

PHYSICIAN WELLNESS ADVISORY COMMITTEE

WELLNESS STRATEGY - 2023

The VISION of the Physician Wellness Advisory Committee for our faculty physicians at Queen's is:

Engaged physicians working together in a community where we are valued and respected; this healthy work-life integration allows us to reach our full potential

The MISSION of the Physician Wellness Advisory Committee is:

To advocate for a healthy working environment for faculty physicians through communication, support, and education

Our CORE VALUES are: collaboration, high quality care, sustainability, trust

<u>Strategy</u>

STRATEGIC PILLARS	LEAD	INFLUENCE	ADVOCATE
Engage Physicians; empower them to envision and implement change KHSC strategic direction #2, SEAMO strategic plan Providence Care strategic priority	MD-IT collaboration – develop processes to enable feedback and improve issues that negatively affect wellness for physicians MD input into EMR – ensure EMR does not detract from patient care nor increase administrative burden for physicians. Ensure a process for feedback to enable ongoing improvements to EHR platform or address unanticipated issues that threaten clinical workflow and personal well-being	Effective communication – via multiple pathways/platforms Email management – limit 'reply all', justify distribution lists, limit FYI communication to single newsletter Education/accountability for physician wellness issues – organization and personal responsibility for wellness should be taught, communicated and everyone should share in the accountability	Wellness representation at all decision-making tables - policy decisions at all levels should include a discussion around the effect on physician wellness Recognition for efforts beyond clinical/academic role - Value contributions to roles, committees, and projects that are important to the clinical and academic mission but not necessarily part of one's individual role description. Physicians who agree to join working groups, take on additional committee work, and many other tasks for the organizations should be acknowledged for their time and effort. For example, recognition in writing to the physician and their leadership thanking them for their valuable contributions would enhance engagement and promote further participation. Fulsome accounting of the time and effort physicians contribute to the organization(s) would help quantify and justify the many "asks" Alignment of physician and organizational values - policies and processes should be evidence-based and involve front line staff who are affected by the policy/process in the development Transparent process for resource allocation - available to all

Create Community at work; one that is supportive and collaborative QHS strategic priority Providence Care strategic priority	Peer Support program – continue to offer and recommend to our colleagues Support MDs involved with complaints/Physician Affairs – ombudsperson always offered, and process laid out clearly	 Physician Community Space – a space for physicians to rest, catch up on charting, meet informally with physician colleagues and leave their belongings if they don't have an office in the building. Designed to develop camaraderie, community, and support Improved onboarding – more inclusive orientation and education involving all our partner organizations; Queen's, SEAMO, KHSC and Providence Care so our new faculty are aware of the resources, opportunities, and responsibilities Deliberate programs to promote camaraderie – Programs such as commensality groups/meetings, interdepartmental rounds and journal clubs, etc Sick/leave policies – delineated in each department's practice plan and transparent to all departments to encourage alignment 	EDIIA – all programs and policies reviewed through this lens to ensure equity and accessibility Flexible/manageable workloads/schedules – where possible, opportunities to decrease or increase workload to facilitate work-life integration Onsite childcare
Improve workflow and efficiency; both in the clinical and academic environment KHSC strategic direction #2 Providence Care strategic priority		Workflow assessment to optimize efficiency – systematic assessment of workflow including IT integration, and standardized process for work-unit improvements and outcome metrics Ergonomic workspaces – ensure physician workspace is ergonomically optimal to promote health, comfort, and avoid overuse injury or strain Advocate for physician extenders – where appropriate, with the goal of everyone working at their maximum scope Engage allied health professionals – utilize our HHR to ensure that everyone is practicing maximally in their area/scope of expertise Enhanced administrative support for clinics – to address the increasing administrative burden facing physicians and thereby allow them to spend their time seeing more patients	QI/Process engineering/Data analytic support – to ensure our quality improvement process is robust and data-driven, leading to sustainable gains and quality outcomes
Encourage Self-Care; with organizational acknowledgement of its importance SEAMO strategic plan	Urgent support for those in distress – streamlined process to allow access to mental health professionals within days Family doctor rostering – ensuring all faculty physicians have their own primary care provider Speaker series – where experts are invited to share their information and experience around physician wellness issues Resources for self-care – a curated repository of resources that are easy to access	Resources for transition periods – additional resources and support for those seeking promotion, needing help integrating new family obligations, considering altering their work in preparation for retirement	Secure Bike racks — to encourage active transport without risking theft Healthy food options 24/7 — the only options for food after 1800h and overnight are high in fat and sugar and not conducive to sustainable nutrition
Support Leaders; leaders must be healthy in order to positively		Leadership training and succession planning – a comprehensive program (tailored to our organization) for all physician leaders and those identified to be	Ongoing leadership support – ongoing mentoring and leader development for experienced leaders

affect the well-being of those they lead		potential future leaders to enhance skills such as negotiations, difficult conversations, and communication	
KHSC strategic direction #2		Leadership mentoring/coaching – coaching for new leaders, mentors for all leaders	
		Leader assessment — systematic and regular assessment of leaders by those they lead as well as those they report to	
		Clear processes and accountability -	
		Dept Head managerial task assistance – experienced support for those tasks that are common across all depts such as Departmental Retreat planning, finances/accounting, promotions, etc	
Assess Well-being regularly; we use this to make data-driven decisions	WBI — annual assessment of well- being Timely dissemination of data — to leaders and all physicians	Organizational responsiveness to data – commitment from leadership of all organizations to address data and information gained from the WBI Physician retention data – transparent data on physician retention rates across each department, and unfilled positions, with the aim of addressing underlying issues in those departments having difficulty retaining or recruiting physicians	Data on MD retention, reasons for leaving, exit interviews – more expansive data collection around physician recruitment and retention in those departments that are struggling. This could include mandatory exit interviews with standardized data collection