



The President's Letter

Dr. Noel W. Grisdale



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April 1, 2009

Dear Member:

March 23 was the first day on the job for the new chief executive officer (CEO) and president of Alberta Health Services (AHS), Stephen Duckett, PhD. With his arrival come hopes and expectations for progress on many fronts.

I'd like to update you on where we stand with the relationship between Alberta Health Services and the Alberta Medical Association (AMA). There was a two-hour session at the Representative Forum (RF) March 6 and 7 and we received excellent direction. The key areas of discussion were:

- Draft provincial medical staff bylaws and outstanding issues
- The relationship between regional medical organizations/regional medical staff associations and the AMA
- A proposal for formation of a provincial Physician Liaison Council

We were also pleased that Dr. David Megran, who only days earlier had been appointed senior physician executive of AHS, attended RF for part of the first day and spoke to delegates at lunch. Earlier in the week Dr. Megran had met with AMA CEO Michael A. Gormley and me, and he also presented to the Council of Presidents.

On Monday this week, you should also have received a letter from Dr. Megran that the AMA emailed and faxed to physicians on his behalf. (The letter is available now on the AMA website www.albertadoctors.org. Log in with your member number and password, click the Advocacy tab, top right and then choose Provincial Medical Staff Bylaws.)

Medical staff bylaws

As of today, the former regional health authorities ceased to exist. That means there are still nine sets of medical staff bylaws in the province – but only one physical region. As Dr. Megran wrote in his Monday letter, the current bylaws will remain in effect until April 1, 2010. Obviously, though, this will create some challenges!

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As reported in previous *President's Letters*, the AMA has been part of a multi-party working group that was asked to draft a single set of provincial medical staff bylaws. Thank you to those members who took time to visit the AMA website in the past month to review the latest (but still not final) draft incorporated in the document *Version 10, Provincial Medical Staff Bylaws Task Group – Final Report*.

The Council of Presidents has been tasked with reviewing and guiding bylaws development. This group has also been invaluable in helping to formulate a set of principles that will guide the AMA in building a relationship with AHS.

The RF reviewed and supported the list of outstanding issues still to be addressed in subsequent drafts of the bylaws. These include:

- Uncertainty around
 - The structure of the provincial medical staff organizational structure/administrative structure
 - Bylaws-related processes, e.g., amending bylaws, developing and amending rules, performance assessment, etc.
 - The impact of anticipated changes to *Hospitals Act* and other legislation
- Concerns regarding due process and procedural fairness
- Lack of clarity regarding “appointment” vs. “clinical privileges”
- Notification provisions for College of Physicians and Surgeons of Alberta
- Balancing AHS policy adherence with professional ethics and freedom to advocate for patients
- AHS recognition of physician autonomy and fiduciary responsible to patients
- AHS obligations to physicians, e.g., appropriate resource allocation

Version 10 (and all the feedback received from physicians and the Representative Forum) will now form the starting point for new discussions to work toward the final, single set of bylaws.

As I mentioned in a note accompanying Dr. Megran’s letter, AHS will establish a new bylaws working group with equal representation from the AMA and AHS and with non-voting representation from Alberta Health and Wellness (AHW). The group will be chaired by Dr. Megran and the vice-chair will be named by the AMA.

The RF has asked the Council of Presidents, made up of presidents of the regional medical organizations/regional medical staff organizations, and supported by the AMA, to take the lead in representing physicians.

The committee will:

- Incorporate the AHS medical staff administrative structure into the provincial medical staff bylaws
- Reach agreement on a provincial medical staff bylaw document that can be implemented by April 1, 2010
- Advise AHW of legislative changes that will be necessary to enact the new bylaws.

Once completed, the draft bylaws will be forwarded to all affected physicians for feedback and a ratification vote. If by chance the medical staff, the AMA and/or AHS cannot agree on certain points, the minister of health and wellness will have authority to resolve any outstanding issues.

Regional medical staff and the AMA

With the appointment of Dr. Megran, and input from the new CEO, we hope and expect to soon see some definitive information on the medical staff administrative structure within AHS. With this information, the AMA can consider how to align the existing regional medical organization/ regional medical staff association (RMO/RMSA) structure with AHS for purposes of advocacy and communication of issues around delivery of care.

This realignment was the subject of extensive discussion at the RF, including a review of work done so far by the Council of Presidents and the AMA Board of Directors on the future relationship between the AMA and the RMO/RMSAs.

What are the threats and opportunities facing these groups? In what way are they valued by local physicians? How do RMOs/RMSAs need to evolve to continue to deliver value in the new single AHS environment? How will members and sections be affected?

Delegates also considered how the RMOs/RMSAs and the AMA could strengthen the value of both groups for all members. Key questions include rules of membership, funding and managing any overlap of issues within the relationship with AHS.

The RF directed the Board of Directors to examine the feasibility of a strong and integrated partnership between the AMA and the current RMOs/RMSAs - or the future zonal medical organizations that may emerge as AHS rolls out its new administrative structure.

Proposal for a provincial Physician Liaison Council

Past *President's Letters* have posed the question: What relationship, and on what kinds of issues, do Alberta Health Services and organized medicine wish to create?

Certainly there are many issues to be discussed, from bylaws to negotiations, from the role of physicians in planning for the system to electronic medical record-electronic health record concerns and more.

Detailed discussions on bylaws and other matters do have their venues, but the Council of Presidents and AMA board believe that a venue for high-level discussion – a provincial Physician Liaison Council – should be created.

Discussions at this venue should be without prejudice and focus on overall direction rather than fine details. Both physician and AHS representatives should be free to bring forward matters for discussion.

The RF supported this direction, including a five-to-six member AMA slate including:

- Representation from the Board of Directors
- Representation from the Council of Presidents
- Two representatives appointed by the RF
- Physician representation from the ad hoc group reviewing the McKinsey Report
- AMA chief executive officer.

RF appointees to the council would attend on behalf of physicians in general, not their particular section or region. Five RF delegates are standing for two appointments to this council:

- Dr. Stephen L. Cassar
- Dr. Kevin M. Hay
- Dr. D. Jill Konkin
- Dr. Carl W. Nohr
- Dr. Wendy L. Tink

RF delegates will receive voting information in the coming week and votes will be counted Wednesday, April 15.

Suggested membership from AHS would include board representation, the AHS CEO and the AHS senior physician executive.

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I will keep you apprised on the development of the Physician Liaison Council concept and discussions with Alberta Health Services. As we move forward, strong linkage back to the RF will be critical.

I continue to be grateful for and impressed with the collective wisdom, passion and energy of RF delegates, the Board of Directors and individual members who take time to email and call. It's that kind of dedication that makes the AMA a robust organization whose members are truly driven to put Patients First®.

Yours truly,

Noel W. Grisdale, MD, CCFP
President

P.S. Tomorrow you will receive by email the first issue of *Focus on Bylaws*. Similar in approach to the popular *Focus on Negotiations* bulletins used in 2008-09, *Focus on Bylaws* will explore the many facets of provincial medical staff bylaws development in short, simple, easy-to-read bulletins.