



Guest Speaker—Cheryl Drewitz—Acting Chapter Coordinator for Rural and Remote Physicians, Ashcroft Area. Division of Family Practice.

Cheryl shared with us that she was temporarily filling in the vacancy left by Tawanda Hatendi. She had been working hard on catch up for the area. She will be leaving however, as she has accepted a position with Doctors of BC. The search is on for another replacement. This leaves the Ashcroft physicians unsupported for the time being by this physician support organization. See the Mission and Vision of this organization below.



*Dr. Stephen Akinkumi, the most recent addition to our healthcare in this catchment area, has left the clinic in Ashcroft and Clinton.*

*Patients were notified by telephone of cancellations of appointments, and were scheduled in to see other doctors as appointments became available. Interior Health reported that he is doing locum coverage in Kamloops.*

MISSION

Our Division supports and enables rural physicians to enhance rural health, rural work and rural living in their communities.

VISION

Locally-developed, innovative, accessible, and sustainable health services for thriving rural communities.

We are missing the familiar faces who work in the laboratory in Ashcroft. We learned from the Interior Health Manager, Mike Morrill over the past couple meetings, when asked that coverage in the Emergency Room has been somewhat challenging for laboratory technologist. Although Lab staff is not Mike's responsibility, he shared that at times there hasn't been any laboratory tech over the weekends to cover the Emergency Department.

A Point of Care Device (handheld) has been used by the nurses to provide some diagnostic testing to care for patients in addition to their nursing duties.

We had understood the vacancies were due to unplanned absences and an inability to find coverage, especially as restrictions were put in place for staff to move from one facility to another due to COVID19.

We are currently looking for more answers, because the vacancies continue, and there are no postings to replace or cover the absences. We are concerned and asking questions.

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## What is Practice Readiness Assessment—Recruitment of Physicians

In 2015, the province of British Columbia launched an assessment program for internationally educated family physicians who have completed residencies in Family Medicine outside of Canada. This program, known as Practice Ready Assessment – British Columbia (PRA-BC), provides qualified family physicians with an alternative pathway to licensure in BC.

As a program, PRA-BC assessed **126 family physicians** since 2015. These family physicians were placed in **45 communities** throughout BC.

Candidates who successfully complete the PRA-BC program may be eligible to apply for provisional registration and work under the sponsorship of a health authority and a supervising physician in a designated return-of-service community practice in BC. The program requires a three-year return-of-service commitment in a selected BC community from successful candidates.

PRA-BC is a collaborative venture between the College of Physicians and Surgeons of British Columbia, the Joint Standing Committee on Rural Issues comprised of representatives from the provincial government and Doctors of BC, the University of British Columbia Faculty of Medicine's Division of Continuing Professional Development, BC health authorities, and Health Match BC.

Five physicians have selected Ashcroft Health Centre and Hospital as their return of service community. Two remain.

for more information check out this link here.

[www.prabc.ca/](http://www.prabc.ca/)

- Dr. Amgad Zake—now practising in Surrey, BC
- Dr. Deborah Obu—running a Body Clinic in Ashcroft, Calgary and Regina according to her website.
- Dr. Stephen Akinkumi—Locum relief in Kamloops, BC

Interior Health confirmed in our last discussions that they concur that we need 3 physicians.

They did not share the plan for getting us there and keeping us there.

Recruitment and Retention go hand in hand. We have always maintained that transparency, consistency and sustainability are the key factors in providing healthcare services in our communities.

We have offered once again to collaborate, cooperate and support recruitment and retention efforts of not only physicians but all healthcare professionals required to keep a consistent and sustainable healthcare delivery in our community.



**We support recruitment and retention efforts by Interior Health and we will assist to support health care professionals of all disciplines to adapt, integrate, live and work in our communities through positive promotion**



## Excerpt from Denman Hornby Discharge Planning Green Armband Program

*Greetings. If you are reading this, you have been discharged from the Emergency Room at Comox Valley Hospital and you now need to figure out a way back to the islands.*

*This program has been started and funded by the Denman Island B.C.*

*Ambulance and the **Hornby & Denman Community Health Care Society.***

*Steps listed in the package are to help you with planning a safe and expedient return home.*

*When you left the island you had a GREEN hospital arm band put on. We ask that you keep that on during your stay at the hospital. This is an indication to hospital staff that you, as a resident of one of the islands, require special discharge planning to get home because of ferry schedules and arrangements for rides across the island to your home .*

Discharges from Royal Inland Hospital can be challenging both for the hospital staff and the patient and their family.

If you are transported via ambulance to RIH, you are deposited there with what you have on your back and in your pocket.

When you are lucky enough to be discharged, often times you are left to your own devices to find a way to get home.

This is a group with the Community Paramedic in their communities spear heading a plan to help identify residents of their community to everyone in the Emergency Department and hospital as someone who needs extra considerations and planning to discharge them to their community / home.

It is a work in progress, and they have shared their draft form of the program to date. We should be looking at something similar in our communities.

Our goal is to advocate for the right numbers of practicing physicians and other healthcare professionals in the catchment area in order to promote consistent and sustainable health care services for 7 days per week including emergency services.