



Thompson Region Division of Family Practice

A GPSC initiative

Community Visioning for Primary Healthcare Engagement Summary

From October 9 – November 15, 2018, the Thompson Region Division of Family Practice conducted engagement activities in Logan Lake, Kamloops, Barriere, Sun Peaks, Chase and Scotch Creek. Throughout that time, we conducted a survey as well as patient interviews, focus groups, workshops and public events. Between the survey and in-person engagement we spoke with over 750 people.

The purpose of the engagement was to develop a region-wide shared vision for primary healthcare. The overall goal was to get residents' feedback on their primary healthcare experience and opportunities they see for the future. Specifically, the Division wanted to gain a broad understanding of residents' needs, values and preferences surrounding the delivery of primary healthcare in order to help inform the Division's strategic planning and work moving forward.

The information gathered through the survey and in-person feedback was largely based on the General Practice Services Committee's (GPSC) Patient Medical Home (PMH) Practice Characteristics Attributes. The PMH is the physician's practice and the practice characteristics include 12 attributes that depict the ideal characteristics for patient care through their PMH, with the overall goal being whole-person care. See the Patient Medical Home in BC attached or visit <http://www.gpscbc.ca/sites/default/files/PMH%20graphic%20%2020160920.pdf>.

Key Survey Findings

Overall the survey saw responses from a broad and diverse range of individuals in the Thompson communities, with **444** individuals participating in the survey. While there was some over-representation in females and underrepresentation in individuals over the age of 75, feedback was received from a range of age groups, both from individuals that identify as Aboriginal, as well as those that did not. There was also significant participation from both males and females.

85% of individuals reported being attached to a primary care provider. When patients were asked about the barriers they had encountered while receiving primary healthcare in the Thompson Region, Family Doctor availability (**60%**), wait times for procedures (**58%**), and specialist availability (**49%**) were the most common significant barriers.

The remaining questions, as shown in the table below, focused on obtaining a patient perspective regarding several of the PMH Practice Characteristics Attributes.



Table: Key findings by question and corresponding PMH

| Attribute | | |
|---|--|---|
| PMH Attribute | Corresponding Question | Key Findings |
| Service Attribute Contact (Timely Access): Same day scheduling | 7. How important should it be for family practices and clinics to have time available in their days to see patients with urgent medical conditions? | The majority (86%) of respondents responded that it is very important for family practices and clinics to have time available in their days to see patients with urgent medical conditions? |
| Service Attribute Contact (Timely Access), First contact | 8. Please select the type of interaction that you would be okay with when trying to reach family practice clinics. | The majority (94%) of individuals report it is somewhat or very important to communicate with the office within the same day of contacting the office, with less than half (43%) of respondents reporting very important. |
| Service Attribute Contact (Timely Access), Extended hours access & Out-of-hours access | 9. How satisfied would you be to receive the following information when you call a family practice clinic outside of regular business hours, for an urgent health concern? | The majority of respondents (86%) would be somewhat or very satisfied with being redirected to an alternate family doctor in the community, if the doctor would be able to see them in their clinic and update their patient file. |
| From Service Attribute Comprehensive, Visits | 10. How important is it to be able to access the following information and resources through a family practice clinic | Most respondents moderately or very much want information on proactively managing current health conditions (96%) and informational resources related to cancer and other disease screening (96%). |
| From Service Attribute IT enabled, Patient access to EMR & also Virtual care | 11. How much of a priority should family practices and clinics put over the next several years towards various technologies? | Two common areas where respondents indicated that priorities should focus on is having systems for patients to make online requests to have their prescriptions filled (49%) and having systems for patients to review their medical records and the ability to have appointments with patients over the phone (39%). |
| From Service Attribute patient centered, whole- person care—informed decision making | 12. To what extent do you feel you are informed and included in your healthcare plans by your provider? | Respondents reported often or always feeling informed and included in their healthcare plans by their provider 54% of the time. |
| | 13. How important is it for you to be informed and included in your healthcare plans by your provider? | Almost all respondents feel that it is very important to be informed and included in their healthcare plans with their provider although Non-aboriginals were slightly more likely (85%) to report this than Aboriginals (75%). |
| Service Attribute patient centered, whole-person care—Patient experience data | 14. How important is it for family practices and clinics to regularly collect and review information on the experience their patients have had at their clinics? | Most respondents (86%) felt it was moderately or very important for clinics and practices to regularly collect and review information on the experience their patients have had at their clinics. |

Key Public Engagement Findings



Between the public events, workshops, focus groups and patient interviews, we gathered feedback from over 300 people. As with the survey, the overarching questions we asked participants were based on the PMH Characteristic Attributes.

The following outlines the overarching questions and the common themes:

1. What word(s) describes your ideal primary healthcare team?
 - a. *Patients want teams that are comprehensive, coordinated and share information.*
2. What word(s) describes your role on that ideal primary healthcare team?
 - a. *Patients see themselves being an equal and accountable partner in the relationships they have with their primary healthcare providers, and as an advocate for their health.*
3. What word(s) describes your ideal primary healthcare experience?
 - a. *The ideal primary healthcare team is comprehensive, proactive, accessible and equitable, with a focus on creating a working relationship between the patient, the PMH and other required healthcare providers on the team.*

Participants were also asked what has worked well and what has been challenging for them with regards to their primary healthcare experience in the last three years. While much of this feedback was community specific, many people had a deep appreciation for their physician. On the other hand, people expressed challenges with access, including at their doctor's office and to specialized services, as well as navigating the healthcare system in a coordinated and efficient manner.

Lastly, we asked, what does the future of primary healthcare look like? The feedback we gathered from this question was diverse and included ideas on education, access, the cost of healthcare, new models of care, and required services. There was a large focus on the difficulty and need to be able to have better access to allied health and mental health, and participants indicated the need for more nurse practitioners.

Beyond the specific questions, there was an underlying theme that communities and physicians' clinics could work together to enhance primary healthcare. Participants, especially those in rural communities, conveyed that the health clinic is an extension of their community. One participant conveyed it was nice to see their doctor taking care of the community, but also part of the community, and that their clinic was like part of their family. Another participant explained that clinics and communities could work together on healthcare, especially on prevention. Participants from various local health committees also identified the need for community to be part of the healthcare solution. One committee member indicated their community and clinic are working together to find a solution to their doctor shortage, and another stated their local health committee works closely with the community's clinic on various health initiatives and funding needs. Overall people were interested in learning about the Division and its work, and appreciative that physicians are interested to hear from communities.

For community specific feedback see *Appendix A*.

DRAFT Community Vision

*Thompson Region communities and residents are **partners** who have **collaborative relationships** with their primary care teams.*



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*We recognize our **collective responsibility** to advocate
and strive for **the delivery of accessible, equitable and proactive comprehensive** primary care.*



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Appendix A

Community Specific Feedback – Barriere

Four patient interviews were conducted in Barriere on October 4, 2018. The Barriere clinic was provided guidelines for selecting/inviting patients to participate with the intention of interviewing patients from various ages and demographics.

Overall, patient feedback was consistent with the main themes outlined above and patients are happy with the delivery of primary healthcare in Barriere. One theme that was prevalent in Barriere was the deep appreciation for the staff at the clinic. Patients expressed how helpful the staff is, how well they work together as a team and that they trusted the staff to have their best interest in mind.

Patients expressed a desire to have access to allied health in Barriere.