

SI PCN Physician Forum

Monday, March 1st 2021 | 1730-1930 | Zoom

March 11th 2021 the South Island Primary Care Network (PCN) Physician Forum occurred, the following is a summary of the discussions.

Event Participants included the following organizations:

- South Island Division of Family Practice (SIDFP)
- Primary Care Network Implementation Team
- Ministry of Health (MoH)
- Health Connect Registry (HCR)/ HealthLink BC
- SI Breast Cancer Surgeon Group
- South Island (SI) Family Physicians (FPs)

1. Attachment Mechanism

Health Connect Registry Overview and Provincial Experience with HCR.

Please see PDF 'Introduction to the Health Connect Registry'.

- The HCR is a provincial initiative for a standardized attachment mechanism supported through HealthLink BC. While it is a provincial response that is mandated through PCN participation, and is a centralized database, it is locally managed and allows for flexibility for the local needs as each PCN is unique.
- Focal benefits for patients and PCN providers include but are not limited to the following: 24/7 support through HealthLink BC for PCN coordination and patient access, registry quality assurance (for information accuracy, duplication, false registry etc.) and reducing waitlist burden from private clinics and MOAs.
- As of March 1 2021 three PCNs across the province have 'launched' the HCR and another four PCNs are expected to launch over the next three months.
- Next steps include a MoH Communications team technical walk through, ongoing quality assurance discussions, and determining SI PCN's 'launch' date and level for merging waitlists.

South Island Attachment Design and Development Overview

Please see PDF 'South Island Attachment Mechanism Design and Development PPT.'

- The Attachment Pilot came out of the SI PCN Attachment Working Group (AWG), which was tasked to examine the best process to incorporate the HCR to the local SI PCN and to implement an attachment mechanism. The HCR is a requirement for the each PCN, though it is up to the local level to determine how and when the HCR is incorporated.
- March 15 2021 Attachment Coordinator will be on boarded to support how the HCR will be incorporated moving forward.
- The Pilot with investigating support from the AWG is to work through what the attachment coordinator can do with the HCR while balancing Patient Medical Homes (PMH) and private clinic autonomy.
- Basic level of PCN Clinic commitment includes merging clinic waitlist with the HCR.
- In regards to merging waitlists, two ethical points were discussed. 1. Confirmation of Patient consent to merge patient profile to the HCR waitlist is required. 2. The College of Physicians and Surgeons of BC requires attaching based on first come first served in order to avoid i.e. age based discrimination as it could lead to potential human rights issues, though the college also

allows for practices to balance their panels and tailor to individual skill sets. The attachment mechanism will need to have policy to balance 'cherry-picking' risks.

- Remaining focal points of the attachment mechanism and pilot to be determined are as follows: establishing criteria for priority attachment/referral, and if priority referral will be its own list or within the centralized waitlist with notation.
- Patients would not have access to Priority referral forms; they would be referred by providers only. Form is to be developed locally to capture MHSU, Disease, Care Coordinator notes etc. The priority referral is to streamline attachment for frequent patients and/or high complexity patients.
- *Physicians that would like to participate in the SI Attachment Mechanism Pilot, please email Jacob.hart@sidfp.com*

2. New Breast Cancer Surgical Referral Process

Please see PDF 'SIIBCP PCP Communications to March2021 Physician Forum.'

- The South Island Breast Cancer Surgeon Group has expanded from 10 to 14 physicians and is in the process of further recruitment.
- The new South Island Integrated Breast Cancer Program centralized referral process is an effort to standardize the care of breast cancer patients, assure quality measures are met, and streamline the patient's referral process. Referral form is accessible on Pathways.
- Questions remain in regards to how to integrate referral forms directly into EMRs.

3. New to Practice, Group Contracts and PCN Updates

Please see PDF 'Contracts and PCN Updates PPT.'

- NTP Contracts can be applied at a retiring practice, though that would create two separate practices. Priority will be given to Group Contracts who operate on one EMR, though all are still encouraged to apply.
- NTP/Group contract PCN application process is as follows: Submitting and EOI to the respective geographic PCN Leadership Committee, if LC endorsed submission and it is within the Service Plan Allocations it is approved. The current EOI criteria is under review.
- Delayed access to Attachment codes has potentially effected the current reported Attachment numbers. Additionally, as some clinics are in the process of backdating attachment codes, the reported attachment numbers may be inaccurate.