

August 18, 2016

*This message has been sent on behalf of Dr. Jeremy Etherington, Executive Vice President and Chief Medical Officer, and Catherine Mackay, Executive Vice President and Chief Operating Officer.*

To Nanaimo Regional General Hospital Physicians:

Below is an update on the eight commitments as outlined in the June 28<sup>th</sup> letter. All prior updates can be found at <http://www.viha.ca/physicians/>. Progress on a number of the commitments is pending activities that are scheduled for early September. As such, the next update letter will be sent the week of September 12.

**Update on our eight commitments:**

*1. Reduction in occupancy at NRGH to less than 95%:*

This work has transitioned into routine activity and is no longer being reported in this letter. If you have concerns regarding occupancy and its impact on hospitalists and internal medicine services, please contact [Marci.Ekland@viha.ca](mailto:Marci.Ekland@viha.ca) or [Martin.Wale@viha.ca](mailto:Martin.Wale@viha.ca).

*2. Stabilization of medical staff resources and other supports for hospitalists, including recruitment of two Nurse Practitioners, and Medical Affairs assistance in recruiting new hospitalists:*

To date, 2.5 hospitalists have been hired, with anticipated start dates being September and early October. Hiring of Nurse Practitioners is on hold at this time. Hiring for further hospitalists is underway with good interest in hospital positions and locums. Prior updates on this commitment can be found at <http://www.viha.ca/physicians/>.

*3. Support for Internal Medicine to cohort patients on a single ward (complete), supported by an MRP internist contract to cover the cohorted ward:*

No further update at this time. Discussions continue regarding draft deliverables that could be included in an MRP internist contract, as well as options/availability of funding. A retreat for the Internal Medicine physicians is planned for September. Further updates will be provided after this date.

4. *Financial support for Nephrology:*

This commitment is now complete. Prior updates can be found at <http://www.viha.ca/physicians/>.

5. *Development of a model to support Emergency Physicians in the patient-admission process:*

No update at this time. Further progress on this commitment is dependent on extra capacity in the hospitalist service and Internal Medicine (numbers 2 and 3 above).

6. *Compensating physicians for their additional time required to participate in refreshed learning events and stabilization activities:*

Medical Affairs continues to process received applications for payment. Questions regarding declaring compliance with the requirements for compensation or invoicing requirements should be sent to Dr. Alan Meakes ([Alan.Meakes@viha.ca](mailto:Alan.Meakes@viha.ca)).

7. *Establishing a collaborative working group to complete a 5-year tertiary services development plan for the NRGH site within the next six months:*

The Planning team has received a number of responses to the initial survey questions that were distributed on August 5<sup>th</sup>. Early responses have helped inform additional data to be brought forward in September as well as further stakeholders to consult with in the coming weeks. Responses to the survey questions are due by September 8<sup>th</sup>. A copy of the initial questions can be found at <http://www.viha.ca/physicians/>. Responses can be emailed to [Rory.Allen@viha.ca](mailto:Rory.Allen@viha.ca).

8. *Incorporation of quality assurance tools as well as ongoing audit of CPOE into our methodology, adhering to principles of collaboration and transparency:*

Since the last update, the prototype for the EASI (Error And System Issue) button was reviewed by NRGH and IHealth physicians. Refinements to the tool are being made and will be piloted in the next two weeks.

The CORE process is also supporting CPOE quality assurance. 136 providers have been educated, and 54 providers have used the process a total of 197 times to-date. The process is supporting the identification of order and order sentence requirements. In July, use of the CORE process resulted in 38 new orders, order sentences or synonyms.

Detailed analysis of CPOE orders has shown that, as is usual practice, modifications and cancellations of orders by laboratory, pharmacy, and diagnostic imaging occur, which is not always apparent to physicians. Further information from the analysis of modifications and cancellations of orders will be shared in future letters.

**Additional updates:**

- *Closing the loop on reported events in PSLs*

To date, information regarding 88% of outstanding physician-originated PSLs events has been fed back to physicians. Work continues to improve the process for PSLs reporting. A further update on this work will be provided in September. If you have questions, please email [Sharon.Parkes@viha.ca](mailto:Sharon.Parkes@viha.ca).

Thank you for your ongoing feedback and involvement.

Yours sincerely,

Dr. Jeremy Etherington  
Executive Vice-President and  
Chief Medical Officer

Catherine Mackay  
Executive Vice-President and  
Chief Operating Officer