

# **ANNUAL PLAN**

2019-2020

Approved by the Board February 19, 2019







**ENGAGEMENT** 



**PRACTICE SUPPORT PROGRAM** 



**PATHWAYS** 



**PATIENT ATTACHMENT** 



RESIDENTIAL CARE



RECRUITMENT



SHARED CARE



**UP TO DATE** 

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### **EXECUTIVE SUMMARY**

#### Our 2019-2020 work STARTS HERE

Here at the Thompson Region Division of Family Practice we want to effect change. Our membership wants to see positive results in their practices and for their communities. We want to mobilize the impact our work has for our membership, our communities, our region, and our province. We need strong partnerships to achieve this. We need data to inform our direction. We need healthy well physicians and nurse practitioners to be able to provide the best care for their patients and to engage in system work. We are directly accountable to our membership and our funders. However, we recognize our work impacts our community, our region, and our province.

Our annual plan for 2019-2020 outlines how we at the Thompson Region Division of Family Practice will take steps towards creating our vision: A community of Family Physicians and Nurse Practitioners working collaboratively with community partners focusing on wellness, satisfaction, and sustainability for both the patient and the primary care providers.

As we move into 2019-2020, we bring a renewed energy on delivering work that is aligned with our four strategic areas of focus: prioritizing recruitment and retention; emphasizing wellness and engagement; collaborating with partners and decision makers; and promote interdisciplinary communication.

Throughout this annual plan our work is laid out into the following five categories: Division, Membership, In-Practice, Partnerships, and Health Service Planning while acknowledging the financial and member-led commitment to delivering each initiative. Although the work has one category and one strategic area of focus identified we recognize that much of the work we do impacts multiple categories and often contributes to multiple strategic areas of focus.

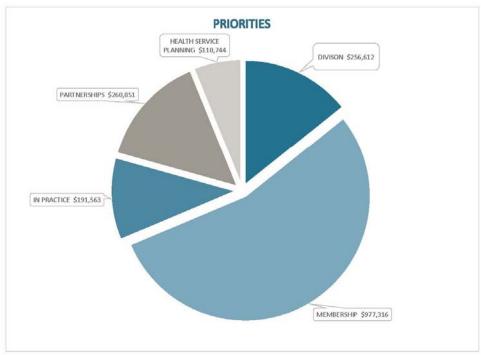
- 1. Division: Manage the governance and strategic operations of the organization.
- **2. Membership:** Facilitate activities that promote member wellness and engagement, as well as advocate for and support member priorities.
- **3. In-Practice**: Support the membership to further develop business and/or practice capacity, including recruitment and retention efforts.
- **4. Partnerships:** Work collaboratively with decision makers, partners and the community at large in the pursuit of excellence in family medicine and patient care.
- **5. Health Service Planning:** Conduct, or partner on, research; community engagement; and data analysis to build integrated primary care services and develop innovative care models.

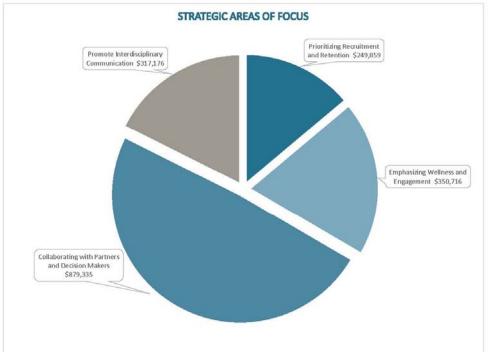
As we work towards the achievement of the our 'what', we continue to strive to deliver on our 'how' by applying our organizational values of quality, collaboration, inspiration, innovation, and resilience throughout all of our work.





Total Budget Expenses (equal to total revenue)				\$ 1,797,086
DIVISON			\$ 256,612	
Governance	ş	68,649		
Finance, Audit and Planning	\$	74,842		
Accounts	\$	18,837		
Human Resources	\$ \$ \$ \$	14,947		
Business & Office Management	\$	27,807		
Occupational Health and Safety	\$	9,828		
Logistics and Coordination	\$	17,413		
Media	\$	15,280		
Information Technology	\$	9,009		
MEMBERSHIP			\$ 977,316	
Member Engagement	\$	24,566		
Engagement Events	\$	15,578		
Member Wellness	\$	22,912		
Communication	\$	17,839		
Networks/Working Groups	\$ \$ \$	10,000		
Physician Candidate Management	\$	26,240		
Mental Health and Substance Use	\$ \$	11,782		
Women's Health	\$	46,200		
Chronic Pain	\$ \$	18,000		
Electronic Access to Specialist Expertise		37,400		
Access and Continuity of Care for Older Adults	\$	160,000		
GPSC Residential Care Initiative	\$	526,800		
Maternity Care	\$	59,999	0000000	
IN PRACTICE	_ ,	24.000	\$ 191,563	
Business Services to Practices	\$	31,000		
Practice communication support	\$	10,775		
UpToDate	\$	4,548		
Physician Emergency Preparedness	\$ \$	10,000		
Business Development Business Cases Support	\$	31,000		
Family Practice Development Fund	\$	31,000 12,090		
Physician Recruitment - Awareness	\$	31,050		
Pathways	\$	30,100		
PARTNERSHIPS	Ţ	30,100	\$ 260,851	
Practice Support Program (PSP)	\$	6,532	 200,031	
Royal Inland Hospital Physican Association	\$	8,490		
Quality Improvement and Engagement		6,544		
Collaborative Services Committee	\$ \$	28,030		
Interdivisional Strategic Council	\$	16,355		
Shared Care Steering Committee	\$	31,500		
Rural Community Health Tables	\$	4,200		
Community Health Action Committee	Ś	4,200		
Thompson Rivers University Research	\$ \$	5,000		
Coordinating Care for Older Adults	\$	150,000		
HEALTH SERVICE PLANNING	,		\$ 110,744	
Community Visioning for Primary Healthcare	\$	15,120	,	
Physician Recruitment - Advocacy	\$	5,760		
Capacity Analysis:		20,163		
Community/Member Mapping	\$ \$ \$	20,163		
Health Service Planning Data Initiative	\$	16,860		
Specialized Services	\$	25,000		
Integrated System of Care Working Group	\$	7,678		





### DIVISON

This portfolio comprises of activities required to ensure the Division manages the governance and strategic operations of the organization. A brief summary of the objectives and expected outcomes other actives are provided below along with the associated budget.

### Governance

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To provide fiduciary and strategic oversight for the organization. To provide informed, engaged and resilient leadership.

#### Impact:

- All fiduciary, legal and member obligations are met and remain viable.
- The engagement, direction, wellness, and leadership of our membership is maintained.

#### **Outputs:**

- Meeting packages and minutes
- Briefing notes
- Strategic plan
- Annual plan
- Annual Report
- Annual General Meeting

Succession planning for Board and Executive Director

Anticipated Funding Source: Infrastructure Budget Total: \$68,649

Physician Lead: Dr. Graham Dodd Project Lead: Monique Walsh

### Fiance, Audit and Planning

Strategic Areas of Focus: Collaborate with partners and decision makers

**Goal:** To maintain the finances and fiscal health of the Society in an efficient and cost-effective manner. To grow the Society owned funds, through prudent and effective short-term investments. To have the cleanest audit, with the guickest turn around, so to report to the Board, Members and Funders.

#### Impact:

The assets of the members are safeguarded. Integrity of the accounting system and reporting is sustained, while ensuring compliance with guidelines, policies, contract and agreements.

Resources are brought into the community to support member-led initiatives.

#### **Outputs:**

- Annual planning
- Annual audit
- · Monthly and Quarterly financial reporting
- All financial and regulatory deadlines are met
- All daily finance processed
- Growth in the society's assets

Anticipated Funding Source: Infrastructure Budget Total: \$74,842

Physician Lead: Dr. Ben Anders Project Lead: Christopher Phillips

### **Accounts**

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To provide accurate and timely reimbursement of members for their participation and leadership of Division initiatives as well as to our vendors. To further develop the Electronic Fund Transfer process to include majority of our engaged members and vendors; to increase, and expand on, monthly financial reporting.

#### Impact:

A consistent and timely payment for membership involved in Division work.

Increase our desirability in the community to be a partner in business.

#### **Outputs:**

- Accurate monthly and quarterly financial reporting
- Efficient and timely payments to Accounts Payable
- Reporting on cash flow,

Anticipated Funding Source: Infrastructure Budget Total: \$18,837

Physician Lead: Dr. Ben Anders Project Lead: Jennifer Baldes

### **Human Resources**

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To maintain a healthy, effective, and efficient team. To promote a culture of growth, excellence, balance, relationships, and grace.

#### Impact:

Team members are well supported and able to deliver on their maximum potential, both personally and professionally.

#### **Outputs:**

- Quarterly On Targets (performance management) for each team member
- Human Resource, policy and procedures manuals
- Professional Development opportunities for staff
- Resource library
- Weekly staff meetings
- · Regular team development sessions
- Knowledge exchange management

Anticipated Funding Source: Infrastructure Budget Total: \$14,947

Physician Lead: Executive Project Lead: Monique Walsh

## **Business and Office Management**

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To oversee all financial resources and administrative aspects of the Division; ensuring the office runs efficiently and contributing to the smooth implementation of initiatives and project.

#### Impact:

Timely day-today management of offices and the operations of premises.

#### **Outputs:**

- Inventory and acquisition of equipment
- Continuity Plan

**Anticipated Funding Source: Infrastructure** Budget Total: \$27,807

**Physician Lead: Executive Project Lead:** Christopher Phillips

### Occupational Health and Safety

Strategic Areas of Focus: Emphasize wellness and engagement

Goal: To ensure a proactive approach to the occupational health and safety of all staff, membership, and guests during their interactions with the Division.

#### Impact:



A safe and healthy work environment for staff, members and partners.

#### **Outputs:**

- Quarterly review of the premises, recording any concerns and either immediate correction where applicable, or review and plan for implementation of correction.
- Availability of OHS Officer to staff, membership and guests to record, review and implement necessary correction of issues as they present.
- Semi-annual unscheduled emergency drills to ensure staff is ready and able to react to situations as they arise.
- Quarterly discussions at team meetings regarding issues and corrections taken or that need to be addressed.

**Anticipated Funding Source: Infrastructure** Budget Total: \$9,828

**Physician Lead: Executive Project Lead:** Jennifer Baldes

### Logistics and Coordination

Strategic Areas of Focus: Ocollaborate with partners and decision makers

Goal: To provide logistical and administrative coordination for all Division initiative; this includes tracking; breaking projects into tasks; maintaining timelines and project goals; creating and updating workflows; monitoring of progress; identifying potential issues; and maintaining all project documentation required. Reporting on project performance and deliverables as required.

#### Impact:

Ensuring the Division provides the best support, training, and knowledge sharing in an organized and timely manner for each initiative.

#### **Outputs:**

- Robust Content Resource System to support members, MOAs, specialized services, and community allied health services
- Professionally coordinated meetings and events
- Report on delivered targets to members

Anticipated Funding Source: As per initiative Budget Total: \$17,413

Physician Lead: As per initiative being coordinated Project Lead: Rachann Pedersen

### Media

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To communicate how primary care providers are making a difference for practices, patients, and the healthcare system. To build relationships with media and partners to raise awareness about Division work, shift public perceptions, and support community engagement efforts.

#### Impact:

- Members have a way to communicate successes.
- Proactive and positive media stories about healthcare. Increased awareness of the essential roles of primary care providers.
- Ocommunicate successes with Doctors of BC social media channels.

#### **Outputs:**

- Communications/media plan
- Regular interactions with media outlets
- Proactive media outreach
- Media tracker
- Social media strategy
- Issues management messaging

Anticipated Funding Source: Infrastructure Budget Total: \$15,280

Physician Lead: Executive Project Lead: Chelsea Brookes

### Information Technology

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To increase our availability, accuracy and security of Information for the membership, Board and Committees, project teams, and Division staff. To research, acquire, implement the use of new technology.

#### Impact:

Project leads, committee members and membership have access to up-to-date information for informed opinions and decisions. Secure access to committee documentation regardless of location.

Increase involvement of community involvement in project structure and advancement with access to teamwork spaces and information created specifically for that group.

The ability and security to share information and include regional representation on committees as required.

#### **Outputs:**

- Written procedures on technology use, information storage, and management
- Partners and team usage of technology systems in place
- Quarterly reviewing, reporting and status of technology and information sharing
- Management of technology inventory
- Acquisition of appropriate technology for initiatives

Anticipated Funding Source: Across initiatives Budget Total: \$9,009

Physician Lead: Executive Project Lead: Jennifer Baldes

### **MEMBERSHIP**

This portfolio comprises of activities required to promote member wellness and engagement, as well as advocate for and support their priorities. A brief summary of the objectives and expected outcomes other actives are provided below along with the associated budget.

### Member Engagement

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To inform and interact with members about the on-going work of the Division and gather input on strategic direction. To develop a process where we welcome new members to the community.

#### Impact:

Supported and connected membership.

New members are welcomed to the community.

Providers are retained in the community.

#### **Outputs:**

- Member engagement strategy
- Welcome process for new members to our community
- Board/HLC/Staff "buddy" for each member
- Tracking of regular communications with each members
- Established metrics for evaluation
- Member surveys

Anticipated Funding Source: Infrastructure Budget Total: \$24,566

Physician Lead: Dr. Servaas Swart Project Lead: Rachann Pedersen

# **Engagement Events**

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To host events that engage, inform, and create conversation with the Division's membership around matters of community, regional, and provincial relevance. To create a social environment for attendees to get to know their colleagues specialized service providers and community members.

#### Impact:

For physicians and nurse practitioners to build relationships with other physicians and care providers.

To enhance and increase relationships for physicians and nurse practitioners for better support of each other, their practice and community.

#### **Outputs:**

- Host three member engagement events
- Co-hosted events with Royal Inland Hospital Physician Association members (RIHPA)

Anticipated Funding Source: INF and PMH Networking Budget Total: \$15,578

Physician Lead: Dr. Servaas Swart Project Lead: Rachann Pedersen

### Member Wellness

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To support members personally and professionally for the establishment of a healthy, connected, and resilient community of family physicians and nurse practitioners.

#### Impact:

- O Increased member satisfaction. Increased communication and collegiality.
- Increased locum and MOA availability for urgent/last minute needs, including mental health day.
- Active community and healthy living promoted.
- OA culture of wellness for primary care providers working in the Thompson Region.

#### **Outputs:**

- Medical Office Assistant and locum networks
- CME topics related to resilience
- Engagement events with a social aspect
- Partnerships with local services that promote health and well being
- Wellness principles incorporated in to all aspects of Division work
- Healthy meal planning at meetings
- In-practice support framework

Anticipated Funding Source: Infrastructure Budget Total: \$22,912

Physician Lead: Dr. Liz Ewart Project Lead: Chelsea Brookes

### Communication

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To improve the communications between Division members, the community, and our partners by developing and maintaining relevant information channels. To develop a robust communication strategy that will help to support proactive media outreach. To keep physicians updated and informed about the work of the Division and relevant information.

#### Impact:

Improve effective communication with membership. Membership has a better understanding of the Division's services, impacts, and supports.

- Oncreased communication and collegiality between members and the Division.
- Standardized approach in Division office around communication material.
- Oncreased traffic and awareness to the Division website and use of supported tools.

#### **Outputs:**

- Quarterly newsletter
- Website and statistics
- Communications plan
- Discussion papers/Case studies
- Information publications
- Correspondence
- Promotional materials
- Social media strategy

Anticipated Funding Source: Infrastructure Budget Total: \$17,839

Physician Lead: Executive Committee Project Lead: Chelsea Brookes

## **Networks/Working Groups**

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To create networks and working groups with the medical community which will inform and improve provider practice capacity and member wellbeing. To effectively facilitate and manage these groups to ensure that there is a value-based outcome for its members. To assist in retention efforts by identifying opportunities to bring together members who will find support in one another.

#### Impact:

Networks that are supported to reflect and act on their desires, goals, learnings and decisions including the social, clinical and business realms.

Members will experience support and satisfaction through inclusion in groups which bring together individuals facing similar experiences and challenges in an opportunity to share successes and stories.

Changes made to processes or practices as a result of ideas generated, or information shared by the network or working group.

Although there are no definitive regional or provincial impacts recognized at this time, there may be the opportunity to create regional networks, or to have the work of these groups shared at a higher level.

#### **Outputs:**

- Meeting minutes
- Key findings
- Tools or protocols
   Network/Working Groups identified and shared with community

Anticipated Funding Source: Patient Medical Home Budget Total: \$10,000

Physician Lead: Lead of individual networks Project Lead: Shelley Breen

# Physician Candidate Management

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To engage physician candidates with a value-based approach, which will lead to a satisfactory pairing of candidate and community needs.

#### Impact:

Oldentification of, and a meaningful fit for, current and future professional and personal needs, thus ensuring the candidate will attach and remain in the community.

Candidate attachment to a community with a meaningful fit will provide our community with increased access to primary care. Impact will also be felt in the physician community as they meet and help inform potential candidates in physician practice in our region.

#### **Outputs:**

- Site visit schedules, best practices, surveys and feedback
- Candidate communication strategy
- Candidate database and profiles
- Candidate welcome package
- List of community supports for new physicians
- Best practices and key findings
- Regular PDSA reviews
- Partnerships with community groups (Tourism Kamloops, Venture Kamloops)

Anticipated Funding Source: Infrastructure Budget Total: \$26,240

Physician Lead: Dr. Servaas. Swart Project Lead: Shelley Breen

### Mental Health and Substance Use

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** Through collaboration, communication and community, the goal of this proposal is to develop the building blocks for a framework, which will provide sustainable, supportive, accessible and comprehensive mental health care in the Thompson Region.

#### Impact:

Mental Health community collaboration will highlight necessary changes to increase program efficacy, identify existing and potential gaps.

Participation in the Shared Care Adult Mental Health and Substance Use Network will help knowledge exchange between community and provincial practices.

#### **Outputs:**

- Project Proposal and budget
- List of collaborating community groups and contacts
- Gap analysis document

Anticipated Funding Source: Adult Mental Health EOI Budget Total: \$11,782

Physician Leads: Dr.Nataliya Grishin and Dr. Cynthia Lau Project Lead: Shelley Breen

### Women's Health

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To enhance timely access, information, support and continuity of care in Gynecological health across the Thompson Region by managing opportunities for improvement in the patient journey and providing wrap-around specialized patient care through family physician involvement.

#### Impact:

OIndividual practices will see a benefit through a streamlined referral and patient care processes for Gynecological procedures. Both specialist and family physicians will also receive education and training in this area, if desired.

Development of a successful model of team-based Gynecological care and will bring together Allied Health services, nurses, specialist and family physicians, and medical imaging and lab resources. The result will provide an organized and collaborative wraparound care system for patients.

The work from this project will be felt provincially as patients requiring Gynecological services are not solely from the Thompson Region. Full circle communication with the physicians in locations outside of our region will provide improved patient care as the women's health care team provides full follow-up with either the patient or physician.

#### **Outputs:**

- Meeting minutes
- · Monthly and final reports
- Gap analysis document
- Best practice data from like clinics/system
- Business plan
- Key findings
- Process map
- Patient information media (ie. printables, web information, posters)
- Physician information media (ie. printables, web information, posters)
- Physician training information

Anticipated Funding Source: Women's Health Clinic Budget Total: \$46,200

Physician Leads: Dr. Selena Lawrie and Dr. Paula Lott Project Lead: Shelley Breen

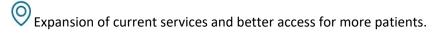
### Chronic Pain

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To enhance the spectrum of chronic pain services by engaging and supporting communication and knowledge exchange between family and specialist physicians and other allied health providers.

#### Impact:

Patients will experience better management of their pain, fewer ED visits, more coordinated care and better quality of life



More opportunities for patients, physicians and other health professionals to access specialized care.

Engagement with Shared Care chronic pain spread network provincially, contributions and learnings from others engaged in the same work.

#### **Outputs:**

Meeting minutes and meeting materials

Proposal

Chronic Pain services on Pathways

Anticipated Funding Source: Chronic Pain

Budget Total: \$18,000

Physician Lead: Dr. Baker, Claire Wilson, Dr Brownlee

Project Lead: Sue Lissel

## Electronic Access to Specialist Expertise

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To make specialist care more accessible to the patient and primary care teams in different settings. To bring new and existing communication tools under an umbrella of services enabling communications between patients, specialists and primary care teams using telephone, video and secure texting connectivity (with future e-Consult capabilities) within a secure technology environment.

#### Impact:

Members have access to secure technology for communication. Members have access to specialist schedule through RIH switchboard. Members have direct access to specialists.

More accessibility of specialist care and expertise to the patient and primary care teams in different settings. Improved communication between primary care providers and specialists.

On Interior EASE Advisory Committee has been established to share best practices regionally.

#### **Outputs:**

- Engagement event
- Training and information material
- Regular reports
- Participating measurements

Anticipated Funding Source: EASE Budget Total: \$37,400

Physician Lead: Dr. Wayne Dong Project Lead: Chelsea Brookes

# Access and Continuity of Care for Older Adults

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To enhance the access and continuity of care for older adults with chronic co-morbidities by improving methods of team-based communication and knowledge exchange between family and specialist physicians, and other health care providers. The opportunity to build a robust community

committee including other health providers will be explored, as well as possible business supports for physicians to more efficiently manage their older patients.

#### Impact:

Improved patient experience around the Patient Medical Home, including timely access and attachment for older adult population.

Enhanced relationships between physicians and a collaborative approach for change where needed. Improved physician knowledge and enhanced skill set for geriatric care. Collaboration around improving existing fee codes, EMR usage along with other business supports.

Engagement with Shared Care older adults spread network provincially, contributions and learnings from others engaged in the same work.

#### **Outputs:**

- Addendum to current proposal
- · Meeting minutes and meeting materials
- Monthly Division Board reports
- Communication tools and processes
- Shared documentation for teams
- Continuous quality improvement cycles
- Summary report

Anticipated Funding Source: Access and Continuity of Care

Budget Total: \$160,000

Physician Lead: Dr. Cribb and Dr. Varma

Project Lead: Sue Lissel

### **GPSC** Residential Care Initiative

Strategic Areas of Focus: Collaborate with partners and decision makers

**Goal:** To build local networks between physicians, residential care homes, patients and family, community pharmacy, post-secondary institutes, and the health authority which will improve resident satisfaction and improve clinical care.

#### Impact:

Support physicians in achieving the five best practices which will contribute to improved patient care. Improve geriatric clinical knowledge within the community of physicians and health care professionals caring for patients in residential care.

Enhance local relationships between physicians (including medical residents), residential care homes, pharmacy, and the health authority. Opportunity to influence the development of best

practices at the local level and within the broader context of residential care through local partnerships. Contribute to long-term sustainability of physician coverage for residential care patients in Kamloops.

System level outcomes include reduced unnecessary or inappropriate hospital transfers, improved patient-provider experience, and reduce healthcare costs.

#### **Outputs:**

- Meeting Minutes and meeting materials
- Monthly Division reports
- Quarterly physician invoices, physician self-evaluation, and residential care home evaluation
- Long-term care orientation tool for providers
- Bladder Scanner evaluation
- Host CME opportunity
- New Patient Attachment Incentive guideline
- Development of allied health contracts

Anticipated Funding Source: GPSC Res Care Budget Total: \$526,800

Physician Lead: Dr. Andrew Wyne Project Lead: Melanie Todd

## **Maternity Care**

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** Community approach to supporting providers in enhancing the existing maternity care model to ensure short stability of service delivery and to effectively plan for long-term sustainability of maternity care for patients accessing care in Kamloops.

#### Impact:

Maternity care providers will feel supported and valued in the desired service delivery model, while referring providers will benefit from enhanced maternity care services for their patients.

The community will benefit from the co-location of services supporting the spectrum of maternity care, and an interdisciplinary approach to service delivery in preparation for Primary Care Networks.

A sustainable model of maternity care benefiting patients seeking care from outlying communities and offering maternity care support to referring providers.

Engagement in the Provincial Maternity Care Initiative to build relationships, leverage successes and explore best practices for maternity care.

#### **Outputs:**

- Meeting minutes & materials
- Monthly and final report
- Journey of care mapping
- Stakeholder engagement event(s)
- Business plan development

Anticipated Funding Source: Maternity Budget Total: \$59,999

Physician Lead: Drs. Brighouse, Sigalet, and Poelzner Project Lead: Melanie Todd

### IN PRACTICE

This portfolio comprises of activities required to support the membership to further develop business and/or practice capacity, including recruitment and retention efforts. A brief summary of the objectives and expected outcomes other actives are provided below along with the associated budget.

### **Business Services to Practices**

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To collaborate with the Division membership to support and enhance the business operations of their family practice with a focus on developing to tools, best practices, and the sharing of resources. To offer a series of educational and information business related seminars based on feedback from the membership (e.g. financial literacy). To provide one on one business supports and needs assessments to enhance practice efficacy.

#### Impact:

The family physician currently in practice will improve efficacy in business management and will grow in business skill and confidence. In turn, more time will be available to focus on clinical delivery. New graduates will be supported in the set up of a family practice. Retiring family physicians will be supported to ensure a smooth and successful retirement process.

By streamlining systems and improving business functionality, the family physician will be afforded more time to focus on patient care. Therefore, the community, as a whole, will benefit from the inpractice business services.

#### **Outputs:**

- Business Plans
- In Practice Site Schedule
- CRM Reports

- Monthly and Quarterly Reports
- Business Tool Kit
- Business Information Resource Webpage
- Grant Proposals

Anticipated Funding Source: PMH Networking Budget Total: \$31,000

Physician Lead: Dr. Lennard Pretorius Project Lead: Faith Bateman

### **Practice Communication Support**

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To assist Division members in development and management of communication strategies or materials to support their practice needs. This includes content creation, graphic design, branding and basic web development and production support.

#### Impact:

This initiative will provide in-practice support for physicians, driving physician retention and satisfaction efforts.

#### **Outputs:**

- Communications content for practices
- Practice Website updates
- Social media advertisements for practices
- Print advertisements for practices
- Posters, Rack cards, Invitations, and Business cards for practices
- Logo design for practices

Anticipated Funding Source: PMH Networking Budget Total: \$10,775

Physician Lead: Dr. Lennard Pretorius Project Lead: Shelley Breen

### **UpToDate**

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To connect physician members to UpToDate, an award-winning online clinical decision tool, at no cost as part of their membership.

Impact:

Access to more than 10,500 peer-reviewed topics in 23 specialities, along with drug information, patient info sheets, and medical calculators.

OAll UpToDate topic searches are CME eligible for registered users.

#### **Outputs:**

• UpToDate access for membership

Anticipated Funding Source: Infrastructure Budget Total: \$4,548

Physician Lead: Supported centrally Project Lead: Rachann Pedersen

# Physic an Emergency Preparedness

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To submit a proposal and conduct planning for an emergency preparedness program for physicians that not only creates a business continuity program for practices in an emergency situation, but also includes a plan for how family physicians link to community, regional and provincial emergency plans.

#### Impact:

- Supports practices and create networks that can work together in an emergency.
- Oncreased ability for patients to access primary healthcare in an emergency.
- Increased ability for better patient care in emergency situations by creating working relationships between family physicians and regional partners.
- Opportunity for integrated care during an emergency with the result being better patient care.

#### **Outputs:**

- Project proposal
- Focus Groups Meeting minutes
- Monthly/quarterly reports
- Meeting material
- Business continuity resources
- Research (including literature review) conducted by TRU to inform proposal and broader plan
- Memorandum of Understanding (local, regional, provincial governments)

Anticipated Funding Source: Emergency Preparedness EOI Budget Total: \$10,000

Physician Lead: Dr. Graham Dodd and Dr. Joslyn Conley Project Lead: Rhonda Eden

## **Business Development**

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To identify opportunities for business development and work with community partners to support primary health care initiatives in Kamloops. To develop business case modelling expertise within the Division and explore strategic partnership opportunities with local business to improve the delivery of primary health care in Kamloops. The Division will take an active role in ensuring the viability of the initiatives, stewarding the implementation and advocating on behalf of the stakeholders. The Division will also establish the analytics to identify growth opportunities and recommend a course of action.

#### Impact:

An increase in the number and quality of primary health services will benefit individuals requiring health care services and physicians will be supported to deliver that care.

Effective and robust business development initiatives designed to enhance and support the delivery of primary health care will provide long term value in and for the community.

An increase in viable, sustainable, and effective business development will support the Interior Health Authority's mandate of delivery primary health care.

#### **Outputs:**

- Business Models
- Business Plans
- Feasibility Reports
- Communication Plans
- Monthly and quarterly reports
- Grant Proposals

Anticipated Funding Source: PMH Networking Budget Total: \$31,000

Physician Lead: Dr. Lennard Pretorius Project Lead: Faith Bateman

### **Business Case Support**

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To assist in the creation of business plans and feasibility studies for practices and clinics to create a strong business case for practice financing, setup, longevity and retention.

#### Impact:

A new to practice or physician looking to open or partner in a clinic will be better informed and have a strong business process and plan to guide and assist in decision making and financing. Review current business plan to identify possible efficiencies and improve processes.

More physicians going into practice or partnering in clinics, with strong planned expected processes and plan that also reduces stress on the physician(s) and increases there understanding, duration and quality of work-life.

#### **Outputs:**

- Feasibility studies
- Business plans

Anticipated Funding Source: Project dependant Budget Total: \$31,000

Physician Lead: Physician lead of project Project Lead: F. Bateman and C. Phillips

# Family Practice Development Fund

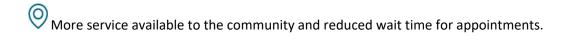
Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** Physicians in Practice and in clinic settings will make plans for working together and or expand their existing practice to offer increase service and access to care, with the assistance of a small grant from the Division.

#### Impact:

More physicians expanding and upgrading practice and service with one-time cost reduction support for infrastructure.

Member support for the continuation and funding of the grant fund to support the community.



#### **Outputs:**

Fund applications

• Expanded or new practices/clinics

• Storytelling of successes from fund recipients

Anticipated Funding Source: PMH Networking Budget Total: \$12,090

Physician Lead: Dr. Lennard Pretorius Project Lead: Christopher Phillips

## Physician Recruitment - Awareness

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To increase the awareness of physician practice opportunities in the Thompson Region through marketing practices.

#### Impact:

Community impact will be felt through successful implementation of a marketing and awareness plan leading to attachment of new physicians in our region.

#### **Outputs:**

- Printed marketing materials (banners, posters, rack cards)
- Marketing content for web
- Event materials
- List of producers for regional goods
- Key findings
- Marketing plan
- Print and web advertisements
- Advertising schedule
- Social media schedule
- Key contact list

Anticipated Funding Source: Infrastructure Budget Total: \$31,050

Physician Lead: Dr. Servaas Swart Project Lead: Shelley Breen

### **Pathways**

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To maintain the Thompson Region data on the Pathways referral website, while increasing physician awareness and usage of Pathways and how it can enhance practice efficiency with current specialist and clinic services, referral mechanisms and wait times.

#### Impact:

Members are better informed of Specialist and Clinic services and associated referral processes, and clinical care is supported by accessibility to physician and patient resources, contributing to improved patient and provider experience.

Community of specialists and clinics receive more appropriate referrals and less enquires to their offices from the medical community and public concerning services/referrals.

Accessibility to regional and provincial services and resources for members referring outside of the community and likewise for members of other Divisions referring to Kamloops and area.

#### **Outputs:**

- Maintenance of Thompson Region data on Pathways website
- Monthly usage reports
- In practice education/training opportunities around this service

Anticipated Funding Source: Infrastructure Budget Total: \$30,100

Physician Lead: Dr. Harpreet Kelly Project Lead: Melanie Todd

### **PARTNERSHIPS**

This portfolio comprises of activities required to ensure the Division collaborates with decision makers, partners, and the community at large in the pursuit of excellence in family medicine and patient care. A brief summary of the objectives and expected outcomes other actives are provided below along with the associated budget.

### Practice Support Program

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To work collaboratively with PSP to support practices in their Patient Medical Home assessments, action plans, panel assessments, workflow, and quality improvement.

#### Impact:

ODIVISION members experience seamless coordinated service between PSP and Division services.

Community resources are better utilized and PMH networking is supported through PSP involvement.

#### **Outputs:**

Shared work plan

Completed panel assessments

• Completed PMH assessments

Anticipated Funding Source: Infrastructure Budget Total: \$6,532

Physician Lead: Dr. Graham Dodd Project Lead: Monique Walsh

### Royal Inland Hospital Physic an Association

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To work towards an integrated system of providers in our community where strategic planning, advocacy, networking, and relationship building occurs in the medical community across the acute and community portfolios.

#### Impact:

Members from both organizations are able to connect with one another on clinical, business, and social matters.

Ommunity is able to leverage and maximize resources it receives and work aligns with one another.

#### **Outputs:**

- Attendance at each other's meetings
- Shared work plan
- Shared event planning and attendance
- Co-location of organizations

Anticipated Funding Source: Infrastructure Budget Total: \$8,490

Physician Lead: Dr. Graham Dodd Project Lead: Monique Walsh

# Quality Improvement and Engagement Network

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To continue aligning the work of the Division, RIHPA, PSP, IH Research and IH QI department. Building off successful initiatives to plan, communicate and participate in ongoing discussions to better align the support provided and effort put into quality improvement initiatives that touch all these entities. Success will maximize clarity for our physicians, who we work to support through these initiatives.

#### Impact:

Maximizing clarity for physicians, as well as other professionals sitting on physician-lead committees regarding shared opportunities.

Maximizing funding opportunities to leverage collaborative dollars spent while mitigating duplicate initiatives, energy, resources, or complicating these efforts unnecessarily. Avoiding creating a frustrating system for physicians to navigate, where it is difficult to understand where to go, to whom and when.

Work towards better alignment across provincial collaborative committees and provincial initiatives.

#### **Outputs:**

- Establish guiding principles for collaboration
- Maintenance of spreadsheet documenting projects and physician leads
- Meeting action minutes
- Shared resources with membership

Anticipated Funding Source: Infrastructure Budget Total: \$6,544

Physician Lead: From each committee Project Lead: Sue Lissel

### Collaborative Services Committee

Strategic Areas of Focus: OCollaborate with partners and decision makers

**Goal:** To work with Health Authority, Ministry, GPSC and other partners to share information, collaborate on shared initiatives, and lead the development of service planning. To maintain an integrated system of care approach, involving acute, community, public and population health in discussions.

Impact:

Working with partners to ensure primary care provider voice is included and considered across the system of care.

Work towards better alignment across the system by reviewing data, sharing information, identifying shared work.

#### **Outputs:**

Meeting action minutes

• Shared resources and information sharing with membership

• Shared work plan

Anticipated Funding Source: Infrastructure Budget Total: \$28,030

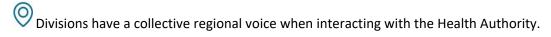
Physician Lead: Executive Project Lead: Monique Walsh

## Interdivisional Strategic Council

Strategic Areas of Focus: Collaborate with partners and decision makers

**Goal:** To actively contribute to the regional engagement and system level initiatives with other Divisions and the Health Authority.

#### Impact:



#### **Outputs:**

- Meeting minutes
- Board/HLC reports
- Attendance at quarterly meetings
- Knowledge Exchange folder on NAS

Anticipated Funding Source: Infrastructure Budget Total: \$16,355

Physician Lead: Executive Project Lead: Monique Walsh

### **Shared Care Steering Committee**

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To provide strategic leadership for Shared Care funded projects. To bring the Specialist and Family Physician communities together on matters of shared interest.

#### Impact:

Ocor

Community able to leverage and align shared care projects with other strategic initiatives.

#### **Outputs:**

Meetings minutes

• Supported Shared Care projects

Anticipated Funding Source: Shared Care Steering Committee

Budget Total: \$31,50

Physician Lead: Dr. Graham Dodd

Project Lead: M. Walsh

### Rural Community Health Tables

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To formalize partnerships and create linkages between these tables, not only to help build capacity towards health service planning and potential PCN planning, but so the Division can support our rural communities in a more robust way. Utilize these partnerships to assist in moving the community vision forward to action and help bridge the gap between community and the broader healthcare conversation.

#### Impact:

Provide better support to our members in rural communities and begin to create linkages between our members through the work of the local health tables.

OIncreased ability to advocate for services, resources, and healthcare transformation.

Increased support for rural communities throughout the Thompson Region, both in building relationships with our rural local health tables and by collaborating with the Rural and Remote Division and their communities.

Garnering information and feedback from Thompson Region communities that can inform provincial healthcare mandates.

#### **Outputs:**

- Memorandum of Understandings
- Meeting minutes
- External communications
- Engagement events
- Key messages
- Funding proposal

Anticipated Funding Source: Infrastructure Budget Total: \$4,200

Physician Lead: Physician leads in each community Project Lead: Rhonda Eden

### Community Health Action Committee

This committee is a local health table in Kamloops and has representation from Thompson Rivers University, City of Kamloops, Thompson Nicola Regional District, New Gold, Provincial Government, Interior Health, Venture Kamloops, School District 73, and community at large.

Strategic Areas of Focus: OCollaborate with partners and decision makers

**Goal:** To work with this committee to move the community vision for primary healthcare forward to action and help bridge the gap between community, the Division, and the broader healthcare conversation. To partner with this committee to advocate for healthcare resources and services, including recruitment and retention of family physicians.

#### Impact:

- Provide support to our members in their pursuit to enhance primary healthcare in the region.
- Ability to advocate for services, resources, and healthcare transformation.
- Oncreased support for communities throughout the Thompson Region.
- Garnering information and feedback from Thompson Region communities that can inform provincial healthcare mandates.

#### **Outputs:**

- Meeting minutes
- External communications
- Engagement events
- Key messages
- Potential proposals

Anticipated Funding Source: Innovation, Community Engagement

Budget Total: \$4,200

Physician Lead: Drs. Dodd, Bantock, Swart

Project Lead: Rhonda Eden

# Thompson Rivers University Research

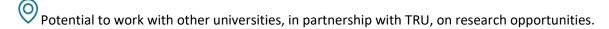
Strategic Areas of Focus: Collaborate with partners and decision makers

**Goal:** To establish a formalized partnership in order to work with the research department to create research opportunities that will support Division work as well as TRU researchers and grad student's area of interest.

#### Impact:



Increased opportunities for innovative student research at TRU which can positively impact healthcare.



Potential to work with other universities, in partnership with TRU, on research opportunities.

#### **Outputs:**

- Memorandum of Understanding
- Engagement events (TRU researchers and Division Project Leads)
- Literature reviews
- Research papers
- Meeting minutes
- Meeting material
- Engagement events
- Research grant proposals

Anticipated Funding Source: Infrastructure Budget Total: \$5,000

Physician Lead: Project dependent Project Lead: Rhonda Eden

# Coordinating Care for Older Adults

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To streamline coordination of care for Older Adults by bringing Specialists into the strategic planning for Health Service planning and networking in our community.

#### Impact:

Specialists and Family Physician engage in service planning and networking opportunities together.

#### **Outputs:**

- Meeting minutes
- Meet a specialists focused events

In practice outreach and business cases to support SP

Anticipated Funding Source: Coordinating Care Budget Total: \$150,000

Physician Lead: Dr. Alina Cribb and Dr. Kobus Styen Project Lead: Chelsea Brookes

### HEALTH SERVICE PLANNING

This portfolio comprises of activities required to ensure the Division conducts and/or partners on research, community engagement, and data analysis to building integrated primary care services; and develop innovative care models. A brief summary of the objectives and expected outcomes other actives are provided below along with the associated budget.

### Community Visioning for Primary Healthcare

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To re-engage the public to convey the findings and vision from the engagement activities in 2018, and to activate communities, including community health related committees, to be part of positive changes to primary healthcare and the global health of communities in the region. To conduct a region wide awareness campaign focused on public education with regards to the Division and current provincial healthcare initiatives as it relates to primary healthcare.

#### Impact:

- Bridge the gap between community and family medicine to positively impact primary healthcare.
- Greater awareness and education of the healthcare system and empowering the public to be a part of healthcare transformation.
- Create partnerships, and collaborate with existing partners, such as other Divisions, to build capacity towards health service planning and potential PCN planning.
- Garnering information and feedback from Thompson Region communities that can inform provincial healthcare mandates.

#### **Outputs:**

- External communication and educational materials
- Monthly/quarterly/final report
- Engagement events
- Meeting materials and minutes
- Engagement summaries
- Further funding proposal

Anticipated Funding Source: Innovation, community engagement Budget Total: \$15,120

Physician Lead: Project Lead: Rhonda Eden

- Dr. Chip Bantock
- Dr. Amina Wahbi
- Dr. Cornel Barnard
- Dr. Shane Barclay
- Dr. Ilke Marais
- Gail McNeil-Oliver Community Lead (Scotch Creek)

## Physician Recruitment - Advocacy

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To advocate on behalf of the physician community in partnerships to ensure equal consideration at decision-making tables.

#### Impact:

Impact will be felt by individual members in awareness that the Division is supporting the need to advocate for improvement in patient attachment.

Ocommunity impact will be felt through successful advocacy leading to attachment of new physicians in our region.

Awareness of the needs of and for physicians in the Thompson Region could see regional impact at decision-making tables.

Provincially, once aware of our needs, the Ministry of Health and Doctors of BC could take steps to alleviate issues within our region.

#### **Outputs:**

- Up to date physician capacity data
- Meeting minutes Regional Recruitment meeting
- Meeting minutes Interior Physician Recruitment Team
- Recruitment strategies
- Key findings
- Advocacy documents
- Practice opportunity postings

Anticipated Funding Source: Infrastructure Budget Total: \$5,760

Physician Lead: Dr. Servaas Swart Project Lead: Shelley Breen

# Capacity Analysis

Strategic Areas of Focus: Prioritize recruitment and retention

**Goal:** To collect data from completed surveys that are both specific and fluid, and that reflect the diversity and scope of our community of family physicians and their practices. With the results of this survey, the Division will have a detailed perspective on the state of the membership and will provide the background information needed to work collaboratively with our community and provincial partners to improve primary and continuous care in our community.

#### Impact:

- Highlighting support/services that the Division can provide.
- Help identify the needs of the community.
- Oldentify needs, allowing us to advocate regionally.
- Oldentify needs, allowing us to advocate regionally. Funding for recruitment and retention.

#### **Outputs:**

- Full capacity analysis survey
- Abbreviated capacity analysis survey
- Communications to members
- Key messages summary
- Data summary
- Final report

Anticipated Funding Source: PMH Networking Budget Total: \$20,163

Physician Lead: Dr. Servaas Swart Project Lead: Rachann Pedersen

# Community/Member Mapping

Strategic Areas of Focus: Emphasize wellness and engagement

**Goal:** To collect, identify and analyse information, which feeds health services planning, networks, specialized services, engagement, as well as other pertinent interdisciplinary areas in our community.

Impact:

Physician profiles are up to date. Division can provide areas for business improvement and networking options for physicians.

Ocan create strong community by linking networks, specialized services, etc.

Better reporting opportunities for successes and improvements in Thompson Region.

Better reporting opportunities for successes and improvements in Thompson Region.

#### **Outputs:**

 Robust CRM used to collect all pertinent and current data for all members, MOAs and allied health services

 Mapping data to detect geographical areas to address strengths, gaps and future working groups/networks, including cost savings and patient delivery.

Anticipated Funding Source: PMH Networking Budget Total: \$20,163

Physician Lead: Dr. Chip Bantock Project Lead: Rachann Pedersen

## Health Service Planning Data Initiative

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** To analyse Blue Matrix data provided by IH as part of a larger body of work to understand how patients are accessing primary health care services geographically, the types of services they use, and who those patients are socio-economically. This work will be a foundational piece of research to use as our community continues to explore primary care networks. An international literature review of best practices where PCN's currently exist will also help inform planning.

#### Impact:

Knowledge to improve access to care, empowerment of patients and improved caregiver and family support.

Knowledge to build confidence in physicians and administration moving towards a best practice model for PCN.

Knowledge of what infrastructure and governance systems could be put into place to support best practice for PCN.

Movement towards a PCN for Kamloops

#### **Outputs:**

- Analysed data for service planning
- Literature review
- Current state document

Anticipated Funding Source: Infrastructure Budget Total: \$16,860

Physician Lead: Drs. Bantock, Sigalet, and Lawrie Project Lead: Sue Lissel

### Specialized Services

Strategic Areas of Focus: Promote interdisciplinary communication

**Goal:** To connect specialized services (including community allied health, specialists, and family physicians with a special focus) to Patient Medical Homes and networks.

#### Impact:

Wrapping of specialized services to networks. This includes family physicians who have a special focus, specialists, and allied health providers in the community.

- Better understanding of how these services practice.
- Develop community approach to articulate how PMH can better connect with these services.

#### **Outputs:**

- Agreement between networks and services
- Communication material of services
- Map of services
- Reports
- Meeting minutes

Anticipated Funding Source: Patient Medical Home Budget Total: \$25,000

Physician Lead: Dr. Peter Loland Project Lead: Chelsea Brookes

# Integrated System of Care Working Group

Strategic Areas of Focus: Ocollaborate with partners and decision makers

**Goal:** The CSC Working Group will continue to address three key areas: Access, Team-Based Care, and Recruitment and Retention. The group will collaborate to discuss issues brought forth from the CSC in a desire to achieve a result that is acceptable to all partners. CSC Working Group partners: TRDFP, IH, PSP and MoH

#### Impact:

Projects identified through the CSC Working Group use experiences and feedback from the individual physicians in order to provide input on project direction, needs assessment, and desired output.

Collaboratively, the CSC Working Group strives to effectively address issues found in the patient community, and within our community of practitioners.

Results of project work are shared both regionally and provincially through the direct participation of representatives from Interior Health and the Ministry of Health.

#### **Outputs:**

- Meeting minutes
- Project key findings summaries
- Ongoing project evaluations
- Shared Priorities, Targets and Activities work plan
- Shared resource and research documents
- Terms of reference document

Anticipated Funding Source: Infrastructure Budget Total: \$7,678

Physician Lead: Dr. Chip Bantock Project Lead: Shelley Breen

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		Prior Year BU	DGE	T TOTALS	Current BUE	GE1	T TOTALS	<u>Infrastruct</u>			<u>ure</u>
GL NAME	ME DEBIT CREDIT		CREDIT	DEBIT		CREDIT	DEBIT		CREDIT		
Carry Forward			\$	593,946	\$ -	\$	669,100.00	\$	-	\$	-
Revenue (alloc. to correct Project GL)			\$	1,145,077	\$ -	\$	1,127,986.00	\$	-	\$	534,405.00
Physicians	\$	542,555			\$ 508,013.12	\$	-	\$	77,573.11	\$	-
Contractor Fees	\$	90,166			\$ 24,400.00	\$	-	\$	7,400.00	\$	-
Salaries - Directors	\$	55,944			\$ 26,280.15	\$	-	\$	26,280.15	\$	-
Salaries	\$	830,597			\$ 998,789.95	\$	-	\$	293,670.95	\$	-
Equipment & Other Supplies	\$	2,000			\$ 15,000.00	\$	-	\$	-	\$	-
Society Fees	\$	25			\$ 100.00	\$	-	\$	100.00	\$	-
Membership Dues & Fees	\$	1,994			\$ 1,944.00	\$	-	\$	1,944.00	\$	-
Insurance	\$	2,000			\$ 2,400.00	\$	-	\$	2,400.00	\$	-
Bank Interest & S/C	\$	250			\$ 750.00	\$	-	\$	750.00	\$	-
Accounting & Legal Fees	\$	11,020			\$ 17,000.00	\$	-	\$	12,500.00	\$	-
Travel	\$	46,208			\$ 20,908.50	\$	-	\$	10,100.00	\$	-
Event Expenses	\$	49,500			\$ 21,835.00	\$	-	\$	6,650.00	\$	-
Communications	\$	4,439			\$ 1,000.00	\$	-	\$	1,000.00	\$	-
Meeting Costs	\$	47,535			\$ 49,075.37	\$	-	\$	20,350.00	\$	-
Rent	\$	24,000			\$ 64,500.00	\$	-	\$	52,000.00	\$	-
Repairs & Maintenance	\$	1,500			\$ 3,286.79	\$	-	\$	3,286.79	\$	-
Telephone & Internet	\$	3,600			\$ 3,600.00	\$	-	\$	3,600.00	\$	-
Office Supplies & Expense	\$	5,796			\$ 8,995.26	\$	-	\$	3,500.00	\$	
Computers	\$	7,000			\$ 16,000.00	\$	-	\$	2,000.00	\$	-
Furniture	\$	1,000			\$ 2,000.00	\$	-	\$	2,000.00	\$	-
Printing	\$	11,894			\$ 11,207.86	\$	-	\$	7,300.00	\$	

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GL NAME	DEBIT		CREDIT		DEBIT		CREDIT	DEBIT			CREDIT
Carry Forward	\$ -	\$	3,000.00	\$	-	\$	10,000.00	\$	-	\$	21,000.00
Revenue (alloc. to correct Project GL)	\$ -	\$	15,000.00	\$	-	\$	-	\$	-	\$	-
Physicians	\$ 4,333.50	\$	-	\$	3,929.22	\$	-	\$	2,021.55	\$	-
Contractor Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Salaries - Directors	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Salaries	\$ 12,521.25	\$	-	\$	5,283.75	\$	-	\$	16,282.50	\$	-
Equipment & Other Supplies	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Society Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Membership Dues & Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Insurance	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Bank Interest & S/C	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Accounting & Legal Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Travel	\$ 250.00	\$	-	\$	-	\$	-	\$	500.00	\$	-
Event Expenses	\$ -	\$	-	\$	-	\$	-	\$	1,000.00	\$	-
Communications	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Meeting Costs	\$ 700.00	\$	-	\$	787.03	\$	-	\$	800.00	\$	-
Rent	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Repairs & Maintenance	\$ -	\$	1	\$	-	\$	-	\$	-	\$	-
Telephone & Internet	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Office Supplies & Expense	\$ 150.00	\$	-	\$	-	\$	-	\$	295.95	\$	-
Computers	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Furniture	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
Printing	\$ 45.25	\$	-	\$	-	\$	-	\$	100.00	\$	-

	<u>Older</u>	Adul	<u>ts</u>	Shared Care Steering Committee			Maternity Care			
GL NAME	DEBIT		CREDIT		DEBIT		CREDIT	DEBIT		CREDIT
Carry Forward	\$ -	\$	160,000.00	\$	-	\$	11,500.00	\$ -	\$	10,000.00
Revenue (alloc. to correct Project GL)	\$ -	\$	-	\$	-	\$	20,000.00	\$ -	\$	49,999.00
Physicians	\$ 18,734.00	\$	-	\$	18,433.20	\$	-	\$ 21,464.12	\$	-
Contractor Fees	\$ -	\$	-	\$	-	\$	-	\$ 3,500.00	\$	-
Salaries - Directors	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Salaries	\$ 138,307.50	\$	-	\$	9,622.50	\$	-	\$ 27,165.00	\$	-
Equipment & Other Supplies	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Society Fees	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Membership Dues & Fees	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Insurance	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Bank Interest & S/C	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Accounting & Legal Fees	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Travel	\$ 958.50	\$	-	\$	-	\$	-	\$ 1,500.00	\$	-
Event Expenses	\$ -	\$	-	\$	-	\$	-	\$ 3,685.00	\$	-
Communications	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Meeting Costs	\$ 2,000.00	\$	-	\$	3,000.00	\$	-	\$ -	\$	-
Rent	\$ -	\$	1	\$	-	\$	-	\$ -	\$	-
Repairs & Maintenance	\$ -	\$	-	\$	-	\$	-	\$ -	\$	1
Telephone & Internet	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Office Supplies & Expense	\$ -	\$	-	\$	-	\$	-	\$ 1,800.00	\$	-
Computers	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Furniture	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Printing	\$ -	\$	-	\$	444.30	\$	-	\$ 884.88	\$	-

	<u>Residen</u>	tial (	<u>Care</u>	EASE			Collaborative	e Networking		
GL NAME	DEBIT		CREDIT		DEBIT		CREDIT	DEBIT		CREDIT
Carry Forward	\$ -	\$	180,000.00	\$	-	\$	37,400.00	\$ -	\$	155,000.00
Revenue (alloc. to correct Project GL)	\$ -	\$	346,800.00	\$	-	\$	-	\$ -	\$	-
Physicians	\$ 295,788.24	\$	-	\$	5,929.88	\$	-	\$ 6,662.56	\$	-
Contractor Fees	\$ 10,000.00	\$	-	\$	-	\$	-	\$ 1,000.00	\$	-
Salaries - Directors	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Salaries	\$ 172,770.00	\$	-	\$	27,585.00	\$	-	\$ 130,155.00	\$	-
Equipment & Other Supplies	\$ 15,000.00	\$	-	\$	-	\$	-	\$ -	\$	-
Society Fees	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Membership Dues & Fees	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Insurance	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Bank Interest & S/C	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Accounting & Legal Fees	\$ 4,500.00	\$	-	\$	-	\$	-	\$ -	\$	-
Travel	\$ 5,000.00	\$	-	\$	600.00	\$	-	\$ 1,000.00	\$	-
Event Expenses	\$ 5,500.00	\$	-	\$	2,500.00	\$	-	\$ 1	\$	-
Communications	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Meeting Costs	\$ 2,020.50	\$	-	\$	-	\$	-	\$ 4,000.00	\$	-
Rent	\$ 12,500.00	\$	-	\$	-	\$	-	\$ -	\$	-
Repairs & Maintenance	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Telephone & Internet	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Office Supplies & Expense	\$ 1,000.00	\$	-	\$	500.00	\$	-	\$ 182.44	\$	-
Computers	\$ 2,000.00	\$	-	\$	-	\$	-	\$ 12,000.00	\$	-
Furniture	\$ -	\$	-	\$	-	\$	-	\$ -	\$	-
Printing	\$ 721.26	\$	-	\$	285.12	\$	-	\$ -	\$	-

	<u>Specialize</u>	d Se	rvices	Womens Health Clinic					<u>Networks</u>			
GL NAME	DEBIT		CREDIT		DEBIT		CREDIT		DEBIT		CREDIT	
Carry Forward	\$ -	\$	25,000.00	\$	-	\$	46,200.00	\$	-	\$	10,000.00	
Revenue (alloc. to correct Project GL)	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Physicians	\$ 5,356.70	\$	-	\$	15,261.12	\$	-	\$	2,560.63	\$	-	
Contractor Fees	\$ 1,000.00	\$	-	\$	1,500.00	\$	-	\$	-	\$	-	
Salaries - Directors	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Salaries	\$ 14,650.00	\$	-	\$	25,455.00	\$	-	\$	7,417.50	\$	-	
Equipment & Other Supplies	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Society Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Membership Dues & Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Insurance	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Bank Interest & S/C	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Accounting & Legal Fees	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Travel	\$ -	\$	-	\$	1,000.00	\$	-	\$	-	\$	-	
Event Expenses	\$ -	\$	-	\$	2,500.00	\$	-	\$	-	\$	-	
Communications	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Meeting Costs	\$ 2,800.00	\$	-	\$	-	\$	-	\$	-	\$	-	
Rent	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Repairs & Maintenance	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Telephone & Internet	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Office Supplies & Expense	\$ 695.00	\$	-	\$	250.00	\$	-	\$	21.87	\$	-	
Computers	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Furniture	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	
Printing	\$ 498.30	\$	-	\$	233.88	\$	-	\$	-	\$	-	

	Adult Menta	al He	Coordinating Care for Older Adults					
GL NAME	DEBIT		CREDIT		DEBIT		CREDIT	
Carry Forward	\$ -	\$	-	\$	-	\$	-	
Revenue (alloc. to correct Project GL)	\$ -	\$	11,782.00	\$	-	\$	150,000.00	
Physicians	\$ 3,583.77	\$	-	\$	26,381.52	\$	-	
Contractor Fees	\$ -	\$	-	\$	-	\$	-	
Salaries - Directors	\$ -	\$	-	\$	-	\$	-	
Salaries	\$ 6,600.00	\$	-	\$	111,304.00	\$	-	
Equipment & Other Supplies	\$ -	\$	-	\$	-	\$	-	
Society Fees	\$ -	\$	-	\$	-	\$	-	
Membership Dues & Fees	\$ -	\$	-	\$	-	\$	-	
Insurance	\$ -	\$	-	\$	-	\$	-	
Bank Interest & S/C	\$ -	\$	-	\$	-	\$	-	
Accounting & Legal Fees	\$ -	\$	-	\$	-	\$	-	
Travel	\$ -	\$	-	\$	-	\$	-	
Event Expenses	\$ -	\$	-	\$	-	\$	-	
Communications	\$ -	\$	-	\$	-	\$	-	
Meeting Costs	\$ 1,100.00	\$	-	\$	11,517.84	\$	-	
Rent	\$ -	\$	-	\$	-	\$	-	
Repairs & Maintenance	\$ -	\$	-	\$	-	\$	-	
Telephone & Internet	\$ -	\$	-	\$	-	\$	-	
Office Supplies & Expense	\$ 200.00	\$	-	\$	400.00	\$	-	
Computers	\$ -	\$	-	\$	-	\$	-	
Furniture	\$ -	\$	-	\$	-	\$	-	
Printing	\$ 298.23	\$	-	\$	396.64	\$	-	