

Facility Engagement is a BC-wide initiative of the Specialist Services Committee. It supports meaningful consultation and collaboration among facility-based medical staff and health authorities.

It is strengthening communication and relationships and creating effective processes for working together on shared priorities that improve patient care and the work environment.



WHY ENGAGE?

For our patients. Strong engagement among physicians and health organizations supports high quality health care, improving patient outcomes and lowering costs.

For effective change. When we work together, we solve problems faster, make better decisions, and achieve more.

WHAT ARE WE WORKING ON?

- Patient care delivery
- Hospital pressures
- Regional and system challenges
- Wellness and workplace culture

HOW DOES IT WORK?

A COMMITMENT TO LOCAL AND REGIONAL ENGAGEMENT

is shared by Doctors of BC, the Ministry of Health, and all BC health authorities as part of the Physician Master Agreement.

FUNDING AND SUPPORTS

from the SSC Facility Engagement Initiative support medical staff to engage in health care planning and decisions.

WHO'S ENGAGING?

PHYSICIANS & OTHER MEDICAL STAFF HEALTH AUTHORITY LEADERS & ADMINISTRATORS

76

MEDICAL STAFF ASSOCIATIONS
in 85 acute care facilities
and 6 provincial programs

6

HEALTH AUTHORITIES
Local, regional levels

6500+ PHYSICIANS
have participated since 2014

ENGAGEMENT IN ACTION

Examples of collaborative activities

The IHealth Regional Council supports Electronic Health Record implementation through MSA collaboration, two-way communication, and processes to support issues.

Campbell River physicians are spreading a pathway for preventing pre-term births for widespread patient and system benefits.

Tofino providers have collaborated with First Nations community members to learn about traditional practices for healing trauma.

South Island hospital partners are improving processes for

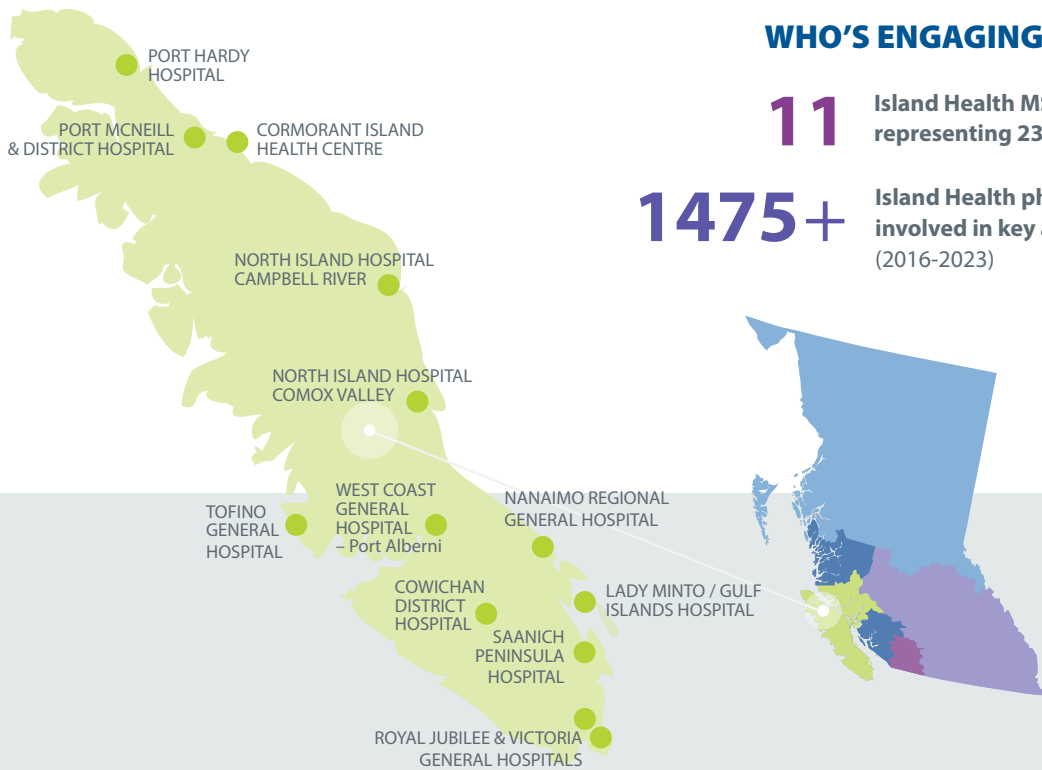
disadvantaged outpatients to access emergency surgery.

Lady Minto Hospital has simplified emergency room flow for patient admissions and follow-up processes.

Nanaimo Hospital is engaging Indigenous partners to help create a culturally safe hospital.

South Island hospitals have reviewed drug usage, prescribing patterns, and WorkSafe BC classifications for ER cost savings.

More examples ►



One of the really big positives of working together was turning this opportunity into something that wasn't just a change – but actually a chance to fundamentally change, for the better, the way we deliver care.

— Dr Ryan Gallagher, Cowichan District Hospital, Physician Leader, IHealth Implementation

We've been very successful with managing the change, and have been able to put a lot of quality improvement into play. Everyone is now collaborating around quality goals and successfully managing important changes.

— Dustin Spratt, Health Authority Manager, Campbell River/Comox