

Shared Care Committee Overview

The relationship between family and specialist physicians is fundamental to the delivery of effective health care, especially for more complex patient populations.

Gaps in communication between hospital-based and community-based physicians, and between family and specialist physicians can impede the flow of care from primary to specialist, especially for patients with chronic health conditions.

Today many family and specialist physicians in BC are working together through Shared Care initiatives to improve flow and bridge gaps in care to improve health and patient/provider experience.

By facilitating collaboration between family and specialist physicians, Shared Care initiatives foster mutual trust, respect, and knowledge of each physician's expertise, skills, and responsibilities, all of which are integral to effective collaboration and collegial relationships. Long term, Shared Care work helps build a collaborative infrastructure for sustainable improvements for our health care system in BC.

Type of organization

The Shared Care Committee is a partnership of the BC Ministry of Health and Doctors of BC formed as part of the 2006 Physician Master Agreement. It held its first meeting in October 2007. The Committee consists of five voting members from Doctors of BC, four voting members from the Ministry of Health, as well as participation by all health authorities, and two patient representatives.

Purpose

To support family and specialist physicians in working together to improve the flow of patients between primary and specialist care in BC.

Funding

The committee receives a base annual funding of approximately \$7.5 million per year. In addition, it receives special contributions from the General Practice Services Committee and the Specialist Services Committee.

How we work

The Shared Care Committee works closely with physicians in their local communities through a variety of organizations such as the local divisions of family practice, health authorities, post-secondary institutions, non-profit organizations and individual physician offices. The key is to find the right organizational fit for each community based on the needs and consensus of the family and specialist physicians.

Initiatives

Partners in Care — identifying and addressing inefficiencies and gaps in communication between family and specialist physicians through telephone advice protocols, improved consultation methods, care plans and referral processes.

Transitions in Care — addressing inefficiencies and gaps in communication for safe transitions and improved experiences for patients moving between health care settings.

Polypharmacy Risk Reduction — reducing risks and improving quality of life for patients on multiple medications in residential and acute care, and in the community.

Child and Youth Mental Health and Substance Use Collaborative — improving timely access to mental health and substance use services and support for children, youth, and their families in BC.

Rapid Access to Psychiatry — expanding capacity with existing resources for patients with mood disorders.

Teledermatology — supporting the use of digital technology and the internet to improve access to dermatological consults for family physicians in urban, remote and isolated communities in BC.

Youth Transitions — improving transition from pediatric to adult care for youth and young adults with complex health conditions.

Practice Support Program (PSP) — developing and delivering learning modules with a focus on shared care of patients between family and specialist physicians.

Redesign Funding — supporting physician participation in health system redesign projects led by BC health authorities.

Scholarships — supporting physician participation in leadership training.

Contact

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