

Hidey ho! To Prince George we go!

7 June 2008

University of Northern British Columbia, Prince George

On this cloudy and windy day, attendees scurried into the Canfor Theatre of the University of Northern British Columbia, still with fond lingering memories of the fabulous barbecue hosted by BCMA's Prince George member Dr Jan Burg at his ranch the evening before.

Shortly after 9:30 a.m., the BCMA business meeting started, with Dr Geoff Appleton, BCMA outgoing president, requesting members to observe a minute of silence in honor of deceased members. This was followed by Dr Schonfeld asking members to elect the chair for the business meeting, a task that was ably carried out by Communications and Public Affairs Committee chair and District 13 (Okanagan-Kootenay) BCMA board representative Dr Alan Gow.

Dr Gow read the standing rules and conducted the election of members to the Resolutions Committee for

this meeting: Drs Galt Wilson, Katherine Paton, and Granger Avery.

This was followed by Dr Geoff Appleton's address to the meeting where he highlighted a busy and productive year despite the absence of any active negotiations with the government. He stated that while he was happy that the macro-allocation process had been completed, he was dismayed in that the micro-allocation

"I am really happy to have come up to the meeting in Prince George. Even though I wondered about it at first... even though I have to be away from home longer, it is important to get out to these areas. It was a breath of fresh air, especially meeting and talking to a lot of rural physicians and noting that they are happy with their work, life, and practices. Family doctors here do a true full-service family medicine practice."

—William Cunningham, MD
Duncan

process was still awaiting settlement. On a more positive note, he stated that he was honored to have signed the new Master Agreement with government, thereby solidifying BCMA's relationship with the government and health authorities. He told members how glad he was to have traveled around the province meeting so many physicians. He thanked UNBC and Dr Don



Dr Cathy Clelland

Rix for providing BCMA the opportunity to host the annual meeting at UNBC and announced that the BCMA was making a \$6000 donation for education in the health professions. Dr Appleton encouraged members to get more involved with the activities of the Association and referred them to his written report in the 2007/08 annual reports.

Following reports by Drs Mark Schonfeld and Robin Saunders, Dr Rix made his report as chair of the Audit and Finance Committee. He stated how glad he was to have the BCMA annual meeting in Prince George and be able to present his report at UNBC, an institution close to his heart. Because Dr Rix was recovering from throat surgery, he explained that Dr David Jones, vice chair of the committee, would carry out the committee's presentation. Dr Jones informed members that the

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Dr Mark Schonfeld and Ms Patti Montagnon



Highlights from Dr Bill Mackie's incoming speech

The following are some excerpts from Dr Mackie's luncheon address.

Get active

A model was put to the membership in a referendum that involved a smaller governing board, a three-person executive, and a much larger representative assembly. The members have now voted and even though a 60% majority supported the new model, under the BC Societies Act we needed 75% to make this kind of change. So, for now, the way we govern ourselves remains as is.

Since a majority has expressed a desire for change, our challenge now is to find new ways of representing the needs and expectations of our diverse membership. We also need to reach out to physicians who may feel disenfranchised.

I firmly believe the BCMA is and should remain member focused and open to new ideas. We need to constantly find new ways to gather member input and to communicate with members. We represent nearly 11 000 practitioners in BC, and we have more than 70 different committees. There should be something for any member who wants to get involved and contribute.

Unity in our profession

This past year has had its challenges. The macro/micro allocation process has created stress within the membership. Regrettably, there have been examples of infighting and disrespect that sometimes looks like a bad case of sibling rivalry. This kind of behavior hurts us. What do our patients — let alone government — think

when we're fighting among ourselves? Thankfully — and despite these difficulties — we as an association are getting a lot of things right.

We need to remember that in the last year we approved and signed the Physician Master Agreement, and we're seeing some tremendous successes flowing from it.

I strongly believe that unity is the best guarantee for the future of our profession, for future negotiations, and for the health of British Columbians. Yes, the BCMA needs to improve. Great organizations are always looking for ways to improve.

Health promotion

People in BC want to take responsibility for their own health and well-being. They want support — from their doctors and government — to stay healthy, and to manage their own and their families' health. This was a key finding in the Conversation on Health, and it's what we hear every day in our offices. British Columbians want to know how to stay healthy.

British Columbians' life expectancy is now one of the highest in the world, according to the new 2006 Vital Statistics Annual Report. A child born in BC today can expect to live to nearly 81 years of age, about the same life expectancy as in Japan. By comparison, the Canadian average is 79, while Americans can expect to live an average of just 77 years.

There are a number of factors:

- British Columbians smoke less.
- We eat better.
- We exercise more than most people in the world.
- We have a world-class cancer treatment agency.

The death toll from diabetes has flattened out, indicating that all the work that's been done around chronic disease management is paying off.

In each of these factors, BC doctors have played a significant role. I think we should feel a great sense of satisfaction in these achievements. Now the challenge is to keep pushing for even better results.

Closing remarks

Over the last 12 months or so, I've met with members from all over the province. I've enjoyed interacting with them, and hearing their suggestions and ideas. I want to continue meeting with and listening to our members. And I promise I'll accept both complaints and compliments in good faith. In the coming year, I will work with members to promote medicine as a strong, respected, and democratic profession.

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Association is financially fit and well and in a strong position to support future BCMA initiatives. In his presentation he highlighted the fact that the designated holding accounts include funding for various contracts and programs that the Association administers but which in fact are funded by the province of British Columbia. This (\$10 million) is not BCMA money, but BCMA is, however, happy to manage the funds as they can use the interest payments from these accounts for increased bursaries for students and additional amounts can be dedicated to property and equipment (replacement fund). He put forward a motion “that the audited financial statements of 2007 be accepted,” which was carried, as was the motion reappointing Grant and Thornton as auditors for the 2008 BCMA fiscal year.

Dr Jones went on to provide a brief history of membership dues collected by the BCMA over the last 10 years, showing that other than a special levy in 1999–2000, any increases had always been modest (3% and under, with 2001, 2006, 2007, and 2008 at 0%). With careful management of revenues the committee has managed to build up a solid reserve fund to see the organization through difficult times, and so it was with great fanfare (two trumpeters), they heralded the motion “that there be no BCMA membership dues increase in 2009,” which was carried.

Dr Jones also informed members that a finance subcommittee had reviewed the existing BCMA honoraria policy, and had surveyed and compared the rates with the other provincial medical associations to discover that BCMA board and executive

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Drs Brian Day and Roberta Ongley



Drs Shelley Ross and David Snadden



L–R: Drs Graham Clay, Kenneth Kolotyluk, and Thomas Ashton

2008/2009 BCMA elected officers

President: Dr William Mackie,

President-elect: Dr Brian Brodie,

Chair, General Assembly:
Dr Ian Gillespie

Honorary Secretary-Treasurer:
Dr Lloyd Oppel

AWARD RECIPIENTS

Dr David M. Bachop Silver Medal in General Medical Practice

Dr Samantha Meredith

Dr David M. Bachop Gold Medal for Distinguished Medical Service

Dr Galt Wilson

BCMA Excellence in Health Promotion

INDIVIDUAL AWARDS

Dr Andrew Ignaszewski

Dr Basil Boulton (posthumously)

NON-PROFIT AWARD

British Columbia Institute of Technology—Dr Tong Louie Living Laboratory.

CMA Honorary Membership Award

Dr Gershon (Jerry) Growe

Dr Roberta Ongley

Dr Cam Coady Award

Dr Peter Newbery

BCMA Silver Medal of Service

Dr Thomas Ashton

Dr Graham Clay

Dr Kenneth Kolotyluk

BCMA Scholarships

Chris Paredes

Nicholas Ayling

Tuie Cleveland

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members were paid less than the AMA and OMA. In recognition of increased governance responsibilities, accountability, and liability, and after careful consideration of the cost impact on the budget, they forwarded a motion "that honoraria rates increase as follows: Board members from \$700 to \$770 per day; Executive committee members from \$800 to \$880 per day; to be effective July 1, 2008." After some questions and discussion, this motion too was carried.

The Governance and Nominating Committee presented the nominees for the three members-at-large to the Audit and Finance Committee. Dr Gow then called for additional nominations and there being none, Drs Don Rix, David Jones, and John Turner were elected.

The 2007 AGM minutes were approved and Dr Gow confirmed nominations of the newly elected officers of the BCMA (see box, page 327).

The reports of the Tariff Committee and Statutory Negotiating Committee were approved as presented in the *White Report* by Drs Bill Cavers and Brad Fritz respectively.

"I am really happy to come to Prince George and support UNBC, especially the medical program. I am proud of the first medical class that has just graduated, and it was wonderful to see the campus."

—Shamin Jetha, MD
Vancouver

Dr Milton Baker presented the SSPS report to the meeting, stating he was well aware of how the specialists' patience had been tested, and that he hoped to have the micro-allocation of the funds resolved soon. He thanked the Society of General Practitioners of BC for their patience on this issue.

Dr Bryan Norton, president of the Society of General Practitioners of BC, presented his report again referring to the 2006 fee increases still mired in the micro-allocation process. He stated that family doctors too were looking forward to receiving their fee increases now that micro-allocation is closer to resolution. A summary of the Society's work is outlined in the *White Report*.

Both reports were accepted as presented.

Under new business on the agenda, Dr Caroline Wang stated that she had always worked hard in the interest of members. As she would not be returning to the board for 2008/09, she felt it was important to address the issue of transparency and the right of members to be fully informed by their Association through their elected representatives. Drs Zafar Essak and Chris Sedergreen also expressed their concern regarding this issue, but many others also spoke in favor of BCMA's



Dr Barry Turchen



Dr Etela Neumann



Dr Donald Rix



Dr Alan Gow



Dr David Jones



Dr Frances Forrest-Richards



Drs Chong Lim and Umesh Khare



Drs John O'Brien-Bell and Caroline Wang



Drs Alexandra Tcheremenska-Greenhill and William Cunningham



Drs Shamin Jetha and Aaron Childs



Dr Joanne Young

policy of open communication with its members and affirmed that BCMA was a democratically run organization, where consensus is sought, and where the will of the majority prevails when consensus cannot be achieved. Several board members stated that they too worked diligently and honorably in representing their districts and that those who had walked out of the 2007 business meeting did so of their own accord and after due consideration, not because of any hidden agenda.

In other new business, Drs John O'Brien-Bell and Erik Patterson presented a motion urging the BCMA to "develop a report on the medical implications of the use, risks, and safety of the taser guns." They felt that BCMA should address the issue and

use this opportunity to lead the way by being the public's advocate on this issue, as the public wants to understand the facts around the use of tasers. This motion was unanimously adopted by the assembly.

The afternoon session of the General Assembly started with a short appreciation from Dr Mark Schonfeld, BCMA chief executive officer, and Dr Charles Jago of UNBC, outlining Dr Rix's contributions to the province of British Columbia—his contribution to medicine, his service to the university (in particular to UNBC), and his service to the community. This was followed by a motion by Drs Appleton and Brodie that was unanimously carried: "the BCMA AGM of 2008 thanks and

congratulates Dr Don Rix for his many years of service to the medical profession, the community, and the province of British Columbia."

It was back to business after this, with another resolution: "the 2008 AGM recommends that a Resolutions Committee be utilized for all future AGMs," which was carried.

However, the proposal, "That the introduction and debate of motions be permitted at the end of each report during future AGMs" was, after much discussion, defeated.

Next, Dr Katherine Paton raised the subject of BCMA governance referendum. Though April's referendum did not achieve the 75% approval rate required for any constitutional change

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to come about, members agreed that there is an appetite for change. Members spoke passionately for and against a change in governance and in adopting the representative assembly format. Although the proposals on gov-

"I am very glad the meeting was in Prince George and tagged on to the Northern Doctors Day . . . makes it easier for many of us to attend the AGM and maximize the locum coverage that is already in place... Lower Mainland meetings are too focused on local issues and this meeting draws focus to the north as the northern periphery also needs a lot of attention."

—Aaron Childs, MD
Mackenzie

ernance did not succeed as presented, it appears that 70% of those who voted are in favor of some change in the governance structure of the BCMA (nearly 60% voted for schedule A and nearly 12% voted for schedule B). Dr Baker, SSPS president, stated that the Society continues to be interested in the possibilities for change and

wished to be included in the process. SGP president, Dr Goodchild, said the SGP looked forward to working with the BCMA and SSPS to move forward with restructuring.

With the end of this discussion, Dr Gow adjourned the meeting and Dr Brodie, as chair of General Assembly, convened the meeting, drawing the members' attention to the *White Report*. He thanked all the chairs and members of the committees for their service to the organization and asked those present if they had any questions or comments on these reports.

The COHP reports were approved en masse, with Dr David Jones reminding the assembly of COHP's many contributions to society and its proactive approach to issues. An example of one item not emphasized enough is of how proactive the COHP-BCMA were in enabling us all to fly on smoke-free aircraft.

All 38 reports of the ad hoc and standing committees were presented, as were the reports of the Sections and Societies and those of the affiliated organizations. No questions were posed.

Dr Robin Saunders stated this was one of the best AGMs he had attended, and that he would like to formally thank University of Northern British Columbia for inviting the BCMA to

Prince George and for showcasing the facility to members.

Finally, Dr Gow directed members' attention to the British Columbia Medical Foundation's Benevolent Fund ad on the inside back cover of the *White Reports*. He urged members to contribute to this very worthwhile charity, proceeds of which go to supporting physicians who are in dire financial hardship that adversely affects their ability to provide medical services to their patients.

There being no further questions, Dr Brodie concluded the meeting with a thanks to members for attending.

—Kashmira Suraliwalla
BC Medical Journal



Drs Bill Mackie and Ron Wilson



Drs Richard Blackmore and Gordon Mackie



Drs Peter Barnsdale and Bob Burns