

## Kelowna General Hospital Interior Health

# Kelowna General Hospital Physicians Society Strategic Plan for Enhancing Facility-Based Physician Engagement

*“Without fully engaged  
physicians, no healthcare  
organization will be able to  
achieve its vision of  
providing outstanding  
care.”*

*Graham Lowe*

# Strategic Plan for Enhancing Facility-Based Physician Engagement

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## Table of Contents

Executive Summary .....	3
Introduction .....	5
Background .....	5
Guiding Principles .....	7
Values.....	7
Vision .....	7
Mission .....	7
Current State Analysis .....	7
Strategic Planning .....	8
Next Steps.....	9
Evaluation .....	10
Conclusion .....	10

## Table of Figures

Figure 1: Governance Model.....	6
Figure 2: KGHPs Working Group Representation.....	6
Figure 3: Interior Health Physician Engagement Data .....	7

## Table of Appendices

APPENDIX A: KGHPs Working Group Departmental Representation.....	12
APPENDIX B: KGHPs Budget 2016/17.....	13

# Strategic Plan for Enhancing Facility-Based Physician Engagement

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## Executive Summary

The Kelowna General Hospital Physicians Society (KGHPS) is pleased to have the opportunity to work with the Doctors of BC Specialist Services Committee to participate in the facility-based physician engagement initiative. The Society has incorporated and developed a governance structure to plan, implement and evaluate initiatives designed to enhance physician engagement by providing them with a meaningful voice to influence patient care and their work environments. Guided by a vision, mission and values, the KGH Physicians Society has developed a strategic plan to enhance physician engagement. Effective physician engagement is an important strategy for health system reform and the success of many improvement initiatives related to quality, patient safety and value rests on the active engagement of doctors.

The strategic goals set out by the KGHPS to advance physician engagement at Kelowna General Hospital are as follows:

1. Enhance and improve communication between physicians, departments, and KGH administration that will foster increased physician engagement.
2. Increase meaningful physician engagement and influence on health care delivery within KGH.
  - 2.1. Support physician and departmental led quality improvement projects and ideas.
  - 2.2. Partner with KGH and Health Authority leaders to identify formal opportunities to engage in planning and operational decision making.
  - 2.3. In collaboration with KGH leadership, seek opportunities to supplement existing structures and processes to enhance physician input on operations impacting them and their patients.
  - 2.4. Build physician capacity in leadership skills through access to ongoing professional development and education.
3. Improve quality of care for patients, clients and families through ongoing continuous quality improvement (CQI).
  - 3.1. Using the Specialist Services Committee prioritization framework, select quality improvement projects identified through the medical staff processes to advance improvements in quality patient care.
  - 3.2. Support initiatives to enhance the measurement of quality within clinical care.
  - 3.3. Fund and support physician participation in facility based quality improvement structures.
  - 3.4. Build physician capacity in CQI skills through access to ongoing professional

development and education.

4. With support from the Health Authority, explore opportunities to improve and enhance system performance through use of technology.
  - 4.1. Partner with the Health Records Department to identify QI opportunities such as rapid medical record documentation.
  - 4.2. With support of IMIT, seek opportunities to use technology to improve the flow of patient information among providers and at transition points.
  - 4.3. Safe and secure inter-physician communications.

The KGHPS will be developing a detailed work plan to operationalize the strategic plan and will be evaluating progress on a regularly scheduled basis against established performance measures. Furthermore a communications plan will be developed and implemented to increase awareness and understanding about this initiative among physicians and stakeholders. This plan will be aligned with the Specialist Services Committee template.

# Strategic Plan for Enhancing Facility-Based Physician Engagement

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## Introduction

Increasingly there are rising demands for enhanced performance and accountability within the healthcare system due to rising expectations from the public, from healthcare providers and from the governments who fund the system. As integral members of the healthcare team physicians play a major role in the overall quality of health care. As such, everyone agrees that their active participation is fundamental within the quality journey.<sup>1</sup> Physician engagement is an important strategy for health system reform, and internationally, the success of many improvement initiatives related to quality, patient safety and value have been seen to rest on the active engagement of doctors.<sup>2</sup> A comprehensive approach to physician engagement builds on the participation of physicians in formal leadership roles. It permeates throughout the organization as demonstrated by physicians who are actively engaged with enthusiasm and commitment on multiple healthcare teams and who are contributing to initiatives that are meaningful to them and drive improved quality of care.

Of note, the Facility-Based Physician Engagement initiative, undertaken by the Specialist Services Committee (SSC) with Doctors of BC, is guided by the Institute of Healthcare Improvement's "Triple Aim" framework. This framework describes an approach to optimizing health system performance that simultaneously pursues three dimensions:

- Improving the patient experience of care;
- Improving the health of populations; and,
- Reducing the per capita cost of health care.

## Background

The physician engagement initiative emerged from the 2014-2019 BC Physician Master Agreement. The goal of this fund was to invest in initiatives to strengthen relationships with physicians and to advance opportunities to enhance physician engagement within the healthcare system. In 2014, a Memorandum of Understanding (MOU) was signed between the BC Ministry of Health, six (6) provincial Health Authorities and Doctors of BC to support improvement initiatives designed to have a positive impact on physician engagement, process improvement and leadership development. The Specialist

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<sup>1</sup> W. Nicklin. Accreditation Canada (2012). Physician Engagement. Quantum Quarterly, 4(3), p. 3.

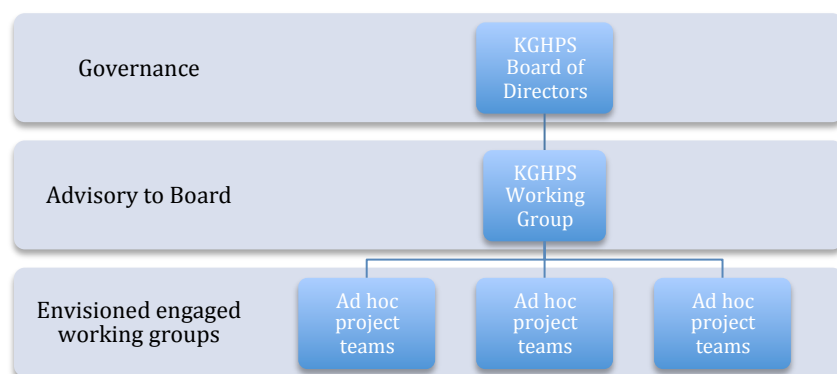
<sup>2</sup> CFHI Final Report. Edited by Lori Anderson. "Exploring the Dynamic of Physician Engagement and Leadership for Health System Improvement". P.7.

Services Committee of Doctors of BC provides oversight to the Facility-Based Physician Engagement fund.

In March 2016, with support from Interior Health’s Executive Medical Directors, Drs. Mike Ertel and Ron Collins, Dr. Bruce Povah, President of the KGH (Kelowna General Hospital) Medical Staff applied to the Specialist Services Committee of Doctors of BC for consideration that KGH become a site under this physician engagement initiative. The response was positive and start-up funds were received.

In alignment with the MOU specifications, the physicians at Kelowna General Hospital formed the KGH Physicians Society (KGHPS). The Society reflects the membership of the larger Medical Staff Association, however only physicians are voting members. The Society elected its slate of officers and established a governance structure to support planning, decision-making and evaluation (Figure 1). Governance is provided by the full Board of Directors, and input is provided by the KGHPS Working Group that represents all medical departments within the hospital (Figure 2; and see Appendix A for membership). The KGHPS works closely with the Doctors of BC, Specialist Services Committee and is supported by an Executive Director, KGHPS Facility Engagement and the SSC Facility Engagement Lead. The Society was incorporated in September 2016 and has prepared an annual budget (Appendix B).

**Figure 1: Governance Model**



**Figure 2: KGHPS Working Group Representation**

KGHPS Working Group Medical Department Representation			
Medicine	Surgery	Anesthesia	OB/GYN
Pediatrics	Psychiatry	Emergency	Imaging
Lab Medicine	Cardiac Sciences	Family Practice	Hospitalists

## Guiding Principles

### Values

- Patient & Family Centred
- Collaborative
- Continuous Quality Improvement
- Integrity, Respect, Trust
- Compassion

### Vision

Fully engaged and supported physicians with a meaningful voice in improving quality patient centred care, their working environment and the health system.

### Mission

To support the improvement of physician engagement at KGH through a variety of means to ensure that medical staff have opportunities to participate collaboratively to express their views, contributing to the development, prioritization and achievement of Interior Health plans and initiatives with the ultimate goals being improved quality of care for patients coupled with an improved working environment for the facility based physicians.

## Current State Analysis

In February 2016, the Doctors of BC conducted a benchmark member engagement poll. With a 20% response rate, the survey data are valid nineteen (19) times out of twenty (20) with a margin of error of +/- 1.76%. On some of the key statements of engagement, physicians within the Interior Health Authority rated their experience lower than those of their counterparts from other Health Authorities (Figure 3). Discrete data was not available for Kelowna General Hospital, however the overall aggregate data provides a benchmark to be used as a starting point on this journey of enhancing physician engagement.

**Figure 3: Interior Health Physician Engagement Data**

Benchmark Survey Statement	Mean Score	IH Score
34.I have meaningful input into changes affecting my practice environment.	2.71	2.61
37. This organization values physician's contributions.	2.90	2.71
42. I am satisfied with this organization as a place to practice medicine.	2.97	2.82

The KGHPs leadership acknowledged they believe they are starting from a relatively good place on their journey to enhance facility-based physician engagement. Physician recruitment and retention is high and a positive working relationship exists with Site Administration. There are however a number of opportunities to improve the work environment and engage physicians in a meaningful way in quality improvement initiatives aimed at improving quality and the patient experience.

## Strategic Planning

The KGHPs Working Group, under the direction of the Board, took the lead in beginning to develop a needs assessment within their respective departments. In Fall 2016, each Medical Department held retreats, with the support from the start-up funds. The ensuing feedback and input has provided a foundation for understanding the strengths and opportunities for improvement and enhanced engagement. The process itself was recognized as a great first step for bringing providers together and engaging with them on this journey.

There were four key common themes emerging from the discussions held at the departmental retreats: The first, as already mentioned, was the positive feedback associated with the process itself and bringing physicians together; the second was the opportunity to improved communication both among physicians themselves and within healthcare teams and with hospital administration; thirdly, it was recognized that there were opportunities to be engaged in quality improvement initiatives linked to enhanced use of technology for better outcomes; and lastly, the opportunity to improve the quality of the patient experience.

The following strategic goals were developed to guide KGHPs activity over the next three years to advance physician engagement. The overarching goal is to give KGH facility-based physicians a meaningful voice in improving patient care and their work environment and to work in partnership with the hospital and health authority on issues that directly affect them.

- I. Enhance and improve communication between physicians, departments, and KGH administration that will foster increased physician engagement.
- II. Increase meaningful physician engagement and influence on health care delivery within KGH.
  - a. Support physician and departmental led quality improvement projects and ideas.
  - b. Partner with KGH and Health Authority leaders to identify formal opportunities to engage in planning and operational decision making.
  - c. In collaboration with KGH leadership, seek opportunities to supplement existing structures and processes to enhance physician



- input on operations impacting them and their patients.
  - d. Build physician capacity in leadership skills through access to ongoing professional development and education.
- III. Improve quality of care for patients, clients and families through ongoing continuous quality improvement (CQI).
- a. Using the Specialist Services Committee prioritization framework, select quality improvement projects identified through the medical staff processes to advance improvements in quality patient care.
  - b. Support initiatives to enhance the measurement of quality within clinical care.
  - c. Fund and support physician participation in facility based quality improvement structures.
  - d. Build physician capacity in CQI skills through access to ongoing professional development and education.
- IV. With support from the Health Authority, explore opportunities to improve and enhance system performance through use of technology.
- a. Partner with the Health Records Department to identify QI opportunities such as rapid medical record documentation.
  - b. With support of IMIT, seek opportunities to use technology to improve the flow of patient information among providers and at transition points.
  - c. Safe and secure inter-physician communications.

## Next Steps

There were a number of potential initiatives proposed by the medical staff at their departmental retreats. The immediate next step for the KGHPS Working Group will be to refine the proposals and review them using the SSC prioritization framework. Projects will be selected to move forward based on the degree to which they meet the criteria of supporting physician engagement, improving the workplace environment, securing stakeholder support, improving quality of patient care and improving costs.

The KGHPS Working Group and Board of Directors will develop, implement and monitor a work plan with performance measures and clear accountability to support successful achievement of this strategic plan.

It will be important for the KGHPS to develop a communications plan to support awareness and the understanding of facility-based engagement at the Site. Physicians and site leaders need to clearly understand this initiative and the opportunities and expectations for involvement.

## Evaluation

Doctors of BC have engaged a team of experts from the University of British Columbia to conduct a formal evaluation of this facility-based physician engagement initiative. This evaluation plan assesses two primary phases of this initiative. The first phase will evaluate the preliminary work being conducted to move interested sites to the stage of incorporation and fund transfer. The second phase will evaluate the implementation and evaluation of prioritized specific strategies implemented to increase physician engagement. The KGHPS will participate fully in this evaluation process.

On site at KGH there will be ongoing qualitative and quantitative evaluation on the status of the performance measures for each strategic goal and objective. Progress reports will be reviewed at both the KGHPS Working Group and Executive meetings. In addition, there will be an evaluation component built into each project selected to move forward at the hospital. Furthermore, at a systems level, there will be another physician engagement survey conducted between October 1, 2017 and March 31, 2018 to measure engagement under the terms of the MOU.

## Conclusion

The KGH Physicians Society is pleased to have the opportunity to work with the Doctors of BC Specialist Services Committee to participate in the facility-based physician engagement initiative. The Society has incorporated and developed a governance structure to plan, implement and evaluate initiatives designed to enhance physician engagement by providing them with a meaningful voice to influence patient care and their work environments. Guided by a vision, mission and values, the KGH Physician Society has developed a strategic plan to enhance physician engagement. Effective physician engagement is an important strategy for health system reform and the success of many improvement initiatives related to quality, patient safety and value rests on the active engagement of doctors.

KGHPS Departmental Representation			
Department	Department Head	Department Delegate(s)	Email
Anaesthesia	Dr. A. Jackson	Dr. Vance Beck	Vance.Beck@interiorhealth.ca
Diagnostic Imaging	Dr. W. Tonogai	Dr. Wayne Tonogai	Wayne.Tonogai@interiorhealth.ca
Emergency Medicine	Dr. D. Harris	Dr. Devin Harris	Devin.Harris@interiorhealth.ca
Family Practice	Dr. B. Lewke	Dr. Jan McIntosh	Jan.McIntosh@interiorhealth.ca
Laboratory Medicine	Dr. M. Moss	Dr. Michael Moss	Michael.Moss@interiorhealth.ca
Medicine	Dr. G. McCauley	Dr. Giulio Dominelli	Giulio.Dominelli@interiorhealth.ca
Obstetrics & Gynaecology	Dr. S. McGregor	Dr. Sumathi McGregor	Sumathi.McGregor@interiorhealth.ca
Pediatrics	Dr. N. Ranchod	Dr. Emily Budd	Emily.Budd@interiorhealth.ca
Psychiatry	Dr. J. Chin	Dr. Jeffrey Douziech	Jeffrey.douziech@interiorhealth.ca
Surgery	Dr. M. MacLeod	Dr. Chris Baliski	baliski@me.com
Hospitalists	Dr. S. Smith	Dr. Glynn Jones	Glynn.Jones@interiorhealth.ca
Cardiac Sciences	Dr. G. Fradet	Dr. Frank Halperin	Frank.Halperin@interiorhealth.ca
Directors			
Department		Name	
Surgery		Dr. Bruce Povah - President	
Surgery		Dr. Michael Humer – Vice-President	
Neurology		Dr. John Falconer – Secretary/Treasurer	
Family Practice		Dr. Jan McIntosh – Member-at-Large	
Family Practice		Dr. Cara Wall – Member-at-Large	
Chair of Working Group			
Department		Name	
Neurology		Dr. John Falconer	

#### **APPENDIX A: KGHPA Working Group Departmental Representation**

## APPENDIX B: KGHPS Budget 2016/17

### KGH Physicians Society 2016/17 Budget

<b>Revenue:</b>					
	Annual Facility Engage Fund				500,000
<b>Expenses:</b>					
Monthly Meetings:					
	Exec	4 x exec x3hrs	881		
	Work-Group	11 x 2 hrs	3,232		
	Meals	117 * 20	340	4,453	53,442
	Bi-Annual Departmental Retreats			67,548	67,548
Office & Employees (inc. Benefits)					
	Committee Prep & Sessionals (20hrs/mon)				35,258
	Staff	1x Exec assistant	80,000		
	Office Expenses, equipment, Cell		25,000		105,000
	Project Expenses:				210,000
	Legal Expenses				2,000
	Administratiton & Contingencies				15,000
<b>Net Annual Surplus/Deficit</b>					<b>11,752</b>

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