

PROJECT CHARTER

Version:	2.0
Date:	2019/07/31

1. SUMMARY

Project Name:	Virtual Primary Care clinic at the Tignish Health Center
Executive Sponsor:	Arlene Gallant-Bernard and Dr. Andre Celliers
Lead:	Christina Phillips & Lauren Kelly
Subject Matter Expert Advisor to Lead:	Paul Young
Project Supports:	Medical director (PCH/West), , E-Health, communications PEI, health information unit, strategy and performance, nursing; human resources, legal
Date:	July 31st, 2019

2. SCOPE

Briefly define the scope of the project.

Dr. Declan Fox, who will be retiring from his extensive practice of 2300 patients at the Tignish Health Centre (THC) in September 2019 has expressed an interest and offer to support some access to the THC virtually from Ireland. The implementation of a virtual primary care program at the THC is currently the only definitive option to provide some level of primary care access for Dr Fox's panel of patients. The Tignish Health Center (THC) board and management are supportive of Declan's offer to provide virtual primary care services approximately 1 day/week following his retirement (to start). They have discussed this option with Paul Young and Christina Phillips and would like them to help them with this piece of work given their experience with virtual care and primary care in the region.

This program could be effective by October 1st and would allow for some access to services as a short term strategy to mitigate the vacancy in the physician complement. The infrastructure and equipment required to offer virtual care through this model would be minimal and the technology is also available and has been vetted through a PIA and IT assessment as a result of the Telerounding project at WH for a defined licensing fee.

Physician remuneration would be as per the Master Agreement and has no minimum guarantee. MSPEI would likely be very supportive of this model, but would require early consultation. Recruitment of a permanent physician to take over the practice at the THC will continue and in the interim, recruitment of locum physicians or casual NPs to provide onsite primary care services at the THC will also continue.

Maple Inc. has a virtual care platform that has the level of encryption required and meets all provincial and Federal privacy issues. The THC currently has an EMR (Oscar) which would be the method of charting (which can be done between staff at the THC and Dr. Fox in Ireland). Their ability to e-prescribe within their platform which can be sent directly to any local pharmacy, well as on site hospital pharmacies as needed would be an asset. These considerations make their platform the ideal choice for this model.

Given the immediacy of coverage issues at the Tignish Health Centre, it is prudent that Health PEI consider supporting this option of exploring this innovative approach to primary care access as a short term solution.

3. SCHEDULE

<i>Major activities:</i>	<i>Target Dates:</i>
Executive support	July 2019
Consultation with MSPEI, Medical staff, Gov't	July, 2019
Review legal, contractual, legislative and privacy components	July, 2019

Develop the operational process mapping (process, appropriate client algorithms..etc)	August 2019
Scope infrastructure, IT, equipment needs	August 2019
Beta test processes, equipment...etc	Sept, 2019
Go live	Oct 1 st 2019

4. BUDGET

Item:	Cost (\$)
Physician remuneration – FFS (as per the Master Agreement), estimate only	\$5000/mth
Onboarding/set up	\$2,000 (one time)
Licensing/Service Fee: 12 month (max 200 pts/mth)	No cost

5. BENEFITS

List the expected benefits from completing this work:
1. Stability of access to primary care at the Tignish Health Centre
2. Some access to primary care services for the Community of Tignish
3. Unnecessary ED visits avoided as a result of access
4. Decreased anxiety for the Tignish population

6. AUTHORIZATION

Approved by CEO: <i>Denise Lewis Fleming</i>	Date: <i>July 31/2019</i>
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