The issue of technology driving change was a theme throughout the meeting.

The future of medicine and health care – Past President of the British Medical Association Dr. Pali Hungin presented his thoughts on the Changing face of medicine: the need for early accurate diagnosis in this fast-paced and ever-changing knowledge environment, and to rebalance the patient-physician or health care provider relationship in light of this. The need for physicians to re-train and re-organize themselves to embrace new technologies and to redistribute experience will also be imperative in this new environment.

Past President Dr. Granger Avery noted the need to enhance function and efficiency, professional satisfaction, and health and wellness of the physician workforce in Canada. He questioned how physicians can lead change, what can be done to improve our system and where CMA should focus its efforts in this area on your behalf.

Dr. Daniel Kraft, a Stanford and Harvard trained physician-scientist and innovator provided an overview of the future of health care. Many new technologies are now available in the marketplace, and many more are in development to rapidly, accurately and affordably monitor health data, and screen and detect various health conditions. The challenge is to re-direct health care so that physicians and patients can benefit from these new technologies to improve health, diagnosis and therapy.

Directors also engaged in an open space conference through which they discussed the importance of physicians engaging with the profession and society; the importance of designing a technology platform to allow exchange of information (communities of interest); new technologies and the importance to be nimble, adapt and change; the importance of having profession-led health system improvements and the need for a collaborative decision-making model; more residency positions and flexibility in re-entering the system; and CMA-led promotion of physician health at the individual and societal levels.

CMA 2018 Strategic priorities and workplan – 2018 will be a transitional year to work toward CMA 2020 and ‘issues and causes that matter’. Current strategic policy initiatives, based on fit, focus and relevance to the overall strategic plan include medical professionalism, seniors’ care, physician health, tax fairness, marijuana, opioids. Currently on the watch list are Indigenous wellness, pharmacare, climate change and health. Corporate priorities include General Council Task Force, Board governance, communities of interest, social enterprise, patient advisory council, innovation and branding. Further discussion will be held as part of the 2018 budget planning session in December.

Federal government tax proposals – In conjunction with the Coalition for Small Business Tax Fairness, CMA continued to raise the concerns voiced by thousands of physicians from across the country over the federal government’s proposed tax changes announced this summer. CMA provided weekly tax alerts to keep physicians informed, supported local advocacy efforts (physicians sent over 10,000 letters to their MPs and finance minister), met with the finance minister and presented to the Finance Committee. This week, the federal government introduced some adjustments to their July 18 proposal. We’re currently working with MD Financial Management and other experts to further assess how these adjustments will affect incorporated businesses going forward. The Board discussed this week’s developments, and confirmed that our advocacy work through the coalition will continue. CMA remains firmly committed to its advocacy campaign, and we urge members to continue to work with us, provincial/territorial medical associations and specialty societies on this file. CMA President Dr. Laurent Marcoux will present to the Senate Committee on Finance on Oct. 25.

Opioids – CMA, along with many stakeholders, has been involved in many initiatives to attempt to address the crisis. These include support for harm reduction initiatives, such as supervised consumption sites and access to naloxone at the community level, and opioid prescribing guidelines and tools. CMA will continue to engage members in determining ways to help protect the safety of Canadians while also ensuring appropriate pain management for those who need it.

Marijuana legalization and regulation – On Sept. 11, Dr. Marcoux presented to the House of Commons’ Standing Committee on Health to reinforce the need for a public health approach in the legalization of marijuana for recreational purpose. CMA has consistently called for strategies that will prevent drug abuse and dependence; ensure the availability of assessment, counselling and treatment; and emphasize harm reduction. Once legalization is in effect, marijuana will be available for those who wish to use it for health issues — either with or without medical authorization. We’re therefore recommending only one regime for both medical and non-medical use.
Seniors' care – Marc Serré, MP from Nickel Belt, ON, inspired by CMA’s “Demand a Plan” campaign for seniors’ care secured support for his private members’ motion, which calls for better support for caregivers through the development of a national seniors’ strategy. We leveraged National Seniors’ Day on Oct. 1 to garner support for our call and highlighted the need to implement the recommendations outlined in our pre-budget submission. We will continue to call for high quality seniors’ care in Canada along with our over 51,000 Demand-a-Plan supporters.

Advocacy initiatives – Potential CMA involvement in various initiatives, including some focused on direct action humanitarian causes, was discussed. Efforts will continue for provincial/territorial engagement and the establishment of a patient advisory group. Development of a plan for CMA “healthy communities” grants is also underway. In addition, the Board
• endorsed a joint position statement of the College of Family Physicians of Canada and Canadian Academy of Sports Medicine on a public health approach to concussions
• approved a new policy on physician health
• approved consultation on a draft CMA Charter of shared values for the profession

Communities of interest – Approval to develop e-based communities on topics of interest to CMA members to leverage the knowledge and expertise of members and others to drive advocacy, health innovation and quality of care. CMA will also pilot a grant program to enable the collaborative development of community engagement tools/models.

General Council Task Force – The GCTF continues to develop a new platform or summit for consulting with members and stakeholders on health issues/causes to create one strong advocacy voice – one that provides thought leadership, is a catalyst for change, promotes inclusive conversations and provides outcomes that significantly advance health priorities. Staff will further consult on a transition model for 2018 which will include a first stand-alone summit in 2019 and a re-imagined Annual General Meeting and other member engagement opportunities. Proposed board governance changes are also key components of a comprehensive overview of the proposed changes. Have your say – opportunities for consultation will continue this fall/winter.

General Council 2017 – Evaluation results indicated overall continued positive support for the changes made to General Council and the Annual Meeting, including the initiatives in 2017 to strengthen the inclusive and dialogue driven components of the event (e.g., small group/table discussions, emerging issues and GC App) and a streamlined approach to motions.

Board of Directors governance review – The CMA Governance Committee is seeking your input to determine the optimal governance structure for the CMA Board. We want to hear from you on how our Board governance structure would best support a new forward-looking enterprise. This initiative forms part of modernizing CMA and is being done in tandem with the GCTF’s work. Background information about the changes proposed to the Board’s structure as well as key questions for consideration are available here.

CMA Enterprise brand review – This exercise explores the merits of maintaining, refreshing or reinventing CMA’s brand, and in particular, creating a more unified connection with our subsidiaries MD and Joule. Further discussion to be held this winter.

CMA Subsidiaries – MD Financial Management’s value for members in terms of financial planning and well-being was featured. In addition, Joule’s new innovation initiatives were highlighted which include:
• Reacts – remote education and conference tool
• Cloud DX – precision vital sign monitoring equipment, software and mobile apps
• Ocean Tablet/Cognisant MD – giving physicians a new way to collect and share information.
• TedMed – a spin-off of Ted Talks focused on medicine
• Singularity University – where experts talk about cutting-edge developments and methodologies in their field