

ISLAND health

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SUPPORT
NOT STIGMA

PRIMARY CARE
OUTREACH

NUTRITION AND
MENTAL HEALTH

IMPROVING CARE IN
NORTH VANCOUVER ISLAND
JOIN OUR TEAM

CONTRIBUTORS



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With great respect and humility, Island Health acknowledges the Coast Salish, Nuu-Chah-Nulth and Kwakwaka'wakw cultural families; whose relationship with these lands remains unbroken; whose homelands Island Health occupies. In making this acknowledgement, we commit to walk softly on this land and work to uphold self determination of the health of Indigenous peoples.

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A woman with short blonde hair, wearing a grey blazer and matching trousers, stands on a rocky beach. She is smiling and looking towards the right. The background features a calm ocean under a clear sky, with dark rocks in the foreground.

MESSAGE FROM THE
PRESIDENT
& CEO



“Providing compassionate, non-judgemental care is critical to supporting people in need. Island Health’s new Harm Reduction Policy gives Island Health employees the tools and education to support them in providing inclusive, person-centred care.”

Spring is a time of renewal, optimism and hope. This spring edition of Island Health Magazine shares many uplifting stories – including actions being taken to stabilize and improve health care services for the residents of North Vancouver Island – and new partnerships and innovations to help combat the toxic drug crisis, which continues to cause irreparable harm to families and communities across our health region.

Providing compassionate, non-judgemental care is critical to supporting people in need. Island Health’s new Harm Reduction Policy gives Island Health employees the tools and education to support them in providing inclusive, person-centred care. You can read about how the policy is promoting support, not stigma, and find resources to learn more about harm reduction on page 12. Being able to easily connect to supports is also critical for people seeking mental health and substance use services. Service Link, our newly-launched centralized phone line, will make it easier for people to connect to the resources they need. (page 14) And in Nanaimo, the introduction of Car 54, which pairs an Island Health nurse with an RCMP officer, means people in crisis can experience safer interactions and be connected to needed care. (page 17)

Improving care for patients with Chronic Obstructive Pulmonary Disease (COPD) in Cowichan, and improving cognitive health in the Comox Valley have something in common. The Island Health teams that developed new ways

to improve care for these patients have been recognized with Evidence into Practice awards. Each year, Island Health’s Research, & Capacity Building Department hosts the Awards to recognize and honour innovators from across Island Health who have navigated challenges to create positive change. (page 32) On that front, in March, I attended Code Hack. This intense but fun 24-hour “hackathon” organized by the Island Health’s Innovation Lab, saw over 100 participants from inside and outside healthcare identify health care challenges and then design and build solutions. It was heartwarming to see patient dignity was the inspiration behind the winning team’s solution. (page 30)

Steady progress is being made towards the realization of the new Cowichan District Hospital, which will bring a state of the art hospital to residents of Cowichan. Site preparation is well underway, and we are on track to move into the new facility in 2027. (page 24)

And be sure to read the story of Greg Gunness (page 26) – a patient at our recently expanded Nanaimo Heart Function Clinic. He credits the clinic with giving him another chance at life – but what I am taking to heart is how Greg spreads joy and reminds us of what is important.

With heartfelt good wishes,

Kathy MacNeil,
Island Health President and CEO

HEALTHCARE IMPROVEMENTS WELL UNDERWAY

by Shawna Cadieux



The Salvation Army's Michael Winter in their expanding space in Port Hardy

Michael Winter is thrilled the sobering, assessment and sheltering program he runs at the Salvation Army's Centre of Hope in Port Hardy is expanding, thanks to provincial government investments announced January 27. \$30 million is dedicated toward stabilizing and improving health-care services in the North Vancouver Island region, including funds for the Centre of Hope to double its sobering and assessment beds and offer services 24 hours per day, seven days per week.

“Historically, we have offered sheltering services from late afternoon to early morning, so people using these services have to find somewhere to go during the day and on weekends when the centre is closed,” says Winter. “Offering 12 beds and expanding these vital services around the clock will offer more stability and long-term health and care for the people and families we serve.”

When you enter the Centre of Hope, you see the smiling faces of people

who feel like they belong. Out of the cold, wind and rain that winter brings to the beautiful, yet rugged coastline of the very northern tip of Vancouver Island, Centre of Hope clients watch TV or visit in a warm, home-like environment. They can access personal hygiene supplies, food and hot drinks, advocacy and family services, warm clothing, and phone and computer stations where they can take care of banking and apply for income assistance or employment.

“Our centre provides so many vital services, and the sobering and assessment shelter is a very important component. When someone is intoxicated, they don't belong in police cells or out in the cold. They need a safe place to sober up and receive wrap around supports,” says Winter. “Ensuring our services are available around the clock will help us to meet people where they are at, without judgement, and give them a stepping stone towards success, whatever that looks like for them.”



Eric Tsai Yi Head-Chen, clinical coordinator at Port McNeill Hospital, with RN Keira Pfaff-Palanio

Port Hardy Mayor Pat Corbett-Labatt has lived in the region since 1975. She also sees value in expanding the Centre of Hope's sobering, assessment and sheltering program, operated by the Salvation Army, a contracted Island Health service provider, with support from Island Health's mental health and substance use team, BC Housing, the District of Port Hardy and the Mt. Waddington Regional District.

"The expansion of this important program is an amazing win for vulnerable people in our community, knowing that they won't be out in the cold at seven o'clock in the morning, and getting the support they need. It will also help reduce visits to the hospital's emergency department," she says. "That government heard our requests for funding for this and other key health-care services in the area is so meaningful."



Port Hardy Mayor Pat Corbett-Labatt

"The expansion of this important program is an amazing win for vulnerable people in our community, knowing that they won't be out in the cold at seven o'clock in the morning, and getting the support they need. It will also help reduce visits to the hospital's emergency department."



Watch this video about the expansion of the Salvation Army Centre of Hope.

Physiotherapist Erna Beunder (left) and Area Director Lesly Deuchar at a Health Care Career Fair in Calgary



Port McNeill Mayor
James Furney

A FOCUS ON RECRUITMENT

To address challenges in attracting and retaining skilled and qualified talent, government also announced temporary incentives around staff recruitment/referral awards, retention bonuses and enhanced travel compensation. This has increased applications and interest in positions in the North Vancouver Island area. Island Health anticipates delivering over \$280,000 in quarterly retention bonuses to more than 200 North Vancouver Island employees in the first quarter of the program, with eligible staff already receiving enhanced travel compensation.

Eric Tsai Yi Head-Chen, clinical coordinator at Port McNeill Hospital, moved to the area with his partner several years ago after working as a registered nurse in places like Nanaimo, Prince Rupert and Ottawa. He's grateful for the actions that government and Island Health are taking to ensure he and his colleagues can continue to provide excellent care to their patients.

"For people who may already be thinking about living and working in this area, these investments and incentives may trigger even more interest. It's very positive news," he says.

An innovative recruitment campaign, #northvancouverislandcareers, is aimed at attracting staff locally, provincially, nationally and internationally. Already more than 1,000 prospective candidates, including a large number of nurses, have shown interest in one or more opportunities within Island Health.

"We want to encourage new and existing health-care workers to stay here and build their lives," says Port McNeill Mayor James Furney, a life-long resident of the region. "There is great beauty here in North Vancouver Island and an incredible quality of life, in addition to such a strong sense of community where people know and care for one another. If you have an appetite for adventure, you will not be disappointed."

"For people who may already be thinking about living and working in this area, these investments and incentives may trigger even more interest. It's very positive news."

Indeed, word is spreading across the country. Most recently, Island Health representatives attended a health-care career fair in Calgary, Alberta, where they met with nursing professionals from a wide range of specialties including acute care, emergency, and community with many expressing an interest in learning

more about opportunities within the North Vancouver Island region.

“We had more than 120 people visit our booth with approximately eight nurses specifically asking about opportunities with Island Health,” says Lesly Deuchar, Island Health Operations Director, Rural and Remote Services. “When we told them about the temporary incentives, they were very interested in hearing more. We received more than one enthusiastic “Wow!” when we explained what we are doing to attract and retain staff. Our teams are currently following up with these people.”

So far, Island Health has posted dozens of new jobs for physicians, nurse practitioners, nurses, allied health-care workers and supportive positions including Protection Services Officers and drivers for a new, dedicated transport service between Port Hardy Hospital, Port McNeill Hospital and

the Port Alice Healthcare Centre for discharged patients and staff. Further, extension of Northern Health’s Travel Resource Program to include North Vancouver Island is providing access to a pool of nurses to support the community and stabilize services in the region.

Other actions include:

- Welcoming two additional long-term care residents at Eagle Ridge Manor, which has increased services and residential capacity to better support seniors requiring long-term care.
- Expediting CT scanner procurement to support local residents to no longer travel to Campbell River or the Comox Valley for non-urgent CT scans. Last year over 1,400 CT scans were performed at other locations for residents of North Vancouver Island.

“Our teams are eager to be a part of these healthcare improvements. Changes that have been implemented

to date demonstrate the level of commitment directed toward sustainability of rural healthcare services, specifically in the North Vancouver Island area,” says Deuchar.

“We also now know that the voices of local residents and staff have been heard. Belonging to these teams and participating in these important changes has been a highlight of my career and I am beyond excited for the next weeks and months to unfold. This is really good work!”

For more information or to apply for positions in North Vancouver Island, please visit islandhealth.ca/nvi

Island Health physicians wishing to provide locum support are asked to contact medstaffrecruitment@island-health.ca to learn more about dates and travel supports.



“There is great beauty here in North Vancouver Island and an incredible quality of life, in addition to such a strong sense of community where people know and care for one another. If you have an appetite for adventure, you will not be disappointed.”



JOIN THE NORTH VANCOUVER ISLAND TEAM

PORT HARDY • PORT MCNEILL • PORT ALICE • CORMORANT ISLAND

Receive wrap-around support with temporary housing, community service providers, and connections with your local peer group as you transition to this beautiful community.

WE'RE ACTIVELY HIRING!

- Registered Nurses
- Inter-Facility Porters (Drivers)
- Protection Service Officers
- Community Health Workers
- Nurse Practitioners
- Physicians
- Many more opportunities!

EMAIL US TODAY

TalentAcquisition@islandhealth.ca



WHAT ISLAND HEALTH OFFERS YOU

- Employer paid benefits
- Paid sick and vacation time
- Municipal pension plan

TEMPORARY FINANCIAL INCENTIVES

The temporary retention incentive provides all employees working in North Vancouver Island (in regular status positions) up to \$2,000 per quarter with a maximum incentive payable to \$8,000 annually.

BUT WAIT, THERE'S MORE!

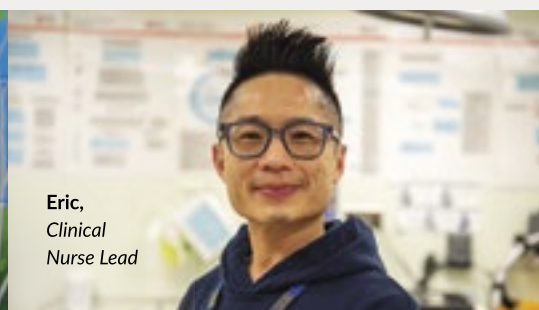
- Up to an additional \$15,000 in rural and remote incentives for RN/RPNs
- Professional development opportunities
- Relocation assistance
- 1.5X premium pay for redeployment
- Plus reimbursement for mileage and meal expenses



Jenna,
Clinical
Nurse Lead



Ann,
Food Services



Eric,
Clinical
Nurse Lead

Person with Lived Experience Guides Harm Reduction Work

by Lyz Gilgunn

“Nothing about us without us” is a saying Beth Haywood lives by. It’s also the foundation of the collaborative approach Island Health’s Mental Health and Substance Use (MHSU) teams are taking to tackle the drug poisoning crisis.



The belief in the power of peers and importance of hearing the voices of people with lived experience (PWLE) is the rationale for hiring a Peer Project Coordinator, a pilot position in Island Health. In the South Island, Beth lends her knowledge, skills and valued perspective of PWLE to this work.

In her role, Beth supports developing policies, programs and staff learning opportunities that seek to promote a culture of harm reduction. The goal is to shift perceptions of substance use so it’s considered a health concern – not a criminal issue.

Island Health teams aim to address stigma in our health-care system so that all people have equitable access to inclusive care. This harm reduction approach, informed by the voices of peers such as Beth, will help improve care options and health outcomes for people who use substances.

Beth used drugs for 20 years and has been sober for three. A proud mother of four children and loving grandmother to six, Beth is excited to join Island Health and make a difference by helping people understand substance use and drug addiction. She advocates for people who use substances and wants to tackle stigma, especially in the health-care system where discrimination can have harmful and deadly consequences.

“If you don’t have someone who’s living or has lived that experience then you don’t know what they need.” Nothing about us, without us.

Harm Reduction – Substance Use Policy Improves Care

by Tracey Thompson





Since the toxic drug crisis was declared a public health emergency seven years ago, more than 11,000 people in B.C. have died from illicit drug toxicity. In 2022 alone, poisoned drugs ended the lives of 386 Island Health residents. As communities continue to experience death and injury related to drug poisoning, our commitment to reduce harms and stigma is imperative.

Last August, Island Health demonstrated our commitment to providing inclusive, compassionate and person-centred care with the launch of a Harm Reduction – Substance Use policy. This organization-wide policy aligns with our **C.A.R.E. values** and recognizes substance use as a health and social issue, not a criminal one.

Substance use is personal and complex. Taking a harm reduction approach recognizes there is no ‘one size fits all’ solution to preventing harms associated with substance use; harm reduction seeks to reduce risk and maximize safety for people who use substances. A recent example of a harm reduction approach is the provincial launch of **decriminalization** of possession of certain illicit substances. The purpose of the Harm Reduction – Substance Use policy is to address stigma associated with substance use, which often prevents people from accessing life-saving treatment and support. The ultimate goal is to reduce harm, injury and death related to the toxic drug supply.

Providing access to harm reduction and other treatment and recovery services is the standard of care at Island Health. The policy provides guidance to all Island Health staff, medical staff and leaders on creating environments where people receive compassionate care in a non-judgmental and non-stigmatizing manner. Support tools to help guide leaders and staff include a Leadership Checklist, a Harm Reduction Handbook and a Staff Toolkit. These tools are intended to help staff explore and understand harm reduction principles as part of their own learning.

Cultural humility, cultural safety and trauma-informed care are cornerstones of the policy to ensure health services are safe, equitable and accessible to all. The safety of people receiving care, visitors, residents and team members is vital. A harm reduction approach does not require staff to put themselves or others at risk; instead, this approach treats all people with dignity and respect. It’s about providing support and standing up to stigma.

The policy was developed over three years in collaboration with a dedicated team of people with lived and living experience of substance use, representatives from programs across Island Health, Indigenous Health, First Nations Health Authority and the BC Centre for Disease Control. With gratitude we recognize everyone who had the opportunity to participate in the creation and implementation of this policy to help reduce stigma related to people who use substances.

CURIOUS ABOUT HARM REDUCTION? CHECK OUT THE LINKS BELOW!

- **Harm Reduction 101:** free learning module offered through Interior Health – interiorhealth.ca/Harm-Reduction-101/story.html
- **Caring Conversations Cards:** each card sparks a conversation about harm reduction, trauma and violence-informed care, cultural humility and cultural safety – app.affinitylearning.ca/community/play/1047/sessions/408532
- **Wellbeing website:** resource directory for a range of topics, including harm reduction – wellbeing.gov.bc.ca/substance-use/harm-reduction



Connecting People with Mental Health Substance Use Services

*Tracey Thompson,
Jill Fisher, Tara Fitzgerald,
Landon Walters, Larissa
McCormick, Kory Eichhorn,
Amanda Falconberg*

Island Health has launched Mental Health and Substance Use (MHSU) Service Link. This central access phone number helps connect people to MHSU information and services in their community.

“We are pleased to support Service Link,” says Jill Fisher, community access manager. “Our team is dedicated to helping people with mental health issues and those who use substances navigate our system. This phone line will go a long way in connecting people to the right resources in their community.”

The January 31st launch of Service Link came through the incredible dedication of Island Health staff in Community Access and MHSU. Their hard work, flexibility and collaboration to develop the phone line, hire staff and implement Service Link is a reason to celebrate teams at Island Health.

“This work was complete in just a few months time,” says Tracey Thompson, project manager. “Launching Service Link so quickly would not have been possible without everyone’s incredible dedication and support.”

Service Link helps increase awareness of and access to Island Health and community-based services across the region. “On behalf of MHSU, I extend so much gratitude for the collaboration of our colleagues in making this happen!” says Keva Glynn, MHSU executive lead.

Health care plays a crucial role in connecting people who use substances with the resources they need to achieve better health outcomes, including harm reduction services, overdose prevention, addiction medicine (opioid agonist therapy, prescribed safer supply and other medication options), withdrawal management, and treatment and recovery services.

People seeking information can call any day of the week between 8:30am – 8:30pm to speak directly with a Service Link provider: 1-888-885-8824.

FIND MORE INFORMATION AND SERVICES:

- Island Health: **Mental Health & Substance Use Services**
- BC Government: **Wellbeing.gov.bc.ca**
- Call Service Link: 1-888-885-8824

Service Link responds to Health Canada’s **3-year exemption** to the Controlled Drugs and Substances Act in BC. This exemption, known as decriminalization, means that adults in BC are not subject to criminal penalties for the possession of small amounts of certain illegal drugs for personal use. **Decriminalization** is one part of a larger provincial strategy to reduce stigma of those who use substances, increase access to care, and reduce injury and death from a toxic drug supply.

NEW WASHROOM SENSORS PREVENT TOXIC DRUG POISONING DEATHS

by Glenn Drexhage

New motion detection sensors are helping Island Health prevent drug toxicity deaths in some high-risk spaces.

“We know that the shame and stigma of addictions have driven people to use alone – but given the increasingly toxic drug supply, using alone can be fatal,” says Minister of Mental Health and Addictions Jennifer Whiteside. “Our government is working to break down the shame and stigma of addictions. These trials by Island Health are another action to save lives and better support staff.”

The trials involve the installation of motion detection sensors in a group of washrooms identified as high-risk spaces for drug poisonings. The sensors monitor movement and how long a person has occupied the washroom, and each site sets time limits based on experience and needs.

For example, if someone hasn’t moved for a minute, or has been in the washroom for 10 minutes, a notification is texted to designated responders. The

sensors have already likely led to a life being saved, after an Island Health staff member was notified of an unresponsive person in a washroom.

Trials began in October at two Courtenay locations and in March at Nanaimo Regional General Hospital. They will run for a minimum of three months.

“The sensor project marks one of the first trials to be launched under Island Health’s innovation program, which explores new ideas and approaches to improve the way health care is delivered,” says Island Health board chair Leah Hollins. “I want to acknowledge the work of everyone involved.”

Innovation relies on input from staff, physicians, partners – and most importantly, patients. Their contributions are enhanced by an **Innovation Lab** that generates and tests potential solutions, and a product team that conducts trials across Island Health.

“The sensor system gives that level of dignity that we want to provide to everyone

who uses our services,” says Lesley Howie, director of Mental Health and Substance Use for the North Island. “It’s a visible and concrete action we can provide. And it reassures staff that there’s a system in place. I am hopeful that this is a fore-runner for something much bigger.”

The Comox Valley Healthcare Foundation (CVHF) is helping support the Courtenay pilot project. CVHF President Bill Anglin says the project “equips health-care staff with what they need, and supports patients to receive critical care, two priorities we take really seriously at the foundation.”

The project is a team effort that involving input from Island Health medical health officers, managers, clinicians and two peer advisors. A key partner is **Brave Co-Op**, the Vancouver company behind the sensors.

Learn more about making washrooms safer spaces for people who use substances. uvic.ca/research/centres/cisur/projects/active/projects/safer-bathrooms.php



L to R: Evan Humphreys, Manager, Comox Valley Primary Care, Dr. Charmaine Enns, Medical Health Officer, Jess Aldred and Bill Anglin, Comox Valley Healthcare Foundation



Bringing Mobile Care to Nanaimo's Marginalized Population

by Trish Smith

A permanent mobile van aims to remove barriers to quality primary care for people experiencing homelessness or who are marginally housed. The outreach program started in a Budget van as a pilot project between Island Health's Mental Health and Substance Use program and Primary Care Network, and the Nanaimo Division of Family Practice.

"Having the Island Health primary care van is a game changer," says outreach nurse Jody Sawchyn. "We couldn't treat people inside the Budget van so were challenged to offer privacy and comfort. We've worked hard to be visible and build trust in the unhoused community and now, with the medical van, we are offering the dignified care this population deserves."

The interdisciplinary team includes physicians, registered nurses, social workers, mental health outreach workers and peer support workers. A peer support worker has lived experience and helps to bridge the gap between

the unhoused population and the health-care system.

"Health care services have to adapt to meet the needs of people who have historically experienced multiple barriers to accessing care and may have had adverse experiences with health systems," said Amanda Lemon, manager of Mental Health and Addiction Services.

"Outreach needs to be consistent, visible and feel safe for those accessing service. Understanding that each person we serve has likely experienced significant trauma and severe stigma in their life is essential. Learning from people with lived and living experience is the only way to move forward."

Peer support worker Jan Mehlenbacher spent six years living on the streets of Surrey and Nanaimo after he was robbed when he first moved to Vancouver. "I never want to live on the streets again, but I've been there and understand how it can happen," he said.

"This has been a very collaborative effort between the unhoused community, the outreach team and a variety of community partners and service providers," said Jessy Knight, a peer support worker who has been involved since the program's inception. "It's exciting that we are making a difference with Nanaimo's most vulnerable population."

THE OUTREACH TEAM PROVIDES CARE TO ABOUT 400 PEOPLE A MONTH, WITH SERVICES INCLUDING:

- Wound care
 - STI testing and treatment
 - X-ray requisitions and specialist referrals
 - Prescriptions
 - Onsite bloodwork
 - Harm reduction supplies, substance use support and options for treatment/withdrawal management
 - Help with applications for supportive housing and other Ministry supports
 - Water and snacks
-



NANAIMO'S CAR 54 DRIVES CARE AND CONNECTION

by Glenn Drexhage

People experiencing mental health and/or substance use crises are receiving enhanced services in Nanaimo, thanks to Car 54 – a full-time mental health mobile program launched in October 2022.

Car 54 teams up Lianne Rear, a registered nurse from Island Health's Mental Health and Substance Use program, with Constable Josh Waltman, an RCMP mental health liaison officer. Together, they attend urgent calls in an unmarked police car to support people in crisis. This effort joins other "crisis car" collaborations between Island Health and RCMP in Duncan/North Cowichan and in South Island.

The goal of Car 54 is to resolve mental health crisis situations collaboratively and in the least intrusive way – which could include verbal de-escalation, involvement of friends and family to help support the client, and determining if hospital care or other options are needed, such as referrals to community resources and supports.

"We don't overdo it if we don't have to. We try to preserve some privacy and dignity," says Rear. "It's about trying to find the most client-centred approach – that's my lens."

"Lianne can do an in-depth, thorough mental health assessment, while I look after the safety concerns and the risk concerns and make sure everyone is safe," adds Const. Waltman. Since Car 54 launched, he estimates they've reviewed and acted on hundreds of client files.

Sheila Leadbetter, Island Health's executive director of mental health and substance use, says the partnership is a huge success. "It assists some of our most vulnerable clients in distress, helps de-escalate crisis situations, and connects people to resources and services."

"When people are in crisis because of mental health or substance use challenges, we want them met with care and compassion," says Jennifer Whiteside, Minister of Mental Health and Addictions.

Nanaimo RCMP Superintendent Lisa Fletcher believes Car 54 will greatly enhance the Nanaimo RCMP's overall response to mental health calls. "This initiative shows our commitment to improving our response and working with our partners to address mental health challenges in our community."

"The Car 54 project is a part of the full suite of services Nanaimo requires to help meet the needs of people experiencing mental health or substance use issues." — Nanaimo Mayor Leonard Krog

How our food brings us on a journey

by Island Health Indigenous Health
and Public Health Registered Dietitians

Has eating become another checkbox in your list of to do's for the day? If so, you're not alone. We are bombarded by messaging on why we need certain foods, vitamins, minerals and/or less food in our day. But, how often are we encouraged to consider the pleasure of eating and its relationship to mental wellness?

Food is an important way we nourish our emotional, mental, and spiritual wellness. Indigenous ways of knowing emphasize the interconnected nature of food and well-being. These ways see food as a medium for relationships with ourselves, family, communities, culture, ancestors, and the land. For Indigenous peoples, plants are often thought of as one of the first teachers, offering connection and wisdom to support growth and healing. (See Nettle Pesto and Tea Recipes on page 22.)

"Food for us comes from our relatives, whether they have wings, or fins or roots. That is how we consider food. Food has a culture. It has a history. It has a story. It has relationships."

— Winona LaDuke

Thinking about food in this way is something we can all benefit from. Nourishment happens from the smiles, laughter, learning and connection surrounding food as well as the vitamins and minerals vital to support wellbeing.

Structural inequities such as discrimination and ongoing colonial practices, unstable food supply chains, climate change, and inequitable distribution of wealth are outside of a person's control and impact food choice, our health and the health of the lands and waters.

Acknowledgement needs to be given to the impacts of nutrition and food insecurity on health and wellbeing. Children are especially impacted during gestation and the first five years of life – when brain development is happening rapidly. Food is not just fuel for our brain, it is our brain! Nutrients such as protein, iron, folate, essential fatty acids, zinc, choline, copper and iodine are building blocks for brains and bodies. (See Spring Salmon Nicoise Recipe). Iron deficiency early in life can have a life-long influence on overall development including mental health and learning (see Iron Rich Pancake Recipe on page 19).

"Understanding the story of our food means enlarging one's frame of reference... our relationship to food becomes a place to stand, a place to act, and an expression of our core values...we become more food literate through a set of learning experiences."

— from **NourishLife.org**

FOOD HAS THE UNIQUE ABILITY TO GROUND US IN THE PAST, PRESENT AND FUTURE

Food holds stories of our ancestors and memories of some of life's most meaningful moments. Perhaps you have a memory of canning fish with your grandparents or celebrating with birthday cake in the park. We express our identity through food. It tells the story of where we come from and the history of our culture.

Eating mindfully can help us tune into the present. We do this by listening to our senses: sight, smell, taste, sound and physical sensations of hunger and fullness. This helps us connect with our bodies' cues and value food without judgement. Food fosters relationships; sharing food can be a way to connect and show love to others.

It is our responsibility and privilege to protect the land, the waters and our future. By continuing to explore new food experiences, finding connection & pleasure in food, and nourishing our minds and bodies, we shape our story of food for future generations.

"We are all on a food journey. This journey is rooted in our families and cultural traditions..." and this story evolves over our lifetime.

TO LEARN MORE ABOUT
FOOD INSECURITY VISIT:

BCCDC: [bccdc.ca/our-services/
programs/food-security](http://bccdc.ca/our-services/programs/food-security)

TO LEARN MORE ABOUT ISLAND
HEALTH NUTRITION SERVICES:

[islandhealth.ca/our-services/nutri-
tion-services/nutrition-services](http://islandhealth.ca/our-services/nutrition-services/nutrition-services)

Iron Rich Pancakes: Easy Three-Ingredient Banana and Egg Pancakes

Feed your brain with this simple & tasty recipe packed with iron that your whole family will enjoy.

INGREDIENTS:

- 1 medium-sized ripe banana
mashed nice and smooth
- 1 medium egg
- ¼ cup (60 mL) iron fortified baby cereal
Olive oil for cooking

DIRECTIONS:

1. Stir all three ingredients together in a bowl.
2. Add a little oil to a skillet. Turn heat to low. Spoon batter into the skillet to the desired size of pancakes. Cook until bottoms are lightly browned. Flip over and cook until pancake is cooked through.
3. Serve immediately or cool and refrigerate.

Adapted from: brbimcrafting.com



Spring Salmon Niçoise

Rich in symbolic history, omega 3, vitamin D and iron, salmon is a fantastic, local food that supports brain and heart health offering connection to the land and waters.

INGREDIENTS:

4	large eggs
1 lb (454 g)	baby mixed potatoes, halved if large
8-10	asparagus trimmed
¾ cup (180 mL)	snap peas
3 cups (750 mL)	mixed spring greens such as chopped romaine, pea shoots, microgreens and a little arugula mix
1½ cups (375 mL)	grape tomatoes, halved
2	small avocados, peeled, pitted, and quartered
½ cup (125 mL)	Kalamata olives
6-8	radishes, sliced
1 tbsp (15 mL)	capers, drained

MARINATED SALMON

1 lb (454g)	fresh salmon fillet
2 tsp (10 mL)	dried garlic powder
1 tsp (5 mL)	dried thyme
1 tbsp (15 mL)	olive oil
	Salt and black pepper

VINAIGRETTE

1 tbsp (15 mL)	red wine vinegar
2 tbsp (30 mL)	lemon juice
2 tsp (10 mL)	Dijon mustard
1	large clove garlic, minced
3 tbsp (45 mL)	olive oil,
2 tbsp (30 mL)	finely chopped dill sprigs, plus more for garnish
	Salt to taste

DIRECTIONS:

1. Preheat the oven to 350° F.
2. Combine the ingredients for the salmon, bake in the 350 °F preheated oven for 15-20 minutes until fork tender. Cooking times varies with thickness of the salmon piece.
3. Fill a large pot with water and bring to a boil. Fill another large bowl with ice water. Add the potatoes and cook until soft. Drain the potatoes in a colander and submerge in ice water until cool, about 3 minutes. Repeat process with asparagus.
4. In the same pot, gently lower the eggs into the boiling water. Boil for 10 to 12 minutes. Scoop out the eggs from the boiling water and immediately submerge in the ice water. Peel and halve the eggs, arrange on a large platter.
5. Heat one tablespoon olive oil in a small sauté pan over medium-high heat. Add the capers, carefully as they might splatter, and cook for 1 minute, then spoon over the eggs.
6. In a small bowl, whisk together the olive oil, vinegar, lemon juice, mustard, dill, and salt. Toss the potatoes with 2 tablespoons of the vinaigrette and pile beside the eggs.
7. On a platter, build the salad with piles of the greens, asparagus, snap peas, tomatoes, avocados, olives, radishes and drizzle everything with all the remaining vinaigrette.
8. Garnish with more dill sprigs if desired.





Building Inner Strength with Nettle

Rooted in plant teachings of Coast Salish lands and culture, nettles ask us:

*What feelings am I having now and where do I feel them?
What are they teaching me?*

From the land, nettles gift us with powerful nutrients, like iron, calcium, and vitamins that support our physical strength and energy. Walking among nettles requires us to be mindful. If stung, it calls our attention to the physical sensation and assists us in being fully present in our body. This medicine and mindfulness can support us in building inner strength.

Warm or Iced Nettle Mint Tea

**You can buy dried nettle and mint tea at many grocery or health food stores.*

ICED TEA: steep 3 Tbsp dried nettle + 1 Tbsp dried mint in 1 litre of hot water until cooled. Strain out leaves and serve over ice!

HOT TEA: steep 2 Tbsp dried nettle + ¾ Tbsp dried mint in a pot of hot water for about 5 minutes. Strain into mugs and enjoy!

Adapted from: Plant Teachings for Social-Emotional Skills. A collaborative project by GRuB and Northwest Indian Treatment Center and Island Health's Food is Medicine: Cooking Together 2016-2018, WSANEC Leadership Secondary.



Nettle Pesto

Nettles can be used as an alternative or in addition to recipes that call for spinach or in this case, as an alternative to basil. Toss this pesto with pasta, potatoes, cooked vegetables or use as a spread on crackers or fresh vegetables.

INGREDIENTS:

- 6 cups prepared fresh nettles*
- ½ cup parmesan or Romano cheese, grated
- 1/3 cup walnuts or other nuts
- 1/3 cup extra virgin olive oil
- 1-3 cloves of garlic, chopped
- 1 tsp lemon juice
- Salt and pepper to taste

DIRECTIONS:

Roughly chop prepared nettles. Place all ingredients in a food processor or blender and blend until smooth. Keeps for 2-3 weeks in the refrigerator.

**For more information on harvesting and preparing nettles, see "Wild Greens" section of the Food is Medicine Cooking Together Cookbook.*

COMMUNITY VIRTUAL CARE

GET SUPPORT TO MANAGE YOUR:

- Chronic Kidney Disease
- COPD
- Diabetes
- Heart Failure
- Hypertension
- Progressive, life-limiting or palliative illness

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A Registered Nurse monitors your symptoms and coaches you to improve your ability to manage your health.

Equipment is easy to use and loaned to you at no cost.

FOR MORE INFORMATION: islandhealth.ca/cvc

TO SELF REFER:

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Central Island: (250) 739-5749

North Island: (250) 331-8570

Ask about our new Caregiver Support Program



**Are you a skilled tradesperson interested in building a world class hospital in Cowichan?
We are hiring!**



A New Cowichan District Hospital is on the Horizon



The new hospital is being built on the unceded traditional territory of Cowichan Tribes.



Rendering of the new Cowichan District Hospital at 6775 Bell McKinnon Road in North Cowichan.



**Listen to
your heart**

*Caring
for
Cowichan*

COWICHAN DISTRICT HOSPITAL  FOUNDATION

Since 1984, the Cowichan District Hospital Foundation has raised over \$22 Million in support of critical medical equipment for CDH and Cairnsmore Place. We achieve this through donations, fundraising events, sponsorships, 50/50 raffles, and more.

The grounds are prepped and the cranes are up at the site of the future Cowichan District Hospital (CDH) in North Cowichan. Construction on the much-anticipated community hospital is underway following selection of EllisDon Construction and Parkin Architects as successful proponents for this \$1.446 billion capital project.

The new hospital is slated to open in spring 2027 to replace the current facility which opened in 1967.

“The vision for the new hospital is to create the most welcoming place of healing and hope,” says Alice Gelpke, Cowichan Valley Executive Director. “So many staff and community members – including patients – have had a hand in developing plans for their future hospital. It’s exciting to share the renderings and see the changes taking shape at the site on Bell McKinnon Road.”

The footprint will be three times larger than the current CDH with capacity for 204 beds and a commitment to culturally safe, person-centred health services and environmental sustainability.

“The new hospital is going to be an amazing space for patients and their

families to come for care, and for health care staff and physicians as a place to work,” notes Dr. Maki Ikemura, Cowichan Valley area medical director and a local maternity physician. “There is so much natural light in all care spaces and workspaces, and a beautiful Indigenous healing garden and other outdoor-indoor integration which we know is essential for recovery and rejuvenation. We’re going to have state-of-the-art equipment and facilities, and more beds, a bigger ICU, more operating rooms, a roomier ER, and so much more. It’s exciting that, as staff and providers and patient partners, we’ve been able to be involved from the beginning in making sure that the design of the new build really meets the needs of our population and our programs.”

Despite its expanded size, the new CDH will be more environmentally friendly

than the current facility, thanks to advancements in energy and water efficiency technology. It will be B.C.’s first fully electric hospital and is being built to achieve or exceed LEED Gold® standards for environmental sustainability.

In keeping with the current hospital, parking and public WiFi will remain free of charge.

Site excavation is ongoing. If you or someone you know would like to help build a community of care for a community that cares, there are job openings in health care and the skilled trades. Email the project team at newcdh@islandhealth.ca for more information. To meet the project leads and view the renderings, check out the recording from our February community information session at: islandhealth.ca/newcdh/news.

“The vision for the new hospital is to create the most welcoming place of healing and hope. So many staff and community members – including patients – have had a hand in developing plans for their future hospital. It’s exciting to share the renderings and see the changes taking shape at the site on Bell McKinnon Road.”

The generosity of our donors helps bring world-class equipment to our area, which can help reduce wait times, improve patient experience and outcomes, and allow for more patients to be cared for in their home community.

The Foundation is pleased to be embarking on a major fundraising campaign in

support of our new hospital, to ensure everyone in our community has access to the most advanced equipment, and to help support our incredible healthcare workers to continue caring for Cowichan in a new cutting-edge facility. We are thrilled to work alongside the community in support of this initiative, and we are grateful for the

ability to recognize donors with naming opportunities in the new hospital.

To learn more or to find out how you can support our initiatives, please visit our website at cdhfoundation.ca or contact Naomi Low, Executive Director, at nlow@cdhfoundation.ca or 250.701.0399.



Nanaimo Heart Function Clinic Provides Another Shot at Life

by Trish Smith

There's something captivating about a riches-to-rags story – people building up what they once had – or else finding something more meaningful than what they lost.

Greg Gunness was enjoying retirement after working in the building supply industry for many years. As a single retiree in his early 60's, he was ticking items off his retirement bucket list, including living as a snowbird for six months of the year in his 40-ft luxury motorhome. Life was easy. He felt free. But that all changed for Greg on October 6, 2015.

While visiting friends on the Hood Canal in Washington, and just one day before his scheduled return home to Nanaimo, Greg took antacids for what felt like indigestion. He figured he'd put too much

garlic in his mashed potatoes. But the antacids didn't work and he couldn't catch his breath. He didn't think the pain at the bottom of his breast bone was what a heart attack should feel like. With no travel medical insurance, he didn't want to go to a hospital in Washington and thought if he could just make it through the night, he'd be home to access Canada's publicly funded health system.

He endured the gruelling pain for seven hours before seeking medical attention. Naval medics determined he was having a heart attack and rushed him to Bremerton Naval Hospital 45 minutes away.

Lying on the operating table prepped for surgery, Greg went into cardiac arrest multiple times and accumulated 112 minutes of dead time over the next three days. His family made the tough decision not to resuscitate if Greg couldn't breathe without life support. But when the ventilator and tubes were removed, Greg woke up, the first step in a long, difficult recovery from a massive heart attack. He was discharged from the naval hospital on October 12 with a \$375,000 US medical bill he couldn't afford to pay.

Greg's sister drove him to stay with his mom in Steveston, but within a day he

was too weak to breathe. After a series of hospitalizations on the mainland, Greg arrived at Nanaimo Regional General Hospital in December 2015, at his lowest point. He needed the right medications, and time to adjust to his new reality: he was bankrupt; in very poor health; and had no housing options available, even when he was ready for discharge. He spent the next 25 days in hospital, including Christmas.

An Island Health social worker connected him with The Salvation Army Hostel – which provided clothes, shelter and food. When they realized his limitations, he was moved from communal bunks to the sick room, where they kept an eye on him. When his health improved he moved up to the third floor, where his new neighbours nicknamed him ‘Pops’ and ‘Peppermint Man’, as he regularly gave away mints.

Greg stayed for 18 months while getting treatment from the Nanaimo Heart Function Clinic. No money for taxis or Handy Dart made getting to appointments a challenge, but luckily a ride-on-scooter gave him some mobility. With time, his internal organs improved and he was well enough for surgery to insert a pacemaker and defibrillator, and he enthusiastically joined the heart institute in Victoria so they could learn from his miraculous recovery.

Greg’s life vastly improved when he turned 65 and received his pension and Old Age Security. He moved to a small apartment with a fridge, microwave, kettle and toaster. There were no frills, but he managed to save enough for a used TV.

It has now been seven years since his heart attack and at age 70, Greg is active in his retirement community. He calls bingo Monday nights, is setting up a

Block Watch, and joining the Free Masons. He saved up for a used SUV to help get around. He still travels to the Victoria Heart Institute to participate in heart studies and visits the doctors and nurses at the Nanaimo Heart Function Clinic, handing out peppermint patties to care providers who feel like his second family. Greg will be on heart medications for life, but feels lucky to be alive and credits the staff and cardiologists at the clinic for his remarkable recovery.

“I am grateful I was given another chance at life thanks to the extraordinary medical care I received at the Nanaimo Heart Function Clinic,” Greg reflects. “I thought I was enjoying life before, but I actually feel more joyful and have more laughs today while cherishing the things that truly matter. I purposely smile at others and try to spread happiness whenever possible. It really takes so little to be positive, once you know how.”

“I am grateful I was given another chance at life thanks to the extraordinary medical care I received at the Nanaimo Heart Function Clinic.” — Greg Gunness



IHEALTH AT CHEMAINUS A GAME CHANGER FOR PATIENT CARE

by Shari Bishop Bowes

As Medical Lead at CHCC, Dr. Tanis Morris looks forward to the benefits to patients and care providers that come with electronic clinical documentation.

A man complaining of a sore, swollen arm is diagnosed with an infection when he seeks care at Chemainus Health Care Centre (CHCC) urgent care clinic. The physician swabs an abscess and sends it for a culture test to determine antibiotic resistance. The patient is started with IV antibiotics and asked to continue on oral antibiotics and return for a follow up. Three days later, a second physician sees the patient and notes the infection isn't improving. As the culture test results are not yet available, the second physician changes the prescribed oral antibiotic to one that provides greater bacterial coverage.

Meanwhile, the man's family physician, Dr. Tanis Morris, receives copies of the culture test results at her practice. Looking through her patient's electronic file, she determines the prescribed antibiotics won't kill the bacteria. She calls

the patient, stops the medication and orders a new prescription.

"It was only because the urgent care centre had just switched to electronic documentation immediately available to me that I became aware of my patient's visit to urgent care," says Dr. Morris. "I was able to see impressions from both physicians, and copies of the results from the swab, so I could intervene and help get his medication changed."

"In the past, that probably would have been a missed opportunity," she adds, with results from patients' tests often taking up to a week to arrive by mail. "I knew exactly from reading the first couple sentences what the plan was."

ACCESS TO PATIENT RECORDS IN ELECTRONIC HEALTH RECORD (EHR) A "GAME CHANGER"

Dr. Morris believes access to detailed clinical information on patients in the

EHR is a game changer for physicians working in Island Health facilities and collaborating with colleagues in primary care clinics.

"Everything is there, it's clear, it's concise and it's readable. And that's what patients expect," she says.

Dr. Morris is also Medical Lead for Chemainus urgent care alongside her family practice duties and was part of the IHealth "go-live" for electronic clinical documentation at CHCC in December.

The clinic team embraced the change, she said, including RNs Barb Leach and Laurie Schmidt, who completed their training early so they could help other staff get used to the new system.

Schmidt has worked at CHCC for 18 years, 15 of those in urgent care.

While she considers herself "old school", as one of many nurses and other staff



RNs (l-r) Erin McCoy, Laurie Schmidt and Liz MacLeod are getting more comfortable with electronic clinical documentation at CHCC

used to working with handwritten paper forms, she immediately saw the value of changing to electronic documentation.

“The doctors can right away see what’s been charted on the patient,” she says. “Before there was a lag time before the doctors’ offices got the paper, and then they weren’t very legible sometimes. So I can see that being a big value for the patient, and for family doctors going forward.”

Dr. Gary Toth, an emergency room physician at Cowichan District Hospital, is at CHCC today to take on a six-hour shift in urgent care. As he takes a few minutes at the computer to document, he recalls how arduous it was to document by hand, and welcomed the switch when CDH transitioned to electronic documentation in late September.

RN Erin McCoy, on staff at CHCC urgent care permanently since the

summer, says she hopes that having ClinDoc activated may make it easier to attract physicians needed to staff the clinic.

McCoy and the CHCC team have welcomed doctors from CDH, Nanaimo Regional General Hospital, and the tertiary care sites in Victoria, who have taken on shifts – allowing the clinic to stay open.

“They’re used to the online charting,” she says. “Overall it will be better. Especially if people have complicated histories.”

Dr. Morris says the change to electronic clinical documentation comes at a critical time for CHCC urgent care, which has seen the volume of daily patients expand significantly compared to pre-COVID, while facing the challenge of recruiting new doctors.

Chemainus is similar to Oceanside and Ladysmith urgent care clinics, and continues to seek physicians trained to

work in emergency medicine for temporary and permanent shifts.

Dr. Morris points to a pair of colleagues in her primary care practice as examples of new, young physicians who come with the expectation that electronic clinical documentation is part of their work when they take shifts in the urgent care clinic.

“We have to look at how our younger generation is being trained. We could stick with the paper and the quill and the chisel and the stone, because that’s how we’ve always done things, but we have to remember that because we’re not going to be here forever, we want to create a system that keeps moving even when we’re gone.”

Learn more about IHealth implementation at ihealth.islandhealth.ca

CODE HACK INSPIRES INNOVATION IN CARE

At Island Health's 2023 Code Hack hackathon, after 23 hours of thinking, creating, designing, building, and presenting a solution to a patient care challenge, it came down to one guiding inspiration for the team who earned the \$1,500 first prize from the judges, and the people's choice award from participants: dignity.

Team ERGO chose to work together on a solution to a common, yet somewhat neglected patient experience that has seen little innovation in decades. Their solution presented bedside toilet alternatives to help patients manage washroom functions and mobility issues with dignity and improved cleanliness. This team clearly identified an existing problem or issue in healthcare, supported it with compelling and passionate first-hand experiences, and worked to create a better, innovative, and practical solution to improve the patient experience.

Earning the \$1,000 second prize was Team MyER, who proposed a new app for patients to download that would provide unique information to them via a QR code to help with their understanding of perceived wait times for procedures, and curated information related to their reason for admission. Their goal was to empower patients with more information about their care, and keep patients informed while reducing the need to ask staff about wait times.

Coming in third place with a \$750 prize, was Team End PJ Paralysis, who worked

on a tool, similar to a smart watch, that tracks movement of patients, to encourage activity such as getting up and getting dressed to reduce fatigue and body deterioration. Research shows benefits when patients dress in their own clothes, and try physical activity when recovering from illness or injury.

The 2023 Code Hack was Island Health's third hackathon and returned after a three-year hiatus. It is organized by the Island Health Innovation Lab with support from Island Health Research and Innovation and



Island Health CEO Kathy MacNeil committed financial support of \$10,000 to the top four hackathon teams to help them develop their solutions further.

Architecture. Of special note this year, Island Health CEO Kathy MacNeil committed financial support of \$10,000 to the top four hackathon teams to help them develop their solutions further.

The Code Hack team is grateful to volunteers who worked tirelessly on this event, and sponsors including Telus Health, the Nurses and Nurse Practitioners of B.C., Dr. Fred Voon, The Centre for Inter-professional Clinical Simulation and Learning, Camosun College, and the Victoria Hospitals Foundation. Mentors and judges provided invaluable advice to participants on how to navigate health systems, engage the business community, and refine their solutions for next steps.

For information about Code Hack and a summary of this year's event, visit islandhealth.ca/about-us/accountability/innovation/code-hack



Applying Research Evidence to Improve Care and Outcomes

by Annie Moore



Every November, Island Heath's Evidence-into-Practice awards celebrate innovators who've applied research evidence to improve the quality of care we provide for patients and families.

Previous winners have gone on to receive provincial and national awards; in 2021, one winning team also received a BC Quality Award for **improving care for people living with diabetic foot ulcers**. 2022 marked our 10th annual competition, and the three winning teams come from across the region and work in diverse areas, from Comox to Victoria, from COPD to continuing education. Read on to learn about the impact of their projects, and what's next for these dedicated teams.

ENHANCING OUTREACH SERVICES FOR PEOPLE LIVING WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) IN COWICHAN Cowichan has the highest prevalence of COPD on Vancouver Island, and COPD

is the third highest cause of hospitalizations at Cowichan District Hospital. In order to reduce hospitalizations and enhance community-based care, Lina Al-Sakran and Donna Jouan-Tapp worked with colleagues to implement an approach developed at Dalhousie University, called the INSPIRED model (Implementing a Novel and Supportive Program of Individualized Care for Patients and Families Living with Respiratory Disease). Evidence shows this team-based approach leads to a significant and sustained reduction in emergency department visits and hospital admissions.

The multidisciplinary Cowichan COPD team provides assessments, education, rehabilitation, and psychosocial support to clients at home and in clinic. This

program helps clients develop action plans to manage any COPD exacerbations or breathing crises, avoiding emergency department visits and unnecessary hospitalizations, and improving their quality of life. The COPD service recently expanded its criteria to accept more clients, and is offering intensive education based on the **Living Well with COPD program**.

CODE BLUE SIMULATION TRAINING AT VICTORIA GENERAL HOSPITAL

In an emergency situation, if a patient is unable to express their wishes, a Medical Orders for Scope of Treatment (or MOST) can ensure that their care and treatment aligns with those wishes – for example, when a patient experiences a cardiac arrest in hospital, known as a Code Blue.

In November 2021, Victoria General Hospital (VGH) changed its protocol for Code Blue responses, emphasizing the importance of MOST and the need for staff to debrief as soon as possible afterwards. Island Health's simulation team saw an opportunity to support staff by providing Code Blue simulation training on site. Tamara Young (Clinical Nurse Educator, Simulation) developed an in-situ simulation for clinicians who would be responding to a Code Blue in the first five minutes of the event, before the arrival of specialized Code Blue care teams.

Given its success, as of February 2023, Tamara has offered a total of 133 simulation sessions across 42 clinical settings to 780 participants!

With the support of site leaders, Tamara brought Code Blue training directly to staff at VGH, offering eight 20-minute Code Blue simulation sessions a day for two days a week over two months. Participants included occupational and recreational therapists, nurses, students, and health care assistants. After training, 84% of participants said they felt more confident in their practice and more connected to their team. In the words of one participant: "I experienced a real Code Blue a few weeks after training, and I found the practice I had done in two simulations and the knowledge I had gained made a huge difference in my confidence level when it happened. I felt confident in my CPR, communication, and how to be useful."

Want to learn how to document your wishes for medical interventions?

Visit islandhealth.ca/learn-about-health/planning-health-problems/medical-orders-scope-treatment-most

IMPROVING COGNITIVE HEALTH IN THE COMOX VALLEY

Cognitive stimulation therapy (CST) is the only evidence-based non-pharmacologic intervention for mild-moderate dementia. Research shows that CST can improve cognitive functioning, mental health, and quality of life for people living with dementia, and provides respite and support for their family caregivers. Trained clinicians follow a program of person-centred, themed activities to stimulate different areas of the brain, while facilitating inclusion, peer support, and social connection.

Alison Ritchie, Laurel Steed, and Kyle Hillman – Occupational Therapists on the Comox Valley Geriatric Specialty Services Team — recognized a gap in care and sought CST training so they could offer it to their clients. Through Jim McCaffrey's generous donation to the Comox Valley Healthcare Foundation in memory of his wife Frankie, the team was able to facilitate a CST program with two groups of participants. After two months, participants reported improved cognition and quality of life (+8.5%), with universally positive feedback. In the words of one participant:

"The program is so worthwhile. No one is uncomfortable, and we learn a lot while laughing and having fun. The negative thoughts I had about myself went away when I was with others experiencing similar difficulties."

With the support of Island Health's Research Department, the team has recently been awarded a \$50,000 Spark grant from **The Centre for Aging + Brain Health Innovation**. They'll use the funds to scale up their program over the next year by training colleagues in Campbell River to host CST groups, and expanding the number of sessions available in Comox to meet waitlist demand.



Laurel Steed, Kyle Hillman and Alison Ritchie



Tamara Young



Lina Al-Sakran

Donna Jouan-Tapp

Hear from all the award-winners in this recording of the award ceremony. vimeo.com/showcase/9955259/video/776382014

Promoting Family Cycling



The idea of a family bike ride sounds fun – whizzing down a street or bike path listening to the joyful giggles of your kids as they breathe in the fresh air. But it can be daunting for parents with toddlers and school-aged children. Thanks to an Island Health Community Wellness Grant, non-profit Capital Bike has been teaching Victoria families how to safely enjoy family bike rides.

“The \$6,000 grant from Island Health allowed us to develop a curriculum and materials for our All Aboard Family Cycling Program,” says Capital Bike Education Coordinator James Coates. “The program teaches parents and children various aspects of family cycling and helps the entire family feel safer when they cycle together.”

The program contains several modules. The *Cycling While Pregnant* module helps pregnant women to feel more comfortable and confident, while the skills portion teaches kids and adults bike handling skills, shoulder checking, signaling, braking and other important safety measures biking on roads and trails. There’s also a ‘bike petting zoo’ where families can check out different styles of bikes and learn from experienced cyclists.

“Experienced family cyclists brought their bikes – cargo bikes with space for kids and groceries, bikes with trailers, bikes with child seats attached – and were available to answer questions, talk about equipment, and explain best practices, especially as it relates to biking with children,” says Coates. At the end of the program a group ride allows families to test their new skills and knowledge.

“Bridget, our instructor, was so great with the kids. For our 6 year old, all the skills introduced were so helpful, while our 9 year old found value in the signal sandwich and refining turns and stops,” says participant Tina Tam. “Both boys gave ten enthusiastic fingers and thumbs up and even signed up for the kids ride at Tour de Victoria!”

“The benefit of this course is that it’s fun and interactive, and includes the entire family. We’re really grateful to Island Health for making it possible,” says Coates. “The biggest barrier to family bike rides is when people don’t feel comfortable cycling with young children. This program teaches everyone in the family how to ride safely together.”

Find more information about the All Aboard Family Cycling Program: capitalbike.ca/family-cycling-program/

The Community Wellness Grant program provides one-time funding for the development of new wellness initiatives and programs aimed at improving the health and well-being of Island residents. Find more information: communitygrants.islandhealth.ca/



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