



ANNUAL REPORT 2018/19

Shared Care Committee (SCC)

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EXECUTIVE SUMMARY

Committee Background/History

The Shared Care Committee (SCC) is one of four Joint Collaborative Committees (JCC) representing a partnership between Doctors of BC and the Ministry of Health, with mandates to improve health outcomes and the patient journey through the health care system.

The SCC was formed in 2006, per article 8.1 of the 2006 Physician Master Agreement, between the Ministry of Health and Doctors of BC, to enable shared care between family and specialist physicians and other health providers. The relationship between family and specialist physicians, and between physicians and other health providers, is fundamental to the delivery of effective health care. Shared Care initiatives build and strengthen this relationship by fostering trust, respectful relationships, and utilization of each provider's expertise to maximize success of shared quality improvement initiatives. With effective collaboration between family and specialist physicians and partners, Shared Care work sets the foundation for a culture of collegiality, innovation and team-based patient-centered care to ensure a coordinated experience for patients in BC's health care system.

“The rewards of coming together to understand perspectives different from our own to solve important local issues has been truly immeasurable.”

— Dr Kathleen Ross,
President, Doctors of BC



2018/19 SCC Activities

The Shared Care Committee sets to achieve their goals and mandate through focusing on three main streams of work. The first stream aims to facilitate collaborative change and innovation in response to identified gaps in patient care by local communities. The second stream focuses on intentionally spreading successful approaches and tools to other communities that experience similar gaps in care, and the third stream supports physician leadership and alignment across the Joint Collaborative Committees. Throughout this work, the Shared Care Committee ensures that initiatives support physician collaboration to address health care priorities and challenges to ensure a coordinated, integrated care experience for patients families, and providers.

In 2018/19, The Shared Care Committee initiated 30 new projects for a total of 112 active projects for the year, while continuing to support local physician-led collaborative projects, and to improve coordination of care for patients transitioning between providers and care settings.

Spread Networks flourished this year as the SCC worked to further develop existing and new initiatives to foster collaboration and spread successful work across the province. A number of gatherings were held throughout the province with the goal of increasing participation of community physicians and partners in these networks and initiatives, with many positive results. Specifically, existing networks expanded their reach with 22 of 35 Divisions of Family Practice now involved in the Maternity Spread Network, and with eight new communities joining the Chronic Pain Spread Network. The newly launched Coordinating Complex Care for Older Adults initiative, aiming to engage Specialist physicians in primary care transformation, signed on six communities from around the province in its first year.

2018/19 also marks the advancement of key SCC initiatives to their next stage of development with the continued provision of SCC support for physician leadership and sustainability of successful work. This advancement can be seen with the Child and Youth Mental Health and Substance Use Physicians' Community of Practice that grew to over 145 members who actively advocate for this vulnerable population, and with the Polypharmacy Risk Reduction initiative that concluded its work this year with the publication of a Ministry of Health data set and evaluation. Physicians and health authorities continue to engage in quality improvement initiatives with SCC support, as evidenced by the 138 physicians (a 50% increase) who accessed leadership training in 2018/19.

SCC continued to support the alignment and integration of Joint Collaborative Committee activities for greater efficiency and impact overall.

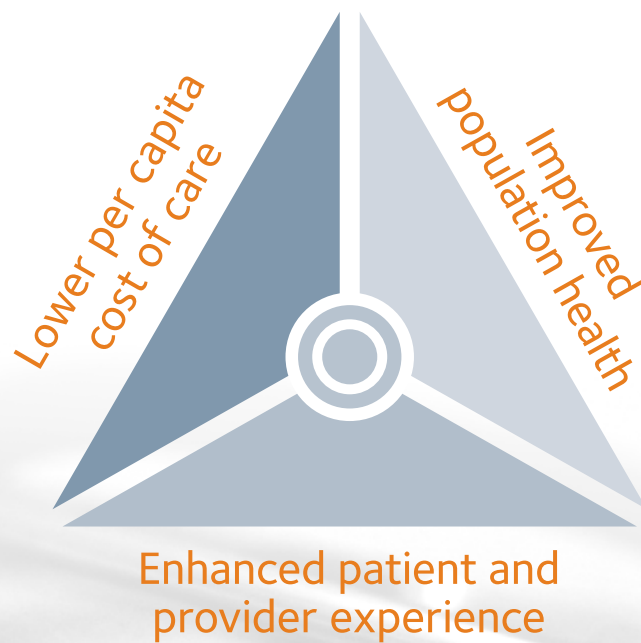


EXECUTIVE SUMMARY

Committee Vision/Mission/Mandate

(as per the PMA)

THE WORK OF THE SHARED CARE Committee is grounded in the principles of patient-centred care and the quality improvement methodologies of the Institute of Healthcare Improvement. In alignment with the Ministry of Health, the Shared Care Committee frames its efforts at system improvement around the Triple Aim Framework; improved patient and provider experience of care, improved health outcomes, and positive impact on efficiency and cost.



Vision

Collaboration at all levels supports a coordinated care experience for patients and families

Mission

To engage family and specialist physicians in collaborative, team-based initiatives to improve the flow of patient care, trial innovative solutions, and address inefficiencies and gaps in the health care system

Mandate

Develop recommendations to enable shared care and appropriate scopes of practice, and improve collaboration between family and specialist physicians and other health professionals to meet patient needs

Principles

- Effective Engagement
- Calculated Risk Taking
- Enable Innovation
- Foster Culture Change
- Challenge the Status Quo
- Measureable Improvement

EXECUTIVE SUMMARY

Co-Chairs' Message

After eight years of dedicated service, Dr. Gordon Hoag concluded his term as the Doctors of BC Co-Chair for SCC. SCC extends its sincere thanks to Dr. Hoag for his insightful leadership and commitment. Dr Ken Hughes assumed the role as Doctors of BC Co-chair and Marilyn Copes remains as the Ministry of Health Co-chair. The SCC also expressed heartfelt thanks to Angela Micco for her many years of dedicated support to the SCC when she also retired this year from her role as SCC Secretariat.

Supporting the creation of local, effective, coordinated and integrated systems of care remains the focus of SCC. While the committee continued efforts to enable local innovation this year, it also took significant steps to formalize strategies to facilitate collaboration to spread successful work: 'Coordinating Complex Care for Older Adults' is an innovative initiative that supports provincial primary care priorities through the engagement of specialist physicians to improve care coordination for patients transitioning between service providers in the health care system.

Other important work this year included the launch of SCC's spread strategy - a new online Learning Centre (www.sharedcarelearningcentre.ca) that enables communities to share learnings and resources with others engaging in similar projects. Project profiles for the first six participating communities are now accessible, including projects in the area of palliative care, psychiatry and radiology. Important work and information is being shared through the development and roll-out of four spread networks focused on chronic pain, maternity, palliative care, and mental health and substance use. In 2018/19 SCC welcomed 30 communities as participants in the spread networks.

SCC's physicians, health authority and Family Caregivers of BC representatives, a patient partner, and staff, dedicated another successful year toward the ongoing achievement of a coordinated system of patient-centred care that meet the needs of providers, patients, families and caregivers throughout BC.



Marilyn Copes
Marilyn Copes
Co-Chair, SCC



Dr. Ken Hughes
Dr. Ken Hughes
Co-Chair, SCC

Committee Members

Doctors of BC:

- Dr Ken Hughes, Co-Chair*
- Dr Kathy Lee*
- Dr Jiwei Li*
- Dr Shelley Ross*
- Dr Ian Schokking*
- Dr Elisabeth Baerg-Hall (Alternate)
- Dr Cole Stanley (Alternate)

Ministry of Health:

- Ms Marilyn Copes, Co-Chair*
- Mr Brendan Abbott *
- Mr Ryan Murray*
- vacant
- vacant

Health Authorities:

- Dr Curtis Bell, Interior Health
- Dr Shannon Douglas, Northern Health
- Ms Marnie Gazankas, Vancouver Coastal Health
- Ms Carol Laberge, Provincial Health Services
- Dr David Robertson, Island Health
- Mr. Justin LoChang, Fraser Health

Patients and Family Representatives:

- Ms Iris Kisch, Patient Partner
- Ms Barb MacLean, Family Caregivers of BC

Staff Support:

- Ms Margaret English, Director, SCC
- Ms Kathy Copeman-Stewart, Lead, Provincial Initiatives, SCC
- Mr Gary Sveinson, Liaison, SCC
- Ms Nancy Falconer, Liaison, SCC
- Ms Ray Grewal, Liaison, SCC
- Ms Sarah Forster, Liaison, SCC
- Ms Lisa Despins, Communications Officer, SCC
- Mr Ryan Davis, Financial Analyst, SCC
- Ms Eileen Janel, Senior Project Coordinator, SCC
- Ms Krysta Wallbank, Project Coordinator, Provincial Initiatives, SCC
- Ms Raveena Garcha, Senior Administrative Assistant, SCC
- Ms Katie Purych, Administrative Assistant, SCC
- Ms Angela Micco, Secretariat, Ministry of Health
- Ms Salimah Lalli, Liaison, JCC, Doctors of BC
- Ms Jessica Nadler, Project Coordinator, JCC, Doctors of BC

* Voting Member

ACTIVITIES & OUTCOMES WORK PLAN PRIORITIES

Facilitate Collaborative Change

One of the primary functions of the SCC is to support physician collaboration to address issues impacting patient care in their community. Supporting physicians to work together on common goals fosters stronger inter-professional relationships and sets a foundation for improved coordination of care for patients and families. Initiatives in this strategic grouping, as well as program highlights, are as follows:

PARTNERS IN CARE/TRANSITIONS IN CARE

Since 2010, SCC's Partners in Care (PiC) and Transitions in Care (TiC) initiative has engaged GPs, Specialists, GPs with Focused Practice, Health Authorities, and other health professionals, in over 170 community-based projects across the province.

PiC/TiC initiatives focus on physician-led projects, to improve coordination of care for patients among providers (Partners in Care) and between care settings (Transitions in Care). As the PiC/TiC work has evolved over time, project teams have worked together to learn from each other and spread activities regionally or provincially. PiC/TiC projects also form the foundation of SCC's Spread Networks, which were initiated to bring together communities actively engaged in addressing the needs of priority populations.

Program Highlights:

- 11 new projects supported
- 21 Expressions of Interest (EOIs) were initiated (including PiC/TiC, Coordinating Complex Care for Older Adults and Spread Networks)
- SCC program processes were revised and simplified for physicians and communities interested in partnering with Shared Care. All information is now posted on the SCC website



COORDINATING COMPLEX CARE INITIATIVE FOR OLDER ADULTS

Through this initiative, specialist physicians are engaged in primary care transformation for improved coordination of care for complex patients transitioning between multiple service providers in the health care system.

Program Highlights:

- A Provincial launch event was held in October 2018. The event hosted 85 attendees representing specialists, GPs, 27 Divisions of Family Practice, and other partners to highlight the principles of coordinated care and to explore opportunities to implement this initiative in communities across BC
- 6 communities joined: 3 in the Fraser region and 3 in the Interior

SUPPORT SURGICAL STRATEGY

SCC is working collaboratively with the other Joint Collaborative Committees (JCCs), to support alignment across practice settings as the provincial surgical strategy is implemented.

Shared Care's initial focus and support was directed towards establishing and implementing pooled referral and enhanced recovery after surgery initiatives, which were transferred to the Specialist Services Committee to spread. Since this initial work, the Shared Care Committee has been working with the Specialist Services Committee to identify support for the Surgical Patient Optimization Collaborative (SPOC)

Program Highlights:

- SCC provided information on relevant SCC approaches and projects to inform initial stages of the SPOC
- Supported development of SPOC learning session in February 2019



ACTIVITIES & OUTCOMES

WORK PLAN PRIORITIES

Spread Successful Work

The SCC has supported more than 375 projects over the last 10 years, facilitating a stronger culture of collaboration among providers. Effective spread of successful approaches to care and alignment with related work across the health system is a priority for maximizing the value of SCC's activities. SCC continues to build on its strong foundation by supporting the implementation and growth of initiatives and strategies to spread successful work across the province.

This year, SCC focused on four main components to spread successful work:

- 1 Learning Centre
- 2 Spread Networks
- 3 Polypharmacy Risk Reduction
- 4 Profiling Shared Care work at conferences and in publications

GPs, Specialists & partners
working together for better care



1 LEARNING CENTRE

The Learning Centre is an online toolkit to help facilitate the spread and sustainability of Shared Care's successful projects. Communities interested in starting new projects will benefit from access to the learnings and resources located on the Learning Centre to address similar issues. The site encourages the efficient and cost-effective spread and sustainability of projects.

Program Highlights:

- The Learning Centre was successfully launched in September 2018. Focus groups and webinars were held to introduce the site and lead communities through the process of adding their project profiles
- 6 adoption profiles from various projects (i.e., Cognitive Behavioural Therapy, Radiology, COPD, Palliative Care) have been created and are now available on the site for other communities to view

ACTIVITIES & OUTCOMES

WORK PLAN PRIORITIES

2 SPREAD NETWORKS

Spread Networks aim to build greater alignment across the system and facilitate the spread of positive improvements in practice. SCC supports the development and implementation of a ‘Spread Network’ model of care for several priority populations.

Program Highlights:

- An evaluation plan was created with Key Performance Indicators established to monitor the ongoing impact and success of the Spread Networks

MATERNITY

The Maternity Spread Network supports the spread of successful work and an Inter-professional Collaborative Approach (IPC) to improve maternity care in BC. The Network brings communities together to share learnings, mentorship, and building of cross-provincial alignment, in consultation with Perinatal Services BC, the General Practice Services Committee’s (GPSC) Maternity Working Group, the Joint Standing Committee for Rural Issues (JSC) Rural Obstetrical Surgical Networks and other JCC initiatives.

Program Highlights:

- 10 new communities joined the Maternity Spread Network now involving 22 of 35 Divisions of Family Practice
- A Maternity Spread Network Forum was hosted in March 2019 with 68 attendees, including five Obstetrician Leads, 22 GPs, and 15 Registered Midwives
- A comprehensive toolkit and technical billing guide were developed to support participating communities



CHRONIC PAIN

The Chronic Pain Spread Network supports physicians to address chronic pain more effectively and to better meet patient needs in alignment with provincial strategies, and in consultation with Pain BC.

Program Highlights:

- 8 new communities joined in 2018-19 (total 12)
- 2 provincial events were held, including a Chronic Pain Spread Network Launch in October 2018 with 45 attendees, including 20 physicians, project leads, Ministry of Health and health authority representatives, and Pain BC. Attendees discussed ongoing priorities for the Spread Network moving forward
- SCC partnered with Pain BC to support Project Echo – a virtual learning community comprised of specialists and community health care workers wishing to improve confidence in providing care for complex chronic pain cases. The project launched in April 2018

ADULT MENTAL HEALTH AND SUBSTANCE USE

The Adult Mental Health and Substance Use Spread Network supports GP and Specialist-led partnerships to connect with other allied health care providers to identify community issues and develop strategies to create a more coordinated MHSU system of care.

Program Highlights:

- Adult Mental Health & Substance Use (AMHSU) Network Launch January 2019
- 5 new communities joined in 2018-19

PALLIATIVE CARE

The Palliative Care Spread Network encourages a coordinated and standardized approach to delivery of palliative care based on successful models developed through PiC/TiC initiatives.

Program Highlights:

- An environmental scan was conducted to gain a greater understanding of the provincial landscape and resources currently available
- Work is currently underway to identify spreadable tools and resources developed at the local level



ACTIVITIES & OUTCOMES

WORK PLAN PRIORITIES

3 POLYPHARMACY RISK REDUCTION (PPhRR)

The Polypharmacy Risk Reduction initiative, in place since 2011, supports GPs and specialist physicians to reduce the risk of polypharmacy for frail older adults that may impact their safety, health outcomes and quality of life. The work of Polypharmacy supports the Ministry of Health focus on older adults with chronic conditions.

Program Highlights:

- An evaluation, including MoH data, was conducted, providing greater understanding of the extent of the issue of polypharmacy in the province. The data will also be of significant value to other SCC initiatives moving forward, such as the Coordinating Complex Care for Older Adults initiative
- PPhRR tools and resources were developed for the SCC website for physicians and partners to inform others about Polypharmacy. This information was distributed at conferences, in online newsletters and other avenues
- Partnered with the First Nations Health Authority on an indigenous storytelling project entitled 'Coyote Story' aiming to address multiple medication use in First Nations communities. The book and video were launched at an Elder's Gathering of 3,000 in July 2018, presented at a Nurses Conference in November 2018, and presented at the JCC event in February 2019

4 PROFILING SCC AT CONFERENCES AND IN PUBLICATIONS

To promote spread of the growing body of SCC information and learnings, the SCC is supporting efforts to highlight successful work at health care conferences, quality improvement forums, and in publications.

Program Highlights:

- Implemented communications and funding support for successfully completed projects
- Physicians and project teams were supported to present at national and provincial conferences, such as the ['PPhRR Practical Approaches and Tools' storyboard](#) presented at the JCC 'Power of Togetherness' Event in February 2018. SCC also presented at CFHI, the CMA Conference, and the NCQA Summit, and Adverse Childhood Experiences Conference in San Francisco



“When Elders are able to guide the creation of health and wellness resources for them and their peers, the project will be more meaningful and successful. Coyote’s Food Medicines shares traditional knowledge and builds on the teachings of our ancestors to face the health issues of today.”

— Grand Chief Doug Kelly,
Chair of the First Nations
Health Council

ACTIVITIES & OUTCOMES

WORK PLAN PRIORITIES

Leadership & Sustainability

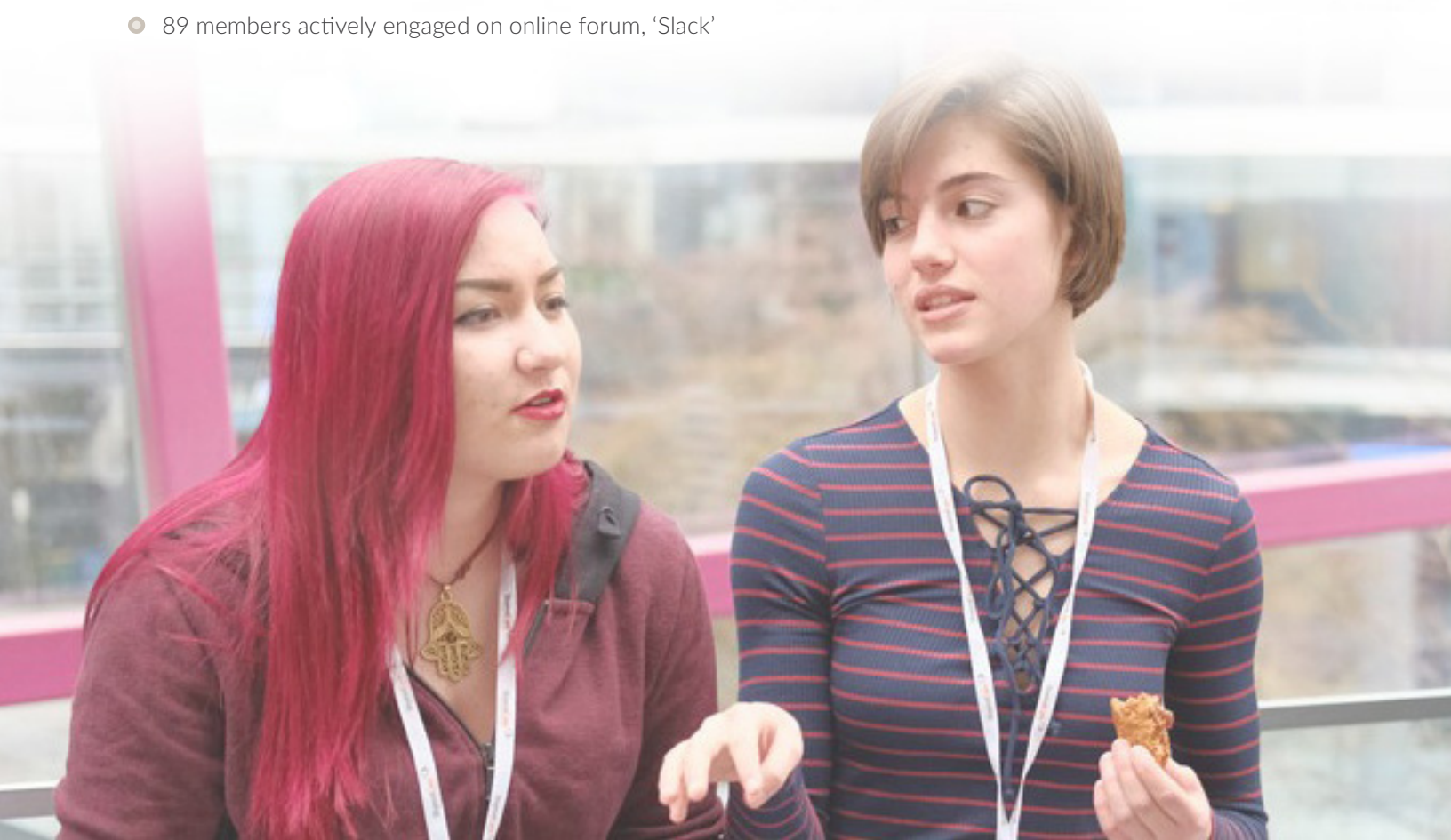
The following initiatives represent opportunities to facilitate long-term sustainable solutions for health care improvement and physician leadership.

CHILD AND YOUTH MENTAL HEALTH AND SUBSTANCE USE (CYMHSU) COMMUNITY OF PRACTICE (COP)

The CYMHSU equips physicians with the tools, skills, and relationships to realize integrated CYMHSU care across BC.

Program Highlights:

- 145 members are now involved in the CoP, representing a 10% increase in 2018/19
- 2 provincial CYMHSU CoP gatherings held in April and October to support learning opportunities
- 2019-2021 CoP Strategic Plan ratified
- 89 members actively engaged on online forum, 'Slack'



TELEDERMATOLOGY AND RAPID ACCESS TO CONSULTATIVE EXPERTISE (RACE)

Telehealth programs provide means for GPs to quickly consult with specialist colleagues regarding patients, resulting in more timely access to care and the prevention of unnecessary in-person consultations.

Program Highlights:

- Determined sustainment strategies for Teledermatology and Rapid Access to Consultative Expertise (RACE), in alignment with the Ministry of Health's strategic direction on telehealth solutions
- 2,443 Teledermatology consultations completed in 2018/19
- An environmental scan on RACE models was undertaken and a transition plan initiated
- More than 50,000 RACE calls and over 400 eConsults (non-urgent email) were completed in 2018/19

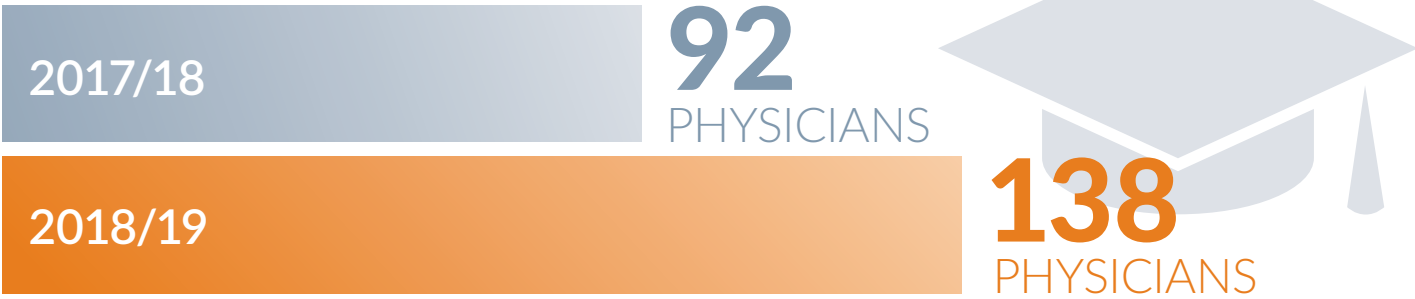


PHYSICIAN LEADERSHIP SCHOLARSHIP PROGRAM

The Physician Leadership Scholarship Program provides support, in collaboration with the Specialist Services Committee, for physicians to access quality improvement training to enhance leadership skills in the health care system.

Program Highlights:

138 physicians were supported by SCC for **Physician Leadership Scholarships** in 2018/19 – a **50% increase** from 2017/18



ACTIVITIES & OUTCOMES

WORK PLAN PRIORITIES

Joint Collaborative Committees – Shared Commitments

In addition to their individual committee priorities, the Joint Collaborative Committees (JCCs) share a commitment to strengthen committee alignment and integration for improved health service delivery. The SCC provides the administrative oversight and operational coordination for these shared commitments across the four JCCs.

HEALTH SYSTEM REDESIGN

This program, in partnership with GPSC and Specialist Services Committee, provides resources to health authorities to facilitate physician involvement in the design and implementation of health services.

Program Highlights:

- 204 health authority projects were funded by the Health System Redesign initiative with a focus on engaging physicians in; Quality Improvement, Mental Health and Substance Use, Primary Care Networks, Palliative Care, among others
- Developed effective processes to monitor and evaluate supported activities
- Evaluation developed to include level of engagement of physicians in the initiative



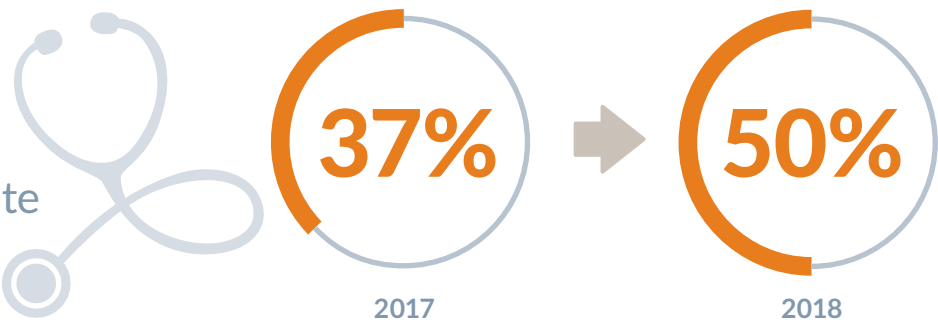
JCC EVENT IN PARTNERSHIP WITH BC PATIENT SAFETY QUALITY COUNCIL'S QUALITY FORUM

The JCC event was held in February 2019 to increase awareness of JCC quality improvement activities led by physicians and other health professionals in the province. The event also aims to engage participants to spread innovative ideas showcased at the event.

Program Highlights:

- Over 375 physicians, health authority and Ministry personnel attended 'The Power of Togetherness' JCC event

The event attracted the greatest number of **PHYSICIANS** to date



BC PHYSICIAN INTEGRATION PROGRAM (PIP)

PIP supports the successful transition of eligible international medical graduates to practice medicine in BC.

Program Highlights:

- Supported Provincial Steering Committee for BC-PIP, in partnership with UBC CPD
- 135 participants attended the BC-PIP orientation conference this year. The breakdown of participants includes: Specialists – 47%; Family Physicians – 53%; Rural – 25%; Urban – 75%
- 113 participants accessed the program in 2018/19
- SCC committed to funding BC-PIP for an additional three years

FINANCIAL SUMMARY

WORK PLAN ACTIVITY REF. #	SCC KEY ACTIVITY & SUB ACTIVITY	2018/19		ACTUAL EXPENDITURES (PAID)			COMMITTED & FORECAST EXPENDITURES		TOTAL PROJECTION	% BUDGET SPENT
		TOTAL NEW FUNDING BUDGET	TOTAL ANNUAL BUDGET	YTD AS OF March 31, 2018	PREVIOUS PERIOD	\$ CHG. FROM PREVIOUS PERIOD	COMMITTED EXPENDITURES for FY 2019/20	PLANNED YEAR TO FISCAL		
1.0	Shared Care Committee Activities	\$ 160,000	\$ 160,000	\$ 129,072	\$ 113,815	\$ 15,257	\$ -	\$ 30,928	\$ 160,000	81%
2.0	Program Enabler Activities	\$ 1,793,165	\$ 1,793,165	\$ 1,353,308	\$ 1,163,051	\$ 190,257	\$ -	\$ 189,857	\$ 1,543,165	75%
2.1	Working Groups	\$ 205,000	\$ 205,000	\$ 58,292	\$ 21,263	\$ 37,029	\$ -	\$ (43,292)	\$ 15,000	28%
	MSPQI Working Group		\$ -	\$ 34,530	\$ 19,251	\$ 15,279		\$ (34,530)	\$ 10,000	
	Working Groups	\$ 205,000	\$ 205,000	\$ 23,762	\$ 2,012	\$ 21,750		\$ 181,238	\$ 5,000	12%
3.0	Collaborative Change	\$ 9,650,000	\$ 10,566,242	\$ 3,376,609	\$ 3,045,964	\$ 330,645	\$ 1,238,632	\$ 1,091,875	\$ 4,468,484	32%
	Partners - Transitions in Care (PiC/TiC)	\$ 4,000,000	\$ 4,916,242	\$ 2,679,248	\$ 2,444,102	\$ 235,146	\$ 782,803	\$ 839,236	\$ 3,518,484	54%
	Coordinated Complex Care	\$ 5,150,000	\$ 5,150,000	\$ 697,361	\$ 601,862	\$ 95,499	\$ 455,829	\$ 52,639	\$ 750,000	14%
	Surgical Services	\$ 500,000	\$ 500,000	\$ -	\$ -	\$ -		\$ 200,000	\$ 200,000	0%
4.0	Spread Successful Work	\$ 5,650,000	\$ 5,758,400	\$ 1,862,181	\$ 1,490,873	\$ 216,962	\$ 758,472	\$ 887,819	\$ 2,750,000	32%
	Polypharmacy Risk Reduction	\$ 400,000	\$ 508,400	\$ 225,900	\$ 187,108	\$ 38,792		\$ 24,100	\$ 250,000	44%
	Maternity Spread Network	\$ 700,000	\$ 700,000	\$ 521,476	\$ 354,600	\$ 166,876	\$ 407,832	\$ 78,524	\$ 600,000	74%
	Spread & Sustainability Learning Centre	\$ 1,000,000	\$ 1,000,000	\$ 365,325	\$ 354,031	\$ 11,294		\$ 134,675	\$ 500,000	37%
	Conference and Publication Funding	\$ 400,000	\$ 400,000	\$ 8,007	\$ 8,007	\$ -		\$ 41,993	\$ 50,000	2%
	Chronic Pain Spread Network	\$ 1,000,000	\$ 1,000,000	\$ 638,105	\$ 524,805	\$ 113,300	\$ 350,640	\$ 111,895	\$ 750,000	64%
	Palliative Care Spread Network	\$ 750,000	\$ 750,000	\$ 54,901	\$ 51,639	\$ 3,262		\$ 95,099	\$ 150,000	7%
	Adult Mental Health & Substance Use Network	\$ 1,000,000	\$ 1,000,000	\$ 48,467	\$ 10,683	\$ 37,784		\$ 351,533	\$ 400,000	5%
	Evaluation of Projects	\$ 400,000	\$ 400,000	\$ -	\$ -	\$ -		\$ 50,000	\$ 50,000	0%
5.0	Leadership & Sustainability	\$ 1,700,000	\$ 1,700,000	\$ 1,068,068	\$ 880,016	\$ 188,052	\$ 328,000	\$ 231,780	\$ 1,300,000	63%
	Teledermatology	\$ 200,000	\$ 200,000	\$ 255,111	\$ 205,063	\$ 50,048	\$ -	\$ (55,111)	\$ 200,000	128%
	RACE; eConsults	\$ 500,000	\$ 500,000	\$ 114,486	\$ 114,486	\$ -		\$ 85,514	\$ 200,000	23%
	Physician Leadership Training Scholarships	\$ 650,000	\$ 650,000	\$ 439,098	\$ 319,601	\$ 119,497	\$ -	\$ 110,902	\$ 550,000	68%
	CYMHSU Physician's Community of Practice	\$ 350,000	\$ 350,000	\$ 259,525	\$ 241,018	\$ 18,507	\$ 328,000	\$ 90,475	\$ 350,000	74%
	CYMH			\$ (152)	\$ (152)	\$ -				
6.0	JOINT COLLABORATIVE INITIATIVES*	\$ 3,166,873	\$ 3,166,873	\$ 3,139,102	\$ 2,382,142	\$ 756,960	\$ -	\$ (83,902)	\$ 3,055,200	99%
	Health System Redesign	\$ 2,400,000	\$ 2,400,000	\$ 2,319,836	\$ 2,194,836	\$ 125,000		\$ 2,400,000	\$ 2,400,000	97%
	Quality Forum / Showcase	\$ 450,000	\$ 450,000	\$ 544,512	\$ (55,918)	\$ 600,430		\$ (94,512)	\$ 450,000	121%
	BC Physician Integration Program	\$ 110,000	\$ 110,000	\$ 110,960	\$ 110,960	\$ -		\$ (960)	\$ 110,000	101%
7.0	GENERAL DEFERRED REVENUE ACCOUNT		\$ 2,203,909						\$ 12,446,853	
TOTAL - ALL INITIATIVES		\$22,325,038	\$ 23,554,680	\$ 10,986,632	\$ 9,097,124	\$ 1,735,162	\$ 2,325,104	\$ 2,305,065	\$ 13,291,849	57%
TOTAL - ALL INITIATIVES including Deferred		\$25,758,589								
*Shared Care Committee holds all funds for the JCC Initiatives										