

2017–2018 Annual Report



Campbell River and District
Division of Family Practice

A GPSC initiative

Vision and Mission

VISION

An engaged network of family physicians driving quality primary care reflective of our community.

MISSION

To foster physician well-being and engagement, to increase local influence and build partnerships in the delivery of patient care.

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Report from the Chair



Dr. Angela Logan, Chair

Dearest Esteemed Colleagues,

It is an honour to write my inaugural *Report From The Chair* for the 2018 AGM. We've had a year of change, introducing non-physician voices at the Board level as well as continuing on the journey towards making team-based care a reality through patient medical homes (PMHs) and primary care networks (PCNs).

The B.C. Societies Act comes into practice for all not-for-profits as of November 2018. For our Division, this has meant adding non-physician members to our Board table. David Kruyt, a local chartered professional accountant, held the position of Treasurer this past year. A second non-physician member will be welcomed to the Board this upcoming year. Including non-physician members allows our Division to comply with the stringent requirements of the B.C. Societies Act. Board composition will now include three physicians, two family medicine residents and two non-physicians.

The Board was keen to ensure the physician voice was heard among the Division leadership. The Physician Advisory Committee was formed to work in close coordination with the Board

to maintain a cross section of on-the-ground physician voices for all decisions made through the Division. This brings the number of physician leads at a strategic and governance level to eight.

Additional physician leaders are involved in the Residential Care Initiative, In-patient Working Groups and projects such as the Patient Medical Home Working Groups. The Division's Leadership is always looking for new voices to speak out with a passion around a particular area of interest, as we need your ideas to continue to improve family medicine in Campbell River.

The Board's focus this past year has been creating the foundations for team-based care through patient medical homes and primary care networks. The provincial groundwork was laid to create a community-wide plan for improving the coordination and delivery of primary care across Campbell River and the outlining areas of our Division. I truly believe that through team-based care we can all work to our full potential and work smarter, not harder, benefiting patients and doctors alike. We are not starting a revolution. This is simply an evolution to improve the medicine we already deliver.

These are exciting days in the Division as we embark on embracing the changes that team-based care brings. Keep your eyes open for upcoming sessions where you can contribute to informing the changes and feel free to stop me in the hall to let me know your ideas on how we should go about making these exciting changes.

I look forward to hearing from you.

Angela Logan

Report from the Division Executive Director

Like birthdays, these AGMs come up quicker each year! And like birthdays, it is a time to reflect, celebrate and eat cake.

In addition to our yearly events like *Walk with your Doc* (I was sure it was *Dog*), with the help of great staff members, we hosted quite a few learning events (17) and continued with various projects and initiatives with the intention of supporting you as you take care of our community.

In general, from my perspective, the most significant development this past year was the increase in engagement of our physicians in projects, initiatives and strategic development. The unfolding GP leadership and the convergence of passions has been quite remarkable. With this came more collaboration to improve how physicians are supported in their work and towards the quest for optimal patient care. Together, the Division, Department of Family Practice, the Facility Engagement Initiative (MSA) along with Island Health and community partners, are in a good position to make a significant impact towards continuing quality care.

The following section on *Division Activities* presents a picture of the leadership and partnerships that aim to support Division members, patients and community.

We love hearing from you and take great pride in taking your suggestions and ideas and trying to find ways to make things happen. Come by the office any time... there might even be cake.

Warmly,



Christine Colbert



Christine Colbert, Executive Director

2017–2018 Division Initiatives

Projects and Ongoing Programs

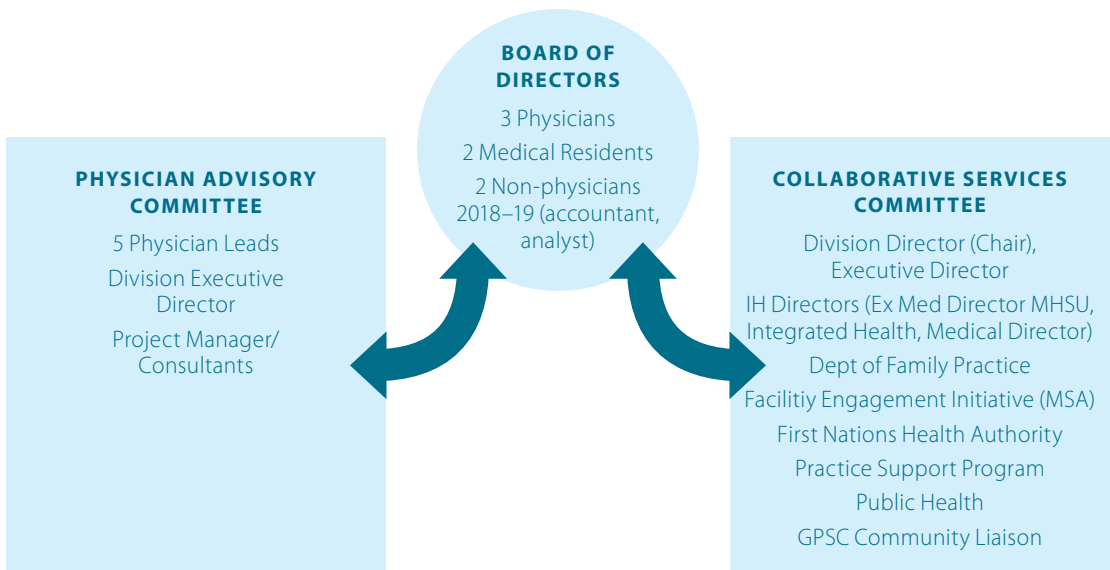
- Shared Care funded ERAS project resulting in a *Patient Passport* (GPs, 3 SPs, Wellness Centre and IH staff, Patient Voice, MOA GPs-SPs)
- Implementation of Pathways (GP lead, GP-SP MOAs)
- Shared Care funding MHSU Northern Gulf Islands and Gold River – a 3-Division partnership to improve MHSU referral pathways and community capacity (GP from each community, CR physiatrists, MHSU team, PSP, community partners)
- Support of gaining additional funding and QI for Doc of the Day and MRP in-patient care
- Residential Care Initiative (3 GP leads, facility staff, IH pharmacy)
- Patient Medical Home Advisory Committees (2 GPs, Community Health Services/IH staff, Public Health, Patient Voice, MOA, PSP, FNHA)
- GPSC Leadership and Management Development Program (2 GPs enrolled for 2018-2019)
- FETCH and Division webpage, e-bulletin
- Child Youth MHSU referral tool

LOOKING AHEAD:

- Seniors Care Network – Shared Care
- Chronic Pain Spread Network – Shared Care
- Primary Care Network Working Group

ERAS forum 2018





Leadership Tables

BOARD OF DIRECTORS

- Ongoing leadership in director meetings and steering committees
- Co-chairing the Collaborative Services Committee
- Participation in island-wide Interdivisional Committee (IH, FNHA, MOH, Divisions, PSP).
- Participation in Division Provincial Summits, RCCbc and other provincial bodies

PHYSICIAN ADVISORY COMMITTEE

- Review current projects/initiatives
- Monitor and enhance member engagement
- Provide members' perspectives to the Board on primary care issues to inform strategic direction
- Engage in opportunities for collaborative efforts with the Medical Staff Association and Department of Family Practice

COLLABORATIVE SERVICES COMMITTEE

- Maintain relationship with local Island Health and FNHA partners
- Co-determine local priorities; co-design solutions to local issues
- Maintain relationship with regional IH representatives
- Represent Campbell River and District and the small/rural division perspective



Be Active Every Day 2018

Community Tables, Events

- Community Action Team – Opioid Response
- Cultural Safety Committee
- Foundry Youth Hub
- CR Seniors Health Network
- Strathcona Regional Community Health Network
- Walk with your Doc
- Be Active Every Day

Financial Statements

Statement of Financial Position

March 31, 2018	2018	2017
ASSETS		
CURRENT ASSETS		
Cash	\$ 175,188	\$ 66,612
Accounts Receivable	119,862	9,478
Government Remittances Receivable	2,478	5,296
Prepaid Expenses	950	1,300
Short Term Investments	101,816	100,540
	\$ 400,294	\$ 183,226
LIABILITIES		
CURRENT LIABILITIES		
Accounts Payable	\$ 52,792	\$ 22,803
Government Remittances Payable	6,562	6,350
Deferred Revenue	335,827	149,059
	395,181	178,212
NET ASSETS	5,113	5,014
	\$ 400,294	\$ 183,226

Statement of Operations and Changes in Net Assets

Year Ended March 31, 2018	2018	2017
REVENUE		
Infrastructure	\$ 286,459	\$ 247,881
Doctor of the Day	181,811	181,276
Residential Care Initiative	127,620	23,394
Shared Care (ERAS/Rapid Access)	64,043	9,213
Patient Medical Home	52,255	–
Shared Care (CYMHSU)	29,999	150,891
A GP for Me	–	62,593
Impact Project	–	47,238
	742,187	722,486
Interest	3,285	540
	745,472	723,026
EXPENDITURES		
Advertising	1,221	16,482
Bank Charges and Interest	1,393	914
Events	15,907	9,412
Insurance	650	1,293
Licenses and Dues	782	488
Meeting	10,634	5,488
Office	9,883	13,017
Professional Fees	11,621	5,613
Salaries and Wages – Physicians and Staff	424,316	317,977
Salaries and Wages – Doctor of the Day	178,850	178,850
Subcontracts	73,834	129,409
Supplies	55	5,040
Telephone	2,311	2,472
Training	680	20,971
Travel	13,236	10,586
	745,373	718,012
EXCESS OF REVENUE OVER EXPENDITURE	99	5,014
NET ASSETS – BEGINNING OF YEAR	5,014	–
NET ASSETS – END OF YEAR	\$ 5,113	\$ 5,014

Statement of Cash Flows

Year Ended March 31, 2018	2018	2017
CASH FLOWS FROM OPERATING ACTIVITIES		
Cash Received from Funding	\$ 824,698	\$ 581,415
Cash Paid to Suppliers and Employees	(716,122)	(716,953)
	\$ 108,576	\$ (135,538)
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of Investments	-	(100,540)
INCREASE IN CASH FLOW	108,576	(236,078)
CASH – BEGINNING OF YEAR	66,612	302,690
CASH – END OF YEAR	\$ 175,188	\$ 66,612



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Cover and back cover photos: Julie Collis

All other photos: Campbell River and District DFP

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.

www.divisionsbc.ca/campbell-river-district