**Island Health and South Island MSA Collaboration**

**Fall/Winter 2023-24**

*The noted Progress to Date is as of Sept 2023. For Island Health topics, the progress is based on the MSA’s understanding only.*

***What one change would make senior leaders’ decision making more transparent to physicians?***

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| *Goal/Action* | *Progress to Date* | *Next steps* |
| **In-person presence of and connection with senior leaders** |
| **MSA** - Continue to invite senior leaders to South Island MSA General Meetings, Special Meetings, networking and social events. | Invitations have been sent to CEO, VPs, and MAA for upcoming MSA meeting. AGM invitations to be sent by end of September. | Once 2024 meetings schedule has been set, invitations will be sent for the year. |
| **MSA** - Create opportunities for senior leaders to connect with Medical Staff. Offer one-on-one tours of departments, led by a member of the South Island MSA executive. | *Not yet started* | MSA Executive members to be polled for availability for department tours. |
| **Island Health** - Ensure at least one senior leader attends South Island meetings and events. | Senior leaders attended the annual BBQ and the Sept 2023 MSA meeting. | MSA extend invitations to Fall/Winter 2023 events and all 2024 meetings. |
| **Island Health** - Have conversations with front-line staff and Medical Staff when visiting departments to learn about their successes and challenges. Consider this information in your decision-making. | *Not yet started* | *Pending invitations* |
| **Island Health** - Encourage long service in administrative leadership roles. | *Has always been the case, no update on additional actions taken.* |  |
| **Share and receive information in a thoughtful and comprehensive way** |
| **MSA** - Continue to amplify Island Health messaging on our website and through our newsletters. | IHealth monthly updates, Island Health memos, events and opportunities are included regularly. | Create direct links when new MS website is created. |
| **MSA** - Provide funding to identified South Island physicians who are available to give thoughtful, front-line worker feedback on Island Health communications.  | Funding has always been available, but with little uptake. Availability of funding confirmed with Medical and Academic Affairs. | Monitor uptake. |
| **Island Health** - Allow two-way communication during Medical Staff town halls: Move from ‘Inform’ to ‘Involve’. | Island Health is taking an intentional pause to improve the Medical Staff townhalls. Two-way communication is intended for the re-launch of these events.  |  |
| **Island Health** - Develop a process that engages Medical Staff in clinical and relevant administrative decisions.  | CGII is in progress. Other processes under development. |  |
| **Island Health** - Communicate Island Health’s challenges and concerns with Medical Staff: Sharing problems will help to build trust. | In progress |  |
| **Island Health** - Streamline and simplify messaging for the Medical Staff audience. | The Medical Staff Bulletin has been revamped with a more accessible setup and clearer language. | Adapt based on feedback received. |

***What one change would make your facility an even better place to practice medicine?***

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| *Goal/Action* | *Progress to Date* | *Next steps* |
| **Physical, Human, and System Improvements**  |
| **MSA** - Facilitate the engagement of Victoria Hospitals Foundation and the South Island Medical Staff to identify gaps in equipment. Fund physician engagement to develop new equipment processes. | Not yet actively started, though connections exist between VHF, the MSA, and individual physicians. Victoria Hospitals Foundation is presenting at the Oct 2 Working Group meeting about funding sources. | Formalize this relationship to develop processes. |
| **MSA** - Amplify health authority-led improvement work through our regular communications with South Island Medical Staff to ensure comprehensive participation. | MSA is ready to share information about CGII, IHealth, and other improvement work. |  |
| **MSA** - Work collaboratively to improve Medical Staff onboarding.  | An update to the Medical Staff Lists has been requested (include Temporary and Locum physicians).  | Pending Island Health readiness to discuss onboarding. |
| **Island Health** - Connect directly with us when you have questions about what’s happening at Royal Jubilee and Victoria General Hospitals. | In progress |  |
| **Island Health** - Acknowledge to the Medical Staff when there are problems.  | In progress |  |
| **Island Health** - Through policy and leadership practice, encourage all members of the care team to work to top of scope. | In progress |  |
| **Island Health** - Improve Medical Staff onboarding.  | *Not yet started but a priority.* |  |

***What one change would make the biggest difference to physicians’ physical safety at Royal Jubilee Hospital and Victoria General Hospital?***

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| *Goal/Action* | *Progress to Date* | *Next steps* |
| **Physical Improvements and Education Opportunities** |
| **MSA** - Amplify Violence Prevention training, violence reporting processes, and debrief opportunities to Medical Staff. | Messaging has been shared with Medical Staff through newsletters and the website.  | Awaiting further communications. |
| **MSA** - Host a South Island Medical Staff meeting for Island Health to engage on Occupational Health and Safety topics with membership. | *Not yet started.* | Determine best Island Health participants and date. |
| **Island Health** - Prioritize Violence Prevention training (including simulations) for all Medical Staff. | In progress – [register here](https://medicalstaff.islandhealth.ca/violence-prevention) |  |
| **Island Health** - Implement a clear violence reporting process (which includes acknowledgement of submission and debriefing) for Medical Staff, embedding this information into the Violence Prevention training and ensuring ongoing reminders about how to report a violent incident.  | In progress.  | Efforts are being reported through the Island MOA Working Group. |
| **Island Health** - Consider ergonomics in all retrofits, new builds, and capital purchases. | *No information* |  |

***What one change would make the biggest difference to physicians’ psychological safety at Royal Jubilee Hospital and Victoria General Hospital?***

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| *Goal/Action* | *Progress to Date* | *Next steps* |
| **Optimize Existing Structures** |
| **MSA** - Educate membership on an ongoing basis about the Medical Staff Rules and the disciplinary process. Ensure Peer Supports are made available to every member who requests one. | Information is shared through the New Physician Welcome email. Peer supports are assigned as requested. | Re-share MSR information in upcoming newsletter. |
| **MSA** - Amplify messaging about the importance of PSLS and its use. | *Not yet started.* | Source information from Island Health. |
| **MSA** - Co-create a culture that encourages reporting, speaking up, and psychological safety. | Active participation on the Medical Staff Respectful Workplace Working Group, with recommendations set to come Dec 2023.  | Plan dissemination of report to all South Island divisions. |
| **MSA** - Encourage physician groups to consider alternate resourcing models. | Funding has been offered to departments to review their internal staffing models. Little uptake. | Continue to fund division-specific engagement work through applications to the WG. |
| **Island Health** - Ensure that fair process is applied consistently in cases of disciplinary review. Consider alternative frameworks for discipline. Upskill Medical Leaders in giving feedback and EMSS processes. | Suggested updates to the disciplinary process are being made through the Medical Staff Respectful Workplace Working Group.  | Report is expected December 2023. |
| **Island Health** - Strengthen the PSLS system, processes, and follow-up. | In progress |  |
| **Island Health** - Co-create a culture that encourages reporting, speaking up, and psychological safety. | In progress |  |
| **Island Health** - Consider new models of Medical Staff deployment that support cross-coverage.  | No information |  |