

PCAN Summit 2025



Event summary

On November 2 and 3, 2025, the Perioperative Clinical Action Network (PCAN) hosted its third annual Showcase and Summit, bringing together leading experts in clinical, policy, and quality improvement in perioperative care at Vancouver's Hyatt Regency hotel.

Around 170 physicians, nurses, health care administrators, allied health, and patient and system partners gathered to share their knowledge and experience and learn about perioperative projects being funded by the Specialist Services Committee (SSC).

An evening reception also gave attendees an opportunity to mingle and connect among poster boards featuring physician-led projects.

Monday's full-day Summit provided opportunities for physicians and care partners to hear keynote speaker Allison Muniak, participate in breakout presentations, network, and take part in plenary sessions including a moderated debate about the place of AI in surgical triage.

Significantly, this year's PCAN Summit dovetailed with the World Congress of Prehabilitation and Perioperative Medicine. The organizing committees presented a joint agenda in the afternoon, allowing Summit attendees to connect and share best practices with their global counterparts.



Event highlights

Geoff Schierbeck (pictured at right), SSC portfolio liaison for PCAN, emceed the Summit and invited Robbie George (below) to welcome attendees to the unceded territory of the *xʷməθkʷəy̓əm* (Musqueam), *Sḵwxwú7mesh* (Squamish), and *salilwətaʔ* (Tsleil-Waututh) Nations.

Opening remarks

Dr Daisy Dulay, a cardiologist and SSC physician co-chair, spoke about the shared visibility SSC provides that's needed to guide surgical improvement in BC, ensuring alignment and coordination across our health care system. She noted that every role contributes to the common goal—the best possible surgical outcomes for patients in BC—and it's the power of collaboration that will guide us there together.

Dr Charlene Lui, a family physician and the 2025 President of Doctors of BC, noted the importance of the real-world, concrete solutions being shared at the Summit, which will enhance patient access to perioperative care. She spoke about the particular challenges we face, including fiscal pressures, and the need to harness the collective experience, knowledge, and creativity in the room to innovate and bring about system change.

Keynote speaker

Seeing the Bigger Picture: Non-technical skills in clinical settings

Allison Muniak (right), an executive director at Health Quality BC, gave an interactive keynote address, focused on teamwork and communication. An expert in human factors—the science of evaluating and understanding human interactions within a system—she said that health care is composed of both technical and non-technical elements. She emphasized the importance of distinguishing between the two when determining the best course of action.

In the context of today's systemic challenges, she said, it's important to mitigate uncertainty, which increases cognitive load and leads to ineffective decision-making. It can also quickly erode our sense of connectedness, both to one another and to our work.





It's also critical to design environments in a way that seems natural to people, to ease interaction and set them up for success. This means examining all the signals in an environment, including potential information overload, which can lead to inattention and distracted focus. Taking a human-factors approach can reduce cognitive load and improve decision-making.

So, how to shift culture and build a high-functioning team? It starts with exploring the conditions within a system that are potentially within our control: relationships/connections and

power dynamics, and mindset models—or habits of thought—which can drive transformational cultural change.

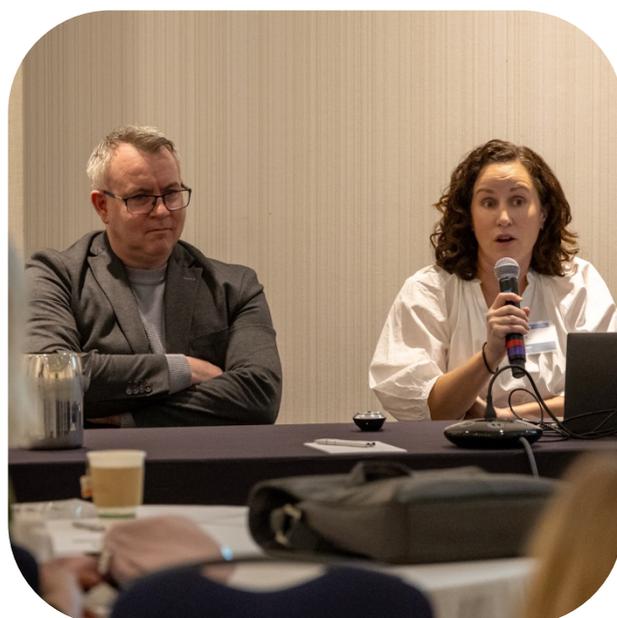
Allison outlined key strategies to address team culture, starting with recognizing different kinds of biases (confirmation, anchoring, groupthink, authority, and how information is framed) to counteract them. A successful shared mental model features role clarity, structured communication, shared situational awareness, debriefs, visual aids, and collaborative decision-making, she said.

To strengthen connection, she stressed the need to observe with curiosity and a desire to understand. Insights sometimes comes from what goes unsaid and looking beyond the data to understand its context.

Power dynamics in the behaviour of leaders (both structural and situational leaders) have a huge impact on team culture, Allison noted. Strong leaders are consistent, respectful, set clear expectations, and navigate pressures deftly. Challenges that require people to adapt can only be addressed through changes in their priorities, beliefs, habits, and loyalties. Ultimately, a culture in which team members feel that they matter—that they are valued and add value through their contributions—will be one in which everyone thrives.

Breakout sessions

- ▶ [Opportunistic Salpingectomy and Facility Engagement Surgical Supports](#)
 - **Dr Scott Cowie and Dr Gillian Hanley (pictured); Crystal White, Dr Erica Phelps**
- ▶ [Prehabilitation and Enhanced Recovery After Surgery](#)
 - **Dr Lindi Thibodeau**
- ▶ [Equitable Access, Physician Extenders](#)
 - **Dr Nazira Chatur, Chelsea Vatkin, Dr Sara Houlihan and Dr Jane Lea**
- ▶ [Choose to Move and Pain BC](#)
 - **Dr Kelly Mayson, Dr Laura Churchill, Gregg Moor**



Plenary session

Beyond Fads and Hype

Dr Sarah Kim (right), a sports and exercise medicine specialist and psychotherapist, spoke about the importance of exercising well for optimizing function and performance in clinical environments.

She addressed the wellness industry's exploitation of our desire for health and wellbeing and the first principles of wellness:

- ▶ The body is built for adaption.
- ▶ The body is built to move.
- ▶ The body is a finite system, but the potential of the body is infinite.

Sarah noted the importance of gearing exercise to where and how you spend your days, to avoid reinforcing patterns of overuse. She pointed to how health practitioners are taught sacrifice, stoicism, and self-neglect, and emphasized the need for self-compassion, gratitude, and healthy boundaries when thinking about our relationship to our bodies.

Ultimately, she said, exercising well comes down to assessing the demands on your body, returning to the basics, calibrating, investing in yourself, and evaluating what is and what isn't working.



Plenary session

Debate: AI can safely replace human decision making in surgical triage

Moderator: **Dr Dave Konkin** (below left)

For: **Drs Camilla Wong & Dan McIsaac**; against: **Drs Lindi Thibodeau & Ahmer Karimuddin** (from left)

Takeaways: AI has a place in supporting triage, but this is still new and not fully explored. AI can be used as a tool to support decision-making, but not to replace conversations between patients and physicians.



Plenary session

PCAN: Where we are, where we're going

Dr Paula Lott and Juliet Batke (pictured, from right) highlighted PCAN's achievements over the last year by the numbers:

- ▶ PCAN now has more than **400** members
- ▶ **23** members are on the PCAN Working Group
- ▶ **21** funded [innovation projects](#)
 - 17 site-based, four provincial
- ▶ **32** faculty supporting toolkits

They reviewed PCAN's strategic priorities:

Network supports

- ▶ PCAN Summit, Nov 2 and 3
- ▶ World Congress of Prehabilitation and Perioperative Medicine, Nov 3– 5
- ▶ Enhanced Recovery Canada
- ▶ Health Quality BC (HQBC)
- ▶ BC Cancer
- ▶ Rural Surgical & Obstetrical Network (RSON)
- ▶ Joint Collaborative Committee (JCC) Alignment
- ▶ Choose to Move
- ▶ Pain BC
- ▶ HealthLink BC
- ▶ Pathways

Equitable access

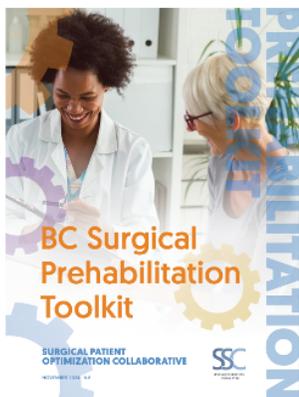
- ▶ Surgical Diagnosis Code Review and Update
- ▶ Drafting Surgical Waitlist Toolkit
- ▶ Four projects improving access to specialist care

Enhanced recovery and rehabilitation

- ▶ Perioperative Risk Assessment and Triage Tool ([PRATT](#))
- ▶ 11 ERAS and Prehab Projects (nine of which are being spread)
- ▶ Now over 30 sites in BC with prehabilitation and Enhanced Recovery Programs
- ▶ New Pediatric Prehabilitation Toolkit in partnership with BCCH
- ▶ Integration of Prehab and ERAS in Pathways



- ▶ The following [toolkits and guides](#):



Surgical cancer care

- ▶ [Opportunistic Salpingectomy](#)
- ▶ Cancer Diagnosis Dashboard

What's next?

Key activities include:

- ▶ Enhancing collaboration across surgical teams to boost patient outcomes and efficiency.
- ▶ Evaluating current initiatives, identifying improvements and potential for spread, and showcasing successes.
- ▶ Assessing PCAN projects for cost-effectiveness and sustainable healthcare investments.
- ▶ Supporting projects with resources and fostering collaboration between physicians and health authorities.
- ▶ Launching the next cycle of [innovation projects](#) with rigorous review processes to facilitate spread.
- ▶ Furthering our strategic priorities: enhancing network supports, equitable access, recovery and rehabilitation, and surgical cancer care.

These activities are strategically planned to enhance surgical care, support innovation, and ensure the physician voice continues to shape healthcare improvements in surgery.

Participant feedback

Feedback from respondents to a post-event survey was uniformly positive. Most respondents agreed that the Summit met its objectives:

- ▶ 96% agreed/strongly agreed they increased their knowledge of provincial surgical strategies.
- ▶ 93% agreed/strongly agreed they increased their awareness of perioperative innovations that could be applied in their own practice or setting.



- ▶ 100% agreed/strongly agreed that they were able to build and foster perioperative connections locally, regionally, and/or provincially.
- ▶ 100% of respondents said the event was a valuable use of time and they would recommend the event to a colleague.

Respondents said they were motivated in the following ways:

- ▶ “[The Summit] provided me information and inspiring new ways of doing things. Some takeaways I am able to implement fairly quickly may seem small, but hopefully will have positive impacts to those who need access to our care.”
- ▶ “I plan to continue to encourage administration to adopt prehabilitation in order to enhance the wellbeing in our community.”

They said the Summit was most helpful in networking with peers and interacting with quality improvement professionals from across BC to learn from each other’s experiences. Other notable feedback included:

- ▶ “Loved the debate on AI. Great speakers. The keynote was perfect, and it was great to be in company of such amazing, big, beautiful brains and change agents.”
- ▶ “I was encouraged by the range of sessions. I especially liked [Dr Kim’s] session on caregiver wellness through movement and nutrition.”
- ▶ “It’s inspiring to hear the stories and innovation work happening around BC. The AI panel debate was great and it calls on each of us to further explore best practice standards with AI tools.”

Future improvements

Respondents said they would have liked small group breakouts to problem-solve, learn from other sites, and share solutions. The survey identified potential future topics:

- ▶ Strategies for spread and implementation of successful projects
- ▶ Discuss system issues and hear from decision-makers and leaders
- ▶ Leveraging AI as tools for improving efficiency and patient care

Thank you to all who were able to attend the 2025 PCAN Summit. We look forward to seeing you next year.

