



SGP BULLETIN

November 21, 2017

November Update

Dear Family Physician,

Negotiations 2018

At the completion and signing of the Amending Agreement last year, the AMA immediately sent a letter to Alberta Health to re-open negotiations for the next agreement since the Amending Agreement will expire in April 2018.

Very soon, the AMA Negotiating Committee will be meeting with Alberta Health to begin talks.

The Section of General Practice has sent a letter to the AMA Board to inform them of what we feel is important to family physicians in this next round of negotiations.

Some of the items of interest to family physicians include:

- the importance of the Business Cost Program to support increasing overhead challenges
- continued collaborative work on Blended Capitation to improve the present model
- consideration of other payment models that incent and support medical home/continuous comprehensive care family practices
- continued support of the Central Patient Attachment Registry to make it a valuable tool to clinically and financially support medical home family practices
- support for the expansion of IM/IT and support the information integration process (CII) so it is a valuable resource for family physicians and our patients
- support for fee increases to family physicians in order to recognize increased demand and the valuable role we play in the healthcare system
- recognition that any cost savings found within the section be reallocated within our section to support physicians practising comprehensive primary care
- recognition of family physicians on-call for their panel of patients

It is highly unpredictable how these negotiations will turn out, particularly with the present financial status of the province. The Section of General Practice recognizes the challenges we face in primary care and will continue to advocate for better support.

Disruptive Physician Conference

On November 9, a one-day conference was held to discuss disruptive/unprofessional physician behaviour. This was a jointly sponsored conference involving the College of Physicians and Surgeons, Alberta Medical Association, Alberta Health Services, Health Quality Council of Alberta and Primary Care Networks.

Physician leaders from across the province met to discuss, address and strategize on how to manage disruptive/unprofessional behaviour by physicians and I am highlighting this in the SGP Bulletin to further increase awareness of the issue.

Disruptive behaviour is an enduring pattern of conduct that disturbs the work environment. A physician whose behaviour is disruptive cannot, or will not, function well with others to the extent that his or her behaviour, by words or actions, interferes with or has the potential to interfere with quality health care delivery. The gravity of disruptive behaviour depends on its nature, the context in which it arises and the consequences which flow from it (CPSA Physician Health Monitoring Policy, revised 2014).

Disruptive behaviour has significant impacts on the healthcare workplace (including clinics) and on patient safety. It can obstruct consultation processes, impede staff communications with physicians and increase avoidant behaviour by staff and other colleagues. Disruptive behaviour ultimately lowers morale and often results in increased staff turnover and sick time, as well as increased administration time to deal with the behaviour and its impacts. This kind of behaviour is a negative example to set for students and residents at a critical time in their learning development and could have lasting impacts on their professional conduct.

I encourage everyone to review the [information available from the CPSA](#) and act as leaders in creating and maintaining positive work environments that support professional and collaborative behaviour. This will go a long way toward improving the quality of the care we provide.

Once again, please e-mail the Section if you have questions or comments about these or other issues in primary care at gppres@albertadoctors.org.

Regards,



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President - AMA Section of General Practice

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