
CMA BOARD OF DIRECTORS OCTOBER 2018 MEETING SUMMARY

The CMA Board of Directors met on Oct. 18-20, 2018 in Montebello, Quebec. The following is a summary of their discussions and of updates received.

Strategic planning and [CMA 2020](#) – priorities for 2019

- Four key guiding principles for the CMA going forward: accountability, transparency, engagement and impact
- Selection of priorities for 2019: will be based on fit, focus and relevance where the CMA can leverage its position and influence to advance issues that are of national interest/scope that require a medical perspective
- Ongoing initiatives: physician health, medical professionalism, end-of-life care, seniors' care, opioids, cannabis and pharmacare
- Additional issues and causes that may form part of the 2019 priority setting exercise: global/international health (including climate change and health), (youth) mental health and addiction and health human resources

Physician health and wellness

- The CMA and the British and American medical associations co-hosted the [2018 International Conference on Physician Health](#) in Toronto (Oct. 11-13), which brought together more than 500 physicians and experts from around the world to find new ways to improve physician health and well-being
- The CMA Foundation provided grants to support CMA's sponsorship of 25 students to attend as CMA Wellness Ambassadors; the CMA also sponsored an additional 25 CMA members to attend the ICPH
- The CMA unveiled its new statement on [physician health](#) — a set of guiding principles and key commitments for the profession, systems and individuals — and shared the first national dataset on the state of physician wellness in Canada, information that will be key as we build an action plan for the future
- The CMA has hired Dr. Caroline Gérin-Lajoie to guide our work in this [area](#)

Women in medicine

- The President has been very active in sharing CMA's message on increasing diversity in medicine and how this can benefit patient care and she will continue to raise attention to this issue. Related initiatives to include:
 - Releasing a joint CMA-Federation of Medical Women of Canada (FMWC) discussion paper for consultation: Gender equity and diversity in Canadian medicine
 - Releasing a joint statement on gender equity and diversity in medicine on International Women's Day
 - Making connections with a CMA-supported physician-led community of interest about creating an inclusive medical community

Unmatched medical graduates

- The Board explored ways to assist medical students in the residency matching process and address the growing number of unmatched Canadian medical graduates; this includes gradually moving the residency match interview process to a virtual platform

Advocacy initiatives underway in 2018

- Revamping CMA's political action function to place greater emphasis on grassroots advocacy and increase provincial/territorial/municipal collaboration
- Launching the "[CMA Patient Voice](#)" (new patient liaison group made up of 12 individuals across Canada) to further enhance our ability to advocate for a healthy population
- In partnership with the CMA Foundation, the CMA is continuing its [Healthy Canadians Grants](#) program designed to support community rooted initiatives. This year's grant program is focused on seniors.

National seniors' strategy

- On Sept. 20, the President appeared before the House of Commons Standing Committee on Finance to share the [CMA's recommendations](#) as part of the [pre-budget consultations](#)

- The CMA continues to urge the federal government to help provinces and territories care for their aging populations and recommended the creation of a “demographic-based” top-up that would provide much-needed funding
- The CMA continues to be active in the media and in public forums on this issue and encouraged all Canadians to celebrate National Seniors’ Day on Oct. 1

National pharmacare

- The CMA will be presenting recommendations to the Advisory Council on the Implementation of National Pharmacare (chaired by Dr. Eric Hoskins), which will include a recommendation that they explore the feasibility of introducing universal public coverage of 125 essential medicines as a scalable approach to the introduction of national pharmacare

Climate change and health

- The Board endorsed a Call to Action on Climate and Health by the Global Climate and Health Alliance, which speaks to phasing out coal and includes a transition away from oil and natural gas to renewable energy

International/global health

- With the CMA’s departure from the [World Medical Association](#), ideas on championing health issues at a global level were explored with a focus on mirroring successful initiatives such as the International Conference on Physician Health (in collaboration with the American and British medical associations)

2019 Federal election strategy – CMA objectives

- Increase the CMA’s visibility as Canada’s leading health advocacy organization
- Be recognized as leading the call for a pan-Canadian vision for health care
- Influence political leaders to engage on health care by talking about innovative solutions

Policies/papers for consultation with members and key stakeholders

- CMA-FMWC joint discussion paper: Gender equity and diversity in Canadian medicine
- CMA-Association of Medical Microbiology and Infectious Disease Canada joint brief and policy: Antimicrobial resistance and stewardship
- CMA-Canadian Academy of Sport and Exercise Medicine-College of Family Physicians of Canada: Head Injury and Concussion

Rescinding policies

- As part of a systematic review, six CMA privacy-related policies, already developed by other stakeholders (e.g., Canadian Medical Protective Association, etc.), will be rescinded. These are:
 - [The medical record: Confidentiality, access and disclosure](#)
 - [Data sharing agreements: Principles for electronic medical records/electronic health records](#)
 - [Physician guidelines for online communication with patients](#)
 - [Social media and Canadian physicians: Issues and rules of engagement](#)
 - [Disclosing Personal Health Information to Third Parties](#)
 - [Need to Know and Circle of Care](#)
- Relevant principles contained in the above have been articulated in CMA’s policy *Principles for the Protection of Patient Privacy* ([English](#) / [French](#)) and accompanying background document ([English](#) / [French](#))

[Communities of Interest](#) – Update

- The CMA is currently onboarding five communities of interest sponsored by grant winners: creating an inclusive and equitable medical community, Indigenous health, substance use, providing care to marginalized populations, and medically assisted dying assessors and providers
- A soft launch is planned in Q4 2018, with a broader launch in Q1 2019; the CMA will establish a process for members to launch discussion groups on our platform – unfunded but supported with resources and tools
- The CMA also plans to launch in 2019 three types of communities: one for members and patients to engage directly with the CMA to give feedback on policies and priority areas; a second category to support programs or activities (e.g., ambassadors, advocacy programs); and a third focused on specific issues or causes (e.g., physician health)

[Member policy proposals](#)

- This new (pilot) process provides more opportunities for member input into CMA policy development with a year-round intake and consultation process
- Policy proposals are reviewed by a physician review group; the Board may then refer proposals to a committee or working group for further consideration or consult as needed with members, provincial/territorial medical associations, affiliates, etc., or approve a proposal without consultation if it is non-controversial, supports a policy gap or requires little/no resources to implement
- The review group is developing standardized review tools to assess proposals as well as a communication protocol to ensure transparency; the first two proposals received are progressing through the process

[Choosing Wisely Canada \(CWC\) – Update](#)

- Over the next four years, CWC plans to lead large-scale implementation projects to reduce overuse, and measure related impacts locally, regionally and nationally; one target area is unnecessary red blood cell transfusions, where overuse can lead to potential harm for patients
- CWC also plans to continue to build capacity across the system so that reducing overuse becomes an increasingly common feature of good health care delivery, by bolstering measurement and evaluation efforts and expanding the number of provider organizations adopting CWC recommendations
- This plan will require \$3.5 million per year in funding. The CMA has committed to \$250,000 per year over four years (\$1 million total and consistent with previous funding); the remaining funding is being sought from federal/provincial/territorial governments

Health Summit

- Visit <https://cmahealthsummit.ca/health-summit-live/> for a summary report of the issues presented and discussed at the inaugural Health Summit, including innovation, collaboration, better care for Indigenous people, improving access, reducing health inequities, and open dialogues on health system reform/redesign
- The CMA will host its second [Health Summit](#) in Toronto, **Aug. 12-13, 2019**, with a theme centered around Connecting Health — a pan-Canadian view; further details to follow

Governance

- Plans for 2019 include holding General Council (elections and policy session) and Annual General Meeting (including the Awards Gala) in conjunction with the Health Summit in August in Toronto (Aug. 11-13); further details to follow
- Work continues to promote policy avenues (summit, communities of interest, member proposals, regional forums, etc.) and develop additional mechanisms that support accountability and promote transparency
- Plans include virtual attendance at the AGM in 2019 with regional hubs across the country
- The Committee on Nominations will highlight in its call for nominations more diversity for elected positions
- The CMA will issue an open call this fall for expressions of interest for the position of AGM Chair

[MD Financial Management – CMA’s preferred financial provider – and Scotiabank sponsorship funding agreement](#)

- In tandem with the sale of MD, Scotiabank and the CMA are entering into a 10-year collaboration in support of physicians and the communities they serve. This will see an affinity investment of \$115 million over 10 years in projects and initiatives. The CMA will also exclusively promote MD as the preferred provider of financial products and services to Canadian physicians and their families
- The CMA plans to work closely with members to hear how the affinity commitments and proceeds from the sale can be used to build initiatives that support our vision of a vibrant profession and a healthy population. In early 2019, the CMA will hold four member forums to connect directly with members and start exploring the possibilities

CMA Enterprise

- The CMA has established two new subsidiaries, CMA Holdings (2018) Inc. and CMA Investco Inc., to oversee the investment and management of the assets from the sale of MD Financial
- Interim boards have been established for each subsidiary and the search will begin shortly to populate these boards with highly skilled individuals for the longer term