



First Nations Health Authority
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FNHA Virtual Health Services Overview

FNHA Primary Care & e-Health Team, Sep 29, 2020

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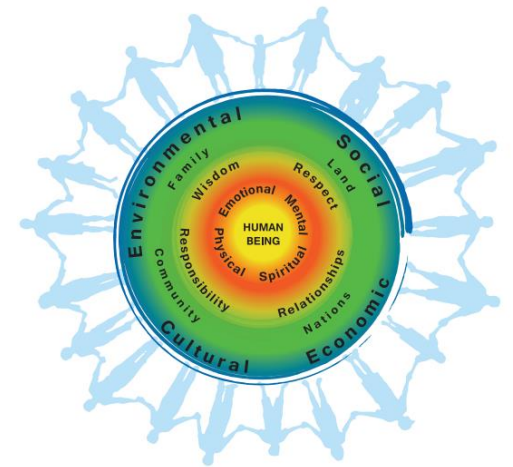


Background



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- The dual public health emergencies of the COVID-19 pandemic and BC's overdose crisis have deeply affected BC First Nations communities.
- Early in the pandemic, health care operations in a number of communities were reduced or closed.
- In 2020, the rate of overdoses and OD deaths in BC spiked drastically, with disproportionate representation in the First Nations population
- Early feedback from FNVDoD strongly reinforced the need for increased and improved access to substance use and mental health specialty supports
- In urgent response, the FNHA launched the **First Nations Virtual Doctor of the Day** and the **First Nations Virtual Substance Use and Psychiatry Service**.



Overview: FNHA Virtual Health Services

1. First Nations Virtual Doctor of the Day (FNVDOD)

- Primary Care Service: Family Practice General Practitioners (GPs)
- Self-referral by client
- 7 days/wk, 8:30-16:30
- Zoom or Phone
- Launched in April 2020
- **1-855-344-3800**

2. *New* First Nations Virtual Substance Use and Psychiatry Service (FNVSUPS)

- Specialty Service: Physician Specialists in Addictions Medicine and Psychiatry
- Referral from Health and Wellness Provider
- 5 days/wk (Mon-Fri)
 - Psychiatry: 10:00-15:00
 - Substance Use: 13:30-17:30
- Zoom (strongly preferred) or phone
- Launched in August 2020
- **1-833-456-7655**

Both services are available to all First Nations people and their families living in BC



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First Nations Virtual Doctor of the Day (FNVDDOD)

FNVDOD Introduction



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The purpose of FNVDOD is to:

1. To improve access to, timeliness and quality of culturally safe, integrated primary health care services both virtually and closer to home;
2. To develop primary health care that is designed, led and delivered by and with First Nations
3. To improve and establish key partnerships that promote innovation and transformation of health and wellness services with First Nations



FNVDOD Service Overview

- The program is:
 - Virtually-delivered culturally safe primary care medical services (GPs) including assessment, referral, treatment, & follow-up
 - Can provide longitudinal care
 - Available through self-referral
 - Regional coverage model
- The program is not:
 - An emergency or acute crisis response service
 - A replacement service for where successful pathways already exist



Our Current FNVDOD Team:



Our continually growing team currently has:

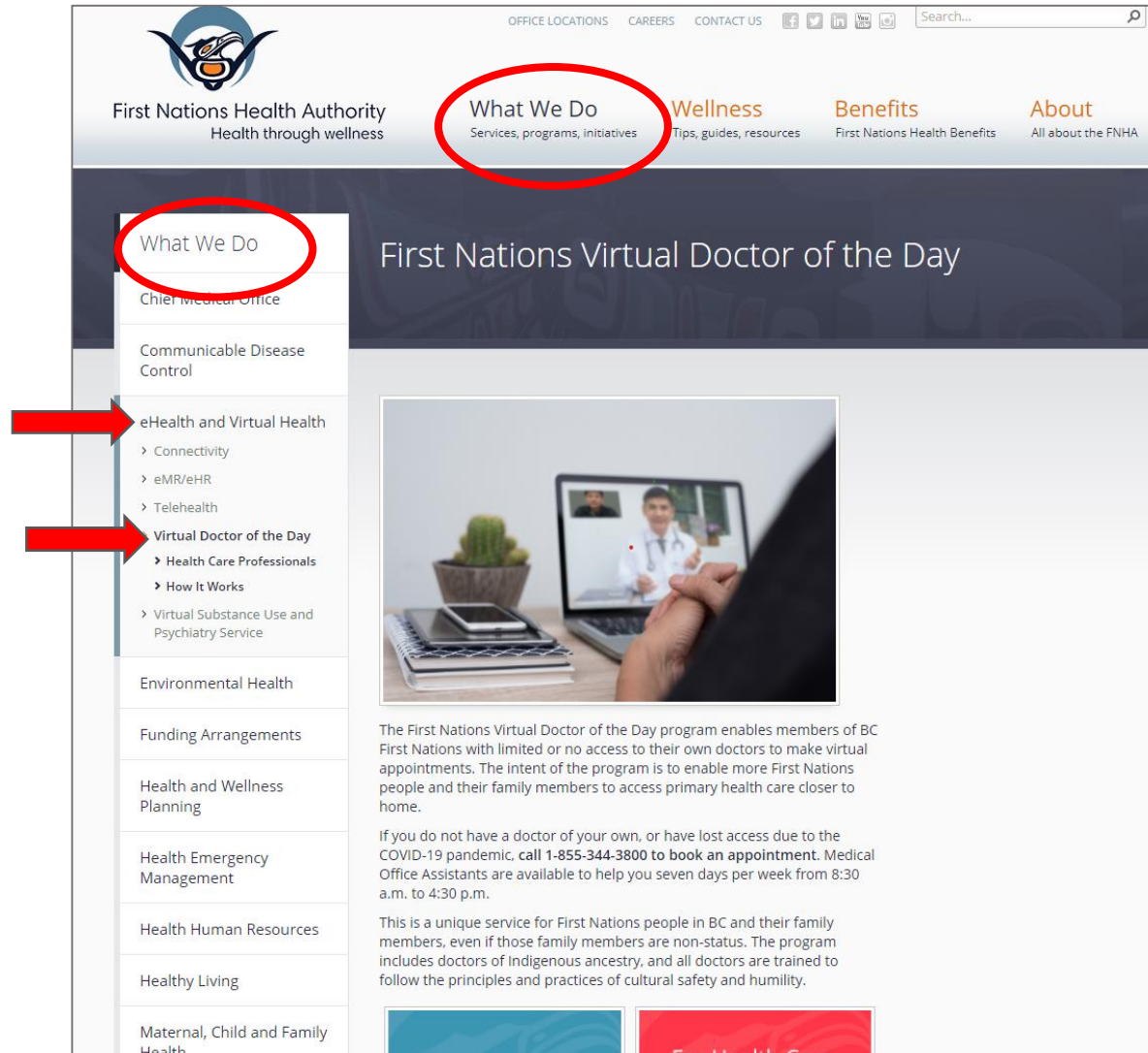
- 36 Physicians (GPs)
- 4 Medical Office Assistants (MOA)



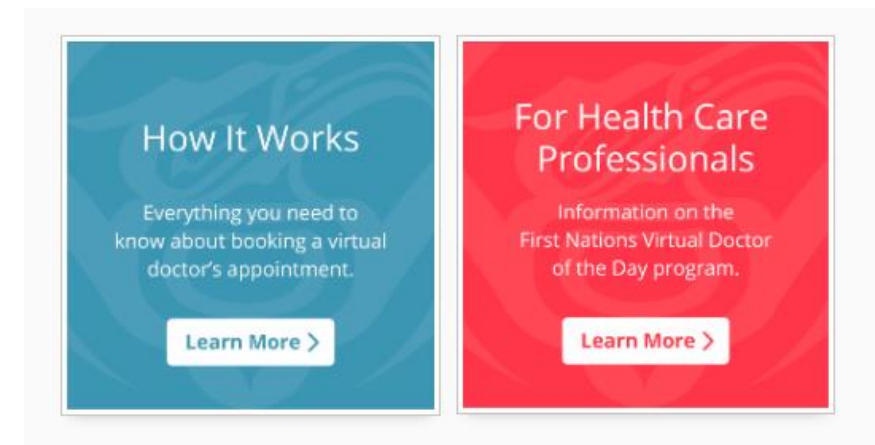
FNVDOD page on www.fnha.ca



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Scroll down...



....+ Podcasts, Posters, & more!



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First Nations Virtual Substance Use and Psychiatry Service (FNVSUPS)

Introduction

- The purpose of the service is to:
 1. Provide virtual access to addictions specialists and psychiatric care for First Nations people and their family members living in BC
 2. Provide addictions medicine and psychiatry services where every client encounter is aligned with the principles and practices of cultural safety and humility
 3. Provide addictions medicine and psychiatry services where collaborative care planning and wraparound care services are integral to all client encounters



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FNVSUPS Service Overview



- The program is:
 - Virtually-delivered, culturally safe specialty substance use and psychiatry services including assessment, case planning, treatment, & follow-up
 - Able to provide longitudinal care
 - Designed to work closely with the client's circle of care
 - Available through referral from a health and wellness provider
 - Referring provider plays key role in appointment & care planning
 - Available for provider to provider consultation
 - Province-wide coverage model supported by MOA and Care Coordinator
- The program is not:
 - An emergency or acute crisis response service
 - A replacement service for where successful pathways already exist



Service Availability (Phase 1)



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Substance Use

Phone line open
10:00am-5:30pm

Psychiatry

- Mon-Fri **1:30-5:30pm (Oct 1 – 8hrs/day)**
- 12yrs+
- Consultation, assessment & diagnosis
- Care, treatment planning & follow-up
- Withdrawal management and access to risk mitigation treatment or “safer” supply
- OAT induction and maintenance
- Additional care related to alcohol, substance use, and commercial tobacco concerns.
- Participation in ongoing wraparound care in collaboration with client’s identified circle of care
- Prescribe and evaluate medication profile as necessary
- Other related supports

- Mon-Fri, **10:00am-3:00pm (Oct 1 – 8hrs/day)**
- 16yrs + (some capacity for 12ys+ in Phase 1)
- Consultation, assessment & diagnosis
- Care, treatment planning & follow-up
- Concurrent disorder management
- Participation in ongoing wraparound care in collaboration with the client’s identified circle of care
- Prescribe and evaluate medication profile as necessary
- Connection and referral to other regional and provincial mental health services as appropriate
- Other related supports

Care planning will always take into account available pharmacy, staffing & other support resources, as well as ensuring the client's situation is assessed to be safe to manage the proposed treatment.

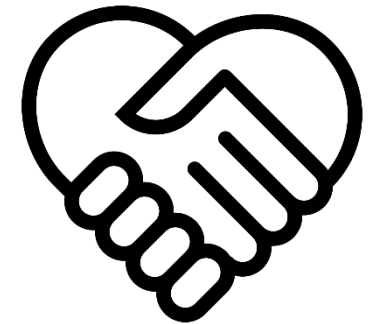


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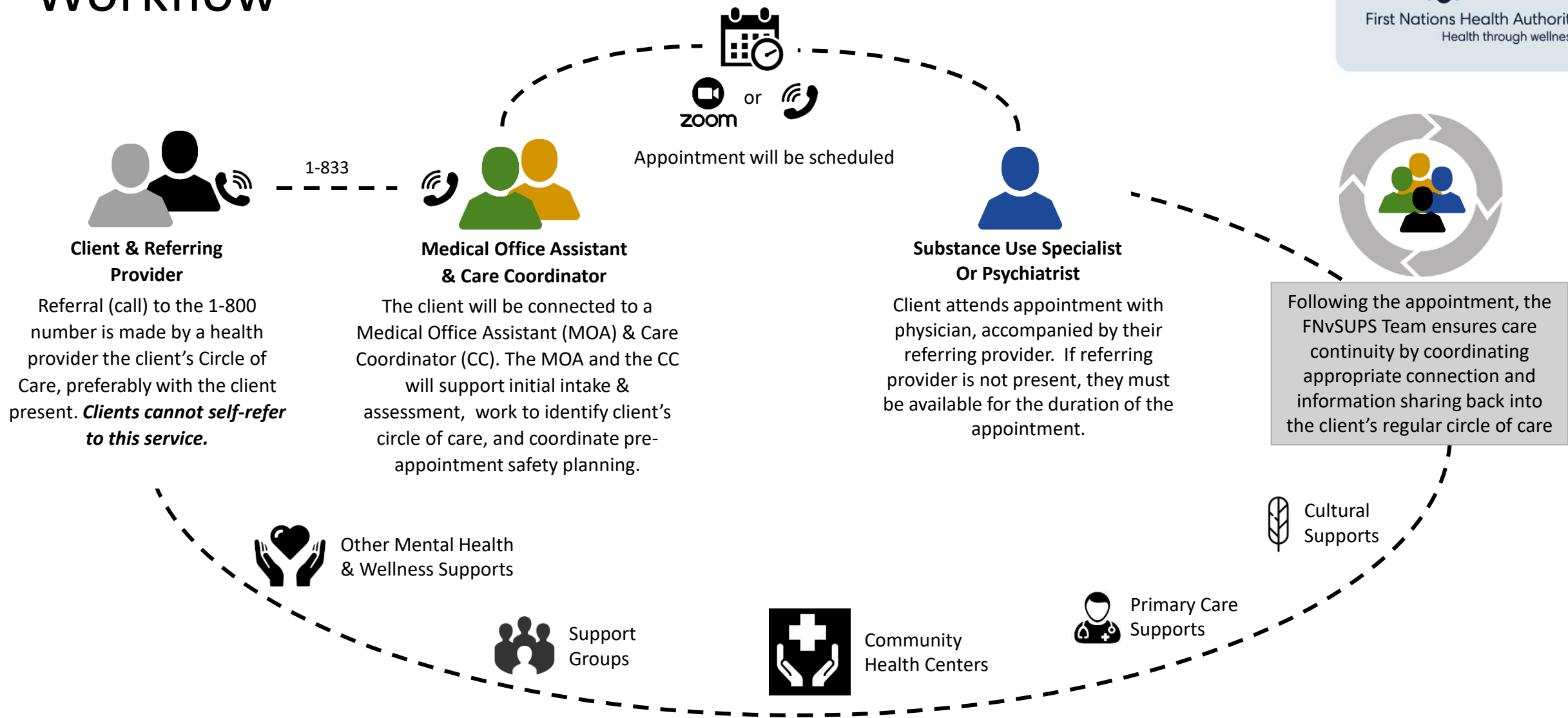
Our Current FNvSUPS Team:

Our continually growing team currently has:

- 17 Physicians:
 - 10 Addictions Medicine Specialists
 - 7 Psychiatrists
- 3 Medical Office Assistants (MOA)
- 2 Care Coordinators
- 1 Director, Mental Wellness Clinical Services



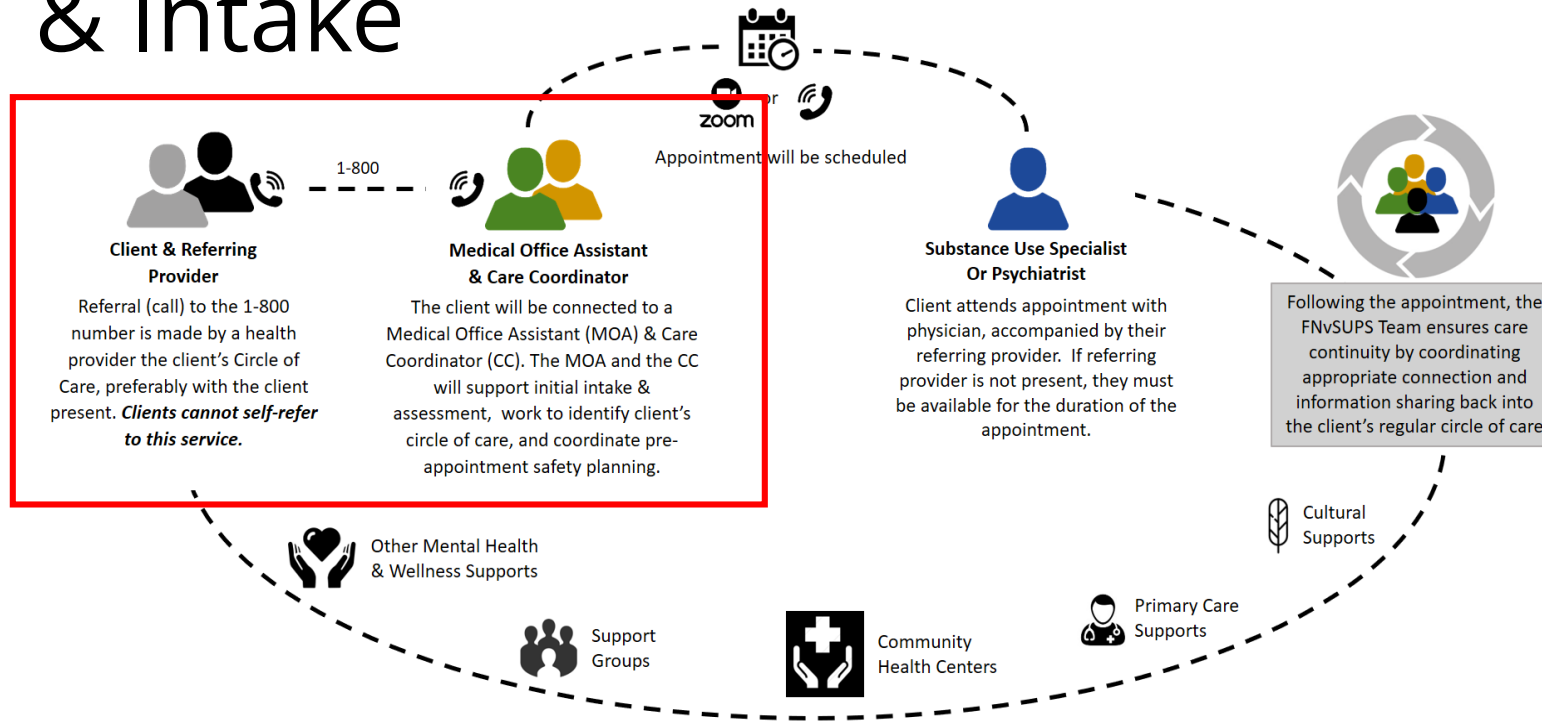
Workflow



Referral & Intake



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- Make referral call in to 1-833-456-7655, preferably with client present
- Work with **Care Coordinator** & client to identify referral reason, client history, and circle of care supports
- Assist client & Care Coordinator to develop safety plan, identify community resources in case of emergency
- Plan appointment time when referring provider can be present or available

FNvSUPS Referral Form

Triage: (Care Coordinator to complete)

Same Day	Next Day	48 hrs	Within a Week
----------	----------	--------	---------------

Referral info:

Name of person referring:		Role:
Phone Number:	Email:	Date of referral (DD/MM/YYYY):

Client information:

Name:		DOB: (DD/MM/YYYY):
Sex & Gender Orientation		Preferred Pronouns:
PHN:	Status Number:	Community:
Email:		Phone Number:
Name of Emergency Contact Person:		Phone Number of Emergency Contact Person:

Treatment & Medical Information:

History of violence, suicidal ideation, or suicide attempts?
Do you feel there is a <i>current</i> risk of harm to self or others?
In the client's words, what are they hoping will be the outcome of this consultation?
Practitioner SBAR:
Situation: What is happening at the current time that has led to this referral?
Background: Briefly explain circumstances leading up to this situation – put situation into context.

Assessment: What have you found/tried?

Recommendation: Action requested/recommended – what do you want

Relevant conditions and/or diagnosis(es):

Recent and/or relevant mental health or substance use-related hospitalizations:

Current treatments and/or regular health & wellness support (Traditional Medicine, Counseling, other) :

Current Medications (prescribed, recreational or herbal) + relevant medication history:

Circle of Care:

Include patient's primary care practitioner

****During appointment, specialist to confirm directly patient's consent to share information with those named below ****

Name	Role	Contact	Type of info to share

Additional Notes:

May include: Notable family and community factors, relevant recent events (individual, family, community), etc.



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GP/NP Referral Form

Email
FNVSUPS@fnha.ca
for a copy

FAX in completed
forms

****All other
providers will work
through this info by
phone in real time
with the Care
Coordinator****

My Wellness Guide:

Part of safety & wellness planning
for the client during intake
process

My Wellness Guide



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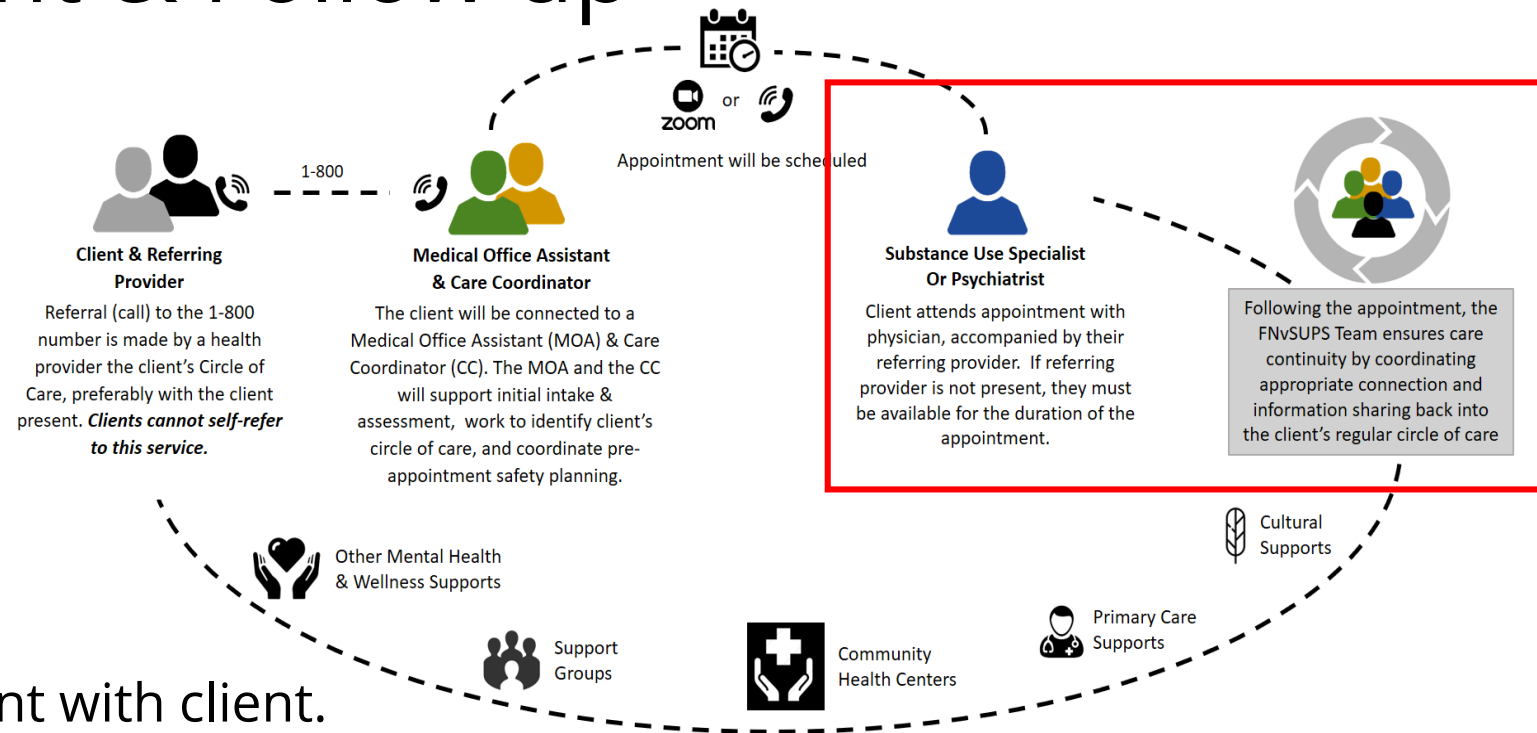
How do I know that it's time to seek support? (thoughts, images, mood, situation, behavior)	
1)	_____
2)	_____
What three things can I do to calm myself until I can access my supports? (Ceremony, relaxation techniques, physical activity)	
1)	_____
2)	_____
3)	_____
Who from my circle of care can I call when I'm not feeling well? (Physically, Emotionally, Spiritually, or Mentally)?	
1) Name: _____	Phone: _____
2) Name: _____	Phone: _____
Who can I call if I don't feel better after talking with my circle? (Elder, Priest, or Community Health Representative)	
1) Name: _____	Phone: _____
2) Name: _____	Phone: _____
Where can I go that I feel safe? (Sacred spaces on land or water, my home, friend or family homes)	
1)	_____
2)	_____
What local health care professional can I call or go see? (Physician, Counsellor, Peer Support Worker)	
1) Physician Name: _____	Phone: _____
2) Counsellor Name: _____	Phone: _____
3) Peer Support Name: _____	Phone: _____
4) Local Urgent Care Services: _____	
Urgent Care Services Address: _____	
Urgent Care Services Phone: _____	
5) KUU-US Crisis Line Society 1-800-KUU-US17 (1-800-588-8717)	
What does wellness look like to me? (engaged with family, restarting hobbies, laughing or having fun)	
Is there anything else you feel is important about your wellness, for your team to know?	

Thank you for taking the time to help me understand what is important to you, please feel free to share your Wellness Guide with the important people in your life.

Appointment & Follow up



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- Attend appointment with client.
- If client prefers to attend alone, the referring provider is required to be available for the duration the appointment to assist with local resource questions as needed
- Note that for all initial substance use appointments, clients must be accompanied by the referring provider.
- Following the appointment, the referring provider helps to bridge the care planning between the FNVSUPS team and the local circle of care.

FNvSUPS page on www.fnha.ca



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The screenshot shows the First Nations Health Authority website. The top navigation bar includes links for OFFICE LOCATIONS, CAREERS, CONTACT US, and a search bar. Below this, the main navigation menu features 'What We Do' (circled in red), Wellness, Benefits, and About. The 'What We Do' dropdown menu is open, showing a list of services, with 'Virtual Substance Use and Psychiatry Service' highlighted by a red arrow. The main content area is titled 'Virtual Substance Use & Psychiatry Service' and includes sections for 'How It Works | How to Get a Referral | Service Hours | For Health & Wellness Providers', 'Getting a Referral', and a description of the service. A red arrow points from the 'Virtual Substance Use and Psychiatry Service' link in the dropdown menu to the 'For Health & Wellness Providers' section on the right.

Scroll down...

For Health & Wellness Providers

Health and wellness providers are welcome to call the service for consultation if they need additional support or knowledge to attend to the needs of complex clients.

The following guides offer detailed information for providers about the referral process.

[Referral Guide for Health and Wellness Providers \(fact sheet\)](#)

[Health and Wellness Provider webinar \(video\)](#)

[Introduction to First Nations Virtual Substance Use and Psychiatry Service \(presentation\)](#)



First Nations Virtual Substance Use and Psychiatry Service

Referral Guide for Health and Wellness Providers

The First Nations Virtual Substance Use and Psychiatry Service provides responsive, quality access to addictions medicine and psychiatry for First Nations people and their family members living in BC (even if those family members are non-status). The service is an additional tool to help build community health team capacity and enhance wholistic, wraparound care closer to home for substance use and mental health challenges.

1. What is the purpose of the First Nations Virtual Substance Use and Psychiatry Service?

- To provide direct virtual access to addictions and psychiatric care for First Nations people and their families
- To provide addictions medicine and psychiatry services where every client encounter is aligned with the principles and practices of cultural safety and humility
- To provide addictions medicine and psychiatry services where collaborative care planning and wraparound care services are integral to all client encounters

2. Who is eligible for the service?

This is a referral-based service and is available at no cost to all First Nations people and their family members living in BC. Clients cannot self-refer to this service and are encouraged to ask a provider in their circle of care for a referral.

Health and wellness providers can also call the service for provider-to-provider consultation to support the needs of complex clients.

Health and wellness providers call
1-833-456-7655 for assistance or referral

3. Who can refer clients to the service?

Health and wellness providers who can refer clients to the service include, but are not limited to:

- General practitioners
- Nurse practitioners
- Registered Nurses, Licensed Practical Nurses, and Registered Psychiatric Nurses
- Addictions workers
- Wellness workers
- Traditional medicine specialists
- Mental health counsellors
- Community health reps
- Treatment centre staff

Clients who are living away from home and do not have access to a community health and wellness provider can ask for a referral from the **First Nations Virtual Doctor of the Day** service.

If your role is not listed above and you would like to know if you are eligible to be a referring provider, call 1-833-456-7655

Please note that this service is not intended for supporting response to acute health emergencies. In case of emergency, health and wellness providers should call 911 or access existing emergency service pathways.

4. How does it work?

Health and wellness providers call 1-833-456-7655, preferably with the client present. A Medical Office Assistant (MOA) begins the intake process.

If the referring provider is not a general practitioner or nurse practitioner, the MOA will be joined by a Care Coordinator with the First Nations Virtual Substance Use and Psychiatry Service to work through the intake process. The Care Coordinator is a unique and key role to help support intake, assessment, collaborative care planning, education, navigation, and connection to the service in a manner that is culturally safe and trauma informed.

The service is delivered through Zoom for Healthcare at a scheduled time that works for the provider and client. Attending an appointment on Zoom is simple. Clients and providers click the link in the invitation emailed to them by the MOA to launch the appointment.

5. What are the technical requirements for video conferencing?

Providers and clients will need access to a personal computer, laptop, tablet or smartphone. Although most computer devices can launch Zoom, it works best with:

- an internet connection: broadband wired or wireless (3G or 4G/LTE)
- a minimum bandwidth of 600kbps (1.5 Mbps. is recommended). Check internet bandwidth using [Speedtest](#)
- a device that includes a microphone and a headset/headphone. Plugging in a headset prevents an echo in the Zoom meeting

6. What are the service hours?

The service will run on weekdays, with a goal to expand to weekends as need and capacity increase.

- Substance Use / Addictions Medicine: Monday to Friday from 1:30 p.m. - 5:30 p.m.
- Psychiatry: Monday to Friday from 10:00 a.m. - 3:00 p.m.

7. When can I access this service?

The service will be open for referral from community providers starting at 10am on Monday August 24th, 2020.

8. Why do clients need to attend appointments with their provider?

With the client's consent, the service encourages the referring provider or another community health support person to attend the specialist appointment with the client. This ensures that local knowledge is available to the specialist for care planning and that there is community-based continuity of care for the client.

Clients can work with their care providers to choose a location that works best for them. This may include a private room in a health centre or the client's home. Clients and providers can attend sessions together on Zoom without having to be in the same room.

Things to consider when choosing a location include client comfort and privacy, quality of internet connection, phone service, travel distances and provider schedules.

9. What if a client does not have a computer or Internet access?

For reasons related to client safety, all initial consults for this service must be by video. Following the first appointment, specialists prefer to continue with visual appointments; however, phone appointments may be able to be arranged for clients who cannot visit a health centre or do not have easy access to video conferencing, and have consented to have a support person attend for the duration of the call.



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Referral Guide for Health and Wellness Providers

Health and wellness providers call 1-833-456-7655 for assistance or referral



Frequently Asked Questions

- How is cultural safety built into the service?
- How will the service support continuity of care?
- I am worried about how much time it will take for me as a provider to attend appointments with my client.
- What if there is an emergency during the appointment?
- Pharmacy access is an issue in many rural and remote communities. How will FNvSUPS address this?
- Will FNvSUPS include prescription “safer supply”, or what we are now calling “risk mitigation treatment”
- Does the psychiatry service include child assessments?



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Contact:

FNVSUPS@fnha.ca

Thank You!



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Gayaxsixa (Hailhzaqvla)
Huy tseep q'u (Stz'uminus)
Dun'kwu (Haida)
Gila'kasla (Kwakwaka'wakw)
Kleco Kleco (Nuu-Chah-Nulth)
k^wuk^wstéyp (Nlaka'pamux)
Snachailya (Carrier)



Thank You

Mussi Cho (Kaska Dena)
Tooyksim niin (Nisga'a)
Kukwstsétsemc (Secwepemc)
čěčěhaθεč (Ayajuthem)
Sechanalyagh (Tsilhqot'in)
kw'as ho:y (Halq'eméylem)
T'oyaxsim nisim (Gitxsan)