to their home and provide coordinated follow up care.

Homebound Frail Older Adults with Chronic/Complex Conditions – Chilliwack
Target group(s): Unattached frail seniors with complex chronic conditions and/or early onset dementia and patients, with serious and persistent mental illness or addictions, with a focus on those that are homeless.
The NP will provide full scope primary care services out of two service locations, as well as providing outreach services to clients' homes as necessary in Chilliwack. The NP will establish and manage his/her own roster of longitudinal clients, and work collaboratively as needed for these/other identified clients receiving services in the service locations. The NP will be anchored out of the Primary Care Clinic and the Primary Care Seniors Clinic, both currently operating within the same facility space at Chilliwack General Hospital and will provide services for the frail elderly population at clients' homes. The NP will also provide service from the Health Contact Center, a multiagency/multiservice facility that will provide primary care, supported housing, mental health and substance use treatment, and social service support for a vulnerable homeless population living on the street, or in shelters in Chilliwack.

Interior Health Authority

Interior Health Community Integrated Health Services - Central Okanagan Diabetes
Target group(s): Unattached and attached complex adult diabetes patients.
The nurse practitioner will provide patient care to both unattached and attached complex adult diabetes patients currently being referred for higher level medical management care from local family physicians. The position will fulfill clinical coordinator functions within the community based Central Okanagan Diabetes Program.

Cranbrook Ktunaxa Nation Council
Target group(s): First Nations primary health care.
The nurse practitioner will be working in outreach to rural communities, especially to the Tobacco Plans Band, providing attachment to primary care. Their remote location makes it difficult to get urban appointments and there are no credentialed health workers in the community. Through comprehensive

patient assessments the nurse practitioner will facilitate the appropriate utilization of services for the Aboriginal population.

Revelstoke - Community Integrated Health Services General Practitioner/Nurse Practitioner Partnerships

Target group(s): Frail elderly patients.

A shared care model where the nurse practitioner works collaboratively with the physician in terms of the care of complex patients, specifically the frail elderly. This would include seeing patients in residential care facilities and in their home.

Sicamous Medical Clinic

Target group(s): Frail elderly patients, those with chronic disease, transient and low economic patients, and maternity care.

The nurse practitioner will provide an option for patients seeking women's health issues, complex care planning and pain management needs and substance abuse issues. The introduction of a nurse practitioner to this practice will increase capacity through accommodating the needs of the aging and economically challenged population.

Pleasant Valley Manor/Parkview Place/Bastion Place – Enderby (IH Residential)

Target group(s): Residents over 19 years of age who require 24-hour care and supervision due to vulnerability related to disability, illness or frailty.

The addition of a nurse practitioner to the residential practice in the communities of Armstrong, Enderby and Salmon Arm will address gaps in primary care service through the timely comprehensive assessment and treatment of patients, thus avoiding emergency department visits and hospitalization. The addition of a nurse practitioner will also promote the timely discharge planning across the care continuum (pre-admission to residential beds from acute or community and subsequent discharge from short stay residential beds).

Frail seniors: North Shore Kamloops

Target group(s): Frail seniors.

In this proposal the nurse practitioner would work collaboratively on the north shore with Royal Inland Hospital hospitalists to follow up on unattached frail senior patients being discharged to the north shore, community care nurses with unattached frail senior patients on their rosters, and family physicians discharging unattached frail seniors from short stay beds and those family physicians that have loosely attached frail senior patients.

Northern Health Authority

Carrier Sekani Family Services

Target group(s): Rural and remote First Nations of the Carrier and Sekani traditional territory; also known as the Omineca-Lakes district.

The nurse practitioner will complement existing health care services that are provided by Carrier Sekani Family Services, First Nations Inuit Heath Branch and the Northern Health Authority.

Central Interior Native Health Society – Prince George
Target group(s): First nations. Primary health care delivery for marginalised and underserved population; including addictions and mental health services; chronic disease management.
The addition of a nurse practitioner will provide primary care in the downtown core area to the marginalised and underserved population. The nurse practitioner will be able to work within a multidisciplinary team to provide quality holistic care, including appropriate referrals to specialty services and community resources.

Nak'azdli and Tl'azt'en
Target group(s): Primary care to First Nations populations.
The nurse practitioner will be working in two communities; Nak'azdli and Tl'azt'en ensuring that patients with chronic diseases, mental health and addictions, and pre-natal patients have secure access to medical care.

Old Masset
Target group(s): First Nations (population of Old Masset is 45%). Elderly patients, chronic disease management, maternity patients and those with mental health and addictions.
The nurse practitioner will fill the gap between elder's health, home support workers and consistent higher level nurse care, chronic disease management, prenatal services and mental health and addictions. The nurse practitioner will; (1) have access to weekly doctor's rounds to collaborate on shared patients, create complex care plans with the team and participate in the frail elderly collaborative; (2) work with the chronic disease coordinator, doctors and village nurse to do diabetes recall, foot check clinics and group medical clinics; (3) assist the Prenatal Group Clinic team on a monthly basis, providing prenatal service and attending prenatal rounds, and; (4) provide scope of practice support to the addiction team, mental health groups, and the Child and Youth Mental Health Collaborative.

Prince Rupert – Hartley Bay, Kitkatla and Lax Kw'alaams
Target group(s): First Nations primary care services and chronic disease management.
The nurse practitioner position will allow patients with high needs to access consistent primary health care through an interdisciplinary health care team including general practitioners, diabetic educators, physiotherapy, and liaison with the local hospital.

Providence Health Care

Community Dialysis Unit
Target group(s): Complex chronic disease management, renal care and frail elderly seniors.
Nurse practitioner services will be provided to patients in the Lower Mainland and Sunshine Coast (Richmond, East Vancouver, Vancouver, North Vancouver, Squamish, Sechelt, and Powell River).The implementation of a nurse practitioner in the community dialysis units will ensure timely access to primary care, inclusive of complex chronic disease management, and includes end stage renal disease management.

Crosstown Clinic
Target group(s): Primarily patients with chronic disease and mental health and addictions.
The limited capacity of primary care providers in Vancouver's Downtown Eastside means that many patients receiving addictions care at the Crosstown Clinic have no access to primary care services. The nurse practitioner will be filling a major gap in the current service provision. Clients at the clinic have a

history of chronic opioid dependence, for which existing treatment has been unsuccessful. Many clients have compromised physical and mental health and have often experienced prolonged periods of being unattached to health services, particularly primary care.

Inner City Youth Mental Health
Target group(s): Mental health and addictions.
The Inner City Youth Mental Health Program (ICYMHP) provides a range of outreach acute and ongoing mental health services to vulnerable youth in the Vancouver Downtown Core. In partnership with community service providers including Coast Mental Health, Covenant House, BC Housing and Vancouver Coastal Health, the nurse practitioner, working with an interprofessional team, provides a range of assessment, treatment, management and housing support to youth, aimed at stabilizing mental health, treating addiction and promoting access to housing, education and employment.

Provincial Health Services Authority

BC Cancer Agency Survivorship Program
Target group(s): Caring for patients from the BC Cancer Agency who are unattached or with complex issues resulting from treatment.
The nurse practitioner will be integrated into primary care setting and have specific focus on cancer survivorship and will be able to provide comprehensive care to cancer patients.

BC Children's Hospital – Nurse Practitioner Child and Youth primary Care Clinic
Target group(s): Unattached infant, children and youth, and patients with chronic co-morbid conditions, mental health and addictions, aboriginal and Ministry of Children and Family Development patients.
Primary care services provided by the nurse practitioner will include management of common illnesses and chronic conditions, early screening and health promotion for the following; high risk infant children and youth at NP Primary Care Clinic and Outreach; asthma primary care and chronic disease management; children and youth with developmental, behavioural and physical concerns; and infant, children and youth without a primary care provider.

BC Children's Hospital – Richter Program
Target group(s): Inner city children/youth with complex needs.
The nurse practitioner will provide primary care and access to specialist care in a collaborative model to inner city children/youth with complex needs.

BC Women's Hospital and Health Centre – Nurse Practitioner Outreach Services
Target group(s): Marginalized populations of women with complex needs.
The nurse practitioner will provide services to women and youth marginalized from mainstream services by stigma, poverty, mental health and addictions, violence, homelessness, disabilities, HIV and racism, and those who lack access to safe, low barrier and gender-sensitive primary care.

Vancouver Coastal Health Authority

Sliammon First Nations – Powell River North Sunshine Coast
Target group(s): First Nations.
The nurse practitioner will be based at the Tla'Amin Health Center on the Sliammon First Nations reserve serving the community of First Nations as well as the retired and rural population, and with youth wellness and chronic pain management.

Southern Stl'atl'lmx Health Society – Pemberton
Target group(s): First Nations; youth sexual health; chronic disease; elder and maternal/child health.
The nurse practitioner will be based at Southern Stl'atl'lmx Health Society at Pemberton and serve five First Nations communities as well as the wider population in the Pemberton Valley, while supporting the Vancouver General Hospital Pemberton Health Center and local physicians.

South Vancouver Birthing Program
Target group(s): Women's health and maternity.
The addition of a nurse practitioner to the South Community Birth Program will allow for the expansion of capacity and provision of services for underserved, unattached families. This would include primary care with a focus on group care, well baby care, women's health and sexual health services.

Spectrum Health HIV
Target group(s): Chronic co-morbid patients with or at risk of HIV.
The nurse practitioner will assume responsibility for clinic patients with, or at risk for, HIV and associated chronic illnesses (e.g. Hepatitis B &C, addiction issues, cardiovascular disease, renal failure, and cognitive impairment) and will be involved in initiating and maintaining patients on antiviral therapy.

United Church Services Medical Clinic – Bella Coola
Target group(s): First Nations, home and community care, mental health and addictions, and population and family health.
The nurse practitioner will be responsible and accountable for the comprehensive assessment of patients and clients of the Nuxalk First Nations. This role will include diagnosing diseases, disorders and condition, and addressing areas needing extensive monitoring, follow-up and attention to prevent complications and improve health outcomes.

Vancouver Community: Clinical Tenant Support Team (CTSC)
Target group(s): Mental health and addictions.
The Clinical Tenant Support Team is part of Primary Outreach Services and works in co-operation with numerous community partners to provide mental health, addictions and primary health care outreach to clients living in supported housing within the Downtown Eastside.
The nurse practitioner, working with the Clinical Tenant Support Team, would be an addition to the team that already exists would perform comprehensive management of clients, including medical and mental health assessments, diagnostics and lab work, immunizations, chronic disease management, harm reduction, and provide appropriate referrals to other community and healthcare services.

Vancouver Community: Home Vive
Target group(s): Frail homebound seniors.
The nurse practitioner will provide full scope, home-based longitudinal primary care to frail homebound Vancouver seniors without a family physician, or inconsistently able to visit their family physician, in collaboration with six family physicians and an interdisciplinary team. Care will support the client's choice to remain at home, and will include diagnostic/treatment of acute illness, chronic disease management, improved health outcomes and avoiding unnecessary emergency room visits and/or acute/residential care admissions.

Vancouver Community: Vancouver Inner City

Target group(s): Vulnerable unattached primary care patients.

Two nurse practitioners will work in collaboration with community partners, with a vision of engaging/attaching vulnerable and complex clients living in Vancouver Inner City, with no reported primary care provider, to one of three interdisciplinary primary care clinics. Once attached to care, clients will be seen by the original outreach nurse practitioner, who will also work clinic hours, or by another provider on the team.

Vancouver Island Health Authority

Nurse Practitioner for Hillside Medical Centre, Ladysmith

Target group(s): First Nations.

The nurse practitioner will join the existing Hillside Medical Clinic practice with five family physicians, and will focus on underserved, orphaned and Aboriginal clients and will provide regular outreach to the Stz'uminus First Nation and to the Lodge on 4th, a residential care facility.

Primary Health Care in Port Hardy

Target group(s): Marginalized, underserved, and unattached patients

The nurse practitioner positions in Port Hardy will complement primary health care in Mount Waddington. The nurse practitioners will focus on marginalized, underserved, and unattached patients. Service will expand in medical practice settings, outreach settings, and access to care.

Primary Health Care in the Rural Community of Hornby Island

Target group(s): Chronic disease management of unattached patients.

The nurse practitioner will be essential to providing the full range of primary health care in a rural setting by improving the community's access and attachment to a primary care provider, providing chronic disease management, and sharing care among existing providers.

Primary Health Care in the Rural Community of Sayward

Target group(s): Primary care to rural and underserved community of Sayward.

The nurse practitioner position will provide access to primary health care in this rural community where there are no organized medical services. The role of the nurse practitioner will be mainly to provide primary care to the residents of this rural and underserved community, as well as to also build the collaborative setting for practice in the community. The nurse practitioner will also be working with the community to provide care to the increasingly elderly population.

Primary Health care, Chronic Disease Management and Aboriginal Health in Campbell River Area and the Comox Valley "Reaching Beyond the Margins"

Target group(s): Chronic disease management for marginalized, aboriginal, clients living with HIV/AIDS and who are street involved and/or homeless.

Two nurse practitioners will be integrated into existing interdisciplinary teams in each the Campbell River Sunshine Wellness Centre and at the Comox Valley Nursing Centre to improve access and utilization of primary health care services for clients with chronic disease management needs. These clients are generally poor, marginalized, aboriginal, living with HIV/AIDS and are street involved and/or homeless and access primary health care in the emergency room.