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VJHPS President's Update

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VJH Physician Society President's Update

The tulips and daffodils are up (and nearly over) and I've planted my annuals and herbs. I thought therefore (if anyone can find a logical link I'd be interested) an update from the FE side of things might be helpful as we trudge on in uncharted territory.

COVID-related activity funding

Our working group has put a lot of time, discussion, and thought into how we would approach the landslide of claims we have received for COVID-related activities. We have examined what neighbouring sites are doing. We have looked at how our own site might differ acknowledging our size and ability to engage large portions of our medical staff. We have reviewed activity budgets that haven't been tapped in a while, counted pennies, and had much back and forth on what most of us feel will be the single biggest engagement activity of our lifetimes. What other activity would ever see so many physicians dedicated to one cause and working so passionately with other leaders to make our site safe, capable, and ready for what was anticipated? This project in itself has transformed physician engagement and will forever change how we work together.

While we recognize that we have limited funds with which to work and that it would be

unfortunately impossible to remunerate every hour spent from every individual ourselves (your FE Physician Society), due to the consensus on magnitude, importance, and engagement, in the end we have dedicated what we consider a very sizeable budget to COVID.

As of April 25th, we have approved a total of \$88,000 claims for COVID-related activities to date, and ear-marked another \$40,000 going forward. These fall heavily on the departments of Anesthesia, Emergency Medicine, and Pediatrics and Ob/Gyn, although claims have been put forth from virtually all departments. For perspective, KGH has approved a budget of \$65,000 and RIH \$60,000.

We anticipate much work going forward as we try to adapt to what comes our way. There is still much planning to do as we try to attend to our patients waiting for procedures, surgeries, and investigations that have been put on hold.

Non-COVID-related activity funding

We have had to pool money from our 4 activities most tapped for COVID (Uncompensated Committee Work, Departmental/Interdepartmental Enrichment Meetings, SIMS, and Allied Health Education). The trade-off is that this has left these budgets significantly depleted for work that is not COVID-related, for this year.

We will re-evaluate the budget throughout the year and do our best to continue to support non-COVID activities as well, but please have patience with us as we try to work within our means. Any stone throwing, name calling, or silent treatment may get you ceremoniously uninvited from any very special events we plan down the road. Alternatively, you may still be invited, but you will get the first dance to a song chosen for you by your peers.

Changes to existing activities

SIMS - we have re-instated limits on SIMS. The Lead physician may bill 1 hour, attending physicians may bill 0.25 hours per SIM.

Physicians in Leadership roles - what is not available

We have received direction this week from Doctors of BC that we are unable to use FE money for any COVID-related activity by any physician that holds a leadership position (department heads, chiefs of staff, and those in "informal" leadership roles as well). This would include activities such as meetings, preparation planning, and SIMS.

This direction was not received by our working group with open hearts nor with reciprocal gifts of geraniums and kittens. More accurately, it has left us feeling like we are up against a wall.



The information we have right now indicates that DofBC is working with the Ministry of Health and the Health Authorities to develop "alternate funding sources" for those in leadership positions.

Your FE working group at this point has ear-marked a portion of our budget (up to \$30,000 above and beyond that mentioned above) for compensating our physician leaders for COVID-related activities, should these alternate funding sources not come through, provided the funding guidelines allow (which they currently don't).

The ask would be for DofBC to rethink their direction should alternate funding not become available.

Physicians in Leadership roles - what is available

Our Health Authority has put forward up to 100 hours of sessional funding for these physician leaders for COVID-related work done above and beyond your contracted hours. As of this week, we are the only health authority in the province that has offered this funding. There are 155 physicians eligible which, if maxed, would be \$1.5 million in funding. Apparently about half of eligible physicians have claimed against this, as of this week.

Dates applicable: March 6th - April 30th

Billable through: PIP. If these hours haven't been added to your PIP, email physcontracts@interiorhealth.ca and they can add it.

Deadline: there is one - I'm not certain of date.

Other miscellaneous items

CCCs

- the province is trying to develop "CCCs" which stands for Covid Cohort Centres. These will be hotel rooms, paid for by the province/HA to house high risk patients who are COVID +, not yet requiring hospitalization, who live in smaller towns a certain distance away from tertiary care. The idea is to provide these patients a place to stay that is close to tertiary care for 14 days, should they require urgent higher-level care.

COVID peak in BC

- was April 3rd
- a downward trend has been seen since then
- modelling announcement/prediction apparently to be given Friday May 1st by Dr. Bonnie Henry

Testing

- has been expanded, as of last week, to all comers with any respiratory symptoms
- self referral or physician referral ok
- UPCC is still primary testing site
- primary care offices can also test



I think that's it for now. Sorry not so whimsical this time around, but I will include some pics of some of my early annuals in lieu thereof.

Kira

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