

# Medicine & Quality Matters

News for the Interior Health Medical Community

Spring/Summer 2016



Interior Health  
*Every person matters*

## Focused approach to manage change in Medicine and Quality portfolio

*by Dr. Alan Stewart, VP Medicine & Quality*

Our health system is moving rapidly on all fronts. The magnitude of this change has become even more apparent to me since taking on the Vice President of Medicine and Quality position.

Some of you may have heard of Interior Health's Five Key Strategies. These are the areas of focus in the Ministry of Health's strategy outlined in [B.C. Health System Strategy Implementation: A Collaborative and Focused Approach](#). The specific targets of our Five Key Strategies are: primary care, seniors care, mental health and substance use, surgical access, and rural and aboriginal health.

At Interior Health, we have specific teams working on these strategies. Throughout the organization, leaders have been directed to re-focus their teams from non-essential project work to these specific organizational objectives.

Our medical staff will play a pivotal role in the successful achievement of these ambitious plans for change, and the Medicine and Quality Leadership Team is very much in the game. At our recent annual retreat, we identified 16 specific objectives, in support of the Five Key Strategies, and they will guide a significant portion of our work over the next two years. The objectives are broad ranging and include medical leadership development, establishment of guidelines and policies to improve end-of-life care, robust medical staff recruitment for specialists and family physicians, and establishment of a quality-of-care framework in residential care. Each of these requires that we actively engage with our physician colleagues.



A key towards success in all of the strategies is the collection, access to, and use of information. We are fortunate to have recently recruited an expert in this area, Dr. Douglas Kingsford, who will lead physicians through much of this work along with Information Management Information Technology (IMIT) colleagues. We have also recently welcomed Dr. Mike Ertel, Executive Medical Director for the Okanagan, and Gina Sloan, Corporate Director for Medical Affairs, to our leadership team. Douglas, Mike, and Gina add strength to an already exceptionally talented team of senior medical leaders.

A particular focus for us in the months ahead will be to gain a better understanding of how to collaborate and partner with physicians in system change. In this regard, we will build upon the successes of our Physician Administrator Collaborative Training (PACT) leadership development program, our involvement in Collaborative Service Committees, and our evolving role of Health Authority Medical Advisory Committee (HAMAC), and local Medical Advisory Committees (MAC).

In the meantime, more opportunities are on the horizon in the form of a joint Health Authority – Doctors of BC facility-based physician engagement initiative. Through this, Medical Staff Associations will have the capacity to engage with Interior Health in areas of mutual interest towards health-system improvement. Ten IH Medical Staff Associations have already begun the process of registering for status and funding. We look forward to working with our facility-based physicians in this new and exciting endeavour.

At the same time, through the Joint Specialist Service Committee, funding has been made available for the co-creation of regional Quality Improvement Teams. With regional physician support, Dr. Ron Collins has crafted the IH submission for funding, which is expected to bear fruit by September. This will allow development and implementation of a co-created plan for improved quality of patient care.

I would like to take this opportunity to thank our medical staff for accommodating some recent significant changes to the way we do credentialing and privileging. The new process, CACTUS, is a provincial solution developed in response to concerns raised by the Cochrane Report of 2011, which has been implemented across British Columbia. We recognize that the transition to an electronic system is never easy and while the rollout was generally smooth, we certainly received useful feedback that will be incorporated into planning for next year's cycle. I'd like to say "that's it" for the changes, but there will be more, hopefully for the better. We will do our best to ensure a collaborative and engaging approach as we continue with this work.

It's a privilege to be your VP of Medicine and Quality. Please feel free to contact me at any time via [alan.stewart@interiorhealth.ca](mailto:alan.stewart@interiorhealth.ca).

Best wishes,

Alan Stewart MD, FRCPC  
VP Medicine and Quality

## Medical Assistance in Dying (MAiD)

On June 17, the Canadian Senate passed Bill C-14. This Bill allows doctors and nurse practitioners (NPs) to legally provide assistance in dying to competent adults seeking this service who have a *grievous and irremediable medical condition that causes enduring, intolerable suffering*. (See the [Health Canada website](#) for further information.)

At Interior Health, medical assistance in dying (MAiD) is an option available to patients at end of life. To support physicians/NPs and health-care providers, a MAiD Care Coordination Committee has been formed. The work is led by Dr. Harsh Hundal and Nadine Jones, from the Medicine & Quality portfolio, with representatives from other key VP portfolios.

The MAiD Care Coordination Committee supports and mentors physicians/NPs during the assessment, eligibility, and provision of medical assistance in dying. The committee also provides support to pharmacists and nurses aiding a physician/NP in the provision of medical assistance in dying.

NPs must complete additional education, a preceptorship, and practice within the NP Scope of Practice and in accordance with health authority policies prior to determining eligibility or providing medical assistance in dying.

Registered nurses (RNs) must also complete additional education and follow a decision support tool. RNs are not permitted to compound, dispense, prepare or administer any substance in the Medical Assistance in Dying Protocol. (See the [CRNBC MAiD Scope of Practice Standards](#) for more information.)

Medical assistance in dying is a sensitive and emotional topic. It's essential that we take the time to reflect on how this concept fits with our personal beliefs and values. Not all medical staff will be comfortable with the assessment for, or provision of, MAiD. The legislation does not force any person to act against their conscience. A process is being created to respectfully handle all instances of conscientious objection within IH.

It is equally important we take time to understand that medical assistance in dying is now law within Canada and we have a responsibility to respect the dignity of those who ask about this service. As we do every day, we must continue to provide the highest standard of compassionate and respectful care.

Physician questions about how patients access medical assistance in dying can be emailed to [MAiD@interiorhealth.ca](mailto:MAiD@interiorhealth.ca). Additional information and resources for physicians are located on the physician section of our IH website: [www.interiorhealth.ca](http://www.interiorhealth.ca) > About Us > Physicians > [Medical Assistance in Dying \(MAiD\)](#).

### Medical assistance in dying workshop draws accolades

A Medical Assistance in Dying Interdisciplinary Workshop on Aug. 2 drew more than 30 health-care professionals in person to UBC's Faculty of Medicine Clinical Academic Campus at Kelowna General Hospital and 30 more at telehealth sites across B.C.

Dr. Harsh Hundal, IH Community Medical Director and event host, said the IH-organized workshop received "very positive reviews" from attendees, which included physicians, pharmacists, nurses, nurse practitioners, and administrators from the community sector, Interior Health, and other health authorities, as well as Ministry of Health staff. [Read the full story in IHintheLoop.ca](#).

## Dr. Paul Dagg Acknowledged for Contributions to Medical Education

Congratulations to Dr. Paul Dagg, Interior Health Medical Director for Mental Health and Substance Use Programs.

Dr. Dagg recently received the Royal College of Physicians and Surgeons of Canada's prestigious Duncan Graham Award for outstanding contributions to medical education.

"Dr. Dagg's commitment to education in the field of psychiatry reflects his steadfast dedication to patient care. Our sincere congratulations to Paul upon this well-deserved national recognition," says Interior Health Board Chair Erwin Malzer.

"Since joining Interior Health in 2005, he has made a tremendous difference in mental health programming and most importantly in service to our patients."

Further information, including Dr. Dagg's biography, can be found on the [Royal College's website](#).



Dr. Paul Dagg, Program Medical Director MHSU, has received a prestigious award from the College of Physicians and Surgeons of Canada for his commitment to medical education. He is pictured here at the recent Hillside anniversary celebration.

## Neurosurgery Patient Room at RIH Dedicated to Dr. Gur Singh

Friends, family, and colleagues gathered on June 27 to celebrate the life and career of Dr. Gur Singh, neurosurgery pioneer and former Chief of Staff at Royal Inland Hospital (RIH).

Dr. Singh died at RIH on March 24, 2015, after a battle with amyotrophic lateral sclerosis (ALS). He was 78. He lived a full life, not the least of which included nearly 50 years of service at the Kamloops hospital, retiring in 2014.

His commitment to patient care will live on through the naming of a high-observation room dedicated to neurosurgery patients in the 6 South post-operative unit at RIH. Nearly 75 people, including Dr. Singh's family – wife Manju, son Arjun, and daughter Sabina – as well as Health Minister Terry Lake and IH Board Director Frank Quinn gathered in the Courtyard at RIH to view the unveiling of two plaques commemorating Dr. Singh's life and career. The plaques will be on display in 6 South.

“Dr. Singh left his mark, both in patient care and in medical administration,” said Erwin Malzer, Interior Health Board Chair. “We at Interior Health are grateful for his service and are pleased to name the neurosurgery high-observation room on 6 South in his honour.”

Read more about Dr. Singh's achievements in the full [IH news release](#).



Dr. Gur Singh's family joined Interior Health to unveil two plaques that will be hung in his honour at the neurosurgery high-observation room on 6 South. From left, Carol Laberge, RIH Health Services Administrator; Frank Quinn, IH Board Director; Health Minister Terry Lake; Dr. Gur Singh's family including wife Manju, daughter Sabina and son Arjun; and, Dr. Simon Treissman, RIH Chief of Staff.

## KBRH Mat/Child Unit Named after Dr. Trudi Toews

Four decades of contributions to health care by Trail physician Dr. Trudi Toews were recognized at Kootenay Boundary Regional Hospital (KBRH) on June 8, as the hospital's fourth-floor maternal/child unit was officially renamed in her honour.

Dr. Toews retired from practice last year. In addition to primary care work in the community, she is the former KBRH maternity/child department head, KBRH chief of staff, and regional chief of staff for the Kootenay Boundary.



Dr. Toews poses with her family in front of the maternal/child unit at Kootenay Boundary Regional Hospital

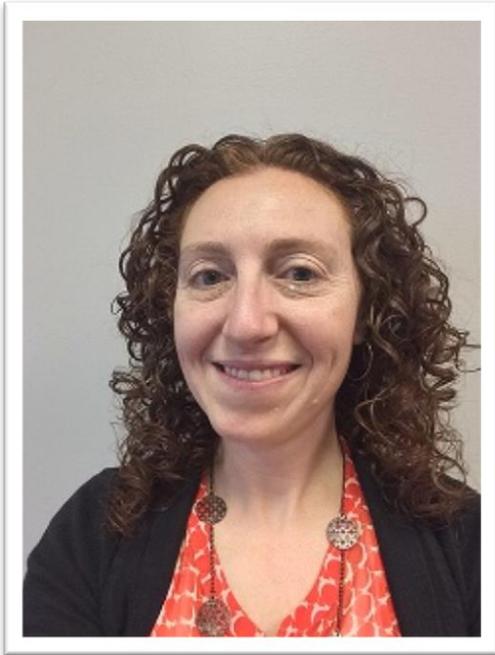
Quality health care goes beyond the bricks and mortar. In addition to championing the significant physical improvements on the fourth floor at KBRH, Dr. Toews was one of the physicians who helped establish the Trail Family Obstetrics Clinic. This change stabilized maternity services at this hospital for families ever since and has served as a model for maternity care in other regions.

Dr. Toews has been an outstanding mentor for new rural family medicine physicians interested in providing maternal/child care, supporting these new physicians as they developed their skills in obstetrical care and performing caesarian sections. Dr. Toews has also been a key supporter of the midwifery program in Kootenay Boundary.

About 60 people attended the event, which was also an opportunity to honour Dr. Toews' commitment to the KBRH Health Foundation, the Kootenay Robusters, and the broader communities she served.

The idea for the renaming of the fourth-floor unit after Dr. Toews started with maternity nurse Bev Harmston and quickly gained momentum at the site and in the community – a testament to all of those she has impacted over the years as a health-care provider, advocate, and friend.

## New Director of Medical Affairs



In early May, Gina Sloan was appointed as the new Director of Medical Affairs.

Gina is well known to many of you, having been with Interior Health since 2003. She is a Chartered Professional Accountant and began her IH career in the Department of Finance. She then moved to Medical Affairs in 2008 where she held a number of key roles; most recently as the Director of Physician Compensation, Planning and Initiatives.

Gina has a wealth of knowledge regarding physician compensation and a demonstrated track record of successfully engaging physicians in the alignment of compensation models with clinical care requirements.

She has also led provincial initiatives and played a prominent role on many provincial committees.

Most recently, Gina acted as the Director of Strategic Initiatives within the Integration and Strategic Services Portfolio for the Mental Health & Substance Use key strategy.

Read more about Gina in [IHintheLoop.ca](http://IHintheLoop.ca).

## IH Executive Medical Leadership

Dr. Alan Stewart, VP Medicine and Quality: 250-862-4010

Dr. Curtis Bell, Executive Medical Director, Primary & Residential Care: 250-870-5899

Dr. Ron Collins, Executive Medical Director, Quality Improvement & Patient Safety: 250-862-4309

Dr. Mike Ertel, Executive Medical Director, IH Central: 250-862-4068

Dr. Douglas Kingsford, Executive Medical Director, Chief Medical Information Officer: 250-862-4325

Dr. Sue MacDonald, Executive Medical Director, IH East: 250-870-4633

Dr. Malcolm Ogborn, Executive Medical Director, IH West: 778-214-4657

Dr. Peggy Yakimov, Executive Medical Director, Physician Support and Practice Enhancement: 250-870-4735