

Sooke Community Health Service Planning

April 2018



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Ministry of Health Strategic Direction

In British Columbia (BC), a fundamental shift is underway in how health care is delivered, particularly for non-hospital services delivered at the community level. Person-centred primary care services delivered by interdisciplinary teams will become the foundation of an integrated system of care¹. Primary care services are defined as health care services delivered by a General Practitioner (GP) or Nurse Practitioner (NP) who has the main responsibility for a patient and is the first point of contact people have with the health care system. Person-centred care means people are involved in their care and supported to make informed health decisions with their families and health care service providers. Person-centred care encourages self-management, prevention and health promotion, informed decision making by patients and stronger patient education.

Primary Care Networks (PCNs) will provide team-based, comprehensive and coordinated care to people while maintaining a link with Health Authority-delivered and community-based services. Timely access to care, including extended hours (evenings and weekends) and same day access for more urgently needed care is a core component of Primary Care Networks. Team-based care means health care services are delivered by a variety of health care professionals depending on the patient's needs. Effective Primary Care Networks will help increase the number of people who have access to and are attached to a primary care provider, such as a GP or NP, improve the experience for patients and providers and ensure that people receive the right care at the right time and in the right location.

Background and Context

Across Island Health, work has been underway for many years to improve local access to primary care and community health services and to connect these services to the broader health care system. Community health services are services delivered by Island Health staff in the community. The South Island Division of Family Practice (SIDFP) and Island Health, through the local Collaborative Services Committee (a local working group made up of leadership from the Divisions and the health authority), jointly plan services for Local Health Area 62 (LHA 62) which includes Sooke, Langford, Metchosin, Colwood, View Royal and Port Renfrew.

Sooke is experiencing significant population growth. This growth, combined with Sooke's unique location, make it a priority area for enhanced service integration. Sooke has a strong history of community engagement and interest around enhanced health care services with solid processes in place to support advancement of the work. There is a well-established Community Health Network (CHN) in Sooke as well as a Primary Health Care Services Working Group chaired by the Mayor. The local CHN, named Sooke Region Communities Health Network (SRCHN), is a partnership of residents, service providers, and local governments living and working in the area that extends from Beecher Bay to Port Renfrew. Since 2003, the SRCHN has assumed a leadership

¹ Ministry of Health Policy papers

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role in the design and delivery of health, social and recreational programs to benefit the residents of the Sooke Region.

Island Health currently provides a wide-range of health care services in Sooke as well as links to other services through telehealth. The Sooke Health and Wellness clinical team is co-located with the Sooke family physicians practicing in the West Coast Family Medical Clinic. Sooke is the primary service point for the communities of Beecher Bay, East Sooke, Otter Point, Shirley, Jordan River and Port Renfrew. Current health services offered in Sooke are listed in Appendix A.

Data

Data sources represent two different sizes of geography. The Sooke Census District (includes primarily Sooke municipality borders, while the Western Communities Local Health Area (LHA 62) includes the Sooke Census District, Langford, Metchosin and Colwood. Both areas are expected to experience significant population growth (see Appendix B).

Population Growth

The population of the District of Sooke grew by 14% between the 2011 Census and 2016 Census² (see Table 1). This population growth is the second highest increase within Island Health over this period, after Langford. The population growth for people aged 65 years and older in the District of Sooke was 48% between the 2011 and 2016 census.

District of Sooke			
Population Distribution and Growth over Three Censuses			
	Census Year		
	2006	2011	2016
	Population		
Total	9,700	11,435	13,000
0 to 14	1,875	2,215	2,325
15 to 64	6,620	7,765	8,525
65 and over	1, 210	1,455	2,150
	Percent Growth from Previous Census		
Total		17.9%	13.7%
0 to 14		18.1%	5.0%
15 to 64		17.3%	9.8%
65 and over		20.2%	47.8%

Table 1. District of Sooke Population and Growth

² Census, 2011, 2016

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Attachment

- **2015/16** data indicates that 65% of the population of Sooke is attached to a GP (*GP attachment definition: A single GP has provided more than 50% of the person's care*³).
- 72% of the population in the District of Sooke and 74% of the LHA 62 population is attached to a physician practice (a group of physicians practicing together). This is slightly lower than the BC and Island Health percentage in terms of primary care access⁴).

Health Status and Health Services Utilization

In general, Sooke residents have lower rates of chronic disease than the Island Health average, although rates of depression are higher and are rising. Sooke residents use the Emergency Department less than other Island Health residents and have higher levels of home care visits:

- Sooke residents had a lower rate of unscheduled emergency visits compared to Island Health, Greater Victoria and Saanich⁵.
- Sooke residents had a daily average of nine Victoria General Hospital (VGH) Emergency Department (ED) visits in 2016 (6% of total ED visits to VGH).
- In 2016, 16% of visits to VGH ED by Sooke residents were for resuscitation or emergent issues.
- The average rates of chronic diseases for Sooke residents are lower than Island Health rates for heart failure, dementia, chronic kidney disease, hypertension and stroke and are higher than Island Health for episodic depression⁶.
- Incidence rates for ischemic heart disease (deficient supply of blood), depression and mood and anxiety disorders are increasing.

Sooke Stakeholders Consultation

In April 2017, the Capital Regional District (CRD) Hospitals and Housing Committee endorsed Sooke Mayor Maja Tait's motion entitled, "Support for Pilot Project: A Regional Health Care Facility in Sooke". The Sooke Planning Steering Committee was subsequently formed. Committee members include Mayor Tait as well as representatives from the Capital Regional District, Sooke Family Physicians,



³ BC Ministry of Health: Local Health Area Profile, October 2016, Glossary of Terms

⁴ Ministry of Health

⁵ Island Health IDEAS

⁶ Census, 2016

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SIDFP, Island Health and the CHN.

As a means to share information about Sooke's health needs, current health care services and to gather input from community stakeholders to help influence the service delivery model for the Sooke Region, a Sooke Community Stakeholders Consultation was held in November 2017.

The key themes emerging from the Stakeholder Consultation Event are:

1. Improved Access to Primary Care:

Participants identified the desire for more primary care providers (GPs and Nurse Practitioners), citing limited clinic space and incentives to attract more GPs as barriers. The desire for access to longer primary care hours in the evenings and on weekends, including Sundays and holidays was expressed. Same-day access to primary care in urgent circumstances was also desired.

Many participants indicated that co-located space would be desirable with all-primary health services integrated (virtually or by physical co-location).

2. Care provided by a team of health care providers (team-based care):

Participants indicated that having a care team focused on seniors would be valuable. Also, having Nurse Practitioners or Registered Nurses attached to the Physician clinic would be desired to improve access to primary care.

3. Access to more specialized, locally accessible services:

Participants identified the need for more access to Mental Health and Substance Use services, including walk-in services. Also, increased services for isolated seniors were suggested, along with the idea of having a drop-in seniors' activity centre.

4. Improved access to other key enablers:

Currently x-ray services in Sooke are available 7.5 hours/week (Tuesday 8:30am-11:00 am, Wednesdays and Thursdays from 9am-11:30am) and laboratory services are available on weekdays (8am-4pm Mondays to Fridays). The community identified more service hours are desirable to improve access and reduce the need to travel outside the community for these services. Maximizing the use of electronic medical/health records was also cited as a key enabler to bolster service provision.

5. Supporting population wellness:

Improved health literacy (access to information on wellbeing and how/where to access services) was deemed a priority for participants. Improved transportation (both within Sooke and to destinations outside Sooke) was also cited by participants as needed, particularly on weekends (*note: transportation issues are considered out of scope for this plan*). Road improvement needs were also identified.

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Next Steps:

Service planning for Sooke is a partnership focused on the development of local solutions to address gaps in primary and community care. Sooke service planning will also benefit and align with broader planning to meet patient and population needs across LHA 62, which is a key priority area identified by the Ministry of Health and Island Health.

Short-Term Objectives (3-6 Months)

- Develop plan to implement a Primary Care Network in Sooke with endorsement from Partners for Better Health Collaborative Services Committee (Partnership between the South Island Division of Family Practice and Island Health).
- Identify opportunities to increase access to health care services including:
 - Expansion of West Coast Medical Clinic hours
 - Further development of team-based care (Mental Health and Substance Use services, in-practice Nurse, Nurse Practitioner)
 - Explore opportunities to expand service hours of private sector partners providing medical imaging and laboratory services
- Collaborate with Capital Regional District and Island Health partners to explore short and long-term needs and options for additional space including potential co-location
- Develop a Service Plan for a Primary Care Network upon confirmation of community selection from Community Interest and Readiness Submission
- Hold community meeting to share proposed health services model and invite feedback

Medium and Long-Term Objectives (6-36 Months)

- Based on identified expansion needs and opportunities in Sooke, and subject to resource availability, develop planning process for space requirements.

Conclusion:

Sooke is a rapidly expanding community with diverse population health needs. The Sooke Planning Steering Committee has provided leadership to support the local development of an integrated system of team-based primary and community care. Improved access to primary care and specialized services as well as diagnostics were priorities confirmed by community stakeholders and will be the focus for ongoing collaborative work in 2018.



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Appendix A

Health Services Offered in the Community of Sooke*⁺

Service	Resources
Sooke Health & Wellness (former Integrated Health Network)	<ul style="list-style-type: none"> • Three Community Health Services (CHS) clinicians (Nurse, Social Worker, Dietician)
	<ul style="list-style-type: none"> • Co-located with 9 primary care physicians at West Coast Family Medical Clinic, 6660 Sooke Road • Supports Telehealth between patients/clients and specialists/specialty services within Island Health and in Vancouver • Supporting Home Health Monitoring for patients with chronic obstructive pulmonary disease/heart failure
Community Health Services Team (CHS)	<ul style="list-style-type: none"> • Full range of CHS services dedicated to Sooke, including Home Care Nursing, Case Management, Social Work and Dietician
	<ul style="list-style-type: none"> • This CHS team provides in-home and ambulatory care, chronic disease management, home health monitoring and access to home support services, Assisted Living and Residential Care
Mental Health & Substance Use (MHSU)	<ul style="list-style-type: none"> • In addition to mental health mobile crisis response, outreach and case management teams that support Sooke residents, MHSU contracts with the Sooke Family Resource Centre for a 0.6 FTE Masters Counsellor
	<ul style="list-style-type: none"> • Two FTE Addictions Counsellors at Pacific Centre, serving Westshore and Sooke
	<ul style="list-style-type: none"> • Funding for the Sooke Family Resource Society towards a Navigator position for youth and their families related to youth substance use issues
Public Health	<ul style="list-style-type: none"> • Public Health Services provided from Wadams Way site • 1.0 FTE Medical Office Assistant and 2.5 FTE of Public Health Nursing provide: prenatal support, post-partum maternal/newborn assessment and follow-up, breastfeeding support, postpartum depression and early parenting groups • Public Health Nursing: <ul style="list-style-type: none"> -Provide childhood vaccines and vaccines for adults with specialized health conditions -Support schools and partner with community agencies to plan and implement health promotion activities -Deliver speech and dental services for vulnerable families -Provide Medical Office Assistant and supplies to support a physician clinic which provides primary care services to youth at Edward Milne Community School on Wednesday afternoons (at Edward Milne Community School; 4 GPs from West Coast Medical provide coverage on a rotational basis)
Ayre Manor	<ul style="list-style-type: none"> • Provides 35 publicly funded residential care beds and 40 assisted living units • Operated under contract by the Sooke Elderly Citizens Housing Society
	<ul style="list-style-type: none"> • Two community hospice beds added March 2017
Medical Clinic	<ul style="list-style-type: none"> • West Coast Family Medical Clinic (9 GPs, 8 FTE) with current operating hours for family practice: 7:30am-5:00pm M-F; and walk-in clinic hours: 2pm-6pm M-F; Sat 9-12:30pm.
Lab Services	<ul style="list-style-type: none"> • LifeLabs located at 6660 Sooke Road; open weekdays 8am-4pm
Medical Imaging	<ul style="list-style-type: none"> • West Coast Medical Imaging located at 6695 Sooke Road, offers X-Ray services Tuesdays 8:30-11:00am Wednesdays and Thursdays 9am-11am
Psychiatric Services	<ul style="list-style-type: none"> • Two psychiatrists in private practice provide consults for children, youth, adults and seniors out of the West Coast Family Medical Clinic, their Victoria Clinic and via telehealth in a shared care model. Approximately hours of psychiatric services per month are provided to local residents.

*This list is not all-inclusive of health services in Sooke

+Updated May 4, 2018

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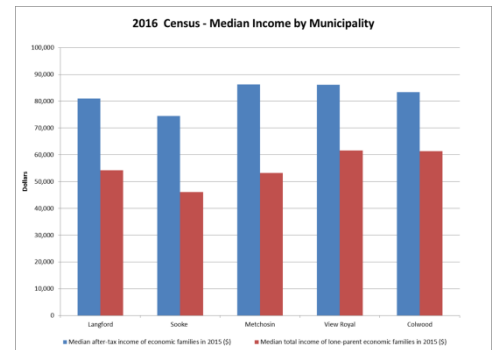
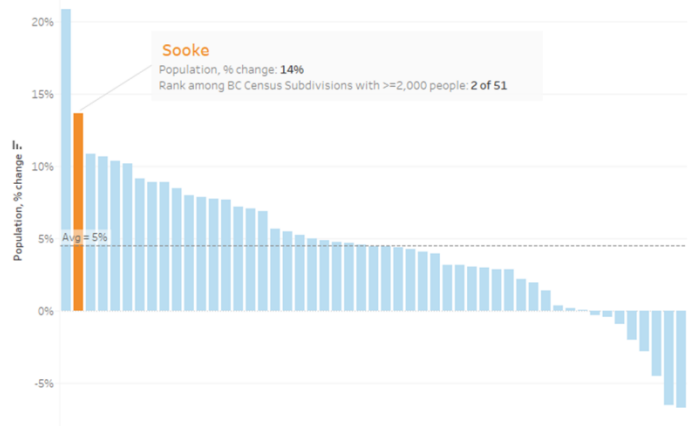
Appendix B

Highlights from Data: Sooke Municipality and Western Communities Local Health Area

Please note that while the region name is Sooke, two data sources capture a different size of geography. Sooke Census District (CD) includes primarily Sooke Municipality borders. Western Communities Local Health Area (LHA) (LHA 62) consists of a larger area which includes Sooke CD, Langford, Metchosin, and Colwood.

Related to Sooke CD

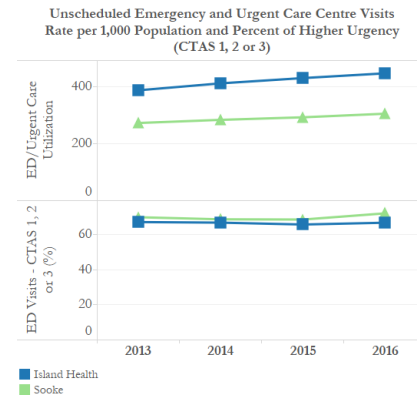
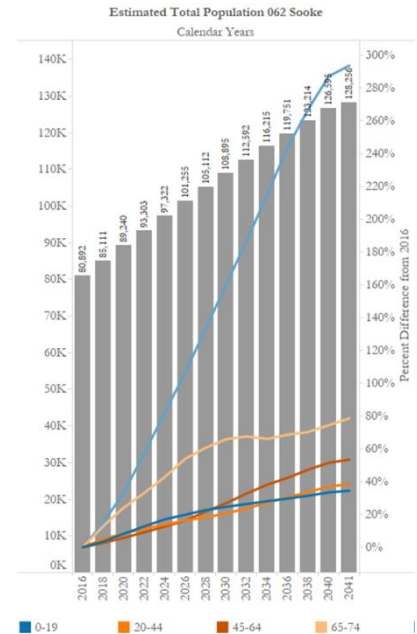
- Population grew by 14% between 2011 and 2016 censuses.
- Sooke has the second highest population increase in the Island Health region.
- Sooke has a younger population than Metchosin and View Royal, but older than Langford.
- Median income is lower in Sooke than neighbouring municipalities.
- 65% of Sooke population is attached to a GP.
- On average, 9 people from Sooke visit VGH Emergency daily. Of those, 10% report that they don't have a GP.
- Approximately 1 in 7 people from Sooke who present to VGH ED get admitted to hospital. 16% of these visits are for conditions either required resuscitation or considered emergent.
- Compared to Island Health rates, average rates of chronic disease are lower for heart failure, dementias, chronic kidney disease, hypertension, and stroke, while average rates of episodic depression are higher.



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Related to Western Communities LHA

- The population of the LHA region is expected to grow 80% by 2041 and the 75+ population will quadruple in the same time period.
- Life expectancy in the area is higher than Island Health and BC average.
- Attachment to a physician practice is 73.6% for the region.
- Sooke region's 75+ residents receive significantly higher home care visits and home support services than Island Health average.
- Emergency services (ambulance) use for the Sooke region is lower than Island Health rates
- Canadian Triage and Acuity Scale levels (which define patients' needs for timely care upon presentation to the Emergency Department) are comparable to Island Health rates.
- Incidence rates for ischemic heart disease, depression and mood and anxiety disorders have been increasing. The prevalence rates are slightly higher than Island Health rates.
- 28% of the total health care services expenditure of region's population was dedicated to 75+ populations.



Age Adjusted Chronic Disease Prevalence Rates (2014/15)
Per 1,000 Individuals

	BC	Island Health	Sooke
Heart Failure	14.1	12.6	12.5
Chronic Kidney Disease	16.9	16.5	16.6
Alzheimer's Disease and Other Dementia	18.0	19.1	16.5
Ischemic Heart Disease	53.8	47.3	46.6
Diabetes	61.5	54.1	60.3
Chronic Obstructive Pulmonary Disease	62.1	61.2	58.7
Osteoarthritis	64.0	68.6	66.0
Asthma	120.7	129.7	131.9
Hypertension	182.6	173.7	185.6
Depression	218.5	246.2	255.7
Mood & Anxiety Disorders	267.0	302.4	307.2