

Thank you for referring to Vancouver Community Primary Care!

Primary Care is the first point of contact into the health care system. It is normally provided in the community, and is where the majority of health problems are addressed. The goal of VC Primary Care is to provide compassionate, equitable, and integrated health care to adults in Vancouver with the greatest need for care and the least access to service. We see clients who are 18 years of age and older.

The care we provide in VCH Primary Care Clinics is built on five principles: Health Equity, Harm Reduction, Recovery-Oriented Care, Cultural Safety, and Trauma-Informed Practice.

To become a Vancouver Community Primary Care Client, the person must meet the following criteria:

- **Unhoused or living in a shelter, SRO, or supportive housing in Vancouver Community**
- **Not attached to primary care**

Services Offered:

The primary care program consists of 5 sites: Pender, DCHC, Heatley, Raven Song, and Three Bridges. Clinic contact information is visible at the bottom of the referral form. Our primary care clinics provide wrap-around support for clinical and psychosocial issues. There are also a variety of additional specialty services offered at some of the different CHCs.

DCHC and Pender primary care teams have embedded mental health services that have the capacity to support clients on extended leave *who meet the primary care criteria*.

Vancouver Community Primary Care consists of interdisciplinary teams to support client care. With this model, we aim to provide the right care by the right discipline at the right time. Clients will have access to the following disciplines depending on their individual needs: Physician or Nurse Practitioner, nurses (licensed practical, registered psychiatric and registered nurses), community liaison workers, peer specialists, counsellors, dietitians, social workers, respiratory therapists, clinical support attendants, administrative staff, pharmacists, pharmacy technicians, and at some sites, elders.

The majority of our services are offered in clinic settings, though we provide limited care on outreach for clients who are unable to attend the clinic. The need for outreach is determined by the primary care team in partnership with the client and the client's support people and agencies. We work closely with other Vancouver Community programs like Public Health, Home Health and MHSU to meet client health needs.

"Need-to Knows" for Client Clinic of Choice:

In the majority of situations, clients can choose which clinic works best for them in the referral process, as long as they live within Vancouver city limits. There are two situations where the Primary Care program may decline a referral and refer the client to an alternate site:

- 1) *The client requires outreach services.* Clients who require outreach and meet primary care criteria will be matched to the clinic closest to their residence.
- 2) *The clinic of choice is full and not accepting new referrals.* In this case, the client will be given the choice to attend a clinic that has capacity. We will work with the referral partner and the client to make this decision.



Vancouver Community Primary Care Program Referral Form

Downtown Community Health Centre – Heatley – Pender – Raven Song – Three Bridges

Dear referral partner,

Thank you for considering a referral to our program. Our mission is to provide compassionate, equitable, and integrated health care to those with the greatest need **and** least access to service. Please help us by:

- Reading the criteria listed above to ensure your client meets criteria
- Fully completing the form below; incomplete forms may result in a processing delay
- Note: If client is currently in **acute care** OR requires an **urgent appointment**, please call clinic before completing referral form

Thank you for your cooperation!

Relevant Client Information

Consent

- Client has consented to referral and is agreeable to being contacted Y / N

Housing

- Client is unhoused or living in a shelter, SRO, or supportive housing in Vancouver Community Y / N
- Details:

Healthcare Attachments

- Does client have a primary care provider (family doctor/nurse practitioner)? Y / N
 - If yes, why is client seeking access to the VCH Primary Care Program?

- Other healthcare services (e.g. outreach teams, mental health & substance use teams, home health/home support, clinics etc.):

Chronic Health Conditions:

-

Other health needs (medical, psychosocial):

Do you anticipate that client will need ongoing outreach support (wound care, engagement, home support)? **Please explain:**

Client Details

First Name:		Last Name:		Pronouns (as per client):	
DOB (MM/DD/YY) and Age:		PHN:		PARIS ID:	
Address:				Phone:	
Email (or alternate phone):			Support Person:		
Is there a place where messages can be left for client (eg: Carnegie, Gathering Pl.):			Client's preferred form of contact (phone, email, support person, other):		
Primary language:		Communication barriers:			
How will client travel to/from appointments?:					

Referral Source Details

Name:		Role/Organization:			
Phone:		Email:			
Signature:				Date (MM/DD/YY):	

Clinic Information

Please review clinic locations with client to determine which clinic would be easiest for client to access. Please fax referral to client's preferred clinic. For clients who require ongoing outreach support, referral should be faxed to clinic closest to client's residence. Receipt of referral will be confirmed within 2 business days.

Downtown Eastside		Mt. Pleasant		Downtown
Downtown Community Health Centre 569 Powell Street Ph: (604) 255-3151 Fax: (604) 255-0314	Heatley 330 Heatley Avenue Ph: (604) 675-3585 Fax: (604)297-9692	Pender 59 West Pender St. Ph: (604) 669-9181 Fax: (604) 688-9775	Raven Song 2450 Ontario Street Ph: (604) 709-6400 Fax: (604) 879-9173	Three Bridges 1128 Hornby Street Ph: (604) 331-8900 Fax: (604) 297-9948

*For referrals from acute care to the DTES clinics, please fax referral and phone 604-317-3923.

Office Use Only

Date received (MM/DD/YY):	Referral source notified of receipt <input type="radio"/> Y
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