



Better, together

There is no better or more important time than now to lean in and commit even more to our patients, our work as physicians, and each other as human beings.

The last few years, while extremely challenging, have brought our profession to a hopeful moment. More than 4000 family doctors have enrolled in the Longitudinal Family Physician Payment Model. Nearly 2000 physicians across the province are now trained in quality improvement and health care leadership. More than 80 health care facilities in BC now have medical staff associations allowing them to engage with each other and the organizations where they work in new ways. Through the COVID-19 pandemic, the evolution of virtual care occurred. Much has changed, but our focus remains the same: how do we provide our patients with the care they need?

As doctors, we are at our best when we are caring for our patients. The ability to provide this care without structural barriers or undue administrative burdens is as much a source of joy for us as it is truly meaningful. As a surgeon, I work with all kinds of doctors, nurses, and health care providers to deliver the complex care my patients need. As we head into 2024, amid the ongoing challenges of increased wait lists, increasing wait times in emergency rooms, and a lack of infrastructure and health care human resources, it is even more important that we double down on providing patients the care they need in the best possible way.

The answer to this conundrum, while difficult to execute, is that we can do better together. When doctors come together

to talk about what their patients need, we make things better. When doctors focus on new models of care that put the patient at the centre, we make things better. When doctors ask for equitable and just access for all patients, we make things better. When doctors focus on sustainable health care models that are resilient to evolving climate

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and economic changes, we make things better. When doctors refuse to accept gender bias, racism, and discrimination in all its forms in our institutions, we make things better. And when doctors work together with a common purpose, we make things better, together—for our patients and for ourselves.

This is why I chose to run for president. Now is a time of unique challenges to our health care system and to our ability to look after our patients. Now is also a time when we have motivated, passionate, and driven doctors in all corners of our province who want to work together to improve patient care. By increasing our connections with one another and by engaging in more meaningful ways with the health care and political systems around us, we will be able to deliver new, innovative models of care. By sharing

both our successes and our challenges as doctors, we will be able to learn from each other and find better ways forward. By emphasizing our individual ability to create positive change, we will share our common purpose—our collective work—and create a more functional and sustainable health care system.

Doctors of BC recently shared our new strategic plan, developed to guide the association over the next 5 years. The focus, largely informed by members, is to maintain a position of leadership and influence over the health care landscape in British Columbia. This will require us to engage in more meaningful ways with all stakeholders to make things better for our patients.

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—Ahmer A. Karimuddin, MD, FRCSC
Doctors of BC President