# Creating a Community of Practice for NTP Contracted Family Physicians in Surrey-North Delta

## Background Information

In 2020, the Ministry of Health launched **New-to-Practice (NTP) Family Physician** contracts in PCN communities across BC.

Surrey-North Delta (SND) has an identified attachment gap of 80,000 people, with the lowest Family Physician-to-patient ratio in Metro Vancouver. NTP contracts, therefore, play a vital role in the SND PCN's attachment strategy, along with other constructs.

SND has successfully recruited **20 NTP physicians as of February 2024 (starting September 2022).** However, the newness and continual evolution of these contracts have created some challenges for these physicians in addition to being new to practice.

The SND PCN team recognized a need for NTP physicians to connect with each other within a safe space to address shared issues through dialogue and mutual understanding.

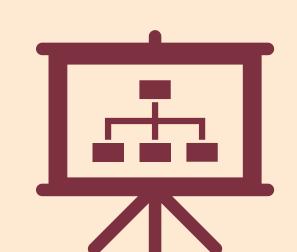
#### Project Overview

The aims of the community of practice for New-to-Practice contracted Family Physicians in Surrey-North Delta:



- ☐ Build connections between NTP FPs and FPs on other payment models.
- ☐ Facilitate building a balanced panel (supported by the SND Division attachment team) and support meeting attachment obligations.
- ☐ The purpose of the NTP CoP is to improve collegiality and provide a platform to discuss common concerns.
- ☐ Facilitate **transition to another payment model**, including the LFP payment model, on completion of the NTP contract.







# Development and Structure of the NTP CoP

A WhatsApp group was created for NTP FPs in September of 2022

- Used for information sharing, event invites, etc.
- Moderated by Division staff

# First meeting in May of 2023

- A group lead (Dr. Uzma Mashood)
   was chosen to
   represent the NTP
   FP voice to the
   Division.
- A quarterly meeting schedule was developed.

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# Division staff facilitate CoP meetings

- A robust, trust-building onboarding process has been developed to engage new NTP physicians early on in their transition to SND and integrate them into the CoP.
- The group is in constant flux as new NTP FPs join and others complete their tenure under the NTP FP contract

#### Results

"Being part of the NTP CoP, I was offered help to understand the system, and I became comfortable with the system navigation quite at the start. The NTP contract gave me a stable income to settle in a new country. I was also glad to learn that I had support available to continue my QI projects here too. I feel proud being part of this contract and all the perks it offers." – Dr. Uzma Mashood



It is hoped that this proactive approach to supporting NTP FPs will lead to greater retention and a more rewarding experience for NTP FPs in SND



committees, including governance, within 1 year of joining the CoP.

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## Benefits and Future Vision

NTP FPs, with support through the CoP, have collectively troubleshot attachment tracking and reporting. SND NTP Physicians have attached 13,293 patients as part of the PCN program (up to January 31, 2024).

The NTP CoP provides insight into challenges faced by NTP FPs that the Division can address by connecting with host clinics.

The SND Division can bring questions and concerns to the Ministry on behalf of NTP FPs and adjust the NTP FP strategy.

The NTP CoP has become a two-way communication platform between NTP physicians and the Division, enabling us to work together on issues like attachment.

Transition the group into a self-sustaining platform that NTP physicians can use to stay connected with each other.

Foster connections and find alignment with other NTP FPs or CoPs in the Fraser Region.

Leverage the NTP contract obligation for patient attachment and NTP FP flexibility in scheduling to reduce the # of unattached patients in SND and support PCN initiatives.

Build familiarity and a sense of belonging, leading to FPs remaining in SND once their NTP contract is completed.

#### Conclusion

This is a promising example of how Divisions of Family Practice are well-positioned to support FPs in our community:

- ☐ By facilitating connections among FPs in the community
- ☐ By representing a collective FP voice to health authorities and the Ministry of Health
- ☐ By supporting FPs in navigating complex health system challenges that they face in their practice



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