

Rural Continuing Medical Education (RCME) Community Program and Rural Program Liaisons

An Initiative of the Joint Standing Committee on Rural Issues (JSC)

Annual Report 2022/23



Joint Standing Committee on Rural Issues (JSC)



Rural Coordination
Centre of BC



Enhancing rural health through education and advocacy

Prepared by
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May 2023

RCME Community Program Provincial Summary

Over the course of the 2022/23 fiscal year, the provincial team has remained focused on the following activities:

1. Re-validating community CME models
2. Increasing awareness of CME/CPD activities
3. Sourcing education streams
4. Booking and coordinating course waiting lists.

There was a significant increase in participation for in-person CME events during the 2022/23 fiscal year as the program continues to move beyond the pandemic.

Heather Gummow, Provincial Manager, who led Rural Continuing Medical Education (RCME) Community Program and Rural Program Liaisons projects since 2018 accepted a new position with Northern Health Authority. In February of 2023, Drew Baird was appointed as the new Provincial Manager of the RCME Community Fund program and Rural Program Liaisons project. Drew Baird joined the Rural Coordination Centre of BC after spending the previous eight years supporting Rural Programs and the Joint Standing Committee on Rural Issues for the Ministry of Health.

During the final 6 months of the 2022/23 fiscal year, two additional communities were implemented into the program, raising the total number to 101 RSA communities (out of 103 that are eligible this year). The total number of communities to implement into the program was reduced by one, as Madeira Park no longer has a resident physician. The RCME team continues to build and maintain relationships with rural health care providers, communities, and partners using a customer service approach and a positive attitude to encourage community implementation.

Over the course of the 2022/23 fiscal year a total of twelve Specialist, Sub-specialty, Indigenous and Funding for Innovation (SPIFI) applications were approved. 2023 marked the return of the Jasper Spring Retreat and Medical Conference utilizing both community RCME and SPIFI funding. The Jasper Spring Retreat was a two-day event that brought together physicians from Dawson Creek, Smithers and Prince George, as well as RCME support staff to highlight topics and fill education gaps relevant to the north.

The community of Cranbrook organized the Serious Illness Conversation workshop, via the BC Centre for Palliative Care and extended the invite to their physician colleagues in Kimberley. The interdisciplinary team at the Kimberley Primary Health Care Centre sent a team of physicians and nurses to attend the workshop in Cranbrook.

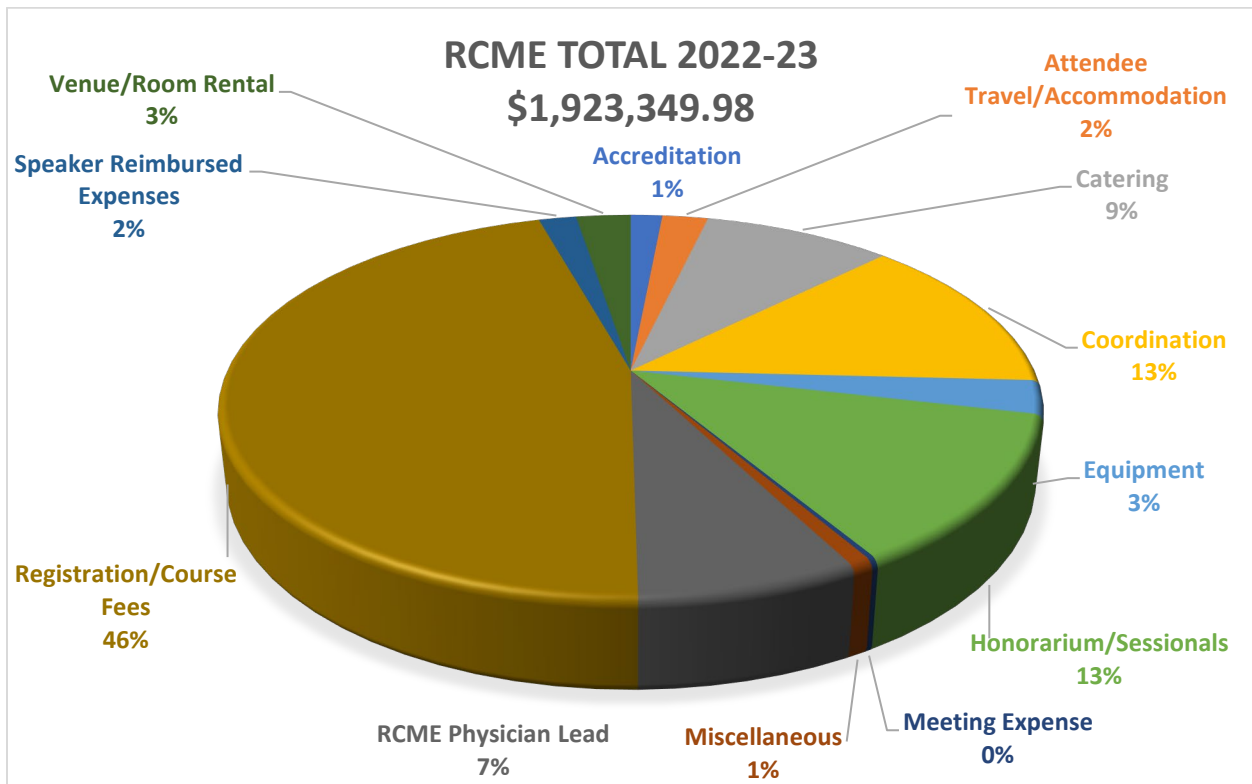
An Airway Interventions & Management in Emergencies (AIME) course was hosted in Port Alberni with physicians from Tofino participating with their Port Alberni colleagues to practice hands-on airway management skills and scenarios.

After a long courtship, Bowen Island, the final community for Vancouver Coastal Health Authority, was implemented into the RCME program in February of 2023 and is looking forward to utilizing the RCME Community Fund in the 2023/24 fiscal year.

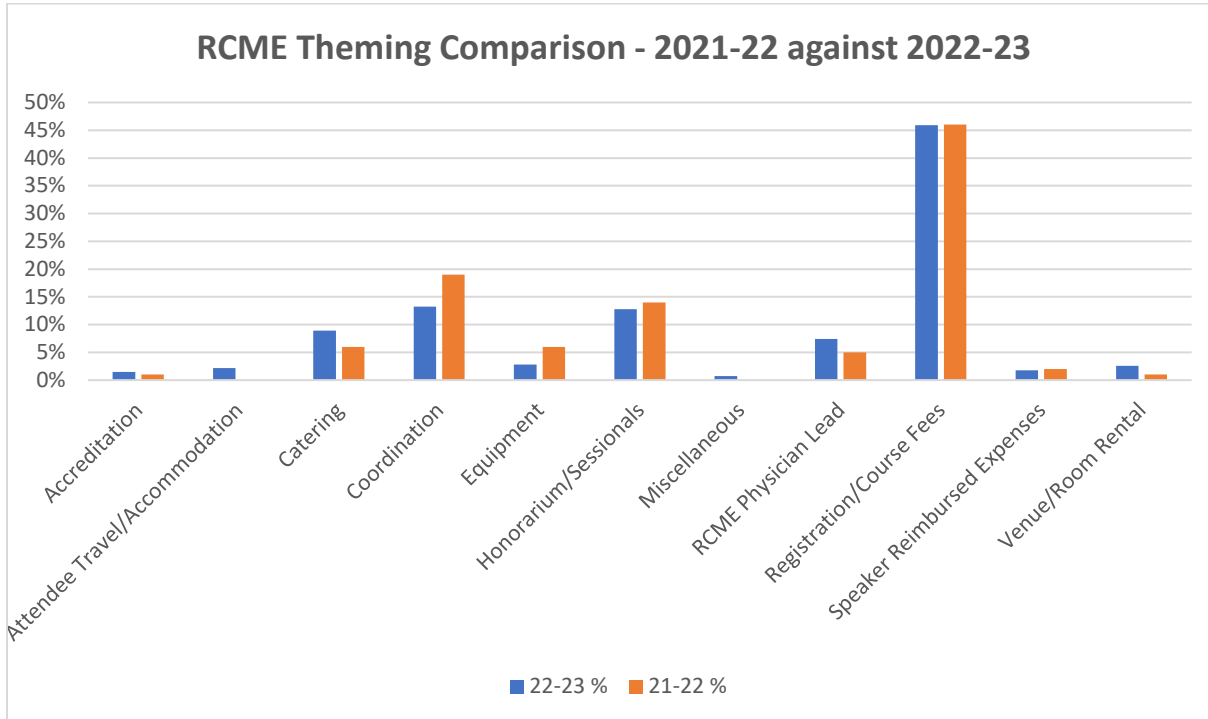
For the 2022/23 fiscal year, the JSC approved RCME community funding in the amount of \$1,752,272.00 to eligible RSA communities across BC. We continue to draw down on the total amount of RCME funding remaining within community accounts. As of December 31, 2022, the team has managed to draw down the total amount by \$356,238.36 when compared to December 31, 2021.

RCME Community Funding Utilization

Below is a breakdown of the total community funding spent by category across BC for fiscal 2022/23.



The amounts presented above remain largely unchanged from the previous fiscal year. Below is a chart comparing fiscal 2021/22 spending with the 2022/23 fiscal year.



Coordination and Equipment costs have slightly decreased with an increase shown for Catering and Venue costs.

Future

Moving forward, the RCME team will strive to bring on board the remaining two eligible RSA communities and remain focused on supporting rural physicians to take a proactive approach to education planning. Additionally, the team will continue to promote collaboration and hosting multi-community CME events.

The Provincial Manager, in consultation with the RCME physician lead Dr. Ian Schokking have identified an opportunity to work closely with the Rural Programs' Liaisons, and will focus on identifying opportunities to engage with physicians, Health Authority staff, and communities concerning Northern Isolation and Travel Assistance Outreach Program (NITAOP) and the ability to organize CME activities during clinical visits. This presents a chance to bring together each of the roles on our team and collaboratively coordinate CME in remote communities.

Our achievements have been made possible thanks to the partners we have worked with. The team would like to thank the JSC for their continued support and the commitment of sustainable funding. This decision to provide dedicated funding recognizes the important, high-quality work being performed by the program and allows it to sustainably plan and implement in future years. The team also like to thank

our partners for their time, support, and commitment to ensuring the success of the program, including but not limited to Health Authorities, UBC Rural CPD, Rural Education Action Plan (REAP), Divisions of Family Practice, and Medical Staff Associations

For more details to understand the variation that exists across the regions, please find attached as **Appendix A**, a detailed report for each region provided by the program staff.

Rural Programs' Liaisons Provincial Summary

Rural Programs' Liaisons staffing positions have been in place with the Regional Health Authorities since 2021 and the team continues to take on additional opportunities to support rural programs that benefit rural physicians. Over the course of the 2022/23 fiscal year, the Rural Programs Liaison positions continued to expand their roles within their Regional Health Authorities. In addition to assisting with the RCME Community Program, the administration of the Northern Isolation and Travel Assistance Outreach Program (NITAOP) has been taken on in each of the regions.

In March of 2023, Thérèse O'Brien joined our team as the new Rural Programs' Liaison for Island Health. Thérèse joins the RCCbc from the Credentialing and Privileging team with Island Health and brings a wealth of knowledge and experience in the health system.

Several challenges with the accuracy and integrity of the Annual Physician Count data provided to the Ministry of Health has become a common theme within each region. The Rural Programs' Liaisons have continued to take on the responsibility of this work and are beginning to identify new processes to further increase the accuracy of the reporting provided.

NITAOP was identified by the JSC as a program that provides great value to rural communities, however, members agreed that the program could use some additional coordination and attention at the planning and administrative level within the Health Authorities. Many of the Liaisons have contacted the visiting physicians who have indicated that they have not spoken with anyone regarding their visits "in years". Medical Leadership in each Health Authority has been engaged in the NITAOP planning process to ensure that the services and supports being offered are based on the identified community need and consider whether new NITAOP services need to be considered for the community/region.

Future

Moving forward, the main objective for the team will be to make amendments to the timeline to the NITAOP approval and planning process. The annual budget request for the 2024/25 fiscal year and any exceptions to program policy will be reviewed by the JSC at the November 2023 meeting, rather than in 2024, to provide advanced communication to the traveling physicians and Regional Health Authorities. Completing the process by the end of the calendar year will enable Health Authorities and the Ministry of Health to explore alternative options for support in isolated communities where NITAOP is not available.

The Rural Programs' Liaisons will continue to reach out to visiting physicians, and medical leadership, with the Health Authorities to ensure that future NITAOP applications are as accurate and robust as possible.

For more details to understand the variation that exists across the regions, please find attached as **Appendix B**, a detailed report for each region provided by the program staff.

APPENDIX A

Fraser Health Region – Drew Baird, Provincial Manager

Regional Update

Fraser Health has one RSA community eligible for RCME Community Funds which is Hope. The community successfully hosted an onsite ACLS course in January 2023 and as a result qualified for funding in the 2023-24 fiscal year.

Nisga’a Valley Health Region – Drew Baird, Provincial Manager

Regional Update

Nisga’a Valley Health has one RSA community eligible for RCME Community Funds which is New Aiyansh. The community successfully hosted an onsite Emergency Management course in November 2023 and plans to host multiple courses locally in 2023-24.

Interior Health Region – Nicole Hochleitner – Wain, RCME Liaison

Regional Update

Networks/Alliance: The Interior has two robust multi-community CME/CPD programs in the East Kootenay and Kootenay Boundary regions. Both networks are led by the Divisions of Family Practice and supported by CME Coordinators that work closely with the RCME Liaison. Weekly and quarterly meetings take place to discuss updates on education, projects and to provide a forum to ask questions, discuss challenges and build relationships.

In addition to these high-functioning CME/CPD programs, the Interior has a closely connected network: the Shuswap Collaborative Alliance. The membership for this Alliance consists of Doctors of BC Facility Engagement for the Salmon Arm Hospital, Practice Support Program (PSP), Shuswap North Okanagan Division of Family Practice, Shuswap Hospital Foundation, Interior Health Quality Improvement, Physician Quality Improvement (PQI), Shared Care and RCME Community Program.

The East Kootenay and Kootenay Boundary networks have been referring speakers to each other for their respective Lunch & Learn, Dine & Learn, and Happy-Hour & Learn sessions. Sharing speakers across two regions continues to promote the local knowledge translation.

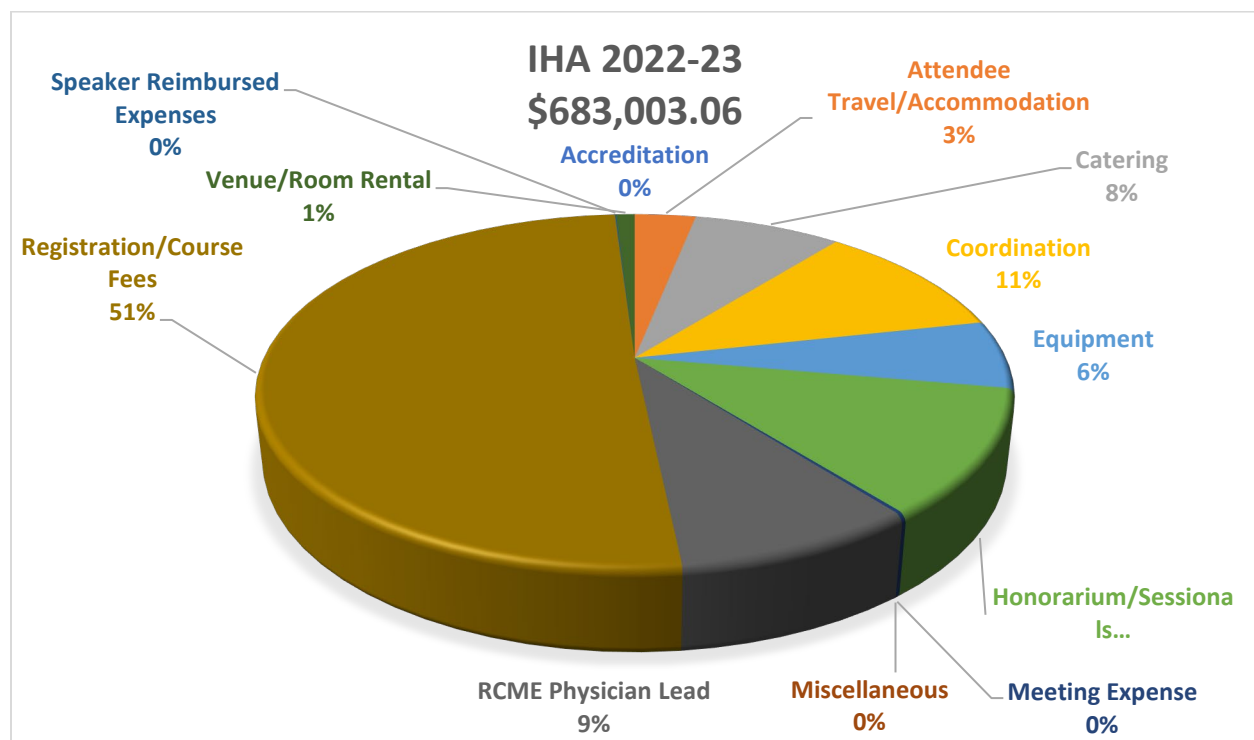
The Kootenay Boundary hosted their 39th Annual Kootenay Conference on February 10, 2023 at the Prestige Hotel in Nelson. This hybrid event, which was very well attended by physicians from all of the 10 communities within the Kootenay Boundary, featured many local speakers and presentations on Dermatology and Referral Patterns, Respiratory Failure, Ambulatory POCUS and RTVS channels, Top Studies, Cultural Safety, KB Oncology Program and so much more. However, the main highlight was the

opportunity for face-to-face connections and for physicians to spend time with their colleagues across the region.

The East Kootenay region hosted their 4th Annual EK CME Day on October 22, 2022 at the Cooper Point Resort in Invermere. The event brought together 73 family physicians, specialists, and nurse practitioners from around the East Kootenay to learn, share, and network in the beautiful Columbia Valley. The EK CME Day focuses on quality accredited CME sessions provided by local specialists and facilitates networking amongst participants. Topics included MAiD Updates, Rural Trauma The Good, the Bad, and the Ugly, Internal Medicine Hyponatremia, Pediatrics Functional Disorders in Children and much more. The event was very well attended and the value of in-person networking and was highly appreciated.

Community of Practice: The Interior Community of Practice continues to meet monthly to nurture the connection between the local and multi-community coordinators. One new coordinator in Salmon Arm joined the Community of Practice group and is appreciative of the support and mentorship being offered by the RCME Liaison. This connection is a valuable resource for the liaison and it provides the local coordinators the opportunity to discuss education happening in the interior, as well provincially.

Below is a breakdown of the total community funding spent by category within the Interior region.



Success Story

The communities of 100 Mile House and Williams Lake continue to face challenges especially in seeing an increasing attrition of providers in both communities, which is not only impacting primary care but also takes a toll on physician resiliency. However, through these turbulent months, the two communities continued to bring the physician groups together for CME Events. Anna Meyers, the local RCME support

for both 100 Mile House and Williams Lake, was instrumental in bringing the CASTED – Primary Care and Fracture Clinic to the two communities.

The in-person portion of the CASTED course was hosted in Williams Lake and 100 Mile House physicians joined their colleagues for collective learning and relationship building. The CASTED course providers enjoyed their days in Williams Lake and mentioned how great the support was from coordinators and physicians. Participants and providers alike were completely engaged during the 2-day course. The feedback from the physicians was very positive and everyone appreciated the collective learning opportunity.

Throughout the year, the Williams Lake physician group participated in bi-monthly Lunch & Learn sessions and topics included Antidepressants and Insomnia, Nephrology, Vaginitis Diagnosis and Treatment, Antimicrobial Stewardship and Microbiology Updates, Rethinking Clinical Decisions in Cardiometabolic Disease, and MAiD updates. The group is looking forward to attending a new series of lunch & learn sessions for 2023, as well doing their ACLS/BLS and PALS re-certifications. In the fall of this year, the group is planning to host the HOUSE OB course.

The physician group in 100 Mile House can often be seen in the Physicians' Lounge accessing and discussing CME topics together, as provided by the RCME Liaison. The group appreciates the variety of resources available via UBC CPD, Interior Health, and recordings from presentations across the province. Throughout the year the 100 Mile House physician group has completed their ACLS/BLS re-certifications and hosted the HOUSE EM course. For 2023, the group is planning to organize some regular bi-monthly simulation sessions and will include their inter-professional team.

The education events that have been delivered in both communities demonstrates that even when faced with uncertainty, bringing the physician group together for collective learning provides a welcome respite and strengthens the relationship amongst the group.



**East Kootenay Continuing Medical Education
Day at Copper Point**

Northern Health Region – Shar McCrory (Vacant), RCME Liaison

Regional Update

Physician Lead: Each community has an appointed RCME Physician Lead who works with their physician groups in community as well as with the RCME team. The RCME Physician Leads are very dedicated and continue to plan and support in community learning opportunities. In 2022, there has been quite a bit of turnover with these roles, noting the importance of the support of local administration and the RCME team. Many of the events in the north have had a collaborative approach, partnering with neighbouring communities or a regional approach for learning opportunities and networking. Some of these events included:

- EDE Ultrasound in Dawson Creek, Chetwynd, and Fort St John/Hudson’s Hope.
- Northern Doctors Day, hosted by Prince George RCME, with physicians attending from throughout the North.
- Jasper Spring Retreat and Medical Conference with residents and physicians from all regions of the North.

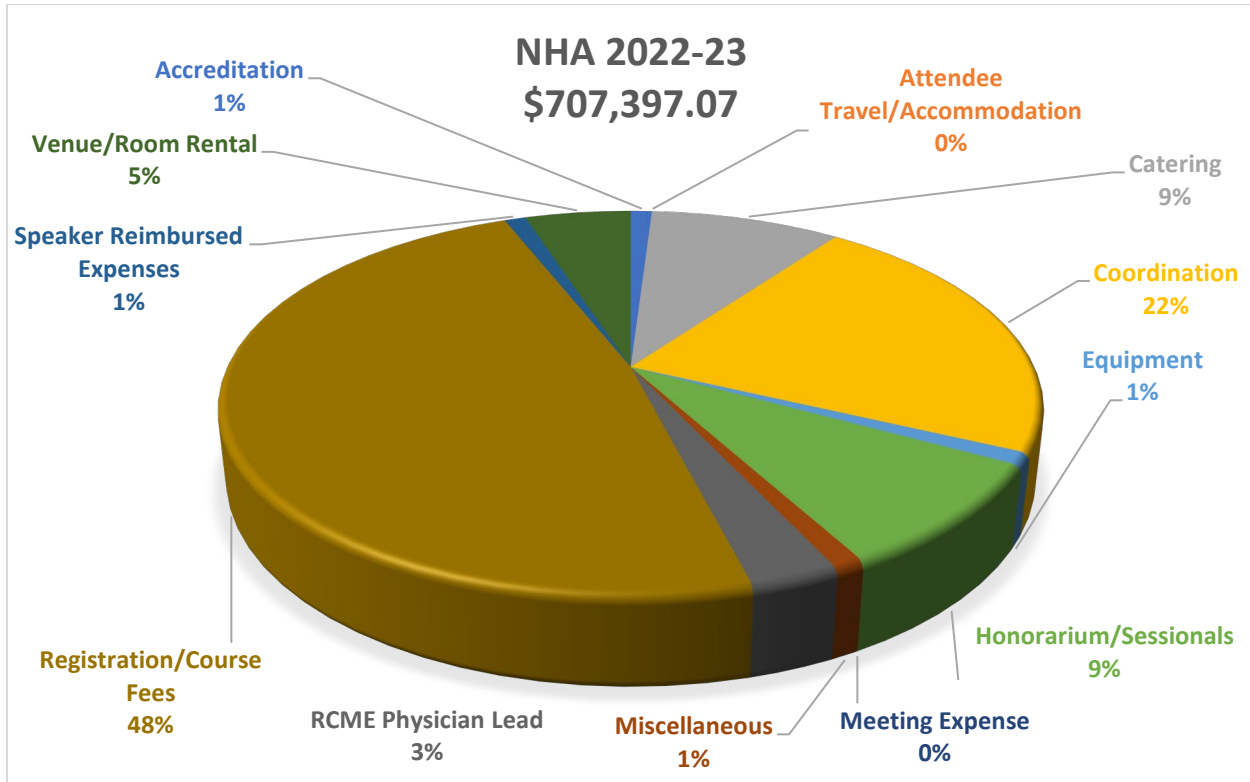
Local Support: The North has a unique RCME Community Program that has two additional full-time staff (RCME Community Coordinator & RCME Program Assistant) that are funded by direct community contributions. These staff serve roughly half of the 24 northern communities and provide varying models of support as determined by the individual community needs. Complimented by the Rural Programs Liaison, the team ensures local education needs are planned, organized, executed, and budgeted.

Within some of the communities in the North, there are local supports that help with the logistics of community learning events. The Community of Practice meet on a quarterly basis and topics range from new training opportunities to how to plan for a CARE course. The group is led by the RCME Liaison team and topics are brought forward from the group.

RCME Community Funding: The North currently has 24 communities implemented into the program and one community not yet accessing new funds. The outstanding community has not yet been implemented, with hopes that this will happen in 2023.

Many communities are utilizing the RCME funding and hosted large course offerings in the 2022/23 fiscal year. The desire continues by physician groups to have face-to-face interactions but continue to enjoy the blended courses – some virtual and some in person. Some communities struggle with finding time to host courses, with reductions in staffing.

Below is a breakdown of the total community funding spent by category within the Northern Health Region.



Success Story

Daajing Giids physicians on Haida Gwaii hosted HOUSE (Hands-On Ultrasound Education) in October 2022. The timing for this learning event was perfect as it was the same time as the raising of a memorial totem pole on Haida Gwaii.

The pole was the work of brothers Jaalen and Gwaai Edenshaw, in memory of their late chief, Gaahlaay (Watson Price). The pole was carved from a cedar tree and is 45 feet long. They had to float the pole to the site of an old Haida village, Xaayna, on Maude Island. It took about 200 people to raise the memorial pole using only people and ropes. The pole raising was followed by a potlatch hosted by the Kayahl 'laanas/Ts'aahl clans. The organizers, facilitators and participants attending HOUSE were invited and attended both the pole raising and the potlatch.

It was also the first time HOUSE was offered as a three-day course, with day one HOUSE EM (Emergency Medicine) and day 2 HOUSE OB (Obstetrics). The courses were attended by physicians, residents, nurses, midwives, and paramedics from both Daajing Giids and Masset. The working together of physicians and allied health workers, partnered with community, is the best formula for learning. The feedback for both days and the community events was very positive.

HOUSE facilitators and participants shared that they felt so honored and privileged to be able to witness and participate in this very special event while on Haida Gwaii. Learning both from HOUSE and from connecting with the community and the people will have lasting, powerful memories for all that attended.

Pole raising on Xaayna, Haida Gwaii



Resident at HOUSE course in Daajing Giids – literally “Hands-On” Ultrasound



Vancouver Island Health Region – Antoinette Picone, RCME Liaison

Regional Update

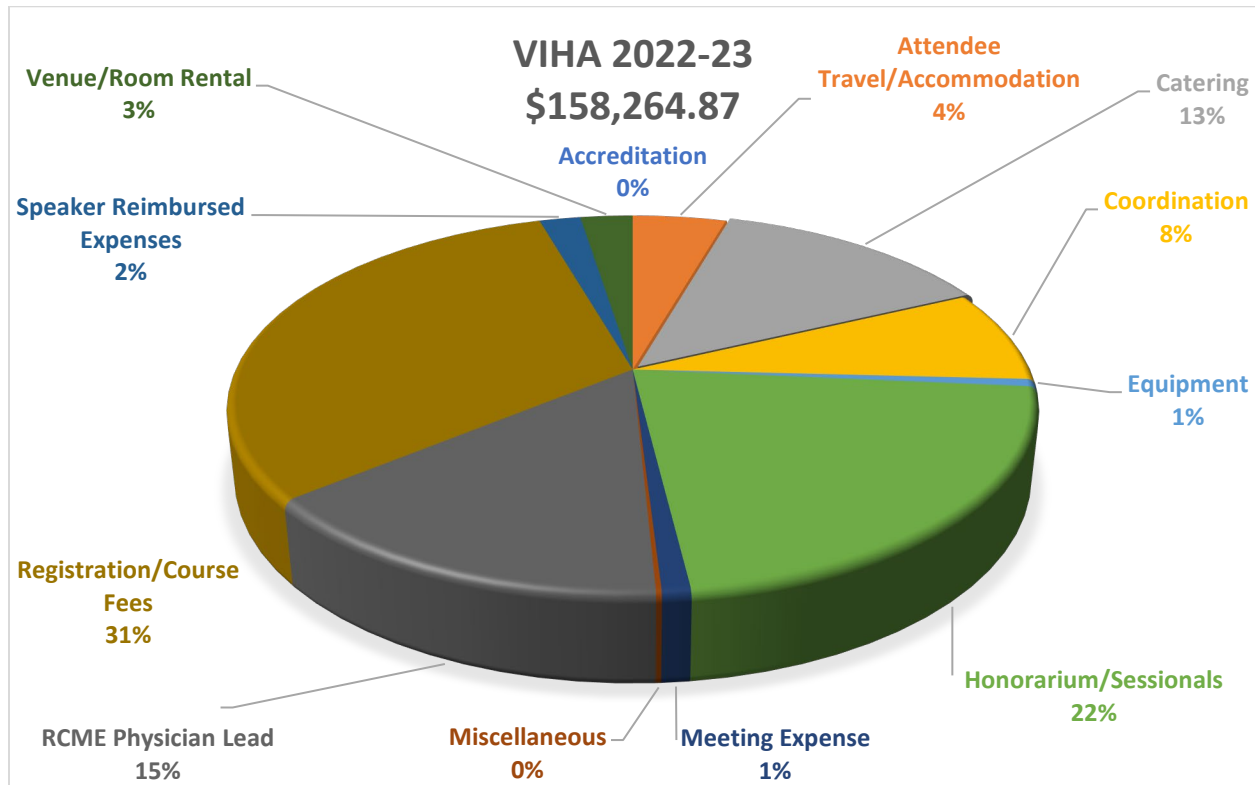
The RCME Liaison provided administrative support for the rural programs, filling in as interim Rural Programs Liaison for Q4. The majority of the work focused on completing the Q3 rural physician confirmation and finalizing NITAOP requests and exceptions for the 2023-34 plan.

During this time, the RCME Liaison continued to engage with RCME physician leads, local admin, and educational partners/stakeholders to facilitate and support ongoing education in community.

Engagement: There has been ongoing engagement to promote and discuss educational opportunities. The RCME Liaison connected with the new education manager for the Island Medical Program, Physician Education Program (IMP, PEP) to discuss education that is being developed to support CME in the region. They will connect on an ongoing basis to discuss education needs in the region and the development of curriculum to support these needs. Additionally, recurring meetings have been coordinated with PQI team members to discuss potential collaborations between the rural CME and quality improvement work.

Community of Practice: The RCME Liaison continues to be in frequent contact with the local community RCME Coordinators across the Island. These connections ensure local RCME staff feel supported to execute closer to home CME activities and increases communication channels with communities and other partners supporting education. The RCME Liaison regularly advises the local RCME coordinators on funding utilization in accordance with the guidelines and principles set out by the program. The RCME Liaison also advises RCME Physician Leads on the hiring of new local coordinators, outlining amount of funds that are available to support local admin and providing guidelines around their compensation. Salt Spring Island's lead recently reached out to discuss hiring a local RCME coordinator to support organization of local events.

Below is a breakdown of the total community funding spent by category within the Island Health Region.



Success Story

During the final 6 months of the 2022/23 fiscal year, we continued to see an increase in CME activity occurring on the Island.

Communities continued to run and plan large scale courses during the last quarter of 2022/23. Additionally, communities joined together to participate in these courses providing an opportunity for physicians in smaller communities to have access to this training while also providing an opportunity for them to network and team build while learning:

- Comprehensive Approach to Rural Emergencies (CARE) hosted by Gold River with Mt. Waddington physicians attending. CARE is a popular course delivered to interprofessional teams in rural communities. It is a complete hands-on course with participants rotating through skill stations and high-fidelity scenarios.
- The “hands-on” orthopedics course, CASTED-Plastics was hosted by Tofino-Ucluelet and included Mt. Waddington physicians. This is the second CASTED course where these multi-communities joined together for comprehensive orthopedic skills training and clinical pearls.
- Hands-On Ultrasound Education Obstetrics (HOUSE-OB) was coordinated by the Campbell River Divisions of Family Practice and participants from Comox and Mt. Waddington were invited to

attend. This education supports rural health care practitioners to learn alongside rural physicians experienced in point-of-care ultrasound.

Beyond the above-noted courses, a variety of CME topics were delivered across the region to support continuing professional development of our rural physicians. These topics included ADHD, dermatology, addiction medicine, post-MI care, pressure injuries, pacemaker, end-of-life care, ACLS, CBT skills, infertility, simulation sessions, wellness, optimizing communication, local rounds and an EM retreat.

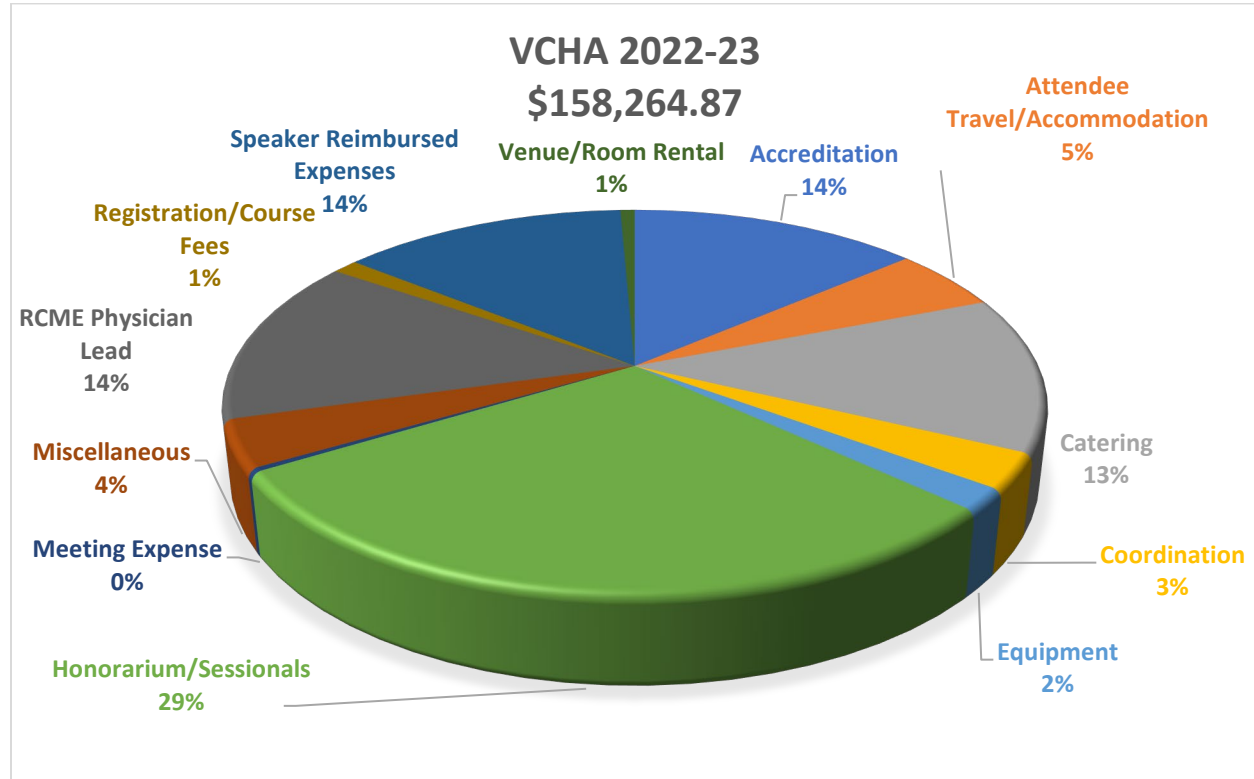
Vancouver Coastal Region - Eva Jackson, Rural Programs' Liaison

Regional Update

The Rural Programs' Liaison has successfully implemented all 9 eligible RSA communities in the Vancouver Coastal Health Region. A total of 8 communities were engaged in arranging education during the 2022/23 fiscal year and overall, there was a 22% increase in utilization compared to the previous fiscal year utilization. This increase in utilization is anticipated to be higher as the amount does not include qathet's (Powell River) utilization from quarter 3 and 4. The liaison is working with the qathet Division of Family Practice to obtain the quarterly reports to include in the total 2022/23 utilization.

Throughout 2022/23, physicians across the coastal region organized and participated in a variety of educational activities including the CARE course, CME on the Run, online medical subscriptions, simulation rounds, and morbidity and mortality rounds. The communities of Whistler and Squamish hosted a Sea to Sky Education Retreat with the local physicians that strengthened team building and wellness, as well as presentations significant to their community healthcare practice. The Sea to Sky Division of Family Practice was instrumental in organizing this multi-community event and was able to utilize funds from the RCME Community Program to support this successful in person conference.

Below is a breakdown of the total community funding spent by category within the Vancouver Coastal Health Region.



Success Story

Squamish had an eventful year participating in education and organized a variety of collective in person learning activities. As mentioned above, the Sea to Sky Educational Retreat took place in Whistler and brought together physicians from Squamish and Whistler to participate in a three-day conference in November 2022. Squamish also hosted a Trauma Day run by the Vancouver General Hospital Trauma Team in February 2023. The Rural Trauma Team Developmental Course (RTTDC) included mixed-profession teams to provide care in simulated scenarios, as well as covered ideal communication concepts, team-building discussions, and triage or mass casualty scenarios. Squamish is actively planning education for the upcoming 2023/24 fiscal year, which includes 4 half-day ultrasound course sessions and a casting workshop. The Whistler Health Care Centre casting technicians will come to Squamish to teach tips and tricks for extremity casting to ER physicians and residents. Additionally, Squamish is hosting an Infectious Disease talk with Dr. Torchinsky and ASPIRES pharmacist to go over management of common infectious disease presentations seen in the ED such as cellulitis, UTIs, pharyngitis, pneumonia, etc., with a focus on appropriate antibiotic stewardship. Squamish is one of the largest rural communities in the coastal region and it is exciting to see the momentum grow with facilitating an assortment of education for the local physicians.

APPENDIX B

Rural Program Liaison NITAOP Updates

Interior Health Region - Angela Hennig, Rural Programs' Liaison

The Rural Programs' Liaison has continued to take on additional program responsibilities within the Health Authority, seeing continuous improvement the processes throughout the year.

Northern Isolation and Travel Assistance Outreach Program: The Rural Programs' Liaison has assumed full responsibility for the NITAOP process. The annual planning process has been successfully completed and submitted to the Ministry of Health before the deadline. Approval for NITAOP visits has been granted by the JSC, and confirmation letters for NITAOP visits have been sent out to all physicians providing visits and program leads on March 31, 2023.

Physician Confirmations: In addition, the Rural Programs Liaison for IHA has taken control of the quarterly Rural Retention Programs and the Individual RCME program. Collaborating closely with the Ministry of Health on these programs has proven to be highly beneficial, ensuring that all rural physicians receive the benefits they are entitled to. Following the third quarter, annual confirmation letters for 2022 have been send out to all rural physicians. In 2021, the completed letters were returned by 88% of physicians, while we received 95% for 2022. All letters have been collected, and data has been preserved. The information collected has been transmitted to the Ministry of Health prior to their deadline to enable them to include it in the point's assessment.

Supervisors of Provisionally Licensed Physicians: The Rural Programs Liaison has taken over the administration of the Supervisor of Provisionally Licensed Physicians program for Interior Health. Prior to taking over the program, the Health Authority was four quarters behind. The program is now being administered on schedule.

Northern Health Region – Charlene Hazelton, Rural Programs’ Liaison

In this role Charlene has been focusing on the annual NITAOP planning and administration and working with the Northern Health Recruitment team on retention strategies and new physician outreach processes. Along with Recruitment, she has been working closely with the Medical Affairs Coordinators, the RCME team, and Physician Compensation. These relationships assist Charlene to navigate the many evolving facets of the Rural Programs’ portfolio.

RCME Community Funding Administration: Working closely with the RCME Liaison and the RCME coordinator, the RPL helps with the program invoicing and budgeting processes. Charlene processes all invoices in the Electronic Rural Programs system (eRP) developed by Northern Health. This is in partnership with the physician compensation and accounts payable. She troubleshoots and reconciles accounts. Charlene also assists the RCME Liaison prepare quarterly and new fiscal year budgets, theming of expenses, and creation and data for the annual report.

The team has been working on streamlining this process over the last 6 months. There are still steps to clarify and the team, including the RCME Administrative Assistant and Physician Compensation, will work on the process until all roles and responsibilities are clearly defined.

Medical Staff Onboarding: Northern Health Medical Staff Recruitment and Charlene are working to create an onboarding and retention process. The process will help new physicians to identify a point person for questions and provide information pertinent to their practice in Northern Health. Regular checks initiated by informational letters at 3, 6, 9, 12 and 18 month intervals will be sent by the RPL offering resources as well as an invitation for a touch base meeting. The letters are still evolving as new feedback is given by different parties to make sure they are valuable to rural physicians.

Through this project Charlene has made several important connections. She has had meetings the Prince George Medical Staff Association, Doctors of BC Practice Support Coaches, Doctors of BC Engagement Partners, and UBC CPD.

Northern Isolation and Travel Assistance Outreach Program: The NITAOP annual planning process has been a significant part of Charlene’s role since starting in July 2022. Experiencing the process from beginning to end provided a valuable learning opportunity and knowledge. Challenges were identified to be improved upon for the coming fiscal year. Charlene will be reviewing, amending, and creating resources for physicians and program managers so they have a quick reference for their roles in the NITAOP program. Planning will begin earlier in the year. Amendments are hoped to realize improvements to the overall process that will create a smooth process where the plan meets the needs of the communities in the North and enables physicians to provide care seamlessly, in any rural community, throughout the province. Connections have been made throughout the region and the province, and there is optimism that the NITAOP program will only improve as time goes on.

Rural Emergency Enhancement Fund: Charlene has been introduced to the REEF program. A flow chart has been created that outlines the current state within Northern Health. She is working with the Medical Affairs Coordinators to see where her role as the RPL can streamline the process for all stakeholders

both internal and external to the organization. Currently, the RPL is collecting REEF applications to be submitted for the coming fiscal year.

Rural Physician Connections: Work with the new Medical Affairs Communications Lead to send out regular communications to physicians regarding Rural Programs will begin within the next quarter.

The Jasper Spring Retreat was attended on behalf of RCCbc and planning for more site visits within the region is underway. Connecting with the Medical Affairs Coordinators has begun for site visits within their respective HSDA's to meet physicians and staff and provide information regarding Rural Programs.

Vancouver Island Health Region – Therese O’Brien & Antoinette Picone, Rural Programs’ Liaison

The RCME Liaison provided oversight of the physician confirmation process and finalizing NITAOP exceptions following the annual plan that had been submitted by the Rural Programs Liaison in November 2022.

Physician Confirmation: For a second year, the annual physician confirmation has been administered to Island Health rural physicians as an online survey questionnaire. The online survey has contributed to an improved response rate and physicians have provided feedback that they appreciate the ease of filling out a survey versus completing a PDF document. In order to continue to improve the process and the accuracy of the information received, review of the questionnaire and physician response data is ongoing. The Rural Program and RCME Liaisons will continue to collaborate on this process in the year ahead.

NITAOP: Island Health’s 2023-24 NITAOP plan was reviewed at the January JSC meeting. Prior to the review, 4 exceptions required further information and 3 requests required exception submissions in order to be approved. The RCME Liaison facilitated the submission of these 7 requests, connecting with Island Health community medical leaders as well as RCCbc rural program leads to identify the additional information required.

Improvements to process for NITAOP planning and utilization are ongoing. Future opportunities include possible expansion of specialist visits to include RCME offerings, confirming recruitment of physicians identified as providing visits, and providing clarity on community contacts to support physicians in scheduling time and patients.

FNHA Engagement: In addition to supporting the essential functions as noted above, the Liaison was involved in meetings around helicopter services to remote Indigenous communities and how these services could best be supported through NITAOP.

Vancouver Coastal Region - Eva Jackson, Rural Programs' Liaison

During the 2022/23 fiscal year, the Rural Programs' Liaison has provided regional management for the majority of the Rural Practice Programs in the coastal region. These programs include the Rural Retention Program (RRP), Recruitment Incentive Fund (RIF), Recruitment Contingency Fund (RCF), Isolation Allowance Fund (IAF), Rural Emergency Enhancement Fund (REEF), Supervisors of Provisionally Licensed Physicians (SPLP), RCME Individual Funds, and the RCME Community Program. The Northern and Isolation Travel Assistance Outreach Program (NITAOP) is the latest addition to the liaison's portfolio.

Northern Isolation and Travel Assistance Outreach Program: The NITAOP annual planning process was effectively executed by the liaison and the VCH 2023/24 funding requests and exceptions were approved by the JSC. At the start of the 2023/24 fiscal year, NITAOP confirmation letters were issued to all the visiting specialists and program leads. Overall, there has been an increase in awareness and communication around NITAOP and the visiting specialists are more engaged in providing input on what the community needs are. The liaison has been able to facilitate conversations between the Ministry of Health, the communities, and the visiting specialists to ensure the program is operating proficiently. With a focus on increased communication and on more comprehensive annual planning, VCH anticipates to see an improvement in the utilization of NITAOP during the 2023/24 fiscal year.

Physician Confirmation: Since the Rural Programs' Liaison role has been established, the RRP physician count confirmation process has been a large piece of work that has steadily seen improvements over the years. The liaison issued the annual confirmation letters to all VCH rural physicians and overall there was a 96% response rate during 2022/23. The improved accuracy of the physician count ensures the rural physicians receive the RRP flat fees and other eligible benefits, and that VCH has the most current information on the rural physician's practice. Additionally, the Ministry of Health depends on accurate physician count numbers from the Health Authorities to properly calculate the annual point's assessment.

These continual improvements around the management and administration of the Rural Practice Programs is largely contributed to the collaborative partnerships between VCH, the Rural Coordination Centre of BC, the Ministry of Health, and the JSC.