Healthcare that works for everyone!



With over 700,000 British Columbians still without access to a family doctor and nearly 40 per cent of current family doctors set to retire or reduce clinical hours within five years, family doctors are being pushed to the brink in a system that doesn't support them or their patients.

BC Family Doctors and the BC College of Family Physicians are asking provincial election candidates to hear family doctors and act decisively to drive meaningful change.

The challenges facing family doctors are urgent and complex. Here are three solutions to transform primary care for British Columbians.

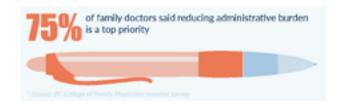


Family doctors spend up to 30 per cent (19 hours per week) of their time on administrative tasks like writing sick notes that detract from caring for patients.

We can streamline processes to free up physicians time for patient care. An estimated 261,000 hours (about 1 million patient appointments) could be saved each year by eliminating requirements for family doctors to write sick notes alone!

WE'RE ASKING FOR

- 1. Legislation to eliminate employer sick note requests for short illnesses.
- 2. Improvements to the Special Authority Pharmacare process and removing responsibility for Special Authority forms from family doctors.
- 3. A coordinated approach to adopting and funding EMRs (electronic medical records).









Family doctors need to be able to take care of themselves and their families, as well as their patients. Unlike other healthcare workers, family doctors are long-term contractors and **85 per cent say they lack funded health and dental benefits**.

The BC government could provide funding for a comprehensive health and dental benefits package for doctors, as they do for midwives. Nova Scotia funds 65 per cent of all premiums for physician's health and dental coverage for physicians through Doctors Nova Scotia (like Doctors of BC).

WE'RE ASKING FOR

- 1. Access to basic employment standards and benefits like other healthcare workers, including extended health and dental benefits, and paid sick time.
- 2. A seat at decision-making tables to create opportunities for family doctors' voices to be heard and to contribute to healthcare policies.



The rising costs of business and inadequate support for family medicine clinics is overwhelming. Financial stability is critical for family doctors who operate small businesses without the safety nets of other healthcare professionals.

Investment in long-term funding models that allow family practice clinics to grow and thrive will build a sustainable primary care system.

WE'RE ASKING FOR

- Funding and support for team-based care in family medicine clinics, enabling better patient access to care through the addition of nursing and allied care providers.
- 2. Funding for the business costs of community-based family medicine clinics (staffing, medical supplies, equipment and information technology).

