Virtual Health Grand Rounds

Braiding Rural Care, Data, AI, and Technology-Enabled Care: Strengthening Health Systems Through Relationship-Based Innovation

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THE UNIVERSITY OF BRITISH COLUMBIA
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Land Acknowledgement (Example)

We acknowledge that we work on the traditional, ancestral and unceded territory of the Skwxwú7mesh (Squamish), xʷməθkwəy̓əm (Musqueam), and Sḵwx̱wú7mesh (Squamish), xʷməθkwəy̓əm (Musqueam), and Səl̓ílwətaʔ/Selilwitulh (Tsleil-Waututh) Nations.

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PRESENTER DISCLOSURES

Name: Dr. Kendall Ho

I have no relationship or commercial interests to disclose.

Name: Joan Assali

I have no relationship or commercial interests to disclose.

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SESSION OBJECTIVES

- **Identify** ways AI and Technology-Enabled Care (TEC) to support rural and Indigenous health services.
- **Discuss** mitigation strategies to avoid AI and TEC further worsening care access and quality rural and Indigenous communities.
- **Apply** Learning Health System (LHS) principles to support continuous improvement, and equitable, data-informed decision-making.

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WHY NOW?
THE URGENCY FOR EQUITABLE AI & TEC IN HEALTHCARE

- Rapid acceleration of AI and technology adoption in healthcare, the pace of change is outstripping policy and governance frameworks.
- Increasing global speed of innovation and commercial competition may drive adoption without adequate attention to equity or safety.
- Real risk of marginalizing non-urban and underserved populations, rural, remote, and Indigenous communities.
- Strong AI and TEC policies must actively steer innovation toward care gaps, particularly in rural and Indigenous health contexts.
- Patient and community co-design must be a core principle in the development and implementation of AI and TEC solutions.

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About AiTECCC

Artificial Intelligence and Technology-Enhanced Care Collaboration Centre

A UBC Research Excellence Cluster

AiTECCC is a research cluster led by UBC's Digital Emergency Medicine Unit. It unites academic experts, Indigenous leaders, health professionals, policymakers, and private sector innovators to reimagine healthcare through human-centred digital health (DH) and artificial intelligence (AI).

aiteccc.ubc.ca

Transform Health Policy
Evidence-based DH/AI policy implementation

Engage Communities
Co-design and co-evaluate AI solutions

Advance Learning Systems
Data-informed, compassion-driven care

Scale Innovation
Public–private partnerships in AI & health

Why AiTECCC Matters

Healthcare Challenges

- Emergency Department overcrowding and rural ED closures
- Health workforce shortages affecting access to timely care
- Underserved communities — including Indigenous and First Nations populations
- Digital innovations risk widening inequities without hybrid models

AiTECCC's Response

- Transition from reactive innovation to system-level transformation
- Co-create human-centred AI solutions grounded in equity and compassion
- Leverage Indigenous and non-Indigenous knowledge systems for culturally safe care
- Enable evidence-based policy to scale AI equitably across health systems

Our Collaborative Network

AiTECCC brings together diverse stakeholders across the health ecosystem:

Academic Researchers
UBC and partner institutions

Clinicians & Providers
Frontline health professionals

Patients & Caregivers
Community members and advocates

Indigenous Leaders
Sovereignty-respecting, co-governed research

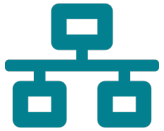
Industry Innovators
AI and digital technology companies

Policymakers
Health authorities & Ministry of Health BC

AiTECCC Learning Health System

Artificial Intelligence Technology-Enhanced Care Collaboration Centre

AiTECCC is committed to building an ethical, equitable Learning Health System that bridges cutting-edge AI research with the needs of patients, clinicians, and communities particularly those who are rural, remote, and underserved.



Learning Health System

Indigenous Advisory

Communities Engagements

Public and Private Dialogue

Indigenous Advisory Committee

Centering Indigenous voices in AI governance and research design.

Governance Grounded in Relationships

Ethical Oversight

The IAC guides how AI tools are developed, deployed, and evaluated within Indigenous health contexts.

OCAP® Principles

Research respects Indigenous community Ownership, Control, Access, and Possession of their data.

Two-Eyed Seeing

Braiding Indigenous knowledge systems with Western scientific approaches to create richer, more relevant health solutions.

Ongoing Consent

Consent is treated as an ongoing relationship, not a one-time signature, throughout the research process.

Communities Engagements

Meeting communities where they are — building trust before building technology.

Community Co-Design

Engaging rural health providers and residents as co-creators, not just end-users, of AI tools.

Digital and Hybrid Integration

Exploring how AI augments existing digital and hybrid infrastructure to address care gaps in remote communities.

Culturally Safe Approaches

Ensuring engagement methods respect local protocols, languages, and community rhythms.

Data Sovereignty

Supporting communities in retaining control over health data generated in their territories.

Bi-directional Learning

Knowledge flows in both directions — researchers learn from communities as much as they share.

Public and Private Dialogues on AI in Health Care

Listening First, Designing Second

Patients and the public are experts in their own care. AiTECCC's dialogue series ensures community values shape AI priorities before tools are built.

What matters to patients?

Surfacing lived-experience concerns about privacy, trust, and fairness in AI-mediated care.

From dialogue to design

Findings directly inform research priorities, governance and AI policies, and tool development criteria.

Who gets a seat at the table?

Actively engaging voices from equity-deserving groups **(Spinal cord injury, Youth, including rural, racialized, and elderly populations.)**

Transparency & accountability

Participants receive updates on how their input was used, closing the feedback loop.

Learning Health System Micro-Course

Building Capacity for Applying LHS Principles in Hybrid Care

Self-paced, accessible curriculum designed for health providers, system administrators & planners, data analysts & health informaticians, quality improvement leads, Community engagement specialists, health system leaders and policy makers

Covers principles and foundations of LHS in health care, including PP+, PDSA Cycle, Cultural Safety

Cohort-based learning with peer collaboration, 3–5 hrs/week over 6 weeks (May 5 – Jun 19, 2026)

Earn a UBC certificate and Badge upon completion

Evidence-based curriculum

- Real-world case studies from BC health system
- Equity-centred & cultural safety informed
- No formal prerequisites required

Learning Health System Micro-Course

Building Capacity for Applying LHS Principles in Hybrid Care

Instructional Team - Co-developed with input from subject matter experts

- Indigenous scholars
- Health academics & system leaders
- BC Ministry of Health / HealthLink BC
- Rural and Remote Virtual Health organizations' Leaders

Facilitators -

- Course lead & subject matter expert
- UBC Digital Emergency Medicine team
- Health system practitioners & researchers

Recognize continuing education achievements

- Illustrate skill accumulation in mastering a concept
- Share across multiple social platforms
- Showcase skills to colleagues, licensing boards or potential new employers

Curriculum & Learning Outcomes

01

Introduction & Orientation

Course roadmap, welcome video, competency overview, and your initial LHS reflection from your own work context.

02

Foundations/Principles of the LHS

Quintuple Aim, PDSA cycles, Two-Eyed Seeing, Indigenous partnerships, cultural safety

03

LHS in Action – Tools & Cases

Real BC case studies (RTVS), deliberate dialogue, data dashboards, network analysis, IKT, and health economics.

04

Applied Capstone Project

Design and refine a practical improvement initiative grounded in LHS principles from your own work setting.

05

Wrap-Up & Integration

Synthesize learning, complete your final reflection, and plan next steps. Optional live drop-in session.

A CALL FOR ACTION, HOW CAN YOU JOIN US?

- **Share your thoughts with us**, your aspirations, concerns, and ideas about AI and Technology-Enabled Care in rural and Indigenous health contexts.
- **Help us shape what comes next**, tell us what else would be meaningful collaboration for your community or organization.
- **Stay connected**, we will update this group on our progress as AiTECCC evolves.
- **Join AiTECCC newsletter**. Aiteccc.ubc.ca

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