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## Key Messages and Questions & Answers

Reference document for Attachment Coordinators, Primary Care Providers & Clinics

### Key Messages

- Strengthening the health care system to ensure that everyone in the province who needs a primary care provider gets one is a top priority. Part of that work is the Health Connect Registry (HCR) - a simple online tool available to people who live in British Columbia to register for a primary care provider (either a family doctor or a nurse practitioner) in their community.
- Through the HCR, people are connected to a primary care provider in their Primary Care Network community based on their health needs and as providers identify capacity to match more patients. The HCR is part of BC's provincial attachment system – a coordinated and seamless approach to connecting people and providers throughout BC.
- People in British Columbia can register themselves, their family or a person in their care online at [HealthLinkBC.ca/health-connect-registry](https://HealthLinkBC.ca/health-connect-registry).
- Those who cannot register online or need to make a change to their registration can call HealthLink BC at 8-1-1 for assistance. 8-1-1 is available any time of the day or night and offers translation services in over 130 languages. For the deaf or hard of hearing, call 7-1-1 Teletypewriter (TTY) or for sign language interpretation visit [Video Relay Services](#) and ask to call HealthLink BC at 604 215-5101.
- People on the HCR receive regular communications about their attachment. After registration, registrants will receive a confirmation that they are on the HCR and notification when they will be contacted for an initial meeting with a potential provider (intake), the outcome of the appointment, and regular communication about health services they can access in their Primary Care Network community while they wait for attachment.

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## Registrants (Patients)

### What is the HCR and how does it work?

- Hosted by HealthLink BC, the Health Connect Registry (HCR) is how people living in British Columbia register for a primary care provider, either a family doctor or a nurse practitioner, in their community.
- Anyone living in B.C. can register themselves, their family, and/or an individual in their care. Registration requires name, address, a B.C. Personal Health Number, and information about the individual's recent health and attachment preferences. If you are registering someone else, you need their consent to do so. Registration is available at [HealthLinkBC.ca/health-connect-registry](https://HealthLinkBC.ca/health-connect-registry) or by calling 8-1-1.
- People registered on the HCR receive regular communications about their attachment and, starting April 2024, will also receive notifications when they have been selected for intake, the outcome of the intake, and regular communication about health services they can access in their Primary Care Network community while they wait.
- An attachment coordinator reviews the registration details, identifies family doctors or nurse practitioners accepting patients in the community—using a combination of their local knowledge and information collected by the Provincial Attachment System (PAS)—and facilitates a match between that registrant and the available provider.
- Providers, their clinics or delegates are responsible for contacting registrants and setting up intake appointments to confirm the match:
  - If successful, the registrant receives confirmation and connects directly with their new primary care provider. Their registration is then closed.
  - If unsuccessful, the registrant will maintain their place on the registry and the attachment coordinator matches them to another provider accepting patients in the community, when available.

### What are the benefits of the HCR for registrants?

- The Health Connect Registry (HCR) is a simple online tool available to people in British Columbia to register for a primary care provider—either a family doctor or a nurse practitioner—in their community.

- The simplified process coordinates primary care attachment for anyone looking for a provider, including those who move between geographical areas within the province.

### I have a family doctor or nurse practitioner; should I sign up for the HCR?

- If you already have a family doctor or nurse practitioner, you do not need to register for the HCR. Continue to engage with your family doctor or nurse practitioner for your health care needs.
- People with primary care providers who are retiring or relocating or if the registrant is moving or would like a different care provider, can register. The HCR form will prompt people to answer 'yes' or 'no' to questions about whether a registrant currently has a primary care provider. The form will ask people for the name of their most recent primary care provider and date of their last visit to that provider.
- Registrants without a current primary care provider may be attached before those who have one.

### I do not have a family doctor or nurse practitioner; should I sign up for the HCR?

- If you live in B.C. and do not already have a family doctor or nurse practitioner, you should register for the HCR. A strong, long-term relationship with a primary care provider is an important part of healthful living for you and your family.

### How can people sign up for the HCR?

- Online: People in British Columbia can register themselves, their family or a person in their care online at [HealthLinkBC.ca/health-connect-registry](https://HealthLinkBC.ca/health-connect-registry).
- By Phone: Those who cannot register online or need to make a change to their registration can call HealthLink BC at 8-1-1 for assistance. 8-1-1 is available any time of the day or night and offers translation services in over 130 languages.
- For the deaf or hard of hearing: Call 7-1-1 Teletypewriter (TTY) or for sign language interpretation visit [Video Relay Services](#) and ask to call 604 215-5101.

## What do you mean by “family or person in your care” on the HCR?

- Family: A family is anyone a registrant identifies as their family and lives in the same house. Where possible, families will be attached to the same primary care provider.
- Person in your care: A person in your care is someone a registrant is caring for who doesn't live in their household, or lives in their household and isn't a family member. For example: a registrant is the caregiver for their aging parents who do not live with them, they are people in your care.
- If you are registering a family member or person in your care you must confirm you have their consent to register on their behalf.

## Why are registrants being asked health questions on the HCR?

- These health questions will help attachment coordinators determine a registrant's priority for attachment, will inform primary care providers and clinics who have focused attachment criteria, and HealthLink BC uses this information to determine which primary-care supports may be helpful to the registrant while they wait for a primary care provider match.
- The health questions are meant to capture only new and recent diagnosis or health events to complement the health history Ministry of Health may already have on file. The health questions are not mandatory. A registrant can indicate “Prefer not to say” for each question. There is also an option to select “None apply to my health.”
- Patients can contact 8-1-1 anytime (or in future, respond to regular emails from HCR) to update their responses to the health questions if something has changed.
- The health questions were added to the HCR as of April 2024. People who registered before April 2024 will be contacted by HealthLink BC to update their registration.

## What personal information is collected by the HCR?

- The HCR collects demographic information to inform the attachment process.
- The following information is collected:
  - Consent to share personal information.

- Demographics: First name and last name, Personal Health Number, date of birth, address (street address, city/town, postal code).
- Contact information: Email, phone, and preferred method of contact
- Health information: Sex (male, female, other), health events or diagnosis that are new and recent (in the last three months).
- Preferences: Translation services and language, distance able to travel, gender of primary care provider.
- Current primary care provider: If the registrant has a current a family doctor or nurse practitioner, details of last visit and why a new provider is requested.

### If a registrant moves to another community, will they automatically be transferred to the HCR waitlist in their new community?

- If a registrant moves to another community, they do not need to register again but they will need to update their new location by calling 8-1-1.
- The registrant will retain their original waitlist date and will be attached in their Primary Care Network in their new community.

### Are there regular communications to people registered on the HCR?

- People registered on the HCR will receive the following notifications as they move through the attachment process:
  - Notification confirming their registration on the HCR.
  - Notification they will hear from a clinic in the coming weeks for intake.
  - Notification they have been successfully attached OR if the intake was not successful, notification that they remain on the HCR and the attachment coordination team is finding a better match.
- People on the HCR will also receive communication every three months with updates on attachment progress in their community, health services available while they wait, and reminders to keep their HCR registration information up to date.
- Notifications are by email. In the coming months, HCR will expand notifications to include SMS (text) if that was the preferred method of contact indicated by the registrant during the registration process.

- Registrants who did not provide an email during original registration will be contacted by phone by HealthLink BC to update their registration with a method of contact so they can benefit from the above communications.

### Can a registrant be on a waitlist in the community and still sign up for the HCR?

- People on a clinic or community waitlist can register or they can wait until the waitlist is merged to HCR over the coming months. If the registrant is already on HCR, HealthLink BC will update their registration date to match the one from the community waitlist when it is merged.

### How long will it take to be matched with a family doctor or nurse practitioner? Can you tell me where I am on the list?

- HealthLink BC can confirm that you are on the HCR and that your information is accurate, but we are unable to advise exactly when you will be attached or your place on the list.
- The time it takes to be matched to a primary care provider will depend on the number of registrants waiting in that community, and the capacity of the family doctors and nurse practitioners who practice there.
- Your place on the list may be impacted by someone with more complex health needs. Some people have serious health conditions that need timely assessment and treatment, such as newly diagnosed with cancer. By prioritizing people on the HCR for attachment, we are making sure that the people who need care the most get it quickly.

### How are registrants matched with a primary care provider?

- Attachment to a primary care provider takes into consideration the patient's priority, Primary Care Network community attachment mechanisms in place and/or specific community services and needs.
- For example, there may be focused attachment efforts on specific, priority populations, including those who may require priority attachment, Indigenous registrants and families to First Nations-led clinic initiatives.

- They also work with the following criteria in mind:
  - Complexity: Clinical administrative data available to the Ministry of Health will be used to calculate registrant complexity based on Adjusted Clinical Group and Resource Utilization Band, a well-known and widely used methodology for assessing patient complexity.
  - New and recent diagnosis or health event: Registrants can self-report any new diagnosis or other health event experienced in the last three months to their existing information. Registrants can “prefer not to answer” or indicate “none apply” when prompted. They can also call 8-1-1 with any changes.
  - Time on the HCR: The length of time people have been on the HCR or community waitlist prior to the HCR.
  - Preferences: As identified during registration will be considered when possible.

### Will registrants have a choice in the primary care provider they are attached to?

- Both the registrant and the provider must agree to the match.
- A registrant can advise the family doctor or nurse practitioner during intake or by calling 8-1-1 and decline the match. The Provider will indicate their decision in the Provincial Attachment System.
- If a registrant or a provider disagrees with a match the registrant remains on the HCR in their original place for another match.

### What if I want my practitioner to be a particular gender? Or I can't travel very far?

- A registrant, and the provider, must agree to a match. This allows registrants to ensure the provider is a good fit.
- During the registration, people can indicate if they have gender preference for a primary care provider and how far they are able to travel.
- Where possible, attachment coordinators will consider this information during the attachment process.

## I have been matched with a nurse practitioner. What is a nurse practitioner?

- Nurse practitioners and family physicians are both primary care providers with a broad scope of practice which includes the ability to: diagnose and treat medical conditions; order and interpret tests; prescribe medications; refer to specialists; and lead and coordinate your care.
- For more information on nurse practitioners, and the support that they can provide for you, visit [www.healthlinkbc.ca/nurse-practitioners](http://www.healthlinkbc.ca/nurse-practitioners).

## If we register as a family on the HCR, will we be matched to the same primary care provider and at the same time?

- Every effort will be made to attach family members at the same time and to the same primary care provider.

## How do I update my registration information or add a family member?

- Call HealthLink BC at 8-1-1 to update registrant information if your contact information changes, if you have moved within B.C., if you have had a new diagnosis or health event in the last three months, if you no longer require HCR services, or to add/remove family members from your registration.

## Where can I access care while I wait?

### Emergency or Immediate Care

- Medical emergency: Call [9-1-1](tel:9-1-1) or go to your closest [emergency department](#).
- Suicide crisis: Call [1-800-SUICIDE](tel:1-800-SUICIDE) (1 800 784-2433).
- [BC Poison Control](#): Call [1-800-567-8911](tel:1-800-567-8911).

### Non-Emergency Care

- Visit a pharmacist: B.C. residents can [see a pharmacist for minor ailments, prescription renewals and contraception](#) prescriptions.
- HealthLink BC: Call [8-1-1](tel:8-1-1) for non-emergency health information and advice seven days a week, 24 hours a day.
- [HealthLink BC health services directory](#): Find health services in your area.
- [Urgent and Primary Care Centres \(UPCCs\)](#): UPCCs are opening throughout the province, check to see if there is a UPCC in your community.
- [First Nations Virtual Doctor of the Day](#): Available to First Nations people in B.C. who have limited or no access to their own doctors.

### Mental Health Supports

- Mental Health Support Line: Call [310-6789](tel:310-6789) (no area code).

- [Kids Help Phone](#): Call [1-800-668-6868](tel:1-800-668-6868) or text CONNECT to [686868](tel:686868).
- [Wellbeing](#): Find mental health and substance use supports in your area.

### How does the HCR protect registrant privacy?

- The Health Care Registry (HCR) and HealthLink BC (Ministry of Health) both comply with the Freedom of Information and Protection of Privacy Act (FOIPPA) and adhere to the Personal Information Privacy Act and Health Insurance and Portability and Accountability Act.
- The new digital HCR also protects information by ensuring information is only shared digitally, within the secure Provincial Attachment System (PAS) platform.
- The information you provide will be used to match you with a primary care provider in your community, and to inform the health services you may be offered while you wait for attachment.
- It will also be shared with the family doctor or nurse practitioner once you have successfully matched with during the attachment process.

## Attachment Coordinators, Primary Care Providers and Clinics

### Why was the HCR created?

- The Health Connect Registry (HCR) was created to help people who live in British Columbia connect with a primary care provider, such as a family doctor or nurse practitioner, through a single, integrated and digitally enabled solution.
- The HCR will connect registrants with primary care providers who are accepting patients (as identified in the Panel Registry). It is part of the secure Provincial Attachment System (PAS) platform.
- The HCR provides a consistent registration experience for all people living in B.C. and supports local attachment coordinators and primary care providers with a streamlined attachment coordination process to accelerate attachment.
- The HCR merges existing local attachment solutions and waitlists with the provincial platform. The HCR provides a more effective approach to actively measure and manage attachment progress throughout B.C.
- The creation and continued enhancement of the HCR (as part of the PAS initiative) builds on government actions to strengthen health care and improve access to team-based primary care since 2018. For additional details: [Province helps better connect patients to primary-care providers | BC Gov News](#) AND [Province takes more actions to strengthen primary care for people | BC Gov News](#)

### What are the benefits of the HCR for Primary Care Networks and providers?

- The HCR helps to relieve some of the administrative burden providers are experiencing - allowing them to focus their time on patient care instead of attachment administration.
  - Local waitlists can close and merge into the HCR. “Are you accepting patients?” enquires to clinics can be redirected to HealthLink BC 8-1-1.
  - Local intake forms can be retired. Providers will be provided with comprehensive demographic information about a potential match as well as information on patients’ overall health complexity, and any self-reported new and recent health events or to inform patient selection.
  - Local attachment processes can be retired. Primary Care Network community attachment coordinators will use the provincial HCR to

digitally send patient lists for consideration to clinics within the Provincial Attachment System.

- Local processes to update capacity direct to an attachment coordinator or advertise to the community they are accepting patients can be retired. Providers can indicate their capacity in the PAS Panel Registry to the Primary Care Network community attachment coordinator.

### What is the role of HealthLink BC in supporting the HCR?

- HealthLink BC is responsible for the HCR, including:
  - Online information at [healthlinkbc.ca/health-connect-registry](https://healthlinkbc.ca/health-connect-registry), the registration form, the HCR Attachment Interface, and HCR Support overseeing the overall data quality of the HCR and registration experience.
  - 8-1-1 call centre that offers a non-digital solution for those unable to use the online registration form, require translation, or require access to services while they wait.
- HealthLink BC HCR Support also provides issues management support to communities, training and change management to attachment coordinators, and leads the continued enhancements to the solution and workflow informed by the partner relationship with attachment coordinators throughout B.C.

### What are the expectations for Primary Care Networks?

- Primary Care Networks are expected to:
  - Recruit attachment coordinators in alignment with the Family Practices Services Committee (FPSC) job description and funding parameters; attachment coordinators will be trained by HealthLink BC on how to use the HCR.
  - Integrate the HCR into the patient attachment process within their community.
  - Collaborate and engage with key partner groups, such as Indigenous health providers and other community partners.
  - Develop and align workflows, protocols and integration of the HCR within primary care provider practices.
  - Maintain alignment with policies, processes and guiding principles established by Ministry of Health for the HCR, the Provincial Attachment System, and attachment.

- Provide feedback about the HCR to your HealthLink BC contact, to support ongoing enhancement of the system and an attachment community of practice.
- Actively participate in the development and maintenance of each community's webpage page on HealthLinkBC.ca, including expansion of the webpage to support the Primary Care online initiative.
- Work with HealthLink BC to evaluate and inform the progress of HCR operations and use within your community.

### What are the expectations for primary care providers or their delegates (medical office assistants, or other staff)?

- Primary care providers or their delegates are expected to:
  - Indicate when they have capacity for new patients in the PAS Panel Registry.
  - Discuss their capacity with the local attachment coordinator so the coordinator may further understand a community's capacity indicated in the Panel Registry, the panel size, and the patient type a provider is looking to attach to their practice.
  - Collaborate with their Primary Care Network, Divisions of Family Practice and other attachment and administrative staff to align attachment practices that utilize the Provincial Attachment System platform (HCR, Panel Registry and Clinic and Provider Registry).
  - Complete the selection of registrants for intake and the community's clinic's intake process and indicate your patient selection(s) in the Panel Registry in a timely fashion.
  - Where possible, give priority consideration to highly complex patients.

***It is important to note that registrants are under consideration by one provider at a time – and cannot be considered by any other provider until they are declined and returned to the HCR. Please arrange a delegate from the clinic to manage the Panel Registry on their behalf to accelerate the selection.***

## As a primary care provider or clinic, who do I contact if I have capacity to attach?

- Family physicians and nurse practitioners with capacity for new patients should update their PAS Panel Registry to indicate this and include the maximum number of new patient requests they would like to receive.
- PAS Panel Registry capacity information is shared with attachment coordinators through the HCR.

## Is there a cost for communities or clinics to participate in the HCR?

- No. There is no cost to participate in the HCR or any other PAS initiative.

## What registrants will an attachment coordinator send to a provider for consideration?

- Attachment coordinators will use the registrant information and their complexity (high, medium, low as derived from clinical administrative data) to digitally recommend registrants to primary care provider accepting patients with the following in mind:
  - Mix of complexity: A combination of high, medium and low complexity registrants based on the clinical administrative data calculation (Adjusted Clinical Group and Resource Utilization Band, a well-known and widely used methodology for assessing patient complexity).
  - Health questions: Registrants with responses to the health questions during the registration may be helpful to understand the stability of the registrant and to find patients that have specific health needs best suited to that practice.
  - Group attachments: As defined during registration, family units may be attached with the same provider.
  - Registrant preferences: Should be considered, if possible, during the attachment process.
- Attachment coordinators must first contact a primary care provider, clinic or their delegate to further understand the capacity indicated in the PAS Panel Registry, and the panel size and focus a provider is looking to achieve.

## If a primary care provider doesn't feel that a registrant is a good fit for their practice, what actions can they take?

- A family doctor or nurse practitioner can decline attachment in accordance with their professional practice standards.
  - Standards for nurse practitioners: [BC College of Nurse.](#)
  - Standards for family doctors: [College of Physicians and Surgeons of BC.](#)
- The primary care provider should decline the match in the Panel Registry:
  - Panel Registry – Patient Selection: review the potential attachment match sent by the attachment coordinator and select Decline if the patient is not a good fit for your practice. At this step, the registrant is not aware they are being considered and subsequently declined, and the attachment team will continue to look for another match. If accepted, they move to Pending Intake.
  - Panel Registry – Pending Intake: if during the clinic-intake process it was determined (and shared with the patient) that the match was not a best fit, select Decline in the Panel Registry. The registrant **will be notified that the match was not successful and** that they remain on the HCR and the attachment team is working on a different match.
- While communities work to implement the enhanced digital approach to select and attach patients in the Panel Registry, the primary care provider or their delegate can advise the attachment coordinator verbally of any declines, or they follow the electronic process.

## Can a patient decline being matched to a provider?

- Yes. It is important the relationship between a primary care provider and a patient is a good match to ensure supports are in place for long-term health. Both the registrant and the provider should agree to the match.
- If a registrant has not agreed to a recommended family physician or nurse practitioner, they remain on the HCR and maintain their place on the list. The attachment coordinators will have a record of the attempt and not suggest that match to that primary care provider again.

## Who should attachment coordinators, clinics or primary care providers contact if they have questions about the HCR or need support to use the solution?

- Attachment coordinators: HealthLink BC is responsible for supporting attachment coordinators with the HCR Attachment Interface and associated workflows. Attachment coordinators should reach out to their designated HCR Support contact or [hlbc.healthconnectregistrysupport@gov.bc.ca](mailto:hlbc.healthconnectregistrysupport@gov.bc.ca) if they have questions or concerns.
- Clinics and primary care providers – attachment workflow: Attachment coordinators throughout B.C. are responsible for supporting providers and clinics with attachment. Attachment coordinators are actively integrating HCR into their local workflow. They are responsible for understanding local capacity and provider patient/practice preference (in complement to the PAS Panel Registry) and facilitating the match between a registrant and provider. Clinics and primary care providers should reach out to their local attachment coordinator if they have questions. If they are unsure on who or how to reach the local attachment coordinator, contact [hlbc.healthconnectregistrysupport@gov.bc.ca](mailto:hlbc.healthconnectregistrysupport@gov.bc.ca) for an introduction.
- Clinics and primary care providers – technical support: For questions on OneHealthID, or on the Provincial Attachment System (PAS) such as login or technical challenges, or endorsing other staff in a clinic, contact the following support teams:

### **OneHealthID Support:**

(access issues and MOA or other delegate endorsement)

- By email at [OneHealthID@gov.bc.ca](mailto:OneHealthID@gov.bc.ca).
- By phone at 250-857-1969.

### **PAS Support:**

- [Zoom meeting](#) (9am-7pm Monday to Friday excluding stats).
- Dial-in: 778-907-2071 Meeting ID 93003034945 Passcode 548989.
- Email: [healthbcsupport@phsa.ca](mailto:healthbcsupport@phsa.ca).

## We already have a patient waitlist system. How will this integrate with the HCR?

- All local waitlists should now be closed, and new registrants redirected to [HealthLinkBC.ca/health-connect-registry](https://HealthLinkBC.ca/health-connect-registry) or 8-1-1 to register for attachment to a primary care provider in the community.
- Communities with a waitlist will work with HealthLink BC to merge their list into the HCR. Prior to merging waitlist information into the HCR, HealthLink BC will work with communities to develop a merge plan that outlines the approach, communications with waitlist registrants, and the timeline.
- Before merging a community clinic's waitlist to the HCR, a clinic must have had a consent statement in place to indicate that information could be shared with the Ministry of Health or the health authority. If this was not in place, consent will need to be obtained by the community before an individual or family can be added to the HCR. HealthLink BC will work with communities to review their waitlist consent and next steps.
- During the merge process, HealthLink BC will gather any additional information from registrants that the HCR collects but may not be available in community. Registrants will receive confirmation when their name has moved to the HCR, and they will maintain the original date of their initial registration. If the registrant is already on HCR, HealthLink BC will update their registration date to match the one from the community waitlist.

## Who maintains the data on the HCR?

- HealthLink BC is responsible for the HCR. The HCR Support team at HealthLink BC is responsible for the overall data quality of the HCR. Attachment coordinators also ensure data accuracy as they interact with registrants. This includes confirming a registrant still needs attachment services from HCR, updating contact information, and reflecting any new, recent changes to their health.
- HCR Support is responsible for the accuracy and completeness of the registrant's registration information, including prompting registrants to update their information as it changes. Attachment coordinators are responsible for the accuracy of a registrant's status throughout the attachment process.

## Does the Ministry (or other provincial level partners) need to approve communication, marketing or outreach plans about the HCR?

- Following the April 2024 enhancements to the HCR, refreshed HCR posters and rack cards—all containing QR codes to the registration form and online information—will be made available to communities for print and distribution.
- Distribution of HCR posters and rack cards do not require approval. If a Primary Care Network community would like to alter the materials in any way, contact the HealthLink BC team for approval. This will ensure consistency and coordination of messaging across communities and mitigate any potential challenges or issues.
- HealthLink BC 8-1-1 is the “call to action” on the poster, rack card and likely any local outreach plans. It is important the HealthLink BC team are informed of media or social media campaigns and messaging to ensure the experience when calling 8-1-1 supports the Primary Care Network community approach.
- HealthLink BC will work collaboratively on any public or provider awareness activities they want to organize for their Primary Care Network community such as advertising, media announcements or social media posts.
- Outreach plans should be created collaboratively with input from HealthLink BC (Ministry of Health), regional health authorities and local Division of Family Practice.
- HealthLink BC (Ministry of Health) is actively working to increase public awareness of the HCR through news releases, social media campaigns, advertising and other initiatives to support Primary Care Network community outreach efforts.

## Does the HCR only match registrants with doctors and nurse practitioners? I have patients asking to be connected to other health care professionals.

- The HCR only connects registrants to either an individual family doctor or nurse practitioner (most responsible provider) in their community. The HCR will be enhanced to support team or clinic-based attachment in the coming months.