# INTRO

Good afternoon.



When I was a medical student I won a BCMA scholarship. Part of the deal was we attended a Board meeting for an hour and then they gave us a certificate.

The Board meeting itself was incredibly boring and the stuff they were discussing sounded so irrelevant...And the room was full of old white guys...They did give us a very nice lunch, though.

So you may wonder - how, after that, did things evolve to me being so passionate about the association that I wanted to be President?

I can tell you that this career path is not where I intended to go.

But sometimes circumstances – such as getting involved in the rural doctors' job action of 1998 – provide the incentive and the opportunity to actually do something which can make a difference, and that ultimately is why I am here today.

You all know I am a rural physician. And the thing about working in a rural town is – we are the canary in the coal mine.

We fall apart sooner because we have less people and less resources. We are the early warning signs and symptoms of the *health* of the health care system.

If we want to do better for our patients, then we need to work together to improve the health system as a whole.

So, the areas I'd like to focus on over the next year stem from the work I've already done, and the areas I believe need to be improved.

Access for patients and *support* for doctors. Access, especially for our more vulnerable populations, those in remote areas, or those with mental health issues. We need better system coordination.

And...support for doctors. The stronger we are as an Association – the more influence we will have, and the more effectively we can advocate on your behalf.

The Association has its challenges given how different our physician members are from each other. But I intend to work with the diversity of our membership and lead us on that path towards a stronger association.

The governance of our Association is changing. In September we will have transitioned from a 39 member board to a smaller 9 member board accompanied by a larger Representative Assembly.

And, we will be working with quite a different provincial government. A government coalition that none of us have ever experienced in this province.

I look forward to building a relationship with our new health minister and **all** the political parties.

The last thing I'll be talking about today, and my third priority, is the value and respect for the profession of medicine.



There are lots of negative stories in the news about "hallway medicine," over prescribing of opioids and the role doctors may have played in this crisis, and doctors battling in the courts over private vs. public medicine.

We all know negative news drives public opinion, and this affects both our credibility and trust in physicians.

# **Access for Patients**

So... I want to start by telling you what I mean by <u>access</u> for patients and <u>support</u> for physicians by telling you a story.

A couple of years ago I took the training for GP Oncology. I consider this program associated with the BC Cancer Agency to be a good example of how GPs and Specialists can work together to deliver better care to patients and communities.

A number of dedicated colleagues, in particular Dr. Phil White, recognized that there will never be enough oncologists at the BC Cancer Agency to manage the number of cancer patients in BC. So they developed a network, and GPs with training help deliver chemotherapy in Community Oncology Network clinics around the province.

The Cancer Agency are also experienced in using telehealth for patient assessment and follow up, thereby reducing the need for patients to travel at a very difficult time in their lives.

However, it is still 3 hours to the closest Community Oncology Network clinic from my community. Our patients struggle to access diagnostics, get appropriate interventions, and have timely intake assessments with the oncologists.

My goal in training was not to establish a solo chemo clinic in Golden. But by learning about current treatment and diagnoses I can help patients navigate the system and expedite services.

Last summer one of my patients developed a large and aggressive breast cancer. I was able to ensure she had her CT and biopsy appointments booked on the same day, and saw the surgeon immediately after. She only had to travel once, instead of 3 separate times.

As soon as the tissue diagnosis was confirmed we all met by telephone with the surgeon and planned the surgery. The next week we had a video intake with medical oncology.

Despite all this, it was 9 weeks from my first exam to her surgery. It would have been even longer if I didn't know how to play the system.

When I was at BCCA I also learned about the roadblocks my urban colleagues experience. Amazingly, in some cases I can get a CT quicker where I live, than they can in Vancouver.

I found that cancer clinics in the urban areas get bogged down because of inadequate physical space and access to computers. My specialist colleagues also are working with limited resources.



There are many examples of roadblocks that create an ineffective system. And, as you all know, for our most vulnerable and hard to treat populations it can be acute:

Our mental health resources are extremely inadequate – everything from detox beds to mental health outreach – this is a problem everywhere in the province.

It's the same thing with hospital beds and the primary/ specialty care interface – it just takes one piece not to work and you end up with log jams because that one piece isn't being managed as it should.

People don't get their surgeries or other procedures and their situation becomes chronic. They can't go back to work.

Seniors care, the health of First Nations Peoples, LGBTQ communities, and many other vulnerable populations are also disadvantaged.

The lack of capacity in our system is partly due to a lack of resources, but also due to suboptimal organization of the resources we do have.

We need a collaborative effort of all partners involved in health care delivery in our province.

We need politicians, administrators, health care providers, universities and patients together addressing the problems.

And we need strong physician leadership at all levels.

Barriers to access are something we all need to work on.

#### **Support for Doctors**

I also have an interest in creating better support for doctors.

What I mean by that is ... physician members don't always know what Doctors of BC provides for them or how they can access many of these services.

The Association is more attuned to the needs of its members than it was even five years ago...but so many members remain unaware of all the services the Association offers.

My intent this year is to make Doctors of BC more accessible to its members. The position of president is an access point for doctors in that quest.

For the next year, I am the face of the organization and I will visit doctors in venues where the organization doesn't usually go.

But I also hope to get you – our members – to help with some of this work.

104 of our physician members from across the province will shape our Representative Assembly – and each one will be an ideal access point for members. This can be *your* job.



I'd like to know whether doctors who are distant from the Association are happy with the level of services we provide. I don't think we can presume that because we don't hear from them, that everything is perfectly fine.

If we want to better connect with our members, it can really only be done by getting out into the communities, and letting them know we're here to help. If they have an issue, we can help find a solution.

We have a terrific group of Regional Advisors and Advocates, one in each health authority – their job is to help doctors in their own communities.

And we have knowledgeable staff at Doctors of BC. Their job is to help doctors.

## Governance

You know, this is a pretty interesting time to be your president...and an exciting time to be involved with the Association.

This will be a year of change as we embrace and work through the logistics of implementing the new governance structure.

The goal of the <u>Representative Assembly</u> is to better *represent* the views of members. (*it's in the name!*)

As an organization our intent is to tear down walls and break down silos. We each have differences that are part of who we are...so let's find a way to capitalize on those differences. Our diversity should make us stronger.

If we do this right it will be better for all of us. If we do it wrong it will be chaos. So...let's do it right!

Right now we are accepting nominations for the Representative Assembly. There is a little more than one week left to apply. Consider putting your name forward or persuading a colleague to do so.

And consider diversity. The new structure is more balanced, but it is not all encompassing. For instance, it does not address age or gender.

In 118 years of our association I am only the 7<sup>th</sup> woman to be president. We still have a ways to go…Let's create something exciting and truly representative!

Let's build on the great work of the Collaborative programs, the Divisions of Family Practice, and our new Facility engagement projects. Let's work together to support our colleagues, our communities, and our patients.

### **Respect for the Profession**

The last thing I want to touch upon today is respect and our professional reputation as physicians in BC.



Professional reputation is based on developing trusting relationships – and this does not happen overnight.

A good professional reputation means we have the <u>trust</u> of our patients, the public, government, health authorities, and other health care providers.

And when you have trust, you have the ability to persuade, influence, and collaborate in pursuit of common goals.

We need to tell the good stories.

Doctors have always been in an enviable position to make a huge impact.

Every doctor, every day interacts with dozens of patients – that translates to thousands of patient interactions every day across the province. This is – quite frankly – where we wield the greatest influence.

We demonstrate good will, empathy, and caring, each and every time a patient walks into our office.

But we also have doctors around the province doing some amazing work that no one really knows about.

What excites me, and I hope will excite you too: is bringing to the forefront the interesting, valuable, unique work that doctors around the province are spearheading on behalf of their patients.

I want to profile and showcase the amazing work of these doctors. But in order to let people know about the work our physician colleagues are doing around the province, we first need to know about it.

Let's find them. Let's support them. Let's make their projects known among the doctors in the province, among patients and the public.

Because here too, we can have a significant impact.

My ask of you is this: What projects or programs are you aware of that doctors are working on to benefit patients? Ask your colleagues if they know of doctors who may be working stealthily to improve patient care. And please let-me-know!

Let's focus on the good work that doctors do to make our health care system better.

I believe we can improve our level of trust, increase morale within the profession, and have a good, solid professional reputation... *again*.

I worked really hard to be a doctor, to get my MD. I am proud to be a physician and I want to demonstrate that the work we do is worthy of respect.



# Closing

So, in closing...Even though what I'd really like to do is change the world – I'll be happy to start with the things we can accomplish together as an organization.

With your support, I want to:

- improve access for our most vulnerable patients and provide more support for doctors
- ensure our new governing system is a success, and
- reclaim our professional reputation and position of trust

I'll do my best to gain traction with the physician groups I'm not really a part of. I'm not a specialist, I'm not an urban doctor – but as a generalist physician and your president I am here to represent the entire profession.

And I don't for one minute take the honour lightly.

Finally, I would like to thank my family for putting up with my erratic schedule and frequent trips, and especially those who travelled so far to be here today.

My colleagues in Golden whose exemplary care for the people of my community is allowing me the flexibility to take this year to be your President without feeling *too* guilty.

And my patients who have accepted the difficulties getting in to see me... and who are actually kind of excited to see their doctor in this role.

My commitment to the doctors around the province is – I promise to work hard for you, I will get out and talk with as many of you in your communities as possible, I will listen, and I will help find solutions.

We are so very fortunate to be members of this great profession. Let's all work together and improve upon the status quo for our patients, for ourselves, and for the health care system.

Thank you.