

## KEY HIGHLIGHTS: SSC FACILITY ENGAGEMENT WORKING GROUP (SSC FEWG) MEETINGS: Fall 2025

### SUMMARY OF KEY DISCUSSIONS

Status update on **leadership changes**.

Completion of a strategic exercise to review **Facility Engagement (FE) strengths and future priorities**.

Review of the **Specialist Services Committee (SSC) Initiative Terms of Reference (ToR)** and consultation review.

Review and discussion on the **FE 2026-27 work plan and budget**.

Approval of a revised **Provincial Engagement Framework** and funding.

Discussion on a **Patient Access definition** for FE metrics.

Update from the **Quality Improvement Working Group**.

physician health and wellness, community and belonging, feeling valued, leadership pathways, and opportunities for innovation under the **Provider Experience** domain, and geographic access, team functioning, and cultural safety under the **Patient Experience** domain, as well as a few domains under **Cost and Equity**.

Key themes for FE future priorities included: increased focus on system transformation (collaborative-decision-making) under the **Provider Experience** domain, as well as several domains under **Patient Experience** (patient voice, timely access, continuity across transitions).

The discussion also touched on the challenge of measuring and communicating the success of FE local site-level projects and initiatives, particularly in terms of health outcomes. The FEWG expressed the value of sharing the Joint Collaborative Committee (JCC) Quintuple Aim Impact Framework across MSAs to have a common language for discussing impact. Operationally, the framework will be incorporated into the MSA annual review process, aligning with the goal of demonstrating measurable impact through a unified approach.

### MEETING TOPICS AND DISCUSSIONS

#### LEADERSHIP CHANGES *Status update:*

##### Welcome:

- Ronnie Hamman, FE Director (maternity leave coverage to April 2027)
- Carolyn Rudden, FEWG co-chair from the Ministry of Health (MoH)
- Dr Ka Wai Cheung, FEWG co-chair from Vancouver Coastal Health
- Dr Katey Armstrong, DoBC Provincial Health Services Authority (PHSA) representative
- Jennie Aitken, Island Health representative

##### Farewell:

- Amanda Forward, FE Director (maternity leave)
- Dr Paris Ingledew, FEWG co-chair from PHSA
- Eric Bringsli, FEWG co-chair from MoH

#### FACILITY ENGAGEMENT STRATEGIC EXERCISE *Review and discussion of current program strengths and future priorities:*

The group engaged in an exercise to review and identify **FE current strengths and future priorities across the Quintuple Aim Framework**. Key themes for current FE program strengths included: physician voice,

#### SSC INITIATIVE TERMS OF REFERENCE *Review and discussion:*

The group reviewed the findings from the SSC initiative ToR consultation review. Findings suggested some variability in key governance principles across SSC initiatives working groups. FEWG discussed the ToR for FE specifically – with a focus on confidentiality statements, inconsistencies, membership, roles and appointments. FE ToR are now more closely aligned with wider SSC ToR.

Decision was made to proceed with a new voting membership structure to include voting members from all 6 health authorities, to explore patient partner inclusion in the working group, and the addition of a confidentiality clause to the ToR.

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**DRAFT FE WORK PLAN AND BUDGET** *Review and discussion for 2026-27:* The group reviewed the Physician Services Committee (PSC) mandate letter to the JCCs, regional consultation themes from meetings with FEWG representatives, and the updated SSC strategic plan's three pillars:



### FE Draft Work Plan & Budget

The draft FE work plan and budget was presented, which aims to align with the SSC Strategic Plan and the Memorandum of Understanding on Regional and Local Engagement. The overarching draft FE work plan goals included:

1. Strengthen and improve MSA capacity and capabilities as effective representative structures within the FE MOU Framework
2. Support and enhance regional and provincial engagement
3. Foster MSA and Health Authority collaboration at local, regional and provincial levels
4. Amplify the impact of FE-Funded activities by strengthening connections to existing programs/priorities
5. Highlight the impact of FE as aligned to the quintuple aim and PSC priorities

Focus was made on improving data collection and storytelling to demonstrate FE's role in driving access to quality care at local, regional and system levels. Timelines and next steps were also discussed for the final work plan submission.

**PROVINCIAL ENGAGEMENT FRAMEWORK AND FUNDING:** *Proposal and discussion* A refined Provincial Engagement Framework focused on providing funding for provincial engagement activities that foster MSA and health authority collaboration across health authority regions was discussed. Key highlights of the framework include:

- Proposed provincial engagement projects/activities would be submitted via an application process and approved by FEWG.
- Criteria emphasized engagement in existing initiatives that span across multiple regions.
- Application intake will start in 2026 for the 2026/27 fiscal year

FEWG approved the strategy, application process, criteria, and funding allocation. FE will be operationalizing this new provincial engagement strategy over the coming months.

### PATIENT ACCESS DEFINITION: *Discussion and metrics for FE*

Access driver diagrams were presented for FEWG to create a clear definition of "access" and support meaningful FE metric development, in alignment with the JCC Quintuple Aim Framework.

Members were encouraged to reflect on the diagrams, identify gaps, and several members volunteered to participate in a small working group to further this discussion..

### QUALITY IMPROVEMENT WORKING GROUP: *Update*

The Quality Improvement Working Group (QIWG) will engage Health Authority Co-Chairs, QIWG members, and QI Central in a two-day strategic planning workshop.

FEWG members were invited to share interesting project ideas and participate in Physician Quality Improvement level 1, 2 or 3.

**For more Information:** [engagement@doctorsofbc.ca](mailto:engagement@doctorsofbc.ca)