

## SUSTAINABILITY STRATEGY

The Nanaimo Division of Family Practice Residential Care Initiative (RCI) is committed to ensuring MRP care for Long Term Care (LTC) patients is sustainable. This strategy outlines the processes in place to reduce the risk to continuity of care for patients:



**Nanaimo Residential Care Initiative**

A Nanaimo Division of Family Practice Initiative

### RCI Core Physician Capacity

- The RCI recommends that a Family Physician should provide care for no more than 40 patients at any one LTC facility.
- Any Physician in the RCI may provide services to an LTC facility as a Core Physician by agreement between the Division, Physician, and the LTC facility
- A Core Physician is expected to maintain an optimum patient panel of between 20-40 patients and achieve (or work towards achieving) the GPSC 5 Best Practice Expectations (see Appendix)
- Core Physicians are expected to take a team approach to providing care at a LTC facility
- RCI Physicians may practice as a Core Physicians at more than one LTC facility
- For smaller facilities with 40 or fewer LTC residents it is recommended that care is shared between 2 Physicians. This allows these physicians to work as a team to develop relationships with staff, patients, and patient representatives.
- At LTC facilities where the burden of care is disproportionately weighted towards one physician, the Division will work collaboratively with the Director of Care, or similar senior Management representative to recruit Core Physicians.
- The LTC facility will support equitable patient panels by allocating orphaned patients on admission to core physicians until the optimum number of patients has been reached.
- Reduction in size of patient panels for Physicians with more than 40 patients will be achieved through attrition only, not by re-allocation of existing patients.
- The LTC facility and the Division will work collaboratively to ensure a good fit between Physician and LTC facility culture.

### GPSC Funding and Physician Remuneration

- RCI Physician remuneration is capped by the funding body, the GPSC, at \$45,000 per annum.
- The Nanaimo RCI maximum remuneration per LTC bed is \$320 per annum. For Physicians entitled to the full payment, this represents approximately 140 patients.
- Once the cap has been reached, remaining per capita funding will be returned to the Nanaimo RCI general funding.
- It is not expected nor recommended that Physicians who expect to reach their capped allowance enter into private remuneration agreements with other RCI Physicians.

## **Transfer of Care**

- No Physician may expect a patient to remain under their care if the patient or patient representative requests an alternative Physician.
- A patient or patient representative retains the right at all times to request a transfer of care to another Physician
- The LTC facility should not bring pressure on a patient or patient family to transfer care to a preferred Physician, but can provide information about the best practice expectations provided by Physicians in the RCI
- Upon admission, the LTC facility must ask the existing MRP if they are willing to continue care for their patient. The Physician may choose to continue care and meet the GPSC/RCI best practice expectations, or transfer care to a RCI Core Physician.

## **Physician Absence**

### Planned Leave

- RCI Physicians will notify the LTC facility of any planned absence.
- The Physician and the LTC facility will work together to ensure the patient has continuity of care.
- Temporary care may be provided by another RCI Physician by agreement.
- The LTC facility must be informed of the arrangement for care before the absence commences.

### Unplanned Leave

- Where notice of absence is not available, the LTC facility will arrange for care of patients to be shared equitably amongst the remaining Core Physicians.
- The LTC facility representative and the Core Physician will agree the duties to be undertaken.
- Arrangements for 24/7 cover must always be made and communicated to the Facility
- When a Physician Absence exceeds 12 weeks, or when it is understood that the Physician will no longer be available to visit a LTC facility, the LTC facility will transfer patient care equitably to existing RCI Core Physicians while the Division recruits a replacement Core Physician Team Member.