

Telephone advice line links specialist and family physicians together for better patient care

Rapid Access to Consultative Expertise (RACE) is a telephone hotline that provides family physicians in the Vancouver Coastal Health region with timely access to specialist consultation. RACE enables family physicians to phone a single number and request a telephone consultation with an on-duty specialist from one of 18 medical specialties. Calls are returned within a maximum of 2 hours and often sooner, with over 75% of calls returned within 10 minutes.

RACE is a project of the joint BCMA/Ministry of Health Shared Care Committee, Providence Health Care (PHC), and Vancouver Coastal Health (VCH). It is one of many projects of the Shared Care Committee's Partners in Care initiative, which in turn is one of several committee initiatives enabling family and specialist physicians to work together to improve health outcomes and the patient journey through the health care system.

RACE grew from a 2008 pilot project between the PHC Department of Family Medicine and Division of Cardiology. Funding from the joint BCMA/Ministry of Health Specialist Services Committee provided the financial support for cardiologists' time spent answering calls. Funding from the Shared Care Committee enabled PHC to expand the service and formally launch RACE with a broader range of specialists in June 2010. New specialties are added based on the needs of family physicians, and compensation for specialists' time is funded by the Specialist

Services Committee.

The award-winning service enriches family practice by providing a collegial and CME-eligible educational experience that directly links physician learning to practise in real time (see www.cfpc.ca/Linking_Learning_to_Practice for details). For specialists, RACE reduces wait lists by potentially eliminating consultations involving easily answered clinical questions. There have been more than 8000 calls to the hotline since it was launched, many of which have enabled patients to receive timely care from their family physician instead of waiting to see a specialist.

Recent formal evaluations of RACE reflect the success of this innovative program. In a 2012 survey, all RACE users reported high satisfaction with the service. Sixty percent of family practitioners said RACE helped avoid unnecessary face-to-face patient consultations with specialists, and 32% of respondents said using the service helped them avoid sending patients to the emergency department, resulting in estimated cost savings to the health care system of up to \$200 per call. All family physicians surveyed said they would use the service again, and 95% would recommend it to their colleagues.

Based on its success, RACE is the model for a number of Partners in Care telephone consult projects elsewhere in the province, including Northern BC, Surrey/North Delta, Kootenay Boundary, and South Vancouver Island.

RACE is intended to fill a gap in communication between family and specialist physicians (rather than interfere with existing referral patterns and relationships), and family physicians are encouraged to access local

RACE billing codes

Family physicians

- G14018 General Practice Urgent Telephone Conference with a Specialist: \$40

Specialist physicians

- G10001 Specialist Telephone Advice, response within 2 hours: \$60
- G10002 Specialist Telephone Patient Management, per 15 minutes or portion thereof: \$40
- Initiated by a nurse practitioner, per 15 minutes or portion thereof: \$40

specialists where they can. If they do not have access to those specialists, they may want to consider using RACE. The program does not provide appointment bookings, arrangements for transfers, laboratory or diagnostic investigations, or arrangement for a hospital bed. It is also not intended for referrals, nor does it expedite the referral process.

RACE is available to all family physicians in the VCH region, Monday to Friday from 8 a.m. to 5 p.m. (see sidebar for fee code information). Family physicians in the Fraser Health region can also access select specialty advice (i.e., cardiology and rheumatology) through RACE, which also provides province-wide access to a number of specialty services. Visit RACEconnect.ca for a complete listing of specialties engaged, available resources, and summary information about the program, including "RACE in a Box," a toolkit with step-by-step instructions for setting up a RACE-like structure.

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Our exams approached quickly, and many of us banded together into study groups scattered in houses and coffee shops across Kelowna. With the help of SMP instructors, tutors, administration staff, and each other we tackled the challenge of our tests, propelling ourselves into our second year of medical school.

Second year and beyond

After enjoying one of our last free summers before the start of our professional lives and busy work schedules, we converged again at UBC Okanagan and Kelowna General Hospital in late August to start second year.

Second year is a lot like the second half of first year. We will be spending the majority of the next 10 months in small-group learning sessions, a lecture hall, family practice office, or clinical skills room. Despite the distance between sites, the curriculum and exams for our program are exactly the same as every other medical program under the UBC banner, ensuring a comparable experience in all the sites. Advancements in online videoconferencing technology and the hard work of our local course directors and coordinators allow us to stay in step with all of our colleagues in the UBC Medicine class of 2016.

Upon the completion of second year the class will be split into several groups to begin our clinically based third year. As it stands, about 24 students will remain in Kelowna to do their clinical clerkship at Kelowna General Hospital for this period. The remaining eight students will head either to the Royal Inland Hospital in Kamloops for a similar rotation-based clerkship program or to one of the many integrated community clerkship sites around the province in places like Chilliwack, Duncan, Terrace, Fort St. John, Trail, and Vernon. Though we may be scat-

tered all over British Columbia, all of us in the class of 2016 will have comparable clinical experiences in family practice and 10 different specialties, as well as electives in which we can pursue areas of special interest. Finally, once we have all passed the same written, oral, and objective structured clinical exams and gained the required competencies, we can progress to fourth year.

During fourth year, like our comrades at the other UBC sites, we will be relocating around the province and country to take part in clinical electives, gaining experience in the areas of medicine we would like to pursue. Eventually, along with medical students from across the country, we will be applying through the Canadian Residency Matching System to secure residency positions at UBC or other Canadian medical schools. To those of us still working through second year (and still figuring out how to memorize the spinal nerve dermatomes), that all seems quite far off! As we work through our curriculum and welcome the class of 2017, the SMP class of 2016 is growing closer and more connected, and as a result we are seeing the program mature as a whole. We are not only learning how to be competent physicians, but also solidifying a culture of camaraderie at UBC's newest extension. I am certain that our efforts will be fruitful and will eventually ensure that the SMP becomes well known for producing engaged, compassionate, and proficient medical leaders to join the physician workforce.

Acknowledgments

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- Ask the worker to call WorkSafeBC at 1 888-WORKERS to file a claim.
- If immediate critical incident support is required, call WorkSafeBC and ask to speak to our critical incident response team.

WorkSafeBC will obtain a psychologist's or psychiatrist's diagnosis as required. Decisions on these types of cases are made in 4 to 6 weeks, but can take longer if a detailed investigation into allegations of bullying or harassment is required. If the claim is accepted, WorkSafeBC's MHCU staff will work with you and arrange for your patient to receive supplemental treatment through a psychologist, psychiatrist, or multidisciplinary program.

To discuss your patient's mental health-related case before or after initiating a report, please call 604 231-8888 or 1 888 967-5377, and speak to a physician in WorkSafeBC's MHCU.

— Joe Pinto
Senior Program Manager,
WorkSafeBC Mental Disorders
Program

shared care

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For information on Shared Care Committee initiatives, visit www.sharedcarebc.ca.

— Garey Mazowita, MD
Shared Care Committee member

Additional reading

Araki Y, Lear S. Program evaluation of the PHC Shared Care partnership: Final report. British Columbia Alliance Telehealth Policy and Research, Simon Fraser University. 31 March 2012. (Revised 10 August 2012.)