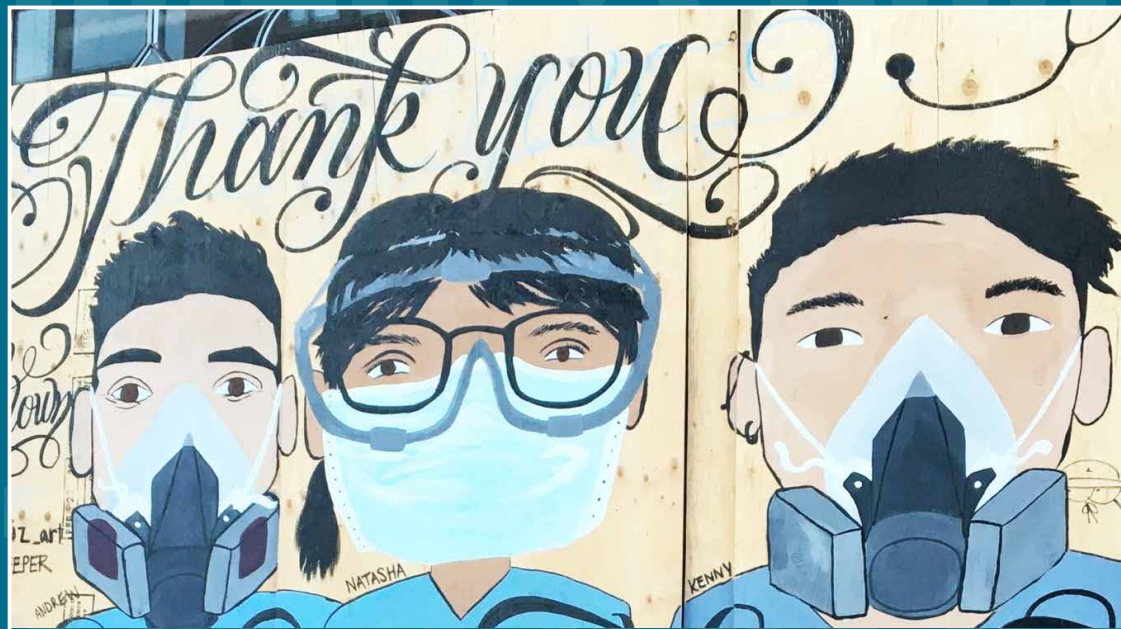


# Annual Report 2020/21



**Vancouver**

**Division of Family Practice**

A GPSC initiative

# tribute

*Thank you to all Family Doctors for your commitment to the health and safety of the people of BC during this pandemic. You continue to help frail elderly, babies, pregnant women, and those with severe mental health problems. You provide the backbone to our healthcare*



*system and support our complex needs patients, our drug addicted and those who cannot advocate for themselves. These are all jobs we do, because they need to be done. We give the best care possible and work to provide dignity, comfort and support to our patients. You are amazing.*

– Dr. Daniel Dodek, Physician Lead, Physician Wellness



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## ACRONYMS

Allied Health Professionals (AHPs)	Inter-Professional Team (IPT)
Continuing Medical Education (CME)	Long Term Care (LTC)
Cognitive Behavioural Therapy (CBT)	Long Term Care Initiative (LTCI)
Collaborative Services Committee (CSC)	Mental Health & Substance Use (MHSU)
Community Health Area (CHA)	New To Practice (NTP)
Community Network Managers (CNMs)	Nurse Practitioner (NP)
Doctors of British Columbia (DoBC)	Opioid Agonist Therapy (OAT)
Electronic Medical Record (EMR)	Patient Attachment Initiative (PAI)
Emergency Department (ED)	Patient Medical Home (PMH)
Equity, Diversity and Inclusion (EDI)	Personal Protective Equipment (PPE)
Family Physician (FP)	Practice Support Program (PSP)
Fee-for-Service (FFS)	Primary Care Network (PCN)
General Practice Services Committee (GPSC)	Providence Health Care (PHC)
General Practitioner (GP)	Recruitment and Retention (R&R)
Health Authority (HA)	Registered Nurse (RN)
Information Technology (IT)	Urgent and Primary Care Centre (UPCC)
International Medical Graduate (IMG)	Vancouver Coastal Health (VCH)

We acknowledge that we live and work on the traditional unceded homelands of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and Səlilwətaʔ/Selilwitulh (Tsleil-Waututh) Nations.

## From the Executive Director



It has been an unprecedented year to say the least – perhaps the most historically significant year in generations due to a global pandemic and a virus that seems highly resilient and adaptable. Together we have experienced lockdowns, economic hardship, an Equity, Diversity and Inclusion (EDI) awakening, anti-vaccination protests, a virtual world, and an overarching mental health and opioid crisis, all of which have made the job of delivering primary care to patients in Vancouver that much more challenging.

It's in these times that we see the absolute best of the profession. Your individual and collective efforts have maintained the health and well-being of Vancouverites and have helped hold our healthcare system together. The Vancouver Division of Family Practice is honoured to have played an important role in supporting you and primary care in Vancouver.

In this report you will learn about all of the initiatives that the Division undertook during this period. While this is important, it is not the main message of this report. This year more than any other year it is about celebrating you and your extraordinary commitment to patients. You are our healers and there is no higher calling. In a time like this, you shine like stars on a moonless night. Sometimes when you are in it, up to your eyeballs, you can't see the difference you are making. I can assure you that we can, and we are humbled for it. I encourage you as members to take a minute to absorb the full weight of this historical moment and your unique role in it.

Crisis creates clarity. We the public can see clearly the extraordinary commitment that Vancouver family doctors and your healthcare colleagues make on a daily basis. Perhaps the greatest example of your selfless contribution is while we were all still learning about the disease, family doctors continued to provide essential service in their clinics at great personal risk to themselves, some of whom inadvertently caught the disease and found themselves in Intensive Care fighting for their lives. Knowing that great risk awaits at your office and deciding to go anyway to service

patients is remarkable, and doing this as a collective is inspirational. To me, this is also the definition of heroism.

It also doesn't go unnoticed the tremendous pressure on primary care right now. You have been asked to do more than ever in an uncertain and in a highly dynamic environment. This has been layered onto years of neglect and compounded by other pressures that have slowly eroded pride and enjoyment and made the profession feel heavy and unsustainable. As an organization, the Division is committed to amplifying your voice to government, and where possible supporting you and your important work to the best of our ability. Please reach out to us if you need help in any respect.

It is certainly possible that next year will have a lot in common with this year – clearly COVID is not going away anytime soon. Our plans going into 2022 need to be flexible and resilient, remaining adaptable in responding to challenges while also promoting value for our members and for the patients you serve. Our collective work on primary care networks and patient medical homes may offer some creative solutions and unique opportunities. I believe that collective effort and our solidarity as a sector is our way out of this pandemic. Here is to brighter days ahead.

For now, take a moment to acknowledge your own unique contribution and know that every day in a multitude of ways you made a tremendous difference in the work that you do – thank you sincerely for everything you do!

Sincerely,

**Dr. Dave Baspaly, Executive Director**

## From the Chair



For me autumn is my favourite time of year, my 'power season'. It has something to do with the crisp days and cool nights, the harvest, and being invigorated to work on new and renewed projects. It's a time to reflect on the year passing before another begins. It's fortuitous, then, that our AGM occurs in the autumn. Looking back there's much to be proud of and grateful for. Looking ahead, the ongoing and necessary work of supporting primary care remains pivotal to the activities of the Vancouver Division.

It stands without saying that the challenges we've faced, and will continue to face for the intermediate future, are huge. The pandemic has stretched us, and stressed us, in ways we probably couldn't have imagined. It's been physically and emotionally draining, a true test of our collective resolve. There's been risk associated with simply showing up for our work. And, unlike anything we've encountered in our practices before, there's been pervasive uncertainty and, sometimes, opposition and dissatisfaction expressed by our patients. Yet primary care, you practicing your craft, has remained a foundational piece of health care in this city. Seeing patients in-person or virtually, knowing them as you do, you've kept a bad situation from being so much worse.

Few would dispute that a good health care system needs a solid core of primary care. And you've demonstrated that in spades. We know that worsening mental health, increased substance use and domestic violence, and progression of chronic disease are predictable, unfortunate, consequences of the pandemic and post-pandemic reality. We're already seeing those factors come to bear. We also know that primary care provides tangible and vital lifeline for their patients experiencing these issues.

The Vancouver Division takes very seriously our role of supporting you in the work you do – from committee work on selected populations (maternity, elders, mental health) which focuses on identifying and solving problems, to helping build primary care networks and their governance structures, to offering a platform for physician wellness, to being a trusted source of information and resources. This report highlights the activities and accomplishments of the Division this past year. Certainly, we've helped you with many of the practical challenges posed by the pandemic. At the same time, we've kept the vision of reforming primary health care central to our operations. Now, just a little more than ten years into the bold experiment of creating Divisions to improve quality and access to primary care, we're seeing the fruits of your collective labours. With the Division's support and oversight you've begun coalescing networks in the areas of your practice and are considering how to benefit from team-based care. We anticipate this early progress towards enhanced and sustainable primary care will accelerate. The often-used adage "building back better" certainly applies to our focus on supporting you in your work and your networks.

So it's with optimism and gratitude that we celebrate your resilience, dedication and altruism. It's always hard work being a family doctor. It's been especially hard through the pandemic. Please take a moment to reflect on all the good that you, your colleagues and your Division have achieved.

Sincerely,

**Dr. Jay Slater, Board Chair**



# >> Organization Overview

Since our beginning in 2010, the Vancouver Division has grown to become a leader and facilitator of primary care, working to create an engaged physician community and a collaborative healthcare system in Vancouver. We are a not-for-profit society funded by the Government of BC and Doctors of BC (DoBC), and work in partnership with the BC Ministry of Health, Vancouver Coastal Health (VCH), Providence Health Care (PHC) and other community organizations.

**OUR MISSION** Vancouver Division will improve the primary care system in Vancouver for the benefit of our patients and members alike.

**OUR GOAL** Building off the rich and diverse ways that family doctors provide primary care, the overarching goal of the Vancouver Division is to support our physician members and advocate that they get the necessary tools to look after their patients. We strive to ensure that family doctors remain central to system change in this community.

**1,184**  
MEMBERS

As the **largest provincial Division**, our membership of nearly **1,200 FAMILY DOCTORS** represents **90% of the practicing family doctors** in the **City of Vancouver** and approximately **20%** in the province.

# >> Board of Directors



**Dr. Nitasha Puri**  
Board Member



**Dr. Kelly Little**  
Vice-Chair



**Dr. Jay Slater**  
Board Chair



**Dr. Jane Gustafson**  
Board Member



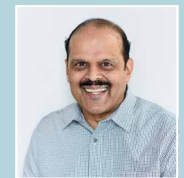
**Dr. Jesse Kancir**  
Resident Board Member



**Dr. Eamonn Rogers**  
Board Member



**Dr. Robin Patyal**  
Board Member



**Dr. Ramesh Kamath**  
Treasurer & Secretary

2020  
2021

# >> Strategic Priorities

*Building off the rich and diverse ways that our members provide primary care in the community, the overarching goal of the Division is to support members in the ongoing care of their patients and to ensure that family doctors are a driving force in the primary care system changes underway in our community.*

## 1 Members

The power of our Division rests in our membership. Any system change must serve the needs of our members and will require strong physician leadership. Through Family Doctor Wellness and Resilience initiatives as well as engagement and representation opportunities, the Division will support physicians to feel valued, represented and considered.

## 2 Patients

Patients are at the centre of the healthcare system and as such are the ultimate focus of the work we undertake.

**A. Increase Appropriate Access to Quality Primary Care** – ongoing access to a family doctor improves patient outcomes and reduces overall health expenditures

**B. Patient Engagement** – the effects on, and needs of, individual patients, patient populations and future patients.

## 3 System

Partnerships with primary care providers, community service providers and system stakeholders and key system enablers are critical to successful system change.

### A. Partners

Partnership Tables build upon existing collaborative relationships with partners including Vancouver Coastal Health, Providence Health Care, Provincial Health Services, Divisions BC and other community partners to ensure the family doctor's voice is incorporated in the partnership work.

PCN Implementation is based upon a strong foundation of PMHs (family practices), honours the role of family doctors, and incorporates the principles included earlier in this document.

### B. Enablers

Information Technology is an essential tool in achieving improvements in system efficiency, patient access, population health and overall experience of the system for both patients and providers.

Evaluation must be incorporated to understand the impact of our work, strive for constant improvement and remain accountable to our members and funders.

## Equity, Diversity and Inclusion

Last year, the Board undertook equity, diversity and inclusion as a primary objective of the Division and we began our purposeful work to acknowledge, understand and start to address these areas in healthcare and within the organization. Over the past twelve months, we developed a task force under the Membership Committee to understand how best to support our members in this area. Efforts have included providing a forum for members to raise specific concerns, amplifying members' calls for action, and connecting with similar groups in our colleague organizations. Over the coming year, the dedicated members of the task force will continue with this important work. Internally, we conducted an organizational audit and have worked with staff to provide education and sharing opportunities as we continue our efforts to be a safe, representative place to work. The Division's work in this area is evolving and is seen as ongoing process for the organization and our members to strive to understand and improve the effects of inequity on healthcare. To keep our members updated, we are creating a dedicated page on our website and encourage you to explore it when it becomes available.



# >> Physician Wellness

## Health = Individual x Cultural x System

This equation was created by **Dr. Mamta Gautam**, a leading voice on physician health and wellness based in Ottawa. This formula captures the wholeness of physician health and their interconnections. The Vancouver Division's Physician Wellness Initiative and the menu of options in which members can participate, aim to support the "individual" and fosters a "culture" of compassion. The Vancouver Division has many facets of work aimed at impacting the "system" part of the formula, including the development of Primary Care Networks (PCNs) and Patient Medical Homes (PMHs), programs like the CBT Skills Group, and longitudinal attachment to primary care providers for physicians and patients.

Empathy  
Care

## This year we expanded our efforts supporting physician wellness

### Continue to foster and encourage physician champion voices

Dr. Daniel Dodek and his "The Dr. Dan Wellness Tips" continued to be a "must read" part our bi-weekly Fast Facts newsletter. This year Daniel has called on members to share their voices and experiences – from their own wellness tips to photos of their home office. These snippets are meant to provide easily accessible wellness wisdom during the frenetic times of the pandemic.

### Our "Refuel and Recharge" series bring wellness to an entire clinic

This series has been a true collaboration – bringing together the strengths of three Division departments. The series is based on the skills and techniques offered by the CBT Skills Group Program, taking key concepts and CBT-based exercises from the 8-week of 90 min sessions into 30-minute power packed sessions over 6 consecutive weeks. The Physician Wellness team worked closely with the PCN Team to pilot this new wellness offering to a clinic that they felt would benefit from bringing their entire clinic team (staff and clinicians) for some focused refueling time. With the successful pilot now complete, we are working with the PCN Team to further identify clinics who could benefit from this team-based approach to wellness.



Members at a wellness event.

“Other people can’t give you wellness. You have to get it yourself! However, a little expert guidance and doing something together can do wonders to help you get it.” – Event attendee



## Bringing members together in “unique” ways

We hosted virtual sessions allowing physicians to connect, explore creativity, and participate in online workshops that purposefully do not look and feel like every other Zoom meeting. We encourage members who are both familiar and new to self-care to participate in this series that will continue into the fall. The workshops range from 1-2 hours depending on type. Examples of workshops we’ve hosted this past year, and plan to continue hosting on a regular rotation include:

### • Writing based workshops:

- **Diastolic Diaries with Dr. Daniel Dodek:** A one-hour informal creative writing session led by physician wellness lead Dr. Daniel Dodek. There are 3 writing prompts with 8 minutes to write on each topic. This is an opportunity for members to gather with their colleagues.
- **Diastolic Diaries with Mark Leiren-Young:** A one-hour creative writing session with author, screenwriter, actor, and environmentalist Mark Leiren-Young. Mark will introduce writing prompts and allow 8 minutes for writing. This is an opportunity for members to seek feedback from Mark about their writing.



Painting by Member

### • Arts and Education:

- **Drawing workshops:** In partnership with the Belkin Art Gallery and Holly Schmidt. The drawing workshops are for all levels and will support and deepen attention, rather than the creation of refined drawing. Holly will guide members through drawing exercises using pencil, pen, and pencil crayons to help participants see plant life with fresh eyes.
- **The Zentangle Drawing Method, A Meditative Art Practice with Michelle Man:** A one-hour workshop with instructor Michelle Man to learn the Zentangle method. Zentangle is a drawing method that calms the mind, and it can help reduce stress. It is a beautiful, meditative art practice, imbued with reverence and ritual that can be done anywhere and with no artistic training.

### • Food based:

- **Cooking:** Classes with Michelle Dodek focused on education about vegetarian eating. Certified Red Seal Chef Michelle Dodek leads fun, engaging, and dynamic cooking classes. Members will be encouraged to ask questions, cook along, or take notes while watching Michelle demonstrate.

*“A mindful break from everyday worries. Learning to be calm and even enjoy giving up control.”*

# Compassion

# > Work Through COVID-19

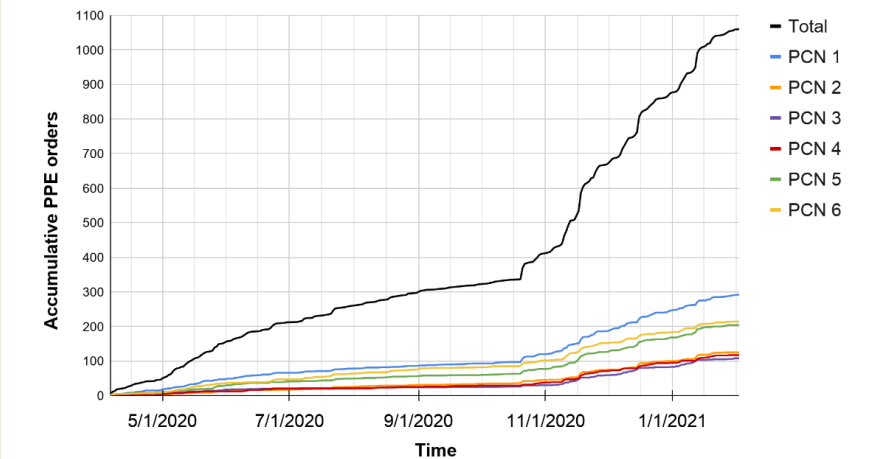
*“We are plunged in a long and grievous struggle. But all will come right if we all work together to the end.”* – Author unknown

## Personal Protective Equipment (PPE) Outreach and Distribution

The Division temporarily distributed PPE to Family Physicians (FPs) in Vancouver. To ensure that our members were aware of this service, and that they were not without PPE, the Community Network Managers (CNMs) reached out Vancouver-wide to connect with their region’s clinics and let them know about the service. The graph shows the number of PPE orders we received over time. After the CNMs engagement (Oct 27 – Dec 8, 2020), the number of orders spiked significantly. Throughout our time as ‘PPE distributors,’ we delivered over:

- **550** items of face protection (shields, goggles, safety glasses),
- **5,100** disposable gowns,
- **89,500** pairs of gloves, and
- **279,000** masks

## Accumulative PPE Orders Placed Over Time



# Response

Implementation of Inter-Professional Teams (IPTs) to support Primary Care Networks (PCNs):

- We launched IPTs in PCNs 1,2,3,4, and 6 and hiring is underway for the remainder of the PCNs.
- The overall results of the soft launch underscored the fact that the PCN IPT service is highly valued by patients and primary care providers. 92% of patients reported that the quality of service was “very good” or “excellent” and that they would recommend this service to a family member or friend; 100% of the FPs rated their level of satisfaction with IPT service as “very good or excellent” and would continue to make referrals. This is a testament to the quality care delivered and to the collaborative efforts made by everyone to work together to enhance patient care.
- COVID-19 increased the demand for Mental Health (MH) services. As such, and with guidance from the PCN steering committees, the complement of the IPTs was adjusted to increase the MH service capacity of the service.

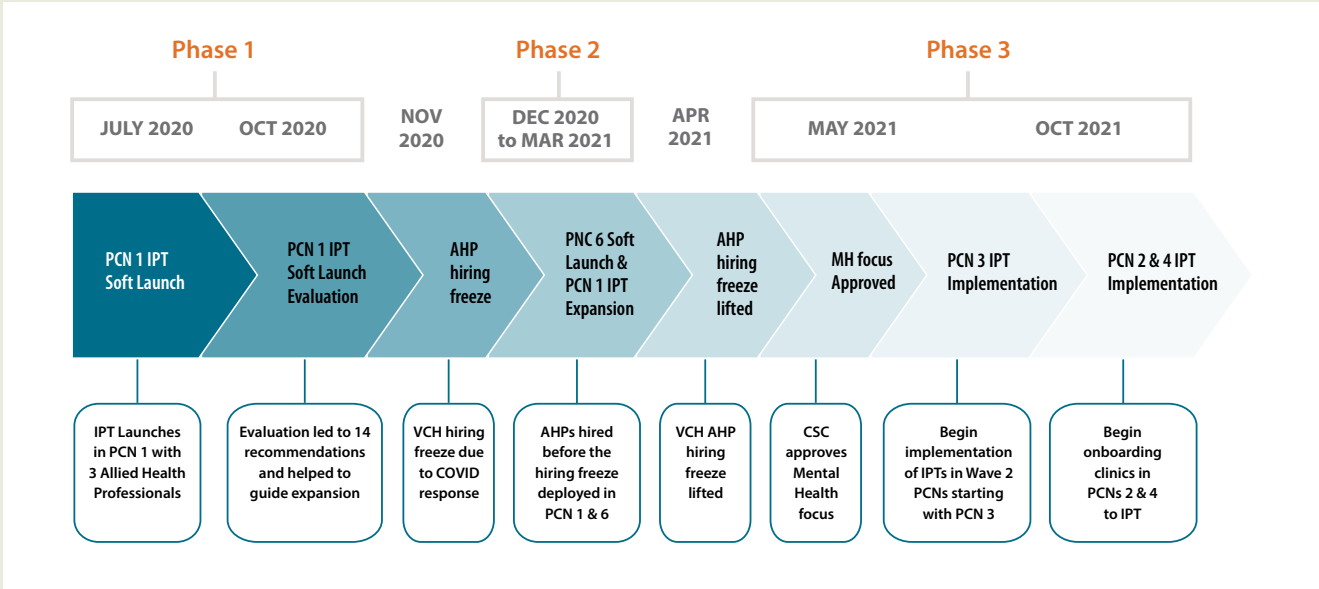
Maternity

The pandemic forced a pause on the EASI Maternity Care Project. The goal of the project is to create an online “one-stop-shop” maternity information hub for patients and providers. This year, we resumed and concluded the large resource curation process, which saw **884** suggestions of great maternity resources, of which has been narrowed down to **597** based on our assessment process. Moving forward, we will be seeking feedback to select the best resources for this hub.

“Feeling supported, feeling like I can help my patients, giving patients a sense of hope and relieving despair, providing a powerful resource to patients.” – Family Physician

“[I’m] very glad that my family physician connected me with the Occupational Therapist (OT). Great service especially in these days of COVID-19.” – Patient

“Please keep this service running forever!” – Family Physician



Patient Attachment Initiative (PAI)

The PAI team continued to attach patients through the COVID-19 pandemic. This past year, PAI matched **5,725** patients and their family members to primary care providers in Vancouver. Of these, **69%** had complex or priority needs. To date, the PAI has matched **22,000** patients and their family members, or **97%** of all eligible referrals.

The PAI team works with over a hundred referral partners in Vancouver. Some highlights from the past year include that PAI team attaching:

- **223** unattached physicians and their families
- **111** gender-diverse patients
- **63** patients who have recovered from COVID-19

Recruitment and Retirement

The Recruitment & Retention (R&R) team successfully supported clinics and FPs in placing **73** locum and permanent matches in Vancouver in the last year. The team placed **36** locums, **11** permanent fee-for-service physicians, **11** permanent New to Practice PCN physicians, and **15** PCN nurse practitioners.

The increase in locum needs from providers and clinics resulted in **170** available positions in Vancouver. Reasons for this increase include burn-out and increased clinic capacity due to virtual care.

The R&R team has continued to support FPs in the different stages of retirement. This year the team supported **nine** retiring FPs to relocate their panels to new providers and expects to support **six** more by the end of 2021. The Division supported a total of **43,231** patients through the retiring physician batch-rate matching program and provider recruitment.



Long Term Care Initiative (LTCI)

The LTCI Team has maintained the after-hours care program quality standards and call metrics: an average response time or approximately **3** minutes per call, with nearly **90%** of calls answered within **5** minutes. The after-hours care program was extended to cover the fire evacuated residents from the Central Interior in support of our VCH partners, who generously provided temporary Long Term Care (LTC) services to these individuals.

Physicians were conscientious about on-site visits to care homes this year because of COVID-19, leading to an increase in remote prescribing and the need for a tool to support more written orders. The Division developed a “Standardized LTC Remote Prescriber’s Orders” form and supporting guide that was shared with both the Richmond and North Shore Divisions.

Communication between care homes and our clinician community was also challenging due to COVID-19. Point Click Care (PCC) is the EMR used by **60%** of care homes. The Division coordinated the rollout of the PCC secure texting tool, Secure Conversations, to support interdisciplinary care team communication during the second wave of COVID-19 outbreaks in our community.

“I retired from my full service family practice in Kitsilano at the end of April 2021. Unable to find a replacement physician, I was incredibly grateful for the support from the Vancouver Division of Family Practice. I received assistance with the patient notification process, and most importantly, matching patients to new primary care providers in the community. Knowing that the majority of my patients were connected to a new physician or nurse practitioner was very reassuring.” – Roberta Pauls, MD (Member)



# >> Flu Vaccination

*Family clinics administer 40% of influenza vaccinations in Vancouver. The Division worked closely with VCH to support our members to vaccinate their patients despite COVID-19 restrictions and protocols.*

*During the 2020-21 influenza immunization season, the Division offered the following services to community clinics:*

- Arranged for vaccine delivery from VCH depots to family clinics – 70 total deliveries in October / November 2020
- Escalated vaccine renewal requests to VCH for members offering high-volume flu immunization clinics
- Supported members with high-volume clinics at alternate locations such as office atriums, outdoors and at VCH Public Health sites
- Connected clinics with UBC medical students interested in volunteering to immunize patients



# Health Safety

# Neighbours Clinics



*My decision to work with the Division to participate in the VCH Immunization Clinic was a multi-factored one. The location of the VCH Clinic (Croatian Cultural Centre) was central, with ample parking for my patients and staff. We also were struggling with access to enough PPE to safely support a Flu Clinic at our offices due to COVID-19. VCH provided all the PPE and supplies and triaged the patients into the clinic so all we had to do was show up.*

*I brought my whole team down there and it was fun – like a team-building exercise. And we got to work alongside other nurses and clinicians, so it was also great from a community-building perspective. During the COVID-19 pandemic, we haven't been able to see each other or get out into our communities. It felt like a work event and a social one too. We were able to do a good volume of flu shots and the Division helped to facilitate the process and make it seamless and easy for us to participate.*

*We would definitely be interested in participating again.*

– Dr. Panagiotis “Taki” Galanopoulos, MD (Member)



The Vancouver Division continued to do a great job in assisting members during the pandemic and had to divert some focus away from its establishment the Primary Care Networks. However, work continued behind the scenes on the Networks – 6 of these in our Division – and the focus is now shifting back to the PCN. Some of our members may have already seen a change in their areas of practice and this is only the beginning towards more robust team-based care.

As you will notice in the graphs, our revenue for the year ended March 31, 2021 has remained similar to that of the previous year and the various pockets of revenue have remained somewhat constant. It is anticipated that in the coming year there will be a substantial increase in the PCN Service plan spending which drives overall revenue for the Division. This facilitates the ramp up of our PCNs and helps to take some load off our members with the assistance of allied health supports offered through the PCNs.

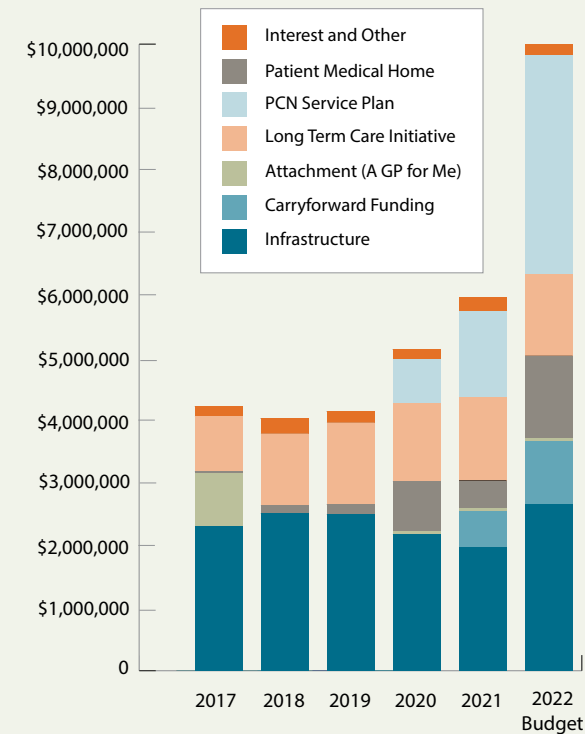
All of this work is being done while continuing to consider COVID-19 as it unravels; to this end, your Division has used the funds judiciously and allocated funds appropriately. This is reflected in the Revenue and Expenses pie charts which give an overview of the finances of the Division. I am happy to report that the staff have worked tirelessly and adapted well to remote/hybrid working and I would like to offer my sincere thanks to the excellent work done by the entire operations team. They have, as have you, done a great job in these very different times to maintain our finances and ensure that there is funding for all the projects and the PCN work as we move forward.

Sincerely,

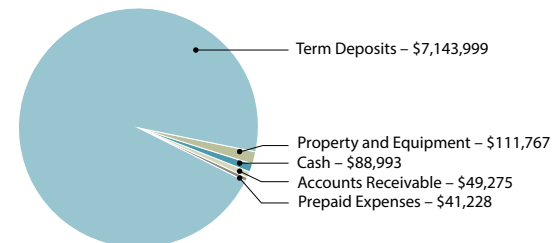


**Dr. Ramesh Kamath**  
Treasurer and Secretary

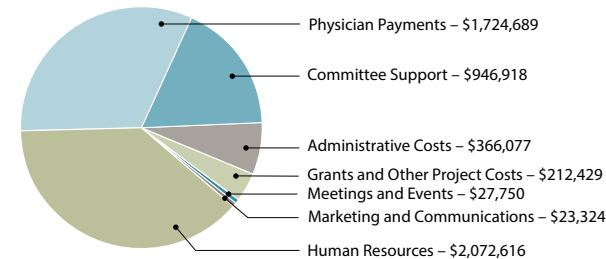
### YEAR OVER YEAR REVENUE GROWTH



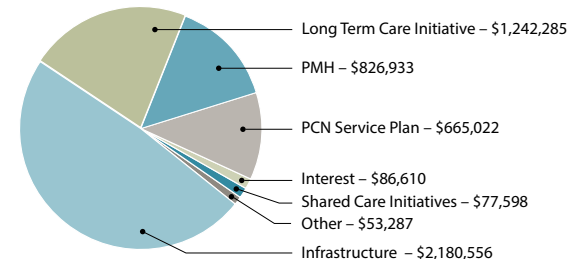
### ASSETS 2020/2021



### EXPENSES 2020/2021



### REVENUE 2020/2021



# thank you



**The Healing Hand**  
by Coast Salish artist  
Simone Diamond raises  
hands in hay č x<sup>w</sup> qə  
(gratitude/thanks) to  
frontline workers.

*These pins have been sent to our practicing members in gratitude for their selflessness and sacrifice shown by risking their lives to provide healthcare, seniors care and other services during the COVID-19 pandemic.*

# hay č x<sup>w</sup> qə

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**Vancouver**

Division of Family Practice

A GPSC initiative