

Alberta Doctors' Digest

Thoughts from your new AMA president

Dear Members,

As I begin my term as president, I would like to thank the membership of the AMA for your vote of confidence. This is an honour that I certainly wouldn't have expected myself. Hopefully, I will prove worthy.

What does one say at a time like this? Physicians who know me can attest that I have no shortage of words when tilting at windmills. Here are some things that occur to me as I write this letter.

The past few years have been the craziest that I have encountered in my years of practice. Looking back, in 2019, the Alberta government's health platform included:

- enabling the medical home
- addressing wait times
- supporting those challenged by mental health and addiction issues

What issues face us now? I remind you that in the corporate world best practice in business planning is three priorities or maximum five. Here are the issues and areas of focus that I see on our planning plate (in no particular order):

- practice stability and viability vs budget management
- access/wait times (especially rural)
- human resource scarcity (physicians and allied health care professionals – again, especially rural)
- system leadership and relationship with government
- digital and information technology impact
- physician health and healthy working environments
- equity, diversity and inclusion, including Indigenous reconciliACTION
- reforming primary care (although I've yet to see anyone define "primary care")
- alternative methods of practice and payment mechanisms
- urgent care, third party entities, ARPs
- teams, virtual care, artificial intelligence
- stipends, overhead, Z-codes
- patient expectations and democratizing medical knowledge
- government priorities, e.g. MAPS, ASI
- self-regulation and autonomy
- COVID

Where should we focus to be strategic? I suggest three priorities:

- leadership
- viability
- patient care

The AMA and all physicians (leaders both formal and informal) need to be early partners in the design of system transformation for meaningful and sustainable progress to occur in these areas. We need to recognize that not all of these priorities will be resolved in the government time frame of five months or maybe four and a half years. We need to respect the capacity of physicians and staff who are often working off the sides of their desks while pursuing their main vocation: caring for patients. We need to understand the costs and opportunity costs of change management and ensure supports are in place. We need to address these things at the coalface. It does little to advance meaningful, engaged change where the rubber hits the road when providers are already standing ankle deep in Alberta Health or Alberta Health Services policy, watching the flush of another pathway or guideline wash into their workspace.

We need to convey that “team” is not simply a noun. It is an evolutionary process based on trust and respect. We need to take care of ourselves and our circle of care to be at our best. We have unique expertise that needs to be brought to the planning table early on. We need to embrace the perspectives, values and contributions of our colleagues, even if we cannot ascribe to them completely. We need to be seen – and behave – as leaders in the system and champions for patient care. To quote a former AMA president, “If you want to go quickly, go alone. If you want to go far, go together.”

The AMA and patients need each of you to be involved at the level that makes you comfortable. We will support you. I will keep you up to date. The Board of Directors met October 27 to 28 to begin the work of implementing our new agreement and addressing the direction provided by the Representative Forum at the September meeting. You’ll hear from me about outcomes and what happens next.

If you have things you would like to tell me, please reach me via email at president@albertadoctors.org. You can also comment on this letter on the AMA website.

Regards,

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