



## President's Message

It has been a true privilege to serve as the BCCFP President over the past year. During 2017/18, we have focused on the work set out in our <u>Strategic Plan</u>, moving toward our vision of "Healthy People. Thriving Communities. Inspired Family Physicians."

One of my favourite responsibilities as President was to review more than 300 submissions for the My Family Doctor Awards and the BCCFP College Coin honours. Captured in the words of grateful patients and colleagues, I see the heart of our profession: the nurturing of future generations; the sincere drive to continue to learn and innovate to improve ourselves and the care we provide; and most importantly, the therapeutic value of the longitudinal relationships that we build with our patients and colleagues. These reflections not only provide a source of personal inspiration, but also direct and reaffirm the strategic directions that the BCCFP has undertaken. We are the heart of family medicine in BC: working together to build relationships that will nurture and empower family

physicians and promote their integral value within a strong and sustainable health care system.

I am proud of the work we have accomplished as a team at the BCCFP, and I would like to thank the Directors and staff who have made it productive and meaningful. They are at the heart of this organization, as are our members, who contribute so much to family medicine as clinicians, teachers, leaders and innovators.

Please read on to learn about the highlights of the past year and meet some of BC's inspiring family physicians who embody our mission of providing leadership, support, advocacy and education in family medicine.

Jeanette Boyd, BSc, MD, CCFP

President

"(In the BCCFP) I see the heart of our profession: the nurturing of future generations; the sincere drive to continue to learn and innovate to improve ourselves and the care we provide; and most importantly, the therapeutic value of the longitudinal relationships that we build with our patients and colleagues. These reflections not only provide a source of personal inspiration, but also reaffirm the strategic directions that the BCCFP has undertaken."

What insipires me: Dr. Jeanette Boyd

### **Executive Director's Message**



One of the most enjoyable parts of my job is getting to know our members. I love hearing about what inspires and drives your career in family medicine, and how the BCCFP can best support your professional needs.

We chose "Inspiring Family Physicians" as the theme of this annual report so that we could make the important link between the inspiring work of our members and the BCCFP's progress in providing leadership, support, advocacy and CPD.

For me, inspiration comes from working with the family physicians on the BCCFP Board. Over the past year, our organization has been led by 13 thoughtful individuals who offer diverse points-of-view. To bring the perspective of early career members, we have also welcomed a family

medicine resident, a medical student, and a member in their first five years of practice to the Board meetings.

As a result, much work has been done to move our strategic priorities forward to serve your needs. You can find more information on how the BCCFP uses your membership dollars on page 14.

As always, I encourage you to reach out to me to share your thoughts because we are always looking for ways to enhance our services.

Toby Kirshin, MHA, CAE Executive Director

Iday Kinshin



(From left) Nardia Strydom, Charuka Maheswaran (Vice-President), Rupi Brar, Toby Kirshin (Executive Director), Anthon Meyer (Secretary-Treasurer), Christie Newton, Paul Mackey, Jeanette Boyd (President), David May, Sandy Barlow, Brenda Huff, Christine Singh and Lilah Rossi.

Not in picture: Maryam Zeineddin

"It's the patients that inspire me to come to work every day and inspire me to provide good primary care. As a family physician, you can witness injustice, and it's our job as family physicians to work for social justice. And I hope that my work contributes to quality and safety for a vulnerable population."

What inspires me: Dr. Christy Sutherland

## **Celebrating Family Medicine**



## Family physician of the year honoured for contribution to inner city medicine

Dr. Christy Sutherland navigates the streets of downtown Vancouver on a black bicycle. It's the easiest way to commute between her work as Medical Director of the Portland Hotel Society (PHS) on the Downtown Eastside and her other roles at the BC Centre for Substance Use (BCCSU) and St. Paul's Hospital.

A family physician specializing in addictions medicine, Dr. Sutherland is the driving force behind the multi-site, low-barrier primary care services now provided by the PHS.

The service began in 2010 when she started a medical clinic embedded inside one low-barrier housing project, where she saw patients a few days a week.

Dr. Sutherland became the medical director five years ago, and her commitment and enthusiasm has created a dedicated team of 20 physicians and 30 nurses spread over 10 sites in Vancouver and three in Victoria.

In the PHS Primary Care Clinic on Columbia Street, local residents, many of them living in PHS housing units nearby, have access to care in a welcoming, non-judgemental environment.

"I think a lot of times for people with addictions, they are reluctant to tell their care provider that they use drugs, because they are worried that they won't get care or worried they will be shamed," Dr. Sutherland says. "For me I treat it just like I would treat hypertension – it's just something that I am glad to talk about and that there are lots of options. I am glad to discuss options with them and make a care plan."

She talks of the joy of treating patients over time, seeing their progress and adjusting their care as needed. But the opioid crisis has hit the area especially hard, and both caregivers and patients are dealing with grief and loss.

The crisis has driven Dr. Sutherland and the team to work harder to scale up the provision of addiction treatment along the continuum of care, and to continue to find new approaches for complex patients that do not respond to oral treatment.

The major focus is expanding the injectable program using hydromorphone, which was originally launched at the clinic two years ago to meet the need of one patient. Currently, more than 250 patients have accessed this service.

Dr. Sutherland is also the Education Physician Lead with the BCCSU, a member of the St. Paul's Addiction Medicine Consult Service and the lead physician for addictions for the Rapid Access to Consultative Expertise (RACE) line.

She enjoys helping other family physicians care for patients with addiction.

"I think that family physicians are a driver for social change – we are so valuable as activists in our community. We are in a very powerful position to make changes in people's lives, especially people who use drugs."

Dr. Sutherland was "grateful, humbled and overwhelmed" to find out that she is this year's recipient of the College of Family Physicians of Canada (CFPC) Reg L. Perkin award for BC Family Physician of the Year.

#### **BC Family Doctor Day a success**

Our province celebrated BC Family Doctor Day for the first time on May 19.

As part of the BCCFP's ambition to highlight the unique role of family medicine in the health care system, we asked the provincial government to designate a day to honour the work of family physicians.

As a result, May 19 was proclaimed as BC Family Doctor Day, coinciding with World Family Doctor Day, which was initiated by the World Organization of Family Doctors (WONCA).

To celebrate, the BCCFP reached out to the public with a media campaign to convey the scope of family medicine and recognize the exceptional family physicians receiving the 2018 peer- and patient-nominated awards. We also asked members to recognize the family physicians they have admired during their careers.

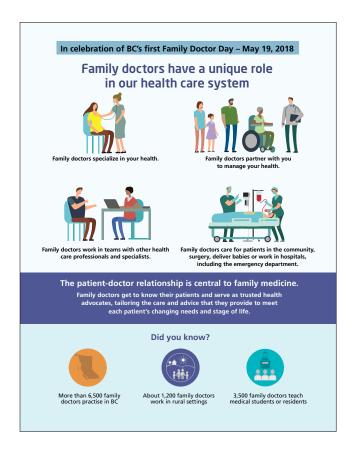
Building on this success, we are committed to working with the province to make this an annual event.

#### The unique role of family physicians

Inspired by the Family Medicine Professional Profile, a position statement created by the College of Family Physicians of Canada (CFPC), the BCCFP has developed an infographic to describe the unique role of family physicians. It's designed for stakeholders who may have a limited knowledge of family medicine and how our speciality fits within the health care system. The infographic describes the value of family medicine and the special attributes of family physicians.

- Family physicians have a unique role within the health care system.
- The patient-doctor relationship is central to the care provided by family physicians.

- The care provided by family physicians impacts the wider population.
- Family physicians are a vital resource to their communities.
- Family physicians work with specialists and other health care professionals to deliver comprehensive, coordinated, patient-centred care.



You can find more detail in the infographic at bccfp.bc.ca.

### **Awards and Honours**

# Congratulations! We're inspired by the family physicians, residents and medical students who received awards and honours this year

#### BC Family Physician of the Year – Dr. Christy Sutherland

The recipient for the College of Family Physicians of Canada (CFPC) Reg L. Perkin Award for BC Family Physician of the Year is chosen by the BCCFP from nominations for the year's family physician awards.

#### First Five Years of Practice – Dr. Terri Aldred

This award highlights an exceptional family physician in the early stage of his or her career.

## My Family Doctor Award – five regional awards

This unique award provides British Columbians with the opportunity to recognize and honour their own family doctors, celebrating the doctor-patient relationship that defines our essential role in the health care system.

- Dr. Leona Harries (Penticton)
- Dr. Bent Hougesen (Hazelton)
- Dr. Kelsey Kozoriz (Vancouver)
- Dr. Kevin Martin (Nanaimo)
- Dr. Nick Petropolis (New Westminster)

### Innovations in Primary Care – CHANGE BC\*

This award recognizes a family doctor or team working on local innovations in practice or health care delivery that improve patient, family or community care.

\*Canadian Health Advanced by Nutrition and Graded Exercise BC (CHANGE BC) includes six family physician leaders from the Pacific Northwest Division of Family Practice:

- Dr. Jocelyn Black
- · Dr. Brenda Huff
- Dr. Greg Linton
- Dr. Matthew Menard
- Dr. Wouter Morkel
- Dr. Onuora Odoh

#### **Resident Awards**

The Resident Leadership Award recognizes outstanding leadership in a resident graduating from the UBC Family Practice Residency Program. The Dr. Manoo & Jean Gurjar Awards are open to all residents in the program.

- Resident Leadership Award Dr. Conrad Tsang
- Dr. Manoo & Jean Gurjar Award –
   Dr. Jaron Easterbrook and Dr. Nazlee Tabarsi

#### **Medical Student Scholarship Awards**

Every year, the BCCFP recognizes two medical students who demonstrate the potential to become outstanding family physicians.

- Dr. Clara Hong
- Dr. Jonathan Ng

#### **College Coin**

Launched in the fall of 2017, the College Coin is designed to honour some of the unsung heroes in family medicine. Nominations come from their family physician colleagues, and are considered throughout the year.

Our congratulations to the following recipients:

Dr. Chip Bantock Dr. Patricia Mark Dr. Fritz Steyn

Dr. Sandy Barlow Dr. Randal Mason Dr. Jacobus Strydom

Dr. Fraser Black Dr. David May Dr. Catherine Truong

Dr. Dean Brown Dr. Ryan McCallum Dr. Pieter Van Zyl

Dr. Holden Chow Dr. Anthon Meyer Dr. Marile Van Zyl

Dr. Marjorie Docherty Dr. Chris Morwood Dr. Murali Venkataraman

Dr. Anneline Du Preez Dr. Jessica Otte Dr. Arthur Willms

Dr. Kenneth Fung Dr. Launette Rieb Dr. Sandi Witherspoon

Dr. Peter Gorman Dr. Tom Rimmer Dr. Thomas S.H. Wong

Dr. Keith Hatlelid Dr. Laurren Rodgers

Dr. Selena Lawrie Dr. Paul Stent

To find out more about our awards and honours program and read about the recipients, visit our website (bccfp.bc.ca).

"We are growing this army of doctors who are very culturally humble, who really do care, and they are out there making a difference. I think that this is so enriching and rewarding to watch them go through the program and to go off on their journey."

What inspires me: Dr. Terri Aldred

## Nurturing the Future



## More than half of BC's family physicians now teach residents or medical students

Thanks to the UBC Faculty of Medicine's province-wide approach to medical education, more than 3,500 family physicians are now engaged in teaching, shaping the future of family medicine.

Prince George-based family physician, Dr. Terri Aldred, is highly engaged. She is the Site Director for the Indigenous Family Medicine Program, in addition to her clinical practice in the city and in remote First Nations communities.

She explains that the program takes pride in doing things differently.

"Indigenous ways of knowing help guide and shape our program every step of the way, and they help to make the medical education experience safer, more enjoyable and ultimately enable us to have richer learning experiences."

Dr. Aldred is Carrier from the Tl'Azt'En Nation located north of Fort St. James. The residents in the program are either Indigenous or possess a special interest in social justice and working with Indigenous people.

It's the first family medicine residency site in Canada to focus specifically on the health and wellness of Indigenous peoples. Working from four sites in Vancouver and on Vancouver Island, residents learn holistic health care and Indigenous approaches to medicine in urban and rural settings, including remote First Nations communities. Academic experience is provided by sister sites.

The program is guided by the founding values of respect, relationship and reciprocity, Dr. Aldred says.

"When it comes to Indigenous health and wellbeing, what you learn—by sitting with elders, participating in ceremony, by bringing in the family, building relationship reciprocity and developing a mutual level of respect—is important for all patients."

Based on a recent survey of graduates, the program is making a difference. Every survey respondent reported devoting a portion of their practice to working with Indigenous people, and 75 per cent practiced in both urban and rural settings.

The program leaders are currently working with the Rural Coordination Centre of BC (RCCbc) to develop a network for Indigenous health physicians to help graduates maintain their skills, support each other and stay up-to-date.

For Dr. Aldred, the personal reward is in working with the residents.

"They are just amazing, amazing souls, and our preceptors are people who are just phenomenal physicians," she says.

"People in medical education talk about how wonderful it is to be involved in teaching, because it keeps you up-to-date, it keeps your own level of cynicism down, and it keeps you young in terms of the medical part of your life, and I have to agree."

#### Thank you for shaping the future of family medicine

We thank all the family medicine teachers, preceptors, mentors and educational leaders who devote their time to nurturing future family physicians, as well as helping to educate learners from other health care professions. Your work in clinical settings and classrooms across the province impacts the future of our health care system.

The BCCFP extends our gratitude to members who make it possible for us to provide special initiatives for medical students and residents, including: the Student and Resident Conference; a Transition to Practice Session (for residents); the Dinner with Docs events; and our ongoing work with the UBC Family Medicine Interest Group.

#### Dr. Steven Yau

Like most family physicians, Dr. Steven Yau began teaching clinical skills to medical students when he was a family medicine resident.

Since then, he has also worked with residents, preceptors and international medical graduates (IMGs). He is currently a site faculty for Faculty Development for the UBC Family Practice Residency Program at the St. Paul's site, as well as the Medical Director for IMG Programs at the UBC Faculty of Medicine's Division of Continuing Professional Development.

As an inner-city family physician, Dr. Yau provides primary and addiction care as a member of three specialized multi-disciplinary teams operated by Vancouver Coastal Health on Vancouver's Downtown Eastside. He is happy to accommodate learning opportunities for medical students looking for experience in caring for marginalized patients in one of Canada's most challenging neighbourhoods.

He encourages any family physician thinking about bringing learners into their own practice to take the leap.

"Having a learner is really enjoyable because it requires your brain to think differently. It requires you to slow down and think conscientiously about what you are doing." Dr. Yau is also a volunteer for Dinner with Docs, the BCCFP's program to inspire and connect medical students interested in family medicine with practising family physicians.

He explains that today's learners will challenge and stimulate you as a teacher - they come from all walks of life, and many bring experience from other careers.

"They will keep you sharp. I am a better physician for my patients because I work with learners."



"I want to make a positive difference, to make the system better, to make the profession better, because I think that we can do more — there is so much that can be done in family medicine."

What inspires me: Dr. Steven Yau

"Hearing patient stories is one of the unique powers that I think we have as family physicians. When you hear the stories of patients and you get to share in their life experiences, you really get such a deeper sense of what's meaningful and impactful."

What inspires me: Dr. Lee MacKay

## **Healthy Equity & SDH**



## Identifying patients impacted by poverty starts with one simple question

"Do you ever have difficulty making ends meet at the end of the month?"\*

This simple screening question is the starting point for a poverty tool that was developed by the Centre for Effective Practice and adapted for use in BC thanks to support from the Kootenay Boundary Division of Family Practice.

Dr. Lee MacKay, a Nelson family physician and Division board member, routinely asks the question of his patients and records the answer in the EMR.

He acknowledges that family physicians may not be able to offer any immediate solutions, but having the answer to the poverty question on the patient's record makes it readily available to specialists and other members of the health care team.

He also finds the information useful when he is screening for poverty-related health issues and choosing medications or treatment that may be more affordable for the patient.

Dr. MacKay sees this as particularly important because poverty affects approximately 13 per cent of the population and impacts other social determinants of health (SDH).

"Poverty is not unique to certain areas or certain patient populations – it is present in every family doctor's office and every family doctor's population of patients." Income is one of the four priority areas for action selected by the BCCFP's recently formed Social Determinants of Health Committee, explains BCCFP President Dr. Jeanette Boyd. The other three are: food and water security; access to health care; and housing.

The Committee was formed to lead and oversee the BCCFP's work to empower family physicians to address the SDH.

"We see an opportunity to bring together family physicians who already possess expertise in addressing health inequity to develop SDH-related initiatives that can help colleagues from across the province," she says. "The BCCFP will focus on empowerment, education and advocacy."

The need to take a provincial approach to addressing health equity prompted Dr. MacKay to join the Committee.

#### Looking to the future

Going forward, he sees the increase in team-based care as a major opportunity for family physicians to provide patients with access to social work or other supports that can help with challenges related to poverty or other SDH.

"There's a huge opportunity with the primary care networks to really do things a bit differently, to consider a SDH lens in how we roll out the services that we provide." With the BCCFP on board, he also sees more opportunities for family physicians to play a larger advocacy role in addressing the SDH that impact patients in their own communities, such as access to clean water, adequate housing, or even the implementation of a guaranteed basic income.

In the meantime, he encourages all family physicians to not be afraid of "opening Pandora's box" when they ask the allimportant question to screen for poverty. "We don't have to have answers for all the challenges and the lack of some supports for our patients, but we just need to care."

\*Sensitivity 98 per cent and specificity 64 per cent for those living below the poverty line.

### Family physicians and the social determinants of health

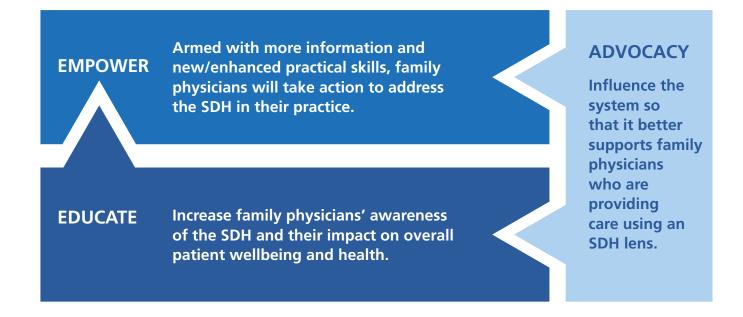
The social determinants of health (SDH) are integral to population health and family medicine.

However, data from the College of Family Physicians of Canada (CFPC) indicates that family physicians feel that they are not adequately equipped to mitigate the impacts of the SDH for their patients. This prompted the BCCFP to include "empowering family physicians to address the social determinants of health" as a strategic priority in our 2017-2020 Strategic Plan.

The BCCFP Social Determinants of Health Committee provides leadership and oversight of our work in this area,

building on the foundations established by an informal group of family physicians across several Divisions of Family Practice.

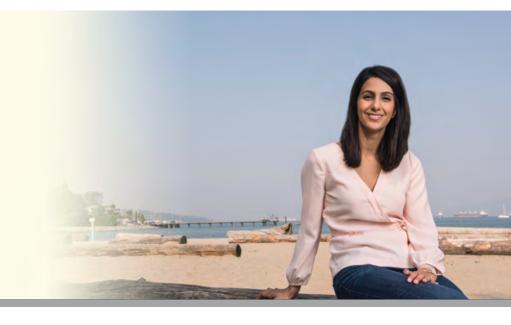
A new network or Community of Practice is also in the works, with the goal of connecting family physicians interested in work around the SDH with others who are already bringing a SDH lens to their practice. Making this connection will enable the sharing of resources, tools, relevant research and success stories to make it easier for family physicians to incorporate changes into their own practices.



"I love the one-on-one interaction with patients. Recognizing how important a family physician can be in a patient's life drives my clinical work. You can have a huge impact on their health trajectory."

What inspires me: Dr. Goldis Mitra

### Resiliency



## Developing networks for professional and personal support part of building resiliency

When Dr. Goldis Mitra was developing a webinar on resiliency for the BCCFP, she used What's App to reach out to her former colleagues from residency.

Having their own group chat helps these UBC alumnae to stay in touch, and it's an easy way to share professional insights and advice.

From her colleagues, Dr. Mitra discovered that professional networks like this one can play an important role in building resiliency and buffering against the stresses of every day practice, similar to the personal networks that provide support outside of work.

As a busy family physician with a young family, she welcomed the opportunity to do a "deep dive" into the literature about building your own resiliency and avoiding burnout.

"Resiliency is something that is relevant to me in my own life, and to my patients," she says. "It's about coping with the problems that come your way in life."

Although the webinar was originally aimed at physicians in early practice, Dr. Mitra discovered insights for family physicians at every career stage.

For example, she was interested to read about the power of positive versus negative emotion in improving flexibility, judgement and reasoning. This includes practising gratitude, which has been shown to improve mood, relationships, and sleep.

What is she doing differently? She is now taking time each day to work on a gratitude practice – reflecting on what is important in life, noting that resiliency is "a work in progress."

#### **BCCFP** support for resiliency

To help physicians continue to thrive, building resiliency is a process that requires persistence and attention. Providing members with information and tools that they can use is a priority for the BCCFP.

Developed two years ago, the Resiliency Education and Learning (REAL) Groups provide a unique small group learning experience designed to promote the development of supportive networks, while enabling members to earn Mainpro+ credits. Resiliency related topics are included in our Family Medicine Conferences, and the BCCFP has also initiated an annual leadership dinner - an opportunity for guests to hear inspirational speakers and network.

Dr. Mitra's webinar "Cultivating resiliency in life and practice" is available to BCCFP members in the Learning Vault. You can find it by logging in from the link on the homepage of our website (bccfp.bc.ca).

#### Tips on resiliency

- Maintain your professional and personal networks.
- Outsource the tasks that you don't have time for at work and at home.
- Pay attention to your own health and find yourself a family physician.
- Make time for friends and family.
- Understand the power of positive emotion you can control how you feel and respond to a situation.
- Take some time every day to reflect on what's important in your life and feel grateful.

#### R is for resiliency in our REAL Groups

With resiliency as one of the three pillars, the BCCFP's Resiliency Education and Learning (REAL) Groups provide a unique small group learning experience for our members.

The REAL Group program is free with membership, fully-supported by the BCCFP, and eligible for Mainpro+ credits. Your participation in a REAL Group is an opportunity to target timely and relevant topics with like-minded family physicians.

Feedback from previous participants indicates that REAL Groups can also help members to build supportive relationships with other family physicians and foster resiliency.

Want to create or join a REAL Group? We can help you get started. If you already have your own group of colleagues, we can provide you with supporting resources, including discussion guides. If not, we can match you with like-minded family physicians in your community.

Look for more information on our website (<u>bccfp.bc.ca/realgroups</u>) or email <u>office@bccfp.bc.ca</u>.

#### **How REAL Groups work**

- REAL Groups provide a physician-focused learning environment that is intentional, supportive, and autonomous, addressing real practice issues to affect the care of real patients.
- Groups are member driven you will be responsible for identifying topics relevant to your practice to bring forward for discussion.
- During REAL Group sessions, members build on their previous experience and knowledge and personalize their learning. Group members are challenged to identify quality gaps in their own practice and identify ways to implement positive change.
- As a group, members will work together to: assess their learning needs based on what is happening in their practice; search for and appraise the value of evidence and resources; and apply evidence and resources to practice-related questions.

### Your BCCFP Membership

Your BCCFP membership delivers value throughout the year ... and it costs less than buying one latte a week!

Here's how the numbers break down.



## Membership dollars support initiatives that benefit BC family physicians

We've worked hard to keep your annual fee the same for the past four years. Membership dollars fund our work in providing leadership, support, advocacy and CPD for family physicians here in BC, in line with our 2017-2020 strategic priorities:

- Leading the development and delivery of relevant CPD to support evolving practice needs
- Promoting and demonstrating the value of the specialty of family medicine

- Supporting family physicians through all career stages
- Empowering family physicians to address the social determinants of health (SDH)

In addition, your \$190 BCCFP membership includes access to: Resiliency Education and Learning (REAL) Groups; member-only webinars; the online Learning Vault; CPD eCoach (in partnership with UBC CPD); Tools for Practice emails; and reduced registration rates for the BCCFP Family Medicine Conferences.

#### **Our Members**

#### The BCCFP now has more than 5,700 members.

Family Physicians*	89%	Residents & Medical Students	11%
Active	76%	Residents	7%
Life	2%	Medical Students	4%
Senior	4%		
Sustaining	0.2%		
Retired	6%	*by membership class	







