

2020 / 2021 SIDFP Board of Directors

VOTING PACKAGE

Nominee Application, Bios and Conflict & Confidentiality Pledge



September 1, 2020

Nominees

(In alphabetical order)

- 1- Claire Block
- 2- J. Charles Lamb
- 3- Jane McGregor
- 4- Laura Ritonja
- 5- Matthew Ward
- 6- Vanessa Young

1- CLAIRE BLOCK



Briefly describe why you are interested in a director position with the SIDFP:

To leverage my leadership experience in Canadian and US Family Medicine to grow and influence positive change for the future success of Family Medicine in the South Island Region.

Briefly describe any ability and/or skills you can contribute to the governance of the SIDFP:

I am extremely organized and efficient. For example, I have built numerous complex call schedules and in ten years of family practice I have never left a chart note open for more than 24 hours. I have previous leadership experience and training through my Chief Residency, completion of a Physician Leadership course through Davita Healthcare, and in my prior role as Department Chair of Family Medicine at the Everett Clinic. I have proven ability to adapt to, as well as influence change. I helped guide our 90-practitioner department through a large merger with a national healthcare organization and successfully advocated for new physician-mothers' rights to have breast-pumping breaks without losing their benefits.

Biography:

I am a family physician currently practising in Victoria since 2019. I completed my residency at the University of Washington in Seattle, where I lived and worked for nearly a decade. During that time, I acted as Chief Resident, built a new fellowship program in Global Health, taught medical students, served as Department Chair for a large physician-run multi-specialty clinic, where I oversaw and represented the voice of over 90 FPs and advanced-care practitioners, and had two kids, just to keep things interesting.

Prior to that, I completed my medical training and Masters in Public Health at Tulane University in New Orleans, in the aftermath of Hurricane Katrina. In those four years, I learned how to rebuild a house, a city, and a health care system. Most importantly, I learned how to care for the most vulnerable and found my true calling in Family Medicine.

I grew up in Toronto. The daughter of immigrants, I was raised to understand the importance of working hard, striving for excellence, and being thankful for what one has. I met my husband while

1- CLAIRE BLOCK cont'd

doing summer research at the Hospital for Sick Children, amidst my undergraduate studies in Cell Biology at McGill University. Throughout all of our adventures, we never lost sight of our Canadian values and vowed to raise our children in Canada.

Given my background, I am in a unique position to represent the voices of members at large and to influence the decisions that will ultimately improve medical care in this region.

DECLARATION OF COMPETING INTERESTS

Please answer the following questions:

1. Do you currently accept or have you in the past five years accepted funding from a Pharmaceutical company, Information Technology company, Medical Supply company or community based medical organization for any of the following:

Funding Type:

Organization:

A fee for speaking?

No

A fee for organizing education?

No

Funds for research?

No

Financial support for a member of your staff?

No

Fees for Consulting?

No

Purchase of or maintenance of IT equipment

No

2. Do you hold any stocks or shares in any organization that may in any way gain or lose financially from your work with the Division?

YES: _____ NO: ✓

3. Do you hold a University appointment?

YES: ✓ NO: _____

4. Do you sit on any boards of health care organizations or community organizations or societies that may gain or lose financially from your work with the Division?

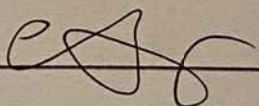
YES: _____ NO: ✓ IF YES, PLEASE SPECIFY: _____

DECLARATION OF COMPETING INTERESTS CONT'D

5. Do you hold any leadership positions in any health care organizations or community organizations or societies that may gain or lose from your work with the Division?
YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____
6. Do you have any other competing financial interests?
YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____

I, Claire Block have read the above questions, understood them, and hereby certify that my answers are true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of any facts, will render this pledge void.

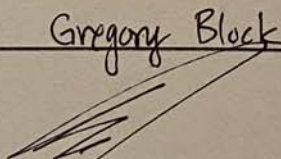
SIGNATURE: _____



WITNESS NAME: _____

Gregory Block

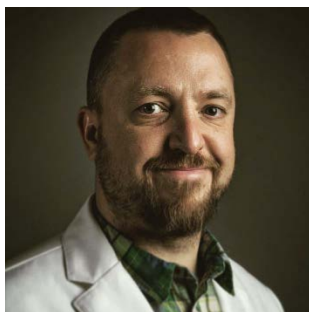
WITNESS SIGNATURE: _____



DATE: _____

Aug 25, 2020

2- J. CHARLES LAMB



Briefly describe why you are interested in a director position with the SIDFP:

The landscape of general practice will be changing significantly over the next few years. I wish to participate effectively in this change as a Director with the SIDFP, representing the interests of my fellow members.

Briefly describe any ability and/or skills you can contribute to the governance of the SIDFP:

My current experience in both community and hospital general practice gives me an understanding of the problems general practice is facing. My problem-solving skills contribute to creative and effective solutions to these problems while my leadership abilities help to develop and communicate these solutions.

Biography:

I was born in Calgary, Alberta. I received my Bachelor of Commerce from the University of Calgary in 2000. My study and subsequent work experience focused on Operations Management.

I received my Medical Doctorate from the University of Calgary in 2010. I completed my General Practice residency in Victoria in 2012, during such time I was the Medical Resident – Board Member of the SIDFP. I completed my General Practice – Anesthesia fellowship in 2013. I was Chief Resident of the UBC General Practice – Enhanced Skills Residency Program in 2013. I practiced community and hospital Primary Care Medicine, Emergency Medicine, and General Practice Anesthesia in Squamish, British Columbia from 2013 to 2015. I returned to Victoria in 2016 and continued practicing community and hospital Primary Care Medicine along with Emergency Medicine. In 2017, I joined Saanich Medical Centre, inheriting several hundred unattached patients from the Saanich Peninsula and its retiring physicians. In 2018, I became the Chief of Staff of Saanich Peninsula Hospital and completed my term on August 31, 2020.

I am a husband of nine years and a father of two boys, ages six and four.

I also enjoy film, tennis, soccer, video games, and falling asleep in the summer shade.

DECLARATION OF COMPETING INTERESTS

Please answer the following questions:

1. Do you currently accept or have you in the past five years accepted funding from a Pharmaceutical company, Information Technology company, Medical Supply company or community based medical organization for any of the following:

Funding Type:

Organization:

A fee for speaking?

A fee for organizing education?

Funds for research?

Brave Cooperative

Financial support for a member of your staff?

Fees for Consulting?

Purchase of or maintenance of IT equipment

2. Do you hold any stocks or shares in any organization that may in any way gain or lose financially from your work with the Division?

YES: **X** _____ NO: _____

3. Do you hold a University appointment?

YES: **X** _____ NO: _____

4. Do you sit on any boards of health care organizations or community organizations or societies that may gain or lose financially from your work with the Division?

YES: **x** _____ NO: _____ IF YES, PLEASE SPECIFY: SPH General Practice Society

DECLARATION OF COMPETING INTERESTS CONT'D

5. Do you hold any leadership positions in any health care organizations or community organizations or societies that may gain or lose from your work with the Division?
YES: ☒ NO: ☐ IF YES, PLEASE SPECIFY: SPH General Practice Society
6. Do you have any other competing financial interests?
YES: ☐ NO: ☒ IF YES, PLEASE SPECIFY: _____

I, J. Charles Lamb have read the above questions, understood them, and hereby certify that my answers are true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of any facts, will render this pledge void.

SIGNATURE:



WITNESS NAME:

Sienna Bourdon

WITNESS SIGNATURE:



DATE:

August 31, 2020

3- JANE MCGREGOR



Briefly describe why you are interested in a Director position with the SIDFP:

I have been a board member since 2016, first as a resident member, and I am now just finishing my first term as an elected member. The SIDFP has been a wonderful and formative experience for me as a new to practice physician. I consider Victoria home and have every intention of practicing here for the vast majority of my career. Over the last few years, being able to hear from our members about what is needed for us as physicians, and for our patients has been inspiring, and I would like to continue to work towards improving the vast challenges currently facing primary care. I would like to continue to be a voice at the table, advocating for our membership and trying to push forward meaningful change.

Briefly describe any ability and/or skills you can contribute to the governance of the SIDFP:

Having been a member of the Board for the past 4 years I have seen the PCN process through from pitch, to planning, and now starting implementation. I will be the first to admit the process has not been easy, and that what we initially envisioned was never really on the table. However, having been through the process I think I am well situated to continue to advocate for positive change where it is available, and continue to try and focus the lens on long term sustainability of primary care.

Outside of the PCN (despite it being quite all consuming the last couple of years) my goal is to get back to the things that our members valued most from the SIDFP. Health and wellness, Dine and Learns, Physician support etc.

I have also had the privilege of being co-chair of the division with Dr Vanessa Young this past year and have gained a lot of skills through her mentorship that I feel I can continue to be of value to the board.

Biography:

I was raised mostly in Victoria despite quite a mobile early childhood and truly consider the island "home". I attended UVic and completed a BSc(Hons) in Kinesiology before moving to Vancouver to

3- JANE MCGREGOR cont'd

attend medical school at UBC. I happily returned to Victoria and completed the family medicine residency program here, finishing in 2018. Since graduation I have locumed in a variety of areas mostly doing full spectrum family medicine including obstetrics. Outside of medicine I have two young daughters, a husband and a dog who I love to spend time adventuring with.

DECLARATION OF COMPETING INTERESTS

Please answer the following questions:

1. Do you currently accept or have you in the past five years accepted funding from a Pharmaceutical company, Information Technology company, Medical Supply company or community based medical organization for any of the following:

Funding Type:

Organization:

A fee for speaking?

N/A

A fee for organizing education?

N/A

Funds for research?

N/A

Financial support for a member of your staff?

N/A

Fees for Consulting?

N/A

Purchase of or maintenance of IT equipment

N/A

2. Do you hold any stocks or shares in any organization that may in any way gain or lose financially from your work with the Division?

YES: _____ NO: JMC

3. Do you hold a University appointment?

YES: JMc NO: _____

4. Do you sit on any boards of health care organizations or community organizations or societies that may gain or lose financially from your work with the Division?

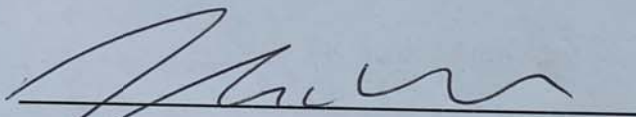
YES: _____ NO: JMc IF YES, PLEASE SPECIFY: _____

DECLARATION OF COMPETING INTERESTS CONT'D

5. Do you hold any leadership positions in any health care organizations or community organizations or societies that may gain or lose from your work with the Division?
YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____
6. Do you have any other competing financial interests?
YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____

I, Jane McGlynn have read the above questions, understood them, and hereby certify that my answers are true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of any facts, will render this pledge void.

SIGNATURE:



WITNESS NAME:

Therese Hanlon

WITNESS SIGNATURE:



DATE:

Aug 31, 20

4- LAURA RITONJA



Briefly describe why you are interested in a Director position with the SIDFP:

I am interested in supporting family physicians in my community and being part of a collaborative team working toward improvement in the delivery of primary care on the South Island.

Briefly describe any ability and/or skills you can contribute to the governance of the SIDFP:

I work well in a team, am a good listener and multi-tasker. I also live in the community where I work which gives me a good perspective of my community's needs.

Biography:

Laura grew up on the Saanich Peninsula, attending Keating, Mt. Newton and Stelly's schools. She completed undergraduate education at the University of Victoria, medical school at Queen's University and a Family Medicine residency with a Care of the Elderly fellowship at the University of Ottawa.

When she returned to Vancouver Island in 2001, she worked in various capacities before settling down as a community family physician at Ocean Pier Medical Centre in Sidney in 2012. Here, she also enjoys her role as preceptor to family medicine residents. When not at work, Laura loves living on a hobby farm with various animals, gardening, paddleboarding and spending time with her husband and children.

DECLARATION OF COMPETING INTERESTS

Please answer the following questions:

1. Do you currently accept or have you in the past five years accepted funding from a Pharmaceutical company, Information Technology company, Medical Supply company or community based medical organization for any of the following:

Funding Type:

Organization:

A fee for speaking?

A fee for organizing education?

Funds for research?

Financial support for a member of your staff?

Fees for Consulting?

Purchase of or maintenance of IT equipment

No

2. Do you hold any stocks or shares in any organization that may in any way gain or lose financially from your work with the Division?

YES: _____ NO: ☒

3. Do you hold a University appointment?

YES: ☒ NO: _____

Clinical Instructor in the
Department of Family Practice

4. Do you sit on any boards of health care organizations or community organizations or societies that may gain or lose financially from your work with the Division?

YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____

DECLARATION OF COMPETING INTERESTS CONT'D

5. Do you hold any leadership positions in any health care organizations or community organizations or societies that may gain or lose from your work with the Division?
YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____
6. Do you have any other competing financial interests?
YES: _____ NO: ☒ IF YES, PLEASE SPECIFY: _____

I, Laura Ritonja have read the above questions, understood them, and hereby certify that my answers are true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of any facts, will render this pledge void.

SIGNATURE:

Laura Ritonja

WITNESS NAME:

DR. W. L. GASHI

WITNESS SIGNATURE:

[Signature]

DATE:

27. 8. 2020

5- MATTHEW WARD



Briefly describe why you are interested in a Director position with the SIDFP:

I am interested in serving on the board of the SIDFP as I have a keen interest in helping to develop our Primary Care Networks, as well as the other various programs offered by the division.

Briefly describe any ability and/or skills you can contribute to the governance of the SIDFP:

I have formal training in Public Sector Management (DPSM, University of Victoria, 2010), with an interest in project management. I also have fairly broad managerial skills which I have developed and honed in my role as Medical Director of the Eagle Creek Medical Clinic.

Biography:

Dr. Matthew Ward BSc, MSc, DPSM, MD, CCFP, is a Family Physician and Medical Director of the Eagle Creek Medical Clinic in View Royal, BC. He is a Clinical Assistant Professor with the Department of Family Practice in the University of British Columbia and an executive board member of the Victoria Medical Society. He is heavily involved in the integration and expansion of Eagle Creek to join as a flagship clinic within the Western Communities Primary Care Network. His background education also includes a Diploma in Public Sector Management (University of Victoria). He is a hard-working, collaborative and fair-minded professional who wants to see innovative changes to primary care in Greater Victoria. He would be pleased to serve in a Directorship for the South Island Division of Family Practice.

DECLARATION OF COMPETING INTERESTS

Please answer the following questions:

1. Do you currently accept or have you in the past five years accepted funding from a Pharmaceutical company, Information Technology company, Medical Supply company or community based medical organization for any of the following:

Funding Type:

Organization:

A fee for speaking?

No

A fee for organizing education?

Clinical Instructor

Funds for research?

No

Financial support for a member of your staff?

No

Fees for Consulting?

No

Purchase of or maintenance of IT equipment

No

2. Do you hold any stocks or shares in any organization that may in any way gain or lose financially from your work with the Division?

YES: Yes? NO: _____

Eagle Creek Medical Clinic will be joining to the Western Communities PCN.

3. Do you hold a University appointment?

YES: Yes NO: _____

I am a 25% shareholder in this clinic.

[Signature]
DWEL.

4. Do you sit on any boards of health care organizations or community organizations or societies that may gain or lose financially from your work with the Division?

YES: Yes? NO: _____ IF YES, PLEASE SPECIFY: Victoria Medical Society

DECLARATION OF COMPETING INTERESTS CONT'D

5. Do you hold any leadership positions in any health care organizations or community organizations or societies that may gain or lose from your work with the Division?
YES: _____ NO: No IF YES, PLEASE SPECIFY: _____

6. Do you have any other competing financial interests?
YES: _____ NO: No IF YES, PLEASE SPECIFY: _____

I, Matthew Ward have read the above questions, understood them, and hereby certify that my answers are true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of any facts, will render this pledge void.

SIGNATURE:



WITNESS NAME:

Melissa Ward

WITNESS SIGNATURE:



DATE:

August 23 2020

6- VANESSA YOUNG



Briefly describe why you are interested in a Director position with the SIDFP:

Ongoing curiosity and optimism in primary care reform.

Briefly describe any ability and/or skills you can contribute to the governance of the SIDFP:

6 years SIDFP Board experience. GPSC experience as an Island Division representative for 1 year.

Biography:

It is with ongoing curiosity and, surprisingly, optimism, that I'm putting my name forward again to be a Board member/Director, for the South Island Division of Family Practice. Now that the Primary Care Network work is moving into implementation (after an admittedly agonizing 2 year planning phase) I feel the SIDFP can regain focus on you, our members. I wish to see us focus on physician wellness; safe social connection despite the pandemic; abundant educational opportunities for cultural safety and anti-racism dialogue; and direct clinic IT support and solutions.

Now is an exciting time in community primary care, with an alternate funding model about to be available, for the first time, which has the potential to decrease the current inequity which many of us feel.

Please support me, to support you. Thank you for your support over the past 6 years.

DECLARATION OF COMPETING INTERESTS

Please answer the following questions:

1. Do you currently accept or have you in the past five years accepted funding from a Pharmaceutical company, Information Technology company, Medical Supply company or community based medical organization for any of the following:

Funding Type:**Organization:**

A fee for speaking?

No

A fee for organizing education?

other than med student teaching, no

Funds for research?

NO

Financial support for a member of your staff?

No

Fees for Consulting?

not other than from MSP for

sport medicine consulting

Purchase of or maintenance of IT equipment

NO

2. Do you hold any stocks or shares in any organization that may in any way gain or lose financially from your work with the Division?

YES: _____ NO: ✓

3. Do you hold a University appointment?

YES: ✓ NO: _____

4. Do you sit on any boards of health care organizations or community organizations or societies that may gain or lose financially from your work with the Division?

YES: _____ NO: ✓ IF YES, PLEASE SPECIFY: _____

DECLARATION OF INTERESTS FORM

1. Do you hold any leadership positions in any health care organization or community organization or agencies that may gain or lose from your work with the Chapter?
YES ☐ NO ☒ IF YES, PLEASE SPECIFY _____

2. Do you have any other competing financial interests?
YES ☐ NO ☒ IF YES, PLEASE SPECIFY _____

I, Shirley Taylor have read the above questions, understood them, and hereby certify that my answers are true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of any facts, will render this pledge void.

SIGNATURE:

Shirley Taylor

WITNESS NAME:

Shirley Taylor

WITNESS SIGNATURE:

Shirley Taylor

DATE:

10 Aug 10