



North Shore
Division of Family Practice
A GPSC initiative



ANNUAL REPORT 2020–2021

VISION

Optimize the health of the North Shore population.

MISSION

- Promote the centrality of primary care.
- Develop and support excellent primary care.
- Improve the well-being of family physicians.

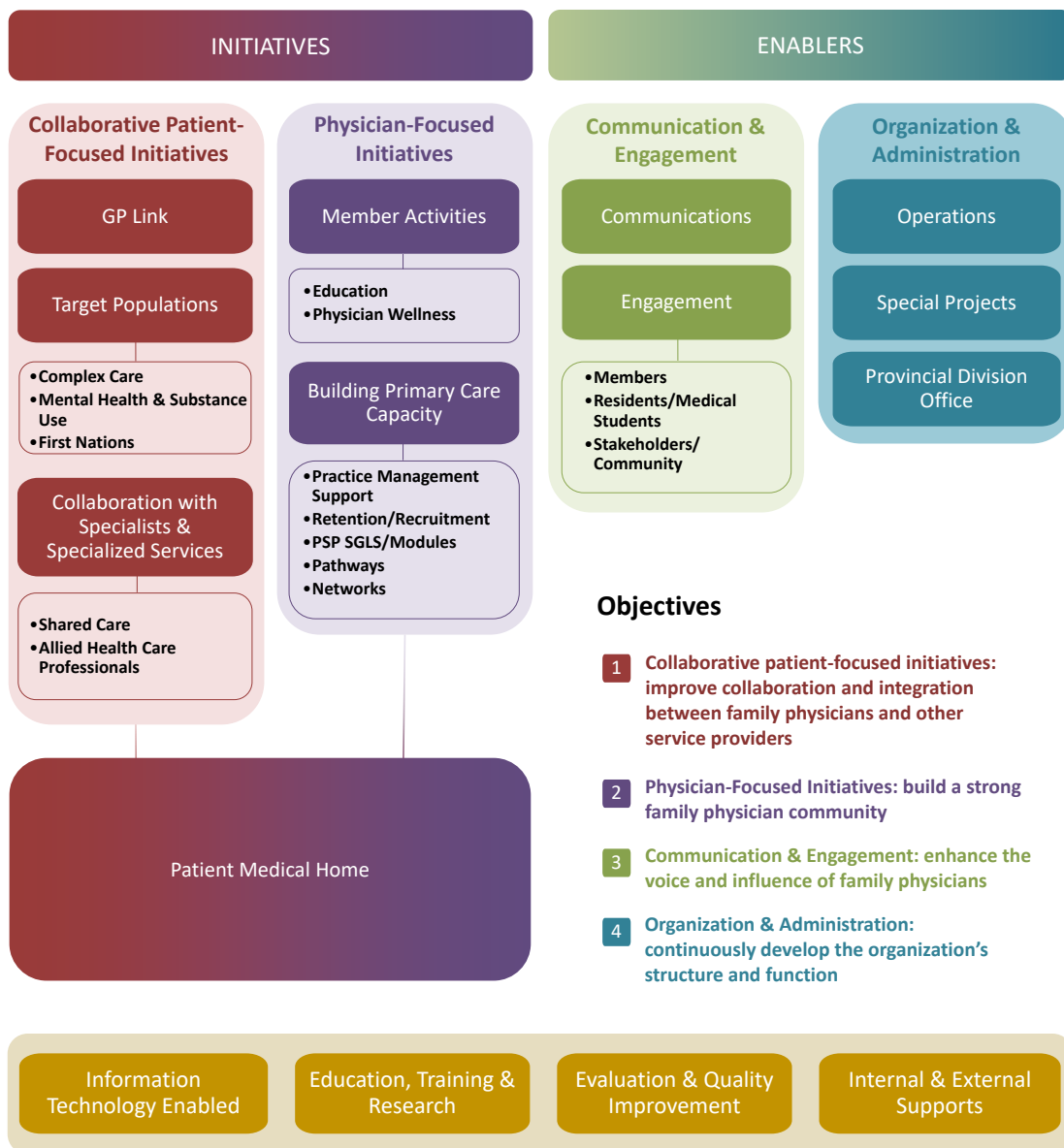
STRATEGIC OBJECTIVES

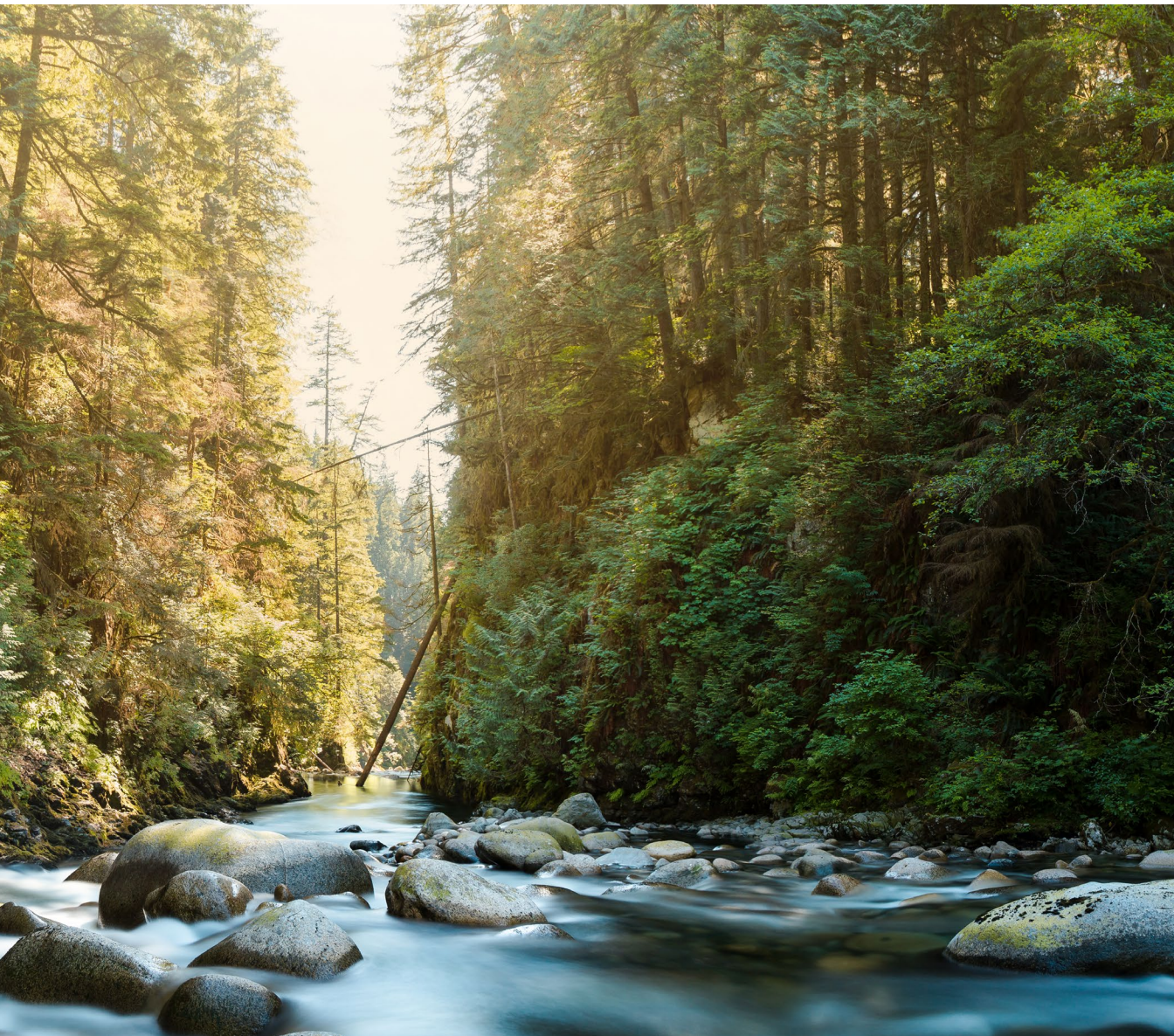
- Improve collaboration and integration between family physicians and other service providers.
- Build a strong family physician community on the North Shore.
- Enhance the voice and influence of family physicians.
- Develop the organization's structure and function.

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Strategic Priorities





Report from the Chair

Preparing this annual report allows me to reflect with gratitude on the many blessings of the past year. Believe it or not, things could have been much worse. Cast a glance over to Alberta, Saskatchewan, and the U.S. to see how things could have unfolded far differently. I will be forever grateful that our Member Physicians pivoted to virtual care while allowing in-person care to continue when needed. I am also grateful for our North Shore community which has one of the highest rates of COVID vaccine uptake in the world. Our Division staff and Committee members worked tirelessly behind the scenes to assist member physicians and to support timely delivery of primary care.

The Division exists to support patient access to primary care and to assist our family doctors in delivering that primary care. Of course, our focus this past year has largely been on our North Shore pandemic response, but there has been considerable non-pandemic work behind the scenes. The Division has been advocating for improvements to our primary care system with Vancouver Coastal Health (VCH), Public Health, General Practice Services Committee (GPSC), Doctors of British Columbia (DoBC), and the Ministry of Health (MOH). There are significant concerns surrounding the challenges facing a family doctor who wants to deliver longitudinal care in our current system. Some physicians are choosing to shift to a focused practice model or opting for UPCC or hospitalist work. The

new contracts have overall not been well received and the steep price of overhead in our urban areas is a real barrier to practicing in a longitudinal care model in our Fee for Service (FFS) system. Too much time is currently wasted by family doctors doing data entry, other “paperwork” and forms, managing their practice and I.T. issues and navigating our patients through our overly complicated system.

The Division is well aware of the concerns of our members and will continue to advocate for changes to the system. I can inform members that we do have a responsive Ministry of Health team and they are aware of our concerns surrounding primary care. In comparison to other provinces who often have very adversarial relationships between Doctors and the Ministry, I think B.C. family doctors are in a favourable position to potentially have their concerns addressed.

In addition to responding to these province wide systemic deficiencies the Division has, of course, been busy with the day to day support of our members. We successfully advocated for PPE access for members, we collaborated with Public Health in organizing the vaccine rollout, we worked with VCH in planning how to utilize the Urgent Primary Care Centre (UPCC) and plan Respiratory clinics for in-person care, we supported our members with using virtual care and have hired staff to assist with practice management. The Primary



Care Networks (PCN) project is continuing and hiring is ongoing for practice RN's and Counsellors to help support our patients with mental health needs; and we continue with projects addressing the Opioid overdose crisis and Substance Use issues. The Long-Term Care Initiative is a large undertaking that continues, the Referral Tracker project will provide significant benefits to both doctors and patients, and Physician Wellness remains at the forefront of our planning. The Post COVID Recovery Clinic is being actively planned and will be of benefit to patients recovering from "long COVID". There are also numerous committees that guide our Division in operationalizing our plans and there is a huge amount of work that hums along behind the scenes.

There was turnover in Division staff in the past year and we are fortunate to have an amazing leadership team in place to respond to staffing issues and to the important work of the Division. I want to extend huge gratitude to our Executive Director, Ms. Claudia Frowein, who has marshalled our Division through a very challenging time. I am very grateful for the leadership team and staff she has in place at our Division.

We are very fortunate here on the North Shore. Yes, we have our share of problems but we have a progressive responsible population here in our community and a

remarkable team in the Division to help support us in our work. I remain hopeful that we can collectively move toward a day where we family doctors go through our working day with a bounce in our step and maximize our potential in providing the kind of care we would individually want our family members to receive. Our Division will be there to support you in this process and I am honoured to serve in any way I can.

Respectfully,

Dr. Ray Chaboyer, B.A., M.D., C.C.F.P., F.C.F.P.
*Board Chair North Shore Division of Family Practice
GPSC VCH Division Representative
Vancouver Regional Divisions Leadership Group
Spokesperson First Nations and Aboriginal PCN*

Report from the Executive Director

Dear members,

Thank you for working tirelessly to ensure patient care continued without disruption during this global pandemic!

It goes without saying that 2020/21 was dominated by **COVID-19** and its impact on how you provide medical care in a safe and responsive manner. To that end, the Division's COVID Task Force met up to three times per week to prepare and respond to the crisis. During that time, we successfully advocated for personal protective equipment (PPE), developed a coordinated PPE distribution chain, advocated for respiratory assessment and COVID testing sites, implemented virtual care webinars, developed a model for centralized non-respiratory primary care clinics (in the event of members becoming ill), recruited family physicians to assist with testing and vaccinations, hosted virtual meetings open to all members for COVID-19 updates and feedback, and met regularly with local and regional leaders at Vancouver Coastal Health and MOH. As we move forward, the need for additional primary care supports to treat patients with post COVID recovery syndrome has resulted in a business case for a virtual clinic in partnership with specialists.

Despite the extreme challenges COVID-19 presented, the Division was able to proceed with other projects and programs, of which the **Primary Care Networks** (PCN) is the

largest underway. Currently there are two full-time RN's working in three clinics supporting a combined total of 14 FP's; with the learnings from these sites, another 13 RN's will be hired by 2024. We also have two pharmacists for physicians in the West and Central PCNs. Additional support for mental health was the number one priority identified in the members' consultations, and as an outcome of *your* feedback we have funding for a total of 13 mental health clinicians to be implemented over the next four years. Critical to the success of PCNs is the participation of members: without family physicians, there are no multi-disciplinary primary care networks. If you would like to expand your services to include nursing and allied health supports, please reach out to the Division's PCN team!

In addition to established programming such as the Long-Term Care Initiative, medical education, and physician wellness, other **projects** in 2020/2021 include, but are not limited to: implementation of the Pathways Referral Tracker to streamline referrals to specialists; development of a shared care ADHD proposal to enhance family physician (FP) capacity to treat adults with ADHD; spearheading a collaborative community-driven action committee with a variety of stakeholders (VCH, municipalities, police, first nations communities, fire department, community agencies, etc.) on substance use, with a focus on the opiate crisis; continued with the suboxone



mentorship program to increase physician prescribing capacity; and hired a patients services coordinator to attach patients through GP Link and retiring physicians.

The Division has been dedicated to expanding its **practice support** services to assist you on a day-to-day basis. To that end, we've added additional roles such as a practice advisor and a practice improvement technology coordinator who can provide on-site support. We've also expanded the Medical Office Assistant (MOA) Network to 200 members. The practice change management team was instrumental in accelerating the transition to virtual care by developing webinars and providing direct support.

With regards to **membership**, the Division registered 31 new members, primarily physicians already practicing in the community or replacing departing physicians, for a total of 251 members. We also had four known departures and recruited three new locums. We are excited to announce a new partnership with the Sea to Sky and Sunshine Coast Divisions, whereby we have hired a shared physician recruiter focused exclusively on recruitment to the North Shore/Coastal area, including locum recruitment.

The Division actively applies on funding opportunities for new initiatives and continues to be in an excellent **financial position**. We finished the year with a surplus, in large part due to the inability to host

in-person events. The current fiscal year 2021/2022 coincides with the end of the Physician Master Agreement, and as such all existing GPSC funding agreements also end March 2022. At this point in time, we have no sense of future funding, but I'm confident that GPSC and Divisions will continue to be a provincial priority.

Thank you for working tirelessly to ensure continued patient care during the pandemic, and a special thanks to Dr. Ray Chaboyer for his formidable leadership, and the 40+ members who contributed to Division initiatives by participating in committees and/or providing project, program, or governance leadership. I'd also like to thank the operations staff who went above and beyond expectations to ensure members are being supported through this crazy journey: the Division is most fortunate to have such a dedicated team. As a primary care community, we have pulled together and risen to one of the greatest professional challenges of a lifetime!

Stay safe,

Claudia Frowein

*Executive Director, North Shore Division
September 2021*

Member Events 2020–2021

APRIL 2020

- Virtual Care Learning Session (co-hosted with Doctors Technology Office).
- MDs4Wellness: Mindfulness Videoconference Sessions (Part 1).

MAY 2020

- eConsent App Launch Webinar.
- MDs4Wellness: Mindfulness Videoconference Sessions (Part 2).
- Dine & Learn: Update on the COVID Outbreak in the Vancouver Coastal Health Region.

JUNE 2020

- MDs4Wellness: Mindfulness Videoconference Sessions (Part 3).
- MDs4Wellness: Mindfulness Videoconference Sessions (Part 4).
- COVID-19: Preparing for the Second Wave (two weeks of member roundtables).

AUGUST 2020

- Dine & Learn: Palliative Care Services on the North Shore.

SEPTEMBER 2020

- Dine & Learn: Access to Child and Youth Psychiatrists.
- MDs4Wellness: Mindfulness Videoconference Sessions (Part 5).
- MDs4Wellness: Financial Literacy Series — Financial Planning During a Pandemic.

OCTOBER 2020

- MDs4Wellness: Mindfulness Videoconference Sessions (Part 6).
- Dine & Learn: COVID-19 — The Second Wave.
- Annual General Meeting.
- MDs4Wellness: Financial Literacy Series — Investing Personally and Through Your Professional Corporation.

NOVEMBER 2020

- MDs4Wellness: Mindfulness Videoconference Sessions (Part 7).
- MDs4Wellness: Financial Literacy Series — Estate and Tax Planning for Physicians.

DECEMBER 2020

- MDs4Wellness: Mindfulness Videoconference Sessions (Part 8).
- Virtual Holiday Party.
- MDs4Wellness: Financial Literacy Series — Maximize the Benefits of Being Incorporated.

FEBRUARY 2021

- Quick Pathways Update for COVID Resources.
- Dine & Learn: North Shore Perspectives on COVID-19 in the Community.

MARCH 2021

- MDs4Wellness: Mindfulness Videoconference Sessions (Part 9).
- How to Prepare for EMR Data Migration (co-hosted with DTO).
- Responding with Respect for Frontline Staff.
- Child and Youth Mental Health Now!: Psychiatrist Adolescent & Child Teleconferencing Services and Other Resources.



COVID-19 Task Force

Aims

- To engage in proactive pandemic planning.
- Support family physicians to provide the best possible care.
- Ensure access to quality primary care for patients.
- Provide member representation at collaborative COVID-19 committees and VCH's Emergency Operations Council.
- Provide accurate, relevant, and timely information to members.

Accomplishments

- Sourced and secured Personal Protective Equipment (PPE) supplies for family physician offices. Also secured donated PPE supplies for Clinicians.
- Successfully advocated for COVID-19 testing & respiratory assessment sites.
- Completed a proposal for three consolidated primary care clinics in geographic networks.

- COVID-19 newsletter communications were sent out to members to consolidate relevant information into one resource. Initially the newsletter was distributed daily, and as the realities of the pandemic restrictions and guidelines were better understood, the frequency was reduced to weekly, maintaining an average open rate of 65% throughout the year.
- Gathered and synthesized current information and conditions from a range of North Shore primary care environments — to inform and guide the work of the Division, the Health Authority, and community partners.

Physician Lead:

Dr. Dean Brown

Staff Lead:

Cynthia Buckett — Project Manager





QUICK STATS:

Acted as a central hub for the ordering and distribution of Personal Protective Equipment (PPE) for family physician offices

Average annual
open rate % of
COVID-19 weekly
communications

: **65%**

Initiatives

ADHD Initiative: Enhancing Access for Adult ADHD Care

Aims

- Increase family physicians' capacity to identify and manage uncomplicated or previously diagnosed ADHD in adults in the primary care setting.
- Reduce the existing patient wait times at the Adult ADHD Clinic at the HOpe Centre.
- Enhance collaboration and communication between family physicians and specialist as a means of improving ADHD patient care.

Accomplishments

- Established Steering Committee with psychiatrists from the Adult ADHD Clinic and family physicians.
- Submitted a Shared Care proposal to create education sessions and support resources to increase family physicians' knowledge and confidence in diagnosing and treating ADHD in adults.
- Project proposal was approved, and funding was received in May 2021.

Physician Lead:

Dr. Genevieve Lauzon

Staff Lead:

Cynthia Buckett — Project Manager

Child & Youth Mental Health & Substance Use (CYMHSU) Initiatives

Aims

- To increase the number of children, youth, and families receiving timely access to mental health and substance-use services and supports.
- Continue to provide a context where significant community stakeholders, who are all working to address youth mental health, can come together to build partnerships and create opportunities for systemic change.

Accomplishments

- The Access to Child and Youth Psychiatrists event was held in September 2020, to assist physicians to familiarize themselves with the new Psychiatrist Adolescent and Child Teleconferencing (PACT) Service prior to its launch in March 2021.
- A Child and Youth Mental Health NOW! presentation was hosted to introduce the telephone consult service to member physicians with information about screening tools, quality improvement support, and resources.
- Referral form has been revised and a video was produced by a Foundry client to demonstrate the telephone consult service in action.
- The CYMHSU Physician Lead continues to support and participate in the North Shore's CYMHSU Collaborative Action Team on behalf of the Division.

Physician Lead:

Dr. Hayley Broker

Staff Lead:

Cynthia Buckett — Project Manager

Family Physician/Specialist Relations Committee

Aims

- To create more efficient medical systems through enhancing patient and physician experience and improving relations, communication, and collaboration between family physicians (FP) and specialists (SP).
- To provide oversight, recommendations, and coordination for North Shore Shared Care projects.

Accomplishments

- Identified and discussed key issues that family physicians and/or specialists face within the health system as a means of improving patient care and physician communications.
- Supported new specialists starting their practice on the North Shore by welcoming them to the community and providing them with an overview of key resources that can support their practice.
- Created a specialist contact list to be added to the Division's communications for COVID-19 updates and event invitations to help improve collaboration with specialists.
- Supported Share Care projects by providing feedback on the ongoing activities, and by reviewing final reports.

*A big **thank-you** to
Dr. Lisa Gaede, who has
stepped down as Chair of
the Family Physician/Specialist
Relations Committee
after 10 years at the helm!*

Physician Lead:

Dr. Michelle Brousson

Dr. Lisa Gaede (2020)

Staff Lead:

Cynthia Buckett — Project Manager

First Nations Relations

Aims

- To continue to develop and strengthen the Division's relationship with Squamish Nation, Tsleil-Waututh Nation, and the First Nations Health Authority (FNHA).
- Seek opportunities to support the Aboriginal Primary Care Clinics (APCC).
- Improve the ability to provide culturally competent primary care.

Accomplishments

- Supported the health data collection project through GSPC Innovation funding.
- Supported implementation of PCN positions at the Tsleil-Waututh Nation and Squamish Nation primary care clinics.
- Invited representatives from Tsleil-Waututh Nation and Squamish Nation to participate in all PCN working groups and COVID-19 committees.
- Assisted with the recruitment of a new to practice physician for Tsleil-Waututh Nation and a long-term locum family physician to Squamish Nation.

GP Link: Patient Attachment

QUICK STATS:

Number of patients
attached to a
family physician
in 2020/2021

: 6,022

Aim

- To facilitate patient attachment by providing unattached patients with information on family physicians who are accepting new patients.

Accomplishments

- GP Link process revised to more proactive attachment through direct contact and matching with patients and medical practices.
- Maintained a list of FPs accepting new patients by regularly surveying members to identify their capacity to accept new patients.
- Working with the new provincial BC Health Connect registry to attach their database with GP Link.

Physician Lead:

Dr. Dean Brown

Staff Lead:

Allie Barr — Patient Services Coordinator

Long-Term Care Initiative (LTCI)

Aims

- Collaborate with family physicians, residential care facilities, and VCH to implement five best practices in residential care:
 - 24/7 availability and on-site attendance when required.
 - Proactive visits to residents.
 - Meaningful medication reviews.
 - Completed documentation.
 - Attendance at case conferences.
- Attract more physicians to residential care.
- Improve the quality of primary care to residents in long-term care facilities.

Accomplishments

- The focus of the year was managing COVID-19, including hosting debriefing sessions and identifying lessons learned to improve responses for future waves.
- Formed a medical directors WhatsApp group for crisis management communication during COVID outbreaks.
- Set up a parallel on-call schedule for a facility with an outbreak.
- Created a Regional LTCI Medical Leadership group.
- Advocated for CareConnect access for physicians and explored facility capacity for electronic charting.

- Surveyed facility directors and reviewed successful strategies in controlling COVID-19 infections.
- Encouraged non-LTCI physicians to join LTCI and if unable to provide required care, encouraged them to transfer their residents to LTCI physicians.
- Organized two webinar sessions, one educational session on frailty management and one Urgent Primary Care Centre (UPCC) round table discussion covering several issues including communication issues between hospitals and facilities, obtaining suggestions for improvements from panelists, and how to transfer or manage patients with respiratory illness symptoms during the pandemic.

Physician Lead:

Dr. Kathy Rahnavardi

Staff Lead:

Cynthia Buckett — Project Manager

QUICK STATS:

Number of available long-term care beds : 1,598

Percentage of care beds attached to an LTCI physician : 92%

MDs4Wellness

QUICK STATS:

Unique members
participated in
Wellness events : 71

Total number of
physician attendees
at Wellness events : 178

Aims

- Increase and promote physician wellness opportunities on the North Shore.
- Work in collaboration with the Facility Engagement Group at Lions Gate Hospital.

Accomplishments

- Hosted seven wellness events covering topics such as mindfulness, financial literacy, physical literacy, spiritual practice, and social wellbeing.
- MDs4Wellness, in collaboration with the Lions Gate Hospital Facility Engagement Group, brought together 178 family physicians and specialists over the course of the year.

Physician Lead:

Dr. Julia Hlynsky

Dr. Lisa Gaede (2020)

Staff Lead:

Steve Orti — Membership Coordinator

Member Education: Dine & Learn

QUICK STATS:

Unique members
participated in
Dine & Learn events : 115

Total member
attendees at
Dine & Learn events : 233

Aims

- Provide family physicians with opportunities to learn and engage in dialogue about their role within the health care system and the system's impact to their practices.
- Allow for broader physician engagement with a view towards improving efficiencies, quality of care, and the physician and patient experience.

Accomplishments

- Hosted bi-monthly member education events covering topics such as COVID-19, psychiatric services, and palliative care (see the complete list of education events on Page 10).
- 115 unique members attended events, an increase of 22 from the previous year.

Physician Lead:

Dr. Lisa Gaede

Staff Lead:

Steve Orti — Membership Coordinator

Mental Health Support Team: Primary Care Networks

Aim

- As part of the PCN initiative, 13 mental health clinicians will be recruited over the next four years to provide short-term mental health support.

QUICK STATS:

Number of mental
health clinicians to
be hired over the
next four years : 13

Accomplishments

- Job descriptions and workflow process for new mental health support team completed.
- Conducted pilot project with Urgent and Primary Care Centre (UPCC) social workers and family physicians, creating the foundation for the mental health support team that will be hired in 2021/22.
- Task group formed with VCH's mental health programs to ensure smooth transition between short and long-term care.

Physician Lead:

Dr. Dean Brown

Staff Lead:

Kate O'Donnell — PCN/PMH Manager

QUICK STATS:

Number of
organizations
participating in
the North Shore
Community Committee
on Substance Use : 16

North Shore Community Committee on Substance Use

Aims

- To be the primary reference group for all substance use initiatives on the North Shore.
- To engage people with lived experience and their families in the initiatives to ensure their perspective and needs are represented. Ensure diverse and heightened voices are included.
- To promote and catalyze the health and safety of people who use substances.

Accomplishments

- Brought together a wide range of North Shore stake holders, including Vancouver Coastal Health, First Nations communities, police, municipalities, and community agencies.
- Identified multiple gaps in care, including access to safe consumption sites, access to drug testing, access to detox services and treatment centres, establishing substance use strategies for Indigenous Health, providing peer support training and employment opportunities, providing after hours care and support, providing access to LGH addiction consultation services, and offering support around high-risk transition times, such as when someone is incarcerated.
- Provided resource cards to be handed out by outreach workers, such as RCMP.

- Established the Peer Assisted Crisis Team, a pilot project of the Canadian Mental Health Association, and the first civilian lead crisis support team in BC designed to respond to mental health calls on the North Shore.
- The City of West Vancouver, City of North Vancouver, and District of North Vancouver successfully applied for a \$2 million Strengthening Communities Grant to help the unsheltered and homeless, including indigenous populations.
- The North Shore Overdose Outreach Team dropping off harm reduction supplies to police; police now carry these supplies in their cars and offer them to detainees leaving short-term custody.
- Lookout Shelter is now offering an overdose prevention site for its guests.
- The After Hours Working Group is working to support the North Vancouver Fire Department in developing an outreach program for individuals they attend for overdose. It is also working with police to provide Suboxone access to detainees going into opiate withdrawal in cells.

Physician Lead:

Dr. Michelle Brousson

Staff Lead:

Cynthia Buckett — Project Manager

Pathways

QUICK STATS:

Members with access
to Pathways : **137**

New MOAs added
in 2020/21: **65**

Aims

- To provide accurate referral resources to facilitate efficient specialist and clinic referral decisions.
- To provide up-to-date, evidence-based physician and patient resources.
- To act as a communication tool among Division members.
- To maintain an on-line platform for relevant Division clinical work.

Accomplishments

- Held several informational sessions to promote the use of Pathways and added 137 new physicians.
- Maintained family physician and specialist profiles and resources including providing physicians with up-to-date information on COVID-19.
- Launched the Pathways medical care directory and working towards a Pathways community services directory.

Physician Lead:

Dr. Lisa Gaede

Staff Leads:

Pathways Administrators:

Barb Fiddler

Mark Keri

Pathways Referral Tracker (PRT) Project

Aims

- To enhance communication between referring physicians, specialists, and patients.
- To enhance patient care and increasing access to care.
- To enhance relationships between family physicians and specialists.
- Increase satisfaction of those who do referrals (family physicians, specialists, and medical office assistants).

Accomplishments

- Pathways Referral Tracker Project Coordinator hired Fall 2020.
- Project piloted from Oct 2020 – May 2021.
- As of October 25, 2021, 75% of family physicians and 26% of specialists on the North Shore are using Pathways referral tracker.

Physician Lead:

Dr. Lisa Gaede

Staff Lead:

Marilu Encinas — Practice Improvement
Technology Coordinator

QUICK STATS:

Number of
family physicians
on Pathways
Referral Tracker : **75%**

Number of
family specialists
on Pathways
Referral Tracker: : **26%**

Physician Recruitment

QUICK STATS:

Total Division members : 267

New members in 2020/21: : 31

Aim

- To help ensure the quantity of family physicians practicing on the North Shore matches the needs of the population.

Accomplishments

- Assisted in the recruitment of 20 new family physicians.
- Created community placements for Ministry of Health (MOH) Coastal International Medical Graduate (IMG) Return of Service (ROS) candidates; secured two ROS physicians.
- Started planning for 2021 Practice Ready Assessment — BC ROS placements and 2022 Coastal IMG placements.
- Welcome package for new physicians completed.

Physician Liaison:

Dr. Ruth Campling

Staff Lead:

Sze-Zin Lo — Recruitment Coordinator

Practice Management: Patient Medical Homes

QUICK STATS:

Physician members
who received direct
practice support : 79%

Clinics that received
Privacy and Security
binder created by
NS Division : 55

Physician members
who can send mass
emails to their
patient panel : 81

Aim

- To support Division members with quality improvement and practice efficiency opportunities in collaboration with VCH's Practice Support Program (PSP) and the Doctor's Technology Office (DTO).

Accomplishments

- The eConsent app successfully launched with 131 FPs linked.
- Virtual care information covered by 10+ webinars.
- Panel management numbers are steadily growing.
- MOA Network has 190+ members and hosted at least 20 events or webinars.
- 167 FP members with a patient panel received direct Practice Management Care (PMC) support onsite.
- 55 clinics have received a Privacy and Security binder created by the NS Division which includes policy templates, roll descriptions, and resources.
- 81 FPs can now send mass emails to their patient panel enabling them to communicate with their patients more easily.
- Peer Mentor engagement doubled this year.
- Created two new staff roles: Practice Improvement Technology Coordinator and Practice Advisor to support patient medical homes.

Physician Lead:

Dr. Joanne Larsen

Staff Lead:

Candace Travis — Practice Change Manager

Primary Care Networks (PCN)

QUICK STATS:

Total full-time
clinical staff hired
for Year One: **: 7.5**

Aims

- To improve population health through access to continuous, coordinated, and comprehensive primary care by developing integrated, team based Patient Medical Home/Primary Care Networks (PMH/PCN), in collaboration with key partners Vancouver Coastal Health, and the Squamish and Tsleil-Waututh First Nations.
- Primary Care Networks will facilitate team-based care and will support everyone who works within the system — from physicians and nurse practitioners to nurses and allied health providers — to provide high quality, culturally safe, accessible care with longitudinal attachment.

Accomplishments

- Engaging physicians to participate in PCNs by hosting information events, meeting with family physicians, and the FP Focus Group.
- Working groups and focus groups were formed to support the implementation of the Primary Care Networks:
 - Two registered nurses were hired and are working in family physicians' practices. Implementation strategies and changes in workflow have been the focus of the RN Planning Group.
 - Patient Advisory Committee was consulted to ensure input from community.
 - Reporting framework and indicators were created to support assessment and improvement.
- Detailed implementation plans for change management, member engagement, and communication strategy developed.
- 43 physicians participated in information sessions to learn more about mental health clinicians and RNs in practice.

Physician Leads:

Dr. Dean Brown

Dr. Ruth Campling (Co-lead)

Staff Leads:

Afsaneh Moradi — Director, PCN/PMH

Kate O'Donnell — PCN/PMH Manager

Suboxone and Methadone Mentorship Project

Aims

- Create a network of physicians to care for stable patients with Opioid Use Disorder in their family practice.
- Increase the opportunity for peer education and networking around addictions treatment.
- Increase suboxone and methadone prescribing capacity.
- Increase awareness of addictions medicine and trauma-informed care among FPs.
- Increase patient attachment and retention.
- Reduce stigma around opioids in the primary care community.

Accomplishments

- Held small group learning sessions for physicians to cover the following topics: opioid use disorder and trauma informed care, urine drug screening, treatment agreements, college guidelines, billing and MOA workflow.
- All participating physicians also completed the BC Centre on Substance Use Provincial Opioid Addiction Treatment Support program course and two half days with an Opioid Agonist Treatment prescriber in office, so they can prescribe both methadone and suboxone.
- Physicians were offered support by select local FPs through phone or text in prescribing, and there was also the RACE line and the 24-hour help line to assist; also provided MOAs with educational sessions.
- The North Shore Community Committee on Substance Use was created to expand on the Suboxone and Methadone Mentorship Project.

Physician Co-leads:

Dr. Hayley Broker
Dr. Naved Ali

Staff Lead:

Cynthia Buckett — Project Manager

Collaborative Services Committees and Vancouver Regional Divisions' Leadership Group

Representatives from the North Shore Division of Family Practice, VCH, Doctors of BC, the General Practice Services Committee (GPSC), and the Ministry of Health comprise the North Shore Collaborative Services Committee (CSC), the main forum for addressing system issues and influencing primary care. In addition, Division leaders in the Vancouver Coastal Health area

meet regularly with one another at the Vancouver Regional Divisions' Leadership Group (VRDLG) and quarterly with VCH senior leaders to address regional health issues at the Interdivisional Collaborative Services Committee (ICSC). The PCNs are governed by a NS PCN Steering Committee with representation from the Division, VCH, Squamish Nation, and Tsleil-Waututh Nation.

Accountability and Evaluation

The Board's initiatives aim to achieve the Division's strategic objectives on behalf of the membership. In doing so, the Board promotes a climate of accountability, learning, and continuous quality improvement. All initiatives approved by the Board are led by a project-specific committee and are expected to be

evaluated using the Triple Aim framework (improve the health of the population, improve both the providers' and patients' experience of care, and lower the per capita cost of care). Evaluation results and interim performance reports are provided to the Board and funders such as GPSC, Shared Care Committee, and Ministry of Health.

Board of Directors



Dr. Ruth Campling — Director

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We would like to thank our specialist colleagues, community partners, and the following Division members for their contribution to our various committees and working groups:

Dr. Naved Ali — North Shore Community Committee on Substance Use, Suboxone and Methadone Mentorship Project Committee

Dr. Mehrtash Amini — PMH/PCN Clinical Quality Focus Group

Dr. Juanita Anderson — Dine & Learn Committee, PMH/PCN Quality Improvement Committee

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Dr. Nicole Barre — Long-Term Care Quality Improvement Committee, PMH/PCN Quality Improvement Committee

Dr. Sofia Bayfield — Long-Term Care Quality Improvement Committee

Dr. Gordon Bird — Long-Term Care Quality Improvement Committee

Dr. Matt Blackwood — COVID-19 Task Force

Dr. Hayley Broker — Child and Youth Mental Health and Substance Use, Mental Health and Substance Use, COVID-19 Task Force, Suboxone and Methadone Mentorship Project Committee, North Shore Community Committee on Substance Use.

Dr. Michelle Brousson — After Hours Working Group, COVID-19 Task Force, Family Physician/Specialist Relations Committee, North Shore Community Committee on Substance Use, Opioid Protection Services Committee, COVID-19 Task Force, Suboxone and Methadone Mentorship Project, PCN Clinical Quality Focus Group

Dr. Dean Brown — ADHD Steering Committee, COVID-19 Task Force, Communications Committee, Community COVID-19 Committee, Dine & Learn Committee, North Shore Community Committee on Substance Use, PMH/PCN Initiative Committee, Strategic Leadership Team (SLT)

Dr. Ruth Campling — Family Physician/Specialist Relations Committee, PMH/PCN Initiative Committee, Strategic Leadership Team (SLT)

Dr. Ray Chaboyer — COVID-19 Task Force, Community COVID-19 Committee, Family Physician/Specialist Relations Committee, Finance Committee, Strategic Leadership Team (SLT)

Dr. Maureen Conly — MDs4Wellness Committee

Dr. Louise Corcoran — Long-Term Care Quality Improvement Committee

Dr. Lisa Gaede — Family Physician/Specialist Relations Committee, MDs4Wellness Committee, Dine & Learn Committee, Pathways, Pathways Referral Tracker Initiative

Dr. Erin Hasinoff — MDs4Wellness Committee

Dr. Barbara Hejdankova — Long-Term Care Quality Improvement Committee

Dr. Jonathan Hislop — Practice Management Committee

Dr. Julia Hlyinsky — MDs4Wellness Committee, PMH/PCN Quality Improvement Committee

Dr. Wilhelm Hofmeyr — PMH/PCN Clinical Quality Focus Group

Dr. Dedeshya Holowenko — COVID-19 Task Force

Dr. Blanka Jurenka — Communications Committee, PMH/PCN Family Physician Focus Group

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Dr. Joanne Larsen — PMH/PCN Quality Improvement Committee, Practice Management Committee

Dr. Genevieve Lauzon — ADHD Steering Committee, COVID-19 Task Force, Dine & Learn Committee, PCN MHSU Working Group

Dr. Lucy McShane — PMH/PCN Clinical Quality Focus Group

Dr. Aileen Moric — Pathways Committee, Pathways Referral Tracker Initiative

Dr. Kathy Rahnavardi — COVID-19 Task Force, Long-Term Care Quality Improvement Committee, Long-Term Care Initiative Steering Committee

Dr. Kyra Roeck — Pathways Referral Tracker Initiative

Dr. Mitch Rubin — COVID-19 Task Force, Communications Committee, MDs4Wellness Committee

Dr. Krystine Sambor — COVID-19 Task Force, Strategic Leadership Team, Community COVID-19 Committee, Strategic Leadership Team (SLT)

Dr. Richard Sebba — Long-Term Care Quality Improvement Committee, Long-Term Care Initiative Steering Committee

Dr. Eric Sigmund — PCN MHSU Working Group

Dr. Mischa Snopkowski — PMH/PCN Clinical Quality Focus Group

Dr. Hamidreza Tabassi — PMH/PCN Clinical Quality Focus Group

Dr. Ann Marie Thomsen — PMH/PCN Quality Improvement Committee, Practice Management Committee

Dr. Nigel Walton — COVID-19 Task Force, Communications Committee, Community COVID-19 Committee, PMH/PCN Clinical Quality Focus Group

Dr. Nicola Walton-Knight — COVID-19 Task Force, Community COVID-19 Committee

Dr. Veerle Willaeyts — MDs4Wellness Committee

Thank you

Statement of Financial Position

MARCH 31

ASSETS

CURRENT ASSETS	2021	2020
Cash	\$ 482,488	\$ 476,908
Cash provided by funding	1,624,620	569,975
Amounts receivable	128,513	72,357
GST receivable	9,052	7,450
Prepaid expenses	32,004	21,687
	\$ 2,276,677	\$ 1,148,377

LIABILITIES

CURRENT LIABILITIES		
Accounts payable and accrued liabilities	\$ 264,778	\$ 251,631
Wages payable	77,344	39,250
Deferred revenue	1,678,908	639,942
	\$ 2,021,030	\$ 930,823

NET ASSETS

Unrestricted	\$ 255,647	\$ 217,554
	\$ 2,276,677	\$ 1,148,377

Statement Of Operations

YEAR ENDED MARCH 31

REVENUES	2021	2020
Government funding	\$ 2,347,834	\$ 1,957,693
Ministry of Health	60,567	0
Interest	14,235	27,699
Canada Emergency Wage Subsidy	9,984	2,391
GST rebate	9,052	11,802
	\$ 2,441,672	\$ 1,999,585
EXPENDITURES		
Administration (schedule)	\$ 241,669	\$ 164,751
Administration personnel	431,400	387,328
Clinical programs (schedule)	502,224	450,352
Evaluation activities	63,618	70,358
Events	86,878	163,011
Marketing and communication	19,162	38,846
Meetings	6,116	18,410
Physicians	429,037	331,091
Program personnel	623,475	334,332
	\$ 2,403,579	\$ 1,958,479
Excess of revenues over expenditures for year	38,093	41,106
Net assets, beginning of year	217,554	176,448
Net assets, end of year	\$ 255,647	\$ 217,554

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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.

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