As fall comes to a close and the year to an end, I look back and am amazed at all that was accomplished. We saw many changes and events unfold, which shaped our work, our focus, and our energies. To me, the theme of the year, and the theme going forward, is support – for each other and for those in our care.

The wildfires that burned this summer were no exception. They created an unprecedented crisis situation for Interior Health staff, physicians, and services. Many of you went above and beyond to ensure the safety and continued care of our patients, clients, and residents.

Several wildfire appreciation events were held in communities impacted by the fires. At the Williams Lake event, Dr. Nicole Robbins, Cariboo Memorial Hospital Chief of Staff, spoke of how people stepped outside their job descriptions to do what was needed to keep everyone safe. I extend my gratitude for all the support this summer.

Throughout the fall, I looked for ways to support and connect with our medical leaders. In September, I met with physicians in IH East and West. We talked about emergency department access and flow issues, ways to improve physician engagement, and the challenges patients in rural areas face due geography. These discussions were excellent and I look forward to building on our improvements in the year ahead.

I visited our eight largest hospitals with Anne-Marie Visockas, Vice President of Health Systems Planning, Mental Health, and Residential Services. We had the opportunity to meet with different Local Medical Advisory Committees (LMACs) and dive deeper into our access and flow statistics, including Alternate Level of Care (ALC) rates, Canadian Emergency Department Triage and Acuity Scale (CTAS) rates, mental health patient volumes, and patient transportation issues. We’ll be working on a plan to address and improve these areas of concern.

At the end of October, I was fortunate to attend the Montreal CDO Executive Summit with Pat Dooley, Interior Health Board Member. This invitation-only conference was an incredible opportunity for executive leaders from throughout the world to discuss common issues. Executives from Mayo Clinic, John Hopkins, Henry Ford, and other leading organizations offered enlightening and global perspectives on analytical functions and business objectives. Topics of particular interest included physician engagement; data and digitalization; emergency department access and flow; and PharmaCare. Pat and I will discuss our observations and share our learnings with the Senior Executive Team and Board of Directors.

Significant changes have also occurred within the Medicine and Quality portfolio – one being the broadening of our physician leadership presence to be more evenly distributed throughout IH. This will increase the visibility of our physician leaders and enable our executive medical directors to better support sites in our communities. Dr. Norm Kienitz, for example, is the first executive medical director located in Kamloops, which extends our presence in the IH West area.

As well, there will be a more concerted focus on quality, physician engagement, and Aboriginal health and wellness. The Physician Quality Improvement Initiative, led by Dr. Alan Stewart and James Chan, is well underway. Dr. Harsh Hundal is leading our work on physician engagement, including succession planning for leadership roles throughout our 22 sites. And, for the first time, we have an executive medical director leading our work in Aboriginal health and wellness – Dr. Sue MacDonald. I am excited and motivated to share the success of this work in the coming months.

Our accomplishments this year could only have been achieved by supporting each other and by working together. This Christmas, take time to thank someone you work with or support someone in need. Together we can make a difference in so many lives – every person matters.

I wish you all a safe and happy holiday, and good things in the New Year ahead.

Dr. Mike Ertel
Vice President, Medicine & Quality

Dr. Mike Ertel with Santa Claus
(a.k.a. Chris Mazurkewich, IH President & CEO).
This year brought many changes and vacancies for our Executive Medical Leadership (EMD) Team.

Thank you to Dr. Bruce Povah, Dr. Brad Raison, Dr. Douglas Smith, and Dr. Todd Ring, who stepped up over the summer to assist with acting Executive Medical Director roles while permanent recruitment was underway.

Permanent EMD appointments have now been made, as well as a restructure to meet Medicine and Quality portfolio priorities and to expand the depth of medical leaders at Interior Health.

A warm welcome and congratulations to our new executive medical directors:

- Dr. Zoe Ayling, Credentialing & Privileging (Penticton)
- Dr. Nick Balfour, IH Central (Kelowna)
- Dr. Nancy Humber, IH West – Rural (Lillooet)
- Dr. Harsh Hundal, Physician Engagement & Resource Planning (Kelowna)
- Dr. Lawrence Jewett, East Kootenay (Cranbrook)
- Dr. Norm Kienitz, IH West – Tertiary, IH Trauma, IH Transportation (Kamloops)
- Dr. Susan MacDonald, Aboriginal Health & Wellness & Kootenay Boundary (Kelowna)
- Dr. Douglas Smith, Residential Care, Palliative & MAiD (Kelowna)

Watch for more detailed information to be shared about EMD roles and responsibilities.

In hospital leadership news, Dr. Todd Ring is the new Chief of Staff at Royal Inland Hospital in Kamloops, taking over from Dr. Simon Treissman. Dr. Treissman was very successful at recruiting new physicians to the hospital and contributed to many other positive developments – we wish him well in his retirement.
There are many opportunities in the province for physician leadership training, but a need was identified to have training that met the specific needs of Interior Health’s medical leaders.

Now in its third year, the bi-annual, Physician Administrator Co-leadership Training (PACT) program provides a robust training program that fits the bill.

“We have very good medical leadership in IH, but everyone is in a different stage of learning,” says Dr. Sue MacDonald, Executive Medical Director and PACT program facilitator. “PACT provides an opportunity for physicians to discuss issues relevant to their medical leadership role while in a learning environment.”

The PACT two-day session is based on a co-leadership working model that includes medical leadership (e.g., executive medical directors, chiefs of staff, department heads, program leads, medical directors, etc.) and administrative leadership (e.g., senior executive, executive directors, health service administrators, regional and site administrators, etc.).

Day One, titled “Improving how we work together,” discusses topics such as The Leadership Balancing Act, and promotes interactive learning between medical and administrative leadership, including presentations from both internal and external leaders.

“We have been fortunate to have presentations from Finance; Human Resources; Quality; and Transformation, Innovation and Change,” says Dr. MacDonald. “PACT training showcases important topics in our organization and helps to develop a connection between our medical and administrative leadership across Interior Health.”

Day Two is for medical leadership only and discussions focus on credentialing, privileging, quality assurance, and other medical bylaw topics. Key presenters have included, for example, the College of Physicians and Surgeons of B.C., the BC Medical Quality Initiative, and the Rotman School of Management.

“We also focus on changes happening at the provincial level that impact how we look at health care, such as primary care.

We provide tools related to change management, integrative thinking, and health-care stewardship, all of which involve how to be more conscious of financial resources and use them appropriately in the health-care setting.”

Dr. MacDonald says the last PACT session, held Nov. 3-4 in Kelowna, was a great opportunity to highlight the work done by both medical and administrative leadership during the wildfires, particularly those in the Cariboo Chilcotin. Participants learned about disaster preparedness and the tremendous work that was done across IH to support one another during the wildfire period.

“Overall, my hope is for participants to gain a better understanding of their role as a medical leader and to provide them with new tools to make their work more effective and, perhaps, more enjoyable,” says Dr. MacDonald. “I hope meeting medical leaders from across IH enriches their work. When I hear all the wonderful chatter and see the interactivity in the room – that is the greatest reward.”

On average, each PACT session draws 60-80 attendees. The session is CME accredited by UBC Continuing Professional Development. The next PACT session will be held in May 2018.

New Executive Medical Director For Aboriginal Health & Wellness Portfolio

In addition to supporting physician leadership training, Dr. MacDonald’s role includes Aboriginal Health and Wellness, a new executive medical director leadership portfolio.

“I am looking forward to working collaboratively with Brad Anderson, our Corporate Director for Aboriginal Health, and with our First Nation and Aboriginal partners to expand services for Aboriginal health care in Interior Health.”
PHYSICIAN QUALITY IMPROVEMENT INITIATIVE MOVES FORWARD

The implementation phase of the Physician Quality Improvement (PQI) initiative announced earlier this spring for Interior Health is well underway. It’s being led by a joint IH / Specialist Services Committee (SSC) steering committee with support from a PQI support team based out of our Medicine and Quality Portfolio.

Over the next several months, the focus is on sharing information, recruiting interested physicians, and developing a specific process for PQI intake and support.

On Dec. 13, the first PQI information session was held in Kelowna and most physician attendees said they would recommend the session to their colleagues. Other feedback included:

- “Good session to understand driving principles behind the PQI process.”
- “Made me think how I can use this, prompted some ideas.”
- “Feel inspired to review practice. Hope to develop plan/goals to improve patient care.”

Watch for additional sessions coming in Jan/Feb 2018 to Kamloops, Penticton, Vernon, Trail, and Cranbrook, as well as a second event in Kelowna. Physician feedback from the events will help to provide greater clarity for the overall PQI intake process.

The funding support provided through the SSC’s Physician Quality Improvement initiative includes up to $1.3 million per year for training and education, physician time, support staff, and evaluation.

Read more about this on the IH Loop news website or on the physician section of the IH website (navigate via Physician tab at top of page and then to “News & Resources” page).
RESIDENTIAL CARE REFRESHER: Team approach to improving residential care

More than 130 care providers including physicians, site managers, and nurses attended the inaugural Residential Care Refresher in Vernon this November. The conference focused on relevant and current clinical issues.

“Our goal was to foster meaningful discussions about standards of care, experiences, and concerns; different approaches to care; and ways to support change,” says Dr. Doug Smith, Executive Medical Director for Residential Care, Palliative & MAiD. “I think we definitely accomplished this.”

The sold-out conference of primarily Interior Health physicians and care providers covered three specific categories: medical management; palliative approach and long-term care; and geriatric psychiatric care. Keynote speaker Dr. David Sheard spoke about changing the culture of dementia care and a new model being used in the United Kingdom called The Butterfly Household Model of Care.

“There was a lot of good discussion as we contrasted our palliative approach, and approach to responsive behaviours in geriatric psychiatry, to the British model,” says Dr. Smith. “The conference was set up for learning, sharing experiences, and engaging one another – it was a very collegial experience.”

Dr. Smith says discussions about using a palliative approach in long-term care were particularly applicable to some of the work underway at Interior Health.

“Shifting to a palliative approach is one of the cornerstones of how we are trying to restructure residential care and improve the patient experience,” he says. “The discussions around this new concept, potential benefits, and implementation prompted feedback that was promising and everyone was quite engaged. We are excited for physicians, managers, nurses, and other operations staff to take this concept back to their sites and begin conversations with their own teams.”

Along with the residential care portfolio, Dr. Smith’s executive medical leadership role includes working on advancements for Interior Health’s end-of-life care and Medical Assistance in Dying (MAiD) portfolios.

“In end-of-life care we are focused on physician engagement and looking at a governance structure for medical leadership across IH – in community care, residential care, hospice care, and acute care. We are reaching out to local physician leaders to help us determine the vision and morph it into something that will work across all venues in Interior Health.

“MAiD is still a very young program and service, but the foundational work that was done by Dr. Harsh Hundal and Nadine Jones in Quality Improvement was amazing. MAiD is growing into a more robust service and we are facing challenges in resources and personnel. We are in the concept phase of recruiting regional physician champions who can provide the needed clinical support, especially in our rural areas, with the patient being our main focus.”

Dr. Smith says that the kind of engaged learning and discussions that took place at the Residential Care Conference are what he would like to see for end-of-life care and MAiD.

“I think physicians learn well in collegial settings – they learn by experience, by discussing data, and by clinical-based evidence. To have regionally and clinically relevant discussions about what we are doing and where we are going, while involving front-line physicians, is a very effective learning environment. We’ll be looking for more ways to work with stakeholders to provide more events like this.”

The Residential Care Conference was a collaborative effort between Interior Health, the Shuswap North Okanagan (SNO) Divisions of Family Practice, and UBC Continuing Professional Development. Funding was provided by the SNO Divisions of Family Practice.

Read more about collaborative conversations leading to better residential care at IH in the @InteriorHealth magazine article More Sharing, Better Caring – featuring Dr. Trevor Janz, Kootenay Residential Care Medical Director.
**SALUTE!**

2017 Long Term Service Award Recipients

Nearly 500 employees and physicians were recognized this year for their exceptional long-term service and commitment to Interior Health.

This marks the 14th year of the Long-Term Service Awards when each IH region hosts a special awards banquet recognizing contributions of 25, 30, 35, 40, 45, and 50 years of service.

Congratulations to the 48 partnering physicians who received milestone awards this year – two who reached 45 years of service! Dr. Terry O'Farrell, at Kelowna General Hospital, and Jerome Farrell, at Royal Inland Hospital – you inspire us.

“I had the pleasure of emceeing the Cranbrook event and saw firsthand the importance of these recognition events,” says Dr. Mike Ertel. “I was honoured to meet many of the silent heroes in our organization.”

Visit the [Recognition section](#) of InsideNet to see the full list of recipients for 2017.

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**NEW!**

**MEDICAL LEADERSHIP RESOURCES TEAMSITE**

The Medical Leadership Resources TeamSite is a new resource page for executive medical directors, chiefs of staff, medical leaders, and others!

The TeamSite includes resources and information for:

- Credentialing and Privileging
- Recruitment
- Physician leadership development
- Reading and training materials for medical leaders
- Complaints and professional conduct
- Links to relevant organization charts, and other internal and external resources

**GO TO:**

http://teamsites.interiorhealth.ca > Corporate & Admin > [Medical Leadership Resources](#)
**Physician Recognition**

**Dr. Guy Fradet, lung transplant hero**

Congratulations to Dr. Guy Fradet, Cardiac Sciences Program Medical Director and Head of Cardiovascular Surgery – a true hero in the life-saving field of organ transplantation.

The Canadian Society of Transplantation has recognized Dr. Fradet’s contributions to lung transplantation, in B.C. and in Canada, by awarding him the Dr. Joel D Cooper Award for Outstanding Contribution to Lung Transplantation in Canada. Dr. Fradet was honoured with the award during a ceremony in Halifax on Sept. 27, 2017.

Dr. Guy Fradet left his mark on B.C.’s transplant program by establishing the province’s lung transplant program, which continues to offer hope to dozens of British Columbians each year.

As a key founder and former Surgical Director of the province’s Lung Transplant Program, he says:

“There is never a week that passes when I don’t have memories of my transplant patients, those who are still alive and those who have died. I can still see their faces.”

Read the complete interview with Dr. Fradet on the IH Loop news website.

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**Dr. Paul Dagg honoured for excellence in teaching**

Dr. Paul Dagg has once again been honoured for his excellence in teaching students the specialty of psychiatry.

The well-respected Kamloops psychiatrist and Interior Health’s Medical Director for Mental Health and Substance Use has received the UBC Faculty of Medicine’s 2017 Clinical Faculty Award for Excellence in Community Practice Teaching.

Read more in the UBC Faculty of Medicine’s Southern Medical Program news.