NOTE: Readers should refer to the 2013 Reports to General Council while reviewing these transactions to relate the decisions of General Council to the background information provided in the reports.
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ELECTED OFFICIALS

2013 General Council Speaker and Deputy Speaker

Speaker ....................................................................................................................................... Blake Woodside, MD
Deputy Speaker ......................................................................................................................... Maria Alexiadis, MD

2012-2013 CMA Board of Directors

Chair ........................................................................................................................................... Michael Golbey, MD*
President ......................................................................................................................................... Anna Reid, MD*
President-Elect ......................................................................................................................... Louis Hugo Francescutti, MD*
Past President .............................................................................................................................. John Haggie, MB*
Honorary Treasurer .................................................................................................................... Brian Brodie, MD (BC)*

Yukon ........................................ Ngozi Ikeji, MD
Northwest Territories .............. Ewan Affleck, MD
British Columbia .................. Bradley Fritz, MD**
.................................................. Brian Brodie, MD*
Alberta ................................. Noel Grisdale, MD
............................................ Christopher (Chip) Doig, MD
Saskatchewan ....................... Boyd Stewart, MD
Manitoba ............................... Margaret Speer, MD
Ontario ................................. Gail Beck, MD*
........................................... Christopher Jyu, MD
........................................... Stewart Kennedy, MD
........................................... Tim Nicholas, MD
........................................... Virginia Walley, MD***
........................................... Scott Wooder, MD***

Québec ................................ Pierre Harvey, MD
........................................ Laurent Marcoux, MD
New Brunswick ..................... Rody Canning, MD
Prince Edward Island .......... Scott Cameron, MD
Nova Scotia ......................... Jane Brooks, MD
Newfoundland and Labrador .... Brendan Lewis, MD
Residents ............................ Gillian Shiau, MD
Students ............................... Robin Clouston, MD

* Members, CMA Executive Committee
** Until June 2013
*** Effective March 2013
**** Until March 2013
CANADIAN MEDICAL FOUNDATION

Board of Trustees
Chair......................................................................................................................... Ruth Collins-Nakai, MD
Past Chair ................................................................................................................... Henry Haddad, MD
Secretary Treasurer................................................................................................. Jean Schnob
Trustee..................................................................................................................... Manon Charbonneau, MD
Trustee..................................................................................................................... Geneviève Davignon, MD
Trustee..................................................................................................................... Victor Dimfeld, MD
Trustee..................................................................................................................... Mike Gormley
Trustee..................................................................................................................... Michelle Masson
Trustee..................................................................................................................... Amit Monga
Trustee..................................................................................................................... Tim Smith
Trustee..................................................................................................................... Ian Warrack, MD

CMA’S GROUP OF SUBSIDIARY COMPANIES

CMA Holdings Incorporated Board of Directors
Director and Chair .................................................................................................... John Rapin, MD
Director and President and Chief Executive Officer ................................................. Brian Peters
Director .................................................................................................................. Brian Brodie, MD
Director .................................................................................................................. Paul-Émile Cloutier
Director .................................................................................................................. Janet Ecker
Director .................................................................................................................. Jeffrey Gandz, PhD
Director .................................................................................................................. Michael Golbey, MD
Director .................................................................................................................. Robert Hollinshead, MD
Director .................................................................................................................. Eric Howatt, MD
Director .................................................................................................................. Mark Norton
Director .................................................................................................................. Frank Penny
Director .................................................................................................................. Courtney Pratt
Director .................................................................................................................. Suzanne Strasberg, MD
Director .................................................................................................................. Joanne Vézina
Director .................................................................................................................. Wendy Watson
SECRETARIAT PRESENT AT 2013 GENERAL COUNCIL
CMA Secretariat

Secretary General and Chief Executive Officer .............................................. Paul-Émile Cloutier
Chief of Staff and Senior Advisor to the CEO ............................................. Joseph Mayer
Executive Assistant .................................................................................. Julie Perron
Executive Assistant .................................................................................. Chantal Cellard

Vice-President, Strategy and Organizational Effectiveness .......................... Steven Mortimer
Executive Assistant, Corporate Affairs ..................................................... Jacqueline Ethier
Chief Financial Officer and Director, Operations ...................................... Torindo Panetta
Director, Governance and Legal Services and Chief Privacy Officer ........ Jean Nelson
Associate Director, Governance Services ............................................... Marie Claire Bédard
Associate Director, Corporate Services ................................................... Melinda Lauzon
Manager, Board Administrative Services and Recording Secretary .......... Heather Nowlan
Project Manager, Corporate Services ...................................................... Cherise Araujo
Director, Human Resources and Organizational Development ............. Nancy Araujo
Coordinator, Board Administrative Services .......................................... Ann Suurland
Director, Meetings and Travel Management .......................................... Michelle Gravelle
Manager, Annual Meeting ..................................................................... Sandra Wood
Senior Meeting Planner ......................................................................... Wendy Carnegie
Coordinator ............................................................................................. Samantha Sharkey
Coordinator, Registration and Travel ..................................................... Ilonka Gutman

Vice-President, Professional Services and Leadership .................................. Tim Smith
Editor-in-chief, CMAJ ................................................................................ John Fletcher, MD
Director, Publications and Publisher ....................................................... Glenda Proctor
Deputy Editor, Clinical, CMAJ ................................................................. Diane Kelsall, MD
News Journalist ......................................................................................... Laura Eggertson
Editor, Santé Inc ...................................................................................... Marie-Sophie L’Heureux
Senior Manager, Knowledge for Practice .............................................. Deborah Scott-Douglas
Senior Program Manager ....................................................................... Renée De Gannes-Marshall
Director and Editor-in-Chief, CMA Online Content ............................... Pat Rich
Online Content Coordinator and Editor .................................................. Marla Fletcher
Acting Director, Physician Learning and Professional Development .... Emmanuelle Morin
Acting Coordinator, PMI Leadership ....................................................... Chantal Nadeau

Vice-President, Health Policy and Research ................................................ Owen Adams, PhD
Executive Director, Office of Ethics, Professionalism and International Affairs ......................................................... Jeff Blackmer, MD
Director, Quality Initiatives .................................................................... Sam Shortt, MD
Director, Research and Policy Development ........................................... Stephen Vail
Director, Public Health ........................................................................... Maura Ricketts, MD
Ethicist, Ethics, Professionalism and International Affairs ...................... Melody Isinger
Senior Health Economist ........................................................................ Kelly Higdon
Project Manager ..................................................................................... Tara Chauhan
Vice-President, Community Building .................................................................Martin Vogel, MD
Director, Professional Affairs and Strategic Health Alliances ...................................Charmaine Roye, MD
Acting Associate Director, Healthcare Partnerships ..................................Conrad Amenta
Director, Members and PTMAs ......................................................................John Feeley
Associate Director, Member Engagement .........................................................Carole Deburggraeye
Associate Director, Member Insight ..................................................................Renée Crowe
Senior Editor ..................................................................................................................Pat Sullivan
Executive Assistant .....................................................................................................Nadia Potvin-Piché
Project Coordinator, Physician Health .....................................................................Chris Simon

Vice-President, Advocacy and Public Affairs .........................................................Jacques Lefebvre
Director, Communications/Acting Director, Government Relations..........................Steve Wharry
Senior Advisor, Strategic Affairs ............................................................................François Lessard
Manager, Media Relations .........................................................................................Lucie Boileau
Manager, Parliamentary Affairs ...............................................................................Renée Bélanger
Senior Advisor, Government Relations .....................................................................Azin Moradhasse
Editor/Writer ...............................................................................................................Jane Armstrong
Senior Coordinator ......................................................................................................Alison Smith
Communications Coordinator ......................................................................................Dominique Jolicoeur
Project Manager, Strategic Affairs ...........................................................................Jasmine Neeson
Senior Advisor, Special Projects .................................................................................Kristin Smith

Canadian Medical Foundation Secretariat
President and Chief Executive Officer .......................................................................Lee Gould
Development and Communications Specialist .........................................................Meaghan Byrnes
Coordinator ..................................................................................................................Geneva Forestell

CMA’s Group of Subsidiary Companies Secretariat
President and Chief Executive Officer, MD Physician Services Inc...............................Brian Peters
Chief Investment Officer .................................................................................................William Horton
Executive Vice-President, Technology and Operations .................................................Paul Mason
Executive Vice-President, Organization Experience .....................................................Michelle Masson
Vice-President, Teaming and Partnering ......................................................................Lindsay Hugenholtz
Assistant Vice-President, Membership ...........................................................................Teresa Arlotta
Assistant Vice-President, Enterprise Marketing ..............................................................Sheila Beehler-Walsh
Assistant Vice-President, Segment Development and Strategy .....................................Allison Seymour
Regional Senior Financial Consultant, Alberta Region ..................................................Pam Best
Senior Financial Consultant ...........................................................................................Glenda Covey
Senior Financial Consultant ..........................................................................................Jeff Hielemaince
Regional Vice-President, Western Canada ....................................................................Paul Phillips
Marketing Program Manager ..........................................................................................Alison Forestell
Regional Manager ............................................................................................................Kevin Frey
Assistant Regional Manager ..........................................................................................Crystal Pelton
Assistant Regional Manager ..........................................................................................Richard Powell
Assistant Regional Manager ............................................................................................David Zizek
Early Career Specialist Lead ........................................................................................Sarah Lowden
Estate and Trust Advisor ................................................................. Robert McCracken
Marketing Manager ........................................................................ Katie-Lynn Miller
Advisory Team Coordinator ............................................................. Karen Mah
Senior Network Analyst ................................................................. William Brière
Senior PC Tech, Team Lead ............................................................. Jay Remillard
PC Support Specialist ................................................................. Sean Hawley
2013 General Council Delegates

Acharya, Dr. Sanjay, Nepean, Ont........................ PTMA representative
Adams, Dr. Howard, Windsor, Ont........................ Representative, Canadian Society of Plastic Surgeons
Affleck, Dr. Ewan, Yellowknife, NWT.................... Member, CMA Board of Directors
Alexiadas, Dr. Maria, Halifax, NS......................... Deputy Speaker, CMA General Council
Alakija, Dr. Pauline, Edmonton, Alta...................... PTMA representative
Allain, Dr. Suzanne, Thunder Bay, Ont.................... PTMA representative
Andrusky, Dr. Kathryn, Edmonton, Alta.................. PTMA representative; CMA Award for Young Leaders Recipient
Athaide, Dr. Gregory, Whitby, Ont........................ PTMA representative
Badenhorst, Dr. Charl, Fort St. John, BC.................. PTMA representative
Bannon, Dr. David, Kensington, PEI...................... President, Medical Society of Prince Edward Island
Barker, Dr. Eric, Wiarton, Ont.............................. PTMA representative
Barnsdale, Dr. Peter, Mission, BC.......................... PTMA representative
Barwich, Dr. Doris, Delta, BC.............................. Representative, Canadian Society of Palliative Care Physicians
Bates, Dr. Sarah, Calgary, Alta............................. PTMA representative
Beach, Dr. Donald, Yellowknife, NWT..................... PTMA representative
Beck, Dr. Gail, Ottawa, Ont................................. Member, CMA Board of Directors
Behl, Dr. Pearl, Markham, Ont............................. PTMA representative
Berbrayer, Dr. David, Thornhill, Ont...................... PTMA representative
Berg, Dr. Elizabeth, Winnipeg, Man...................... PTMA representative
Bernier, Dr. Jean-Robert, Ottawa, Ont.................... Surgeon General, Canadian Forces Health Services Group
Blair, Dr. Geoffrey, Vancouver, BC........................ Representative, Canadian Association of Paediatric Surgeons
Bonang, Dr. Lisa, Musquodoboit Harbour, NS.......... PTMA representative
Booy, Dr. Harold, Winkler, Man.......................... PTMA representative
Boucher, Dr. Paul, Calgary, Alta.......................... PTMA representative
Bourque, Dr. Jean-Marc, London, Ont.................... PTMA representative
Bridges, Dr. Ron, Calgary, Alta.......................... PTMA representative
Broad, Dr. Robert, Edmonton, Alta....................... Chair, CMA Audit Committee
Brodie, Dr. Brian, Chilliwack, BC....................... CMA Honorary Treasurer
Brooks, Dr. Jane, Middleton, NS......................... Member, CMA Board of Directors
Brown, Dr. Mark, Moose Jaw, Sask...................... PTMA representative
Busser, Dr. Jim, Vancouver, BC.......................... PTMA representative

Cadesky, Dr. Éric, Burnaby, BC.......................... PTMA representative
Cameron, Dr. Scott, Summerside, PEI..........................Member, CMA Board of Directors
Campbell, Dr. Garth, Beausejour, Man..........................Chair, GP Forum
Canning, Dr. Roderick, Moncton, NB............................Member, CMA Board of Directors
Cargill, Dr. Darren, Windsor, Ont.................................PTMA representative
Carr, Dr. Padraic, Edmonton, Alta.................................PTMA representative
Cavers, Dr. William, Victoria, BC.................................PTMA representative
Chaimowitz, Dr. Gary, Ancaster, Ont.............................PTMA representative
Chau, Dr. Huy, Whitehorse, YT.................................PTMA representative
Cherla, Dr. Kiran, Richmond Hill, Ont..........................PTMA representative
Chiasson, Dr. John, Antigonish, NS..............................PTMA representative
Chudley, Dr. Albert, Winnipeg, Man..............................PTMA representative
Clouston, Dr. Robin, Saint John, NB.............................Member, CMA Board of Directors
Cloutier, Dr. Louise, Wolfville, NS.............................Chair, CMA Board of Directors 2004-2008
Collins-Nakai, Dr. Ruth, Edmonton, Alta.......................Chair, Canadian Medical Foundation Board; CMA President, 2005; Chair, CMA Committee on Archives and Awards
Colman, Dr. Laurence, Etobicoke, Ont............................PTMA representative
Coolican, Dr. Paul, Morrisburg, Ont..............................PTMA representative
Cooper, Dr. Neil, Calgary, Alta.................................PTMA representative
Corbet, Dr. Kenneth, Calgary, Alta...............................Representative, Occupational Medicine Specialists of Canada
Corbett, Dr. Mark, Coldstream, BC...............................PTMA representative
Corbett, Dr. Sandra, Fort McMurray, Alta.......................PTMA representative
Cox, Dr. Robin, Calgary, Alta................................PTMA representative
Cram, Dr. David, Souris, Man................................PTMA representative
Cressey, Dr. Chris, Palmerston, Ont............................PTMA representative
Cunningham, Dr. William, Mill Bay, BC........................President, British Columbia Medical Association
Curtis, Dr. Anne, North York, Ont...............................PTMA representative
Dalal, Dr. Bakul, Vancouver, BC.................................PTMA representative
Delisle, Dr. Line, Sherbrooke, Que...............................PTMA representative
Dellandrea, Dr. David, North Bay, Ont..........................PTMA representative
Demers, Dr. Vincent, Montréal, Que..............................PTMA representative
Denton, Dr. Richard, Tarzwell, Ont.............................PTMA representative
Desjardins, Dr. Robert, Bathurst, NB............................President, New Brunswick Medical Society CMA President, 1997
Dinfield, Dr. Victor, Richmond, BC..............................CMA President, 1997
Dixson, Dr. Elijah, Calgary, Alta.................................Representative, Canadian Association of General Surgeons
Doig, Dr. Anne, Saskatoon, Sask.................................CMA President, 2009
Doig, Dr. Christopher, Calgary, Alta........................Member, CMA Board of Directors
Domanko, Dr. Wayne, Morrisburg, Ont............................ PTMA representative
Domke, Dr. Sheila, Winnipeg, Man.............................. PTMA representative
Donohue, Dr. Alicia, Ottawa, Ont............................... PTMA representative
Dow, Dr. Michelle, Meteghan Centre, NS.................... PTMA representative
Doyle, Dr. Mary, Sydney, NS.................................... PTMA representative
Drew, Mrs. Barbara, Ottawa, Ont............................... CMA Acting Secretary General, 2001-2002 and 2008-2009

Erlick, Dr. Lawrence, Scarborough, Ont........................ PTMA representative

Ferguson, Mr. Devin, Halifax, NS............................... PTMA representative
Fink, Dr. Milo, Regina, Sask..................................... PTMA representative
Finley, Dr. John Powers, Halifax, NS.......................... PTMA representative
Fleming, Dr. Michael, Fall River, NS.......................... President, Doctors Nova Scotia
Flynn, Dr. Gregory, Toronto, Ont.............................. PTMA representative
Fong, Dr. Michael, Charlottetown, PEI........................ PTMA representative
Forbes, Dr. Cindy, Waverley, NS............................... PTMA representative
Forbes, Mr. Connor, Richmond, BC........................... PTMA representative
Fourie, Dr. Phillip, Yorkton, Sask............................. PTMA representative
Fournier, Dr. Marcien, Québec, Que............................ CMA President, 1989
Francescutti, Dr. Louis Hugo, Sherwood Park, Alta...... CMA President-Elect
Freeland, Dr. Alison, Ottawa, Ont............................ PTMA representative
Fullerton, Dr. Merrilee, Kanata, Ont........................... PTMA representative

Gabriel, Dr. Tony, Gander, NL................................. PTMA representative
Gallagher, Dr. Kathy, Bedford, NS............................. PTMA representative
Garbutt, Dr. Allan, Bellevue, Alta............................. PTMA representative
Gelber, Dr. Tobias, Pincher Creek, Alta...................... PTMA representative
Giuffre, Dr. Michael, Calgary, Alta........................... President, Alberta Medical Association
Gobeil, Dr. François, Boucherville, Que...................... PTMA representative
Golbey, Dr. Michael, Kelowna, BC............................. Chair, CMA Board of Directors
Gow, Dr. Alan, Salmon Arm, BC............................... PTMA representative
Graham, Dr. Wendy, Channel-Port-aux-Basques, NL...... PTMA representative
Gregson, Dr. Daniel, Calgary, Alta............................ Representative, Association of Medical Microbiology and Infectious Diseases Canada
Grisdale, Dr. Noel, Black Diamond, Alta..................... Member, CMA Board of Directors
Gupta, Dr. Samir, North York, Ont............................. PTMA representative

Haddad, Dr. Camille, Miramichi, NB.......................... PTMA representative
Haddad, Dr. Henry, Sherbrooke, Que.......................... CMA President, 2001
Haggie, Dr. John, Appleton, NL ................................. CMA President, 2011
Hansen, Dr. Lynn, Fredericton, NB ................................. PTMA representative
Hanson, Dr. Dana, Fredericton, NB ................................. CMA President, 2002; Speaker, CMA General Council 1999-2001; President, World Medical Association, 2009-10
Harvey, Dr. Pierre, Rivière-du-Loup, Que. ........................ Member, CMA Board of Directors
Hasselback, Dr. Jasmine, Saskatoon, Sask. ........................ PTMA representative
Hellyer, Dr. Deborah, Windsor, Ont. ................................. PTMA representative
Heredia, Dr. Armando, Whitehorse, YT .............................. PTMA representative
Horvat, Dr. Daniel, Prince George, BC .............................. PTMA representative
Hudak, Dr. Alan, Orillia, Ont. ................................. PTMA representative
Hutten-Czapski, Dr. Peter, Haileybury, Ont. ........................ PTMA representative
Ikeji, Dr. Ngozi, Whitehorse, YT ................................. Member, CMA Board of Directors
Jen, Dr. Yun, Montréal, Que. ................................. PTMA representative
Jetha, Dr. Nasir, Vancouver, BC ................................. PTMA representative
Johnsen, Dr. Jon, Thunder Bay, Ont. ................................. PTMA representative
Johnson, Dr. Darcy, Winnipeg, Man. ............................. PTMA Representative
Jones, Dr. Ralph, Chilliwack, BC ................................. PTMA representative
Jyu, Dr. Christopher, Scarborough, Ont. ........................ Member, CMA Board of Directors
Kancir, Mr. Jesse, Toronto, Ont. ................................. Representative, Canadian Federation of Medical Students
Kapur, Dr. Atul, Ottawa, Ont. ................................. PTMA representative
Karaivanov, Dr. Yordan, Happy Valley-Goose Bay, NL ........................ President, Newfoundland and Labrador Medical Association
Kassner, Dr. Rachel, Charlottetown, PEI ........................ PTMA representative
Kaufmann, Dr. Michael, Warkworth, Ont. ........................ PTMA representative
Kelleher, Dr. Barbara, Brandon, Man. ................................. PTMA representative
Kennedy, Dr. Stewart, Thunder Bay, Ont. ........................ Member, CMA Board of Directors
Khandelwal, Dr. Sanjay, Surrey, BC ................................. PTMA representative
Kippen, Dr. Robert, Winnipeg, Man. ................................. PTMA representative
Kirwan, Dr. Margaret, Grande Prairie, Alta. ........................ Speaker, CMA General Council 2006-2010
Kosar, Dr. Stephen, Sudbury, Ont. ................................. PTMA representative
Kozroski, Dr. Clare, Gull Lake, Sask. ................................. President, Saskatchewan Medical Association
L'Heureux, Dr. Bruno, Laval, Que. ................................. CMA President, 1994
Landry, Dr. Léo-Paul, Boucherville, Que. ........................ CMA Secretary General, 1986-1999; CMA Medal of Service Recipient
Larsen, Dr. Darren, Thornhill, Ont. ................................. PTMA Representative
Larsen Soles, Dr. Trina, Golden, BC ......................................... Chair, CMA Committee on Health Policy and Economics
Laverty, Mr. Colin, Sherbrooke, Que. ..................................... PTMA representative
Lavoie, Dr. Lionel, Melfort, Sask. .......................................... CMA President, 1990
Lee, Dr. Winston, Saint John, NB ........................................ PTMA representative
Lefebvre, Dr. Lisa, North York, Ont. .................................... PTMA representative
Lévesque, Dr. Jacques, Québec, Que ....................................... Representative, Canadian Association of Radiologists
Lewis, Dr. Brendan, Corner Brook, NL .................................. Member, CMA Board of Directors
Li Pi Shan, Dr. Rodney, Calgary, Alta. .................................. Representative, Canadian Association of Physical Medicine and Rehabilitation
Lofsky, Dr. Stanley, North York, Ont. .................................. PTMA representative
Ludwig, Dr. John, Omemee, Ont. ......................................... PTMA representative
Mackie, Dr. Gordon, Richmond, BC .................................... PTMA representative
Mackie, Dr. J. William, Vancouver, BC ............................... PTMA representative
MacNicol, Dr. Wayne, Whitehorse, YT ............................... PTMA representative
Maloney, Dr. Gerald, St. Martins, NB .................................. PTMA representative
Mann, Dr. Renwick, Peterborough, Ont. .............................. PTMA representative
Mansouri, Dr. Shireen, Yellowknife, NWT ............................ PTMA representative
Marcoux, Dr. Laurent, Longueuil, Que. ............................... Member, CMA Board of Directors; President, Quebec Medical Association
Maxted, Dr. John, Markham, Ont. ................................. PTMA representative
McArthur, Dr. Peter, Yellowknife, NWT ............................. PTMA representative
McGregor, Dr. Fiona Keller, Vernon, BC ............................. Representative, Canadian Psychiatric Association
McKernan, Dr. Peter, Bellevue, Alta. ................................. PTMA representative
McLeod, Dr. Bruce, Port Williams, NS ................................ Representative, Canadian Association of Emergency Physicians
McMillan, Dr. Colin, Charlottetown, PEI ............................. CMA President, 2006; Chair, CMA Board of Directors 1993-1997
McNeill, Dr. Jeanne, Moncton, NB ................................. PTMA representative
McPherson, Dr. Thomas Alexander, Edmonton, Alta. .... CMA President, 1984
McHart, Dr. Pravinsagar, Winnipeg, Man. ........................ PTMA representative
Miller, Dr. Ashley, St. John’s, NL ........................................ PTMA representative
Milliken, Dr. Donald, Victoria, BC .................................... Chair, Specialist Forum
Molnar, Dr. Christine, Calgary, Alta. ................................. PTMA representative
Monk, Dr. Tracy, Burnaby, BC ........................................ PTMA representative
Moore, Dr. Kieran, Kingston, Ont. .................................... PTMA representative
Morgan, Dr. David, Hamilton, Ont. ................................ Representative, Canadian Association of Gastroenterology
Murdock, Dr. Ward, Fredericton, NB ................................. Representative, Society of Obstetricians and Gynaecologists of Canada
Naidoo, Dr. Surayia, Yellowknife, NWT ........................................ PTMA representative
Ng, Dr. Albert, Windsor, Ont. ...................................................... PTMA representative
Nicholas, Dr. Cynthia, Richmond Hill, Ont. .............................. PTMA representative
Nicholas, Dr. Tim, Aurora, Ont. .................................................. Member, CMA Board of Directors
Nohr, Dr. Carl, Medicine Hat, Alta ............................................ PTMA representative

O’Brien, Dr. Christopher, Brantford, Ont. ................................. Representative, Canadian Association of Nuclear Medicine
O’Brien-Bell, Dr. John, Surrey, BC ............................................... CMA President, 1988
O’Shea, Dr. Eoghan, Ottawa, Ont. ............................................. PTMA representative
O’Shea, Dr. Patrick, St. John’s, NL ............................................... PTMA representative
Omichinski, Dr. Mike, Portage La Prairie, Man. ...................... Chair, CMA Committee on Bylaws
Oppel, Dr. Lloyd, Vancouver, BC ............................................... PTMA representative
Orsini, Dr. Silvia, London, Ont. .................................................... PTMA representative
Ouellet, Dr. Robert, Montréal, Que ............................................ CMA President, 2008
Owsianik, Dr. Walter, Hamilton, Ont ......................................... PTMA representative

Pan, Dr. Larry, Charlottetown, PEI ............................................ PTMA representative
Pardhan, Dr. Kaif, Toronto, Ont. ................................................ PTMA representative
Parks, Dr. Paul, Medicine Hat, Alta ............................................ PTMA representative
Parmar, Dr. Jasneet, Edmonton, Alta ....................................... PTMA representative
Pasternak, Dr. Jesse, Hamilton, Ont. ........................................ Representative, Canadian Association of Internes and Residents
Patel, Dr. Sunil, Gimli, Man ....................................................... CMA President, 2003
Peniston, Dr. Charles, Newmarket, Ont. ................................. PTMA representative
Perry, Dr. Douglas, Edmonton, Alta ........................................ CMA Board of Directors, 2000-2004; Speaker, CMA General Council, 1993-1998; CMA Honorary Member

Pillay, Dr. Intheran, Gravelbourg, Sask ................................ PTMA representative
Pinto, Dr. Christopher, Toronto, Ont ........................................ PTMA representative
Pontin, Dr. David, Yellowknife, NWT ....................................... President, Northwest Territories Medical Association
Poole, Dr. Alexander, Whitehorse, YT ................................ PTMA representative
Price, Ms. Christina, Logy Bay, NL ......................................... PTMA representative
Punjani, Mr. Nahid, Ottawa, Ont ............................................. PTMA representative
Putland, Dr. Michael, Victoria, BC .......................................... PTMA representative

Rafuse, Dr. Paul, Halifax, NS .................................................... Representative, Canadian Ophthalmological Society
Read, Dr. Robert, Halifax, NS ................................................... PTMA representative
Reddoch, Dr. Allon, Marsh Lake, YT .................................... CMA President, 1998
Reid, Dr. Anna, Yellowknife, NWT ........................................ CMA President
Robinson, Dr. Paul, Gatineau, Que.............................................. PTMA representative
Ross, Dr. Shelley, Burnaby, BC .............................................. PTMA representative
Roy, Dr. Claude, Montréal, Que........................................... PTMA representative
Roy, Dr. Maurice, Ste. Anne, Man........................................ President, Doctors Manitoba
Ruddiman, Dr. Alan, Oliver, BC.......................................... PTMA representative
Rudnisky, Dr. Chris, Edmonton, Alta................................. PTMA representative

Sampson, Dr. John, Charlottetown, PEI................................. PTMA representative
Samson, Dr. Isabelle, Fermont, Que................................. PTMA representative
Sargent, Dr. Randall, Canmore, Alta................................ PTMA representative
Saunders, Dr. Robin, Sooke, BC........................................ Chair, CMA Committee on Ethics
Schumacher, Dr. Albert, Windsor, Ont................................. CMA President, 2004
Schuster, Dr. Ernst, Edmonton, Alta................................. PTMA representative
Scott, Dr. Jason, Dauphin, Man........................................ PTMA representative
Scully, Dr. Hugh, Toronto, Ont........................................ CMA President, 1999
Shannon, Dr. Janet, Eagle Ridge, Sask................................ PTMA representative
Shiau, Dr. Gillian, Calgary, Alta................................. Member, CMA Board of Directors
Shipley, Dr. William, Belleville, Ont................................. PTMA representative
Simpson, Dr. Chris, Kingston, Ont................................. PTMA representative
Singhal, Dr. Rajni, Toronto, Ont................................ PTMA representative
Sivertson, Dr. Joanne, Prince Albert, Sask........................ PTMA representative
Skelly, Dr. George, The Pas, Man................................ PTMA representative
Slavik, Dr. Dalibor, Saskatoon, Sask............................... PTMA representative
Slocombe, Dr. Linda, Calgary, Alta................................ PTMA representative
Spadafora, Dr. Salvatore, Toronto, Ont............................. Representative, Canadian Anesthesiologists’ Society
Speer, Dr. Margaret, Lockport, Man............................... Member, CMA Board of Directors
Sridhar, Dr. Guruswamy, Regina, Sask.............................. PTMA representative
Stacey, Dr. Brett, Winnipeg, Man................................ PTMA representative
Steacie, Dr. Adam, Brockville, Ont................................. Chair, CMA Committee on Health Care and Promotion
Stephan, Dr. Paul, Thornhill, Ont................................ PTMA representative
Stewart, Dr. Boyd, Weyburn, Sask................................. Member, CMA Board of Directors
Stewart, Dr. James, North Bay, Ont................................ PTMA representative
Studniberg, Dr. Allan, Scarborough, Ont......................... PTMA representative
Swenson, Dr. Robert, Ottawa, Ont................................. PTMA representative
Sze, Dr. Shirley, Kamloops, BC................................ PTMA representative

Tadepalli, Dr. Rao, Whitehorse, YT.............................. President, Yukon Medical Association
Tandan, Dr. Ved, Carlisle, Ont........................................ PTMA representative
Tanner, Dr. Wayne, Toronto, Ont................................. PTMA representative
Tardif, Dr. Daniel, Cantley, Que................................ PTMA representative
Teitge, Mr. Braden, Edmonton, Alta. ........................................ PTMA representative
Tennant, Dr. Matthew, Edmonton, Alta. .............................. PTMA representative
Theman, Dr. Trevor, Edmonton, Alta. ............................... PTMA representative
Thomas, Dr. William, Vancouver, BC ................................. CMA President, 1980
Thompson, Dr. Kristjan, Winnipeg, Man. .......................... PTMA representative
Thorne, Dr. Carter, Newmarket, Ont. ................................. Representative, Canadian Rheumatology Association
Toth, Dr. Michael, Aylmer, Ont. ................................. PTMA representative
Townsend, Dr. Derek, Edmonton, Alta. ........................... PTMA representative
Tracey, Dr. John, Brampton, Ont. ................................. PTMA representative
Turchen, Dr. Barry, Abbotsford, BC ............................... Chair, CMA Political Action Committee
Turnbull, Dr. Jeffrey, Ottawa, Ont. ................................. CMA President, 2010
Tytus, Dr. Richard, Hamilton, Ont. ............................... PTMA representative

Vander Stelt, Dr. Ruth, Gatineau, Que. ................................. PTMA representative
Vardy, Dr. Cathy, St. John's, NL ................................. PTMA representative
Varvis, Dr. Christopher, Edmonton, Alta. .......................... Speaker, CMA General Council 1978-1987

Walley, Dr. Virginia, Peterborough, Ont. .......................... Member, CMA Board of Directors
Walton, Dr. Nigel, West Vancouver, BC .......................... PTMA representative
Webb, Dr. Charles, Vancouver, BC ................................. PTMA representative
Weir, Dr. Douglas, Toronto, Ont. ................................. PTMA representative
Welt, Dr. Michel, Montréal, Que. ................................. PTMA representative
Wentzell, Dr. Tracey, Corner Brook, NL .......................... PTMA representative
Whatley, Dr. Shawn, Mount Albert, Ont. ........................ PTMA representative
Whelan, Dr. John, Rothesay, NB ................................. PTMA representative
White, Dr. Celina, Amherst, NS ................................. PTMA representative
Willett, Dr. Janice, Sault Ste. Marie, Ont. ........................ Chair, CMA Committee on Education and Professional Development

Williams, Dr. Carole, Victoria, BC ................................. PTMA representative
Wilson, Dr. Ruth, Kingston, Ont. ................................. PTMA representative
Wilson, Dr. Scott, Calgary, Alta. ................................. PTMA representative
Wilson, Dr. Margo, Happy Valley-Goose Bay, NL ........................ PTMA representative
Wong, Dr. Jason, Vancouver, BC ................................. PTMA representative
Wood, Dr. Scott, Stoney Creek, Ont. ............................... President, Ontario Medical Association
Woodside, Dr. Blake, North York, Ont. .......................... Speaker, CMA General Council
Yamashiro, Dr. Hirotaka, Richmond Hill, Ont. .................... PTMA representative
Yelland, Dr. Joel, Saskatoon, Sask. ............................... PTMA representative
Young, Dr. Joanne, Vancouver, BC ............................... PTMA representative
### 2013 General Council Observers

<table>
<thead>
<tr>
<th>Name</th>
<th>Position/Title</th>
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<tbody>
<tr>
<td>Adair, Ms. Marisa</td>
<td>British Columbia Medical Association</td>
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<td>Aikman, Mr. James</td>
<td>British Columbia Medical Association</td>
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<tr>
<td>Ambrose, The Hon. Rona</td>
<td>Member of Parliament and Minister of Health Canada</td>
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<tr>
<td>Anderson, Mr. Bernard</td>
<td>Alberta Ministry of Health</td>
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<td>Askin, Dr. Joseph</td>
<td>Member</td>
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<tr>
<td>Banner, Mrs. Sandra</td>
<td>Canadian Resident Matching Service</td>
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<td>Barrette, Dr. Gaétan</td>
<td>Fédération des médecins spécialistes du Québec</td>
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<td>Barter, Ms. Lynn</td>
<td>Newfoundland and Labrador Medical Association</td>
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<td>Baxter, Ms. Sharon</td>
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<td>Beaulieu, Dr. Marie-Dominique</td>
<td>College of Family Physicians of Canada</td>
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<td>Bellavance, Mr. Sylvain</td>
<td>Fédération des médecins spécialistes du Québec</td>
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<td>Bennett, The Hon. Dr. Carolyn</td>
<td>Member of Parliament</td>
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<td>Bergman, Dr. June</td>
<td>Member</td>
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<td>Bernard, Dr. André</td>
<td>CMA Representative to the World Medical Association</td>
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<td>Blake, Dr. Jennifer</td>
<td>Society of Obstetricians and Gynaecologists of Canada</td>
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<td>Bouchard, Dr. Thomas</td>
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<td>Brasg, Mr. Ian</td>
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<td>Brazeau, Mrs. Lisa</td>
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<td>Breic, Dr. Vanessa</td>
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<td>Brimacombe, Mr. Glenn</td>
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<td>Brunet-Colvey, Ms. Jennifer</td>
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<td>Burgess, Dr. Susan</td>
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<td>Burns, Dr. Ken</td>
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<td>Callaghan, Dr. Bryan</td>
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<tr>
<td>Canil, Dr. Katherine</td>
<td>Member</td>
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<td>Carson, Dr. George</td>
<td>CMA Honorary Member</td>
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<td>Carstairs, The Hon.</td>
<td>Presenter</td>
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<td>Ceacero, Ms. Sylvia</td>
<td>National Association of Federal Retirees</td>
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<td>Chary, Dr. Srsni</td>
<td>Member</td>
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<td>Chen, Dr. Jean</td>
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<td>Colledge, Mr. Mike</td>
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<td>Connors, Dr. Joseph</td>
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<td>Cook, Ms. Michelle</td>
<td>Doctors Nova Scotia</td>
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<td>Cram, Mr. Robert</td>
<td>Doctors Manitoba</td>
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<td>Crane, Mrs. Louise</td>
<td>Canadian Arthritis Patient Alliance</td>
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Crolly, Ms. Allison, Winnipeg, Man........................... Doctors Manitoba
Crump, Mr. Trafford, Calgary, Alta........................... University of British Columbia
Csamer, Ms. Jennifer, Toronto, Ont.......................... Ontario Medical Association

Daniel, Mrs. Charlene, Edmonton, Alta.......................... Alberta Medical Association
Davie, Mr. George, Port Carling, Ont.......................... Member, CMAH Board of Directors
Davis, Dr. Neil, Hampstead, Que.......................... Member
Desjardins, Mr. Kevin, Ottawa, Ont.......................... Canadian Dental Association
Dhillon, Dr. Paul, Regina, Sask.......................... CMA Award for Young Leaders recipient
Dowdall, Ms. Catherine, Toronto, Ont.......................... Ontario Medical Association
Dutt, Dr. Monika, Sydney, NS.......................... Member
Duval, Dr. Douglas, Edmonton, Alta.......................... Member

Ecker, Ms. Janet, Ajax, Ont.......................... Member, CMAH Board of Directors
Edgar, Ms. Laura, Ottawa, Ont.......................... Presenter

Fernandez, Dr. Louis, Halifax, NS.......................... Member
Fewer, Dr. Derek, Winnipeg, Man.......................... CMA Physician Misericordia Award recipient
Fifield, Ms. Adele, Ottawa, Ont.......................... Canadian Association of Radiologists
Fisher, Mr. Nigel, Salt Spring Island, BC.......................... CMA Medal of Honour recipient
Forsyth, Ms. Heather, Calgary, Alta.......................... Member of Parliament
Fralick, Ms. Pamela, Toronto, Ont.......................... Canadian Cancer Society
Francoeur, Dr. Diane, Montréal, Que.......................... Fédération des médecins spécialistes du Québec
Fréchette, Mrs. Danielle, Ottawa, Ont.......................... Royal College of Physicians and Surgeons of Canada
Frinton, Dr. Vera, Vancouver, BC.......................... CMA Honorary Member
Fry, The Hon. Dr. Hedy, Ottawa, Ont.......................... Member of Parliament

Gandz, Dr. Jeffrey, PhD, London, Ont.......................... Member, CMAH Board of Directors
Gaulton, Ms. Catherine, Halifax, NS.......................... Canadian Patient Safety Institute
Geller, Dr. Brian, Saskatoon, Sask.......................... Saskatchewan Medical Association
George, Ms. Mary, Vancouver, BC.......................... British Columbia Medical Association
Gerace, Dr. Rocco, Toronto, Ont.......................... Federation of Medical Regulatory Authorities of Canada
Globerman, Mr. Misha, Toronto, Ont.......................... Presenter
Godin, Dr. Louis, Westmount, Que.......................... Fédération des médecins omnipraticiens du Québec
Gormley, Mr. Michael, Edmonton, Alta.......................... Alberta Medical Association
Graham, Dr. Neil, Black Diamond, Alta.......................... Member
Gray, Dr. John, Ottawa, Ont.......................... Canadian Medical Protective Association; CMA Honorary Member
Greschner, Ms. Lauren, Calgary, Alta.......................... IIR Healthcare
Groves, Dr. Lawrence, Brandon, Man.......................... Canadian Medical Protective Association
Gudapati, Dr. Sumathi, Whitehorse, YT .................. Member
Gwin, Mr. Verlin, Edmonton, Alta. .................. Alberta Medical Association

Halparin, Dr. Elliot, Georgetown, Ont. .................. Member
Harris, Dr. Kenneth, Ottawa, Ont. .................. Royal College of Physicians and Surgeons of Canada
Hayes, Dr. Marie, Sherbrooke, Que. .................. Member
Hébert, Ms. Chantal, Montreal, Que. .................. Presenter
Hnydyk, Dr. William, Edmonton, Alta. .................. Alberta Medical Association
Hobday, Mr. Ed, Saskatoon, Sask. .................. Saskatchewan Medical Association
Hollinshead, Dr. Robert, Calgary, Alta. .................. Member, CMAH Board of Directors
Hoven, Dr. Ardis, Chicago, Ill. .................. American Medical Association
Howatt, Dr. Eric, Kentville, NS. .................. Member, CMAH Board of Directors
Hunter, Mr. Clarke, Toronto, Ont. .................. YMCA Canada
Huston, Mr. Jim, Edmonton, Alta. .................. Alberta Medical Association
Hutchison, Ms. Sarah, Toronto, Ont. .................. Ontario Medical Association

Ikeji, Ms. Chisom, Whitehorse, YT .................. Medical Student

Jetha, Ms. Farah, Vancouver, BC .................. Medical Student
Jetha, Dr. Shamin, Vancouver, BC .................. Member
Johner, Ms. Tanessa, Saskatoon, Sask. .................. Saskatchewan Medical Association

Kendel, Dr. Dennis, Saskatoon, Sask. .................. Member
Khare, Dr. Umesh, Calgary, Alta. .................. Member
Kiefer, Dr. Gerhard, Calgary, Alta. .................. Member
Kitts, Ms. Jennifer, Ottawa, Ont. .................. Canadian Healthcare Association
Knight, Mr. Anthony, Fredericton, NB. .................. New Brunswick Medical Society
Krejcik, Dr. Vera, Calgary, Alta. .................. Canadian Association of Physicians with Disabilities
Krushel, Dr. Robert, Yellowknife, NWT .................. Member
Kustra, Mr. Ronald, Edmonton, Alta. .................. Alberta Medical Association

Laberge, Mr. Normand, Montréal, Que. .................. Quebec Medical Association
Lamoureux, Mr. Eric, Ottawa, Ont. .................. Alzheimer Society of Canada
Lane, Dr. Carolyn, Calgary, Alta. .................. Member
LeBlanc, Ms. Barb, Toronto, Ont. .................. Ontario Medical Association
Lee, Dr. Tzu-Kuang., Edmonton, Alta. .................. CMA Honorary Member
Lefebvre, Dr. Fleur-Ange, PhD, Ottawa, Ont. .................. Federation of Medical Regulatory Authorities of Canada
Lemaire, Dr. Jane Bertha, Calgary, Alta. .................. Presenter
Lemire, Dr. Francine, Mississauga, Ont. .................. College of Family Physicians of Canada
Lermer, Ms. Miriam, Vancouver, BC. .................. Medical Student
Loebach, Dr. Paul, Windsor, Ont. ......................... Member
Loree, Dr. Scott, Calgary, Alta. .............................. Member
Lubin, Dr. Stanley, Vancouver, BC ......................... CMA Honorary Member
Lundall, Dr. Evan, Red Deer, Alta. ......................... Member

MacCready-Williams, Ms. Nancy, Dartmouth, NS .......... Doctors Nova Scotia
MacKay, Dr. Hugh, Ottawa, Ont. .............................. Canadian Forces Health Services Group
MacLean, Mr. Andrew, Saint John, NB .................... New Brunswick Medical Society
MacLean, Mr. Bryan, St. John's, NL ......................... Canadian Association of Internes and Residents
MacLean, Dr. Catherine Ann, St. John's, NL ................ Member

MacPhail, Dr. Gisela, Calgary, Alta. ....................... Member
Maher, Mr. John, Fredericton, NB .......................... New Brunswick Medical Society
Maher, Ms. Kathy, Stratford, PEI ............................ Medical Society of Prince Edward Island
Maruca, Mr. Matt, Winnipeg, Man. ......................... Doctors Manitoba
Mayer, Dr. Stan, Calgary, Alta. ............................. Member
McAra, Mr. James, Calgary, Alta. ........................... Calgary Food Bank
McCullagh, Ms. Karen, Langdon, Alta. ..................... Award for Excellence in Health Promotion recipient
McFaul, Mr. Michael, Ottawa, Ont. ......................... Deloitte
McKay, Ms. Valerie, Ottawa, Ont. ............................ Canadian Association of Physician Assistants
McKnight, Dr. David, Toronto, Ont. ......................... Dr. William Marsden Award in Medical Ethics recipient
Meagher, Mr. Sean, Toronto, Ont. ........................... Canadian Doctors for Medicare
Milford, Ms. Nancy, Dartmouth, NS ........................ Doctors Nova Scotia
Miller, Mr. Gabriel, Ottawa, Ont. .......................... Federation of Canadian Municipalities
Mitchell, Dr. Ian, Calgary, Alta. ............................. Dr. William Marsden Award in Medical Ethics recipient
Mittelsteadt, Dr. Lyle, Edmonton, Alta. .................. Alberta Medical Association
Moineau, Dr. Geneviève, Ottawa, Ont. ..................... Association of Faculties of Medicine of Canada
Molnar, Dr. Geza, Brampton, Ont. ........................ Member
Montaner, Dr. Julio, Vancouver, BC ......................... CMA F.N.G. Starr Award recipient
Morin, The Hon. Mr. Dany, Ottawa, Ont. ................ Member of Parliament
Murray, Ms. Melissa, Dartmouth, NS ......................... Doctors Nova Scotia

Nadon, Mr. Robert, Montréal, Que. ........................ Quebec Medical Association
Naidu, Dr. Di, Saskatoon, Sask. .............................. Member
Neuheimer, Mr. Nick, Ottawa, Ont. ......................... Canadian Cardiovascular Society
Nichol, Dr. Rowland, Calgary, Alta. ......................... Canadian Society of Physician Executives
Nieman, Dr. Peter, Calgary, Alta. .......................... Member
Norton, Mr. Mark, Pakenham, Ont. ........................ Member, CMAH Board of Directors

O'Neil, Dr. David, Cochrane, Alta. .......................... CMA Honorary Member
Otte, Dr. Jessica, Vancouver, BC ............................ Presenter
Padayachee, Dr. Vino, Saskatoon, Sask.................................. Saskatchewan Medical Association
Padmos, Dr. Andrew, Ottawa, Ont.................................... Royal College of Physicians and Surgeons of Canada
Penny, Mr. Frank, Toronto, Ont........................................... Member, CMAH Board of Directors
Plant, Dr. Sandi, Brantford, Ont........................................... Member
Plitt, Mr. Cameron, Edmonton, Alta................................. Alberta Medical Association
Porter, Mr. Mark, Coventry, UK........................................... British Medical Association
Pratt, Mr. Courtney, Toronto, Ont...................................... Member, CMAH Board of Directors

Ram, Dr. Rithesh, Calgary, Alta........................................ CMA Award for Young Leaders recipient
Rapin, Dr. John, Kingston, Ont....................................... Chair, CMAH Board of Directors
Raza, Dr. Danyaal, Toronto, Ont....................................... Member
Rhule, Mr. Chris, Winnipeg, Man..................................... Canadian Association of Physician Assistants
Rink, Ms. Wendy, Saskatoon, Sask.................................. Saskatchewan Medical Association
Ritter, Mr. Robert, St. John’s, NL......................................... Newfoundland and Labrador Medical Association
Romanchuk, Dr. Kenneth, Calgary, Alta.......................... Member
Rorabeck, Dr. Cecil, London, Ont................................. Royal College of Physicians and Surgeons of Canada
Rossall, Mr. Jonathan, Edmonton, Alta............................. McLennan Ross
Roy, Dr. David J., Montreal, Que..................................... Presenter
Rupnarain, Ms. Shannon, Edmonton, Alta......................... Alberta Medical Association

Saldanha, Dr. Colin, Mississauga, Ont............................... Sir Charles Tupper Award for Political Action recipient
Sapsford, Mr. Ron, Toronto, Ont..................................... Ontario Medical Association
Saulnier, Mr. Marcel, Ottawa, Ont........................................ Health Canada
Saunders, Ms. Nancy, Saskatoon, Sask................................. Saskatchewan Medical Association
Sawler, Mr. Scott, Ottawa, Ont................................................ Health Canada
Sawyer, Mr. Rick, Winnipeg, Man......................................... Doctors Manitoba
Seckel, Mr. Allan, Vancouver, BC..................................... British Columbia Medical Association
Simpson, Mr. Jim, Toronto, Ont......................................... Ontario Medical Association
Singer, Ms. Heidi, Toronto, Ont........................................ Ontario Medical Association
Slessarev, Dr. Marat, London, Ont....................................... Resident
Smith, Mr. Sean, Calgary, Alta........................................ Alberta Medical Association
Soles, Dr. John, Clearwater, BC........................................ Member
Sosnowski, Dr. Terry, Spruce Grove, Alta.......................... CMA Honorary Member
Sparks, Mr. Ron, Kinburn, Ont.............................................. Telus Health
Sproule, Mr. John, Edmonton, Alta..................................... Office of the Minister of Health
Stanton, Dr. Eric, Toronto, Ont........................................... College of Physicians and Surgeons of Ontario
Steed, Dr. Clayne, Raymond, Alta.................................... CMA Honorary Member
Strasberg, Dr. Suzanne, North York, Ont............................. Chair, Presidents Forum; Member, CMAH Board of Directors
Stuart, Dr. Gavin, Vancouver, BC......................................... Member
Sullivan, Dr. William, Thornhill, Ont. ......................... Member

Taylor, Mr. Victor, Edmonton, Alta.............................. Alberta Medical Association
Thompson, Mr. Robert, St. John’s, NL............................ Newfoundland and Labrador Medical Association
Trachsel, Dr. Luxie, Edmonton, Alta............................. CMA Honorary Member
Trudeau, Dr. Jean-Bernard, Montréal, Que. .................... Member

Vaidya, Dr. Ann, Calgary, Alta................................. Member
Valk, Ms. Nadine, Montréal, Que................................. The Kidney Foundation of Canada
Venosa, Ms. Franca, Toronto, Ont................................ Ontario Medical Association
Vézina, Ms. Joanne, Verdun, Que............................... Member, CMAH Board of Directors
Viccars, Ms. Deborah, Vancouver, BC ......................... British Columbia Medical Association

Wapner, Miss Leah, Ramat Gan, Israel........................ Israel Medical Association
Wasylenko, Dr. Eric, Okotoks, Alta.............................. Presenter
Webb, Ms. Nancy, Toronto, Ont................................. Ontario Medical Association
Webber, Ms. June, Ottawa, Ont................................. Canadian Nurses Association
Welford, Mr. Philip, Toronto, Ont............................... Juvenile Diabetes Research Foundation
Williams, Ms. Kimberly, Calgary, Alta......................... Medical Student
Woollard, Dr. Robert, Vancouver, BC.......................... CMA Honorary Member
Wright, Mr. John, Ottawa, Ont................................. Canadian Institute for Health Information

Zelmer, Dr. Jennifer, Toronto, Ont............................. Canada Health Infoway
INTRODUCTION

1. The 146th Annual Meeting of the Canadian Medical Association (CMA) was held in the Telus Convention Centre in Calgary, Aug. 18-21, 2013. General Council met Aug. 19-21, 2013.

2. The 844 registrants included 566 members, observers, non-members, medical students, honorary members, visitors and staff, 197 spouses and guests, 47 youth and 34 media representatives.

3. The CMA thanked the members of the Planning Committee for their support in planning and promoting the 146th Annual Meeting.

Chair
Dr. Louis Hugo Francescutti

Chair, Spouse/Companion and Youth Programs
Mrs. Linda Francescutti

Members, Planning Committee
Mr. Ron Kustra, Alberta Medical Association (AMA)
Mr. Cameron Pitt, AMA
Ms. Charlene Daniel, AMA
Steven Mortimer, Vice-President, Strategy and Organizational Effectiveness, CMA
Michelle Gravelle, Director, Meetings and Travel Management, CMA
Sandra Wood, Manager, Annual Meeting, CMA

Official opening

4. On Monday, Aug. 19, 2013, at 8:30 am in the Calgary Telus Convention Centre, the speaker of General Council, Dr. Blake Woodside, called to order the 146th Annual Meeting of the CMA.

5. Dr. Woodside gave the opening invocation. He noted that it had been almost twenty years since the CMA’s General Council had last gathered in Calgary, and highlighted the resiliency of its residents in recovering and rebuilding following the disastrous floods of June 2013.

6. Dr. Woodside led members in a recitation of the Helsinki Declaration.

7. Dr. Woodside invited Respected Elder Casey Eagle Speaker of the Traditional Treaty 7 Territory to address General Council.

8. Respected Elder Casey Eagle Speaker welcomed delegates to Calgary. He highlighted the need to appreciate the uniqueness of every individual. He also said that a lifetime is a journey and spoke of the importance of enjoying today while learning from the past. He then provided a blessing.

9. Dr. Francescutti thanked Respected Elder Casey Eagle Speaker and presented him with a gift in appreciation.

10. Mr. Paul-Émile Cloutier, CMA Secretary General and CEO, introduced fellow members of the platform party:
Dr. Blake Woodside, Speaker  
Dr. Maria Alexiadis, Deputy Speaker  
Dr. Anna Reid, President  
Dr. Louis Hugo Francescutti, President-Elect  
Dr. John Haggie, Past President  
Dr. Michael Golbey, Chair, Board of Directors  
Dr. Brian Brodie, Honorary Treasurer  
Dr. Gail Beck, Member-at-Large, Executive Committee  
Dr. Martin Vogel, Vice-President, Community Building  
Ms. Heather Nowlan, Manager, Board Administrative Services and Recording Secretary

11. Mr. Cloutier introduced the CMA Board of Directors in attendance:

- Dr. Ngozi Ikeji, Yukon Medical Association
- Dr. Ewan Affleck, Northwest Territories Medical Association
- Dr. Christopher Doig, Alberta Medical Association
- Dr. Noel Grisdale, Alberta Medical Association
- Dr. Boyd Stewart, Saskatchewan Medical Association
- Dr. Margaret Speer, Doctors Manitoba
- Dr. Christopher Jyu, Ontario Medical Association
- Dr. Stewart Kennedy, Ontario Medical Association
- Dr. Tim Nicholas, Ontario Medical Association
- Dr. Virginia Walley, Ontario Medical Association
- Dr. Pierre Harvey, Québec Medical Association
- Dr. Laurent Marcoux, Québec Medical Association
- Dr. Jane Brooks, Doctors Nova Scotia
- Dr. Rody Canning, New Brunswick Medical Society
- Dr. Scott Cameron, Medical Society of Prince Edward Island
- Dr. Brendan Lewis, Newfoundland and Labrador Medical Association
- Dr. Gillian Shiau, Resident
- Dr. Robin Clouston, Student

12. Mr. Cloutier then introduced the past officers in attendance:

- Dr. William D. S. Thomas, President, 1980-81
- Dr. Thomas Alexander McPherson, President, 1984-85
- Dr. John O’Brien-Bell, President, 1988-89
- Dr. Marcien Fournier, President, 1989-90
- Dr. Lionel Lavoie, President, 1990-91
- Dr. Bruno L’Heureux, President, 1994-95
- Dr. Victor Dirnfeld, President, 1997-98
- Dr. Allon Reddoch, President, 1998-99
- Dr. Hugh Scully, President, 1999-2000
- Dr. Henry Haddad, President, 2001-02
- Dr. Dana Hanson, President, 2002-03; Speaker of General Council, 1999-2001; President, World Medical Association, 2009-10
- Dr. Sunil Patel, President, 2003-04
- Dr. Albert Schumacher, President, 2004-05
- Dr. Ruth Collins-Nakai, President, 2005-06
Dr. Colin McMillan, President, 2006-07; Chair of the Board, 1993-97
Dr. Robert Ouellet, President, 2008-09
Dr. Anne Doig, President, 2009-10
Dr. Jeffrey Turnbull, President, 2010-11
Dr. Douglas Perry, Speaker of General Council, 1993-98; Chair of the Board, 2000-2004
Dr. Louise Cloutier, Chair of the Board, 2004-08
Dr. Christopher Varvis, Speaker, General Council, 1978-87
Dr. Margaret Kirwan, Speaker, General Council 2006-10
Dr. Léo Paul Landry, Secretary General, 1986-99
Mrs. Barbara Drew, Acting Secretary General, 2000-01 and 2008-09

Opening remarks

13. Dr. Anna Reid, CMA president, welcomed General Council delegates and special guests. She introduced this year’s theme, *Canada’s Physicians: Leadership in Changing Times*. She highlighted that this theme is timely as physicians are leading in health and society.

14. Dr. Reid called upon Associate Minister of Wellness Dave Rodney who brought greetings on behalf of the government of Alberta.

15. Mr. Rodney welcomed delegates on behalf of Premier Alison Redford, Minister of Health Fred Horne and the Alberta government. He also acknowledged his legislative assembly colleagues and federal Minister of Health, Rona Ambrose.

16. Mr. Rodney thanked Alberta physicians for their tireless efforts related to the recent flood; noting than many were not only personally affected, but had also taken a leadership role in responding to the issues that arose. He said he was pleased that so many Albertans are taking up important leadership positions in health and he congratulated Dr. Louis Hugo Francescutti on his election as incoming CMA President.

17. Mr. Rodney noted Premier Redford’s role as co-chair of the Council of the Federation’s Health Innovation Working Group and Minister Horne's upcoming role as the chair of the provincial/territorial ministers of health and as co-chair of the federal/provincial/territorial conference of ministers. He also noted the importance of physician input in addressing health care issues.

18. He highlighted the new seven-year agreement between the government of Alberta and the medical profession and noted their commitment to collaborate on new electronic medical records, to find system-wide efficiencies and to evolve primary care. He also noted the development of provider-led strategic clinical networks in various specialities in Alberta to enhance quality care across the province.

19. In closing, he noted that there are many initiatives underway across the country and opportunities to learn about them over the next few days, and he expressed his appreciation for all that physicians do as leaders and wished everyone a successful meeting.

20. Dr. Reid introduced Dr. Michael Giuffre, President of the Alberta Medical Association.

21. Dr. Giuffre, on behalf of the Alberta Medical Association, welcomed delegates. He highlighted that the past year saw the finalization of an agreement between the physicians of Alberta and the provincial government
that, coupled with its consultation agreements, will ensure that physicians are integral to health care decision-making and system improvements.

22. Dr. Giuffre highlighted that the southern Alberta flooding was the worst in the history of the province and said that the outpouring of volunteerism and compassion that followed has been inspiring. He said that the “Come Hell or High Water” slogan has become a “recovery mantra” as people determinably struggle to return to normal in their practices, communities and lives.

23. In closing, he said that over the next few days, delegates’ decision-making would be guided by the needs and wishes of the patients for whom they care, and he encouraged delegates to also take advantage of all the fun and amenities available in Alberta.

Address by the Minister of Health

24. Dr. Reid introduced the Hon. Rona Ambrose, Minister of Health, to General Council.

25. Ms. Ambrose began by expressing her appreciation for the warm welcome received. She noted that the meeting provided her with an important opportunity to listen to physicians and to forge a true partnership early in her tenure as federal minister of health. She said that she comes to the role with an open mind and an open door.

26. Ms. Ambrose highlighted the CMA’s leadership in health care transformation including the areas of clinical practice guidelines and the social determinants of health. She also noted that the results of CMA’s 2013 National Report Card on Health Issues poll are not surprising; health care demographics (e.g., seniors’ care) are a real issue and one that she will raise with her provincial/territorial colleagues.

27. Ms. Ambrose noted that one of her areas of focus is on ending family violence which disproportionately affects women and which threatens physical and mental health and communities. She said that Justice Canada reports that spousal violence alone costs society $7.4B annually and expressed her commitment to working with all levels of government on this issue. She said that the government has already committed $8.5M over five years to support research under the Canadian Institute on Health’s Violence, Gender and Health Initiative.

28. Ms. Ambrose stressed the government’s commitment to the Canada Health Act and to ensuring its sustainability through productivity gains, research, technology and innovation. She said that Canada spends over 11% of its annual gross domestic product on health and costs will continue to increase. She said that in order to transform health care we must acknowledge what is working well, what is not, be open to change and take appropriate action.

29. Ms. Ambrose said that the best answers often lie outside the government and that she will continue a dialogue with health stakeholders on the productivity of the health care system and improving the health of Canadians.

30. Ms. Ambrose also said that it was important to work together in promoting healthy living and improving the health of Canadians through preventative measures.

31. Ms. Ambrose said that the federal government’s leadership has provided better and more integrated health care to First Nation and Inuit Peoples. She also said that the federal government has focused on consumer and product safety (e.g., plain language labelling initiative) and has modernized the Consumer Product Safety
She said that she looks forward to sharing more in the coming months on steps the government is taking to continue to protect the health and safety of Canadians. She also said that the federal government is the largest investor in health care innovation and that physicians would hear more from her in the coming months.

32. In closing, Minister Ambrose expressed her appreciation for having been invited to address General Council, and said she was very committed to working with the CMA and with the provinces and territories to collaboratively provide for high standards of health and health care.

33. Dr. Francescutti thanked the minister for addressing General Council and presented her with a token of appreciation.

Honoured guests

34. The speaker introduced CMA international guests and visiting dignitaries present at General Council:

Dr. Ardis Hoven, President, American Medical Association
Dr. Mark Porter, Chair of Council, British Medical Association
Miss Leah Wapner, Secretary General, European Forum of Medical Associations and Secretary General, Israeli Medical Association
Dr. André Bernard, CMA representative to the World Medical Association

35. Dr. Woodside then introduced Members of Parliament, senators and public officials who would be present for a portion or all of the General Council proceedings:

The Hon. Dr. Carolyn Bennett, Member of Parliament
The Hon. Dr. Hedy Fry, Member of Parliament
The Hon. Dany Morin, Member of Parliament

General Council Procedure

36. Bylaw 10.4.1 (c) states that “The Speaker shall have the authority to establish a Resolutions Committee.” Dr. Woodside announced that besides him the 2013 Resolutions Committee comprised Drs. Maria Alexiadis (Deputy Speaker and Chair), Joel Yelland, Alan Gow, Daniel Tardif and Ernst Schuster.

37. Dr. Woodside sought consideration of a proposal that, time permitting, late resolutions would be brought forward for discussion by deliberation by General Council but, if passed, would not be deemed policy but stand as advisory to the Board. General Council approved this by show of hands.

Electronic voting

38. Dr. Woodside referred delegates to their keypads and provided instructions on how to use them. He then asked General Council to vote, by show of hands, on the use of electronic voting for the meeting; voting is anonymous.

[Note: All resolutions that appear in these proceedings were duly moved and seconded.]
General Council approves the use of electronic voting at its 2013 meeting unless manual voting is requested by the speaker or General Council for a specific vote.

Resolution 13-1 Carried

39. Owing to technical difficulties, some of the voting during the meeting was subsequently done by show of hands.

Rules of conduct, 2012 Proceedings and 2013 Reports to General Council

40. Dr. Woodside proposed to continue using consent agendas at General Council. He provided an overview of their use, which allows non-controversial and procedural motions to be approved “en bloc.” He noted that these agendas were introduced to increase the amount of time available at General Council for motions requiring discussion and debate.

41. He also described the process available to request that a motion be removed from the consent agenda, and said all such motions will be added to the end of the appropriate strategic or delegate motion group, and will be considered in the order received.

General Council approves the use of consent agendas at its 2013 meeting for strategic and delegate motion sessions as proposed by the speaker and outlined on page 8 of the 2013 Reports to General Council.

Resolution 13-2 Carried

42. Dr. Woodside highlighted that the motion ranking process was eliminated following a trial the previous year that had received positive delegate feedback. He noted that the order of debate for motions within each group would be based on the date and time motions were received; delegates’ motions would not be grouped.

General Council approves the revised 2013 timetable as circulated in the delegate registration kit.

Resolution 13-3 Carried

43. Dr. Woodside asked delegates to refer to page 9 of the 2013 Reports to General Council. He presented delegates with an omnibus motion for approving procedural motions pertaining to the rules of conduct for the meeting and for strategic and delegates’ motions, approval of the Proceedings of the 145th Annual Meeting, and acceptance of the narrative sections of the 2013 Reports to General Council.

General Council approves ‘en bloc’ the procedural rules/motions of the speaker SP 0-5, SP 0-6, SP 0-7, and SP-08 as outlined on page 9 of the 2013 Reports to General Council.

Resolution 13-4 Carried

General Council adopts the rules relating to the strategic session and delegates’ motions as proposed by the speaker and outlined on page 8 of the 2013 Reports to General Council.

Resolution 13-5 Carried
In keeping with Canadian Medical Association bylaw 18.1, the rules of conduct for this meeting as outlined on pages 6 and 7 of the 2013 Reports to General Council are adopted.

Resolution 13-6
Carried


Resolution 13-7
Carried

The narrative sections of the 2013 Reports to General Council – 146th Annual Meeting of the Canadian Medical Association are received for information.

Resolution 13-8
Carried

44. Dr. Woodside indicated that under the CMA bylaw 12.3.4 (c) “The following may submit a nomination for the office of president-elect… which shall be carried out in accordance with the Association’s Operating Rules and Procedures: …any 5 delegates provided that such nomination is presented to General Council in session on the first day of General Council.” The speaker announced that any further nominations must be presented to the chair of the Committee on Nominations through the Resolutions Committee by the end of Monday’s General Council session.

Committee on Archives and Awards

45. Dr. Woodside introduced Dr. Ruth Collins-Nakai, Chair of the Committee on Archives and Awards.

46. Dr. Collins-Nakai asked members of General Council to stand and observe a minute of silence to remember and recognize colleagues who had died during the previous year.

47. Dr. Ruth Collins-Nakai then presented the committee’s report, and said they are pleased to play a role in supporting the CMA’s vision by recommending award recipients from among the many excellent nominations received. She also reminded delegates of the process and deadline to submit nominations for CMA awards.

48. Dr. Collins-Nakai outlined CMA’s Awards and noted the addition of the Dr. John McCrae Memorial Medal to recognize the tremendous contributions of clinical health services personnel in the Canadian armed forces. The inaugural award presentation will take place in 2014 and coincide with the 100th anniversary of the First World War.

49. Dr. Collins-Nakai also highlighted the establishment of a Young Leaders Political Advocacy Award to recognize a resident or student who is a member of the CMA MD-MP contact program and who has demonstrated exemplary leadership in advancing CMA policy at the federal level.

50. In closing, Dr. Collins-Nakai encouraged members to share their ideas for the 2017 celebration of CMA’s 150th anniversary.
Board of Directors Report

51. Dr. Maria Alexiadis, Deputy Speaker, called upon Dr. Michael Golbey, Chair of the Board of Directors, to present his report.

52. In his fifth and final report to General Council, Dr. Golbey began by expressing the association’s appreciation to the host city of Calgary, its citizens and, in particular, its physicians who helped to ensure the health and safety of Albertans affected by the June flooding.

53. Dr. Golbey reflected on the accomplishments of the association as it strives toward the goal of ensuring equitable and timely access to health care for all Canadians. He highlighted the commitment of CMA’s elected officials and staff and the dedication of Canadian physicians in implementing new initiatives as seen in the “Canada’s Doctors. Innovating for Patients.” campaign.

54. Dr. Golbey referred to the results of the CMA’s 2013 national report card which included seniors’ care, advance care directives and care at the end of life. He highlighted that 93% of respondents indicated that Canada needs a national strategy on health care for seniors and 78% indicated that the federal government has an important role to play in this area. He said that 90% of respondents indicated that such a strategy would improve our health care system by finding ways to keep elderly patients at home for as long as possible, rather than in hospitals or long-term care facilities. He also highlighted that 57% of respondents identified access to at home end-of-life care as a very high priority.

55. Dr. Golbey also discussed priorities and accomplishments for 2012-13, including:
   - advocacy for health care transformation through online and town hall dialogue and in support of other CMA priorities (e.g., the social determinants of health)
   - collaboration with provincial/territorial medical associations (PTMAs), affiliates and other stakeholders on many issues including health care transformation, collaborative care, physician resources, etc.
   - collaboration with the Canadian Medical Foundation and PTMAs on the establishment of the Canadian Physician Health Institute, a national program promoting physician health and wellness
   - the knowledge for practice strategy and collaborative models PTMAs for the delivery of products, programs and services
   - the Board’s report and recommendations flowing from the Governance Committee’s extensive consultations in relation to the 5-year review of the 2008 governance changes

56. Dr. Golbey also outlined goals for the coming year, including:
   - a refresh of the three-year CMA strategic plan for 2015-2017
   - further integration of the CMA and MD Physician Services’ value proposition by examining options to address membership growth and retention challenges
   - continued work with the Council of the Federation’s Health Care Innovation Working Group, which is developing recommendations for reforming the delivery of health services
   - defining physicians unique value within a team-based approach, close the gap on the publics’ and physicians’ perspectives, and define the future of the medical profession

57. Dr. Golbey also highlighted that the Board believes that the Canadian Medical Association Journal (CMAJ) is a key part of the CMA’s value proposition. He said that the Journal continues to struggle financially owing mainly to a decline in advertising revenue. He said that the Board had recently passed a resolution affirming its strong support for the continued publishing of the CMAJ and had asked that staff continue to closely monitor its finances and report back to the Board as part of the annual budget process.
58. In closing, Dr. Golbey reflected on the leadership and many accomplishments of Dr. Anna Reid and expressed his appreciation for her dedication to the profession and, in particular, her devotion to addressing the social determinants of health. He also expressed his appreciation to retiring Board members, past president Dr. John Haggie, the core committees, fora, and working groups without whom the CMA could not achieve its goals. He thanked the Secretary General and CEO Paul-Émile Cloutier and CMA staff for their work in supporting Canada’s doctors.

59. Following his presentation, a question was entertained on the General Council delegates’ selection process and its impact on grassroots member engagement.

60. Dr. Anna Reid rose on a point of personal privilege to thank Dr. Golbey for five consecutive years in the role of Chair. She expressed appreciation for his good nature, wisdom and facilitation skills in shepherding the Board through difficult policy and business issues and presented him with a gift to commemorate his term as Chair of the Board.

61. Delegates rose in a standing ovation in recognition of Dr. Golbey.

**Committee on Finance**

62. In accordance with General Council’s Resolution 90-80, the report of the Committee on Finance was presented before consideration of the motion on membership dues for 2014 contained in the Board of Directors report on p. 45 of the 2013 Reports to General Council.

63. Dr. Golbey referred members to the committee’s report (pp. 53-66 of the 2013 Reports to General Council) and invited Dr. Brian Brodie, Honorary Treasurer, to present.

64. Dr. Brodie noted that a rigorous review of CMA’s products, services and programs was underway and that the realignment of the organization’s work to the strategic plan included a reduction in 2010 of approximately 10% of CMA’s workforce which resulted in $1.8M in annualized savings since 2011.

65. Dr. Brodie said that change was needed as the CMA has experienced growing membership lapse rates and low usage of some of its products. He said that success would be measured by membership retention, growth and use of products and services. He noted that the CMA had fallen behind in its technology and that the $4.5M customer relationship management system provided the infrastructure needed to understand members better and allow the CMA to provide those products and services most valued by each member segment.

66. Dr. Brodie also highlighted key 2012-2014 organizational investments including:
   - $5.5M over three years for the refresh of cma.ca
   - $5.5M core annual operating budget for knowledge for practice offerings (i.e., CMAJ, on-line clinical tools and leadership programs)
   - over $1M in the “Canada’s Doctors. Innovating for Patients.” campaign
   - $1M – 1.5M annually in support of publishing CMAJ

67. Dr. Brodie said that, in order to fund these initiatives, the Board looked at three strategies: substantial savings from restructuring and realignment (e.g., seven products were discontinued); the planned and purposeful use of reserves (i.e., $5.5M in 2012 and $3M in 2013); and the request for membership support through a dues increase.
68. Dr. Brodie highlighted some of the financial challenges ahead including pension plan changes requiring solvency deficit funding, shifts in the medical publishing industry, and the aging CMA office building. He also noted that further use of reserves is not recommended given that the CMA is now below the industry standard; the CMA reserves are $18M against a recommended minimum of $22M (i.e., 6-9 months of operating budget).

69. In closing, Dr. Brodie noted that since 2001, the CMA has taken an incremental approach to membership dues that have ranged from $10 to $20 per year. He said that the proposed 2014 increase of $45 would partially cover the budget requirements and allow the CMA to deliver on its priorities. He said that the Board is committed to annually evaluating member value, operational efficiencies and strategic alignment to achieve a balanced budget.

70. Following his presentation, questions were invited; none was indicated.

71. Dr. Golbey thanked Dr. Brodie for his work as Honorary Treasurer over the past year and congratulated him on his appointment as the new Chair of the CMA Board of Directors, which takes effect Aug. 22, 2013.

**Stewardship report from the CMA Secretary General and CEO**

72. Secretary General and CEO Paul-Émile Cloutier presented his fifth stewardship report.

73. Mr. Cloutier said that it was an honour and a privilege to be the CEO of an association that works for physicians whose calling is fundamental to the health and wellbeing of society.

74. Mr. Cloutier noted that, since he took over as CEO in 2009, the CMA recast itself through the development of a new strategic plan, streamlining of departments and reductions in staff, and a focus on knowledge for practice products and services. He also said that the adoption of a balanced scorecard provided for the alignment of strategic and financial planning and the cull of underperforming products. These changes were undertaken to make the CMA more relevant and effective and to provide exclusive access to the best knowledge for practice tools, wealth management advice and a national voice that shapes and defines health care for Canadians.

75. Mr. Cloutier indicated that membership stood close to 80,000 members as a result of improved renewal rates, and strategic collaboration in developing products, services and information. CMA will continue to build on this momentum to ensure it provides value and relevance through indispensable products and services.

76. Mr. Cloutier noted that successful associations are proactive and responsive to change, and that the Board of Directors is firmly committed to an ambitious agenda that will focus on advocacy and representation, knowledge products and financial services. As such, the CMA has intensified its focus by:

- implementing a $4.5M customer relationship management to enable the tracking of interactions with members to yield greater responsiveness
- collaborating further with MD Physician Services to provide financial products and best-in-class clinical solutions
- investing in clinical tools, *CMA* and cma.ca to provide physicians with easy access to the latest and best medical knowledge
- further communicating the CMA value to members
In closing, Mr. Cloutier expressed his appreciation to Drs. Reid, Golbey and members of the Board for their vision, leadership, and support. He also thanked staff for their constant efforts on behalf of the medical community.

_The Canadian Medical Association (CMA) approves the Canadian Academy of Sport and Exercise Medicine's application for CMA affiliate status._

Resolution 13-9

**Carried**

**Special Session on Governance Review**

78. Dr. Scott Cameron referred delegates to Appendix 4 of the 2013 Reports to General Council (Five-Year Review of the Governance Changes Implemented in 2008).

79. Dr. Cameron noted that the Governance Committee has, through the Board, reported to General Council annually since 2009, and that most of the recommendations were fully implemented.

80. Dr. Cameron summarized the committee’s work over the past year which included extensive consultation and had resulted in their recommendations to:
   - merge governance-related committees (Governance, the Board’s Continuous Governance Improvement Committee and Bylaws);
   - realign the Political Action Committee to comprise additional Board members and full provincial and territorial representation;
   - amend the composition of the Committee on Health Policy and Economics to include full provincial and territorial representation;
   - assign primary responsibility for the organization’s overall risk management to the Board;

81. In closing, Dr. Cameron thanked the members of his committee and highlighted that the expert advisors had noted that the “CMA has one of the most robust governing systems among associations in Canada…”

82. Following Dr. Cameron’s presentation, questions were entertained on the accountability framework for PTMAs; the selection of General Council delegates; the ability of grassroots members to participate more fully and to communicate with Board members, the elections process and organizational transparency.

_The Canadian Medical Association adopts the Board of Directors' final report and recommendations on governance review as outlined in Appendix 4 to the 2013 Reports to General Council._

Resolution 13-10

**Carried**

83. For ease of reference, the report’s recommendations are outlined below:

Recommendation GR 13-1:
The Canadian Medical Association will merge the Governance Committee, Continuous Governance Improvement Committee and Committee on Bylaws into one overall reconstituted ‘Governance Committee.’ The new committee may, as needed, set up subgroups and/or task forces to support aspects of its work.
Recommendation GR 13-2:
The Canadian Medical Association realigns the political action function into a newly constituted committee comprised of Board members, members at large, one student representative and one resident representative.

Recommendation GR 13-3:
The composition of the Committee on Health Policy and Economics is changed to include one representative from each provincial/territorial medical association, one student and one resident representative and one Board representative.

Recommendation GR 13-4:
The Canadian Medical Association assigns primary responsibility for oversight of the organization’s overall risk management to the Board of Directors, with the Executive Committee providing support as necessary.

Recommendation GR 13-5:
The Canadian Medical Association will amend its bylaws and operating rules and procedures to reflect the changes adopted in Appendix 4 to the 2013 Reports to General Council.

Strategic session 1: End-of-life Care in Canada

84. The speaker opened the session and noted it would be held in Committee of the Whole format to inform policy development.

85. Dr. Reid introduced the first strategic session, End-of-life Care in Canada.

86. Dr. Reid highlighted that care at the end of life is a critically important issue for Canadians. She noted that current court cases and legislative changes will shape the approach to end-of-life care for years to come and highlighted the need for physicians to show leadership in this area.

87. Dr. Reid introduced the Hon. Sharon Carstairs, PC, and highlighted her work as a member of Senate committees that examined hospice palliative care, as chair of the Special Senate Committee on Aging, and related reports on palliative care in Canada.

88. Ms. Carstairs noted that palliative care is a relatively new discipline and highlighted the lack of medical school training in this area; the number of training hours in medical schools range from 56 to none. She said that there were many pivotal events in the 1990s including the Latimer and Rodriguez legal cases.

89. Ms. Carstairs also noted the increasing stress on the health care system; it is projected that in the next 20 years, the aging population will bring about 450 thousand deaths per year. She said that there is a need for an integrated care model, a national strategy on care giving, and access to a 24-hour care system. She said that there is a need to provide support and financial compensation to family members who provide care to dying loves ones. She also called on the physicians to stand up and make quality end-of-life care the right of every Canadian.

90. Dr. Reid introduced Dr. Paul Boucher and highlighted his work as the interim head of the department of critical care medicine at the University of Calgary, as co-chair of the department’s Patient and Family Centred Care Committee and as a champion of end-of-life care.
Dr. Boucher said that advance care planning is a reflective and ongoing process by which people express their values and priorities to prepare for care at the end-of-life, and that this may progress to a formal legal document to provide direction to a care team. He noted that, while often criticized as providing specific direction and vague language, they do serve as a springboard for discussion with surrogate decision-makers.

Dr. Boucher highlighted that more than 70% of individuals facing treatment decisions at the end-of-life require substitute decision-makers. He said that, while those at high risk of death within the next six months should discuss advance care planning, everyone could benefit from them regardless of age or burden of disease. He called on the need to follow up on these opportunities as they arise and to follow through on the direction given.

Dr. Boucher noted that communication methods depend on a range of factors and could supplant a fulsome conversation between an individual and his/her surrogate. He highlighted that, while a universal electronic health record may meet this need, it also raises legitimate concerns about information accuracy and privacy.

Dr. Boucher also referenced the National Framework for Advance Care Planning in Canada comprising engagement, education, system infrastructure and continuous quality improvement. He said it is important to note that patients and their families have a central role in these elements. He also cited the Care at the End of Life project whose mandate included harmonizing resuscitation policy, facilitating advance care planning and enhancing the role of palliative care. Their “Advance Care Planning and Goals of Care Policy” was also highlighted.

Dr. Reid introduced Dr. David Roy, founder and director of the Centre for Bioethics at the Clinical Research Institute of Montreal, founder, director and coordinator of the Quebec Research Network in Clinical Ethics, and Editor-in-Chief of The Journal of Palliative Care.

Dr. Roy highlighted the evolution of physician-assisted death (i.e., physician administered) in Canada including:
- the former Law Reform Commission of Canada’s 1983 recommendations (i.e., that the Criminal Code not be amended to legalize euthanasia or aiding suicide)
- the 2012 Supreme Court of British Columbia’s granting of a constitutional exemption in the Carter case
- Quebec’s Bill 52 that sets the conditions under which “medical aid in dying” can be authorized

Dr. Roy also spoke of key questions in medical ethics including whether euthanasia is a justifiable extension of, or contradiction of, the medical mandate; if legalized, whether physicians should be the ones to administer and the protocols necessary to prevent abuse.

Dr. Reid introduced Dr. Eric Wasylenko, rural family physician and palliative care consultant, who lead the creation of a private, not-for-profit rural hospice home. Dr. Wasylenko chairs the Public Health Ethics Consultative Group for the Public Health Agency of Canada.

Dr. Wasylenko spoke of the interface between end-of-life care and primary care physicians that are uniquely placed to understand, inform and guide patients and families. He noted end-of-life care requires knowledge, skills and attitude, and that physicians need to embrace late life care, palliative care and terminal care. He also noted the need for advocacy for, and participation in, comprehensive end-of-life programs, outreach and informing patients where to access care.

The speaker sought General Council’s consideration of a motion to move into Committee of the Whole.
General Council adjourns and moves into Committee of the Whole to consider and discuss the Canadian Medical Association document entitled “End-of-Life Care in Canada.” General Council requests that the Speaker of General Council preside as Chair during this Committee of the Whole session.

Resolution 13-11 Carried

101. Dr. Woodside outlined key strategic questions in the following areas:
- What can physicians and the CMA do to promote the uptake of advance care plans by patients in Canada?
- Where are the major gaps in access to palliative care in your communities?
- What are the challenges physicians and their patients experience in attempting to access palliative care services?
- What needs to be done in Canada to enable the integration of end-of-life care across the continuum of health care services?
- How should physicians and medical organizations respond if euthanasia and/or physician-assisted suicide were to become legal in Canada?

102. Many issues were discussed, including: society’s right to define its quality of life and social justice needs; individuals’ need to end their life journey with respect and control; the need to provide financial resources and system supports to provide care in the patients’ setting of choice; the need for physician education and training; the need for guidelines to support patients and physicians; and concerns relating to physicians’ ethical perspectives including prevention of possible misuse.

103. Dr. Woodside thanked members for their advice and direction and noted that their input will be assistive in further CMA policy development in this important area.

The Committee of the Whole will rise from consideration of the Canadian Medical Association document entitled “End-of-Life Care in Canada” and report to General Council.

Resolution 13-12 Carried

General Council directs the Canadian Medical Association (CMA) Board of Directors to ensure the content of the Committee of the Whole discussion on the document entitled “End-of-Life Care in Canada” is reflected in the development of CMA policy.

Resolution 13-13 Carried

104. Dr. Reid closed the session by thanking delegates for their thoughtful feedback and noted that this would inform CMA’s policy development and communications proposals.

105. On Tues., Aug. 20, 2013, Dr. Woodside opened by welcoming invited guests from other national medical and health organizations in Canada. He also acknowledged the many other medical and non-medical stakeholders who are taking part in the annual General Council meeting; a number that continues to grow over the years.

106. Dr. Marie-Dominique Beaulieu brought greetings on behalf of the College of Family Physicians of Canada.

107. Dr. Cecil Rorabeck brought greetings of behalf of the Royal College of Physicians and Surgeons of Canada.
Audit Committee

108. Dr. Robert Broad, chair of the Audit Committee, presented the committee’s report to General Council.

109. Dr. Broad identified members of the committee and thanked them for their hard work and dedication.

110. Dr. Broad referred to the 2013 Audit Committee Report to General Council and highlighted that CMA’s auditors, PricewaterhouseCoopers, presented the CMA with an unqualified audit report and assurance that CMA’s financial statements were prepared with the basis of accounting described in the notes and free of any material misstatements. He said that the CMA had recorded the investment in CMA’s subsidiaries on a historical cost basis and that this had been a recommendation made in 2011 by the Audit Committee and approved by the CMA Board and General Council.

111. Dr. Broad also noted that the Board supported the Audit Committee’s recommendation that the 2012 audited financial statements be accepted by General Council.

112. Questions were invited; none was asked.

_The Canadian Medical Association accepts the 2012 audited financial statements, attached as Schedule A to the 2013 Audit Committee Report to General Council._

**Resolution 13-14**

Carried

113. Dr. Broad said that the recommendation for the re-appointment of the auditors was based on the Audit Committee’s assessment of PricewaterhouseCoopers’ services during 2012; the request for proposals process conducted in 2010; the efficiencies derived from having the same auditors for the CMA and its subsidiaries; and the audit costs.

_The Canadian Medical Association will retain PricewaterhouseCoopers as auditors for the 2014 association fiscal year._

**Resolution 13-15**

Carried

Membership Fees

114. Following the Audit Committee report, Dr. Michael Golbey presented the Board’s recommendation with respect to the full membership fee for 2014, contained in the Board of Directors report on p. 45 of the 2013 Reports to General Council.

115. A delegate noted concern that the CMA is not in alignment in some of its financial practices compared to other organizations and called upon CMA to return to its core values and products and services.

_The Canadian Medical Association full membership fee for the year 2014 will be $495._

**Resolution 13-16**

Carried
CMA’s Group of Subsidiary Companies

116. The chair of the CMA Holdings Inc. (CMAH) Board of Directors, Dr. John Rapin, presented his report to General Council on governance matters during the last 12 months.

117. Dr. Rapin noted that CMAH is a wholly owned subsidiary of the CMA that reports to General Council annually and to the CMA Board regularly. He outlined CMAH’s Board structure, composition, appointment process and membership. He noted that most of the members of the CMAH Board were attending the meeting and he invited delegates to take the opportunity to meet them.

118. The president and CEO of MD Physician Services (MD), Mr. Brian Peters, then presented his eighth stewardship report. He highlighted that since his last annual report, MD has performed exceedingly well on all fronts and is delivering more value to members. He said that MD has a new strategy to focus its efforts; its business results have been exceedingly good and its performance is strong.

119. Mr. Peters highlighted that a key accomplishment was the creation of its strategy for 2013-2017 that builds upon the physician-driven strategy and integrated member experience; the strategy focuses on the client experience, advice of unparalleled quality, a learning organization framework, and a continuing focus on organizational excellence.

120. Mr. Peters said that client feedback indicated a clear preference for a team of experts and an integrated total wealth management experience, and that this requires them to understand clients and add value for them through every career and life stage. He said that business focus was required to do so and that the sale of the electronic medical records business in the first quarter of 2013 has allowed them to return to their financial services roots.

121. Mr. Peters also provided an overview of the financial results. He said that investor confidence had grown and that investors were recommitting to equities resulting in money flowing through MD and the industry. He said that MD crossed a milestone by closing 2012 with $31B in assets entrusted to them. He said MD experienced $300M in revenue, a record level, and managed its expenses at approximately $7M below budget. A reinvestment in clients through enhancements, innovation and service was also noted. He also indicated that the organization was able to serve clients seamlessly despite a devastating fire that displaced more than 500 people at its head office.

122. Mr. Peters highlighted MD fund performance will continue to rise over the year; MD outperforms its competitors when comparing 10-year performance of fund families. He noted that J.D. Power has recognized MD as the only financial institution with a “five circle rating” three years in a row and their service quality management ratings show 89% are very satisfied (i.e., 20 points higher than other financial institutions).

123. In closing, Mr. Peters said that knowing that clients value their service is the most satisfying measure. He encouraged CMA members who have benefitted from MD to speak of its value to colleagues. He said that, unlike banks, MD is owned by CMA members and he asked them to help them to continue to put members first.

124. Following his remarks, questions were entertained on topics including services and strategies for retired physicians, the ratio of physician and physician-sponsored clients, support to electronic medical records clients following the sale to Telus, advisor performance, services offerings and support for residents and students, and the fire at 1870 Alta Vista.
Strategic session 2: Physician Resources: Realigning the Post-graduate System to Support the Future of Health Care Delivery in Canada

125. The deputy speaker called upon Dr. Reid to introduce the strategic session entitled, Physician Resources: Realigning the Post-graduate System to Support the Future of Health Care Delivery in Canada.

126. Dr. Reid said that the issue of physician resources resurfaced as a priority for the CMA Board in 2011, following anecdotal evidence, later corroborated by surveys, of new graduates having difficulty in finding full-time positions in their specialty or sub-specialty. She said that the sufficiency of physical and health human resources infrastructure, and the appropriate mix of post-graduate training positions have been identified as concerns.

127. Dr. Jesse Pasternak, Chair of the Canadian Association of Internes and Residents’ (CAIR) Standing Committee on Health Human Resources, highlighted the lack of a national strategy to ensure that Canada has the appropriate physician mix to align with Canada’s needs.

128. Dr. Pasternak noted that the physician resources issue is urgent and worsening. CAIR’s 2013 National Resident Survey indicated that 17% of residents would seek acceptable employment elsewhere if not able to do so in Canada; an alarming figure given the investment in physician training. He said that, despite a higher increase in physicians relative to population size, many communities still face physician shortages while many new specialists lack job opportunities; a better planning of the number, mix and distribution of physicians is required.

129. Dr. Pasternak outlined CAIR’s Resident Principles on Physician Human Resources to Better Serve Canadians (June 2013):

   1. Effective, evidence-based workforce planning for Canadian patients and physicians.
   2. Distribution/allocation of residency training positions that accords with population needs and job availability.
   3. Recruitment and retention of graduating physicians.
   5. Promotion of social accountability via changes to the formal curriculum and culture building.

130. Following his presentation, questions were entertained with respect to the lack of opportunity for residents to transfer residency, and regional and institutional approaches to moonlighting.

131. Dr. Reid thanked Dr. Pasternak for his presentation and congratulated CAIR for its work on this important issue.

General Council approves the following motions contained in the strategic session no. 2 consent agenda: SS 2 8-1; SS 2 8-2; SS 2 8-11; SS 2 8-4; SS 2 8-13; SS 2 8-7.

Resolution 13-17 Carried
Strategic session 2 consent agenda resolutions

The Canadian Medical Association will investigate the impact of changes to resident duty hours on physician resource planning.

Resolution 13-18 Carried

The Canadian Medical Association supports supply-and-demand projection models for health human resources using standardized methodology.

Resolution 13-19 Carried

The Canadian Medical Association supports measures to facilitate the acculturation of international medical graduates.

Resolution 13-20 Carried

The Canadian Medical Association supports curriculum development within Canada’s medical schools that ensures trainees are educated on the importance of gender-sensitive care.

Resolution 13-21 Carried

The Canadian Medical Association will work with stakeholders to help new graduates of Canadian residency programs seek job opportunities across Canada.

Resolution 13-22 Carried

The Canadian Medical Association supports strategies that will utilize untapped health infrastructure resources to better meet Canadians’ health care needs.

Resolution 13-23 Carried

132. At this point, the Speaker entertained debate of the remaining motions.

133. Discussion of the remaining delegates’ motions took place on Aug. 20 and 21, 2013.

134. The following resolutions were debated and carried by General Council and forwarded to the Board of Directors for disposition.

The Canadian Medical Association will investigate reports of and implications of unemployment and underemployment within all specialties.

Resolution 13-24 Carried

The Canadian Medical Association will review the current physician human resource needs of psychiatry in Canada.

Resolution 13-25 Carried
The Canadian Medical Association encourages family physicians to maintain their skills in comprehensive family medicine, while supporting their choice to acquire additional skills that will better serve the needs of their community.

Resolution 13-26  Carried

The Canadian Medical Association will establish a national working group identifying key gaps in Canadian physician human resources and propose plans for action.

Resolution 13-27  Carried

The Canadian Medical Association will develop a policy statement on the impact emerging technologies and models of care are having on health human resource planning.

Resolution 13-28  Carried

The following motion is referred to the Board of Directors:

The Canadian Medical Association supports the six guiding principles in the Canadian Association of Internes and Residents’ “Resident Principles on Physician Health Human Resources to Better Serve Canadians” informing the realignment of the postgraduate medical education system supporting a national strategy to meet future societal health care needs.

Resolution 13-29  Carried

The Canadian Medical Association supports the development of more structured mentorship programs featuring a formal career counselling component as part of all residency curricula in Canada.

Resolution 13-30  Carried

The Canadian Medical Association supports in principle the transfer process suggested in the Canadian Association of Internes and Residents’ "Principles on Resident Transfers."

Resolution 13-31  Carried

The Canadian Medical Association will establish and maintain a national repository of physician professional opportunities in Canada.

Resolution 13-32  Carried

Strategic session 3: Clinical Decision-making: Appropriateness and Accountability

135. The Speaker called upon Dr. Reid to introduce the strategic session: Clinical Decision-making: Appropriateness and Accountability.

136. Dr. Reid introduced the session and noted the American Board of Internal Medicine’s development of the Choosing Wisely® initiative, developed to provide physicians with a tool to engage patients in making optimal, evidence-based clinical choices.
137. Dr. Wendy Levinson, Sir John and Lady Eaton Professor and Chair of the Department of Medicine at the University of Toronto, participated via video link, and provided an overview of the American Choosing Wisely® initiative and the development of an Ontario program based upon that model.

138. Dr. Levinson noted that the Choosing Wisely Canada program, being developed in association with the CMA, would serve as a tool in the transformation of Canada’s health care system. She highlighted that physicians can provide leadership to affect the cost curve as they determine every patient encounter: appointments, hospitalization, tests, procedures, surgeries, technologies used and medications prescribed. She noted, for example, that the costs attributed to medical testing can be 30% of health care spending.

139. Dr. Levinson highlighted that the American Choosing Wisely® initiative, in consultation with medical specialty societies, developed lists of tests and procedures that may frequently be undertaken unnecessarily; these lists are disseminated broadly to physicians’ offices and lay organizations to enhance decision-making. She also said that Consumer Reports developed a companion piece that assists patients in understanding how to help themselves and the system by making informed choices about tests and treatments.

140. Dr. Levinson said that the Canadian strategy would use a similar approach to consult with medical societies in the development of lists that would then be disseminated to physicians, patients, the public, the media and medical schools. She also noted that a curriculum is being developed to provide medical students with the training needed to assess the value of the care provided (including tests and treatments).

141. Dr. Levinson noted that outcomes would include physicians being engaged and providing leadership in the use of finite resources, the public being aware that “more is not better” and that, as a result, there would be a decrease in use of tests, procedures and treatments in cases where these are not needed.

142. In closing, Dr. Reid thanked Dr. Levinson for her presentation and noted that the best clinical decisions are at the heart of appropriate care to which the system should aspire.

143. The speaker sought General Council’s consideration of the proposed consent agenda for strategic session 3.

144. At the request of a delegate, the following motion was removed from the consent agenda:

The Canadian Medical Association advocates that regional health authorities and hospitals that outsource medical services internationally must ensure that they meet Canadian training and certification standards.

*General Council approves the following motions contained in the strategic session no. 3 consent agenda as amended: SS 3 9-3; SS 3 9-6; SS 3 9-7.*

*Carried*

**Strategic session 3 consent agenda resolutions**

*The Canadian Medical Association will advocate for adequate physician input in the selection of evidence used to address costs and quality related to clinical practice variation.*

*Resolution 13-34 Carried*
The Canadian Medical Association will work with stakeholders to develop standardized processes to ensure access to comprehensive psychiatric assessment and treatment for people detained within the correctional system.

Resolution 13-35 Carried

The Canadian Medical Association believes that fiscal benefits and cost savings of exercises in accountability and appropriateness in clinical care are a by-product rather than the primary focus of these exercises.

Resolution 13-36 Carried

At this point, the speaker entertained debate of the remaining motions.

Discussion of the remaining delegates’ motions took place on Aug. 20 and 21, 2013.

The following resolutions were debated and carried by General Counsel and forwarded to the Board of Directors for disposition.

The Canadian Medical Association adopts the following definition for appropriateness in health care:

It is the right care, provided by the right providers, to the right patient, in the right place, at the right time, resulting in optimal quality care.

Resolution 13-37 Carried

The Canadian Medical Association will form a collaborative working group to develop specialty-specific lists of clinical tests/interventions and procedures for which benefits have generally not been shown to exceed the risks.

Resolution 13-38 Carried

The Canadian Medical Association will revise its proposed framework for a National Dementia Strategy to include education on the assessment and management of pain prior to the initiation of anti-psychotic therapy.

Resolution 13-39 Carried

The Canadian Medical Association will make recommendations regarding training in and the use of standardized processes for assessing risk for violence in persons with mental illness.

Resolution 13-40 Carried

The Canadian Medical Association supports the development of data on health care delivery and patient outcomes to help the medical profession develop an appropriateness framework and associated accountability standards provided that patient and physician confidentiality is maintained.

Resolution 13-41 Carried
The Canadian Medical Association advocates that should outsourcing of medical services by health authorities or hospitals occur, Canadian training and certification standards must be met.

Resolution 13-42 Carried

Nominations and elections

148. The elections were held Tuesday, Aug. 20, 2013, at 11:00 am, with Dr. John Haggie presiding.

149. Dr. Haggie referred to the Report of the Committee on Nominations, which was distributed to delegates with the 2013 Reports to General Council, and to the updates distributed subsequently. He explained the electronic voting process and specified that a recount is not possible with that method. He indicated that under the CMA’s Operating Rules and Procedures, the majority method would be used in the event that there are more than two candidates and that, absent a majority (more than 50% of the votes cast), the person receiving the lowest number of votes would retire and another vote would be taken involving the remaining candidates.

President-Elect

150. Mr. Cloutier reported that the Committee on Nominations had submitted the name of Dr. Christopher Simpson for the office of president-elect.

151. Dr. Haggie noted that General Council had not received any further nominations by the deadline of 12:30 pm, Monday, Aug. 19, 2013 (per Bylaw 12.3.4 [c]). Dr. Haggie therefore declared Dr. Christopher Simpson president-elect of the CMA by acclamation.

152. Dr. Simpson expressed his appreciation to the Ontario Medical Association and his colleagues for their encouragement and support. He noted his deeply held sense of obligation to the country and to world health equity and said that he is excited about the future of working with an energized physician community to transform health care.

Speaker of General Council

153. Mr. Cloutier reported that the Committee on Nominations had submitted the name of Dr. Blake Woodside for the office of speaker of General Council.

154. Dr. Haggie called for further nominations, and none was offered.

Nominations for the office of Speaker of General Council are closed.

Resolution 13-43 Carried

155. There being no further nominations, Dr. Haggie proclaimed Dr. Blake Woodside speaker of General Council by acclamation.

Deputy Speaker of General Council

156. Mr. Cloutier reported that the Committee on Nominations had submitted the name of Dr. Maria Alexiadis for the office of deputy speaker of General Council.
157. Dr. Haggie called for further nominations, and none was offered.

Nominations for the office of Deputy Speaker of General Council are closed.

Resolution 13-44 Carried

158. There being no further nominations, Dr. Haggie proclaimed Dr. Maria Alexiadis deputy speaker of General Council by acclamation.

Chair of the Audit Committee

159. Mr. Cloutier reported that the Committee on Nominations had submitted the name of Dr. Robert Broad for the position of chair of the Audit Committee.

160. Dr. Haggie called for further nominations, and none was offered.

Nominations for the office of Chair of the Audit Committee are closed.

Resolution 13-45 Carried

161. There being no further nominations, Dr. Haggie proclaimed Dr. Robert Broad chair of the Audit Committee by acclamation.

Members of the Audit Committee

162. Mr. Cloutier reported that the Committee on Nominations had submitted the names of the following to serve as members of the Audit Committee:

Dr. François Gobeil (QC)
Dr. Darcy Johnson (MB)
Dr. Mark Corbett (BC)
Dr. Renwick Mann (ON)

163. Dr. Haggie called for further nominations. Dr. Pravinsagar Mehta put forward his candidacy as representative on the Audit Committee.

Nominations for the members of the Audit Committee are closed.

Resolution 13-46 Carried

164. There being no further nominations, Dr. Haggie proclaimed the above-named members of the Audit Committee by acclamation.

Chair of the Committee on Ethics

165. Mr. Cloutier reported that the Committee on Nominations had submitted the name of Dr. Robin Saunders for the position of chair of the Committee on Ethics. However, Dr. Saunders had subsequently withdrawn his nomination.
166. Dr. Haggie noted that General Council had also received notice of the nomination of Dr. David Gass for the position of Chair of the Committee on Ethics.

167. Dr. Haggie called for further nominations, and none was offered.

*Nominations for the position of Chair of the Committee on Ethics are closed.*

**Resolution 13-47**

Carried

168. There being no further nominations, Dr. Haggie proclaimed Dr. David Gass chair of the Committee on Ethics by acclamation.

**Members of the Committee on Ethics**

169. Mr. Cloutier noted that the Committee on Ethics has eight members, with regional representation from BC/Yukon, Prairies/Northwest Territories, Ontario, Quebec, the Atlantic Provinces, and on representative each of residents, medical students, and one member appointed by the Board.

170. Mr. Cloutier said that the Committee on Nominations had recommended the following members to serve on the Committee on Ethics:

- Dr. William Mackie (BC/Yukon)
- Dr. Ian Mitchell (Prairies/NWT)
- Dr. Christopher Cressey (Ont.)
- Dr. Paul Robinson (Que.)
- Dr. Sabira Valiani (Resident)
- Mr. Martin Rotenberg (Student)

171. Dr. Haggie called for other nominations. Dr. David Bannon nominated Dr. Katherine Bigsby for the position of Atlantic representative to the Committee on Ethics, and Dr. Jim Busser nominated Dr. Susan Burgess for the position of British Columbia/Yukon representative to the Committee on Ethics.

*Nominations for the members of the Committee on Ethics are closed.*

**Resolution 13-48**

Carried

172. Each nominee for the position of British Columbia/Yukon representative to the Committee on Ethics addressed General Council for two minutes.

173. After one round of voting, Dr. Haggie declared Dr. William Mackie duly elected as the British Columbia/Yukon representative to the Committee on Ethics.

174. There being no further nominations, Dr. Haggie proclaimed the above-named members of the Committee on Ethics by acclamation.

**Members of the Board of Directors**

175. Mr. Cloutier reported that the Committee on Nominations had recommended the following members to serve on the CMA Board of Directors. He referred General Council to page 1.4 of the *Report of the Committee*
on Nominations for a listing of directors who are continuing their three-year terms.

Dr. Ann Collins, (NB)
Dr. Pierre Harvey (Que.) (2nd term)
Dr. Chris Jyu (Ont.) (2nd term)
Dr. Frank MacDonald (PEI)
Dr. Linda Slocombe (Alta.)
Dr. Virginia Walley (Ont.)
Mr. Jesse Kaner (student)

176. Dr. Haggie noted that General Council had also received notice of the nominations of Dr. Kaif Pardhan for the resident representative, Dr. Shelley Ross as British Columbia representative, and Dr. Nasir Jetha as British Columbia representative (one-year term).

177. Dr. Haggie called for further nominations, and none was offered.

Nominations for the director positions on the Board of Directors are closed.

Resolution 13-49 Carried

There being no further nominations, Dr. Haggie proclaimed the above-named members of the Board of Directors by acclamation.

Committee on Nominations

179. Mr. Cloutier reported that the Committee on Nominations recommended the following to serve as members on the Committee on Nominations:

Chair Dr. Anna Reid
Yukon Dr. Rao Tadepalli
Northwest Territories Dr. Peter McArthur
British Columbia Dr. Shelley Ross
Alberta Dr. Christopher Doig
Manitoba Dr. Maurice Roy
Ontario Dr. Scott Wooder
Québec Dr. Ruth Vander Stelt
New Brunswick Dr. Lynn Hansen
Prince Edward Island Dr. Stephen O’Brien
Nova Scotia Dr. John Finley
Newfoundland and Labrador Dr. Tony Gabriel
Residents Dr. Chris Little
Students Dr. Robin Clouston
Affiliates Dr. Carter Thorne

180. Dr. Haggie called for other nominations. Dr. Phillip Fourie nominated Dr. Janice Shannon as the Saskatchewan representative to the Committee on Nominations.

Nominations for members of the Committee on Nominations are closed.

Resolution 13-50 Carried
181. There being no further nominations, Dr. Haggie proclaimed the above-named members of the Committee on Nominations by acclamation.

*General Council approves that the ballots including paper or electronic reports used in the election process be destroyed.*

*Resolution 13-51 Carried*

**Delegates’ motions**

182. Time was allocated for debate of delegates’ motions on Aug. 20 and 21, 2013.

183. On Tues., Aug. 20, at the request of individual delegates, the following motions were removed from the consent agenda:

- The Canadian Medical Association supports the exploration of a complementary patient-controlled electronic health record.
- The Canadian Medical Association supports the development of a national system to identify and report the identities and quantities of antibiotics acquired domestically or imported for use in food animals.
- The Canadian Medical Association recommends that physicians be encouraged and adequately supported to participate in community-based interventions that target the social determinants of health.
- The Canadian Medical Association supports campaigns to prevent fetal alcohol spectrum disorder in Aboriginal communities in Canada.
- The Canadian Medical Association recommends that the Food and Drugs Act and its regulations be amended to close the "own use" provision for the unmanaged importation of antibiotics for agricultural use.

184. The Deputy Speaker sought General Council’s consideration of the revised consent agenda.

*General Council approves the following motions contained in the delegates motions consent agenda as amended: DM 5-1, DM 5-5, DM 5-57, DM 5-10, DM 5-26, DM 5-55, DM 5-31, DM 5-33, DM 5-38, DM 5-39, DM5-40, DM 5-42, DM 5-50.*

*Resolution 13-52 Carried*

**Delegates’ consent agenda resolutions**

**Environment**

*The Canadian Medical Association supports the development of a national strategy for the creation of community and regional maps that track noise levels in Canada.*

*Resolution 13-53 Carried*
The Canadian Medical Association supports integration of the concepts of population health and impact assessment into urban planning and design.

Resolution 13-54 Carried

The Canadian Medical Association will advocate for more federal assistance to support ongoing, systematic efforts to mitigate, prevent, respond to and recover from extreme weather events and their consequences on human health.

Resolution 13-55 Carried

Collaborative Practice

The Canadian Medical Association recommends strengthening collaborative approaches to mental health care for children and youth.

Resolution 13-56 Carried

Health Care Delivery and Access

The Canadian Medical Association will advocate for the development of an accreditation process for mobile applications for health.

Resolution 13-57 Carried

Health Promotion and Disease Prevention

The Canadian Medical Association recommends that there be an increased emphasis on public health-oriented approaches by regulatory authorities responsible for psychoactive substances.

Resolution 13-58 Carried

The Canadian Medical Association supports programs and services that help people with mental illness find and maintain employment.

Resolution 13-59 Carried

The Canadian Medical Association will advocate for a pan-Canadian strategy to support the care of seniors that is based on the Principles to Guide Health Care Transformation in Canada.

Resolution 13-60 Carried

The Canadian Medical Association will advocate for legislation to protect Canadians from continued exposure to bisphenol A.

Resolution 13-61 Carried

The Canadian Medical Association calls for a strategy to combat obesity that includes requiring package and retail display warnings about health risks associated with excess consumption of high-calorie, low-nutritional-value junk foods/drinks.

Resolution 13-62 Carried
The Canadian Medical Association advocates for a national standard of support for the family caregivers of individuals living with mental and physical disabilities.

Resolution 13-63 Carried

Ethics

The Canadian Medical Association supports timely public access and transparency to the results of and information from government-funded research.

Resolution 13-64 Carried

Advocacy and Representation

The Canadian Medical Association supports the proclamation of a specific annual date as "Doctors’ Day in Canada."

Resolution 13-65 Carried

185. At this point, the Speaker entertained debate of the remaining motions.


187. The following resolutions were debated by General Counsel and forwarded to the Board of Directors for disposition, as appropriate.

End-of-life care

The Canadian Medical Association advocates for the integration of accessible quality palliative care services into community and chronic care service delivery models.

Resolution 13-66 Carried

The Canadian Medical Association supports the integration of the palliative care approach into the management of life-limiting chronic disease.

Resolution 13-67 Carried

The Canadian Medical Association supports efforts that will assist physicians in helping patients and families understand and develop advance care plans.

Resolution 13-68 Carried

The Canadian Medical Association supports the development and availability to all physicians of training in advance care planning.

Resolution 13-69 Carried

The Canadian Medical Association recommends that all relevant legislation be amended to recognize that any person whose medical condition warrants it is entitled to receive palliative care.

Resolution 13-70 Carried
The Canadian Medical Association requests that all Canadian faculties of medicine create a curriculum for training in palliative care suitable for physicians at all stages of their medical education and in appropriate settings to the locale in which they practice.

Resolution 13-71 Carried
The Canadian Medical Association supports the right of any physician to exercise conscientious objection when faced with a request for medical aid in dying.

Resolution 13-72 Carried
The Canadian Medical Association believes that every person nearing the end of life who wishes to receive palliative care services at home should have access to them.

Resolution 13-73 Carried
The Canadian Medical Association encourages all members to complete their own advanced care plan.

Resolution 13-74 Carried
The following motion is referred to the Board of Directors:

The Canadian Medical Association will replace the term “physician-assisted suicide” with “physician-assisted death” and use it in all future communications.

Resolution 13-75 Carried
The following motion is referred to the Board of Directors:

The Canadian Medical Association advocates for the inclusion of advanced care directive functionality as an electronic medical record vendor conformance and usability requirement for all approved digital charting software.

Resolution 13-76 Carried

Collaborative Practice

The Canadian Medical Association recommends that conflict-of-interest issues be considered when any scope-of-practice expansion that allows allied health professionals to both prescribe and dispense medication is considered.

Resolution 13-77 Carried

The Canadian Medical Association encourages that changes to the scope of practice for allied health professionals occur only in the presence of a defined, transparent evaluation process that is based on clinical criteria and protects patient safety.

Resolution 13-78 Carried
The Canadian Medical Association urges the Canadian Medical Protective Association to develop a comprehensive strategy to minimize the liability risk of physicians due to the changing scopes of practice of other health care providers.

Resolution 13-79  Carried

The Canadian Medical Association supports the implementation of a collaborative palliative care model.

Resolution 13-80  Carried

The Canadian Medical Association will develop a strategy to improve understanding of scope of practice and roles for and by all members of a multidisciplinary health care team.

Resolution 13-81  Carried

The Canadian Medical Association supports the creation of provincial/territorial councils on eye health.

Resolution 13-82  Carried

Health Care Delivery and Access

The Canadian Medical Association will support the establishment of national triage guidelines for prioritizing magnetic resonance imaging appointments.

Resolution 13-83  Carried

The Canadian Medical Association calls for biennial testing of disaster management planning in hospitals.

Resolution 13-84  Carried

The Canadian Medical Association calls for timely and efficient referral processes to link workplaces with primary care physicians.

Resolution 13-85  Carried

The Canadian Medical Association supports appropriate data collection and analysis to monitor the equitable distribution of health services and the appropriateness of care in all provinces and territories.

Resolution 13-86  Carried

The Canadian Medical Association supports the right of family members of Canadian military personnel and retiring/releasing military members and their families to have continuous access to local physicians as they relocate to new military bases and communities across Canada.

Resolution 13-87  Carried
The Canadian Medical Association strongly advocates for continued governmental investment to support interoperability and connectivity of e-health systems.

Resolution 13-88 Carried

The Canadian Medical Association supports the exploration of a complementary patient-controlled electronic health record.

Resolution 13-89 Carried

The Canadian Medical Association recommends that physicians be encouraged and adequately supported to participate in community-based interventions that target the social determinants of health.

Resolution 13-90 Carried

Health Promotion and Disease Prevention

The Canadian Medical Association calls for a reconsideration of proposed federal legislation that restricts supervised consumption (safe injection) sites.

Resolution 13-91 Carried

The Canadian Medical Association condemns the National Hockey League executives and owners regarding violence within their sport.

Resolution 13-92 Carried

The Canadian Medical Association supports a ban on the sale of energy drinks to Canadians younger than the legal drinking age in their jurisdiction.

Resolution 13-93 Carried

The Canadian Medical Association will conduct an analysis with recommendations on the effect of industry advertising promoting the consumption of alcohol and energy drinks on the youth of Canada.

Resolution 13-94 Carried

The Canadian Medical Association supports the development and implementation of comprehensive strategies to promote mental health and the management of mental health conditions in the workplace.

Resolution 13-95 Carried

The Canadian Medical Association calls for a strategy to combat obesity that includes restrictions on the sale of high-calorie, low-nutritional-value junk foods/drinks in recreational facilities frequented by young people.

Resolution 13-96 Carried
The Canadian Medical Association supports the development of a national system to identify and report the identities and quantities of antibiotics acquired domestically or imported for use in food animals.

Resolution 13-97 Carried

The Canadian Medical Association supports campaigns to prevent fetal alcohol spectrum disorder in Aboriginal communities in Canada.

Resolution 13-98 Carried

The Canadian Medical Association recommends that the Food and Drugs Act and its regulations be amended to close the "own use" provision for the unmanaged importation of antibiotics for agricultural use.

Resolution 13-99 Carried

Leadership and Advocacy

The Canadian Medical Association will advocate for the inclusion of health as a required consideration in decision-making by the federal Cabinet.

Resolution 13-100 Carried

The Canadian Medical Association will develop and implement a strategy to encourage collaborative action on the recommendations raised during its recent town-hall consultations on the social determinants of health.

Resolution 13-101 Carried

The Canadian Medical Association will develop a suggested curriculum for advocacy skills training for medical students and residents.

Resolution 13-102 Carried

Ethics

The Canadian Medical Association will create and distribute an inventory of existing documents to guide physicians facing ethical dilemmas within the context of their professional practices.

Resolution 13-103 Carried

The Canadian Medical Association condemns the Russian Federation’s legislation banning "propaganda of non-traditional sexual relations."

Resolution 13-104 Carried
Emerging Issues (Leadership and Advocacy)

_The Canadian Medical Association expresses its deep concern about the safety of Dr. Tarek Loubani as well as Mr. John Greyson, and urges Canadian officials to ensure due and fair process as well as physical and emotional safety for those two individuals._

*Resolution 13-105 Carried*

Late Motion (Clinical Decision-making)

_The Canadian Medical Association supports the full use of national medical services instead of international outsourcing._

*Resolution 13-106 Carried*

188. The following motions were defeated:

- The Canadian Medical Association urges all relevant levels of government to conduct a large-scale public consultation to consider the recognition of medical aid in dying as appropriate end-of-life care. _Defeated_

- The Canadian Medical Association recommends that relevant laws be amended to make advance care directives legally binding. _Defeated_

- The Canadian Medical Association supports a moratorium on uranium mining in Canada. _Defeated_

- The Canadian Medical Association supports a moratorium on the export of uranium. _Defeated_

- The Canadian Medical Association will create a pan-Canadian working group to investigate the evidence behind epigenetic causes and prevention of chronic diseases among young children. _Defeated_

- The Canadian Medical Association will calculate the carbon footprint of association-related travel and report the results to General Council annually. _Defeated_

- The Canadian Medical Association will direct MD Physician Services to explore the implications of creating a fund free of fossil-fuel and fossil-fuel-related investments. _Defeated_

- The Canadian Medical Association directs MD Physician Services to calculate the exposure to fossil fuels in its investment portfolio and to report the results to General Council. _Defeated_

Valedictory address

189. Dr. Anna Reid delivered her valedictory address to General Council delegates Aug. 20, 2013, and started with saying “thank you” for the huge privilege accorded to her.
190. Dr. Reid said that she had spent her term travelling across the country meeting students, physicians and other Canadians from many backgrounds. She noted that a highlight among the many once-in-a-lifetime experiences was having travelled to tiny northern Quebec communities including Chisasibi on James Bay, where she had the privilege to meet with elders who, despite many challenges, spoke optimistically of community driven solutions to move them forward in time.

191. Dr. Reid said that Aboriginal health care concerns were reflected in the CMA report, “Physicians and Health Equity: Opportunities in Practice” and that this has generated a wider conversation that she hoped would continue to expand and grow louder.

192. Dr. Reid also reflected on the themes of the past year: patient-centered care, health inequities and the physicians’ leadership role in the system.

193. Dr. Reid said that there are many things in health care to take pride in despite the challenges. She said that the CMA has highlighted stories of transformative change, and that creative solutions are being found for some of the most serious issues affecting health across Canada. She also said that each of the close to 80,000 CMA members have the ability to make a difference; a truly formidable force.

194. Dr. Reid noted that CMA’s report “What Makes Canadians Sick” flowed from consultative forums highlighting patients’ deep commitment to ensuring a health care system that works for all; to working with physicians to ensure high-quality health care; and to addressing the social determinants of health that are so important to health care transformation and sustainability.

195. Dr. Reid said that, although many would say that the issues of poverty and health care are too complex to solve, the health outcomes Canadians deserve can be achieved if everyone pulls together. She stressed that Canadians’ other primary concern is the economy and that all Canadians, regardless of political stripe, should understand the strong link between a healthy population, workforce and economy.

196. Dr. Reid noted that the CMA is involved with the Council of the Federation’s Heath Care Innovation Working Group to ensure that the perspective of health care professionals is heard.

197. In closing, Dr. Reid expressed her deep gratitude to her spouse, Linda Kalbun, without whom she would not have been able to serve her presidency. She also expressed thanks to the Board and to staff. She wished to share two thoughts that have served as emotional rudders during her presidency: the wisdom of Margaret Mead who said, “Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.” and the bumper sticker on our car that reads, “Well-behaved women rarely make history.”

198. Dr. Louis Hugo Francescutti rose on a point of personal privilege to thank Dr. Reid for having served as a role model and presented her with a gift to commemorate her presidency.

**Committee on Bylaws**

199. On Aug. 21, 2013, Dr. Michael Omichinski, chair of the Committee on Bylaws, presented his report to General Council and referred members to the committee’s report in the 2013 Reports to General Council (p. 47). He expressed his appreciation to the members of the committee and staff for their assistance.
200. Dr. Omichinski noted that the committee is responsible for reviewing and making recommendations to General Council with respect to the bylaws, and making recommendations to the Board of Directors with respect to Operating Rules and Procedures.

201. He said that the bylaw changes proposed this year fall into four categories: providing for a delegate to represent the Territory of Nunavut; housekeeping amendments to align amendments made in 2012; refinement of the remote ballot process by which the Board makes appointments; and implementing recommendations brought by the Governance Committee in its five-year mandated governance review.

202. Following his remarks, questions were entertained on the proposed requirements for the proposed delegate to represent the Territory of Nunavut.

203. Following his remarks, delegates were asked to approve the proposed changes to the bylaws “en bloc.”

*General Council accepts the bylaw changes as proposed on pages 48-51 of the 2013 Reports to General Council.*

**Resolution 13-107**  
Carried

204. The bylaws will be amended to read:

10.2.2 Election or Appointment of Delegates to General Council
(a) Delegates shall be elected or appointed by divisions to General Council in accordance with the following divisional entitlement: each division is entitled to elect or appoint 4 delegates for up to 100 of its members; 1 additional for 101 to 250; 1 additional for 251 to 500 and 1 additional for each further 500 or fraction thereof. For greater certainty, student members may be elected by their divisions as divisional delegates to General Council. Notwithstanding the divisional entitlement, the Ontario Medical Association is entitled to elect or appoint one additional delegate to represent the Territory of Nunavut, until such time as a medical association in the Territory of Nunavut is established as a division of the Association. The individual appointed to represent the Territory of Nunavut must be currently residing and practising medicine in the Territory of Nunavut and shall be appointed in accordance with the Operating Rules and Procedures.

10.1.4 General Council has sole authority in the following areas, and may not delegate: … …
(b) subject to 15.2.1 and the provisions in these bylaws concerning filling vacancies, the election of the President-Elect, the directors, the Speaker and the Deputy Speaker of General Council, the Chair of the Committee on Ethics, the Chair of the Audit Committee, and members of the Committees on Ethics, Audit, Nominations, and elected members of the Governance Committee and the Appointments and Review Committee, in accordance with the nominations process outlined in the Operating Rules and Procedures;

12.3.1 Any division or 50 members of the Association may submit nominations for the offices of Speaker and Deputy Speaker of the General Council, Chair of the Committee on Ethics, Chair of the Audit Committee and members of the Committees on Ethics, Audit, Nominations, Governance, and Appointments and Review.

18.4 Remote Ballot for the Board of Directors, Executive Committee and Staffing Committee … …
(b) In the case of a resolution, an affirmative vote by two-thirds of the directors or committee members who are eligible to vote shall have the same force and effect as a resolution duly passed at a regular meeting. In the case of an appointment, a candidate must receive an affirmative vote by a majority of the directors who are eligible to vote. An appointment made by remote ballot shall have the same force and effect as an appointment at a regular meeting.
10.1.2 General Council shall provide policy guidance and direction to the Association and the Board of Directors and more specifically, shall as far as possible deal with and dispose of all matters relating to:

(a) the reports of the Board of Directors and the reports of the Committee on Nominations, the Committee on Archives and Awards, the Governance Committee, the Committee on Ethics, and the Audit Committee;

10.2.1 Delegates to General Council shall be as follows:

(a) Ex-officio delegates … …

(iv) the chairs of the Committee on Ethics, the Governance Committee, the Committee on Archives and Awards, the Audit Committee, core committees, the Forum on General and Family Practice, and the Specialist Forum;

15.1.2 The Governance Committee will review the bylaws and recommend amendments to General Council in accordance with the provisions of Chapter 19, and advise the Board of Directors on matters pertaining to the Association’s overall governance.

19.1 Proposals for amendments to the bylaws may be submitted by 1 or more members. These proposals must be received by the Secretary General and the Chair of the Governance Committee 90 days before the date of the Annual Meeting for consideration by the Board of Directors and the Governance Committee.

19.2 Amendments to the bylaws may be proposed by General Council, the Board of Directors or the Governance Committee. These proposals must be received by the Secretary General in time to be published in an Association publication with distribution to all members at least 60 days before the Annual Meeting, or in time to be communicated to each delegate to General Council at least 30 days before the Annual Meeting.

15.2.2 The Audit Committee shall be responsible for overseeing the integrity and credibility of the Association’s audited financial statements. The audit committee shall also be responsible for liaison with the Association’s external auditor and overseeing the audit, financial reporting to General Council, reporting on the Board’s oversight of the Association’s financial risk management practices and such other duties as may be prescribed by General Council. The Committee shall comprise 5 members and a chair, none of whom concurrently hold a position as a member of the Board of Directors, Speaker or Deputy Speaker in the Association.

*The numbering in the bylaws will be amended and relevant editorial changes will be made as required to facilitate the preceding resolution.*

**Resolution 13-108**  
*Carried*

### Committee on Ethics

205. Dr. Robin Saunders, chair of the Committee on Ethics, presented his fourth and final report to delegates.

206. Dr. Saunders referred delegates to the committee’s written report. He noted that they report annually to General Council and regularly to the Board of Directors who oversee their work and provide modifications and ultimate approval of the policies developed.

207. Dr. Saunders noted that the CMA had set an ambitious work plan for health care transformation: to achieve the best health care system and healthiest population by the year 2025. He said that ethical principles would help shape this transformation and that many fundamental questions arise in times of governmental fiscal constraint: whether patients have a right to health care regardless of expense; how resources should be apportioned when patients’ health care needs exceed availability; and the degree to which physicians should act in the best interest of society as a whole rather than the individual.
208. Dr. Saunders highlighted several of the committees’ many activities including the development of a white paper on ethical principles for the practice of assisted reproductive technologies and revision of CMA’s organ and tissue donation policy.

209. Dr. Saunders noted their extensive engagement in issues related to “end-of-life care” and highlighted the legal climate in this area. He said that CMA member surveys indicated that physicians’ views on whether physician-assisted suicide should remain illegal remained largely unchanged between 1993 and 2011. He compared this with the findings of other regional, national and international surveys undertaken as well as the proposed changes to Quebec law to allow certain forms of euthanasia. He said these issues should be of considerable interest to everyone given death is inevitable.

210. Dr. Saunders said that, in the previous year, he had challenged physicians to become involved and lead the national debate on important issues, including the shaping of national policy for the provision of palliative care services in Canada.

211. In closing, Dr. Saunders noted that, after nine years on the committee and four years as its chair, it is time to step aside. He expressed his appreciation to his fellow committee members and staff and said he will miss his involvement that had been incredibly rewarding from personal and professional perspectives.

212. Questions were invited and none was indicated.

Introduction of incoming president

213. Dr. Anna Reid expressed her pleasure at introducing Dr. Louis Hugo Francescutti as the 146th president of the CMA. She then invited him to address delegates.

Inaugural address of incoming president

214. Dr. Francescutti began by noting that, in lieu of a speech, he would provide a presentation of the messages he intends to carry forward for the busy year ahead. He said that the presentation would serve as a road map for CMA’s communications strategy during his presidency. He said that delegates would be polled at the conclusion of his presentation to provide feedback and inform further refinement.

215. Dr. Francescutti highlighted his perspective gained in stepping inside the Bow Building Wonderland sculpture where he saw a face looking back at him. He said that this called upon him to be sure that he adheres to the principles in the Geneva declaration, and that it was important for physicians to reflect on themselves and on the profession. He said the physicians’ unique value proposition is that they assume responsibility and lead teams in providing patient care. He also said that it was important to have conversations between the different generations of physicians to examine their expectations and match these to societies’ needs.

216. Dr. Francescutti then presented Canada’s Physicians: Leadership in Challenging Times, which highlighted the CMA’s national voice on health care transformation, health equity and advocacy. He said that it is alarming to hear physicians questioning whether they like what they are doing and that it is important for them to set the tone and be positive. He noted the need for excellence in care and quality. He said that it is important to ensure that Canadians are getting good value in terms of health care and that there are significant costs to unnecessary services, inefficient delivery of care, excess administrative costs and inflated prices. The system can be transformed by better governance, accountability and engaging in conversations that are crucial.
217. Dr. Francescutti said that health equity is important and that physicians need a greater understanding of things they could do in their practice to address this and the determinants of health. He also noted the role of a healthy lifestyle in disease prevention and that the new federal minister of health has provided encouraging news early in her mandate; the CMA will monitor whether her promises would translate into meaningful action.

218. He highlighted that the profession received a “wake up call” in an Oct. 19, 2012 speech given by the Governor General of Canada, the Right Honorable David Johnston who called upon physicians to demonstrate the highest levels of professionalism in light of their social contract with Canadians; a contract that can be changed if physicians fail to meet their obligations.

219. In closing, Dr. Francescutti said that the fact that CMA has been around as long as Canada has, says that it is doing something correctly. He invited members to stand up and remember that being a physician is one of the greatest honours society can bestow on an individual; one that should not be wasted.

220. General Council delegates were then polled on the degree to which they agreed with the following statements:
   • the presentation identifies clearly the areas of focus for the CMA in 2013-2014
   • the way this presentation describes CMA efforts to advocate on these issues resonates with me
   • the presentation is a useful tool that individual physicians can use to advocate for health care transformation at a grassroots level

221. The results of the polling were tabulated and projected following the annual business meeting. Delegates were fairly supportive of each statement.

**Appreciation**

General Council expresses its sincere appreciation to:
   a) Dr. Anna Reid for her leadership during the year;
   b) the Board of Directors, the Executive Committee, the committees and staff for their excellent work on behalf of the Canadian Medical Association;
   c) the Alberta Medical Association for its warm hospitality; and
   d) the Speaker and Deputy Speaker of General Council for the expeditious manner in which they have conducted the business of General Council.

Resolution 13-109 Carried

General Council expresses its thanks to members of the Resolutions Committee for their efforts in facilitating the business of General Council.

Resolution 13-110 Carried

**Adjournment**

The 146th meeting of General Council is now adjourned.

Resolution 13-111 Carried

222. The 146th meeting of General Council adjourned at 12:14 pm on Wednesday, Aug. 21, 2013.
**ANNUAL GENERAL MEETING BUSINESS SESSION**

223. On Aug. 21, 2013, at the conclusion of General Council, the legislative and business session of the annual meeting was held in the Telus Convention Centre in Calgary. Dr. Reid assumed the chair and declared the 146th annual meeting duly constituted and officially in session.

**Report of the president**

224. Dr. Reid noted the session is open for voting to all members of the association. She proposed and received the approval of members in attendance at the business session to utilize a time limit of two minutes for proposing motions.

*Questions asked during the Business Session of the annual meeting will be limited to two minutes.*

Resolution AGM 13-1 Carried

225. Members were invited to question the president or provide comments on matters relating to the association or General Council deliberations. None was indicated.

**Report of the chair of the Board of Directors**

226. Members were invited to question the chair of the Board of Directors regarding the report of the Board of Directors as presented in the 2013 Reports to General Council or on any other matter. None was indicated.

**Bylaws**

227. Dr. Reid noted that changes in bylaws become effective when passed by a majority of members present and voting at the business session.

*The changes and amendments to the Bylaws, as adopted by the 146th General Council, are approved.*

Resolution AGM 13-2 Carried

**New Business**

228. Members were invited to raise any new business; none was indicated.

**Adjournment**

229. The legislative and business session of the 2013 annual meeting adjourned at 12:31 pm, on Aug. 21, 2013.

*The Business Session of the 2013 Annual Meeting is now adjourned.*

Resolution AGM 13-3 Carried
CEREMONIAL SESSION

230. The ceremonial session, which included the installation of the new CMA president as well as the presentation of association awards, took place in the Imperial room of the Hyatt Regency Hotel, Calgary, on Aug. 21, 2013.

231. The distinguished members of the platform party included:

- Dr. Marie-Dominique Beaulieu, President, College of Family Physicians of Canada
- Dr. Michael Lawrence, President, Canadian Medical Protective Association
- Dr. Michael Golbey, Chair, Board of Directors
- Dr. Dana Hanson, CMA President, 2002-03, Speaker of General Council, 1999-2001; President of World Medical Association, 2009-2010, and Honorary Member for 2013
- Dr. Brian Brodie, Honorary Treasurer
- Dr. Ardis Hoven, President, American Medical Association
- Miss Leah Wapner, Secretary General, European Forum of Medical Associations
- Mr. Nigel Fisher, Medal of Honour Recipient
- Dr. Léo-Paul Landry, Medal of Service Recipient
- Dr. Christopher Simpson, Incoming President-Elect
- Dr. John Haggie, Past President
- Dr. Anna Reid, President
- Dr. Louis Hugo Francescutti, Medal of Service Recipient
- Dr. Christopher Simpson, Incoming President-Elect
- Dr. Blake Woodside, Speaker of General Council
- Mr. Paul-Émile Cloutier, Secretary General and CEO

232. The procession included the following representatives from provincial and territorial medical associations:

- Dr. Rao Tadepalli, President, Yukon Medical Association
- Dr. William Cunningham, President, British Columbia Medical Association
- Dr. Michael Giuffre, President, Alberta Medical Association
- Dr. Clare Kozroski, President, Saskatchewan Medical Association
- Dr. Maurice Roy, President, Doctors Manitoba
- Dr. Scott Wooder, President, Ontario Medical Association
- Dr. Laurent Marcoux, President, Quebec Medical Association
- Dr. Michael Fleming, Doctors Nova Scotia
- Dr. Robert Desjardins, President, New Brunswick Medical Society
- Dr. David Bannon, President, Medical Society of Prince Edward Island
- Dr. Yordan Karaivanov, President, Newfoundland and Labrador Medical Association

233. The procession included the following former elected officials:

- Dr. William Thomas, President, 1980-81
- Dr. Alex McPherson, President, 1984-85
- Dr. John O’Brien-Bell, President, 1988-89
- Dr. Lionel Lavoie, President, 1990-91
- Dr. Bruno L’Heureux, President, 1994-95
- Dr. Victor Dirnfeld, President, 1997-98
- Dr. Allon Reddoch, President, 1998-99
Dr. Hugh Scully, President, 1999-2000
Dr. Sunil Patel, President, 2003-04
Dr. Albert Schumacher, President, 2004-05
Dr. Ruth Collins-Nakai, President, 2005-06
Dr. Robert Ouellet, President, 2008-09
Dr. Anne Doig, President, 2009-10
Dr. Jeffrey Turnbull, President 2010-11
Dr. Douglas Perry, Chair of the Board, 1993-98; Speaker of General Council, 2000-04
Dr. Louise Cloutier, Chair of the Board, 2004-08
Dr. Christopher Varvis, Speaker of General Council, 1978-87
Dr. Margaret Kirwan, Speaker of General Council, 2006-10
Mrs. Barbara Drew, Acting Secretary General, 2000-01 and 2008-09

234. The procession also included the following award recipients:

- Dr. Rithesh Ram, Award for Young Leaders (Student) Recipient
- Dr. Paul Singh Dhillon, Award for Young Leaders (Resident) Recipient
- Dr. Kathryn Andrusky, Award for Young Leaders (Early Career Physician) Recipient
- Dr. Ian Mitchell, Dr. William Marsden Award in Medical Ethics Recipient
- Dr. Colin Saldanha, Sir Charles Tupper Award for Political Action Recipient
- Dr. Derek Fewer, Physician Misericordia Award Recipient

235. Dr. Anna Reid welcomed guests to the ceremonial session and thanked the Alberta Medical Association, its members and their spouses for their hospitality.

236. Mr. Cloutier welcomed Dr. André Bernard, CMA Representative to the World Medical Association.

237. Dr. Ardis Hoven brought greetings from the American Medical Association.

238. Miss Leah Wapner brought greetings from the European Forum of Medical Associations.

Honorary memberships

239. CMA honorary memberships were awarded to the following physicians:

- Dr. George D. Carson, Regina, Sask.
- Dr. Joseph M. Connors, Vancouver, BC
- Dr. Vera Frinton, Vancouver, BC
- Dr. John Gray, Ottawa, Ont.
- Dr. Dana Hanson, Fredericton, NB
- Dr. Tzu-Kuang (T.K.) Lee, Edmonton, Alta.
- Dr. Stanley Lubin, Vancouver, BC
- Dr. David O’Neil, Cochrane, Alta.
- Dr. Douglas Perry, Edmonton, Alta.
- Dr. Terry Sosnowski, Spruce Grove, Alta.
- Dr. Clayne Steed, Raymond, Alta.
- Dr. Luxie C. E. Trachsel, Edmonton, Alta.
- Dr. Robert Woollard, Vancouver, BC
Honorary memberships were also (or would be) awarded to the following at provincial/territorial annual meetings:

- Mr. David Balmain, Fredericton, NB
- Dr. J. Barrie Bentz, Coquitlam, BC
- Dr. Normand Bordeleau, Proulxville, Que.
- Dr. Douglas Craig, Westmount, Que.
- Dr. Gordon Cumming, Winnipeg, Man.
- Dr. Penny Davis, Saskatoon, Sask.
- Dr. Clive Duncan, Vancouver, BC
- Dr. Phyllis Duncan Madryga, Brandon, Man.
- Dr. Marcien Gélinas, Trois-Rivières-Ouest, Que.
- Dr. Sunil Ghosh, Rossland, BC
- Dr. Robert Hurley, Vancouver, BC
- Dr. Michael Jones, Vancouver, BC
- Dr. Eshwar Kumar, Saint John, NB
- Dr. Christine P. Kyriakides, Edmonton, Alta.
- Dr. Robert Lawton, St. John's, NL
- Dr. John O. Lough, Verdun, Que.
- Dr. Edward Lyons, Winnipeg, Man.
- Dr. James McHattie, Regina, Sask.
- Dr. Maureen Piercey, Vancouver, BC
- Dr. Marc-André Pouliot, Gaspé, Que.
- Dr. Jacques H. Roy, Gatineau, Que.
- Dr. Paul Schaefer, Summerside, PEI
- Dr. Robert J. Seymour, West Brome, Que.
- Dr. Majid Shojaeinia, Winnipeg, Man.
- Dr. André Villeneuve, Québec, Que.
- Dr. Hubert Wallot, Québec, Que.
- Dr. Brian D. Willis, Edson, Alta.
- Dr. Stephen Willis, Saint John, NB

Awards

The CMA Award for Young Leaders honours the efforts of young physician leaders of tomorrow for their efforts today. In recognizing these efforts, the CMA presents the Award for Young Leaders to one student member, one resident member and one early career physician (up to and including five years post residency) member who have demonstrated exemplary dedication, commitment and leadership in one of the following areas: political, clinical, education, research and/or community service.

The 2013 CMA Award for Young Leaders (Student) was presented to Dr. Rithesh Ram who, as a medical student, has contributed in many areas including politics, education, and research. While President of the Calgary Medical Students’ Association, Dr. Ram advocated successfully against an increase in tuition fees. As a teaching assistant and peer mentor for various courses, he served as a role model to other medical students. Dr. Ram has presented his research at prestigious conferences and has won several awards for his work. His research has also been featured on DocGuide – an international online news and research website for physicians worldwide.

The recipient of the 2013 CMA Award for Young Leaders (Resident) was presented to Dr. Paul Singh Dhillon. During his residency, Dr. Dhillon has been actively involved in clinical and research activities. He
has also presented his work locally, nationally and internationally. In addition to his academic writing, he has published poetry and a novel, the proceeds of which were donated to health care projects. He has been involved politically as well, serving as the president of the Professional Association of Interns and Residents of Saskatchewan and as one of the representatives from Saskatchewan to CAIR.

244. The 2013 CMA Award for Young Leaders (Early Career Physician) was presented to Dr. Kathryn Andrews in recognition of her exemplary dedication, commitment and leadership in both political and community service. Her many leadership roles include her 2011 election to the Alberta Medical Association’s Board of Directors. She has also actively committed her time to supporting the youth and underprivileged population in Edmonton.

245. The Dr. William Marsden Award in Medical Ethics recognizes a CMA member who has demonstrated exemplary leadership, commitment and dedication to the cause of advancing and promoting excellence in the field of medical ethics in Canada. Recipients have also shown leadership in enhancing ethical and professional behaviour among Canadian physicians, or demonstrating excellence in research and/or teaching initiatives in medical ethics.

246. The 2013 CMA Dr. William Marsden Award in Medical Ethics was presented to Dr. Ian Mitchell and Dr. David McKnight.

247. Dr. Ian Mitchell is widely recognised by local and national colleagues, patients and the media as an expert in bioethics. He has contributed to furthering the cause of medical ethics in Canada by demonstrating leadership in enhancing ethical and professional behaviour among Canadian physicians and by demonstrating excellence in medical ethics research and teaching initiatives. He is a current member of the CMA Ethics Committee.

248. Dr. David McKnight received the award, in absentia, in recognition of his long career largely focused on demonstrating and fostering ethical practice and undertaking leadership roles in profession-led regulation. He has actively served on the ethics committees of St. Michael’s Hospital, the Royal College of Physicians and Surgeons of Canada and the Canadian Anesthesiologists’ Society. He is also the current Associate Dean, Equity and Professionalism at the University of Toronto.

249. The CMA Award for Excellence in Health Promotion highlights specific efforts by an individual or an organization outside the health sector to promote the health of Canadians at the national level or with a positive national impact. Recipients have demonstrated an interest in health promotion through specific actions and/or initiatives, exemplified creativity and initiative in taking action to improve and promote health, and brought about changes with the potential for positive, long-term improvement in the health of Canadians.

250. The recipient of the 2013 CMA Award for Excellence in Health Promotion was the Boys and Girls Club of Canada. Founded in 1929, the Boys and Girls Club of Canada is active in over 700 communities nationally and provides assistance to over 200,000 children, teens and families. They have three programs specifically related to health promotion: Cool Moves which targets children 8-12 and addresses poor eating habits and inactivity; Get BUSY (Building the Ultimate and Sensational You) which encourages young people to get involved in new activities in order to become healthier; and Inspire – Breath Play Learn, a program that works in collaboration with Nycomed Canada to provide $60K in grants to clubs to fund local programs that use innovative approaches to solve social issues. [The award was presented later that evening.]
251. The CMA Sir Charles Tupper Award for Political Action recognizes a member of the CMA MD-MP Contact Program or CMA who has demonstrated exemplary leadership, commitment and dedication to the cause of advancing the policies, views and goals of the CMA at the federal level through grassroots advocacy efforts.

252. The 2013 CMA Sir Charles Tupper Award for Political Action was presented to Dr. Colin Saldanha in recognition of his extensive involvement in the political arena. He has been a member of the MD-MP contact program for over 10 years and has advocated at his local hospital and in his community. In addition, he has worked provincially and nationally with organizations that address issues such as immigrant health, mental health and health advocacy.

253. The CMA Physician Misericordia Award celebrates the outstanding contribution by a CMA member to enhance the overall health and well-being of physician colleagues on both a personal and professional level, and in particular during times of conflict and crisis. It is awarded to a physician who has demonstrated outstanding leadership and support for colleagues through a lifetime commitment to caring and compassion, and who has built and nurtured the vibrancy of the medical profession in his/her community, demonstrated commitment to supporting a culture of collaboration with colleagues, and shown outstanding initiative and inspired others.

254. The 2013 CMA Physician Misericordia Award was presented to Dr. Derek Fewer who, in 1986, co-founded the Doctors Manitoba Physicians at Risk (PAR) program. For the last 25 years, he has served in a volunteer capacity with the organization, which provides compassionate care and support for physician colleagues and their immediate families during times of crisis. Described as an exceptional role model who is cited as having personally assisted numerous colleagues, he is also credited with helping to change the culture in medicine and reducing the stigma for physicians requiring help due to an addiction or mental illness.

255. The CMA May Cohen Award for Women Mentors is presented to a woman physician mentor who has demonstrated outstanding mentoring abilities by encouraging, facilitating and supporting the mentee in career and leadership development; contributing to the success of the mentee through the sharing of insight, perspective and knowledge; helping mentees develop a network of relationships that might not normally be available early in their careers; and acting as an effective role model in medicine and medical leadership.

256. The recipient of the 2013 CMA May Cohen Award for Women Mentors, Dr. Wendy Levinson, was presented, in absentia, in recognition of her dedication to mentorship and to supporting the careers of women in academic medicine. Throughout her career, she has served as a role model, built systems to support mentoring and acted as an advocate for women in medicine generally and women in medical leadership specifically.

257. The CMA Medal of Honour represents the highest award the association can bestow on a person who is not a member of the medical profession. This award is given in recognition of personal contributions to the advancement of medical research, medical education, health care organization and health education of the public.

258. The recipient of the 2013 CMA Medal of Honour was presented to Mr. Nigel Fisher in recognition of his three decades of work with the United Nations and UNICEF in over a dozen countries. With a focus on children’s health and protection, Mr. Fisher is a global leader in the field of humanitarian aid. Throughout his career, he has provided assistance in times of crisis in countries such as Afghanistan, Rwanda and Haiti.
The CMA Medal of Service is awarded to a person who has made an exceptional and outstanding contribution to the advancement of health care in Canada. This may be a service to the profession in the field of medical organization, to Canadians by helping to raise the standards of medical practice in Canada, or a personal contribution to the advancement of the art and science of medicine.

The 2013 CMA Medal of Service was presented to Dr. Léo-Paul Landry in recognition of his long career dedicated to the advancement of medicine and to the quality of health care delivery. During his accomplished career, he has served as the Secretary General of the Canadian Medical Association and Director of Professional Services at Montreal General Hospital and at Maisonneuve-Rosemont hospital.

The CMA F.N.G. Starr Award is the highest award the CMA can present to one of its members. It is awarded to a physician who has achieved distinction by making an outstanding contribution to science, the fine arts or literature (nonmedical), by serving humanity under conditions calling for courage or the endurance of hardship in the promotion of health or the saving of life, by advancing the humanitarian or cultural life of their community, or by improving medical service in Canada.

The 2013 F.N.G. Starr Award was presented to Dr. Julio S.G. Montaner in recognition of over 20 years of leadership in the treatment and prevention of HIV and AIDS provincially, nationally and internationally. As a clinician, educator and researcher he has contributed to the global strategy to control the disease and has had a major impact in promoting well-constructed public health policies in BC, in Canada and around the world.

Installation of President

Dr. Louis Hugo Francescutti of Alberta was installed as the 146th President of the CMA. Dr. Francescutti, having already given his inaugural address during General Council, took the opportunity to thank the Alberta Medical Association, its members and their spouses for their hospitality and their contributions to the meeting.