



Mandate

The Physician Health Program of BC helps physicians and their families by:

- Fostering an environment of health and wellness;
- Offering prompt personalized assistance with a variety of issues, including
 - Physical health,
 - Mental health and addictions,
 - Difficult relationships;
- Advocating for the individual and collective health of physicians.

The Program provides a range of services, including: clinical counselling, assistance with attachment to a family physician, and occupational health assessments. Program staff also provide outreach by presenting at formal and informal learning events, and by facilitating small group experiences.



Governance Structure and Funding

The Physician Master Agreement (PMA) is negotiated periodically between the Government of BC and the Doctors of BC.

The Program's funding is currently described under Article 6.9 of the 2014 Benefits Subsidiary Agreement, which is part of the PMA. The Government and the Doctors of BC sign a separate Letter of Expectations, which serves as the terms of reference for the Physician Health Program Steering Committee. The Steering Committee governs the Program in a manner consistent with the oversight of other collaborations between the Government and the Doctors of BC. The Steering Committee is tasked with producing a multi-year strategic plan for the Program that aligns with the priorities of the two funders. It must also approve annually a work plan and budget for the upcoming year, and a report of the previous year's activities, along with policies that serve as decision-making guides for staff in the day-to-day operation of the Program.

COMMITTEE MEMBERS

(As of December 31, 2018)

Charuka Maheswaran

Doctors of BC Co-Chair

Ryan Murray

Ministry of Health Co-Chair

Melanie Altas

Doctors of BC Representative

Ashok Krishnamoorthy

Doctors of BC Representative

Selena Lawrie

Ministry of Health Representative

Dorothy Williams

Ministry of Health Representative

PROGRAM STAFF

(As of December 31, 2018)

Executive Director:

Andrew Clarke

Program Physicians:

Kathleen McGarvey, Doug McGhee, Peter Gibson, Maureen Mayhew

Clinical Coordinators:

Carol Faris, Lucy McCullough, Roxanne Joyce, Deanna Wilson

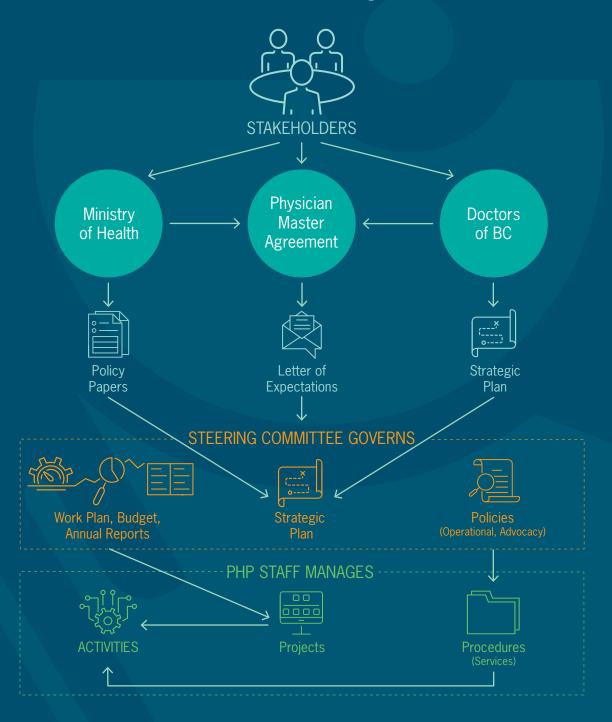
Senior Administrative Assistant:

Karen McNaught

Operations Analyst:

Rohan Vora

Governance Map





Report on Activities

Planned Work

The 2018 Work Plan for the Physician Health Program included:

- continuing to provide the current range of clinical and services;
- formalizing collaborations with community organizations such as Divisions of Family Practice and Medical Staff Associations; and
- continuing to expand the Program to other provinces and professions in order to achieve economies of scale and to improve the quality of services through leverage with key vendors.

Services Provided to BC Physicians¹

Demand for clinical services provided by the Program continued to grow but at a declining pace in 2018. Clinical services continue to consume the majority of the Program's resources. The following tables show the services provided, broken down along a number of dimensions.

CALENDAR YEAR				
2018	2017	2016	2015	2014
464	402	359	330	312
173	184	186	161	183
50	63	79	83	60
49	35	33	37	19
28	25	27	28	21
7	11	6	3	9
4	24	12	16	11
775	744	702	658	615
	464 173 50 49 28 7 4	2018 2017 464 402 173 184 50 63 49 35 28 25 7 11 4 24	2018 2017 2016 464 402 359 173 184 186 50 63 79 49 35 33 28 25 27 7 11 6 4 24 12	2018 2017 2016 2015 464 402 359 330 173 184 186 161 50 63 79 83 49 35 33 37 28 25 27 28 7 11 6 3 4 24 12 16

Overall case volume increased by approximately four percent.

PRINCIPAL ISSUE AT INTAKE²

Proportion of cases ³	2018	2017	2016	2015	2014
Individual Mental Health4	57 %	54%	55%	54%	51%
Family & Non-Occupational Relationships	25%	23%	28%	24%	23%
Occupational Issues	14%	18%	12%	15%	19%
Physical Health Issues	1%	5%	4%	3%	2%
Other Issues	2%	2%	2%	3%	4%

- 1. Services provided to PEI physicians are reported separately, and are available from the Medical Society of PEI.
- 2. Excludes cases where the principal service provided was connection to a family physician.
- 3. Proportions may not sum to 100% because of rounding for presentation.
- 4. Including substance use.



Other relationship

CAREER STAGE OF ELIGIBLE PERSON	CALENDAR YEAR				
Proportion of cases	2018	2017	2016	2015	2014
Practicing physician	68%	62%	56%	59%	54%
Resident/Fellow	19%	19%	23%	22%	28%
Medical student	13%	17%	19%	17%	16%
Retired	1%	1%	3%	2%	1%
RELATIONSHIP TO ELIGIBLE PERSON					
Proportion of cases	2018	2017	2016	2015	2014
Physician or Trainee	90%	90%	90%	92%	89%
Spouse	7%	7%	7%	6%	7%
Child	2%	2%	2%	1%	2%

1%

1%

1%

0%

1%

Distribution of cases by principal service provided, principal problem presented, and relationship to eligible person all remained approximately constant.

Promoting Collaboration with Community Organizations

BC now has over 100 local physician organizations (Divisions of Family Practice and Medical Staff Associations) working toward the local improvement of health care. Many of these organizations have made physician health and wellness a local strategic priority. More and more are approaching one of the central coordinating committees (GPSC, SSC, PHP) for support and guidance in addressing these local priorities.

To encourage collaboration among all the stakeholders in BC whose priorities include physician health and wellness, the Program hosted an event on April 3, 2018. The event had over 50 attendees, including representatives from the Canadian Medical Association. Following the event, an on-line community was created, hosted by the PHP, under the banner LOWTRAPHIC (Local Organizations Working Toward Resilience and Physician Health in Communities).

In the fall of 2018, the Program started an initiative with the Vancouver Division of Family Practice to attach physician-patients to family physicians in the Vancouver area, where three quarters of requests to the Program originate.



Achieving Sustainability Through Expansion

On April 1, 2018, the Program began providing services to the physicians of Prince Edward Island, through a two-year trial agreement with the Medical Society of PEI. By year's end, the utilization rate for the PEI population was 8%: double the rate for practicing physicians in BC.

A proposal to begin service provision to BC Dentists and their families commencing in 2019 was approved by the PHP Steering Committee, and by the Doctors of BC Board of Directors.



8% utilization rate



Financial Results

	2018	2017	2016
Revenue	1,843,478	1,668,537	1,436,618
Expenses			
Clinical Services	1,474,619	1,196,222	1,036,500
Administration	279,538	394,069	446,615
Excess (deficiency)	89,321	78,246	(46,497)
Net assets, beginning of period	453,272	375,026	421,523
Net assets, end of period	542,593	453,272	375,026

Copies of the auditors' report and full audited financial statements are available upon request.

As per Article 6.9 of the Benefits Subsidiary Agreement (part of the Physician Master Agreement, 2014), the Program's funding increased during 2018 from a total of 1.7 million per year, to 1.8 million per year (for the period of April 1, 2018 to March 31, 2019).



Physician Health Program

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