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Association of Registered Nurses of British Columbia  
British Columbia Nurse Practitioners Association  
Licenced Practical Nurses Association of B.C.

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## Nursing Associations Recommend Changes to Primary Care

VANCOUVER—The Associations that represent B.C. nurses have joined together to express their disappointment over Government's new plan to improve access to primary care exclusively through the use of financial incentives to physicians. The *GP For Me* program focusses narrowly on physician services and does not take into consideration the important contributions that many other healthcare professionals make to high quality primary care delivery.

Concerned by this physician-centric planning, the Association of Registered Nurses of BC (ARNBC), the Licenced Practical Nurses Association of B.C. (LPNABC) and the B.C. Nurse Practitioner Association (BCNPA) have joined together to recommend Government consult with all health professions who provide publicly funded primary care services in B.C.

"Of course we applaud Government's interest in improving our primary care system," said Susan Duncan, ARNBC President. "But once again, we're disappointed to learn that Government has focused only on physicians, and not recognized that primary care is more than just 'medical care'."

Government and the BC Medical Association recently announced *A GP For Me*. Set to launch on April 1, 2013, the partnership will reward physicians and physician groups for consulting with patients by telephone; taking on more patients with complex conditions; and working collaboratively with health authorities to support better local access to primary care.

B.C.'s three Nursing Associations are asking Government to strike an interprofessional advisory board on Primary Care, which would advise the Minister on collaborative ways to create a cost effective, high quality, community-based approach to primary care.

"Government would get better results if they consulted more than one Professional Association when making decisions about how to improve healthcare," said Rosemary Graham, BCNPA President. "For example, paying an incentive to physicians to do what nurse practitioners already do as part of their routine care is unnecessarily costly and doesn't promote collaboration with other services and professions."

The Nursing Associations are recommending that Government also include occupational and physiotherapy, dental, dental hygiene, psychology, social work and addictions specialists, as well as public health representatives on the new advisory board.

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