

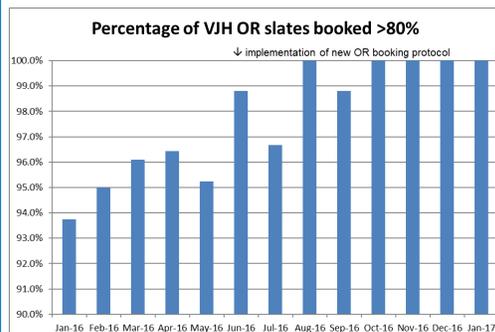


2017 at a Glance

March 31, 2018, marks the end of another successful year for VJHPS. Nine Facility Engagement Initiative Activities were completed, and nineteen are underway. The following are some highlighted successes:

Optimizing OR Booking Slates

Implementation of new OR booking protocols were developed and utilization increased substantially.



MRI Task Force

New MRI approved for Vernon Jubilee Hospital Spring 2019. Ongoing consultation and expertise provided by physicians during the construction, implementation & planning of the space.



Paediatrics Perinatology Paediatrics Multidisciplinary Review

Physicians are now being funded through IH for this important work.



“The Vernon Jubilee Hospital Engagement Society was instrumental in supporting the VJH Women’s & Children’s Health Services to create the newly approved and funded Continuous Quality Improvement Committee”

Dr. Eiko Waida.

STRUC, ATLS & ACLS Reimbursement

Physicians were compensated for enhancing skills in these life saving procedures to ensure patient care at Vernon Jubilee Hospital is second to none.



Clinical Research Event

Four representatives from IH presented on: effectively doing research; navigating ethics; and available clinical research support within IH for physicians that were interested in doing research.

Faculty Development

Physicians who were interested in becoming involved for the first time or enhancing their role as a Medical Educator attended an evening event to



learn more about coaching & self-reflection/new ideas for teaching and learner centred teaching/questioning techniques.

Family Physician, Hospitalist Engagement Event

Family Physicians and Hospitalists met with a focus on patient care, transitions of care and areas of interest for



all family physicians and hospitalists. The main objectives of the event was to encourage interaction and networking in a social setting, identify areas of frustration between the groups, and to work towards mutually acceptable solutions to the frustrations.

2018 at a Glance



CHF Re-admission

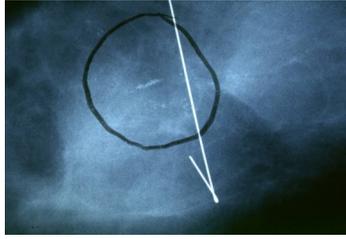
VJH has relatively high rates of hospital admission for CHF for which there is often associated increased lengths of stay which puts a burden on the ER, hospital wards and patients themselves. VJHPS is looking at identifying patients that might benefit from closer outpatient heart failure monitoring to decrease morbidity and hospitalization and to see if early referral to Internal Medicine might be helpful.



Fine Wire Localization

(FWL) procedures are an important surgical treatment modality for non-

palpable breast lesions and require close communication between radiolo-



gists and general surgeons. Optimal outcomes require radiologists to have a good understanding of surgical methods to facilitate optimal placement of the wire, and surgeons benefit from an understanding of the radiologic technique and parameters. Proposed event focused on FWL attended by radiologists, general surgeons and pathologists where technical aspects of the radiologic and surgical procedures will be discussed.

CME—Continuing Medical Education



Providing medical staff with an opportunity to enhance their continuing medical education is a priority for VJHPS. The VJHPS supports funding course fees to a maximum of \$750 per physician for education to improve VJH patient care. Approved courses are to be submitted by VJHPS Working Group department representative. Funding excludes sessional time, travel, meals & alcohol. To determine if reimbursement is eligible have your VJHPS Working Group department representative fill out the form & email: flasch2014@gmail.com.

Departmental/ Interdepartmental Enrichment Meetings



Intended to build relationships within and between departments, for the purposes of planning, reviewing, prioritizing, and improving patient and family-centered care and physician work environment. Meetings could include regular journal clubs, hosted within a department, or meetings between departments to improve collaborative patient care.

As per the MOU, the Society **cannot fund** sessional hours for meetings that are required for hospital privileges.

Eligibility Criteria:

- ◆ Each VJH department may host up to 4 meetings per year
- ◆ Sessional rate reimbursement – Maximum 2 hours per meeting per participant
- ◆ Interdepartmental meetings with a quality or education focus do not count toward the annual allotment.
- ◆ Funding eligibility: room rental charges; AV support costs; and meal expenses (up to \$75 per plate) (receipts required).
- ◆ Alcoholic beverages not eligible for reimbursement.
- ◆ Post meeting requirements: list of attendees; and a synoptic report summarizing the outcome of the meeting within a month of the meeting date.

Resuscitation Simulations (SIMS)



VJHPS supports: regular practice of communication, knowledge & skills involved in resuscitation for those who would encounter resuscitation as part of their scope of practice; improved uptake of SIMS participation for physicians; engagement of physician leads to create and run regular SIMS for colleague physicians, and allied health staff; improved communication between physicians and allied health staff.

Eligibility Criteria:

- ◆ Physician-led, and multidisciplinary-participation, in regular (weekly, monthly, or other) resuscitation simulations, which follow recognized resuscitation protocols, as taught in courses such as ACLS, ATLS, PALS, NRP & APLS.
- ◆ Engagement of both physician leads, and physician participants.
- ◆ 1 hour per SIM per physician-SIMS lead can claim 1 hour for preparation plus 1 hour participation to a maximum of 2 hours per SIMS.
- ◆ Events of longer duration need VJHPS approval.

Resuscitation Simulation Update

Mock resuscitation and simulation training has been shown to improve knowledge, skills, collaboration and teamwork in the emergency health-care setting. The Resuscitation and Simulation Activity began in the fall of 2017, and already there have been 7 simulations conducted, with 49 participants. Simulations are conducted in the emergency department, and on the labour and delivery ward, with interdisciplinary teams, including nurses, respiratory therapists, physicians, and midwives responding to the “mock codes”. Feedback from those who have participated has been positive, reporting improved teamwork with allied health professionals, and each other.



IH Pediatrics Meeting—TBD

Inviting a Neonatologist from Kelowna to discuss issues during an evening event at Predator Ridge.



M & M Catering Reimbursement

Attending M & M Rounds but having to pay for lunch?

VJHPS continues paying for M&M Committee catering expenses but not session time, since attendance at M&M rounds is mandatory and therefore compensation for attending them

cannot be submitted to VJHPS for reimbursement.

MRI Implementation & Planning

The medical staff continues to stay engaged with development of MRI through VJHPS's continued commitment of providing professional ongoing support to VJH administration as extensive construction of the existing MRI space continues.

MSP Coverage

Frequently, patients present to the Emergency Room for acute care without Medical Services Plan (MSP) BC insurance coverage. These patients may be suffering from life or limb threatening disease or trauma, and urgent medical or surgical care must proceed. Mechanisms to identify these patients in a timely manner so that the physicians providing care may be compensated financially have occasionally been lacking.

A VJHPS committee continues to help guide a plan to improve the processing of these patients, especially BC residents. Progress has been made in identifying out-of-province insured patients and having their policy number printed on the ID stickers found at the back of each patient chart, making it easier for billing practitioners to invoice the correct policy.

Further work needs to be done to identify BC residents without coverage on admission, and flagging uninsured patients from out-of-country, so that processes are engaged and all who are involved in acute care can be adequately compensated.

OR Task Force

VJH will have a 5th OR up and running sometime in June 2018. Thank you to the VJH Foundation for purchasing the equipment to outfit the space.

Permanent funding from the Ministry of Health has been promised, at the level of 3 days per week dedicated to decreasing long waiters—greater than 26 weeks. In its first year of operation VJH administration plan to allocate 2



days/week hip & knee replacements and the 3rd day to ENT/dentistry.

At the present time efforts to organize the Human Resources are underway.

Reducing Redundant Lab Testing

At Vernon Jubilee Hospital, Dr. Jason Doyle brought forward concerns about redundant laboratory testing. Unnecessary, repeated rounds of tests for admitted hospital patients appeared to be occurring, and could potentially be preventable by modifying protocols.

The Vernon Jubilee Hospital Physician Society (VJHPS) arranged for a small representative group of physicians to examine laboratory utilization and develop recurrent laboratory testing guidelines for inpatients (such as guidelines for daily CBC orders).

They agreed on simple rules to govern, streamline and limit ordering of tests while patients are in hospital, and worked with the health authority to make changes to ordering practices at the unit clerk level. Through their Facility Engagement work, physicians had the opportunity to collaborate with the site and staff to implement the new guidelines.

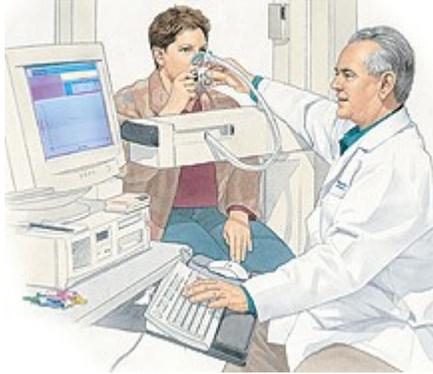
As a result of the changes, we hope that patients will experience less anxiety and discomfort and will avoid unnecessary tests and that cost savings will be realized.



Purchase of Scheduling Software

The Hospitalist Department scheduling has multiple levels of complexity due to the nature of the Hospitalist Program design at VJH. Dr. Kira McClellan brought this issue forward to the VJHPS working group to help facilitate scheduling for departments requiring multiple and/or complex scheduling templates.

Approval for purchasing software was granted with the caveat that all departments within VJH would have access to the software, if required.



Quality Access to Pulmonary Function Lab

Currently patients are triaged by the ward clerk on a first come first served basis. This has led to delays in access to either surgical or specialist involvement in patient care and management. Dr Yacyshyn will be reviewing lengths of time for access to PFTs and developing an effective physician triage system.

Outcome of this work will Improve quality of patient care and management and access to care. More urgent cases can be triaged accordingly. Also, many patients have full PFTs ordered, but spirometry may be adequate

Uncharted Missed Documents from VJH to Community MDs

Research is being conducted to determine the extent of electronic and paper format documents (Labs , X-rays, Reports) from VJH being lost or sent in error to community MDs or in some cases to the wrong MDs, and/or wrong locations. Dr. Cunningham is reviewing to see where problems lie and to fix logistical errors and correct pro-

cesses. This affects Facility and community MDs.



Uncompensated Committee Work

Physicians spend hundreds of hours working on committees, outside of their clinical/hospital hours, providing invaluable expertise and counsel to IH. VJHPS recognizes this valuable contribution and reimburses physicians for their sessional time attending meetings that aren't required to maintain their hospital privileges. Reimbursement cannot be provided for attending required Medical Staff Association (MSA) meetings, Medical Advisory Committee (MAC), M & M Rounds meetings or any meeting where a physician is already being compensated (Department Heads attending meetings where she/he is already compensated via IH as part of their Department Head roles/responsibilities).

An annual budget of \$90,000 has been set aside to reimburse physicians for unpaid committee work. There are 26 committees eligible for reimbursement and at present 30 physicians are submitting claims on a regular; please contact Anna Flasch if you think you may be eligible and she will provide directions on how to submit a brief proposal for consideration by the VJH Physician Society Working Group.



VJH Family Medicine Residency Program

"Work is well underway with a large group of medical staff working together to explore the feasibility of having UBC Family Medicine Residents at VJH. A medical staff survey has been completed, communications have occurred with UBC Program Director, and the various regional site directors", advised Dr. Chris Cunningham.

More planning will be taking place in the next few months. Some residents are already set up to come to VJH and community practices through parts of 2018 for electives and it is hoped that a formal program may be able to be hosted at VJH in the future.



Do you have an idea that can strengthen working relationships between health authorities and facility-based physicians, to improve their work environment and the delivery of patient care?

Do you have an idea that creates better opportunities for physicians and health authority leaders to work together to share knowledge and make informed decisions that can improve patient care, the physician experience, and the cost-effectiveness of the health care system?

Do you have an idea that opens up opportunities and support for physicians who work at facilities and are members of the medical staff to have a meaningful voice, and increased involvement in local activities that affect their work and patient care?

Submit your Idea and be heard!

http://www.facilityengagement.ca/sites/default/files/How%20to%20create%20an%20Engagement%20Activity%20in%20FEMS_0.pdf

WHAT IS FACILITY ENGAGEMENT?

VJHPS WORKING GROUP

Executive

President

Dr. Scott Ainslie

Vice President

Dr. Kevin Wiseman

Secretary/Treasurer

Dr. Michael Cooke

Working Group

Anesthesia

Vacant

Diagnostic Imaging

Dr. Adam Weathermon

Emergency Medicine

Dr. Peter King

Family Medicine

Dr. Chris Cunningham

Dr. Robert Hillis

Hospitalist Medicine

Dr. Kira McClellan

Laboratory Medicine

Dr. Jason Doyle

Internal Medicine

Dr. Glenn Vaz

Psychiatry

Dr. Russ Williams

Surgery

Dr. Scott Ainslie

Dr. Kevin Wiseman

Women's & Children's Health Services

Dr. Michael Cooke

Dr. Lia Harris

SSC FEI Liaison

Amanda Harris

VJHPS Project Manager

Anna Flasch

Engagement Physician Liaison IH

Dr. John Falconer

Facility Engagement is a provincial initiative that aims to strengthen working relationships between health authorities and facility-based physicians, to improve their work environment and the delivery of patient care. It involves:

- ◆ Better opportunities for physicians and health authority leaders to work together to share knowledge and make informed decisions that can improve patient care, the physician experience, and the cost-effectiveness of the health care system.
- ◆ Opportunities and support for physicians who work at facilities and are members of the medical staff to have a meaningful voice, and increased involvement in local activities that affect their work and patient care.
- ◆ Funding (via the Specialist Services Committee) to support activities that involve physicians in decision-making, and pay for physicians' time working on activities/committees.
- ◆ Creation of a physician society to enable the flow of funds to activities of the medical staff and to hire expertise to support the activities.

Participation is open to all health authorities and facilities with acute care beds, and physicians with privileges inside BC facilities who are members of the medical staff. Membership includes specialists.

To get involved or learn more contact:

Anna M. Flasch, Project Manager - flasch2014@gmail.com

VJHPS Activities

Completed

- ◆ Optimize OR Booking Slates
- ◆ Emergency/Hospitalist/ Surgeon Event
- ◆ MRI Task Force
- ◆ Perinatology Paediatrics Multidisciplinary Review
- ◆ Psychiatric Pod Area
- ◆ STRUC Training Reimbursement
- ◆ Surgery Time of Day Quality Improvement
- ◆ ATLS Reimbursement
- ◆ ACLS Reimbursement
- ◆ Clinical Research Event Jan 2018
- ◆ Faculty Development
- ◆ Family Physician Hospitalist Engagement Event

Underway

- ◆ CHF Re-admission
- ◆ Clinical Medical Education
- ◆ Departmental/ Interdepartmental Enrichment Meetings

- ◆ Fine Wire Localization
- ◆ IH Pediatrics Meeting
- ◆ M&M Catering Reimbursement
- ◆ MRI Implementation & Planning
- ◆ MSP Coverage
- ◆ OR Task Force
- ◆ Purchasing Scheduling Software
- ◆ Quality-Access to Pulmonary Function Lab
- ◆ Reducing Redundant Lab Testing
- ◆ Resuscitation Simulations (SIMS) Training
- ◆ Unchartered/Missed Documents from VJH-Community MDs
- ◆ Uncompensated Committee Work
- ◆ VJH Family Medicine Residency Program

Proposed

Uncompensated Committee Work
Cardiac Care Redesign