

## **FREQUENTLY ASKED QUESTIONS (for Primary Care Networks)**

### **1. What is the recruitment and application process for PCN positions?**

Health Match BC has been working closely with the Ministry of Health to recruit the 200 GPs and 200 NPs for PCNs over the next three years. On August 22, 2018, Health Match rolled out a marketing campaign and began collecting expressions of interest from GPs and NPs interested to work in this new model of care.

In a parallel process, the Ministry of Health has developed a phased approach to establishing PCNs across the province over the next three years and has been working closely with PCN communities to identify the PCN-related clinical opportunities. These opportunities, once approved, will be posted to the Health Match website and suitable and interested applicants will be referred against the positions.

Although Health Match BC will make referrals based on the personal and professional interests of the candidates, the selection process, including interviews, will be conducted at the local level and with participation from health authorities, Divisions of Family Practice, and local practices.

### **2. How do these practitioners fit in to the primary care landscape?**

The government of BC recently announced its vision for an integrated system of primary care across the province with Primary Care Networks (PCNs) as the backbone to a team-based approach. The objective of the first phase of implementation, beginning in 2018, is to increase the number of British Columbians who have access to quality primary care and are attached to a primary care provider. In support of this, funding has been allocated for up to 200 GPs and 200 NPs to work in interdisciplinary teams as part of Primary Care Networks.

Currently 16.9% of British Columbians do not have a primary care practitioner.

Under this initiative, these new practitioners will work alongside existing primary care providers (including both private and health authority providers), and may be placed in a variety of settings such as FFS Family Practices, HA owned and operated primary care practices, Urgent Primary Care Practices, and/or Community Health Centres, with the objective of increasing patient attachment across the province.

### **3. Will there be a cap on number of NPs or GPs per PCN? How has it been considered for each geographical location?**

The Ministry is supporting the hiring of the number of GPs and NPs needed to close the existing attachment gap in each PCN community, as identified and agreed to by the Ministry and the community through the PCN service planning process.

**4. Will later PCNs have an opportunity to include requests for these positions, and will we “run out” of funding for candidates before they get their PCN underway?**

Future PCNs will have the same opportunity to request additional GPs and NPs through their service planning processes. Government has provided the Ministry of Health with incremental, ongoing funding, which increases each year over the next three years, to support the PCNs. These funds will support approved GP and NP positions in communities where there is an attachment need.

**5. Are all positions connected to needs identified through PCN planning? Can a community health center or small community apply if PCN planning is not underway in that geographical area?**

The Ministry’s expectation is that primary care planning and resource allocations, including requests for additional GPs and NPs, will be coordinated through the PCN. Given that PCN implementation is being phased in over time, in highly unique circumstances, and on a case by case basis, the Ministry may consider approving requests outside the PCN process. Considerations would have to include:

- the community has demonstrated a high patient attachment gap
- there is support of a receiving clinic that is ready to add a GP or NP to their practice
- the request has the support of the Collaborative Service Committee
- there is a commitment to submit a PCN Expression of Interest at the next available opportunity

**6. Will contracts be available to Community Health Centres?**

The Ministry is currently developing a provincial policy direction to guide Community Health Centre implementation in BC, and in the meantime, this Service Contract can be explored as part of the PCN development.

These Service Contracts will be available to Community Health Centres as long as the terms of the contract template are appropriate for the specific circumstances, or for a targeted (e.g., particularly higher needs) population with agreement by the Ministry of Health and the health authority.