APPLICATION FORM UBC IMG FAMILY PRACTICE RETURN OF SERVICE CANDIDATES



Anticipated Practice Ready Date: Summer 2024 (2 Year ROS) 9 Candidates available SEND COMPLETED APPLICATION TO ISLAND HEALTH BY

May 12, 2023

To: medstaffrecruitment@islandhealth.ca

To be eligible for consideration for participation in this program, your practice must meet the eligibility requirements stated below. **The application form must be completed in its entirety and signed**.

Whether assuming a retiring physician's practice or starting a new practice with unattached patients, there must <u>not</u> be an expectation or obligation that the ROS physician should have to purchase or buy into the ownership of the practice for the duration of the ROS contract. <u>Clinic must be able to provide ROS physician with a turn key practice.</u>

Once you submit a completed application, your practice will be scored based on the criteria described below. These criteria were chosen to maximize the opportunity for a successful recruitment and to maintain attachment for patients in the chosen clinic and community for years to come.

Eligibility requirements:

- Position to be held for the candidate's transition to practice in Summer 2024
- A designated physician is available to be part of a transition/mentorship plan if taking over a retiring physician's practice, or starting a new practice with unattached patients, respectively.
- Clinic can provide a turn key practice, with no obligation or expectation to purchase or buy into the practice.
- On site supervisor available. In alignment with the CPSBC Supervisor requirements for graduates of Canadian residencies, clinic must be a group practice of at least three other family physicians, with one familiy physician registered in the full - family class physically available in the practice when seeing patients.
- Ability of the new ROS physician to establish or assume a patient panel sufficient to support a full-time (minimum 1680 hrs annually) full-service family practice.
- Clinic space is adequate to accommodate new physician during transition/mentorship phase and beyond,
 recommend a minimum 2 exam rooms per physician while seeing in office patients.
- A firm agreed upon date for new ROS physician to assume full patient panel from departing/retiring physician.
- If walk-in clinic time is part of the clinic service model it cannot exceed 1 days/week and should be used to develop a patient panel.

Clinics will be evaluated on the following:

- Scalability of Need:
 - Current number of unattached patients
 - o Impact of vacancy on patient care services in community
 - Anticipated need (growth and turnover/retirement)
 - Current vacancy
- Clinic Readiness:
 - Ability to establish and support a transition/mentorship plan for the new ROS physician
 - o Timeline aligned with Return of Service commencement
 - EMR or willingness to transition to one
 - Patient panel sufficient to support full-time family practice. (If a departing physician, existing panel. If new position, unattached patients available within community).
 - Clinic associate /practice agreement**
 - ** Clinics who do not have a formal practice agreement may wish to refer to the Doctors of BC Guide: https://www.doctorsofbc.ca/sites/default/files/a_guide_to_group_governance_agreements.pdf

By participating in the program you understand that:

- Placement of a ROS participant is not guaranteed and is dependent on a successful match and could be impacted by the ROS participant's personal situation (e.g., residency completion, exceptional circumstances).
- The clinic holds a relationship with ROS participant through the clinic letter of offer and the associate/practice agreement and is not a party to the ROS contract or ROS addendum.
- A ROS participant may decide to leave a clinic after completing their ROS commitment.
- ROS participants are not required to purchase or buy into the ownership of the practice for the duration of the ROS contract.
- The Ministry of Health, Health Authority, and/or the ROS participant are not responsible for any disruption to business or financial impact experienced by the clinic/facility resulting from an unsuccessful or partially completed ROS placement.

An interview or site visit may be arranged with a Medical Director overseeing this program.

Clinics misrepresenting their practice may be removed from consideration for a Return of Service placement for a period of 2 years. Prior to the WG making this decision a review will be conducted. The Clinic may appeal the WG decision.



The following application must be completed in its entirety

PART 1 - CLINIC INFORMATION

ART 1 - CLINIC INI ORMATION				
CLINIC NAME:				
CONTACT NAME:				
CLINIC ADDRESS (including Postal Code):				
MAILING ADDRESS (if different from above)				
How long has clinic been at this location?	#years:			
Do you plan to move in the next 3 years	□ Yes	□ No		
CONTACT PHONE NUMBER:				
EMAIL:				
IS THE CLINIC A PRIMARY CARE NETWORK (PCN) CLINIC	□ Yes	□ No		
CLINIC DAYS AND HOURS OF OPERATION:				
DOES YOUR CLINIC USE EMR?	□ Yes	□ No		
DOES YOUR CLINIC PLAN TO CHANGE THE CURRENT EMR?	□ Yes	□ No		
HOW MANY FAMILY PHYSICIANS PRACTICE LONGITUDINAL CARE AT YOUR CLINIC?	Full Time	#	Part Time	#
Of these, how many have joined in the past year?	#		#	
HOW MANY DEDICATED CONSULTING ROOMS WILL BE AVAILABLE FOR AN INCOMING ROS PHYSICIAN?			1	
DO YOU CURRENTLY HAVE ANY ROS PHYSICIANS IN YOUR CLINIC? If so, how many Start date(s): Current patient panel size(s) Has there been discussions regarding whether the ROS physician will remain beyond their ROS commitment/end date? If so, are they remaining or leaving and by when?	□ Yes	□ No		
PART 2 - PRACTICE INFORMATION				
IS THE VACANCY:	☐ Repla	coment \square	New	
IF FOR A REPLACEMENT: Name of retiring/departing physician: Date of retirement or departure:	П Керіа	<u>cement</u>	INEW	
. Will the departing physician be part of a transition plan?	□ Yes	□ No		
 Will the departing physician be part of a transition plan? Will the departing physician transfer his/her patient panel to incoming ROS physician at the above date? 	□ Yes	□ No		
IF FOR A NEW PHYSICIAN: • Is clinic able to provide mentorship to incoming ROS physician?	□ Yes	□ No		
PLEASE IDENTIFY IF YOU HAVE TAUGHT MEDICAL STUDENTS AND/OR RESIDENTS IN THE PAST THREE YEARS	□ Yes	□ No		
ARE YOU ABLE TO SUPPORT A PHYSICIAN WITH PROVISIONAL CLASS	□ Yes	□ No		
OF LICENSURE WITH THE CPSBC WITH REQUIRED SUPERVISION Please print name of proposed Supervising Physician				
for details pertaining to Expectations of Supervisors for Provisional Registres://www.cpsbc.ca/files/pdf/RP-Guidelines-for-Supervision-of-Registrate PART 3 - POSITION INFORMATION				
ISLAND HEALTH VACANCY #				
REMUNERATION (Example - Fee-for Service / Alternative Payment Contract / Service Contract / Other):				
OVERHEAD (% or fixed amount per month): • Are out of office (i.e. hospital) billings charged overhead as well, and if so, what is the percentage?				

□ Yes

□ No

Does your clinic have an associate/practice agreement?

NOTE: The overhead information provided here must not exceed what will be provided to the ROS physician in their letter of offer.

If yes, a copy must be attached with your application.

UBC-ROS Family Practice Application Form - 2023



PLEASE PROVIDE INFORMATION ABOUT THE PATIENT POPULATION BEING SERVED: • How many patients does the clinic have? • What are the patient demographics? • Describe any special areas of focus in the patient panel – i.e., language other than English, mental health patients, HIV patients, high risk obstetrics, etc.			
ANTICIPATED PATIENT PANEL VOLUME FOR INCOMING ROS PHYSICIAN: • If the position is to assume an existing patient panel, how many patients are currently in the panel? • If the position is a new position, what is the anticipated attachment?			
IN ADDITION TO OFFICE WORK, DOES THE POSITION REQUIRE OR OFFE	L ER THE FOLLOWIN	NG	
HOSPITAL PRIVILEGES	☐ Required	☐ Available	☐ Not Applicable
EMERGENCY DEPARTMENT COVERAGE	☐ Required	☐ Available	☐ Not Applicable
LONG TERM CARE	☐ Required	□ Available	☐ Not Applicable
DOCTOR OF THE DAY PROGRAM	☐ Required	☐ Available	□ Not Applicable
WALK IN CLINIC (FOR ATTACHED PATIENTS)	☐ Required	□ Available	☐ Not Applicable
MATERNITY CARE	☐ Required	□ Available	☐ Not Applicable
If successful with this application, I/we (name of clinic, location and hereby agree to the requirements defined on Page 1 of this application for a Return of Service Family Physical Return Ph	ation and specif	ically, the decla	rations below, as
Declarations:			
 □ Position held for candidate's practice ready date of Summer 20. □ A designated physician is available to be part of a transition/me □ ROS physician able to establish or assume a patient panel suffit full service family practice. □ Clinic is not exclusively a walk-in clinic, and walk-in clinic cover. □ Position is not a locum position. □ Clinic space is adequate to accommodate new physician during exam rooms per physician. □ Clinic can provide a turn key practice, with no obligation or expertional indicated on the application form will not exceed what Associate/practice agreement for the clinic is attached ** □ Clinic is able to provide supervision to a provisional licensed Physician 	ntorship plan for cient to support age cannot except transition/ment ectation to purchat is provided to	eed 1 day per voltorship phase a nase or buy into the candidate of	week. and beyond, minimum 2 the practice. on the letter of offer.

Signature and Date Signed

NOTE: Unsigned forms will not be accepted.

Send completed form to: Island Health Medical Staff Recruitment

Email: medstaffrecruitment@islandhealth.ca