

**SUMMARY OF KEY DISCUSSIONS**

- JCC Cultural Safety & Humility presentation
- 2022/23 FEI Work Plan
- FEI Program Updates

**CULTURAL SAFETY & HUMILITY (CS&H)**

The Joint Collaborative Committee's CS&H Working Group (WG) provided an overview of **activities and growing resources to support physicians to learn, engage, and take action in their work to create culturally safe care.**

Highlights include:

- **Outreach, connections, and engagement** across BC with local First Nations Communities, Elders, Chiefs, and Residential School survivors.
- **Creation of physician learning opportunities, webinars/training, and experiences:** e.g., Doctors of BC Truth and Reconciliation Ceremony held in Sept 2022; Longhouse Learning Sessions continuing through 2023.
- Sharing **MSA-specific CS&H work.**

**SSC FEWG MEMBERSHIP CHANGES**

Co-chair Ryan Murray thanked departing SSC FEWG members for their contributions: **Dr David Butcher, Dr Dayan Muthayan, Astrid Levelt;** and welcomed **Dr Bourden, Dr Su, Dr Johar,** and **Dr Virani** to the SSC FEWG.

**2023/24 FEI WORK PLAN**

The FEI program presented its **work plan** for submission to the SSC in Jan. 2023. It draws on **wide consultation** with SSC FEWG members, the 2022 FEI program evaluation, physicians, MSA project managers, health authorities, and MSA data.

The work plan **aligns with FEI's overarching strategic goals**, which remain consistent to support MSAs to improve relationships, strengthen their voice, and meaningfully engage with their health authority (HA) on problems and decisions.

**Four key themes** are highlighted in the work plan:

- 1. Continued focus on local relationships and structures:** includes increasing collaboration between MSAs and HAs, with FEI as a supportive enabler for sustainment.
- 2. The evolution of FEI through increased regional relationships and structures:** includes socializing HA organizational priorities and decision-making processes more widely among medical staff, and promoting pathways for MSAs to feed into HA priorities, with measurement for shared priorities.
- 3. Knowledge Sharing (KS):** Sharing experiences and strategies among sites by targeting KS topics of high value; leveraging the Engagement Partners as KS brokers; creating peer-to-peer KS events virtually/ in person; and improving MSA access to FEI data.
- 4. MSA capacity building:** Includes supporting MSA representative structures to engage with one another and HAs by providing provincial supports for MSA project managers and leads for operations and evaluation; supporting CS& H, physician wellness and equity, diversity and inclusion; connecting physicians with training and leadership resources; increasing medical staff access to physician quality improvement (PQI) data; and exploring MSA and division collaboration opportunities.

Strategic Goals	Work Plan Priorities	Metrics
1. Support MSA capacity building within the MOU framework	<ul style="list-style-type: none"> <li>• FE knowledge sharing strategy</li> <li>• Provincial resource development and supports for MSA operations</li> <li>• Explore MSA and Division collaboration opportunities</li> <li>• Explore MSA evaluation needs</li> </ul>	<ul style="list-style-type: none"> <li>• Knowledge sharing milestones</li> <li>• Stakeholder feedback</li> <li>• Provincial FE evaluation</li> <li>• Provincial tracking and analysis</li> </ul>

Strategic Goals	Work Plan Priorities	Metrics
2. Foster MSA-HA local and regional collaboration	<ul style="list-style-type: none"> <li>• FE regional engagement strategy</li> <li>• Leverage FE knowledge sharing</li> <li>• Local and regional engagement structure and process development</li> </ul>	<ul style="list-style-type: none"> <li>• Regional funding spend</li> <li>• Regional annual review and reflection tool</li> <li>• Stakeholder feedback</li> <li>• DoBC HA and FE provincial engagement surveys</li> </ul>

Strategic Goals	Work Plan Priorities	Metrics
3. Coordinate provincial DoBC/JCC supports	<ul style="list-style-type: none"> <li>• Physician wellness</li> <li>• Physician recruitment and retention</li> <li>• Indigenous cultural safety and humility</li> <li>• Foundational physician leadership training</li> <li>• QI and data navigation support exploration</li> </ul>	<ul style="list-style-type: none"> <li>• Stakeholder involvement, utilization and feedback</li> </ul>

## FACILITY ENGAGEMENT 3.0

Pending ratification of the new physician master agreement (PMA), there are **fresh opportunities to strategize and re-socialize FEI** to support collaboration and problem solving around some of the relevant, current issues; building on the foundation of engagement, trust and relationships established by MSAs and HAs.

## SRRP PROCESS 2023 - MODIFICATIONS

The FEI program shared **modifications to improve the upcoming SRRP process**, based on feedback from last year's participants and process. Two key changes include:

- 1) The **incorporation of self- assessment statement ratings into FEMs** with a post claim survey (required for FEI program reporting).
- 2) **The separation of strategic planning activities from the SRRP**, so that sites can plan when timing works best for them (whether with the SRRP process or another time). Updates to strategic plans can now be submitted with the site's year-end financials.



## FEI KNOWLEDGE SHARING ACTIVITIES

The FEI Knowledge Sharing Committee shared some updates:

- **Partnering with the newly established physician Wellness network**, and physician wellness round table.
- **The alignment of themed knowledge sharing newsletters and accompanying peer to peer round tables**, e.g. CS&H theme in Sept/Oct. 2022.
- An update about the **web portal** to host knowledge sharing content.

## FEI DATA COLLECTION STRATEGY

Following a key recommendation from the FEI 2022 Provincial Evaluation, 42 stakeholders participated in **consultations on data usage and data needs in FEI** to better support their work, and track and communicate the impacts of FEI.

### Stakeholder Feedback:

- Stakeholders **want access to wide variety of data sources, knowledge, and resources.**
- **MSAs are collecting their own data** to track and monitor their engagement activities, identify opportunities for improvement, inform strategic planning, and support knowledge translation with their members.
- **Stakeholders are also using health authority data** to support projects, but face access challenges.
- Stakeholders view the **FEI knowledge sharing strategy, resources, and SRRP** as helpful and useful.
- Stakeholders want **additional support to monitor and evaluate FEI at the local level.**

### Opportunities for FEI to explore:

- Leverage the current FEI annual review and knowledge sharing process.
- Re-socialize/communicate the impacts and value of the FEI.
- Make FEI data, tools, and resources more accessible to all stakeholders via SEAT, web portal, engagement partners.
- Strengthen the FEI Evaluation survey with more relevant and FEI-specific questions to better capture the outcomes of the initiative.
- Explore and assess local MSA evaluation needs.