



**Campbell River and District**  
**Division of Family Practice**

A GPSC initiative





**Division in Review to October 31, 2014**

**Report from the Chair:**



Over the past 14 months it has become very apparent that the direction of health care in our province and in our communities is moving from an individual physician office and hospital based models to a more collaborative primary care model involving family physicians, community based support services along with hospital based services. The development of Divisions of family practice is playing a vital role in this evolution.

In late August 2013, the Campbell River and District Division of Family Practice was officially formed. Since that time, your Board of seven (7) has been actively engaged, building relationships, developing the platform from which real change can emerge and exploring the need that our community has for primary care. Our staff has grown to include Janet MacDonell, our coordinator, Dinah Larson our bookkeeper, and Christine Colbert, our GP for Me project manager. Together we have set on a path to becoming fully organized, and developing a clearer understanding of the Division's role in the geographic area of Campbell River, Quadra Island, Gold River, Sayward and beyond.

In February 2014 the first social event for the Division was hosted and it was an opportunity to relax with colleagues and spouses and was a natural segue to the priority setting event in hosted March 11th.

This was an opportunity for family practioners in Campbell River and District:

- to learn a bit more about 'Divisions,' and why it might be of value to our physician community
- to identify areas that are of concern for us, and begin to identify which of these issues we see as most important to tackle as a new organization
- have initial conversations to explore what some of these top problems look like for us and what might be some next steps
- and, of course, to give us an opportunity to do this together



**The Board**

**Kerry Baerg, Chair**

**Pete Friderichs, Vice Chair**

**Patrick Rowe, Secretary/Treasurer**

**Dieter DeBruin, Director**

**Jim Proctor, Director**

**Rob Ramsey, Director**



This well attended event launched the Division's application to A GP For Me for funding to initiate the Assessment and Planning phase which I'm sure by now most of you are aware of. Christine is aptly leading us in a very compressed time frame, identifying the key stakeholders, and exploring their perceptions of areas of need.

A GP For Me report follows and it is important to note that the community survey is live on the Division's website: <https://surveys.divisionsbc.ca/CR-doc.aspx#> And if you haven't checked it out recently, take a peek at the new developments on our website - <https://www.divisionsbc.ca/campbellriverdistrict/home>

This is the canvas on which the new picture of primary care will be painted, reflecting the needs of our community and it's residents. Ultimately this will lead to some tangible endpoints and an implementation plan towards that end.

All of this is happening in tandem with the ongoing work of the Division. In June of 2014 we had our first Collaborative Services Committee (CSC) meeting and now meet once a month. This committee, as it's name implies, is a multifaceted committee comprised of members from the Division, Island Health, First Nation Health authority, hospital representatives and community members, as well as administrative support by the division and island health. Ultimately the CSC is the platform that change will likely emerge from.

Currently there is one subcommittee that meets quarterly to represent the needs of patients in an end of life situation. The End Of Life working committee is represented by Board Directors Drs Pete Friderichs and Dr Jim Proctor and Division members Dr Liezl Sullivan and Dr Willem Prinsloo, along side community services stakeholders and interested citizens.

The Campbell River and District Division of Family Practice is also an integral part of the interdivisional team on the Island. The interdivisional team is represented by the 8 Island Division Executive Directors/Coordinators, our respective Board Chairs/Co-Chairs and the health authority. Committee work is a large part of this and at present we are involved in:

- ◆ the Recruitment and Retention working committee
- ◆ we are one of two Island Division representatives on the interdivisional CSC planning committee. This group meets quarterly with the next schedule event in January 2015
- ◆ In September 2014 the "Child, Youth and Family Mental Health and Substance Abuse" Service plan was launched. This collaborative with Island Health, Ministry of Children and Family Development, and the island Divisions is a 3 year program to strengthen the services for children and youth with mental health and substance abuse issues. The program is being rolled out in two phases with our Division electing to fully participate in September 2015 however, we actively sit at the table to learn and participate in a way that will position us for success
- ◆ will be represented by a Director and Division Coordinator in a face to face meeting with Deputy Minister Minister of Health Stephen Brown. The invitation was extended by the Deputy Minister after his presentation at the Provincial Round Table meetings in June of this year. The invitation is for dialogue on the ongoing challenges in the delivery of primary health care; an agenda is in development

By now you will have noticed the change in the delivery of the Doctor of the Day program. Thank you to our colleague Gunther Klein who has tirelessly managed the schedule and the process to this point. Gladly he has handed the reins over to the Division under the careful management of Janet. Although the responsibility of the DOD remains that of the department of General Practice, the scheduling, and reimbursement is managed by Janet and the Division. Thankfully these changes have been accompanied by the fee increase that I'm sure you all have noted

The future looks very busy! A GP for Me remains front and centre for the immediate future, but on the horizon is strategic planning with development and implementation of new strategies. We will be hosting an event that brings together physicians and community service providers to share data and outcomes from A GP For Me assessment and planning. There has been dialogue with our Division colleagues in Comox and planning is underway to host a joint social event, perhaps a family picnic at a midway point between our two cities.

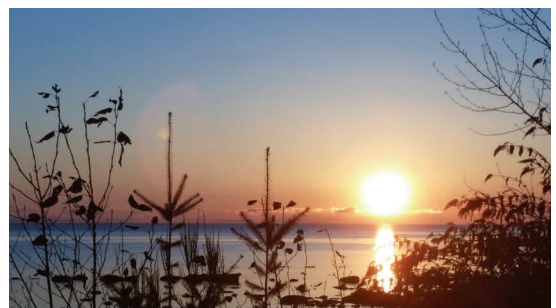
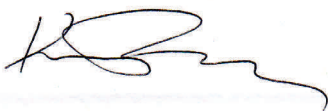
Although the board members have initially accepted their inaugural term as two years, we welcome interest from new potential members. There will be lots of opportunities to participate in working groups as we move from assessment to implementation. Please let any board members know if you have a burning passion to become involved in any capacity. We will be looking forward to formally accepting new board members later in the new year.

While there will always be challenges we are excited about the small achievements, opportunities for learning and growth and welcome others to join the Board on a variety of working committees.

Together we can tackle issues none of us could effectively address on our own.

Thanks for your ongoing support of OUR Division.

Sincerely,



# A GP for Me



The Division is currently engaged in an initiative called A GP for Me. The initiative comes out of research recognizing the importance of the continuous doctor-patient relationship (the attachment of the GP and patient) for improving health outcomes of patients. The goals of the initiative are to:

- ◆ Make sure everyone who wants a family doctor can find one (estimated 14% unattached)
- ◆ Find ways to build up the capacity of the entire primary health care system in order to better meet community needs; and,
- ◆ Strengthen the relationships between family doctors and their patients, including better support for the needs of vulnerable patients.

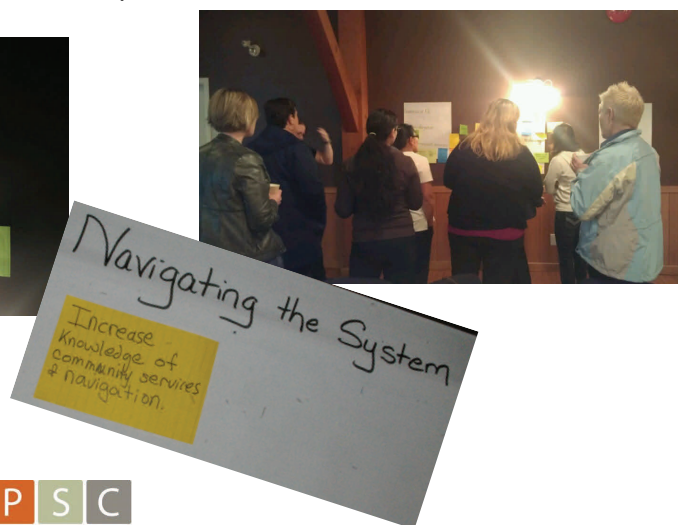
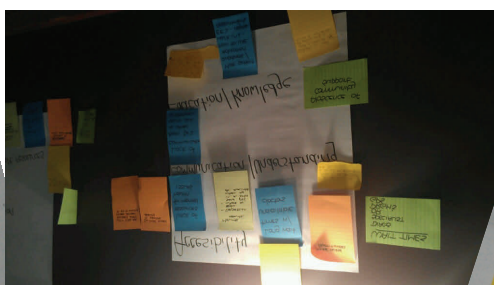
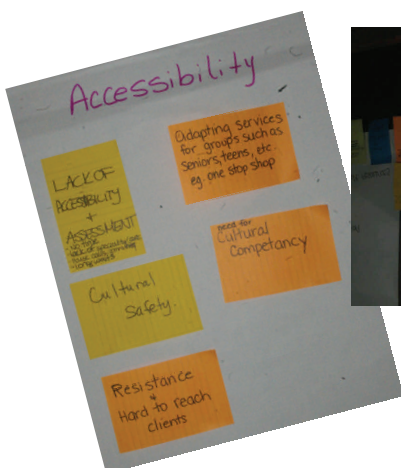
It is a multi-phased project, phase one being data collection to understand the current barriers to quality patient care and the patient/provider relationship; how systems efficiencies/inefficiencies impact the health and wellbeing of our community and our GPs and to use this information to find out how we can affect positive change for both providers and community members



So what are we doing for the assessment and planning phase?

- ◆ We hosted an engagement event to hear from community service providers about their perception of the gaps and barriers to effective primary health care for the clients that they serve. While we had representation from 13 community organizations at the event, we have had conversations with others and continue to reach out (and be sought out) by interested parties.
- ◆ We hosted an engagement event with 25 MOAs representing 7 clinics
- ◆ We met with hospital clinical nurse managers
- ◆ We launched a community survey to hear from residents about their experiences and needs around primary health care
- ◆ We distributed a physician survey and are conducting interviews focusing on capacity and other issues of importance for GPs.

Phase two of A GP for Me is an implementation phase. Based on the analysis of our data, we will form working groups to develop strategies for one or more priorities identified. The implementation phase is funded until March of 2016 however the criteria for receiving funding is that the proposal brought forward be sustainable post-project funding. Our goal is to build a modest but sustainable strategies that may include working with community partners and VIHA to address some of the priorities identified in the assessment phase.

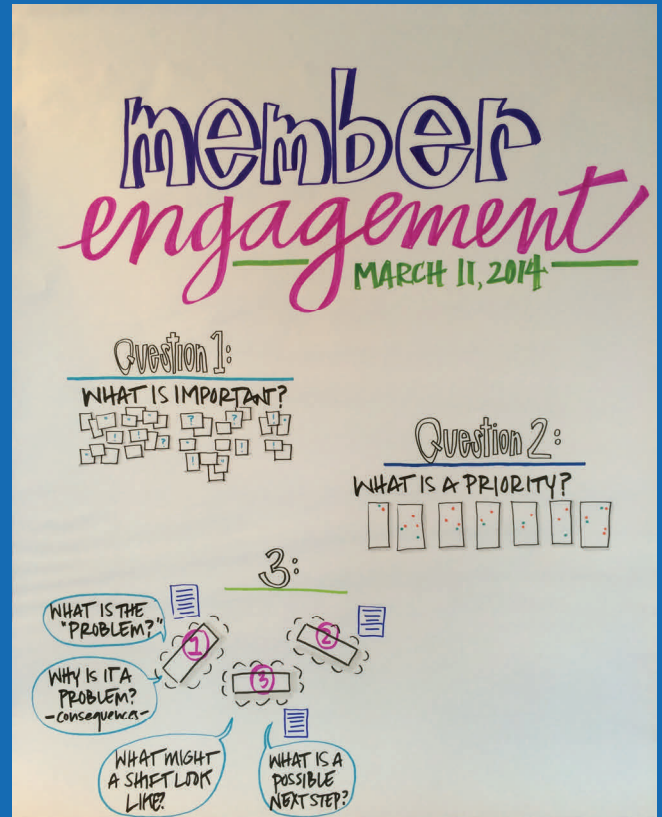




What is the measure of success?

What is your passion?

Where do you want to make difference?



**MAKE A NOTE TO CHECK OUT THE WEBSITE FOR:**

**UpToDate:**

UpToDate is an award-winning online clinical decision support resource, available to Divisions of Family Practice members for use in individual practices at no cost to the individual physician. Division members can access more than 10,000 peer reviewed topics in 21 specialties from international and Canadian authors, as well as drug information, medical calculators, and patient information sheets. All UpToDate topic searches are CME eligible for registered users

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**Campbell River and District Division of Family Practice**  
**Comparative Income Statement - Interim Unaudited Account**

	Actual 04/01/2014 to 10/31/2014	Budget 04/01/2014 to 10/31/2014
<b>REVENUE</b>		
<b>REVENUE</b>		
MoH Infrastructure	109,421.85	102,083.31
MoH - Doctor of the Day Program	107,125.00	0.00
Other - Collaboration Incentives	0.00	5,833.31
MoH - GP for Me	99,949.25	99,958.00
Miscellaneous Revenue	2.99	0.00
<b>Total Revenue</b>	<b>316,499.09</b>	<b>207,874.62</b>
<b>TOTAL REVENUE</b>	<b>316,499.09</b>	<b>207,874.62</b>
<b>EXPENSE</b>		
<b>Human Resources</b>		
Physician	123,064.81	61,714.70
Coordinator	22,243.25	32,760.00
Bookkeeper	1,618.75	2,450.00
Event Facilitator	0.00	8,000.00
Project Manager	12,975.00	24,000.00
Community Developer	9,481.00	18,000.00
Data Analyst	0.00	4,500.00
Admin Support	0.00	8,000.00
CPP Expense	59.54	0.00
Contracted Fees	5,882.63	3,000.00
<b>Total Human Resources Cost</b>	<b>175,324.98</b>	<b>162,424.70</b>
<b>Administration</b>		
IT Support	0.00	600.00
Information Gathering Costs	0.00	1,341.30
Insurance	0.00	816.62
Banking Interest & Service Charges	359.50	291.62
Accounting & Legas Fees	3,500.00	3,500.00
Travel - Mileage	2,659.14	10,900.00
Travel - Airfare	1,022.75	0.00
Accommodation	636.19	0.00
Event Expenses	3,450.44	13,633.31
Advertising & Promotion	0.00	750.00
Recruitment	878.24	0.00
Meeting Costs	5,463.16	1,618.75
Inter-Divisional Participation	0.00	1,458.31
GST & PST Unrecoverable	1,519.82	0.00
<b>Total Administration</b>	<b>19,489.24</b>	<b>34,909.91</b>

**Supplies & Equipment**

Office Supplies & Expense	950.29	1,520.81
Computers ( Hardware)	0.00	583.31
Computers (Software)	0.00	583.31
Furniture	325.00	0.00
Postage & Courier	0.00	58.31
Printing	174.07	1,408.31
<b>Total Supplies &amp; Equipment Expenses</b>	<u>1,449.36</u>	<u>4,154.05</u>
<b>TOTAL EXPENSE</b>	<u>196,263.58</u>	<u>201,488.66</u>
<b>NET INCOME</b>	<u>120,235.51</u>	<u>6,385.96</u>

<b>NOTES</b>	Infrastructure Funding - April 1, 2014 to March 31, 2016	\$ 180,997.50
	A GP For Me - Assessment and Planning July 15, 2014 to March 31, 2015	\$ 199,898.50
	Dr of Day Paid Quarterly - Deffered Balance	\$ 30,375.00

**BALANCE FORWARD**

*Infrastructure Funding*  
April 1 to October 31, 2014  
\$180,997.50  
-\$105,581.91  
\$75,415.59

*A GP For Me*  
July 15 to October 31, 2014  
\$199,898.50  
-\$99,459.25  
\$99,949.25

*Doctor of the Day*  
April 1 to October 31, 2014  
\$625.00 Balance Fwd  
-\$46,000.00 Payments - July to September  
\$45,625.00 Income for October to December  
-\$15,500.00 Payments - October  
\$30,375.00



Dr Patrick Rowe, Secretary/Treasurer  
Dated: November 17, 2014





**Building on our foundation and putting down roots**