

FAMILY PRACTICE RENEWAL PROGRAM

2022 Annual Report



MISSION

Transforming family practice for better health.

VISION

Family physicians, primary health care providers, and patients working together for an effective and sustainable system.

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FPRC CO-CHAIRS MESSAGE:

We are pleased to present the 2022 Annual Report for the Family Practice Renewal Program (FPRP), a joint initiative of the Newfoundland and Labrador Medical Association (NLMA) and the Department of Health & Community Services (DHCS), Government of Newfoundland & Labrador.

2022 has marked a significant year in family medicine, and FPRP represents an important partnership in the advancement of programs that will help position Newfoundland and Labrador as an attractive environment for family practice as we move forward.

As the governing committee for the program, the Family Practice Renewal Committee (FPRC) provides a table for important conversations and decisions as we consider the health system changes occurring around us. We trust that our work will help ensure family practice in our province will continue making a foundational contribution to ensuring an effective, sustainable primary health care system.

We celebrate the passionate commitment to leadership and innovation within family medicine in Newfoundland and Labrador, and we thank our physician leaders and system partners for working with us, even in the midst of uncertain times.

If you have any questions, ideas, or concerns, please do not hesitate to reach out! We highly value your perspective and ongoing feedback.

Most sincerely,

On behalf of the Family Practice Renewal Committee

Dr. Lynette Powell, FPRC Co-Chair, Family Physician, NLMA

Gillian Sweeney, FPRC Co-Chair, Assistant Deputy Minister, Department of Health and Community Services

* Please see Appendix for list of FPRC members.

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Glenda Nash

PROGRAM DIRECTOR'S MESSAGE:

I would first like to acknowledge the commitment of our family physicians, the broader medical community, our system partners, and indeed all health care providers, who have engaged with us this past year. Your participation and hard work within our Boards, Committees, working groups, and various initiatives, is inspiring, and has allowed us to achieve great strides in 2022.

That said, we have challenges ahead. We are confident that the mechanisms provided through FPRP will help navigate those challenges and ensure family physicians will continue to play a meaningful and collaborative role in primary health care reform.

The following are highlights of 2022 progress:

- With approximately 450 family physician members, our Family Practice Networks (FPNs) have been busy this year developing and implementing programs based on the strategic plans of each Board. We are also pleased to have started the conversations with physicians in Labrador and on the Northern Peninsula to develop a Family Practice Network in the Labrador-Grenfell Health region. We hope to welcome our fifth FPN in 2023!
- Our Collaborative Service Committee (CSC) partners are actively working on various initiatives to improve family physician recruitment and retention, developing projects to address patient access issues and increase care coordination, and jointly planning for the implementation of Collaborative Community Teams (CCTs), a recommended initiative from Health Accord NL.
- The MyQ Navigating Care Coordination series began in November, applying quality improvement principles to improve care coordination between family physician clinics and their referral partners.

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• We continue to support development and delivery of provincial comprehensive clinical education programs, aligning with the needs of our patient demographic and those of our family physicians. Our current programs focus on Frailty, Palliative Care, Chronic Pain, and Advanced Addictions Treatment, as well as a weekly live lecture series.

- MyPractice launched in late 2021. An educational and support program focusing on the business side of family medicine, program elements consist of Online Modules, Bootcamp Workshops, and a Mentor Matching Service.
- This past year, FPRP was pleased to support enhanced Electronic Medical Record (EMR) functionality in physician clinics by funding physician cohorts for enhanced EMR training and EMR Communities of Practice within FPNs.
- In late 2021, FPRP launched an Equipment Fund, through which eligible family physicians can be reimbursed for 80 per cent of the costs they incur for the purchase of new or refurbished medical equipment, up to a maximum of \$2,500 per physician.
- FPRP and our FPNs worked together to build a new website. The site, featuring new branding for each FPN, offers enhanced functionality and a more prominent profile for our Networks, with the intention to drive member engagement.
- A new FPRP fee code was introduced in late 2021, enabling physicians to bill for enhanced care of patients with COPD. The new COPD code was released in coordination with a group learning program on Navigating the COPD Visit.
- Two new funds launched in late 2021 and early 2022. The FPN Innovation Fund will provide
 project grant funding for one-time innovative initiatives that carry potential for sustained
 improvements in primary care. The Continuing Professional Development (CPD) Fund supports
 physician and clinic staff educational opportunities, building competency and enhancing skills
 to reflect the local priorities of FPNs and the CSCs. The CPD Fund has supported nine CPD
 initiatives so far, with attendance by more than 200 members.
- We were pleased to meaningfully engage with family medicine residents and medical students this past year, including welcoming a growing number of residents as FPN members. Various sessions were held with the learner community and FPRP was pleased to support learner attendance at several events/conferences.
- FPRP and FPNs facilitated the ongoing engagement of family physicians with system partners at
 various tables this past year, including Health Accord NL, RHAs, the Provincial Health Authority
 Transformation Team, NLMA, DHCS, NLCFP, eDOCSNL, and Memorial University's Faculty of
 Medicine. We expect 2023 will see the beginning of significant system change; we look forward
 to the continued development of meaningful partnerships and collaboration as this work
 evolves.

As we move forward, FPRP will look to meaningfully engage with physicians for your input into the future direction and goals for the program. If at any time you have ideas, questions, or concerns, please don't hesitate to reach out to our staff, or to me directly. Once again, thank you for your commitment to FPRP.

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Background: Family Practice Renewal Program

The Family Practice Renewal Program (FPRP), formed in 2016, is a joint initiative of the Newfoundland and Labrador Medical Association and the Department of Health and Community Services. FPRP recognizes that improved population health and health system sustainability requires a renewed focus on primary health care reform, and on family practice reform in particular, and that family physicians have an important role to play in the improvement and full integration of primary care and primary health care services and supports. FPRP has three key initiatives - Family Practice Networks (FPNs), Fee Code Program, and the Practice Improvement Program – as well as Financial Support initiatives that are offered from time to time.

Family Practice Networks

As one of three core initiatives of the FPRP, FPNs provide mechanisms to address local physician and practice issues and ultimately aid in physician recruitment and retention. FPNs also enable community-based family physicians, in collaboration with their regional health authorities (RHAs), to identify and address common health care goals and gaps in local communities, and in doing so, improve delivery of primary health care services.

Family Practice Networks:

- Give physicians a stronger collective voice in primary health care delivery and policy.
- Provide professional support for physicians in providing comprehensive patient care.
- Allow physicians a mechanism for partnership and bigger impact in their communities.
- Help physicians work together to improve their clinical practices.

There are now four FPNs across the province with ~450 family physician members. Each FPN is a non-profit corporation developed and governed by physicians. While the provincial program provides standard structures and general direction, the local approach encourages FPNs to focus on the needs of their own physicians and patients.

Each FPN has an executive director, supported by FPRP staff and an administrative assistant, whose responsibility is to develop and implement programs based on the strategic direction provided by the FPN Board.

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Family Practice Networks

In 2022, our FPNs worked collaboratively with stakeholders to address provincial challenges and opportunities. Some examples of these activities include:

- Collaborated with RHA recruiters and DHCS to deliver recruitment sessions at Family Medicine Core Content Week (March and November 2022).
- Worked with DHCS and RHAs to create a list of Family Physician Practice Opportunities as a recruitment tool at Family Medicine Forum 2022.
- Developed a Special Authorization Guide in collaboration with Memorial University's School of Pharmacy students; this work was lead by the RE-Boot/Endeavor Less Paperwork Working Group, and was provincial in scope.
- Provided Electronic Medical Record (EMR) Super-User training to a group of five family physicians, while looking forward to further knowledge sharing with the broader membership.
- Created the Physician Promotion group to identify and share the incredible work family physicians are doing across the province.

Please read further for an update on progress within each of our FPNs.

Endeavor FPN

The Endeavor FPN was formed in mid-2018 and represents participating family physicians in the St. John's metro area. Energized by the meaning and symbolism of "Endeavor," the FPN recognizes the effort to not only aspire to, but achieve and meet, the needs of family practice colleagues and patients.

Below is an update from Endeavor Board Chair Dr. Annette McCarthy.

Over the past year, Endeavor has worked hard to strengthen and grow our network. We currently have 217 members in the greater St. John's area. This year, more than 30 individual physicians have directly served on various committees and working groups, which is in addition to the dozens of other members who have provided feedback to help us better represent the needs of family doctors in our province. Thank you all for your hard work and engagement!

One of the main purposes of Endeavor is to be a voice for our members in the continuing conversations with government and the regional health authority about the many issues faced by family physicians. Above all, we've tried to advocate for a better quality of professional life for our members and improved care for our patients based on our collective lived experience. Specifically, we have collaborated with the Department of Health and Eastern Health to ensure the needs of family physicians and patients alike are addressed as we navigate the changing landscape of health care, including the implementation of blended capitation and the new Collaborative Team Clinics (CTCs) around the city.

As we move into 2023, we look forward to continuing to grow our FPN. As always, we welcome your ideas, experience, and drive to improve patient care and physician satisfaction in our region.

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Here are some notable activities that occurred in 2021-2022 for the Endeavor FPN:

- The Endeavor FPN has continued to support the development of the Less Paperwork Working Group, in partnership with the RE-Boot FPN board. Most recently, this group has sought out additional providers who can provide required documentation to the Income Support Program for patients requiring additional goods or services. In partnership with MUN School of Pharmacy students, they worked to develop the Special Authorization Form Guide, a tool that was released this past summer that's designed to improve clinic efficiency and overall care for patients. As well, the group has been working to address the administrative burden caused by re-referral letters.
- Endeavor prioritized and coordinated six events this year, utilizing the FPRP CPD fund. Events included CPD education, medical office staff support as well as organized BLS training. Well over 100 members and their staff attended our events in 2022. Evaluations of our 2022 events have been tremendously positive, with many suggestions regarding priority areas for the coming year.
- Since 2019, Endeavor has supported a small but robust group of locums in our area. This group has created a variety of practical resources that have been shared and adapted across the province. In addition, the locum group maintains the locumgroup@endeavorfpn.com email that helps coordinate local needs with an appreciation that locum demand will often outstrip locum supply. Another key role of this group has been to provide organized feedback to all decision-making entities, ensuring locum perspectives, experiences, and challenges are shared. It is strongly recognized that this group, their feedback, and membership, will include a provincial lens whenever possible.

• Dr. Krysta Au, Endeavor board member, has recently struck a new working group whose purpose is to investigate and propose potential solutions for the issue of physician retention in the province.

• Endeavor Board member, Dr. Alysha Mehta, and FPN Member, Dr. Meghan Greene, are spearheading a new working group to address the needs of physicians working in Personal Care Homes.

Dr. Annette McCarthy, Endeavor FPN Board Chair





RE-Boot FPN

The RE-Boot FPN was formed in the fall of 2019 and represents participating family physicians from the Burin and Bonavista Peninsulas, Clarenville and area, Conception Bay North, and Trinity North. The name represents the vision for the FPN. The "RE" in "RE-Boot" represents Rural Eastern physicians, while the "boot" is a geographical reference to the Burin Peninsula. Together, they combine to mean a restart, or "RE-Boot," in family practice. The reference is symbolic to the FPN and provides a mechanism to support and achieve family practice needs and the pursuit of improved patient care.

Below is an update from RE-Boot Board Chair Dr. Jackie Elliott.

It has been an incredible year and one in which I'm certain we will all look back at and feel forever changed. As I write this, we are at a turning point in primary health care in the province. The FPN continues to work to be a collective voice and mechanism for change, while staying focused on the task ahead.

Over the last year, we have participated at many different tables, including various committees of the Health Accord Task Force, provincial ODT spokes development, mental health, heart failure, and recruitment and retention discussions, Eastern Health's palliative care team, rural paramedicine palliative project, COVID-19 related groups, and primary care strategic planning sessions.

Additionally, we've collaborated with partners on the Family Medicine Lecture Series and started conversations with municipal leaders to talk about how local communities can support family physician recruitment and retention. We are pleased with the collaborative solutions we've created with our Eastern Health partners at our Collaborative Services Committee.

We started 2022 with the goal of increased member engagement, and we are delighted to have accomplished that. Thank you for your participation by way of emails, attending working groups or focus group sessions, or joining our in-person member events. Thank you for sharing your time and perspectives with us.

I also want to express my gratitude for the continued efforts you all make each and every day to ensure our patients get the access and attention they so deserve. More than ever before, this is a time when we need to rely on each other and provide the support we need to make this change happen.

Here are some notable activities in 2021-2022 for RE-Boot FPN:

• Member Engagement

 This past year has been busy from a member engagement standpoint. RE-Boot held nine inperson member events this year with 60 members from across our region. We also offered a MainPro Certified CPD event attached to our virtual AGM, which featured three specialist colleagues who kindly shared their tips and tricks around referrals.



- In addition to these more official events, we also had the chance to welcome new members to the
 region by sharing information and providing opportunities for them to meet their colleagues. In
 a similar vein, RE-Boot met with new-to-practice family physicians to show them the supports the
 FPN and FPRP provide as their bridge to practice.
- RE-Boot has also had a successful year working with partners in the health care field. We
 collaborated with the School of Pharmacy to create the NLPDP Special Authorization Guide,
 which is accessible on the new FPRP/FPN website. We also worked closely with Eastern Health to
 facilitate N95 Fit Testing for community family physicians.

• Recruitment & Retention

• The recruitment and retention of family physicians is obviously one of the biggest challenges facing the health care system in our province. RE-Boot has taken steps to try to help with these issues this past year, including meeting with 65 town councillors from across our region to talk about ways they can support recruitment and retention efforts. Additionally, we sponsored two MUN Family Medicine Resident Weekend Workshops, including welcome events with local FPN members, town councillors, and local RHA leadership. Finally, we have collaborated with the FPRP Practice Improvement Program on the MyPractice Bootcamp with residents to introduce them to the business side of family practice.



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• Less Paperwork Working Group

• The Less Paperwork Working group has been busy this past year trying to lessen the administrative burden on family physicians, so they can help patients instead of deal with red tape. Earlier this year, the group disseminated FPN example letters, including a Disability Tax Credit checklist and a sick note response, to try to address some of the issues that were brought to our attention.

Dr. Jackie Elliott, RE-Boot FPN Board Chair





Shalloway FPN

The first FPN in the province, Shalloway, was formed in early 2018 and represents family physicians in central Newfoundland. The name represents the physicians' vision for the FPN. A shalloway is a type of vessel, a "larger boat that helps the smaller ones ferry their catch to shore." The reference is symbolic to the FPN, in that it provides individual family physicians a united voice in the pursuit of improved patient care.

Below is an update from Shalloway Board Chair Dr. Jared Butler.

In 2022, Shalloway renewed its commitment to improving primary health care by implementing our new strategic plan. Its timely completion aligns with Health Accord NL's transformational plans.

Over the last year, our Shalloway team has represented family physicians at committees and working groups, including mental health, Care of the Older Adult, recruitment and retention, Health Accord sessions, and more. You, our members, spoke of the increasing need to be more engaged. Recognizing that because of physician shortages you could not come to us, Shalloway took engagement on the road and has spoken to more than 80 per cent of our members – and we are still going!

Despite our physician shortages and the challenges that come with it, each of you continues to fight for and deliver primary health care to our communities. Your work is appreciated and your voices are heard by us. Thank you for your passion, commitment, and dedication.

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These are some 2022 highlights:

• Strategic Plan

Our goals are:

- 1. Healthy Medical Ecosystem: Develop a healthy ecosystem through effective approaches to recruitment and retention, physician wellness, member engagement, and communication.
- 2. Patient Access to Health Care Services: Advocate for and be a part of the solutions to improve patient access to primary health care and specialty services.

Engagement

- This year we held eight in-person meetings and events throughout your communities. Recognizing
 that many of you do not have the capacity to leave your community for events, we came to you.
 Thank you for allowing us to learn about your practices, what works well, your pressure points
 and hear your strategic input on change.
- Shalloway revitalized the Lady North Cliffe Educations Series with a specialist round table at our AGM/CPD day.
- We provided opportunity for discussion with global leader Dr. Roger Strasser, Professor Rural Health and researcher of recruitment and retention, on rural health service delivery and more.
- We provided weekly Shalloway Communication to members.



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• Recruitment and Retention

- We held two presentations to members of Municipalities NL on their role in health care recruitment and retention.
- We partnered with Central Health and MUN Distributed Medical Education for Medical Resident Engagement on:
 - Resident Retreats Sponsorship
 - New Resident Welcome
 - Holiday event
 - Resident inclusion in CPD, AGM, and other events
- We partnered with the Town of Grand Falls-Windsor on Regional Physician Appreciation Day.
- Shalloway increased collaboration and information sharing with the Health Recruitment and Retention Office of the Department of Health and Community Services.

• Health Transformation

 Shalloway engaged in Collaborative Community Teams planning in collaboration with Central Health. Meetings are weekly and include Terms of Reference development and an action plan with inclusion of family physicians.

Dr. Jared Butler, Shalloway FPN Board Chair





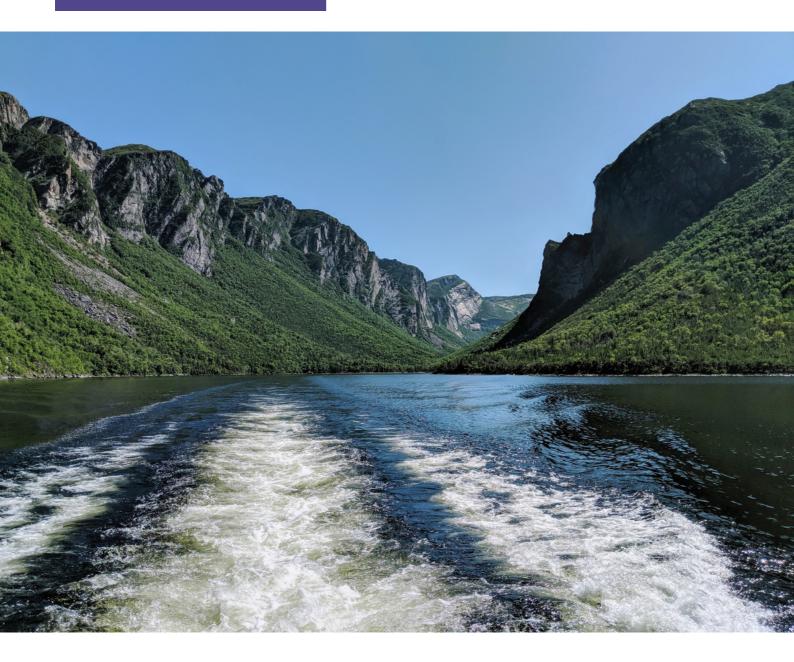
Long Range FPN

Formed in mid-2018, the Long Range FPN represents participating family physicians in western Newfoundland. The name refers to the Long Range Mountains, symbolizing a long-term vision for family practice renewal. Long Range is focused on developing innovative ways to improve patient access to health services, building relationships with and supporting physician members in the evolving environment of primary care, and improved engagement with the regional health authority and specialized services to support local community-based solutions in improving the health of residents.

Below is an update from Long Range Board Chair Dr. Amy Pieroway.

We remain committed to our strategic goals of improving access, networking and engagement amongst family physicians in our region. We are working on recruitment and retention, engaging with family physicians in varied roles across our wide geography, and with Western Health on collaborative projects

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including upcoming Collaborative Community Teams. Our membership encompasses 79 family physicians across the region, working across a wide scope of practice in family medicine.

In October 2022, the Long Range FPN Board saw a change in its directors. New to the board are Dr. Sheila Lewis and Dr. Dave Blecher, who have taken the place of Dr. Dave Thomas and Dr. Jim Bowen. Additionally, the Long Range Board has decided to introduce two special guest seats to include the resident voices. Dr. Kristen Peckford and Dr. Amy Powell were the successful candidates in representing the Western Stream Family Medicine Residents. We are excited to be welcoming new faces to move forward with a strong sense of continuity and renewal.

It has been my honour and privilege to serve as the chair of the Long Range Family Practice Network over the last two years of transformation and growth. Though my term as board chair is coming to an end, I will continue with the board as a director. We are still in the early days of seeing the capabilities and strength of the Long Range Family Practice Network, and I am ever grateful for the support and engagement of our family physicians, particularly those on the board.

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Here are some notable activities in 2021-2022 for Long Range FPN:

• Engaging with consultant colleagues to understand pain points in the referral process with intent of improving access for our patients. While in early stages, focus has been on improving processes around medical imaging, endoscopy and ER.

- Increasing communication and building rapport with various programs and services within Western Health. We continue to work on better understanding the structures in place, improving channels to share information, and facilitating to discuss improvements.
- Developing of a relationship management database and a strategy for physician membership outreach and engagement.
- Enhanced communication with Medical Services and the Department of Health Professional Recruitment and Retention team to collaborate on recruitment processes and advise on regional needs. Additionally, efforts have been made to support the resident experience by partnering with Western Stream & Memorial University Distributed Medical Education.
- Participation in the procurement process of the new Health Information System (HIS). Long Range FPN representatives worked on developing demonstration scripts and haven been at every stage of evaluation to ensure primary care is well represented. The HIS is planned for implementation in the new Corner Brook Acute Care Hospital with future plans of provincial roll-out.
- Program planning and development of the Family Medicine Lecture Series in response to provincial and regional needs.

Dr. Amy Pieroway, Long Range FPN Board Chair





Collaborative Services Committees

There are four Collaborative Services Committees (CSCs) in the province. Each CSC represents an FPN and RHA, whose mandate is to identify and respond to the primary health care needs of the community. The FPN and RHA work collaboratively to develop initiatives and programs to improve local primary health care services.

CSC is an established mechanism that has been effective in moving initiatives forward to enhance population health outcomes, through providing better access to services and care for patients, improving patient and provider experience, and more effective utilization of physician and other health care resources. Through building programs from the ground up, finding innovative solutions for challenging situations, enhancing communication and information sharing between partners, and improving barriers faced by family physicians within the province, CSC has proved to be a critical connection point between FPNs and RHAs, fulfilling an important part of its purpose and mandate.

Priorities are brought to the CSC table to ensure local gaps are addressed based on agreement by partners with supporting evidence and documentation. Initiatives are actioned through collaboration, implementation, and evaluation processes to move transformational projects forward.

Over the last year, Collaborative Services Committees (CSCs) across the province have also adapted in responding to urgent items, including changing COVID-19 restrictions and protocols, the significant IT Outage in Fall 2021, common priorities identified by stakeholders, and identified needs from FPN members, all from a primary care perspective.

High level examples of CSC success:

RE-Boot FPN – Eastern Health (EH) CSC: After a review of rural eastern Newfoundland and Labrador chronic disease data collected by the Newfoundland & Labrador Centre for Health Information (NLCHI), the Deloitte Report, and discussions amongst local family physicians, patient access to community physiotherapy was identified as a CSC priority. Family physicians noted the presentation of back pain was common within their clinics with no resources to share with their patients or access to community physiotherapy. Through partnership between the FPN and Eastern Health, the Back2Fitness! program was developed to help address this need. The RE-Boot and Endeavor FPNs also collaborated with Eastern Health, through the CSC mechanism, on development of a Physician Portal, a searchable site that disseminates information and provides timely updates to family physicians.

Shalloway FPN - Central Health (CH) CSC: Shalloway supported the coordination of Central Health communication during the IT outage last fall. Central Health could not send critical communications to family physicians (referrals, ordering bloodwork, etc.), and this was identified as a need at the CSC table. The membership developed a solution where Shalloway was able to

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send communications on behalf of the RHA, closing a significant communications gap. In addition, Shalloway is currently sending communications to family physicians who are unable to access Central Health links. There have also been preliminary discussions regarding co-developing an integrated website as a more permanent solution.

Endeavor FPN – EH CSC: The CSC has been working to define partnership and collaboration within the governance model for the Collaborative Teams Clinic. The intent is to develop a foundational governance model that can be translated and adapted provincially. This CSC is also implementing a Collaborative Demonstration Pilot to directly connect a number of local family physicians to specific primary care providers, such as nurses, social workers, and physiotherapists. Learnings from this project will help inform the opportunities and challenges of team-based care, while bridging Endeavor's goal of equitable patient access. The Endeavor – EH CSC is also wrapping up and completing final evaluations of the Minor Procedures Pilot program. This pilot provided four community-based family physician clinics with supplies necessary for common minor procedures, with the goals of improving patient wait times, as well as provider and patient satisfaction.

Long Range – Western Health (WH) CSC: This CSC is working to define what access means (i.e., wait times, access to consultants, etc.) and how to better align services with population health needs. Access to endoscopy and diagnostic imaging have been identified as initial priorities. The CSC is working on ways to collaborate with family physician and consultant practices, to identify what is an appropriate, complete referral and what is not. This work will include developing a filtering process for referrals, considering ways to education family physicians, and opening lines of communication between family physicians and consultants. In addition, the Long Range – WH CSC continues to find solutions to provide family physicians access to equipment needed to perform minor procedures within community clinics.

All four CSCs have been involved with preliminary planning related to Collaborative Community Teams (a recommendation of Health Accord NL) and interprofessional collaboration, as CSCs continue to demonstrate their value as mechanisms of positive change.



Practice Improvement Program

FPRP's Practice Improvement Program (PIP) supports evidence-based change management in a variety of target areas that align with the program's mission of transforming family practice for better health.

MyQ - Quality in Family Practice

The MyQ Quality in Family Practice program, which launched in June of 2020, continued to gain momentum in 2021, supporting family physicians and their clinic teams in making meaningful quality improvement changes. Of note, fall of 2021 and winter of 2022 saw the conclusion of two year-long quality improvement journeys for 20 family physicians and 22 clinic staff, across 14 clinics.

In 2022 and into 2023, MyQ continues to support family physicians in making changes to meet the needs of their patients, families, and communities through implementation of a new phase of the program. This new phase, which includes a Navigating Care Coordination (NCC) Series, focuses on building care coordination approaches between primary care, regional programs, and consultant care to improve referrals and transitions for better patient care. Five Family Physicians with their clinic teams, along with Eastern Health Gastroenterology, the Provincial Heart Failure Program and Western Health's Diabetes Education Program, are currently participating in the NCC series.



Quality in Family Practice

Practice

The Business Side of Family Medicine

MyPractice – The Business Side of Family Medicine

The MyPractice Program, a partnership of FPRP and Memorial University's Office of Professional and Educational Development (OPED), officially launched seven online modules in the fall of 2021, with 31 participants availing of these program offerings to date. In September of 2022, FPRP, in partnership with the RE-Boot Family Practice Network and Memorial University's Eastern Family Medicine Stream, held a live one-day boot camp workshop where 19 family medicine residents had the opportunity to learn about the business side of family medicine.

Additionally, the MyPractice program continued to support family physicians starting a new practice in the province of Newfoundland and Labrador, moving from one practice to another within the province, or transitioning from active practice to retirement through the roll-out of a Mentor Matching Service (MMS) in June of 2022. The MMS has recruited seven experienced physicians from across the province who are willing to offer advice, support, and mentorship to those in need of guidance on the business side of family medicine.

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MyPractice September 2022

Outpatient COVID-19 Treatment

A virtual webinar was offered in February of 2022 for family physicians interested in learning more about Outpatient COVID-19 Treatment (including Nirmatrelvir). This session, led by Dr. Peter Daley (Infectious Diseases Physician, Eastern Health), was attended by 55 family physicians. This offering is one example of FPRP's ability to respond to time-sensitive education needs on 'hot' topics.

Frailty Series

The third iteration of the Frailty Group Learning Program launched in November 2022. There have been three offerings of Frailty 3 to date (two in-person, one virtual), drawing more than 80 attendees. The Frailty series is the collaborative effort of two geriatricians and eight family physicians from across the province.

Suboxone Treatment of Addiction - Advanced Training Program

There were two offerings of the Suboxone Treatment of Addiction – Advanced Training Program in 2021 with more than 40 attendees in total. The program was revised in 2022 and an end-of-year offering was held in December.

Comprehensive Management of COPD for the Family Physician

This two-hour virtual group learning program launched in October 2021. Fifty family physicians attended across two offerings. Topics included: diagnosis, approach to pharmacotherapy, exacerbations, referral to respirology, COVID – 19 considerations, and an overview of the new FPRP COPD billing code.

Palliative Care Group Learning Program

The development of an educational program for palliative care by a group of family physician leaders across the province is now complete. The first offering of this program was held in November of 2022 and yielded great interest with 109 family physicians and four nurse practitioners registering to participate.

Chronic Pain Program

The topic of chronic pain has been highlighted by family physicians as an education need. Work is underway on the development of an educational program, with a first offering anticipated in 2023.

Family Medicine Lecture Series

FPRP has partnered with the Family Practice Networks, the four regional health authorities, and Memorial University's Office of Professional and Educational Development and Distributed Medical Education to develop and deliver a weekly lecture series on topics relevant to family medicine. This lecture series officially launched in October 2021 and continues today. Each weekly sessions draws an average of 100 attendees per session.

Continuous Professional Development Fund

This fund was allocated for priority educational needs of family physicians, as identified by the FPNs and the CSCs. There were nine educational events offered under this fund since late 2021, with 220 participants, including 174 family physicians, 23 speakers (including consultant and family physician speakers) and 23 medical clinic staff. The evaluations have been overwhelmingly positive and indicate the program represents significant value for family physicians and their staff teams.



Financial Support Initiatives

Several financial programs were extended or introduced in 2022 to provide support to family physicians and the FPNs. These initiatives were designed to help offset the costs incurred by family physicians to perform minor office-based procedures, support the enhanced use of the Electronic Medical Record (EMR), and further advance the work of the FPNs.

Equipment Fund

This program, valued at \$1.3 million, is an 80/20 cost-sharing program between FPRP and the family physician. Fee for service (FFS), FPN members are eligible for reimbursement of approved medical equipment up to a maximum of \$2,500 per physician. Physicians can select from a list of pre-approved items and/or submit a request to have items added to the pre-approved list. The Equipment Fund was launched in November 2021 and will run until November 30, 2023. The program extends retroactively for equipment purchases made on or after March 15, 2020, to coincide with the pandemic onset. To date, 66 members have availed of this fund.

UpToDate

FPRP has renewed its subscription to UptoDate, an online clinical decision-making tool, with the new subscription period running from April 1, 2022, to March 31, 2023. Approximately 138 physicians are availing of this offer.

EMR Superuser Training

Forty thousand dollars has been approved to support two (2) cohorts of FPN members who have a strong working knowledge of Med Access with enhanced EMR training. Each cohort will consist of a maximum of eight (8) FPN members. These members will, in turn, serve as peer mentors to facilitate and promote the advanced use of Med Access amongst their family physician colleagues. Each physician will be required to provide a minimum of five hours of peer mentoring. The training for the first cohort took place in June 2022, with the training date for the second cohort pending.

EMR Communities of Practice

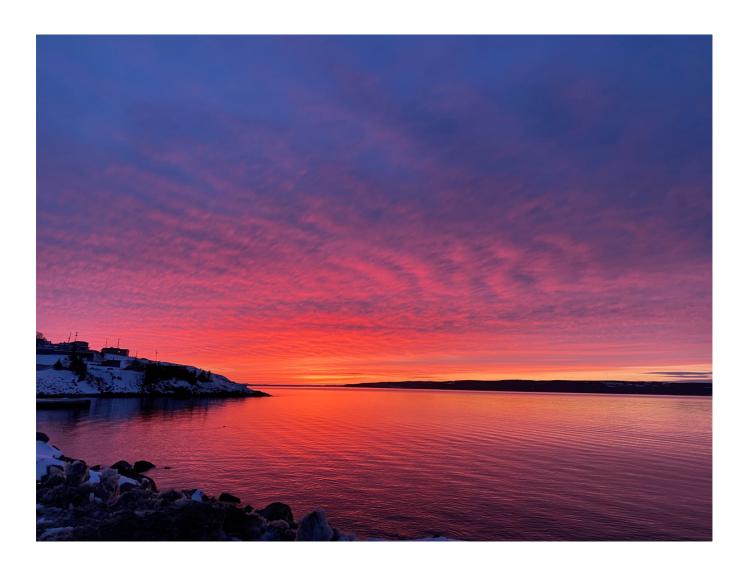
Each FPN has been allocated \$5,000 to establish an EMR Community of Practice. The EMR Communities of Practice will bring together FPN members to leverage their collective knowledge to improve EMR access. Each FPN will focus on EMR issues of common interest and solve problems collaboratively through the sharing of best practices and peer-to-peer mentoring. The EMR Communities of Practice will meet regularly, virtually and/or in-person.

FPN Innovation Fund

This program, valued at \$500,000, provides the FPNs with funding opportunities for projects that have significant potential for sustained improvements in primary care. The FPN Innovation Fund was launched in the fall of 2021. The FPNs are currently preparing a joint submission for the Innovation Fund Review Committee's consideration.

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For more information on FPRP, please visit www.familypracticerenewalnl.ca





Appendix A: Committees and Staff

Family Practice Renewal Committee (FPRC)

NLMA

Dr. Lynette Powell (Co-Chair)

Dr. Stephen Major

Dr. Nicola Penney

Department of Health and Community Services

Gillian Sweeney, ADM, Population Health and Wellness (Co-Chair) Monica Bull, Sr. Manager, Primary Health Care David Moore, Director, Medical Services (Acting)

Regional Health Authorities

Judy O'Keefe, VP, Clinical Services, Eastern Health

Dr. Gena Bugden, VP, Medical Services, Rural Sites and Primary Health Care, Eastern Health

Dr. Dennis Rashleigh, VP, Medical Services, Western Health

Dr. David Carroll, Acting VP, Medical Services, Central Health

Labrador Grenfell Health (previously Dr. Gabe Woollam, new rep to be appointed)

Other Partner Organizations

Dr. Nicole Stockley, Director, External Engagement, NL College of Family Physicians

Dr. Danielle O'Keefe, Chair, Discipline of Family Medicine, Faculty of Medicine, Memorial University

Dr. Fred Melindy, Program Director, eDOCSNL, NLCHI

Staff

Robert Thompson, Executive Director, NLMA Lynn Barter, Associate Executive Director, NLMA Glenda Nash, Program Director, FPRP Francine Synyard, Administrative Assistant, FPRP

Appendix A: Committees and Staff

FPN Sub-Committee

Dr. Nicola Penney
Lynn Barter, NLMA
Monica Bull, DHCS
Judy O'Keefe, Eastern Health
Staff Support: Glenda Nash, Ian Hodder (FPRP)

Fee Code Sub-Committee

Dr. Steve Major
Scott Brown, NLMA
Dave Moore, DHCS
Dr. Colleen Crowther

Dr. Colleen Crowther, DHCS

Staff Support: Glenda Nash, Ian Hodder, Paula Hanrahan (FPRP)

Funds Sub-Committee

Dr. Steve Major Lynn Barter, NLMA Monica Bull, DHCS Dave Moore, DHCS

Staff Support: Glenda Nash, Jean Cook (FPRP)

FPN Innovation Fund Sub-Committee

Dr. Nicola Penney Lynn Barter, NLMA Judy O'Keefe, Eastern Health Monica Bull, DHCS Nicole Gill, NLCHI

Staff Support: Glenda Nash, Ian Hodder (FPRP)

PIP Sub-Committee

Dr. Lynette Powell, NLMA Dr. Nicole Stockley, NLCFP

Dr. Danielle O'Keefe, Memorial University Faculty of Medicine

Bernadette Doyle-Follett, DHCS

Staff Support: Paula Hanrahan, Marylou Walsh (FPRP)

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Appendix A: Committees and Staff

Staff - FPRP

Glenda Nash, Program Director
Ian Hodder, Sr. Program Consultant, FPNs
Paula Hanrahan, Sr. Program Consultant, PIP
Emily Hynes, Coordinator, FPNs
Marylou Walsh, Coordinator, PIP/CPD Fund
Francine Synyard, Administrative Assistant
Contract Staff: Jean Cook, Fund Manager

Appendix B: Family Practice Networks - FPN Boards

Long Range FPN Board (Western NL)

December 2022* - November 2023

- 1. Dr. Amy Pieroway
- 2. Dr. Paula Cooper
- 3. Dr. Tyler Brown
- 4. Dr. Sheila Lewis
- 5. Dr. Shanda Slipp
- 6. Dr. Mark Smallwood
- 7. Dr. Dave Blecher
- 8. Dr. Chris Whitten
- 9. Dr. Nicola Penney

Guests

- 10. Dr. Kristen Peckford (Resident)
- 11. Dr. Amy Powell (Resident)

December 2021 - November 2022

- 1. Dr. Amy Pieroway, Chair
- 2. Dr. Paula Cooper, Vice-Chair
- 3. Dr. Dave Thomas, Treasurer
- 4. Dr. Jim Bowen
- 5. Dr. Tyler Brown
- 6. Dr. Shanda Slipp
- 7. Dr. Mark Smallwood
- 8. Dr. Chris Whitten
- 9. Dr. Nicola Penney

Shalloway FPN Board (Central NL)

June 2022 - May 2023

- 1. Dr. Jared Butler, Chair
- 2. Dr. Dawn Turner, Vice-chair
- 3. Dr. Desmond Whalen, Treasurer
- 4. Dr. Carmel Casey
- 5. Dr. Hany Henein
- 6. Dr. Tony Gabriel
- 7. Dr. Abby Robbins (Resident)

^{*}Chair, Vice-Chair, and Treasure to be determined at next Long Range FPN Board meeting.

Appendix B: Family Practice Networks - FPN Boards

November 2021 - May 2022

- 1. Dr. Jared Butler, Chair
- 2. Dr. Dawn Turner, Vice Chair
- 3. Dr. Desmond Whalen, Treasurer
- 4. Dr. Tony Gabriel
- 5. Dr. Ahmad Ibrahim
- 6. Dr. Gerges Ambarak
- 7. Dr. Carmel Casey
- 8. Dr. Hany Henien

RE-Boot FPN Board (Rural Eastern NL)

June 2022 - May 2023

- 1. Dr. Jackie Elliott (Port Blandford), Chair
- 2. Dr. Erin FitzPatrick, Vice-Chair
- 3. Dr. Annabeth Loveys, Treasurer
- 4. Dr. David Kwinter
- 5. Dr. Michelle Kennedy
- 6. Dr. Mitchell Kehoe
- 7. Dr. Paula Slaney
- 8. Dr. Daniel Rees (Resident)

June 2021-May 2022

- 1. Dr. Jackie Elliott, Chair
- 2. Dr. Megan Hayes, Vice-Chair
- 3. Dr. Annabeth Loveys, Treasurer
- 4. Dr. Erin FitzPatrick
- 5. Dr. Philip Holloway
- 6. Dr. David Kwinter
- 7. Dr. Chris Peddle
- 8. Dr. Sarah Small
- 9. Dr. Gordon Stockwell

Endeavor FPN Board (Urban Eastern NL)

December 2022 - November 2023*

- 1. Dr. Annette McCarthy
- 2. Dr. Alysha Mehta
- 3. Dr. Alison Drover
- 4. Dr. Krysta Au
- 5. Dr. Colleen Kirby
- 6. Dr. Michelle Levy
- 7. Dr. Dianne Power
- 8. Dr. Lori Shandera
- 9. Dr. Angela Rees

December 2021 - November 2022

- 1. Dr. Annette McCarthy, Chair
- 2. Dr. Francisco Acevedo, Vice-Chair
- 3. Dr. Alison Drover, Treasurer
- 4. Dr. Alysha Mehta
- 5. Dr. Krysta Au
- 6. Dr. Colleen Kirby
- 7. Dr. Michelle Levy
- 8. Dr. Dianne Power
- 9. Dr. Lori Shandera

Staff - Family Practice Networks

Adam Wylie, Executive Director, Endeavor FPN
Deborah Wearn, Executive Director, RE-Boot FPN

Trina Ralph, Executive Director, Shalloway FPN

Stephen Wan, Executive Director, Long Range FPN

Matt Carroll, Executive Assistant, Endeavor and RE-Boot FPNs

Amanda Kane, Executive Assistant, Long Range and Shalloway FPNs

Danielle Beattie, Executive Assistant (currently on maternity leave)

^{*}Chair, Vice-Chair, and Treasure to be determined at next Endeavor FPN Board meeting.

