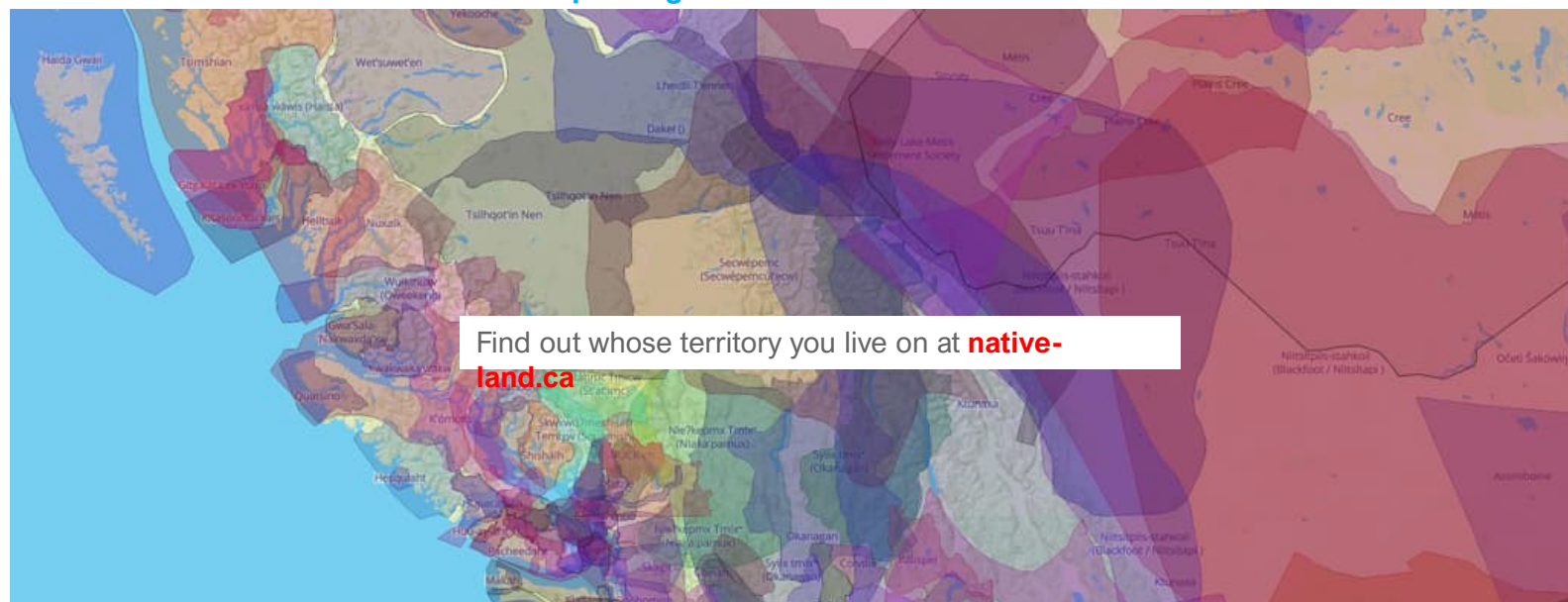


“We would like to acknowledge that the land we live and work on in this province is comprised of the many traditional, ancestral, and unceded territories of First Nations, Métis, and Inuit peoples. When we acknowledge the land, I hope that it is an opportunity for all of us to reflect on the ongoing 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”.



During the meeting:

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

The chat function will be enabled during the question and answer period.

If you would like to speak, please use the raise hand function

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



Icebreaker with Tara McClary

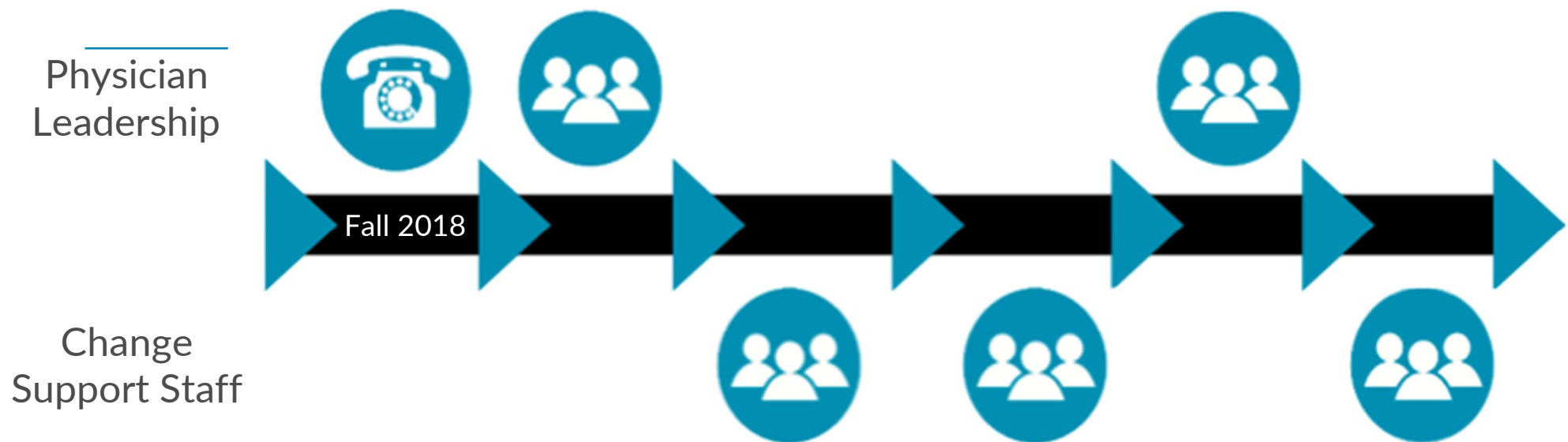
Learn 3 Things in
Breakout Rooms

Who Is At The Table

Group Purpose Presentations and Discussions

Kootenay Boundary Medicine Network

JOINT COLLABORATIVE COMMITTEE



"If there is no action, don't bother"



KOOTENAY BOUNDARY
medicine network

JOINT COLLABORATIVE COMMITTEE



Relationship is the heart of exceptional health care

Through the strength of our relationships we bring together the expertise of otherwise separate entities into true partnership and joyful practice.

KB Medicine Leadership Network (Med-Net)

- Practitioner-led table comprised of lead physician(s) and one of their staff/contractors, from each of the sources of change funding – Meets 3-4x per year, ongoing

Leadership & Network Advancement

- CPD
- Physician recruitment/succession
- Relationship & network development

Priority Advancement

- Physician pulse taking
- Regional priorities for complex system (S.Care)
- Provincial & IHA advocacy

Joint reporting and metrics

- Knowledge mgt
- State of / Outcomes reporting

KB Med-Net Team

- Staff-led table comprised of all Project Managers, Coordinators and Admins from each of the sources of change funding
- Meets 5-6x per year, ongoing

Coordination of Services

- Concierge supports
- Time / calendar management
- Engagements and Communications

Fund Optimization

- Project fund sourcing
- Co-funding priorities
- Administrative efficiencies

Network Hubs

- Adhoc groups of Team and/or Physicians working across change funding sources on common issues
- Meets as needed, often time limited
- Digital Health, In-Clinic Supports, Cluture & Wellness etc.

PSP
→ IH Embedded

Boundary FEI
→ Site leaders

KLH FEI
→ Site leaders

KBPA
→ Site leaders

Nakusp FEI
→ Site leaders

Division
→ CSC

Shared Care
→ CSC

KB CPD
→ Learning Coords

Rural Residency
→ Site leaders

PQI
→ IH Embedded

Highly functional
regional medical staff

Efficient resource
utilization and partner
engagement

* → How org connects to IH

**Physician led health
care improvement
work made manifest**

Seamless
leadership
and support

Beauty of
emergence

Large scale
systems change

Mandate:

The East Kootenay region holds a growing network of supports for medical professionals interested in engagement, quality improvement and change. The East Kootenay Medical Network is comprised of East Kootenay stakeholders involved in physician engagement who will strive to work collaboratively to build connections and identify opportunities for partnership.



Who sits at the table?



**Health System Redesign/
SSC Leader**

Shuswap Collaborative Alliance

SALMON ARM, BC

PRESENTERS: CARYL HARPER (PQI), YULIYA ZINOVA (FEI)



Shuswap Collaborative Alliance

Goal: Embrace efficiency in available resource utilization and enhance collaboration across different partners through facilitated discussions and actions.

Who Sits At Your Table?

MSA/PS executive & support staff

Chief of Staff

HSA – Site & Regional Directors

DoBC Engagement Partner

RCME Liaison

SSC Leader

SNO Division of Family Practice (ED)

SLGH Foundation Executive Director

Physicians (also FEWG members)

Improvement Consultant (QI & Pt Safety)

PQI Quality Improvement Consultant

PSP Coordinator

Shared Care

Thompson Medical Alliance

MANDATE:

The Thompson Medical Alliance serves to align resources and maximize supports, while leveraging the group's potential. It seeks to consolidate processes, expand the collective network, and explore every opportunity to collaborate in support of physician and medical partners to continually drive change.

Thompson Medical Alliance

PARTNERS:

- Thompson Region Division of Family Practice
- Royal Inland and Hillside Physician Association
- Practice Support Program
- IH Quality (North)
- IH Research
- Physician Quality Improvement (IH North)
- Doctors of BC
- Thompson Rivers University

Vernon Alliance

Mandate: To provide a one-stop opportunity to review, vet, fund and support proposals received from any of the membership and identify collaboration opportunities, streamline processes, and reduce redundancy.

Who sits at your table?

- MSA/PS executive & support staff
- SNO Division of Family Practice Executive Director
- DoBC Engagement Partner
- SSC Leader
- Regional Senior Medical Director
- VJH Foundation Executive Director
- PSP Coordinator
- HSA – Site & Regional Directors
- Chief of Staff
- Improvement Consultant (QI & Pt safety)
- PQI Quality Improvement Consultant
- Manager Quality Improvement and Training Initiatives
- Manager of PQI

Networking Lunch

**Please Feel Free To Choose Rooms and
Move Between Rooms**

Share Your Success

Group Presentations and Discussions

Share Your Success

KB Med Net

Success Sharing *Physician Recruitment*



Regional Physician Recruitment Strategy

PARTNERS

KB DIVISION

KB PHYSICIANS
ASSOCIATION

KOOTENAY LAKE
HOSPITAL FEI

CASTLEGAR
PHYSICIANS
ASSOCIATION

BOUNDARY FEI

ARROW LAKES FEI

KB Med-Net Regional
Recruitment Hub

Joint funded by KB Division, Associations,
and Facility Engagement Initiatives.
Focus based on need, not contribution.

K B Doctors.ca
Great Community • Vibrant Medicine • Sweet Life

Regional Identity = Greater Impact

WEBSITE

SOCIAL MEDIA

EVENTS

NEWSLETTERS

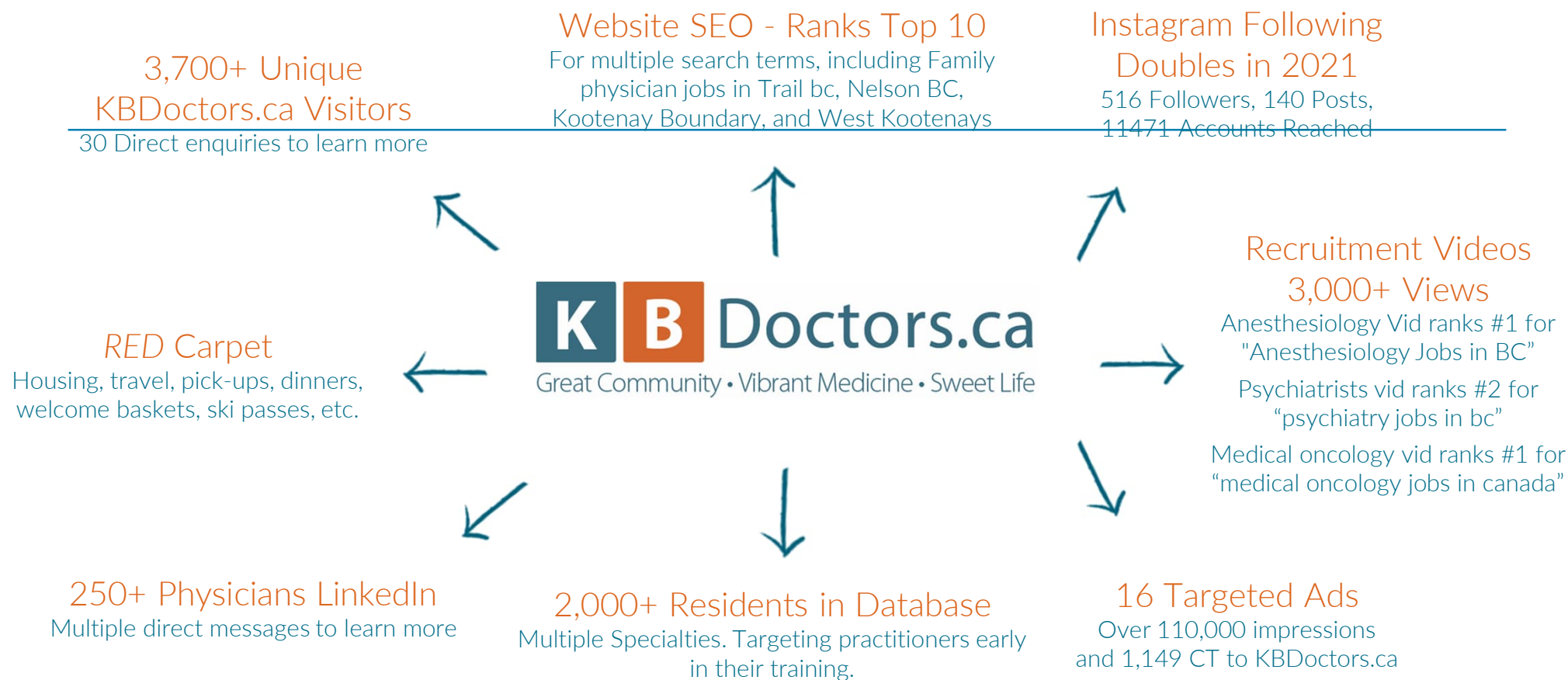
VIDEOS

PAID ADS

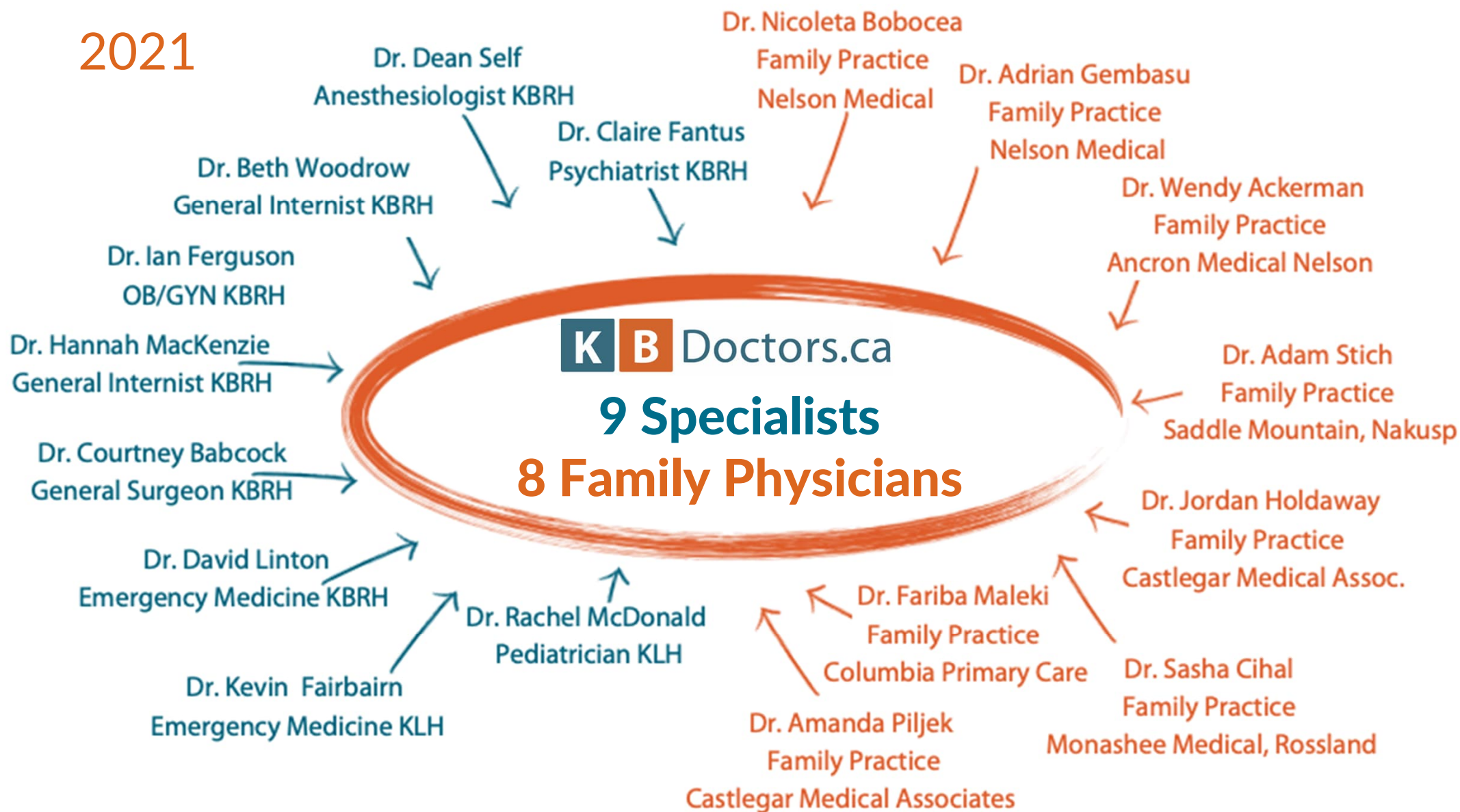
RED CARPET
PROGRAM

JOINT COLLABORATION

2021



2021



Share Your Success

EK Med Net

Success sharing

RECRUITMENT AND RETENTION – Roundtable October 2021

Objectives:

1. Reflect and Collaborate between EK Sites
2. Learn from each others' successes
3. Explore how we could be more strategic as a region to improve physician recruitment and retention



Success sharing

KEY SUCCESS FACTORS

- The Planning Team comprised of staff from across region in diverse roles/areas (PQI, DoFP, MSAs, DoBC)
- Drawing physicians and administrators from across the East Kootenays to share their experiences and recruitment models was very enlightening
- General enthusiasm for a coordinated regional approach to recruitment and future events

KEY CHALLENGES

- Network Participants planning the event 'off sides of desks'
- Keep the momentum with action



Success sharing

OTHER EK MED NET WORK

- EK Med Net online calendar (EK MSS leading)- version 1.0 launched, with plans to grow/expand
- EK Med Net User Guide



Share Your Success

Shuswap Collaborative Alliance

Success sharing

Background

The Shuswap Alliance was formed to create a “one stop shop” where individuals supporting different aspects of healthcare in the region could meet and discuss healthcare ideas and current initiatives. The following two improvement opportunities provided the Alliance to contribute:

1. **Cardiac Rehab:** This really great project had stalled and needed some key people at the table to make decisions and progress the idea toward a sustainable model.
2. **Central Intake:** Physicians were unsure how to navigate their ideas to ensure funding and partnerships. Being uncertain where to submit for funding and the multiply proposal applications resulted in some physicians becoming frustrated.

Success sharing

Details

- **Cardiac Rehab Project:** project evolved when issues were discussed at the Alliance meeting. Outcome: sustainable cardiac rehab program in SLGH
- **Central Intake:** A WG was struck to develop an intake form. Result: an intake page, monitored by the FE PM, enabling physician projects to be directed appropriately. Outcome: template was successful (precise and easy to follow). However, not often used.

Share Your Success

Thompson Medical Alliance

Thompson Medical Alliance

Our success lies the in the KEY CONNECTIONS that may otherwise not be made:

“EVERY DOOR IS THE RIGHT DOOR”

– SEAMLESS, FAST, EFFICIENT PROCESSES THAT LEVERAGE ALL PARTNERS TO SOLVE PROBLEMS

- Access to Psychiatry (IH Quality, PQI, RIHPA, Division)
- Coding (RIHPA/MSA, IH Quality)
- Indigenous Cultural Safety Education - Linkages with RIHPA and QI
- MAiD – Doctors of BC (support), PSP (supports through facilitation cycles), PQI (extended psych funding)
- AUD (Alcohol Use Disorder) – IH Research (ask from IH research partner), Division (FPs who use AUD treatment path), PSP (connection to SOS PSP lead), PQI
- Clozapine Outpatient Clinic – Potential project psychiatry (Doctors of BC, PQI, Division)

Thompson Medical Alliance

INITIAL CHALLENGES

- Ensuring all voices are heard
 - Take time to listen to each other
 - Contribute unique perspectives
 - Speak openly and have thoughtful conversations
- Alliance membership (Who to have at the table)
 - Support inclusion and diversity
 - Reflect on the work we are doing, and identify gaps in membership
- Understanding who we are
 - Set goals and reflect on them to stay the course

Thompson Medical Alliance

MOVING FORWARD

- Feed information both to the public, and our medical community
- Establish a footprint for the integration of the TMA into our workplace cultures
- Utilize connections to broaden audience and to advocate if, and when, necessary
- Create shared learning opportunities
- Continue to grow, and understand each other, and realize opportunities for collaboration

Share Your Success

Vernon Alliance

Success sharing

Background

Projects & initiatives were being developed in their respective funding & organization silos without a method to connect as a regional group

The creation of the Alliance enabled:

- Informing & collaborating about existing & new initiatives
- Avoiding duplication of work
- Connecting within our healthcare region to explore other funding options & program support

Success sharing

Details

- Learning how others support healthcare in the region helps give direction to stalled projects (ex: gender equity survey: MSA linked w/QI); Burrito Day: MSA linked with hospital foundation)
- Discovering what others are working on enables partnering on initiatives (ex: physician wellness: MSA & Division of FP) & broadening opportunities for physicians
- As a central intake for projects, the Alliance makes it easier for physicians to navigate funding sources and streamline applications

Feedback with Tara McClary

One Word Feedback

Summaries and Surveys

Please Visit Our [Survey Monkey Link](#) or
Scan The QR Code Below

