

# DRAFT PRINCIPLES

1. The intent will always be to offer these shifts to those performing longitudinal family medicine first and thus these shifts are not owned nor guaranteed to any individual but ebb and flow with the work performed in the community and the interest from the community members.
2. The maximum number of full-day urgent care shifts allocated to any one longitudinal FP/NP will be 4 per month (subject to annual review), thus avoiding too much time away from their own practice and panel of patients, and discouraging FPs/NPs from quitting their practices entirely to work solely in urgent care.
3. There will be coordination amongst UPCCs to ensure an individual FP/NP doesn't receive allocation of urgent care shifts across the 6 UPCCs.

## Priority allocation order

1. Longitudinal practices in the surrounding community, especially those actively building their practices (based on full/part time allocations if more interested than shifts available).
  - a. Locums for longitudinal practices may pick up these shifts from the clinic/provider they are locuming for
2. If no one performing longitudinal family practice is able to fill these shifts then as a temporary measure shifts can be filled by any community/retired physician or Nurse Practitioner who is qualified.