



Name	Description	Supporting Physicians in Practice	Collaboration with Specialists	Primary Care Networks (Team-Based Care)	Advocating for System Improvement	Physician Health & Wellness	In-Hospital Care	Community Health
Adult Mental Health Local Community Action Network	Committee dedicated to improving adult mental health in WRSS.	●	●					●
Central Registry for Physicians Accepting Patients	One phone number to call for a list of community GPs accepting new patients - run out of the Primary Care Access Clinic.							●
Child & Youth Mental Health & Substance Use Local Action Team	Shared Care project to support child and youth mental health.	●	●		●			●
Collaborative Services Committee	A committee of the Division, Fraser Health Authority, Doctors of BC, and the General Practice Services Committee to collaboratively address issues in the health care system.			●	●			
Did You Know	Division's monthly electronic newsletter for members – distributed at the end of each month.	●						
Education	Monthly Rounds, PSP Small Group Learning Sessions, CME opportunities.	●						
EMR Support & Practice Panel Clean Up	Group or individual support organized through the Practice Support Program Coordinator, Catherine Torrance.	●						
FETCH For Everything That's Community Health	Database of community health resources linked to Pathways for GPs and accessible to the public.	●		●				●
Fraser Health IM/IT Working Group	FHA and Division reps working to collectively improve sharing of information from FHA to physician EMRs.				●			

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GP/SP Referral Project	Shared Care initiative working to improve communication and care between GPs and SPs. Currently working on piloting the Pathways Referral Tracker to improve patient care, make the referral process more efficient, and reduce administrative burden for GPs, SPs, and office staff.	●	●		●			
Healthy Communities	Strategic plan endorsed by the City of White Rock and Peace Arch Hospital Foundation working towards all WRSS residents being committed to physical, social and mental well-being.	●				●		●
Hello/Goodbye	Annual dinner & social to welcome new physicians and say good-bye to retiring physicians (SPs and GPs).					●		
Homebound Frail Elderly – NP/GP	Nurse Practitioner and GP providing dedicated care to homebound frail elderly with rapid access to Home Health support.	●		●				
Interdivisional Strategic Council	A co-chaired (FHA/Division) council attended by delegates from each division in the region to provide an opportunity to share information and learnings.				●			
Locum Support	Recruitment and matching service for local GPs looking for locums.	●				●		
Medimap	A website showing WRSS walk-in clinic wait times and which clinics are currently accepting new patients.	●						●
Move 4 Health Steering Committee	Committee dedicated to improving the health of physicians and patients through physical activity. Currently working on developing resources for GPs and NPs to distribute to patients (i.e. Exercise Prescription).	●				●		●
Multidisciplinary Care Providers in Practices	Practice support to hire RN/LPNs in practices.	●						
Night Doctor Program	One call group for community GP patients in hospital, supports GPs to retain privileges.						●	

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NP for PATH (Patient Assessment & Transfer Home) Unit at PAH	NP providing daily care for unattached patients on the PATH Unit at the hospital. GPs provide back up and night and weekend coverage.						●	
Opioid Substitution Therapy Committee	Committee working to establish an Opioid Agonist Treatment (OAT) clinic in WRSS.	●		●	●			
Pathways	Database of SPs providing their wait times, referral processes, and subspecialties. Also includes physician and patient resources.	●	●					
Patient Medical Home (PMH) Working Group	Committee established to support the Patient Medical Home (PMH) & Primary Care Network (PCN) work of the Division. Currently establishing a Clinic Managers' Network to support all GP clinics in WRSS.	●		●	●			●
Physician Engagement	Ongoing physician engagement through AGM, all-members meetings, Did You Know Newsletter, website, clinic visits, etc.	●						
Polypharmacy Risk Reduction Initiative	A Shared Care initiative working to reduce the risk of polypharmacy for patients in the Acute Care for Elders (ACE) Unit by streamlining the process of conducting meaningful medication reviews in-hospital.				●		●	
Primary Care Access Clinic	Multidisciplinary clinic with NP, GP, mental health caseworker, and psychiatrist. Serves "hard to attach" patients.			●				
Rapid Access to Psychiatry for Children & Youth	A psychiatrist is available (within 2 weeks) for assessment and consultation.	●	●					
Recruitment & Retention	Active recruitment of GPs to the community.	●				●		●
Residential Care Program	Ensures all patients within long-term care facilities are attached to a GP. Enables 24/7 access to a GP.	●		●				
Right Care Right Place	Education campaign to strengthen attachment to GPs, and reduce reliance on ER & walk-in clinics.							●

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Seniors Health Network	Network established to explore health issues and resources available to seniors.	●						●
Transitions in Care - Communication Between Hospitalist & Community GPs	Quality improvement initiative to increase collaboration and communication between hospitalists and community-based GPs from patient admission to hospital to discharge & follow up.	●			●		●	
Triage Consulting Team	A multi-disciplinary team of professionals meeting bi-weekly where school principals and counsellors present urgent student cases.		●	●				●
UpToDate	An evidence-based, physician-authored clinical decision support resource (provided free to Division members).	●						
Vine Youth Clinic	Clinic providing youth-centred activities in the community and referrals to programs for youth.	●		●				●