



Terrace Physicians Writing Prescription for Success

December 2007

A physician referral program connecting chronic disease patients with discounted Leisure Services programs and facilities is up and running in Terrace.

The Terrace Healthy Living program is open to patients with diabetes, congestive heart disease, morbid obesity, inflammatory arthritis disorders, heart and stroke conditions, or those participating in the Canada Pension Plan disability program. The majority of people participating in the city-subsidized program are age 35 and up, mainly seniors.

“It’s a three-way partnership between the person prescribing, the person participating in the program and Leisure Services,” said Carolyn Marleau, City of Terrace Leisure Services Program Coordinator, who leads Terrace’s Active Community initiative.

The program’s inception came out of meetings between Leisure Services and the Healthy Terrace Advisory Committee. The Committee has representation from nurses (representing physicians), Northern Health, Tobacco Reduction, the Chronic Illness Management Committee, Aboriginals, Mental Health, a nutritionist and an Aboriginal Patients Advocacy representative from Mills Memorial Hospital.

“We were talking about developing a program that would give people with chronic illnesses an option to participate in healthy living or an active living program at a discounted rate because they were the people who might have a few more financial restrictions because of medication etc.,” Marleau said.

Marleau made a successful presentation to Terrace’s mayor and council, backed by statistics and the support of the Healthy Terrace Advisory Committee. In June 2007, the mayor and council agreed to offer an access program to any client that has been diagnosed with a chronic illness by a medical professional, at a discounted rate of 50%.

“It was meeting the mark with what we were hoping to accomplish in that people would be more accountable for their activity levels using this program,” Marleau said.

The program began in September 2007. Leisure Services sets aside time slots at its facilities for participants in this program to get involved in a structured program—the Healthy Hearts aquafit program—or get active where they choose or how their physician prescribes by attending fitness, pilates or yoga classes, going to the gym, swimming or skating.

“It was thought at the [Healthy Terrace Advisory Committee] roundtable that if we had set times, people might be more inclined to use them,” Marleau said. *“This would allow us to track how many people were coming as well, so it was also for the measurability.”*

Leisure Services got the word out about the program through the local media, through its website and by sending letters to the local medical community, including physicians and physiotherapists. More than a dozen people were showing up with prescriptions from physicians on average each month during the program’s first few months.

“They’re thrilled that they have an opportunity to participate in something that’s structured, to get them on their way,” Marleau said. The program will also offer free monthly educational sessions with health promotion and prevention professionals from the community.

Though the program is in its infancy, the impact on one woman’s lifestyle already stands out. She was involved in past Leisure Services programs so the Healthy Living program is a continuum for her.

“She jokes and says it’s no longer an assistant, it’s a crutch, which is a good thing because it aids her so much,” Marleau said. *“Even for the social well-being, for her to get out and socialize with other women—she’s made it a big part of her life.”* This woman even organizes social gatherings for the program participants.

Because the program is individually driven, with individual accountability and the option to get active how they choose, it promotes sustainable individual healthy lifestyle choices. Once their three months is up, program participants can continue to renew their prescription through their physician. The aim is for the physicians to assess the program’s impacts on patients when they come in for a renewal. In addition, Marleau plans to pass along the BC Recreation and Parks Association’s TRACE (Tools and Resources for Active Communities Evaluation) Toolkit to the Aquatic Manager for on-site evaluation of the program.



The findings from the Pilot Project provided information about the potential for the development of a province-wide physical activity initiative, delivered by community action sites and physicians.

In 2008, the BC Healthy Living Alliance (BCHLA) will be rolling out a Physician Engagement program through its Physical Activity Strategy’s Provincial Walking Initiative. The BCHLA is a group of nine BC health promotion organizations that have come together with a mission to improve the health of British Columbians through leadership that enhances collaborative action to promote physical activity, healthy eating and living smoke-free.

The BCHLA Physical Activity Strategy is a comprehensive and integrated approach to getting British Columbians to become more active, with a targeted focus on inactive adults between the ages of 35 and 54. This strategy is co-lead by the BCRPA and the Heart & Stroke Foundation.

Through the BCHLA Physician Engagement program, in partnership with the BCMA, and involving the BCRPA Active Communities Initiative, the Health Authorities and others, physicians across BC will provide information on the benefits of physical activity, how to get started, and local information on walking programs and opportunities.

With the Terrace model off the ground and provincial initiatives in the works, Active Communities throughout BC could soon be seeing similar programs starting up through their local doctors’ offices.

Marleau notes the program initially requires staff time to set up but now it takes minimal staff time to run the program. She would welcome duplication of this program model in other Active Communities around BC. Aside from sending the letters to the medical community, the main element is to identify the need in the community, Marleau noted.

According to the BC Ministry of Health, while people with chronic conditions represent about 34 per cent of the BC population, these individuals consume approximately 80% of the combined MSP, PharmaCare and acute care budgets.

Similar to the Terrace model, BCRPA conducted a pilot project in 2006 engaging physicians, in partnership with the BC Medical Association (BCMA) and the University of Victoria. The Pedometer Pilot Project provided an opportunity for BCRPA, physicians and community action sites (Penticton and Abbotsford) to work together toward the common goal of increasing physical activity levels among inactive patients by using pedometers to track progress and motivate activity.

- City of Terrace and Northern Health partnering with health stakeholders to offer Terrace Healthy Living program
- Planning monthly educational sessions with nutritionists for chronic disease patients
- 9 schools registered with Action Schools! BC in School District 82
- Move for Health Day events held in schools on May 10
- Hosted a BCRPA Active Workplace Workshop in 2006
- Hosted a BCRPA Active Communities Regional Roundtable in 2007

Terrace Info

Population 12,556 (BC Stats 2005)

- Within the Skeena River Valley and the Coast Mountains
- Outdoor recreation activities include hiking and biking trails, skiing, rafting, kayaking, skating, snowshoeing, horseback riding, diving, swimming, and the Millennium Trail
- Aquatic centre and Sportsplex with 2 ice rinks
- Home of the Kermodai (Spirit) Bear
- Neighbouring First Nations are Tsimshian (Kitsumkalum and Kitselas), Nisga’a, Haisla, Gitksan and Gitanyow
- Regional business centre for the Northwest area

(Sources: www.city.terrace.bc.ca, www.kermodetourism.ca, www.teda.ca)