

## Specialists are due their own renaissance

Find September to be bitter sweet. It's a time to say goodbye to summer months spent enjoying family holidays and warm weather, but it's also a time to look ahead and move forward. September signifies a return to the rat race, a time when both work and personal events ramp up once again, but it's also a month that brings the promise of change—a change in seasons and weather, and a change in one's daily routines. This fall I hope to see another significant change—an increase in our engagement with specialists and facility-based physicians.

I hope you all enjoyed your summer and are ready to face the fall with recharged batteries. There is work to be done.

It saddens me to say that our specialist and facility-based groups are the most disengaged members of Doctors of BC. This needs to change. While we have been successful in creating a renaissance in primary care, we have not been as successful for specialists and facility-based physicians. But they, too, deserve their own renaissance! They have a lot to offer—great ideas that are good for patient care and the health care system—and it's time their voices are heard, and heard before decisions are made.

A key focus in the association's new strategic plan is what we call the path of engagement. The foundation of this plan is to create highly engaged members; doctors who can work with partners in the health care system to exert a meaningful influence on decisions affect both patients and physicians. Together, we can form a profession of influence.

Doctors of BC has been working to create a stronger regional presence so that we're not just advocating for doctors, we're assisting and training

doctors to advocate for themselves. This way, facility-based doctors can play a crucial leadership role within health authorities and be more influential in the decision-making process.

While recognizing that facility-based physicians face different challenges and structures, the regional presence will bring the principles applied in Divisions of Family Prac-

because only then are we better able to influence positive change.

In the initial stage, Doctors of BC has been in discussions with administrators and local physicians in North Vancouver and Prince George to pilot a process that will enable all of this to happen. We are providing support and resources to these facility-based physicians to assist them in identi-

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tice—collaboration, consensus building, and partnerships—to facility-based doctors in BC. These principles are making divisions successful and effective partners in 33 regions around the province, and this step will see the greatest new investment by our association as we continue to support doctors in providing the highest quality patient care.

We are still in the early stages and this will take some time, but I am confident that we will get to the point where doctors can be engaged at the local level with health authority administrators and managers, acquire a constructive voice, and make a meaningful difference in the decision-making process. We must be engaged and be partners in progress,

ifying, prioritizing, and organizing their issues so their interactions with administrators are more focused and constructive. We hope to expand into other locations in the future.

At the start of my presidency I vowed to champion and support work to re-engage with our specialists, to help them have a louder voice and a greater influence within the health care system, and I stand by my word. At the end of the day we truly are better together, and by working collaboratively we can provide the best quality of care and offer innovative solutions to our health care challenges.

—Bill Cavers, MD  
Doctors of BC President