Old issues bog down meeting

22 June 2007 Sheraton Vancouver Wall Centre Hotel

2007/2008 BCMA elected officers Dr Geoff Appleton, President Dr William Mackie, President-elect Dr Brian Brodie, Chair, General Assembly Dr Caroline Wang, Honorary Secretary-Treasurer



Drs Michael Golbey and Bakul Dalal



Drs Sharon Lee, Shamim Jetha, and Geoff Appleton



Dr Steve Brown, PhD, and Dr Hyman Fox

he 2007 BCMA Annual General Meeting was a bit of the new, a lot of the old, and then, like a plant wilting in the sun, it flopped over, unable to sustain itself as members slipped out the door.

Not all old news is bad news, of course, and Dr Don Rix, chair of the Audit and Finance Committee, was able to replay a happy tune (this year trumpeted by a few of his friends from the brass section of the Vancouver Opera): BCMA finances remain sound, and the committee recommended that there be no dues increase for the third year in a row.

During the question period following the Finance Committee report, a motion from the 2005 AGM that the salaries of BCMA executive staff be made public was brought up again. Unlike publicly traded companies, societies (the BCMA falls under the Society Act) are not required to publish executive salary information; the release—or non-release—of this information is determined by the bylaws of the association. BCMA Bylaw 18.3 does not allow for that financial information to be released.

District 1 delegate Dr Bill Cavers assured members that the executive compensation is not out of line. The BCMA Board regularly receives a report on the executive director that contains a performance evaluation, salary, and comparative salaries for similar positions in similar and dissimilar organizations. The Board received such a report the day before the AGM.

The Finance Committee report concluded with the election of three members-at-large for the 2007/2008 Audit and Finance Committee. Of the slate of Drs Dennis Karpiak, Donald Rix. John Turner, and David Jones. Drs Rix, Turner, and Jones were elected. See the article on page 380 by Dr Rix for more on BCMA finances.

Dr Chris Sedergreen from Anmore then moved the following three motions, which he explained were intended to increase transparency of the Board:

- That the General Assembly insists that each of the AGM motions passed by members of the General Assembly and the Business Session, while not binding on the Board, be respected in their intent and execution.
- That duly passed AGM motions shall not be altered through amendments by the Board in their intent or substance.
- That motions shall be considered and discussed and reported to the mem-

The first two motions were passed easily and without lengthy debate, but the third motion was ruled out of order, as it is already contained in the BCMA

Dr Arun Garg, chair of the Governance and Restructuring Committee, gave a presentation outlining the committee's general recommendations, which boil down to separating governance from representation. The current governance structure requires the Board

Continued on page 379



Drs Bill Cavers, Bakul Dalal, and Michael Golbey, Mr Jeremy Smith, and Dr Alan Brookstone



Dr Chris Sedergreen



Drs Richard Blackmore, Carole Williams, Alan Gow, and Alex Black



Mr Paul-Emile Cloutier and Drs Alexandra Tcheremenska and Alan Brookstone



Drs Ken Seethram and Tracey Monk



Drs Bill Mackie, David Bach, and Hedy Fry



Drs Nasir Jetha and Beverley Tamboline



Drs Lloyd Oppel and Ron Wilson



Drs Severino Emnacen, Davidicus Wong, and Granger Avery

Continued from page 377

to both govern and represent, frequently putting Board members in awkward positions. The proposed structure suggests a large representative assembly (RA, with 81 elected positions), meeting twice a year, and a much smaller board (with 15 members instead of 40), meeting 10 times per year (for details, see www.bcma .org/members/Governance/Summary April2007.htm#BoardofDirectors).

Both Dr Bill Rife, Society of General Practitioners president, and Dr Jon Slater, Society of Specialist Physicians past president, spoke of numerous concerns regarding the proposed governance model. The two societies appear to share the concern that the proposal shifts them from the Board of Directors to the RA, and that their now-strong voices will be muffled. Others spoke in favor of the new governance model; a referendum on this constitutional change is expected in spring 2008.

And then, in what would prove to be the beginning of the end for the meeting, Dr Victor Dirnfeld proposed the following motion: "That the General Assembly deplores the Board policies that would block, suppress, restrict, or undermine the open communication between directors and members and insists that the Board remove restrictive policies and practices, including that in the Code of Conduct, with respect to the communication of alternative viewpoints within the Association by Board members." Numerous Board members considered the motion a vote of nonconfidence in the Board, and removed themselves not only from the debate and the vote, but from the room itself.

The motion was debated and revised (notably, by softening the word "deplores"), but by the time the vote came, the quorum of 50 was lost, and the assembly was not able to vote on the motion or conduct any further business.

—Jay Draper BCMJ Managing Editor

AWARD RECIPIENTS

Dr David M. Bachop Silver Medal in General Medical Practice

Dr Siobhan Key

Dr David M. Bachop Gold Medal for Distinguished Medical Service Dr Larry Collins

BCMA Excellence in Health Promotion
INDIVIDUAL: Wendy Creelman
Project Leader, In Motion
NON-PROFIT: BC Ministry of
Environment Air Quality Health Index
CORPORATE: Telus Tour for the Cure

CMA Honorary Membership Award Dr Robert Baird Dr Brian Dixon-Warren Dr Barrie Phillips

Dr Cam Coady AwardDr John Blatherwick

BCMA Silver Medal of Service Dr Arun Garg Dr Brian T.B. Taylor Mr Ben Trevino

BCMA Scholarships Ms Alison Lee Mr Andrew Parkin



Drs Bill Mackie, Margaret MacDiarmid, and Brian Brodie



Dr Zafar Essak



Dr Cathy Clelland



Dr Chee Ling



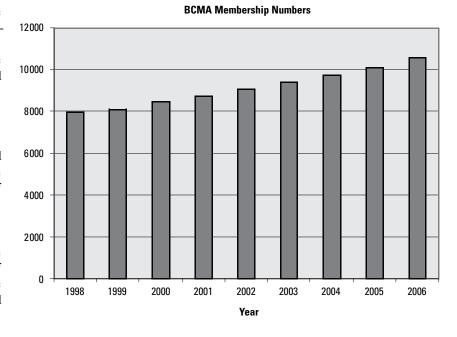
Dr Mark Schonfeld

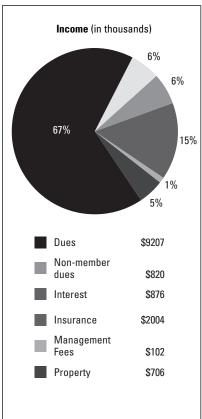
BCMA financial snapshot 2006

ou will have received the 2006 Audited Financial State ments in the Annual Report.

For those of you who were unable to attend the AGM and hear firsthand our financial report from the podium, here is a summary of the financial activities and results from 2006.

I am pleased to report that the Association is financially fit and well and in a strong position to support the work of your president and Board of Directors. Each year there is a rigorous budgeting process that ensures that there are sufficient funds to carry out the activities and work planned for the following year. With the support of the BCMA staff, the Audit and Finance Committee oversees this process and





monitors adherence to the year's financial plan, reporting its status regularly to the Board throughout the year.

Looking back to the 1990s and earlier, members paid extra levies as well as dues increases to cover the costs of negotiating and related activities. It was not a fun time. With the due diligence and careful planning that is exercised each year by the Audit and Finance Committee, Board, and management, we have built up a reserve to see the Association through the difficult times. This makes my job easier.

We are proud that we were able to recommend no dues increase for the third year in a row.

The sources of funding that provide for the member services, committee work, and programs are as follows:

Membership

Membership dues of \$9207487 were collected from 10 562 active members in 2006, compared with \$9067620 from 10249 members in 2005. The growth in number of members has slowed as physicians retire and there are not enough graduating students/ transfer-in members to replace them.

Other sources of revenue include the insurance and benefit programs, interest and investments, and rental property.

The BCMA investment portfolio is largely made up of bond funds, providing the Association with consistent and conservative income levels.

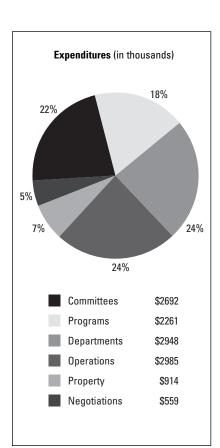
Expenditures

In 2006, the total expenditures were \$12 357 842, compared with \$11 203 707 in 2005, a 10% increase or \$1 154 135. The expenditures included the follow-

- Committee and Board meetings. (Many of you are voluntary participants on active committees such as COHP, CHEP, and CPAC.)
- Completion of the overhead study.
- Departmental and administrative costs of running the Association.

We are proud that we were able to recommend no dues increase for the third year in a row.

- Production of the BC Medical Journal (net cost).
- Delivery of the insurance and benefit programs.
- Negotiations. (Costs were much lower than budgeted due to the excellent work of the Negotiations Department and Negotiations Committee.)
- · Funding for bursaries for UBC medical students as a joint initiative with the CMA Medical Foundation. (The individual bursaries were increased



- to \$1500 per student this year).
- Donation to the Benevolent Fund to support physicians in dire financial straits (\$50 000).
- · BCMA's share for the newly established Physician Health Program of BC (\$365 859).

Bottom line

In 2006, the BCMA had an excess of revenue over expenditures of \$1356639. Some of these funds were allocated to support the future of our medical students by increasing funds for student bursaries and internships. Fifty-four bursaries were awarded to UBC medical students by the BCMA and CMA. In addition, the property and equipment replacement fund was increased. Remaining funds reside in the General Fund, totalling \$4019825. Although this seems a substantial amount, in reality this is equivalent to about 4.5 months of operational expenses. The general guideline for organizations similar to ours is to hold up to a year's equivalent of operational expenses.

Your Audit and Finance Committee and BCMA management team are committed to ensuring that the finances of the BCMA are well managed and secure so that the Association may continue to provide services and programs well into the future.

—Donald Rix, MD Chair, Audit and Finance Committee

2006-2007 BCMA OFFICERS

Dr Geoffrey Appleton President

Dr Margaret MacDiarmid Past President

Dr J. William Mackie President-elect

Dr Brian Brodie Chair, General Assembly

Dr Caroline Wang

Honorary Secretary-treasurer Dr Robin Saunders

Chair of the Board

EXECUTIVE STAFF

Dr Mark Schonfeld Executive Director

Dr Alexandra Tcheremenska-Greenhill Associate CEO

Dr Dan MacCarthy

Director of Professional Relations Mr Darrell Thomson

Special Advisor to the CEO and Board

Ms Christiane AhPin Chief Operating Officer, Corporate Affairs

> Mr Jim Aikman Director of Economics

Mr Mike Epp Director of Policy and Planning

Ms Geraldine Vance, APR Director of Communications and Public Affairs

> Mr Geoff Holter Director of Negotiations

BOARD OF DIRECTORS Districts & Delegates

- 1. Dr Carole Williams, Dr Ian Gillespie, Dr William Cavers
- 2. Dr Chris McCollister, Dr William Cunningham
- 3. Dr Jorge Denegri, Dr John Sehmer Dr Katherine Paton, Dr Lloyd Oppel, Dr Bradley Fritz, Dr Nasir Jetha
- 4. Dr Nigel Walton, Dr Russ Kellett
- 5. Dr Shelley Ross
- 6. Dr Todd Sorokan
- 7. Dr Barry Turchen, Richard Blackmore
- 8. Dr Gordon Mackie
- 9. Dr Jannie du Plessis
- 10. Harold Stefanyk
- 11. Dr Alex Black
- 12. Dr William McKinley
- 13. Dr Alan Gow, Dr Mark Corbett
- 14. Dr Keith White
- 15. Dr Chuck Buckley
- 16. Dr Robert Cheyne, Dr Evelyn Shukin

CMA President-elect

Dr Robert Ouellet

CMA Representatives

Dr Graham White, Dr Michael Golbey, Dr Jack Burak

Dr Bryan Norton President, Society of General Practitioners of BC

Dr Milton Baker

President, Society of Specialist Physicians & Surgeons of BC