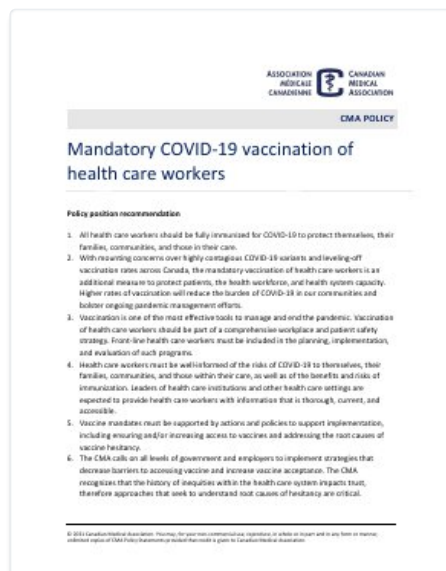


Mandatory COVID-19 vaccination of health care workers

<https://policybase.cma.ca/link/policy14449>

POLICY TYPE	Policy document
DATE	2021-08-21
TOPICS	Health human resources Population health, health equity, public health

Documents



Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

<https://policybase.cma.ca/link/policy14477>

POLICY TYPE	Policy endorsement
DATE	2021-05-17
TOPICS	Health systems, system funding and performance Health human resources

Documents

Clinical Review

Editor's key points

A timely and quality rural anesthesia, surgery and obstetric care program provides timely, quality and safe care to patients. The development of networks of specialists and non-specialists provides for the recruitment and retention of specialists in rural programs, supports the sustainability of these rural programs, and provides a pathway for the recruitment and retention of specialists in rural programs. An interdisciplinary approach to the development of networks, with clinical coaching between rural and regional centers, can be helpful in building and sustaining high-functioning networks.

A combination of quality and the presence of continuing professional development in low-volume settings, supported by rural center programs. Because they are both fundamental and challenging, the focus on the addition of a specialist can be helpful in the regions that developed the consensus statement.

Summary The building relationships that are fundamental to successful networks are built through clinical coaching, continuing professional development, and quality improvement. Conversely, a collaborative effort in these endeavors, involving a provincial program that supports clinical networks built on the principles and supporting evidence described in this consensus statement.

Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

Summary The building relationships that are fundamental to successful networks are built through clinical coaching, continuing professional development, and quality improvement. Conversely, a collaborative effort in these endeavors, involving a provincial program that supports clinical networks built on the principles and supporting evidence described in this consensus statement.

Objective To describe the essential components of well-resourced and high-functioning multidisciplinary networks that support high-quality anesthesia, surgery, and obstetric care in rural Canada, wherever it is feasible to have as possible.

Composition of the committee A consensus statement group was formed from the Society of Obstetricians and Gynaecologists of Canada, the Society of Rural Physicians of Canada, the Royal College of Physicians and Surgeons of Canada, the Canadian Association of General Surgeons, the College of Family Physicians of Canada, and the Association of Canadian University Departments of Anesthesia.

Methods A collaborative effort over the past several years among the professional organizations has culminated in this consensus statement on network care designed to improve and support a specialist and non-specialist, urban and rural, anesthesia, surgery, and obstetric care team in high-functioning networks based on the best available evidence.

Report Surgical and obstetric safety needs to be established within networks to address the barriers between rural/rural programs and local access to care. Safety and quality needs to be recognized for the environment across rural patients and providers, regardless of network size. Triage of patients across multiple sites in a quality customer service environment. Remote consulting, clinical coaching between rural and regional centers, can be helpful in building and sustaining high-functioning networks. Maintenance of quality and the presence of continuing professional development in low-volume settings represent a mutual care proposition.

Conclusion The building relationships that are fundamental to successful networks are built through clinical coaching, continuing professional development, and quality improvement. Conversely, a collaborative effort in these endeavors, involving a provincial program that supports clinical networks built on the principles and supporting evidence described in this consensus statement.

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