

Facility Engagement Evaluation Q & A

INTRODUCTION

From now through early 2019, a team of researchers from the University of British Columbia (UBC) is evaluating the Facility Engagement Initiative and implementation of the Memorandum of Understanding on Regional and Local Engagement (MOU).

1. Why is the evaluation being conducted?

- To provide real-time feedback about implementation of the initiative, which can be used for immediate improvements.
- To gather evidence to understand and measure the success of activities that engage physicians in health care administration decision making.
- To provide accountability to funders and stakeholders involved in these efforts.

2. What is being evaluated?

- The development of physician engagement at the system level, including the evolution of relations between local structures representing facility-based physicians, health authorities, Doctors of BC, and the Ministry of Health.
- The implementation and outcomes of site-specific initiatives funded by Facility Engagement.
- The cost relative to the benefit of the overall initiative.

3. What is the approach?

- The evaluation will use both quantitative and qualitative methods to assess:
 - **Stage 1:** development of infrastructure in readiness for facilities to receive full funding.
 - Stage 2: implementation and outcomes, including from approximately 10 case studies from facilities selected in consultation with the Evaluation Advisory Committee (more details below).
- The evaluation will involve interviews and surveys with MSAs, physicians, health authority leadership, Facility Engagement liaisons (FELs), Ministry of Health representatives, the Specialist Services Committee, and Doctors of BC leadership.
- In addition, documents such as meeting minutes, planning documents, reports, and information from FEMS will be reviewed on an ongoing basis.

4. How are facility-based MSAs involved?

- The evaluation team will connect with physicians, health authority leaders, and other stakeholders over the evaluation period. At all sites:
 - The Medical Staff Association president (or designate) will be asked for an interview after the facility has received its funding, and once again before March 31, 2019.



- All physicians who contribute to an engagement activity and make sessional claims for their time will be asked to respond to brief on-line surveys at various times during the course of the initiative, through the online Facility Engagement Management System (FEMS).
- All physicians who are members of Doctors of BC will receive the Doctors of BC Health Authority Engagement survey (conducted through Accreditation Canada) in 2017 and 2018. Data from the survey will be used in the evaluation.
- Approximately 10 facilities are being invited to participate in case studies in consultation with the Evaluation Advisory Committee. They represent a cross-section of health authorities, size, funding tiers, rural, semi-rural, urban sites, and varying levels of MSA activity. For those sites participating in case studies:
 - MSA executives and Working Groups will be invited to take part in interviews or focus groups at two points in time.
 - All site-based physicians and managers involved in the case studies will receive a survey that measures engagement at the beginning of the case study evaluation, and again before March 31, 2019.

5. How are health authorities involved?

- For sites involved in case studies, health authority leaders with site responsibility will be asked to take part in an interview or focus group and surveys during the course of the Facility Engagement Initiative at the sites.
- Senior health authority executives will participate in interviews as well.

6. What are expectations for participation and how much time will it take?

- To meet the obligations of the MOU and funding agreements, MSAs and health authorities will participate in the evaluation, including completing interviews and surveys.
- The process respects the need to minimize the time burden on medical staff and physician leadership as much as possible, and recognizes that physicians are frequently surveyed for other work as well. With this in mind:
 - The FEMS online survey for participants is limited to two questions and takes just a few minutes to answer.
 - The Doctors of BC annual survey takes less than 10 minutes to complete.
 - All interviews and focus groups with physician and health authority leaders, including at the case study sites, will take about 20 to 40 minutes.
 - No one will be asked to take part in more than two interviews over the course of the evaluation.
- Please note that physicians and other participants will not be compensated for time used to participate in surveys or case studies.



7. Why should busy physicians participate?

- Physicians are urged to take the time to participate in a meaningful way to ensure feedback is relevant and robust. The evaluation will provide evidence that the efforts are making a difference, including to demonstrate:
 - The impact of relationship and communication improvements on patient care and the work environment.
 - The benefits of creating a more cohesive medical staff with prioritized issues and activities.
 - Successes and challenges in general.
 - Successes and challenges of having the physicians' voice included in health authority decision making.
 - The value to funders to continue this kind of work.
 - Emerging best practices in improving physician engagement.

8. When is the evaluation taking place?

• Provincial evaluation activities are taking place from now through early 2019, with reporting on interim results in January 2018, a final report in April 2019, and informal reports at key points throughout the initiative. See the attached schedule for key dates.

9. How does the provincial evaluation reflect the activities on the ground and tie into local evaluations?

• The provincial evaluation aims to determine if physician engagement at facilities has increased as a result of the total package of activities that take place. It is beyond the scope of the evaluation to assess the success of individual activities at the site level. An "evaluation toolkit" will be made available with resources that can assist local sites in implementing their own evaluations at the activity or project-level, should they wish to do so.

10. How will data from individual facilities be used?

- Data will be summarized by the evaluation team and regularly reported back to individual sites through the MSA chairs to allow for ongoing improvement. (Some quantitative results may not be able to be reported at the site level if the number of responses is five or fewer.)
- Data across sites will be aggregated by the evaluation team and presented as part of the interim and final reports. These documents will be shared with all facilities, health authorities, the Specialist Services Committee, the Ministry of Health, Doctors of BC, and other key stakeholders.

11. How will the provincial results be used?

• Results will be used to make immediate improvements. For example, they will allow FELs and the provincial team to make changes in the way in which supports are provided to participating hospital sites.



- Successful approaches and activities that appear to effectively increase physician engagement will be shared with sites.
- Results will help communicate the value of continuing to engage physicians in decision making.
- For the first time in Canada, other jurisdictions will have access to results.
- Results will be communicated outward in aggregate form, along with case study results and examples of successes (with the permission of the appropriate sites) through:
 - BC Medical Journal and other journals.
 - Doctors of BC website.
 - Specialist Services Committee publications.
 - Health authority publications.
 - Publications of other health jurisdictions.
 - \circ Conferences.
 - General public (where there are patient and system benefits that are of interest).

12. To whom should questions be directed?

• Contact your FEL, or Jennifer Barr at jbarr@doctorsofbc.ca.



Key Dates for Participation

Who	When		
Physicians asked evaluation questions when they first register with FEMS and at ongoing points thereafter	Underway now and ongoing to early 2019		
Physicians society presidents at each facility interviewed	Approximately three months after approval of full funding, and at the conclusion of all FEI activities, or fall 2018, whichever is first		
Questions included in the province-wide Doctors	1. Issued April 2016 (baseline)		
of BC membership survey (conducted by Accreditation Canada from 2016 onward)	2. Issued April 2017		
	3. To be issued spring or fall 2018		
Interviews with key provincial stakeholders	Summer 2017		
(health authority senior executives, Ministry of Health, Doctors of BC leadership)	Fall 2018		
Case Study Sites			
Interviews with physician society executive and Working Group members, and site-based health authority leaders/managers	These will occur twice: as soon as possible once a site is confirmed to participate as a case study (commencing Summer 2017), and at the conclusion of all Facility Engagement activities, or		
Engagement instrument (physicians, managers)	fall 2018, whichever is first.		
Site visits	At a time arranged by each site with the UBC team and to coincide with key local Facility Engagement activities, events, or meetings.		

PLANNING/ PILOT TESTING STAGE I STAGE II REPORTING/ DISSEMINATION - Preparing data collection tools - Interviews with MSA chairpersons - Interviews with MSA chairpersons - Interviews with MSA chairpersons - Interviews with MSA chairpersons - Ethics approval - Pilot testing - Retrospective survey for each claimant within FEMS - Ongoing FEMS data collection - Ongoing FEMS data collection - Document review - Case studies: review of planning and reporting - Case studies: interviews and focus groups with physicians		JUL – DEC 2016	JAN – JUN 2017	JUL – DEC 2017	JAN – JUN 2018	JUL – DEC 2018	JAN – APR 2019
collection toolschairpersonschairpersons- Ethics approval- Retrospective survey for- Ongoing FEMS data- Pilot testing- Document review- Document review- Case studies: review of- Case studies: interviews andplanning and reportingfocus groups with physicians	TIMELINE		STAGE I		STAGE II		
documents – Site visits – Annual interviews with health authority administrators		collection tools – Ethics approval	chairpersons – Retrospective si each claimant wit – Document revie – Case studies: re	urvey for hin FEMS w view of	chairpersons – Ongoing FEMS collection – Document revie – Case studies: in focus groups with – Site visits – Annual intervie	data ew terviews and n physicians ws with	