

The Current State of the Family Practice Renewal Program

Objective

To report the structure, governance, and programs of the Family Practice Renewal Program (FPRP) in NL.

Practice Points

1. FPRP started in 2016 to transform family practice for better health. It envisioned family physicians (FPs), primary health care providers, and patients working together for an effective and sustainable system.
2. An initiative of the Newfoundland and Labrador Medical Association (NLMA) and the Department of Health and Community Services (DHCS), the FPRP comprises a FPR governing committee, a clinical advisory group, and four FP networks with boards.

Data

These were obtained from the FPRP 2020/21 annual report.

Results

Table 1. Four Family Practice Networks

Name	Region	N Members	Board Chair
Shalloway	Central NL	92	Jared Butler
Long Range	Western NL	74	Amy Pieroway
Endeavor	St. John's Metro	176	Annette McCarthy
RE-Boot	Rural Eastern NL	77	Jackie Elliott

Table 2. FPR Governing Committee

Organization	Number of Representatives
Department of Health and Community Services	3
NL Medical Association	5
Regional Health Authorities	4
NL College of Family Physicians	1
MUN Family Practice	1
NL Centre for Health Information	1

Table 3. Programs of the FPRP

Name	Numbers	Objective
Collaborative Service Committees	4	To build collaborative relationships between FPs and RHAs
My Q	48 FPs 25 staff	To create a culture of quality improvement in family practice
Frailty Education	300 FPs	To increase clinical knowledge, pragmatic relevance to practice, and improve care of older adults
MyPractice	Launched	To provide FPs with training and supports related to managing their practices
Virtual Care Training	45 FPs 36 staff	To implement new virtual care processes during COVID-19
Fee Code	250 FPs	Registrants were fee-for-service FPs
Technology Support	Launched	To assist FPs in adoption of technology for better functionality in their clinics

Conclusions

1. The majority of FPs in the province are members of the FPRP, including nearly all those in Western and Central NL.
2. Programs available to members include several of relevance to Health Accord NL, such as development of teams, collaboration with the RHAs, management of the frail elderly, quality improvement, virtual care, and use of information technology.