

Patients as Partners and Fraser Health: Regional Engagement Table

January 16, 2018 | Abbotsford, B.C.

Executive Summary



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Patients, Family Caregivers, Practitioners and Health-Care Staff: Collaborative Care Planning and Urgent Primary Care Centres – January 2018



Workshop participants were asked, “In one word, what does patient- and family-centred care mean to you?” The larger words in this illustration represent the most-repeated responses.

Background: The B.C. Ministry of Health’s Patients as Partners Initiative hosted a series of Regional Engagement Tables throughout the province about access to health care with a final, provincial wrap-up meeting to discuss what was learned at each table. Input from all of the events will be shared with patients, families and caregivers, as part of confirming the completion of the engagement session. As well, the information will be shared with community and provincial health leaders, as they work to develop new policies and strategies for improving primary care. The Patients as Partners Initiative and Fraser Health Authority partnered to host a Regional Engagement Table on January 16, 2018. The full-day workshop was held in Abbotsford with 36 participants, comprising of patients, family caregivers, health-care practitioners and health-care administrative staff. The purpose of the event was to discuss and receive input on a variety of topics related to collaborative care planning and urgent primary care centres in the Fraser Health region. This document summarizes the key themes and innovative ideas from the discussions.

Summary of the Workshop Format: The engagement table brought together many people from communities across the Fraser Health region. Coast Salish Elder, Francis Horne, opened the event with a traditional welcome and a prayer. Guest speakers included Bob Strain, a patient advisor from the Fraser Health Patient Advisory Council who shared a story about his experiences with health care; Shannon Holms, Director of Patient Engagement and Community Programs from the Ministry of Health gave a presentation on the Patients as Partners Initiative and introduced the concept of urgent primary care centres and their benefits; Megan Stowe, from Fraser Health spoke about collaborative care planning; and representatives of the Ministry of Health’s funded partners (University of Victoria’s Self-Management BC; the University of British Columbia’s interCultural Online Health Network; Pain BC; Family Caregivers of BC; and the Centre of Collaboration, Motivation and Innovation) presented on the self-management and self-care programs, resources and community events they provide.



The majority of the day was dedicated to meaningful engagement activities with the group, with a variety of opportunities for discussion and input. For example, in small groups, participants reviewed five collaborative care plan definitions and recorded the aspects of the definitions they thought were clear and meaningful as well as what could be improved. Other activities involved participants interviewing each other on the benefits and challenges of implementing urgent primary care centres, and discussions about accessibility to care and the evolution of inclusivity in the health-care system.

Benefits of Urgent Primary Care Centres to Patients, Families and Providers: Input was recorded on the benefits and improvements of urgent primary care centres from the participants' perspectives. Many discussions led to the conclusion that people would be more likely to use urgent primary care centres, and that they would do so earlier when seeking access to needed non-emergency care, rather than visit a hospital's emergency department. The following key themes were identified:

1. **Improved access and timeliness:** participants felt that urgent primary care centres added an additional tier of care that would reduce wait times and increase evening and after-hours service
2. **Better care and outcomes:** avoiding emergency departments means not being exposed to the stress and pathogens present in that environment; as well, it provides the possibility of being treated by health-care practitioners in a more comprehensive way with appropriate referrals. This could pave the way for better health outcomes
3. **Comprehensive, continuity of care:** participants felt that the care at urgent primary care centres would better align with their health-care needs, that doctors and nurses could make better use of their skills in this type of environment, and that their care would be more appropriately transferred to another health-care professional, if need be
4. **Reduced pressure on emergency departments:** providing an additional level of non-emergency care in communities would allow emergency departments to better treat true health emergencies

Collaborative Care Planning Definition Review: Participants were asked to review four collaborative care planning definitions and record what they liked and what should be changed:

Care team: thought of as inclusive and holistic and was generally approved

Transitions of care: generally disliked, participants felt it was jargon and reflective of the existing system

Care planning: described as clear, collaborative and self-empowering. Participants felt the challenge would lie in defining the roles and tasks

Collaboration: defined with words such as collectivism, equality and inclusivity. Some felt that a simpler word such as 'together' could be used

In the evaluation survey, 100% of participants said it was valuable to hear from others, and that the Regional Table was interactive.

"It was valuable to have all of the key players in the same room. Everyone had equal chance to participate."

"Clearly there is so much experience in the room that needs to be incorporated into future planning."



Benefits and Challenges of Implementing Collaborative Care Plans in Fraser Health:

Benefits

Quality of care: collaboration reduces inefficiencies and improves planning and communication

Support: both caregivers and providers are more supported

Patient involvement: empowered to influence your own care can improve outcomes

Accuracy, inclusivity and efficiency: information will be more accessible, and responsibility will be shared

Cultural change: the current system is entrenched and it will take time to evolve

Challenges

Team dynamics: working productively is a balance of time, personalities, roles, languages and trust

Follow through: determining the best course of action, allowing for changes, and overcoming barriers

Communication: ensuring the information needed is shared in a transparent, timely way

Coordination between systems: coordinating and communicating between the various existing models



Success Indicators for Evaluating Collaborative Care Plans:

- No overloads
- No wait times
- Immigration processes for doctors functioning smoothly
- One electronic medical record with real-time access
- Co-created care plans
- Holistic funding plans
- Wellness education provided
- Wellness-focused health care
- Allied health (e.g. physiotherapy) funded
- Accessible health care

For more information on the Patients as Partners Initiative, please go to our website:
<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/patients>

