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Team Development

Definitions

CHC Community Health Centre Care Home On Call CHOC -Customer Relationship Management CRM CSH Cultural Safety & Humility FTE Full Time Equivalent HCR Health Care Registry International Medical Graduate **IMG** LTCI Long Term Care Initiative NTP New to Practice PAS Provincial Attachment System PCN Primary Care Network PMH -Patient Medical Home PRA Practice Ready Assessment RIH Royal Inland Hospital STEPS -Supporting Team Excellence with **Patients Society**

Chair's Report

I've enjoyed a fun and challenging first year as Board Chair for the Thompson Region Division of Family Practice. I am grateful for the dedication and support of my fellow Board members.

A special thanks to Dr. Cornel Barnard, our past Chair, for his mentorship in my new role, and to Dr. Paul Mackey, our Vice-Chair, both of whom have completed their 6th and final consecutive year on the Board. Your contributions and insight will be thoroughly missed. I also want to thank Katherine Brown, our amazing Executive Director, for her ongoing leadership, and our incredible staff for their hard work and dedication to furthering primary care transformation. I am also grateful for our many partners who collaborate with us to improve primary care delivery in our region. Most importantly, I want to thank you, our Division members, for your ongoing commitment to our organization and the communities we serve, and for your engagement and contributions to help innovate and transform the primary care landscape.

I recently completed the FPSC Leadership and Management Development Program at SFU Beedie School of Business, along with my fellow Board member, Natalie Manhard, NP. Over the last 6 months, it has been amazing to learn with and from primary care leaders from across the province. I am filled with hope that, in spite of many challenges in healthcare, primary care will continue to evolve to meet those challenges.

There have been many highlights at the Division over the past year. Some of these achievements include:

- Moving from planning to implementation of our two PCNs (Kamloops and Lower Thompson), including service plan approval for 78 FTE new clinical resources in the region, focusing on equity and accessibility for both patients and providers.
- Leaving our long-term lease March 31, 2025, when the building was sold to another organization. The Division has gone virtual for day-to-day operations, while continuing to support many in-person meetings for our project teams, committees, and events. Financial savings from rent can be applied to other member priorities and enables fiscal agility.



- Completing a Strategic Plan Refresh with Board and staff leadership, providing clarity to our members on our goals and direction. Our main areas of focus include supporting member priorities and the primary care system, expanding and sustaining our community of primary care providers, and enhancing organizational capacity.
- Sunsetting the Health Leadership Committee and supporting the development of the new Community and Recruitment Advisory Committee. We are grateful for this vibrant new committee, directing and advising our community building and recruitment efforts to ensure we see the most return on investment in this complex space.
- Completing a full review and refresh of our Board Policy Manual with our Board Governance Committee.
- Strengthening partnerships with Secwépemc clinics and communities in our region, and strengthening and redefining relationships with key community partners, including STEPS, Interior Health, RIH Foundation, and the private sector, to name a few.
- Providing learning opportunities to members, including a well-attended Cultural Safety and Humility event at RIH.
- Supporting many new and ongoing Shared Care projects.
- Building strong Board and staff connections through various events including the annual holiday party and staff/Board Blazers hockey game.

I am looking forward to another great year ahead, filled with exciting new challenges and opportunities. Thank you for your ongoing support and commitment. In the words of Helen Keller, "We live by each other and for each other. Alone we can do so little; together we can do so much."

Dr. Meghan MacDonald, Chair

Executive Director's Report

This has been an incredibly rewarding year and I am thrilled with the progress we have made for our members. Similar to recent years, this past year was one of incredible change both within the organization and for the communities we serve. Our Annual Report highlights what we have collectively achieved and showcases the momentum we are building to improve the primary care system for all.



Our refreshed 2024-2026 strategic plan outlines three main areas of focus: Member-driven initiatives and primary care system support, enhancing and sustaining our community of providers, and building a strong organization that is both responsive to members and resilient to external pressures. Last year we were able to make great progress in each of these areas.

Member leads, along with Division staff, led several projects in many areas of care including maternity, palliative, oncology, addictions medicine, mental health and substance use, eating disorders management, long-term care Quality Improvement (QI), and call groups. Our Primary Care Networks service plan was approved and included 78 FTE of new clinical resources for the region. The PCN Steering Committee struck the Indigenous Task Force and supported the allocation of 16.5 FTE clinical resources for Indigenous clinics and communities. We onboarded our Division PCN team including PCN Manager, PCN Learning Lab & Change Lead, and our Program Innovation Lead.

We turned our attention to building a strong, connected community of providers to enhance our reputation for having an engaged and vibrant medical community through the development of our new Community and Recruitment Advisory Committee. We continue to engage residents to better understand what they need to feel confident as they navigate the health system landscape. We listened and we delivered.

We have implemented a variety of new internal initiatives to further strengthen our organization and ensure we are nimble and responsive to our member needs including Attachment and PCN Implementation dashboards to provide members with transparent, real time information about our work. We implemented a new sessional/expense digital form to enable members to more easily track their work. We embarked on a website overhaul and a new CRM

platform to better enable our members to access the resources they need and our staff to maintain current information on our members and communities we serve, all to be rolled out this coming year. Finally, we engaged in a photography refresh initiative to ensure our communications materials reflect our current membership, diversity of practice options, and the beauty of the Thompson Region.

Our role as staff is to support members in their leadership roles, identifying areas for improvement, and implementing solutions. I want to extend my gratitude to our incredible staff and contractors for their dedication and ongoing contributions. Your expertise and support made all the achievements highlighted in this report possible. I am deeply thankful to our Board for its unwavering commitment to tackling the primary care challenges in our region by supporting efforts to make the Thompson Region attractive, sustainable, and a satisfying place to work. Your leadership and personal engagement in our community are truly outstanding.

To our partners - your trust, engagement and continuous contributions are foundational to our progress. Your contributions help us achieve our shared goals and enrich our community.

Most importantly, thank you, our members, for being an integral part of the Division community and for your active involvement. Please continue to engage with your Division to inform our work. As always, I invite you to reach out to discuss any matters, seek support, or become more involved in our initiatives. I look forward to the year ahead and the progress we will accomplish! Together, we will continue strengthening the supportive foundation for family medicine in our community.

Katherine Brown, Executive Director

Treasurer's Report

for the Fiscal Year Ending March 31, 2025

In alignment with our strategic priorities—to support member priorities and the Primary Care system, expand and sustain a community of Primary Care providers and enhance organizational capacity—the Division is in a strong financial position as we close the year.

A significant development this year was the receipt of Primary Care Network funding, which resulted in a substantial increase in revenue and enabled us to start work on implementation of PCN in the Thompson Region.

I am pleased to present, in summary form, the Statement of Financial Position and Statement of Operations. We have again received an unqualified clean audit opinion, confirming that the financial



statements fairly present the Division's financial position as of March 31, 2025.

Both summarized statements are from our audited financial statements. Please refer to the accompanying notes and disclaimer for further context.

Thank you,

Michele Logan, Treasurer

Statement of Financial Position

For the year end March 31	2025	2024
Assets		
Current		
Cash	\$ 2,308,097	\$ 1,025,401
Accounts Receivable	18,321	35,949
Prepaid Expenses	13,592	15,202
	2,340,010	1,076,552
Capital Assets (Note 3)	20,656	27,761
	\$ 2,360,666	\$ 1,104,313
Liabilities and Net Assets		
Current		
Accounts payable and accrued liabilities (Note 4)	\$ 467,070	\$ 110,866
Deferred revenue (Note 5)	1,565,517	669,618
	2,032,587	780,484
Net Assets		
Invested in Capital Assets	20,656	27,761
Internally Restricted (Note 9)	307,423	296,068
	328,079	323,829
	\$ 2,360,666	\$ 1,104,313

Statement of Operations

For the year end March 31

These summarized financial statements do not contain the accompanying notes which are an integral part of these financial statements, as required by Canadian generally accepted accounting principles for not-for-profit enterprises. Readers are cautioned that these summarized statements may not be appropriate for their purposes. For more information on the entity's financial position, results of operations and cash flows, reference should be made to the related complete audited financial statements which are available from the society upon request.

For the year end March 31	2025	2024
Parameter		
Revenue Administration	\$ 172,384	\$ 155,045
FPSC After Hours Support Program	\$ 172,364 -	33,000
FPSC Cultural Safety Fund	10,000	33,000
FPSC Emergency Plan	220	5,000
FPSC Engaging Patient Medical Home	282,240	216,444
FPSC HEMS Gate 2	-	17,600
FPSC IPC Funding	275,361	275,361
FPSC Long Term Care Initiative	352,239	348,693
FPSC Maternity	-	10,966
FPSC PCN Admin	226,237	-
FPSC PCN Backbone	34,539	-
FPSC PCN Change Management	89,462	-
FPSC Patient Attachment	79,786	115,214
FPSC Primary Care Networks	-	24,685
FPSC Recruitment	57,500	57,500
FPSC Infrastructure	640,122	652,579
PCN Governance	7,488	-
RIHF Matcare	-	2,848
Reimbursement	1,173	- 22.204
SC Adult Mental Health and Substance Use	3,717	33,391
SC Emergency Preparedness SC Addictions	2,030	12,320
SC Addictions SC Cancer	7,376 80,088	- 31,477
SC Discharge Clinic	1,649	1,928
SC Eating Disorders	32,731	9,320
SC Maternity	83,055	17,495
SC PASC COVID-19	-	5,032
SC Palliative Care	65,471	32,505
SC Steering Committee	9,772	6,510
j	2,514,640	2,064,913
		7 7-
Expenses		
Program Services:		
Communications	24,801	34,502
Meetings and events	78,730	32,857
Physician	651,916	673,176
Professional support (Note 10)	1,552,127	1,519,492
Travel expenses	27,297	14,453
	2,334,871	1,914,480
Administration:		
Amortization	7,032	7,566
Insurance	2,717	2,563
Membership and licences	-	906
Office expenses	17,588	13,263
Professional fees	32,775	21,133
Rental	55,148	71,167
Small equipment purchases	46,987	9,961
Interest and bank charges	8,192	2,247
Other operating expenses	5,080	1,928
	175,519	130,724
	2,510,390	2,045,204
Excess of revenue over expenses	\$ 4,250	\$ 19,709
•	•	, -

2025

2024



Your Division

The Thompson Region Division of Family Practice brings together physicians to build an engaged community, provide professional support, and co-create and co-lead meaningful change in our community.

We are a not-for-profit society funded by the Government of BC and Doctors of BC and we work in partnership with the BC Ministry of Health, Interior Health, Indigenous partners, and other community and partner organizations. There are many benefits to membership and all local primary care providers are welcome and encouraged to join.

Goal

To answer the call to action pursuing creative ways of developing practice opportunities for longitudinal care with family practitioners and our partners.

Vision

To be a community of family physicians, nurse practitioners, and other primary care providers working collaboratively to develop and support the implementation of primary care focusing on wellness, satisfaction, and sustainability for both patients and providers.

Mission

The Thompson Region Division of Family Practice (TRDFP/ the Division) is the:

- Support for the Thompson
 Region community of primary
 care providers in their pursuit
 of excellence and innovation in
 family medicine and patient care.
- Place where primary care providers go to identify their needs, engage in learning, and participate in collaborative community-based solutions.
- Provider of primary care leadership in systems and clinical improvements and participates in collaborative quality improvement in family medicine and primary care.

- Support for primary care provider wellness and collegiality.
- Advocate for the essential role of primary care providers in the delivery of health care.
- Source for structural primary care advice to Health Authorities, specialist care providers, Ministry of Health, community partners and interested parties.

YOUR DIVISION

Refreshed Strategic Plan for 2024-2026

Our board recognized a need to refresh our previous 5-year strategic plan.

In 2024, the Board and Leadership Team participated in a Strategic Plan Refresh session to review and update our strategic areas of focus.

1

Support Member Priorities and Primary Care System



Networks & Initiatives

Encourage and enable member-driven projects and initiatives and the pursuit of funding opportunities.



Represent Members

Amplify and advance member priorities at local, regional, and provincial primary care decision making tables.



Sustain Primary Care

Support member leadership in system planning initiatives with the goal of improving and sustaining primary care.

7

Expanding and Sustaining Community of Primary Care Providers



Recruitment & Retention

Address immediate and emerging recruitment, retention, and succession planning needs through community building and collaborative partnerships with local, regional, and provincial organizations.



Member Connection

Support members by providing access to learning opportunities, advancing member priorities, and in-practice supports.



Member Wellness

Support wellness by cultivating community connections and hosting engagement opportunities, including social, collegial, and family events.

3

Enhance Organizational Capacity



Governance

Strengthen organizational governance by encouraging member leadership and participation, succession planning, and amplifying rural and urban member perspectives.



Innovation and Resilience

Strengthen organizational infrastructure to enable innovation, scalability, adaptation, and resilience to internal and external pressures.



Positive Culture

Cultivate an organization focused on productivity and personal wellbeing, rooted in autonomy, self-leadership, and empowered decision making.

Division by the Numbers



117,000

POPULATION OF THOMPSON REGION

19

New

members



Primary Care Networks (Kamloops and Lower Thompson)



Patient Medical Homes



99

Individual members engaged in projects or events

35

Members leading projects or initiatives



New primary care providers started practices



Residents working in Region during 2024-2025



40%

Retention rate of residents over last 10 years



EVENTS HOSTED 113

Member attendees during Lunch & Learn events

30

Attendees at **Cultural Safety** Learning Day



New Members

General A

Dr. Carlee Clyde

Dr. Mariam Farooqi

Dr. Lucas Hoffert

Dr. Andrea Houze

Dr. Suhana Kamakari

Dr. Shannon Kelly

Dr. Catherine Nowierski

Dr. Tomas Rapaport

Dr. Taiysa Rouault

Dr. Kristen van Esch

Associate

Dr. Melissa Beaulac - Resident

Dr. Stephanie Grossi - Resident

Dr. Sarah Koltun - Resident

Dr. Kai McGrath - Resident

Dr. Julia De Pieri - Resident

Dr. Gurpreet Sandhar - Resident

Dr. Donovan Sneddon - Resident

Savana DeAlmeida - NP

Tiffany Holdstock - NP



Membership at a Glance



Membership Highlights

This year, our team focused on strengthening connection and streamlining processes to ensure every member feels informed, connected, supported, and welcomed to the Thompson Region Division of Family Practice.

Efficient & Thoughtful Membership Onboarding



Our revised and streamlined membership approval process creates balance between efficiency and quality—allowing for quicker approvals of applications while maintaining the detailed information our board and staff need.

Enhanced Member Insights



We launched a new streamlined membership application questionnaire to better understand our members practice plans, clinic locations, and areas of interest. This information not only improves communication, but also helps our team connect members with relevant supports and opportunities in the region.



Stronger Member Relationships



Using insights from the questionnaire, our Division Leads initiate timely, personalized engagement ensuring members are meaningfully connected from the start.

Coordinated Engagement Strategy



Our Community and Recruitment Lead and Member Engagement Lead work collaboratively to foster an intentional engagement cycle. Strategic communication at each stage builds lasting relationships. Improved internal processes have enabled seamless transitions from one phase to another in the journey to membership and integration with the local medical community.

Welcome to the Division

Our membership is growing and in 2024-2025, we developed a WELCOME package for new members. This beautiful booklet is included along with our new member blankets for everyone joining the Division. The booklet has many key pieces of

information and resources that we compiled to assist new members learning more about the Thompson Region and Division. The booklet is also used as a recruitment tool to demonstrate to potential physicians the dynamic opportunities that are part of Division membership.













Warm Welcome

New members receive a thoughtfully curated, hand delivered, welcome package complete with an information booklet and cozy blanket—reminding them to **LOVE THE LIFE** they've chosen here in the Thompson Region.

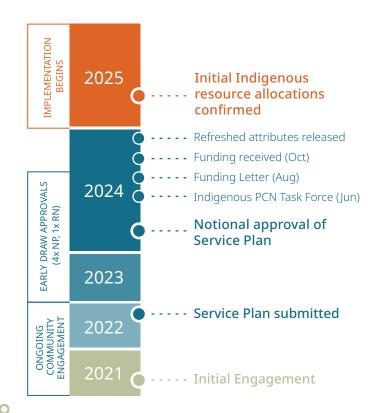
MEMBER QUOTE Thank you for the warm blanket! I am able to keep my feet warm in my cold, air conditioned office now. I really appreciate it!

- Anonymous

The Thompson Region PCN Officially Launches

CO CHAIRS: Dr. Phil Sigalet and Dr. Mary Pickering, NP **STAFF LEAD:** Sarah Graham

After years of planning and partnership, the Thompson Region Primary Care Network (PCN) officially launched this year—and what a start it's been. After months of holding steady while awaiting formal funding, the past eight months have marked our true launch—laying the groundwork for long-term, sustainable success.



Laying the Foundation for Success

Highlights from the past five months since receiving our **Funding Letter** include:



The Indigenous PCN Task Force completed a thoughtful and comprehensive clinical resource allocation process to assign Indigenous clinical resources in communities.

_aunched our Network Approach to Access an inclusive, flexible model designed to support equity- and used it to guide Year 2 planning.

ACCESS AND EQUITY



Thompson Region Primary Care Network

PEOPLE POWER

Onboarded an incredible team of core PCN staff who are already making an impact.



COMMITTEE CLARITY

Finalized refreshed Terms of Reference to guide collaborative governance.

FOUNDATIONAL

Transparent dashboards and data tools were developed to support shared understanding and accountability.



Engagement in Action

Collaborative Engagement Driving PCN Implementation Forward

In 2024-2025, the Thompson Region Division deepened partnerships and provider relationships to advance a truly networked Primary Care Network (PCN).

Strengthening Strategic Partnerships

- Indigenous PCN Task Force (I-PCN TF) Simpcw First Nation hosted the inaugural meeting and Task Force leaders from Q'wemtsín Health Society (QHS), Three Lakes (Adams Lake Indian Band, Neskonlith, and Squilax), Simpcw First Nation
- STEPS CHC Built a strong foundation for partnership and clinical integration through sustained engagement, relationship-building, and joint planning—culminating in the submission of a third-party SBAR to support expanded PCN involvement
- Foundry Kamloops Participated in the Foundry Kamloops Anchor Table to support improved youth access

Key Activities & Initiatives

PCN Newsletter Launch – A new monthly update to inform, invite, and inspire stakeholders.







Direct Mail Outreach – Postcards sent to all PMHs, CHCs, and Indigenous health sites to increase PCN awareness.

PCN Branding - Received approval from the Ministry of Health for our new PCN branding.

Shared Learning & Collective Wisdom

Lunch & Learn Series

- Introduction to the Thompson Region PCN
- PCN Health Hubs + Rapid Fire: PAS and Access Pathways

Provincial PCN Lunch & Learn

Showcased our Networked Approach to Access and learned from other regions across BC.

"Ask Us Anything" Co-Session

Partnered with the Central Okanagan Division of Family Practice to explore access pathways and social work integration, while inviting provider feedback.

Evolving Our Digital Presence

PCN Website Refresh

New layout, updated content, and real-time dashboard to improve transparency.

Advancing Access

A Region Connected Through a Networked Approach

PCN positions hired in the 2024-2025 year:

- 2 FTE NTP FPs (Chase, Barriere)
- 2.5 FTE NPs (Simpcw, First Steps Early Pregnancy Triage Clinic, Barriere)
- 1 FTE RN (First Steps Early Pregnancy Triage Clinic)
- 16.5 FTE resources dedicated to Indigenous Partners

What is the Networked Model?

We're thinking like a network - connecting providers into one integrated care team. Whether based in clinics, embedded at a Health Hub, or serving rural or Indigenous communities, providers are supported by centralized intake, digital tools, and a shared commitment to access.







What's Different About Our Model?

Centralized Intake

Less admin, better triaging, and faster matches to the right care.

Flexible Staff Deployment

Resources move where needed most, balancing equity with efficiency.

Digital Coordination Tools

Providers stay connected across sites—sharing notes, follow-ups, and care plans.

Community of Practice

Cross-regional rounds and mentoring build relationships and continuous improvement.

44

The Primary Care Network rollout in our region holds promise to provide the beginnings of improved capacity for primary care access.

- Dr. Mary Pickering, SC Co-Chair (NP-F, DNP)

TR PCN OVERVIEW

Strengthening Attachment

Better Data, Better Access

Over the past year, we made real strides in improving how patients get attached to providers, and how we track the capacity of those providers to take on new patients.

Highlights

OF THE 8,345

PATIENTS ATTACHED FROM THE WAITLIST

2,271 OCCURRED IN 2024-2025

27.2%

Why It Matters:

More timely and accurate attachments means better access, better equity, and stronger longitudinal care. With clearer provider capacity data, we can plan and allocate resources more effectively across the region.





Patients migrated from rural community waitlist to provincial HCR

Attachment and Health Connect Registry





PAS data is stronger than ever:

increase in completed PAS profiles

(Jan to Mar 2025)

3x

increase in reported capacity

Completed PAS Profiles / Reported Panels and Capacity in PAS



Community Engagement

The Division was committed to community engagement and participated in many community visits including Barriere, Chase, North Shuswap, and Logan Lake.



FRONT: Sarah Graham, Makenzi Irwin, Tom Skinner **BACK:** Kelli Thompson, Christine Matuschewski, Courtney Woodruff, Sophie Mueller



FRONT: Ben Dobson **SEATED:** Tamara De Jager, Sarah Turgeon O'Brien **BACK STANDING:** Kelli Thompson, Shelley Sim, Trish Erbin



Rhiannon Hall, NP, Sarah Graham, Ross Gibson, Dr. Adyinka Alabi, Dr. Ilke Marais **SEATED:** Shelley Sim, Katherine Brown



Sheena Raffle, Katherine Brown, Shelley Lampreau, Sarah Graham, Christine Matuschewski



Shelley Sim, Gail McNeil Oliver, Jody Wium, Bev Schwab, Cayla Burgess FRONT: Kelli Thompson, Makenzi Irwin

Celebrating Primary Care Leaders

Projects Supporting Specific Populations

NEW MEMBER-LED PROJECTS







Addictions Medicine Adult Mental Health Youth Eating Disorder Management

ONGOING PROJECTS













Palliative Care



Long Term Care Initiative



After Hours Care

Addictions Medicine



PHYSICIAN LEAD: Dr. Rob Baker, Dr. Ruth Farren, Dr. Mike Marino, Dr. Errol van der Merwe

NP LEAD: Claire Wilson STAFF LEAD: Ania Zubrowska

We piloted a Contingency Management (CM) program designed to support individuals with substance use disorders through structured, incentive-based goals tied to treatment engagement and behavior.

Key outcomes achieved:

- Increased client engagement and appointment attendance and reduced negative or disruptive behaviors toward staff
- Observed secondary health outcomes
- Strengthened continuity of care and collaboration among providers





Adult Mental Health



PHYSICIAN LEAD: Dr. Paul Farrell, Dr. Victor De Kock, Dr. Fatima Allibhai, Dr. Barbara Prystawa

STAFF LEAD: Ania Zubrowska

The project examined the current mental health referral landscape to identify gaps and challenges faced by referring physicians in managing patients with moderate mental health concerns.

- Hosted patient journey mapping sessions, one of which was facilitated by the UBC PACC mapping team
- Visioning sessions in collaboration with Interior Health

Youth Eating Disorder Management



PHYSICIAN LEAD: Dr. Bamidele Olabiyi, Dr. Karenza Van Leeve **STAFF LEAD:** Melanie Todd

Focused on increasing healthcare provider, school district and public awareness of identifying, managing, and seeking resources/ treatment related to eating disorders in youth.

DELIVERED
INFORMATION
SESSIONS
REACHING
INDIVIDUALS



Sessions such as this are very critical and important.

77

- Participant

Melanie Todd, Dr. Bamidele Olabiyi, Sara Woods, Dr. Van Leeve, Stephanie Bronswyk, Elizebeth Harris







Nicole Cant, Ace Porter, Rosalynd Curry, Lee Janzen, Joanna Norman, Elaine Barnes, Angela Smith, Lisa Hodgson, Jessica Astle

Maternity Care

PHYSICIAN LEAD: Dr. Shaun Davis, Dr. Hilary Baikie **MIDWIFERY LEAD:** Joanna Norman

STAFF LEAD: Melanie Todd

Maternity care providers and partners engaged in activities to build provider connections, and streamline and enhance maternity care services for patients accessing care in the Thompson Region.

- Prenatal care patient journey mapping
- High Risk clinic visioning session
- TRFO and Midwifery department visioning sessions
- Hosted first provider-led regional maternity event in Kamloops

Oncology

PHYSICIAN LEAD: Dr. Meghan MacDonald,

Dr. Alexandra Gabriel

STAFF LEAD: Melanie Todd

Focused on increasing healthcare provider and public awareness of cancer supportive care resources and services available for patients and families.

DELIVERED
INFORMATION
SESSIONS
REACHING
INDIVIDUALS

So much information to pass on to patients and letting my physician know what is out there.

- MOA



Melanie Todd, Janice MacDonald, Dr. Hannah Nette, Dr. Meghan MacDonald, Heidi Coleman



Long-Term Care Initiative



PHYSICIAN LEAD: Dr. Phillip Sigalet

NP LEAD: Natalie Manhard STAFF LEAD: Ania Zubrowska

Continued to support care in long-term care homes by aligning physician services with the Five Best Practices. Engaged physicians, facilitated collaboration with facility staff and health authority partners, and provided funding and administrative support for proactive, team-based care and quality improvement projects.

- Welcomed new initiative leads and physician to LTCI
- Recruited members to CHOC call group
- Filled Medical Director roles at two facilities and filled all 100 beds at new facility
- Finalized new MOU
- Hosted an education/ sustainability dinner

Emergency Preparedness



PHYSICIAN LEAD: Dr. Graham Dodd **STAFF LEAD:** Melanie Todd

The 2024-2025 fiscal year saw the wrap-up of the nearly five year project. The foundational partnership work provided an opportunity for the Division to advocate for all divisions in the interior to be included in Interior Health's emergency management planning tables, while the project facilitated regional collaboration and the spread of a suite of co-developed primary care resources. The Division was honored and thankful to assume a leadership role in this space due to the strong local physician champion and leadership in emergency work and to be recognized throughout the province as a source of expertise.

Dr. Shaun Davis



Palliative & End of Life Care



PHYSICIAN LEAD: Dr. Rob Baker, Dr. Janet Kusler

STAFF LEAD: Melanie Todd

Continued to build an effective and sustainable pain and symptom management service for individuals with life-limiting illnesses. Led recruitment and networking opportunities for providers interested in becoming MAiD assessors and prescribers to contribute to a stable MAiD program in the Thompson Region. Developed a palliative care toolkit to equip and connect primary care providers with tools, resources, and services to support their patients palliative and end of life journey.

After Hours Care



PHYSICIAN LEAD: Dr. Paul Mackey **STAFF LEAD:** Ania Zubrowska

The FPSC After Hours Call Program provides 24/7 access to patient care by connecting callers with a physician or nurse practitioner outside of regular clinic hours, reducing unnecessary emergency visits and improving continuity of care. In the Thompson region, we supported the recruitment of four new members to join the program, bringing the total to seven members staffing the service. Currently, 10 nurse practitioners and 37 physicians are actively using the service, ensuring over 52,000 patients have timely access to medical advice and support when their regular provider is unavailable.

Dr. Shirley Sze and Dr. Rob Baker



Community Building and Recruitment

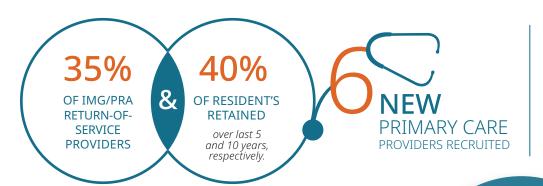
Attracting Physicians to the Thompson Region

Recruitment is a collaborative effort that takes coordination across local clinics and partners, regionally with Interior Health and other Divisions, and provincially with partners such as PRA BC, Health Match BC, and FPSC.

We continue supporting providers through engagement, leadership development, and targeted recruitment and retention strategies. This includes supporting IMGs, residents, and locums while they are in community, tracking provider capacity and satisfaction, and hosting or supporting social network events that bring physicians together and foster new friendships and connections.



Highlights from FY 2024-2025



Our goal is to make the Thompson Region a desirable place for physicians seeking new opportunities, offering both professional and personal appeal.



We Love Our Residents

This year, the Division engaged with UBC Resident students through various events, including a social night with trivia at Red Beard in August, partnering with Royal Inland Hospital Foundation for the annual Fawcett Ranch BBQ and a fun afternoon at Privato's pumpkin patch in October. We continued our connections with holiday gatherings and social events.

In January, residents responded to a survey about support and learning needs during residency.

The top five topics were:

Based on this feedback, we hosted a well-attended Billing Tips and Tricks session which included presenters: Dr. Kara Perdue (guest, Rural and Remote Division), Dr. Kraig Montalbetti, and Dr. Steven Broadbent.

Residents expressed gratitude for the valuable information shared

Billing Questions



Opening a Practice 101



Accounting & Financial Management



Life After Residency – Opportunities



Specialists, Hospitalists & Other Professional Opportunities The R2's graduate in June 2025, with many staying in the Thompson Region. The Division will host a graduation celebration and extend best wishes to all. We look forward

to welcoming new residents to Kamloops in July!

BOTTOM LEFT: Residents at Pumpkin Patch

BOTTOM MIDDLE: Dr. Steven **Broadbent & Sarah Broadbent**

BOTTOM RIGHT: Dr. Kraig

Montalbetti

TOP MIDDLE: Residents at Sandbar Grill (Submitted by Dr. Jacques Laniece)

TOP RIGHT: Dr. Kara Perdue



On the Road

The Division attended the Family Medicine Forum conference in Vancouver, partnering with Central Interior Rural Division (CIRD). This collaboration allowed us to engage with a wide variety of physicians, residents, and students. Future shows include the Rural Health Care Conference and St. Paul's CME conference. We will continue to partner with CIRD for cost-sharing and to ensure comprehensive engagement at our booth.

Interior Physician Recruitment & Retention (IPRR) A Regional Network

The The IPRR Steering Committee includes leadership from the eight Interior Divisions of Family Practice and Interior Health recruitment leadership and staff, including urban, rural, and Indigenous communities.

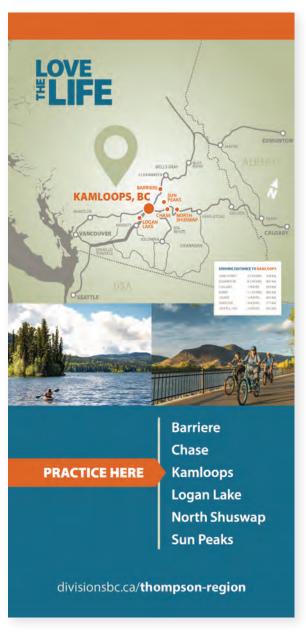
Established in October 2019 with funding from the FPSC, the IPRR supports family physician recruitment, retention, and retirement transitions through collaboration with Interior Health and the First Nations Health Authority. The network addresses recruitment opportunities and barriers collectively. The TRDFP has participated since 2019.

2024-2025 FY priorities between the TRDFP and IPRR included:

- Stabilization of Logan Lake with the placement of an IMG
- Collaboration with Interior Health on recruitment strategies
- Participation in R1 orientation event
- Supporting knowledge exchange between communities to support recruitment



Shelley Sim



PHOTOS:

Kayak: Jonny Bierman, Knouff Lake Wilderness Resort **Cycling:** Dylan Sherrard, Riverside Park

Community Partnerships in Recruitment

Learning more about each other strengthens community and connection. In healthcare, we believe a vibrant, inclusive, and welcoming community fosters support, deepens colleague connections, and enhances recruitment and retention. Our goals for 2025-2026 are to expand events that bring members and the community together, deepen learning, and widen friendships and colleague connections.

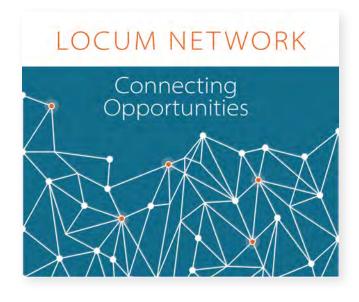
The Division continues to work with the dynamic Royal Inland Hospital Foundation team and has appreciated being able to collaborate on several initiatives together including the Annual South Central Trucking & Industry (SCT&I) Charity Golf Tournament, Radiothon, and annual Welcome Back BBQ at the Fawcett Ranch. We are grateful for their support and partnership. We are also grateful to have many community partners and businesses keen to engage in community welcome and new physician supports.



Sarah Graham and Shelley Sim

Special thanks to our community partners who assisted with recruitment and retention efforts.

Launching the Thompson Region Locum Network



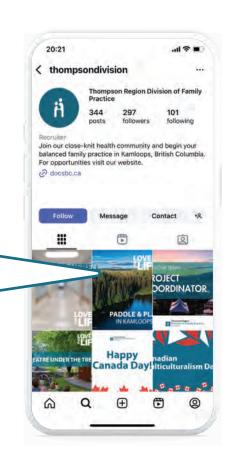
In February 2024, the Division recognized that there were physicians keen to come to the Thompson Region as locums. To help develop the connection between interested locums and clinics looking for locum support, the Division launched the Locum Network. The hope of the network is to learn what opportunities exist for locum work and

share those opportunities out beyond the Division boundaries. We are pleased that this initiative continues to gain steady momentum and look forward to broadening connection in 2025-2026 with the launch of the new website and streamlined forms to make posting quick and easy!

Check out Our Social Media!

We launched a new recruitment campaign!





LOVE 描 L I I I

PHOTO: Tradeshow Postcard

With the support of the Division team and input from physicians and the Community Recruitment Advisory Committee, we saw the launch of a new call to action - LOVE THE LIFE with a focus on lifestyle and career opportunities with Thompson Region Division of Family Practice.

The new brand implemented bright and bold colours with a vibrant selection of engaging photos and a commitment to do more

"bragging" about why life in the Thompson Region is so wonderful. The new brand has caught the attention of potential physicians and bolstered an energized sense of the region and all the opportunities. This new branding has been successful at tradeshows, used as part of new Division swag, and generated enthusiasm from our members as they joined us in celebrating why we truly LOVE THE LIFE.



Members Out and About

44

Thank you for the event! Looking forward to attending more in the future. Really liked the interactive quizzes and learning!

> - MOA Attendee at Winter Appreciation & PCN Learning Event

MOA Network

Medical Office Assistants (MOAs) are an integral part of primary care and central to the smooth functioning of the Primary Care Networks (PCNs). Their role is essential in supporting patient attachment, coordination and continuity of care.

This year, we continued to champion and uplift this vital group through initiatives such as a peer-driven MOA Newsletter and a Winter Appreciation and PCN/Attachment Learning event



that recognized their invaluable contributions to team-based care.

We provided opportunities for Indigenous Cultural Safety and Humility training by offering San'yas Indigenous Cultural Safety Training and extending an invitation to attend the Indigenous Cultural Safety and Humility in-person full day of learning.

Maternity Care Event Interior Deliver

Interior Delivery Sites

The Thompson Region Division of Family Practice with the guidance of Dr. Shaun Davis and Interior Divisions, spearheaded an unprecedented maternity care event in Kamloops.

21 physicians providing intrapartum care and **two midwives** working in collaborative practices from **10 delivery sites** across the interior.

The purpose of the maternity event was to provide a space for providers to begin the break down of perceived and actual silos between delivery sites in the interior region while exploring the current and future state of maternity care.



The full day event was structured around the following objectives:

- Network and share experiences across sites
- Begin a conversation about the role of providers, divisions and other organizations in collective human resource planning
- Explore how a regional network of maternity care providers can improve patient care
- Share our learnings and potential solutions with stakeholders

The maternity event allowed providers to put faces to names, and provided the opportunity to learn from each other and reduce assumptions, increase understanding and empathy. Providers expressed their enjoyment of having a physician-led opportunity to get together in a safe space and share what was happening across all Interior sites.

44

Thank you for prioritizing maternity care.



- Attendee

The Thompson Region Division of Family Practice is grounded in a commitment to Indigenous Cultural Safety, Humility, and Reconciliation. We recognize the importance of Indigenous-led education and continue to engage in meaningful opportunities that deepen understanding, build relationships, and guide respectful action.

Indigenous Cultural Safety and Humility

A Year of Learning and Listening





Tkemlúps te Secwépemc First Nations Community-Based Experiential Learning Session

LEN PIERRE CONSULTING

October 23, 2024

TRDFP Board Chair, Dr. Meghan MacDonald, and Executive Director, Katherine Brown, were honored to attend Tkemlúps te Secwépemc First Nations Community-Based Experiential Learning Session, hosted by the Joint Collaborative Committees (JCC), in partnership with Len Pierre Consulting. This event brought together **50 local leaders** working the the health care sector who live or practice in the Thompson Region. Participants learned about cultural safety and experienced traditional food, songs, protocols, language, history, and stories. Themes explored included:

- Colonial genocide and historical trauma
- Disconnection from land, identify, and culture
- Resulting mental and physical health disparities in Indigenous communities



San'yas Anti-Racism Indigenous Cultural Safety Training Program

The Division continued to cover registration fees for all members who want to take the training, and all staff members take the training as part of their onboarding and orientation.



Looking Ahead

These experiences reflect an ongoing journey of learning and relationship-building.

We remain committed to:

- Learning with humility
- Listening with respect
- > Supporting Indigenous-led initiatives
- Advancing culturally safe patient care



I still have lots to learn! Thank you for this invaluable learning opportunity.









OF ATTENDEES

Indigenous Cultural Safety and Humility In-Person Learning Day

March 7, 2025

Building on board, member, and staff commitment of fostering culturally safe care and insights gathered from member engagement while supported by a FPSC funding grant, we partnered with Indigenous facilitators, Nicole Williams and Harley Eagle to develop an Indigenous-led full day of in-person learning. This full day of learning was attended by 30 members, staff, and community partners. The learning day was graciously started with an opening Secwépemc prayer, generously offered by Tkemlúps te Secwépemc Elder, Freda Jules.

Morning Session

Nkashaytkn Indigenous Cultural Safety training, led by Nicole Williams, included heartfelt storytelling sharing a Two-Eyed perspective of the healthcare system and included personal experiences of Indigenous-specific racism.

Afternoon Session

Foundational Understanding of Indigenous Cultural Safety and Humility, facilitated by Harley Eagle guided participants through an interactive learning that explored Colonization, systemic power imbalances, and cultural safety. He introduced somatic techniques and encouraged the use of these techniques in our personal and professional practices.

- feel they have a better understanding of Indigenous perspective, practices, and experiences in healthcare
- noted that they are more aware of the personal biases they have
- have an increased awareness of Indigenous-specific racism within the healthcare system



Our attendees noted:

- They have more tools and insights to be a better advocate
- Can provide better care with less bias
- Learned somatic techniques of knowing and behaviors
- Learned how to better approach trauma



2024 AGM

The 14th Annual General Meeting was held September 25, 2024, at the Delta Hotels Kamloops, welcoming general and associate members, board directors, guests, and staff.

This year saw a change of hands for the Board as outgoing Chair, Dr. Cornel Barnard, welcomed in Dr. Meghan MacDonald. Sincere gratitude was extended to Dr. Patrick McCaffery for his time on the Board as his term came to an end. Dr. Cristina Liciu was thanked for her time on the Board as she moved away from the community and stepped down as Treasurer, welcoming in Michele Logan to take on the role. Dr. Abayomi Adetola was accepted as a new director to the Board.

Dr. Tyla MacKay presented on resiliency and compassion fatigue in primary care providers which was well received by all in attendance.

We heard from attendees that wellness-focused presentations are appreciated and something they would like to see more of, as well as more opportunity to network and socialize with colleagues.

We look forward to welcoming all our members to the next AGM!



Dr. Cornel Barnard





TOP: Dr. Kraig Montalbetti, Dr. Antoinette Kitshoff **BOTTOM:** Dr. Meghan MacDonald, Dr. Patrick McCaffery, Dr. Abayomi Adetola



Dr. Tyla MacKay

Embracing Learning and Connection

The Division's learning events over the 2024-2025 fiscal year continued to be a member favorite attracting 147 participants.

Topics included:

- Cancer Supportive Care
- Youth Eating Disorder Management
- Pathways
- North Shore UPCC
- > ADHD

- Bounce Back
- PCN Rapid Fires & 101 Sessions
- Medical Assistance in Dving
- Current Management of Thyroid Nodules



Our Leadership Committees

Leadership Committees spark engagement and leadership opportunities. The Division is not only led by our dedicated Board of Directors, but also our committees which empower and connect members with one another as well as the work of the Division. This year, we initiated the new Community and Recruitment Advisory Committee to support and advise on our strategic area of focus #2, expanding and sustaining our community of primary care providers.

Community & New! Recruitment Advisory Committee (CRAC)

In 2024, we saw a need for additional member guidance in the area of sustaining and growing our local community of primary care providers, and the CRAC was struck. We have five providers actively engaged in the committee work including: Dr. Abayomi Adetola, Dr. Kaitlyn Toplak, Dr. Harpreet Kelly, Dr. Stephen Broadbent, and Dr. Kraig Montalbetti. This diverse group provides the Division with connections to the Department of Family Practice, the Board of Directors, the hospitalist group, and longitudinal family practice.

Health Leadership Committee (HLC)

This year, we decided to sunset the HLC. We would like to extend our heartfelt thank you to all those who participated in the HLC for the years it was active. The HLC provided guidance to the operations of the Division and supported staff in navigating project work and local primary care challenges, among other items.

Collaborative Services Committee (CSC)

The CSC is where local health system leaders come together to work collaboratively on innovative solutions to local challenges. Our CSC is co-chaired by Board Chair, **Dr. Meghan MacDonald**, our ED Katherine Brown, and Interior Health Director of Operations, Ren Blain.

PCN Steering Committee (PCN SC)

The PCN SC is responsible for planning and oversight of PCN implementation in the Thompson Region. We have a diverse membership, led by **Dr. Phil Sigalet and Dr. Mary Pickering, NP,** and includes IH, Division, Ministry of Health, First Nations Health Authority, and Indigenous partner leadership, serving communities, patient medical homes, community health centres, UPCCs, and Foundry centres in the region.

Shared Care Steering Committee (SCSC)

The SCSC, co-chaired by **Dr. Shirley Sze, Dr. David Nicholl and Dr. Jon Just**, provides strategic support, advice, and input to the development, progression, and alignment of Shared Care projects and integration of Shared Care projects and integration of Shared Care projects and integration of shared physician initiatives to address the community gaps in care. The SCSC facilitates communications between the Division and Royal Inland Hospital & Hillside Physician Association (RIHPA), community providers including family physicians, nurse practitioners, specialty physicians and Interior Health.

Thank you to our primary care leaders!

Thank you!

Your Board of Directors

Thank you to our 2024-2025 Board of Directors



Dr. Meghan MacDonaldChair



Dr. Paul Mackey Vice-Chair



Dr. Ben Anders Secretary



Dr. Graham DoddDirector
Physician Board Liaison



Michele Logan Treasurer



Dr. Abayomi AdetolaDirector



Dr. Cornel BarnardDirector



Dr. Shaun DavisDirector



Natalie Manhard, NP (F) Director

Thank you

Thank you to Dr. Patrick McCaffery and Dr. Cristina Liciu <u>for their time on</u>the Board

Your Team

This fiscal year we welcomed to the team:



Sarah Graham PCN Manager



Katherine Brown Executive Director



Lindsay Kaluza Operations Lead



Makenzi Irwin Attachment Coordinator



Marcy Matthew Project Lead



Shelley SimCommunity and
Recruitment Lead



Melanie Todd Senior Project Manager



Tom Skinner Program Innovation Lead



Kelli Thompson PCN Learning Lab & Change Lead



Shawn Wenger Project Coordinator



Ania Zubrowska Project Manager

Farewell

We said thank you and farewell to Chelsea Brookes, Ross Gibson, Sue Lissel, Neil Rachynski, and Sherry Westgarde Hepper









TOP LEFT: TOP ROW - Dr. Ben Anders, Marcy Matthew, Tom Skinner, Ania Zubrowska, Dr. Meghan MacDonald, Kelli Thompson **BOTTOM ROW** - Melanie Todd, Lindsay Kaluza, Makenzi Irwin, Shawn Wenger

MIDDLE LEFT: Division Board and Staff

TOP RIGHT: Shelley Sim, Makenzi Irwin, Michele Logan

BOTTOM: Sarah Graham, Melanie Todd, Shane Jenzen, Lindsay Kaluza, Katherine Brown

Team Building Staff and Board

Division staff and Board Directors engaged in team building events throughout the year. Staff focused on learning about individual work and communications styles amongst the team and how the Division is becoming a teal-inspired organization. Board Directors and staff shared personal experiences, visions for the future, and many laughs over meals and a Blazer's hockey game. We even got to see some competitive streaks come alive at the holiday social!

Professional Development

The Leadership Team took part in a Leadership and Management Training Skills session with New Quest Consulting Group. The course focused on leading through change, performance coaching, and the Balanced Leader Strategy.

A few staff completed the Project Management Fundamentals course through Thompson Rivers University Community Education and Workforce Development.

Saying Goodbye to the Office, But Not to Teamwork



The end of the 2024-2025 fiscal year brought big changes for the Division Headquarters. Unit 209, 310 Nicola Street has been the home base for the Division since its inception in 2010 when Dr. Shirley Sze was at the helm of the Board of Directors as President.

In November 2024, we were presented with an option to vacate the space as it had been sold, and the new owners were keen to use the space for their own non-profit society! As we considered this opportunity and evaluated use of the space, it was determined that going remote would continue to meet the needs of the Division. The COVID-19 pandemic changed how the office was utilized and as work environments adapted to new

arrangements, the space no longer functioned in the most efficient manner. We also noticed that as the staffing complement diversified, so too did the need for permanent office space. So, we seized the opportunity to try something new and all staff are now working fully remote - connecting daily, virtually and in-person, as the work allows. Not to worry, in-person engagements are being held throughout Kamloops and the region. ensuring collaboration and connection with colleagues, members, and partners.

We are taking time to evaluate the ongoing needs of the Division and continue to explore what future headquarters may look like - **stay tuned!**

> PHOTO: Mary Putnam Tourism Kamloops







Contact Us

250 372-1621 thompsonregion@thompsondivision.ca www.trdfp.ca

We would like to thank our funders, including the Family Practice Services Committee, Shared Care Committee, Doctors of BC, and Ministry of Health for their contributions to the initiatives lead by the Division.