

Application Form Question Summary: Facility- or Community-Based Specialist or Family Physician (with privileges and active affiliations with Island Health)

Note: These are the questions from the application form only – to submit your application, you will need to submit your answers through the digital [Cohort 10 Application Form](#) by **March 7, 2025**.

*Required

Applicant Details
1. Full name*
2. Email address*
3. Secondary email address (if applicable)
4. Assistant’s email address (if applicable)
5. Phone number*
6. Facility or Community you practice in*
7. Designation*
8. Specialty or Area of Practice*
9. Do you anticipate your QI project will be facility-based, community-based, or both?*
10. Please describe any formal medical leadership roles you hold in Island Health or the Community setting.
Motivations and Expectations
11. What (if any) previous Quality Improvement experience and/or formal education do you have?*
<p>Select all that apply:</p> <ul style="list-style-type: none"> • PQI Level 1 training (IHI Open School Q101, Q102, Q103 and Dr. Berwick’s video) • PQI Level 2 training (Island Health 1-2 day PQI Fundamentals Training) • Physician Leadership Program (PLP) at the Sauder School of Business • None of the above • Other:
12. What are your top 3 reasons for applying to the PQI Level 3 Cohort training?*
13. How might you incorporate QI into your clinical work or future career plans?*
The Problem or Gap in Care
14. What is the patient-centered problem or gap in care that you want to address through your QI project?*
<p>A QI project is all about testing a number of different ideas/approaches to solve a problem that is specific to your local experience and team. It needs to be a solvable problem, but there’s no need to have or know a solution.</p> <p>Tip: Outline what the issue is, who it involves, where it occurs, and what impact it has.</p>
15. How do you know that this is a problem or gap in care?*
<p>Do you have documented patient feedback? What data have you accessed (or have access to) to understand this problem? Who else has identified that this is a problem?</p> <p>Application Selection Criteria include:</p>

<ul style="list-style-type: none"> Does the applicant describe potential to improve healthcare quality in a measurable way?
<p>16. Why is this problem or gap in care important to your patients and/or your area of work?*</p> <p>Applicant Selection Criteria include:</p> <ul style="list-style-type: none"> Is there a focus on improving dimension(s) of quality from a systems' perspective (as per the BC Health Quality Matrix)?
<p>17. List all team members or key partners who could help you address this gap in care.*</p> <p>Applicant Selection Criteria include:</p> <ul style="list-style-type: none"> What is the aptitude for building and participating in teams?
<p>Sponsorship and Alignment</p> <p><i>We require that each QI project has at least one specific operational leader who specifically supports or 'sponsors' the project.</i></p> <ul style="list-style-type: none"> <i>Operational leaders/sponsors are directly responsible for the staff you need to involve in the QI project or hold other resources (e.g., equipment, technology, supplies) key to the success of the project.</i> <p>In a community clinic or individual practice, this is usually an Office Manager or other similar role.</p> <p>Any project taking place within Island Health, this is usually a Coordinator or Manager who can make local staffing and budget decisions.</p>
<p>Who have you identified as your operational leader/sponsor?</p> <p>18. Full name*</p>
<p>19. Email</p>
<p>20. Position/Role</p>
<p>21. Describe your connection or level of engagement with this operational leader/sponsor.*</p> <p>Select all that apply:</p> <ul style="list-style-type: none"> I haven't ever been in contact with this person I have been in contact with this person prior to my interest in PQI I have had a conversation with this person about my interest in leading a QI project in the area they support I am not sure this is the right operational leader/sponsor for this QI project and need some direction Other:
<p><i>We require that each QI project has at least one specific senior leader/executive who specifically supports or 'sponsors' the project.</i></p> <ul style="list-style-type: none"> <i>Senior leaders/executive sponsors have the overall responsibility for the operation and administration of the organization. They can ensure your QI project is successfully integrated into clinical operations.</i>

<p>In a community clinic or individual practice, this is usually the Medical Lead of the practice. In a solo specialist practice, where the project lead does not require a senior leader for successful integration, we suggest engaging with a colleague with a similar practice to fill this role.</p> <p>Any project taking place within Island Health, this is usually an Executive Director (ED) or Executive Medical Director (EMD) of a geographical (local) health area (e.g., Nanaimo) or of a program (e.g., surgery).</p>
<p>Who have you identified as your senior leader/executive sponsor?</p>
<p>22. Full name*</p>
<p>23. Email</p>
<p>24. Position/Role</p>
<p>25. Describe your connection or level of engagement with this operational leader/sponsor.* Select all that apply:</p> <ul style="list-style-type: none"> • I haven't ever been in contact with this person • I have been in contact with this person prior to my interest in PQI • I have had a conversation with this person about my interest in leading a QI project in the area they support • I am not sure this is the right operational leader/sponsor for this QI project and need some direction • Other:
<p>Any projects done within Island Health must align with a specific Island Health priority (see next page). You can review the 2020-2025 Strategic Framework and Annual Priorities here (log-in required).</p>
<p>26. Which Island Health priority does your proposed project best align with?*</p>
<p>Other</p>
<p>27. PQI works with medical students each year. Are you interested in involving a student in your QI work project?*</p>
<p>28. There are multiple sources of funding improvement initiatives. If you are currently receiving any funding related to the problem/gap in care that you want to address, please describe.</p>

2024/25 PRIORITIES & OUTCOME GOALS



VISION EXCELLENT HEALTH AND CARE FOR EVERYONE, EVERYWHERE, EVERY TIME

STRATEGIC FRAMEWORK PILLARS – 3-5 YEAR AIMS & SELECT MARKERS OF PROGRESS

I. Improve Experience, Quality & Outcomes for the People We Serve
♦ PATIENTS HAVE A VERY GOOD OVERALL EXPERIENCE ♦
♦ NATIONAL LEADERS IN QUALITY & SAFETY ♦

II. Improve Experience, Health & Wellbeing of all People at Island Health
♦ STAFF HIGHLY RECOMMEND ISLAND HEALTH ♦
♦ NAMED TOP EMPLOYER ♦

III. Increase Value & Ensure Sustainability
♦ % COMMUNITY SERVICES EXPENDITURES RELATIVE TO ACUTE ♦ CHOOSING WISELY CHAMPION ♦

IV. Improve Population Health & Wellness, Reduce Health Inequities
♦ SHARPS IN HEALTH STATUS FOR INDIGENOUS PE ♦ POPULATION HEALTH EXPENDITURE AS % OF TOTAL ♦ CLIMATE CHAMPION ♦



UNRESOLVED INDIGENOUS-SPECIFIC RACISM & BIAS UNMET ACCESS NEEDS AVOIDABLE VARIATION & HARM TOP ENTERPRISE RISK THEMES LACK OF WORKFORCE CAPACITY & WELLNESS LACK OF CHANGE CAPACITY & AGILITY DISPARITY IN POPULATION HEALTH & HEALTH INEQUITIES

Commitment to Demonstrating Cultural Humility in Our Ways of Being

2024/25 ORGANIZATION-WIDE PRIORITIES, OUTCOME GOALS, & INFRASTRUCTURE REQUIREMENTS

PRIORITY 1 Address Indigenous-Specific Racism	PRIORITY 2 Improve Access to Priority Services	PRIORITY 3 Pursue Excellence in Quality & Safety	PRIORITY 4 Create a Culture of Safety & Wellness	PRIORITY 5 Increase Health Human Resource Capacity & Adapt to Changing Workforce Needs	PRIORITY 6 Increase Sustainability through System Redesign, Innovation & Operational Excellence	PRIORITY 7 Protect the Health of the Population & Take Action on Climate Change	PRIORITY 8 Promote Population Health & Prevent Harm
<p>G1. ↑ Speak Up Culture Where Staff Understand How, & Feel Safe, to Report Racism They Witness or Experience</p> <p>G2. ↑ Representation of Indigenous People in Leadership Roles Across All Portfolios in Island Health</p>	<p>G3. ↑ Access Same Day Episodic Care</p> <p>G4. ↑ Access to Priority Surgery & ↓ Long Wait-times</p> <p>G5. ↑ Access to Diagnostics & * Site-Based Targets for MRI and CT Wait-times</p> <p>G6. ↑ Timely & Appropriate Access to LTC</p> <p>G7. ↑ Access to MHSU Treatment & Services (↓ Urgent Mental Health & Detox Wait-times, ↑ Community Counselling Clients)</p> <p>G8. ↑ Acute Sites in Collaboration with Local Indigenous Communities & Partners have Partnership Tables to Strengthen Relationships & Address Concerns</p>	<p>G9. ↑ Key Practice Standards</p> <ul style="list-style-type: none"> • Best Possible Medication History (BPMH) & Medication Reconciliation • Advance Care Planning & MOST • Pre-hospital Functional Assessment on Admission • Delirium Detection & Prevention <p>G10. * Key Performance Targets</p> <ul style="list-style-type: none"> • Appropriate Use of Antipsychotics • Patient Safety Events With Completed Reviews <p>G11. ↑ Patient Experience Using Relationally-Focused & Accountable Approaches to Prevent Harm & Promote Healing</p>	<p>G12. ↑ Employees & Medical Staff Report Leadership Cares About Their Safety & Well-being, Inclusive of Medical & Indigenous Staff</p> <p>G13. ↓ Workplace Injury</p>	<p>G14. ↑ Workforce Capacity (↑ Medical Staff Recruited & ↑ Total Worked Hours)</p> <p>G15. ↑ Staff & Medical Staff Engagement with ↑ Staff Report Open & Honest Communications, ↑ Recognition for Good Work</p>	<p>G16. ↑ Community Care Services, Including Access to LTC from Community, to ↓ Need for Hospital Utilization</p> <p>G17. ↑ Effective, Responsive Hospital Care & ↓ Wait-Time for Inpatient Bed at Each Site</p> <p>G18. ↑ Navigation to Community-Based Services for Complex Frail Elderly & MHSU Clients</p> <p>G19. A ↑ Virtual Care Services (↑ Community Virtual Care Clients & ↑ Virtual MHSU & Critical Care Services), & ↑ Patient Engagement & Activation (↑ Portal Enrollment, ↑ Notes Released)</p> <p>G20. ↑ Innovations in Each Phase of the Innovation Life Cycle to ↑ People Engaging in Innovation</p>	<p>G21. ↑ Access to All Publicly-funded Vaccinations (* Targets for 7-year-old Vaccinations, Grade 11 and 12 HPV, Time to Next Appointment)</p> <p>G22. * Island Health's GHG Emission Target & ↑ Waste Diversion to Mitigate Climate Impact</p> <p>G23. ↑ Community Preparedness & Resiliency for Climate Emergencies</p>	<p>G24. ↑ Access to Appropriate Care for People Who Use Substances</p> <p>G25. ↑ Healthy School Programming to ↑ Youth Mental Health Resiliency</p>
<p>I1 Introduce Cultural Safety & Humility Standard, I2A Implement Indigenous Self-Identifier & I2B Establish Governance and Data Analytics Framework, I3 Optimize Clinical Governance Model & Advance Clinical Services Plan, I4 Advance EHR & Implement CPOE at Tertiary Sites, I5 Establish System of Health & Care for Addictions, I6 Implement Year 1 of the Human Experience Strategy, I7 Advance Minimum Nurse-to-Patient Ratios</p>			<p>I8 Advance Human Resource Information Systems, I9 Advance Medical Leadership Strategy</p>		<p>I10 Accelerate Digital Strategy, I11 Advance CDH Replacement Project, I12 Advance Design & Procurement for New LTC Homes, I13 Modernize Community Care Information Systems</p>		<p>I14 Advance Healthy Public Policy on Alcohol Use</p>

ENDURING PERFORMANCE MEASURES BY DIMENSION OF QUALITY (PERFORMANCE DASHBOARD)					
RESPECT	SAFETY	ACCESSIBILITY	APPROPRIATENESS	EFFICIENCY & EFFECTIVENESS	EQUITY
<ol style="list-style-type: none"> 1. Patient Concerns Completed 2. Same Day Surgical Cancellation* 3. Home Support Visits Cancelled by HLT* 4. Patient Experience – Acute* 5. Patient Experience – Emergency Department* 	<ol style="list-style-type: none"> 4. Hospital Standardized Mortality* 5. Clostridium Difficile Infection* 6. Hospital Harm – Overall* 7. PI Safety Events w/ Completed Reviews* 8. Sick Time* 9. Days Lost* 10. Time Loss Claims Rate* 11. Long Term Disability* 12. Drinking Water Quality 	<ol style="list-style-type: none"> 13. Left Emergency Without Being Seen* 14. Long Term Care Wait Time* 15. Surgeons Waiting Longer Than Benchmark* 16. MRI Meeting Benchmark* 17. CT Meeting Benchmark* 18. Home Care Professional Services Meeting Benchmark* 	<ol style="list-style-type: none"> 19. Potential Inappropriate Use of Antipsychotics in LTC* 20. Worsening Pressure Ulcers in LTC 21. ED Wait Time for Inpatient Bed* 22. Length of Stay > Expected Length of Stay in Acute Care* 23. Alternative Level of Care* 24. Ambulatory Care Sensitive Conditions Hospitalizations (75+)* 	<ol style="list-style-type: none"> 25. Overtone* 26. Employee Turnover* 27. Working Capital Ratio 28. Equipment Investment Index 29. Facility Condition Index 30. Greenhouse Gas Emissions 31. 7 Year Childhood Immunization Coverage* 	<ol style="list-style-type: none"> 32. Toxic Drug Deaths* 33. Self-Harm Hospitalizations* 34. Hospitalizations Entirely Caused by Alcohol* 35. Life Expectancy Disparity Ratio 36. Age Standardized Rate of Diabetes* 37. Infant Mortality

* Enduring measures directly supported by the 2024/25 Goals

Draft as of 14-Nov-2024