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To all Ontario Family Physicians:

December 1, 2008

Healthcare in Ontario: *"Resources for some, some of the time"*

There has never been a time in Canadian and Ontario medicine with as much potential for positive transformation as there is now. However, many of the changes in healthcare over the past few years have unfortunately been driven by the needs of government rather than those of patients or physicians. Providing adequate resources and care is becoming a scenario best summed up by the phrase: "Resources for some, some of the time". This is hardly an acceptable arrangement - either for patients or physicians.

What needs to change? In our opinion, two things:

- 1) **improved accountability by the Ontario Medical Association (OMA) to the physicians that it represents; and**
- 2) **the freedom to innovate and explore alternative ways of delivering healthcare in Ontario.**

Obviously, these considerations transcend the concerns of family physicians alone, and are applicable to all physicians in Ontario. Allow us a few minutes of your time to explain further.

Improved accountability of the Ontario Medical Association to its members is an absolute necessity. While Ontario physicians are legally obliged to accept the OMA as its government-appointed representative body (Bill 8, *the Commitment to the Future of Medicare Act*, 2003), and are also obligated to pay the OMA dues (*the Ontario Medical Association Dues Act*, 1991), there now exists a "wait your turn" mentality when it comes to meeting the needs of various physician groups. In most other Canadian provinces, dues payable to physicians' professional associations are voluntary rather than mandatory. It is perhaps not surprising that, in the light of such built-in accountability, these provinces have fared significantly better in gaining compensation and resources for their members, while still achieving voluntary membership rates of about 95%.

Affected physicians in Ontario - whose needs remain unmet - have no recourse except to wait and hope that at some undetermined future date they will be dealt with fairly and equitably. Meanwhile, the OMA attempts to balance the interests of its members and those of government in a collaborative arrangement, in part because government assures the OMA's ability to collect its dues. In good economic times this is an awkward predicament at best, with ill-defined or conflicting allegiances. It is expectedly a much less effective arrangement in recessionary times, as the stark new reality of deficit budgeting looms.

While continued government underfunding of healthcare undoubtedly contributes to the concerns of Ontario physicians and their patients, physicians are explicitly prevented by Bill 8 from exploring and innovating in order to create new ways of delivering and funding healthcare beyond the limited ways allowed by government. At the same time, other Canadian provinces are actively and successfully exploring sustainable alternatives - such as public-private partnerships, a two-tier approach and other creative solutions. The forced collaboration between physicians and government that was hailed as a solution to problems of sustainability in the '90s is now a major hindrance that prevents innovation.

Options beyond the government-mandated universal healthcare system are not discussed by the OMA, likely for fear of risking its collaborative relationship with the Ministry of Health and Long-Term Care (MOHLTC) and its attendant financial advantages. Instead, it seems to accept the current government agenda of requiring healthcare providers to bear the burden by tacitly accepting chronic underfunding and under-compensation by a cash-strapped provincial government driven by ideology rather than a realistic plan for sustainable healthcare.

So, how does this affect you?

Ontario physicians have among the lowest fees in Canada, and the present contract will do little to change this. For example, after having been without a contract for six months, the negotiated 3% top up to our fees scheduled to take effect in October, 2008 has now been pushed back to February, 2009 as a lump sum payment - again with no retroactive penalties or interest. Add to this the scheduled 3.6% increase in OMA dues in the face of a delayed 3% fee top-up, and the deal doesn't look so good at all, does it? We would not be surprised if further unilateral changes to the present deal appear in the near future.

We must stress that the Coalition of Family Physicians of Ontario recognizes the government's inability to provide better funding, especially at a time of fiscal contraction. However, we also view this as an especially important time for encouraging major innovation and reform of an otherwise unsustainable healthcare system. With or without the OMA, this is the direction that we have chosen to pursue and promote in 2009.

Other provinces have already taken successful steps in this direction by allowing a limited two-tier approach to healthcare delivery and funding. It is also the approach adopted by the rest of the Western industrialized nations, most of which have a more effective and equitable healthcare system than our own. Leadership in this area has also been provided at the national level by the Canadian Medical Association, which has chosen to open a dialogue on having more privately-delivered services alongside a robust public system. The past and present CMA presidents, Dr. Day from British Columbia and Dr. Ouellet from Quebec, are both influential and outspoken advocates of exploring such options.

It is time for Ontario's representative physician body to provide leadership in this direction - away from dependency, and towards more physician and patient empowerment - rather than serving short-sighted political agendas. Unfortunately, the OMA seems to be unable or unwilling to do this because of its close ties to government. To fill this void, we are presently forming alliances with other physician groups in Ontario, who are interested in reforming our healthcare system in new and exciting ways.

The present economic situation in Ontario necessitates new ways of looking at things in order to bring about true innovations in healthcare that will provide freedom of choice and better care to more patients in the long term. The Coalition of Family Physicians of Ontario will continue to support Ontario physicians as always, and invites you to join our efforts, as we move forward toward a compassionate, reasonable and sustainable healthcare system in 2009 and beyond.

Sincerely,

A handwritten signature in blue ink, appearing to be 'DM', with a long horizontal flourish extending to the right.

Douglas Mark MD, President
and the Board of the Coalition of Family Physicians of Ontario

P.S. We'll have more to say about our future plans, as well as sharing the details of our spring conference with our members, in the weeks ahead!

THE COALITION OF FAMILY PHYSICIANS OF ONTARIO