

# CMA INTERFACE

AN INTERACTIVE NEWS DIGEST

[www.cma.ca](http://www.cma.ca)

Vol.1 No.2, September 19, 2000

## Time is now for federal renewal of health care

For the fourth time since becoming health minister, Allan Rock stood in front of the CMA annual meeting to defend his government's record on health care and to promise that better days were ahead.

Rock acknowledged that many of the elements for attaining sustainable health care that he presented to General Council were old news but he said recent circumstances make him optimistic. For the first time, "all the governments [provincial, territorial and federal] are talking about the same elements." The provincial and territorial premiers met with Prime Minister Jean Chrétien Sept. 11 to finalize the health care renewal platform (details to come in the next issue of *CMA Interface*).

Rock promised to include physicians in the renewal plans, which would be "neither credible nor feasible without the involvement and support of health care providers." Delegates, many annoyed at the length of time it has taken to come up with any sort of plan, were quick to concur.

"I don't think the medical profession will tolerate being dictated to and it won't allow the discussion to go on without being involved," said Dr. Stephen Willis of Saint John, NB.



Federal Health Minister Allan Rock and Saskatchewan Premier Roy Romanow

Rock acknowledged it has "taken too long. The process of working with 13 governments is cumbersome, but we are on the verge of putting things into place and acting on them." Many delegates were unconvinced, however, believing instead that only an election and the requisite "election budget" will pump more money into the health care system.

Delegates attending the annual meeting passed resolutions calling for health-specific federal cash transfers and a national dialogue among physicians, governments, the public and others about what medicare should cover, among other issues.

### FASTfacts

The following is a quick look at several issues discussed during the recent meeting of CMA General Council. A more detailed report of the meeting is available at [www.cma.ca/inside/annmeet/133/](http://www.cma.ca/inside/annmeet/133/).

#### New rural policy

Delegates unanimously approved a far-reaching new policy aimed at ensuring "reasonable access to uniform, high quality medical care" in rural and remote areas. It contains 28 recommendations on training, compensation, work and lifestyle issues concerning physicians working in rural and remote areas. Discussion about the policy was relatively brief and centred mainly on the idea — eventually defeated — of adding a recommendation stating that the CMA support the creation of new medical schools in rural areas. "The fact is, every medical school should have a strong rural component to its training program," said Dr. David Keegan, a family physician in Placentia, Nfld.

#### Full spin ahead

The *National Post* took some flak from its Southam Inc. sister publication the *Montreal Gazette* for its coverage of the results of an Angus Reid poll done for the CMA and released at the annual meeting. The poll's main finding was that 83% of those asked would support spending more on health, either by reallocating government spending or raising taxes. In an Aug. 18 opinion article, writer Lyle Stewart took the *Post* to task for its misleading story about the poll results, which surveyed the attitudes of Canadians toward our health care system. The *Post* story ran under the front page headline: "Poll: 58 per cent would scale back medicare." Stewart wrote that Quebec's french-language newspapers were the most accurate: "Canadians favour raise in health funding."

#### Delegates speak out against tuition fee increases

General Council delegates passed several motions related to the increasing cost of medical education. The principal motion, which was passed unanimously, calls on the federal, provincial and territorial governments to work together to regulate and reduce undergraduate medical training tuition fees. "We heard a lot of talk about physician supply and how it's an increasing problem in Canada [in previous discussions]," said UBC medical student Kevin McLeod as he introduced the motion. "Medical graduates finishing their training \$100 000 in debt further exacerbates this problem and drives many to leave Canada."

## Building the brand



Peter Barrett

As I look to the coming year I see two major issues that we must address with some urgency.

First, we must continue to battle to ensure that action is

taken now to sustain our health care system for the future. Much has been said and written about this important issue (see page 1) so for the moment I would like to turn to what I see as the second vital issue of my presidency.

A pressing need exists for the CMA to play a leadership role in bringing physicians into the new world of health information and communication tech-

nology. The CMA must anticipate the future and position the organization to become a major player in e-health. However, partnerships will be the key. In a world where "brand value" is increasingly important, the CMA is in a unique position to provide the leadership necessary to bring together partners with a shared vision for health information technology and create a fully integrated, connected Canadian health care system.

The foundation upon which this new health care system will rest is the electronic patient record. Patients are increasingly frustrated with the lack of real-time integration between providers, institutions and the rest of the health community. However, the biggest concern of patients about electronic med-

ical records still relates to privacy and confidentiality. The CMA is in the forefront of policy on privacy in the electronic age with our Health Information Privacy Code, or the "Hippocratic oath for the information age," as Canada's privacy commissioner dubbed it.

The CMA is a trusted source and we must seize the opportunity to become the quality portal for health information. If we can create that value and hold our brand precious, we can provide sustainability for our own organization as we move forward in the 21st century.

I would very much appreciate hearing your comments on these issues, as well as the continuing work on other CMA business. Contact me through *CMA Interface*. I will be happy to respond.



ACCORDING TO WHAZUPDOC.COM  
I HAVE THE VAPOURS...

### "Delegated" comment

*CMA Interface* wants to be a timely news digest that responds to the interests of CMA members, but learning those interests depends on member input. We hope to reprint your comments regularly and members are encouraged to forward brief opinion articles on issues of interest, as well as suggestions on content and/or design. We received 140 suggestions about *Interface* from delegates attending the recent CMA annual meeting, including the ones below. We look forward to receiving yours.

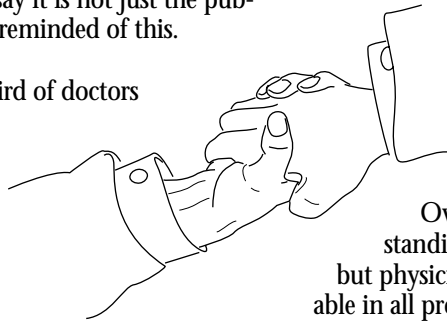
- "Include comments on political party positions"
- "This is a great initiative"
- "Include breaking news and items not appearing in *CMAJ*"
- "No need to list president's schedule"
- "Continue with political-type news and updates on CMA president's activities"
- "Superficial"
- "List where and how to find (Internet) links for locums"
- "Very colourful"
- "Add more links to Web information and palm-related downloads"
- "Short articles (easier to read)"
- "Needs a mini table of contents"
- "Cover current political issues, poll results, etc."

(Continued on page 4)

# Doctors are not immune from pressures of everyday life

The tragic death of Dr. Suzanne Killinger-Johnson, who leaped in front of a Toronto subway train with her infant son, Cuyler, in August, reminded the public that doctors are human and face the same pressures as everyone else. And physicians who specialize in treating doctors say it is not just the public that needs to be reminded of this.

“As many as one-third of doctors will have a major incident of depression during their careers,” said Mamta Gautam, an Ottawa psychiatrist who treats doctors. She also adds that depression among medical colleagues is a vastly under-reported problem.



Dr. Derek Puddester, a psychiatrist at the Children's Hospital of Eastern Ontario in Ottawa and president of the Canadian Association of Internes and Residents, says younger physicians tend to be more aware than their older colleagues of the need for a healthy balance in their lives. He adds, however, that the realities of being a physician in today's health care system can quickly destroy that balance.

“With fewer physicians, greater patient expectations, and increased severity of illness, many physicians give up more of themselves,” he said. “For some, that leads down a potentially dark and dangerous path.”

Puddester adds that the profession is lucky to have physician support programs to rely on.

“We are remarkably fortunate to have programs in every province,” he said. “Without that resource, physician morbidity and mortality might be tragically higher.”

Despite the best advice and availability of help, the stigma attached to mental illness

still forces many to suffer in silence — or worse, as the recent tragedy in Toronto showed. Mental health experts say that the general lack of understanding about mental illness — news reports on the death of Dr.

Killinger-Johnson and her son mentioned her luxury sport utility vehicle, seemingly as an example of how happy her life should have been — continues to feed this stigma.

Overcoming years of misunderstanding will not happen overnight, but physician support programs are available in all provinces and territories. Now, the CMA is also trying to help unite the various programs as an extension of its work on the CMA policy on physician health and well-being.

## Physician support programs by province

Newfoundland and Labrador  
709 754-3007, 800 563-9133

Nova Scotia  
902 468-8215 (all calls returned within 24 hours)

Prince Edward Island  
902 368-4120

New Brunswick  
506 635-8410

Quebec  
800 387-4166

Ontario  
416 340-2972

Manitoba  
204 237-8320

Saskatchewan  
306 244-2196

Alberta  
403 850-1809

British Columbia  
800 663-6729, 250 384-4424  
<http://www.psp.victoria.bc.ca/>



## Alzheimer site provides physician info

[www.alzheimer.ca/alz/content/index-phycor-eng.htm](http://www.alzheimer.ca/alz/content/index-phycor-eng.htm)

The Alzheimer Society of Canada launched the Physician's Corner section of its Web site two weeks ago to complement its authoritative patient site. The new feature provides a wealth of clinical information on:

- Alzheimer's disease (AD) and related (non-Alzheimer) dementias
- diagnosing AD
- providing support and treatment for both patients and their caregivers
- other available resources, including a listing local Alzheimer's disease societies across Canada
- a reading list, assessment forms and links to other Web sites

Physicians can also post questions or concerns to a doctors' forum and gain access to specialists from across the country or around the world. The site also includes helpful links to caregiver and patient information sheets.

One interesting component of Physician's Corner is the interactive self-evaluation that allows doctors to test their knowledge of the clinical diagnosis of AD. This test uses RealPlayer technology to run audio and video of patient simulations. Although some of the 30 self-evaluation questions demand common sense more than detailed medical experience involving AD, the quiz does cover many important issues surrounding treatment.

Registration is required for entry into Physician's Corner, but there is no charge. Time spent at the site may also count for CME credits, but physicians should confirm this with either the College of Family Physicians of Canada or the Royal College of Physicians and Surgeons of Canada.

— Steven Wharry, Editor, *CMA Interface*

**WHERE  
DO YOU  
STAND?**

How can physician support programs better reach those who need help?





## Why practice management?

MD Practice Management is for any physician interested in running the business of a medical practice better. Through the Practice Management Hotline (800 361-9151) CMA members can:

- gain access to our practice management consultants and arrange on-site consulting services
- get seminar and event information and registration details (direct access to CMA Meetings & Travel)
- find information specifically for residents
- take advantage of the program's self-learning modules
- use the referral network, a listing of local accountants and lawyers familiar with physician issues and practices

### Practice management hotline

The practice management hotline gives CMA members access to our consultants for 30 minutes of free consultation. Questions fielded cover issues such as:

- setting up a practice
- office operation — scheduling, phone systems
- contracts — locum, association, partnership, hospital-based practice
- human resources — management, salaries, hiring, firing
- incorporation
- purchasing and/or selling a practice
- information technology — what to buy, compatibility, billing software
- office design and layout

The Hotline Service is available free of charge to CMA members, but nonmembers are also encouraged to make inquiries and learn more about our services (all seminars are open to members and nonmembers of the CMA).

Practice Management hotline, 800 361-9151

Practice management consultants return calls within 2 business days. Service is available in English and French, 8 am to 4 pm EST, Monday to Friday.

## Talking to the media

Media calls taken by the Communications and Public Affairs Directorate in August

Total: 135

By issue

General Council: 65

CMAJ: 23 (approx.)

Public requests for information: 84

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Hill Talk will return next month, with the re-opening of the House of Commons and provincial legislatures.

## "Delegated" comment

(Continued from page 2)

"How about some lighter or humorous material?"

"Short but sweet"

"Easy to read, looks good"

"Cover current political issues and relevant meetings"

"Bright and easy to read"

"Coverage of rural and remote issues"

"Print too small"

"(Continue to print) news-type items, more information about services for members."

"Information not dated"

"Too brief"

"Provide political information, (such as) status of physician-government agreements"

"Short, to the point"

"Cover workforce and women physician issues"

"Too short"

"Add a travel and business corner"

### MD-MP Contact Corner

Statistics  
Federal ridings: 301  
MD Contacts: 393  
Ridings covered: 199

### New MD-MP Contacts

Peter Hay (Bruce-Grey)  
Kevin McLeod  
(Vancouver-Quadra)  
Gary Randhawa (Kelowna)

### MPs needing Contacts

Marcel Proulx (Hull-Aylmer)  
Tony Ianno (Trinity-Spadina)

YOUR  
OPINION  
COUNTS

CMA Interface wants to hear your comments.

Interface is available on the Web

[www.cma.ca/cmainterface](http://www.cma.ca/cmainterface)

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