

## Key Items

### **New representatives at GPSC meetings**

The committee welcomed Drs. Ruth Campling and David May as new Division of Family Practice representatives from the Vancouver Coastal Health region, appointed by the CSC. The committee also welcomed Shelley Tice as the new Vancouver Island Health Authority representative taking the place of Phil Lawrence, and Dr. Peter Barnsdale as the new Fraser Health Authority representative taking the place of David Thompson.

### **Ministry of Health Organizational Update**

The Ministry of Health is in the process of organizational design work to better support implementation of the primary care strategy. Therefore, Kelly McQuillen - previously a GPSC Core member between 2008-2012 and co-chair of the GPSC between February 2012-March 2014, - has joined the Primary Care Division as Executive Director, Primary Care Planning and Implementation Oversight. Over the past five years, Kelly has worked with the Ministry of Social Development and Poverty Reduction and most recently, served as Executive Director responsible for Services to Adults with Developmental Disabilities. In her new capacity in the Primary Care division, Kelly will support the ministry key strategic mandate to deliver primary care programs which include PCNs, UPCCs, and CHCs across the regional health authorities.

Shana Ooms' role has been redefined as Executive Director for the Primary Care Strategy, Policy and Quality. Shana will continue to be closely involved with the GPSC in her new role.

### **Doctors of BC Organizational Update**

Recently, Doctors of BC CEO Allan Seckel announced a realignment of some departments within the organization. This transition will mainly affect the teams supporting the Joint Clinical Committees (JCCs).

Currently, the teams supporting the JCCs (General Practice Services Committee, Shared Care Committee, and Specialist Services Committee) are divided across two departments. In order to improve support for physician members, these teams are being realigned into one department under a single Executive Director. The department, to be called Engagement and Quality

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Improvement, will house all of the JCC programs and initiatives. Doctors of BC is actively recruiting to fill the new Executive Director position.

With the implementation of this new Executive Director position, Dr. Brenda Hefford's current executive leadership role within Doctors of BC (Executive Director, Community Practice, Quality and Integration), will transition to focus on strategic leadership in support of the GPSC and the broader Primary and Community Care Strategy. The changes will come into effect as of September 3, 2019.

### **Incentive Working Group Update**

Over the last several months the Incentive Working Group (IWG) has been developing new GPSC incentives to support physicians with fundamental aspects of PMH and PCN. In June, the GPSC approved the concept and design of a new longitudinal care payment, increases to some maternity and inpatient care fees, and revisions to billing criteria for physicians working under alternate payment contracts. Information will be shared in detail with physicians within the next few months.

### **Inpatient Care Strategy**

In follow up to the March 1<sup>st</sup> Inpatient Care learning session, the GPSC has agreed to host and facilitate a provincial partnership conversation to discuss long-term solutions targeted at supporting inpatient care across the province. The session is expected to take place in the fall of 2019, and will include a broad range of attendees including GPs, hospitalists, specialists, division and health authority representatives, and Doctors of BC and Ministry of Health staff. More details will be shared as the planning progresses, and a date will be identified as soon as possible.

### **Strategic Support of PCN Development**

In follow-up to the GPSC core members meeting on [May 17<sup>th</sup>](#), the committee has been working to clarify its role in strategic oversight of the overall primary and community care changes underway.

Some of the key ways GPSC is working to make the strategic oversight role a reality include:

#### **1. Commitment to collaborative decision making**

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All decisions and materials impacting clinical or physician practice will either be co-developed or at least have input from physicians prior to being released. All partners committed to ensuring that when physicians receive PMH and PCN communications, they will know that it has been endorsed and reviewed by all partners and that it is consistent in content and messaging. The committee noted that staff is currently working on a process to ensure timely input and advice from physicians.

## **2. Team-Based Care Working Group**

On September 27, 2018, the GPSC approved the transition of the time-limited GPSC team-based care Task Group to an ongoing, GPSC Team-Based Care Working Group. The new Working Group has refreshed and expanded representational membership and a new mandate to better align with current and long-term provincial strategies related to team-based care. With the advancement of primary care network implementation over the past six months, there is now a clearer understanding of the provincial and local supports needed to enable team-based care in the province, and the establishment of a team-based care Working Group is timely. As primary care in BC continues to transition toward team-based care, particularly in the context of patient medical home and primary care network implementation, more organizations are defining and developing roles and functions to support team-based care.

At the May 17th GPSC Core Strategic Session, the core committee received an update about the progress of the team-based care Working Group and approved the group's terms of reference. The first meeting of the full team-based care Working Group is scheduled for July 25th. Invitations to a broad spectrum of interdisciplinary stakeholders will be sent in the coming weeks.

## **3. Information-Sharing Task Group**

A new GPSC Information-Sharing Task Group has been established to enable the implementation of best practices and standardized information sharing practices, including data governance to support team based care (TBC) within the context of the Patient Medical Home (PMHs) and Primary Care Networks (PCNs). The group will be co-chaired by Dr. Jaron Easterbrook, (Doctors of BC), and Alison Pearce (Ministry of Health) and will include broad membership inclusive of all key partners in this work such as physicians, health authority and division representatives as well as patients and allied health professionals.

#### **4. Minor tenant improvements**

GPSC is working to establish a process for supporting minor tenant improvements in private physician practices, in support of implementation of team-based care. One-time funding of \$10M has been allocated to this work in the current fiscal year. This funding will be aimed at practices in PCN communities that need to make minor capital changes in support of incorporating an RN or allied health care professional into their practices.

Within the next few weeks, the principles, intent and funding allocation criteria will be finalized. More information will be available by the fall of 2019.

Moving forward, GPSC will focus on developing supports and resources to enable division and health authority partnerships, and to support communication in the PCN process. To facilitate the ongoing implementation of PCNs across the province, GPSC will be working over the next several months to determine ways to support communities not formally engaged in the PCN process yet are doing PCN-related work in their communities in preparation for the Wave 3 intake. GPSC staff are also currently developing a comprehensive suite of supporting materials to help guide communities through the stages of PCN implementation.

#### **Rural Primary Care Networks**

The Ministry of Health is currently working on an approach and recommendations for developing rural primary care networks. The approach will be developed from a rural lens that considers health service delivery in rural areas and recognizes full-scope generalist practice. The approach will also aim to encompass rural PCN policy considerations including governance, service planning, health human resource planning and equity focused financial allocations. Consultations and engagement with stakeholders - including those currently involved in PCN planning - will continue through summer 2019.

**The GPSC's next meeting is scheduled for September 13, 2019.**