

# ANNUAL REPORT 2015-16



**Thompson Region**  
**Division of Family Practice**

A GPSC initiative

**Our Goal:**

*By 2020, the Thompson Region is the model community for the delivery of family medicine and primary health care in British Columbia.*

**Our Vision:**

*A community of family practitioners working collaboratively to pursue excellence in family medicine in such a manner that improves physician and patient satisfaction and wellness with consideration to cost efficiency*

**Our Mission:**

- To support the Thompson Region community of family practitioners in their pursuit of excellence and innovation in family medicine and patient care.*
- To be the place where family physicians go to identify their needs, engage in learning, and participate in finding collaborative community-based solutions to improve family medicine and primary care.*
- To provide physician leadership in systems with clinical improvements, participate in collaborative community-based learning and improvements in family medicine and primary care.*
- To promote physician health and collegiality.*
- To advocate for the essential role of family physicians in the delivery of health care.*

**Our Core Values:**

*We value the ability to listen, learn, collaborate, be inspired by, and innovate with our physicians, our community, and our partners with respect and integrity.*

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## Chair's Report 2016



**Dr. Chip Bantock**  
Board Chair

It is my pleasure to share with you the Thompson Region Division of Family Practice annual highlights. Our sixth year in operations was one of leadership and transitions: building on our momentum and capacity to address the strategic direction you provided at last year's AGM; completing several Shared Care funded projects; finalizing our work within the

provincial A GP for Me initiative; co-leading with Interior Health (IH) the Transformation Primary Care for Older Adults; culminating with the opportunity to engage directly with the Ministry of Health as a Proof of Concept Community for primary care transformation.

The activities and achievements of the past year strengthen the Division's ability and position to collaborate with partners and influence further primary care transformation in our region. They bring us another step closer to achieving our members' shared vision of establishing the region as a centre for excellence for family practice in integrated primary care. And they contribute to meeting the Division's goal to improve patient access, quality of care, family doctor satisfaction, and ultimately, a sustainable system to meet the long-term needs of community.

During the year we:

- Collated and shared your feedback with GPSC (General Practice Services Committee) on direction toward the Patient Medical Home, integrated primary care for patients with complex chronic disease, and specialized care for older adults and people with mental health and or substance use issues. I'd like to extend a huge thank you to Dr. Phil Sigale and Cathy Thibault from Interior Health for

their co-leadership of the Local Action Team (LAT);

- Continued our work on the Child Youth Mental Health and Substance Use (CYMHSU) Collaborative and expanded the Mental Health portfolio to include a new Access to Psychiatry portfolio by exploring access to psychiatry and developing a proposal in partnership with the Shared Care Committee. A huge thank you to Dr. Shirley Sze for her continued dedication, and to her and Dr. Kurt Buller for their leadership;
- Initiated the GPSC Residential Care Initiative to support physicians and care home managers in improving care for seniors in residential care. A big thank you to Drs. Sigale, Hamilton, Howie, Lawrie, and Wynne for your leadership;
- Completed our implementation phase of our work within the provincial A GP For Me initiative with substantial leadership from Dr. Loland and evaluation results to March 31, 2016;
- Hosted the formative meetings for the Shared Care Steering Committee, co-chaired by Drs. Joslyn Conley and Rob Baker, that now provides strategic guidance to our Shared Care projects;
- Provided a voice and our Divisions' perspectives at the Interdivisional Strategic Council meetings;
- Engaged in GPSC Visioning and Patient Medical Home discussions, leading into the [Ministry of Health's transformation agenda](#);
- Strongly advocated to GPSC and the Ministry of Health for the essential role of family physicians and the Division in Primary Care Transformation leading to the opportunity to engage in a series of strategic conversations about the desired models for family practice and primary health care in our community.

Looking towards our seventh year, our work will focus on things that help us achieve our goal: That by 2020 the Thompson Region is a model community for the delivery of family medicine and primary care in British Columbia.

My deepest gratitude goes to the Board of Directors who have contributed their time and energy and worked tirelessly to support and guide our organization. All of your Board members have stepped up into many other roles that have helped us progress; I am deeply respectful and appreciative of your commitment.

I'd also like to extend a thank you to our partners who have engaged in this work along with us, including Interior Health, Venture Kamloops, City of Kamloops, the Ministry of Health, and others.

This organisation could not exist successfully if it wasn't for the very supportive team that we have around us, doing all the background work from strategic planning to meals and photocopying. To all those in the Board office we are eternally grateful.

Physician leadership continues to be the key to our success. I am continually grateful for the dedication and passion of my colleagues. The foundation of our work is based on ideas and feedback members have provided. Without the tremendous support of my colleagues around these bodies of work, we wouldn't be enjoy such a great progress or achievements. I thank you for your continued support and encourage you to stay involved. Your voice and ideas will help us continue to improve the system for our colleagues, and ultimately our patients.



## Division Activities

### Collaborative Services Committee

The Thompson Region Division of Family Practice, Interior Health, GPSC, and Ministry of Health together form the Collaborative Services Committee (CSC). The Committee is a forum for identifying and addressing issues and influencing health systems improvements with a focus on primary care.

#### Key accomplishments

- Confirmed co-leadership and CSC support for the Practice Support Program (PSP).
- Evaluated and made recommendations from our NP4BC experiences.
- Introduced and explored the concept of a Patient's Medical Community.
- Provided guidance to the IH Palliative/End of Life Strategy.
- Co-led and presented the Repositioning Primary Care for Older Adults: It Takes a Community proposal to the Ministry of Health.
- Supported collaboration through the GPSC Residential Care initiative.
- Continued to advocate for solutions to Royal Inland Hospital (RIH) systems issues.
- Engaged in dialogue and co-developed models to inform and address the Ministry of Health primary and community care policy direction.
- Co-authored a letter to GPSC to advocate for support and resources to engage in primary care redesign work.
- Advocated for the importance of meaningful physician leadership and engagement in Interior Health transformative work.
- Created a strategy for addressing attachment and access to primary care for people living on the North Shore.
- Restructured the CSC to ensure appropriate leadership and decision authority to enable effective primary and community care transformative work.

### Members

Division: Dr. Chip Bantock, Dr. Graham Dodd

Division Staff: Christine Hollstedt, Chelsea Brookes

Provincial Division Office: Susan Climie

Interior Health: Cathy Thibault, MaryAnne Waters, Martin McMahon, Dianne Kostachuk, Carol Laberge, Darlene Arsenault, Deb Smith

Interdivisional Strategic Council: Dr. Alan Gow

Ministry of Health: Shana Ooms



# Working and Reference Groups

The following describes the aims, accomplishments, and membership of the various Thompson Region Division working groups. Most involve collaboration with other stakeholders while some include Division members only. These groups are a mainstay of Division activity.

## Endocrinology Telehealth Project

The Thompson Region Division of Family Practice, Interior Health Authority, and UBC Okanagan collaborated on prototyping endocrinology telehealth services as a viable specialist's referral option in the Thompson Region.

### Key Accomplishments

- Project wrapped up, focusing on spread and sustainability.
- Dr. Charlotte Jones presented project findings at the World Diabetes Conference.
- Connected Dr. Jones to several sites within Interior Health for endocrinology telehealth services.
- Continued to support endocrinology telehealth by adding Dr. Jones to Pathways.

### Members

Dr. Charlotte Jones, Dr. Shirley Sze, Dr. Helen Novak-Lauscher, Dr. Kendall Ho, Pat Owen, Robin Watt, Darshan Patel, Lisa Ogilvie, Chris Hollstedt, Cathy Thibault, Monique Walsh, Laura Becotte.

## Child and Youth Mental Health and Substance Use (CYMHSU) Local Action Team

Comprised of a diverse cross-section of stakeholders, the CYMHSU Local Action Team works collectively to increase the number of children, youth, and their families receiving timely access to integrated mental health and substance use services and supports.

### Key Accomplishments

- Partnered with PSP to offer two specific CYMHSU sessions with an attendance of 65 participants.
- Partnered with the Early Years Community of Practice to design a referral pathway to community services for children from birth to six years old.
- Developed a step-by-step process on how to start an Integrated Case Management with the fee codes available for physicians to do so.
- Distributed tools and information from community agencies to family physicians.
- Working on trialing a feedback loop between family physicians, Ministry of Child and Family Development (MCFD), and Parkview Child and Adolescent Mental Health Centre.

### Members

Dr. Shirley Sze, Dr. Allie Davey, Dr. Lyn MacBeath, Dr. Ian Mitchell, Dr. Sheik Hosenbocus, Dr. Lisa Harvey, Dr. Bamidele Olabiyi, Dr. Chaudhry Hussain, Dr. Selena Lawrie, Bill Hamblett, Raj Chahal, Chris Hollstedt, Diane Goossens, Katherine Gully, Manon LeBlanc, Monique Walsh, Robert Brooks, Rae Samson, Sian Lewis, Kris Weatherman, Cst. Marie-Pascale Gagnon, Kathie McKinnon, Laura Becotte, Amanda Lavigne, Leilah Stella, Judy Sturm, Christa Mullaly, Rachel Laird, Clarice Silva, Shelly Bonnah, Tami Lund, Dr. Keramatian, , Christa Hayward-Farmer, Ben Chobater.

### Thompson Region Integrated Case Management Learnings

**Family Background:**

- BIOMEDICAL INFO**
  - Diagnosed with PTSD
  - Diagnosed with anxiety
  - Has self custody
- STEP MOM**
  - Diagnosed with PTSD
  - Biological daughter 4 years old
  - Properly
- 3 YEAR OLD CHILD**
  - Biological son
  - Substance abuse

FAMILY IS CURRENTLY LIVING IN A HOME THEY OWN BUT CANNOT AFFORD TO LIVE THERE BECAUSE OF REPAIRS

**BIOMEDICAL MOM**

- History of substance use
- Does not have custody of biological son

**Identification:**

**PEDIATRICIAN**  
Responsible for the family's health and well-being. Provides care for the child's physical health and manages chronic conditions.

**ADULT PSYCHIATRIST**  
Provides mental health services to the family, including assessment, diagnosis, and treatment of mental health conditions.

**SOCIAL WORKER**  
Provides support and resources to the family, including housing, food, and financial assistance.

**FAMILY PHYSICIANS**  
Provide medical care for the family, including diagnosis and treatment of various health conditions.

**DAILY CONNECTIONS**  
Provide support and resources to the family, including housing, food, and financial assistance.

**MO DAD, STEP MOM, 3 YEAR OLD**

**Case Management Definition:**

A collaborative, client-driven process that supports the client's achievement of safe, realistic and measurable goals within a complex health, social and fiscal environment.

*(Source: National Institute for Care Management Services)*

**GOAL:**

To provide coordinated wrap around care for a complex family in need

**Family's Current Situation:**

- Family member drinking in the home
- They can't afford
- Behavioral issues
- Increased energy, and concentration to work on child development
- Need to change during substance abuse
- All three parents taking Circle of Security training
- 3 year old involving in learning nightmares

**Next Steps:**

- Establish practice system with Step and Family
- Clearly define roles and responsibilities of the professional team members to each other and identify

**Done Differently Next time:**

- Create by identifying the roles of each member in the team
- Make sure everyone understands the responsibilities of a case manager
- They can take steps to do it
- They can take steps to do it
- They can take steps to do it
- They can take steps to do it

**Team Participated in an Integrated Case Management Session November 2015**

| Task Assigned          | Who Did It | Completed | Comments |
|------------------------|------------|-----------|----------|
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |
| Research Web resources | Stepmom    | ✓         |          |

**OVERALL ACTION ITEMS:**

- Review current team plan in place
- Long term plan to be reviewed and finalized
- Research Web resources
- Intermediate short term plan in place
- Long term plan to be reviewed and finalized

**CHALLENGES:**

- Lack of time, shared roles for case management
- Challenging financial issues to connect
- Lack of support for collaborating between professionals
- Lack of communication between organizations
- Action items not being followed through in a timely manner

**STRENGTHS:**

- Family relationship established and trust
- Openness to shared roles
- Interdisciplinary relationships and trust between professionals
- Supportive relationships and trust between family and professionals
- Health care providers being able to put a face to a name

## Polypharmacy Risk-Reduction

The project supports the successful transition of frail seniors from acute to community through the reduction of unnecessary medications.

### Key Accomplishments

- Wrapped up Transitions in Care Polypharmacy work, which included a number of knowledge exchange opportunities for physicians on polypharmacy risk-reduction.
- Completed an Acute Polypharmacy Risk-Reduction trial partnering closely with RIH pharmacists and IH Quality Improvement team around medication review prior to discharge for older adults.
- Work to begin this fall on second Polypharmacy Risk Reduction project under the leadership of Dr. Janet Bates and Dr. Joslyn Conley.

### Members

Dr. Phil Sigalet, Dr. Jim Howie, Dr. Doug Hamilton, Dr. Steve Rollehiser, Dr. Mark Hyslop, Adrienne Nice, Lorraine Brownlee, April Samson, Jen McDougall, Joanna Harrison, Kristina Gifford, Elaine McDonald, Navy Sahota, Karen Humphreys, Surinder Gill, Judy Crowe, Dr. Selena Lawrie, Graeme Hill, Kimberly Gothard, Natalie Coehlo, Chris Rauscher, Pat Owen, Monique Walsh, Laura Becotte, Kim Winters, Robin Watt, Naomi Erickson, Margaret English.

## Access and Continuity of Care for Older Adults

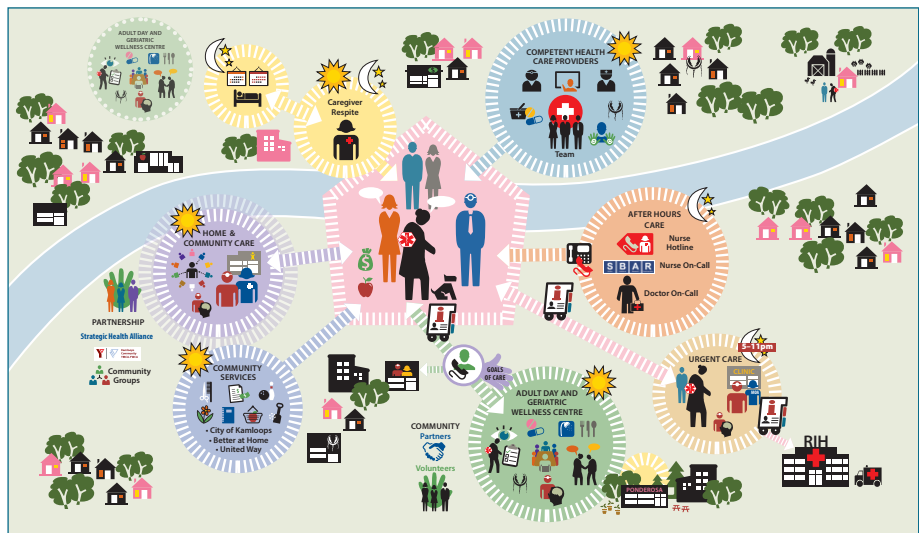
To enhance the access and continuity of care for older adults with chronic co-morbidities by improving methods of team-based communication and knowledge exchange between family and specialist physicians and other health care providers.

### Key Accomplishments

- Dr. Phil Sigalet and Monique Walsh presented our Transitions in Care Older Adults project to the provincial Shared Care Steering Committee.
- Submitted a successful proposal around the Access and Continuity of Care for Older Adults to Shared Care.
- Aligned proposal with overall Patient Medical Home transformation work.

### Members

Dr. Phil Sigalet, Dr. Selena Lawrie, Dr. Barb Prystawa, Dr. Smita Varma, Cathy Thibault, Chris Hollstedt, Monique Walsh.







## Shared Care Steering Committee

The Thompson Shared Care Steering Committee's primary responsibility is to facilitate and oversee the development and progression of the Thompson Region's Shared Care project.

### Key Accomplishments

- Developed a local framework for reviewing Shared Care project ideas.
- Initiated an environmental scan of current physician projects in the community.

### Members

Dr. Joslyn Conley, Dr. Rob Baker, Dr. Janet Bates, Dr. Richard Brownlee, Dr. Alina Cribb, Dr. Bruce Newmarch, Dr. Rob Colistro, Dr. Kubis Steyn, Dr. Chip Bantock, Chris Hollstedt, Carol Laberge, Cathy Thibault, Robin Watt, Monique Walsh.

## GPSC Residential Care Physician Working Group

The GPSC Residential Care Initiative is designed to address challenges by enabling physicians to develop local solutions to improve care of patients in residential care services. The Thompson Region Division of Family Practice supports local physicians to design and implement local solutions to deliver GP Most Responsible Physician (MRP) services to residents living in residential care homes in Kamloops.

### Key Accomplishments

- Partnered with eight residential care homes, community pharmacies, Interior Health staff, and Thompson Rivers University professors to collaborate and problem solve issues in residential care homes.
- Developed a call service algorithm.
- Hosted two education sessions.
- Developed guidelines around communication.
- Currently working on a physician medication mentorship trial, auditing patients' emergency department transfers, creating a universal code for physicians to access the homes, and exploring purchasing bladder scanners.

### Members

Drs. Phil Sigalet, Selena Lawrie, Andrew Wynne, Doug Hamilton, Jim Howie, Chris Hollstedt, Monique Walsh, Laura Becotte.



## Increase the Capacity of the Primary Care System

### Physician Attraction Services

Aims to attract more family physicians to the region to address current capacity needs, attach patients to family doctors, and prepare for future physician retirements.

#### Key Accomplishments

- 14 new care providers started practicing locally, including five full-service family physicians.
- Maintained attachment for over 7000 patients during FP transitions.
- Provided information to candidates expressing interest in the region.

#### Members

Dr. Wayne Dong, Dr. Shauna Tsuchiya, Dr. Harpreet Kelly, Dr. Selena Lawrie, Dr. Grant Del Beggio, Dr. Jennifer Thomas, Dr. Jeevyn Chahal, Dr. Chris Janz, Dr. Servaas Swart, Dr. Franky Mah, Dr. Peter Loland, Christine Matuschewski, Calli Duncan.

## Succession Planning and Training

Aims to assist retiring doctors with succession planning to support their transition out of practice and ensure patients get continuity of care.

#### Key Accomplishments

- Developed toolkit for succession planning.
- Hosted succession planning and training event for family physicians.
- Developed short- and long-term succession plan based on assessment and planning findings.

#### Members

Dr. Bruce Newmarch, Dr. Alison Chung, Christine Matuschewski.



## Integrated Team Based Family Practice Incubator

Aims to ease the transition of retiring doctors with physicians starting a new practice and to ensure continuity of patient care for practice sustainability.

### Key Accomplishments

- Physicians led development of a Business Plan supported by a business analyst.
- Business plan for start-up and practice sustainability.
- Physicians expressing interest to pursue the business model.
- Ministry of Health interest to explore as a proof of concept.

### Members

Dr. Selena Lawrie, Dr. Harold Stefanyk, Dr. Harpreet Kelly, Christine Matuschewski, Chris Hollstedt, Victor Cumming, Dr. Teghan Moon.

## Urban Locum Service

Aims to match family doctors with locum physicians to provide temporary coverage and continuity of patient care when doctors need to take time away from the practice, eliminating the need for temporary office closures.

### Key Accomplishments

- Family physicians led the development of a business case with support from Venture Kamloops.
- Service is currently being tested by temporary employment agency.

### Members

Dr. Wayne Dong, Dr. Shauna Tsuchiya, Jamie Mayes, Colin O'Leary, Dr. Jeevyn Chahal, Dr. Jonathan Wiltshire, Dr. Graham Dodd, Christine Matuschewski, Calli Duncan.



## Enable People Who Want a Family Doctor to Find One

### Patient Attachment System

Aims to provide a systemized approach to ensure that, as practice capacity becomes available, people in need have the means to find a family doctor, the health system has a means to attach high-needs patients, and new physicians have a means to fill their practices.

#### Key Accomplishments

- Tested various methods to identify and attach patients to physicians.
- Attached 1000 patients through tested referral mechanisms.

#### Members

Dr. Krista Bradley, Dr. Shauna Tsuchiya, Dr. Joslyn Conley, Dr. Barb Blumenauer, Dr. Alina Cribb, Dr. Phil Sigalet, Dr. Graham Dodd, Chelsea Brookes, Chris Hollstedt



## Strengthen and Confirm the Continuous Patient/GP Relationship

### Nurse in Physician Practice Prototype

Aims to assist physicians' capacity to open spaces for new patients by introducing nurses into practices.

#### Key Accomplishments

- Developed a “nurse in physician practice” toolkit.
- Co-developed an interactive financial model with Venture Kamloops.
- Presented toolkit and model to local physicians, representatives from other divisions, Ministry of Health, Society of General Practitioners, health authorities, and Doctors of BC.
- Three physicians agreed to participate in the pilot.
- Hosted small-group learnings sessions with pilot practices with support from PSP.
- Slight increase in daily patients seen.
- Initiative selected by the Ministry of Health as a proof of concept.

#### Members

Dr. Janet Bates, Ron Gorospe, Brenda Phillips, Denise Bumby, Colin O’Leary, Calli Duncan, Gerriane Clare, Thompson Rivers University nursing Students: Ish Litt, Christina Garner, Mike Kasprzik.

## Specialist and Community Services Information and Access Project

Aims to increase GPs' knowledge of and access to specialty services and programs in the region to increase efficiency, time and office management, and provide greater, more timely access for patients to these services.

#### Key Accomplishments

- Launched Pathways and begun data collection.
- Summarized two case studies on local NP/FP Care Models completed, and lessons learned.
- Explored effectiveness of Integrated Primary and Community Care (IPCC) Program.

#### Members

Dr. Graham Dodd, Dr. Rob Baker, Dr. Jim Howie, Dr. Peter Loland, Cathy Thibault, Monique Walsh.

## Practice Support Program (PSP)

#### Key Accomplishments

- Completed Pain Module
- Held an engagement event to recruit peer mentors and provided peer mentoring support to clinics in Kamloops, Clearwater, Ashcroft, and Logan Lake.
- Offered Small-Group Learning Sessions.
- Conducted In-Practice Support engagements.

#### Members

Ron Gorospe, Joanne Styles, Dr. Shirley Sze.



## Treasurer's Report Introducing the Statement of Financial Position 2015–16



Dr. Lennard Pretorius  
Treasurer

As Treasurer, I lead the development and oversee implementation of sound fiscal policies and systems to ensure our Division is accountable for the funds we manage on behalf of our members and funding organizations. I monitor spending and advise the Board on our financial position and our ability to undertake new projects.

I can say with confidence that we have the controls and team in place to manage the current — and take on new — initiatives as needed that will benefit our members.

The following Statement of Financial Position and Statement of Operations, extracted from the audited financial statements\*, presents fairly, in all material respects, the financial position of the Thompson Region Division of Family Practice Society as of March 31, 2016.

### Statement of Financial Position

#### BALANCE SHEET

as of March 31, 2016

#### ASSETS

|                                    |    |         |
|------------------------------------|----|---------|
| Cash                               | \$ | 603,530 |
| Accounts Receivable                |    | 32,390  |
| Goods and Services Tax Recoverable |    | 12,474  |
| Prepaid Expenses                   |    | 3,940   |

|                     |           |                |
|---------------------|-----------|----------------|
| <b>TOTAL ASSETS</b> | <b>\$</b> | <b>652,334</b> |
|---------------------|-----------|----------------|

#### LIABILITIES

|                             |    |         |
|-----------------------------|----|---------|
| Account Payable             | \$ | 40,199  |
| Employee deductions payable |    | 8,507   |
| Deferred contributions      |    | 509,154 |

|                          |           |                |
|--------------------------|-----------|----------------|
| <b>TOTAL LIABILITIES</b> | <b>\$</b> | <b>557,860</b> |
|--------------------------|-----------|----------------|

#### NET ASSETS

|                       |    |        |
|-----------------------|----|--------|
| Unrestricted          | \$ | 10,030 |
| Internally restricted |    | 84,444 |

|  |           |               |
|--|-----------|---------------|
|  | <b>\$</b> | <b>94,474</b> |
|--|-----------|---------------|

|   |           |                |
|---|-----------|----------------|
| <b>TOTAL LIABILITIES AND NET ASSETS</b> | <b>\$</b> | <b>652,334</b> |
|---|-----------|----------------|

\* The following summarized financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles for not-for-profit enterprises. Readers are cautioned that these summarized statements may not be appropriate for their purposes. For more information of the entity's financial position, results of operations and cash flows, reference should be made to the related complete audited financial statements which are available from the Society upon request.

**STATEMENT OF OPERATIONS****Year ended March 31, 2016****REVENUE**

|                         |    |         |
|-------------------------|----|---------|
| Infrastructure          | \$ | 407,047 |
| Transitions in Care     |    | 98,635  |
| A GP for Me             |    | 355,273 |
| CYMH Collaborative      |    | 140,221 |
| GPSC – Residential Care |    | 98,222  |

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|                      |           |                  |
|----------------------|-----------|------------------|
| <b>TOTAL REVENUE</b> | <b>\$</b> | <b>1,099,398</b> |
|----------------------|-----------|------------------|

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**EXPENSES**

## Program Services:

|                      |    |         |
|----------------------|----|---------|
| Communications       | \$ | 11,198  |
| Meetings and Events  |    | 59,278  |
| Physician            |    | 301,895 |
| Professional Support |    | 623,821 |
| Travel               |    | 38,742  |

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|                 |           |                  |
|-----------------|-----------|------------------|
| <b>Subtotal</b> | <b>\$</b> | <b>1,034,934</b> |
|-----------------|-----------|------------------|

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## Administration:

|                   |    |        |
|-------------------|----|--------|
| Memberships       | \$ | 6,925  |
| Office expenses   |    | 4,900  |
| Office facility   |    | 40,497 |
| Professional fees |    | 9,973  |
| Insurance         |    | 2,169  |

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|                 |  |               |
|-----------------|--|---------------|
| <b>Subtotal</b> |  | <b>64,464</b> |
|-----------------|--|---------------|

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|                       |           |                  |
|-----------------------|-----------|------------------|
| <b>TOTAL EXPENSES</b> | <b>\$</b> | <b>1,099,398</b> |
|-----------------------|-----------|------------------|

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|                                     |           |          |
|-------------------------------------|-----------|----------|
| <b>EXCESS REVENUE OVER EXPENSES</b> | <b>\$</b> | <b>–</b> |
|-------------------------------------|-----------|----------|

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# Our Team



## Board of Directors

Dr. Chip Bantock — Chair  
Dr. Graham Dodd — Vice Chair  
Dr. Ben Anders — Secretary  
Dr. Lennard Pretorius — Treasurer  
Dr. Krista Bradley — Director  
Dr. Miranda du Preez — Director  
Dr. Peter Loland — Director  
Dr. Servaas Swart — Director

## Operations

Chris Hollstedt — Executive Director  
Brenda Phillips — Operations Manager  
Monique Walsh — Shared Care Lead  
Christine Matuschewski — Recruitment and Retention  
Laura Becotte — Project Coordinator  
Chelsea Brookes — Executive Assistant / Office Administrator  
Tessa Girodat — Administrative Assistant / Pathways Administrator  
Veronica Smith — Bookkeeper  
Calli Duncan — Project Assistant  
Ron Gorospe — Practice Support Program Coordinator (IHA)

## Contact Information

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### Photo credits:

People at events by Marcy Keehn and Bill Frymire  
Nature photos by Chelsea Brookes

The Divisions of Family Practice Initiative is sponsored by the General Practice Services Committee, a joint committee of the BC Ministry of Health and Doctors of BC.

[www.divisionsbc.ca/thompson-region](http://www.divisionsbc.ca/thompson-region)