

Health System Redesign Funding

July 21, 2022

Steering Committee (Meeting held minimum of quarterly subject to funding availability):

Dr. Paul Johar, EMD, Physician Partnerships & Wellness (Chair)
Tracy Irwin, ED, Innovation, Planning & Transformation
Dr. Dave Williams, EMD, Quality & Safety
Lesli Matheson Jennings, Interim ED, Clinical Quality & Strategic Priorities
Jag Sandhu, Leader, SSC Initiatives

Quorum: Minimum of three (3) members of the steering committee, with at least one (1) physician representative and one (1) administrative representative.

FHA Priorities

1. Projects must align with Health System Focus and Priorities of the Ministry of Health (Responding and Recovering from COVID-19 Pandemic, Responding to the Ongoing Illicit Drug Toxicity Crisis, Health Sector Strategic Priorities, Regional Health Service Improvement Initiatives).
2. Highest Priority to projects aligned: [2022/23 Fraser Health Objectives and Key Results \(OKRs\)](#)
3. Projects must align with Fraser Health Strategic Priorities (Patient Experience, Provider Experience, Healthy People & Communities or Create Value)
4. Projects supported by Senior Clinical Leadership Committee (SCLC) members and approved by Executive (where applicable).

Funding Criteria

1. Funding is intended to assist health authorities to receive meaningful physician input and engagement in acute and community-based service redesign activities and projects,
2. Physician input and engagement should reflect appropriate application of the [IAP2 Core Values and Spectrum of Engagement](#). Identification of the level of engagement anticipated in the initiatives supported should be clearly outlined for each project or engagement activity,
3. Funding is applied for time-limited redesign projects and broad scale physician engagement in health authority service redesign activities,
4. Funding is not intended for ongoing program administration, committee work or to cover the cost of staff positions.
5. Funding is not intended to compensate health authorities to cover costs of staff participation or costs they may incur from having taken part in Health System Redesign projects as part of their role.
6. Funding is not intended to compensate Executive Directors.
7. Funding is intended to cover physician participation beyond hospital administrative duties for which physicians are already responsible and compensated (all Health Authority medical leaders are not eligible as per Ministry and Doctors of BC policies),
8. Funding should not be applied where funding responsibility rests elsewhere, regardless of whether funding for those activities is considered inadequate.
9. No retroactive adjustments will be entertained. Invoice must be submitted within one (1) month of the service

Link: [HSR Project Application Form](#)