



General Practice Services Committee

GPSC Provincial Recruitment and Retention Steering Committee

Terms of Reference *(Provisionally approved)*

Background and Context

The current GPSC Provincial Recruitment and Retention Steering Committee (PRRSC) evolved from the understanding that almost all divisions have identified family physician(FP) recruitment and retention and practice coverage as issues of high priority for their membership. Recognizing this as a significant issue impacting access to patient care, and through working with partners across the province, a provincial effort was identified as necessary to coordinate a streamlined approach to addressing FP recruitment and retention.

After the GPSC sponsored Provincial Recruitment and Retention Summit, held in 2015, the need for a broader provincial table was identified, leading to the current Provincial Recruitment and Retention Steering Committee's structure, members and partners. The PRRSC is a standing committee accountable to the GPSC.

Mandate

The PRRSC works collaboratively to utilize the collective knowledge and influence of its participating partners and physician representatives to understand the broad spectrum of issues around the recruitment and retention of FPs in BC with a goal of understanding, aligning and optimizing efforts to retain family doctors in BC, and recruit new physicians to meet current and future primary care needs.

Objectives and Responsibilities

The committee acts to:

- Advise and inform the GPSC and other partners of activities and potential strategies in support of its mandate.
- Contribute to a common understanding among Divisions, and their partners, of recruitment, retention and practice coverage issues and resource needs relating to primary care in B.C.
- Inform system-wide and/or practice focused approaches for current and future FP placement and practice/patient coverage needs, including providing input to the Ministry of Health's Health Human Resources forecasting process.
- Ensure that work around recruitment and retention is aligned with the goals and direction of the GPSC, including alignment with the Patient Medical Home initiative.



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- Identify potential strategies in response to identified barriers at provincial/regional/community levels
- Provide advice and guidance to the GPSC on practice and community focused approaches to recruitment, retention, and practice coverage, and to facilitate the development and sharing of these approaches at local and Divisional levels
- Develop strategies, make recommendations and develop tools to support recruitment and retention at the local, regional, and provincial level.
- Ensure that effective evaluative methods are developed and employed to facilitate continuous learning, monitor progress, and determine overall impact of PRRSC projects and initiatives.

Core Values for Guiding the Committee

- Results oriented
- Inclusive
- Non-competitive
- Focused on addressing collective needs
- Transparent
- Collaborative
- Emphasis on sharing resources and information

Decision Making

The committee undertakes a consensus decision-making process. Consensus is achieved when everyone accepts and supports a decision and understands how it was reached. In meetings where significant recommendations are to be made, all members of the Steering Committee will be notified and encouraged to attend.

Membership/Structure

Steering Committee membership consists of GPSC and Divisions' members and staff and stakeholder partners.

The Steering Committee is supported by a CPQI staff lead, with further support provided by a Project Manager and the Provincial Divisions team.

Other stakeholders (participating partners) may be invited to participate in meetings as needed.

Core Committee Members

- o GPs from Divisions (1 from each Health Region) - 5
- o Divisions' Executive Director - 1
- o Joint Standing Committee on Rural Issues (JSC) - 1
- o Rural Coordination Centre of BC (RCCbc) - 1
- o Urban GP -1 (included in above)



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- o Health Match BC - 1
- o GPSC - 2 (Doctors of BC - 1; Ministry of Health - 1)
- o Health Authority - 1
- o Ministry of Health – 1
- o Family Medicine Resident/New to Practice GP – 1 where possible

Participating Partners

- o UBC Faculty of Medicine, Undergraduate – 1
- o UBC Faculty of Medicine, Postgraduate – 1
- o College of Physicians and Surgeons of BC – 1
- o First Nations Health Authority – 1
- o Union of BC Municipalities (UBCM) – 1
- o BC College of Family Physicians – 1
- o Society of General Practitioners of BC – 1

- Membership is by invitation from the Steering Committee.
- Membership is annually renewable.
- Steering Committee members must commit to participate in a minimum of two in-person meetings and two teleconference meetings per calendar year.
- Committee may develop time limited subcommittees as needed to inform the committees' planning and activities. Membership may include interested parties from Divisions of Family Practice and from external stakeholder groups as appropriate.

Accountability

- The Steering Committee is accountable to the GPSC and Divisions of Family Practice.
- The Steering Committee will report to GPSC quarterly and as needed on its actions and activities.

Co-Chair

The PRRSC will be co-chaired by one GPSC representative and one Divisions' physician representative.

Attributes

Members should have collaborative, diplomatic, and negotiation skills and experience. Members are expected to be knowledgeable of issues facing FPs in a community-based practice offering longitudinal, general care.



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Meetings & Timeline

The PRRSC will act as a standing committee to the GPSC until such time the GPSC determines otherwise.

The Steering Committee expects to meet a minimum four times each year, including twice in person. During periods with aggressive timelines and intensive activity (e.g. 90 day-challenge), the Committee will meet twice per month, including once in person.

Reporting

The PRRSC will report to the GPSC.

Funding

Budget	The committee budget will be determined and allocated by the GPSC on an annual basis.
Member Expenses	The costs of physician (other than employees of the parties) participation in the Recruitment and retention committee will be paid from funds to be allocated by the GPSC. Divisional and GPSC Doctors are supported by GPSC. Other physicians are supported by their respective organizations. GPSC members are reimbursed at Doctors of BC honoraria rate.

Confidentiality

On occasion, Committee members may possess documentation or information of a confidential nature. Such information will not be disclosed to any person(s) other than the members of the committee without consultation with and agreement of the committee.

Conflict Of Interest

Committee members shall disclose any matters which may constitute a direct or indirect conflict of interest between personal or professional activities, and responsibility as a Committee member. Committee members must act in a manner that will prevent conflicts of interest from arising.