

2019-20 ANNUAL REPORT



NOTICE OF MEETING

Cowichan Valley Division of Family Practice Annual General Meeting

Wednesday, September 30, 2020; 6-9pm

Meeting to be held virtually via Zoom.

noto Source: CVRD Web

PROPOSED AGENDA

- Presentations TBA
- Year-End Audit Report
- Initiative Reports & Updates
- Primary Care Network Update

YOUR DIVISION TEAM 2019-20

BOARD

Bryan Bass, Co-Chair Jan Malherbe, Co-Chair John Lewis-Schneider, Treasurer Pat Gallagher Len Roy Carole Williams





ADVISORY

Graham Blackburn, CDH Redevelopment Ryan Gallagher, Pathways Roy Gilbert, Retention & Recruitment Paul Harris, Mental Health & Substance Use Maki Ikemura, Member at Large Morgan Lindsay, Indigenous Health Liaison Stacey McDonald, Long Term Care Tom Rimmer, Inpatient Care Glenn Robinson, CDMS Liaison J-M Wilson, IT Maggie Watt, Cowichan Maternity Clinic Susan Barr, Hospice House Jim Broere, PCN

STAFF

Jennifer Berg, Director of Finance Tiffiny Littmann, Director of Operations Carla Bortoletto, Director of Strategic Priorities Kate Wratten, Recruitment & Retention Lynn Grills, Financial Assistant Paul Dunford, Admin Support



CO-CHAIR'S REPORT Dr. Bryan Bass & Dr. Jan Malherbe

Dear Colleagues:

As the end of summer winds down and a new year starts for the Division, I certainly hope that everyone has had some time this summer to catch a bit of rest and restore their souls. The COVID whirlwind disrupted a lot of our personal and professional plans this year and absorbed a lot of Division resources. It interrupted our regular meetings but I am truly grateful once again for all of the determination and selfsacrifice that I have seen from both our staff and our members in helping to navigate through this storm. Obviously COVID will continue to disrupt the way we operate as a Division but I think with the teamwork we have seen amongst our membership, as well as a bit of tolerance, though I am not too sure we will have clear sailing, I have no doubt we will find a way to tack our way through the next year.

Looking at the year in review, last fall we saw Jim Broere, after multiple turns on the Board, stepped down but graciously continuing in the important role as lead for the Primary Care Network (PCN). Jim's importance to the Division cannot be understated and for my last nautical analogy, he did an admirable job. We were fortunate to have Carole Williams step up as a new director on the Board in January 2020 to fill the vacancy left by Jim's departure.

We were also fortunate to have Jan Malherbe step up to serve as a board member during the early days of the COVID crisis, playing a major role in organizing hospital strategy. With these two additions, our board currently includes Len Roy, Carole Williams, Pat Gallagher, Jan Malherbe and John Schneider. Having such an experienced board overseeing our operations has been a privilege. Unfortunately, John Schneider will be stepping off the board following this year's AGM. We are sorry to be losing him; John served us well particularly with his financial background, and always gave us the community perspective. Last fall was a busy time on the PCN (Primary Care Network) front, with multiple partner meetings, and a lot of work being done around community resource planning while waiting for the government commitment. Approval of the Cowichan submission came through January 9th allowing us to proceed with the significant portion of our proposal, including hiring of 6 GPs, 5 Nurse Practitioners, 8 RNs, 10 Social Department of Health Workers, 3 Behavioral consultants and 1 Pharmacist, over the next three years. First hires including a PCN director, Sue Kurucz, who has been working closely with us over the last year in designing this process, and PCN Indigenous leader, Amy Rosborough. We have also subsequently been able to hire a Nurse Practitioner with an Indigenous focus, Stephanie Eschak, who has been doing some mentorship at the hospital with the Doctor of the Week program, as well as a Nurse Practitioner with Mental Health and Substance Use focus, Heather Taylor, whom I am sure you all know. Other more recent hires includes Morgan Lindsay as a GP with Indigenous focus.

The Primary Care network continues to take a significant amount of Division resources and most of our staff have participated to some degree in the planning and organization of this. Carla Bortoletto and Sue Kurucz are a formidable team, having stickhandled their way through this incredibly complex process.

For those who are not aware, we have signed a lease for a physical space to house our Cowichan Primary Care Clinic and team -- the old Silver Fern Clinic on Jubilee Street in Duncan, owned by Dr. Stephen Faulkner. Steve has been an incredibly easy landlord to work with. We are presently undergoing leasehold improvements, which will hopefully be done by October.

On the hospital front, there has been continued support for the Doctor of the Day program via administration of the incentive funds, including the weekend call stipend. We continue to support the Mentorship Program and Doctor of the Week (UNIT physicians) which has been a very successful addition to the DOD program and supporting the orphaned patient population. Special thanks to Tom Rimmer and Graham Blackburn. We have also seen colleagues step up

to form an Addiction Medicine consult service at the hospital initially with Gerrit Prinsloo, Elizabeth Plant and Paul Harris and now supported by Laura McKinnon. We continue to support the Maternity Clinic and have participated in problem solving around psychiatric inpatient care with Adam Spivak.

We have worked with CDMS (Cowichan District Medical Society) throughout the fall and early spring in an intensive consultation process led by Maki Ikemura formulating a manpower plan. We have worked with CDMS on the Right Care, Right Place project and advertising campaign trying to direct patients to the right services, particularly during the challenging times created by the pandemic. Thank you to those who put up posters in their offices.

The Division continues to support long term care and the Long Term Care Initiative (LTCI), which certainly came to the fore during the COVID crisis. Surplus money from the LTCI was used to pay daily stipends over a 3 month period to those physicians who stepped up to cover long-term care during COVID to minimize potential exposure from health care workers.

During COVID our Division strategy was three-pronged:

- 1. Advocate. Such as advocating for our membership, and in particular, for establishing a swab site, respiratory assessment site and ensuring access to PPE.
- 2. Collaborate. Such as helping coordinate certain activities around COVID including the long-term care initiatives, and the hospital initiatives led by Jan Malherbe.
- 3. Communicate. Streamlining communication coming from Division Central, Ministry of Health, Island Health and other sources to membership. Supported community messaging during the COVID time reassuring them on how to access care.

Special thanks to those members playing key leadership roles during COVID particularly Pat Gallagher and Tom Rimmer in regard to the swab and respiratory clinics, Graham Blackburn and Jan Malherbe in organizing the hospital strategies, Stacey McDonald in

organizing the residential care strategies, and Kelsey Kozoriz in helping to organize the COVID-specific virtual care access for unattached patients.



COVID also made it necessary, unfortunately, to cancel our in-person meetings and we transitioned over to Zoom meetings for general, executive and board meetings which I thought were surprisingly successful. I certainly miss the in-person contact and fellowship. The Division has in the past supported education through our general meetings. We did have an update through Home Care and MAID during this past year; how we do this moving forward remains uncertain.

In addition to the Board, the Advisory group comprised of our initiative leads, meets more on an ad hoc basis, two or three times per year, focusing on their areas of involvement to help advise the Board.

The Division will continue to play an active role with its memberships in hospital and new hospital planning and of course with the new hospice which is about to open. We need to continue to focus on recruitment and retention, and in supporting physicians in leadership roles.

For those new to the Division, I would also like to acknowledge our staff who do an incredible job, often behind the scenes, making the Division run smoothly: our executive team, comprised of Director of Finance, Jennifer Berg, Director of Operations, Tiffiny Littmann, and Director of Strategic Priorities, Carla Bortoletto. These folks do an incredible job and make the work of Co-Chairs possible. We also have bookkeeper Lynn Grills, who supports the finance department and sends out our payment updates, and Kate Wratten our Recruitment & Retention Coordinator who also provides a range of admin supports wherever needed.

A special thanks to all of our Island Health partners, in particular with making the PCN come to fruition, as well as their support of the Maternity Clinic and Respiratory Assessment Centre.

We would also like to take the opportunity to recognize several new GPs, and NPs, who arrived in Cowichan over the past year. A warm welcome to:

Nafisa Samir (Ladysmith Family Practice) Greg Kutney (Hillside Medical) Sebastian Browne (Hillside Medical) Hussein Salehmohamed (Chemainus Clinic) Ockie Persson (Mill Bay Medical) Dave Welch (Coleman Clinic) Tom Young (Cowichan Way Clinic) Geoff Friderichs (Somenos Medical) Phil Baker (Locum, Inpatient Care) Kalen Leech-Porter (Locum, ERP) Elizabeth Plant (Addictions Medicine) Laura MacKinnon (Locum, Addictions Medicine) Dalton Chen (Long Term Care) Debbie Trerice (Locum, Inpatient Care) Bruce Hobson (Retired, but master-level IT resource) Jackie Muth, NP (Dakova Health Centre) Stephanie Eschak, NP (Cowichan Primary Care Network)



And to acknowledge and congratulate several family docs who managed to retire during this same period. Our sincere appreciation to the following physician for their service to the Cowichan community:

John Potts (Ladysmith Family Practice) Julian Lisinski (Hillside Medical) Fergus Kennedy (Hillside Medical) Doug Gee (Chemainus Clinic)

Last but not least, despite the COVID interruptions, we continued with our bursary and scholarship program based on end of first term marks. Our \$1,000 regional scholarship was given to Sophie Miranda of Shawnigan Lake school. Bursaries of \$500 to Hannah Horsman from Chemainus Secondary, Jasper Parker from Cowichan Secondary, Mila Stewart from Frances Kelsey, Reid Herding from Ladysmith, and Olivia Nemet from Lake Cowichan.

I look forward to serving my community and colleagues in the upcoming year as a Board member and in particular look forward to the opening of our Primary Care Clinic. I look forward and encourage all members to remain involved or to get involved in your Division to guide us to a better future.

Yours sincerely, Dr. Bryan Bass & Dr. Jan Malherbe

TREASURER'S REPORT

John Lewis-Schneider

On behalf of the Board, I am pleased to present The Cowichan Valley Division of Family Practice Society's audited financial statements for the fiscal year ending March 31, 2020.

MNP LLP Chartered Professional Accountants have examined the financial statements, comprised of the statement of financial position, statement of operations, changes in fund balances and cash flows. In their opinion, the financial statements present fairly, in all material respects, the financial position of Cowichan Valley Division of Family Practice Society as at March 31, 2020, and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Statement of Financial Position as at March 31, 2020

- Total cash assets held were \$857,116.
- Accounts Receivable at March 31, 2020 of \$7,591 includes \$5206 for GST rebates, and \$2385 for the CDMS portion of Pathways.
- Infrastructure ended the fiscal year with \$85,405 in deferred GPSC contributions that will be carried over into fiscal 2020/2021.
- The balance of funds remaining in deferred included \$413,731 related to the PCN, \$190, 136 for long-term care, and \$43, 738 for in-patient care.

Statement of Operations to March 31, 2020

- Infrastructure realized costs of \$1.16m, including \$506,788 for operating, and \$661,031 for in-patient care. Attachment realized costs of \$156,173 related to the PCN
- The 2019/2020 fiscal year ended with an excess of revenues over expense of \$1,278 the excess represents interest earned on held funds.

I would like to thank the board, and general membership for the opportunity to serve as the Division Treasurer. I would also like to thank the Division staff for their continued hard work, support and commitment to the financial management of the Division's resources.

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