

Strategic Goal #1 Physician Engagement – Identify physician engagement opportunities and strengthen physician collaboration and advocacy to ensure the views of medical staff are effectively communicated.

Activities	Performance Measures
<p>Physician Hub - Development of a physician led platform in collaboration with the Division of Family Practice that includes recruitment advertisements and videos, “meet-ups” that allow physicians to engage both professionally and socially; training opportunities; forums on clinical issues. Potential for this to be a regional initiative encompassing all physician societies/MSAs and Divisions of Family Practice within Interior Health.</p> <p>Department/Interdepartmental Enrichment Meetings – Meetings are intended to build relationships within and between departments for the purpose of planning, reviewing, prioritizing, and improving patient and family-centred care and the physician work environment. Meetings include regular journal clubs hosted within a department, or meetings (not required for hospital privileges) between departments to improve collaborative patient care. Funding will be provided for room rental charges, audio visual equipment, meal costs up to \$35 plus GST and gratuity per person, up to two hours of sessional time for physicians or up to a maximum of a \$500 honorarium for a speaker.</p>	<p>Website metrics: Number of visits to the site; Length of stay when visiting.</p> <p>Enrollment in courses.</p> <p>Number of responses to recruitment advertisements and videos.</p> <p>Physician feedback via annual survey.</p> <p>Number of funding claims.</p> <p>Physician feedback via annual survey indicating whether there was improved engagement among MSA members over the previous year. <u>Baseline data</u>: VJH Physician Society and Working Group members were polled at the end of 2022/23:</p> <p>0% always. 29% frequently. 57% sometimes. 14% rarely/never</p>

Uncompensated Committee Work - Providing medical staff with an opportunity to engage and be compensated for providing their expertise at facility-related meetings not required for privileges and not compensated through Interior Health. Sessional time will be reimbursed for up to a maximum of 2.5 hours per meeting per participant.

Governance - sessional reimbursement for the VJHPS Executive to work on behalf of the MSA to:

- Improve communication and relationships among the medical staff so their views are more effectively represented
- prioritize issues that significantly affect physicians and patient care
- support medical staff contributions to the development and achievement of health authority plans and initiatives that directly affect physicians
- have meaningful interactions between the medical staff and health authority leaders, including physicians in formal HA medical leadership roles

Working Group – Comprised of physician representatives from all hospital departments, this group is a committee of the VJHPS. Members engage with VJH medical staff and advise the VJHPS Executive with respect to matters of importance to medical staff, their

Same criteria as Department/Interdepartmental Enrichment Meetings.

Physician and VJH Administration feedback via annual survey indicating whether there was improved engagement between MSA members and the VJH Health Authority Staff over the previous year. Baseline data: VJH Physician Society and Working Group members as well as IH administration were polled at the end of 2022/23:

	Physicians	HA
Always	0%	60%
Frequently	86%	40%
Sometimes	0%	0%
Rarely/Never	14%	0%

Meeting attendance.

Same key performance indicators as Department/Interdepartmental Enrichment Meetings and Uncompensated Committee Work.

Meeting attendance.

Departmental representation.

patients, and the Health Authority. Meeting monthly, the Working Group provides information, insights and recommendations regarding:

- VJHPS Strategic Plan and the budget for the allocation of funds
- Potential projects and initiatives that meet the objectives of the MOU
- Issues or concerns of the medical staff or health authority leaders locally or regionally.
- challenges and opportunities brought forward by Doctors of BC Engagement Partner.
- Other matters that may be referred to it by the VJHPS Executive.

Communication, Appreciation and Physician Leadership – To improve communication and relationships among all VJH staff to improve staff morale through the promotion of dialogue, kindness, civility, gratitude, and joy in the workplace. Includes delivering multi-faceted communication focusing on facility engagement activities and successes, physician wellness and MSA, Physician Society, health authority, and Doctors of BC initiatives in a variety of formats.

Inter-Society Facility Engagement - To attend meetings or other physician societies' activities when invited in order to share best practices, discuss joint initiatives or ways of improving physician wellness, facility engagement or patient care. Sessional time, up to 2 hours, for Physician Society Executive/Working Group attendance. No food and/or travel expenses will be reimbursed.

Physician Engagement Application Support - This activity supports the physician in researching, developing and presenting new application(s) for funding through FEI, Health System Redesign (HSR), VJH Foundation, QI, PQI and other Alliance partners. Being able to claim for sessional reimbursement for proposal

Same key performance indicators as Department/Interdepartmental Enrichment Meetings and Uncompensated Committee Work.

Number of people who open VJHPS newsletter.

Website metrics – number of visits to website, pages opened, time spent per visit.

Feedback from physician led hospital-wide engagement and appreciation events eg. Geocaching adventure.

Number of meetings attended.

Number of initiatives resulting from Inter-Society engagement.

Number of funding proposals developed and accepted through this initiative.



<p>development entices physicians to become involved in more activities leading to the achievement of the Vernon Jubilee Hospital Physician Society (VJHPS) mission.</p>	
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Strategic Goal #2 Physician Development (Leadership & Wellness) – Provide opportunities for training, knowledge sharing, mentoring and support in an effort to ensure the safety, health and wellness of physicians and quality care for patients.

Activities	Performance Measures
<p>Physician Leadership Investment Fund – Funds are available to support leadership and professional development training for our local physicians to enable them to improve their skills and expertise in their leadership and quality improvement work. Funding is capped at three (3) hours per physician per course to a maximum of nine (9) hours per physician per fiscal year. For those interested or ready to commit to a leadership position (eg Department Head, MSA Executive, Chief of Staff, local champions), full course funding may be considered on a case-by-case basis.</p> <p>Strength Finder – This activity is designed to help physicians create strength-based cultures within their departments. Research shows that when individuals work to their strengths as opposed to their abilities they are more effective, productive and enjoy higher levels of job satisfaction. Physicians are provided with a Top 5 Clifton Strengths assessment tool which provides an in-depth analysis on that individuals natural patterns of thinking, feeling and behaving with advice on how to best use innate talents to improve performance. Complimentary on-line resources are also available. Once physicians within a department understand their strengths and are speaking the same language, planning and allocation of</p>	<p>Number of physicians that enroll in one or more leadership or professional development training programs.</p> <p>Department/individual survey pre-strength finder and one year post strength finder to determine the effectiveness of this project on department performance, morale and individual well being.</p>

<p>assignments becomes based on who is truly best suited for the role.</p> <p><u>Physician Wellness Co-Sponsorship with Division of Family Practice</u> – Focusing on the Strength Finder Assessment Tool, Dr. Paul Mohapel will provide a workshop to hospital and family physicians on how to use this tool to improve individual wellness and team effectiveness.</p> <p><u>Continuing Medical Education (CME)</u> – a monthly opportunity for medical staff to obtain medical education on topics relevant to physician wellness and patient care. CMEs are held virtually and, in an effort to increase engagement, physicians from Revelstoke, Salmon Arm, Penticton, Kelowna, and Kamloops are invited to attend. Hospital administration are invited to those topics focused on wellness. Sessions are recorded and can be viewed post-event on the VJHPS website.</p>	<p>Attendance at event.</p> <p>Attendance is a factor in the survey for the above activity to determine whether there is a higher level of efficacy among those who attended the workshop.</p> <p>Attendance at CMEs.</p> <p>Number of times recorded CME is viewed on-line.</p>
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Strategic Goal #3 Quality Improvement – Identify, research, and implement initiatives designed to improve operational efficiencies and enable VJH staff to provide quality patient care.

Activities	Performance Measures
<p><u>Allied Health Education</u> - Physician role in teaching/enhancing education for facility allied health professionals (nurses, Respiratory Therapist (RTs), social workers, and physicians, to improve patient care, collaboration, efficiency, and knowledge. Physician educators are eligible to receive up to 20 hours of sessional fees annually when no other source of funding exists.</p> <p><u>Radioactive Seed Localization for Breast Cancer</u> -Breast Lumpectomy for breast cancer has become the preferential surgical treatment for</p>	<p>Number of allied health educational opportunities.</p> <p>Number of participants at each educational opportunity.</p> <p>The number of patients impacted by this new procedure.</p>

most patients because of its decrease in morbidity compared to a total mastectomy. For breast cancers that cannot be reliably palpated because of their small size, wire localization is currently used to identify the tumor intraoperatively. Radioactive Iodine-125 seed localization has several advantages to wire localization, including easier placement, more flexibility on timing of placement, no change of migration prior to surgery and better patient outcomes with a lower positive margin rate post excision. This proposal involves developing a protocol and implementation plan for I-125 seed localization to begin at Vernon Jubilee Hospital (VJH). Our site will be the second site in British Columbia using this technique and the first in Interior Health.

The objective of this project is to design and implement a protocol at VJH for Iodine-125 seed localization used during breast lumpectomy for breast cancer. Specifically, to prioritize issues that significantly affect physicians and patient care, and to have meaningful interactions between the medical staff and health authority leaders, including physicians in formal Interior Health medical leadership roles.


FE is providing sessional funding; VJH Foundation is funding the radioactive seeds.

Resuscitation Simulation (SIMS) – this activity supports the regular practice of communication, knowledge, and skills involved in emergency/resuscitation for those who would encounter emergency/resuscitation as part of their scope of practice. Physician leads create and run regular SIMS for both colleague physicians and allied health staff. These regular, ongoing simulation exercises follow recognized emergency/resuscitation protocols, as taught in courses such as Advanced Cardiovascular Life Support (ACLS), Advance Trauma Life Support

Potentially the next phase of this project would be to measure patient outcomes.

Number of simulations administered.

Number of participants at each simulation.



(ATLS), Pediatric Advanced Life Support (PALS), Neonatal Resuscitation Program (NRP), Advanced Paediatric Life Support (APLS), etc. The lead physician engages with Interior Health (IH) in advance of the simulation to ensure clinical needs can be met while the simulation is being administered. The goals of this activity are to improve uptake of simulations (SIMS) participation for Vernon Jubilee Hospital (VJH), and improved communication between physicians and allied health staff in support of patient care.

Strategic Planning – Emergency Department

The goal is to facilitate the development of a strategic plan by engaging members in an interactive process. The plan is meant to guide quarterly operational discussions with Interior Health (IH) Administration and other partners over the next 3 to 5 years and provide a focused direction for how the department will respond to the evolving nature of both their department and our community as it grows.

1. Improve engagement of members resulting in a collective direction for the Emergency Department.
2. Create a more cohesive working arrangement between Departments in how they provide inpatient care for the community.
3. Provide IH Administration and other partners with a clear picture of how these Departments wish to develop.

Funding covers the facilitator fees only. Departments must apply through Health System Redesign for the other funding required to complete the process.

Increasing Trust with T1D Teens and Diabetes Team (Phase 2) - This QI project is designed to improve engagement, trust and rapport with T1D teens. The primary change idea is to assess

Completion of the strategic plan.

Results of post strategic planning survey prepared by facilitator.

<p>the benefit of using texting with patients/families, not only for patients, but also the clinical interdisciplinary team. Patients are only booked to be seen (in person, virtually) 4 times/year. However, there is a lot of "work" that should/could be done in between appointments in order to optimize glycemic control. This platform, funded by Kelowna General Hospital Foundation, allows for text conversations to be seen by all team members, including RNs, RDs, and MDs, allowing for easy review of active issues in live time. Data demonstrates it takes ~ 8 minutes/week to manage the platform (for 30 patients). Preliminary data also indicates potential disease outcome benefit in certain subgroups. This phase expands the project to include other pediatric populations within the diabetes clinic, namely the U13 group.</p>	<p>Assessment of program by patients, families, and health care providers.</p>
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<p>Strategic Goal #4 Attraction, Recruitment and Retention of Top Talent – Create a workplace culture of caring, respect, inclusion, and support where employees feel valued, appreciated and actively promote VJH as a great place to work.</p>	
<p>Activities</p>	<p>Performance Measures</p>
<p><u>Us Care: Civility Matters to Patient Care Phase 3</u> - Contending with patient verbal abuse and public distemper is difficult enough but receiving such ill-treatment from a fellow hospital staff member can be especially hurtful. Such events erode trust, abolish the spirit of teamwork, and can damage relationships. What begins as a blow to the self-esteem and self-confidence can lead to resentment, bitterness and staff disengagement with repeat exposure which contributes to staffing shortages and low morale. Moreover, immediately following an incident of incivility, an employee’s capacity to perform their job is significantly reduced which</p>	<p>Attendance and participation at department meetings.</p> <p>Survey responses from participants pre and post each department roll-out.</p>

has the potential to impact patient care. This is the premise behind phase 3 of Us Care - Civility Matters to Patient Care.

The goal of this project is to create a hospital culture of kindness, respect and civility.

Department rollouts include:

- Discussion of what psychological safety looks like and model interaction that can be applied in the wider hospital context, as part of all forms of staff interaction;
- Review, highlight and discussion of survey responses;
- Development of ways to build civility that participants feel will work for the ward/department;
- Discussion of desired follow-up training sessions to help adopt improved civility, psychological safety or how to effectively contend with incivility;
- Solicit ideas on how to maintain civility messaging that will work for the ward/department.

Morbidity and Mortality (M & M) Catering -

assist the Morbidity and Mortality (M&M) Committee with catering expenses only, since attendance at M&M is mandatory and compensation for attendance cannot be reimbursed through FE. Maximum \$35 per person plus GST and gratuity to catering company.

VJH Common Area Reimbursement - allows for the refurbishment of furniture/appliances in Vernon Jubilee Hospital (VJH) physician-only areas. Proposals for specific purchases (up to \$60,000 per annum) are reviewed by the (VJHPS) Executive Committee and approved by the Working Group.

Recruitment - Vernon Jubilee Hospital (VJH) is actively recruiting physicians. This activity allows

No key performance indicator for this activity.
This is part of an overall effort to create a hospital culture where physicians feel valued.

No key performance indicator for this activity.
This is part of an overall effort to create a hospital culture where physicians feel valued.



<p>medical staff in any VJH department to claim for their time and expenses actively engaging prospective candidates i.e. site visits, facility and/or community tours, social engagements, and Question & Answer (Q&A) Sessions with candidates:</p> <p>A maximum of 8 sessional hours per visit is allowed. Expenses not already paid or reimbursed by Interior Health Authority (IHA) include up to \$1000 per candidate site visit.</p>	<p>Number of potential candidates with whom physicians have engaged.</p> <p>Number of candidates recruited.</p>
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