

“We would like to acknowledge that the land we live and work on in this province is comprised of the many traditional, ancestral, and unceded territories of First Nations, Métis, and Inuit peoples. When we acknowledge the land, I hope that it is an opportunity for all of us to reflect on the ongoing history of colonialism in our country, and as leaders in healthcare, consider ways that we can further incorporate antiracism and decolonization into improving our communities”.



EXPLORING FUNDING OPPORTUNITIES WEBINAR

During the webinar:

All participants are muted to ensure there is no competing background noise.

The chat function has been disabled.

Please use the Q&A for any questions or comments.

If you would like to clarify, please use the raise hand function and we will allow attendees to come off mute.

The webinar is being recorded and will be released in the days after the session.

RCME

Rural Continuing Medical Education



RCME Liaison



Rural Coordination
Centre of BC



- Assist the 42 rural and remote communities within the Interior Region of BC to develop processes, structures and policies to execute community RCME
- Assist with provincial applications for funding including REAP and SPIFI bursaries
- Regional Management of community fund tracking, monitoring and reporting
- Increase relationship and collaboration between rural physicians and key stakeholders as well as other rural communities across the region
- Provides community outreach to assist with education planning and supports as needed
- Serves as a key contact for inquiries and problem solving related to RCME

Nicole.HochleitnerWain@interiorhealth.ca

Cell: 250.256.9158

Individual RCME Funds

The Rural Continuing Medical Education (RCME) benefits provide funding for medical education activities to support the maintenance of those medical skills and credentials required for rural practice.

- Funds are paid directly to physicians by the Health Authority (IH) on a quarterly basis
- Physicians may use funds for individual education purposes
- Funds may be used to:
 - cover overhead expenses while attending medical training
 - purchase new technology or upgrades necessary for participation in CME
- A physician's annual RCME allowance is dependent on the designation of his or her community and the length of time he or she has practiced in that community (see table below)

GENERAL PRACITIONERS	Up to 2 years	In the 3rd & 4th year	Over 4 years
'A' communities	\$1,320.00	\$3,520.00	\$5,720.00
'B' communities	\$440.00	\$2,640.00	\$4,840.00
'C' communities	\$0.00	\$2,200.00	\$4,400.00
'D' communities	\$0.00	\$1,100.00	\$2,200.00

RCME eligibility:

- Physicians must reside and practice in an eligible RSA community for at least 9 months per year
- Physicians must show that they billed/worked clinical hours in community for 9mo/year

Individual RCME Funds continued

Additionally physicians will receive funding from Doctors of BC.

The CME Fund is an annual benefit that assist physicians with educational expenses.

The maximum CME benefit is \$2,200. Eligible physicians will receive the benefit by direct deposit in the Fall.

The CME benefit is allocated as follows:

ANNUAL GROSS ELIGIBLE INCOME	PERCENTAGE OF CME PAYABLE
< \$5,000	0%
\$5,000 – \$10,000	25%
\$10,001 – \$15,000	50%
\$15,001 – \$30,000	75%
> \$30,000	100%

RCME Community Program Funds

What is Community RCME?

- Community RCME refers to activities that address the needs of local physicians and their teams for collective learning
- Community RCME strengthens the well-being and capacity of local health systems to address the health care service needs of the community, so it involves generalists, specialists and inter-professional learning

Examples of Community RCME

- HOUSE Course run in the community
- CARE Course run in the community including the inter-professional team
- Leadership Course run in the community

RCME Community Program Funds continued

Funding

Eligible RSA communities that are implemented into the new RCME Community Program will receive annual funding to support community learning. Funding is based on the number of physicians who live and practice permanently in eligible RSA Communities as of December 31st as well as the RRP points for the community.

Communities are able to accumulate up to 3 years worth of funding. Unspent funds will remain with the community but will only be replenished on an annual basis if an education plans is produced documenting future spending and goals of the accumulation.

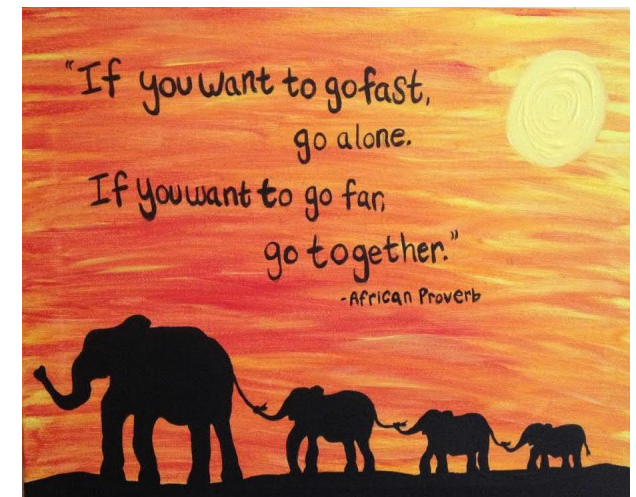
Cut off to receive new funding is December 31st / Fund Transfer of new funding is between May and June of the following year. RCME Liaison is processing all eligible invoices and claims for RCME Community Program Funds and looks after the reporting and tracking of the funds.

Eligible Expenses

- ✓ Courses, Registration Fees, Facilitators Honorariums, Speaker Fees, Accreditation
- ✓ Equipment that enables or enhances community RCME delivery and enables physicians to participate
- ✓ Venue, catering, meeting resources, technology
- ✓ Including of inter-professional team members and other community providers

Ineligible Expenses

- ✓ Physicians time to attend Community RCME activities
- ✓ Paying for education/courses for individual physicians
- ✓ Purchasing of equipment for the sole purpose of patient care
- ✓ Supporting activities involving industry



REAP – Rural Education Action Plan

REAP supports the continuing medical education needs and teaching activities of rural physicians in British Columbia.

Available REAP Bursaries for Rural Physicians:

- Rural Skills Upgrade
- Advanced Skills & Training
- New Rural Physician CME
- Closer to Home CME
- San'yas Indigenous Cultural Safety
- Rural Leadership Development Project
- Specialty Training Bursary
- Undergraduate Teaching Stipend

<https://rccbc.ca/rccbc/about-reap/>



SPIFI - Specialist, Sub-specialty, Indigenous and Funding for Innovation

SPIFI provides group of rural physicians up to \$10,000/year to facilitate the development of innovative education opportunities.

SPIFI enables groups of physicians to form networks that are not based on geography so that they may collaboratively create and participate in innovative educational opportunities.

Who may apply for SPIFI funding?

Applications may only be submitted by a **group** (approximately 4-6 physicians) OR a **collaborative of physicians from two (2) or more RSA communities**. Single applicants are not eligible for this funding.

SPIFI funds are available to groups of physicians who live and practice in an RSA community and whose proposal meets at least one of the following criteria:

- 1. Bringing other relevant learners together to address their collective learning needs.*
- 2. Seeking to implement community RCME activities that are innovative in communities.*
- 3. Engaging Indigenous communities in activities that improve health care provider response to local needs.*
- 4. Includes geographically diverse communities.*

For more information contact:

Heather Gummow – hgummow@rccbc.ca

<https://rccbc.ca/education-and-cmecpd/cmecpd/communityrcme/spifi/>



IH Physician Quality Improvement (PQI) Initiative

Kyle Heppner, PQI Consultant, Thompson Region

A person is seen from behind, holding a large white sign with motivational text. They are standing on a grassy hill overlooking a calm lake that reflects the surrounding mountains and sky. The scene is set during a golden hour, with warm light on the mountains and a cool blue tint on the water and sky. Two large, dark rocks are positioned on either side of the person, framing the view of the lake. The person is wearing a dark jacket.

**THINK BIG.
START SMALL.
ACT FAST.**

The Physician Quality Improvement Mandate


To engage physicians by providing access to quality improvement (QI) education and expertise, increasing physician capacity for involvement in QI projects to enhance the delivery of quality patient care.



PQI Objective

“Work in **collaboration** with health authorities to enhance physician **capability** in QI by providing training and opportunities to **act on QI activities** for the overall purposes of creating a QI **culture** within the physician community”





“Supported by the SSC and Interior Health, this initiative truly does have the capacity to influence change in the health care system.”

– Dr. Devin Harris, PQI Sponsor; Executive Medical Director, IH Quality & Patient Safety

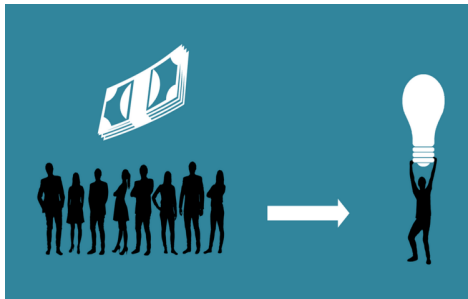
Components of PQI

The PQI Initiative is one of two flagship programs of the Specialist Services Committee (SSC).

The PQI initiative represents a partnership between the Government of BC, the SSC, and the Health Authorities.

The resources and supports available to assist IH physicians on their quality improvement (QI) journey continue to grow along with the initiative.

Components of PQI



- **Funding** for physician QI training and sessional time related to developing their project idea through PiP.

- **Technical Support** including Quality Improvement Consultants, Data Analyst, IMIT Consultant, Privacy Liaison, etc.

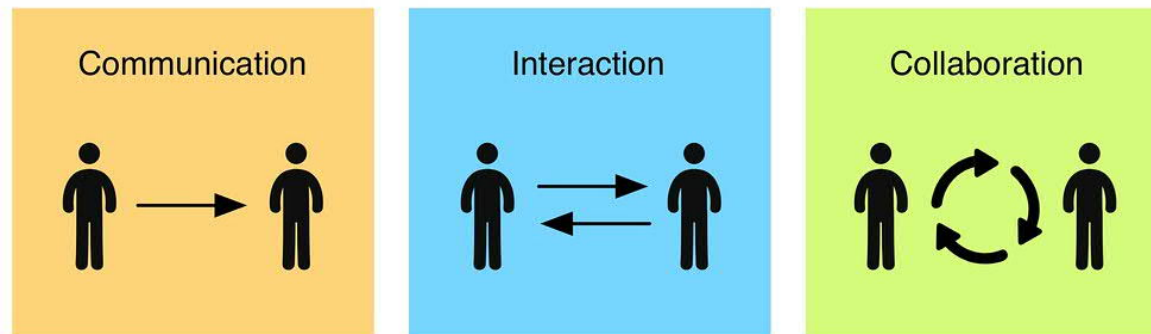


- **Engagement and Collaboration** with Interior Health partners, programs and Specialist Services Committee (SSC) resources.



Components of PQI

- **PQI Physician Advisor & Mentors** to coach and mentor physician colleagues during their QI learning journey and project progression.
- **Dyad Partnerships** to foster collaboration between physicians and their IH partners to influence real change.



Tiered Options

Choose YOUR Training Opportunity!

1 INTRO TO QI: ON-LINE LEARNING

Institute for Healthcare Improvement (IHI) Open School

Upon emailed request, IH PQI will provide a license code and instructions to access full IHI Open School course catalogue. We provide up to 6 hours of sessional funding upon the completion of six recommended introductory CME accredited QI courses.

2 INTRO TO QI: FACILITATED WORKSHOPS

Introduction to Quality Improvement Workshops

Education sessions facilitated by PQI Consultants provide an opportunity for participants to work with their peers, applying QI tools to improvement ideas brought forward by the group. The learning outlines the first steps in developing a project idea into a project plan. PQI staff provide coaching and support during these CME accredited workshops.

3 ADVANCED: COHORT PARTICIPATION

IH PQI Advanced Learning Cohort

This option provides participants more in-depth CME accredited QI education through scheduled sessions (in-person & virtual). You will learn key principles and techniques related to QI, leadership, stakeholder engagement and supporting change. Each participant is allocated sessional hours to support both the time spent at the learning sessions and their independent project work. Cohort participants are supported by a PQI Consultant in their area, the PQI team and IH technical staff.

Level I: IHI Open School

PQI will provide up to 6 hours of sessional funding for physicians to complete the following on-line CME accredited introductory quality improvement courses through the IHI Open School:



- **QI 101:** Introduction to Health Care Improvement
- **QI 102:** How to Improve with the Model for Improvement
- **QI 103:** Testing and Measuring Changes with PDSA Cycles
- **QI 104:** Interpreting Data: Run Charts, Control Charts, and other Measurement Tools
- **QI 105:** Leading Quality Improvement

Who is eligible for the funding?

Physicians currently licensed by the BC College of Physicians and Surgeons

How do I register?

Send an email to pqi@interiorhealth.ca with your full name, location, and field of practice

Level 2: Intro to QI Workshops

- Full day education session (virtual / in-person) facilitated by PQI staff and physicians
- Interactive opportunity for participants to learn and work with their peers
- Highlights the first steps in developing a project idea into a project plan.



Level 3: IH PQI Cohort

FLAGSHIP PROGRAM

- In-person/hybrid learning sessions including graduation ceremony
- Applied learning – Develop your QI idea into a project plan during the course of this program (approx. 10 months)
- “Real time” coaching from PQI Consultant and team
- Stakeholder Engagement / Participation
- Sessional Support for Education and Project Development

Previous QI Projects

Project Improvement Ideas

Improving the Quality of Simulation Education

Improving Staff Efficiency in Supporting Oncology Patients

Improving Timeliness of Code Blue Response

Increasing the Frequency of MRP Goals of Care Conversations in Long Term Care

Improving Chest Pain Management in the ED – Care Pathway

Improving OR Utilization and Accessibility for Elective and Emergency Caesarean Sections

Improving Coordination and Integration of Rural Post-Partum Services (Physicians, Midwives, Public Health)

Improving Access to Medical Information Between Rural and Tertiary Sites - EMR

Improving High School Youth Participation in Their Own Health Services through a School Based Medical HUB

To Create a Healthy Work Culture in Order to Improve Recruitment and Retention of Hospitalists

Resource Links

To register, apply, nominate a physician, or for more information, contact: pqi@interiorhealth.ca

<https://www.interiorhealth.ca/AboutUs/Physicians/Pages/Resources.aspx>

[IH Physician Quality Improvement Application \(v. 2021\) \(alchemer-ca.com\)](https://www.alchemer.com/physician-quality-improvement)

[PowerPoint Presentation \(interiorhealth.ca\)](#)

Questions?



Partnerships and Opportunities

Leader, SSC Initiatives



Interior Health



SPECIALIST SERVICES
COMMITTEE

Land Acknowledgement

I recognize and acknowledge that I am joining you from the traditional, ancestral, and unceded territory of the Okanagan Syilx Peoples. I would also like to recognize the contributions of the Métis and Inuit Peoples to the diverse Aboriginal landscape of the Interior.





Interior Health



SPECIALIST SERVICES
COMMITTEE



SSC Leaders are embedded
in each regional health
authority and PHSA.



Atsuko Tanahara
Leader, SSC Initiatives



SSC Leaders collaborate and partner.

SSC Leaders support and promote.



Physician Engagement in Health System Redesign

Jointly supported by the GPSC, Shared Care Committee, and SSC



Funding for physician engagement (sessional time).

Supports time-limited redesign projects.

In Interior, call for applications quarterly.

SSC Leaders administer the funding.

<https://sscbc.ca/system-improvement/health-system-redesign>

For more information, please contact
Atsuko.Tanahara@interiorhealth.ca | 250.469.7070 ext.12173



JCC Physician Leadership Scholarship

Jointly supported by the Shared Care Committee and SSC

Funding supports for development of leadership and QI skills for physicians.

Covers actual tuition fees, accommodation and travel costs after the program completion.

*No in-person outside of Canada at this time.

Requires VP Medicine approval

➤ Please engage Atsuko, SSC Leader

<https://sscbc.ca/physician-engagement/leadership-training-scholarship>

For more information, please contact
Atsuko.Tanahara@interiorhealth.ca | 250.469.7070 ext.12173



Spreading Quality Improvement (SQI)

New initiative just starting.

Financial resources and staff to carry forward successful QI projects that improve patient care.

More to come in the New Year...

<https://sscbc.ca/programs-and-initiatives/transform-care-delivery/spreading-quality-improvement>



For more information, please contact
Atsuko.Tanahara@interiorhealth.ca | 250.469.7070 ext.12173



UBC Sauder Physician Leadership Program

SSC Leader coordinators candidate selection process with senior medical leadership.

<https://sscbc.ca/programs-and-initiatives/develop-physician-capability/ubc-sauder-physician-leadership-program>



For more information, please contact
Atsuko.Tanahara@interiorhealth.ca | 250.469.7070 ext.12173



My goal is to gain knowledge of various physician opportunities and be able to inform stakeholders of alternative opportunities.



and



Thank you!

Questions?

Contact:

Atsuko Tanahara, Leader, SSC Initiatives

Atsuko.Tanahara@interiorhealth.ca

250.469.7070 ext.12173



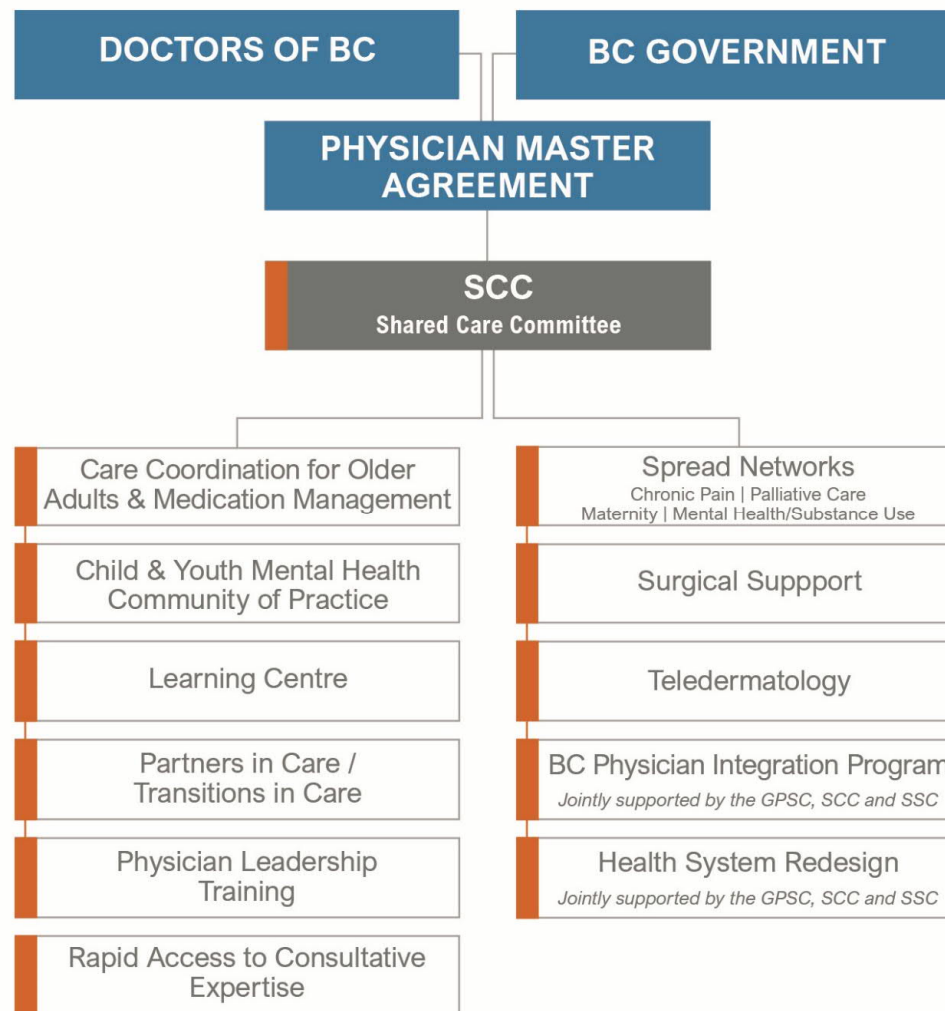


Shared Care Overview



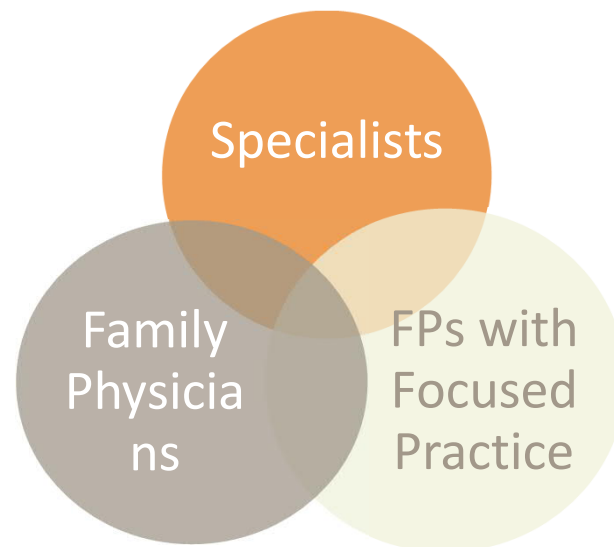
The Shared Care Committee

- Supports collaboration of family and specialist physicians to address the growing need for coordination of patient care and best use of health care resources.
- Co Chairs:
 - Shana Ooms, Ministry of Health
 - Jiwei Li, Family Physician



Shared Care Committee

Shared Care funds innovative projects that involve specialists and family physicians to collaboratively address gaps in care.



Initiative Liaisons

Brooke Knowlton

Manager, Strategic Initiatives

David Hebb

Vancouver Island

Amanda Monteiro

Vancouver Coastal

Sarah Forster

North & Interior

Jamie Carballo

Fraser Region

Types of Shared Care Initiatives

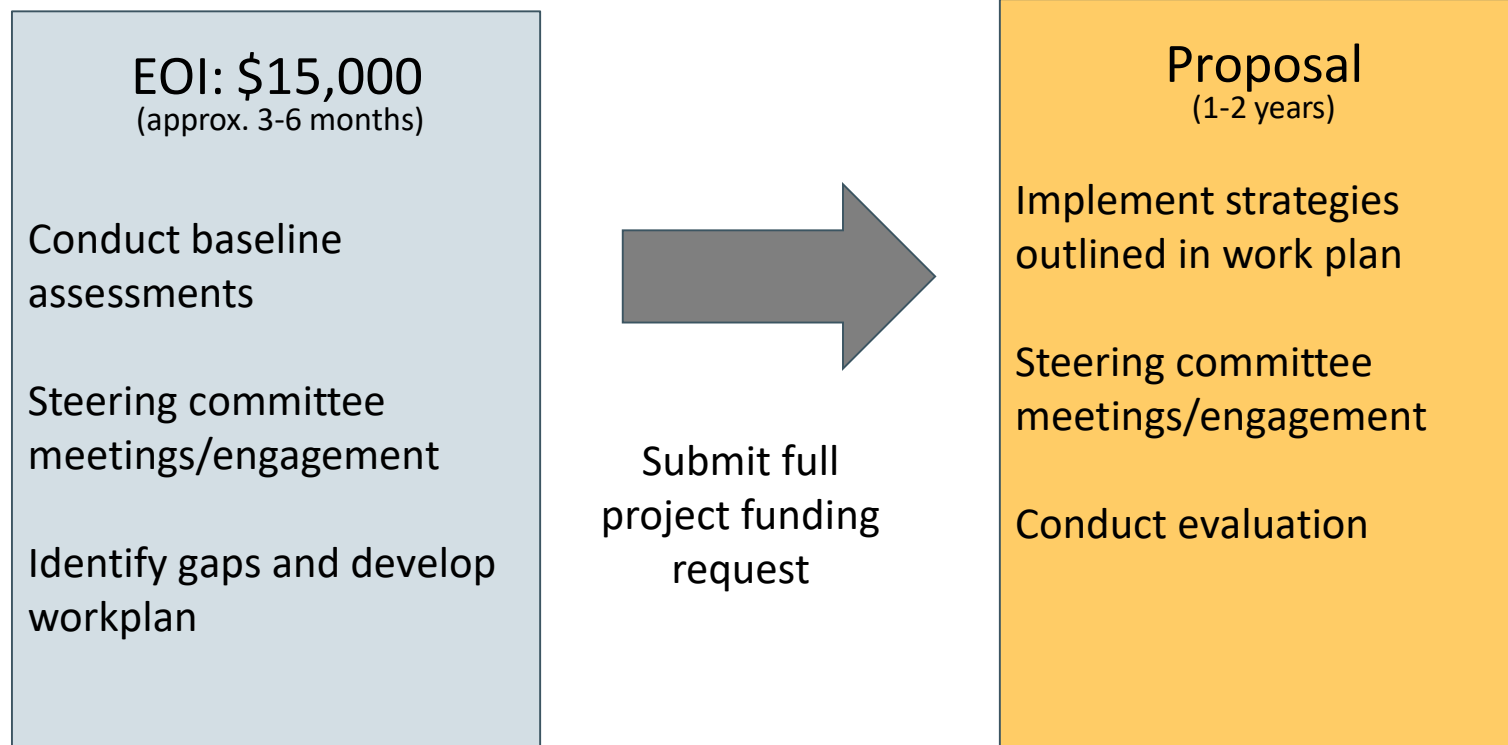
Partners in Care or Transitions in Care (PIC/TIC)	Spread Network Projects- Led by Liaisons
<i>Examples:</i> Acute Care Transitions Improving Referrals to Respiriology Timely Access to Neurology Reducing Wait-times for Imaging Trans Care Pathways	Maternity Care - David Adult Mental Health/Substance Use - Amanda Chronic Pain - Sarah Palliative Care - Jamie Coordinating Complex Care for Older Adults



There have been over **450** Shared Care projects around the province in 74+ communities.

Search Projects:
<https://sharedcarelearningcentre.ca>

Phases of a PIC/TIC Project



Networks

Shared Care Committee is partnering with communities to create provincial networks of communities working towards common goals.



These Networks operate around key principals to advocate and influence as a collective. **Share knowledge and ideas** to facilitate spread of practice improvements for priority populations.

Networks

- ◆ Maternity Care
- ◆ Adult Mental Health & Substance Use
- ◆ Chronic Pain
- ◆ Palliative Care
- ◆ Coordinating Complex Care for Older Adults

As common proposals emerge, we will explore the creation of new networks.

Benefits to Spread Networks

Share Resources

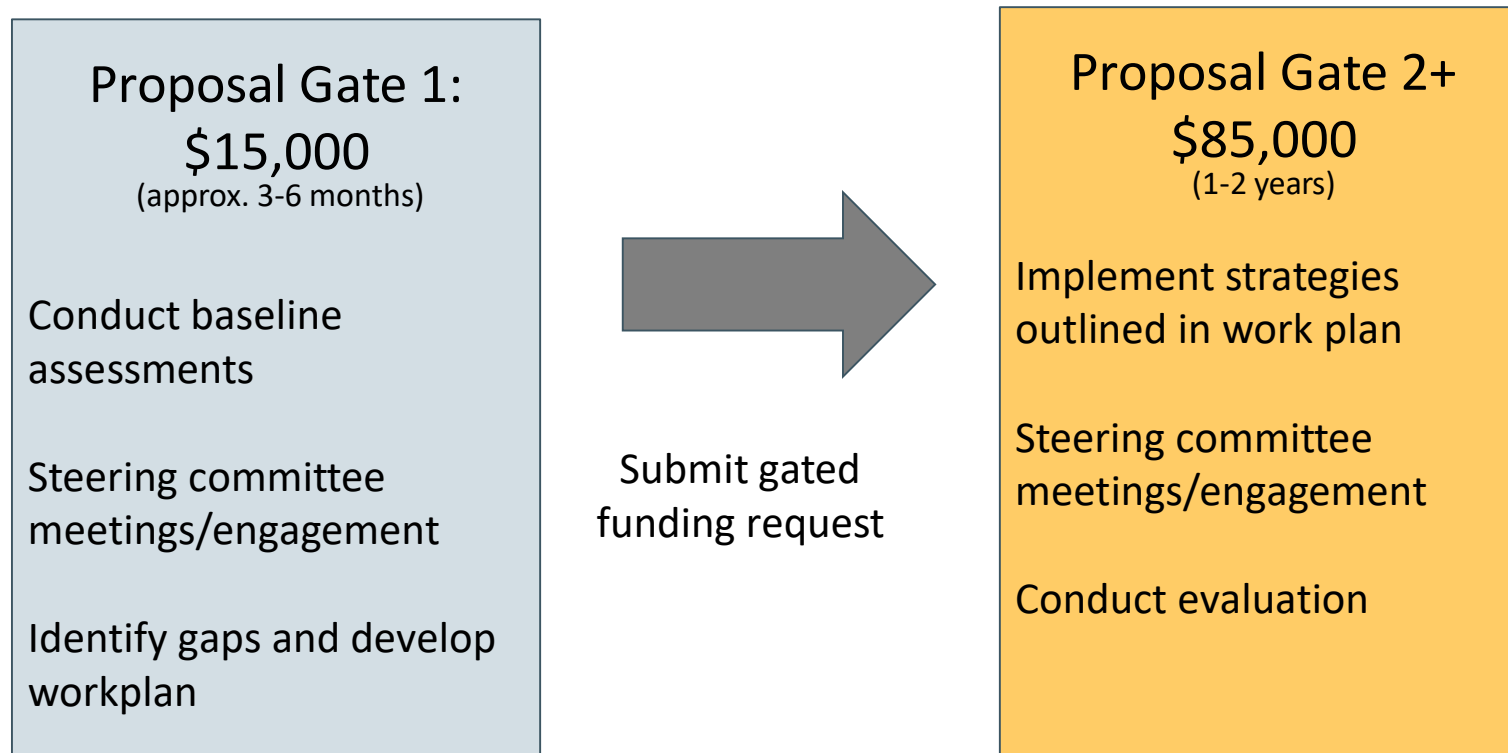
Learn from Other Communities

Support Spread

Build on Successes



Phases of a Network Project



Funding Guidelines

- **Funding can be used for:** physician sessionals to be part of planning meetings or working groups, project management, evaluation, development of resources, admin support and expenses associated with meetings.
- Funding does **not** cover clinical fees, equipment costs, or capital expenses. Please review the funding guidelines document on Shared Care's website for further information.
- sharedcarebc.ca

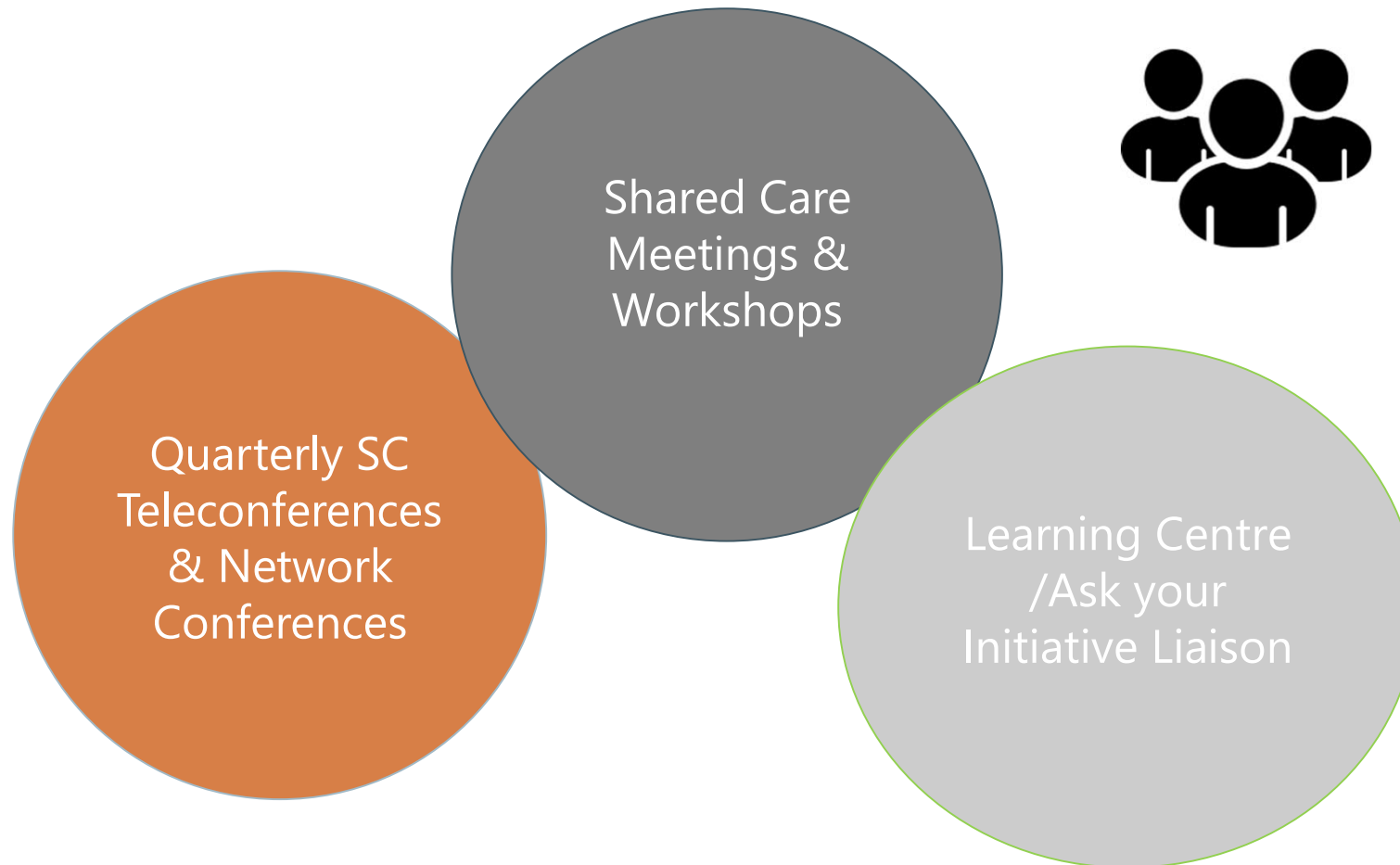


Getting Started

Ensure you have a project **Steering Committee** to provide project oversight. The Steering Committee will include:

- Lead Family Physician
- Lead Specialist Physician
- Other physician members
- Health Authority representative
- Patient / Family Representative
- Other stakeholder (s) as appropriate
- Project Lead

How can you connect with other communities?





Medical Staff Onboarding & Orientation (MSOO) Project Overview

Erika Schrank, MSOO Project Coordinator
December 6, 2021

Rural Coordination
Centre of BC



Onboarding Tools

Onboarding Guide

What can help us provide an effective onboarding experience?

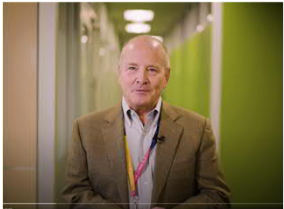
Preboarding

Welcome to IH!

Welcome Package
FOR NEW PHYSICIANS


Interior Health


It's the entire team at Interior Health that makes this such a great place to work.
- Susan Brown, CEO


Welcome Video

Welcome to the site!

QUICK START GUIDE FOR NEW MEDICAL STAFF
ORIENTATION CHECKLIST

Onboarding Checklist Template

Site Level Orientation Guide Template

First Day

First Week

First Month

First 3 Months

2 Years...

Welcome Session

 zoom

Who's Who in IH?

Interior Health Extranet (SharePoint) Online Resources

Welcome Aboard!

Quick Facts

2020/21

Where can I find...?

2022

2023

2024

- Site Level Orientation Guide Template Evaluation
- Medical Staff Welcome Sessions (March / September)
- Improve Accessibility: Transition to IH Website





- “How to...” Onboarding Guide
- Phased Onboarding & Orientation Checklist Template
- Improve Accessibility: Transition to IH Website

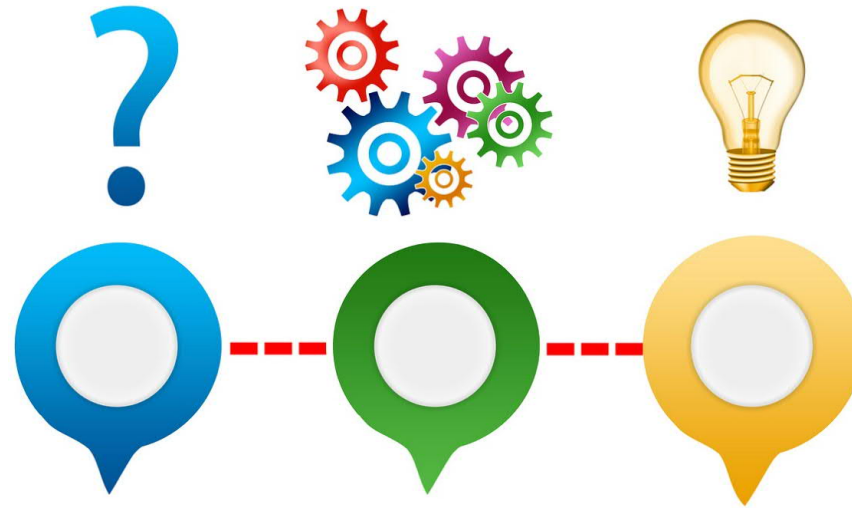




Continuous Engagement & Retention Strategies

- Physician Leader Onboarding / Orientation (Site Level)
- Technology Integration
- Explore Mentorship Opportunities





Erika.Schrank@interiorhealth.ca or

Engage@interiorhealth.ca