

**Annual General Meeting
Tuesday November 5th, 2019 at 1730
Campbell River Hospital, Conference Rooms 1, 2 and 3**

Annual Report for Fiscal 2018 – 2019

Current Executive

Dr Sol Gregory, President
Dr Kristyn Campbell, Vice President
Dr Marissa Dry, Treasurer

Working Group

Dr Shawn Gill
Dr Kirsten Duckitt
Dr Larry Ness
Dr Mark Lund
Sheila Jager, Midwife

Drs of BC

Alanna Black, Regional Advisor and Advocate

Facility Engagement

Crystal White, Facility Engagement Lead

Staff

Rita Webb, Project Manager
Janet MacDonell, Executive Assistant

Bookkeeper

Andrea Drake, Eagle Eye Business Services

Current Membership:

132 Physicians, Midwives, Nurse Practitioners (increase of 9% over 2017/2018)

The Executive and Working Group continue to meet once a month with the exception of July and August. We have chosen to implement a continuous intake for projects and events

Projects – ongoing from 2017/2018

- ✚ Cranium Resource Guide: lead by Dr Dieter deBruin who is working with an IT service provider to develop an online resource for new physicians
- ✚ Emergency Department Quality Initiative: lead by Dr Jeffrey Ricketson to work with colleagues and Island Health to improve flow and identify quality improvement initiatives. While it has been a slow start, they are now making connections with similar projects, most notably in Comox, and will move it forward over the next 3 months
- ✚ Pre-term Birth Pathway: lead by Drs Kirsten Duckitt and Jennifer Kask. Program was well attended in both the North Island and Campbell River; was reviewed at the Island Quality Forum in Nanaimo on April 25th and will be presented at the Joint Collaborative Committee Quality in Vancouver in February 2020
- ✚ Physician Lounge: continued supply of coffee, hot chocolate, teas and associated supplies; snack and small food items; cold beverages; newspaper; purchase of second fridge

Projects – Initiated in 2018/2019

- ✚ Summer BBQ: a joint social event with the Division of Family Practice. Held at Oyster River Resort on August 9, 2018 and attended by 63 physicians, health professionals and guests; event rebooked for August 2019

- ✦ Internal Medicine and General Practitioners Collaboration: lead by Dr Nathan Allen on November 2nd, 2018 and attended by 38 specialists and GPs. The evening was designed to review the current status of the Internal Medicine Department, introduce new physicians, discuss the referral process and identify areas of improvement
- ✦ Physician Lounge: continued supply of coffee, hot chocolate, teas and associated supplies; snack and small food items; cold beverages; newspaper
- ✦ Let's Get To Know Each Other: lead by Dr Leanne Wood this was an inclusive social event to bring together all physicians, health professionals, and FP residents. Attended by 71 guests, this event exceeded its overall goal to be light and festive and encourage conversation
- ✦ Chronic Pain Care Plan in a Rural Community: lead by Dr Kathleen McFadden the project commenced February 2019 and wrapped up in September 2019. Dr McFadden presented her findings at rounds in September and awaits the Ministry's decision on the projects resulting "Home Health Monitoring Program"
- ✦ Care of the Substance Exposed Mother-Newborn Dyads in Campbell River: lead by Dr Jennifer Kask, a structured review of current practices in Campbell River has been undertaken with a priority to spread best practices to other communities and bring all into alignment with the provincial guidelines
- ✦ Best Possible Medication History (BPMH): lead by Dr Kristyn Campbell. The initial impetus was to attend an event to meet the accreditation requirements of the hospital. Subsequently Dr Campbell formed a subcommittee of the Working Group to improve communications, actively involve physicians and identify and implement next steps
- ✦ Waterbirth At Campbell River Hospital: lead by Sheila Jager, Midwife, the purpose of the project is to allow appropriate low risk women the choice of a waterbirth in the Campbell River Hospital Maternity unit. The first part of this project is the development a steering committee responsible for consultation with stakeholders

Annually the Medical Staff Engagement Initiative executive meets with Island Health leadership and our Facility Engagement Lead to conduct a "Site Report and Review and Report"; below is an excerpt from the report provided after the March 2019 meeting:

"Through the SRRP process, we want to acknowledge the following accomplishments of the Campbell River Medical Staff Engagement Initiative Society:

- *Strong, informal and collegial relationship with Campbell River Hospital site leadership. E.g. Physicians are comfortable to bring issues to the administrator and engage in respectful dialogue when there are concerns.*
- *Positive relationship with Geo 1 Executive Medical Director.*
- *Working group meetings are held monthly, scheduled in advance and are well-attended and well-represented.*
- *Executive members are diligent to ensure representation of the larger medical staff as a whole, and committed to improving the experience of Campbell River medical staff.*
- *Collaboration with Courtenay/Comox MSA (PESCCI) on issues of shared interest or concern, as well as exploring opportunities to co-host or cost-share some social engagement activities/CME events.*
- *Regular attendance at the Island MSA network."*

Recommendations from Report:

"Some suggestions that may assist in strengthening Campbell River Medical Staff Engagement Initiative Society's

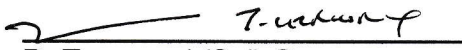
operations, and support progress towards meeting identified priorities are to:

- *In order to assist with developing strategic vision and direction consider hiring an external facilitator. MSAs that have done this have found it useful as part of an executive retreat/working group retreat.*

- *It may be helpful to invite Island Health leaders (site or geo) to meetings on a semi-regular basis. This is particularly valuable at the beginning of new activities to discuss any opportunities for project collaboration, strategic alignment, administrative updates etc.*
- *To ensure continuity of MSA functioning, it is recommended the executive develop a succession plan for working group members and executives. This could be a component of the strategic planning session.*
- *Ensuring projects and activities have a clear objective, reasonable budget and metrics for evaluation will assist in determining the success of the project.*
- *With gated funding, it's important to plan out an annual budget and track expenses (i.e., forecast if you are on track for fiscal year end). Resources and educational opportunities will be developed by Facility Engagement in the coming months to support budgeting and activity review.*
- *Expand on-going projects/activities reports at working group meetings to include a 3 or 6 month progress report on existing projects. This could include: budget status (i.e., are they within budget) as well as an update on project progress (i.e., are they experiencing any barriers? Do they need additional project management, data access/analysis supports, decision to close a project if there has been no progress in x months etc.)"*

The Campbell River Medical Staff Engagement Initiative continues to develop and build on the relationships with colleagues, with Island Health and with allied health professionals.

Respectfully submitted by:


Dr Tournesol (Sol) Gregory
President