**Nanaimo’s Primary Care Network (PCN) Expression of Interest (EOI)**

# **Introduction**

Across British Columbia, Divisions of Family Practice are working with Health Authorities and community partners to establish Primary Care Networks (PCNs). The goal of the Primary Care Network is to create the structures necessary to enable all members of the community to receive the primary care they require by bringing together Family Physicians, Nurse Practitioners, Nurses, Allied Health and other providers in partnership.

As part of the PCN work occurring in Nanaimo, Family Practice clinics have the opportunity to work with an Allied Health Team, Nurses and/or Pharmacists. The goal of these new team members is to help support Family Physicians and Nurse Practitioners in continuing the amazing work they do and to assist in providing the best care for patients.

The following EOI will help the PCN Team determine your interest in joining the PCN and, if desired by your clinic, what is required to support your clinic with implementing these new team members into your practice.

**The EOI is made up of 3 sections:**

Part 1 – Joining the PCN

Part 2 – Interest in Current PCN Services

Part 3 – Interest in Future PCN Services

***Please note***: Completing this Expression of Interest form is the initial step in the process of joining the PCN and accessing resources. Ongoing discussions with the PCN Team will take place to ensure your clinic is well supported throughout this process.

# **Part 1 – Joining the PCN**

## Membership Type, Benefits and Commitments

When joining the PCN, you can decide on which type of participation your Clinic prefers. You choose your type based on the interest/capacity of your clinic, patient needs and to what extent you would like to work with PCN Health Providers (Allied Health, Nursing and Pharmacy).

* **Network Host Clinic:** Your clinic hosts PCN Health Care Provider(s) within your clinic plus has access to training, QI supports and a central patient waitlist\*.
* **Network Link Clinic:** Your clinic is linked to PCN Health Care Provider(s) at the Central Hub plus has access to training, QI supports and a central patient waitlist.
* **Network Clinic:** Your clinic has access to training opportunities, QI supports and a central patient waitlist. At this time your clinic is not ready to engage with PCN Health Care Providers.

|  |  |  |
| --- | --- | --- |
| **PCN Team Commitments***The PCN Team agrees to the following commitments for each type of participation*: | **Member Benefits***Each type of membership comes with different benefits, and all are part of the Primary Care Network*. | Commitments of Clinics*To ensure the PCN is equitable and successful for all partners involved, clinics are asked to agree to the following commitments*: |
| Network Clinic + Network Link Clinic + Network Host Clinic |
| Provide relevant and timely updates on PCN | **Stay informed on PCN updates and connect with other members in the PCN** |  |
| Help connect clinics to Quality Improvement supports  |  **Access to various Quality Improvement supports** | Identify opportunities for Quality Improvement and optimize practice to facilitate successful team-based care and/or other PCN Services (e.g. Patient Waitlist) |
| Engage and support clinics in the design and use of the local central waitlist and Patient Attachment Mechanism | **Utilize the local central waitlist and Patient Attachment Mechanism (PAM)\*** | Use the Central Waitlist to refer unattached patients and the PAM to attach patients (if capacity allows)\*\* |
| Provide remuneration and PCN team support for participation in planning activities | **Supports and remuneration to participate in planning activities** | Aim to work collaboratively with the PCN team and their partners† & be open to change within the PCN and its services as we work through this process |
| Provide Physicians, Nurse Practitioners and Clinic staff with cultural safety and trauma informed training | **Support and training to help enhance culturally safe care in your clinic and improve patient outcomes** | Participate in cultural safety and trauma informed training |
| Work closely with clinics to monitor successes and challenges with PCN services and make improvements through co-created feedback and evaluation processes | **Process for clinic concerns and ideas to inform the continued improvement of the services** | Willingness to provide data to inform evaluation and the refinement of PCN services as needed (Based on the PCN services clinic is engaging with) |
| Network Link Clinic + Network Host Clinic |
| Support clinics in their integration of PCN Allied Health Providers, Nurses and/or Pharmacists including training on team-based care, assistance, materials, resources, and compensation as applicable | **Access new team-based care services as well as consult with or refer to PCN Health Care Providers located within your PCN *(shared with other PCN members)*** | Willingness to share the PCN services (including the Allied Health team, Nurses and Pharmacists) with other clinics and the wider PCN, and participate in the required training (team-based care) |
| Network Host Clinic |
| Do a space assessment to determine how best to co-locate new team members into the clinic | **Have new PCN Health Care Providers *(shared with other PCN members)* physically located in your clinic** | Ensure adequate and functional space to support an Allied Health or other Team-Based care members in your clinic |

\* The Nanaimo PCN will be implementing a Central Patient Waitlist which will include a local process for attaching patients from the waitlist to Physicians and Nurse Practitioners in the Network. The waitlist is housed provincially by Healthlink BC (8-1-1) and is called the Health Connect Registry. Once launched in Nanaimo, clinics will be able to direct unattached patients to the waitlist, as well as, utilize the waitlist to attach patients rather than advertise that they are accepting patients. The attachment mechanism will be designed locally with clinics and staffed by a patient attachment coordinator.

\*\*While Physicians will be encouraged to use the Central Patient Waitlist and Patient Attachment Mechanism when they have capacity for attachment, this does not prevent Physicians from attaching patients outside of this at their own discretion.

†Clinics will primarily work with the PCN staff team which include PCN Physician Leads, Division of Family Practice PCN Manager, Change Lead, & Coordinators, Island Health PCN Manager and the Practice Support Program. At times other partners will be involved depending on the activity, such as local Indigenous partners, GPSC Team-Based Care Coaches, and Evaluation Consultants.

# **Type of Participation for Your Clinic**

1. Based on your current knowledge of the PCN and the information provided above, which type of participation is your clinic interested in?
* **Network Host Clinic:** Your clinic hosts PCN Health Care Provider(s) within your clinic plus has Access to training, QI supports and a centralized patient waitlist
* **Network Link Clinic:** Your clinic has access to PCN Health Care Provider(s) at the Central Hub plus has Access to training, QI supports and a centralized patient waitlist
* **Network Clinic**: Your clinic is linked to the PCN with access to training opportunities, QI supports and a centralized patient waitlist. At this time your clinic is not ready to engage with PCN Health Care Providers.

# **Clinic Information**

1. **Clinic Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Your Team:** Please let us know who is already part of your clinic team.

|  |  |  |
| --- | --- | --- |
| **Team** | **Total Number**  | **Days worked each week\***  |
| Physicians |  |  |
| Nurse Practitioners |  |  |
| Registered Nurses  |  |  |
| Licensed Practical Nurses |  |  |
| Medical Office Assistants |  |  |
| Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

\*Example: If Physician A works 2.5 days/week and Physicians B works 5 days/week, total days worked each week = 7.5

1. **Has your clinic started panel management (typically completed with Practice Support Program)?**

[ ]  No

[ ]  Yes

***If yes***, please provide the number of physicians that have started the GPSC Panel Development Incentive:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Completed | In Progress | Not Started |

1. **Does your clinic give permission to PSP to share progress on panel management with the PCN team** **only**? \*

[ ]  Yes

[ ]  No

\*Please review and complete the following document:



1. **What is your clinic’s estimated total panel size? \_\_\_\_\_\_\_\_\_\_\_\_**
2. **How does your clinic currently manage calls from patients looking for a Family Doctor or Nurse Practitioner?**
3. **How many Physicians and Nurse Practitioners in your clinic want to participate in PCN Services (as per the type of clinic participation)? \_\_\_\_\_\_\_\_\_\_\_**
4. **Please assign a nominated Change Family Physician/Nurse Practitioner Sponsor and a Clinic Manager (or MOA).** They will be the lead and main point of contact for any PCN related activities that your clinic is involved in.

The Change Sponsor and Clinic Manager/MOA will liaise with the PCN team to communicate with and engage clinic colleagues in various activities to successfully integrate the clinic with requested PCN Services (e.g. Central Patient Waitlist, Allied Health Team…).

Change Sponsor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clinic Manager/MOA Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Please fill out the table below for all participating Physicians and Nurse Practitioners:**

|  |  |  |
| --- | --- | --- |
| **Family Physician or Nurse Practitioner Name** | **Patient Panel Size *(if known)*** | **Signature** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# **Part 2: Current PCN Services (Allied Health Team)\***

\* This section should only be completed by clinics who want to participate as a **Host Clinic** or **Link Clinic.**

1. Does your clinic prefer the Allied Health team to primarily provide in-clinic care or provide care through the central hub?

[ ]  In-clinic care

[ ]  Central hub

1. Does your clinic have space that can be:

[ ]  Scheduled into the week for a team member to use

[ ]  Dedicated space

[ ]  We don’t have space

1. If there is space available, can the space be used for:

[ ] Patient consultation

[ ]  Clinical care (ex: Nurse doing a wound care dressing)

# **Part 3: Future PCN Resources**

Since the PCN is being rolled out over 4 years, there will be opportunities to access additional services over the next few years, such as Nurses and Clinical Pharmacists. As well, clinics will be able to utilize the central patient waitlist and attachment mechanism.

1. Would your clinic be interested in learning more about these future resources?

[ ]  No

[ ]  Yes

**If yes,** we will continue to update the Change Sponsor and Clinic Manager/MOA as these resources are planned.

1. Which of the following service(s) is your clinic interested in?
* Pharmacist
* Nurse
* Centralized Patient Waitlist and Attachment Mechanism