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“The Miracle on Church Street”
Disruptive Innovation In a Rural Island
Community

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“You Can’t Outsource a Clinic” Naomi Beth Wakan



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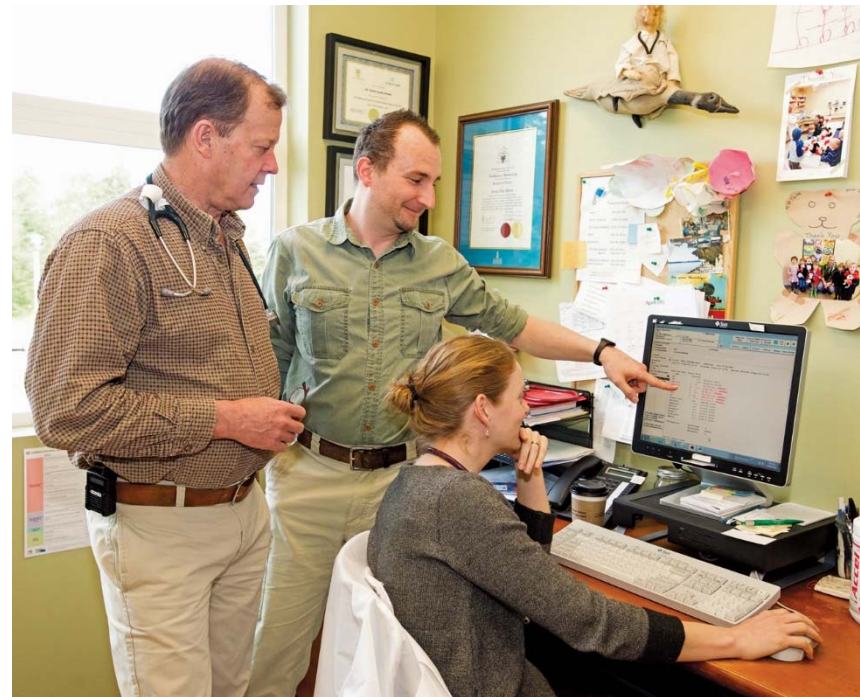
The Building of a Clinic



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A Modern Facility Welcomes Staff and Patients

- Three doctors recruited
- All Gabriolans who want a family physician locally have one (patient panel 3,270)
- Visiting specialists
- Patient access to a variety of health resources



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Three Bay Urgent Treatment Facility

- 24/7 emergency coverage most days of the week (1300/yr.)
- 90% patients assessed in the UTF, treated and returned home:
 - Patients seen at the Nanaimo emergency dept. have a higher acuity than reference communities
 - Patients admitted through emergency have a higher acuity



Critical Success Factors: Social Innovation Theory

- **The Vision** - a well articulated preferred future
- **Successful demonstration project** - Establishing an interim clinic
- **A motivating message** - “The Year of the Clinic”
- **Non-stop communications/ ongoing public awareness** – Local paper; social media, involvement of public officials, positive messaging
- **Fundraising** – Land donation, \$ contributions, < 7% government funding
- **Community leadership and engagement** – 100+ volunteers from laborers to project managers to the provider of coffee and muffins.
- **Community pride** “The Miracle on Church Street”

Adapted from Ed Etmanski “IMPACT: Six Factors to Spread Your Social Innovation”

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Beyond Disruptive Innovation

- The facility was a catalyst for more to come. What happened after the clinic was built?
- What key factors contributed to the ongoing success?
- What are the lessons learned?
- Can the learnings be applied in other communities?

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Not All Problems Solved: More Unmet Needs

- An unusually high suicide rate
- Lack of locally accessible mental health services
- A large vulnerable population:
 - Median age of the population (61 yrs.)
 - High incidence of low income people (18.5%)
 - High incidence of seniors living alone (26.6%)
- Lack of affordable housing

The Momentum Continued...



From Disruption To Sustainability

- **DISRUPTIVE INNOVATORS:** “Passionate amateurs...disrupting the prevailing way of doing things. They wrestle big idea to the ground and make it concrete, with limited resources.

From Disruption To Sustainability Cont'd

- **BRIDGING INNOVATORS:** ...are the link between disruptive innovators and formal organizations and institutions. They spot potential and leverage connections , reputations and resources to see that the potential is realized.

From Disruption To Sustainability Cont'd

- **RECEPTIVE INNOVATORS:** ...have an insiders knowledge of the key levers needed to advance an issue steering the innovation so that it may flourish and become the new standard.

Al Etmanski "IMPACT: Six Factors to Spread Your Social Innovation"

Bridging Innovators and Positive Collaboration

- Rural and Remote Division of Family Practice, BC
- Community not for profit organizations
- Philanthropic organizations
- Gabriola Health and Wellness Collaborative

Rural and Remote Division of Family Practice

- Physician engagement with community driven initiatives
- Administrative and project management support
- Access to grant funding through Doctors of BC and BC ministries
- Constructive dialogue with the health authority – finding common ground
- Innovation spread

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Community Not for Profits/Philanthropic Funding

Provided funding to:

- Train community leaders
- Train community volunteers
- Support local health and wellness programs and workshops programs

Impact: Bridging and Receptive Innovators

- Home care nurses see most patients in the UTF (~800/yr.)
- Mental health nurse sees (~500/yr.)
- Social worker encounters (~ 500/yr.)
- Public health immunization clinic monthly
- Physicians embraced team- based care with weekly team meeting and monthly rounds



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Impact Cont'd

- Videoconference capacity (120 apts./yr.)
- A geriatric psychiatry clinic bi-monthly
- Continuing medical education e.g., monthly rural rounds from UBC



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Impact: Collaborative and Community Programing

- FETCH
- CMHA – CBT volunteer training
- Peer-led exercise program
- Community workshops: ASSIST, Safe Talk, Recovery Yoga, Trauma Based Care, Chronic Disease Management



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Collaborative and Community Programing Cont'd

- Art therapy based programs for people facing challenging diagnosis, intentional aging and adults with special needs
- Weekly day program for vulnerable seniors
- Seniors lunch
- Support groups for Caregivers, AA, NA, Grief
- Meals for Wheels, Drivers to Doctors
- Organization of week long events for both Mental Illness Weeks and Mental Wellness Week

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In Conclusion: Factors Enabling Success

The Disruptive Innovators

- Citizen leadership, engagement and volunteerism instinctively following the principles of social innovation

Bridging Innovators

- Who used their resources and connections to build bridges with formal organizations

Receptive Innovators

- Including the health authority who recognized the positive impact and supported new roles and community organizations who collaborate to offer new programs and services

Underpinning it all: Leadership & Relationship Building

- Changing the conversation from demand and confrontation to respectful dialogue, collaboration and partnerships



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