

ANNUAL PLAN

2020-2021

FINAL: Appoved by the Board February 24, 2020







ENGAGEMENT



PRACTICE SUPPORT PROGRAM



PATHWAYS



PATIENT ATTACHMENT



RESIDENTIAL CARE



RECRUITMENT



SHARED CARE



UP TO DATE

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EXECUTIVE SUMMARY

Our 2021-2022 steps towards change STARTS HERE

Here at the Thompson Region Division of Family Practice we want to effect change. Our membership wants to see positive results in their practices and for their communities. We want to mobilize the impact our work has for our membership, our communities, our region, and our province. We need strong partnerships to achieve this. We need data to inform our direction. We need healthy well physicians and nurse practitioners to be able to provide the best care for their patients and to engage in system work. We believe we make this change through networks and integration.

Our annual plan for 2020-2021 outlines how we at the Thompson Region Division of Family Practice will take steps towards change and the achievement of our vision: *A community of Family Physicians and Nurse Practitioners working collaboratively with community partners focusing on wellness, satisfaction, and sustainability for both the patient and the primary care providers*.

As always, we work to align our steps with our four strategic areas of focus: prioritizing recruitment and retention; emphasizing wellness and engagement; collaborating with partners and decision makers; and promoting interdisciplinary communication.

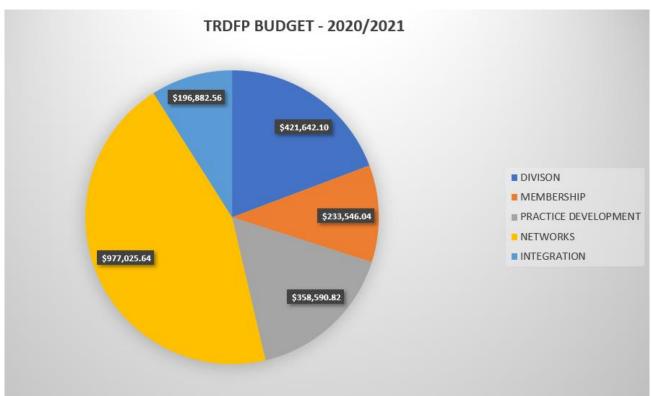
Throughout this annual plan our work is laid out into the following five categories: Division, Membership, Practice Development, Networks, and Integration. We have classified the work into one category and one strategic area of focus identified however, we recognize that much of the work we do impacts multiple categories and often contributes to multiple strategic areas of focus.

- 1. Division: Manage the governance and strategic operations of the organization.
- **2. Membership:** Facilitate activities to promote member engagement and communication, as well as advocate for and support member priorities.
- **3. Practice Development:** Support the membership to further develop business and/or practice capacity, including recruitment and retention efforts.
- **4. Networks:** Work collaboratively with decision makers, partners, and the community at large to build strong partnerships and networks in the pursuit of excellence in family medicine and patient care.
- **5. Integration**: Align our planning and implementation of services; as well as education, engagement, and wellness initiatives with our Specialist colleagues.

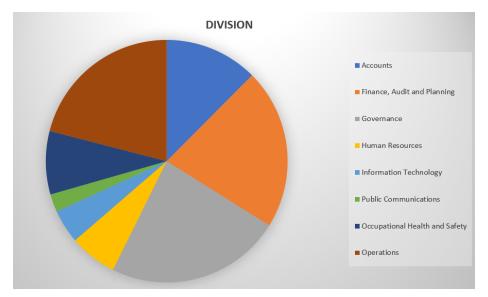
Quality Collaboration Inspiration Innovation Resilience	Quality	Ocollaboration	Inspiration	O _{Innovation}	Resilience
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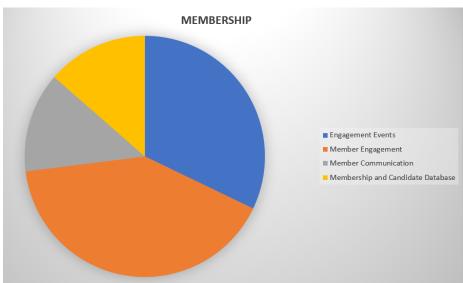


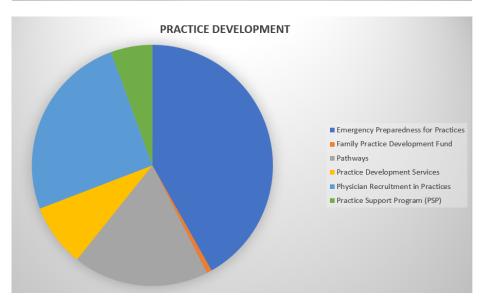
Total Budget Expenses (equal to total revenue)					\$ 2,187,687
DIVISON			\$	421,642	
Accounts	- \$	52,650			•
Finance, Audit and Planning		90,210			
Governance	\$ \$	98,882			
Human Resources	\$	26,813			
Information Technology	\$	19,000			
Public Communications	\$	10,000			
Occupational Health and Safety	\$	35,588			
Operations	\$	88,500			
MEMBERSHIP			\$	233,546	
Engagement Events	\$	75 <i>,</i> 000			
Member Engagement	\$	95,535			
Member Communication	\$	31,272			
Membership and Candidate Database	\$	31,740			
PRACTICE DEVELOPMENT		_	\$	358,591	
Emergency Preparedness for Practices	\$	150,000			•
Family Practice Development Fund	\$	2,500			
Pathways	\$	65,363			
Practice Development Services	\$	30,182			
Physician Recruitment in Practices	\$	90,547			
Practice Support Program (PSP)	\$	20,000			
NETWORKS	_		\$	977,026	•
Access and Continuity of Care for Older Adults	\$	20,000			
Business Development Opportunities	\$	30,182			
Chronic Pain	\$	42,000			
Collaborative Services Committee	\$	12,942			
Community Local Health Tables	\$	68,600			
Community and Member Mapping	\$	115,800			
Health Information Technology	\$	115,800			
Integrated Health Service Planning	\$	100,000			
Interdivisional Strategic Council	\$	41,725			
Long Term Care Initiative	\$	349,976			
Maternity Care Networks/Working Groups	\$	50,000 15,000			
Urgent Care and Access	\$ \$	15,000			
INTEGRATION	Ą	13,000	ċ	196,883	
Advocacy - Physician Recruitment and Retention	– ,	30,900	\$	130,063	•
Coordinating Care for Older Adults	\$ ¢	50,000			
Electronic Access to Specialist Expertise	\$ \$	30,000			
Member Wellness	\$	11,983			
Mental Health and Substance Use	\$	50,000			
Royal Inland Hospital Physician Association	\$	9,000			
Shared Care Steering Committee	\$	15,000			
Thompson Medical Alliance	\$	15,000			
Women's Health Clinic	\$	15,000			
Women's Health Clinic	Ą	13,000			

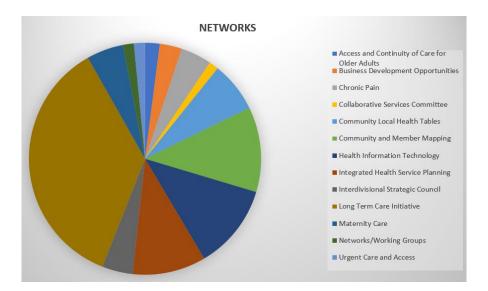


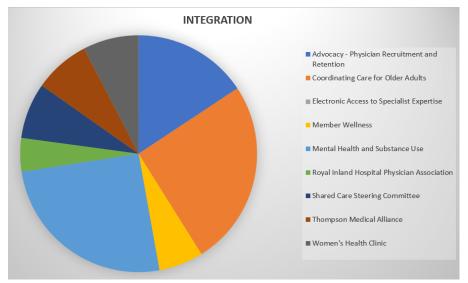












DIVISON

This portfolio is comprised of activities required to ensure the Division manages the governance and strategic operations of the organization. A brief summary of the objectives and expected outcomes of each activity are provided below along with their associated budget.

Accounts

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To provide accurate and timely reimbursement to vendors and to our members for their participation and leadership of Division initiatives. To continue to onboard members and vendors onto the Electronic Fund Transfer process. To increase the monthly reporting available on Division finances.

Impact:

- Consistent and timely payment for members involved in Division work.
- Increase our desirability as a partner in business within the community.

Outputs:

- Accurate monthly and quarterly financial reporting
- Efficient and timely payments to Accounts Payable

Physician Lead: Dr. Lennard Pretorius Team Lead: J. Baldes

Finance, Audit and Planning

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To maintain the finances and fiscal health of the Society in an efficient and cost effect manner. To grow the Society owned funds, through prudent and effective short-term investments. To have the cleanest audit with the quickest turn around so to get our reporting out to the Board, Members and Funders.

Impact:

The assets of the members are safeguarded. Integrity of the accounting system and reporting, while ensuring compliance with guidelines, policies, contract and agreements.

Resources are brought into the community to support member-led initiatives.

Outputs:

- Annual planning
- Annual audit
- Monthly and quarterly financial reporting
- All financial and regulatory deadlines are met
- Growth in the society's assets

Physician Lead: Dr. Lennard Pretorius Team Lead: C. Phillips

Governance

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To provide fiduciary and strategic oversight for the organization. To provide resilient strategic leadership.

Impact:

- All fiduciary, legal and member obligations are met and remain viable.
- Engagement, direction, wellness, and leadership from our membership is maintained.

Outputs:

- Meeting packages and minutes
- Briefing notes
- Strategic plan
- Annual plan
- Annual report
- Annual General Meeting
- Succession planning for Board and Executive Director

Physician Lead: Dr. Graham Dodd Team Lead: M. Walsh

Human Resources

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To maintain a healthy, effective, and efficient team. To promote a culture that values growth, excellence, balance, relationships, and grace.

Impact:

Team members are well supported and able to develop their maximum potential both personally and professionally.

Outputs:

- Quarterly On Targets (performance management) for each team member
- Human Resource, policy and procedures manuals
- Framework for onboarding, training and processes
- Professional Development opportunities for staff
- Knowledge exchange management
- Collection and sharing of projects and initiatives using MS Project
- Weekly staff meetings
- Regular team development sessions

Physician Lead: Dr. Graham Dodd

Team Lead: R. Pedersen

Information Technology

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To increase our availability, accuracy, and security of information for the membership, Board, Committees, project teams, and Division staff. To research, acquire, implement the use of new technology.

Impact:

Division team, committee members and membership have access to up-to-date information for informed opinions and decisions. Secure access to committee documentation regardless of location.

Increase involvement of community and networks within information sharing structures. Provide access to teamwork spaces and data specific for each group.

igotimes The ability and security to share information and include regional representation on committees as required.

Outputs:

- Written procedures on technology use, information storage, and management.
- Partners and team usage of technology systems in place.
- Quarterly reviewing, reporting and status of technology and information sharing.
- Management of technology inventory.
- Acquisition of appropriate technology for initiatives.

Physician Lead: Shared Executive Team Lead: F. Bateman

Public Communications

Strategic Areas of Focus: OCollaborate with partners and decision makers

Goal: To communicate how primary care providers make a difference for practices, patients, and the healthcare system. To build relationships with media, community and external partners to raise awareness about Division work, shift public perceptions, and support community engagement efforts.

Impact:

- Members have a way to communicate successes locally, regionally, and provincially.
- Proactive and positive media stories about healthcare. Increased awareness of the essential roles of primary care providers.
- Communicate successes with Doctors of BC social media channels.
- Greater public awareness and education regarding the healthcare system and empowering the public to be a part of healthcare transformation.
- Create partnerships, and collaborate with existing partners, such as other Divisions, to build capacity towards health service planning and Primary Care Networks.
- Garnering information and feedback from Thompson Region communities that can inform provincial healthcare mandates.
- Oncreased traffic and awareness to the Division website and use of supported tools.

Outputs:

- Communications/media plan
- Regular interactions with media outlets
- · Proactive media outreach
- White paper series/research published from Thompson Region
- Case studies/discussion papers
- Media tracker
- Social media strategy
- Website and statistics

Physician Lead: Shared Executive Team Lead: Communications Lead (TBA)

Occupational Health and Safety

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To ensure a proactive approach to the occupational health and safety of all staff, membership, and guests during their interactions with the Division.

Impact:



A safe and healthy work environment for staff, members and partners to be involved with.

Outputs:

- Quarterly review of the premises, recording any concerns and either immediate correction where applicable, or review and plan for implementation of correction.
- Availability of OHS Officer to staff, membership and guests to record, review and implement necessary correction of issues as they present.
- Semi-annual unscheduled emergency drills to ensure staff is ready and able to react to situations as they arise.
- Quarterly discussions at team meetings regarding issues and corrections taken or that need to be addressed.

Physician Lead: Dr. Graham Dodd Team Lead: J. Baldes

Operations



Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: To oversee administrative aspects of the Division; ensuring the office runs efficiently and contributing to the smooth implementation of initiatives and project.

Impact:



Timely day-today management of offices and the operations of premises.

Outputs:

- Inventory of infrastructure
- Acquisition of infrastructure as required
- Continuity Plan

Physician Lead: Shared Executive Team Lead: F. Bateman

MEMBERSHIP

This portfolio is comprised of activities required to promote member communication and engagement, as well as advocate for and support their priorities. A brief summary of the objectives and expected outcomes these activities are provided below.

Engagement Events

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To host events that engage, inform and create conversation with the Division's membership around matters of community, regional, and provincial relevance. To create a social environment for attendees to get to know their colleagues, families, specialized service providers, and community members.

Impact:

For members to build relationships with others in the medical community.

To enhance and increase relationships for physicians for better support of each other, their practice and community.

Outputs:

- Host three member engagement events throughout the year
- Co-hosted events with Royal Inland Hospital Physician Association members (RIHPA)

Physician Lead: Health Leadership Committee Team Lead: R. Pedersen

Member Engagement

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To inform and interact with members about the on-going work of the Division and gather input on strategic direction. Ensuring members are aware of the services the Division provides and support available.

Impact:

New members are welcomed to the community and provided information respecting Division.

Providers are retained in the community. They feel supported and connected.

Outputs:

- Member engagement strategy, including welcome process for new members
- Tracking of regular communications with each member
- Established metrics for evaluation
- Understanding, map and build on natural networks that exist in community

Physician Lead: Health Leadership Committee Team Lead: R. Pedersen

Member Communication

Strategic Areas of Focus: Promote interdisciplinary communication

Goal: To improve the communications between Division members, the community, and our partners by developing and maintaining relevant information channels. To keep physicians updated and informed about the work of the Division and relevant information.

Impact:

Improve effective communication with membership. Membership has a better understanding of the Division's services, impacts, and supports.

Oncreased communication and collegiality between members and the Division.

Standardized approach in Division office around communication material.

Outputs:

- Monthly Emails
- Quarterly newsletter
- Communications plan
- Discussion papers/Case studies
- Regular Correspondence
- Promotional materials
- Social media strategy

Physician Lead: Shared Executive Team Lead: Communications Lead (TBA)

Membership and Candidate Database

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: To engage physician candidates with a value-based approach to recruitment, which will lead to a satisfactory pairing of candidate and community needs. To maintain a solid understanding of member preferences, engagement and communication to better support membership.

Impact:

Oldentification of, and a meaningful fit for, current and future professional and personal needs for new recruits, thus ensuring the candidate will attach and remain in the community.

Candidate attachment to a community with a meaningful fit will provide our community with increased access to primary care. Impact will also be felt in the physician community as they meet and help inform potential candidates in physician practice in our region.

Better understanding of Community of Practice of our members and ways to support their preferred engagement and communication in Division and network interactions.

Outputs:

- Site visit schedules, best practices, surveys and feedback
- Candidate communication strategy
- Member and candidate database and profiles
- Member community of practice reports
- Candidate welcome package
- List of community supports for new physicians
- Regular PDSA reviews
- Partnerships with community groups (Tourism Kamloops, Venture Kamloops)

Physician Lead: Dr. Servaas Swart Team Lead: R. Pedersen

PRACTICE DEVELOPMENT

This portfolio is comprised of activities required to support the membership to further develop business and/or practice capacity, including recruitment and retention efforts. A brief summary of the objectives and expected outcomes these activities is provided below.

Emergency Preparedness for Practices

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To create a proactive family practice/specialist/patient program for emergency preparedness and continuity. This program will support family and specialist physicians and their patients to prepare for an emergency, build networks to enable physicians to work together during an emergency, and support physicians to recover from an practice emergency. To build a co-designed healthcare emergency preparedness framework with healthcare and community partners to ensure patient care is provided in a coordinated manner in the event of a disaster.

Impact:

- Supports practices and create networks that can work together in an emergency situation.
- Oncreased ability for patients to access primary healthcare in an emergency situation.
- Increased ability for better patient care in emergency situations by creating working relationships between family physicians and regional partners.
- Opportunity for integrated care during an emergency situation with the end result being better patient care.

Outputs:

- Focus Groups
- Meeting minutes
- Monthly/quarterly reports

- Meeting material
- Business continuity resources
- EQI framework
- Physician network development
- Partnership building with Health Emergency Management BC (HEMBC), IH and community

Physician Lead: Dr. Graham Dodd Team Lead: R. Eden

Family Practice Development Fund

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: Physicians in longitudinal practice and in clinic settings will make plans for working together and/or expand their existing practice to offer increased services and access to care, with the assistance of a small grant from the Division.

Impact:

More physicians expanding and upgrading practice and services with one-time cost reduction support for infrastructure.

More services available to the community and reduced wait time for appointments.

Outputs:

- Fund applications
- Expanded or new practices/clinics
- Storytelling of successes from fund recipients

Physician Lead: FPDF Committee Team Lead: C. Phillips

Pathways

Strategic Areas of Focus: Promote interdisciplinary communication

Goal:

To maintain the Thompson Region data on the Pathways referral website, while increasing member awareness and usage of Pathways and how it can enhance practice efficiency with current specialist and clinic services, referral mechanisms and wait times.

Impact:

Members are better informed of specialist and clinic services and associated referral processes, and clinical care is supported by accessibility to physician and patient resources, contributing to improved patient and provider experience.

Annual Plan 2020-2021 V1Communication Strategy

Community of specialists and clinics receive more appropriate referrals and less enquires to their offices from the medical community and public concerning services/referrals.

Accessibility to regional and provincial services and resources for members referring outside of the community and likewise for members of other Divisions referring to Kamloops and area.

Outputs:

- Maintenance of Thompson Region data on Pathways website
- Monthly usage reports
- In practice education/training opportunities around this service
- Exploration of referral tracker for the Thompson Region
- Exploration of the public facing platform that focuses on community services

Physician Lead: Dr. Harpreet Kelly Team Lead: M. Todd

Practice Development Services

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: To collaborate with the Division membership to support and enhance the business operations of their practice with a focus on developing to tools, best practices, and the sharing of resources. To offer a series of educational and information business related seminars based on feedback from the membership (e.g. financial literacy). To provide one on one business supports, communications supports, and needs assessments to enhance practice efficacy. To align these services with specialists' outpatient practices as well.

To connect physician members with UpToDate, an award-winning online clinical decision tool.

To support the development of a MOA network to better enhance networking of practices.

Impact:

The family physician currently in practice will improve efficacy in business management and will grow in business skill and confidence. In turn, more time will be available to focus on clinical delivery. New graduates will be supported in the setup of a family practice. Retiring family physicians will be supported to ensure a smooth and successful retirement process. Those transitioning between practice models will be supported through that process.

Clinical networks, sub-specialities, and specialist outpatient clinics will be supported in their development, implementation, and evaluation of practices.

By streamlining systems and improving business functionality, the family physician will be afforded more time to focus on patient care. Therefore, the community will benefit from the in-practice business services.

Access to more than 10,500 peer-reviewed topics in 23 specialities, along with drug information, patient info sheets, and medical calculators through UpToDate

Annual Plan 2020-2021 V1Communication Strategy

All UpToDate topic searches are CME eligible for registered users.

MOAs in the Thompson Region are part of the team development and change management to support networking of Patient Medical Homes.

Outputs:

- Needs assessments for practices, clinical networks, and specialist outpatient clinics
- Business Plans for practices, clinical networks and specialist outpatient clinics
- In Practice Site Schedule and action planning with practices
- Innovative models of care developed
- CRM reports
- Monthly and quarterly Reports
- Policies and procedure manuals for practices
- MOA network meeting minutes and newsletters
- MOA educational opportunities and evaluation report
- MOA locum network framework
- Business tool kit
- · Practice, network, clinic marketing and communication materials
- Grant Proposals

Physician Lead: Health Leadership Committee Team Lead: C. Brookes

Physician Recruitment into Practices

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: To increase the awareness of physician practice opportunities in the Thompson Region through marketing and social media practices. To advocate on behalf of the physician community in partnerships to ensure equal consideration at decision-making and health human resource planning tables.

Impact:

Impact will be felt by individual members knowing that the Division is advocating for capacity and access along with longitudinal attachment.

Impact will be felt through successful implementation of a marketing and awareness plan leading to increase of new physicians in our region with an emphasis on some additional longitudinal capacity.

Awareness of the needs of and for physicians in the Thompson Region could see regional impact at decision-making tables and local, regional, and provincial health human resource planning decisions.

Outputs:

- Printed marketing materials (banners, posters, rack cards)
- Marketing content for web
- Event materials
- List of producers for regional goods
- Key findings
- Print and web advertisements
- Advertising schedule
- Social media schedule
- Key contact list
- Meeting minutes Interior Physician Recruitment Team
- Key findings
- Advocacy documents
- Practice opportunity postings

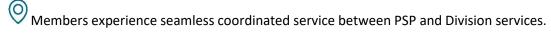
Physician Lead: Dr. Servaas Swart Team Lead: S. Breen

Practice Support Program (PSP)

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: To work collaboratively with PSP to align Division practice development services and projects with PSP work. To support practices in their Patient Medical Home assessments, action plans, panel assessments, workflow, and quality improvement. To utilize a shared framework on best ways to support practice development. To innovate with PSP on design for networking.

Impact:



Ocommunity resources are better utilized. PMH networking and PCN planning is supported through PSP involvement.

NETWORKS

This portfolio is comprised of activities required to collaborate with decision makers, partners, and the community at large to build strong partnerships and while supporting and establishing networks in the pursuit of excellence in family medicine and patient care. A brief summary of the objectives and expected outcomes for these activities are provided below.

Access and Continuity of Care for Older Adults

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To enhance the access to 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 as well and with other health care providers. Link and integrate Senior Health and Wellness Centre (SHWC), adult day program, home health and other community services for older adults into network.

Impact:

Improved patient experience around the Patient Medical Home, including timely access. Engaged patient voices in older adults projects.

Enhanced relationships among physicians, Division, IH, and other community partners using a collaborative approach for change where needed. Collaboration around EMR and opportunities to improve information sharing.

Engagement, sharing and learning with Shared Care and other Divisions around older adults and access.

Outputs:

- Meeting minutes and meeting materials
- Monthly Division ops reports
- Bi-monthly Shared Care status reports
- Evaluation Report
- Mapping of services and integration plan
- Senior-friendly framework

Physician Lead: Dr. Cribb and Dr. Varma Team Lead: S. Lissel

Business Development Opportunities

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To identify opportunities for business development and work with community partners to support investment in primary health care initiatives in Kamloops.

Impact:

An increase in the number and quality of primary health services will benefit the community and the physicians and nurse practitioners who provide care.

Effective and robust business development initiatives designed to enhance and support the delivery of primary health care will provide long term value in and for the community.

Outputs:

- Business Models
- Business Plans
- Feasibility Report

- Communication Plan
- Monthly and quarterly reports
- Grant Proposals

Physician Lead: Dr. Meghan MacDonald

Chronic Pain

Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: To enhance the spectrum of chronic pain services by engaging and supporting communication and knowledge exchange between family and specialist physicians and other allied health providers. Share patient stories and journey mapping. Build community partnerships, document needs, map out current state, advocate and plan for service redesign. Explore patient support group in partnership with Pain BC.

Team Lead: R. Eden and S. Lissel

Impact:

- Patients will experience better management of their pain, more coordinated care and have access to professional and peer support.
- ODocumentation of services offered by physicians, specialized services and allied health.
- More opportunities for patients, physicians and other health professionals to access specialized care.
- Engagement with Shared Care chronic pain group shared across network provincially, contributions and learnings from others engaged in the same work.

Outputs:

- Action plan to Shared Care for gated funds
- Meeting minutes and meeting materials
- Division operation reports
- Shared Care bi-monthly report
- Mapping of services
- Patient journey mapping
- Provincial survey

Physician Lead: Dr Baker and Dr Brownlee, C. Wilson Team Lead: S.Lissel

Collaborative Services Committee

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To maintain regular partnership table with Interior Health, First Nations Health Authority, GPSC, and the Ministry to continue to develop and oversee a model of care that prioritizes longitudinal care and equitable access. Integrating other stakeholder work into a health service plan.

Impact: Family Physicians have regular connections into model of care, service planning and health human resources.

Outputs:

- Meeting reports
- MOUs with Local Health Tables, Community Health Centres, and Project/initiative groups
- Integrated service plan
- Primary Care network service plan
- Service model articulated

Physician Lead: Drs. Peter Loland, Chip Bantock, and Graham Dodd Team Lead: M. Walsh

Community Local Health Tables

These local health tables vary in membership across the region and are comprised of key stakeholders and community partners such as universities, school districts, BC Ambulance, municipalities, regional districts, mayors, clinics, business, Interior Health, public.

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: Work with communities, including First Nations, to develop new, or support existing local health tables to ensure community voice for health service and planning and to integrate a focus on social determinants of health. To network these tables with the CSC and align these tables for potential future Primary Care Network leadership. To bring communities in the Thompson Region together for an event to inform them on the status of healthcare transformation / PCN planning and to discuss gaps, opportunities and innovative solutions to transportation as it relates to access to healthcare. To establish/facilitate the connection of rural communities to clinical networks.

Impact:

- Communities are contributors in their given roles to health outcomes of the region.
- Opportunity for community to help inform healthcare transformation and ensure the unique rural and Indigenous experience is present.
- Increased ability to create regional solutions to healthcare challenges and ensure a regional perspective is given to health service and PCN planning
- Innovative ideas to PCN planning for potential spread to other Divisions and the Ministry of Health

Outputs:

Meetings with communities and local health tables

- MOU to solidify partnership between local health tables and CSC
- One day Thompson region symposium on health and transportation
- Monthly/quarterly reports
- Evaluation and quality improvement strategy
- Mapping of health tables

Physician Lead: Dr. Meghan MacDonald, Dr. Cornel Barnard, Dr. Shane Barclay, Dr. Ilke Marais

Team Lead: S. Lissel and R. Eden

Community and Member Mapping

Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: To collect, identify and analyse information, which informs health service planning, networks, specialized services, engagement, and other pertinent interdisciplinary areas in our community.

Impact:

Physician profiles are up to date. Division can provide areas for business improvement and networking options for physicians.

Can create strong community by linking networks, specialized services, etc.

Better reporting opportunities for successes and improvements in Thompson Region.

Outputs:

- Robust CRM used to collect all pertinent and current data for all members, Medical Office Assistants (MOAs) and allied health services
- Mapping data to detect geographical areas to address strengths, gaps and future working groups/networks, including cost savings and patient delivery

Physician Lead: Health Leadership Committee Team Lead: F. Bateman

Health Information Technology

Strategic Areas of Focus: OCollaborate with partners and decision makers.

Goal: To participate in local, regional and provincial discussions on health information technology. To strategize with PSP on integrating and networking EMR, Health Data Coalition and mapping information to make informed decision making.

Impact:

Shared community coding within EMRs.

Practices are able to review data across their networks to advocate for services and make changes to their panels and networks accordingly.

OThompson Region benefits from participating in and understanding the provincial changes to health technology.

Outputs:

- Thompson Region EMR coding document
- HDC registration
- Working group for EMR networking strategy

Physician Lead: Health Leadership Committee Team Lead: R. Eden and S. Lissel

Integrated Health Service Planning

Strategic Areas of Focus: OCollaborate with partners and decision makers

Goal: To develop a shared vision and comprehensive plan for health in our region. This involves input from all partners and stakeholders. We can identify clear roles, responsibilities, and accountabilities in the implementation and delivery of the plan.

Impact:

Model of care and process to support an integrated health service plan are agreed upon and put into action.

Outputs:

- Mapping of services
- Integrated health service plan
- MOUs with local health tables
- Model of care graphic

Physician Lead: Drs. Peter Loland, Chip Bantock, and Graham Dodd Team Lead: S. Lissel and R. Eden

Interdivisional Strategic Council

Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: To actively contribute to the regional engagement and system level initiatives with other Divisions and the Health Authority.

Impact:



Divisions have a collective regional voice when interacting with the Health Authority

Outputs:

- Meeting minutes
- Board/HLC reports
- Attendance at quarterly meetings
- Knowledge Exchange folder on NAS

Physician Lead: Dr. Graham Dodd, Dr. Chip Bantock, and Dr. Cornel Barnard

Team Lead: M. Walsh

Long Term Care Initiative

Strategic Areas of Focus: OCollaborate with partners and decision makers

Goal: To build local networks between physicians, long term care homes, patients and family, community pharmacy, post-secondary institutions, and the health authority which will improve patient satisfaction and clinical care.

Impact:

Support physicians in achieving the five best practices, as per GPSC Long Term Care Initiative criteria, which will contribute to improved patient care. Improve geriatric clinical knowledge within the community of physicians and health care professionals caring for patients in long term care.

Enhance local relationships between physicians (including medical residents), long-term care homes, pharmacy, and the health authority. Opportunity to influence the development of best practices at the local level and within the broader context of long-term care through local partnerships. Contribute to long-term sustainability of physician coverage for long-term care patients in Kamloops.

Reduce unnecessary or inappropriate hospital transfers, improved patient provider experience, and reduce healthcare costs.

Outputs:

- Meeting Minutes and meeting materials
- Monthly Division reports
- Quarterly physician invoices, physician self-evaluation, and long-term care home evaluation
- Submit funding proposal for bladder scanner pilot project
- Distribute long-term care toolkit
- Explore Nurse Practitioner eligibility for long-term care incentives

Physician Lead: Dr. Andrew Wynne Team Lead: M. Todd and S. Lissel

Maternity Care

Strategic Areas of Focus: Promote interdisciplinary communication

Goal: Trial the delivery of group prenatal care, combining teams of physicians and midwives, as an effective prenatal care option for low risk maternity patients accessing care through the Thompson Region Family Obstetrics clinic in Kamloops BC. Postpartum visits and drop-in postpartum breastfeeding support groups will also be provided. There will be 3 cohorts of 10-12 pregnant individuals with similar due dates and their partners.

Impact:

Anticipated patient outcomes include improvements in patient centeredness, the uptake of prenatal education, continuity of care during the perinatal period, peer support and social networking, time with care providers, preparation for labor, birth, and parenting, and breastfeeding support. Anticipated provider outcomes include improved retention and recruitment of maternity care providers, opportunities to collaborate more effectively with existing community programs, and greater job satisfaction

This innovative model will allow pregnant women and, if desired, their partners to receive prenatal education, routine prenatal care and the opportunity to network and build a community of support via a collaborative health care team.

Implementing the collaborative model as a pilot project allows for the group to examine any challenges and successes on a smaller scale with the opportunity to upscale later. Lessons learned could be incorporated into future maternity care planning at the local, regional and provincial levels.

Outputs:

- Meeting minutes and meeting material
- Communication material
- Group care schedule
- Group care policies and procedures
- PDSA cycles
- Curriculum development
- Website development
- Final report

Physician Lead: Dr. Ruth Brighouse, Dr. Harpreet Kelly, Dr. Phillip Sigalet

Midwife Lead: Elaine Barnes, Lana Barbir, Rosalynd Curry

Team Lead: Melanie Todd

Networks/Working Groups

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: To support identified networks and working groups with the medical community which will inform and improve provider practice capacity and member wellbeing. To effectively facilitate and manage these groups to ensure that there is a value-based outcome for its members. To assist in retention efforts by identifying opportunities to bring together members who will find support in one another.

Impact:

Networks that are supported to reflect and act on their desires, goals, learnings and decisions including the social, clinical and business realms.

Members will experience support and satisfaction through inclusion in groups which bring together individuals facing similar experiences and challenges in an opportunity to share successes and stories.

Changes made to processes or practices as a result of ideas generated, or information shared by the network or working group.

Outputs:

- Meeting minutes
- Key findings
- Tools or protocols

Physician Lead: Lead of individual networks Team Lead: M. Todd, R. Eden and S. Lissel

Urgent Care and Access

Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: To gather data and map services to understand the current state in Kamloops North, South, and rural communities. Identify opportunities and best practices for integration of urgent, walk-in and after hours care into health service planning. Improve knowledge and communication around advanced access, specialized services, use of referral supports and network opportunities. Explore and understand opportunities for EMR integration.

Impact:

Enhance individual practice knowledge of services and provide supports for connection. Communication at practice level for advanced access.

Integration of urgent, walk-in and after hours care into networks.

Outputs:

• Development of QI and Evaluation framework

- Mapping of services
- Current state and gap analysis
- EMR linkages strategy

Physician Lead: Health Leadership Committee Team Lead: R. Eden and S. Lissel

INTEGRATION

This portfolio is comprised of activities required to align our planning and implementation of services with our Specialist colleagues, those practicing within facilities and those looking to expand into outpatient clinics. This includes the medical community's approach to wellness, education, and engagement. A brief summary of the objectives and expected outcomes of these activities are provided below.

Advocacy - Physician Recruitment and Retention

Strategic Areas of Focus: Prioritize recruitment and retention

Goal: To advocate on behalf of the physician community in partnerships to ensure equal consideration at decision-making tables and proactive health human resource planning.

Impact:

Ocommunity impact will be felt through successful advocacy leading to attachment of new physicians in our region.

Awareness of the needs of and for physicians in the Thompson Region could see regional impact at decision-making tables.

Outputs:

- Up to date physician capacity data
- Meeting minutes Interior Physician Recruitment Team
- Recruitment strategies
- Key findings
- Quality improvement initiatives
- Advocacy documents
- Practice opportunity postings

Physician Lead: Dr. Servaas Swart Team Lead: S. Breen

Coordinating Care for Older Adults

Strategic Areas of Focus: Promote interdisciplinary communication

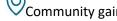
Goal: To streamline coordination of care for older adults by bringing specialists into strategic planning for health service planning and networking in our community. To engage specialists and primary care providers in needs assessments and design of outpatient services for complex older adults. To support specialists to participate in strategic conversations around health service planning. To link specialist services into Patient Medical Homes effectively.

Impact:



Improved patient experience around the Patient Medical Home by improving access to specialists.

 \bigodot Enhanced relationships and communication between specialists and family physicians. Specialists and family physicians engage in service planning and networking opportunities together.



Ocommunity gains innovative specialist outpatient services.

Outputs:

- Meeting minutes and meeting materials
- Monthly Division operational updates
- Bi-monthly Shared Care status report
- In practice outreach and business cases to support specialists
- Outpatient clinic start up support
- Collaborative Care Trial PDSA and report
- 'Meet a speciality' focused events

Physician Lead: Dr. Alina Cribb and Dr. Kobus Steyn

Team Lead: C. Brookes and S. Breen

Electronic Access to Specialist Expertise

Strategic Areas of Focus: Promote interdisciplinary communication

Goal: To make specialist care more accessible to the patient and primary care teams in different settings. To bring new and existing communication tools under an umbrella of services enabling communications between patients, specialists and primary care teams using telephone, video and secure texting connectivity (with future e-Consult capabilities) within a secure technology environment.

Impact:

Members have access to secure technology for communication. Members have access to specialist schedule through RIH switchboard. Members have direct access to specialists and more specialists have access to primary and community care teams.

More accessibility of specialist care and expertise to the patient and primary care teams in different settings and through increase knowledge around telemedicine.

Outputs:

- Request for additional funding through Shared Care
- Regular reports
- Updated communication materials
- Telemedicine event
- Participant measurements

Physician Lead: Dr. Wayne Dong Project Lead: S. Breen

Member Wellness

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To support members personally and professionally for the establishment of a healthy, connected, and resilient community of family physicians, nurse practitioners and specialist physicians.

Impact:

Increased member satisfaction and wellbeing. Increased communication and collegiality. A culture of wellness for primary care providers working in the Thompson Region.

Outputs:

- CME topics related to resilience
- Engagement events with a social aspect
- Partnerships with local services that promote health and well being
- Wellness principles incorporated into all aspects of Division work
- Healthy meal planning at meetings
- Collaboration outputs with RIHPA

Physician Lead: Health Leadership Committee Team Lead: S. Breen

Mental Health and Substance Use

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: Through collaboration, communication and community, the goal of this proposal is to develop the building blocks for a framework, which will provide sustainable, supportive, accessible and comprehensive mental health care in the Thompson Region.

Impact:

Patients in the Thompson Region will have timely access to mental health supports.

Mental Health community collaboration will highlight necessary changes to increase program efficacy, identify existing and potential gaps.

Participation in the Shared Care Adult Mental Health and Substance Use Network will help inform provincial practices.

Outputs:

- Adult Mental Health and Substance Use information event accessible to all providers who interact with patients who need mental health support.
- A single navigation service including connection options such as in-person, phone, email, text and an online portal accessible to all mental health providers, caregivers and patients.
- · Establishment and maintenance of standard care paths to communicate to family physicians
- An information sharing agreement for use between patients and professionals.
- Revised gap analysis to include community programs.
- Comprehensive inventory of community services.
- Implementation of a rapid access to psychiatry program model for mild to moderate patients

Physician Leads: Dr.Nataliya Grishin and Dr. Cynthia Lau Team Lead: S.Breen

Royal Inland Hospital Physican Association

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To work towards an integrated system of providers in our community where strategic planning, advocacy, networking, and relationship building occurs in the medical community across the acute and community portfolios.

Impact:

Members from both organizations are able to connect with one another on clinical, business, and social matters.

Ocommunity is able to leverage and maximize resources it receives and work aligns with one another.

Outputs:

- Attendance at each other's meetings
- Shared work plan
- Shared event planning and attendance
- Co-location of organizations

Shared Care Steering Committee

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To provide strategic leadership for Shared Care funded projects. To bring the Specialist and Family Physician communities together on matters of shared interest.

Annual Plan 2020-2021 V1Communication Strategy

Impact:

Community able to leverage and align shared care projects with other strategic initiatives.

Outputs:

- Meetings minutes
- Supported Shared Care projects

Thompson Medical Alliance

Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: Synchronizing resources of the Division, RIHPA, PSP, IH Research, IH QI, and IH PQI for physician and medical partners. Building off successful initiatives to plan, communicate and participate in ongoing discussions to better align and strengthen the support provided and effort put into quality improvement initiatives that touch all these entities. Success will maximize clarity for our physicians and other medical partners, who we work to support through these initiatives.

Impact:

Maximizing clarity for physicians, as well as other professionals sitting on physician-lead committees regarding shared opportunities.

Maximizing funding opportunities to leverage collaborative dollars spent while mitigating duplicate initiatives, energy, resources, or complicating these efforts unnecessarily. Avoiding creating a frustrating system for physicians to navigate, where it is difficult to understand where to go, to whom and when

Work towards better alignment across provincial collaborative committees and provincial initiatives.

Outputs:

- Maintenance of spreadsheet documenting projects & physician leads
- Meeting schedule
- Meeting action minutes
- Shared resources with membership
- Establish process for physician inquiries
- White paper
- Resident research day 2020
- Shared calendar for partners
- **Communication Strategy**
- Determine metrics to track and document work
- **Evaluation of partnerships**
- Mapping of relationships

Women's Health Clinic

Strategic Areas of Focus: Collaborate with partners and decision makers

Goal: To enhance timely access, information, support and continuity of care in Gynecological health across the Thompson Region by managing opportunities for improvement in the patient journey and providing wrap-around specialized patient care through family physician involvement.

Impact:

Individual practices will see a benefit through a streamlined referral and patient care processes for Gynecological procedures. Both specialist and family physicians will also receive education and training in this area, if desired.

Development of a successful model of team-based Gynecological care and will bring together Allied Health services, nurses, specialist and family physicians, and medical imaging and lab resources. The result will provide an organized and collaborative wraparound care system for patients.

The work from this project will be felt provincially as patients requiring Gynecological services are not solely from the Thompson Region. Full circle communication with the physicians in locations outside of our region will provide improved patient care as the women's health care team provides full follow-up with either the patient or physician.

Outputs:

- Meeting minutes
- Monthly and final reports
- Gap analysis document
- Best practice data from like clinics/system
- Business plan
- Key findings
- Process map
- Patient information media (ie. printables, web information, posters)
- Physician information media (ie. printables, web information, posters)
- Physician training information

Physician Leads: Dr. S. Lawrie and Dr. Paula Lott Team Lead: S. Breen

Thompson Region Division of Family Practice Budget for 2020-2021

	Prior Year BUI	Prior Year BUDDGET TOTALS	Current	BUDGET	Current BUDGET TOTALS	Infrast	Infrastructure	
GL NAME	DEBIT	CREDIT	DEBIT		CREDIT	DEBIT	o	CREDIT
Carry Forward	- \$	\$ 721,427.51	\$	\$ -	599,987.16	· \$	\$	24,987.16
Revenue (alloc. to correct Project GL)	- \$	\$ 1,344,515.00	\$	\$ -	1,587,700.00	- \$	\$	602,000.00
Physicians	\$ 552,494.98	- \$	\$ 594,207.20	20 \$	1	\$ 59,764.72	\$	1
Contractor Fees	\$ 103,206.00	- \$	\$ 49,360.00	\$ 00.0	-	\$ 4,000.00	\$	1
Salaries	\$ 1,105,215.84	- \$	\$ 1,199,315.95	\$ 36.9	1	\$ 403,297.44	\$	ı
Professional Development	\$ 2,600.00	- \$	\$ 11,149.56	\$ 95.6	1	\$ 3,600.00	\$	1
Insurance	\$ 2,400.00	- \$	\$ 3,600.00	\$ 00.0	1	\$ 3,600.00	\$	1
Accounting & Legal Fees	\$ 17,000.00	- \$	\$ 17,500.00	\$ 00.0	1	\$ 11,000.00	\$	1
Travel	\$ 34,851.94	- \$	\$ 65,219.80	\$ 08.6	1	\$ 9,500.00	\$	1
Event Expenses	\$ 22,558.84	- \$	\$ 33,959.06	\$ 90%	-	\$ 3,500.00	\$	1
Communications	\$ 13,300.00	- \$	\$ 13,000.00	\$ 00.0	1	\$ 13,000.00	\$	1
Meeting Costs	\$ 67,037.67	- \$	\$ 63,208.00	3.00 \$	1	\$ 35,975.00	\$	1
Rent	\$ 64,500.00	- \$	\$ 65,500.00	\$ 00.0	-	\$ 52,000.00	\$	1
Utilities & Security	\$ 7,000.00	- \$	\$ 7,200.00	\$ 00.0	=	\$ 4,200.00	\$	1
Repairs & Maintenance	\$ 3,286.78	- \$	\$ 3,600.00	\$ 00.0	=	\$ 3,600.00	\$	1
Telephone & Internet	\$ 3,600.00	- \$	\$ 3,600.00	\$ 00.0	1	\$ 3,600.00	\$	1
Office Supplies & Expense	\$ 15,931.27	- \$	\$ 13,634.71	1.71	1	\$ 4,000.00	\$	1
Information Technology	\$ 14,269.23	- \$	\$ 21,100.00	\$ 00.0	-	\$ 2,500.00	\$	1
Furniture	\$ 2,000.00	- \$	\$ 2,000.00	\$ 00.0	1	\$ 2,000.00	\$	1
Printing	\$ 17,645.96	- \$	\$ 20,532.88	388.5	-	\$ 7,850.00	\$	ı
Totals	\$ 2,065,942,51 \$	2,065,942.51	\$ 2,187,687	,16 \$	\$ 2,187,687.16 \$ 2,187,687.16	\$ 626,987,16	Ş	626,987.16

Thompson Region Division of Family Practice Budget for 2020-2021

	Chror	Chronic Pain	Emergen	Emergency Preparedness EOI	edness EOI	41	Innovation	u
GL NAME	DEBIT	CREDIT	DEBIT		CREDIT	DEBIT		CREDIT
Carry Forward	- \$	\$ 42,000.00	\$	\$ -	t	- \$	❖	100,000.00
Revenue (alloc. to correct Project GL)	- \$	- \$	\$	\$ -	150,000.00	· \$	Ş	-
Physicians	\$ 15,976.36	- \$	\$ 37,515.96	5.96 \$	-	\$ 8,500.00	\$ 00	1
Contractor Fees	\$ 2,000.00	- \$	59'/ \$	7,650.00 \$	ı	\$ 2,500.00	\$ 00	1
Salaries	\$ 16,017.00	- \$	\$ 87,288.30	\$ 08.88	-	\$ 80,130.00	\$ 00	1
Professional Development	- \$	- \$	\$	٠	-	- \$	❖	1
Insurance	- \$	- \$	\$	\$ -	ſ	- \$	\$	1
Accounting & Legal Fees	· \$	- \$	\$	٠	1	· \$	↔	1
Travel	- \$	- \$	30′9 \$	\$ 00.000,9	-	\$ 5,400.00	\$ 00	1
Event Expenses	\$ 3,825.00	- \$	52'6 \$	9,750.00 \$	-	\$ 1,000.00	\$ 00	1
Communications	- \$	- \$	\$	\$ -	-	· \$	Ş	1
Meeting Costs	- \$	- \$	\$	\$ -	-	· \$	\$	1
Rent	- \$	- \$	\$	\$ -	-	· \$	\$	•
Utilities & Security	- \$	- \$	\$	\$ -	-	- \$	\$	1
Repairs & Maintenance	- \$	- \$	\$	\$ -	-	- \$	\$	-
Telephone & Internet	- \$	- \$	\$	\$ -	-	· \$	\$	-
Office Supplies & Expense	\$ 1,400.00	- \$	54 \$	795.74 \$	-	\$ 1,470.00	\$ 00	-
Information Technology	- \$	- \$	\$	\$ -	-	- \$	\$	-
Furniture	- \$	- \$	\$	\$ -	_	- \$	\$	-
Printing	\$ 2,781.64	- \$	\$ 1,00	1,000.00 \$	_	\$ 1,000.00	\$ 00	1
Totals	\$ 42,000.00	\$ 42,000.00	\$ 150,000.00	\$ 00.00	150,000.00	\$ 100,000.00	\$ 00	100,000.00

Thompson Region Division of Family Practice Budget for 2020-2021

	Older Adults	Adults	Shared Care Ste	Shared Care Steering Committee	Matern	Maternity Care
	i.	Figure	H	H	H	i d
GL NAIME	DEBII	CREDII	DEBII	CREDII	DEBII	CREDII
Carry Forward	- \$	\$ 20,000.00	- \$	\$ 10,000.00	- \$	· \$
Revenue (alloc. to correct Project GL)	- \$	- \$	- \$	\$ 20,000.00	- \$	\$ 50,000.00
Physicians	\$ 5,795.20	- \$	\$ 11,000.79	- \$	\$ 12,169.92	- \$
Contractor Fees	- \$	- \$	- \$	- \$	\$ 1,000.00	- \$
Salaries	\$ 12,285.00	- \$	\$ 17,197.33	- \$	\$ 31,618.50	- \$
Professional Development	٠ \$	- \$	· \$	- \$	- \$	٠ \$
Insurance	- \$	- \$	- \$	- \$	- \$	· \$
Accounting & Legal Fees	- \$	- \$	- \$	- \$	- \$	-
Travel	\$ 819.80	- \$	- \$	- \$	3,000.00	- \$
Event Expenses	- \$	- \$	- \$	- \$	\$ 1,211.58	- \$
Communications	- \$	- \$	- \$	- \$	- \$	- \$
Meeting Costs	\$ 200.00	- \$	\$ 1,500.00	- \$	- \$	- \$
Rent	- \$	- \$	- \$	- \$	- \$	÷ \$
Utilities & Security	- \$	- \$	- \$	- \$	- \$	- \$
Repairs & Maintenance	- \$	- \$	- \$	- \$	- \$	- \$
Telephone & Internet	- \$	- \$	- \$	- \$	- \$	- \$
Office Supplies & Expense	300.00	- \$	- \$	- \$	\$ 200:00	- \$
Information Technology	- \$	- \$	- \$	- \$	- \$	- \$
Furniture	- \$	- \$	- \$	- \$	- \$	- \$
Printing	\$ 300.00	\$ -	\$ 301.88	- \$	\$ 500.00	- \$
Totals	\$ 20,000.00	\$ 20,000.00	\$ 00.000,08 \$	\$ 30,000.00	00'000'05 \$	\$ 50,000.00

Thompson Region Division of Family Practice Budget for 2020-2021

	Long Term Care	rm Care	Rc	RccBC	Collaborative	Collaborative Networking
GL NAME	DEBIT	CREDIT	DEBIT	CREDIT	DEBIT	CREDIT
Carry Forward	- \$	\$ 80,000.00	- \$	\$ 30,000.00	- \$	\$ 30,000.00
Revenue (alloc. to correct Project GL)	- \$	\$ 346,800.00	- \$	- \$	- \$	- \$
Physicians	\$ 248,410.36	- \$	\$ 4,636.16	- \$	\$ 9,215.68	- \$
Contractor Fees	- \$	- \$	- \$	- \$	- \$	- \$
Salaries	\$ 139,395.00	- \$	\$ 22,000.00	- \$	\$ 15,255.00	- \$
Professional Development	- \$	- \$	- \$	- \$	- \$	- \$
Insurance	- \$	- \$	- \$	- \$	- \$	· \$
Accounting & Legal Fees	\$ 6,500.00	- \$	- \$	- \$	- \$	- \$
Travel	\$ 5,000.00	- \$	\$ 1,000.00	- \$	- \$	- \$
Event Expenses	\$ 6,500.00	- \$	- \$	- \$	- \$	- \$
Communications	- \$	- \$	- \$	- \$	- \$	- \$
Meeting Costs	- \$	- \$	\$ 2,000.00	. \$	\$ 5,180.00	- \$
Rent	\$ 13,500.00	- \$	- \$	- \$	- \$	- \$
Utilities & Security	3,000.00	- \$	- \$	- \$	- \$	- \$
Repairs & Maintenance	- \$	- \$	- \$	- \$	- \$	- \$
Telephone & Internet	- \$	- \$	- \$	- \$	- \$	- \$
Office Supplies & Expense	- \$	- \$	\$ 163.84	- \$	\$ 200.00	- \$
Information Technology	\$ 3,600.00	- \$	- \$	- \$	- \$	- \$
Furniture	- \$	- \$	- \$	- \$	- \$	÷ \$
Printing	\$ 894.64	÷ - \$	\$ 200.00	- \$	\$ 149.32	- \$
Totals	\$ 426,800.00 \$	\$ 426,800.00	\$ 00:000'08 \$	\$ 30,000.00	30,000.00	\$ 30,000.00

Thompson Region Division of Family Practice Budget for 2020-2021

					Ì		I	
	Women's Health Clinic	ealth Clinic	Adult N	Adult Mental Health		Coord Older Adults	lder Ac	ults
N P N E	DFRIT	CREDIT	DEBIT	CREDIT	Ę	DFRIT		CREDIT
Carry Forward	\$	\$ 15,000.00	\$	\$ 50,	50,000.00	\$	Ş	50,000.00
Revenue (alloc. to correct Project GL)	- \$		\$		1	\$	\$	1
Physicians	\$ 4,507.78	. \$	\$ 15,342.72	72 \$	1	\$ 15,342.72	\$	1
Contractor Fees	\$ 1,360.00	- \$	\$ 850.00	\$ 00	,	\$ 850.00	\$	1
Salaries	\$ 7,109.74	. \$	\$ 59,224.12	12 \$	1	\$ 27,688.68	δ.	1
Professional Development	٠ \$	· \$	\$	·γ	ı	\$	٠	ı
Insurance	٠ \$	· \$	\$	Ϋ́	1	\$	ş	1
Accounting & Legal Fees	٠ \$	- \$	\$	¢	,	· \$	ςş	1
Travel	- \$	- \$	\$	Ŷ	,	- \$	٠	1
Event Expenses	\$ 1,672.48	- \$	\$	\$,	\$	Ϋ́	1
Communications	- \$	- \$	\$	\$	1	- \$	\$	1
Meeting Costs	- \$	- \$	\$ 3,500.00	\$ 00	1	\$ 3,500.00	\$ (1
Rent	- \$	- \$	\$	\$	-	- \$	\$	ſ
Utilities & Security	- \$	- \$	- \$	\$	1	- \$	\$	ſ
Repairs & Maintenance	- \$	- \$	\$	Ŷ	1	- \$	٠	1
Telephone & Internet	- \$	- \$	\$	Ŷ	,	· \$	⋄	1
Office Supplies & Expense	\$ 150.00	- \$	\$ 118.60	\$ 09	,	\$ 118.60	\$	1
Information Technology	- \$	- \$	\$	\$	1	· \$	\$	1
Furniture	- \$	- \$	- \$	\$	-	- \$	\$	r
Printing	\$ 200.00	÷ ÷	\$ 2,500.00	\$ 00	1	\$ 2,500.00	\$ (1
Totals	\$ 15,000.00	\$ 15,000.00	\$ 50,000.00	\$	50,000.00	\$ 50,000,00	ş	50.000.00

Thompson Region Division of Family Practice Budget for 2020-2021

	Interior R&R	r R&R	Change M	Change Management	PCN	
GL NAME	DEBIT	CREDIT	DEBIT	CREDIT	DEBIT	CREDIT
Carry Forward	- \$	\$ 5,000.00	- \$	\$ 193,000.00	- \$	· \$
Revenue (alloc. to correct Project GL)	- \$	\$ 25,900.00	- \$	\$ 193,000.00	- \$	\$ 150,000.00
Physicians	- \$	- \$	\$ 102,351.33	- \$	\$ 44,125.44	- \$
Contractor Fees	- \$	- \$	\$ 15,000.00	- \$	\$ 15,000.00	- \$
Salaries	\$ 30,881.50	- \$	\$ 214,959.14	- \$	\$ 64,725.00	- \$
Professional Development	- \$	- \$	- \$	- \$	\$ 7,549.56	- \$
Insurance	- \$	- \$	- \$	- \$	- \$	- \$
Accounting & Legal Fees	- \$	- \$	- \$	- \$	- \$	- \$
Travel	- \$	- \$	\$ 23,000.00	- \$	\$ 7,500.00	- \$
Event Expenses	- \$	- \$	\$ 6,500.00	- \$	- \$	- \$
Communications	- \$	- \$	- \$	- \$	- \$	- \$
Meeting Costs	- \$	\$ -	\$ 5,553.00	- \$	\$ 7,500.00	\$ -
Rent	- \$	- \$	- \$	- \$	- \$	- \$
Utilities & Security	- \$	\$ -	- \$	- \$	- \$	\$ -
Repairs & Maintenance	- \$	\$ -	- \$	- \$	- \$	\$ -
Telephone & Internet	- \$	\$	- \$	- \$	- \$	\$ -
Office Supplies & Expense	- \$	- \$	\$ 2,136.53	- \$	\$ 2,400.00	\$ -
Information Technology	- \$	- \$	\$ 15,000.00	- \$	- \$	\$ -
Furniture	- \$	- \$	- \$	- \$	- \$	\$ -
Printing	\$ 18.50	÷ - \$	\$ 1,500.00	- \$	\$ 1,200.00	- \$
Totals	30,900.00	\$ 30,900.00	386,000.00	\$ 386,000.00	\$ 150,000.00	150,000.00 \$ 150,000.00