

KEY HIGHLIGHTS: SSC FACILITY ENGAGEMENT WORKING GROUP (SSC FEWG) MEETING: Jun 4, 2026

SUMMARY OF KEY DISCUSSIONS

Status update on **leadership changes**

Quality Improvement Working Group update

FE Knowledge Sharing – **Virtual Symposium and FE Virtual Showcase** update

Doctors of BC **Health Authority Engagement Survey** results and response plan

Overview of the **FE Evaluation 4.0 Survey** results

FE Measures of Performance for the Physician Services Committee

specialists and rural communities. Key improvement ideas from the event included: Strengthening outreach coordination and access, addressing financial barriers, engaging the future workforce, and building a community of practice. Feedback from the event was highly positive and resulted in six rural communities/facilities expressing interest in hosting specialist outreach services and several specialists indicating interest in providing outreach.

FE Virtual Showcase Event *Review and Discussion*: An overview was provided for the FE Virtual Showcase event scheduled for June 10th. The event focussed on recruitment and retention, workplace culture and wellness, patient care and access. Information on promoting the [event](#) was shared to encourage further participation.

MEETING TOPICS AND DISCUSSIONS

LEADERSHIP CHANGES *Status update* Welcome: Dr Paul Murphy is the Doctors of BC Representative for Vancouver Coastal Health, replacing Dr Ka Wai Cheung (FEWG Co-Chair)

QUALITY IMPROVEMENT WORKING GROUP (QIWG) UPDATE *Progress update*: The QIWG provided an update on their recent activities which included: supporting 58 participants in completing the Harvard Adaptive Leadership Course, organizing a Mayo Clinic visit for 25 BC healthcare leaders and completing two days of strategic planning activities. Additional learnings and a summary report will be shared at a future SSC FEWG meeting.

FE KNOWLEDGE SHARING – Virtual Symposium: Supporting Specialist and Rural Outreach Programs *Discussion and debrief*: Highlights were shared from the March 3rd [Virtual Symposium on Supporting Specialist Rural Outreach Programs](#), hosted by Facility Engagement, in collaboration with the Specialists Services Committee and the Joint Standing Committee on Rural Issues project on Improving Rural Access to Specialist Care. The Symposium's aim was to support improving access to specialty care in rural and remote communities through sharing the projects research findings, highlighting resources to support specialist outreach, as well as to provide an opportunity for relationship building between

DOCTORS OF BC HEALTH AUTHORITY ENGAGEMENT SURVEY AND RESPONSE PLANS *Review and discussion*: Provincial results were presented from the 2025 Health Authority Engagement Survey that is administered by the Doctors of BC Advocacy department. Approximately 2,400 physicians completed the survey and results showed that physicians involved in Joint Collaborative Committee (JCC) programs reported higher levels of engagement, value, and influence compared to those with no involvement. Feedback from physicians suggested opportunities to: reduce administrative burden, improve issue escalation and response processes, strengthen physician engagement structures including Health Authority Medical Advisory Committees (HAMACs), enhance medical leadership training and support, and address workplace violence and safety concerns. An engagement response plan is being developed to outline commitments and next steps arising from the survey findings.

PRELIMINARY RESULTS – FE EVALUATION 4.0 SURVEY DATA *Review and discussion*: Early survey findings were presented from the February 2026 survey as part of the provincial program evaluation. Responses were received by over 1,500 medical staff and health authority partners. The response rate was roughly 25%. The survey included psychometrically validated survey instruments

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(MBI HSS MP Personal Accomplishment Subscale, Cal et al. Communication Subscale, Edmonson's Psychological Safety Scale and HSO Worklife Pulse). Results suggest that as familiarity with FE and involvement in the work of the MSA increased, group means for Psychological Safety and Communication also increased. Also, FE familiarity and involvement were significantly associated with levels of agreement across most agreement items: 14 of 18 items for familiarity and 16 of 18 items for involvement were significant at $p < .001$. A more detailed account of survey findings, themes as well as other evaluation administrative data will be forthcoming in the interim evaluation report over the coming months.

FE MEASURES OF PERFORMANCE TO PHYSICIAN SERVICES COMMITTEE (PSC) *Review and discussion:*

FE measures of performance were presented, which align with SSC/JCC work plans and the JCC Quintuple Aim Framework. Measures will be reported through annual outcome dashboards to the PSC. Primary data sources include the FE Evaluation 4.0 survey, Facility Engagement Management System (FEMS) and other Medical Staff Association (MSA) reporting systems that are already in place. In some instances, new data collection methods will be necessary where gaps exist (e.g., the Annual Review will need to undergo some changes for the next reporting year). MSAs will be kept well informed of any subsequent changes.

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