



SPECIALIST SERVICES COMMITTEE
- PERIOPERATIVE CLINICAL ACTION NETWORK -
PCAN INNOVATION FUND GUIDE

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Section 1 – The PCAN Innovation Fund

Guided by the Specialist Services Committee (SSC), the mission of the Perioperative Clinical Action Network (PCAN) is to connect British Columbia's multidisciplinary perioperative teams to create a surgical network where members collaborate, support, and share solutions.

The purpose of the PCAN Innovation Fund is to explore innovative solutions where perioperative project teams can create and share ideas to improve surgical services for British Columbians. To apply to the PCAN Innovation Fund, a Physician Lead must have an eligible project idea. The PCAN Innovation Projects can receive a one-time funding based on the following tiers:

- **Tier 1:** \$25,000
- **Tier 2:** \$25,000 – \$50,000
- **Tier 3:** \$50,000 – \$75,000
- **Tier 4:** \$75,000 – \$100,000
- **Tier 5:** \$100,000 +

The purpose of this PCAN Innovation Funding Guide is to present a high-level overview of the program and the application process. Please be aware that the details in this guide and the application process may be revised without notice.

Section 2 – Eligibility Criteria

A British Columbian licensed physician may apply for the PCAN Innovation Fund online at: <https://checkbox.doctorsofbc.ca/ssc-surgical-innovation-intake-form>.

We have specific interest in funding innovation projects that align with BC's current surgical priorities. These types of projects are chosen through a competitive intake process where the application will be assessed on:

- 1) The level of innovation in the perioperative services
- 2) The scope, expected impact and spread of the deliverable
- 3) The evidence in support of the project (e.g. scientific merit, existing research, and evidence)
- 4) Preparedness of the project team for the proposed project
- 5) The impact of the project towards the Institute of Healthcare Improvement (IHI) Quadruple Aim

To summarize, the IHI Quadruple Aim is a framework for quality improvement that focuses on:

- 1) Improving the patient experience of care and provider experience (the latter is a modification of the original IHI Triple Aim)
- 2) Improving the health of populations; and
- 3) Reducing the per capita cost of healthcare

Please refer to the IHI website for further exploration of the IHI Quadruple Aim at:

- 1) <https://www.ihl.org/communities/blogs/the-triple-aim-or-the-quadruple-aim-four-points-to-help-set-your-strategy>
- 2) <https://www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx>

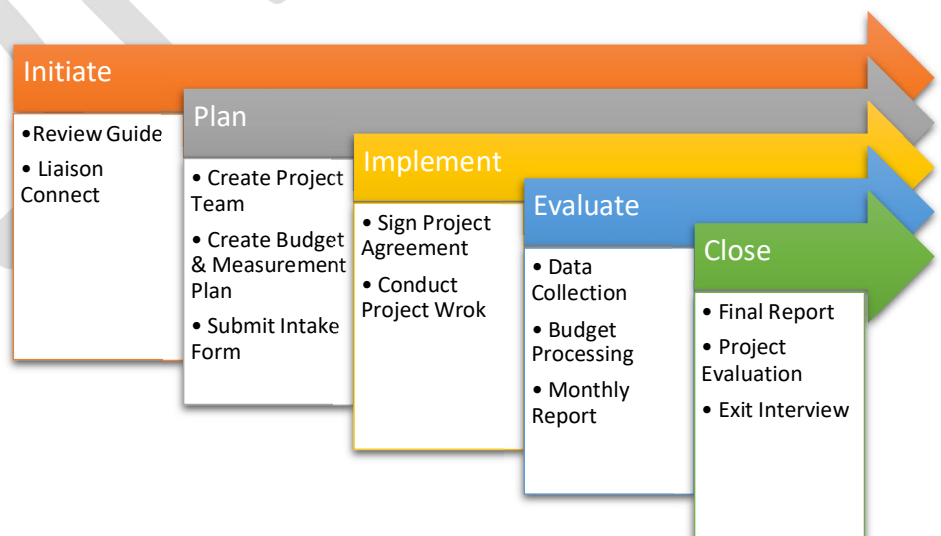
The selection process details can be found in the “[Assessment Process](#)” section of this guide.

Section 3 – Application Process

A PCAN Innovation Physician Lead is to champion and oversee the clinical aspects throughout the project iterative lifecycle and may be responsible for the oversight of the project (or outsource the logistical work to a PCAN Innovation Project Manager). It is the responsibility of the Physician Lead to determine and assemble the appropriate project team.

PCAN Innovation project applications will be accepted and reviewed throughout the year. PCAN Innovation project selection, formal approval, and fund agreement(s) will commence four times a year in March, June, September, and December.

PCAN Innovation Fund Project Lifecycle



Before Applying

During the initiating project phase, the PCAN Innovation Project Physician Lead (and Project Manager if available) shall read the PCAN Innovation Fund Guideline. The Physician Lead shall also search [The Exchange database](#) of quality improvement projects across BC supported by the SSC and Share Care Committee to ensure that there are no previously funded or completed innovations projects that are too similar to their proposed plan.

Physician Leads are encouraged to seek clarification from the SSC Surgical Portfolio Liaison regarding the project initiating / planning phase.

When Applying

During the planning project phase, application to the PCAN Innovation Fund can only be submitted by a licensed British Columbia Physician online at <https://checkbox.doctorsofbc.ca/ssc-surgical-innovation-intake-form>. All applications are confidential. As instructed in the online application, to help the SSC PCAN Innovation Fund Selection Team better understand the proposed project, the following information is required:



The SSC PCAN Innovation Selection Team will screen all application forms. If the project is not expected to move forward in the application process, the Physician Lead will be notified. Further details will be required if the project is accepted to proceed in the application process. Additional instructions regarding project management documentation and reporting will be provided. In particular, the project team shall outline the project implementation plan and specify the following:

- 1) The project scope and aim statement
- 2) The timeline, schedule, project activities, and the designated responsible team members
- 3) The plan to document, evaluate, and report on specified measures every month and at the end of the project
- 4) The risk management strategy
- 5) The immediate and potential stakeholders and communication plan
- 6) The budget plan

Please refer to [Appendix B](#) for further details on the [Measurement Planning Worksheet](#) and [Appendix C](#) for further details on the [Budget Worksheet](#).

Section 4 – Assessment Process

Screened intake applications will be invited to submit additional project information along with required supporting documentation.

Through a structured and transparent review process, the SSC PCAN Innovation Project Selection Team will use a four-point rating scale to evaluate the extent to which an application meets each of the 10 decision criteria. The application that meets the threshold of excellence will be provided with a PCAN Innovation Fund Agreement and granted funding.

To summarize the decision-making process, projects will be assessed based on:

- 1) The scope and spread of the result/deliverable
- 2) The quality of innovation on improving surgical services
- 3) The level of collaboration among internal and external organizations
- 4) The alignment of the Ministry of Health's BC Surgical Strategy
- 5) The potential impact of the deliverable
- 6) The feasibility of the implementation strategy
- 7) The project risk and mitigation strategy
- 8) The experience and capacity of the project team
- 9) The level of reporting and evaluation requirements
- 10) The project budget and the funding terms/conditions

Suggestions for alternative funding program(s) that are more aligned with the project may be discussed. In some cases, further assessment of the project and/or coaching with a QI Coach from the Provincial Physician QI Coaching Program may be required. Information regarding Provincial Physician QI Coaching Program can be found in following [Quality Improvement Mentorship](#) section in this guide.

Please refer to [Appendix D](#) for further details on the [PCAN Innovation Fund Application Decision Making Rubric](#).

Section 5 – Quality Improvement Coaching

In a situation where the PCAN Innovation Physician Lead and/or project team has none or minimal formal quality improvement training and experience, there may be a requirement for a quality improvement coaching component through the Provincial Physician QI Coaching Program.

The Provincial Physician QI Coaching Program is a peer-to-peer coaching program designed to connect experts in Quality Improvement (QI) methodology with subject matter experts who are leading projects and/or initiatives within Doctors of BC's Joint Collaborative Committees (JCCs). QI Coaches are Physician Quality Improvement (PQI) Level 3 (or equivalent) trained physicians who provide QI coaching and support to the physician project lead through regular check-ins and meetings, ensuring that the project has a solid foundation of Quality Improvement methodology, grounded in the Institute for Healthcare Improvement's (IHI) model for improvement and the modified triple aim impact. Physician project leads and QI Coaches are matched by key criteria such as QI needs, clinical area of focus or specialty, region/health authority and availability.

For more details on the Provincial Physician QI Coaching Program, please visit the following webpage: <https://sscbc.ca/physician-engagement/provincial-physician-qi-coaching-program>

Section 6 – Project / Fund Agreement

Once a project has been selected to be the recipient of SSC PCAN Innovation funding support, the SSC Surgical Portfolio Liaison, with assistance from the Project and Contracts Coordinator, will facilitate the creation and completion of a fund agreement. This agreement will summarize the signatories, innovation deliverables, timeline, budget, and specified funding structure/process.

The following section will identify what the SSC defines as eligible and ineligible funds. All project funding must follow the Doctors of BC policies and guidelines, and the PCAN Innovation Fund Agreement between the SSC and the PCAN Innovation Project fundholder.

This list is non-exhaustive and further details will be included in the fund agreement. It is recommended to contact an SSC PCAN Innovation Fund team member for further clarification.

Eligible Fund Use:

- 1) Physician sessional time – compensation for physician time where they are required to prepare, present, or attend a PCAN Innovation meetings during their clinic work hours. It is generally recommended that 40% of the project budget be allocated to physician sessional.
 - i. Measurement and/or evaluation of project. Approximately 10% of the total budget must be dedicated to measurement and evaluation.
 - ii. Coordination or project management support for activities and project deliverables identified in the fund agreement. A maximum of 30% of the total budget can be allocated to a Project Manager.

Ineligible Fund Use:

- 1) Time contribution towards all prior necessary activities on the PCAN Innovation Application: pre-work creation and submission of the project plan, budget worksheet, and pre-project data/measurement
- 2) Reimbursement of clinical time or operational costs
- 3) Compensation for capital costs, such as land, buildings, equipment, care packages, and IT equipment
- 4) Compensation for Health Authority administration
- 5) Product development or improvement expenses not associated with the project
- 6) Participation in clinical and non-clinical training
- 7) Research studies/projects
- 8) Alcoholic beverages
- 9) Donations
- 10) Selling and marketing expenses associated with the products or services or both being developed as a part of this project
- 11) Gifts and prizes
- 12) Activities funded by other Joint Collaborative Committees (JCC)

Section 7 – Financial Processing

There are two models for funding PCAN Innovation Projects.

Gated Fund Transfer Model

If the PCAN Innovation Project follows a gated fund transfer agreement, the project funds will be transferred to either an approved institution (e.g., a Health Authority) or an individual responsible for the project's funds. This transfer will occur according to an agreed-upon structured process for releasing the funding. A percentage of the budget can be released as a gated fund transfer on the completion of a milestone(s) / date(s) as outlined in the fund agreement.

A PCAN Innovation Project may be required to submit further details that outline the number of work hours contributed to the project and the amount of expenses incurred. Please maintain all financial bookkeeping logs in case of an audit.

Reimbursement Model – Sessional Log / Invoice / Expense Claim Submission

If the PCAN Innovation Project fund agreement is based on a reimbursement model, then the project funds are held within Doctors of BC and the project work hours will be remunerated to the specific team member.

The PCAN Innovation Fund Projects shall adhere to the Doctors of BC / Joint Collaborative Committee travel and expense policy as well as to the details surrounding financial processing outlined in the fund agreement. It is the responsibility of PCAN Innovation Physician Lead and /or project manager to diligently maintain the financial logs and budget. A breakdown of the fund usage shall be included in the monthly project status reports submitted through the SSC PCAN Innovation Project portal.

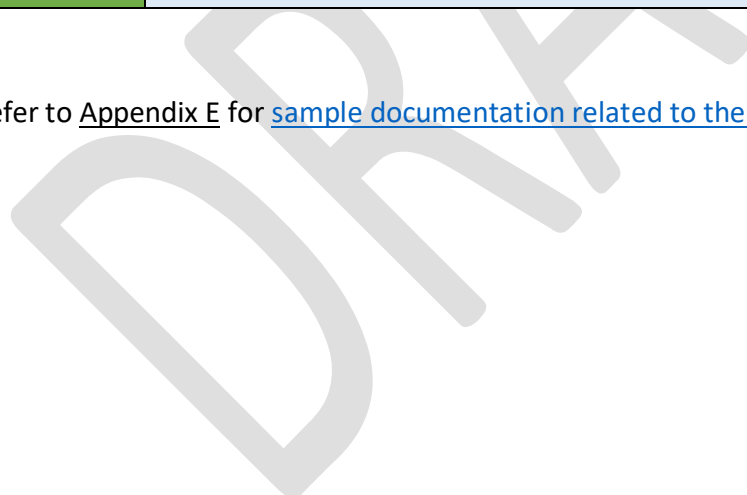
The PCAN Innovation Physician Lead or Project Manager will be responsible for the following financial processing tasks in the table below.

SUMMARY OF FINANCIAL PROCESSING TASKS (*Not all may be applicable, best to confirm with SSC PCAN.	
1	LOG KEEPING
	<ul style="list-style-type: none"> • Record, or support individual team members to record, accurate hourly project work for: <ul style="list-style-type: none"> a) Physician Lead <ul style="list-style-type: none"> ○ Itemized hourly log for the month tracked on the <u>sessional Excel form</u> ○ Expenses incurred for the month documented on a physician expense claim & itemized receipt(s) b) Project Team Physician(s) <ul style="list-style-type: none"> ○ Itemized hourly log for the month tracked on the <u>sessional Excel form</u> ○ Expenses incurred for the month documented on a physician expense claim & itemized receipt(s) c) Project Manager <ul style="list-style-type: none"> ○ Itemized hourly /daily / weekly project work and expenses detailed on an <u>invoice</u> for the month & itemized receipt(s) d) Non-Physician Project Team <ul style="list-style-type: none"> ○ Itemized hourly /daily / weekly project work detailed on an <u>invoice</u> for the month. ○ Or ad hoc project work completed in one day documented on an <u>expense form</u> & itemized receipt(s) <p style="color: red; font-style: italic;">*Please note Doctors of BC does not withhold any taxes nor provide any Statement of Remuneration Paid (T4 Slip)</p>
2	COLLECTION
	<ul style="list-style-type: none"> • Gather the team’s financial claim documents: <ul style="list-style-type: none"> a) Expense claim(s) / invoice(s) / sessional claim(s) b) Electronic fund transfer form(s) c) PDF / photocopy of the original legitimate itemized receipt(s) from the organization indicating, but not limited to: <ul style="list-style-type: none"> ✓ The name of organization ✓ The purchased description ✓ Transaction date stamp ✓ Purchase transaction confirmation (% paid or paid in full) ✓ Transaction platform (PayPal, credit card, cash etc.)

SUMMARY OF FINANCIAL PROCESSING TASKS (*Not all may be applicable, best to confirm with SSC PCAN.)		
3	QA CHECK	<ul style="list-style-type: none"> • Check for quality and accuracy of each line item/data field on all documents to be submitted. Non-exhaustive list of considerations: <ul style="list-style-type: none"> 🔍 Name on invoice matches name on receipts. 🔍 Expenses are only for the one claimant (ie. no family members). 🔍 No upgrades (valet, first class, travel insurance etc). 🔍 Meal expenses not over the \$100 per day maximum. 🔍 No alcohol. 🔍 Maximum of \$410 per night (including tax) for hotel accommodation from October 2 – April 30 inclusive. \$550 (including tax) between May 1 -October 1 inclusive. 🔍 Reimbursement for travel over 50km return trip. 🔍 Private vehicle mileage expenses reimbursed at \$0.61/km rate.
4	CORRECTION	<ul style="list-style-type: none"> • Take corrective action to resolve missing or incorrect information on all documents. Non-exhaustive list of examples: <ul style="list-style-type: none"> ✗ Missing claimant signatures. ✗ Missing GST on invoices. ✗ Credit card / cash transaction not identified on receipt. <ul style="list-style-type: none"> ○ Example: Hotel/Ferry booking confirmation not accepted, require “Paid in full” status, date of transaction. ✗ Missing receipt(s) <ul style="list-style-type: none"> ○ Contact vendor to have receipt(s) re-sent. ○ Credit card transaction statements may be accepted if it clearly identifies all itemized details.
5	BANKING	<ul style="list-style-type: none"> • Ensure physicians banking information is up to date on the Doctors of BC website - http://www.doctorsofbc.ca <ul style="list-style-type: none"> ○ Account Log in -> My Details -> Bank Accounts -> <i>add banking details</i> • Or physicians / project team must submit an electronic fund transfer form (EFT) to accompany the claim submission. Physicians may choose to submit an EFT if they wish the financial payment to be transferred into a different banking account. • GST must be charged on sessional time – ensure physician has completed the GST Registration Designation Form.

SUMMARY OF FINANCIAL PROCESSING TASKS (*Not all may be applicable, best to confirm with SSC PCAN.)	
6	<p style="text-align: center; margin: 0;">SUBMISSION</p> <ul style="list-style-type: none"> • If applicable, consolidate invoice or expense claim and all related itemized receipts in the order listed on the invoice along with the EFT form into one PDF file and attach to email. <ul style="list-style-type: none"> ○ File name structure: Name Invoice # - Short Description Date ○ Example: John Doe Inv1234 – Project Hours 2023Jan01.PDF • Or, if applicable, attach sessional Excel log and EFT forms to an email. <ul style="list-style-type: none"> ○ File name structure: Name – Short Description Date ○ Example: (1) John Doe – Sessional log 2023Jan01 (2) John Doe – EFT 2023Jan01 • It is recommended that all financial submissions be sent the first Friday of every month while the project is active to sscbc@doctorsofbc.ca and in the body of the email include “PCAN + Project Name” <p style="color: #c00000; font-style: italic; margin-top: 10px;">*Be aware Doctors of BC has a 3-month deadline for submitting project expenses for staff, members, and all funded projects – late submissions will be denied. In very rare cases, an exception may be granted but would require a written request and approval from the Doctors of BC CEO.</p>

Please refer to [Appendix E](#) for [sample documentation related to the finance process](#).



Section 8 – Monthly Reporting

PCAN Innovation Fund projects are responsible for submitting mandatory monthly project status reports through SSC's online reporting portal on the first Friday of each month throughout the project's life cycle. Information contained in the monthly status reports shall be used to provide updates to SSC and stakeholders. Access will be granted and made available to teams upon the start of the project. A project team that fails to submit these contractual documents runs the risk of losing funding and may become ineligible for future funding opportunities.

The following are required document submissions - this list is non-exhaustive and further requirements shall be detailed in the fund agreement between the SSC and the PCAN Innovation Fund Holder:

- a) Project Status Reports
 - Detailing project status, project management data, completed activities and deliverables, scheduled activities and deliverables, benefit updates and risk updates
- b) Data/Masurement Reports
- c) Financial invoices / sessional claim forms
- d) Final report of PCAN Innovation project
- e) Assessment of the PCAN Innovation Fund program

PCAN Innovation Fund Project Teams may be required to participate in audits of project cost and project activities as necessary.

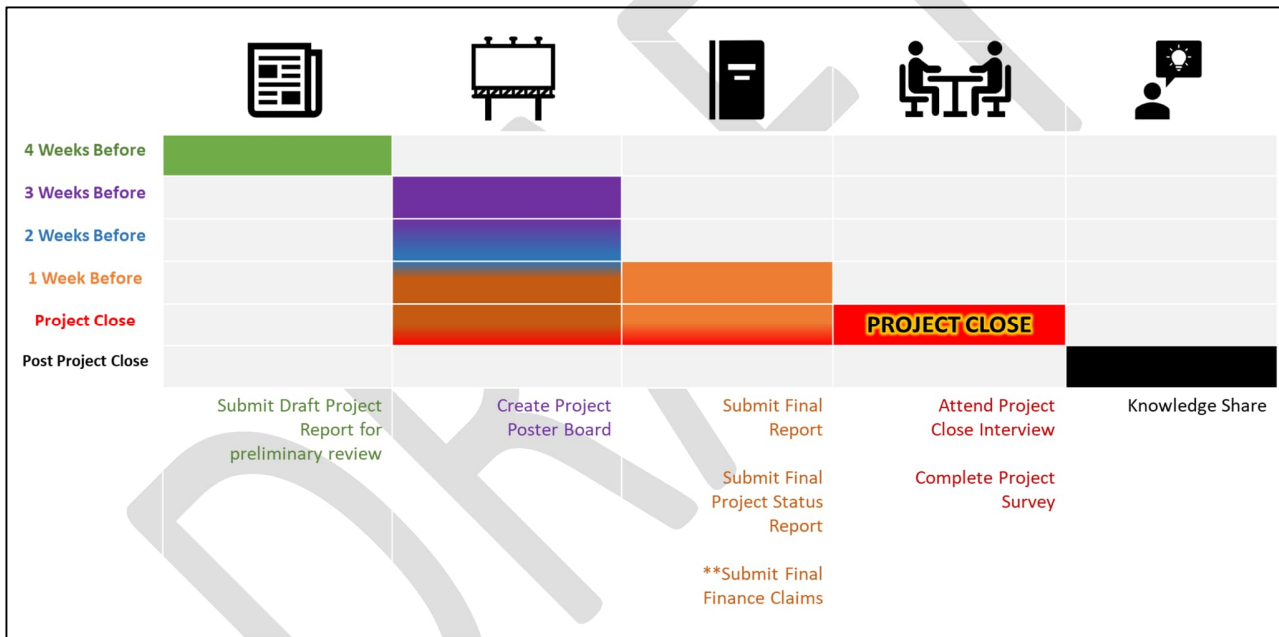
Please refer to [Appendix F](#) for further details on the [Monthly Reporting](#).

Section 9 – Project Close

At the end of the PCAN Innovation Project completion, the Physician Lead is responsible for the following activities:

- 1) Final Status Update Report on the SSC report portal
- 2) Final Report
- 3) Participating in a project close exit interview.
- 4) Survey

The project team should dedicate the last 3 – 4 weeks to data analysis, writing and project closure activities.



Final Report

The PCAN Innovation Project final report is intended for a wide audience including the SSC and other project teams (physicians and project leads) who are interested in doing similar work. To support the knowledge sharing, it is requested that the final report highlight why the project was started, what the project teams did and what was learned / accomplished. A draft outline of the final report shall be submitted to the SSC PCAN Innovation team for initial feedback 4 weeks before the project close deadline.

PCAN End of Project Survey

The PCAN Innovation Physician Lead will complete a confidential online survey to gather feedback on the experience with the project work. The information you provide will help us, SSC and Doctors of BC understand what worked well, what could be improved, and whether the project met its objectives.

Project Close Interview

The PCAN Innovation Physician Lead and Project Manager will be invited to participate in a Project Close Interview. As a follow up with the PCAN End of Project Survey, this interview serves as an opportunity to gather deeper feedback, reflect on project outcomes, and further explore any lessons learned. The intention is to assess the project's success, address any remaining issues, and capture insights to inform future project teams.

Knowledge Sharing Opportunities

Several opportunities for collaborative learning with peers are available through various events, including the Institute for Healthcare Improvement (IHI) National Conference, the annual JCC Pre-Forum Day, and the PCAN Summit. Additionally, comprehensive project summaries will be accessible online through the Exchange Project Repository, facilitating further insights and knowledge sharing among participants. All PCAN Project Innovation teams are encouraged to participate and knowledge share.

Please be advised that the following supporting forms and documents in the appendices section are subject to change without prior notice. The PCAN Innovation Project Teams will be promptly updated accordingly.

Appendix A: Glossary

TERM	DEFINITION
Alignment Criteria	Is the degree to which the project aims to work towards the British Columbia Surgical priority(ies).
Budget Criteria	Is the degree and realistic strategy to which the financial plan is outlined.
Collaboration Criteria	The cooperation and contribution between various organizations and groups within British Columbia's perioperative setting.
Evaluation Criteria	Is the quality in the plan that identifies the measurements and data collection and reporting.
Impact Criteria	Is the magnitude of quality improvement and effect within the British Columbia's perioperative setting.
Implementation Criteria	Is the plan that identifies the decision, process, and activities to execute a project.
Innovation Physician Lead	Is a licensed British Columbian Physician who is the PCAN project champion tasked to oversee the clinical aspects of the project, is accountable for the project completion, acts as the representative spokesperson and may be responsible for the oversight of the project. Further details are to be outlined in the fund agreement.
Innovation Project Team	Is the identified member(s) of the PCAN Innovation Project who is/are responsible for the execution of the work/activities/deliverables of the PCAN Innovation project. This project team is external to Doctors of BC, typically hired/appointed by the Physician Lead and may be compiled of clinical and non-clinical individuals. A designated Project Manager may be appointed to lead this team.
Institute for Healthcare Improvement (IHI)	Website: https://www.ihl.org/ It is a globally recognized institution for developing a framework to implement quality improvement change management based on scientific results in the desire to improve the quality of healthcare systems.
PCAN Advisory Committee	Acts on behalf of PCAN in an advisory capacity and will provide feedback on PCAN Innovation Project applications and report on the status of PCAN Innovation Projects to the Specialist Services Committee.

TERM	DEFINITION
PCAN Innovation Project	A project that is designed to enact a new method, idea, product, service that directly impacts an improved value within the British Columbian perioperative setting.
Physician Quality Improvement (PQI)	<p>Website: https://sscbc.ca/physician-engagement/quality-improvement-initiative</p> <p>Email: quality@doctorsofbc.ca</p> <p>In collaboration with BC health authorities, Physician Quality Improvement (PQI), works to enhance physician capacity in quality improvement by providing training and hands-on experience through learning action projects, ultimately promoting a culture of learning, openness, and dedication to improving the health care system.</p>
Portfolio Liaison – SSC PCAN	<p>Website: https://sscbc.ca/pcan</p> <p>Email: sscbc@doctorsbc.ca (Attn: PCAN)</p> <p>Is an SSC staff lead assigned to support the PCAN Innovation Project Team and is the official representative / spokesperson for PCAN to SSC stakeholders / external organizations.</p>
Preoperative Clinical Action Network (PCAN)	<p>Website: https://sscbc.ca/pcan</p> <p>Email: sscbc@doctorsbc.ca (Attn: PCAN)</p> <p>Brings together multidisciplinary surgical team members of all specialties and hospitals across the province of BC to engage in supporting local and regional solutions through implementation of surgical priorities and quality improvement efforts.</p>
Project Coordinator – SSC PCAN	<p>Website: https://sscbc.ca/pcan</p> <p>Email: sscbc@doctorsbc.ca (Attn: PCAN)</p> <p>Is an SSC support staff assigned to oversee contract management, budget management and assigned project management support.</p>
PQI Physician Alumni Consult Service	<p>Website: https://sscbc.ca/physician-engagement/quality-improvement-initiative</p> <p>Email: quality@doctorsofbc.ca</p> <p>The Alumni Consultant is a licensed British Columbian physician who has successfully completed PQI Level 3 (or the equivalent) who provide QI coaching mentorship and support to the physician project lead.</p>
Risk Strategy Criteria	Is the plan used to identify, evaluate, measure, and mitigate uncertainty and problematic situations in the project.

TERM	DEFINITION
Scope Criteria	The range of transferability and spread of the PCAN Innovation Project plan/outcome in the local domain, regional surrounding, or provincial setting.
Specialist Services Committee (SSC)	<p>Website: https://sscbc.ca Email: sscbc@doctorsbc.ca</p> <p>Improves patient care by engaging physicians to collaborate, lead quality improvement and deliver quality services with SSC supports and incentives. SSC is one of four joint collaborative committees of Doctors of BC and the BC government and includes regular representation from health authorities.</p>

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Appendix B: Measurement Planning Worksheet

Measurement Planning Worksheet
Use this worksheet to identify the family of measures you will collect as data throughout the duration of your project to understand the impact of your changes. Typically, you will track 1–2 outcome measures, 3–5 process measures, and sometimes 1–2 balancing measures.

Measure Name	Operational Definition	Data Collection Strategy (Source, Sampling, Frequency, Analysis)
OUTCOME MEASURES		
PROCESS MEASURES		
BALANCING MEASURES		


Reference: <https://www.ihl.org/resources/Pages/Tools/Quality-Improvement-Project-Measures-Worksheet.aspx>

Please access the [PCAN Measurement Planning Worksheet template](#) to complete and submit with application.

Appendix C: Budget Worksheet

Perioperative Clinical Action Network (PCAN)

Innovation Project: Estimated Budget



This worksheet estimates project costs.

Today's Date	07/Jun/2023	Project Length	6.0	months	<input type="checkbox"/> Fill in White Boxes only
Physician Name	Dr. Innovation	Project Tier	Tier 2: 25-50k		<input type="checkbox"/> Grey Boxes are auto-calculated

Engagement	Hourly Rate	Number of Participants	Estimated Hours per Month	Estimated Total Hours	Total Cost	% of Total	In Kind
SP Sessional Rate	\$171.05	3	8	48	\$24,631.20	50%	\$0.00
FP Sessional Rate	\$171.05	1	4	24	\$4,105.20	8%	\$0.00
Allied Health	\$50.00	1	4	24	\$1,200.00		
Other	\$0.00	0	0	0	\$0.00	0%	\$0.00
Engagement Subtotal					\$29,936.40	61%	\$0.00

Project Admin	Hourly Rate	Number of Participants	Estimated Hours per Month	Estimated Total Hours	Total Cost	% of Total	In Kind
Project Manager	\$50.00	1	40	240	\$12,000.00	24%	\$0.00
Evaluator	\$50.00	1	10	60	\$3,000.00	6%	\$0.00
Other Fees	\$0.00	0	0	0	\$0.00	0%	\$0.00
Project Admin Subtotal					\$15,000.00	30%	\$0.00

Other Project Costs	Rate / Cost	Quantity	Total Cost	% of Total	In Kind
[Category 1]	\$0.00	1	\$0.00	0%	\$0.00
[Category 2]	\$0.00	1	\$0.00	0%	\$0.00
[Category 3]	\$0.00	1	\$0.00	0%	\$0.00
[Category 4]	\$0.00	1	\$0.00	0%	\$0.00
Subtotal Other			\$0.00	0%	\$0.00
Subtotal All			\$44,936.40		\$0.00

*Standard is 10% for contingency	10.0%	Contingency	\$4,493.64
		Grand Total	\$49,430.04

It is recommended that:

- Physician sessionals account for approximately 40% of the project budget.
- Project management accounts for approximately 30% of the project budget.
- Evaluation activities account for approximately 10-15% of the project budget.

Please access the [PCAN Estimated Project Budget template](#) to complete and submit with application.

Appendix D: PCAN Innovation Fund Application Decision Making Rubric

PCAN Innovation Fund Application Decision Making Rubric					
Total Score: _____ out of 40					
CRITERIA	1	2	3	4	SCORE
ALIGNMENT WITH BC SURGICAL PRIORITIES	No alignment	Poor alignment with one or more priorities	Good alignment with one or more of the priorities	Excellent alignment with one or more of the priorities	
BUDGET	Budget does not match implementation strategy & is not viable	Budget may match implementation strategy & may be viable but major concerns exist	Budget matches implementation strategy and is viable but some concerns exist	Budget matches implementation strategy & is viable	
COLLABORATION	Isolated, no support or plan with external organizations	Poor support, with limited plan to partner with external organizations	Completed in collaboration with external organization & has alignment with Health Authority	Completed in collaboration with explicit written plan that is in alignment with Health Authority	
IMPACT	Low quality deliverable and impact on surgical services is unclear	Low quality deliverable but the potential impact is clear or good quality deliverable but the potential impact is unclear	Good quality deliverable with good potential impact	High quality deliverable with strong potential impact	
IMPLEMENTATION STRATEGY	Unrealistic	Somewhat unrealistic	Somewhat realistic	Realistic	
INNOVATION	Not create change or improve quality of surgical service	Minimal change and/or minimal improvement in quality of surgical service	Will create change and/or improve in quality of surgical service	Will create significant change and/or significantly improve quality of surgical service	
PROJECT TEAM EXPERTISE	No experience	Some project team experience (1–3 years) in a healthcare setting	Good project team (1–3 years) experience in the perioperative setting	Extensive project team (5+ years) experience in preoperative setting	
SCOPE	Local with no potential to transfer and spread	Some provincial transferability and spread	Considers most regions in the province with good transferability and spread potential	Province wide with high transferability and spread potential	
REPORTING & EVALUATION FEASIBILITY	No mention of reporting or data collection plan	Measurement plan with minimal data collection strategy	Detailed measurement plan requiring further development	Comprehensive measurement plan with extensive data collection strategy	
RISK STRATEGY	No risk strategy	Some risks are outlined but no mitigation plan	Some risks are outlined with an unclear mitigation plan	Risks are outlined with a detailed mitigation plan	

Appendix E: Sample Finance Documents

Physician GST Designation Form

doctors
of bc

GST REGISTRATION DESIGNATION FORM

Physicians who are subject to paying GST on services through their corporations must charge GST on their Sessional time. Where physicians provide the Doctors of BC with a Canada Revenue Agency GST registration number, GST will be automatically added to the established Sessional rates.

Please return the completed form to AccountsPayable@doctorsofbc.ca.

Physician's Name:

BCMA ID Number: MSP Number:

GST Registration Number:

Signature Date

T 604 736 5551 115-1665 West Broadway doctorsofbc.ca
TF 1 800 665 2262 Vancouver BC V6J 5A4

Electronic Fund Transfer (EFT) Form

doctors
of bc

VENDOR EFT FORM


If you would like to be paid via Electronic Funds Transfer (EFT) and help us reduce our impact on the environment, please complete this form and return to sender.

VENDOR NAME:

VENDOR ADDRESS:

1. **BANK ACCOUNT INFORMATION** – please provide a void cheque *OR* complete the following:

Transit# (5 digits)	Institution# (3 digits)	Account#	Name of Financial Institution



THIS CHEQUE IS VOID WITHOUT A COLOUR COPY AND BACKGROUND PLUS A FINESPRINT WATERMARK ON THE BACK. VOID AT RISK TO VIEW

YOUR NAME HERE
YOUR BUSINESS:
CITY / PROVINCE / POSTAL CODE
000-000-0000

DATE: 20____ : ____ : ____
Y Y Y K M D D

PAY TO THE ORDER OF \$ _____ /100 DOLLARS

YOUR FINANCIAL INSTITUTION
123-456-7890

5244 123456789012345678901234567890

Transit Number Institution Number Account Number

2. **PAYMENT CONFIRMATION** – please provide email for remittance advice to be sent.

E-mail address:

Doctors of BC will only retain this form for two years.

T 604 736 5551 115-1665 West Broadway doctorsofbc.ca
TF 1 800 665 2262 Vancouver BC V6J 5A4

Physician Excel Sessional Log Sheet

Sessional Reimbursement

Please complete the sections in the light blue columns.

Last Name	First Name	MSP	BCMA ID	Code	Start Date	Start Time	End Date	End Time	Location	Description
John	Doe	1111			1/1/2023	13:00:00	11/1/2023	14:30:00	Zoom	PCAN Data Collection

Sessionals Upload Template
General Info
+

Sample Vendor Invoice

INVOICE

Date of Invoice: February 6, 2023
Months of Invoiced Services: January 2023
Invoice Number: 001

Attention: SSC PCAN Project Team
Doctors of BC
Ste 115 – 1665 West Broadway
Vancouver, BC, V6J 5A4
Email: ssc@doctorsofbc.ca

CONTRACTOR NAME
ADDRESS
CONTACT INFO
EMAIL

Subject: January 2023 PCAN Project Hours

SSC Billing Code (Office Use only)	Date and Time of Hours	Description	Hours	Hourly Rate	Total
	January 7 2023	PCAN Team Meeting	1.0	\$25.00	\$25.00
	January 22 2023	PCAN Data Collection & Report finalization	2.5	\$25.00	\$62.50
		Sub Total	3.5	\$25.00	\$87.50
		GST (5%)			\$4.38
		TOTAL			\$91.88

Interprofessional Member & MOA Sessional and Expense Claim Form

JCC Joint Collaborative Committees

JCC Interprofessional Team Member (ITM) and Medical Office Staff Sessional Payment and/or Expense Form and Policy

The JCCs value collaborative engagement with Interprofessional Team Members (ITM), AKA Allied Health Professionals, and Medical Office Assistants (MOAs), Office Managers, and MOA Peer Mentors. For attending and contributing to JCC meetings, events, and program activities, sessional time and out-of-pocket expenditures can be reimbursed. Please see accompanying policy information and guidelines prior to completing this form.

Deadline: Expense forms must be submitted within three (3) months of the session date to be eligible for payment.

Personal Information		Meeting or Event Information	
Interprofessional Team Member <input type="checkbox"/> Medical Office Staff <input type="checkbox"/> Profession: e.g. Physiotherapist, MOA etc. Organization: _____ First Name: _____ Last Name: _____ Address: _____ City: _____ Province: BC Postal Code: _____		Event Name: _____ Location: _____ Start Date: MM DD YYYY End Date: MM DD YYYY Start Time: _____ End time: _____ (00:00 - 24 HOURS)	

Sessional		
Please Check One:	Sessional Hours: (Meeting and Travel Time Only)	Total Sessional Claim:
<input type="checkbox"/> Interprofessional Team Member (up to \$75.00/hr)	_____ Hours*	\$ _____
<input type="checkbox"/> Medical Office Assistant (up to \$25.00/hr)		
<input type="checkbox"/> Office Managers and MOA Peer Mentors (up to \$35.00/hr)		
*Leave blank if claiming expenses only		

Expenses (if applicable)		Total Amount
Airfare		
Car Rental		
Taxi		
Parking		
Mileage _____ kms @ 0.61/km (>50km round trip)	\$ 0.00	
Accommodation (max \$410/night or \$550 during summer)		
Meals (max \$100/day, alcohol is not eligible)		
Miscellaneous Expenses:		
Total Expenses Claimed	\$ 0.00	

For Office Use Only
Account Code: _____

Claimant Return to Email Address: _____

Claimant's Signature: _____ Authorized Signature: _____

Please submit completed forms to the meeting or event organizer.

T12 Last Updated: 09/14/23

Physician Sessional and Expense Claim Form

JCC Joint Collaborative Committees

JCC Sessional Payment and/or Expense Form and Policy

Please see accompanying policy information prior to completing this form.

Deadline: Sessional forms must be submitted within three (3) months of the session date to be eligible for payment.

Personal Information		Program Information	
MSP#: _____ Salaried physician? <input type="checkbox"/> Chair? <input type="checkbox"/> Last Name: _____ First Name: _____ Address: _____ City: _____ Province: BC Postal Code: _____		Meeting: Location: _____ Start Date: MM DD YYYY End Date: MM DD YYYY Start Time: _____ End time: _____ Left Home/Practice Date: _____ Time: _____ Return to Home/Practice Date: _____ Time: _____ MM/DD/YYYY (00:00 - 24 HOURS)	

Sessional			
Please Check One:	Sessional Hours: (meeting time and travel only)	Preparation Hours: (prior approval required)	Total Hours Claimed:
<input type="checkbox"/> Specialist (\$171.05/hr)	_____ Hours	_____ Hours	0 Hours
<input type="checkbox"/> Family Physician (\$171.05/hr)	(7 hours max per day)		

Expenses (if applicable)		Total Amount
Airfare		
Car Rental		
Taxi		
Parking		
Mileage _____ kms @ 0.61/km (>50km round trip)	\$ 0.00	
Accommodation (max \$410/night or \$550 during summer)		
Meals		
Miscellaneous Expenses:		
Total Expenses Claimed	\$ 0.00	

For Office Use Only
Account Code: _____

Claimant Return to Email Address: _____


By signing and submitting this claim form, I hereby agree that these services may be subject to GST. In the event that the Canada Revenue Agency (CRA) determines that I should have remitted GST on account of the fees and did not, I will not seek any contribution and/or indemnity from the Doctors of BC for any GST, interest or penalties that I may be required to pay. I also agree to indemnify the Doctors of BC for any GST, interest or penalties that the CRA assesses directly to the Doctors of BC on account of the fees paid to me, except if the Doctors of BC fails to pay GST to me as invoiced in the original request for payment in accordance with the Excise Tax Act. To this end, I have provided the Doctors of BC with my GST number, in writing, as a condition of my participation in the agreement. (see reverse for details)

Claimant's Signature: _____ Authorized Signature: _____

Please submit completed forms to the meeting or event organizer.

T12 Last Updated: 09/26/23

Appendix F: Monthly Reporting



Specialist Services Initiatives Project Reporting Tool

This online reporting tool is for projects funded through the Specialist Services Committee (SSC). The information you provide will be used for ongoing project monitoring, to produce updates for the SSC, and for the evaluation of the Initiative. Information will be presented to the SSC for all projects combined (overall trends) and for each individual project. To complete this report, you will need to have the final approved project plan (or the final change request if timelines/budgets have been updated).

PLEASE NOTE: THIS SURVEY HAS BEEN UPDATED. Some questions from previous surveys have been removed and some added.

You may save a partially completed report and return to it at any time selecting the "Save and Exit" option at the bottom of this tool.

Note: You must click "Submit" at the end of this reporting tool to submit your report.

PRIOR to hitting "Submit" at the end, you may save a copy of your responses to review with your project team.

Report Submission Date*

PROJECT IDENTIFICATION

SSC Initiative (select from dropdown)*

Project Name (select from dropdown) Project ID Number* Initiative Contact Email

Please indicate your name (i.e., person completing survey form)* Email*

PROJECT STATUS UPDATES

Please indicate the month/year for which this report is being completed* [?]

How are you contributing to improving the following surgical priority areas?

Please access the [Monthly Project Status Report tool](#) to complete and submit on the first Friday of each month.

Appendix G: PCAN Innovation Project Team Checklist

PCAN INNOVATION PROJECT CHECKLIST			
STATUS: Y / N / N.A	TASK	RESPONSIBLE	NOTES
INITIATING PROJECT PHASE			
	Review PCAN Innovation Fund Guide	Physician Lead	
	Review PCAN Innovation Fund Estimated Project Budget Template	Physician Lead	
	Review PCAN Evaluation Plan Template	Physician Lead	
	Check The Exchange Database for similar funded project	Physician Lead	
PLANNING PROJECT PHASE			
	Complete & submit PCAN Innovation Fund Estimated Project Budget	Physician Lead	Key deliverable
	Complete & submit PCAN Innovation Fund Evaluation Plan	Physician Lead	Key deliverable
	Review PCAN Project Phase Activity Checklist & begin to track	Physician Lead	
IMPLEMENTATING PROJECT PHASE			
	Receive & review PCAN Innovation Fund / Project Agreement	Physician Lead	
	Sign and return PCAN Innovation Fund Project Agreement / Fund Transfer Agreement	Physician Lead	Key deliverable
	*If applicable, complete QI Coaching request	Physician Lead	
	Set up / update Doctors of BC Physician payment account	Physician Lead	
	*If applicable, update Electronic Fund Transfer Form	Physician Lead	
	Create/update GST Resignation Designation Form	Physician Lead	
	Attend Project Kick Off Meeting	Physician Lead	
	Save / bookmark link to SSC Project Reporting Dashboard	Physician Lead	
EVALUATING PROJECT PHASE			
	*If applicable, complete & submit financial claims	Physician Lead	
	Track and log project work, data, measurements & budget	Physician Lead	
	Submit Monthly PCAN Project Status Report via SSC Project Reporting Dashboard	Physician Lead	Monthly key deliverable
CLOSING PROJECT PHASE			
	Create & submit draft PCAN Innovation Fund Project Final Report 4 weeks prior to project close	Physician Lead	Key deliverable
	Correspond & review feedback from SSC PCAN Liaison & SSC Analyst regarding draft final report	Physician Lead	
	Complete & submit final PCAN Innovation Fund Project Report (before project close date)	Physician Lead	Key deliverable
	Complete final project status report	Physician Lead	Key deliverable
	Complete PCAN Innovation Funding Project Close Survey	Physician Lead	Key deliverable
	*If applicable, complete final financial claims	Physician Lead	
	Create project story board to showcase project and share knowledge at future conferences and learning events	Physician Lead	Key deliverable
	Complete PCAN Innovation End of Project Survey	Physician Lead	Key deliverable
	Attend PCAN Innovation Project close meeting	Physician Lead	

Appendix H: Frequently Asked Questions – FAQ

<u>PCAN Innovation Fund FAQ</u>	
<p>What is the purpose of the PCAN Innovation Fund?</p> <ul style="list-style-type: none"> It is a program to support innovative projects that improve perioperative services. <p>Who is eligible to apply?</p> <ul style="list-style-type: none"> A licensed BC Physician who is takes the roll of Physician Lead on the project. <p>What is the role of a PCAN Innovation Physician Lead?</p> <ul style="list-style-type: none"> They are the spokesperson of the project, oversee the clinical aspects of the project, assemble the project team and is accountable for project completion. <p>What criteria are considered for project selection?</p> <ul style="list-style-type: none"> Alignment with B.C. provincial priorities, the level of innovation, scope and impact, outcome supporting evidence (scientific merit and research), team member(s) reporting capabilities and preparedness and the impact on the Institute for Healthcare Improvement Quadruple Aim. <p>How much funding can be requested for a project?</p> <ul style="list-style-type: none"> Funding amounts are project dependent and there are 5 tiers that range from \$25,000 to over \$100,000. 	<p>What is the application process for PCAN Innovation Funding?</p> <ul style="list-style-type: none"> Submitting a project proposal outlining objectives, methodology, measures, expected outcomes, and a budget estimate. Submissions will be reviewed for application completeness for approval. <p>Can collaborative projects involving multiple institutions be considered for funding?</p> <ul style="list-style-type: none"> Yes, provided they meet the criteria and objectives of the PCAN Innovation Funding. <p>When are project selections and approvals conducted?</p> <ul style="list-style-type: none"> Application may be submitted year-round. Selection and approvals are conducted 4 times a year: April, July, October, January. <p>How will successful applicants be notified?</p> <ul style="list-style-type: none"> Notification will be sent via email. <p>Is there post-funding support or monitoring for projects?</p> <ul style="list-style-type: none"> Funding is a one-time occurrence. The Specialist Services Committee does not provide continuous funding and monitoring of funded PCAN Innovation Projects.

What will happen after my project is selected?

- A fund agreement is created, reviewed, and signed by all required parties. An onboarding meeting will be scheduled to discuss reporting and finance requirements.

How are project funds transferred?

- Funds are transferred through either a gated process (releasing funds at milestones), or a reimbursement model (financial claim submission and remuneration).

Who submits the monthly status reports?

- The Physician Lead or Project Manager.

Who submits the financial claims / invoices?

- Only applicable only for reimbursement fund model. The Project Manager shall work with each team member to maintain a working log of hours. To ensure accurate accounting and project budget, the Project Manager is responsible for reviewing and submitting project team members' finance claims on their behalf.

What financial documents do I need to submit?

- Only applicable only for reimbursement fund model. The Project Manager shall support the project team members and gather any or all of the following: expense claims, invoices, electronic fund transfer forms, and itemized receipts.

How do I submit financial claims?

- Only applicable only for reimbursement fund model. Consolidate invoices, claims, and related itemized receipts into one PDF file and email the file to sscbc@doctorsofbc.ca. Include "PCAN + Project Name" in the email's subject.

What can I do if I miss the 3-month finance submission deadline?

- Only applicable only for reimbursement fund model. Late submissions should be avoided as these claims will be denied. Documentation that indicates the attempt to submit on time or explanation of exceptional circumstance with written request for an exception will need to be provided to the Doctors of BC CEO for approval.

Can funds be electronically transferred to an individual that is not on the invoice (i.e. the invoice is sent by an organization that has multiple individuals working on the same project)?

- No. The electronic fund transfer (EFT) form must match the same name on the invoice.

If I am a physician, where do I go to update my banking information?

- On the Doctors of BC website. Alternatively, physicians can submit an electronic fund transfer form (EFT) if they want payments transferred to a different account.

Can I submit an expense claim if I do not have my itemized receipt?

- Only applicable only for reimbursement fund model. The line item associated with the itemized receipt should be removed from the claim as itemized receipts are mandatory. You may be able to contact the vendor / organization to obtain a copy of the itemized receipt.

When do I need to submit monthly project status reports?

- First Friday of each month throughout the project's life cycle.

What happens if I forget to submit the monthly report?

- Contact the SSC PCAN Innovation Fund team member to inform them of the status.

What happens if I do not submit the monthly report?

- An SSC PCAN Innovation Fund team member will reach out to obtain a status update. Failure to submit a report can put your project's funding at risk, affecting your eligibility for future funding opportunities.