



Primary Care Network

Central Okanagan

Clinic and Team Lead Handbook



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Acknowledgements

We want to acknowledge our place of work is within the ancestral, traditional, and unceded territory of the Sylix (Okanagan) Nation.

We also acknowledge the Métis Nation and their contribution to the Aboriginal Way of being and knowing in Canada.

In addition, a special thanks goes to all teams that dedicated their time to this program.

Family Practice Clinics and Staff

Nurse Practitioners (NP)

Patient Partners

Central Okanagan Division of Family Practice (CODFP)

Interior Health Authority (IH)

Westbank First Nation (WFN) / stqa?txwłn'íwt sqilxw

Ministry of Health – Primary Care Division (MoH)

General Practice Services Committee (GPSC)

Program Introduction

The Central Okanagan Division of Family Practice will be working with the Interior Health Authority, and Family Practice Clinics to introduce the following resources to create Primary Care Networks by the fall of 2024:

- 37 Nurse Coordinators
- 4 Family Practitioners
- 7.8 Nurse Practitioners
- 16 Allied Health Clinicians
- 3 Clinical Pharmacists
- 3 Indigenous Health Coordinators

Central Okanagan has been divided into three PCNs:

- PCN-1: Kelowna Central
- PCN-2: Rutland/Lake Country
- PCN-3: West Kelowna/Peachland

The Allied Health clinicians will support Team-Based Care to build capacity within the Patient Medical Home. The following document has been created to aid in the standardization of the Onboarding Process.

Case for Business Process Standardization

When making changes in an organization, particularly when embarking on a new endeavor, the process can be slow and unsettling resulting in lessons learned. (Business Process Standardization, Accenture LLP, 2013)*

1. Improves Quality
2. Reduces Cost
3. Reduces Time Requirements
4. Defines Collaboration Requirements Across Tasks & Stakeholders, and
5. Delivers Process Transparency

We recognize this is a repetitious process and will require continuous improvement through a plan-do-study-act cycle. However, as we complete onboarding with each new clinic, we have been made aware of aspects of the implementation where structured support has added value for the clinics.

Total Project Stakeholders

1. Participating CODFP Family Practice Clinics
2. Central Okanagan Division of Family Practice (CODFP)
3. Interior Health Authority (IH)
4. Westbank First Nation (WFN) / stqa?txw?n'íwt sqilxw
5. Ki-Low-Na Friendship Society (KFS)
6. Métis Community Services Society of BC (MCSBC)
7. Family Practitioners
8. Nurse Practitioners
9. Patient Partners

Onboarding Timeline for Clinic and Team Leads

Summary of Process Steps



| - - - - ~1.5 Months - - - - | - - - - - 1 Month - - - - - | - - - - Ongoing - - - - - →

Orientation and Onboarding Process

Steps	Timeline	Completed
STEP 1: Clinic Engagement (PCN Managers)		
STEP 2: RN Recruitment (PCN Managers)		
STEP 3: Clinic Preparation (Clinic Lead and Learning & Development Coordinator)		
Clinic Lead schedules meeting with Physician Lead and Office Manager to: <ul style="list-style-type: none"> • review Nurse Coordinator Clinic Skills Checklist • review PCN Nurse Clinic Equipment List • pre-schedule 30-minute weekly check-ins for first 90-day period with the Physician Lead (starting week three of RN orientation) • schedule 2-hour shadow shifts in the clinic during the first two weeks of orientation (all providers, MOAs, Office Manager) • schedule a 30-minute Meet and Greet time for NC and available clinic staff on first week of orientation • provide two colour copies of the PCN Patient Notification Poster • discuss clinic communication around vacation and unexpected absences • introduce and explain PCN Attachment Codes: <ul style="list-style-type: none"> • HUB-1: 97631 • HUB-2: 97632 • HUB-3: 97633 • review evaluation activities 	1-Month before start date	
Clinic Lead schedules meeting with clinic MOAs to discuss PCN and nurse's role in the clinic	1-Month before start date	
Clinic Lead schedules two EMR training sessions in second week	2-3 weeks before start date	
Clinic Lead to send out RN Staffing Announcement to physician lead to share with clinic team and add to clinic website (if applicable)		
STEP 4: Orientation (Clinic Lead and Team Lead)		
Clinic Lead to schedule meeting with Team Lead, Knowledge Coordinator and Learning and Development Coordinator to finalize schedule	1 week before start date	
IH Team Lead to send out Welcome Letter with first day instructions.	1 week before start date	
L&D Coordinator to reserve training room, schedule Division Orientation Day-1 and Day-2 (scheduling 1-2 days apart) and create orientation schedule	2-3 weeks before start date	

L&D Coordinator to schedule NC shadow shifts at other clinics (starting week 2 or 3)	1-2 weeks before start date	
L&D Coordinator requests Pathways access for new hire.		
Division Day-2 Orientation discuss importance of notifying Physician Lead of scheduled vacation		
Block off time to complete IH iLearn modules		
Print and give to Nurse Coordinator on Day-1 of Division Orientation: <u>L&D Coordinator:</u> <ul style="list-style-type: none"> • Nurse Coordinator Handbook • Confidentiality Agreement • MSP Application <u>Clinic Lead:</u> <ul style="list-style-type: none"> • Clinic Contact list • Completed Nurse Coordinator Skills Checklist <u>Team Lead:</u> <ul style="list-style-type: none"> • IH Orientation Guide • Regional Primary Care Orientation Pathway for Primary Care Clinicians 		
EMR new user set up to be completed by clinic		
Assess need for PRIME access (may require set up through BCCNM)		
Clinic Meet and Greet objectives: <ul style="list-style-type: none"> • clinic access and parking (keys, fob, etc.) • view workspace, ensure equipment ordered or present • review Confidentiality Agreement 		
STEP 5: Ongoing Support (Clinic Lead and Team Lead)		
<ul style="list-style-type: none"> • Knowledge Coordinator schedules meeting to review Clinic Nurse Coordinator Skills Checklist and Learning and Development Plan 	First 30 days	
<ul style="list-style-type: none"> • Refer to Weekly Check-in Guidelines and document in OneNote on clinic Teams Page • Knowledge Coordinator completes Competency Checklist and records on TeamSite • Knowledge Coordinator should attend one check-in a month for learning and development goals 	Throughout the first 90 days	
<ul style="list-style-type: none"> • Clinic Lead schedules a monthly check-in with the Physician Lead to discuss further ways the nurse can offload work. Ideally, this should be done in clinic. If an education request arises, please follow the Education Request Process • Discuss if the clinics needs have changed since the clinic initially signed onto the PCN 	Following the first 90 days	

Weekly Check-in Guidelines

Guiding Principles

- First few Check-ins: review any outstanding clinic prep items
- Try to keep check-in meetings short and focused; first meeting 30-60 minutes, with follow up check-ins 15-30 minutes. Schedule the first half of the meeting with the Physician Lead and the second half of the meeting with the nurse
- Allow the conversation to go longer if the nurse and physician want to keep talking or if many items need to be addressed
- Clinic Lead will facilitate, and the Team Lead will make note of any nursing supports needed

Checklist

- Review the process for vacation time, unexpected time off, sick days, and clinic closures etc.
- Ensure clinic is aware of any already pre-approved vacation time
- Review hours of work
- Is new attachment code automated in EMR?
- Is infrastructure in place (workspace, equipment, phone line, computer, adequate chair, storage, EMR, access to fax/printer/scanner as needed)?
- Identified efficiencies/inefficiencies
- Workflows
- Communication in the clinic
- Prioritization: is the NC able to prioritize provider requests?
- Shadowing: have you had enough shadow shifts?
- Expectations and Vision: what are the short- and long-term goals?
- Hard Skills Review: such as vaccines, PAP requests, ear syringing, etc. (Knowledge Coordinator and Team Lead)
- Plan: for next meeting (when, where, duration, etc.)
- Duration: Clinic Lead to remind Physician Lead of three-month weekly check-in end date and plans for ongoing support

Attachment and Encounter Codes:

- Patient Attachment Codes
- Nurse Encounter Codes

Education Request Process

Process

1. Clinic or nurse education requests comes through via email or in a clinic check-in
2. Nurse Leadership reviews and approves based on:
 - a. Fits within objectives of PCN
 - b. Fits within the practice and offloads from the majority of physician/NPs
 - c. Appropriate based on the patient populations
 - d. Availability of physician supervision in clinic
3. Work through algorithm and decide when and if to involve Knowledge Coordinator
4. If it requires PCN funding or unable to decide at nurse leadership level-bring to POG

Requirements

1. POG must approve of any education requests that require funding
2. Each nurse has a cap of \$600 per year for education funding
3. Nurse cannot request to take education that requires funding until they have been in their role for at least 6 months.

Common examples of education requests

Cryotherapy, PAPS/STI, diabetes

PCN Nurse Clinic Equipment List

Technology Requirements:

- Laptop or PC (**Note:** Chrome Book is not compatible with required IH technology)
 - **Note laptop/computer considerations below**
 - A suitable sized monitor (15" min. for laptop, 20" min. for desktop) for community resource navigation, case management, patient follow-up and other computer-based tasks.
 - Keyboard, mouse (optional with laptop)
 - Computer camera and working microphone for virtual meetings and virtual patient appointments
 - ***Note** if using a monitor with a laptop-compatible adapter and USB cord

Recommendations from IHA Tech Support in Consideration of IHA anywhere

- **VMware Horizon Client application:** version 5.x is required for printing support (we will support printing in version 8.x by Q2 2022). This application can be run on Windows or Mac, with specific requirements listed below:
- **Windows VMware Horizon Client:** System Requirements are found here: [System Requirements for Windows Client Systems \(vmware.com\)](#). In general, it requires a modern PC or laptop running a full, in-support version of Windows 10 (we have not tested Windows 11). There is a matrix for various versions of Windows vs versions of the VMware Horizon Client here: [Supported versions of Windows 10 and Windows 11 on Horizon Client \(58096\) \(58096\) \(vmware.com\)](#).
- **Mac VMware Horizon Client:** System Requirements are found here: [System Requirements for Mac Clients \(vmware.com\)](#). The Mac has to be able to run at least macOS 10.14 (currently). We have seen that as the VMware Horizon Client updates, VMware drops support for older versions of macOS, so older Mac hardware becomes less able to run the VMware Horizon Client. We do not recommend running this on an iPad (this is not specified in the above link).
- **Monitors:** The VMware Horizon Client does support dual monitors (or a laptop plus a second monitor, eg). However, we have seen issues lately with monitors with mismatched resolution and aspect ratios. My recommendation is to have full HD monitors (1080 or 1200p), and ensure that, if more than one monitor is desired for IH Anywhere itself (rather than IH Anywhere on one monitor and the clinic desktop on the other monitor), both monitors should be the same aspect ratio and resolution.

- **Network Considerations:** a stable connection to our IH Anywhere system is dependent on **good network conditions**. The things within a clinic's control are the strength and type of internal network (**eg wifi vs wired LAN, type of access points or cabling, switches**), their **router/firewall**, and their **internet service plan**. Typically, IH Anywhere can perform adequately with as little as **1 Mbps available to each concurrent user at the clinic, but things like intermittent connectivity, network jitter, and latency, all impact the actual IH Anywhere experience**. As well, the clinic needs to **have port 4172 (TCP and UDP) open in both directions**.
- **Printing:** IH Anywhere supports a wide variety of locally attached and network-based printers, via printer redirection into the IH Anywhere virtual machine. As noted above, the VMware Horizon Client version 5.x is currently required to print from IH Anywhere. This is technical guidance alone - I am not considering any privacy issues related to proper handling of patient health information when it comes to printing from IH Anywhere on a clinic printer - that is not my area of knowledge.
- **IT support:** occasionally there are issues with hardware or software which requires the clinic to troubleshoot and intervene. In these cases, the clinic may need an IT provider or otherwise to perform this work. Our team has provided guidance and worked with clinic staff and IT providers in the past to troubleshoot and fix issues, on a best-effort basis.

Other Technology

- Phone to have confidential patient conversations
 - A designated phone line is recommended
- Access to the clinic's EMR
- Ability to send/receive faxes
- Internet access
- Photocopier/scanner/printer access

Clinical/Office Space Requirements:

- Confidential workstation for patient phone calls and to carry out case management and administrative tasks
 - Storage space to keep patient handouts, education materials, etc.
 - Office chair with lumbar support
 - Basic office supplies
- Access to exam rooms for in-patient consultation
- Clinical supplies and equipment suitable for tasks required (e.g. gloves, gowns, masks, safety needles/syringes, simple dressing supplies, etc.)

IH Orientation Guide

Name: _____ Start Date: _____

Clinic: _____ Work hours: _____

Divisions Clinic Lead: _____
Name Cell #

IH Team Lead: _____
Name Cell #

Knowledge Coordinator (KC) _____
Name Cell #

WEEK 1 OF HIRE

Equipment and Access		
<u>Item</u>	<u>Details</u>	<u>Reviewed/ Completed Date</u>
Laptop issued	<ul style="list-style-type: none"> * log in while on IH site * device name located on sticker on front (ie: WUPPxx) * need to connect to Wi-Fi anywhere that is not an IH site. 	
Cellphone issued	<ul style="list-style-type: none"> * if applicable 	
Meditech Access	Confirm access to PCN job roles <ul style="list-style-type: none"> * <i>IH PHC/CDM clinician</i> * <u>IH PHC/CDM Intrahealth Clinician</u> 	
IH Anywhere (if using clinic laptop)	For accessing IH sites on non-IH devices (such as computer in clinic) <ul style="list-style-type: none"> * Review IH Anywhere Installation and Usage Guide (interiorhealth.ca) 	
VPN access (if using IH laptop)	<ul style="list-style-type: none"> * Review Check Point Mobile VPN User Guide * watch for an email: VPN “check point mobile” access and “how to” document 	


Equipment and Access, cont'd...		
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>
F:Drive Access (ensure access and explore)	<ol style="list-style-type: none"> 1. Location of PCN Allied Health referrals sent to fax line from clinics F:\IHA Teams\PCN (Fax # 250-469-6013) 2. All other PCN related info F:\IHA Teams\Integrated Health Networks\Okanagan\Central Okanagan\PRIMARY CARE NETWORK 	
COK PCN Team Site	* You will receive an invite to the site by KC COK Primary Care Network - Home	

WEEK 1-2

EMR Support		
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>
Meditech	Review of Meditech navigation will be provided * Keep in mind that patients must be registered in the PCN subdivision for Nurse Coordinators to “see” them in Meditech *	
Clinic EMR	EMR: _____ Divisions of Family Practice (DoFP) and clinic will provide training. Support: Jason Houiellebecq jhouiellebecq@codivision.ca Cell # (250) 215-4199	


Email and Contact Lists		
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>
PCN Clinics and Team Contact List	* emailed out monthly * also on Team Site Home Page COK Primary Care Network - Home (interiorhealth.ca)	
PCN email distribution list (examples)	To search: “type” __ COK PCN and scroll down to see options Example: __ COK PCN’s COKPCNs@interiorhealth.ca __ COK PCN Hub 1 COKPCNHub1Nursing@interiorhealth.ca __ COK PCN Hub 2 COKPCNHub2Nursing@interiorhealth.ca	


< 3 MONTHS OF HIRE

Introduction to your new role		
Item	Details	Reviewed/ Completed Date
Orientation Package	1. Regional PCN Orientation (11 pages) To work through during orientation period and beyond	
	2. RN Competency document (24 pages) To use as a checklist throughout the next 30/60/90 days and well beyond to create and update your learning plan	 Nursing Primary Care Competencies (0
	3. IH Primary Care Registered Nurse (Role Description)	
	4. Orientation schedule – will be emailed to you by DoFP	


iLearns & Education		
Item	Details	Reviewed/ Completed Date
Sign up for these educational opportunities when available #1-4 For complete iLearn list see #5	1. Regional Orientation • iLearn 3261 – 3266 next offered: _____	
	2. Brief Action Planning (BAP) • You will receive an invite to first session	
	3. Health Literacy • iLearn 2021 when available	
	4. Type 2 Diabetes Class (in person or zoom) • Will receive an invite to join a patient education session with the Diabetes Education Program	
	5. iLearn list – found on team site: COK Primary Care Network - On-going Training and Orientation	




Professional Development Goal Plan		
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>
Learning Plan	<p>Professional Development Goal Plan found on Team Site</p> <p>To be completed prior to end of second week. Connie Zol will follow-up with you to discuss your learning plan, listen to your thoughts/concerns and see how we can best support your learning and practice.</p> <p>1:1 check-ins will be flexible and ongoing. Initial follow-up will be in-person followed by virtual or in-person meetings every 3 months.</p> <p> Professional Development Goal</p>	

Housekeeping Items		
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>
Vacation/ planned leave process	<ul style="list-style-type: none"> • Inside Net Vacation page for general information • Review your schedule in iSite • Vacation will need to be resubmitted to get into your new schedule Planned Leave Form • Ensure your STATs are correct <p>Communication</p> <ul style="list-style-type: none"> • Inform clinic / team of ANY planned time away and provide this information with as much notice as possible. • Discuss with the clinic manager / MOA how to block off planned leaves in the EMR. • Set up “automatic replies” for inside and outside organization for planned leaves <ul style="list-style-type: none"> ○ Open Outlook, choose ‘File’ at the top – click on ‘Automatic Replies’ – choose ‘send automatic replies’ – choose ‘only send during this time range’ – set your dates and times – write your out-of-office message (including your return date) on both the ‘Inside my organization’ tab and the ‘Outside my organization’ tab – hit ‘OK’. • Send a courtesy email to HUB and both clinic leads to inform of planned leave <p></p>	


Sick time procedure	<ul style="list-style-type: none"> • Call EARL 1-855-264-9515 • For more info see Employee Absence Reporting Line • Inform the clinic (contact person to be determined during orientation) 	
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Housekeeping Items, cont'd...		
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>
 <p>Email Signature Templates.url</p>	<ul style="list-style-type: none"> • Create an email signature (see Team Communication and Email Signature links) <p>Example:</p> <p>John Smith Primary Care Network Nurse Coordinator Interior Health Authority Mill Creek Clinic 101, 1912 Enterprise Way, 250-868-0700 c: 250-215-3423 e: XXX@interiorhealth.ca Monday-Friday</p> <hr/> <p>I respectfully acknowledge my workplace is situated within the territory of the Syilx Nation and that we are collectively gathered on the traditional, ancestral, and unceded territories of the seven Interior Region First Nations. This region is also home to 15 Chartered Métis Communities. It is with humility that we continue to strengthen our relationships with First Nation, Métis, and Inuit peoples across the Interior.</p>	
IH Staff Directory	<p>Update your profile in the IH Staff Directory Staff Directory (interiorhealth.ca) Top right, click on “My Profile” then go to Top left, click on “Edit Profile”</p>	

Sources for Self-Directed and Supported Learning											
<u>Item</u>	<u>Details</u>	<u>Reviewed/Completed Date</u>									
<p>The Team</p> 	<table border="0"> <tr> <td>IH Team Lead</td> <td>DoFP Clinic Lead</td> <td>Knowledge Coordinator</td> </tr> <tr> <td>Nurse Coordinators</td> <td>Aboriginal Navigator</td> <td>Medical Office Assistants</td> </tr> <tr> <td>Allied Health</td> <td>Physicians</td> <td>Reach out to team members and learn more about their role!</td> </tr> </table> <p>* Shadow / buddy shifts with NCs and AH as available</p>	IH Team Lead	DoFP Clinic Lead	Knowledge Coordinator	Nurse Coordinators	Aboriginal Navigator	Medical Office Assistants	Allied Health	Physicians	Reach out to team members and learn more about their role!	
IH Team Lead	DoFP Clinic Lead	Knowledge Coordinator									
Nurse Coordinators	Aboriginal Navigator	Medical Office Assistants									
Allied Health	Physicians	Reach out to team members and learn more about their role!									
HUB Nurses	Reach out to your HUB nurses COKPCNHubRN@interiorhealth.ca for assistance in navigating resources in IH, the community and abroad.										

Sources for Self-Directed and Supported Learning, cont'd...		
<u>Item</u>	<u>Details</u>	<u>Reviewed/ Completed/ Date</u>
Team Site	COK Primary Care Network - Home here you will find: <ul style="list-style-type: none"> • Skills Checklist • Competencies • Nurse Network Minutes • Other resources and supports • PCN Contact Lists 	
Inside Net	InsideNet here you will find: <ul style="list-style-type: none"> • Staff Directory • UpToDate • Elsevier Clinical Skills • i-Learn / Webex • Library Services 	
PHSA Learning Hub	PHSA LearningHub (Multiple courses)	
BC Guidelines	BC Guidelines LifeTime Prevention Schedule Practice Guide 2020	
Chronic Disease Websites	Examples: Hypertension Canada For Healthcare Professionals Diabetes Canada Kidney Foundation - The Kidney Foundation of Canada - Home Page	

Team Meeting Schedule		
<u>Item</u>	<u>Details</u>	<u>Reviewed / Completed/ Date</u>
Team Meeting Schedule	<p><i>Currently:</i></p> <ul style="list-style-type: none"> • Weekly / bi-weekly clinic check ins with team and clinical leads • Bi-weekly Nurses Network meetings every 2nd Wednesday 11-12 virtual • Monthly all-staff meetings mix of in-person and virtual • Monthly HUB meetings – virtual <p>You will get an invite; please block off these meetings in your EMR</p>	

Program Work Flow		
<u>Item</u>	<u>Details</u>	<u>Reviewed/ Completed Date</u>
Information Sharing Consent Form / Standard Work	Refer to COK Primary Care Network Team Site Go to Registered Nurse – Admin Folder, and then scroll down to “Forms”  Consent and Registration standard	
+		
Referral Pathways for PCN Allied Health Referrals	Consult form in EMR – demographic info and reason for referral / background info. PCN fax # 250-469-6013	
+		
Patient Cards	Patient card instructions can be found on the COK Primary Care Network Team Site Go to Registered Nurse - Admin Folder, and then scroll down to “Patients” Quick link → Patient Card Instructions DoFP clinic lead will supply you with them	

Words of Wisdom

- You are a pioneer in this new role
- Don't feel pressured to know and do it all right away
- Build relationships in your clinic and across the PCN
- Protect your time in your EMR calendar to support your learning needs
- Scope of practice: question everything
- Don't work harder than your patient

