



## BC PATIENT SAFETY & QUALITY COUNCIL

Working Together. Accelerating Improvement.

### ***COVID-19 Through a Quality Lens***

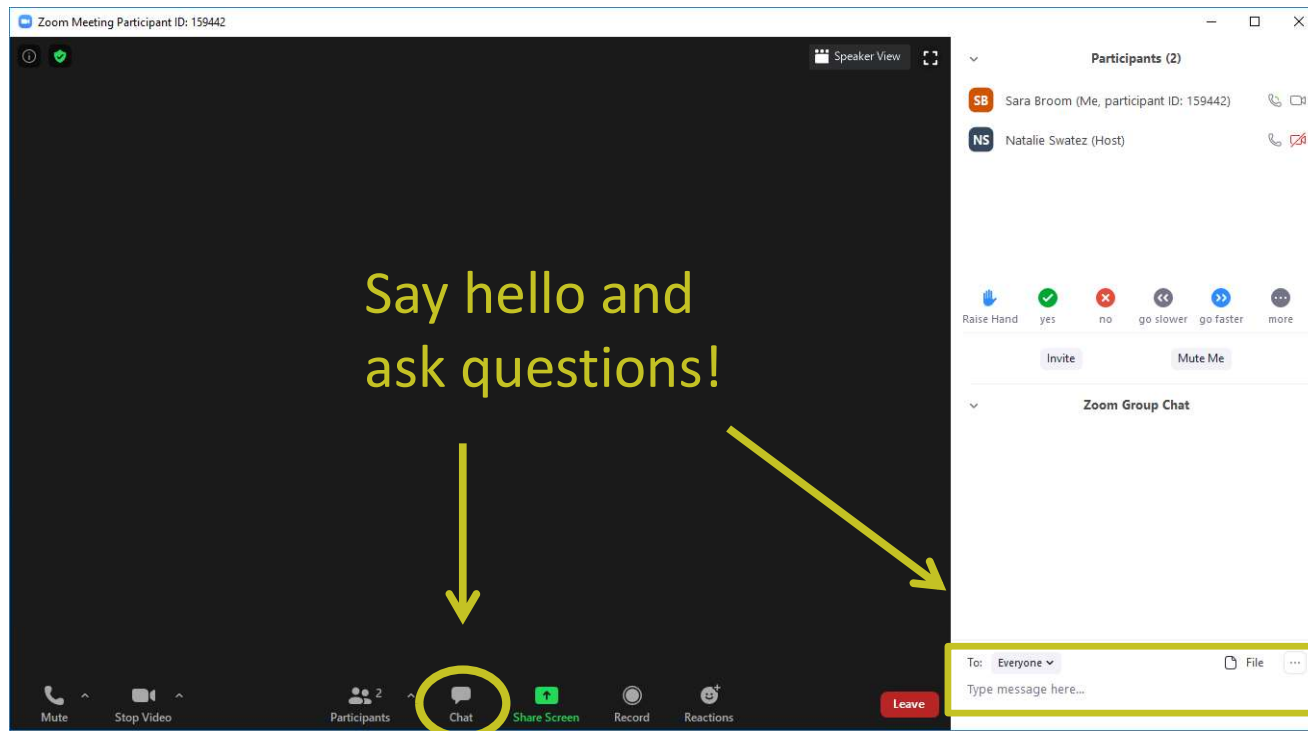
**Collaboration of Health and Community Resources  
during the Pandemic and Opioid Crisis in the  
Comox Valley**



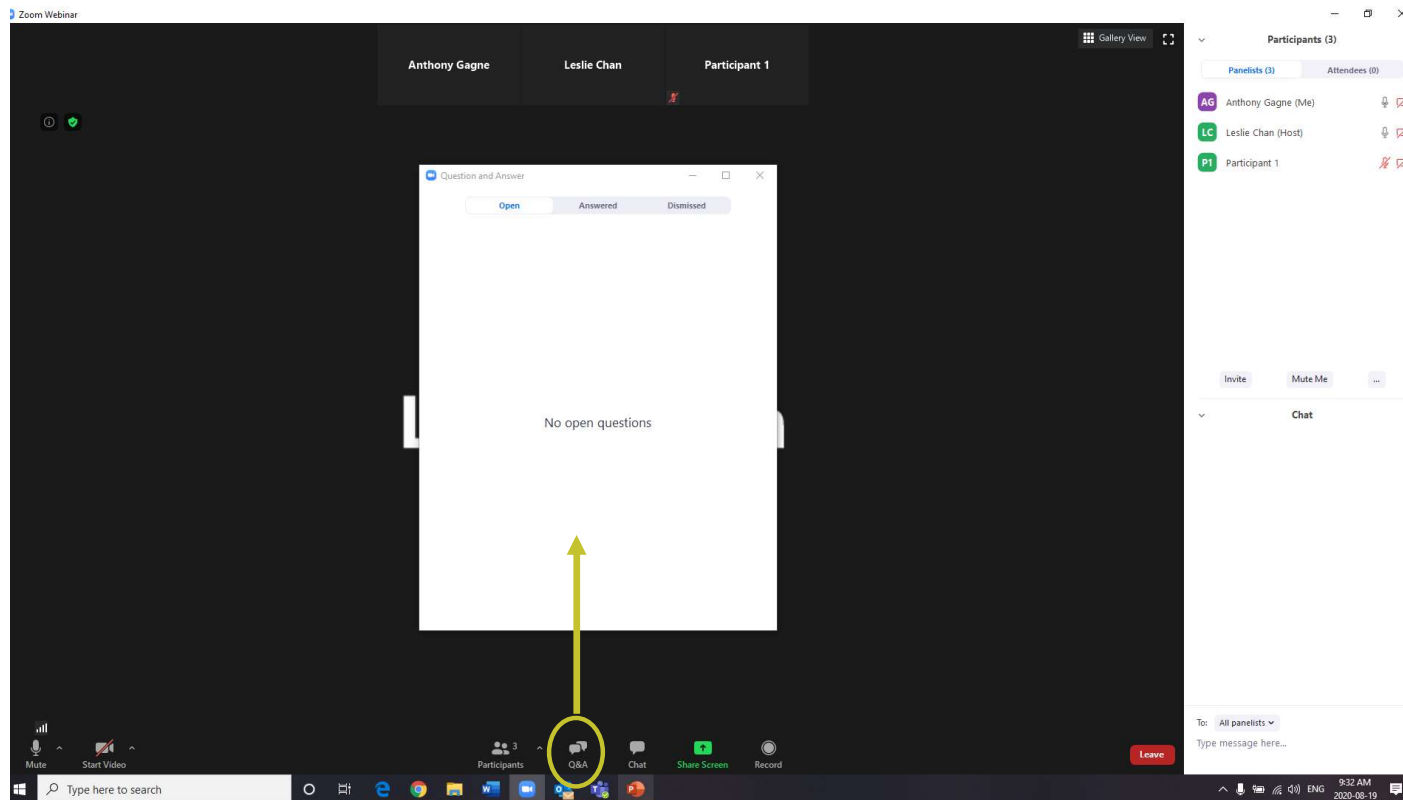
# This Session is Being Recorded

*Personal information in this initiative is collected under s.26(c) and 26(d)(ii) of the Freedom of Information and Protection of Privacy Act. This information session is being recorded and will be used for collecting feedback only. We ask that you refrain from identifying patients, specific team members or offering any other personal information. If you have further questions, please contact the BCPSQC at 604 668 8210 or [learning@bcpsqc.ca](mailto:learning@bcpsqc.ca).*

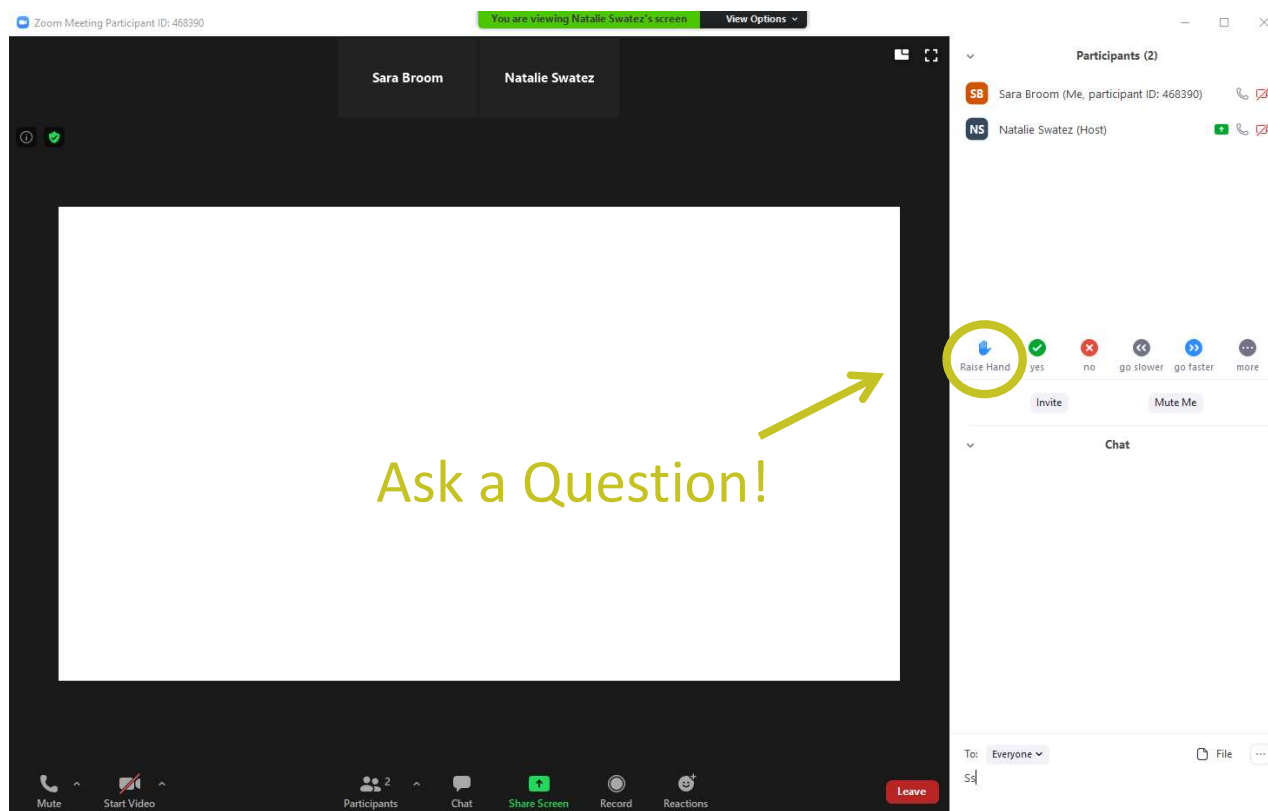
# Chat Box!



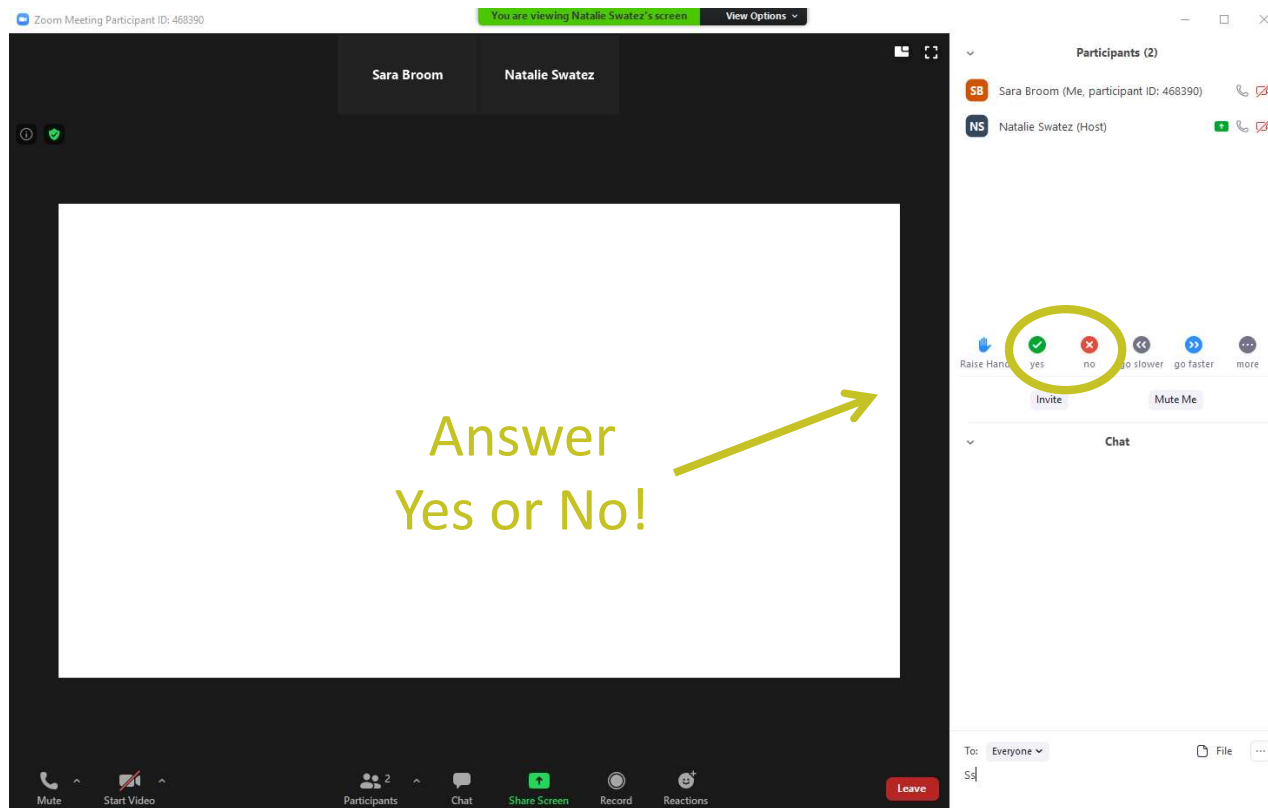
# Q&A Box!



# Raise Your Hand!



# Answer Yes or No!



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## Resource Slides



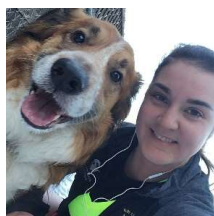
# Discussion Circle Participants



Karen Berezon, Project  
Manager, Island Health



Andrea Cupelli, Coordinator,  
Coalition to End Homelessness



Tanille Johnston  
Patient Health Care Navigator  
Kwakiutl District Council Health



Dr. Eva Hemmerich  
Family Physician, Health  
Connection Clinic  
COVID Outreach Team



Jenny Nijhoff  
RN, Clinical Coordinator  
Public Health



Heather Ney  
Executive Director  
Comox Valley Transition Society



Sabina Acheson RN, BScN  
Care-a-van Coordinator  
Comox Bay Care Society



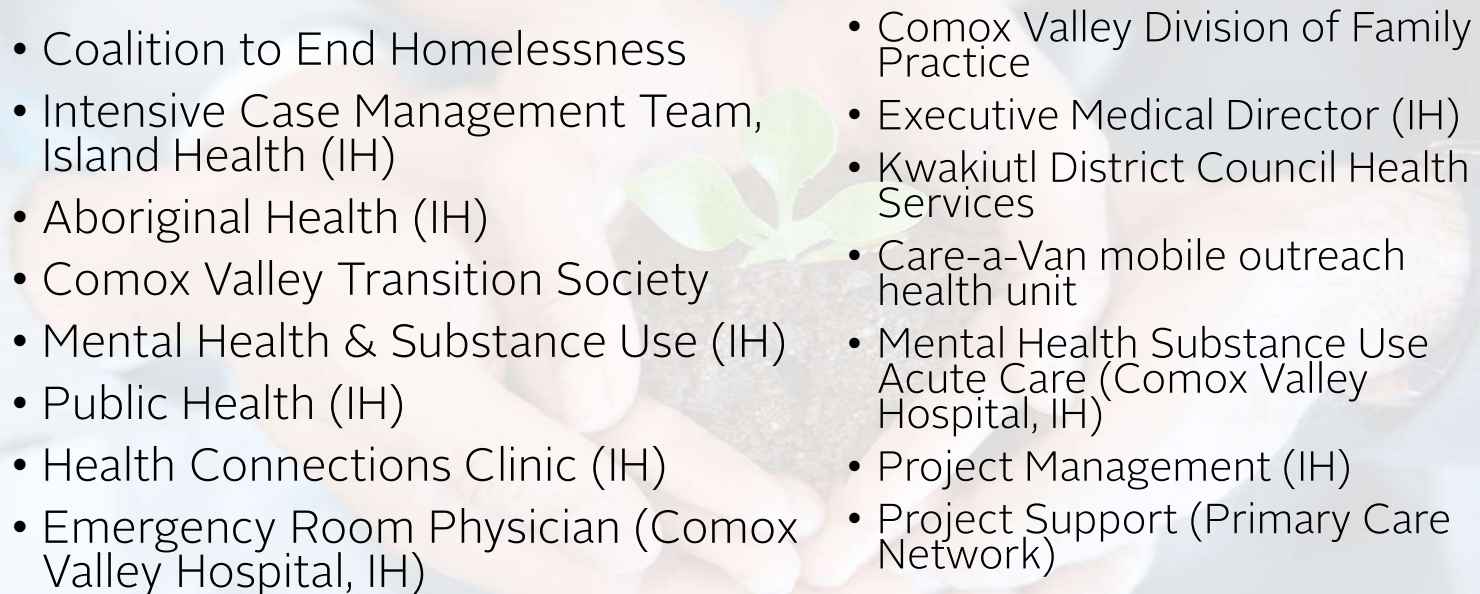
Dr. Laura Matemisz  
Emergency Room Physician  
Comox Valley Hospital



Maureen Clarke  
Change Lead  
Comox Valley PCN



# Inter-Agency Interprofessional Team

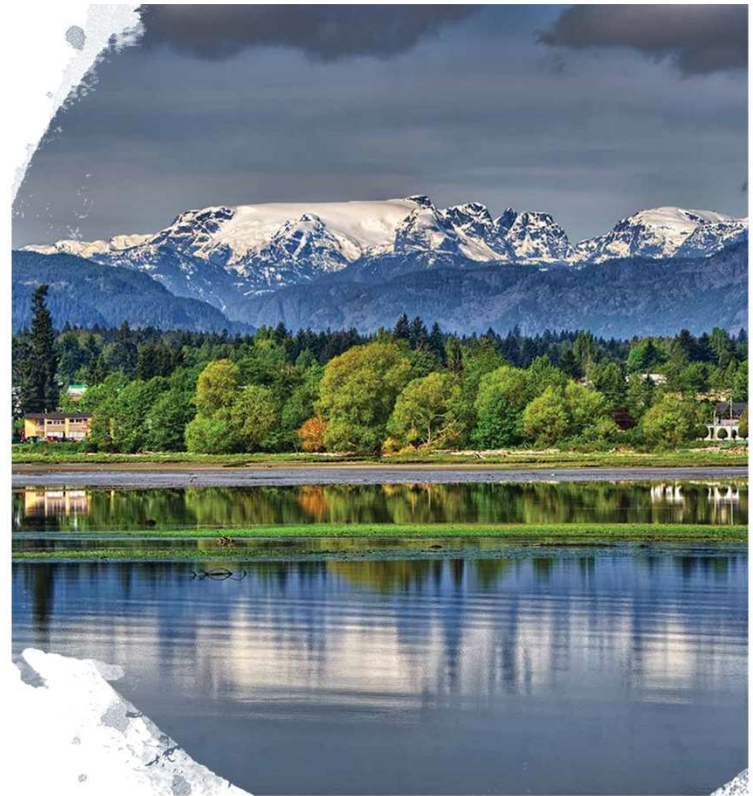
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- Coalition to End Homelessness
  - Intensive Case Management Team, Island Health (IH)
  - Aboriginal Health (IH)
  - Comox Valley Transition Society
  - Mental Health & Substance Use (IH)
  - Public Health (IH)
  - Health Connections Clinic (IH)
  - Emergency Room Physician (Comox Valley Hospital, IH)
  - Comox Valley Division of Family Practice
  - Executive Medical Director (IH)
  - Kwakiutl District Council Health Services
  - Care-a-Van mobile outreach health unit
  - Mental Health Substance Use Acute Care (Comox Valley Hospital, IH)
  - Project Management (IH)
  - Project Support (Primary Care Network)

# Aim

To support the good work (already under way) of our community partners, with enhanced primary care services directed at those individuals who are without housing who require testing, education and potentially self-isolation due to Covid-19.

*Our working group aim evolved over time.....*

To enhance the good work (already under way) of our community partners by focusing on individuals **without** housing, **providing** rapid access to primary care, harm reduction, safe supply, addiction treatment, Covid-19 testing with support and education regarding risk mitigation and self isolation.



# Discussion





## Improvements to Care & Process

- Creation of new interprofessional, inter-agency relationships
- Development of **workflow** -hospital to community
- **Clarification** of: access to testing, access to care, access to housing, access to primary care if self-isolating
- Developed **communication to support access to care** for unattached patients
- Funding for Physicians for addictions medicine treatment for support **physician outreach 7 days a week**
- Funding for Physicians OAT and safe supply through physician outreach
- **Integrated MHSU and Public Health** to support a mobile testing unit
- Implementation of **team-based care**



## Improvements to Care & Process

- Housing is Healthcare – from 9 to 42 motel rooms
- Worked with Kwakiutl District Council and Public Health to ensure staff were **trained on Covid-19 testing** protocols and process
- Compiled services and support **resource** for vulnerable populations to support front line workers, anyone providing patient care
- **Widespread communication** of resource list throughout the system
- Weekly (then bi-weekly) to ensure communication and integration of ongoing supports
- Relationship building, sharing new information on current needs of the population
- **Bias towards collective action** based on emerging needs



# Our Success

- Working group support (Project Management & Leadership)
- Team orientation – shared values
- Shared purpose in response to the pandemic
- Dedication to the population we were serving
- Deep engagement and commitment to the group
- Action-orientation – sharing and doing the work
- Transparency, trust and honest conversations
- Financial supports – sessions for physician participants
- Despite varied siloed funding sources and processes - we were able to move ahead and meet patient needs early on in the pandemic



# Outcomes

- From what we know the population we serve has not had a positive Covid-19 test
- Redirection of human resource capacity created by the pandemic
- Collaboration/relationship building led to more coordinated services and support for unhoused people
- Clearer understanding of each other's roles, services and funding processes
- A step towards interagency interprofessional team-based care involving support from different sectors
- More consistent support for the unhoused populations
- Many hands made light work – coming together just made this easier
- A renewed understanding of the population led to a decrease in stigma
- Increase in education to our population related to Covid-19
- Improved connection to primary care

# Reflections & Observations

- With housing, food and medical supports in place, degree of drug use continues to escalate
- Housing solutions are *temporary* in our community
- There is still a huge need for a variety of supportive housing across the continuum
- Operating supportive housing without the full compliment of support workers is not sustainable





## Contact

Maureen Clarke  
Leader, Health System Improvement  
Comox Valley Primary Care Network  
[mclarke@bcpsqc.ca](mailto:mclarke@bcpsqc.ca)

Karen Berezon  
Project Manager  
Island Health  
[Karen.Berezon@viha.ca](mailto:Karen.Berezon@viha.ca)

*If you want to go fast, go alone. If  
you want to go far, go together.*  
- African proverb

*Image Credit Lisa Boivin*