

The South Okanagan Team-Based Primary Care Clinic Model

The One to Watch

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JCC Pre Forum Presentation

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South Okanagan Similkameen
Division of Family Practice

Disclosure Statement

We have nothing to disclose



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History - 2018

- South Okanagan Similkameen early adopter of Primary Care Network
- 75% of clinics had 3 or fewer providers
- 8,000 unattached patients - projected to be 22,000 unattached by 2022

[VIDEO - Click to Play](#)



Vision

- All patients attached
- More large clinics
- Team integration
- Retain and recruit providers
- One chart

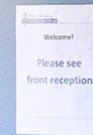
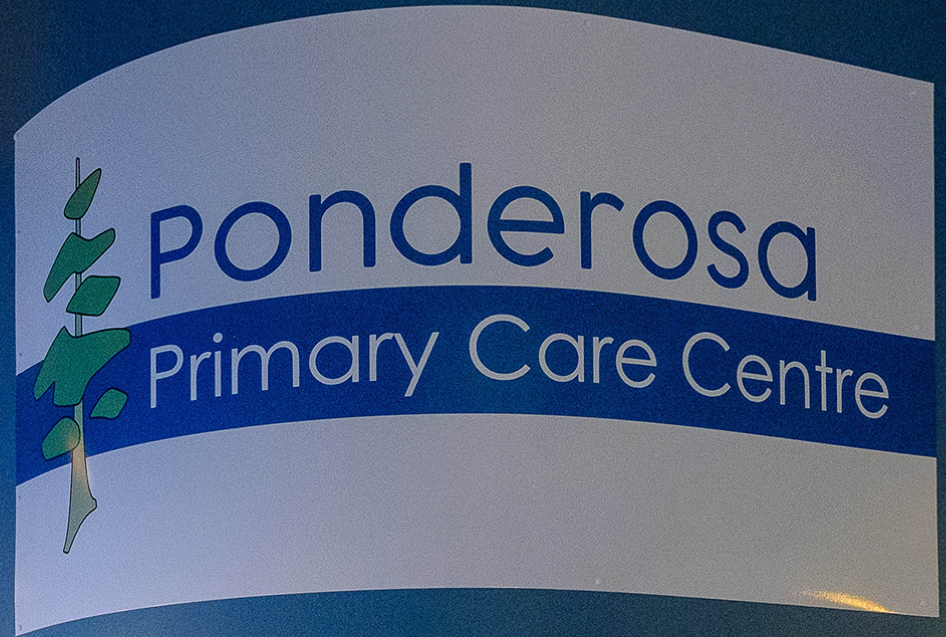


Ponderosa

Primary Care Centre

Prototype

- Limited number of Primary Care Network clinicians
- Chose to locate majority of clinicians at one clinic
- Aim to demonstrate results of an effective team
- Goal to build the case for more Ponderosas



Ponderosa Primary Care Centre

Small Space

\$340,000 Ministry provided capital funding with Primary Care Network service plan

12 exam rooms

2 consult rooms

10 touchdown spaces

3,300 square feet

Large Team

29 team members:

- 6 family physicians
- 3 nurse practitioners
- 5 allied health professionals
- 2 registered nurses
- 3 specialists
- 8 medical office assistants
- 2 long-term locums



Unique: Team Calls the Shots



Team builds common visions

Team spends time learning each other's areas of expertise

Team meets regularly to problem-solve and innovate

Team retains clinical autonomy but embraces standardization

Team relationships are strong

Unique: Division Expertise



Division
manages
clinic
operations



Division hires
and manages
medical office
assistants



Division is
accountable for
Primary Care
Network goals



Division
supports team
integration
(PCN change
management)



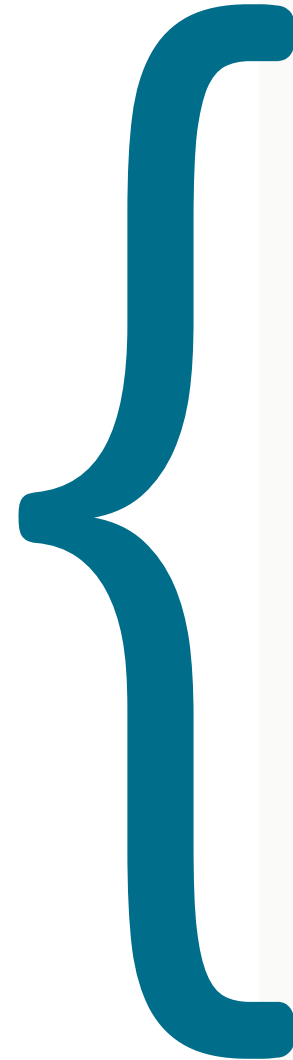
Division
facilitates
collaboration



Division trusted
as experts in
the business of
primary care

Story: RN Standard of Work

- Needed to determine RN roles
- Division worked with RNs and the team to identify **areas of work**
- Refined the standard of work at regular meetings with the team
- Determined best use of RN time and expertise
- Constantly refining to fit the need



AREAS OF WORK

New Patient Intake
Profile Building
Medication Reconciliation
Case Conferences
Chronic Disease Management
Post Hospital Discharge
Same Day Access
Respiratory Assessments
Quick Procedures
Patient Education
Patient Triage
Complex Care
Procedure Assist
PAP and Sexual Health

Story: “My Way to Health” Group Visits



Dietitian received high volume of referrals for weight loss

Dietitian was trained in “My Way To Health” group visits

Dietitian subsequently introduced group visits to Ponderosa

4 group visits = 52 patient encounters



Results: Meeting the Quintuple Aim



PATIENT-CENTRED CARE

- 6,800 patients receive care they value
- Open 8-8, 7 days a week
- RNs: 50% of each 12 hour shift open for same day visits
- FPs/NPs: Each have 1 hour/day open for same day visits

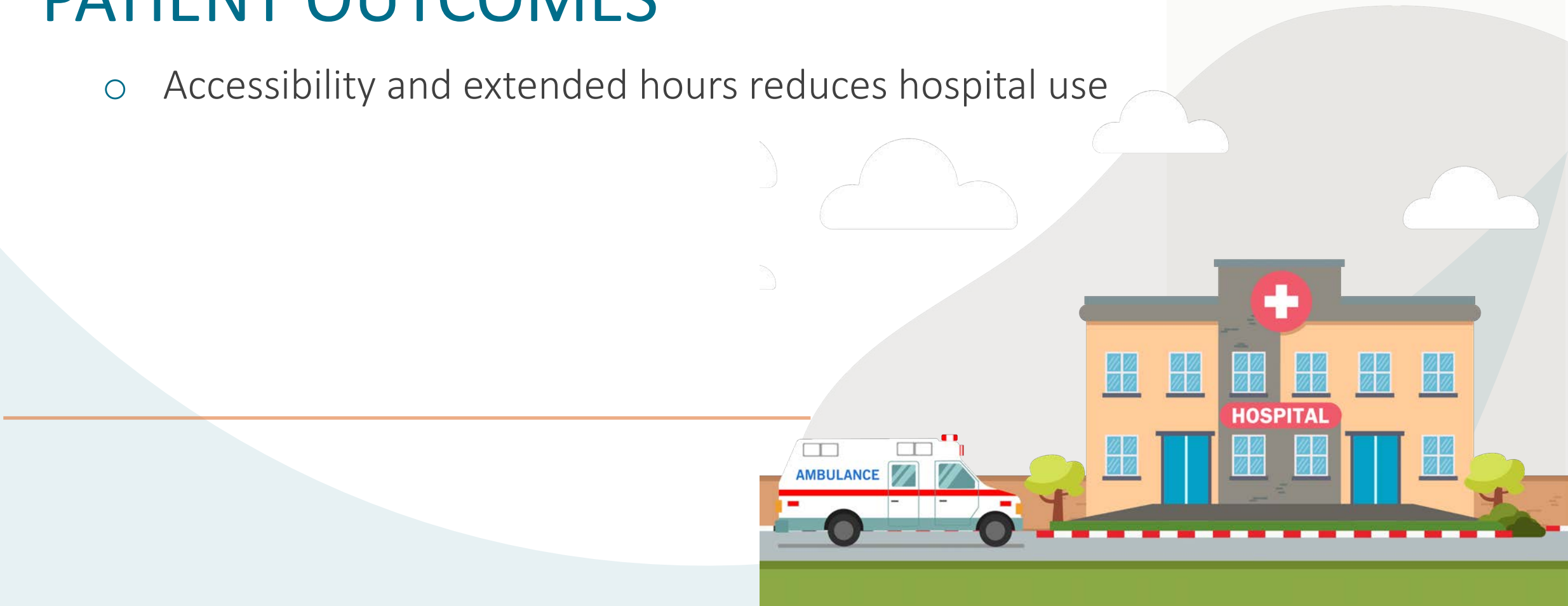


Results: Meeting the Quintuple Aim



PATIENT OUTCOMES

- Accessibility and extended hours reduces hospital use



Results: Meeting the Quintuple Aim



CARE TEAM WELLBEING

- 3 retiring doctors have been replaced
- Waitlist of providers wanting to work at Ponderosa
- High allied health retention and work satisfaction



Results: Meeting the Quintuple Aim



COST EFFECTIVE

- Efficient use of space and resources, low overhead, 10% administration
- Team members work to top of scope



Results: Meeting the Quintuple Aim



HEALTH EQUITY

- Patients have access to all members of team



Results: Meeting the Quintuple Aim



PATIENT-CENTRED CARE

PATIENT OUTCOMES

CARE TEAM WELLBEING

COST EFFECTIVE

HEALTH EQUITY



We Need Another Ponderosa



Solve the 5,300 attachment gap

Requirements:

- Capital for a larger clinic space
- More allied health, nurse and nurse practitioner contracts
- Continued change management
- Division clinic management



Questions?



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