

August 11, 2016

This message has been sent on behalf of Dr. Martin Wale

To Nanaimo Regional General Hospital Physicians:

Below is an update on the eight commitments outlined in the June 28th letter.

Update on our eight commitments:

- *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 or Martin.Wale@viha.ca.
- *Stabilization of medical staff resources and other supports for hospitalists, including recruitment of two Nurse Practitioners, and Medical Affairs assistance in recruiting new hospitalists:*
No further update at this time. Recruitment for hospitalists continues in order to reach a full complement and locums continue to be sought for August. Prior updates on this commitment can be found at <http://www.viha.ca/physicians/>.
- *Support for Internal Medicine to cohort patients on a single ward (complete), supported by an MRP internist contract to cover the cohorted ward:*
Discussions are occurring 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.
- *Financial support for Nephrology:*
This commitment is now complete. Prior updates can be found at <http://www.viha.ca/physicians/>.
- *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).

Island Health Executive Offices

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

A set of initial questions was distributed through the LMAC membership and site leadership distribution lists on Friday, August 5th. Responses are due back to the Planning Department on September 8th, and we appreciate all the people who have already sent their thoughts. Responses will help shape what research and data analysis will be brought forward for consideration in September when the Collaborative Working Group begins the formal planning process. If you would like a copy of the initial questions, please email Rory.Allen@viha.ca.
- Incorporation of quality assurance tools as well as ongoing audit of CPOE into our methodology, adhering to principles of collaboration and transparency:*

Work continues to develop a more streamlined approach to reporting of issues relating to CPOE. This includes testing a CPOE support button on the PowerChart toolbar, feedback to physicians about the CORE process, and other work to enhance, streamline and close the loop on issues with the ordering process.

Additional updates:

- Closing the loop on reported events in PSLs*

Work continues to close the loop with individual physicians on outstanding physician-originated PSLs events. A number of initial learnings about the PSLs process have been identified:

 - Using the system can be cumbersome;
 - The process for monitoring and resolving PSLs events involving the electronic health record, which can involve multiple handoffs, doesn't always allow for a quick turnaround and meaningful feedback; and
 - It can be difficult to identify the root cause of events, which is exacerbated if there is a slow turnaround time.

Activity is underway to improve the process for PSLs reporting, focused on reducing the number of handoffs, reduce the time between when an event is submitted and closed, and improve accountability/clarity of the PSLs event 'handler' role. A PDSA cycle will be completed and training opportunities are being arranged handlers and informaticists. If you have questions, please email Sharon.Parkes@viha.ca.

Thank you for your ongoing feedback and involvement.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Martin Wale', with a long horizontal flourish extending to the right.

Dr. Martin Wale
Acting Executive Vice President and
Chief Medical Officer