Powell River Division of Family Practice



ANNUAL REPORT 2020-21

FOR THE PERIOD ENDING MARCH 31, 2021

MESSAGE TO MEMBERS

2020 has been an unprecedented year marked by a global pandemic that has affected all of us and our community in many ways. As the pandemic was evolving, we had to guickly adapt to the needs of our members. The 2020 summer survey identified 3 priorities: PPE access, public communication, and easily accessible COVID testing in the community. With the help of partners such as Vancouver Coastal Health, Ministry of Health and local governments, we were able to support the coordination and distribution of PPE to all clinics. Also, we hired a communication specialist to support public communication activities such as the Complex Clinic website, articles in local publications and social media Finally, campaigns. we supported the establishment of the Complex Clinic, a site that provided convenient access to COVID testing and assessment. None of these priorities would have been possible without the tireless involvement of physicians who provided insights and led the way. Having said that, such involvement also came at a members were going cost as through considerable disruption in providing patient care. We acknowledge the burden experienced on both personal and professional levels.

While the pandemic was (and still is) a disruptive period, it also provided new opportunities to support our mission - create opportunities for physicians to improve patient care. Firstly, the pandemic provided a unique occasion to partner with VCH. For example, the Complex Clinic was co-led and co-developed, bringing together the strengths of both organizations in order to offer a unique service to the community. Secondly, by shifting our member engagement to virtual meetings, we were able to reach out to members in a different way. From All GP/NP evening meetings with guest speakers to Community of Practices sessions, the engagement activities were often well attended and convenient to participate in. While we recognize the benefits of in-person meetings, we will also consider the legacy of virtual engagement in the future. Finally, the pandemic offered a new way to support members by engaging directly with the community through a variety of communication platforms. Informed by members and partners and supported by Division staff, these communication strategies allowed an effective way to reach out to the public and decrease the burden on clinics. Again, the pandemic offered new ways of doing things that might continue to be valuable for members in the future.

2020 was also a year of reckoning, with the publication of the In Plain Sight report and the discovery of unmarked graves at the Kamloops residential school. These events were a reminder of the long journey to build trust and achieve true reconciliation with the Indigenous peoples of Canada. Two years ago, with the leadership of our board of directors, our organization started to contemplate what our role could be on this reconciliation journey. In February 2021, our organization released а Declaration of Commitment to advancing cultural humility and safety within health services in our community with the goal to improve health outcomes for Indigenous people. We look forward to supporting our members on this important journey.

We thank our Board for their strong leadership and dedication to supporting our organization and our members during this time of disruption, which clearly demonstrated the value of a strong diversified board composed of physicians and community members. We also wanted to acknowledge our staff for their dedication and efforts during this most extraordinary time. Most importantly, thank you for being our members. Your engagement in improving patient care continues to be our drive to do better!

Dr. David May, Board Chair *Guy Chartier, Executive Director*

PRIORITY #1 — SUPPORTING PHYSICIANS IN THEIR CLINICS

Continuing Professional Development (CPD) / Continuing Medical Education (CME) Coordination (service)

- Presented 22 medical education and professional development programs to delivered programming on topics suggested by members and on areas where they feel less confident in their practice. Included:
 - Mainpro+ accredited ER SIMs monthly in person, in full personal protective equipment
 - Virtual programs as an adaptation to Covid-19
- Developed OR SIMs monthly series for Mainpro+ & MOC accreditation.
- Transitioned Rural CME Committee membership to Facility Engagement's Steering Committee. This aligns Powell River's RCME committee with BC's new Community CME funding program (joining in 2022-23).
- Across CME series and stand-alone CMEs, 92% of respondents reported that they acquired new knowledge and the session met their needs. 84% of respondents reported that the session will help them modify their practice.

The pearl I took from the session was: 'Always say aloud what meds you give/ what you do.' – *physician CME attendee*



Patient Medical Home (PMH) Office Support (service)

- In collaboration with VCH, organized infection prevention and control assessment in 5 clinics.
- Established of a vulnerable populations working group to monitor impact of COVID on vulnerable patients and clinics and explore support.
- Coordinated the ordering and distribution of Personal Protective Equipment (PPE) for clinics.

Pathways (resource)

The Division continued to promote Pathways, a website which provides pertinent specialist referral information and an overview of availability in the area.

UpToDate (resource)

• Provided members with complimentary sharps disposal service to their medical clinics

Sharps Disposal (service)

- Provided members with complimentary sharps disposal service for their medical clinics.
- Extended service to local veterinary and dental clinics.
- Collected 400 lbs from 15 clinics.

PRIORITY #2 — SUSTAINING A ROBUST COMMUNITY OF PHYSICIANS

Recruitment Coordination (service/resource)

• Supported Powell River Medical Clinic's recruitment of an international medical graduate in the Return of Service program.

It is my privilege to serve the Powell River community and I look forward to meeting you. – *resident in UBC's Coastal Program, originally trained in Indonesia*

Locum Coordination (service)

- Supported members to post locum opportunities online.
- Tested a member-led virtual locum recruitment pilot (launched May 2021).

Powell River Medical Society Support (service)

• Provided administrative support to PRMS for collecting annual dues and for awarding a scholarship at Brooks Secondary School .

Community of Practice (service)

- Enhanced collegiality and communication among members during a difficult time by hosting presentations online.
- Provided platform for members to discuss emerging matters such as how to design the new covid clinic for optimal patient care and safety.
- Held 6 sessions on topics of psychology, gynecology, illness management, paramedicine and referrals.

Welcome Gifts (service)

- Distributed 33 welcome gift bags to guests, presenters, visiting medical students, locums, residents and physicians.
- Supported diverse artisans by sourcing locally made gifts and products.
- Received donations from four local businesses who contributed gift certificates and coupons to support physician recruitment [River City Coffee The Laughing Oyster Nancy's Bakery Tourism PR].

PRIORITY #3 — INCREASING PATIENT ACCESS TO TIMELY, APPROPRIATE AND COORDINATED CARE

Unassigned Inpatient Care (project)

- Supported a local solution for providing admission and discharge to unattached patients at Powell River General Hospital.
- Provided \$80,300 in incentive payments to family physicians for being on call.

Time to Listen (Child Youth Mental Health Substance Use) (project)

It's well-recognized that supporting children, teens and young adults with mental health challenges is one of the most difficult aspects of family medicine. It's very complex diagnostically, time-intensive, and requires layers of intervention and support that fall outside our typical scope of practice. And it's high stakes for our patients. This project has been really challenging with so many moving parts to identify and understand, but really progressive. It's been eye-opening to clarify mental health resource strengths and gaps in our community. With youth voices and professional partners, we are building a better, all-hands-on-deck approach. We've got lots to accomplish in this next year, and I'm optimistic that the resource improvements we'll be seeing will be felt as a significant shift in how we provide mental health care -- in our offices, the ED, and in the community.

-- Dr. Leta Burechailo, Youth Clinic & Family Physician

- Physician Leads: Dr. Rob Head, Dr. Leta Burechailo.
- The number of local youth seeking help for substance-use and/or mental health crises is rapidly increasing; physicians and care providers have identified systematic barriers for youth to receive adequate support overall from local to provincially provided services.
- A collaborative and steering committee has been formed that includes SD47, CYMH, Tla'amin Health, VCH, and PRDoFP.

From an Emergency Department standpoint, youth mental health and substance use patients traditionally have been a conundrum for us. There were minimal services that we were aware of, let alone how to connect with those services after hours. This project has focused the community on how to connect what we were all seeing, a dramatic increase in youth mental health problems, with the services available for these youth. The outcome is going to greatly benefit all that are involved.

-- Dr. Rob Head, ER Physician

Wrap Around Care for Rural Seniors (project)

- Physician Leads: Dr. Martin Andreae & Dr. Kati Bahadori.
- Decided on two tools to assist in identifying signs for frailty and caregiver burnout, the Clinical Frailty Scale and the Zarit Screener (both in line with VCH Home Care).
- Engaged with a new senior/caregiver representative and an advisory committee.
- Hosted a Community of Practice in partnership with the Community Paramedicine Program.
- Made a recommendation to the Primary Care Network committee. To ensure sustainability of wrap around coordinated care, additional positions will be needed in the community. The idea of a "community navigator" or a "link worker" would be necessary so more focus can be given to health protective factors and linking individuals to relevant programs that can support their independence. Ideally this position could report back to family physicians on interactions with the senior and their family.
- Learned (building on the above recommendation) about a pilot program funded by United Way funding "social prescribers/link workers". Project manager met with United Way to inform them that our community would be very interested in a next round of funding.
- Drafted an Early Signs of Frailty tool for use in the community. The hope is to educate and adopt a community effort in preventing/slowing frailty.
- Called upon the support of PSP to assist in a review of the VCH home and community care referral process. In addition, guidance has been provided to clinics to ensure understanding and accuracy of appropriate referrals.
- Aligned with Doctors of BC's new policy on healthy aging and frailty prevention.

Long Term Care Initiative (project)

Physician Leads: Dr. Claire Bonsor, Dr. Martin Andreae, Dr. Kati Bahadori

The goal of the Long-Term Care Initiative is to improve the health of our vulnerable population in residential care. Using a multidisciplinary approach, we are focusing on increasing physician involvement, delivering more effective care conferences and improving communication between varied health care providers. These are all essential to provide better care for our residents. *--Dr. Claire Bonsor*

FETCH Community Health Online Database (resource)

- Provided an accurate online database of over 365 community health resources.
- Connected with over 1000 unique users per month visiting the FETCH website (2250 page views/month), with 45% of them living in Powell River.

Primary Care Network (PCN) (project)

- Physician Leads: Dr. Charles van Zyl & Dr. Sally Watson.
- Submitted a proposal for an early draw on resources (positions) to support the community.
- To develop the proposal, the following groups were consulted:
 - \circ Existing Division project groups working with vulnerable populations
 - o PCN patient advisory committee
 - Physician working group

COVID Response

Yes, it's empowering. Helps us all make informed decisions. Encourages vigilance and is an excellent reminder that we all have a role to play in keeping our community safe. Thank you for providing this information in an accessible way!

- Facebook commenter responding to post on case numbers

- Established a COVID testing and assessment clinic at the Recreation Complex.
- Coordinated physicians and partners steering committee to support local decision-making.
- Implemented a public communication strategy, including social media, website, newsletters and local publications articles.

I appreciate you reaching out. The stories from the Division of Family Practice are important and keep our readers up to date on the changing landscape of COVID-19. – Paul Galinsky, Peak Reporter

GIVING THANKS

The Powell River Division of Family Practice would like to thank all its contributors, members and partners for supporting our mission to improve patient care in our community!

Powell River Division of Family Practice Staff

- Guy Chartier, Executive Director
- Christien Kaaij, Senior Project Manager
- Brendan Behan, Project Manager
- Carly Martin, Project Manager
- Robyn Jacob, Administrative Manager
- Michelle Hignell, Coordinator, Education & Recruitment

Powell River Division of Family Practice Contractors

- Crystal Artindale, Administrative Support
- Austen Gunn, Pathways Administrator
- Emma Larocque, Communications Officer
- Eden Head, Summer Student

FINANCIAL STATEMENTS

Statement of Operations & Change in Net Assets for the Year Ending March 31

REVENUE	2021	2020
Government Funding	866,732	734,390
Facility Engagement Initiative	12,000	12,000
Hospital Garden	15,170	36,000
Complex Clinic	173,040	-
Interest	-	11
	1,066,942	682,401

EXPENSES	2021	2020
Advertising & Promotions	20,271	7,065
Amortization	2,030	2,050
Insurance	3,121	3,542
Interest and Bank Charges	1,858	1,244
Meetings and Events	9,904	32,199
Office	41,970	24,879
Physician Sessional Fees	343,735	194,673
Professional Fees	22,163	10,752
Rental	13,932	15,926
Repair and Maintenance	220	719
Salaries and Wages	398,639	198,426
Sub-contracts	183,986	148,257
Telephone	4,209	2,475
Travel	545	14,343
Utilities	1,359	537
	1,047,942	657,087

Excess of expense over revenue for the year	19,000	25,314
Unrestricted net assets, beginning of year	57,788	32,474
Unrestricted net assets, end of year	76,688	57,788

Note: Audited financial statements available to members upon request

EXPRESSION OF GRATITUDE

The Powell River Division of Family Practice gratefully acknowledges the funding of the General Practices Service Committee, Rural Coordination Centre of BC and Shared Care Committee, as well as the support of the Division of Family Practice provincial office and Shared Care central office. We extend our thanks for the contributions of our many community partners and community representatives.

We respectfully acknowledge that we live and work on the traditional and treaty lands of the Tla'amin people.





CONTACT US

Contact information

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Powell River Division of Family Practice

The Divisions of Family Practice Initiative is sponsored by the General Practice Services Committee, a joint committee of the BC Ministry of Health and Doctors of BC.