

Key Items

Community Longitudinal Family Physician (CLFP) Payment

Over 3,000 family physicians have received their [CLFP payment](#). This payment recognizes family doctors for their vital contribution in providing longitudinal care to [improve outcomes](#) for patients and the health system.

Physician feedback about the CLFP payment has been largely positive, with many stating that it is an important first step to support longitudinal care and Patient Medical Homes (PMH) while acknowledging that more needs to be done.

The first round of the CLFP payment also had some challenges. GPSC is taking the opportunity to learn and address the concerns that have been raised, and to incorporate the feedback for the next payment this fall.

In order to be eligible, family physicians must submit the portal code 14070, which signifies they are providing full-service family practice services to their patients for the duration of the calendar year and are confirming their doctor-patient relationships with their existing patients through a standardized conversation or "[compact](#)".

Joint JCC Symposium 2020

On Monday, October 5th and Tuesday, October 6th 2020, the Joint Collaborative Committees (JCCs) will host the first annual shared JCC Symposium. The first day of the Joint Symposium will allow each of the JCCs to meet independently and discuss important topics related to each committee's areas of focus. This means that day one, October 5th, will be a GPSC summit focused on GPSC's work related to family physicians, other care providers and stakeholders.

Day one will be followed by a joint JCC day on October 6th that aims to foster collaboration through a workshop format and by facilitating discussions, creating connections and bringing family physicians and specialists together with partners and stakeholders.

Information about registration and the program will be shared as it becomes available.

Primary Care Strategy Update

i. PCNs in Implementation

Ten Collaborative Service Committees (CSCs) and 20 PCNs with approved funding allocations are now implementing their service plans:

- Burnaby, Fraser Northwest, Ridge-Meadows, Prince George, Comox, South Okanagan-Similkameen, Kootenay-Boundary, Vancouver (Part 1), Richmond, and South Island.

13 communities and 22 PCNs have service plans currently under review. Meetings between CSCs and GPSC have taken place with most of these communities, with the remainder taking place over the next few weeks:

- Central-Interior Rural, East Kootenay, Central Okanagan, Oceanside, Cowichan, Vancouver (Part 2), North Shore, Chilliwack, White Rock South Surrey, Northern-Interior Rural, North Peace, Haida Gwaii and Mission.

ii. PCN Implementation Launch Day

GPSC staff are organizing a PCN implementation launch day with 14 communities who currently have their service plans under review and will be moving into PCN implementation. This will take place on Thursday, March 5th and will provide an opportunity for local, regional and provincial partners to come together. Discussion will be focus on an effective transition from PCN planning to successful implementation for these new PCN communities. In attendance will be representatives from divisions, local and regional health authority partners, nurse practitioners, First Nations Health Authority, Indigenous partners, GPSC Core, and Ministry of Health and GPSC staff.

iii. EOI Process for Future PCN Communities

On February 6th, an updated PCN Expression of Interest (EOI) template and supporting information was shared with future PCN partners in communities that are interested in submitting a PCN EOI, and those who have not yet formally started planning. A provincial teleconference will be held on Friday, March 20th to give partners an opportunity for two-way dialogue with joint senior leadership about the EOI, ask questions and seek clarification about the process.

Communities can assess readiness and capacity to start PCN planning in their own time. Planning funding will be issued as capacity allows through 2020 and 2021.

iv. Urgent & Primary Care Centres (UPCC)

14 UPCCs will be operational by May 2020 and there are 10 UPCCs currently under development.

v. First Nations Lead Primary Care Clinics

The Ministry is providing funding to FNHA to work with local First Nations to identify and support Nation led primary care initiatives. These initiatives will be integrated with PCNs and offer services to the broader community. The FNHA has provided a list of potential communities for FN led initiatives and preliminary analysis is currently underway with communities.

vi. Nurse Practitioner (NP) Clinics

Three NP clinics will be operational between April-July 2020 in Nanaimo, Surrey, and Victoria.

Evaluation Task Group Update

The GPSC Evaluation Task Group shared an update on the status of the provincial PMH evaluation. The main focus areas of the PMH evaluation framework include physician experience, access, patient experience and cost.

There were 2398 physicians who completed the PMH assessment at least once by the end of 2019, which represents over 60% of Full Service Family Physicians. As next steps, the Evaluation Task group will focus on defining GPSC's role in PCN evaluation and expanding evaluation work to include evaluation of GPSC programs and initiatives.

Team Based Care Working Group Changes

In October 2019, a decision was made to suspend meetings of the GPSC Team Based Care (TBC) working group while Ministry of Health and Doctors of BC representatives met to gain clarity on what was required to develop and advance a provincial approach to supporting team-based primary care. The discussions included the role of GPSC, and PSP, as part of a broader provincial approach.

One of the areas of clarification was with respect to the future of the GPSC Team Based Care Working Group. With the role of both GPSC and PSP clarified as providing tangible supports for TBC implementation in physician offices and teams, it was agreed that the broader GPSC Working Group will be dissolved, and that the Ministry will now convene an advisory group of provincial partners with a role in supporting team-based primary care (with GPSC playing a key role). Meetings of the newly defined group will start in March 2020.

Society of General Practitioners Name Change

On February 13th, the Society of General Practitioners of BC (SGP) changed its name to BC Family Doctors.

Over the past 30 years, BC Family Doctors has represented family doctors in BC and has advocated for the economic and professional well-being of patients and the profession. The name change, along with the launch of a new logo, website and strategy, will support the BC Family Doctors purpose of building an environment where family doctors thrive.

More information is available on their new website at <https://bcfamilydocs.ca/>. We encourage you to explore the new site.

GPSC Meeting Format Change

Beginning April 2020, GPSC committee meetings will be restructured to allow for an improved level of engagement and input from the broader committee. The broader GPSC committee meeting will be shifted to a workshop format, meant to engage on key strategic issues and garner partner (e.g. Health Authority and division representatives) insight based on regional and local experience. The GPSC Core members meeting will be expanded to a full day and will occur the day after the GPSC committee meeting. Discussions from the broader committee meeting will help inform and enable key governance discussions and decisions that are made at the Core members meeting the following day.

The new format will allow the full committee to collectively inform and help shape strategic direction, priorities, and provide feedback and input on strategy initiatives relating to PMH and PCN.

The GPSC's next meeting is scheduled for April 8, 2020.