



Cowichan Valley
Division of Family Practice
A GPSC initiative

2020-21 Strategic Operating Framework

“Providing leadership in healthcare innovations, in collaboration with our community.”

Our Mission

Working collaboratively with our partners and representing the collective voice of our members, CVDFP seeks to create economically responsible and sustainable ways to:

- Support family physicians and nurse practitioners to improve their clinical practices and professional satisfaction
- Identify gaps that exist in patient care in the Cowichan region
- Develop solutions to meet the community's needs and common health care goals and in doing so:
 - Improve the patient experience of care
 - Improve the health of the population
 - Ensure efficient utilization of health care resources

Collaboration

Innovation

Support

Leadership

Our Partners, Our Community



The Cowichan Division of Family Practice works collaboratively with a number of community partners, both through the Collaborative Services Committee and on a project-specific basis.

Collaborative partnerships are essential to the success of CVDFP's work and, as such, potential partnering opportunities and communications with our community are key considerations in the division's strategic planning.

- *Island Health*
- *Our Cowichan Health Network*
- *First Nations Health Authority*
- *Local First Nations communities*
- *Cowichan District Medical Society*
- *Cowichan District Hospital Foundation*
- *Collaborative Services Committee*
- *General Practice Services Committee*
- *Shared Care Committee*
- *Other Divisions of Family Practice*

PLANNING PROCESS

- **Initiatives must first be viewed through several lenses:**
 - Budget needs - both start up costs and ongoing expenses
 - Scope, timing and projected duration of work
 - Potential partners
 - Risk management
- **To be considered, initiatives must meet a set of minimum criteria. Specifically, is there...**
 - Sufficient funding available?
 - A reasonable expectation of sustainability?
 - Sufficient manpower capacity within CVDFP?
 - A reasonable degree of GP buy-in?
- **The resulting framework is intended to provide:**
 - Direction for effective use of resources by focusing on key priorities
 - A basic roadmap to guide the division in achieving stated goals
 - A baseline from which progress can be measured
 - A mechanism for making informed change when needed



KEY CONCEPTS

- CVDFP works collaboratively with a number of community partners, each of whom hold a seat at the Cowichan Collaborative Services Committee. Work with our partners is identified on a per-initiative basis throughout this plan.
- Primary Initiatives are led and overseen by the Division; in the case of Partnership Initiatives, CVDFP will focus primarily on facilitation and participation as appropriate to support the project at hand.
- CVDFP seeks to identify and maximize patient attachment opportunities within existing community resources and services.
- Wherever data is measurable, mechanisms are put in place to track program outcomes, including any patient attachment statistics.
- The strategic plan provides a platform for operational reporting – progress on stated priorities will be regularly reported at the board and general membership level, and to community partners and funders as needed.



2019-20

STRATEGIC PRIORITIES

Building a system of integrated primary and community care to create better ways for family doctors to access supports for their patients, and to enable more people to get access to care. A comprehensive patient home.



CVDFP Primary Initiatives

INPATIENT CARE



SCOPE

- Working to maintain and ultimately increase the number of GPs providing inpatient care through financial incentives, resources and other supports
- Providing care to unattached inpatients through the Family Practice Hospital Support Program
- Finding family doctors for truly unattached inpatients
- Tracking unattached inpatient data through QI measures

PARTNERS

- GPSC
- Cowichan District Hospital
- Island Health

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Maintaining FPHSP participation levels
- Increasing number of GPs providing inpatient care
- Increasing number of locums willing to work in hospital
- Reducing the proportion of FPHSP patients who have a community GP
- Increasing patient attachment
- Increasing number of participants completing mentorship program
- Increasing overall GP satisfaction

2019-20 PRIORITIES

Working to expand scope and structure of inpatient care mentorship program

Tracking GP participant levels to determine success of enhanced inpatient care incentives, per GPSC MOU implemented April 1-2018

Engage with GPs to determine level of satisfaction with hospital work in light of enhanced inpatient care incentives

Participating in GPSC task group around the concept of "chipping in" – what constitutes full service family practice and how is that best compensated?

CVDFP Primary Initiatives

INFORMATICS / IT

SCOPE

- Forming prevalence data projects to support GPs in providing better patient care, and Inform CVDFP projects
- Providing ground-level supports to GPs in practice
- Facilitating development of a regional data program of relevant, aggregated, physician-owned data
- Advocating for province wide IT solutions around EMR interoperability

PARTNERS

- Practice Support Program
- Health Data Collaborative
- Doctors Technology Office

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Increasing number of GPs feeding data into the prevalence dashboard
- Increasing number of GPs completing empanelment work
- Engaging Telus for conversations around EMR interoperability
- Engaging Doctors Technology Office for conversations around strategies for common IT solutions

2019-20 PRIORITIES

Continue working with community GPs to improve the quality of EMR data, pairing the data dashboard project with PCN empanelment work

Working with key stakeholders, advocate for and help facilitate development of a common IT platform

Working with Telus, investigate further opportunities for sharing meaningful, discrete EMR data between providers, for all Cowichan based Med Access users

Working with local PSP team, continue promotion of frail seniors prevalence data project

CVDFP Primary Initiatives

RECRUITMENT & RETENTION



SCOPE

- Promoting Cowichan through advertising and networking
- Supporting individual GPs in recruiting for practice openings; supporting CVDFP programs with focused recruitment efforts
- Promoting and maintaining locum resources
- Informing succession planning efforts
- Working to enhance collegial physician relationships
- Promoting physician leadership on issues that matter to physicians

PARTNERS

- CDMS
- Island Health
- Regional Recruitment Team
- GPSC (provincial recruitment resources)

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Increase in number of physicians contacting CVDFP
- Increase in number of GPs successfully recruited
- Decrease in family practice vacancies
- Increase in number of locums on CVDFP resource list
- Increase in number of learners engaging with CVDFP
- Decrease in number of IMGs leaving area after Return of Service commitment

2019-20 PRIORITIES

Working with the Cowichan District Medical Society to identify opportunities for collaboration and shared efficiencies

Completing and implementing a welcome package for physicians new to the community

Developing a support structure specific to International Medical Grads

Continuation of social and educational events to engage residents, welcome new physicians, and support established physicians

CVDFP Primary Initiatives



MENTAL HEALTH & SUBSTANCE USE



SCOPE

- Applying a MHSU lens to all CVDFP programs
- Partnering with community agencies to consider social determinants of health and the effect on population health
- Partnering with community agencies to develop regional supports for vulnerable populations
- Advocating for enhanced MHSU related services in Cowichan
- Aligning MHSU strategic priorities with PCN development

PARTNERS

- Island Health
- Cowichan Mental Health Services
- Cowichan Addictions Services
- Cowichan District Hospital

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Successfully engaging Island Health for conversations around detox and acute psychiatric services in the new CDH
- Successfully engaging Nanaimo detox centre for discussions around aligning with Cowichan services
- Successfully engaging with local psychiatry services for discussions around providing support to local addictions services.

2019-20 PRIORITIES

Working on improving information flow between MHSU / Addictions services and GP offices

Working to develop a formal connection between Cowichan and Nanaimo MHSU services

Working to incorporate psychiatric services into addictions services

Advocating for detox beds and psychiatric intensive care services in Cowichan

CVDFP Primary Initiatives

SENIORS' HEALTH



SCOPE

- Supporting eldercare work, including residential care and end of life care, within the community, PCN and hospital settings
- Working to improve supports for frail seniors
- Working to improve continuity of care for seniors
- Working to keep seniors out of hospital, when appropriate
- Working to identify mechanisms to attach unattached seniors

PARTNERS

- Island Health
- Long term care facilities
- Cowichan District Hospital
- First Nations
- Community seniors orgs
- Ministry of Health (RCI)
- GPSC (PCN)

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Improvements in five best practices guidelines:
 - Proactive visits
 - Meaningful med reviews
 - Completed up-to-date MOSTs
 - Case conference attendance
 - 24/7 availability
- Decrease in number of residential care residents admitted to hospital
- Increase in number of seniors attached to a family doctor

2019-20 PRIORITIES

Working to maintain quality palliative care and promoting advanced care planning

Advocating for affiliate long-term care facilities, outside of Island Health

Working to improve quality of the five best practices guidelines of the residential care initiative

Developing a mechanism for conducting residential care audits, as set out in the RCI MOU

Partnership Initiatives



INDIGENOUS HEALTH



SCOPE

- Applying a First Nations lens to CVDFP programs & initiatives
- Facilitating relationship building between First Nations communities and the broader medical community
- Identifying educational opportunities to support collaborations between parties
- Building awareness around culturally safe practices; incorporating cultural safety and humility into CVDFP work

PARTNERS

- Local First Nations communities and individual Health Directors
- First Nations Health Authority
- Island Health Aboriginal Health

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Number of GPs completing the PHSA Cultural Safety Program
- Number of participants attending collaborative events
- Confirmed inclusion of First Nations input into final CDH and PCN plans
- Inclusion of First Nations representatives at various project tables

2019-20 PRIORITIES

Applying a First Nations perspective to the planning process for the new Cowichan District Hospital

Applying a First Nations perspective to the planning process for the Cowichan Primary Care Networks

Continuing work to strengthen relationships between First Nations healthcare workers, family doctors, and the broader health care community

Developing a collaborative engagement / education event for First Nations healthcare providers and other primary care providers

Partnership Initiatives

MATERNITY CLINIC

SCOPE

- Supporting the Cowichan Maternity Clinic in its mandate to:
 - Provide care to expectant women through their pregnancy and up to 6 weeks post-partum
 - Attach unattached CMC patients and their families at point of discharge
 - Support vulnerable populations and those with unique socio-economic and cultural needs

PARTNERS

- Island Health
- Maternity Clinic physicians
- CDH Foundation
- Aboriginal Success By 6 program

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Maintain or increase certain patient demographics:
 - No. new patients
 - Percentage of indigenous patients
 - No. of Penelakut patients
- Maintain or improve premature birthrates
- Maintain or improve c-section rates
- Maintain or increase proportion of CDH deliveries
- Maintain current levels of patient attachment (100%)
- Increase number of GPs on staff

2019-20 PRIORITIES

Contributing to planning of the new Cowichan District Hospital, specific to perinatal services and the Cowichan Maternity Clinic

Working to secure coverage for RN position during holiday and sick time

Recruiting and training additional physicians for CMC; working on a succession plan

Investigating potential funding options, or other avenues of support for long term sustainability of CMC operations

Partnership Initiatives



PATHWAYS COWICHAN



SCOPE

- Overseeing Pathways implementation, maintenance, usage
- Engaging physicians, clinic staff and allied health services to:
 - Elevate Pathways' profile and increase usage levels
 - Enhance Cowichan Pathways content and functionality
 - Support connectivity among members of the medical community
- Engaging community to ensure robust, accurate and current services listing on Pathways

PARTNERS

- Pathways BC
- Cowichan District Medical Society
- Practice Support Program
- Our Cowichan

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Completed Pathways profiles for all specialist physicians in Cowichan
- Increasing number of Pathways users:
 - Family doctors
 - Clinic staff
- Effective engagement of physicians new to the region
- Increasing numbers of clinics represented at engagement events
- Frequency and nature of feedback received from users

2019-20 PRIORITIES

Preparing for potential implementation of new Referral Tracker module, pending completion of pilot project

Enhancing community services content; preparing for potential implementation of public-facing community services feature

Creating education and engagement opportunities for Pathways users; implementing quarterly MOA engagement events

Develop statistical reporting around Pathways usage to inform and monitor effectiveness of any interventions

Partnership Initiatives



HOSPITAL REDEVELOPMENT



SCOPE

- Ensuring the family practice perspective is represented during the CDH redevelopment process by:
 - Collecting input from community GPs and feeding back into the Island Health planning process.
 - Collecting information from Island Health and relaying it regularly to the board and membership of CVDFP.
- Engaging relevant external sources, such as other community hospitals, for information gathering opportunities.

PARTNERS

- Cowichan District Medical Society
- Island Health
- Cowichan District Hospital

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Engagement levels of family doctors in the consultation process
- Breadth of FP representation in the consultation process
- Continued engagement within Island Health planning functions
- Confirmed inclusion of family practice input into final CDH redevelopment plan
- Confirmed inclusion of family practice input into service levels, now and for future state

2019-20 PRIORITIES

Maintaining regular representation at relevant IH focus groups from the future state planning phase into the functional design phase

Engaging a broad range of family medicine providers from throughout the community for input on current gaps and functional design elements for the new hospital

Advocating for an immediate increase in service levels and funding, to ensure the new hospital can be fully operational at opening

Facilitating conversations between relevant parties around quality of care and patient experience as relevant to planning for the new hospital

Partnership Initiatives



PHYSICIAN ENGAGEMENT



SCOPE

- Building greater collegiality and stronger relationships among the local medical community
- Facilitating effective information sharing between CVDFP and the Cowichan District Medical Society
- Identifying areas of commonality and defining distinctions between the work of CVDFP and CDMS
- Seeking opportunities for collaboration between CVDFP and CDMS

PARTNERS

- Cowichan District Medical Society
- Island Health
- Cowichan District Hospital

MEASURES / INDICATORS

How do we know we're achieving our goals?

- Level of attendance and balance of representation at collaborative events.
- Confirmed inclusion of specialist input into final CDH and PCN plans
- Clear communication processes between CVDFP and CDMS
- Minimal duplication of work between organizations
- Development of clear policies around review of RCME applications
- Successful outcomes of other shared work

2019-20 PRIORITIES

Facilitating conversations around potential shared recruitment and retention efforts between CVDFP and CDMS

Engaging specialist physician representatives to participate in PCN planning processes

Supporting and participating in CDH redevelopment planning processes, ensuring broad representation at all levels and at each stage of the process

Establishing a shared RCME Oversight Committee between CDMS and CVDFP for a cooperative, community approach to use of Rural CME funding

REVIEW PROCESS

strat.e.gy

(strät' ə-jē) n.

1. Plan of action
designed to achieve
a particular goal.

- This framework is intended as a living document, allowing for and reacting to unplanned developments.
- The framework will be reviewed by the board and updated on an as-needed basis, as appropriate to the current state.
- Interim reviews will focus on updating top priorities, and considering any funding needs or constraints.
- A comprehensive review of the plan will be carried out on an annual basis
- As part of the review process, consideration should be given to the following:
 - What is our vision and theory of change; how can we make a difference?
 - What part of the problem are we working on; what role should we play and where will we focus our efforts?
 - What actions and adaptations are needed to succeed; how will we measure our success?
 - What skills and abilities do we need to create the impact we've set out to achieve?