

GPSC Workshop: the Evolution of Divisions of Family Practice

On July 28th, GPSC members and partners participated in a workshop to discuss the evolution, learnings and opportunities of Divisions of Family Practice.

The Divisions, supported by the GPSC, have been part of the BC primary care landscape for over 10 years. From their inception as vehicles for local community physician support and collective voice, shared decision making, and influence through collaboration and partnership with the health authorities and community partners at local Collaborative Services Committee (CSC) tables, they have had an increasing role as agents of change supporting primary care transformation on a provincial level.

As we consider the development and evolution of divisions over the past 10 years, and look forward to the next stages of primary care transformation in BC, it is helpful to consider lessons learned and potential opportunities to leverage and enhance the role of divisions.

Discussion revolved around the success of divisions responding to COVID-19, potential future opportunities, and what support GPSC can offer to ensure divisions' success moving forward.

The outcomes of this internal discussion will help to guide when and how the GPSC engages at the divisional, CSC and Interdivisional Strategic Council tables in these forward facing conversations.

GPSC: Key Items and Decisions

PCN Update

The momentum of the PCN work is accelerating following the shift in focus and priorities experienced during the initial months of the pandemic. There are 39 PCNs in the implementation stage with 18 of those PCNs entering year two of implementation, and 21 entering year one of implementation. In the first year of implementation, work was focused on collaborative governance, planning, hiring interdisciplinary team members, and reporting. A number of communities have submitted Expressions of Interest to begin PCN planning. Ministry, division and health authority staff are working hard in a number of areas, including verifying data requirements and attachment gaps and continuing the work associated with the existing PCNs, which are under development. The focus is on supporting the 39 PCNs already underway in order to sustain future PCN investments.

As a result, the Ministry will not begin approving new EOIs from communities which have not begun formal PCN planning until after December 2020.

CLFP Payment for new to practice family doctors

In December 2019, the GPSC announced the CLFP (Community Longitudinal Family Physician) Payment. The CLFP Payment is intended to provide additional compensation to fee-for-service family physicians for providing longitudinal care to a panel of patients.

Based on the eligibility requirements of the 2020 CLFP Payment, a number of new-to-practice physicians who began longitudinal family practice in 2020 or late 2019 were not eligible for the 2020 CLFP Payment because

they did not have at least 50 MSOC (Majority Source of Care) patients in 2019.

The GPSC has allocated funding to ensure new-to-practice physicians who are not yet eligible for the payment based on MSOC may receive the minimum payment of \$3,000 CLFP during their first year of practice. Eligible family physicians will be contacted via email in Winter 2020.

COVID-19 Next steps

A new ministry division will focus on COVID-19 and is led by Ian Rongve, Assistant Deputy Minister. This team will interface with other teams including primary care, compensation and finance. The work of this ministry division will focus on preparing for a potential second surge of COVID-19 in the fall and will ensure alignment with the direction set by the Provincial Health Office for pandemic response. This team will also work closely with health authority vice presidents in pandemic response, and in consultation with the GPSC, will develop a mechanism to improve alignment between the Divisions of Family Practice and health authorities.

The ministry team is working with partners as submissions for payment for physician planning time in response to COVID-19 come in

Virtual care update

The COVID-19 pandemic accelerated the uptake of virtual care, and clear guidelines and principles around virtual care provision are needed. Along with other provincial partners, the GPSC as the leading table for collaborative primary care in the province will be involved in these discussions.

The ministry and Doctors of BC are working together to identify how the virtual care work

established during the pandemic (i.e. virtual doctor of the day and real time virtual services) can be maintained moving forward. In June, the JCC Co-Chairs supported the development of a Virtual Care Integrated Council that will collectively explore issues such as access to care, improvement of attachment, equity for patient populations, continuity of care and defining comprehensiveness in the context of virtual care. The Virtual Care Integrated Council will play an advisory role to enable effective decision making across the JCCs.

EQI Update

The Engagement and Quality Improvement (EQI) department at Doctors of BC, which supports the work of the Joint Collaborative Committees (JCCs), is evolving to enable team members to better support physicians and partners as leaders in system transformation. The shift supports streamlined integration and alignment of services to physicians across primary, community and acute care settings – a key to generating innovative and sustainable change across the sector.

Effective July 1, 2020, the GPSC Community Liaisons for the Divisions of Family Practice and the Facility Engagement Liaisons for Medical Staff Associations (MSAs) are working on the same team with new titles – Engagement Partner. By being on the same team, the Engagement Partners can better collaborate and strategize on how best to support doctors with community practices and within facilities to address both challenges and opportunities ahead. The Engagement Team is led by Cindy Myles.

Also effective July 1st, the new portfolio Primary and Community Care Transformation, led by Alana Godin, brings together the work of

Meeting Summary

Key Highlights from June - July, 2020



primary and community care (e.g. developing incentive payments, practice supports and the Doctors Technology Office) onto one team so that GPSC services and supports are better aligned and service is more efficient. The GPSC Regional Liaisons have a new title – Primary Care Transformation Partners – reflecting their focus on advancing primary care transformation initiatives such as the Patient Medical Home and Primary Care Networks.