

Culture Corner

VCH Self-Identification & Workplace Experience Survey

Dr. Joy Masuhara, Regional Medical Director of Diversity, Equity and Inclusion (DEI) and Susanna Tam, Director of DEI, joined HAMAC to talk about an upcoming survey aimed at understanding our collective workforce diversity and workplace experience. The data collected will enable VCH to establish goals and strategies to better represent the communities we serve and promote a more inclusive workplace.

The survey is set to run from **May 26th–June 17th** and takes roughly 7 minutes to complete. Watch for the survey link from pulse@worktango.io in your inbox. All VCH medical staff are encouraged to participate.



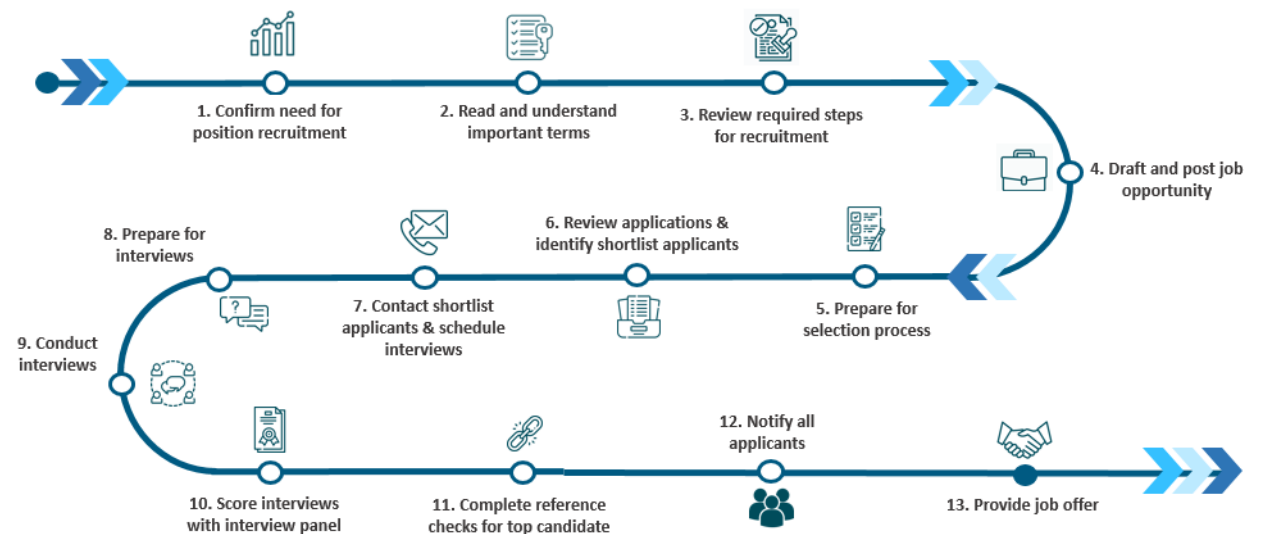
Search and Selection Process: Using a Diversity, Equity & Inclusion Lens

A discussion on using a DEI lens in the search and selection process for medical staff appointments was brought to HAMAC. An overview of the current DEI data on medical staff appointments, as well as the Standard Operating Procedure (SOP) that exists to support applying DEI in the search and selection process were shared. The importance of using DEI in search and selection was presented, including evidence that supports it helps protect against unconscious bias, fosters a workforce that is reflective of the population we serve at VCH, and leads to better patient experience and outcomes (read an [article](#) in the March 2022 edition of the Canadian Medical Association Journal).

Following the presentation, HAMAC members discussed some of the barriers currently faced by medical leaders, including HR supports, adequate skills and training requirements, inclusive job posting language that reflects all medical staff professions, equitable access to posting platforms, and alignment with UBC recruitment processes when required.

While revisions to the SOP are still underway to incorporate DEI and reconciliation lenses, this tool is available to assist medical leaders in ensuring due process is followed in search and selection. If you're interested in learning more about the consolidated SOP and its supplementary tools, please reach out to VCH Medical Affairs or a HAMAC member in your Community of Care.

Search and Selection Pathway



Welcome to HAMAC!

New Area Medical Advisory Committee (AMAC)
Chairs appointed for a two-year term



Dr. Matthew Kwok
Richmond AMAC Chair



Dr. Clare Morrison
North Shore AMAC Chair

Urgent & Emerging Health System Issues: Opioid and Toxic Drug Crisis

Dr. Mark Lysyshyn, Deputy Chief Medical Health Officer, Miranda Compton, Executive Director, Substance Use and Priority Populations, and Dr. Rupri Brar, Interim Medical Director, Regional Addictions Program presented to HAMAC members on the opioid crisis and toxic drug public health emergency that has been going on in BC for the last six years. Deaths and potential years of life lost due to illicit drug toxicity have, and continue to surpass COVID-19-related deaths (Figure 1).

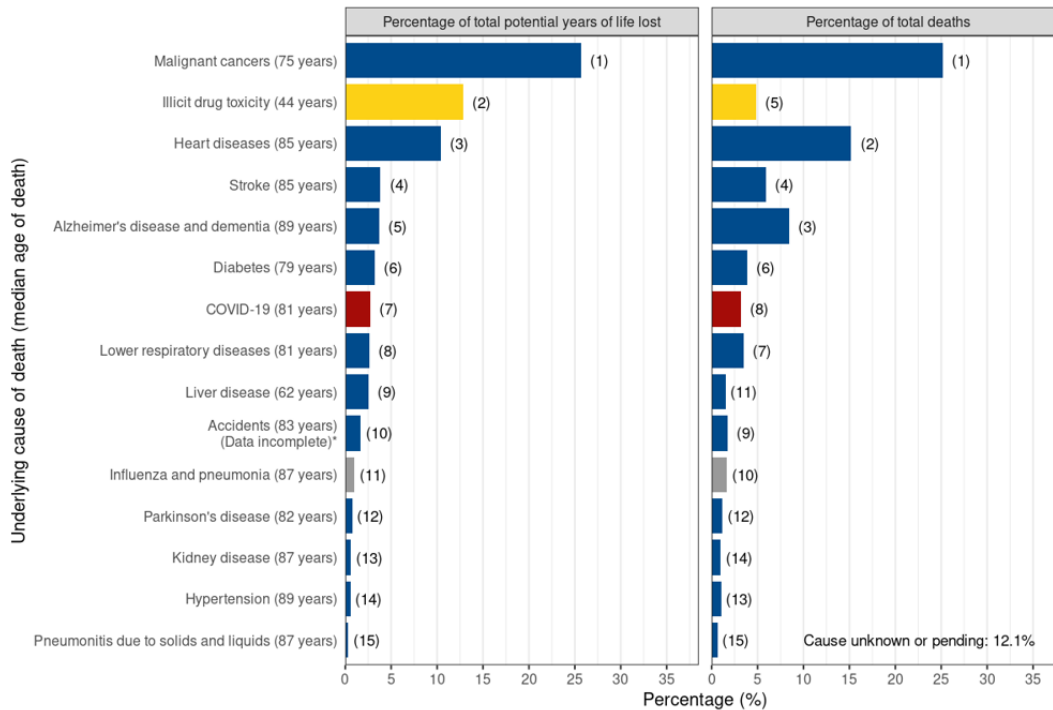


Figure 1. Top 15 causes of death (ranking) in BC from March 2020 to December 2021. **Overdose deaths** in 2020-2021 total 3,991 (9,020 since 2016). **COVID-19-related deaths** total 2,903 (to March 4, 2022).

Call to Actions for Medical Staff

Reflecting on the crisis, HAMAC members discussed VCH-wide impactful solutions and developed nine call to actions for all medical staff:

- Increased access to Opioid Agonist Therapy (OAT) services and safe supply in the Emergency Department.
- Promote the [24/7 Addiction Medicine Clinician Support Line](#) available to providers.
- Ensure referral pathways to substance use management programs are low barrier and seamless.
- Promote **all** medical staff to attain [OAT competency and safe supply training](#), regardless of their specialty.
- Spread and adopt useful strategies to all medical staff. For example, the Department of NPs has set a goal to have 90% of NPs as trained prescribers of OAT.
- Engage with allied healthcare professionals and community-based providers to increase their skills on identifying and caring for clients with opioid use disorder.
- Support a stronger, more cohesive push for non-medical safe supply models. For example, replacing the toxic drug supply with a safe supply.
- Move past the mentality that this is “not my specialty” — **it is everyone’s responsibility to respond to the crisis.**
- Approach the opioid crisis with a system-wide strategy, similar to the one adopted for the COVID-19 pandemic.

E-Approval for PharmaCare Special Authority Forms

A digital version of the paper request form can now be completed and submitted online for prescribers who use Special Authority forms in their practice.

To learn more about the process and to get enrolled, visit the [Special Authority web page](#).

Benefits of eForms

- Fast and convenient—no more faxing
- Reduced processing time
- Secure tracking for patients