

Good evening, everyone. Thank you for being here tonight.

It is truly an honour to stand before you and represent the physicians of British Columbia.

Change is headed our way at an unprecedented pace.

We will need strong, consistent physician leadership to usher in this exciting future.

With the encouragement and mentorship of my peers, I stand before you tonight representing that leadership.

One year ago, I reflected on what had made me an effective leader to date and what I could offer to my colleagues as President.

After a life time of stepping forward to lead, I have learned a few key lessons.

Whether working to establish trust and consensus on how to best resolve social conflict and limit domestic abuse in a remote Quechua village in the Andes, or organizing a group of 6 year old Brownies to work together on a shoreline clean up...

The basic tenets of leadership are the same.

Humans do better when we find common ground and seek to connect with each other on a deeply personal level.

I have witnessed the success of this approach over the last 2 decades in my work with the Divisions of Family Practice - Shared Care – Pathways – Medical Staff Associations – and the Doctors of BC board.

We learned a great deal about the inefficiencies of our health care system and the many barriers to meaningful change.

We are now embarking on a new era.

Our recently ratified Physician Master Agreement reflects the many priorities of BC physicians. This was the most extensive consultative process in the history of Doctors of BC.

We are rightly proud of this agreement. However, I believe that our success is in large part due to the collaborative relationships we have forged over the last 10 years with our government, communities, and patient partners.

Looking to the future, there's a great deal more for our leaders to accomplish.

I recently watched a speech by Brene Brown, from the University of Houston, on courage. Her message resonated with me...

In our world, there are people willing to step forward into the arena of life and offer up all that they have in the service of others.

This is a day to day reality for physicians.

For physician leaders though, it takes more than courage and strength of spirit to step up. We need mentorship, and peer and family support on our journey.

Who we select to bring with us and where that journey takes us can be what makes us the most effective.

I am very fortunate to have an amazing family. My husband Rob and I will have been married for 31 years on Monday. I could not have accomplished even half of my triumphs without his support.

We survived working a 100 hours a week in one of the toughest Rotating Internships in Canada, a 2 week maternity leave with our first child in that year and a 6 week maternity leave with our second child, a year later.

Rob supported my early career in Family Practice as a solo locum physician in northern BC.

As much as I loved the work of a rural Family Physician and the necessary extensive skill set, Rob's work was in Vancouver.

So, with his support, I established my community practice in Coquitlam and incorporated hospital medicine and obstetrics at our 3 regional facilities.

When the Royal Columbian Hospital's Open Heart program launched, I saw the opportunity to further expand my technical skills in surgery. I have now been a part of that team for more than 2 decades.

Through these years, we have had some incredible adventures camping, boating, hiking, biking, backpacking and skiing.

Our children, Colin and Shannon, have grown to be generous, kind, adventuresome, and patient.

Patient as my family learned early to share their mother with my many competing responsibilities – even when that meant running off to deliver a baby just as the turkey was coming out of the oven on Christmas Day.

I would also like to recognize my parents.

Thank you to my mother for teaching me the importance of leadership, confidence, and encouragement, even when my Polynesian dance performances were less than perfect.

In fact, she still tells me after every show that that was my "best show ever".

Thank you to my father for teaching me determination in the pursuit of excellence and to always set the bar a little bit higher.

His other lesson was humility. I remember coming home proud of my 98% mark and my Dad asking me what I had done wrong.

To my brother Jack and my sister Jennifer, thank you for helping me to develop and hone my skills in collaboration, negotiation, and the sharing of limited resources.

Please join me in recognizing my amazing family for their support and the sacrifices they make.

So where do we go from here? Much of what I hope to accomplish this year centers around culture and connectivity.

I don't mean culture in the sense of where we came from or how we celebrate our individual traditions. I am speaking about our professional culture.

I believe that with the right culture, we can make:

- our health care system more efficient and inclusive;
- our physicians feel more engaged, valued, and supported; and
- our patients feel that they can access the care they need.

So what is standing in our way?

After listening to a recent news report, it occurred to me that medical culture is a little like asbestos.

Asbestos, too, is made up of very firm, resilient individual particles.

Unaware of the dangers posed, asbestos was incorporated into the majority of our building materials over many years.

In fact, Asbestos can even be found in our grout and window caulking – those spaces between the building blocks. This set me to thinking.

As a profession we know that there have been many aspects incorporated into our cultural foundation over the last 100 years that are equally deeply ingrained and ubiquitous.

An interesting fact about asbestos is that: the longer the particles have been in place, the stronger they become, and the more difficult they are to break down.

Removal of these toxic and widely incorporated particles needs careful planning, multiple protections, and a staged approach to avoid causing significant harm to the both the building and those breaking down the asbestos.

I can think of many examples and corollaries in our own medical culture.

When I first began my career in medicine the late 1980s at UBC, it seemed to be an unwritten rule that female physicians needed to be twice as good as male physicians – just to be considered equal.

Through the years as I related my stories to colleagues, I learned that I was not alone.

My good friend - Past President Dr Arun Garg - studied in Canada as a foreign-born student.

He once told me, “At least Kathleen, you only had to be twice as good to be considered the same.”

Our population is immensely diverse. It includes people who have been on this land for centuries, and those who choose to come here from hundreds of different countries.

We are gender diverse, include people with disabilities, different sexual orientations, and much more.

We are a true mosaic, and I think we are all the richer for it.

I believe that the governing bodies of Doctors of BC should reflect the diversity of our members.

Important voices are currently missing.

It is appropriate that we strive to find out why this is, and where the obstacles exist.

Our Diversity and Inclusion Working Group is in the middle of reaching out to our members to help us better understand these issues such that we can work towards solutions.

There is also Asbestos hidden in our struggle to balance the numerous competing demands on our time such as: paperwork, EMRs, patient complexity, and the rising costs of doing business.

These collective demands contribute to physician stress and burnout. Taking care of ourselves has taken a back seat.

We are becoming increasingly unhealthy, with dire consequences both for ourselves and our patients.

No amount of yoga will fix us...no amount of self-reflection or meditation will fix a broken system.

We need a dedicated, long-term approach to systemic change. We need to be the change that our fiercely independent medical culture requires.

At Doctors of BC, we are collectively working to more accurately identify and expose our cultural asbestos.

Breaking it down will be difficult, time consuming, and hazardous work. However, as anyone who has ever completed a renovation will attest, incremental changes are always an exponential improvement over what existed before. So, what can I offer?

I stand for for equity, diversity, inclusivity, and unity in our profession.

Having practiced in a wide variety of settings, including rural and urban, community and facility based, procedural and consultative settings, I understand that unity does not mean we are all the same.

Unity simply means we are unique individuals, willing to work together under one roof, with the same endgame in mind.

It means we are all on the same side.

I also stand for innovation and believe it is our responsibility to look to the future.

We live and work in an ever-changing landscape of healthcare diagnostics, wearable devices, and Artificial Intelligence.

Technology will forever change the way patients seek and receive medical care in our immediate future.

And make no mistake, our patients are excited about these advances, too.

I embrace any technology designed to help me do my job better and more efficiently, to make our lives easier and our patients healthier.

However, there is still something special and unique in our human-to-human connections that technology cannot mimic.

Peter Diamandis of Singularity U stated that, “The best way to predict the future, is to create it.”

Our association has the potential to construct our collective future.

It is up to us as physicians to lead the incorporation of technological advances into our healthcare system, while staying true to our basic nature as approachable and strongly empathetic care givers.

In conclusion, we are, and always have been, a profession of influence.

As new patient care models are rolled out...as the health care landscape shifts and progresses...as the solutions to our issues are developed and implemented...we must stand together and ensure that our important and unique value is highly regarded at all levels.

Respectful, inclusive, and non-partisan Physician leadership is key to our success.

We will need to embrace the full diversity of our profession, integrate into the rapidly evolving technological world, and find a way to remain true to our origins.

If our health care system is to be both successful and sustainable,
Future innovation can and should be built upon partnerships with our government leadership and respectful of those we treat.

Over the course of my year as President I want to hear from you directly about your passions, your visions, and your innovative solutions.

With my practical experience, specific knowledge, and patience, I hope to bridge whatever differences exist among us and ensure that all our voices are heard and respected.

I have faith that with this approach we will ensure that we remain a profession of influence and that we build a sustainable health care system that will inspire future physicians.

Thank you.