

Provincial representation at the federal level

Across the country the manner in which provincial medical associations choose their delegate nominees for the Board of the Canadian Medical Association varies. Some nominees are elected by their provincial associations at their representative forum or assembly, whereas others are appointed by their Board of Directors. At the Doctors of BC Board meeting held in February, a new process was approved by which Doctors of BC nominees for CMA Board delegates will be selected.

Historically nominees for CMA delegates have been recommended by the Doctors of BC Board. More recently the process changed and a call for expressions of interest was sent to the entire membership, with the Doctors of BC Board making the final recommendations to the CMA from among the candidates. Despite the call being expanded to the entire membership to fill these positions, concerns were raised about the transparency of the process. I am extremely pleased that we now have a new process to address these concerns: the provincial membership itself will select CMA Board

delegate nominees to be considered for election at the CMA General Council meeting in August.

Electronic voting will begin on 18 April 2016 for two positions on the CMA Board from among the nominations received from the membership. Open to all members, the two CMA Board positions provide an opportunity to represent our provincial association and bring forward the thoughts and opinions of BC doctors at the national level, as well as report back to us on CMA activities. These are 3-year terms with full voting privileges on both the Doctors of BC Board and the CMA Board. Please keep an eye out for the electronic ballots coming to your inbox soon.

Changes are also being made to how members of the BC caucus who attend the CMA's Annual General Council meeting are selected. The CMA determines the total number of delegates for each provincial and territorial association.

This year, included in the full complement of BC caucus delegates going to General Council, are 10 positions that will include (as is pos-

sible based on the applicant pool) two medical students, two residents, two physicians in the first 5 years of practice, and two physicians with expertise in the designated themes for General Council. The themes this year are health consequences of climate change, integrated care (lessons learned from the US), and physician health and well-being: resilience in medical training and practice. The composition of caucus will more closely represent the demographics of our membership and allow for different types of doctors to participate in policy development and debate at the national level.

I am excited about these changes and the opportunities they present for our members. I've said this many times in the last year: Doctors of BC is here to represent you and your interests, and the best way we can accomplish that is with your participation. I look forward to working with many new colleagues who are now considering these opportunities.

—Charles Webb, MBChB
Doctors of BC President



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