



FACILITY ENGAGEMENT AT VERNON JUBILEE HOSPITAL ANNUAL REPORT 2017/18

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IMPROVING
HEALTH CARE
QUALITY
IMPROVEMENT

IMPROVING
PHYSICIAN
WORK
ENVIRONMENT

ENGAGING
INTERIOR
HEALTH

REPORT TO PHYSICIAN MEMBERS

March 31, 2018, marks the second year-end for our VJH Physician Society, which was **formed as part of the provincial Facility Engagement Initiative**. **Generous funding is available** for a wide variety of physician-driven initiatives to encourage participation in healthcare quality improvement, decision-making and otherwise unpaid physician workload. A not-for-profit Physician Society was formed, distinct from our Medical Staff Association, as a legal entity to manage and account for a significant budget, which follows guidelines established by the funding bodies.

Many Vernon physicians have successfully made claims for their time and expenses. You have seen our monthly newsletters summarizing the variety of quality VJH activities. Physicians are paid to attend the administrative meetings not required to maintain their hospital privileges. Within this report, we have highlighted these activities and I'm pleased the funding is being claimed by many deserving members of the medical staff. Given the size of our hospital, I'm continually impressed by the participation, motivation, and creativity of our doctors. You know them, they're physicians in your departments who always manage to find extra time to "engage" and contribute towards patient care beyond those efforts rewarded by MSP.

Formal feedback, after our annual review, from the Facility Engagement Initiative Review Committee, encouraged us to find more ways of engaging with Interior Health. Physician Activity Leads continue to reach out to Interior Health to engage them in the early stages of their project and to ensure that a primary contact person is responsible and participates in the development and outcome. There is a new Interior Health contact, Executive Medical Director- Physician Engagement and Resource Planning assigned specifically to ensure this model is successful.



It was identified through our annual evaluation that our budget was only partially spent last year. To receive our full funding, we need more projects, and to ensure that the existing projects spend the money currently allocated to them. A starting point is to have more **VJH physicians signed up for the Facility Engagement Management System (FEMS)** where claims are submitted.

I'm excited about a planned new website being designed by the VJH Physician Society. We realize that email is unpopular, but with this new website, we will have the potential to greatly improve communication and knowledge including opportunities for funding like CME, upcoming events, and activity progress. An increased awareness of collaboration with other Facility Engagement sites will help us to prioritize and collaborate on issues. Your suggestions regarding website functionality are welcome.

Operating a Society of this size and magnitude requires a fair bit of administrative support and I feel strongly that having this formal structure in place gives us more power to effect change in local healthcare delivery. I have heard promises that practicing physicians will have an increasing role in managing hospital business. If this appeals to you, please continue your involvement or become involved in this valuable endeavour.

Thank you to the VJH Physician Society Working Group and our Administrative support for their hard work, dedication, and leadership.

Yours sincerely,

Dr. Scott Ainslie

Dr. Scott Ainslie
President
Vernon Jubilee Hospital Physician Society

FISCALLY RESPONSIBLE

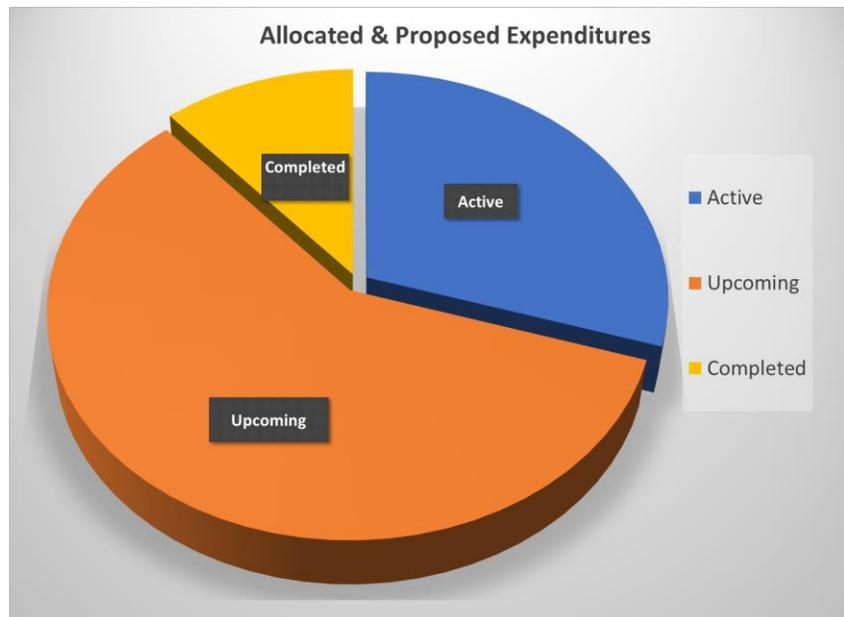
REPORT FROM THE SECRETARY TREASURER

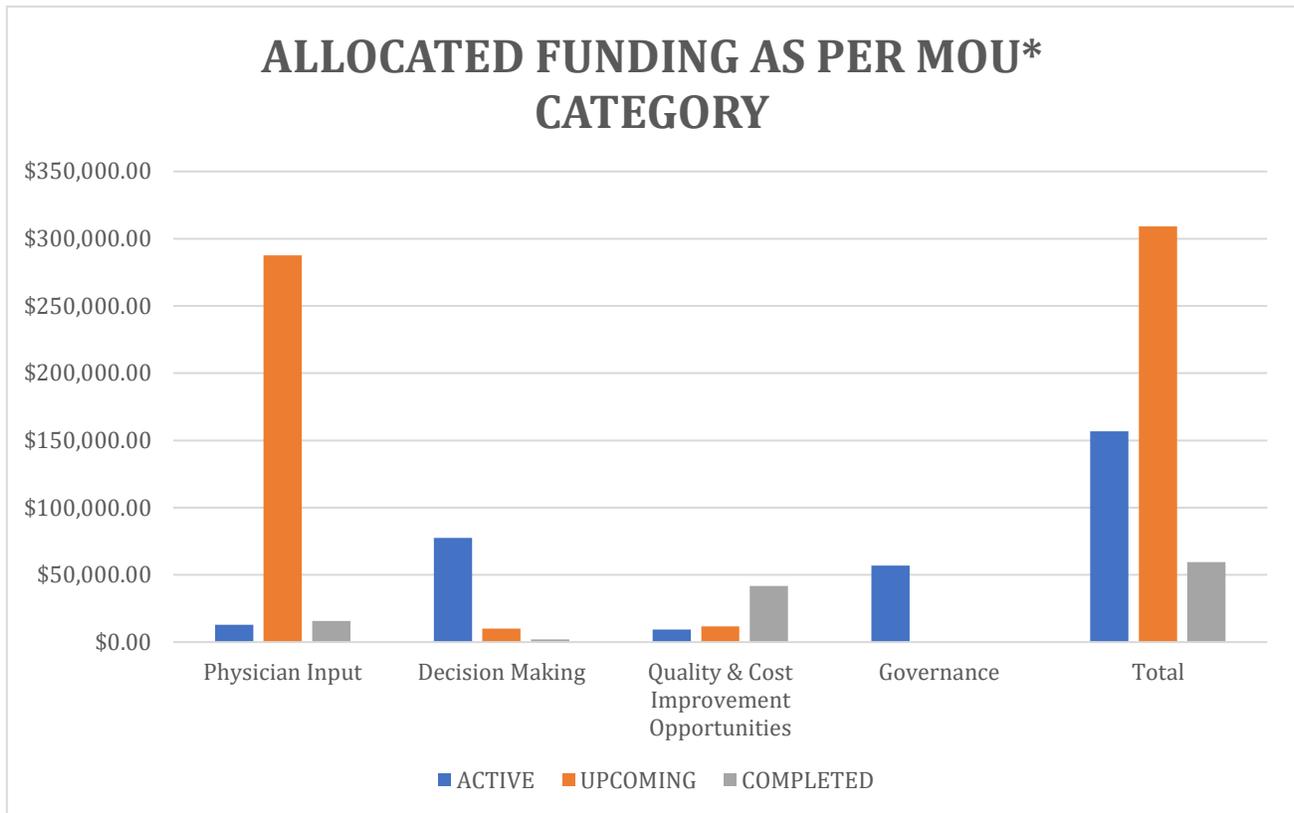
“Many hours of hard work on the part of the VJH Physician Society and the medical staff has seen a good return on the money invested for physician engagement. It is important to continue to work to engage with Interior Health to continue the momentum of the group's initiatives. I look forward to continuing to work with this group in the coming year.”

Dr. Michael Cooke,
Secretary/Treasurer

EXPENDITURES April 1 2017 to March 31, 2018

\$400,000
TOTAL AVAILABLE FUNDS PER YEAR





*Memorandum of Understanding 2014 Regional and Local Engagement. Retrieved from: <http://www2.gov.bc.ca/assets/gov/health/practitioner-pro/medical-services-plan/mou-2014-regional-and-localengagement.pdf>



YEAR ENDED MARCH 31, 2018

Budgeted Annual Dollars**Physician Input**

Departmental/Interdepartmental Enrichment Meetings	\$ 252,500.00
MSP Coverage	\$ 450.00
VJH Family Medicine Residency Program	\$ 5,100.00
CHF Readmission	\$ 625.00
Faculty Development Event	\$ 6,700.00
Purchase of Scheduling Software	\$ 8,900.00
Sessional time for Physicians approving claims	\$ 3,000.00
Family Physician Hospitalist Event	\$ 2,900.00
Hospitalist Surgeon Pay Reconciliation	\$ 1,100.00
IH Pediatrics	\$ 25,000.00
Improving Endoscopy Safety	\$ 10,000.00

Decision Making

MRI Task Force	\$ 2,100.00
Fine Wire Localization	\$ 10,000.00
M&M Catering	\$ 1,000.00
Perinatology Paediatrics Multidisciplinary	\$ 2,100.00
Reducing Redundant Lab Testing	\$ 1,400.00
Uncompensated Committee Work	\$ 38,000.00
VJH Physician Society Working Group	\$ 35,000.00

Quality & Cost Improvement Opportunity

Quality Access to Pulmonary Function	\$ 5,000.00
Clinical Research Event	\$ 9,300.00
Resuscitation & Simulations (SIMS)	\$ 3,100.00
Uncharted Missed Documents	\$ 1,200.00
ACLS, ATLS, & STRUC	\$ 29,050.00
OR Task Force	\$ 3,300.00
Measuring Growth of General Surgical Volumes	\$ 5,000.00
VJH Orthopaedic Surgery Central Intake	\$ 1,600.00
Departmental Continuing Medical Education (CME)	\$ 5,100.00
Governance	\$ 16,360.00
Physician Society Internal Operating Expenses	\$ 55,000.00



Benefits of Facility Engagement

What a few of your colleagues have to say...

"I joined the Facility Engagement Initiative a year ago, because I had ideas for improving physician involvement, collaboration, and participation, within and between physician groups, with the administration, and with other hospital professionals. Within a year, my ideas were implemented and being used by several departments for simulation training, and enrichment meetings. I don't think there would be as much, possibly any, participation if it were not for this initiative. Now, as I go about my clinical day, I am always wondering how processes and practices could be improved with help from the initiative."

Dr. Lia Harris
VJHPS Working Group
Women's & Children's Health Services

"This provides a process to be involved, to improve your clinical working environment, and improve care delivery for your patient. Projects have moved from conceptual plans to completion with enacted changes and improvements."

Dr. Chris Cunningham
VJHPS Working Group
Family Medicine

"We're bringing people together who haven't connected for a long time... communicating more often, looking at the needs of our patients, listening to different points of view. There's more trust."

Dr. Scott Ainslie
President
Vernon Jubilee Hospital Physician Society
Surgery

"We feel more respected in decisions and get more support for our ideas. We're making a difference for our patients. Our voices are being heard."

Dr. Kevin Wiseman
Vice President
Vernon Jubilee Hospital Physician Society
Surgery



90 +

Physicians and medical staff involved in activities

\$400,000

Physician Engagement funding in 2017/18

12

Facility Engagement Initiatives completed.



We're bringing people together who haven't connected for a long time... communicating more often, looking at the needs of our patients, listening to different points of view. There's more trust.

Physician voices

We feel more respected in decisions and get more support for our ideas. We're making a difference for our patients. Our voices are being heard.

27

Facility Engagement activities underway and being evaluated.

Our vision

VJH Physician Society is an agent of positive change and an effective partner within the B.C. Health Care System.



OUR PRIORITIES

- Identify physician engagement opportunities to ensure the views of the medical staff are effectively communicated.
- Prioritize issues affecting medical staff and patient care.
- Identify mutually agreed upon initiatives, with respect to matters directly affecting the medical staff and patients of the Vernon Jubilee Hospital.
- Have direct, meaningful interaction and communication with key stakeholders.



A YEAR IN REVIEW

MARCH 2017

- Reducing Redundant Lab Testing Initiative
- MRI Task Force Announcement – New MRI for VJH
- Optimizing OR Booking Slates Announcement
– increased % OR slates booked

APRIL 2017

- Uncompensated Committee Work Announced
– sessional reimbursement for physicians

MAY 2017

- Surgery Time of day – After hour surgery QI project data announced

JUNE 2017

- AGM – first annual meeting
- ATLS/ACLS/ STRUC – Tuition Reimbursement Announcement

FALL 2017

- MSP Announcement – plan to improve the processing of patients without MSP BC Insurance Coverage
- Perinatology & Paediatrics Multidisciplinary Team – addressing systematic clinical and operational issues that affect VJH Obstetrics, Neonatology and Paediatrics

JANUARY 2018

- Clinical Research Event
- Physician Quality Improvement Event

FEBRUARY 2018

- Family Practice Hospitalist Event
- Faculty Development Event
- VJH Family Medicine Residency Program Committee



VJH Physician Society Activities – Past & Present

Completed

- Optimize OR Booking Slates
- Emergency/Hospitalist/Surgeon Event
- MRI Task Force
- Perinatology Paediatrics Multidisciplinary Review
- Psychiatric Pod Area
- STRUC Training Reimbursement
- Surgery Time of Day Quality Improvement
- ATLS Reimbursement
- ACLS Reimbursement
- Clinical Research Event Jan 2018
- Faculty Development
- Family Physician Hospitalist Engagement Event

Underway

- CHF Re-admission
- Clinical Medical Education
- Departmental/Interdepartmental Enrichment Meetings
- Fine Wire Localization
- M&M Catering Reimbursement
- MRI Implementation & Planning
- MSP Coverage
- OR Task Force
- Purchasing Scheduling Software
- Quality-Access to Pulmonary Function Lab
- Reducing Redundant Lab Testing
- Resuscitation Simulations (SIMS) Training
- Uncharted/Missed Documents from VJH-Community MDs
- Uncompensated Committee Work
- VJH Family Medicine Residency Program

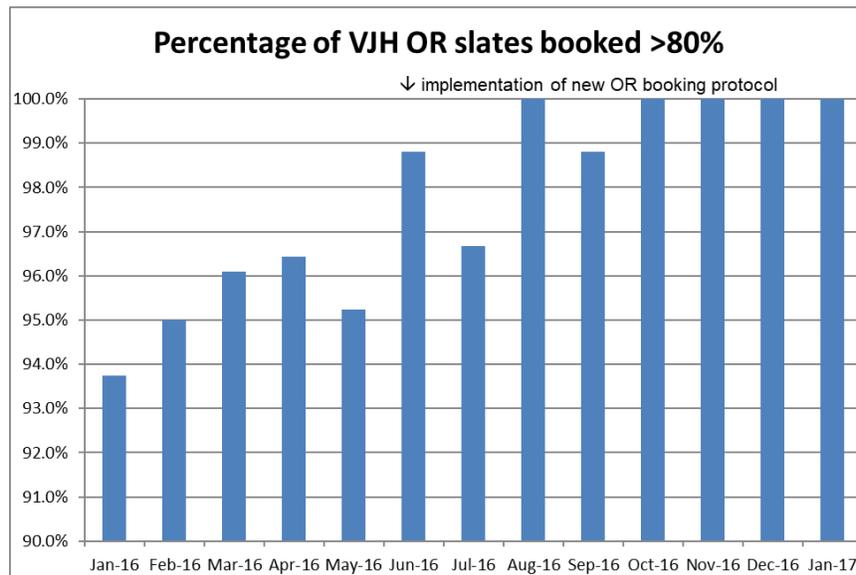
2017/2018 Activities

March 31, 2018, marked the end of another successful year for the VJH Physician Society. Twelve Facility Engagement Initiative Activities were completed, fifteen are underway and several new activities are being evaluated.



Optimizing OR Booking Slates

Implementation of new OR booking protocols was developed and utilization increased substantially.



Hospitalist, Surgeon & Emergency Physician Dinner

Vernon Jubilee Hospital Physician Society hosted a dinner event addressing how to improve relations between hospitalist, surgeons and emergency physicians. Three main objectives of the evening were addressed: encourage interaction in a social setting; address topics of frustration between the three groups; and work towards mutually acceptable solutions. An excellent cross-section of departments was represented at the event with a total of 31 physicians in attendance. Evaluation of the event indicated that 100% of the respondents agreed that the evening was of benefit and worthwhile with interest for similar events in the future covering topics like role clarity; MRP; communication; documentation; co-management; and transfer of care.

MRI Task Force

A new MRI was approved for Vernon Jubilee Hospital and scheduled to be operational in the first quarter of 2019. Ongoing consultation and expertise was provided by physicians during the construction, implementation & planning of the space.



MRI Implementation & Planning

The medical staff continues to stay engaged with the development of MRI. The VJH Physician Society continues its commitment to provide professional ongoing support to the VJH's Administration, as the extensive construction of the existing MRI space continues through 2018.

Perinatology Paediatrics Multidisciplinary Review

Physicians are now being funded through IH for this important work.

A multidisciplinary team was gathered to address systemic clinical and operational issues that affect physicians at Vernon Jubilee Hospital as they practice obstetrics, neonatology, and paediatrics. The team consists of an obstetrician, paediatrician, maternity GP, midwife, patient care coordinator RN, and unit manager. Based on predetermined indicators and PSLS events, each flagged chart is reviewed for the patient's entire length of stay, with each team member bringing his/her expertise to the committee to enhance delivery of care at the VJH. This collaborative forum is used as a platform to enhance relationships between all team members, enhance knowledge sharing according to best practices, and to streamline delivery of care in a patient-centered manner.

"The Vernon Jubilee Hospital Engagement Society was instrumental in supporting the VJH Women's & Children's Health Services to create the newly approved and funded Continuous Quality Improvement Committee." - Dr. Eiko Waida

The working group of the VJH Women's & Children's Health Services Continuous Quality Improvement Committee met for their first meeting of the fall session on September 19, 2017. Over the course of two hours, four perinatal cases were reviewed according to pre-determined indicators. The cases were analyzed by the local experts at the table involved in nursing, delivery of obstetrical care, and neonatology. Individual and systemic areas of improvement were identified, and recommendations were made. These were passed onto the Medical Director of VJH and the Maternal-Child Department. The working group is energized by the opportunity to improve patient care, job satisfaction, and team spirit with this work.



STRUC, ATLS & ACLS

Physicians are compensated for enhancing skills in these lifesaving procedures to ensure patient care at Vernon Jubilee Hospital is second to none.

Clinical Research Event

Four representatives from Interior Health (IH) presented to physicians who were interested in doing research.

Devin Harris, MD, MHSc, CCFP(EM), FCFP and Deanne (Dee) Taylor, MDCS, Ph.D., provided an overview on “Research in IH” and how research innovation is supported. Dorothy Herbert, BSc, MAppSoc spoke on “Navigating Interior Health Ethics” and Coleen Adderley, BHSc, LPN, shared information on ethics submissions, contract negotiations, source document creation, and running trials.



Faculty Development

Physicians who were interested in becoming involved for the first time or enhancing their role as a Medical Educator attended an evening event to learn more about coaching & self-reflection/new ideas for teaching and learner-centered teaching/questioning techniques.



For some physicians, teaching and mentoring a medical learner can be many things at once: intimidating, validating, fun, time-consuming, and professionally satisfying. The physicians at the VJH and community welcomed many medical learners with a wide range of clinical experience from UBC and beyond. Physicians interested in learning more about enhancing their role as a Medical Educator or in taking the plunge and becoming a first-time Medical Educator attended a complimentary buffet dinner and

medical education event at the Prestige Inn, February 27, 2018. The evening was open to all medical staff sharing teaching tips applicable to all levels of medical learner and teacher, from Year 1 and 2 medical students to senior residents in all disciplines. Topics included Coaching, Observation, and Feedback, as well as time for Q & A with Dr. Beth Watt and Dr. Brenda Hardie. Two hours of sessional time was paid through the Facility Engagement Initiative sponsored by the VJH Physician Society.

Family Physician, Hospitalist Engagement Event



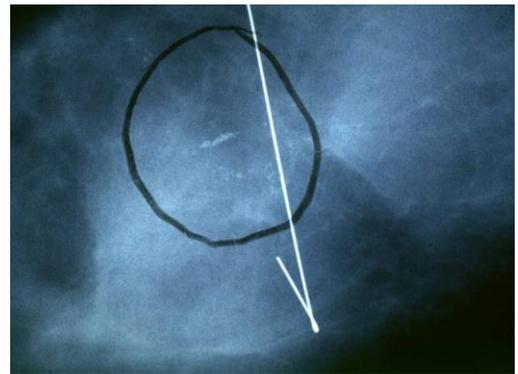
Family Physicians and Hospitalists met with a focus on patient care, transitions of care and areas of interest for all family physicians and hospitalists. The main objectives of the event were to encourage interaction and networking in a social setting, identify areas of frustration between the groups, and to work towards mutually acceptable solutions to the frustrations.

CHF Re-admission

Relatively high rates of hospital admission for CHF is often associated with increased lengths of stay which can put a burden on the ER, hospital wards, and patients. VJH Physician Society is looking at identifying patients that might benefit from closer outpatient heart failure monitoring to decrease morbidity and hospitalization and to see if an early referral to Internal Medicine might be helpful.

Fine Wire Localization

(FWL) procedures are an important surgical treatment modality for non-palpable breast lesions and require close communication between radiologists and general surgeons. Optimal outcomes require radiologists to have a good understanding of surgical methods to facilitate optimal placement of the wire, and surgeons benefit from an understanding of the radiologic technique and parameters. The proposed event focused on FWL attended by radiologists, general surgeons, and pathologists where technical aspects of the radiologic and surgical procedures will be discussed.



CME—Continuing Medical Education



Providing medical staff with an opportunity to enhance their continuing medical education is a priority for the VJH Physician Society. The Society supports funding course fees to a maximum of \$750 per physician per annum for education to improve VJH patient care. Funding excludes sessional time, travel, meals & alcohol.

Departmental/Interdepartmental Enrichment Meetings

This activity helps to build relationships within and between departments, for the purposes of planning, reviewing, prioritizing, and improving patient and family-centered care and physician work environment. Meetings include regular journal clubs, hosted within a department, or meetings between departments to improve collaborative patient care. As per the MOU signed by the Ministry of Health, Health Authorities and Doctors of BC, the Society cannot fund sessional hours for meetings that are required for hospital privileges.

Resuscitation Simulations (SIMS)



Mock resuscitation simulation training has been shown to improve knowledge, skills, collaboration, and teamwork in the emergency health-care setting. The Resuscitation Simulation Activity began in the fall of 2017, and already there have been 7 simulations conducted, with 49 participants. Simulations have been conducted in the emergency department, and on the labor and delivery ward, with interdisciplinary teams, including nurses, respiratory therapists, physicians, and midwives responding to the “mock codes”. Feedback from those who have participated has been positive, reporting improved teamwork with allied health professionals, and each other.

M & M Catering Reimbursement

Attending the M & M Rounds but having to pay for lunch? The VJH Physician Society reimburses physicians for M&M Committee catering expenses, but not sessional time, since attendance at M&M rounds is mandatory and therefore compensation for attending them cannot be submitted to the VJH Physician Society for reimbursement.



MSP Coverage

Frequently, patients present to the Emergency Room for acute care without the Medical Services Plan (MSP) BC insurance coverage. These patients may be suffering from life or limb-threatening disease or trauma, and urgent medical or surgical care must proceed. Mechanisms to identify these patients in a timely manner so that the physicians providing care may be compensated financially have occasionally been lacking.

A VJH Physician Society committee continues to help guide a plan to improve the processing of these patients, especially BC residents. Progress has been made in identifying out-of-province insured patients and having their policy number printed on the ID stickers found at the back of each patient chart, making it easier for billing practitioners to invoice the correct policy.

Further work needs to be done to identify BC residents without coverage on admission and flagging uninsured patients from out-of-country so that processes are engaged and all who are involved in acute care can be adequately compensated.

OR Task Force

VJH will have a 5th OR up and running sometime in June 2018. Thank you to the VJH Foundation for purchasing the equipment to outfit the space.

Permanent funding from the Ministry of Health has been promised, at the level of 3 days per week dedicated to decreasing long waiters—greater than 26 weeks. In its first year of operation VJH administration plan to allocate 2 days/week for hip & knee replacements and the 3rd day to ENT/dentistry. Efforts to organize the human resources needed are underway.



Reducing Redundant Lab Testing

At Vernon Jubilee Hospital a concern was brought forward about redundant laboratory testing. Unnecessary, repeated rounds of tests for admitted hospital patients appeared to be occurring and could potentially be preventable by modifying protocols.



The Vernon Jubilee Hospital Physician Society arranged for a small representative group of physicians to examine laboratory utilization and develop recurrent laboratory testing guidelines for inpatients (such as guidelines for daily CBC orders).

“Because of the changes, we hope patients will experience less anxiety and discomfort and avoid unnecessary tests, and that cost savings will be realized.”

Dr. Jason Doyle

They agreed on simple rules to govern, streamline and limit ordering of tests while patients are in the hospital, and worked with the health authority to make changes to ordering practices at the unit clerk level. Through their Facility Engagement work, physicians had the opportunity to collaborate with the site and staff to implement the new guidelines.

Purchase of Scheduling Software

The Hospitalist Department scheduling has multiple levels of complexity due to the nature of the Hospitalist Program design at VJH. Dr. Kira McClellan brought this issue forward to the VJH Physician Society Working Group to help facilitate scheduling for departments requiring multiple and/or complex scheduling templates. Approval for purchasing software was granted with the caveat that all departments within VJH would have access to the software if required.

Quality-Access to Pulmonary Function Lab

Currently patients are triaged by the ward clerk on a first come first served basis. This has led to delays in access to either surgical or specialist involvement in patient care and management. Dr. Yacyshyn will be reviewing lengths of time for access to PFTs and developing an effective physician triage system.

The outcome of this work will improve the quality of patient care and management and access to care. More urgent cases can be triaged accordingly. Also, many patients have full PFTs ordered, but spirometry may be adequate.

Uncharted/Missed Documents from VJH to Community MDs

Research is being conducted to determine if electronic and paper format documents (Labs, X-rays, Reports) from VJH are being lost or sent in error to community MDs or in some cases to the wrong MDs, and/or wrong locations. Dr. Chris Cunningham is reviewing to see if and where problems lie and to fix logistical errors and correct processes. This affects facility and community MDs.

VJH Family Medicine Residency Program

More planning will be taking place in the next fiscal year to determine the feasibility of setting up a Family Medicine Residency Program at VJH. Some residents are already set up to come to VJH and community practices through parts of 2018 for electives and it is hoped that a formal program may be able to be hosted at VJH in the future.

“Work is well underway with a large group of medical staff working together to explore the feasibility of having UBC Family Medicine Residents at VJH. A medical staff survey has been completed, communications have occurred with the UBC Program Director and the various regional site directors.” - Dr. Chris Cunningham



Uncompensated Committee Work



Physicians spend hundreds of hours working on committees, outside of their clinical and hospital hours, providing invaluable expertise and counsel to IH. VJH Physician Society recognizes this valuable contribution and reimburses physicians for their sessional time attending meetings that aren't required to maintain their hospital privileges.

Reimbursement cannot be provided for attending required Medical Staff Association (GMS) meetings, Medical Advisory Committee (MAC), M & M Round meetings or any meeting where a physician is already being compensated (Department Heads attending meetings where she/he is already compensated via IH as part of their Department Head roles/responsibilities).

An annual budget of \$90,000 was set aside to reimburse physicians for unpaid committee work. There are 26 committees eligible for reimbursement and 30 physicians are submitting claims on a regular basis.



Do you have an idea that creates better opportunities for physicians and health authority leaders to work together to share knowledge and make informed decisions that can improve patient care, the physician experience, and the cost-effectiveness of the health care system?

Do you have an idea that opens opportunities and support for physicians who work at facilities and are members of the medical staff to have a meaningful voice, and increased involvement in local activities that affect their work and patient care?

Submit your Idea and be heard!

Email: vjhphysiciansociety@gmail.com



2018/2019 PRIORITIES AT A GLANCE

- CHF Readmission
- Fine Wire Localization
- CME – Continuing Medical Education
- Departmental/Interdepartmental Enrichment Meetings
- Resuscitation Simulations (SIMS)
- M & M Catering Reimbursement
- MRI Implementation & Planning
- MSP Coverage
- Measuring growth of general surgical volumes over ten years compared to population growth
- Reducing Redundant Lab Testing
- Quality Access to Pulmonary Function Lab
- Uncharted Missed Documents from VJH to Community MD
- Uncompensated Committee Work
- Vernon Jubilee Hospital Orthopaedic Surgery Central Intake



VJHPS Executive

Dr. Scott Ainslie, **President**

Dr. Kevin Wiseman, **Vice President**

Dr. Michael Cooke, **Secretary/Treasurer**

Working Group

Anesthesia

Dr. Kevin Smith

Diagnostic Imaging

Dr. Adam Weathermon

Emergency Medicine

Dr. Peter King

Family Medicine

Dr. Chris Cunningham

Dr. Robert Hillis

Hospitalist Medicine

Dr. Kira McClellan

Laboratory Medicine

Dr. Jason Doyle

Internal Medicine

Dr. Glenn Vaz

Psychiatry

Dr. Russ Williams

Surgery

Dr. Scott Ainslie

Dr. Kevin Wiseman

Women's & Children's Health Services

Dr. Michael Cooke

Dr. Lia Harris

VJHPS Project Manager

Anna Flasch

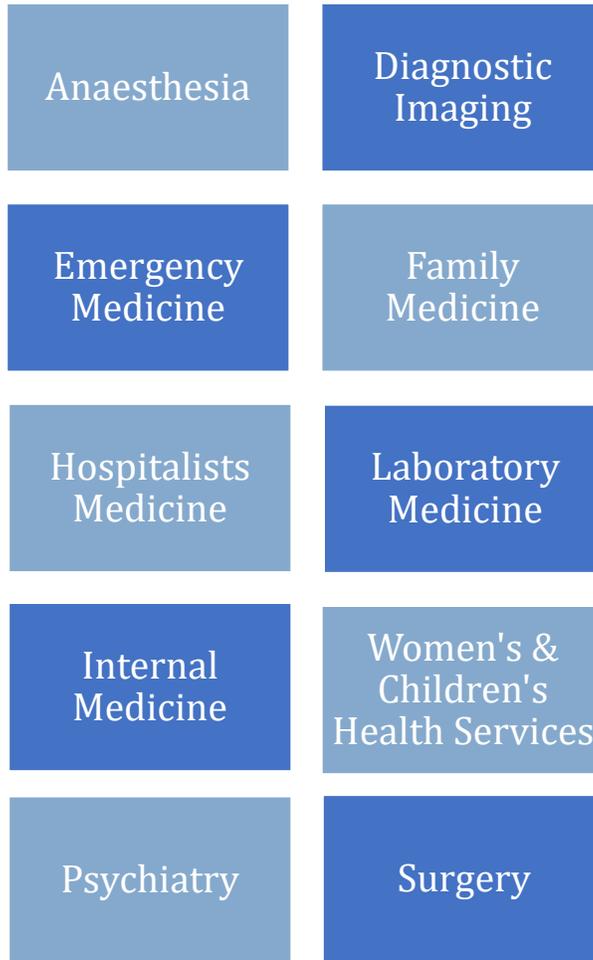
SSC FEI Liaison

Amanda Harris

Engagement Physician Liaison IH

Dr. John Falconer

WORKING GROUP REPRESENTATION



The Working Group meet on a **regular basis** to address issues that affect their departments, identify opportunities for physicians and health authority leaders to work together on issues, with the intent of improving patient care, the physician experience, and the cost effectiveness of the healthcare system.

Once initiatives are identified, the Working Group prioritizes the initiatives, allocates funding, assigns a physician to lead the initiative, and reports back to the Working Group on a regular basis with successes, challenges, and status. Physician Leads can also approach the Working Group for solution-based consultation and seek colleague advice to overcome obstacles and ensure the activity is moving forward in a timely and positive manner.

Please e-mail with any questions or comments: vjhphysiciansociety@gmail.com



VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Financial Statements

March 31, 2018

(Unaudited - See Notice To Reader)

**CLARK
ROBINSON**



VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Index to Financial Statements

Year Ended March 31, 2018

(Unaudited - See Notice To Reader)

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**CLARK
ROBINSON**



J. ARTHUR CLARK, CPA, CGA*
ARNE C. ANDERSON, CPA, CGA*
CATHERINE CLARK, CPA, CGA
MARIANNE GRANT, CPA, CGA*
TATIANA JAKAB, CPA, CGA*
KYLE R. BRITTON, CPA, CGA*

JACK W. ROBINSON, C.G.A. (d), 1991
**Denotes Professional Corporation*

NOTICE TO READER

On the basis of information provided by management, we have compiled the statement of financial position of Vernon Jubilee Hospital Physician Society as at March 31, 2018 and the statements of operations and cash flow for the year then ended.

We have not performed an audit or a review engagement in respect of these financial statements and, accordingly, we express no assurance thereon.

Readers are cautioned that these statements may not be appropriate for their purposes.

Clark, Robinson
Chartered Professional Accountants

Vernon, British Columbia
June 26, 2018



VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Statement of Financial Position

March 31, 2018

(Unaudited - See Notice To Reader)

	2018	2017
ASSETS		
CURRENT		
Cash	\$ 503,923	\$ 84,278
Term deposits	10,000	200,000
Accounts receivable from Doctors of BC	-	66,352
Sales tax receivable	1,915	293
	<u>\$ 515,838</u>	<u>\$ 350,923</u>
LIABILITIES		
CURRENT		
Accounts payable	\$ 28,958	\$ 16,722
Deferred income <i>(Note 2)</i>	486,880	334,201
	<u>\$ 515,838</u>	<u>\$ 350,923</u>

**CLARK
ROBINSON**

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VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Statement of Operations

Year Ended March 31, 2018

(Unaudited - See Notice To Reader)

	2018	2017
DOCTORS OF BC FUNDING <i>(Note 2)</i>	\$ 248,369	\$ 140,799
ADMINISTRATIVE EXPENSES		
Administrative fees	1,779	-
Event expense	18,956	1,517
Internal Operating Expenses <i>(Schedule 1)</i>	65,915	41,608
Meals	6,257	6,463
Meetings and conventions	26,575	-
Member Time	106,338	90,586
Miscellaneous	7,869	625
Salaries & wages	14,614	-
Travel	66	-
	248,369	140,799
EXCESS OF FUNDING OVER EXPENSES	\$ -	\$ -

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ROBINSON**

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VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Statement of Cash Flow

Year Ended March 31, 2018

(Unaudited - See Notice To Reader)

	2018	2017
OPERATING ACTIVITIES		
Receipts from funding	\$ 467,400	\$ 408,648
Paid to suppliers	(235,671)	(124,077)
Bank fees	(462)	-
Sales tax	(1,622)	(293)
Cash flow from operating activities	<u>229,645</u>	<u>284,278</u>
INVESTING ACTIVITY		
Term deposits	<u>190,000</u>	<u>(200,000)</u>
INCREASE IN CASH FLOW	419,645	84,278
Cash - beginning of year	<u>84,278</u>	<u>-</u>
CASH - END OF YEAR	\$ 503,923	\$ 84,278

**CLARK
ROBINSON**



VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Notes to Financial Statements

Year Ended March 31, 2018

(Unaudited - See Notice To Reader)

1. ORGANIZATION AND PURPOSE

The Society is registered under the Society Act of the Province of British Columbia and its main purpose is to give the medical staff a meaningful voice in improving patient care and the working environment, provide an opportunity to re-establish the physician voice and improve relationships with Health Authorities and indentify and work on issues that directly affect physicians and the medical staff as a whole. The Society is non-profit and is not subject to income taxes.

2. DEFERRED FUNDING

Funds are allocated annually by Doctors of BC. Any funds that are not expended are recorded as deferred.

**CLARK
ROBINSON**

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VERNON JUBILEE HOSPITAL PHYSICIAN SOCIETY

Internal Operating Expenses

(Schedule 1)

Year Ended March 31, 2018

	2018	2017
EXPENSES		
Office	\$ 3,830	\$ 2,831
Interest & Bank Charges	463	16
Wages	249	-
Professional Fees	12,041	2,800
Meals	366	-
Insurance	1,795	1,795
Subcontract	47,171	34,166
	<u>\$ 65,915</u>	<u>\$ 41,608</u>

**CLARK
ROBINSON**