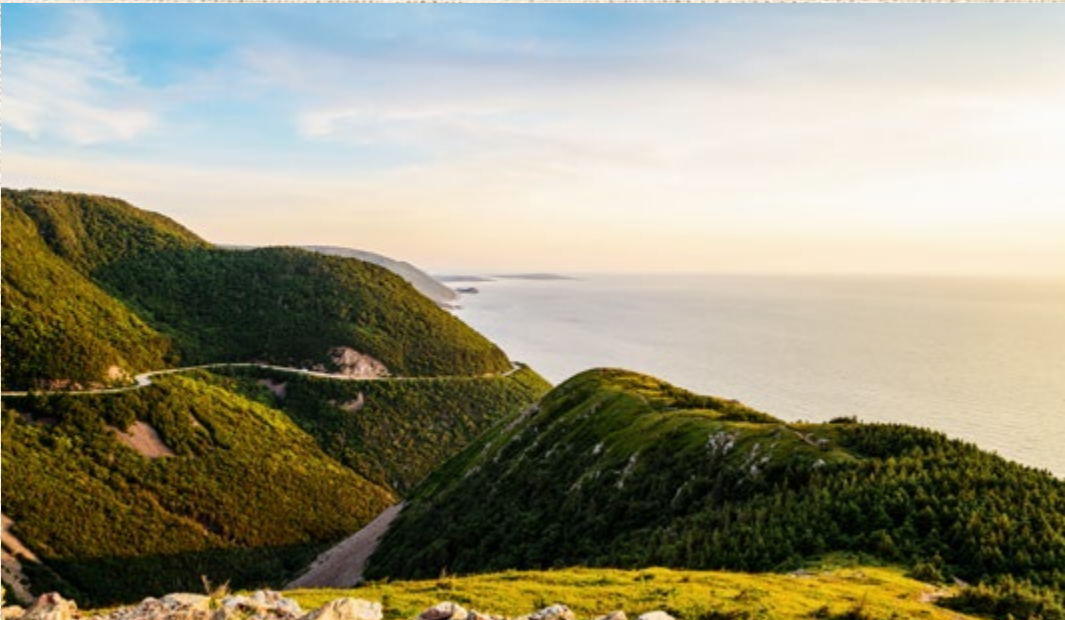


DOCTORS NOVA SCOTIA

2018 ANNUAL CONFERENCE

MEMBERTOU TRADE & CONVENTION CENTRE
CAPE BRETON, N.S.



ANNUAL REPORT TO COUNCIL 2017-18





ANNUAL REPORT TO COUNCIL 2017-18



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Leadership Message



Dr. Manoj Vohra



Nancy MacCready-Williams



Dr. André Bernard

At Doctors Nova Scotia (DNS), the theme of the past year has been advocacy: Advocacy for our members and the issues that matter to them. Advocacy to improve the practice environment for physicians in our province. Advocacy to strengthen the health-care system for all Nova Scotians.

This has meant taking a new, proactive approach to representing and supporting the evolving needs of our physicians, now and in the future.

We have taken every opportunity to make the well-being of physicians our top priority, not only in our day-to-day work, but also in all of our interactions with health-care stakeholders, elected officials, the media and members of the public.

The 2017–21 Strategic Plan is about connecting with and engaging our members, advocating on their behalf, and providing effective benefits and services. This supports our overall goal of helping physicians to thrive and have a positive impact on their patients' lives, at an individual and system level. That plan has guided our work over the past year.

In September 2017, we released *Healing Nova Scotia: Recommendations for a thriving physician workforce*. Based on feedback from physicians working on the front lines, this comprehensive report lists how we can improve the practice environment for physicians and recommends starting a Health System Physician Coordination Council (HSPCC) to bring all health-care stakeholders together. The first meeting of the HSPCC was held in March 2018. Going forward, the HSPCC will identify and oversee collective work on complex systems issues, strengthening health care in a coordinated way.

Doctors Nova Scotia also advocated to oppose the federal government's proposed changes to the taxation of private corporations. The changes would have had negative consequences for the majority of doctors in Nova Scotia. In September 2017, we held a

town hall that brought together 400 physicians in a school cafeteria to voice their concerns about the proposed changes. In November 2017, we presented our position to the Senate committee studying the issue. The changes enacted in January 2018 were less stringent than those originally proposed by the government, partly because of the association's advocacy work.

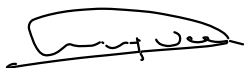
Developing and mentoring physician leaders is another goal of the strategic plan. After months of work, we launched the association's Physician Leadership Development Program in October. This program gives physicians the opportunity to learn and practise the skills they need to bring positive change to the health-care system.

This fall, the association also launched the Physician Advisory Team. These ambassadors travel the province, helping physicians connect with one another, solve their practice problems and build a strong community of physicians who can mentor and inspire one another.

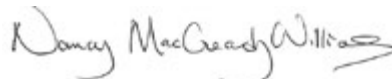
Following months of dialogue between DNS and all levels of government about the challenges facing in our primary health-care system, March 2018 brought a surprising win for the association. Government announced a landmark investment of \$39.6 million for primary care, including rate increases for family physicians, stipends for telephone and e-health services, and incentives for taking orphan patients and using electronic medical records. While there's still much more work to be done and many details to finalize, this investment is a positive first step toward helping recruit and retain family physicians in Nova Scotia.

Doctors Nova Scotia plans to keep the momentum going by encouraging the government to work productively with physicians, to honour its commitments and to continue making health care a priority in the future.

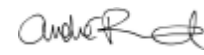
Enjoy reading this report to learn more.



Dr. Manoj Vohra, President



Nancy MacCready-Williams, CEO



Dr. André Bernard, Chair



**Doctors Nova Scotia
2017-18 Board of
Directors**

From left to right: Nancy MacCready-Williams (CEO), Drs. Heather Johnson, Alfred Bent, Michelle Dow (Past President), Manoj Vohra (President), Robyn MacQuarrie, Tim Holland (President-elect), Monika Dutt (past board member) Scott Mawdsley, Gary Ernest, John Murdoch, Caitlin Lees (resident representative), Kathy Gallagher, Minoli Amit, Mike Wadden, Kelly Dakin Hache, André Bernard (Chair), and Mr. Malik Ali (medical student representative)
Missing from photo: Drs. Celina White, John Ginn and Alex Mitchell

**Doctors Nova Scotia
2017-18 Board of Directors**

Eighteen physicians, one medical resident and one medical student serve as Doctors Nova Scotia’s Board of Directors. The Board provides the association with its overall strategic direction. The Board is a diverse representation of general practitioners and specialists practising throughout the province. The majority of Board members are elected through a member-wide election; three members are appointed to help ensure optimal member representation.

EXECUTIVE

- Dr. Manoj Vohra, *President***
- Dr. André Bernard, *Chair***
- Dr. Tim Holland, *President-elect***
- Dr. Michelle Dow, *Past president***
- Dr. Heather Johnson, *Audit Committee chair***

GENERAL PRACTITIONERS IN HALIFAX REGIONAL MUNICIPALITY

- Dr. Kathy Gallagher**
- Dr. John Ginn**

GENERAL PRACTITIONERS OUTSIDE HALIFAX REGIONAL MUNICIPALITY

- Dr. Heather Johnson**
- Dr. Michael Wadden**
- Dr. Gary Ernest**

SPECIALISTS IN HALIFAX REGIONAL MUNICIPALITY

- Dr. Scott Mawdsley**
- Dr. Alex Mitchell**
- Dr. John Murdoch**
- Dr. Kelly Dakin Hache**

SPECIALISTS OUTSIDE HALIFAX REGIONAL MUNICIPALITY

- Dr. Minoli Amit**
- Dr. Alfred Bent**

SECTION FORUM CHAIR
Dr. Robyn MacQuarrie

MARITIME RESIDENT DOCTORS REPRESENTATIVE
Dr. Caitlin Lees

DALHOUSIE MEDICAL STUDENT SOCIETY REPRESENTATIVE
Malik Ali

CANADIAN MEDICAL ASSOCIATION REPRESENTATIVE
Dr. Celina White



Dr. Heather Johnson
Audit Committee chair

THE AUDIT COMMITTEE OVERSEES the accuracy of Doctors Nova Scotia's financial statements by reviewing the effectiveness of accounting policies, internal controls and risk management practices.

The financial statements were audited by KPMG and no errors or omissions were reported.

The Aug. 31, 2017, year-end financial statements were approved by the Audit Committee and the Board of Directors. The statements are prepared in accordance with generally accepted Canadian accounting principles.

The unrestricted operating fund has a balance of \$2,491,564 (\$2,130,644 at Aug. 31, 2016). The operating fund reported a surplus of \$285,092 against a budgeted deficit of \$141,364 for a positive variance of \$426,456. Net operating expenses were below budget by \$452,000. \$201,000 of this relates to funding subsequently provided by the Department of Health and Wellness (DHW) for honoraria (\$154,000) and travel and meetings (\$47,000).

When the 2016–17 budget was approved, the new contract with DHW had not been finalized. Funding streams were uncertain, so 100% of program costs were budgeted to operations, even though the DHW had contributed funding in prior years. The contract was signed in Sept. 2016 and the DHW agreed to again fund certain costs. Other operating costs were under budget by \$251,000 due to delaying the start date of IT projects (data hosting and website replacement) as well as conservative spending practices due to the uncertainty of funding from the DHW. Investments fell short of budget by \$148,000, with overall earnings of \$302,000. The deprecia-

tion expense of \$228,000 was under budget by \$122,000.

The association invested \$137,676 in capital assets (\$165,483 in 2016). This included continuation of the member database replacement, computer upgrades, and boardroom furniture replacements.

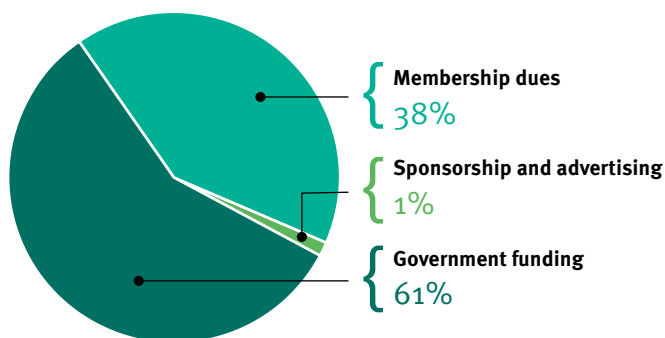
In accordance with the new Master Agreement signed in September 2016, Doctors Nova Scotia received \$6.526 million in government funding. Costs for member benefit plans (health and dental, parental leave and professional support) and benefits administration totalled \$5.071 million. Targeted project costs were \$1.447 million and other residual costs of \$8,000 accounted for the remainder.

Restricted deferred contributions managed by the Master Agreement Management Group incurred approved expenditures totaling \$1,908 to support the Audit and Appeal Committee and Fee Schedule Advisory Committee. In August 2017, the DHW approved the payment of \$1,058,900 from this (year-end transfer) fund to reimburse Doctors Nova Scotia for targeted project costs incurred during the first three quarters of the fiscal year.

Doctors Nova Scotia maintains a reserve of \$4.4 million to help defray costs if the provincial government stops funding the benefits programs (health and dental, parental leave and professional support).

The association has a healthy balance sheet and continues to perform well against annual targets.

Summary of Funding

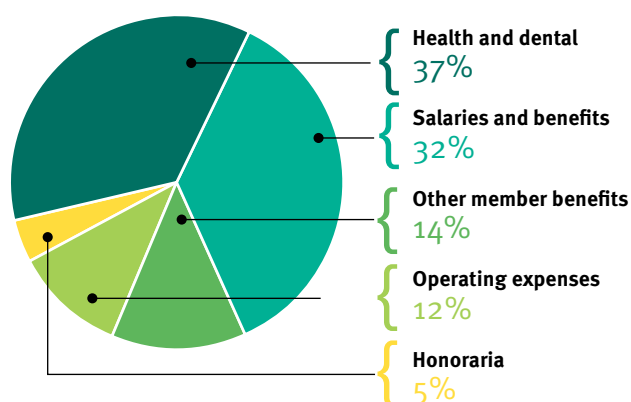


Government funding	\$6,526,515
Membership dues	\$4,121,801
Sponsorship and advertising	\$138,699

CMPA Funds received and disbursed in 2016–17 totalled \$3,906,172 (\$10,805,816 in 2015-16).

Doctors Nova Scotia maintains a contingency fund to help defray costs if government stops funding benefit programs (health and dental, parental leave and professional support). The fund also supports increased utilization of the programs over and above the fixed budget associated with the programs.

Summary of Expenses



Health and dental	\$3,958,580
Salaries and benefits	\$3,375,501
Other member benefits*	\$1,505,730
Operating expenses	\$1,240,536
Honoraria	\$497,682

*The "other member benefits" category includes parental leave, EMR, Business of Medicine, bursaries and CME



2017-18 ACHIEVEMENTS

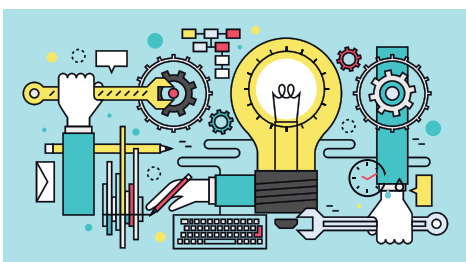
Dedicated physicians from across the province helped Doctors Nova Scotia (DNS) advance its strategic plan. It's been a very productive year – here are just a few of the achievements we celebrated.

STRATEGIC PLANNING

Doctors Nova Scotia (DNS) unveiled a new strategic plan to guide the association's work over the next four years, supporting the association's overall goal of helping physicians to thrive and have a positive impact on their patients' lives, at an individual and system level. It's all about connecting and engaging DNS members, advocating on their behalf, and providing effective benefits and services.

SUPPORT FOR PHYSICIANS

Burnout is a serious issue for Nova Scotia physicians, with the majority of those who responded to a survey on work-life balance saying they feel overextended, disengaged, ineffective or fully burnt out. To support physicians during these difficult times, DNS launched the Physician Advisory Team. Team members work with physicians to help solve practice or systemic problems and to help them to forge a network of physicians who can mentor one another—all goals aligned with DNS's strategic plan. Doctors Nova Scotia also expanded its Professional Support Program, with seven physicians across the province now providing confidential peer support for members in crisis.



BLUEPRINT FOR HEALING HEALTH CARE

Doctors Nova Scotia released *Healing Nova Scotia: Recommendations for a thriving physician workforce*, highlighting ways to solve the province's physician workforce issues. The association invited key health-care stakeholders to participate on the Health System Physician Coordination Council (HSPCC). Representing DNS on the council are Dr. Manoj Vohra, President; Dr. André Bernard, Board Chair; and Dr. Cindy Forbes. The first meeting of the HSPCC took place in March 2018. The Nova Scotia Health Authority has also created a Physician Recruitment and Retention Advisory Committee, a key recommendation of *Healing Nova Scotia*, which will bring DNS and other health-care stakeholders to the table.

AGENTS FOR CHANGE

Doctors Nova Scotia held its first Physician Leadership Development Program. This intensive six-month program gave 24 physicians the opportunity to hone their leadership skills so they can help influence health-system decisions and find solutions to complex, real-life problems.

ELECTION CAMPAIGN

Doctors Nova Scotia made health care an election priority by launching a comprehensive government and media-relations strategy. This included designing an advocacy tool kit for physician leaders and creating a website that collected the health-care positions from each political party and encouraged voters to email their local politicians. These resources helped physicians and Nova Scotians to raise their voices in support of health care, with Nova Scotians sending over 1,000 emails to politicians.

LEGAL ACTION

Doctors Nova Scotia filed two Notices of Intent to take legal action against the provincial government to resolve ongoing contract issues: the government's use of unapproved contracts for Alternative Payment Plan (APP) physicians and monies owed to DNS for physician benefits. Both parties have reached an impasse on these issues and need a third party to resolve them. The matters are currently before the courts.



FEDERAL TAX CHANGES

After the federal government announced tax changes for private corporations that would have negative consequences for the 75% of doctors practising in Nova Scotia who are incorporated, DNS hosted a town hall for physicians and politicians to discuss the issue. Four hundred physicians came together on a Saturday afternoon to voice their concerns and advocate against the changes, worried that they would make it even harder for the province to recruit and retain the physicians it needs. Attended by all major media outlets, the event resulted in extensive news coverage about the challenges physicians are facing across the province.



INVESTING IN PRIMARY CARE

Premier Stephen McNeil announced a \$39.6 million investment into primary care, a first step toward stabilizing the primary care system in Nova Scotia. The investment included rate increases for family physicians, stipends for telephone and e-health services, and incentives for taking orphan patients and using electronic medical records. The announcement came after months of public and behind-the-scenes advocacy by DNS and individual physicians and was based on recommendations by DNS to support comprehensive family practice in Nova Scotia.

REVAMPING THE PRIMARY CARE PAYMENT MODEL

A new Primary Care Payment Model Working Group, made up of family physicians and other health-care stakeholders, worked on a draft of a new payment model. The goal is to create a blended payment model for physicians in the province. Work is ongoing.

POSITION PAPERS

Doctors Nova Scotia published a position paper outlining the association's stance on cannabis legalization in the hopes of encouraging government to take a public-health approach that will help offset the harms associated with cannabis. The association has also been working with members to develop a palliative care position paper that will give guidance for the palliative aspect of end-of-life care. Finally, the association's Information Technology Steering Committee completed its work on an e-health position paper. The paper makes seven recommendations, highlighting the need for physicians to play a critical role in the design and implementation of integrated e-health initiatives that will enable improved access to patient care, continuity of care and quality of care.

2016-17 BUSINESS PLAN PROGRESS REPORT

STRATEGIC PRIORITY 1: Connect the profession

Commitment	Actions
Establish community connectors for each zone to support networking and community development throughout the province	<ul style="list-style-type: none"> • Resourced each zone with DNS Physician Advisors • Established relationships with physicians and health-system stakeholders in each zone • Hosted focused meetings in various communities to support physician members • Launched negotiations roadshow. Plan includes more than 100 meetings with physicians and DNS Board of Directors and Physician Advisors
Support growth of medical staff associations (MSAs)	<ul style="list-style-type: none"> • Developed MSA information primer to support education and establishment of MSAs • Developed grant program to support the establishment and development of MSAs, valued at \$10,000
Implement peer-to-peer networking and learning opportunities	<ul style="list-style-type: none"> • Hosted Electronic Medical Record (EMR) vendor showcases • Hosted collaborative care webinar, which connected physicians working collaboratively with other primary care providers, giving them an opportunity to learn from their colleagues' experiences • Hosted a session on medico-legal liability led by a physician from the CMPA

STRATEGIC PRIORITY 2: Advocate for the profession

Commitment	Actions
<p>Help make positive changes in population health and health-care policy through collaboration with the government, the Nova Scotia Health Authority (NSHA) and the IWK. Priorities are primary health care, e-health, physician recruitment and retention, and health promotion, to improve health at the population level</p>	<ul style="list-style-type: none"> • Developed a government relations strategy that supports the work of the strategic plan • Through the work of the Information Technology Steering Committee, launched an e-health position paper to support the association’s efforts to make positive changes in e-health policy (new EMR governance structure; One Person, One Record; EMR use in hospitals; MyHealthNS; etc.) • Facilitated discussions and represented physicians in discussions with other professions about collaboration and scopes of practice • Conducted initial research and held discussions with the NSHA regarding registered nurses prescribing • Worked with the association’s Policy and Health Issues Committee to explore the development of a position paper defining the scope of practice for family physicians • Implemented Choosing Wisely Nova Scotia: developed collaborative steering committee with representation from Dalhousie Medical School and the NSHA; successfully received funding from Choosing Wisely Canada; hired a provincial coordinator to implement Choosing Wisely in Nova Scotia
<p>Develop collective positions on key policy issues to help advance provincial policy on the highest standard of health promotion and care</p>	<ul style="list-style-type: none"> • Launched physician engagement and primary care position papers, and developed e-health, legalization of cannabis and palliative care position papers • Shared positions with physicians, key stakeholders and the public
<p>Pursue fair compensation for physicians by negotiating provincial and local agreements</p>	<ul style="list-style-type: none"> • Took legal action against the Department of Health and Wellness to resolve key contract issues related to benefits money owed to DNS and the use of unsanctioned Alternative Payment Plan contracts • Developed strategy for 2019 contract negotiations; launched member outreach to collect input regarding negotiations priorities from members across the province • Completed C/AFP listening tour and developed Part Two of the <i>Healing Nova Scotia</i> report
<p>Advocate for members’ economic interests (new compensation models, fees, billing audits)</p>	<ul style="list-style-type: none"> • Contributed to the development of a new hospitalist payment model • Established working group to begin developing a new blended payment model for primary care in Nova Scotia • Hosted a town hall that saw 400 physicians join together to advocate against proposed federal tax changes that impact incorporated physicians
<p>Enhance the reputation of physicians and of DNS as their professional association</p>	<ul style="list-style-type: none"> • Developed and implemented an integrated marketing strategy to enhance the public perception and reputation of physicians, aligned with the priorities of the annual business plan. Strategies include digital marketing, social media and media relations

2016-17 BUSINESS PLAN PROGRESS REPORT

STRATEGIC PRIORITY 3: Serve the profession

Commitment	Actions
Foster a healthy physician workforce	<ul style="list-style-type: none"> Enhanced the Professional Support Program by growing the complement to seven physicians across the province responding to the needs of physicians, medical students and residents Conducted physician burnout survey and engaged a group of physician leaders to help develop an action plan in response to the results
Provide practice supports to help with business side of practising medicine including: education opportunities regarding billing, practice transitions, collaborative practice, advanced access and retirement; billing and audit appeal processes; and advice on e-health options and issues	<ul style="list-style-type: none"> Developed tool kits to help physicians with billing new fees and transitioning to collaborative practice Provided ongoing enhanced contract support to individual physicians, with specialized attention to APP physicians Provided ongoing enhanced support for physicians undergoing a billing appeal Provided ongoing EMR and e-health support for physicians through our EMR advisors
Advocate that policies implemented by the health authorities and provincial government that impact physicians' practices are fair, transparent and efficient	<ul style="list-style-type: none"> Ongoing facilitation of resolution processes for members in cases where there are concerns about fairness in the application of policies that impact physicians
Support the development of physician leaders and identify opportunities for physician leaders to provide meaningful and impactful contributions	<ul style="list-style-type: none"> Launched a new Physician Leadership Development Program (PLPD) and additional Physician Leadership Institute (PLI) courses to support the development of physician leaders in Nova Scotia Implemented PLI courses to serve as prerequisites for physicians who are potentially interested in applying for the next PLDP. Also examined the business case for offering courses to early career leaders for specific skill-building topics

To be successful in these priorities, we also need to build or strengthen the organizational foundations that support the advancement of our strategic priorities.

OPERATIONAL

Ensure financial sustainability	<ul style="list-style-type: none"> • Developed monthly reporting system and new overdue dues collection process
Enhance organizational structure, capacity and systems	<ul style="list-style-type: none"> • Developed and launched new association website • Organizational redesign to align resources with new strategic plan
Enhance member communications	<ul style="list-style-type: none"> • Implemented annual member communications strategy, aligned with priorities and activities of the organization (including AGM, magazine, member communications, website, email and e-newsletter, etc.)
Improve project management, performance reporting and accountability	<ul style="list-style-type: none"> • Implemented new project management tools (Basecamp, Everhour) for team leads to enhance project management and accountability • New monitoring and performance framework for the Strategic Plan in development
Support employees to ensure a high level of satisfaction and engagement	<ul style="list-style-type: none"> • Need for conflict resolution training and mental health first aid training identified; training sourced and delivered

CATORS

In Memoriam *(April 1, 2017 – April 15, 2018)*

Dr. John H. Feindel, 86

Bedford, N.S.
July 18, 2017

Dr. William A. Cochrane, 91

Calgary, Alta.
Oct. 6, 2017

Dr. Gopi R. Mirchandani, 93

Halifax, N.S.
Jan. 1, 2018

Dr. Donald E. Morris, 90

Halifax, N.S.
July 19, 2017

Dr. John G. Gatien, 75

Halifax, N.S.
Oct. 8, 2017

Dr. Albert J. Shaw, 94

Halifax, N.S.
Jan. 16, 2018

Dr. Robert P. Belliveau, 94

Meteghan, N.S.
July 25, 2017

Dr. George E. Boyd, 78

Sydney Forks, N.S.
Nov. 3, 2017

Dr. Richard G. Simpson, 91

Sydney, N.S.
Jan. 26, 2018

Dr. Aditya V. Mishra, 55

Halifax, N.S.
Aug. 4, 2017

Dr. Inder N. Bhatia, 95

Halifax, N.S.
Nov. 6, 2017

Dr. William F. Mason, 82

Halifax, N.S.
Feb. 7, 2018

Dr. Ahsan H. Taj, 79

Naples, Florida
Aug. 13, 2017

Dr. Basilon C. Cole, 71

Halifax, N.S.
Nov. 10, 2017

Dr. Dennis W. Johnston, 83

Halifax, N.S.
Feb. 11, 2018

Dr. Kimberly Lynn Trites, 45

Lake Echo, N.S.
Aug. 20, 2017

Dr. Philip D. Muirhead, 71

Musquodoboit Harbour, N.S.
Nov. 12, 2017

Dr. Alexander E. Hipwell, 68

Dartmouth, N.S.
Feb. 15, 2018

Dr. Richard A. MacLachlan, 68

Stillwater Lake, N.S.
Oct. 19, 2017

Dr. Sally Sizer, 66

Mahone Bay, N.S.
Dec. 22, 2017

Dr. Arnold R. Burden, 95

Windsor Junction, N.S.
March 17, 2018

