



THE UNIVERSITY OF BRITISH COLUMBIA

Office of the Vice-President, Health  
UBC Health



# Thoughts About Silos and Collaboration

A report from the BC Health Summit

*Breathe & Weave: Talking Across Silos to Enable Health System Improvement*

June 2023

## Introduction

In January 2023, the BC Health Systems Partnership hosted the *Breathe and Weave: Talking Across Silos to Enable Health System Improvement* health summit. The summit brought together people from diverse roles, sectors, and regions across British Columbia to discuss shared priorities for improving BC's health system and how working together could be better enabled across the system.

A number of key themes emerged from the thoughts, ideas, and perspectives shared by the summit participants. This report provides documentation of statements shared that relate to the theme of *Silos and Collaboration*.

Each statement in this report responded to a discussion question and was documented by a discussion group or individual participant during the summit or the following week using an interactive, online platform called ThoughtExchange. The number shown after each statement is the score on a five-point rating of resonance with other participants. After the score, there is a number in parentheses that shows how many participants scored that statement. In each round of discussion, most of the statements in ThoughtExchange received a similar number of ratings because ThoughtExchange evenly distributes the views of the statements among participants.

Refer to the Appendix (page 11) for information about the mix of participant perspectives for each discussion question.

## WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?

**Have an integrative and collaborative collaboration with different stakeholders: Nurses, pharmacists, social workers, doctors, and communities**

4.2 (15)

**Starting to see more provincial coordination and collaboration**

We need more of this to avoid duplication of work and to build consistency in services and resourcing around common priorities.

4.1 (15)

**Willingness to work across silos**

This is a complex systems issue

4.1 (15)

**The more we work together, the greater conversation we can have to share the information among all parties.**

4.1 (14)

**Breaking down silos between health authorities.**

Helps reduce workload by avoiding the need to "start from scratch" and implement already-proven initiatives.

4.0 (15)

## WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?

**Communication between health care silos**

Efficient & better for patient

4.1 (12)

**All providers working as partners with shared mutual goals rather than working as isolated parts of the same system.**

4.0 (15)

**An ideal system is evidence based and embraces transparency, sharing, and learning together.**

There has to be a collective vision and an ability to understand the broader social and economic context. This will include hard conversations.

4.0 (14)

**collaborative community based care with social supports**

because a sustainable system isn't reliant on hospitals

4.0 (14)

## WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?

**Collaboration outside of Health care**

Social connections and services are critical elements

4.1 (11)

**Build on relationships and collaborate with services outside health care**

For example, during flooding a car dealership provided a bus. When people come together, they come up with solutions

4.0 (11)

**Improving the flow of information across organizations, communities and hierarchies**

There's a lot of good work going on but we don't all know about it, especially the people on the ground.

4.0 (11)

**Principles of accountability, collaboration and caring need to be reflected in Health both internally and externally**

4.0 (11)

**Networking across silos, collaboration, developing communication, sharing, collaborating**

3.9 (12)

## WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?

**Reduce bureaucracy and duplication of work and therefore improve efficiency by trusting health care providers and patients on making the best decision**

4.2 (11)

**Advocate for collaboration between health authorities to share success/resources**

Standardized approach to information so all communities can benefit from local sites doing excellent work to improve health system delivery

4.1 (12)

**Engagement with other people who have a part to play in this (community organizations, municipalities) and empowerment to take small piece forward**

What can non-clinical people do to help support the system while we're going through change, e.g., Engagement, healthy community partnership tables

4.1 (11)

**Maintain and build on collaborative ventures that started during/because of Covid.**

4.0 (13)

## WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?

**Bringing diverse perspectives to the table! Health agencies recognizing that they don't have all the answers on their own.**

Moves to collaborate/connect with others within and outside the to bring in different voices to shape strategy (e.g. patient partners, other sectors)  
4.0 (15)

**Co-design and co-development is fundamental to addressing most of the current challenges in the health care system.**

4.0 (15)

**Development of structure to support and safeguard the wellbeing of people working in the health care sector**

This touches on the quality of care that health care professionals deliver to their patients.  
4.0 (15)

**Breaking down silos between health authorities.**

Helps reduce workload by avoiding the need to "start from scratch" and implement already-proven initiatives.  
4.0 (15)

## WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?

**An ideal system would be person-centred, needs-based, with local voice and influence.**

People should be at the centre of health care systems, not to create individual "silos" but to ensure that community voices are included.  
3.9 (14)

**Removing barriers for clients, reducing duplication**

stopping people having to retell their story, making connections meaningful.  
3.9 (14)

**Sharing information across all the systems so we are not creating individually work processes for same work being done across the systems**

3.9 (13)

**Bring more compassion, communication and collaboration into the system.**

Everyone needs to be reminded how to care and be human again.  
3.8 (14)

## WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?

**Identify the problem. Identify the stakeholders. Collaborate to define the problem and a shared vision of how the solution would like**

Then work together to achieve that goal  
3.9 (11)

**Partner across organizations for better transparency**

3.9 (11)

**Movement away from spending money in silos to spending money in the community**

Working with funding in silos will not create a coordinated system  
3.8 (12)

**Re-engaging communities to co-create and co-deliver health care**

3.8 (12)

**Principles of accountability, collaboration and caring need to be reflected in Health both internally and externally**

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## WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?

**Change would involve health care taking an approach of mutuality and reciprocity to their relationships with external networks.**

4.0 (12)

**Rob and duplicate; share lessons**

so we learn from each other's lessons and can replicate successful changes  
3.9 (13)

**Connection across sectors to improve care**

Connect and learn from each other inside and outside of health  
3.9 (12)

**Connect with leaders and the public to see what red tape is causing barriers and how we can eliminate them across the province**

to correctly identify the problems and a path to address  
3.9 (11)

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**Willingness to collaborate**

Critical for change  
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# Thoughts About Silos and Collaboration



## WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?

### **Increased collaboration and relationship building (e.g., between acute care and public health, within communities, conferences like this)**

Regional and provincial tables to discuss across agency and provider lines; let's do more of this and EARLIER to break down silos and redundancies.

3.9 (16)

### **Increased collaboration for implementation among health care authorities and sustaining those initiatives and supporting enhanced communication**

3.9 (15)

### **sharing information and collaboration amongst leaders/decision-makers to overcome challenges**

3.9 (15)

### **Collective action: opportunities to partner with others on common issues, don't all need to invent wheels on our own.**

Examples of one area testing something and others learning from it. Trust one another that we're going to be working as a system.

3.9 (14)

## WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?

### **Dream – PHR that travels with the patient**

safety, respect, collaboration

3.8 (14)

### **More collaboration between partners outside the health system (i.e. social agencies, politicians etc.).**

3.8 (14)

### **Reduce Silos**

Efficiency

3.8 (14)

### **Expansion of collaborative practice**

Help maximize what we do

3.8 (13)

### **Expectations of patients, public, providers and government are measured and aligned**

At some point we need to have a shared understanding to start our improvement work from

3.8 (13)

## WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?

### **A provincial, tech-enabled space for people in the system to share ideas, successes, challenges, collaborate with others**

Collab outside of team, organization, industry will lead to more innovative thoughts to current problems. Currently we regurgitate old approaches.

3.8 (11)

### **Less red tape**

Easier for those with proper training to work in BC

3.8 (11)

### **shared curriculum for health professionals which includes theory and practice**

to weave cultural safety and humility as well as interprofessional practice and shared understanding of roles

3.8 (11)

### **Break down the silos and work together for the patient**

reduces wasted dollars and effort better care for patient

3.7 (12)

## WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?

### **Connect with leaders and the public to see what red tape is causing barriers and how we can eliminate them across the province**

to correctly identify the problems and a path to address

3.9 (11)

### **Ensuring that we support and help accelerate meaningful dialogue in the health system.**

3.9 (11)

### **How important that collaboration can be our north star to provide purpose and direction to our change process.**

3.9 (11)

### **Engagement with patients, family, caregivers in quality improvement projects, co-creating solutions with the health care system**

3.9 (10)

### **Sharing the suggestions we've heard here with our employees, peers, families, friends**

because this drives hope!

3.8 (13)



# Thoughts About Silos and Collaboration



## WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?

### **Unprecedented collaboration and information sharing during Covid**

Need to stop focusing on just doing things our own way.  
3.9 (9)

### **Create more spaces like this for people in system to connect across siloes**

To spread good ideas, share information and integrate services  
3.8 (16)

### **The ability to simply share work and advancements to tackle problems and digital solutions would help projects move along across health authorities.**

This is necessary to avoid duplication and capture recent innovations from the pandemic across our health system.  
3.8 (16)

### **We need to make sure there is a levelled ground at national level**

This will enable movement of health professionals across provinces to where there is need. Health professionals should not be working in silos  
3.8 (15)

### **Partnerships with non-profits can help bridge the gap in services**

3.7 (16)

## WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?

### **Stronger linkages between health care and community sectors**

there are community services that are addressing SDoH needs (i.e. housing, mental health and substance use counselling). need to collaborate  
3.8 (13)

### **Collaborative decision making by the Pentagram Partnership Plus for the Design; Governance & Management of our HC system**

Without collaborative approaches we continue to have diverse and often conflictual effort  
3.8 (12)

### **Breaking down silos and thinking big to get around ourselves**

3.7 (15)

### **Collaboration in care**

Consistent care plan  
3.7 (14)

### **Review funding models that perpetuate silos**

3.7 (14)

## WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?

### **Create space to allow us to shift the space from powerlessness to collaboration and involvement**

Encourage and engage people to contribute meaningfully to increase the energy to support the changes  
3.7 (10)

### **As a system, we already know many of the answers or solutions to tough problems. Issue has been that the right people are not at the table to solve.**

Broader collaboration key.  
3.7 (4)

### **Liasing between department and health authorities to prevent duplication of work.**

Share what is/isn't working, many are independently working on the same initiatives.  
3.6 (11)

### **Create one continuum of care**

Removes the silos  
3.6 (11)

## WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?

### **Information sharing leads to mutual problem solving.**

3.8 (12)

### **Actively engage with someone outside the traditional "boundaries" to collaborate with them and enable their success even though it may not benefit me**

Enable transformation  
3.8 (12)

### **Connecting with some new collaborations**

Always good to expand  
3.8 (12)

### **Focus on the topic/problem at hand, think outside of silos, get away from traditional structures and build fresh collaborative teams**

3.8 (11)

### **The value of collaboration as an effort within the system. Important that relationships upheld.**

3.8 (10)

### **Making an effort to build intersectoral relationships**

3.7 (13)

## WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?

### **electronic information sharing**

Sharing information and being transparent will help coordinate and reduce errors and gaps.  
3.7 (14)

### **Create a learning healthcare system, informed by organizations that have been successful**

Will help to create a common vision and shared action  
3.7 (14)

### **Implementing strategies to address toxic drug crisis more rapidly**

A lot of work towards great awareness and collaboration  
3.6 (16)

### **Ways to connect with other RHA's/partners/community groups to collaborate more on care provision**

to improve connectivity and reduce duplication of efforts  
3.6 (15)

## WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?

### **train health care providers together to work collaboratively together**

break down the silos before practice  
3.7 (14)

### **Dream – learning from success**

because sometimes we do get it right and need to appreciate the positive deviance and share successes because it's motivating  
3.7 (13)

### **Collaboration across sectors**

We will never have enough people  
3.6 (14)

### **We need to find ways for community social service leaders to contract with health.**

This is one way to increase collaboration between health and social service sectors.

### **break down silos, provide autonomy to partners present to commit to/get work done, or ensure decision makers are present at partner tables**

it is tokenism or superficial collaboration otherwise  
3.6 (12)

## WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?

### **Alignment of a vision, priorities & processes to achieve the vision by decision makers. Then communicating the shared plan.**

Only with a common vision, priorities & agreement of processes to get there, can we make the greatest needed change in a timely manner.  
3.6 (10)

### **Decrease red tape and increase efficiency in programs for IMG physicians, nurses (international and inter-provincial), and allied health**

3.5 (11)

### **Having discussions at all levels, including the Ministries (not just MoH) that bring in space for holistic, strategic discussion on SDH**

Silos exist within the way our governments are set up, so having collaborative tables is important.  
3.5 (11)

### **Partner and Collaborate**

Improve efficiency/limit redundancy  
3.4 (12)

## WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?

### **Need health authorities to be willing to listen and genuinely engage with community services and orgs**

Need mutual agreement, willingness to listen, reciprocity  
3.7 (12)

### **Co-creation platforms that coordinate health**

personnel need to be mobilized to tap the strengths available through the platform to inform policy, leadership and practice.  
3.7 (11)

### **Give points for collaboration across sectors**

3.6 (13)

### **Share success stories**

Highlight what health care is doing well today  
3.6 (13)

### **Be a louder advocate for shared spaces within our communities, especially around workforce stabilization**

so they feel recognized, respected, heard  
3.6 (12)



**WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?**

**Removing barriers to working within and across organizations using the cloud.**

Modern tools that allow us to communicate and collaborate more effectively exist just beyond our firewalls. What protects us sometimes holds us back.  
3.6 (14)

**More technical solutions that are patient focused and eliminate silos between care areas/programs.**

The more information that providers have regarding their patient's longitudinal care journey, the better they will be able to support ongoing care  
3.6 (12)

**patient and family as centre of care. need to include early and often.**

avoids independent or misaligned targets  
3.6 (10)

**WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?**

**Although health plays a role in leading action on SDH, action on health can also be led by other sectors (social organizations, housing organizations)**  
3.5 (14)

**Break siloes!**

Many organizations working towards the same can achieve more  
3.5 (14)

**That we evolve to become a transparent learning system that pursues improvement in collaboration with the people we serve.**

3.5 (14)

**Health not just a MoH responsibility. Other ministries and organisations also need to collaborate and be involved**

3.5 (6)

**A Health system that values transparency and open communication, one that's willing to learn from mistakes and take collaborative approaches to find**

3.4 (12)

**WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?**

**How we evaluate our performance**

More explicit expectations around collaboration, with clear responsibilities and opportunity for input from patients/public and health providers/orgs  
3.4 (11)

**the determinants of health-we need to collaborate with all of the government silos, communities to ensure a stronger linkage, increase accessibility**

3.4 (7)

**We need a united vision and shared direction so we're not all moving in silos and scattered direction.**

3.4 (2)

**Addressing health equity, to create a better health care system to bring health care to any one from any where**

Creating a preventing / proactive health care system, by improving per to per communications that embraces and fosters a collaborative approach  
3.3 (10)

**WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?**

**Streamlining initiatives (provincial government, health authority, etc) to avoid duplication and redundancies.**  
3.6 (12)

**Need to write an action plan with a short- mid- and long-term vision**

Accountability, alignment across sectors and communities  
3.6 (11)

**Encourage interdisciplinary growth and collaboration for health at academic institutions as a way to encourage future collaboration than exclusivity**

3.6 (4)

**Giving people choice - Supporting people to stay healthy through funding for private home support and independent living options.**

Compression of morbidity can have profound impacts for quality of life, caregiver burden, and health system capacity  
3.5 (10)

## WHAT'S HAPPENING IN BC'S HEALTH SYSTEM THAT YOU WANT TO HAPPEN MORE?

**Community volunteer services collaborating with health care providers to support healthy living. E.g. nurses working with services to connect to care**  
3.5 (14)

**we are moving into a new era of acknowledging limits of our knowledge and becoming more humble — asking more questions than giving directions** allows for more collaboration and shared decision making  
3.5 (14)

**communities are gathering like minded people and organizations to tackle wicked issues and they reach out to gov't for any support** so communities are connected to resources and supported to work collaboratively on issues that impact their community the most.  
3.4 (16)

**We need to celebrate successes with everyone. We only celebrate within our silos or big changes. But minute changes go unnoticed.**  
3.4 (15)

## WHAT WOULD YOU LIKE TO SEE IN AN IDEAL HEALTH SYSTEM IN BC?

**Share place on waiting lists for tests and surgeries**  
Allow people to make plans while waiting, knowledge decreased apprehension  
3.4 (12)

**A place where every user feels like they arrived at the right place when they access the system, a system that shares resp and shared accountability.** ability for outcomes that we can all celebrate.  
3.4 (9)

## WHAT WOULD NEED TO CHANGE IN THE REAL WORLD TO GET FROM WHERE WE ARE TO WHERE WE WANT TO BE?

**We want to start with action, mobilize and say YES now and quickly to embrace opportunities.**  
We've had many dialogues and conversation and we hope to start doing and making the change that needs to happen.  
3.1 (3)

**We need to build consensus and awareness of who our stakeholders are, and work to involve them in identifying priorities and making improvements** Because the answers are out there for us to find. We can't keep asking the same people our questions and expecting to get different answers  
3.1 (2)

**Platform for collaboration so people in the system know where to go to find the right people for partnership - enable relationships.**  
0.0 (0)

## WHAT OPPORTUNITIES DO YOU WANT TO TAKE ADVANTAGE OF? HOW WOULD YOU MEASURE SUCCESS?

**Impact of running a publicly funded health care system that relies on providers who are private enterprise.** If systems are not all connected then decisions of one sector get made without planning for the impact of that change to other systems  
3.5 (8)

**align IT to work across geographies, sectors** will make care delivery more effective/efficient  
3.5 (5)

**Create checklist regarding what is needed to improve healthcare** Helps with clarity and, hopefully, shared action  
3.3 (2)

## Appendix: Participant Summary

A breakdown of the participants in each of the Summit's ThoughtExchanges, by category.

