Kim Williams seconded to RCCbc to support rural surgical and obstetric networks program development

VANCOUVER – The Rural Coordination Centre of BC (RCCbc) is pleased to announce that Ms. Kim Williams will be joining its team effective Friday, April 14, 2017. Ms. Williams is being seconded to RCCbc from Perinatal Services BC (PSBC) for two years, and will spend the majority of her time working on rural network development projects. She will continue to work with PSBC one day a week during this period.

Ms. Williams has been a valuable contributor to RCCbc’s rural surgical and obstetric network (RSON) development process, and will be leading RCCbc’s work in this area in her new role. Says Williams, “this is a great opportunity to take this project forward and builds on all the work PSBC has partnered on over the last three years.” The RSON program aims to stabilize robust, sustainable local surgery programs in select areas of BC with small surgical programs served by general practitioners with enhanced surgical skills or by a solo general surgeon. It is anticipated that these rural surgical and obstetrical programs will increase the health services capacity of rural communities by supporting enhanced critical care, emergency and trauma care, and maternity programs, including obstetrical delivery and cesarean section.

During her secondment, Ms. Williams will be stepping away from her role as Provincial Executive Director of Perinatal Services BC. Ms. Lily Lee will be the Acting Executive Director for PSBC during this period. Ms Lee has more than 30 years of experience in perinatal care and has held many leadership roles in advanced practice, education, management, and policy and program development. Lily is active in provincial and national perinatal organizations and is a member of the Public Health Agency of Canada’s Canadian Perinatal Surveillance System Committee.

Ms. Williams received her Bachelor of Science in Nursing from the University of Victoria and her Master of Science in Nursing from the University of British Columbia. She also has certificates in both leadership and engagement. Her passion for perinatal nursing began as a frontline nurse over 25 years ago at BC Women’s Hospital & Health Centre. She moved to Fraser Health in 2001 where her career progressed across many leadership roles, including clinical educator, unit manager, health service administrator, project manager, and system planner. Kim returned to PHSA in 2008 and became the Provincial Executive Director of Perinatal Services BC (PSBC) in 2010. Under her leadership, PSBC has achieved several milestones, including the development of: the first North American resource for managing pregnancies with Downs Syndrome; innovative Canadian patient and clinical resources such as the Healthy Pregnancy Weight Gain program, Non-Invasive Prenatal Testing, and Biliary Atresia Home Screening program; and supports designed specifically for Aboriginal women and babies including the Aboriginal Pregnancy Passport, the Aboriginal Safe Sleep Toolkit and the tripartite Aboriginal Doula Initiative. PSBC became the first provincial facility in Canada to publish hospital level maternal and neonatal indicators, empowering women to make informed decisions with health care providers regarding birthing options. Ms. Williams commitment to interdisciplinary collaborative care and equitable access to safe maternity care as close to home as possible have become the underpinnings for many other provincial initiatives.
Quotations

Kim Williams, Lead, Rural Surgical and Obstetrical Networks
“I am excited to be joining the RCCbc team and look forward to working even more closely with the rural and remote communities and teams across the province.”

Dr. Ray Markham, Executive Director, RCCbc
“We are very pleased that Kim will be joining our team and lending her expertise to the Rural Surgical and Obstetrics Networks program. We anticipate that this program will lay the groundwork for successful retention of key health services in select communities, which will result in better health care ‘closer to home’ for many rural British Columbians.”

Backgrounder

The Rural Coordination Centre of BC (RCCbc) works to enhance rural education in British Columbia and advocates to improve the health of rural BC residents.

Working at the direction of the JSC, and in collaboration BC’s health authorities, post-secondary institutions, practitioners, and rural communities, RCCbc identifies gaps and overlaps in rural services throughout the province and creates initiatives to address shortfalls. It works to increase and sustain recruitment and retention of rural healthcare professionals to BC and to provide high quality, in-community healthcare to rural British Columbians.

Perinatal Services BC
Perinatal Services BC provides leadership, support, and coordination for the strategic planning of perinatal services in British Columbia and is the central source in the province for evidence-based perinatal information.

Rural Surgical and Obstetrics Network
The Rural Surgical and Obstetrical Networks (RSONs) aim to stabilize, support and enhance the delivery of quality surgical and obstetrical care to vulnerable rural BC populations, particularly First Nations peoples. RSONs propose to provide sustainable local/regional surgery programs ‘closer to home’ in geographic areas served by GPs with Enhanced Surgical Skills or a solo General Surgeon by enhancing the existing care networks with their referral centres. RSONs would increase rural medical capacity by supporting enhanced critical care, emergency and trauma care, and maternity care including vaginal birth and cesarean section.

The local/regional RSON model would improve both patient and provider experiences of care by:

- reduce holistic risk and cost associated with travel
- rely upon a network of high quality, highly effective maternity and surgical teams to provide the right care at the right time by the right providers
- support rural practitioners to practice a full scope of rural generalist practice
- enhance and support relationships between team members within the geographic network
- provide a robust evaluative framework for quantitative and qualitative metrics applied to both maternity and surgical care
- provide culturally and rurally appropriate care closer to home