

# 2016–17 ANNUAL REPORT

## VISION STATEMENT

*Promoting sustainable primary health care through programs which address the health care issues of our community and physicians*



Many thanks to local artist and carver, Peter Gong, who created this symbol to represent the healing hands (of GPs) around Mission.



**Mission**

**Division of Family Practice**

A GPSC initiative

# MEMBERSHIP

39 GPs & 2 NPs

## BOARD OF DIRECTORS



**Dr. Carol Pomeroy**  
Chair



**Dr. Harj Dau**  
Treasurer



**Dr. Gwen Siemens**  
Past Chair



**Dr. Gerry Nemanishen**  
Director



**Dr. Peter Barnsdale**  
Director



**Dr. Lawrence Welsh**  
Secretary

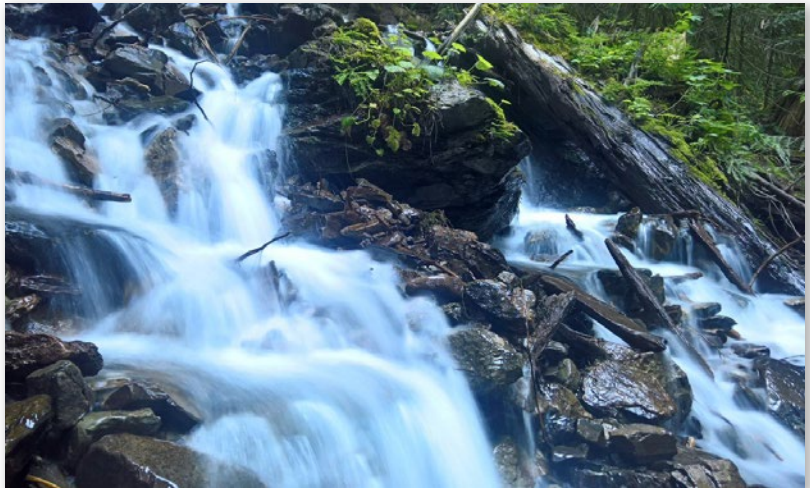
## STAFF

<b>Shona Brown</b>	Executive Director
<b>Kimberly Bergen</b>	Admin/MOA
<b>Nicole Martin</b>	Project Coordinator
<b>Paul Burns</b>	Bookkeeper

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## CHAIR REPORT



Looking back, it has been an exciting and productive year. We have continued to support our physicians, our patients and our community in innovative and collaborative ways.

With the end of the A GP for Me /

Attachment initiative, we have been exploring and implementing the next two central initiatives — the patient medical home (PMH) and primary care home (PCH) models of care.

We have been collaborating with Fraser Health and the Ministry of Health in innovative ways with the development of a population-based funding practice in our community. As well, we have seen positive changes for our frail seniors as we collaborate with Fraser Health, initially through the Frail Seniors Initiative and currently our Primary Care Network Initiative.

We have been collaborating with our Division partners in Abbotsford to share in development of a “Maternity Pathway” for Mission and Abbotsford physicians and patients. As part of this maternity initiative we hosted an educational event to help strengthen our members’ ability to continue providing high-quality early prenatal care. Furthermore, our Division office now has the Mission Maternity Clinic in Mission to better serve our community.

We have continued our collaboration with our community partners in the Child and Youth Mental Health and Substance Use (CYMHSU) Collaborative Local Action Team (LAT). Our LAT was granted an extension in order to continue its meaningful work in our community.

We continue to support our Residential Care Program (RCP) with its mandate to maintain quality care at our local residential care facility (TRIM), and we have supported our Doctor of the Day program as it has developed into our local hospitalist program.

None of this would have been possible without our excellent support staff, our dedicated board and their hard work on our behalf, or our amazing physician members.

I welcome you to visit the Division office to meet our wonderful staff: our Executive Director Shona Brown, our Project Coordinator Nicole Martin, our MOA and Admin Assistant Kimberly Bergen, and Bookkeeper Paul Burns. I would also welcome you to meet our newest staff member Jennifer Ortman who is our Community Navigator. I am very thankful to work with such a talented and dedicated staff, and am looking forward to the coming year.

Respectfully submitted,

Dr. Carol Pomeroy  
Chair  
Mission Division of Family Practice

# TREASURER REPORT

On behalf of the board I am pleased to present the Mission Division of Family Practice's audited financial statements for the fiscal year ending March 31st, 2017.

Loewen Kruse Chartered Accountants have examined our financial statements in detail in May of 2016 and were satisfied that we are in compliance with the Canadian accounting practices.

The 2016/2017 fiscal year continues to be busy with the Mission Division's Attachment Clinic, transitioning our A GP for Me work into a new phase after the provincial initiative's wind-down in March 2016, and the ongoing administration of the Doctor of the Day program and the Residential Care Program.

To assist us in ensuring that our programs continue to run effectively, the Mission Division has excellent support and staff including Shona Brown our Executive Director, Nicole Martin our programs manager, Kimberly Bergen, our MOA and admin assistant at the Attachment Clinic, and Paul Burns, our bookkeeper. I would like to thank them for all their hard work and commitment to the financial management of the Division's resources.

Respectfully submitted,  
 Dr Harjinder Dau  
 Treasurer  
 Mission Division of Family Practice

# FINANCIAL STATEMENT

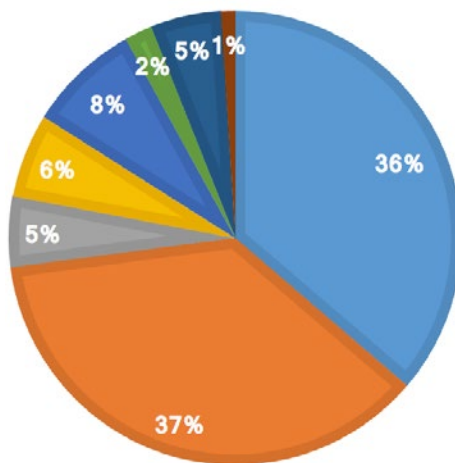
April 2016 through March 2017

INFRASTRUCTURE	ACTUAL
Doctor of the Day	\$ 329,866
Human Resources	333,376
Facilities	45,677
Board & Committees	53,582
RCP	74,576
Supplies & Equipment	19,871
Administration	45,677
Membership	8,615
<b>TOTAL</b>	<b>\$ 910,957</b>

# EXPENSE SUMMARY

April 2016 through March 2017

- Doctor of the Day 36%
- Human Resources 37%
- Facilities 5%
- Board & Committees 6%
- RCP 8%
- Supplies & Equipment 2%
- Administration 5%
- Membership 1%



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## EXECUTIVE DIRECTOR REPORT

This has been an exciting year for the Mission Division. We have focused considerable time on strengthening connections, locally and provincially. At a local level, we have brought together physician members to develop a successful proposal under the General Practice Services Committee's (GPSC) residential care initiative, which promotes and supports excellent quality care in residential care facilities. Our Residential Care physicians continue to troubleshoot issues and refine the processes for our patients, their family and our community physicians.

Mission has 5,740 (1,090 frail) seniors older than 70. It is projected that by 2025, the number of seniors will increase to 6,830 (1,297 frail). The Division partnered with Fraser Health on the frail seniors initiative with the intent to better support the wellbeing of frail seniors and to shift the service response of the aging condition from the acute sector to the community.

The Division has also been a voice at the small divisions' collaborative table, sharing resources and ideas to better serve our physicians in our smaller but mightier communities. We have been supported by the provincial Divisions of Family Practice office.

I would like to thank our staff Kimberly, Nicole and Paul for their dedication and commitment, their tenacity and creative abilities they bring to the programs we run, and the patients and physicians we serve. As well I want to acknowledge and thank our social work student this year, Jennifer Ortman. Jennifer will be finishing her schooling this fall and working with us one day a week to support our physicians and their patients.

And to our tireless family physicians, our members and champions. I thank each of you for your continued support, leadership, integrity, energy and contributions. Our Division has a strong Board of Directors and an engaged membership. Our Board members are focused in the pursuit of excellence, system change and the development of a strong and coherent organization. They work very hard on behalf of our members and I thank them for providing input, advice and direction as required. We are making a difference and this report is evidence of both our journey and our outcomes.

As we move forward, I invite members to help us build on this past year's achievements and to continue to influence our collective work for physicians, patients and our community. We have learned that system change involves everyone and that negotiation tactics are less effective than strong collaborative partnerships. Be a part of creating change to benefit our physicians, their patients and our community.

Respectfully submitted,  
Shona Brown  
Executive Director  
Mission Division of Family Practice





## PSP REPORT

With the GPSC realigning Practice Support Program (PSP) services more closely with the patient medical home model of care, 2016 saw the introduction and pilot of several new PSP services including the following practice assessments:

- Patient Panel Assessment — for identification, management and creation of registries in the electronic medical record (EMR)
- EMR Functionality Assessment — to identify potential gaps in EMR functionality and create a plan for EMR optimization
- GPSC Patient Medical Home Assessment — a self-assessment to help determine where a practice sits in alignment with the attributes of the patient medical home

The pilot phase for this work has been completed and physicians wanting to engage in any of these assessments can contact their PSP specialist, Stephanie Jones.

PSP also launched the Chronic Pain Learning Module in Mission where it was well attended by 19 Mission physicians, 10 MOAs and two RNs. Participants of the Module were introduced to new ways of improving function in their chronic, non-cancer pain patients using evidence-based tools, EMR resources and linkages to organizations like PainBC, Self-Management BC and People in Pain Network (PIPNetwork). After the Module, physicians reported a 38% increase in satisfaction for the way they manage and treat chronic pain patients. Using a structured care approach for these patients also led to a reported satisfaction increase of 78%.

Respectfully submitted,  
Stephanie Jones  
Practice Support Specialist  
PSP Regional Support Team  
Fraser Health Authority



# CHILD & YOUTH MENTAL HEALTH & SUBSTANCE USE

Mission's Local Action Team (LAT) has been working tirelessly and evolving since it began in September 2015, without losing focus on its goal of increasing timely access to mental health and substance use supports. Through a process of collaborating to identify Mission's successes and barriers, we were able to develop a plan of action to reach outcomes aligning with that goal.

Setting out with passion, drive, and determination, the truly amazing group of individuals (aka the Mission LAT) met twice a month and even weekly to collaborate on ideas. The only piece missing in the beginning of our journey was the involvement of youth and families and having their voice to guide us. We are now very lucky to have outstanding youth and families who trust to share their stories and learnings with us, which ultimately increases the awareness for clinicians and support givers as well.

We recently began raising awareness around ACEs (adverse childhood experiences) and affected health outcomes in adults. Stay tuned for more on this in the following months, including how this can affect patient care in your practice, and Mission being at the forefront in this work provincially.



Learning Session



Mission Fest



Jordyn bakes 'cope'cakes to manage her anxiety



Colouring book



We are very proud of the work we've done so far, but acknowledge there is much work yet to be done. Some of the highlights include:

- Designing resource cards and inspiring colouring books for youth – these were distributed to each middle and high school student in Mission, handed out at community events and given to community agencies. Approximately 4,000 resource cards and 3,500 colouring books have been handed out thus far.
- Providing four full days of EFFT (emotion focused family therapy) training to 15 masters' level Mission clinicians and a further two full extra days of EFFT training to certify 10 clinicians to train EFFT.
- Providing 30 parents two full days of EFFT training that were referred by multiple Mission agencies of families identified with MH and/or SU concerns with their children and foster children. Mission CYMH is providing a further two full days to 30 parents/caregivers in Oct 2017.
- Presenting the film *Resilience* (two screenings) at the Clarke Theatre; this included a panel discussion, resource table and delicious treats. Approximately 750 people attended over the two days including three GPs.

- Holding specific discussion groups with youth and families around looking at their journeys and what made a difference for them, what would have made a difference for them and what is still needed.
- Developing marketing materials for MY House which they are able to use to request funding and support from stakeholders, as well as target youth that could use their services.
- Hosting booths at community events to raise awareness around MH and SU.
- Introducing ACEs (adverse childhood experiences) study to the community, with the intention to inform, educate and collaborate on building a trauma-informed community.

The CYMHSU collaborative will be alive in Mission until December 2017 but the intention is for the work to continue well into the future.

Respectfully submitted,

Nicole Martin

Project Coordinator, Mission  
Division of Family Practice



*Resilience* screening



Panel discussion @ screening

# ATTACHMENT CLINIC

On behalf of the Division, we would like to thank everyone who gave their time to serve the unattached population at the Attachment Clinic.

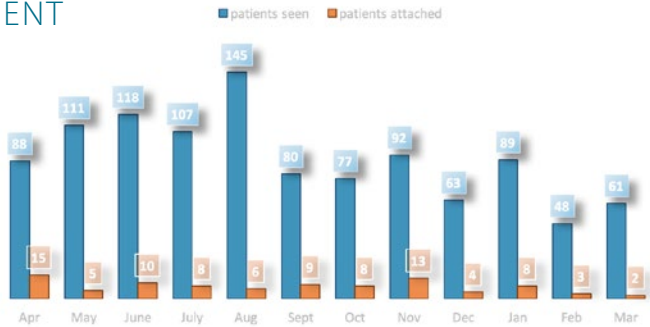
Throughout the year we have seen many newcomers moving to Mission with suitcases full of medical problems and medications. We have a roster of complex patients who depend on this service and are so thankful for the medical care they receive in the interim.

We also would like to thank those who have taken on patients from the Attachment Clinic for long-term care.

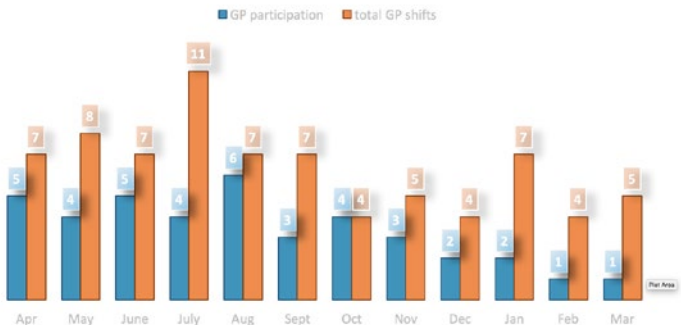
Fraser Health continues to acknowledge and support our work at the Mission Attachment Clinic and has brought in a nurse practitioner to support our frail senior population as well as aboriginal and refugee community. As the provincial A GP for Me initiative came to an end we were successful in applying for additional funding to carry the Attachment Clinic through to the fall of 2017. With the number of patients we see and with the need for this service still very high we are looking at other ways to maintain this needed service in Mission further into the future.

Respectfully Submitted,  
 Kimberly Bergen  
 MOA, Mission Division of Family Practice

## ATTACHMENT CLINIC – PATIENT



## ATTACHMENT CLINIC – GP



## STATS & TIDBITS

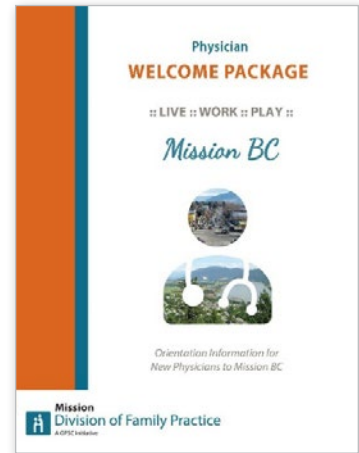
- Maternity CME — 19 GPs attended
- Pain Module — 21 GPs attended
- MOOHS was open for a period of 12 months and saw 201 phone calls and 56 patient visits
- MY House — 36 returning patient appointments and 19 new patient appointments since opening the clinic in November 2016 until March 2017
- FETCH — April 2016-March 2017
  - Unique visitors 11,532
  - Number of visits 23,189
  - Pages viewed 386,785
- Walk with Your Doc — The annual Walk with Your Doc was privileged to have two physiotherapists join us this year, along with a handful of physicians and their patients. We enjoyed a walk around beautiful Heritage Park, as we promoted health and wellness to our patients and community. Join us next May!



## RECRUITMENT

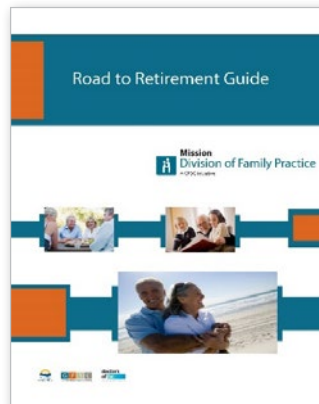
This has been an identified priority with the Division and with the remaining A GP for Me funds we were able to have Division staff attend two separate CME events in Vancouver that hosted newly graduating GPs and international medical graduates (IMGs). These opportunities were in partnership with Health Match BC and the provincial Divisions of Family Practice offic. No direct leads came from the events, but there were many indirect leads created by putting Mission on the map for new grads looking to set roots.

We also generated a “Live, Work, Play” guide with the help of Comox Division, that highlights Mission’s unique and inviting community and all that it has to offer.



## RETIREMENT

The Division can support GPs in preparing to leave practice. With the help of the Vancouver Division, we have produced a guide that includes steps on how to transition yourself and your patients.



# PATIENT MEDICAL HOME

PMH became a new vision in Mission when Steven Brown and Michael Marchbank visited in September 2016. Being a new concept in the way health care is delivered and received, we continue to collaborate with Fraser Health and community agencies to develop a work plan in which best supports continuity of care and relationships amongst patients, primary care providers, allied care providers and whole community in providing optimal access to services.

To date there is much work in progress around the medically complex frail seniors and this work will continue as well as morph through PMH. Access to Home Health services has already seen immense change in extending Home Care Nursing hours of operation, and the hiring of more nurses. One of the results from this action has reduced the wait time for services to no wait time.

Mental Health is also a focus in the preliminary work plan and we look forward to taking a deeper look at how patients can be supported through improved access and how GPs can be supported after their patients have received care.

If you'd like to be a part of the meaningful work taking place, please get in touch with Shona at [sbrown@divisionsbc.ca](mailto:sbrown@divisionsbc.ca)

## The 12 Attributes of PMH

1. Patient-Centred, Person-Focused Care
2. A Personal Family Physician
3. Continuity of Care
4. Comprehensive Care and Coordination of Care
5. Timely Access
6. Team-Based Care
7. Education, Training, Research
8. Internal and External Supports
9. Evaluation and Quality Improvement
10. EMR
11. GP Networks Supporting Practice
12. GP Networks Supporting Communities



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## COLLABORATIONS & PARTNERS

- Collaborative Services Committee
- Residential Care Program
- Interdivisional Collaboration
- Pathways
- Mission Community Health Centre
- Mission Memorial Hospital
- Mission Community Services Society
- Fraser Health
- Mission Friendship Centre
- District of Mission
- Mission Chamber of Commerce
- PSP (Practice Support Program)
- MY House (Mission Youth House)
- Mission Public School District
- TRIM (The Residence In Mission)
- Mission Aboriginal Integrated Health Team
- CYC (Child and Youth Committee)
- Community Wellness Committee
- Abbotsford Maternity Group
- Volunteer Mission
- Mission Seniors Centre





## HAPPY RETIREMENT!

*Wishing you all the best in your retirement. We will miss you!*



Dr. Matt Blackwood  
1976–2017



Dr. Keith Wong  
1978–2014

## WELCOME!



Dr. Ashley Mortimore joined Hillcrest Clinic in July 2016, returning to Mission where she was born and raised. Her interests include women's health, pediatrics and geriatrics.



Dr. Peter Eppinga opened Gwaii Medical Clinic in June 2017, coming back to a community he lived in for part of his childhood and teen years. His interests include mental health, Indigenous populations and social determinants of health.

# RESOURCES



Used widely across the province, Pathways has continued to assist physicians

in making referrals with comprehensive specialist and clinic information.

Key goals of Pathways include:

- Allowing GPs to identify the most appropriate specialists with shorter wait times
- Simplifying the patient referral process by easily

identifying specific areas of practice offered by each specialist and clinic

- Providing GPs with the most up-to-date information possible to ensure appropriate referrals
- Decreasing the incidence of re-referrals, thereby increasing the efficiency of patient care

Have you tried emailing your patients a resource or information during an appointment? It's so simple!



The provincial Divisions of Family Practice office

provides member access to UpToDate at no cost to the physician.

UpToDate is an online clinical decision support resource, serving as a trusted medical "colleague" that provides unbiased, evidence-based medical information at the point of care.

Subscribers can:

- Access from a desktop, laptop or mobile device

- Tap into the collective wisdom and experience of more than 5,100 leading clinicians (including Canadian physicians) on thousands of clinical topics
- Access answers to clinical questions quickly and easily
- Check drug information
- Use 135 medical calculators
- Access over 1,500 patient articles
- Acquire CFPC Mainpro+ Self Learning & MOC credits

## Mission Division of Family Practice

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Photos on cover, contents page, p. 7, p. 11, p. 14: Dave Kennedy.

Photo page 6: PictureBC.

All other photos: Mission DoFP

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

[www.divisionsbc.ca/mission](http://www.divisionsbc.ca/mission)