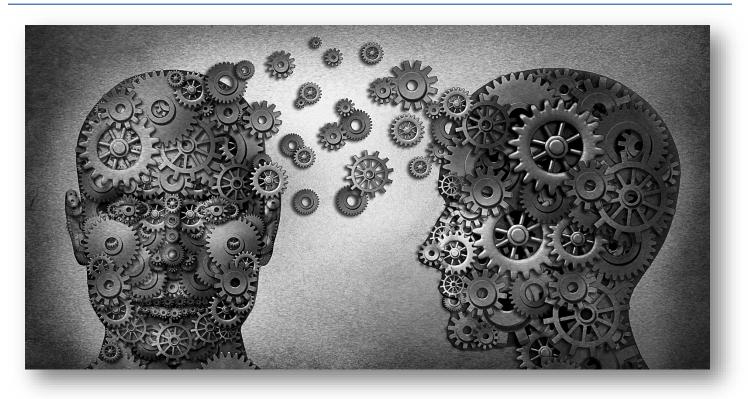
Department of Psychiatry South Island Handbook



Welcome to the Department of Psychiatry, South Island.

Our department acknowledges that we work and live as visitors on the Traditional Territory of the Coast Salish

Lkwungen, Songhees, Tseycum, Tsartlip, Tsawout, Pauquachin and Esquimalt First Nations.

The purpose of this handbook is to provide new and current psychiatrists with an up-to-date overview of information pertinent to the Department of Psychiatry South Island. If you have any questions referring to the material included in this handbook, or if you wish to add information or provide any feedback, please contact Crista Peacey (Regional and South Island Department of Psychiatry admin assistant) at Crista.Peacey@viha.ca

At the end of this booklet you will find a checklist to help you with your orientation.

Thank you.

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Geographical Areas

Island Health's leadership structure includes local responsibilities within four geographic regions (map) combined with island-wide services. A full Integrated Health Services directory (pdf) outlines the leadership in each of these areas.

The four geographic regions within Island Health are:

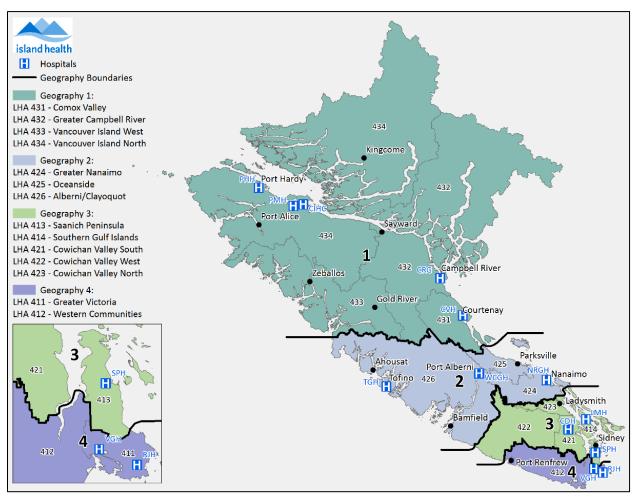
- Geography 1: Campbell River, Comox, Courtenay, Mt. Waddington, Strathcona
- Geography 2: Port Alberni, West Coast, Nanaimo, Oceanside
- Geography 3: Cowichan Valley, Saanich, Gulf Islands
- Geography 4: Victoria, Saanich, Esquimalt, Sooke, West Shore

Within each geography are community hubs, which are centered within communities or large groups of staff and services.

There are also three island-wide portfolios:

- Portfolio P: Aboriginal Health; Integration of Primary & Community Care
- Portfolio S: Surgical Services; Heart Health
- Portfolio M: Mental Health and Substance Use; Public Health; Child, Youth & Family; Seniors Health

Island Health continues to be one organization responsible for the health of all people in all geographies. As a health authority we will continue to work together across our programs, to plan as an organization, and to provide care to patients together.



Aboriginal Health and Cultural Safety

Island Health is dedicated to creating a culturally safe environment for aboriginal people. In turn you are expected to have reflected on the idea of a culturally safe practice in order to engage respectfully with members of Vancouver Island's First Nations.

Quick facts:

There are 50 First Nations on Vancouver Island.

- There are three cultural families on Vancouver Island: Coast Salish, Nuu-chah-nulth, and Kwakawa'wakw.
- Each cultural family contains a number of First Nations.
- Greater Victoria Region encompasses 9 First Nations:
- Songhees, Esquimalt, Tsartlip, Tsawout, Pauquachin, Tseycum, T'Souke, Scia'new, Pacheedaht.
- The City of Victoria exists on the Traditional Territory of Esquimalt and Songhees First Nations.

The department of <u>Aboriginal Health</u> contains numerous links to local, provincial and national resources.

Island Health also offers several Cultural Safety programs that are free of charge for Island Health staff, which you are encouraged to take:

	Training Options	Applicable to	
1	PHSA's Core Indigenous Cultural Competency (ICC) Health Training	All health professionals	8 hours facilitated online.
2	PHSA's Core Indigenous Cultural Competency (ICC) Mental Health Training Program	All mental health professionals	10 hours facilitated online.
3	Island Health Specific information, in services or workshops i.e. customized training	All Island Health employees	Contact Island Health's Facilitator Cultural Safety
4	For the Next Seven Generations - For Our Children	All Island Health employees and those with active Island Health Email accounts	On-line 3-4 hours
5	Relational Practice for Cultural Safety - It Begins with You	All Island Health employees	6 hour (full day - face to face) Contact Island Health's Facilitator Cultural Safety



Map of Aboriginal Communities in South Island

For more information on working with Aboriginal clients and Peers or to register on a course, please visit the Island Health Intranet page: <u>Cultural Safety</u>.

Quality and Accountability Framework Approach

Services should be:

- Person centered (addresses individuals and includes service acceptability and safety
- Evidence informed (addresses knowledge and wisdom and reflects service appropriateness and effectiveness)
- Socially responsible (addresses communities and populations and includes service safety and accountability)

MHSU Strategic Plan

A strategic plan for Mental Health and Substance Use services is published every 3 years. Please contact MHSU Administration for the most current copy.

Mental Health and Substance Use Services

Adult Mental Health and Substance Use Services offer a range of services from short-term crisis intervention to rehabilitation and housing and many options in between.

Our priority is providing appropriate accessible services for adults with serious mental illness and/or addictions. We provide services in the context of a wider support network including other government agencies, aboriginal health organizations, community partners, public agencies, friends and families.

Child and Youth Mental Health and Youth and Family Substance Use Services are delivered separately through the Child, Youth and Family Health portfolio.

Senior's Mental Health and Addiction Services are delivered separately through the seniors and Spiritual Health portfolio.

Services and Programs

Mental Health and Substance Use Services (MHSU) offers community, hospital and residential programs, including:

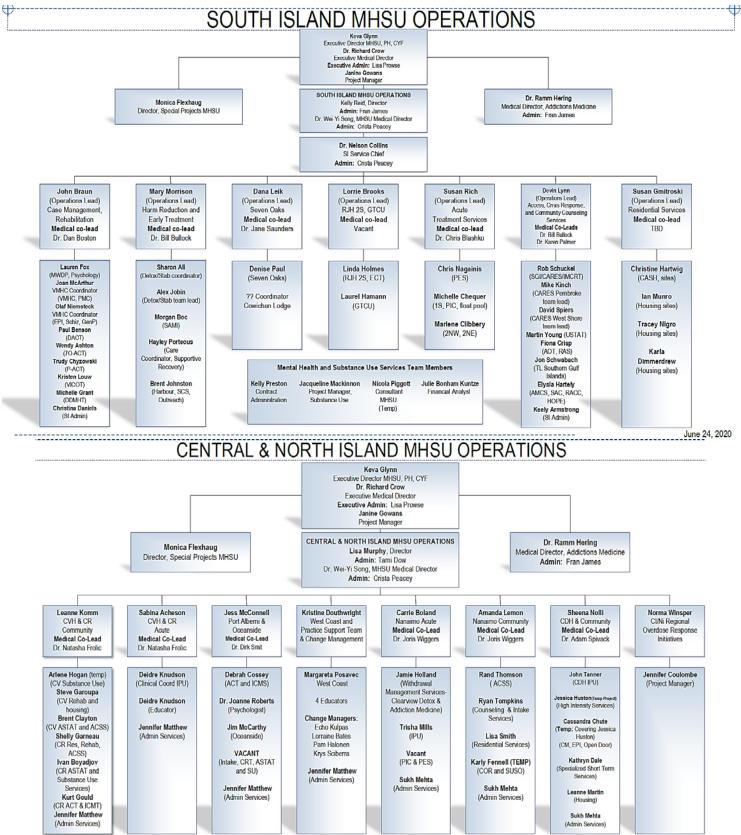
- Crisis Response
- Acute Care Inpatient
- Assertive Community Treatment (ACT)
- Intake
- Substance Use Services
- Short Term Assessment and Treatment (ASTAT/USTAT)
- Early Psychosis Intervention
- Community Support Services
- Psychosocial Rehabilitation
- Residential/Tertiary Services
- Developmental Disability Mental Health Team (DDMHT)
- Eating Disorders/ Mood Disorders
- MHSU programs are organized differently in each community based on the community size and the available support and associated services.

In smaller communities some of the programs are offered through a general service. For example, Psychosocial Rehab may be included in a location's Community Support Services.

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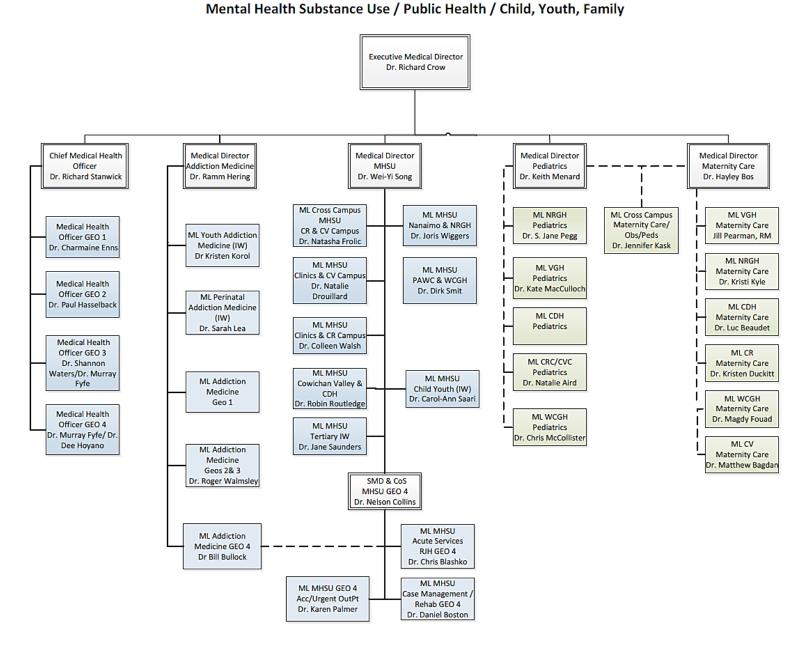
Department of Psychiatry

Regional Organization



Portfolio M – Medical Leadership

Portfolio M – Medical Leadership



Department Meetings: South Island

The Department of Psychiatry South Island meets on the second Tuesday of every month, 8-9am, at Eric Martin Pavilion 188 (Boardroom) Royal Jubilee Hospital.

• You are required to attend as important information is discussed that pertains to the department and program.

You will receive meeting invitations to your outlook calendar for the meeting series. If you do not receive them please contact Crista Peacey (South Island department assistant) at <u>Crista.Peacey@viha.ca</u>

Co-management Model

The MHSU services at Island Health endorse and use a co-management approach, which upholds physician leaders as full partners of non-physician leaders in strategic planning, clinical quality improvement processes, and operational matters as needed. Each physician leader is paired with at least one non-physician leader, e.g., service chiefs with coordinators, site chiefs and division heads with managers, and the medical director and department head with directors.

Island Medical Program Teaching Appointment

If you wish to apply for a teaching appointment with the Island Medical Program and UBC, please contact Niobe Getty at <u>niobeg@uvic.ca</u> to start the process.

MHSU, Telehealth

The MHSU Telehealth program provides consultative psychiatric care to patients in areas that typically experience long wait times or do not have access to local psychiatry services.

Typical TeleMental Health and Substance Use consults could include: medication reviews, substance use screening, assessment, diagnosis and intervention.

Contact

TeleMental Health and Substance Use Intake team:

telementalhealthintake@viha.ca Admin Assistant, Joani Glendale Phone: 250-519-3583 Fax: 250-519-3545

Clinical Coordinator, Judy Gerrand

Physician Champion, Dr Sanjeet Pakrasi

Administrative Coordinator, Keely Armstrong

Clinical Administration

VIHA Email

Please ensure that you check your official Island Health email on a regular basis and ensure you leave an out of office message when you are away as this is the method used for communication. This is a requirement of your service with Island Health.

Some communications contain confidential information that should not be transmitted outside of the safety of the internal Island Health communication hub and so use of private emails is not advised.

NITAOP - Northern & Isolation Travel Assistance Outreach Program

The Northern and Isolation Travel Assistance Outreach Program provides funding for approved physicians who visit rural and isolated communities to provide medical services. The program also provides a travel time honorarium for approved visiting specialists and family medicine physicians.

Medical Affairs works with Island Health programs to determine NITAOP visits for the Region. Then, in the fall of each year, the Health Authority submits a request to the Ministry of Health for the upcoming fiscal year. Physicians and Programs are notified by the Health Authority of approved visits at the beginning of each fiscal year.

Dictation & Transcription

Printed Documents are located within your Orientation File Folder, and additionally you can find the information here: <u>Onboarding - Medical Staff</u> (<u>https://medicalstaff.islandhealth.ca/onboarding/medical-staff-onboarding/getting-started</u>)

On-Call Schedule

**Note: Please refer to the Medical Staff Rules <u>Medical Staff Rules & Bylaws</u> (<u>https://medicalstaff.islandhealth.ca/organization/governance/medical-staff-rules-bylaws</u>) for full details of expectations located on page 16 Section 1.3.

As member of the Department of Psychiatry you will be required to participate in the Adult Psychiatry On-Call Schedule for the Greater Victoria area. This is a year round, 7 days a week On-Call Schedule that goes from Feb 1st to July 31st and from Aug 1st to Jan 31st.

The schedule is published every 6 months and every effort is made to accommodate everyone's busy schedule as much as possible. In May and November, you will receive an email requesting your unavailability dates for the next 6 months.

New members: We would like you to get acquainted with your new position for 3 months before we request your Unavailability. Crista will send you a fillable form for you to fill out at the end of the 3 month mark, so we can get you integrated into the On Call Roster.

- Frequency: average of 1 2 shifts per month (depending on number of department members).
- Shift duration: 24 hours, 8am to 8am
- Handover: 5pm in person in PES and phone call at 6.30am.

Switching dates or finding coverage:

• It is your responsibility to find someone to switch with you or take your shift if you are unable to do it yourself. You must notify the Department of Psychiatry office of these changes so that the online schedule can be amended, to do so please contact Crista Peacey at 250-370-8463 or Crista.Peacey@viha.ca

On-Call Guidelines

South Island adult on-call psychiatrists will cover the following responsibilities and have MOCAP 24 hours, i.e. your call will start at 8am and finish at 8am the next day:

- a. Weekend/holiday patient care rounds starting at 8am in Psychiatric Intensive Care (PIC) Unit, inpatient wards, Consult Liaison (CL) patients throughout the hospitals, support to community MHSU teams active on weekends and evenings (Integrated Mobile Crisis Response Team, Assertive Community Treatment), calls from GPs and other primary care providers. On-call physicians will be careful to work in alignment with the management plans of regular treating inpatient/outpatient psychiatrists and will be there to execute and further the explicit treatment plans during the evening/weekend/holidays. In some cases starting and monitoring inpatient care for patients admitted on a Friday or weekend/holiday will also be provided.
- b. Be available as a second on-call 365 days a year to assist in PES 8 AM to 5 PM when there is urgent clinical need, example, when patients are waiting greater than four hours.
- c. Coverage of all adult MHSU psychiatric services in South island from 5 PM to 8 AM 365 days of the year.
- d. Handover from the PES psychiatrists occurs at 5pm. And phone call at 6.30am.
- e. Referrals from the emergency room for psychiatric consultation must be agreed upon through direct emergency room physician to psychiatrist discussion to confirm patients are medically cleared and most suitable for the psychiatric service as opposed to other dispositions. Following accepting and conducting a consultation if the psychiatrist/psychiatric team evaluates that the patient is not medically cleared or better served by a different clinical service, the psychiatrist arranges this referral. In cases of urgent need for medical treatment the emergency physician will be re-involved in the patient's care.

Vacation and coverage

- Please ensure you have clinical coverage during your time off and admin coverage if you hold a leadership role.
- Please communicate covering physician to the relevant program staff.

Resignation

 Please refer to the Medical Staff Rule & Bylaws Web Page: <u>Medical Staff Rules & Bylaws</u> (<u>https://medicalstaff.islandhealth.ca/organization/governance/medical-staff-rules-bylaws</u>) - For easy access go into the Staff Rules Document - information is located in Section: 1.5.18 Mid-term changes (subsection 1.5.18.2)

Medical Affairs Frequent Contacts & Information

Everything you need to know or require further information on can be found on the Medical Staff Internet: https://medicalstaff.islandhealth.ca/organization/medical-academic-affairs

Governance

•

•

- Medical Staff Contract Management
- Enhanced Medical Staff Support
- Physician Quality Improvement
- Credentialing and Privileging

Practice Design Support

- Engagement and Development
- Leadership
- Recruitment

Continuing Professional Development (CPD)

MHSU CPD Events

Grand Rounds:

The department of Psychiatry organizes talks by internal and external speakers. These usually take place on Tuesdays, 8am-9am at the Eric Martin Pavilion Theatre (room 104), at the Royal Jubilee Hospital site.

Tracking your attendance:

All accredited event count toward your continuing professional development and can be tracked by accessing the following website:

- 1. Go to <u>www.cmeeventscalendar.ca</u>
- 2. Enter Username and Password
- 3. Once logged in, settings can be changed if desired but be sure to save them.
- 4. From there you can access your report(s).

If you don't remember your login information, please contact: <u>CPDRounds@viha.ca</u>

MHSU Practice Resource Team

MHSU Education and Program Support, Practice Resource Team supports the education needs of clinical and support staff in mental health and substance use topics, developing curriculum based on best practice and clinical standards (E.g. Introduction to Integrated Practice, Suicide Risk Management, Provincial Violence Prevention).

You can find these resources on the Intranet: <u>https://intranet.viha.ca/departments/mhas/practice/Pages/prt_adult_addictions.aspx</u>

Island Health's Continuing Professional Development

Island Health also has a fantastic calendar of continuing Professional Development opportunities and you can find these events here: <u>https://www.calendarwiz.com/calendars/calendar.php?crd=medicalstaff&cid[]=all</u>

Once you're into the Calendar, you will see that all the departments have a correlating color code.

18
Palliative Medicine Rounds 8:00am -
9:00am
Psychiatry 8:00am - 9:00am <

- Comox Valley Hospital LMAC 4:00pm
- MPCC 4:00pm 5:30pm
- Cowichan District Hospital LMAC
- 5:00pm

For Example: Psychiatry is Pink

Safety at Work

Unit-specific Safety Orientation

When you start working on a new unit, please be sure to get an orientation:

- By the unit manager or delegate for outpatient programs
- By the clinical resource leader or delegate on inpatient units
- For VMHC there is a protocol for potentially violent patients. Details of this are available from the unit manager. Be sure to use one of the designated offices with observation windows. For more serious risk use the large conference room. This is the only interview area at VMHC with 2 exit doors. Be sure that another staff person is aware that you are interviewing a potentially violent patient.
- Physicians working in PES need a more detailed safety orientation. Please contact the medical lead for PES, Dr. Diana Ingram, before your first shift. Also meet with the unit manager, Susan Rich, for additional information.

Personal Alert Devices

At Victoria Mental Health Centre and Psychiatry Emergency (Archie Courtnall Centre) carry your own "Spider Alert" at all times. Be sure to test the unit monthly. Call security services to advise them that it is a test. Do the test in your office and check with security that it accurately localized. The unit manager should have a monthly testing protocol in place. Be sure that you are included in this protocol.

For the Patient Care Centre, pick up an AeroScout on the unit. Be sure to return it at the end of the day. If you take an AeroScout home there is a risk that it will run out of batteries at home and then when you return to the hospital, it will not be detected by the system and the low battery alert will not be triggered.

- Be aware of the protocol in place when personal alert devices are not operational.
- Clinical faculty are role models for our medical students and residents. Please demonstrate that physician safety is an important issue.

Personal Safety - Island Health Safety Hub

All physicians should be familiar with the "Safety Hub" on the VIHA Intranet. There are several modules that are particularly relevant especially around verbal de-escalation. These modules are part of the Provincial Violence Prevention Curriculum. Link to Safety Hub: (https://intranet.viha.ca/safety/Pages/default.aspx)

Please familiarize yourself with the Violence Prevention Education intranet page:

<u>https://intranet.viha.ca/safety/risks/violence/Pages/violence-prevention-education.aspx</u> On this page you will have access to the Violence Prevention Learning Hubs, which includes scheduled classroom sessions through the Employee "Learning Management System" (LMS) <u>https://intranet.viha.ca/education/lms/Pages/default.aspx</u>

Note all staff are required to complete the Personal Violence Prevention Modules

Another excellent reference recommended at the 2015 American Psychiatric Association Annual Meeting session on behavioral emergencies is "Verbal Judo". It is also available electronically on Kobo.

• Verbal Judo: The Gentle Art of Persuasion, George J. Thompson, Jerry B. Jenkins. 1993

With increasing evidence that the use of seclusion and restraint (chemical and physical) is associated with worsening of aggression and worse outcomes, there is growing awareness of the importance of de-escalation.

De-Escalation best practices are described in the following reference (available online for free): https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3298202/

Situational awareness is another key competency. The CMPA has an excellent summary: <u>https://www.cmpa-acpm.ca/serve/docs/ela/goodpracticesguide/pages/communication/Team_Communication/situational_awareness-e.html</u>

The CMPA emphasizes the importance of collaboration, communication, and team work to ensure patient, staff, and physician safety.

"Situational Awareness is a cognitive skill that includes being conscious of what is happening around you, continuously checking perceptions with reality and the related flow of information. This skill includes predicting the immediate and future impact of your own or the team's actions, including anticipating complications.

It is easy to lose situational awareness, so physicians should welcome and facilitate input from all healthcare professionals."

Documentation and Reporting (PSLS)

Careful documentation is essential in all cases where risk of violence is a concern. In clinical settings where there is a blended paper and electronic chart, please be sure there is an entry in PowerChart to ensure inter-professional communication.

Documentation should include:

- Protective factors
- Risk factors
- Mitigation
- Clinical Decision-Making

Island Health has a robust, evidence-based reporting system for any violent incidents. This system is for reporting any adverse patient-safety or quality incidents. The first step is logging the event in the PSLS online tracking tool, which is found on the Patient Safety & Learning System intranet page: https://intranet.viha.ca/departments/quality/psls/Pages/default.aspx It is very user-friendly and takes just a few minutes. Alternatively you can collaborate with the case manager or other staff in completing the PSLS. Once completed the safety review process will proceed.

If a medical student or resident was involved in the incident, you must also notify the undergraduate or postgraduate program director. Residents who have experienced threatening situations or patient suicides should be encouraged to contact the UBC Resident Wellness Program.

In some situations contacting the police may be required. Discussion of this and other medical-legal issues is beyond the scope of this orientation guide.

Physician Well-Being

Violent incidents and suicides are rare but very traumatizing for most physicians.

- Please discuss your concerns with the Site Chief.
- Make use of the Physician Support Program.
- Having supportive colleagues, family and friends is also important, keeping confidentiality in mind at all times.

Physician Health Program (PHP)

PHP supports and assists physicians and physician trainees in overcoming challenging issues that can impact their health and well-being. Issues can include: physical health, mental health and addictions, relationship issues, workplace issues and burnout.

PHP also offers a variety of preventative and educational services that address professional and personal issues, such as burnout, stress management, conflict resolution and improving collegiality.

PHP believes in assisting physicians address issues early. You can access our confidential service 24 hours a day, 7 days a week.

In urgent situations, you can speak with a counsellor immediately. Most callers will be booked as a 1:1 connection with an Intake physician who will provide confidential advocacy, support and referral to appropriate services.

Help is available 24/7 at: 1-800-663-6729

More information can be found on the Doctors of BC Website:

<u>https://www.doctorsofbc.ca/resource-centre/physicians/physician-health-program-php</u>

Mental Health Act

Please take the Mental Health Act (MHA) module online to make sure you are up-to-date with procedures. Please refer to the following link to access information and course modules: <u>https://intranet.viha.ca/safety/risks/Pages/mental-health-act.aspx</u>

Additionally you should familiarize yourself with the Government of British Columbia's Mental Health Act website where you can find the Mental Health and Substance Use Forms. https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/mental-health-act

Other Helpful Contact Information

Island Health Physician Website

• <u>https://medicalstaff.islandhealth.ca/</u>

<u>Credentialing and Privileging</u>: - If you have any questions for the Credentialing and Privileging Department, please contact – <u>credintialing_Office@viha.ca</u>

- Privileges
- Applying for Changes to Privileges
 - o Changes to Department or Divisions
 - Changes to procedural Privileges
 - o Leaves of absence e for six weeks or more (Medical, Educational, other)
 - o Relinquishment of privileges
 - o Retirement
- Reappointment process
- PowerChart Access for Community Physicians communityEHR@viha.ca
- Update your contact Information <u>PDR-DataEntry@viha.ca</u>
 - o Office address
 - o Phone Number
 - o Fax Number
 - o Pager
 - o Email
 - o Surname

Engagement and Development:

- For medical staff leadership and professional development inquiries, please contact: Medstaffdevelopment@viha.ca
- For medical staff recognition and communications (including medical staff website) inquiries, please contact: <u>Medstaffengagement@viha.ca</u>

Governance:

The Medical Staff Governance Team is strategically aligned with Island Health Leadership and the Health Authority Medical Advisory Committee (HAMAC). This team:

- Oversees implementation of strategic initiatives to support all aspects of medical staff governance and engagement in accordance with the Medical Staff Bylaws (MSB) and Medical Staff Rules (MSR), and Island Health policies and procedures
- Supports the development, implementation, and administration of the Medical Staff Department Structure
- Supports the development and administration of the Medical Staff Committee structure
- Supports the Enhanced Medical Staff Support Program (EMSS). Contact EMSS@viha.ca.

The administrative team can be reached by email: medstaffgovernance@viha.ca

Parking:

To obtain information on physician parking rates and how to obtain a parking permit, please contact parking services directly:

- South Island: <u>Parking@viha.ca</u>
- Additional information such as parking office hours, bicycle storage, and alternative commuting options is available through Parking Services: <u>https://intranet.viha.ca/departments/parking/Pages/default.aspx</u>

Parking Office Hours of Operation:

Royal Jubilee Hospital 1952 Bay Street Victoria, BC V8R 1J8 Office Hours: Mon-Fri 07:45-15:30 Excluding Stat Holidays Daily Office Closures at 10:00-10:25, 12:00-12:40 and 14:30-15:00 Phone: 250.370.8303 Fax: 250.370.8635

Physician Lounges and Mailboxes:

To request a mailbox at NRGH, RJH, or VGH, please contact Credentialing_Office@viha.ca

Computer Training and Support:

Island Health's intranet site offers a variety of online tutorials for common computer assistance, such as:

- Microsoft Outlook: https://intranet.viha.ca/departments/imit/servicedesk/online_help/email/Pages/default.aspx
- Auto Conferencing: <u>https://intranet.viha.ca/departments/imit/servicedesk/online_help/VNServices/Pages/tel_teleconferencing.aspx</u>

The IM/IT Service Desk is also available to assist:

• Local 18777

PUBLIC WEBSITE

Clinical Resources

Intranet Hom

Employee

ADDITIONAL VISUAL TOOL – SESSIONS DASHBOARD

As you know when you're a new employee navigating a system you're not familiar with can be daunting at best. One of the Dashboards that you will be accessing frequently will be your sessional Dashboard.

What is Sessional Contracts?

Service and sessional contracts support the provision of clinical services throughout Island Health and are funded by the Ministry of Health, Alternative Payment Programs, and with approval, Island Health funding.

Service contracts are for agreed upon physician services and are paid on an FTE basis subject to the Physician Master Agreement (PMA) rates. Service contracts are used to provide dependable physician income in situations with low or variable patient volumes, or when the services to be provide are complex and time consuming and not well supported by fee-for-service. An example of a service contract is primary care services in rural communities such as Galiano Island, Cortes Island, etc.

Sessional contracts provide time-based funding for physician services where one session equals 3.5 hours. Sessional funding is often used when patient care is comparatively time-intensive. Sessional contracts are used extensively throughout Island Health to provide psychiatry services, rehabilitation services and GP oncology services to mention a few.

Navigation Tool:

Orientation checklist

- 1. Go into the Island Health Intranet and once there you will click into Our Organization
- 2. Once on the page you will see a huge list of departments find <u>Medical Staff Contract Management (approx.: half way down the page)</u>
- 3. Click into the hyperlink which takes to the Medical Staff Contract Management Pg.
- 4. Now that you're on the right page Scroll down to Service & Sessional Contracts There you will find the Dashboard link



ORGANIZATION

Contract Management

Service & Sessional Contracts

Service and sessional contracts support the provision of clinical services throughout Island Health and are funded by the Ministry of Health, Alternative Payment Programs, and with approval, Island Health funding.

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Contact MSCM when exploring:

- What funding sources are available for clinical services?
- Clarity regarding existing contract language, service expectations, or reporting requirements
- Requesting changes to an existing contract
- Application process for a new sessional contract

The online sessional billing application can be accessed here on the Sessions Dashboard link 🖉 .

On-Site Orientation Checklist

	DEPARTMENT CHECKLIST				
1. A	dministration				
	Department Meetings				
	Physician Billing Considerations				
	On-Call Scheduling and Procedures				
	Department Communications				
	Key Contacts				
	Emergency Procedures (Fan-Out lists, disaster plans, assembly areas)				
	Access (Keys/ codes, etc.)				
	Mailboxes				
IM/	IM/ IT - 18777				
	Access to Shared Drives, PowerChart & Departmental SharePoint Platform				
	Department Specific Applications				
	Confirmation				
Pati	ent Care (Department specific patient care policies and procedures)				
	Admitting, Transfers, Discharge				
	Consultations				
	Treatment Procedures				
	Diagnostics and Labs				
	Electronic Health Record				
	Quality and Safety Initiatives				
	Critical Situation Contacts (Algorithm of who to Contact)				
Edu	cation & CME Credits				
	Violence Prevention Education/ Training				
	Participation CPD Events, which can be applied towards your CME Credits				
	acility Tour				
Intr	oduction to Key Personnel				
	Department contacts				
	Administrative Contacts				
	Building Contacts				
	ility Overview and Landmarks				
	Overview of services provided and location of said Services				
	General layout, facility Map				
	Doctors' Lounge and Mailbox				
	Switchboard Protocols				
	Parking (Vehicle/ Bike/ Motorbike)				
	Food Court – Patient Care Centre				
	Change Room Facilities				
Safe					
	Site Specific Emergency Procedures				
	Assembly Areas Site Disaster Plan				
	Departmental/ Unit Specific Safety Procedures				