

Key Items

1. Patient Medical Home/Primary Care Home

The GPSC spent a significant portion of the two-day meeting discussing the work underway for the patient medical home and primary care home, and the overarching work on the strategic direction of primary care. The committee approved a graphic illustration of the patient medical home model, which was shared at the September 13 PMH/PCH meeting and is available on the [GPSC website](#).

Much of the discussion focused on ways in which the GPSC's work integrates with partners, in particular the health authorities. As has been stated, the GPSC will govern and lead the design and implementation of the patient medical home and primary care home model, and will support the linkage of the primary care home to health authority specialized services and community supports.

Health authorities hold responsibility for specialized services in the community and health authority-delivered primary care services. While these have been articulated by the Ministry of Health as two separate streams of work, the committee discussed in detail how integrated, collaborative efforts are essential in all facets of this partnership work.

2. Feedback from the Profession

The committee members had a discussion regarding division-led projects in communities across BC where long-term sustainability is becoming a concern. The GPSC recognizes that some divisions may have already answered that question with what they have submitted for their A GP for Me close outs. The GPSC will review the content submitted by divisions as a first step to understand the overall level of sustainment and alignment with the GPSC visions and goals of patient medical homes and primary care homes. Through the provincial Divisions office, the GPSC has also asked for more information about the degree to which A GP for Me projects are expecting to be sustained into the future, in particular those that directly relate to implementation of the primary care home/patient medical home, in order to understand impacts and inform decision making.

The committee also discussed topics raised by doctors such as the pressing need for translation services for community-based doctors.

3. Divisions of Family Practice Update

Infrastructure Funding

The GPSC approved the infrastructure funding recommendations submitted by the PDO and under the leadership of GPSC members Dr Fiona Duncan and Nancy South. These recommendations, related to the fiscal years of 2016/17, 2017/18 and 2018/19, address foundational, collaboration, and growth & sustainability funding streams. A memo outlining details will be sent to divisions within the next week.

Division leaders participating in GPSC meetings

The committee received an update from the provincial Divisions team on the process by which divisions are identifying a representative to attend GPSC meetings. Interdivisional strategic councils are being asked to put forward two names to represent the division voice for the next eight months based on three criteria:

- The representative will represent the division voice provincially, as opposed to one particular region.
- Each representative will attend GPSC meetings for four months.
- The representative must attend both days of the GPSC meeting per month.

4. **Leadership Changes at the GPSC**

It was announced that Wendy Hansson, Senior Strategic Advisor and Executive Lead for Primary Care for the Ministry of Health and the GPSC co-chair for the ministry, has been appointed to the role of Vice President and Chief Transformation Officer, Providence Health Care. The committee thanks Wendy for her leadership over the past year and wishes her well in her new role.

The GPSC's next meeting is scheduled for October 17 and 18.