



Provincial Health  
Services Authority

**ASCEND**

Advancement and Skill Centre for  
Engagement and Development

# At A Glance:

PHSA MEDICAL STAFF EDUCATION  
AND ENGAGEMENT REPORT  
2025

ISSUE 02  
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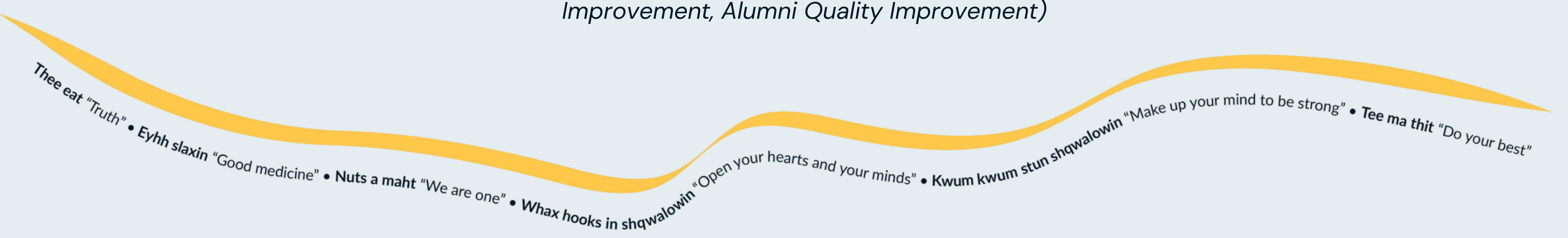
# Overview

## Territory Acknowledgement

## Acknowledging Your Contributions

## Engagement in Action: By The Numbers

UBC Sauder Physician Leadership  
Indigenous Specific Anti-Racism Training  
Medical Staff Town Halls  
BEACON  
Health System Redesign  
Quality Improvement Medical Staff Involvement  
(*Physician Quality Improvement, Spread Quality Improvement, Alumni Quality Improvement*)



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# Territory Acknowledgement

PHSA provides services to a diverse population including First Nations, Métis Peoples and Inuit living in various settings and communities across British Columbia. As a provincial network, we operate on the unceded traditional and ancestral lands of First Nations.

Our main office is located on the ancestral and unceded territories of the x<sup>w</sup>məθk<sup>w</sup>əyəm (Musqueam), Sk̓wx̓wú7mesh Úxwumixw (Squamish Nation), and sə́lílwətaʔ (Tseil-Waututh Nation). We give thanks for the opportunity to live, work and support care here.

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# Acknowledging Your Contributions

Big thank you to our partners and participants.

On behalf of PHSA, we want to share our heartfelt gratitude to Doctors of BC, Shared Care, and the Specialist Services Committee. Your ongoing support and collaboration make this work possible, and continue to bring people together in meaningful and impactful ways. We also want to sincerely thank our project medical leads, staff, and everyone who has taken part in these initiatives. Your dedication, time, and care do not go unnoticed. It is truly inspiring to see how your efforts are strengthening our healthcare community and creating real change for patients and families.

We are proud to support medical staff across a wide range of programs in 2025, including UBC Sauder Physician Leadership, Physician Quality Improvement, Spreading Quality Improvement, Alumni Quality Improvement, Health System Redesign, BEACON, ISAR training, and PHSA Medical Staff Town Halls. Each of these reflects your commitment to learning, collaboration, and improving care. Your contributions are making a lasting difference in healthcare and patient outcomes. Thank you for the heart you bring into this work and for continuing to show up, lead, and care.

**Medical Staff  
Unique  
Engagements:**

**4,040**

**Your commitment is shaping a stronger,  
more connected healthcare community.**



**doctors  
of bc**



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# Indigenous-Specific Anti-Racism Training

As of January 2026, across PHSA, nearly **1,400 medical staff (65%)** have completed San'yas training, and **1,200 (55%)** have completed ARRT. Pre-paid PHSA registrations for San'yas closed in early June 2025.

These trainings are mandatory under PHSA's Indigenous-Specific Racism and Discrimination Policy. This policy requires all staff, including medical staff, to complete education on Indigenous cultural safety, anti-racism, and the ongoing impacts of colonialism in healthcare. It reflects PHSA's commitment to addressing systemic racism and improving care and outcomes for Indigenous patients, families, and communities.

## Completion Percentage:

San'yas

65%

- 63% – BC Children's & Women's
- 61% – BC Cancer
- 89% – BC Centre for Disease Control
- 86% – BC Mental Health & Substance Use

## Completion Percentage:

ARRT

55%

- 55% – BC Children's & Women's
- 49% – BC Cancer
- 86% – BC Centre for Disease Control
- 80% – BC Mental Health & Substance Use

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# PHSA Town Halls

## Medical Staff Town Halls

Previously, on **April 23, 2025**, the medical staff town hall featured interim president and CEO, Dr. Penny Ballem. The session included an update from Dr. Sean Virani, VP, Medical and Academic Affairs and a Q&A with Dr. Penny Ballem.

### Medical Staff Town Halls

April 23, 2025

200 medical staff attended

200

### PHSA-wide Town Halls

December 11, 2025

2800 staff

September 11, 2025

3000 staff

June 13, 2025

2000 staff

## PHSA-wide Town Halls

The **December 11, 2025** town hall featured remarks from Dr. Penny Ballem, who spoke about the initial steps following the health authority review recommendations.

On **September 11, 2025**, Dr. Penny Ballem led the town hall with reflections on ongoing administrative restructuring. The discussion also included updates on the health authority review and PHSA's efforts to balance its budget.

Earlier, on **June 13, 2025**, the town hall was facilitated by Laurie Dawkins and opened with remarks from Elder Glida. Dr. Penny Ballem provided organizational updates, with discussions centered on the health authority review and next steps for PHSA.

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## Medical Staff Participants:

24

Cohort 1:  
Mar 2024 – Nov 2025

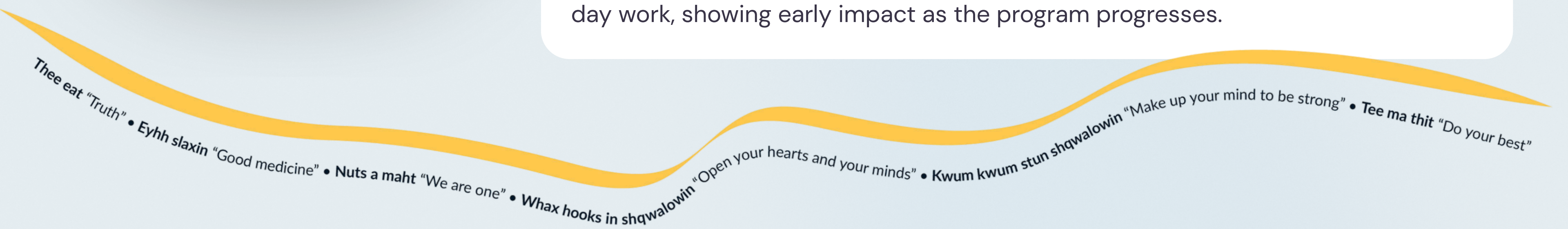
Cohort 2:  
Mar 2026 – Nov 2027

27

BEACON is a 24-month leadership program for PHSA medical staff, offering practical, comprehensive training to support both current and emerging leaders, aligned with PHSA's Vision and North Star priorities.

The **BEACON Cohort 1 pilot** has officially come to a close. **Cohort 1 celebrated 24 graduates**, marking an important milestone for the program. The **November 7, 2025** graduation was a reflection of the commitment and leadership potential of participants, as well as the collaborative effort behind bringing BEACON to life.

As **BEACON Cohort 2 began with 27** participants taking part in sessions that focus on understanding how they lead, especially under pressure. They are reflecting on how their values and identities influence their leadership and building their emotional intelligence in how they communicate, make decisions, and support their teams. For many, this learning is already shaping how they show up in their day to day work, showing early impact as the program progresses.



## Indigenous Specific Anti-Racism Training Sessions

### Medical Staff Participants:

Experiential Learning Session  
with Len Pierre

23

An Indigenous Cultural Safety  
and Humility Lens for Leading  
through Conflict with Harley  
Eagle

21

Compassionate Leadership  
Training with Sean Atleo's Team

15

23 Participants attended the **Community-Based Experiential Learning session in collaboration with Len Pierre Consulting** in April 2, 2025. This session provides cultural safety and humility teachings through immersive learning and provides opportunities for ongoing relationship-building with Indigenous communities.

A total of 21 participants, including BEACON Cohort 1 members and their operational partners, attended a full-day workshop facilitated by Harley Eagle on June 19, 2025. The session focused on **Indigenous Cultural Safety and Humility and Leading Through Conflict**, combining reflective practices and dialogue to deepen awareness of identity, systemic racism, and trauma-informed leadership approaches.

**The Compassionate Leadership Training – Ya'ak-stalth: Leading with Compassion in a Tumultuous Era**, facilitated by Heather Atleo and Sean Atleo, was attended by 15 BEACON participants. Offered by the Rural Coordination Centre of British Columbia, this immersive, cohort-based experience emphasized relational leadership, psychological safety, and culturally grounded approaches to leading in healthcare.

# UBC Sauder Physician Leadership

## Medical Staff Participants:

Cohort 24:  
September 2025– April 2026

4

2 – BC Cancer

2 – BC Centre for Disease Control

Cohort 25:  
January 2025– June 2026

4

1 – BC Women's

1 – BC Cancer

1 – BC Centre for Disease Control

1 – BC Mental Health & Substance Use

Funding is available for medical staff to take part in the Sauder Physician Leadership Program at UBC's Sauder School of Business to further develop their leadership skills.

The program offers new perspectives on healthcare leadership and builds practical, adaptable skills that support success across different roles and healthcare settings. Here is the distribution of the eight participants funded in 2025, organized by program.

## Cohort 24 Project Examples:

- High Threat Pathogens: How Quickly Can We Confirm?
- Paving the way for accessible diagnostic testing
- Multi-disciplinary Early-Stage Breast Cancer Clinic

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# Health System Redesign

Health System Redesign supported 35 projects, including 28 new initiatives and several ongoing projects carried over from previous years. This funding supports PHSA in strengthening medical staff engagement and participation in key quality improvement initiatives.

	Contracted GP	Contracted SP	Salaried GP	Salaried SP
Q1 Apr-Jun 2025	26	62	0	22
Q2 July - Sep 2025	33	27	0	13
Q3 Oct - Dec 2025	24	63	5	9
Q4: Jan - March 2026	12	61	1	10
<b>Total</b>	<b>95</b>	<b>213</b>	<b>6</b>	<b>54</b>



## Examples of Health System Redesign Projects

### Pediatric Emergency Dept Patient Flow Committee

- Improves pediatric ED flow and equitable care through physician engagement in a collaborative, nursing-led initiative.

### Correctional Health Services Model of Care & Future Planning

- Reviews and continuously improves the Model of Care to guide future system planning.

### Electronic Medical Record Implementation

- Engages physicians in designing and implementing a new electronic medical record system for Correctional Health Services.

### PedSAVES

- Validates a pediatric surgical adverse event reporting system to improve reliability and severity grading.

### Forensic Psychiatric Assessments Redesign

- Redesigns the forensic court-ordered assessment program to improve timeliness and quality of clinical recommendations.

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# Physician Quality Improvement (PQI)

PQI builds physician capacity in quality improvement through training and hands-on action learning projects, fostering a culture of learning and commitment to healthcare improvement. A total of 24 medical staff completed Level 3 training in Cohort 8, and 25 in Cohort 9. In addition, 160 medical staff (79 from Cohort 8 and 81 from Cohort 9) were engaged in PQI projects across both cohorts. This year, 37 medical staff also participated in Level 2 training sessions.

## Level 2:

- Curriculum review completed; courses delivered; planning ongoing for upcoming sessions

PQI Level 2 offers three trainings per year, with 2 x 3.5hr sessions of virtual training in quality improvement.

- Provides basic information on all aspects of running a QI Project. Suited for teams working under a QI Lead with experience.

PQI Level 3 provides 12 months of interactive training and support for a QI project and an ongoing wrap-up support.

- 7 full-day interactive sessions
- Monthly coaching sessions by project
- Data development & analysis support

## Medical Staff Participants:

Level 3  
Cohort 8

24

Cohort 9

25

Level 2

37

## Level 3

### Cohort 8:

- All participants graduated the curriculum and are now in the process of finishing their projects. Project posters have been developed and now looking to spread.

### Cohort 9:

- Learning Sessions 1-6 completed.
- Coaching and data collection ongoing for all projects.

### Cohort 10:

- Intake and preparation underway for next cohort

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# Physician Quality Improvement (PQI)

## Project Highlights

### Cohort 8

- **BCMHSUS; Reduce In-patient metabolic disorder development**
  - 100% of new intake clients at Red Fish are screened for metabolic disorder risk with a new screening protocol within 1 year.
- **BC Cancer; Improve geriatric needs assessment**
  - In 12 months, team-based care (TBC) registered nurses (RNs) in the ambulatory care unit (ACU) will perform geriatric screening with 60% of eligible patients with lung cancer at their initial medical oncology consult
- **BCCH; Incorporate food insecurity screening**
  - Within 12 months, we aim to ensure that 90% of clients accessing care in our Complex Developmental and Behavioural Conditions (CDBC) clinic are screened at intake for food insecurity with the option to be connected to emergency food and nutrition resources

### Cohort 9 (currently in development):

- **BC Cancer; Establish the Rehabilitation Program**
  - To increase capacity in the BC Cancer–Kelowna Cancer Rehabilitation Clinic from 0% baseline to 90% operational utilization by June 2026, while establishing standardized referral, screening, and triage/interdisciplinary care pathways
- **BCCH; Enable NHA collaboration on autism screening**
  - 50% of children under the age of 6 who are highly symptomatic for autism will be assessed for autism\* in a community pediatrician's office rather than being referred to the Northern Health Assessment Network by October 2026.

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# Spreading Quality Improvement (SQI)

2025 marked a significant year for the PHSA Spread Quality Improvement Program, with the successful closure of 3 Cohort 1 projects and transition into the next phase of provincial spread through continued support of Cohort 2 projects, onboarding two new projects, and sustaining the provincial spread of Penicillin Allergy De-labelling. Since 2021, when the Specialist Services Committee (SSC) identified spread as a strategic priority, continued investment in dedicated staff and collaborative learning has enabled the team to re-engage high-impact projects such as Neonate Seizure Management, launch provincial initiatives, like the Sprint, and strengthen pathways for long-term provincial implementation, supporting sustained system-wide improvement.

## Cohort 1 Projects (2025)

- Serious Illness Conversations and Golden Hour: closed in 2025, generating key lessons in spread, adaptation, and sustainability
- Biopsy Clip Marker for Breast Cancer: completed final data collection in 2025 and is preparing for project closure
- Neonatal Seizure Management: successfully re-engaged through:
  - Provincial collaborative session across all four Level 3 NICUs in BC
  - Work with the Canadian Neonatal Network team to advance provincial (and national) reporting on neonates' seizure care
- Penicillin Allergy Delabelling from Cohort 1 advanced into a successful provincial initiative with strong system-wide impact

## Cohort 2 Projects (2025)

### Advanced Care Planning (ACP) – BC Cancer

- Two provincial ACP SQI learning sessions in 2025 (March and October)
- Five site-specific Lunch & Learn sessions completed across BC Cancer sites (Vancouver, Surrey, Abbotsford, Prince George, and Kelowna)
- Development of the new ACP workflow and completion of the ACP Change Package
- Patient partners engaged to strengthen patient-centred design and implementation
- ACP PowerForm saves increased from ~200 in 2024 to nearly 500 by Spring 2026 (Strong indicator of improved ACP documentation and increased provider engagement across sites)

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# Spreading Quality Improvement (SQI)

## Cohort 3 Projects Launched (2025) – 2 new projects

### 1. Optimizing Alveolar Cleft Repair Timing in BC

- Provincial cleft repair guide booklet and referral forms developed and distributed to **160+ orthodontists** and clinics across BC
- SQI provincial cleft repair session: engaged **60+ participants**, strengthening awareness and adoption across the province
- Next phase: data tracking, evaluation, and long-term sustainability planning

### 2. Febrile Neonates (BC Children's ED → Surrey Memorial Hospital Peds ED)

- Completed first year of implementation with early signs of reduced time to antibiotics (outcome measure)
- Provincial collaborative session engaged 12 Fraser Health ED sites, strengthening shared learning and alignment across teams
- Next phase focused on sustainability planning and identifying further provincial spread opportunities

## Scale and Impact: Penicillin Allergy De-Labeling

- Transitioned from PHSA to local Health Authority SQI teams to support continued spread and sustainability following the Sprint initiative (**26 teams, 86 participants**)
- Provincial Penicillin Allergy De-Labeling Hub project plan developed for launch in early 2026
- Recognized as a Top 30 Global Improver nominee at the Institute for Healthcare Improvement International Forum on Quality and Safety (Results Sprint 2026)

## Major Presentations and Recognition (2025)

- Canadian Society of Allergy and Clinical Immunology / CANAMS Webinar – Penicillin Allergy De-Labeling (April 14, Canada-wide)
- PQI Alumni Webinar (PAWS): Sprinting Towards Change (April 24)
- JCC Conference Rapid Fire Presentation
- 2025 Penicillin De-Labeling video released on YouTube
- Featured in CBC coverage on penicillin de-labeling in BC
- Institute for Healthcare Improvement International Forum on Quality and Safety – (presentation Spring 2026)

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# Alumni Quality Improvement (AQI) & Shared Care Portfolio

Medical staff who completes quality improvement training become part of an alumni network across PHSA. There are currently **192 alumni** in this growing community. This activated group of quality-trained medical staff is beginning to play a pivotal role in shaping a culture of quality at PHSA. To continue engagement of this group, the program provides ongoing training, presentations on key PHSA priority areas, connections to existing quality structures and networks, and support for continued quality improvement work that aligns with PHSA's vision.

- Launched the Alumni Advisory Council and Shared Care Steering Committee
- Expanded the QI Directory of new Alum that are activated at PHSA, enhancing visibility of alumni projects and connections
- Advanced impact work, including support for post-PQI project sustainability and special BCMHSUS alumni initiatives

## Advanced Training & Capacity-Building Workshops

PHSA AQI aims to build a community of QI-trained providers who support leadership in fostering and spreading QI activities. This presentation was offered to individuals interested in learning more about QI.

**January 2025 – PHSA PQI Alumni Network “Common Sense Medication: Moving Back to Outcomes that Matter,” featuring Dr. Christopher Booth (60 alumni):** The session aimed to help participants understand the value crisis in contemporary medicine, review outcomes that matter from a patient perspective, and discuss the mandate and work of the Common Sense Medicine initiative.

**January 2025 – BC Cancer Quality Dinner (24 alumni):** At this event, we heard Dr. Monica Krzyzanowska present “Integrating Quality into Innovation and Care: Lessons from Oncology,” followed by an engaging discussion on advancing quality improvement in healthcare.

**March 2025 – Business Case Workshop (16 alumni):** Led by Duncan Campbell, this workshop focused on creating compelling business cases for QI initiatives. Participants explored their own projects or case studies to determine effective ways to position their work. The session also covered healthcare funding flows at both provincial and federal levels, identified key metrics for QI projects, and outlined the components of a strong business case framework

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# Alumni Quality Improvement (AQI) & Shared Care Portfolio

## Shared Care Committee Projects

- Supporting several medical staff to help turn their ideas into proposals, then implement Shared Care projects that address some of the key PHSA priority areas:
  - Cancer Action Plan:
    - 15 Shared Care Expression of Interests have been approved for implementation, focusing on 3 categories (transitioning care, improving diagnostic pathways, and pain management)
  - Medical Assistance in Dying (MAiD)
  - Enhancing Psychiatric Access
  - Neurofibromatosis Care Improvements
  - Reducing C-Section Rates
- Continued collaboration on CST workflow optimization to improve system efficiencies.

## Medical Staff Participants:

21 Project Leads  
49 Participants

70

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# Quality Improvement Graduation

At the 2025 PHSA Quality Improvement Graduation, 28 members of Cohort 9 were honoured. Held on October 2 at UBC, the event celebrated the growing impact of QI work across PHSA and partner organizations. Presentations from project and program leaders highlighted the importance of collaboration, shared learning, and innovation in advancing patient care across BC.

This year also marked a significant milestone, with both Spreading QI and Alumni QI participating in the graduation for the first time. The event showcased Cohort 1 Spread QI projects and recognized the Sprint for Penicillin Allergy De-Labeling Initiative, alongside the achievements of Spreading QI teams. This next step of inclusion reflects the growing momentum and alignment across QI programs, reinforcing a shared commitment to spreading impact, strengthening collaboration, and improving care across the province.

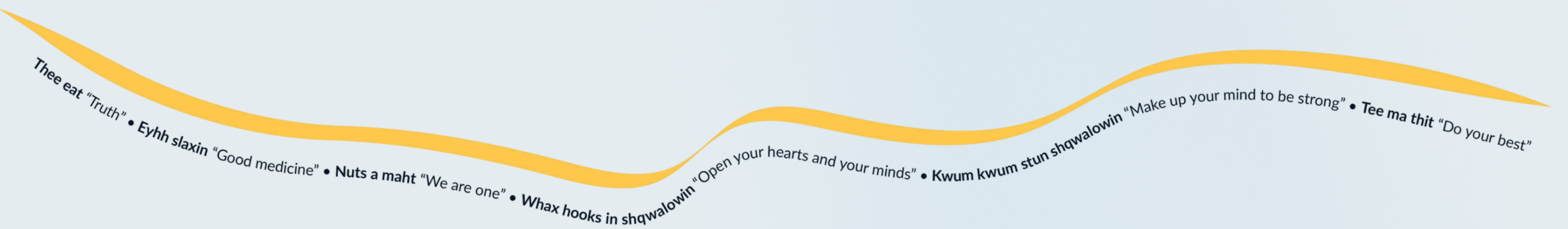


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# Engagement in **Action**

# Thank You

*Thank you for the care, leadership, and  
commitment you continue to bring to this work.*



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