

2011

Annual Report



South Island

Division of Family Practice

A GPSC initiative

Message from the Board Co-Chairs



Dr. Elizabeth Rhoades
Co-Chair

Welcome to the South Island Division of Family Practice's second Annual Report. The South Island Division was formed in September 2010 and has been operating as a Division for just over two years.

At its core, Divisions of Family Practice is an initiative to strengthen the voice of family physicians and improve patient care at the community level. It is founded on commitments to working collaboratively to solve problems of local importance, building capacity at the local and regional level, and building relationships and trust with patients, communities and other partners in provincial health care.

Your Division was formed to help improve satisfaction in the work we do as family practice doctors and to enhance the ways that care and access to care is provided to patients.

We are pleased to let you know that just under 90% of all family practice physicians who work within our catchment area (Saanich Peninsula and West Shore Communities) have voluntarily joined the Division. This gives us added strength in our voice and ideas for change in our health care programs, policies and practices. We continue to strive for 100% membership.

We have had a busy year, both in terms of working on specific programs and projects and organizing events and opportunities to bring physicians together. As a Board we have also been working hard on the 'business' of the Division to make sure we are meeting our fiduciary responsibilities. To that end, your Board developed a comprehensive Policy and Governance Manual that guides the legal and governance responsibilities of the organization. As well, we have developed a strategic plan that identifies key priorities moving forward.

The Board considers both the Governance and Policy Manual and the strategic plan as 'living documents' that will evolve and be revised in accordance with issues, actions and priorities as set by our members.

We have also developed a Vision and Mission Statement for the Division and a set of Core Values that will provide important guidance now and into the future.

Over the past 12 months we have had almost 400 physician encounters at Division sponsored events and through committees, planning and working groups and focus groups. We recognize that of these 'encounters', many have been members attending more than one event, but it is encouraging to see members getting involved in their Division. We hope to see more of you at future events.

We extend a special thanks to our colleagues on the Board of Directors, Division members actively participating in important project work, and to our staff and project leads for their dedication and support.

Our progress is thanks to a collective effort. We welcome all current Division members to get engaged in the interesting work being done, and invite those who have not yet joined the Division to consider doing so in the coming year.



Dr. Jeff Pocock
Co-Chair

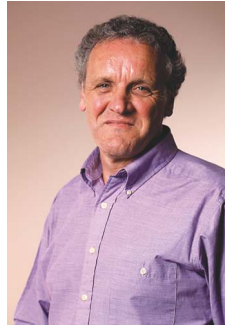
Executive Director's Report

"Life is what happens to you while you're busy making other plans." John Lennon

John Lennon may have had a point, but 'making other plans' is also an important aspect of life itself. To that end, your Division has been engaged in a number of planning activities, projects and programs involving a wide range of stakeholders.

Here is a quick overview of just a few highlights from the past year.

- Working with a group of physicians in the development of a new larger practice clinic led to the development of a Physician Practice Resource Manual. This resource is now available to any physician in BC who is a member of a Division of Family Practice. This important resource helps:
 - improve overall clinic operations;
 - promote compliance with employment, privacy and other laws; and
 - provide consolidated documentation for audits.



Andrew Hume
Executive Director

You can find this resource on the Division website.

- Recognizing the importance and value of MOA's, the Division hosted its first MOA appreciation event with a hope of developing an MOA network of colleagues who can provide a community of practice around things like electronic medical records and office automation.
- For the first time through our Partners in Care initiative, the Division facilitated an event that brought together 70 family practice physicians and specialists to begin to build important relationships that will lead to system and patient improvements.
- A collaborative involving family practice physicians and orthopaedic specialists has led to the development and testing of a streamlined patient referral and triage process.
- Working with the Vancouver Island Health Authority (VIHA) we are promoting an internal medicine telephone advice line that provides access to a number of internal medicine specialists through a single phone number with a maximum two-hour call back from a specialist.
- The Division has also joined the Physicians Data Collaborative (PDC). The mission of the PDC is to develop infrastructure and processes that enable effective use of data to support family physicians to optimize patient care with a focus on improving population health and enhancing the patient and provider experience. The PDC will also contribute to sustainability of health services while protecting data integrity and physician and patient privacy.
- The Division continues to work with VIHA and the General Practice Service Committee to secure resources to support the ongoing planning related to the collaborative maternity clinic project. The timelines for the clinic opening have been extended to summer 2014.

I remain impressed and encouraged by the commitment and optimism shown by Division members who have engaged in a wide range of activities and events to support positive change. I look forward to meeting many more of you over the coming year as we begin to develop new priorities identified by Division members.

Year in Review

October 2011

- First Annual General Meeting

November 2011

- Established the Doctor-of-the-Day Task Group to develop a new compensation agreement for physicians working in the DOD program at Saanich Peninsula Hospital.
- Presentation to the VIHA Board of Directors on the South Island Division.

December 2011

- Received funding for the South Island Partners in Care program and established a program steering committee.
- Established a working group on a primary health care centre on Saanich Peninsula.

January 2012

- Hosted two physician education events on voice recognition technology and the Community Health and Resources Directory (CHARD).

February 2012

- Facilitated several planning groups including: a maternity clinic at VGH; primary health care centre concepts; and shared care.
- Participated in the first VI inter-divisional Collaborative Services Committee.

March 2012

- Hosted a workshop with maternity physicians to consider service design models for a multi-disciplinary maternity clinic; hosted a workshop to develop a framework for a physician/locum recruitment and retention strategy.
- Met with Saltspring Island physicians to discuss Division initiatives and membership.

April 2012

- Met with South Island Medical Advisory Committee to share information and identify collaborative opportunities.
- Engaged in a planning process to implement a document-scanning project.

May 2012

- Supported maternity physicians participating in a 1½-day VIHA planning workshop.
- Participated in a Provincial Divisions 2-day roundtable.
- Hosted a family and specialist physician Partners in Care event.

June 2012

- Hosted a physician social and engagement event with speaker Dr. Dave Williams.
- Hosted a mental health-planning workshop with family physicians and mental health practitioners.

July 2012

- Completed a Board Governance and Policy Manual and Strategic Plan.
- Completed a Physician Practice Resource Manual.

August 2012

- Facilitated Partners in Care working groups for orthopaedics and gastroenterology.

October 2012

- Hosted the first MOA appreciation event in partnership with PITO.
- Hosted primary health care centre roundtable.

Physician Engagement Events 2011/12

Division members participated in the work of the Division in a number of ways from committees to working groups, focus groups and through various physician engagement events.

Over the past year the Division supported members on a number of working groups including shared care (orthopaedics and GI), maternity clinic, primary health care centre and doctor-of-the-day, data collaborative and EMR. Members also participated on two major steering committees (Partners in Care and Collaborative Maternity Clinic) as well as the Board of Directors and Board committees. Members also participated in learning sessions.

Members are provided sessional compensation for working groups, committees and participating in inter-active physician engagement sessions.



Discussion table at Partners in Care mental health and addictions workshop.

Activity Highlights

Introduction

While the financial statement contained in this report relates to the South Island Divisions' fiscal year ending March 31, 2012, the year in review and the following activity highlights are as up-to-date as possible to help provide members the most current understanding of Division activities.

Partners in Care (PiC)

Additional funding was received in August 2012 to enable the continued growth of the Partners in Care (PiC) program. The PiC Steering Committee comprises family physicians from the South Island and Victoria Divisions, specialist physicians and program and Division support staff.

A major PiC engagement event hosted in May brought together 70 family practice and specialist physicians as part of PiC's commitment to renewing relationships between Family and Specialist physicians. A second workshop in June brought together family physicians with mental health and addictions clinical teams.

Planning for PiC phase 2 is underway with a focus on:

- Building on the work started by both the Orthopaedic and GI Working Groups
- Expanding specialty partnerships
- Improving communications to increase awareness and hopefully encourage broader member engagement
- Establishing a MOA network
- Holding a patient focus group

An orthopaedics working group is developing a standard, centralized referral form to help improve patient triage and access and reduce wait-times.

A family physician/orthopaedics planning team designed an educational workshop with the first pilot workshop held in October 2012. The "Occupy Orthopaedics" event was designed as an evening of interaction with orthopaedic surgeons sharing pearls with family physicians and ideas on navigating patients 'and their knees' through the system.

A GI working group is also working on a common referral system and improved communications between GI and family physicians.

Other specialty areas such as cardiology, neurology and mental health and addictions have expressed interest in participating in the Partners in Care program.

PiC is assisting with promoting an internal medicine telephone advice line provided through VIHA that provides access to a number of internal medicine specialists through one phone number with a maximum two-hour call back.



Activity Highlights

Maternity Clinic

A Collaborative Maternity Care Clinic Project Steering Committee was established in the summer of 2012 comprising a family physician, senior VIHA executives, program managers, a midwife, the UVic Island Medical Program, and the SIDFP executive director.

The Division provided significant support to the project for the past 18 months. With the timelines for the clinic opening extended to the summer of 2014, the SIDFP Board identified ongoing cost issues related to maintaining full participation in all of the VIHA planning processes. The SIDFP proposed a more streamlined physician engagement approach and identified areas of cost pressures on the Division to maintain a full collaborative partnership.

The Division continues to work with VIHA and other partners to identify and address planning support and related cost issues to ensure meaningful physician engagement throughout the process.

Initial efforts have been focused on the development of the vision for the clinic and its implementation with the goal to move towards the refinement of the service delivery model.

Meeting provider and patient space requirements at the originally proposed location of VGH continues to be a challenge and alternative solutions are being considered. The SIDFP continues to work with VIHA to ensure sufficient analysis of maternity data essential to informing the best solution for maternity service delivery and to ensure a sustainable resolution of the challenges that were brought forward by the physicians in Spring 2010.

SIDFP will continue to participate on the Steering Committee and to provide support to maternity physicians for key activities related to reviewing service models, compensation and governance issues and the use of electronic medical records.



Activity Highlights

Physician Resource Manual

Last year, the South Island Division helped two primary care clinics merge their practices to create a new integrated group practice. From the merger, a Family Physician Practice Resource Manual was developed. The initiative also resulted in the development of a set of other business practice tools and resources, which are now available to physicians who are members of a Division of Family Practice in BC to use in their practices or other projects.



The manual is a fully customizable tool to help physicians manage a medical practice from a single physician to a large group clinic. The manual includes generic workflows and policies.

The resource manual will:

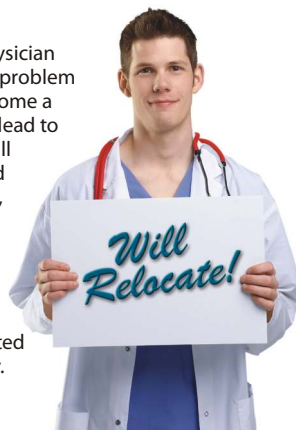
- improve overall clinic operations
- promote compliance with employment, privacy and other laws
- provide consolidated documentation for audits
- help with staff training

The manual and related resource materials are available for download free-of-charge for Division members through the Divisions' website. The next step is to host a practical workshop on how to adopt the resources in a family practice setting.

Physician Recruitment and Retention

The recruitment and retention of physicians continues to be an area of major importance for most Divisions across the province. A workshop hosted by SIDFP in March included the development of a background report on key issues and challenges. Planning is underway at a provincial level with a view toward developing a provincial strategy that recognizes regional needs and interests.

One of the ongoing concerns around physician recruitment is that because it is a shared problem across the province, recruitment can become a competition between Divisions that can lead to other issues. The South Island Division will continue to talk to Division members and medical resident physicians about needs, issues and ideas while looking for ways to work with and support a provincial strategy. It is recognized that a whole community approach is needed and that communities have unique needs and attributes that need to be incorporated into a recruitment and retention strategy.



Activity Highlights

Cross-Divisional Relations

As neighbouring Divisions with a number of shared areas of interest, the South Island and Victoria Divisions continue to work on improving communications and finding ways to work together to better serve the interest of all family physicians working in South Island communities that encompass both Divisions.

Both the South Island and Victoria Divisions also participate as part of an island-wide, inter-Divisional Collaborative Services Committee that is intended to improve knowledge sharing, planning and communications.

All Divisions also participate in a Provincial Roundtable that brings together all 30 Divisions from across the province twice a year.

Physicians Data Collaborative

In March 2012, the South Island Division joined with Divisions from across the province to support the Physician Data Collaborative (PDC). The mission of the PDC is to develop infrastructure and processes that enable effective use of data to support family physicians to optimize patient care with a focus on improvement of population health, enhancement of the patient and provider experience and contributing to sustainability of health services while protecting data integrity and physician and patient privacy.

The PDC believes that physician owned and managed data infrastructure is the optimal vehicle to support physician-led quality improvement activities. The PDC recently launched a website (www.divisionsbc.ca/datacollaborative) to keep physicians informed of progress.

Family Practice Hospital Support Program (Doctor-of-the-Day)

The Division has continued to provide support to a group of family physicians providing services through the Saanich Peninsula Hospital as part of a Family Practice Hospital Support (Doctor-of-the-Day) Program. This initiative is designed to ensure hospital patients who do not have their own family doctor, who live outside the catchment area, or who's family doctor does not have hospital privileges at SPH, are seen by a family physician while in the hospital.

In late 2011 early 2012, the South Island Collaborative Services Committee struck a task group to review compensation issues for the DOD participating physicians to help maintain enough physicians to keep the program viable.

The task group was able to develop an improved fixed day-rate compensation model that the DOD physician group accepted. The one-year agreement expires March 31, 2013. In the meantime the Ministry of Health struck a provincial task group to review all similar in-hospital support programs and to develop a provincial strategy. It is expected that a new provincial program will be put in place next spring.



Activity Highlights

Electronic Medical Records and Office Automation

Working with the Physician Information Technology Office (PITO), the South Island IT Committee developed a 'community-of-practice' approach as a way to reach out and engage both family physicians and MOAs in learning about and understanding office automation.

Recent data collected by PITO is encouraging, showing 61% of all physicians (both family practice and specialist physicians) practicing on the Saanich Peninsula and Sooke, are using an EMR. This includes all EMRS, both PITO funded and non-PITO funded.

MOA Network: As part of the move to encourage the adoption of office automation, the South Island Divisions' IT Committee (which includes PITO representation) organized an MOA Appreciation Night to recognize the role and value of MOA's in the effective, efficient functioning of physicians offices. This MOA network will also provide peer support across similar EMR user groups as well as act as a support for those practices that have not yet adopted EMR as part of office automation.

Kick-off Event: In January 2013, the Division in partnership with PITO will be hosting a major 'kick-off' event to encourage the establishment of EMR communities-of-practice and specific EMR user groups.



Group Purchase Agreement

Earlier this year the Division negotiated a preferred pricing agreement with Monk Office for all Division members providing cost reductions on office supplies. Division members can contact Monk Office for more information on this preferred pricing program.

Dr. Andre du Toit and MOA Jay Boulet play lead roles in the SIDFP Community of Practice/PITO initiative.

Primary Health Care Centre

Over the past year, the Division has had a working group looking into the feasibility of developing a Primary Health Care Centre (PHCC) on the Saanich Peninsula.

The PHCC working group continues to work on developing an overarching vision for the centre and has developed the following key attributes for a PHCC:

- High quality care
- Patient/person-centered
- Effective and efficient
- Multi-professional

Secretary's Report

In May, the Division's Partners in Care program hosted a hugely successful 'Renewing the Relationship' engagement event that brought together 70 family practice and specialist physicians. Dr. Kishore Visvanathan, a urologist from Saskatchewan, provided an insightful look at how improved relationships between family practice and specialist doctors can result in both better patient care and physician satisfaction. Many who attended were anxiously awaiting the next Partners in Care event.

Our major membership engagement event of the year was held in June with Canada's physician astronaut Dr. Dave Williams as an exceptional keynote speaker. The social event was also coordinated with a Partners in Care sponsored mental health planning workshop that took place earlier in the day and provided a great opportunity for family physicians to meet face-to-face with a range of different mental health practitioners. This learning approach proved a useful format with opportunities to share experiences, knowledge, frustrations and new ideas. The workshop provided a great launch to what will hopefully be a renewed relationship with family physicians and mental health and addictions practitioners.

The Division Board held regular monthly business meetings over the past year. In addition, Board and other Division members have been actively involved in committee work and special physician engagement events in addition to receiving and reviewing reports on various projects.

The Board comprises six positions and one ex-officio position including two co-chairs, treasurer, secretary, two members-at-large, and a (ex-officio) medical resident. The resident also serves as a liaison with the medical residency program.

Board members comprise three of the seven seats on the South Island Collaborative Services Committee (CSC). The CSC includes participation from the South Island Division (three members), VIHA (three members) and the General Practice Services Committee (one member). Beginning later this year, two community representatives will be added to the CSC table. The CSC meets monthly. All Vancouver Island Division CSC co-chairs also meet twice a year with a VIHA executive team.

Minutes from each Board and CSC meeting can be made available to any Division member on request.

As part of their ongoing commitment throughout the year, Board and committee members also participated in provincial workshops and training sessions. As noted in the Treasurer's Report, Division members are remunerated for their work and participation involving Division sponsored initiatives and events in accordance with BCMA Master Agreement compensation guidelines.

A major undertaking by the Board over the past year has been the development of comprehensive Board Governance and Policy Manual and a long-range Strategic Plan. The Board also developed Vision and Mission Statements as well as a core set of Values that will act as guiding principles for the organization. We are also working on getting the Division accredited to provide CME credits at Division sponsored events.

I am very pleased that almost 90% of family physicians working in our catchment area have joined the Division. This strengthens our collective voice in making meaningful change that will benefit patients, the community, physicians and the health care system.



Michele Fretz
Secretary

Treasurer's Report



Dr. Andrea Lewis
Treasurer

I am pleased to present the year-end financial report to March 31, 2012 for the South Island Division of Family Practice.

The Chartered Accounting firm of Wolridge Mahon conducted a full financial audit for the Division. The auditor's report found no areas of concern with the financial management of the Divisions assets. You will find the financial statement on the following pages. A full copy of the audited financial statements of the Division is available to Division members on request.

In accordance with provincial funding guidelines, in fiscal 2011-12 the Division was funded on a projected potential membership of 150. The Division also received supplementary funding for the administration of the Family Practice Hospital Support Program (FPHSP) funded through the Ministry of Health and the Partners in Care program funded through the Provincial Shared Care Committee.

The Division took over financial administrative management of the FPHSP through a direct funding contract with the Ministry of Health. Physicians who participate in the FPHSP at Saanich Peninsula Hospital are paid through the Division on a quarterly basis based on the actual number of shifts served.

In accordance with the funding agreement with the General Practice Service Committee, the Division submitted proposals to use 2011-12 carry-over funds for four priority projects into the next year. Project proposals approved include:

· Physician Practice Resource Toolkit	\$20,000
· New Member Recruitment	\$ 7,000
· Physician Survey/Recruitment & Retention	\$30,000
· Maternity Clinic (Research/Analysis/Project Support)	\$20,000

The Division engages a full-time Executive Director as well as part-time administrative support staff and project consultants on an as-required project-by-project basis.

Note to Reader: For the fiscal year beginning April 1, 2012, the Division's core infrastructure funding was based on the Division's actual membership as of June 2012 of 128. This resulted in the Division starting the 2012 fiscal year with \$66,000 less in core infrastructure funding from the previous fiscal year.

Financial Statement

The Statement of Operations and Changes in Net Assets is based on an audited statement for the year ended March 31, 2012.

STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS

For the year ended March 31, 2012

(With comparatives for the 8 month period ended March 31, 2011)

	2012 (12 months)\$	Unaudited 2011 (8 months)\$
Revenue		
Infrastructure	486,082	70,613
Partners in care	59,438	-
Hospital support program	160,618	44,074
GST/HST rebate	19,751	2,728
	725,889	117,415
Expenses		
Contracted fees	206,281	36,498
Courier and postage	1,223	399
GST/HST paid	36,521	-
Insurance	975	-
Interest and bank charges	290	74
Meetings and events	22,102	9,407
Office	2,928	5,170
Physician costs	252,497	60,221
Printing	13,743	1,909
Professional development	4,000	-
Professional fees	7,085	917
Projects and programs	156,644	-
Travel	1,850	92
	706,139	114,687
Excess of revenue over expenditures	19,750	2,728
Net assets, beginning	2,728	-
Net assets, ending	22,478	2,728

Financial Statement

STATEMENT OF FINANCIAL POSITION

March 31, 2012

	2012\$	Unaudited 2011\$
Assets		
Current:		
Cash	306,438	86,907
Receivables	31,495	20,388
	337,933	107,295
Liabilities		
Current:		
Payables and accruals	54,767	32,206
Deferred revenue	260,688	81,361
	315,455	104,567
Net assets		
Unrestricted	22,478	2,728
	337,933	107,295

STATEMENT OF CASH FLOWS

For the year ended March 31, 2012

(With comparatives for the 8 month period ended March 31, 2011)

	2012\$	Unaudited 2011\$
Cash flows related to operating activities		
Excess of revenue over expenditures	19,750	2,728
Changes in non-cash working capital:		
Receivables	(11,107)	(20,388)
Payables and accruals	31,561	23,206
Deferred revenue	179,327	81,361
Net increase in cash	219,531	86,907
Cash, beginning	86,907	-
Cash, ending	306,438	86,907

Board of Directors

Dr. Elizabeth Rhoades - Co-Chair
Dr. Jeff Pocock - Co-Chair
Dr. Andrea Lewis - Treasurer
Dr. Michele Fretz - Secretary
Dr. George Wray - Member-at-Large
Dr. Robin Saunders - Member-at-Large
Dr. Carly Loomes - Ex-officio



L to R: Andrea Lewis, Elizabeth Rhoades, Jeff Pocock, Michele Fretz, Robin Saunders, George Wray.

Division Contracted Staffing Support

Andrew Hume - Executive Director
Jen Roberts - Administrative Coordinator
Jay Boulet - Administrative Assistant

South Island Division of Family Practice
PO Box 205, Saanichton BC V8M 2C3

Email: jroberts@divisionsbc.ca or jboulet3@telus.net

Web: www.divisionsbc.bc.ca



Division members are encouraged to participate in Division events, committees and working groups.





South Island

Division of Family Practice

A GPSC Initiative

The Divisions of Family Practice is an initiative of the General Practice Services Committee, a joint committee of the BC Ministry of Health and the BC Medical Association.

www.divisionsbc.ca/south-island