



Board Meeting Minutes FINAL

February 8, 2024, 6:00 pm-8:30 pm VDFP Office

Attendees (Name, Position, P/R/V)					
Dr Ami Brosseau	Director	Р	Dr Sarah Chritchley	Director	Р
Dr Ali Dozzi	Director	R	Dr Melissa Duff	Chair	Р
Dr Brett Dueck	R1 Director	Р	Dr Steve Goodchild	Director	Р
Dr Kristen Iverson	Director	Р	Mr Peter Lockie	Treasurer	Р
Dr Margaret Manville	Director	Р	Dr Anna Mason	Secretary	Р
Dr Carien Smit	R2 Director	Р	Catriona Park	Executive Director	Р
Nicole Dehoop	Operations Coordinator (minutes)	Р	Helen Welch 6:00-6:45 pm	Director of PMH Development	Р

P = Present R = Regrets V = Virtual

Open Meeting

- Dr. Melissa Duff opened the meeting at 6:00 pm with a Welcome, Land acknowledgement and check-in.
- VDFP Mission, Vision, and Approach was read.
- There was no Director conflict of interest declared for this meeting.
- There were no additions to the agenda.

Staff presentation – Helen Welch, Director of PMH Development

- Overview of Helen's history with the division and current work:
 - Physician support: Recruitment & Retention islanddocs.com and locally, contract negotiations, FPSC funding streams, locum coverage, clinic space, Resident Engagement WG
 - MOA network
 - Island Medical Program connections (Student Engagement WG)
 - o Urban Locum Program
 - Special projects as they come along: currently ramping up support for the influx of PRA BC ROS Physicians coming to Vancouver Island
- Things to consider for the future:
 - Potential shortage of clinic space
 - Licensing→can the division have any influence in this area?
 - PRA BC return of service physicians for three years→clinics needed to apply, need physicians to be assessors.
- Recently, attended the South Island Prosperity Group, which is business leaders, municipalities from across the

island. They are interested in the recruitment and retention of healthcare workers. This could be an opportunity to explore and get family physicians at that table.

There will be more discussion about all this work at the Board retreat on February 25th.

Consent agenda

- February 8 Agenda
- ED Report
- VDFP Program Report
- New Members List

Decision: Approval of the Consent agenda. By consensus, approved.

Review of minutes

The January 11, 2024, meeting minutes reviewed and there were no edits.

Decision: Approval of January 11, 2024, Board meeting minutes. By consensus, approved.

Review of action items

- Action items reviewed:
 - o #1 Staff to follow-up to inquire with members closing practice e.g., planned retirement or other. in progress
 - o #2 Survey members for future board socials coffee, pub nights, or other complete
 - #3 Develop board retreat agenda with facilitator complete and on agenda
 - #4 Develop board orientation content for a more formal onboarding process for new directors. in-progress
 -meeting scheduled to discuss further

Member feedback

- Discussed whether the division provides support to members for facilitating purchasing/selling of supplies or equipment. The division hasn't been involved with this. Members encouraged to post on Facebook marketplace or other e.g. physician hive.
- Discussed supports to a member closing their practice and ensuring that patient panel is connected with the Health Connect Registry for any priority placements.
- The member survey regarding board socials is getting positive feedback. Members are wanting a Thursday
 evening time and are not inclined to wanting theme nights. Next Beer Banter to be scheduled for February 29th
 730-930 pm with Kristen and Marg hosting.
- Complete results of the member survey will come to the March board meeting.

Action #1: Schedule Beer Banter for February 29th and send invitation.

Finance & Audit Committee Report

- The third quarter financials reviewed.
- All programs are significantly under year-to-date budget.
- Deferred revenue is in a healthy position and a contingency fund is accumulating as interest rates higher.
- PCN funding because they are under spent, MoH hasn't paid us yet. This has happened with every PCN in this
 position. There is no indication any further funding will be withheld. MoH would need to give us advance notice if
 terms of our agreement were changing.
- Discussed ideas for spending and will look at this further in the budget process.

· Queries:

- Are we paying for RNs and midwives out of our budget in PCN? We can investigate this to ensure that
 payments are not coming out of PCN funds as NPs, RNs and midwives have their own funding for quality
 improvement and primary care development.
- Is it possible with the surplus funds for LTCI to access for programming? The surplus can be carried over.
 Often there are restrictions in the agreements for already funded streams, but it may be that division unrestricted funds could fund a staff/contractor to do some LTCI programming. We can look at this during the budget process.

Proposed additions to 2023/24 budget

- FPSC has approved additional funding for divisions of family practice for an increase to existing Attachment Mechanism Funding stream and added a new PCN Governance Support Funding stream.
- Both are starting as of January 2024. This is an additional \$150K to the current 2023/24 budget and is unlikely to be spent before the end of the fiscal and will be carried over to the 2024/25 budget and operational planning.
- There is no downside or risk to accepting these funds and staff recommends the Board agrees to accepting the additional funding.
- All agreed to accept the additional funds.

Decision: Approval of Attachment Mechanism Addendum and FPSC Governance Support Funds Transfer Agreement for VDFP FYP2023-24. By consensus, approved.

In-camera 7:20-7:25 pm

Executive Director and Operations Coordinator left the room.

Break 7:25-7:35 pm

VDFP 2024/25 Budget Process

- The timeline and process for budgeting was reviewed. Historical spending and then review of all the work and priorities the board wants to focus on develops the budget and operational plan.
- FAAC will review on April 4th and then the 2024/25 budget will come to the April 11th board meeting for approval.
- An overview of anticipated funding from FPSC and other sources was provided.
- We have not received information about LTCI.
- We have notional amounts for PCN implementation.
- Service transitions is money from Shared Care for Shared Care Projects.
- Infrastructure funding is based on primary member numbers and each year the division submits a member list to receive that core funding.
- The board confirmed they would like to continue as a division and apply for the infrastructure funding and additional funding sources.
- Discussion/feedback:
 - Add board priorities on agenda with the mission and vision so when items come up, the board can determine if something is within their priorities.
 - Query: What are we doing with the Emergency Management funding? We are looking for a project manager.

Motion: It was moved by Mr Peter Lockie and seconded by Dr Melissa Duff approved to apply for FPSC Funds: Infrastructure, Physician Engagement in PMH & PCN Development, Attachment Mechanism, Health Emergency Management, Physician Integration and Retention, Regional Recruitment, Retention and Retirement Coordination, Minor Tenant Improvement, and PCN Governance Support – Gate 2. All approved, motion carried.

Update VDFP Risk Register

- The template is based on the provincial risk management model and purpose is meant to determine what is an organization's high, medium, and low risks, what are we doing about it, and can we do more.
- This is a good process for a board to go through each year to understand risk to an organization.
- The board reviewed the risk register and discussed the higher risk items.
- VDFP has established processes in place, and we are confident in those processes.
- VDFP is in good strategic position but need to stay aware that we are here to support the FPs in our community which is different than our partners.
- Further focus and discussion on the risk register will be held at the Board Retreat on February 25th.

Proposed Agenda for the Board Retreat

- The board reviewed the draft agenda for the retreat.
- Suggested edits:
 - o Staff presentations, mission/vision, organization chart, and governance in the morning
 - Risk review, brainstorming, goals/priorities in the afternoon.
 - Additional topics:
 - How to recognize members and our staff? Bring forward to the March board meeting.
 - Add new area of work Maternity care? Bring forward as new areas of work at the board retreat.

Action #2: Edit Board Retreat agenda.

Action #3: Add member and staff recognition awards to March board meeting agenda.

VPCN Space Planning Subcommittee update

- The space planning committee toured the new building, very impressive.
- VPCN Governance structure has its own space planning committee and then Executive sponsorship group which
 has our Island Health partners involved, and then the working group (Island Health and VPCN staff) creates the
 operational plans.
- The working group is working on the floor plan which then comes to the space planning committee to finalize.

PCN transition committee update

- The committee has been working hard. There is a lot of interest and questions from people in our community.
- An *Expression of Interest* and job description for the chair of the PCN SC is coming out soon to members and through the NewsFlash.
- The committee developed criteria and determined no Island Health medical directors or VDFP chair to be considered for the chair role.
- There are three board members on the PCN transition committee so the committee will make the final selection and then bring to the board.
- The goal is to have the chair in place by April 1st.

Communication with Members

- VPCN is actively looking for a new PCN SC chair.
- Beer banters are back!
- The Division is starting budget and operational planning for 2024/25, we welcome member ideas.

Review of action items and meeting Evaluation

· Action items reviewed.

