



## Dr Mark Schonfeld reflects on 14 years as CEO of the BCMA

Each year the BCMA elects a new president, but for the last decade and a half, behind every president there has been one steady hand on the tiller—that of CEO Dr Mark Schonfeld. Jay Draper spoke with him before his retirement at the end of October.

### Jay Draper

The *BCMJ*'s managing editor sat down with outgoing BCMA chief executive officer Dr Mark Schonfeld in September. The interview was video-recorded, and parts of the conversation can be viewed at [bcmj.org](http://bcmj.org) and [bcma.org](http://bcma.org).

### Why did you want to be CEO of the BCMA?

I became president in 1994, and while president I worked with some tremendous people, both medical folks who were on the Board as well as the staff here, and saw the terrific work that was going on in policy and in trying to improve the overall health delivery system, not just for our members, but also for patients. During the years that I was the director of Professional Relations, which I started in September 1995, when the position of CEO came open I felt that it was a natural transition to continue the work I had seen evolving in the BCMA. It was

quite exciting and very rewarding to see the impact that we could make on society in the delivery of health care.

### What was the BCMA like when you started in the mid-1990s?

When I first started as CEO, which was approximately 14 years ago, things were very different to where they are today. We had a much smaller staff, perhaps 59 staff, and we also had to initiate a levy to allow us to get into negotiations and fund communications and an ad campaign for our negotiations with government. Today, we haven't had a dues increase to the membership for at least 7 years and we certainly don't have to do any special levies—we're very strong financially. We also have, because of the various programs that we're involved in such as the PSP, the GPSC, SSC, and PITO, we now have a total of about 150 employees. We've grown our Corporate Affairs Department to about 28 employees—they administer a very large insurance division as well

as our benefits plan. So we have grown tremendously over the last few years to become a very successful organization—probably one of the most successful provincial medical associations in the country.

### I'm also wondering about the political climate then as compared to now.

Well there are two political climates you need to look at: the member political climate and the external political climate. And in 1994–95, when I was president, we were coming to the RVG [Relative Value Guide] process, which was quite difficult. It had taken 5 or 6 years before it culminated in 1995 during my presidency. That was very disruptive internally with both sections and societies of the general practitioners and specialists. So it was a really rough time in that sense, but eventually it was solved during the course of the year that I was president. We then moved into some difficult negotiations with government. We



*Dr Schonfeld at the BCMA annual general meeting in 1983.*



*Drs David Bolton and Mark Schonfeld, January 1991.*

were able to maintain relatively positive relationships with the NDP government of the day, although back in '92-'93 there were bills brought in that dissolved or disallowed the pension plan that we negotiated and withdrew some rights that we had. Threats of legislation were there; it was really tough times. Over the past 6 to 8 years, we've actually achieved a lot of cooperation and moving in a collaborative method with government to bring in new programs.

**During the years you must have met some interesting politicians...**

Yes, there were. Paul Ramsey, who was a health minister for the NDP; he'd come into our boardroom and look out on the beautiful bay and say, "Well that's why you docs are all in Vancouver—so you can get to your yachts docked down there." The sarcasm would just flow. He was actually quite a bright guy and not that bad to work with, but he did have that sort of sarcastic flair to him. There were some ministers in the past who took a really hard line but, in general, relationships have been pretty stable. Negotiations are always an up-and-down process and I've always said, "Don't worry, ultimately there will be

a resolution and a contract. It's just a matter of when and how it's achieved." We're into negotiation now and we've had some ups and downs with this one as well.

**Allocation hasn't been solved anywhere else to anyone's particular satisfaction, and it seems like we're still going to be having those issues here for a long time as well.**

**Why have you decided to retire now?**

Even though I look as if I'm only 45—okay, that's where you say, "Hey, you don't look a day over 39!"—I'm actually getting on in years and will be 65 this coming year, in 2012. I've always felt that one should retire before 65 and I made that commitment to myself. I also feel that one should pick their own time of retirement and not be there beyond their "best-by" date,

so I chose to leave when things are really going well. I'm quite capable of carrying on, and I intend to do other things. But it's time that the BCMA transition to its next CEO. I actually wanted to retire before 65. Unfortunately with all the issues the BCMA has faced and the kinds of things I wanted to finish off I put it off until this coming year, though I'm still getting my goal of retiring before I hit 65. I look forward to spending a lot more time with my family, my grandkids, my wife, whom I have not spent that much time with because of the heavy involvement in the BCMA and functions and travel. I've got hobbies, I love photography; I want to combine that with travel. I'd like to get back into golf and improve my golf swing and hopefully play a little better than I have been—some of my colleagues know my game to be pretty crummy. I do not intend to sit at home in my PJs all day.

**What have you learned during your time as CEO?**

You know, just being the CEO and being the director of Professional Relations, being involved with really good people, that's a tremendous learning experience. I learned that the



*Presidential photo, 1994–1995.*

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way the world really functions is dependent upon the individuals that you're working with, and that an association such as the BCMA is a living, dynamic organism. It isn't the building, it's the people who are in the building. The best asset that the BCMA has is its staff. I learned to be very temperate in how I deal with the issues and to be quite circumspect in thinking about issues to try to integrate everybody's needs into the mix. One of the other things that I learned, and it's an evolutionary process, is the tremendous value of respect. All of us have respect for each other, but how do you really practise that? To be respectful of the views, not necessarily meaning that you agree with their view, but you listen and you treat them with respect. That is probably the most important take-away: if you treat with respect you will get respect back and you will be able to solve a lot of issues.

**What dangers does the BCMA face in the next 5 years?**

The next 5 years for the BCMA are going to be a major time of transition. There are economic issues that are facing the province and the country and of course we're impacted by that.

There are demographic issues that are affecting BC and Canada. Since we're a member-driven organization, we act on behalf of our membership, but we also support the public in a quest for better health care, and those issues are going to collide. It's the perfect storm. You've got an aging population that requires more care but declining human resources for the provision of that care. The membership is stressed; their workload increases with declining resources; it's going to be difficult. So we're going to have some tough times in the delivery of health care, and it's not a surprise to anybody. The question is how we're going to adjust to that and how we set our priorities. I think one of the solutions will be found in the kind of teamwork that we can set up in terms of how we restructure the delivery of health care, both in the primary care sector and in the secondary and tertiary care sectors. That's going to be one of the biggest challenges to the profession and to the BCMA.

**In hindsight, is there something that you would do differently if you could do it over again?**

If I could go back I would look at our

governing structure. We've tried three or four times to create a representative forum and it hasn't passed. It didn't fail by much, 10% or so, but I really feel that we have to be more representative and hear more from our members. That's why we started the clinical forums that we have now, but that's still fairly small and narrow and it would be nice to have a broader ability to communicate with the members in a way that they would find more meaningful. I think that our Board, for a large board, functions very well. What we have now is a hybrid version of a representative forum. It's not a forum, it's a board, but it brings representation into it. It works quite well but I think that the members ought to have an ability to have more input directly into the BCMA.

The other area that we've always had trouble with is how we allocate funding and how we allocate payments. It hasn't been solved anywhere else to anyone's particular satisfaction, and it seems like we're still going to be having those issues here for a long time as well.

**What do you wish you had completed?**

As I said governance is one area that hasn't been completed, but I think we've certainly done most of what I'd set out to do. We have an extremely robust organization which is extremely stable financially. We are still the only medical association that has voluntary membership, which is a strength of the organization. We have a large number of student members. We have great outreach programs to students and residents. One of my great satisfactions has been the Benevolent Fund that we've created, and it's really running well. We have great bursary programs for students. That's one of the areas I really care a lot about: our young members, students, residents, and making sure they have a future that's as bright for them as it was for the older physicians who will be retiring.

**Can you tell me what you'll miss and not miss once you retire?**

I won't miss the large amount of travel that's taken me back and forth across the country. I probably won't miss the 15 or so weekends that I work on BCMA business. But I will miss the challenges, the day-to-day interaction between really good staff, the day-to-day interaction with wonderful physicians, the ability to help them, and the ability to actually help students and those in need through our Benevolent Fund, who need the help. I really enjoy helping people; I guess that's sort of the nature of being a physician.

**You've always been a staunch supporter of the BCMJ. Can you tell me about your thoughts on the BC Medical Journal?**

I think the *BC Medical Journal* is probably one of the finest provincial medical journals around. It's managed to stay totally out of politics, much to the credit of its Board and to the editorial staff. For a small journal of a medical association, the quality of the articles is tremendous. It is also one of the areas that our members clearly see as important. It's had to get scaled back a little bit in the number of times it publishes a year due to declining pharmaceutical advertising, but we have managed to sustain it and I feel it's very important to members that we publish an independent medical journal.

**What accomplishment are you most proud of?**

I'm pleased that we managed to sort out a settlement in the RVG dispute back in '95 and successfully bring that to a conclusion. I'm proud of the re-establishment of the Benevolent Fund; the buildup of our bursary fund for students; the role that we play with the CMA in a partnership to influence national policy when it comes to health care transformation; the establishment of the CEOs Forum that now is an advisory body to the CMA Board.

Those have given me a good sense of satisfaction. The polling that we get from our members rates us as number one. They're happy with the services they get. It's nice to see that members now equate both compensation and other values such as better health care delivery, looking at a better lifestyle, better management of their time, so it's changed from when we got started where members saw the BCMA much more as a negotiating body. Our Council on Health Promotion has done tremendous work. Our Council on Health Economics and Policy puts out phenomenal papers that are influencing health care delivery. We've also strengthened our relationship with MD Management so that together we can provide members with outstanding financial and insurance services. So it's a combination of many things I look back on that I'm really pleased with: the kind of benefits we provide, basically all the structure that's improved over the 16 years I've been here. I'm happy leaving with the association on a really good note in all sorts of ways. **BCMJ**



Dr. Schonfeld in a 2003 portrait.

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