

Medical Staff Forum Recap

On July 3, over 90 participants joined a virtual Medical Staff Forum, hosted by Dr. Ben Williams, Vice President Medicine, Quality, Research and CMO. Special guest Kathy MacNeil, CEO and President, was in attendance to discuss Island Health's Better Care, Better Value Initiative.



Thank you to all medical staff who attended the Forum and engaged with Slido in advance. Your participation and engagement are vital in shaping future Forums. Additional agenda items on July 3 included: a population health update focusing on measles, an update on the Medical Leadership Strategy, and a Q&A. Medical staff who were unable to attend the event can view the presentation deck HERE. The next Medical Staff Forum takes place on Teams, on Tuesday September 9, 7.30-8.30am—save the date! Agenda items to follow.

Slido FAQ

Based on strong medical staff engagement, we have compiled responses to three key questions from the July 3 Forum Slido:

Q1. Is there a plan to merge all health authorities? It will save a lot of cash with one CEO for the entire province of only 5 million population.

Response from Jen Morgan, Director, Internal & Leadership Communications:

Any decision to amalgamate health authorities in B.C. rests with government. While findings from the provincial review of health authorities currently underway will shape recommendations and changes throughout the health system, the regional health authority model is essential to health-care delivery that is connected and responsive to the needs and priorities of local communities and the populations receiving services. Collapsing or merging the regional health authorities is not under consideration as part of the review.

Q2. Island Health is consistently poor in the annual Health Authority Engagement Survey. What are 3 novel things you are doing for 2025/2026 to address this?

Response from **Dr. Keith Menard, Executive Medical Director, Medical Staff Governance**:

We received the last survey results in February 2024. It was clear from the results that Island Health needed to take a new approach to address the issues raised. As a starting point, we spent several months directly engaging with medical staff, region-wide, to hear their concerns and note their thoughts. From these engagement sessions, we created a full list of actions.

Our team also acknowledged that there needed to be improvements in documenting, publishing, and circulating the work that is being done to address this feedback. As a result, a <u>Medical Staff Priorities</u> Intranet webpage was developed, where work is updated quarterly. This work is also reported back to the Communication & Transparency Steering Committee, which meets bi-monthly and includes Medical Staff Association (MSA) representation. For quick consumption, the most recent top 10 actions update is accessible on the Intranet here.

Progress has been made in key areas identified as important to medical staff, such as including HAMAC highlights and minutes in the monthly medical staff Bulletin, the launch of the medical leader directory for transparency in leadership, and enhancements to the medical leadership structure; but more work is still to be done. We will continue to engage MSAs on this progress for continuous feedback. For more information, please connect with Alanna Black, Director, Partnerships & Communication.

Q3. Will UPCCs ever be moving to walk-in model? It's odd that ER is come-one-comeall, but urgent care can set limits.

Response from **Dr. Leah MacDonald, Executive Medical Director, Primary & Community Care Services:**

UPCCs continue to refine their model to best serve our population's urgent and primary care needs, in the context of historically low rates of patient attachment to a family physician or nurse practitioner. UPCCs will soon be implementing a new access model that will shift from primarily a "first come, first served" model to one that prioritizes appointments for patients with the most immediate needs based on an RN focused assessment. Phone will remain the recommended access point with some capacity for "walk-in". It is anticipated that the new system will reduce avoidable emergency department presentations by increasing access to those with the most urgent needs. At the same time, UPCCs will continue to balance this with some access for less urgent issues for patients without a primary care provider.

A Fond Farewell to Dr. Keith Menard

This month, Island Health bids a fond farewell to Dr. Keith Menard. Dr. Menard will be leaving his role as Executive Medical Director, Medical Staff Governance, having accepted the role of Territorial Medical Director with Northwest Territories Health and Social Services Authority (NTHSSA). In this role, Dr. Menard will be providing strategic direction to all health and social programs for the territories, as well as governance oversight for all medical staff.



Dr. Menard joined Island Health in 2004 as a consultant pediatrician. As a medical leader, Dr. Menard has been a driving force behind several key initiatives within the authority. As the EMD for Medical Staff Governance, he has been leading work to redesign our medical leadership structure, to redefine our approach to respectful workplace concerns, and to improve engagement and open communication with medical staff across the region. As former Department Head and Medical Director, Dr. Menard created the first departmental policies for governance and privileging, as well as our first departmental medical staff human resource plan. Through his work with HAMAC, Dr. Menard created the Medical Education Resource Committee to better support the educational needs of our medical staff, and our first education schedule for medical staff. Dr. Menard always maintained a thoughtful approach to the complexities of governance and the nuances of medical

leadership. The legacy of his work in service to medical staff will be remembered for years to come.

Those who work closely with Dr. Menard know that his kindness, expertise, and collaborative nature extend well beyond his clinical work. He has been an incredible asset for Island Health—our colleagues at NTHSSA are gaining an exceptional leader. Please join us in thanking Dr. Menard and wishing him well in his new role.

HAMAC Highlights

The Health Authority Medical Advisory Committee (HAMAC) meets on the second Thursday of every month. Full meeting minutes can be accessed on the Intranet HERE.

In addition to regular business during HAMAC's June 2025 meeting, the Committee discussed:

- The New MPCC Chair
- Department of Medicine—Update on Division of General Internal Medicine
- In-Patient MRP Focus Group
- New Medical Leadership Project
- Departmental Reporting—Emergency Medicine

Welcome NEW Medical Leaders



New Public-Facing ED Wait Times Webpage Launched

Island Health has launched a new <u>public-facing webpage</u> providing estimated Emergency Department (ED) wait times for the region's 8 major hospital sites. By offering a clearer picture of wait times and other available services, it helps ensure patients with non-urgent health needs can find the right care at the right time. This initiative is part of Island Health's ongoing

Dr. Rachel Kroeker, Medical Lead, Emergency, Cowichan District Hospital

Also welcoming...

Dr. Bradley Wills, Medical Lead, Anesthesia, West Coast General Hospital

efforts to improve access to care and reduce unnecessary strain on EDs. For more information about the resource, please see THIS Intranet page.





BC Health Quality Awards 2026, nominations OPEN

Each year, the BC Quality Awards celebrate the individuals and teams whose outstanding contributions, innovation and leadership are making a difference in health care across British Columbia. Learn more and submit your nomination **HERE**. Deadline for nominations is September 5, 2025.

Cowichan Emergency Physicians Retreat Success

With funding support from the Rural Continuing Medical Education (RCME) Community Program and Cowichan District Medical Society (CDMS), CDH emergency physicians recently participated in a working retreat. The day created space for collaborative learning, care planning, team connection and wellness. For more about the day's agenda, see the highlights **HERE**.





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