

**Supervisors of Provisionally Licensed  
Physicians (SPLP) Policy**

Ministry of Health  
Revised April 2024

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### 1.1 Description

The Supervisors of Provisionally Licensed Physicians (SPLP) program is intended to provide support to supervising physicians who spend a significant amount of time assessing the knowledge, competencies, and clinical skills of rural provisionally licensed physicians (PLPs). This is to help alleviate the financial and related burdens experienced by physicians who travel and/or forego their own practice time to provide supervision rural PLPs.

Physicians who are granted provisional registration by the College of Physicians and Surgeons of BC (CPSBC) are subject to limits and conditions on their registration, including the requirement of being supervised by an experienced, fully licensed physician. Health authorities (HAs), as the sponsoring agencies, are mandated by the CPSBC to identify supervisors to assist PLPs in achieving full registration.

### 1.2 Objectives

The objectives of this policy are to outline the criteria and eligibility of the SPLP of British Columbia (BC).

### 1.3 Scope

This policy applies to physicians, HAs, and other key partners participating in the SPLP.

### 1.4 Oversight

SPLP is a rural physician program under the Rural Practice Subsidiary Agreement (RSA), which is a subsidiary agreement of the Physician Master Agreement between the BC Government, Doctors of BC (DoBC) and the Medical Services Commission (MSC).

The Joint Standing Committee on Rural Issues (JSC), established under the RSA, is comprised of representatives from DoBC, the Ministry of Health (the Ministry), and the HAs. The JSC advises the BC Government and DoBC on matters pertaining to rural medical practice and is responsible for the overall governance of these rural programs for physicians.

The goal of the JSC is to enhance the availability and stability of physician services in rural and remote areas of BC by addressing some of the unique and difficult circumstances faced by physicians in these areas.

### 1.5 Administration

The SPLP program is funded by the government and administered by the HA's, in collaboration with the Rural Programs area of the Ministry.

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**Section: 2** Definitions

**Effective:** April 2024

Term	Definition
College of Physicians and Surgeons of BC (CPSBC)	The College of Physicians and Surgeons of British Columbia regulates the practice of medicine under the authority of provincial law. All physicians who practice medicine in the province must be registrants of the College.
Health Authority (HA)	Governing bodies as per the <i>Health Authorities Act</i> , with responsibility for the planning, coordination and delivery of regional health services, including hospital, long term care and community services.
Provisionally Licensed Physician (PLP)	Registration in the provisional class permits a physician to practice medicine with specific limits and conditions granted by the Registration Committee, including the requirement to have both a sponsoring organization and a supervisor approved by the College.
Rural Practice Subsidiary Agreement (RSA) Community	A rural community that meets all the criteria of the RRP, included in Appendix A of the RSA.
Rural Retention Program (RRP) Fee Premium	Physicians providing services in eligible RSA communities will receive a premium on their Medical Service Plan (MSP) Fee for Service (FFS) billings.
Supervisee	The rural Provisionally Licensed Physician (PLP)
Supervisor	The physician responsible for supervision of the PLP and reporting the PLP's competency and professionalism to the CPSBC.

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Communities under the RSA are eligible for funding under this program.

**3.2 Physician Eligibility:**

- Any family practitioner (FP) or specialist physician who is identified and recognized by the HA (the sponsor) as a supervisor of a rural PLP (who permanently practices in a designated RSA community).
- Supervisors must be approved by the CPSBC as a supervising physician.
- Supervisors may be compensated for their time and expenses for supervising up to 2 rural PLPs, at any one time, unless approved by the CPSBC.
- If a physician is being compensated by any other source for their time spent supervising PLPs they are not eligible for the SPLP payment.

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**Section: 4** Funding and Payment

**Effective:** April 2024

#### **4.1 Funding for Supervisors**

- Physicians who are recognized by the HA as a supervisor of a rural PLP will be eligible for financial incentives as follows (per supervisee):
  - \$400 per week for the first 3 months of supervision
  - \$100 per week for the next 9 months of supervision
  - \$50 per week for subsequent years of supervision (up to a maximum of 4 additional years).
- A Travel Time Honorarium of up to \$600 (per round trip):
  - \$50 for less than 1 hour
  - \$300 for 1 to 4 hours
  - \$600 for great than 4 hours
- The Travel Time Honorarium is payable for travel within BC.
- Reimbursement of travel expenses in accordance with Government financial policies.

#### **4.2 Funding for HA Administration**

- SPLP provides the HAs with \$725 in funding per PLP to assist with administration costs associated with the program.

#### **4.3 Payment**

- The HA's will prepare and submit a detailed statement of the physicians who supervise rural PLPs to the Ministry on a quarterly basis.
  - The quarterly submission should include any claims for the Travel Time Honorarium and eligible receipts for travel expense reimbursement.
- A supervising physician is eligible to supervise a maximum of 2 PLPs at any one time and receive payment through the SPLP.
- The Ministry will issue payment to the HA's and the HA's will pay the supervising physicians directly.

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- The Ministry will monitor program expenditures on a regular basis and perform an annual reconciliation of program expenditures.
- The Ministry will provide a report on the SPLP utilization to the JSC quarterly, reporting on financial information, identify unresolved program issues, and bring forward recommendations on policy or program changes, as needed.