

Central Okanagan Division of Family Practice

PCN Orientation Day 1



Land Acknowledgement

I respectfully acknowledge that my workplace is within the ancestral, traditional, and unceded territory of the Syilx Nation. I acknowledge the Metis Nation and their contributions to Aboriginal ways of being and knowing in Canada.



Learning Objectives

- Understand the Central Okanagan Division of Family Practice and our role within the PCN
- Understand what a Primary Care Network (PCN) is
- Understand the 8 core attributes of a PCN
- Understand the collaborative partnerships in the PCN
- Gain an understanding of the Hub or Clinic where you will work



Division of Family Practice



Central Okanagan Division of Family Practice

- Incorporated on July 23, 2010
- Membership consists of 295 physicians working in approximately 60 clinics
- Includes family physicians from Kelowna, West Kelowna, Lake Country, and Peachland
- Governed by a board of directors, consisting of nine family physicians
- Day to day operations are led by the Board Physician Lead and the Executive Director, supported by CODFP staff



What is the Division of Family Practice

Who We Are

- Divisions of Family Practice are community-based groups of family physicians working together to achieve common health care goals
- Funded by the **Family Practice Service Committee (FPSC)**, collaborative partnerships between Doctors of BC and the Ministry of Health

Where We Are

- There are 35 Divisions of Family Practice across BC, representing more than 230 communities

What We Do

- Support community-based family physicians
- Collaborate with community and health care partners
- Support patients and physicians to increase quality within primary care



Central Okanagan Division of Family Practice

Vision

- Excellence in care, vibrant communities, strong collaborative family medicine

Mission

- The Central Okanagan Division of Family Practice is a non-profit society governed by local family physicians who identify areas to improve care of patients and work with partners towards improving health in our community

Values

- Quality and integrity in medical care
- Advocacy: for patients and for the role of the family physician as a key component of primary care
- Visionary planning
- Transparent communication
- Collaboration: among family physicians, partners and patients



Central Okanagan Division Staff

Divisions Team

Dr. Christine Hoppe: Board Physician Lead

Tristan Smith: Executive Director

Amanda Oakes: Admin Lead/Member Engagement Coordinator

Jen Bitz: Long Term Care

Ashley Mailey: Pathways and Attachment Coordinator

Cat Bryce: Project Coordinator / Members Engagement Coordinator

PCN Team

Tara Muncey: Senior Manager

Allison Manning: Clinical Manager

Jason Houiellebecq: Change Lead

Lori Ballard: Change Lead

Connie Abram: Change Lead

Scott Tucker: Admin Support

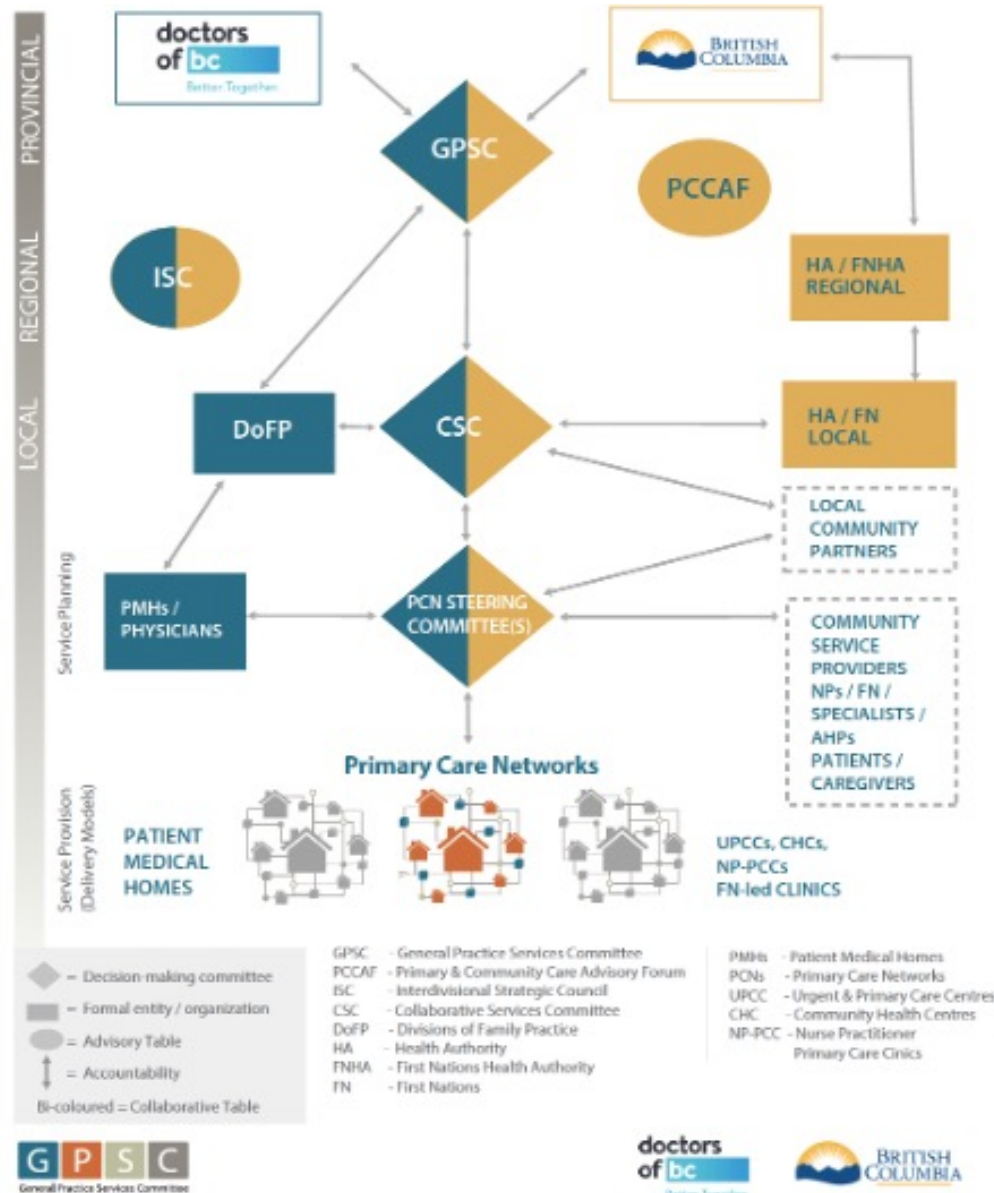
Carly Van Oort: Learning and Development Coordinator



PCN Governance



Primary Care Network Governance



Primary Care Network Governance



Family Practice Service Committee

- Is one of 4 joint committees between the Provincial Government and Doctors of BC
- Work to strengthen longitudinal family practice as by supporting family physicians. One of the ways they do this is through the development of the DoFP



Collaborative Services Committee

- Tri leadership structure
- Provide the PCN with:
 - strategic leadership in PCN design and implementation
 - approve funding amendments
 - approve implementation plan
 - make necessary decisions
- Overall involved in the “higher” level decisions



Primary Care Network Governance



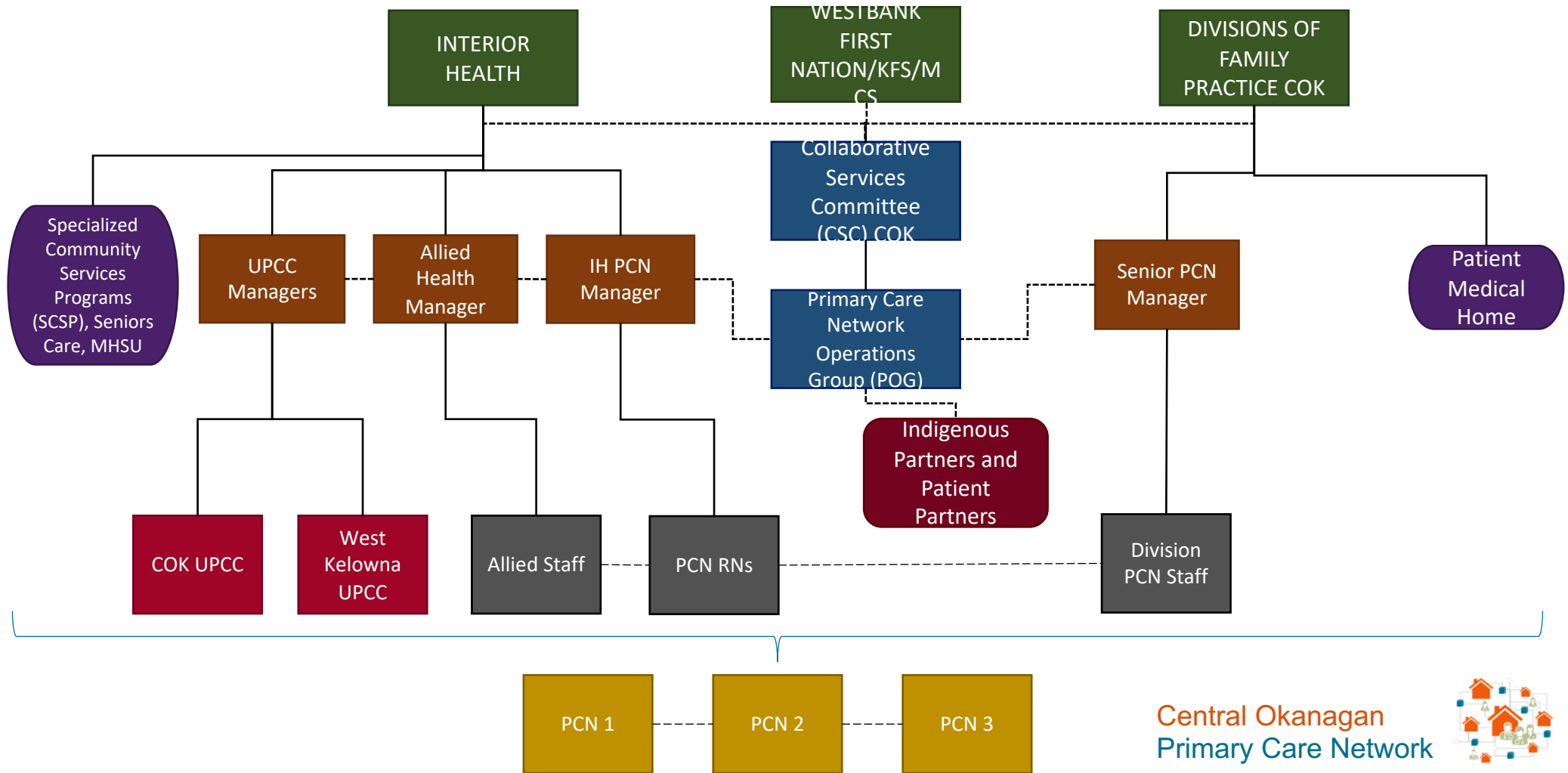
PCN Operations Group

- Reports up to CSC
- Tri-leadership structure
- Oversees the implementation, day to day operations, and continual growth of the COK PCNs in accordance to the Service Plan
- Process changes and requests often must go to POG



PCN Central Okanagan

Organizational Chart



Primary Care Networks



What is a Primary Care Network?

- Network of Family Care Providers, with **Patient Medical Homes** (PMHs) as the foundation
- Tri-Leadership between Divisions of Family Practice, Health Authorities and local First Nations
- Together the patient's care team:
 - Utilizes a **Team-Based approach to care**
 - Link patients to other parts of the system,
 - Increase **attachment**: Increase capacity of care providers and create greater access to care for people without a primary care provider (the average patient **panel** size/provider = 1,400 patients)



The 8 Core Attributes of a PCN

1. Access and attachment to quality primary care
2. Extended hours
3. Same day access to urgent care
4. Advice & information
5. Comprehensive primary care
6. Culturally safe care
7. Coordinated care
8. Clear communication



PCNs Across the Province

Wave One began 2018

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

Wave Two began 2019

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



Central Okanagan PCN Service Plan Began Spring 2020

HUB 1 (Central Kelowna)

3.0 FTE Social Work
1.5 FTE Registered Dietitians
1.0 FTE Physiotherapist
0.7 FTE Occupational Therapist
1.0 FTE Pharmacist
21 FTE Registered Nurses
1.0 FTE Indigenous Health Coordinators (Ki-Low-Na Friendship Society)
2.5 Nurse Practitioner

HUB 2 (Rutland/Lake Country)

- 3.0 FTE Social Work
- 1.0 FTE Registered Dietitians
- 1.0 FTE Physiotherapist
- 0.4 FTE Occupational Therapist
- 1.0 FTE Pharmacist
- 6.0 FTE Registered Nurses
- 1.0 FTE Indigenous Health Coordinators (Metis Services Society)
- 2.5 Nurse Practitioner

HUB 3 (West Kelowna/Peachland):

- 3.0 FTE Social Work
- 1.0 FTE Registered Dietitians
- 1.0 FTE Physiotherapist
- 0.4 FTE Occupational Therapist
- 1.0 FTE Pharmacist
- 5.0 FTE Registered Nurses
- 1.0 FTE Indigenous Health Coordinators (Westbank First Nation Health and Wellness Centre)
- 2.6 Nurse Practitioner

Services Across PCNs:

- 1.0 Psychologist
- 4.0 Family Physician Contracts



Requirements for Participating in a PCN

Panel Management: Physicians will be required to complete Phase 1 of panel management

Family Practice: Physicians must provide longitudinal care (cannot participate if solely provide walk-in services)

EMR: Must be using an electronic medical record (EMR)

Committed to supporting TBC: Physicians and clinics must commit to supporting ongoing education and mentorship for Team Based Care



Clinic Engagement

Each clinic has its own unique state of readiness/willingness to join

- **Early adopters:** clinics who were eager to participate on day 1
- **Wait and seers:** these clinics waited to see how/if PCN worked with the early adopters
- **Hesitators:** these are the clinics that want to see success in action before they join

What we do to support clinics and IH staff

- Structured meetings with MOAs, Office Managers and Providers
- Support for EMR training for new IH staff
- Coaching, mentorship, education/orientation



Learnings

- Invest in office staff and culture
- Nominate a Physician Lead
- Provide networking opportunities
- Don't Make Assumptions
 - Health Authority staff have little exposure to fee for service clinics
 - Physicians have little exposure to unionized processes

Relationships are always the key ingredient



Team-Based Care



Provider Resources

Provider Resource

CENTRAL OKANAGAN PRIMARY CARE NETWORK



INDIGENOUS HEALTH COORDINATORS

Are here to help patients navigate healthcare in British Columbia.

OUR GOAL

To support and advocate for all Indigenous patients/clients, caregivers, and their families in achieving health for the whole self.

Please fax referrals directly to the Indigenous Health Coordinators



Eligibility

- Can attend in-person appointments outside the home OR virtually via phone/video.

Suitable Referrals

Indigenous Health Coordinators can help with:

- Indigenous patients requiring support with primary health care navigation
- Indigenous patients not attached to a local physician
- Moral support at appointments
- Transportation for appointments
- Emotional Support - New beginnings

We are Located

PCN Indigenous Health Coordinators are available at three locations in the Central Okanagan:

- Ki-Low-Na Friendship Society: position vacant
- Metis Community Services Society of BC / Sandra Garbitt
metiswellness@mcsbc.org
Phone: 250-540-2524
Fax: 250-868-0359
- Westbank First Nation Health and Wellness Centre: position vacant



Understanding Reporting and Stats

Fee for Service

For every patient assessed and procedure/service provided, physicians are required to submit their electronic billings to Teleplan.

Encounter Code Reporting

PCN nurses are required to submit billing codes (zero fee) to Teleplan in order to account for the services they provide to patients.

PCN nurses will be documenting in the clinic EMR

Allied Health e-Stats

Allied Health will be documenting in Meditech

E-stats and encounter billing will both be used to track the type of work being performed by the PCN



Resources

[Central Okanagan Division of Family Practice](#)

[bc-guidelines](#)

[Doctors of BC](#)

[Family Practice Services Committee](#)

[PCN Tool Kit](#)

[Practice Support Program](#)

[SharePoint](#) – once the PCN Admin grants you access to SharePoint you will receive a link to your Interior Health email.



Housekeeping Items

- MSP form for Nurse Coordinators
- Pathways login has been applied for

