

The Comox Valley Nursing Centre: Bringing relief to a B.C. community

“You’ve got to be kidding!”

Sam couldn’t believe what his new physician had just told him. It was his first doctor’s appointment since moving to Comox Valley, B.C., as part of a plan to ease into retirement. As usual, his back hurt and he needed to do something about it. It was debilitating. He had been living with chronic pain for three years and was trying, yet again, to find help.

Sam had been to numerous doctors, undergone scores of tests and sought multiple opinions and treatment options in the metropolitan area he used to call home.

During that first visit, his new physician reviewed the medical dossier Sam had transported across provincial borders. Sam says that after his assessment, “[the doctor] said, ‘I haven’t got any answers for you. You’ve done all your homework. Are you aware of the chronic pain management program?’ And I said, ‘In a regional municipality of 65,000? I’m coming from a population of a million and there’s not anything like this!’”

The doctor was telling Sam about the chronic pain management program at the Comox Valley Nursing Centre. Sam went into the appointment expecting what he knew from before, something he calls turnstile medicine. “Bada-bing, bada-boom and you’re out within four or five minutes for an appointment you waited for the last month.”

His referral to the Comox Valley Nursing Centre marked the start of a completely different experience for Sam.

Conceived in 1993 by a group of nurses who jokingly called themselves the Group of Seven, the centre sprang from a heady time of political voice for nursing in B.C. The seven nurses came together to respond to a call for proposals from B.C.’s health ministry, nursing association, and nursing union. Even though they had a raft of support from the community, which they had consulted extensively, they were still surprised when their proposal for the 18-month project was accepted, says the infectiously enthusiastic manager of the centre, Patricia Foster.

For Sam, the Comox Valley Nursing Centre provides “a profoundly comprehensive, integrated, the-way-it-should-be approach to management of at least this chronic pain patient,” adding that it is really “about empowerment and just profound competence and caring.”



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“I remember when the announcement came through,” says Foster, “we looked at each other and said, ‘Oh my gosh, now we have to do what we said we were going to do! Wait. What did we say we were going to do? We said we were going to work with the community within the full scope of nursing, but what does that really look like?’

“There was this core of understanding of what it meant, but we didn’t have a concrete program to land it on.”

That changed with their very first referral — which was the hope and the plan. Foster credits the manager at the time for “the vision and strength to hold us to that mandate of: we will do what the community asks of us within the scope of nursing.”

That very first client was suffering from chronic pain. This was unexpected. When writing the proposal they reviewed all the community surveys, but “chronic pain and chronic disease management didn’t show up and yet the first person who arrived at our door was an exemplar of what our work became and where the focus of health-care reform and primary health care focus is now going,” says Foster.

At the centre, they listened, cared and learned. They consulted expertise and developed partnerships. They built trusted relationships with their professional colleagues and offered a collaborative style to primary health care that didn’t exist in the community. Now, many years later, the centre uses an integrated, multidisciplinary approach that has made it a leader in the management of chronic pain and disease.

Sam couldn’t be happier for this.

“Many chronic pain patients live a life of despair. Is this going to get better, or is this going to get worse, or am I going to be able to manage? It’s not cancer. It’s not heart disease, but it takes a tremendous toll.”

Although a very knowledgeable consumer of health care, Sam had bounced around the health-care system in search of relief for his chronic back pain.

“Somebody, after three years, actually has a treatment plan for me!”

The problem with all this bouncing and fragmented care was that, instead of getting on track and doing something to improve his situation, Sam was always waiting for the next appointment with the next specialist.

At the Comox Valley Nursing Centre it was different, right from the start. First of all, there was a series of four initial chronic pain assessments that were extensive. He was asked questions he had never been asked before. They were “delving more deeply than into anatomical functioning. I thought, ‘Hey, somebody’s really looking at the big picture.’”

Then they sorted out with him what the next steps were, bringing in the expertise of their team: a nurse who is “very, very attentive to the nuances of chronic pain,” a pharmacist who works out of the centre, a physical therapist, and a physician who specializes in pain management. There are also workshops, educational series and support groups at the centre.

“Somebody, after three years, actually has a treatment plan for me!”

And he’s part of the care team, involved in a range of activities to manage the pain: walking, exercise, stretching, strengthening, meditation, acupuncture, intelligent and modest use of pharmaceuticals, and other simple changes, like getting up out of his office chair periodically throughout the day.

Sam says he’s now operating at between 80 and 90 per cent — a huge improvement from the 20 per cent that was his starting point when he moved to B.C.

If this had happened three years earlier, not only would Sam have had a better quality of life and better productivity at work, but he also would have not cost the system nearly as much money as he did. (Sam says he also spent thousands of his own money in his quest before he arrived in Comox.)

In this light, the potential cost savings of this collaborative approach to primary health care are formidable when you consider that the direct health-care costs of chronic pain sufferers in Canada is estimated at more than \$6 billion per year, while the productivity costs related to job loss and sick days has been put as high as \$37 billion per year.

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Comox Valley Nursing Centre

http://www.viha.ca/comox_valley_nursing_centre

Gift for a Culture of Peace (video)

http://www.viha.ca/comox_valley_nursing_centre/news_events/gift_of_peace.htm

Sample referral form

<http://www.viha.ca/NR/rdonlyres/EA9CD4D2-6E71-479F-943D-E00B658CA4E0/0/ReferraltoCVPainServiceSupport.pdf>

Canadian Pain Coalition

<http://www.canadianpaincoalition.ca>

Primary Health Care (CNA position statement)

<http://www.cna-aiic.ca/en/on-the-issues/cna-position-statements/>

Gina Browne's keynote address (video)

Renowned nurse scientist and family therapist Gina Browne talks about the challenges and opportunities ahead for nursing and shares innovative examples of transformative change. Brought to you by *Canadian Nurse*.

A Nursing Call to Action: The Health of our Nation, the Future of our Health System (final report of the National Expert Commission)

http://www2.cna-aiic.ca/CNA/documents/pdf/publications/nec/NEC_Report_e.pdf

Better Health: An Analysis of Public Policy and Programming Focusing on the Determinants of Health and Health Outcomes that are Effective in Achieving the Healthiest Populations (National Expert Commission)

http://www2.cna-aiic.ca/CNA/documents/pdf/publications/nec/BetterHealth_Muntaner-EN-Web-SHORT.pdf

Better Care: An Analysis of Nursing and Healthcare System Outcomes (National Expert Commission)

http://www2.cna-aiic.ca/CNA/documents/pdf/publications/nec/BetterCare_Browne-EN-Web-SHORT.pdf

Better Value: An Analysis of the Impact of Current Healthcare System Funding and Financing Models and the Value of Health and Healthcare in Canada (National Expert Commission)

http://www2.cna-aiic.ca/CNA/documents/pdf/publications/nec/BetterValue_Soroka-EN-Web-SHORT.pdf



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