

UBC RURAL CONTINUING PROFESSIONAL DEVELOPMENT PROGRAM



ANNUAL REPORT 2018-2019

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I. RCPD EXECUTIVE SUMMARY AND VISION

The [UBC Rural Continuing Professional Development Program](#) (RCPD), affiliated with the [UBC Division of Continuing Professional Development](#) (UBC CPD), is committed to supporting the learning needs of rural physicians and other rural health care professionals. Supported by the [Rural Coordination Centre of BC](#) (RCCbc) and the Joint Standing Committee on Rural Issues (JSC), the program has been operating since 2008.

The RCPD Program has developed rurally-specific continuing medical education (CME) programs in response to the identified needs of rural physicians. All educational offerings model values of excellence in CME – they are interprofessional, engaging, interactive, practical, and of relevance to rural physicians. We aim to tailor existing programming to support unique community and physician needs, and improve access to CPD programs for rural practitioners using a ‘closer-to-home’ delivery method.

The RCPD Program is led by Medical Director, Dr. Ray Markham, Associate Medical Directors, Drs. Nicole Ebert and Dana Hubler, RCPD Project Manager, Dr. Dilys Leung, and a Rural Medical Advisory Committee with support from the senior management at UBC CPD and the UBC CPD research team and administrative staff.

To date, program evaluation data indicates that there is significant value in the program for rural physicians.

This report describes RCPD program activities for the period of **April 1, 2018 to March 31, 2019**.

II. RCPD DELIVERABLES AND KEY MILESTONES 2018-19

Quarter	Period	Deliverables/Key Milestones
Q1	April 1 – June 30, 2018	<ul style="list-style-type: none"> • The Enhanced Simulation of Critical Care and Perioperative Emergencies (ESCAPE) Course was delivered successfully in Prince Rupert, Terrace, Williams Lake, Golden • Delivered Hands-on Ultrasound Education – Emergency Medicine (HOUSE EM) in Yellowknife, Inuvik, Nanaimo at the Rural Health Conference, Hope and Chilliwack • Delivered HOUSE – Obstetrics (OB) in Campbell River and in Nanaimo at the Rural Health Conference • Launched sixth cohort of the Rural Physician Mentoring Program • Hosted a coach training session for the Virtual EM Peer Coaching pilot • Held the annual MAC and Medical Leads Retreats in Osoyoos
Q2	July 1 – September 30, 2018	<ul style="list-style-type: none"> • Began Rural Rounds for the academic year • Delivered HOUSE EM in Kelowna, Lillooet, Whistler at the St. Paul's Emergency Medicine Update and Fort Qu'Appelle • Launched seventh cohort of the Rural Physician Mentoring Program • Marketed and launched the Virtual EM Peer Coaching pilot • Started engagement with the three new RSON communities of Fernie, Creston, and Golden • Held the initial CAMP Advisory Committee Meeting
Q3	October 1 – December 31, 2018	<ul style="list-style-type: none"> • Launched the fourth season of the BC Virtual Health Grand Rounds • Delivered the ESCAPE Course to the communities of Smithers, Revelstoke, Golden, and Fernie • Delivered HOUSE EM in Fort St James, Grand Forks, Vancouver at the GPA Refresher and Terrace • Delivered five HOUSE for Residents Courses in Vancouver • Delivered HOUSE IM in Whistler at the Canadian Society of Hospital Medicine • Delivered two HOUSE OB Courses in Vancouver at the Obstetrics Update • Held HOUSE EM's second Faculty Development Day in Osoyoos • Launched eighth cohort of the Rural Physician Mentoring Program • Developed community budgets and confirmed coaches with Fernie, Creston, and Golden for the RSON Coaching Pillar • Hosted coaching community orientations for Lillooet (EM Peer Coaching) and Salmon Arm (unique self-funded coaching program supporting surgical assists)
Q4	January 1 – March 31, 2019	<ul style="list-style-type: none"> • Delivered the Family Practice Anesthesiology Online Journal Club • A Memorandum of Understanding outlining the collaboration between RCPD and the Australian College of Rural and Remote Medicine (ACRRM) on <i>This Changed My Practice – Rural</i> was jointly put together and signed • A joint Canadian and Australian Editorial Board started reviewing articles for <i>This Changed My Practice – Rural</i> • Held the 2nd and 3rd BC Virtual Health Grand Rounds sessions

- Delivered HOUSE EM in Chilliwack
- Delivered HOUSE IM in Prince George, along with ten two-hour weekly follow-up sessions
- Hosted a coach training session for nurse coaches supporting Creston and Golden as part of the RSON Coaching Pillar
- JSC approved a proposal to repurpose the residual Mentoring program funds into a combined Coaching and Mentoring Program (CAMP)
- The RSON Coaching Pillar was certified for up to 261 Mainpro+ group learning credits

III. RCPD ADMINISTRATIVE PROGRESS

This year has seen **significant growth in the depth and scope** of a number of existing RCPD programs and the addition of **two new initiatives** to better support physicians and other healthcare providers practicing in rural and remote parts of British Columbia. The enhancements were based on feedback from ongoing evaluations and made possible by generous funding from the **Joint Standing Committee on Rural Issues (JSC)** and successful partnerships with the **Rural Coordination Centre of BC (RCCbc)** and the **Rural Education Action Plan (REAP)**.

The Hands-On Ultrasound Education (HOUSE) Program made great strides this past year. A new stream of acute care courses, **HOUSE for Residents**, was created in partnership with the Rural Education Action Plan (REAP) with funding from the Joint Standing Committee on Rural Issues (JSC). Five courses reached **67 rural BC residents** in Fall 2018 and another five courses are scheduled to be delivered in Fall 2019.

As of May 2018, **HOUSE OB** was modified to include newly authored content on first trimester pregnancy, including **gestational dating**. New for 2019, and based on demand from recent course participants, is additional content on **intrauterine devices**. The course continues to cover fetal presentation, fetal cardiac activity and amniotic fluid index. In addition to new content, the course now features a **modified course structure**, which offers more hands-on scanning time and less didactic/lecture presentations during the in-person course.

UBC RCPD was proud to launch the [BC PoCUS](#) website in Fall 2018 in partnership with the **Rural Coordination Centre of BC**. This tool offers point-of-care ultrasound (PoCUS) practitioners rapid summaries and quick video refreshers to perform common point-of-care ultrasound exams. The site represents a collaboration of educators and health care providers who seek to support PoCUS practitioners across British Columbia, with the aim of ultimately improving health care for patients.

In January 2019, the JSC approved a proposal to reallocate funds from the Rural Physician Mentoring Program to support the development and one year of delivery of an integrated **Coaching and Mentoring Program (CAMP)**, in addition to one year of the Rural Physician Mentoring Program in its current format. Over the first quarter of 2019, we have been developing the CAMP framework and identifying the necessary components to deliver a successful and sustainable program to rural physicians, teams and communities.

As the result of a successful January 2018 proposal to the JSC to support graduates of the Practice Ready Assessment BC program (PRA-BC), we have developed the **Personal Learning Plans** program. This free and personalized program aims to help candidates achieve their practice goals and navigate the CPD landscape in rural BC. Initially, the program was offered only to **graduates of the PRA-BC program**. Between January 2018 and April 2019, we had eight requests for Personal learning Plans from this group. In March 2019, we expanded the offering of the Personal Learning Plans program to include **all rural IMGs**. We've also begun working in collaboration with the BC-Physician Integration Program (BC-PIP) – also at UBC CPD – to coordinate marketing and program improvement efforts. The BC-PIP program has received funding to offer a similar learning plan program to non-rural IMGs and have decided to base their program design on the RCPD Personal Learning Plan program.

The **Indigenous Patient-Mediated CPD** is a newly formed project with the aim of co-creating with Indigenous patients/elders CPD designed to **increase physicians' Indigenous cultural awareness** within healthcare in BC. By

training enhanced cultural competency and sensitivity in medical practice with Indigenous patients as partners, it is hoped that this project will help to improve patient health outcomes within Indigenous communities by facilitating communication and trust between physicians and their Indigenous patients.

We strive to **reach out and connect** with our colleagues and partners. The **Medical Advisory Committee** held their annual **Retreat** on May 7, 2018 to discuss the role of RCPD vis a vis other CPD stakeholders in BC, Canada, and internationally, and to discuss how RCPD can make significant contributions to the CPD landscape. The meeting agenda can be found in [Appendix 1](#). We held our annual **RCPD Medical Leads Planning Meeting** on May 8, 2018 to connect the provincially distributed RCPD team, which includes the Medical Directors, the Medical Leads, the Management Team, and the Research Team. The day was spent on understanding the role of RCPD in relation to the provincial and national rural landscape, learning about the available UBC CPD resources that could be applied to the programming, and setting the future of RCPD. The meeting agenda can be found in [Appendix 2](#).

Some of our internal administrative highlights from the past year include:

- UBC CPD moved into a new office space at City Square (Suite 200 East Tower, 555 W 12th Ave) in Vancouver.
- Hadas Haft was hired as a Senior Program Assistant to support the Journal Clubs and Rural Rounds. Half of her time is allocated to supporting RCPD programming and half of her time is allocated to supporting other non-rural projects within UBC CPD.
- Alissa Burrows was hired as a Research Assistant to support the evaluation components of many of the RCPD programs and the development of the Indigenous Patient-Mediated CPD initiative.
- Emily Boardman was hired as a Senior Program Assistant to support the Traveling Simulation & Skills-Based Courses portfolio including HOUSE and ESCAPE.
- Rachel Ho was hired as a Senior Program Assistant supporting the Building and Sustaining Supportive Relationships portfolio. Her main role is to support the Personal Learning Plans program as the Rural Concierge.
- Claire Thomson was promoted from Senior Research Assistant to Program Coordinator for the RSON and CAMP programs.
- Emily Lai was hired as the RCPD Administrative Assistant to support RCPD Project Manager Dilys Leung and the RCPD Medical Directors.
- Dr. Ray Markham transitioned out of the RCPD Medical Director role in January 2019. Drs. Dana Hubler and Nicole Ebert have stepped into the roles of Co-Medical Directors. He remains a member on the RCPD Medical Advisory Committee.

IV. RCPD EDUCATIONAL PROGRAMMING

Below is a summary of RCPD educational programming activities...

A. TRAVELING COURSE DEVELOPMENT & DELIVERY

Hands-On Ultrasound Education (HOUSE) Program

The Hands-On Ultrasound Education (HOUSE) Program gives rural physicians the training and confidence to integrate point-of-care ultrasound into their practice. HOUSE was developed to meet the unique needs of rural physicians, and is the only program of its kind in Canada. By providing education that is customized for each community, the program meets the needs of learners with a wide range of pre-existing skills. HOUSE delivers learning in a relaxed and fun environment with the highest instructor to student ratio (1:2) available in a hands-on ultrasound course. The HOUSE Program received sustainability and development funding from the Joint Standing Committee on Rural Issues (JSC) in 2017, and continues to utilize those designated funds to increase scalability, distribution and delivery of courses. Over the last year, HOUSE delivered an unprecedented number of courses in communities across British Columbia; additionally, the program increased its focus on sustainability of learning by way of post-course resources and community follow-up sessions.

Key program milestones achieved (2018-2019):

Capacity building

- Purchased one Sonosite Edge II ultrasound machine unit
- Purchased one Simulab paracentesis trainer
- Purchased four Blue Phantom branched vessel training blocks to replace original branched vessel training blocks, which had become worn
- Hosted a faculty development day in Osoyoos for all HOUSE EM instructors (October 13, 2018), which included guest speaker Dr. Mike Stone, a thought leader in point-of-care ultrasound education
- Expanded the HOUSE instructor team to support the growing number of courses

Network building

- Continued to develop the HOUSE ListServ, a digital community for rural POCUS users across BC. This platform connects HOUSE instructors and POCUS practitioners as a way to problem solve, get questions answered, and share interesting POCUS cases. Originally launched in March 2018, the HOUSE ListServ community expanded from 51 to 155 over the past fiscal year.

Partnerships

- HOUSE Program staff expanded the program to accommodate a new stream of acute care courses, HOUSE for Residents, which delivered hands-on ultrasound education to 67 rural BC residents in Fall 2018. The five

resident-specific courses were run in Vancouver to take advantage of existing travel synergies with other resident training dates. HOUSE for Residents is set to deliver another five course dates in Fall 2019. This initiative was made possible by funding obtained through the Joint Standing Committee on Rural Issues (JSC), which was submitted via the Rural Education Action Plan (REAP).

- UBC RCPD was proud to launch the [BC PoCUS](#) website in Fall 2018 in partnership with the Rural Coordination Centre of BC. This tool offers point-of-care ultrasound (PoCUS) practitioners rapid summaries and quick video refreshers to perform common point-of-care ultrasound exams. The site represents a collaboration of educators and health care providers who seek to support PoCUS practitioners across British Columbia, with the aim of ultimately improving health care for patients.

The Medical Lead for the HOUSE program is Dr. Tandi Wilkinson, and the Program Leads are Nicole Moon and Emily Boardman.

Hands-On Ultrasound Education Acute Care (HOUSE EM) Course

HOUSE EM has expanded significantly since the initiation of the program in 2015. In addition to the milestones above, program staff have completed a first draft of a publication in the form of a brief educational report, sharing information about the HOUSE Program's innovative educational approach to point-of-care ultrasound. The report is on track to be submitted for publication within this calendar year.

The Medical Lead for HOUSE EM is Dr. Tandi Wilkinson, and the Program Leads are Nicole Moon and Emily Boardman.

Hands-On Ultrasound Education Obstetrics (HOUSE-OB) Course

As of May 2018, HOUSE OB includes newly authored content on first trimester pregnancy, including gestational dating. New for 2019, and based on demand from recent course participants, is additional new content on intrauterine devices. The course continues to cover fetal presentation, fetal cardiac activity and amniotic fluid index. In addition to new content, the course now features a modified course structure, which offers more hands-on scanning time and less didactic/lecture presentations during the in-person course. HOUSE OB is staffed by 2 medical leads, a project manager, a program coordinator, and a senior program assistant. Since inception (2012), HOUSE OB has delivered 24 courses in total.

The Medical Lead for HOUSE OB is Dr. Shireen Mansouri, and the Program Leads are Nicole Moon and Emily Boardman.

Hands-On Ultrasound Education Internal Medicine (HOUSE IM) Course

HOUSE IM will continue to deliver courses on a by-request basis for groups of internists throughout the province.

The Medical Lead for HOUSE IM is Dr. Shane Arishenkoff, and the Program Leads are Nicole Moon and Emily Boardman.

HOUSE Course Delivery: Communities and Dates

Spring Courses 2018

HOUSE EM

- Yellowknife, NT (April 6-7) – 7 participants
- Inuvik, NT (April 9-10) – 5 participants
- Nanaimo – Rural Health Conference (May 11) – 10 participants
- Hope (May 25) – 12 participants
- Chilliwack (June 17) – 12 participants

HOUSE OB

- Campbell River (May 9) – 12 participants
- Nanaimo – Rural Health Conference (May 10) – 10 participants

Fall Courses 2018

HOUSE EM

- Kelowna (September 13) – 6 participants
- Lillooet (September 15-16) – 8 participants
- Whistler – St. Paul's Emergency Update Conference (September 27) – 12 participants
- Fort Qu'Appelle, SK (September 29-30) – 12 participants
- Vancouver – Residents (October 15-16) – 38 participants
- Fort St James Refresher (October 23)
- Grand Forks (November 1-2) – 12 participants
- Vancouver – GPA Refresher (November 2) – 8 participants
- Vancouver – Residents (November 16-17) – 18 participants
- Terrace (November 24-25) – 11 participants
- Vancouver – Residents (November 30) – 11 participants

HOUSE IM

- Whistler – Canadian Society of Hospital Medicine Conference (October 25) – 10 participants

HOUSE OB

- Vancouver – Obstetrics Update (October 27-28) – 31 participants

Winter Courses 2019

HOUSE EM

- Chilliwack (February 8) – 7 participants

HOUSE IM

- Prince George (January 26) – 8 participants

Enhanced Simulation of Critical Care and Perioperative Emergencies (ESCAPE) Course

Traditionally a course focused on OR-based scenarios, new for 2018 was the addition of an optional ED component of ESCAPE. Both OR and ED scenarios are now accredited for two credits/hour with the CFPC, and the modular course agenda can be tailored specifically to the needs of each community.

In late spring 2018 ESCAPE ran two courses (Williams Lake and Golden) that were delivered in collaboration with the existing Interior Health Rural Mobile SIM program, utilizing local resources as much as possible in order to streamline course delivery and budget. Building on this momentum, ESCAPE further expanded its reach in the latter part of 2018, with visits to Smithers, Revelstoke, Golden and Fernie. The first ESCAPE course run in 2019 took place in Creston, with visits to Hazelton, Salmon Arm, and Powell River being planned for the latter half of 2019.

ESCAPE staff submitted an abstract to the National Forum on Simulation for Quality & Safety, which was accepted. Dr. Bruce McKnight will present a rapid-fire presentation explaining highlights of the program to national simulation champions at Vancouver General Hospital on May 28, 2019.

The Medical Leads for ESCAPE are Drs. Bruce McKnight and Kirk McCarroll, and the Program Leads are Nicole Moon and Emily Boardman.

The Shock Course

Since its inception in 2011, the Shock Course was offered more than 40 times across BC, running most recently at St. Paul's Emergency Medicine Update in Whistler (September 2017). Understanding the dynamic landscape of healthcare in the province, it was determined in recent years that the Shock Course should be re-evaluated in order to ensure it was adequately meeting the learning needs of rural practitioners in the province. Subsequently, program meetings in early 2019 between the Medical Lead for Shock (Dr. Aaron Fitzpatrick), RCPD Associate Medical Directors (Drs. Nicole Ebert and Dana Hubler) and RCPD staff led to the retirement of the Shock Course. Resources will instead be focused on finding a new critical care-focused programming initiative to best fit the needs of today's rural physician practicing in British Columbia.

'Dummy Makes Perfect' Airway Mannequin Loan Program

The 'Dummy Makes Perfect' Airway Mannequin Loan Program provides mobile access to three Laerdal airway mannequins (adult, pediatric, and infant) and educational materials, including airway scenarios, to remote communities in BC. The program continues to accept booking requests. The mannequins were loaned to Vanderhoof (April 2018) and Sechelt (November 2018).

The Medical Lead for this program is Dr. Brenda Huff, and the Program Leads are Nicole Moon and Emily Boardman.

B. RURAL VIDEOCONFERENCE EDUCATION

Rural Rounds Videoconference Series

The 2018-19 Rural Rounds videoconference series continued to include online web conferencing through WebEx, allowing participants to connect from their home or office computer, in addition to local hospital videoconference sites. To increase interactivity, participants are given an opportunity to submit their questions relating to the topic area in advance, so the presenter may come prepared to respond. See [Appendix 3](#) for the 2018-19 Rural Rounds course flyer. Planning is underway for the upcoming 2019-20 series.

The Medical Lead for Rural Rounds Videoconference Series is Dr. Dana Hubler and the Program Leads is Hadas Haft.

BC Virtual Health Grand Rounds

Year three of the BC Virtual Health Grand Rounds was successful and featured sessions and six presentations. The goal of this initiative remain constant: providing a provincial forum to present and discuss examples of telehealth being used in clinical practice today in BC and beyond. These rounds were open to all healthcare professionals in Canada and hosted in Vancouver, with presenters located across the country. Our database is now at 212 individuals and includes participants who have attended the Rounds over the years and request to be on our mailing list.

1. October 5, 2018 featured presentations on the following topics:
 - CODI with Dr. Don Burke (Vancouver, BC)
 - Telehomecare at Island Health with Ms. Lisa Saffarek, RN (Nanaimo, BC)
2. January 17, 2019 featured presentations on the following topics:
 - Using InTouch in the Rural Surgical and Obstetrical Networks (RSON) with Dr. Brett Bachelor and Mr. Arturo Muslera (Revelstoke, BC)
 - CODI and MedEX at Northern Interior Rural Division of Family Practice (NIRD) with Dr. Stefan Du Toit (Robson Valley ,BC) and Mr. Dave Harris (Prince George, BC)
3. April 26, 2019 featured presentations on the following topics:
 - Babylon and TELUS with Dr. Martin Dawes (Vancouver, BC)
 - Telerheumatology with Dr. Brent Ohata (Vancouver, BC)

The Medical Leads for this program are Drs. John Pawlovich and Kendall Ho, and the Program Lead is Hadas Haft.

Rural Family Practice Anesthesiology Online Journal Club

The 2018-19 season saw the return of the *Rural Family Practice Anesthesiology Online Journal Club*. There were 22 registrants in this season of the FPA Online Journal Club. This season offered four sessions, which ran for three weeks each. The topics discussed were:

- Session 1: Airway management: Beyond the endotracheal tube

- Session 2: Obstetric anesthesia practice: Postpartum headache
- Session 3: Regional anesthesia for lower extremity arthroscopy
- Session 4: Paediatric anesthesia

The Medical Lead on this project is Dr. Kirk McCarroll, who is also involved in the Clinical Coaching for Excellence program for FPA's, and the Program Lead is Hadas Haft.

This Changed My Practice – Rural Edition

RCPD has been working with Dr. Bruce Hobson to create a rural spinoff of the award-winning [This Changed My Practice](#) blog series. The aims of this project are to add a rural voice to TCMP's portfolio and raise the profile of rural healthcare providers as educators and scholars. On August 21st, 2018, members from both RCPD and the Australian College of Rural and Remote Medicine (ACRRM) decided to turn TCMP-Rural into a true collaborative project with equal stakes. This has led to the creation of a memorandum of understanding and a joint Editorial Board, which is currently in the process of reviewing the 6 articles (3 Canadian, 3 Australian) we have collected to date. The team is also continuing to seek out new articles. The site is expected to launch shortly after a total of 6 articles are finalized by the Editorial Board.

The Medical Lead for this program is Dr. Bruce Hobson and the Program Lead is Alissa Burrows.

C. BUILDING AND SUSTAINING SUPPORTIVE RELATIONSHIPS

Coaching and Mentoring Program (CAMP)

In January 2019, the JSC approved a proposal to reallocate funds from the Rural Physician Mentoring Program to support the development and one year of delivery of an integrated Coaching and Mentoring Program (CAMP), in addition to one year of the Rural Physician Mentoring Program in its current format. Over the first quarter of 2019, we have been developing the CAMP framework and identifying the necessary components to deliver a successful and sustainable program to rural physicians, teams, and communities.

We have identified six core principles to guide this work. All CAMP programs are:

- Relationship-based
- Learner-driven
- Customizable
- Formal
- Safe / Confidential / Non-reporting
- Collaborative

Clinical Coaching for Excellence Program

The Clinical Coaching for Excellence Program was developed by the University of British Columbia's Division of Rural Continuing Professional Development (UBC RCPD) in collaboration with the Rural Coordination Centre of British

Columbia (RCCbc). It supports family physicians and nurses in rural British Columbia to optimize their clinical practice through personalized and context-specific coaching. The program aims to improve confidence and comfort with clinical and non-clinical skills, improve quality of care, establish/enhance collaborative peer-peer and multidisciplinary relationships, and support a clinical coaching culture in rural British Columbia.

Drs. Bob Bluman and Kirstie Overhill are Medical Co-Leads for the overall Clinical Coaching for Excellence program, and Claire Thomson is the Program Lead.

The Clinical Coaching Program was accepted for endorsement by the Future of Medical Education in Canada CPD Steering Committee.

FPA Clinical Coaching

The FPA Clinical Coaching stream partners rural family practice anesthetists (FPAs) with an anesthesiologist coach from an urban tertiary centre.

Site visits were held in Nelson, Squamish, Fernie, Powell River, and Williams Lake throughout the year. Additionally, FPAs from Sechelt, Fernie, and Powell River were able to travel to their coach's site for coaching visits through our partnership with the Rural Education Action Plan (REAP). We also conducted phone interviews with Cohort 2 participants, coinciding with the 1-year anniversary of their community orientation (1 year after the launch of the program). Of the 23 coachees and 5 coaches, we were able to schedule interviews with 5 coachees and 3 coaches.

The communities of Fernie and Golden have now fully transitioned into the RSON initiative, which includes participation in the Clinical Coaching pillar. We are supporting all existing Cohort 1 & 2 communities with funding for one additional coaching visit, available until July 1, 2019. Pilot participants will be eligible for CAMP, but will not be automatically enrolled.

The Medical Co-Leads for the FPA stream are Dr. Kirk McCarroll (FPA) and Dr. Jim Kim (anaesthesiologist), and the Program Leads are Claire Thomson and Alissa Burrows.

EM Peer Coaching

The Peer Coaching stream of the Clinical Coaching program supports rural emergency medicine practitioners while they are on shift with backup from a trusted peer coach who either works in the same ER (in-person coaching) or who provides remote support via text, phone, and videoconferencing (virtual coaching). We also have a separate funding pot specifically reserved to support PRA-BC graduates with peer emergency coaching.

We launched our virtual coaching pilot in summer 2018, with 5 coaches supporting 4 coachees. Additionally, we have supported 2 new PRA-BC grads starting emergency work in their return of service communities. With the new funding from the JSC granted September 2018 as part of the "Setting Rural Physicians Up for Success" proposal, we launched a major marketing push in early 2019, hoping to support many CMGs and PRA-BC graduates starting their practice in the summer.

The Medical Co-Leads for this stream are Dr. Danette Dawkin (in-person peer coaching) and Dr. Jel Coward (virtual peer coaching), and the Program Leads are Claire Thomson and Rachel Ho.

Rural Surgical and Obstetrical Networks (RSON) Clinical Coaching Pillar

The RSON stream of the Clinical Coaching program is one part of the larger Rural Surgical and Obstetrical Networks (RSON) project officially approved by the JSC in October 2017. The RSON project aims to support rural surgical/obstetrical programs in building collaborative networks with their regional referral centre(s). One method of building these networks is partnering rural surgery providers with specialist colleagues from their regional centres, who then act as coaches for the rural providers. Other elements of the RSON project include expanding the scope of practice for rural surgery teams, introducing remote presence technology into the rural site, continuous quality improvement (CQI) activities, and evaluation.

For the first year of the overall RSON initiative, RCPD continued to support existing coaching relationships established in the pilot between Revelstoke and Vernon/Salmon Arm, while assisting the new communities of Fernie, Golden, and Creston in setting up their own coaching relationships (described in the table below).

Community	Number of Coachees	Partnered with...	Number of Coaches Trained to Date
Revelstoke	15	Vernon, Salmon Arm	5
Fernie	13	Cranbrook	1
Creston	7	Cranbrook, Trail	3
Golden	10	Vancouver, Vernon, Banff	6
Total:	45		15

After initial community engagement calls, we had separate calls between our Medical Leads and the FP ESS, FPAs, and Nurses in Fernie, Creston, and Golden to learn about their specific learning needs, which we used to put together template budgets for each community. In January 2019, the Coaching pillar went on site visits alongside the CQI and Evaluation pillars to Fernie, Creston, and Golden to promote engagement and finalize the community budgets. Support for maternity nursing was a major theme across the new communities. We hosted a training session for nurse coaches on February 5, 2019.

The RSON Coaching Pillar Medical Leads are Dr. Vikki Haines (FP ESS), Dr. Kirk McCarroll (FPA), and Deena Crane (Nursing), and the Program Leads are Claire Thomson and Alissa Burrows.

Rural Physician Mentoring Program

The Rural Physician Mentoring Program, piloted in 2014, began an expanded three-year program in 2016. Thanks to additional funding, the program now has the capacity to support 115 new-to-rural practice physicians per year over three years. This formal program offers mentoring support for physicians starting practice in rural BC communities during the 10-month program. The intent of the program is to help ease the transition into rural practice and to enhance recruitment and retention of physicians in rural BC. Training, tools (not rules) and support for participants in the form of training sessions, telephone calls, concierge type support, and mentor honoraria are offered. Mentees are offered their choice of mentors, flexibility in setting the terms of the relationship, and ongoing support from their mentors and program staff.

The program has been interested in expanding the scope of the program to provide support for physicians involved in other kinds of transitions in practice. We have collaborated with REAP as part the Rural Leadership Development Project, and with the Cowichan Valley Division of Family Practice (CVDFP) as part of their initiative to help integrate family physicians into their hospital environment. Feedback from the CVDFP group has been very positive, their Doctor of the Day program has been revitalized, and program organizers have told us that the Mentoring Program has been a powerful recruitment incentive for bringing new physicians to the Cowichan Valley region.

Recruitment is an ongoing process. We are actively recruiting both mentees and mentors with the aim of continuously expanding the pool of mentors to allow mentees more choice. Recruitment activities have and will include:

- UBC CPD marketing channels (e.g. email blasts, website, social media)
- RCCbc e-News
- Presence at conferences (e.g. Rural Locum Forum, BC Rural Health Conference)
- Outreach through other UBC programs (e.g. residency program directors/site coordinators, PRA-BC)
- Encouraging peer outreach through past/current participants and UBC CPD staff

Cohort Schedule

Cohort	Start Date	# of mentees
6	April 2018	11
7	August 2018	10
8	November 2018	13
9	June 2019	

The Medical Leads for this program are Drs. Kirstie Overhill and James Card, and the Program Lead is Jenna Lightbody.

Personal Learning Plans

As the result of a successful January 2018 proposal to the JSC to support graduates of the Practice Ready Assessment BC program (PRA-BC), we have developed the Personal Learning Plans program. This free and personalized program aims to help graduates achieve their practice goals and navigate the CPD landscape in rural BC. The program is based on the principles of being safe/confidential/non-reporting, learner-driven, and collaborative. An info sheet on this program can be found in [Appendix 4](#) and the learning plan template can be found in [Appendix 5](#).

The program uses Peer Advisors to help participants development of individual learning plans, and the Rural Concierge to organize the intake of all new learning plan candidates, to put together the learning plans based on the initial meeting with the candidate, to execute the necessary research and connecting in order to assist the candidate in implementing the plan, and is responsible for follow-up with the candidate to ensure everything is going smoothly.

Initially, the program was offered only to graduates of the PRA-BC program. Between January 2018 and April 2019, we had eight requests for Personal learning Plans from this group. In March 2019, we expanded the offering to include all rural IMGs. We've also begun working in collaboration with the BC-Physician Integration Program (BC-PIP) – also at UBC CPD – to coordinate marketing and program improvement efforts. The BC-PIP Program has received funding to offer a similar learning plan program to non-rural IMGs and have decided to base their program design on

the RCPD Personal Learning Plan program. Kate Meffen, the UBC CPD Program Coordinator on the BC-PIP program, has been invited to join our Working Group to promote synergy and open communication between the two projects.

We have focused our efforts to promote this program on directly communicating with the target audience. Dr. Bruce Hobson and Jenna Lightbody have presented on the program at the PRA-BC Orientation, PRA-BC graduates have been emailed directly with information about the program, and Chiefs of Staff in Return of Service communities have been notified about the program in hopes that they would be able to provide it as a resource to the PRA-BC grads in their communities.

The Working Group is in the process of developing a plan for promoting awareness and alignment among other organizations with similar mandates (e.g. the Practice Support Program), as well as an evaluation plan. We are also actively developing a repository of resources available to rural IMGs, including CPD activities from various organizations as well as available funding sources.

The Medical Co-Leads for this program are Drs. Bruce Hobson and Nicole Ebert, who also function as the program's Peer Advisors and divide their participation in the development of individual learning plans, and the Program Leads are Jenna Lightbody and Rachel Ho. Rachel is also the Rural Concierge.

D. CULTURAL SAFETY AND HUMILITY

Indigenous Patient-Mediated CPD

The Indigenous Patient-Mediated CPD is a newly formed project with the aim of co-creating with Indigenous patients/elders CPD designed to increase physicians' Indigenous cultural awareness within healthcare in BC. By training enhanced cultural competency and sensitivity in medical practice with Indigenous patients as partners, it is hoped that this project will help to improve patient health outcomes within Indigenous communities by facilitating communication and trust between physicians and their Indigenous patients.

To date, the Working Group has met several times to explore how the group can work together in a good and respectful way, the kind of educational programming that could be developed through this project, as well thinking about future plans and directions over the next 18 months.

The Working Group looks forward to hosting a "gathering of minds" meeting in October 2019, where project leaders, Elders, youth and other knowledge keepers will be invited to explore how everyone can collectively move forward in supporting cultural safety and humility education, and learn from the experiences of others already called in to this work. The Working Group hopes to obtain a better idea of where the current gaps and needs lie in cultural safety and humility education that could potentially be fulfilled by this project.

The project is currently co-lead by Dr. Terri Aldred, Dr. Dana Hubler and Elder Roberta Price, and the Program Lead is Alissa Burrows.

E. CONFERENCE PRESENTATIONS

RCPD presented at the following conferences during the 2018-2019 year:

- *Hands-On Ultrasound Education: Improving Patient Care in Rural Communities*, oral presentation by Dr. Bob Bluman at the Canadian Conference on Medical Education, April 27 – May 1, 2018
- *Building Collective Competence in the Rural ER through Peer Clinical Coaching*, oral presentation by Claire Thomson at the Centre for Health Education Scholarship (CHES) Celebration of Scholarship 2018, October 3, 2018.
- *Coaching and Mentorship for Personal and Professional Development and System Change*, poster presentation by Kirstie Overhill at the International Conference on Physician Health, October 11-13, 2018.

F. RESEARCH & EVALUATION ACTIVITIES

BC Rural Continuous Quality Improvement Needs Assessment

The findings and recommendations from the BC Rural Continuous Quality Improvement (CQI) Needs Assessment have been put together in a final report as well as an executive summary. The results and recommendations of this needs assessment will be presented to and discussed with the JSC at the May JSC meeting. As well, we are preparing for the province-wide dissemination of final report.

HOUSE Emergency Medicine Evaluation

In October 2018, the program team met with evaluation consultant Kylie Hutchinson to begin planning an evaluation project to examine the impact of HOUSE EM on point-of-care ultrasound Use in rural communities. The largest component of the evaluation project will be a number of interviews, aimed to be completed by May 2018, which include:

- 18-20 past-course participants from courses in Fall 2018
- 5 community physician leads from courses in Fall 2018
- 2 CME coordinators
- Specialists
- 5-7 patients of physicians who participated in a course in Fall 2018
- Faculty
- HOUSE staff
- 4 rural organization representatives (RCCbc, REAP, JSC, FoM)
- 5-7 local coordinators

The interview transcripts will be collected and analysed thematically using Nvivo software.

Data will also be collected from new pre-course and post-course surveys that are now being used for current courses. Data collected using older versions of surveys will also be analysed.

The evaluation will also include a literature review investigating the effects of point-of-care ultrasound training on patient outcomes.

The team plan to hold a data party to work together in interpreting the collected data. The findings and recommendations will then be summarised in a formal final report by the end of summer.

V. APPENDICES

APPENDIX 1: RCPD MEDICAL ADVISORY COMMITTEE RETREAT AGENDA

RCPD Medical Advisory Committee (MAC) Retreat MEETING AGENDA

Date: Monday, May 7th, 2018 | **Location:** Watermark Resort, 15 Park Pl, Osoyoos, BC
Chair: Ray Markham | **Attendees:** Granger Avery, Bob Bluman, Dawson Born, Nicole Ebert, Dana Hubler, Bruce Hobson, Mary Johnston, Sonia Lamont, Dilys Leung, Jenna Lightbody, Brenna Lynn, Nicole Moon, Chester Morris, Christie Newton (via videoconference), John Pawlovich, Alan Ruddiman, Ian Schokking, John Soles, Tandi Wilkinson, Bob Woollard, Kathryn Young

Time	Focus	Energy
07:30-8:30	❖ Breakfast	
08:30-10:00	❖ Roundtable	
10:00-10:30	Refreshment Break	
10:30-12:00	❖ Networks ➤ Ray, Nicole	<ul style="list-style-type: none"> ❖ What networks are out there / being built? ❖ How can we leverage existing networks/relationships? ❖ What is your experience with networks / relationships? ❖ What is RCPD's role in supporting the networks? ❖ How can RCPD use networks to support rural health? <ul style="list-style-type: none"> ➤ How can we create communities? ➤ Primary Care ➤ Rural Surgery Obstetrics
12:00-1:00	Lunch	
13:00-14:30	❖ White Board Session ➤ Ray, Dana, Nicole	<ul style="list-style-type: none"> ❖ What is our role in setting up rural physicians for success? <ul style="list-style-type: none"> ➤ For new physicians ➤ For existing physicians
14:30-15:00	Refreshment Break	

		❖ What are some of the current hot topics? Should RCPD venture into this space?
15:00-15:30	Walking Breakout Session	<ul style="list-style-type: none"> ➤ Networks (Ray Markham) ➤ Mental Health (Nicole Ebert) ➤ Addictions (Granger Avery) ➤ Trauma-Informed Care (Dana Hubler)
15:30-16:30	Bringing It All Together	Final Comments
19:30	Dinner at Convivia Bistro	8312 74 Ave, Osoyoos, BC

MAC Members:

Dr. Granger Avery Associate Director, Rural Coordination Centre of BC; Past President, Canadian Medical Association (Vancouver/Port McNeill)

Dr. Bob Bluman GP; Executive Medical Director, UBC CPD; Medical Lead, Rural CQI Needs Assessment, Clinical Coaching for Excellence Program, Rural Physician Mentoring Program (Vancouver)

Dr. Nicole Ebert GP Obstetrician; Associate Medical Director, Rural CPD (Vanderhoof)

Dr. Bruce Hobson GP; Quality Improvement Lead, UBC CPD (Powell River)

Dr. Dana Hubler GP; Associate Medical Director, Rural CPD, Medical Lead, RCPD Journal Clubs, Rural Rounds (Hornby Island/Comox/Port Alice)

Dr. Mary Johnston GP (retired) (Blind Bay)

Ms. Andrea Keesey Director, UBC CPD (Vancouver)

Dr. Dilys Leung PhD; Project Manager, Rural CPD (Vancouver)

Dr. Brenna Lynn PhD; Associate Dean CPD, UBC Faculty of Medicine (Vancouver)

Dr. Ray Markham GP; Medical Director, RCPD; Executive Director, RCCbc (Valemount)

Dr. Chester Morris IM; Specialist Services Committee (Port Alberni)

Dr. Christie Newton GP; Associate Professor, Interim Co-Head, Director of Continuing Professional Development and Community Partnerships, UBC Department of Family Practice (Vancouver)

Dr. John Pawlovich GP; Director, Rural Education Action Plan (Abbotsford)

Dr. Alan Ruddiman GP; JSC Co-Chair; Past Present, Doctors of BC (Oliver)

Dr. Ian Schokking GP; Northern Interior Medical Advisory Committee, CPD Nucleus Committee, Chair, Doctors of BC (Prince George)

Dr. John Soles GP; Past President, Society of Rural Physicians of Canada (Clearwater)

Dr. Tandi Wilkinson GP; Medical Lead, Hands-On Ultrasound Education (Nelson)

Dr. Bob Woollard GP; Associate Director, Rural Coordination Centre of BC (Vancouver)

Dr. Zoe Zimmerman GP; (Victoria)

UBC CPD Team Members:

Mr. Dawson Born Research Assistant (Vancouver)

Ms. Jenna Lightbody Project Coordinator, RCPD (Vancouver)

Ms. Nicole Moon Senior Program Assistant, RCPD (Vancouver)

Ms. Claire Thomson Senior Research Assistant, RCPD (Vancouver)

Ms. Kathryn Young Project Manager, UBC CPD (Vancouver)

APPENDIX 2: RCPD MEDICAL LEADS PLANNING MEETING AGENDA

UBC Rural CPD Medical Leads Planning Meeting MEETING AGENDA

Date/time: Tuesday, May 8th 2018 | **Location:** Watermark Resort, 15 Park Pl, Osoyoos, BC

Chair: Ray Markham | **Attendees:** Bob Bluman, Dawson Born, Jeanette Boyd, Danette Dawkin, Nicole Ebert, Aaron Fitzpatrick, Vikki Haines, Bruce Hobson, Dana Hubler, Sonia Lamont, Brenda Huff, Dilys Leung, Jenna Lightbody, Brenna Lynn, Kirk McCarroll, Bruce McKnight, Nicole Moon, Chester Morris, Kirstie Overhill, Claire Thomson, Tandi Wilkinson, Kathryn Young

Time	Focus	Energy
07:30-08:00	Breakfast	
08:00-10:30	❖ Welcome & Roundtable	<ul style="list-style-type: none"> ❖ To connect the entire RCPD team ❖ To share something about what is going on in your personal and professional worlds
10:30-11:00	Refreshment Break	
11:00-12:00	<ul style="list-style-type: none"> ❖ Cross-Pollination (World Café) <ul style="list-style-type: none"> ○ Coaching (Bob Bluman) ○ Mentoring (Kirstie Overhill) ○ HOUSE (Tandi Wilkinson) ○ Rural Rounds (Dana Hubler) 	<ul style="list-style-type: none"> ❖ What is your program doing? <ul style="list-style-type: none"> ○ Lessons learned ○ Changes you've made ❖ Where are the linkages in our programs? <ul style="list-style-type: none"> ○ What can we learn from each other's programs?
12:00-13:00	Lunch	
13:00-14:30	<ul style="list-style-type: none"> ❖ Breakout Sessions <ul style="list-style-type: none"> ○ Mentoring ○ Coaching ○ ESCAPE 	<ul style="list-style-type: none"> ❖ How can we help you? ❖ How can we build sustainable change in the program? ❖ How can we push what we are doing to the patient outcomes level?
14:30-15:00	Break	
15:00-16:30	❖ Bringing It All Together	<ul style="list-style-type: none"> ❖ What lessons have you learned that I can learn? ❖ What are some of the barriers you've faced? ❖ What difference has your program made? ❖ What will keep you excited about your program? ❖ New innovative ideas
17:30	Dinner at Terrafina @ Hester Creek Winery	887 Rd 8, Oliver, BC

APPENDIX 3: RURAL ROUNDS VIDEOCONFERENCE RURAL ROUNDS COURSE FLYER 2018-19



UBC CPD
CONTINUING PROFESSIONAL DEVELOPMENT
FACULTY OF MEDICINE

Empowering continuous learning and practice improvement.



10.0
MAINPRO+
MOC SECTION 1

UBC RURAL ROUNDS
Morning Videoconference Series
SEP 2018-JUN 2019
MONTHLY • THU 8-9 AM (PDT/PST)

WHAT IS RURAL ROUNDS?

The Rural Rounds series aims to provide relevant, up to date and rurally specific CME in your community. Speakers either live and work in rural areas of BC, or possess an understanding of the unique circumstances of the rural health care provider.

The 2018-19 Rural Rounds season will feature topics considered important to rural practice with speakers from a variety of specialties.

The format includes case-based presentations with many opportunities for questions and discussion. Audience participation is encouraged!

- Earn up to ten CME credits close to home.
- Thursday mornings, once per month, 8-9 AM (PST/PDT).
- Registration by hospital site (\$150 per session; discount for early registration).

SEP 2018 - JUN 2019 SERIES

OCT 4	Reconciled Medicine <i>Dr Terri Aldred & Dr Ami Brosseau</i>
NOV 1	Childhood Trauma/ACEs <i>Dr Carol Coxon & Jan Fernce NMT</i>
DEC 6	Child Maltreatment <i>Dr Kirsten Miller</i>
JAN 10	Geriatrics/Determining Competence in the Rural Setting <i>Dr. Ian Schokking</i>
JAN 24	Medical Assistance in Dying (MAID) <i>Dr Jonathan Reggler</i>
FEB 7	Opioid Agonist Treatment <i>Dr Christy Sutherland</i>
MAR 7	Cardio-Renal Syndrome <i>Dr Naomi Glick</i>
APR 4	Treating Shock in the Rural Setting (PART 1) <i>Dr Bruce McKnight</i>
MAY 2	Treating Shock in the Rural Setting: Hemorrhagic Shock (PART 2) <i>Dr. Kirk McCarroll</i>
JUN 6	Airway <i>Dr Sean Ebert</i>



Relating rural health through education and advocacy

This program is supported by the Rural Coordination Centre of BC

ubccpd.ca

APPENDIX 4: PERSONAL LEARNING PLANS INFO SHEET

PERSONAL LEARNING PLANS



This **free** and **personalized** program is being offered to all **IMG physicians** in British Columbia to help achieve practice goals and navigate the continuing professional development (CPD) landscape.

We will discuss your areas of interest and personal goals to formulate a plan to support your ongoing learning and development.

We will then help connect you with the resources and people you'll need in order to achieve the goals identified in your plan.

PROCESS

- 1 Initial Meeting**
You will be introduced to your peer advisor and a UBC CPD concierge. You will discuss your current challenges, learning needs, and areas of interest.
- 2 Develop a Plan**
Based on the initial meeting, we will develop a customized learning plan and submit it back to you for review and approval.
- 3 Plan Implementation**
We will help connect you with the people and resources you'll need in order to achieve your goals.
- 4 Ongoing Support**
Through periodic meetings, we will continue to support you in this process, reshaping your plan so that it caters to your evolving needs.

PRINCIPLES

Safe. Confidential. Non-Reporting.

Everything discussed in the process of developing and implementing your Personal Learning Plan is strictly confidential and will not be used in any way for assessment or licensing. Your involvement is not reported to any Health Authority, College, or other regulatory body.

Learner Driven.

Your peer advisor and concierge will help you explore your wants and needs and advise you on appropriate resources that may assist you in achieving your goals.

Collaborative.

At UBC CPD, we are in a unique position to support you as we both deliver and have access to a huge network of organizations across the province providing quality CPD and support to physicians.

Contact our concierge for more information and to set up your initial meeting: cpd.learningplans@ubc.ca

UBC CPD



CONTINUING PROFESSIONAL DEVELOPMENT
FACULTY OF MEDICINE

APPENDIX 5: PERSONAL LEARNING PLAN TEMPLATE

PERSONAL LEARNING PLAN

Name:	Goal #1	Goal #2	Goal #3
<i>Learning Goal</i>			
<i>Key Competency</i>			
<i>Rationale</i>			
<i>Learning Activity</i>			

<i>Target Completion Date</i>			
<i>Potential Challenges (and how will you mitigate them?)</i>			
<i>Follow Up</i>			
<i>Resources/Supports Needed</i>			
<i>Evidence of Success</i>			