From:	Howard, Leah K HLTH:EX
To:	Howard, Leah K HLTH:EX
Subject:	RE: NEW - FOI 2015-51826 - Oceanside Health Centre FW: Island Health IPCC Quarterly Report - 2014-Q2
Date:	Friday, July 10, 2015 2:56:31 PM

From: Smith, Kelly A. - IPCC [mailto:Kelly.A.Smith@viha.ca]
Sent: Thursday, January 15, 2015 3:05 PM
To: Bennett, Christopher HLTH:EX; Ooms, Shana HLTH:EX
Cc: XT:Forsyth, Ryan HLTH:IN
Subject: FW: Island Health IPCC Quarterly Report - 2014-Q2

Dear Shana and Chris,

Please find attached the Island Health IPCC Reports for the period October 1 to December 31, 2014.

Please let me know if you have any questions.

Kind regards,

Kelly

From: Bennett, Christopher HLTH:EX [mailto:Christopher.Bennett@gov.bc.ca]
Sent: Monday, October 20, 2014 12:36 PM
To: Smith, Kelly A. - IPCC
Subject: RE: Island Health IPCC Quarterly Report - 2014-Q2

No problem at all, I figured that was case. Thought I would double check just to make sure. Hope you're feeling better now!

Thanks

Chris Bennett
Policy Analyst
Integrated Primary and Community Care
Ministry of Health
Christopher.Bennett@gov.bc.ca
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QUARTERLY REPORT - INTEGRATED PRIMARY AND COMMUNITY CARE

Community Based Service Delivery Area: Oceanside

Communities in CBSDA: LHA 69, Qualicum

(USE ONE PAGE PER CBSDA – Copy and paste this whole page if you have more CBSDAs)

1	**Total population of CBSDA**	47,281
2	Target population(s)	OHC: Patients with chronic conditions, individuals managing mental health and substance use conditions, the frail elderly.
3	# of people in the target population **NOTE: TARGET POPULATIONS ARE GENERAL ESTIMATES**	OHC: 23,118
4	# of patients enrolled in new or redesigned services	Primary Care: 1412 plus Snaw-Naw-As First Nations residents ~200 = ~1612 clients Integrated Community Care Team: 3238 Telehealth: 479 (fiscal year to date)
5	Division (In place, in progress, not started)	In Place
6	# family physicians engaged	Primary Care: 1 Integrated Health Network: 9
7	Status of CSC	In Place
8	Collaborative Service Committee priority issues	a) Palliative/End of life b) Oceanside Health services model for Integrated Community care Team a. Palliative care pathway b. Mental health and substance use walk in service c. Pharmacy integration d. Familiar faces c) GP for Me – Proposal presented to/ approved by GPSC in December. Initiatives include: • advocating and promoting optimal GP fee codes • advancing team-based care • MOA network • Attachment Hotline • Floating after-hours walk-in clinic model • Meaningful collaboration with Island Health d) JAC – Joint Advisory Committee e) Recruitment and Retention of Physicians
9	Describe planned new or redesigned services (Key integration activities that are being prototyped)	General progress continues at OHC. • Repatriating medical day care clients from surrounding sites to OHC support clinic • Early stages of planning primary care / s.13,s.17 s.13,s.17

		s.13,s.17
10	Stage of planning & implementation	Operational/Ongoing implementation
11	Care planning – coordinated / shared care plans	Care planning at OHC being facilitated by: • New EMR functionality being trialled in primary care • Daily huddles regarding clients being seen that day in primary care • Integrated Community Care Team (ICCT): A single multidisciplinary client care plan designed and its implementation has started – slow to integrate into practice due to hybrid system (electronic / paper) • Daily huddles and ad hoc case conferences - these are attended by the ICCT, Urgent care, support clinic, and primary care when appropriate
	COMMENTS	Community Health Network: continues to develop.

QUARTERLY REPORT - INTEGRATED PRIMARY AND COMMUNITY CARE

Community Based Service Delivery Area: Nanaimo

Communities in CBSDA: LHA 68 Nanaimo

1	**Total population of CBSDA**	**106,808**
2	Target population(s)	Home First: Frail/Elderly; Patients designated "Alternate Level of Care" (ALC) IICM: Persons with complex conditions, experiencing challenges with self-management, resulting in high # of ED visits and/or hospital admissions Telehome: Heart failure patients living in community IHN: Two target populations: 1. Age 40+ with >= 2 co-morbidities 2. Age 19+ with Acute Hepatitis plus >= 1 chronic condition
3	# of people in the target population **NOTE: TARGET POPULATIONS ARE GENERAL ESTIMATES**	Home First: 7,704 (HF target population includes Nanaimo and Oceanside) IICM: 960 (IICM Target Population includes Nanaimo and Oceanside) Telehome: 200* (Target population includes Oceanside and Nanaimo) * THM Reach % Includes Oceanside and Nanaimo patients receiving services to coincide with blended target population. IHN: 8,051
4	# of patients enrolled in new or redesigned services	Home First: All years 363; October – December 2014 - 39 IICM: All years 162; October – December - 17 Telehome: Nanaimo: 56 (YTD) 137 (Cumulative since launch Dec 2012) Oceanside: 25 (YTD) 77 (Cumulative since launch Feb 2013) IHN: 2,437 patients enrolled and 2,194 actively receiving services
5	Division (In place, in progress, not started)	In place
6	# family physicians engaged	Home First: 2 new physicians added this Quarter for a total of 111 all years IICM: 4 new physicians added this Quarter for a total of 68 all years Telehome : Nanaimo: 43 (YTD), 78 (Cumulative since Dec 2012) Oceanside: 16 (YTD), 31 (Cumulative since Feb 2013) IHN: 46
7	Status of CSC	In place
8	Collaborative Service Committee priority issues	Nanaimo CSC priority issues: • GP for Me – Proposal successfully presented to GPSC in November. Five s.13,s.17

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