

# RURAL CPD ANNUAL REPORT

## 2023/2024



THE UNIVERSITY OF BRITISH COLUMBIA

**Continuing Professional Development**  
Faculty of Medicine

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**ACKNOWLEDGEMENTS**

UBC Rural CPD is a partnership between the UBC Faculty of Medicine's Division of Continuing Professional Development (UBC CPD) and the Rural Coordination Centre of BC (RCCbc) and is funded by the Joint Standing Committee on Rural Issues (JSC), a joint committee of the Doctors of BC and BC Ministry of Health.



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# WHO ARE WE?



UBC Rural CPD is committed to supporting the learning needs of physicians and other health-care providers who practice in rural, remote and Indigenous communities in British Columbia (BC). Our program demonstrates this through community-based, interprofessional, collaborative and practical CPD. We support rural health care providers to deliver safe and effective health care to rural BC.

This report summarizes key outcomes and impacts from our programming in 2023-24. Throughout the year, we continued to engage faculty, learners and partners both virtually and in-person.

## INNOVATION DRIVEN BY COMMUNITY NEEDS

*"You guys are awesome. You have made education accessible and inclusive... The ability to learn remotely is a huge benefit"*

-RCPD LEARNER



# 2023/2024 SNAPSHOT

## IN 2023/2024, RCPD DELIVERED

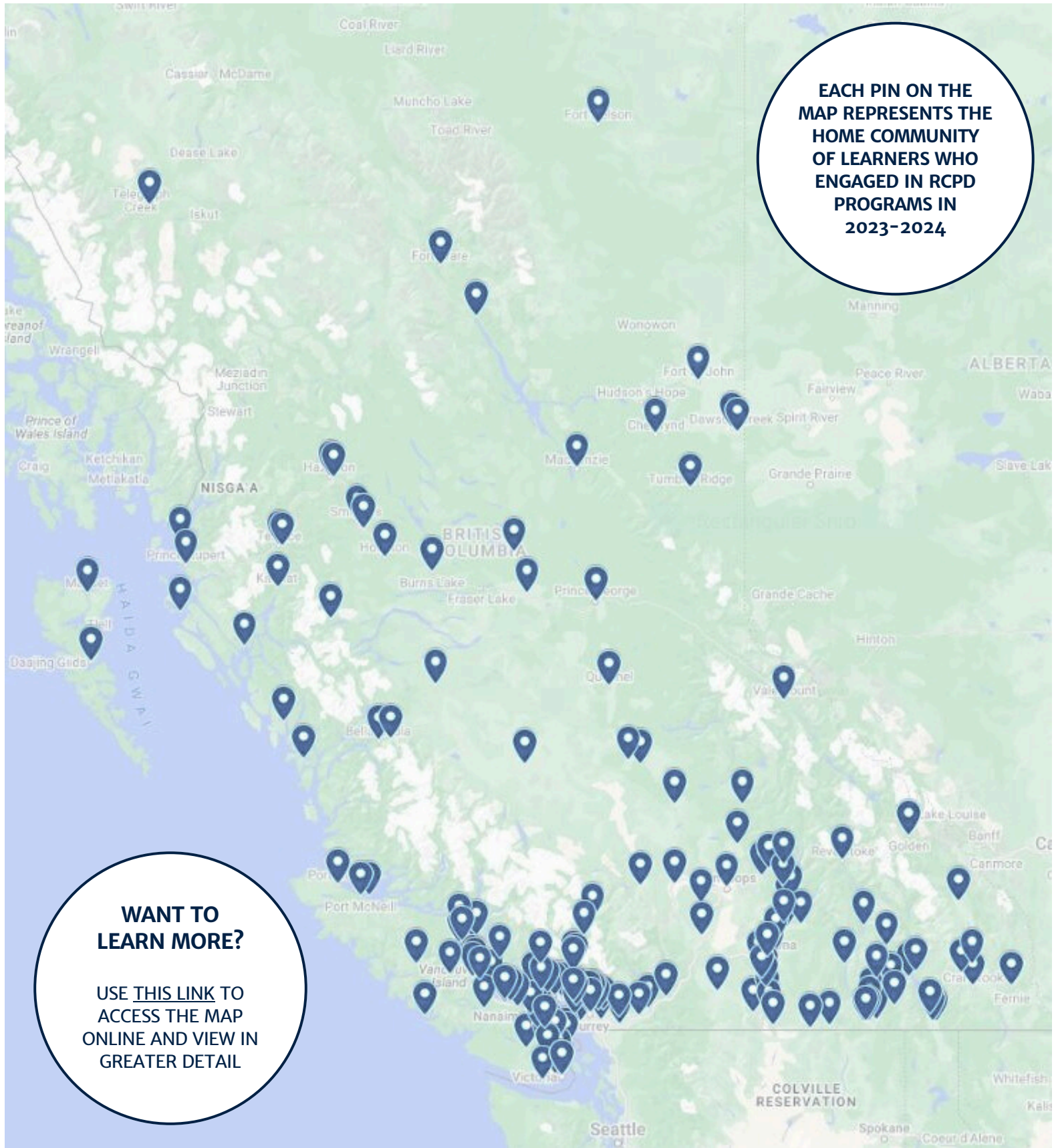
- 18 HOUSE course days, reaching 155 learners
- 1,092 coaching hours across CAMP, RSON & ROAM
- 60 PLPs (initiated/completed)
- 1,325 virtual learners across Rural Rounds, Pediatric DERMES, VHGR and POCUS Rounds
- 384 learners in PLP's Level 1 Nawh whu'nus'en - We see in two worlds
- 108 learners in IPL's newly piloted Level 2 curriculum

# SERVING RURAL COMMUNITIES

EACH PIN ON THE MAP REPRESENTS THE HOME COMMUNITY OF LEARNERS WHO ENGAGED IN RCPD PROGRAMS IN 2023-2024

**WANT TO LEARN MORE?**

USE THIS LINK TO ACCESS THE MAP ONLINE AND VIEW IN GREATER DETAIL



# HANDS-ON ULTRASOUND EDUCATION (HOUSE)



UBC Rural CPD offers low-barrier training and resources that advance point-of-care ultrasound (POCUS) skill adoption and supports the development of a POCUS community of practice in rural British Columbia. This includes the [Hands-On Ultrasound Education \(HOUSE\)](#) course, [Rural POCUS Rounds](#) webinar series, [Sonnie: Your Ultrasound Partner](#) (asynchronous, case-based learning) and the [Handheld Ultrasound Loan](#) program.

## PROGRAM LEARNING GOALS

- list the correct steps in PoCUS use
- demonstrate the manual skills required to use PoCUS
- safely incorporate PoCUS into patient care
- create an appropriate long-term learning plan for maintaining PoCUS practice

## HOUSE BY THE NUMBERS

HOUSE COURSE PARTICIPANTS

155 HOUSE participants

HOUSE COURSE DAYS

18 HOUSE course days

# SUCCESS STORIES & PROGRAM IMPACT



CPD.HOUSE@UBC.CA

## IMPROVING POCUS ACCESS FOR RURAL PEDIATRICIANS

HOUSE Faculty Development Day in Cranbrook, BC in April 2023 gave instructors the opportunity to scan live pediatric models and familiarize themselves with a new agenda offering for HOUSE learners: HOUSE Pediatrics. The agenda was developed by HOUSE Medical Lead Dr. Kevin Fairbairn (Nelson, BC) in consultation with pediatric specialists. A successful pilot of the HOUSE Pediatrics course ran in Prince George in June 2023, followed by a September 2023 course in Trail. [RSA](#) community pediatricians were invited to attend a third HOUSE Pediatrics offering prior to the BC Pediatric Society Conference in November 2023.

*"This was a superb course. I would like all pediatricians outside of urban centres to have access to it."*

- HOUSE Pediatrics participant

The HOUSE Pediatrics course is one example of how the program adapts to the changing needs of rural practitioners in British Columbia. HOUSE continues to develop new agenda offerings for an expanding POCUS target audience in rural BC, including family physicians, specialists and interprofessional maternity teams providing care across hospital and clinic settings in rural, remote and Indigenous communities.



HOUSE Pediatrics Course, Nov 2023



# REAL-TIME VIRTUAL SUPPORT (RTVS) SIMULATION



Multi-modal virtual simulation program featuring RCCbc's Real-Time Virtual Support (RTVS) peer pathways. [Learn more about RTVS.](#)

## PROGRAM LEARNING GOALS

Provide rural health-care providers an opportunity to:

- engage in high-quality simulation education to hone clinical and collaborative skills
- practice connecting to RTVS with standard technology
- receive support from an RTVS Virtual Provider first-hand

## RTVS SIMULATION BY THE NUMBERS

 STANDARD PROGRAM SIMULATIONS

 RTVS SIMULATION RESIDENCY SITE PROJECT (RSRSP)

**12** Just-In-Time (JIT) Simulations

**25** Supported Simulations

**10** Coordinated Simulations

**14** Coordinated Simulations

**11** Residency Sites  
(including all rural standalone sites)

**6** Informational Presentations

# SUCCESS STORIES & PROGRAM IMPACT



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## UBC FAMILY PRACTICE RESIDENCY SITE PILOT PROJECT

A pilot to deliver RTVS-integrated clinical simulations to all UBC Family Practice residency sites, especially the seven standalone rural sites. Residents increased their confidence and interest in rural practice, learned how to connect with RTVS and experienced the benefits of RTVS utilization. This initiative aimed to equip future rural practitioners and foster RTVS adoption, enhancing health-care access and quality for rural communities in BC.

*"I think knowing that RTVS is available has increased my ability to consider rural practice. I think that if there wasn't RTVS, I would feel more nervous about going into rural communities... So, it's good to know that there's at least someone that I could call if I was feeling uncomfortable."*

- RTVS Residency Site Project Participant

## FNHA NURSING STATION COLLABORATION

FNHA Nursing Station nurses are a target population for RTVS uptake, as virtual consultation is invaluable for supporting their practice in remote and isolated communities. Simulation sessions were delivered to all eight nursing stations in BC in collaboration with FNHA Remote and Rural Practice. The session featured telehealth cart demonstrations and specially tailored cases. FNHA learners reported improved confidence using technologies to access RTVS and comfort calling an RTVS Provider for help.

*"Great support, flexibility and guidance. I appreciate the collaborative focus and support to follow our processes. The overview of RTVS and summary were succinct and focused. A nice addition."*

- FNHA Nurse RTVS Simulation Participant



Dr. Brydon Blacklaws  
RTVS Simulation Lead,  
RUDI Pathway Lead

# RURAL ROUNDS EDUCATION HUB



Virtual synchronous webinar program featuring monthly case-based, interactive presentations and a biannual focused education series tailored for the learning needs of rural health-care providers. [Learn more about Rural Rounds.](#)

## PROGRAM LEARNING GOALS

Provide rural health-care providers an opportunity to:

- engage in high-quality synchronous education led by subject matter experts
- synthesize learning through thoughtful, case-based review
- connect with other rural healthcare providers

## RURAL ROUNDS BY THE NUMBERS

 MONTHLY SERIES

 FOCUSED SERIES: PEDIATRIC DERMES

7

Synchronous  
Virtual Webinars

986

Session  
Registrants

437

Live Session  
Attendees

12

Synchronous  
Virtual Sessions  
(Two Series)

320

Series  
Registrants

528

Total Session  
Attendees

# SUCCESS STORIES & PROGRAM IMPACT



CPD.RURALROUNDS@UBC.CA

## ITERATIVELY IMPROVING PEDIATRIC DERMES

Iterative changes are implemented each time Pediatric DERMES is delivered to continually improve the learner experience and increase session attendance. The transition from series to individual session registration in FY23 resulted in a 98% increase in registrations overall. In FY24, changing the delivery schedule to biweekly sessions for 3 weeks (instead of single sessions for 6 weeks) increased registration by an additional 80% and was well received by learners.

*"This was so excellent from both content covered and pedagogical approach!! Thank you so much! I plan to revisit the recordings and incorporate much into my practice."*

-Pediatric DERMES Participant

## REDUCING RURAL PROVIDER ISOLATION

Rural Rounds covers a diverse range of topics meticulously tailored to the realities of rural health-care practice. By offering a virtual platform for connection and fostering dialogue among participants, we not only equip providers with essential knowledge but also combat feelings of professional isolation, ultimately strengthening rural health-care networks and improving patient-centered care in rural communities.

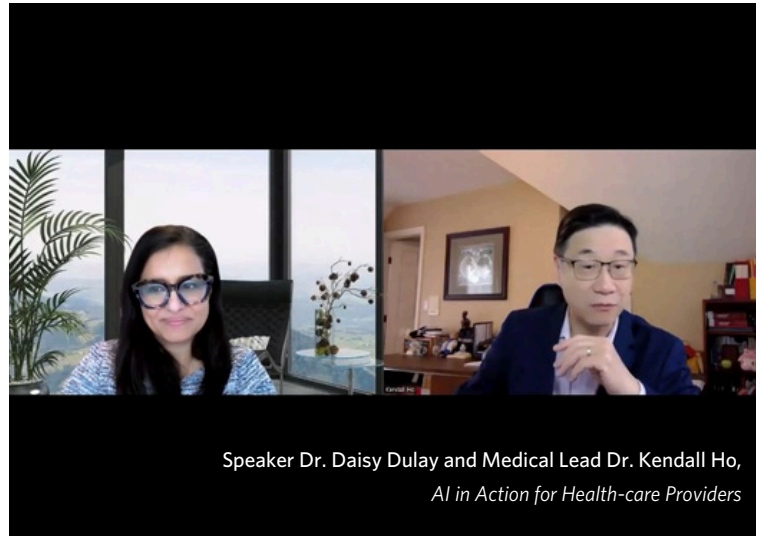
*"I love attending rural rounds because it helps me stay current and it helps me feel connected to like-minded peers."*

-Rural Rounds Participant



Dr. Wingfield Rehmus,  
Pediatric DERMES Lead

# VIRTUAL HEALTH GRAND ROUNDS (VHGR)



Virtual quarterly webinar program featuring case-based, interactive presentations that explore transformative, technology-enabled health-care delivery. [Learn more about VHGR.](#)

## PROGRAM LEARNING GOALS

- bring together health-care and technology professionals to forge and enhance relationships and enhance relationships and optimize mutual learning
- generate discussion to identify barriers to technology-enabled patient-centered care
- normalize the daily use of safe and effective technology in health-care throughout BC

## VHGR BY THE NUMBERS

### QUARTERLY SESSIONS

4

Synchronous Virtual Webinars

474

Session Registrants

225

Live Session Attendees

### PROGRAM COLLABORATORS

27

Sessions delivered in collaboration with Digital Emergency Medicine and Rural Education Action Plan since program inception

8209

Kilometers between RCPD office (Vancouver, BC) and the furthest collaborator (Tübingen, Germany)

# SUCCESS STORIES & PROGRAM IMPACT



CPD.VHGR@UBC.CA

## SUPPORTING THE TRANSITION TO VIRTUAL CARE

Virtual Health Grand Rounds strategically collaborates with subject matter experts to equip learners with essential guidance to effectively deliver virtual health-care services in the post-pandemic era. Sessions underscore the transformative potential of evolving technologies and affirm that when provided thoughtfully and with intention virtual care can serve as a cornerstone for improved patient-centered care in rural communities.

*"Tips and tricks to do virtual assessments is always helpful. The more tools, the better as we enter a world of hybrid medicine."*

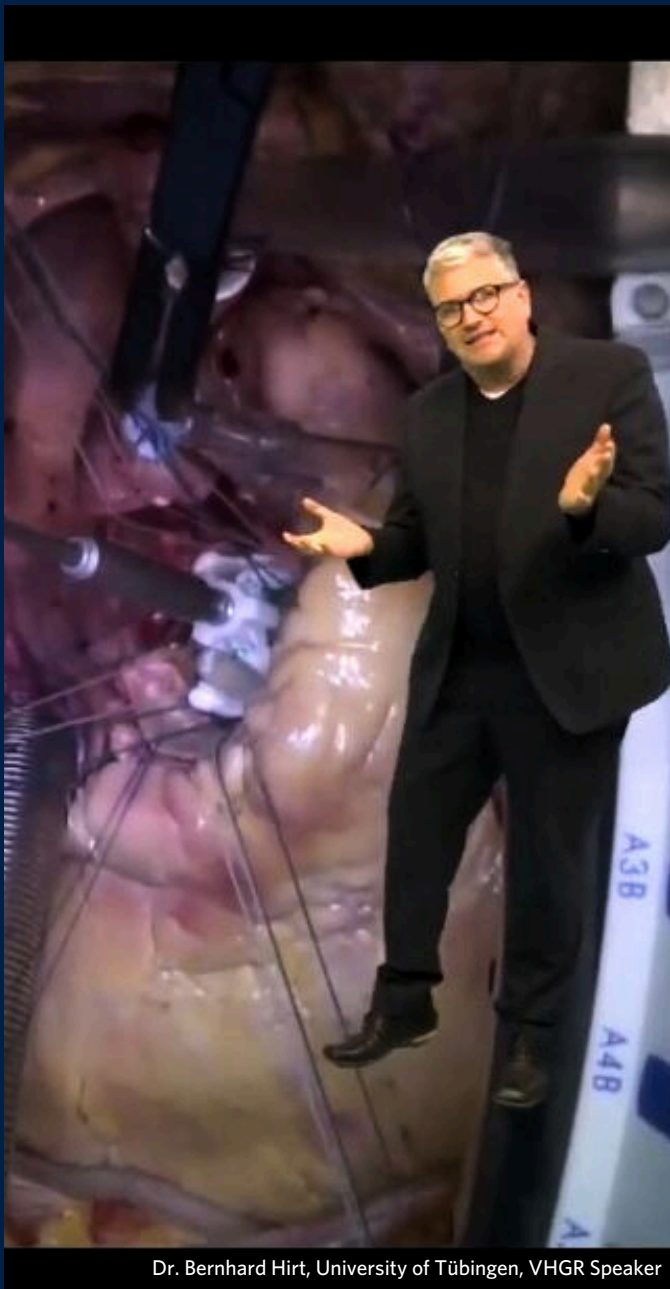
-Virtual Health Grand Rounds participant

## REIMAGINING WHAT'S POSSIBLE THROUGH INTERNATIONAL COLLABORATION

Dr. Bernhard Hirt is reimagining what's possible in medical education by leveraging technology to revolutionize the learning experience. Dr. Hirt's work is quickly surpassing traditional learning models as his team utilizes broadcast technology to share live surgery footage online and employs AR/VR for immersive anatomy lectures. Showcasing these advancements in a Virtual Health Grand Rounds session challenged learners to embrace technology's potential to deliver engaging, valuable and cutting-edge medical education.

*"I find the Virtual Health Grand Rounds to be a practical way to stay updated on a variety of interesting topics... I'm passionate about leveraging new technologies for educational purposes, which is why I was so excited about this webinar."*

-Virtual Health Grand Rounds participant



Dr. Bernhard Hirt, University of Tübingen, VHGR Speaker

# RURAL POINT OF CARE ULTRASOUND (POCUS) ROUNDS



Monthly virtual rounds series based on rurally focused POCUS topics, learnings and situations. The Rural POCUS Rounds series aims to increase the use of, experience with and community surrounding point-of-care ultrasound for rural-based health-care providers. [Learn more about Rural POCUS Rounds.](#)

## PROGRAM LEARNING GOALS:

- improve rural POCUS skills and confidence
- build a POCUS community of practice including mentoring
- improve patient care through use of POCUS

## POCUS ROUNDS BY THE NUMBERS

■ MONTHLY SERIES

8

Sessions Delivered

994

Session Registrants

343

Live Session Attendees

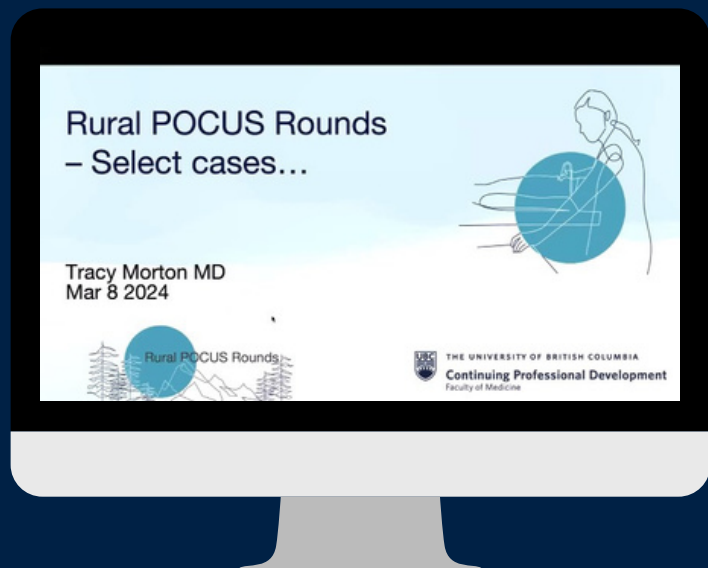
# SUCCESS STORIES & PROGRAM IMPACT

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## TOPIC EXPLORATION

The Rural POCUS Rounds Planning Committee began the fiscal year by creating multiple sessions under two specific focused series: Abortion Care and Musculoskeletal Point-of-Care Ultrasound. After the completion of those series, evaluations showed that the target audience craved various topics across the POCUS landscape. Heading into 2024, the team decided to pivot our rounds into one-off sessions that focused on various topics, such as Appendicitis, DVT, Hand & Wrist and many more. This pivot allowed for more flexibility to tackle emerging topics in rural health care.



*"Well-balanced presentation with real-world cases and circumstances."*

-POCUS Rounds Participant

*"Very good presentations with case studies included and opportunities to apply in rural and other settings."*

-POCUS Rounds Participant



# RURAL COACHING AND MENTORING PROGRAMS



UBC Rural CPD's Coaching and Mentoring Program (CAMP) fosters rural practitioner networks to improve your practice, increase your confidence and connect you to rural colleagues. [Learn more about CAMP.](#)

## PROGRAM LEARNING GOALS

- build strong, safe and ongoing coaching and mentoring relationships to empower individuals, nurturing growth, confidence, and resilience in their professional journeys
- cultivate enriching, mutually beneficial local and regional networks grounded in trust, collaboration and collective care
- champion for the seamless integration of physicians into rural healthcare, and encouraging retention through personalized support tailored to their unique practice environments

## CAMP BY THE NUMBERS

### PROGRAM STATISTICS

**389**

total active participants

**146**

total International Medical Graduates (IMG) participants

**93%**

satisfaction rate

### SUMMARY OF MENTORING HOURS

**19 HOURS**

skill development & orientation

**50 HOURS**

group mentorship

**1K+ HOURS**

peer mentorship

# SUCCESS STORIES & PROGRAM IMPACT



CAMP.RCPD@UBC.CA

## SUPPORTING RURAL LEARNING

Sustaining and growing partnerships with rural networks has allowed CAMP to dive deeper into the perceived and unperceived needs of diverse learners to support their transition into Canadian practice.

A rural IMG and new-to-practice physician received mentorship from a retiring emergency medicine physician. Here's what her mentor said about their experience:

*"I am really enjoying the opportunity... to engage with and support [mentee] as a new to practice physician. We have already made some significant gains in supporting her integration in to rural community practice, and in supporting her clinical confidence across a number of key domains of clinical care."*

-CAMP Coach/Mentor



## HANDS-ON MENTORSHIP

Pediatric airway can be a daunting experience for health-care practitioners, especially those in rural and remote communities where physicians may not get enough hands-on practice.

Through a new relationship with the site coordinator at BC Children's Hospital, CAMP has supported two RSON FPAs from Powell River to gain a refresher in pediatric airway and anesthesiology.

*"Everyone was really welcoming at Children's, it was a positive learning environment, and I got a lot of volume of pediatric anesthesia which was perfect!"*

-CAMP Coachee/Mentee

# PERSONAL LEARNING PLANS (PLP)



Our program symbol shares the opportunity of new beginnings and transitions (Butterfly), nourished by love and compassion (Rose), and supported by protection (the Eagle in the Sun). Our symbol comes from the spirit of Clayton Gauthier, a Cree/Dakelh author, muralist and multimedia artist.

Personal Learning Plans connect new-to-rural practice physicians (< 5 years) and International Medical Graduates (IMG) with experienced Physician Advisors. Our program contributes to the optimization of clinical practice by supporting physicians to identify learning needs and opportunities.

[Learn more about PLP.](#)

## PLP BY THE NUMBERS

PERSONAL LEARNING PLANS

36

Plans completed in April 2023-March 2024

117

Plans completed since 2019

38

Plans started in April 2023-March 2024

PLP LEARNERS

53%  
Rural

47%  
Urban

83%  
IMG

17%  
New-to-rural

75%  
Family  
physicians

17%  
Specialists

8%  
Residents

# SUCCESS STORIES & PROGRAM IMPACT



CPD.LEARNINGPLANS@UBC.CA

## ER SKILLS MENTORING

PLP has piloted a process in collaboration with CAMP to work with an Emergency Room Skills mentor to support learners. Dr. Richard Oudin (Prince George, BC) is a CAMP mentor and rural locum with experience working in various rural and remote communities.

PLP worked with a rural IMG learner with extensive experience as a family physician and formal training in Emergency Room Skills but felt unprepared to support multiple rural communities and manage mass casualty incidents. After connecting them with Dr. Oudin for ER skills mentoring, the team noticed a significant shift in their perspective. They were open to diverse learning options, including mentoring in a high-volume urban center and ultrasound skills. They also expressed a renewed enthusiasm for learning.

## FPA JOURNAL CLUB

PLP was invited by Dr. Kirk McCarroll to coordinate the development of an online journal club for FPAs across BC. The journal club offered four sessions on adult, obstetric, pediatric and regional anesthesia. The content was developed and moderated by anesthesiologist specialists.

*"I really appreciate all Kirk has done to try and bring in regular CME events for FPAs and to increase collaboration/interaction between FRCP anes and FPAs through things like journal club."*

-FPA Journal Club Participant



Lillooet, BC

# INDIGENOUS PATIENT LED (IPL) CPD



*This piece depicts a frog facing forward. Looking straight forward represents respect and honor – no looking up or down at one another. There's a feather in the middle, above the frog, that represents the road of life. Each feather is sacred, no feather in the universe is the same. Some feathers are small, some are big, some are soft and smooth, some are rough and tattered. Each of us have our own road to walk. Let's walk with love, light and respect for all things making our feather soft and smooth. The feather pointing up represents challenge. That is why most of our headdresses the chiefs wear, the feathers are pointing upwards, taking on any challenges this life gives us. The sun and moon represent the balance of life. Light and dark, up and down, left and right, cold and hot. We all need balance to grow. To grow emotionally, mentally, physically, spiritually. We are blessed to be here and learn from all that life gives us.*

IPL is an Indigenous Elder- and community-led program that aims to improve Indigenous health outcomes by increasing access to culturally safe care in BC rural settings. [Learn more about IPL.](#)

## PROGRAM LEARNING GOALS

- build safer relationships between Indigenous communities and rural health professionals
- explore cultural humility as a pathway toward cultural safety
- learn trauma-sensitive practices for offering health care rooted in cultural safety for Indigenous peoples

## IPL BY THE NUMBERS

NAWH WHU'NUS'EN COURSE LEVEL 1

7

3-hour  
workshops  
delivered since  
January 2023

384

Medical  
professionals  
attended

NAWH WHU'NUS'EN COURSE LEVEL 2

2

Series of 2.5-  
hour workshops  
delivered

108

Medical  
professionals  
attended

# SUCCESS STORIES & PROGRAM IMPACT



ALISA.H@UBC.CA

## NAWH WHU'NUS'EN: IMPACT ON THE LEARNER

Learners are motivated to change how they approach their own practice and wellbeing, become more aware of their impact on their patients and advocate for systemic changes to support a shift to trauma-sensitive practice and counter racism in health care.

Learners report a notable sense of safety while taking the courses; the power of witnessing trauma-sensitive interactions in real time; and the sense that adopting trauma-sensitive approaches can improve their wellbeing, sustain them in practice and improve quality and safety in the health system.



The Nawh whu'nus'en team

*"It changed me. Changed my lens... the way that I experience patients and myself...profound learning!"*

*"As the presentation unfolded, I felt an increasing sense of safety, calming and grounding... I felt in my body what was being demonstrated and taught."*

*"Slowing down, seeing cues, reacting in the appropriate ways have changed [so] much for me."*

-IPL Participants

## NAWH WHU'NUS'EN: IMPACT ON THE TEAM

Team and faculty members have also identified positive impacts from this work:

*"We can take the best of the...things that are just common parts of our [modern] world now, and still infuse the principles and practices and ways of knowing and being to make them safe and to make it so that Indigenous people can participate in ways that don't activate our nervous systems as much, and don't cause as much harm."*

-Dr. Terri Aldred

# LOOKING AHEAD



UBC Rural CPD will continue to prioritize learning and continuous improvement driven by a thriving team dedicated to leading innovative work driven by community needs. We will continue to value relationship-building with our rural collaborators, which has been foundational to our programs success.

We will keep investing in our broader goals such as patient care, rural recruitment and retention, finding joy in work and cultural safety, illustrating the impact of strong relationships and collaborative efforts.