

PHSA Medical Staff

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INDEX. In this issue:

Updates and Reminders:

1. Review Process for Incidents of Indigenous-Specific Racism (ISRD)
2. BC MQI Welcomes Dr. Mike Ertel and Dr. Robert Halpenny

In the News:

3. Nurse Practitioners in Select Education Programs Can Apply for BNFBC Bursaries Before September 16

Upcoming Events and Courses:

4. BEACON Medical Staff Leadership Program Launches Module 2

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Updates and Reminders:

1. Review Process for Incidents of Indigenous-Specific Racism (ISRD) That Cause Harm to Patients and Families

As part of the PHSA [Quality and Safety Strategy](#) launched in Fall 2023, a commitment was made to cultivate a culturally-safe and anti-racist environment for all people (staff, providers, patients and families) at PHSA. This commitment honours the [Coast Salish teachings](#) gifted to PHSA, our organization-wide [North Star Priorities](#), along with legislative and provincial responsibilities.

Leaders from the Quality, Risk and Indigenous Health teams have been working with clinical and operational leaders across PHSA to develop an **Indigenous-specific anti-racism review pathway** that is person-centred, culturally safe, and trauma- and violence- informed. The review pathway holds rigor and accountability similar to a critical comprehensive patient safety event review.

An advisory council, with representation from medical staff, was formed to provide guidance and input into the early development of this work.

All staff, including medical staff, are expected to participate in ISRD reviews and restorative approaches to fulfill our organizational commitment to eradicating Indigenous-specific racism and ensure the care

provided at PHSA programs and services is safe for Indigenous Peoples. The goal of the review is to reach resolution with harmed patients and families and to identify and implement system-level recommendations that ensure the same unintended harm does not reoccur.

We are pleased that in our discussions with Canadian Medical Protective Association CMPA, they have reinforced the organization's support to address indigenous specific racism and, in alignment with CMPA's Equity, Diversity and Inclusion Strategy 2022-2025, they have confirmed their support for this work and will encourage their members to participate in reviews for the purpose of learning.

The ISRD is a different process than the critical comprehensive and comprehensive patient safety event review process and therefore s. 51 disclosure restrictions do not apply. This is similar to a PCQO review where the information obtained from that review is shared for the purposes of responding to the concern brought forward by a patient or family. There may be situations where a critical comprehensive or comprehensive patient safety review is also needed and those reviews will be conducted separately.

There is variability in the length of these reviews, but on average it should be expected to participate in two review meetings with a possible interview/perspective sharing meeting and related document review outside those meetings. Participation in restorative approaches varies from a disclosure meeting, writing of a letter to an up to four-hour healing circle.

Medical staff participating in ISRD reviews and related reconciliation who are not already compensated for their time through an employment or contract arrangement with a program, will be paid for their participation, up to a maximum of 10 hours. Complete and submit the [Medical Staff Patient Safety Reviews Invoice Form](#) on POD.

For more information, contact [Andrea Walker](#), executive director, Quality & Safety, [Heather Hastings](#), executive director, Indigenous Health or [Norna Waters](#), executive director, Integrated Risk Management & Compliance.

2. BC MQI Welcomes Dr. Mike Ertel and Dr. Robert Halpenny

The BC Medical Quality Initiative (BC MQI) is welcoming two new medical leaders, Dr. Mike Ertel and Dr. Robert Halpenny, to guide the next phase of provincial initiatives in medical quality. Drs. Ertel and Halpenny join BC MQI as important collaborative work is underway to improve systems for credentialing and privileging in B.C. and to develop a robust provincial approach to periodic reviews for medical staff.

We are very excited to gain the combined strategic depth and collegial reach that Drs. Ertel and Halpenny bring, along with the unique skills that each has honed over their respective careers.

Dr. Mike Ertel joins BC MQI as **provincial medical director** to optimize strategic partnerships and refine direction on key activities, working in dyad partnership with Bev Mitchell, provincial director.

Dr. Robert Halpenny joins BC MQI as **steering committee co-chair** to guide organizational priorities and engage executive leadership, alongside Kevin Brown, co-chair, Ministry of Health and Dr. Sean Virani, vice-chair.

Both Drs. Ertel and Halpenny are now active in their new roles and are looking forward to connecting with the many partners across health organizations who contribute to BC MQI initiatives.

In the News:

3. Nurse Practitioners in Select Education Programs Can Apply for BNFC Bursaries Before September 16

Nurse practitioners pursuing Masters, Doctorate or accredited certification programs may be eligible for bursaries through [the Registered Nurses Foundation of BC](#) if they are enrolled through BC College of Nurses and Midwives (BCCNM), recognized institutions or accredited certification programs, as well as Masters and Doctorate programs that support nursing practice.

Eligibility is based on enrolled program and level of study; additional requirements may apply for specific bursaries. Applicants are automatically considered for general bursaries with an opportunity to apply for specific ones with additional criteria. Nurse practitioners, along with other nursing staff, can apply annually, even if they have previously received a bursary.

To apply and learn more, visit: rnfb.ca/bursaries-how-to-apply

Upcoming Events and Courses:

4. BEACON Medical Staff Leadership Program Launches Module 2

On June 17 and 18, the BEACON cohort came together for its second in-person training module. This module highlighted team dynamics in healthcare settings, dyad partnerships, and the importance of trust as the foundation of all successful relationships. One of the module's highlights was the attendance of PHSA medical and operational dyad leaders who led sessions in which they shared their experiences and secrets to maintaining a strong team.

Since the first module in March 2024, BEACON has also launched numerous evening book clubs for the cohort to reflect on the impact of colonialism in healthcare, and work towards eradicating Indigenous-specific racism. To tie it together, a member of the PHSA Indigenous Health team joined the cohort for Module 2 to provide our emerging leaders further insight to creating culturally safe places free of racism, and how to engage Indigenous patients and families.



What's up next for BEACON? Module 3 in September will focus on well-being – how to look after yourself, your team, and those around you. In addition to the modules and book club, BEACON is developing a mentorship component to connect our emerging leaders at PHSA with medical and non-medical senior leaders across the province.

For more information about BEACON, please contact BEACON@phsa.ca.

PHSA Operational & Leaders' News

- Read the latest [PHSA Operational News](#) and [Leaders' News](#)*:
 - [Support for staff who have a blue screen on their devices](#)
 - [Impacts on B.C. health system and employees from the global CrowdStrike disruption](#)
 - Unique PHSA stories this week
 - Jobs of the week

Ongoing Resources:

- Check out the [Medical Staff webpages](#) on phsa.ca for information and resources for dentists, midwives, nurse practitioners, clinical scientists and physicians.
- Learn about [health and wellness](#) resources to support you.
- Looking for past issues of the Medical Staff Newsletter? Visit our Communications [page](#).
- Visit [POD](#) for stories about our workforce and supporting resources*.