



As a step to further integrate Nurse Practitioners into the province's team-based primary health care system, the Regional Leadership Program is a collaborative initiative between Nurses and Nurse Practitioners of BC (NNPBC) and the Ministry of Health (MoH) to develop and deliver a leadership program, which includes an NP leader for each of the five regions across the province, including the Fraser, Interior, Island, Vancouver, and Northern regions. This includes an NP Regional Leader who can provide clinical and professional coaching, mentoring and leadership to contracted NPs working on Primary Care service contracts. The NP Regional Leads will also act as liaisons with regional Primary Care Network (PCNs) partners to assist with NP role clarity to support successful integration of NPs into local PCNs.

This tool was developed by the NNPBC Regional Leadership program for all parties considering a PCN contract and to help guide decision making at the PCN level.



### Patient Medical Home Checklist for NP Integration

#### Initial considerations

- Clinic meets the criteria for a [patient medical home](#) and understands [team-based care](#). Is there another PCN NP on site or plans for same?
- Clinic has a good understanding of the NP role and NP Scope of Practice
  - Clinic has an understanding of NP PCN contracts, including need for balanced panel and NP attachment targets. NP is being recruited for full scope longitudinal family practice.
- Clinic is aware that [NNPBC Regional Leader is available for PCN role development and implementation support](#). There is a plan in place for mentorship and integration into the clinic.
- Outlined plan to meet attachment targets (provide NP with balanced panel)
  - Alignment with local PCN service plan
  - Clinic has an NP candidate in mind or NP recruitment plan in place
  - NP has been connected to the NNPBC PIP program
  - Plans are in place for NP time away. Clinic and NP have discussed and agreed upon plan for after hours calls.

#### Recruitment and Contracting

A [Practice Level Agreement](#) (PLA) is negotiated between the PMH and the contracted NP. The PLA covers overhead, call & coverage, and other operational logistics. A sample practice level agreement can be sought from the health authority contracts department.

Important considerations for successful NP integration include:

- Clinic has a physical space for the NP to work. Both face to face and virtually.



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Last revised March 2024

- Clinic has MOA support for the NP (1:1)
- Clinic has admin support for NP specific encounter, patient, and attachment reporting
- Clinic and NP have agreed how the overhead will flow to the clinic and what is covered under the overhead arrangement. Overhead meets clinic and NP expectations.
- The NP has access to the clinic EMR and other technologies (ie. CareConnect, Pharmanet) that facilitate safe and efficient care and documentation
- Resources for NPs considering a contract can be found [here](#)
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### Implementation

- Clinic has accessed resources to facilitate change management in support of NP onboarding and team-based care. For example, PCN Manager consultation, [UBC CPD Team-Based Care online education](#), FPSC Team-based care PSP QI facilitation.
- Communication has been made to other clinic primary care providers and patients
- NP is connected to NNPBC Regional Lead for ongoing practice support (CPD & QI funds, coaching and mentorship, etc).
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