

The Clinique Médicale Nepisiguit is a private solution for a public problem. Since we are partners with the Vitalité Health Network, but this not our fund provider, most of our developments came from our own private investments. Much of the leadership and management needed as been provided by myself, surrounded with professionals that I employ. I know the impact on my practice time can sometimes be important but the satisfaction I get from getting the clinic organized and making it a wonderful place to work for my colleagues is a big retention and recruitment advantage. Over the years we did recruit about 45 professionals to work at the clinic. Some have left the region, some have changed offices for different reasons but most of the core has remained. We now have 21 physicians on staff and 9 nurses. There is also a diabetes nurse navigator, a dietician, 2 RTs, one foot care clinic LPN, one pediatric LPN and also a lab technologist for the phlebotomy clinic.

Most, if not all the professionals we recruit follow a development plan that has been in continuous review to accommodate the patients' needs in the region. For instance, we would recruit a specialist within our team if it suits our needs and if it can be integrated with the care others provide. We really try to make an effort in integration and to make sure that the cost of the development is not too high while it is going to provide a lot of profit for the community, meaning that it will benefit most of the people we serve and improve the access.

Every clinic has to tailor its needs and every population is different. There is no special recipe to achieve a goal. Most people will like to know that destiny is also part of the equation. I used to say that when we are at the bottom of the mountain we can always wait for gold nuggets to go down the stream to catch them. Believe me, when we see a gold nugget passing by, we put the nets in the river to ensure it will not go further.

Working in a small region has its challenges. It is very rewarding to see our community change and people feel reassured that they have as good or better care than anywhere in the country. We receive lots of compliments and a lot of rewarding social interactions with our patients that are happy about the results and are encouraging us to keep doing what we do because they know that it is for a good reason, for patient-centered care.

As fee-for-service physicians we reinvest some of the monies we receive from the government by the New Brunswick Medicare in hiring professionals ourselves. Most of the LPNs and the nurses are hired this way through the doctors' corporations. Other professionals like the dietician, diabetes nurse navigator, RT, phlebotomist are hired through the government network and are working side by side with us in offices we provide with or without rent to the government. It is much easier for them just to rent a little space and have the interaction happen at our office in order to save time and money to the population. These professionals are most likely 50-60% more productive than if they work in the hospital surroundings because there is much less "no shows" and people can access their care immediately when they see their physician. It is not rare to see an older patient benefit from a foot care appointment at 9:00 am, see the diabetes nurse navigator at 10:00 am, see the dietician at 10:30 am and see the family doctor at 11:00 am. It makes for a heavy business morning for that person but think about all the trouble it saves the family and how satisfied this patient can be when he/she comes out of the office.

Of course, I am very willing to answer interested doctors' requests on how to develop this kind of model and my email is available for this (drjpinc@yahoo.ca).