

Strategic Plan



Vision >>>

The Surrey-North Delta Division of Family Practice's vision is to improve quality of life for patients, physicians, and the community at large.

Mission >>>

The Division's mission is to:

- Advocate for patient and physician health in the community.
- Facilitate member engagement in evaluating and shaping the health care system.
- Identify challenges and develop innovative approaches to providing efficient, quality health care.

Values >>>

The Division's values centre on:

- 100% engagement of family practitioners: having them involved, active, valued.
- Integrating community paramedical staff into family practices.
- Having the Division be fully representative of its community.
- Integrating physician wellness into all Division activities.

Outcomes >>>

Our Division aims to achieve:

- A vibrant health care system in which the voice of the physician is heard.
- Integration of all models of care that ensure continuity of patient care as well as physician well-being.
- Effectively representing all segments of primary care and providing services of value.

Financial Report

STATEMENT OF FINANCIAL POSITION

as at March 31

	2015	2014
ASSETS		
CURRENT		
Cash	\$ 35,583	\$ 82,035
Term deposits	537,048	701,387
Receivables (Note 3)	26,916	35,122
Prepaid expenses and deposits	12,239	13,786
	611,786	832,330
PROPERTY AND EQUIPMENT, NET OF ACCUMULATED AMORTIZATION OF \$94,997 (2014 - \$46,004) (Note 5)	154,941	189,090
	\$ 766,727	\$ 1,021,420
LIABILITIES		
CURRENT		
Accounts payable and accrued liabilities (Note 4)	\$ 157,865	\$ 233,915
Deferred revenue (Note 6)	352,921	517,207
	510,786	751,122
NET ASSETS		
Internally restricted	78,650	61,639
Unrestricted	177,291	208,659
	255,941	270,298
	\$ 766,727	\$ 1,021,420

STATEMENT OF OPERATIONS

for the year ended March 31,

	2015	2014
REVENUE		
Infrastructure	\$ 732,262	\$ 643,752
Shared care	281,951	238,266
GP for Me	585,845	412,869
Recruitment	–	137,542
Interest	17,011	16,262
GST rebate	13,161	16,377
Miscellaneous	230	1,038
Community grants	–	150,000
Community of practice	–	8,082
	1,630,460	1,624,188
EXPENDITURES (Schedule 1)		
Advertising	22,927	36,419
Amortization	48,991	33,751
GST rebate deducted from expenses	13,161	16,377
Human resources	931,875	754,833
Insurance	7,888	7,796
Meeting and event costs	70,976	80,828
Office	80,837	72,861
Physician Data Collaborative Association	26,985	23,841
Physician costs (Note 7)	269,446	295,701
Professional development	999	1,213
Professional fees	24,796	23,293
Rent	132,328	93,496
Travel	13,608	9,013
	1,644,817	1,449,422
EXCESS OF REVENUE OVER EXPENDITURES	\$ (14,357)	\$ 174,766

Surrey-North Delta Board of Directors

Mark Blinkhorn, M.D. – Chair
 Jan Peace, M.D. – Vice Chair
 Rahim Manji, M.D. – Treasurer and Secretary
 Sanjay Khandelwal, M.D. – Member at Large
 David Luk, M.D. – Member at Large
 Saroj Kumar, M.D. – Member at Large
 Alan Brookstone, M.D. – Member at Large
 Baldev Dhillon, M.D. – Member at Large
 Elaine Jackson, M.D. – Member at Large

Human Resources

Louise Hara – Executive Director
 Susan Kreis – Office Manager
 Natasha Raey – Director of Operations, Communication & Evaluation
 Jennifer Scrubb – Project Manager, A GP for Me
 Edoye Porbeni – Project Manager, Shared Care Committee
 Ryan Lammertsen – Project Manager, Nurse Practitioner Projects & Pathways
 Anita Attwal – Recruitment & Retention Coordinator
 Toni Adams – Maternity leave Recruitment & Retention Coordinator
 Megan Shymanski – Administrative Assistant
 Nathan Dhaliwal – Research Assistant
 Sunnie Hwang – Administrative Assistant, Shared Care Committee
 Belle Kainth, Medical Office Manager – South Asian Health Centre
 Jas Cheema – South Asian Health Centre Support
 Michelle Kinakin – Bookkeeper
 Stephen Reichert – Shared Care Committee Evaluation
 Kristine Carrick – Communications Support

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/snd

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2014–2015 ANNUAL REPORT

This report looks at our achievements
from April 1, 2014 to March 31, 2015



259

funded members

25

residents

4

NPs (as of
March 31, 2015)

*"I think of the division as a 'virtual lounge.'
The division has revitalized our family doctor
networking. The division has provided us with
a new, fresh meeting point where we can meet
each other and new physician members, learn
from each other, and gain new tools that
equip us to better serve our community.
I like this new doctors lounge."*

— Dr. Irma Schuurman

Message from the Board Co-Chairs

2014/2015 was a year of growth, progress, and innovation for our Division. This was the year that we truly began to see the impact of our efforts. Our work within the provincial "A GP for Me" initiative was in full swing with 17 projects on the go.

Our board welcomed a new governance structure with two Co-chairs replacing our past Chair, Dr. Mark Blinkhorn. Mark was our Board Chair through the inception of the Division and led our organization through a period of growth and member engagement. We are grateful for his vision, leadership, and contributions.

We put more work into our role as a conduit of education, opportunity, and fun for our members by holding a number of continuing medical education (CME) events and our annual Christmas Party, which was attended by almost 100 members and their spouses. Our many working groups and Division projects provided additional opportunities for member engagement.

With the provincial "A GP For Me" initiative coming to an end in March 2016, our board and staff look forward to seeing what more our Division can achieve. Our organization has matured. We are more defined in who

we are, and we believe that we have moved the dial in terms of our position as a leader in primary care. We continue to look to our members to provide us with the information and feedback that we need to continue to strive for true system change. We are working towards a vision of maximum satisfaction for both the patient and provider in our health care system.

We look forward to continuing our dialogue and working with all of you.

Dr. Jan Peace
Board Co-Chair

Dr. Dave Luk
Board Co-Chair



Surrey-North Delta
Division of Family Practice
A GPSC initiative

Division initiatives and projects

A GP For Me

A GP for Me is a province-wide initiative of Doctors of BC and the Government of BC aiming to strengthen the relationship between patients and family physicians, including enabling patients who would like a family doctor to find one. As part of the Surrey-North Delta Division's mission of advocating for patient health and facilitating physician engagement in the community, our A GP for Me work focuses on addressing significant challenges impacting primary care and the overall health care system.

In the fall of 2013, community assessment data estimated that one in 11 Surrey-North Delta residents (approximately 54,000) were unattached to a regular family physician, with approximately 15,000 actively looking for one.

What we achieved:

Through 2014–2015, our A GP for Me work included an operational plan and evaluation framework to help guide the program and measure results. This involved engaging 29 community partners and organizations in the initiative. Working with

Fraser Health, the Surrey-North Delta Division team piloted a process to attach more than 200 complex/high-need patients from the Jim Pattison Primary Care Clinic to family physicians in the community.

In addition, our A GP for Me team is collaborating with the Practice Support Program (PSP), through a dedicated PSP leader, to support physicians through efficient and effective practice management tools and strategies.

Collaborating with local, regional, and provincial partners



and stakeholders was key to achieving our 2014–2015 targets. Working with the Practice Support Program enabled the Division to plan and implement activities efficiently and

effectively, while adhering to guiding principles including:

- Physicians leading the way.
- Collaboration first.
- Made-in Surrey-North Delta.

- Physician wellness.
- Dedicated physician leadership (60 distinct Division members involved in work).
- Growing Surrey-North Delta Division membership ■

Being part of the division has helped make me feel more a part of the community of physicians locally and within the health authority as a whole. It has helped us look as a community of physicians on how we can best support our community as a whole.

— Dr. Mark Blinkhorn



Physician Wellness:

The Physician Wellness Program has a mandate for not only providing opportunities to participate in activities that improve physician wellness, but also for creating a culture within the Division that supports wellness.

What we achieved:

The Physician Wellness program engaged 294 members over six events during the

2014/15 fiscal year, including three CMEs and three social events (excluding the AGM). Physician Wellness events are dedicated to improving physician health (mental, social, physical, spiritual), both professionally and personally. These events are guided by physicians themselves, so they can identify opportunities that are most pertinent and beneficial. ■

Recruitment and Retention

Throughout BC communities are facing a shortage of primary care physicians. The Surrey-North Delta Division is not immune and family physician recruitment and retention continues to be a key focus. Along with our stakeholders, the Division is working to attract family physicians by promoting the diverse opportunities available in our community.

What we achieved:

Collaboration with local, regional, and provincial partners and stakeholders was key to achieving our 2014–2015 targets. The Practice Support Program has enabled the Division to plan and implement activities efficiently and effectively. Similarly, the Fraser Health recruitment team continued to work in partnership with the Division's recruitment team to support candidates — including international medical graduates for return of

service — in transitioning successfully into the community. Health Match BC was also integral to promoting practice vacancies, screening candidates, and supporting the transition of new physicians to the community. The College of Physicians and Surgeons of BC continued to facilitate our observership/elective program.

During the reporting period, the Division recruited 10 new family physicians to help transition retired or retiring members. The new physicians joined existing practices, increasing primary care capacity. Four of the new physicians are international medical graduates who have committed to a minimum of two years service in Surrey-North Delta.

To further the Division's recruitment and retention efforts we:

Recruitment

- Developed ethical recruitment principles and created an agreement to foster a positive recruitment experience.
- Expanded the recruitment and retention committee to include three new members.
- Contributed to provincially coordinated recruitment, retention, and practice coverage efforts by participating in the inaugural Physician Recruitment and Retention Stakeholder Summit.
- Promoted practice opportunities and our community to recruitment candidates at local and national family physician conferences
- Participated in a successful pilot observership/elective program with eight

preceptors and eight Surrey-North Delta-based medical students studying abroad with the goal of introducing students to clinical practice in Canada and promoting post-graduation practice opportunities.

Retention

- Launched the shared locum program, which shares one new locum across several practices in our communities. This enables host physicians to take leave while maintaining continuity of patient care.
- Hosted a welcome dinner for 22 new physician recruits and their recruitment practices.
- Launched retirement supports and planning workshop for 51 general practitioners with support from the Practice Support Program. ■



Division initiatives and projects cont'd

Shared Care

Collaborating with the Surrey-North Delta Division of Family Practice, the Shared Care Committee seeks to provide opportunities for Division members to work alongside specialist colleagues to improve health outcomes and patients' journeys through the health care system. This builds trust and respect between physicians and patients.

A joint committee between Doctors of BC and the Government of

BC, the Shared Care Committee supports specialist and family physicians to work together more effectively. The Shared Care Committee aims to facilitate member engagement in shaping the health care system, identifying challenges, and developing innovative approaches to providing efficient, quality health care. Shared Care takes the Division's goals one step further by providing the support to collaborate with specialists within our community.

What we achieved:

Working together, family and specialist physicians:

- Launched the Rapid Access to Consultative Expertise (RACE) Service app, quickly connecting physicians to allow for timely discussion of clinical matters.
- Completed the Relay Chronic Kidney Disease (CKD) Continuum of Care

Education Series as a knowledge-sharing process between nephrologists and family physicians.

- Opened two Psychiatric Rapid Access Clinics to provide more timely access and consultations for patients with mild to moderate mental health and substance use issues. ■

SharedCare
Partners for Patients



Pathways

Pathways is an online tool that seeks to provide GPs with a simple, easy to use resource for specialist and specialty clinic referrals. GPs will be able to access information regarding wait times and areas of expertise offered by these specialists and clinics, all within a single online source.

What we achieved:

Uptake is strong with 76% of GPs and over 90% of specialists having access within SND. In a recent survey, 87% of users were satisfied with the tool and 97% reported that Pathways had improved the referral process. This tells us that physicians are happy with Pathways and that it's positively affecting patient referrals. ■

As a new GP in Surrey, it's been great to have access to the many resources provided through the Division. From CME opportunities, to new tools and programs I can use to help run my practice more effectively and efficiently, the support is always there when you need it.

— Dr. Harv Dhillon



To me, this Division is a network for GPs. Brain power for changes.

— Dr. Lucy Wang

The South Asian Health Centre

One of the first of its kind in Canada, the South Asian Health Centre was designed to provide health care services in a culturally tailored manner.

What we achieved:

- Close to 900 patients

have gone through the Centre.

- Patients have benefited from primary care, shared care, complex care, and diabetes services (education and cooking classes included).

- Free counseling services provided through a community-based partner.
- Nurse practitioners have seen anecdotal improvement in health outcomes among homebound patients. ■

Due to funding constraints, the Division has decided to close the physical space and relocate services to a Fraser Health site as of printing of this report (Nov 2015)

Nurse Practitioners in Surrey-North Delta

Our NP4BC initiatives improves primary care within the community by nurse practitioners who are able to serve vulnerable and/or underserved populations.

What we achieved:

Embrace NP — Launched in March 2015, Embrace has involved excellent engagement between the various project partners while they laid the groundwork for the Embrace clinic. Warm Zone in Abbotsford and Surrey Women's Centre in Surrey agreed to act

as host sites for clinical space for the Embrace NPs. The high degree of collaboration required for this project reflects the values of engagement and innovation that are central to all Division work.

Aboriginal Health NP — While utilization data has been unavailable due to staffing changes, this program was able to develop relationships with outside agencies for future outreach services to the urban and on-reserve Aboriginal communities. ■

MOA Network:

The MOA Network was established in an effort to support primary care through one of the less often engaged members of the family practice team — Medical Office Assistants. MOAs are largely responsible

for interacting with patients, booking visits, requesting labs, and making patient referrals, all of which pose potential barriers to the patient receiving the best possible care.

What we achieved:

The MOA Network has engaged approximately 180 MOAs (medical office assistants) over the course of three Network events during the last several months, with more events planned. Polling for the latest MOA Network event demonstrated 92% satisfaction with

information taken away and 85% felt they learned strategies that would be immediately applicable within their own workplace. MOAs have the opportunity to learn from and support one another, while applying best practices to improve primary care delivery within Surrey/North Delta. ■

Being a member of the Division of Family Practice for SND has improved my knowledge of local programs in the community and has allowed me to assist with the implementation of programs such as Pathways to improve referrals between family physicians and specialists.

— Dr. Alan Brookstone