



SATURDAY, OCTOBER 17, 2020

# ANNUAL REPORT TO COUNCIL 2019-20



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# Leadership Message







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his year, physicians in Nova Scotia have faced more challenges than could have ever been predicted. The COVID-19 pandemic demanded the very best from physicians across the globe. In Nova Scotia, the physician community worked together to solve problems in a rapidly changing environment and modified their practices to respond to the needs of patients and the broader health-care system.

Doctors Nova Scotia (DNS) has been focused on keeping physicians well and supporting them as they deliver exceptional care to Nova Scotians. The association's priority has been to nurture a strong, stable physician workforce. We're pleased to report that DNS has made progress on all the key recommendations in the report, Road Map to a Stable Physician Workforce. One critical achievement was negotiating an investment of \$135 million in new physician funding contracts to help stabilize some of the most critical services in our health-care system.

The new agreements address several big issues, including compensation, physician engagement, the MSI billing audit process and DNS's role as the sole bargaining agent for physicians.

The Master Agreement was ratified by 94% of voting members and the Clinical/ Academic Funding (C/AFP) contract was ratified by 96% of voting C/AFP physicians and 12 of 12 departments. In total, 68.9% of eligible members voted during ratification.

At the end of the four-year contracts, family physicians, anesthetists and emergency physicians will be the top paid in Atlantic Canada. Psychiatry and obstetrics/gynecology will come very close. While the contracts don't solve every problem in the system and don't make every speciality nationally competitive, they do reflect a significant investment in the future of our health-care system.

Doctors Nova Scotia has also made progress on improving the work environment for physicians in Nova Scotia. Physicians are burdened by a significant amount of process and paperwork, taking time away from patient care. Much of this work is unpaid. Doctors Nova Scotia is working with the Office of **Regulatory Affairs and Service Effectiveness** to reduce administrative burden on doctors.

In addition, DNS is working with the Department of Health and Wellness (DHW) to improve the audit process in Nova Scotia. Physician audits have been unnecessarily punitive and have contributed to low physician morale. Doctors Nova Scotia and the DHW are working to ensure that first-time audits will be primarily for the purposes of education.

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At the beginning of the COVID-19 pandemic, DNS announced improved fee codes to support synchronous virtual care (care provided by telephone and videoconferencing). More than 1,100 family doctors and other specialists used Zoom for Healthcare, Medeo, Health Myself or Telus EMR Virtual Visit. Even more physicians provided care over the telephone. Doctors Nova Scotia continues to advocate that government extend the codes for several months, until an evaluation of the program is complete.

Shortly after, DNS announced an income stabilization program to stabilize the supply of physicians to meet the demands of the health-care system during the pandemic. As we now prepare for a possible second wave of COVID-19, DNS continues to work closely with the DHW to ensure support remains in place for physicians who face the pressures of the pandemic.

The DNS Professional Support Program joined forces with Nova Scotia Health to provide enhanced support to physicians by offering weekly Zoom meetings on coping with COVID-19. Through webinars, weekly touchpoints, new resources and extended availability, Drs. Jaqueline Kinley and John Chiasson helped Nova Scotia physicians manage the stress of the pandemic.

Keeping members informed about COVID-19 was a key priority for DNS. The association provided regular member updates, an online information hub, a range of physician tool kits and a series of webinars, helping members stay in the loop about important information to keep themselves and their patients safe.

A strong and vibrant physician workforce is critical to a high-functioning health-care system, and we will continue to work to support physicians in all aspects of their practice. Read more about our recent work in the following pages.

Dr. Robyn MacQuarrie President

Jonay MacCready

Nancy MacCready-Williams CEO

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Dr. André Bernard Chair

# Doctors Nova Scotia 2019–20 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. Gary Ernest, President Dr. Tim Holland, Past President Dr. Robyn MacQuarrie President-elect Dr. André Bernard, Chair of the Board Dr. Mike Wadden, Audit Committee chair

FAMILY PHYSICIANS IN HALIFAX REGIONAL MUNICIPALITY Dr. Gehad Gobran Dr. Cindy Marshall

FAMILY PHYSICIANS OUTSIDE HALIFAX REGIONAL MUNICIPALITY Dr. Colette Sauveur (regional representative) Dr. Stephanie Langley (regional representative) Dr. Amanda MacDonald Dr. Mike Wadden

SPECIALISTS IN HALIFAX REGIONAL MUNICIPALITY Dr. Tammy Keough-Ryan Dr. Kelly Dakin-Hache Dr. Alex Mitchell

SPECIALISTS OUTSIDE HALIFAX REGIONAL MUNICIPALITY Dr. Todd Stoddart Dr. Alfred Bent Dr. Gerard MacDonald (regional representative)

SECTION FORUM CHAIR Dr. Mary Gorman

MARITIME RESIDENT DOCTORS REPRESENTATIVE Dr. Elias (Leo) Fares

DALHOUSIE MEDICAL STUDENT SOCIETY REPRESENTATIVE **Neetin Prabhu** 

CANADIAN MEDICAL ASSOCIATION REPRESENTATIVE **Dr. Celina White** 

# Financial Report (Sept. 1, 2018 to Aug. 31, 2019)



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.

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

The Aug. 31, 2019 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 \$2,366,993 (\$2,490,650 at Aug. 31, 2018). The operating fund reported a deficit of \$155,517 against a budgeted deficit of \$435,043 for a positive variance of \$279,526. This positive budget variance was made Dr. Michael Wadden up of the following components:

\$29,628 revenue - sponsorship funds exceeded budget

\$80,365 expenses – one departure and two maternity leaves reduced staff costs below budget

\$126,697 investments – unrealized gains from market value adjustments exceeded budget

\$42,836 depreciation expense – new ERP system from future commitments fund deferred to 2020

The association invested \$215,625 in capital assets (\$348,651 in 2018). This included new boardroom audio visual equipment and electrical improvements, computer hardware and software upgrades, President's office furniture and initial planning for an ERP system replacement.

In accordance with the current Master Agreement with the Department of Health and Wellness, Doctors Nova Scotia received \$6.572 million in funding toward the cost of member benefits (recruitment and retention) programs. This funding was distributed to the various benefit programs as follows:

\$4,300,194 – health and dental (65% of total plan costs; 35% paid by plan members)

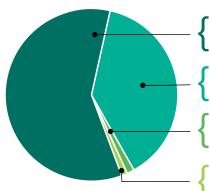
\$701,000 - parental leave

\$73,099 - professional support

\$1,198,000 - targeted projects

\$299,999 - benefits administration

Overall, the association has a healthy balance sheet and continues to perform well against targets set annually.



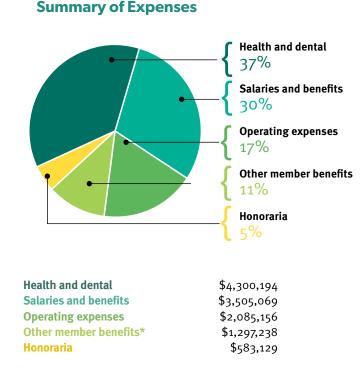
#### **Summary of Funding**

**Government funding** 60% **Membership dues** 38% Other (registration) income 1%

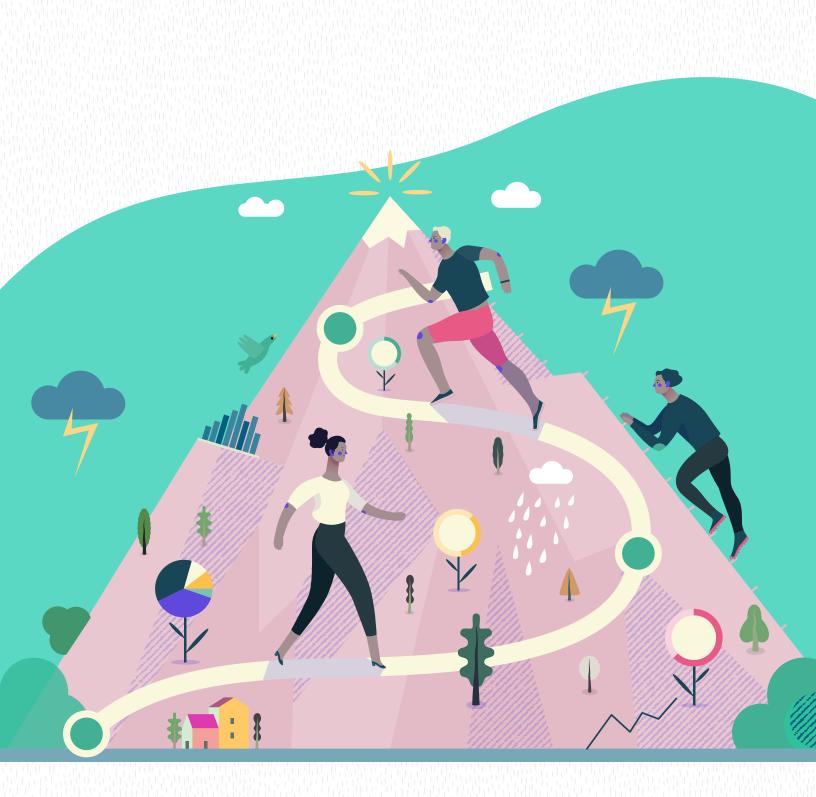
Sponsorship and advertising 1%

Government funding	\$6,572,292
Membership dues	\$4,250,818
Other (registration) income	\$153,249
Sponsorship and advertising	\$100,310

CMPA Funds received and disbursed in 2018-19 totaled \$0 (\$0 in 2017-18).



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



# 2019–20 Achievements

Doctors Nova Scotia reflects on the resolve of physicians from across Nova Scotia who have demonstrated unflappable leadership in the midst of a global pandemic. Here are some achievements of the last year.



#### ALTERNATIVE PAYMENT PLAN WORKING GROUP

The 2019 Master Agreement includes a commitment to develop a new framework for contracting physicians on alternative payment plans (APP) that ensures consistency and fairness, administrative ease of contracting, accountability and care tailored to the needs of the community. The MAMG is in the process of finalizing the terms of reference and project plan for this work as well. Physician representatives and staff from DNS, the DHW and Nova Scotia Health will form the working group.



## DR. ROBERT STRANG GAVE KUDOS TO PROVINCE'S DOCTORS

In June, Dr. Robert Strang spoke to the Board of Directors about the provincial response to COVID-19. He thanked the province's doctors for their unwavering commitment to the care of Nova Scotians and recognized the personal sacrifices many on the front lines made as they rose to the challenge.

#### AUDIT INITIATIVE

The 2019 Master Agreement includes a commitment that first-time audits (for example, an audit of a physician for the first time on a given fee code) will be primarily for the purposes of education. The MAMG is developing a work plan to review the current audit process and make recommendations on the criteria that should govern first-time audits and administrative penalties to be levied in the event of documentation and/or administrative errors in billing. While the contract requires this work to be completed within six months of contract execution, the MAMG has agreed that this deadline must be extended to accommodate the system's necessary focus on the COVID-19 pandemic.

#### GRASSROOTS COMMUNITY OUTREACH

Recognizing that Nova Scotia communities play a key role in successful physician recruitment and retention, DNS fostered relationships with organizations and community groups across the province that are working hard to recruit doctors. For many communities, lack of funds to host social events and other activities has been a barrier to physician recruitment. The DNS Community Physician Hospitality grant program provided 24 grants to groups to help support grassroots physician recruitment efforts and initiatives.

#### MEDIA COVERAGE

Media coverage was a cornerstone of DNS's presence in 2019. Over the past year, DNS staff have managed 322 media requests, connecting physician spokespeople and DNS staff with journalists from local, national and international media outlets. Not only has the media coverage helped voice the important issues facing Nova Scotia physicians, patients and the health-care system overall, but it has also been an opportunity for physicians to offer their own solutions to the problems and to pressure decision-makers to take meaningful steps to improve Nova Scotia's health-care situation. In sharing their stories publicly, physicians have brought forward insightful, trusted perspectives that have helped usher in positive change.

#### INCOME STABILITY FOR FEE-FOR-SERVICE PHYSICIANS

The arrival of COVID-19 in Nova Scotia has asked the a lot of the province's physicians. Many experienced disruption in their practices, many had redeployed to help with the fight, and others had already been in the trenches, and have been for months, planning and providing front line care to Nova Scotians. To support physicians through this unprecedented time, the income stability program compensated fee-for-service physicians who committed to be available for redeployment as needed during the pandemic.

#### PROFESSIONAL SUPPORT PROGRAM AND COVID-19

The Professional Support Program (PSP) is a confidential peer-to-peer support comprised of five physician counsellors from across the province. They stepped up to support physicians during COVID-19. Drs. John Chiasson and psychiatrist Jackie Kinley collaborated to leverage resources within the Nova Scotia Health's Mental Health and Addictions Program to complement the PSP's offerings.

#### CONTRACTS RATIFIED

Following 11 months of negotiations between Doctors Nova Scotia (DNS) and the provincial government, tentative agreements were reached in October for both the Master Agreement and Clinical/Academic Funding Plan contracts. To ensure that all members understood the contracts and the ratification process, DNS launched a website, a special interest publication and a toll-free number dedicated to the proposed contracts. Doctors Nova Scotia staff also phoned all DNS members, held webinars and met with physicians at over 35 meetings in communities across Nova Scotia.

In late November, 68.9% of members voted to ratify the contracts, securing physicians \$135 million over four years, plus improvements to their work environment. Five priority specialties received targeted investments: family physicians, anesthetists, emergency physicians, psychiatrists and obstetricians/gynecologists.

#### **BLENDED CAP WORKING GROUP**

The 2019 Master Agreement provides funding to create a new blended capitation payment model for primary care physicians. The model will promote and support comprehensive family medicine, greater attachment, access and quality for patients, and greater recruitment, retention and professional satisfaction for physicians. The Master Agreement Management Group (MAMG) is now finalizing the terms of reference and project plan to guide a working group that will be asked to finalize the model. Physician representatives and staff from DNS, the Department of Health and Wellness (DHW) and Nova Scotia Health will form the working group.

# STRATEGIC PLAN PROGRESS REPORT

## **STRATEGIC PRIORITY 1:** Connect the profession

Commitment	Actions
Connecting physicians with each other	• Provided ongoing support to Medical Staff Associations (MSAs). Ensured MSAs were connected to each other, monitored their needs and respond as needed
	• Developed a new mentorship program to support physician leadership development
	• Developed a pilot program for a new online member discussion forum called Doctors Lounge
Connecting physicians with DNS	• Developed a new welcome package for new DNS members
	• Through the Health System Physician Coordination Council, developed a draft pathway to support physicians on defined licences
	• Implemented recommendations from a Dalhousie in Communities event focused on supporting learners in communities
	• Development of a framework for a new member engagement strategy
	• Developed a framework for supporting DNS sections
Connecting physicians with the system	<ul> <li>Physician Leadership</li> <li>Implemented recommendations from physician leadership sessions</li> <li>Implemented Physician Leadership Institute events</li> <li>Supported the development and operation of the new Section of Physician Leaders</li> </ul>
	• Developed a new physician wellness strategy focused on restoring joy to the practise of medicine
	• Ongoing development of Memorandum of Agreement Implementation Plan. Estab- lished the process for system partners to engage DNS on decisions that will affect physicians; established the process for DNS to engage physicians in system decisions

# **STRATEGIC PRIORITY 2:** Advocate for the profession

Commitment	Actions
Help make positive changes in population health and health-care policy through collaboration with govern- ment, Nova Scotia Health/ IWK	<ul> <li>Hosted a symposium on reviving comprehensive primary care and began implementing recommendations</li> </ul>
	• Continued to advocate for changing practice models in response to community needs and physicians' interests
	<ul> <li>Secretariat for the Health System Physician Coordination Council; implemented recommendations from evaluation</li> </ul>
	• Key partner in provincial e-health initiatives, including: virtual care benefits evaluation; strategy development and compensation planning; EMR migration and new add-on product introductions; physician engagement in privacy and security planning for One Person One Record
	• Supported the creation of the Section for Indigenous Health
	• Active member of Nova Scotia Health's Recruitment and Retention Advisory Commit- tee working group; detailed process map to identify the recruitment journey, improve the physician recruitment process and engage partners
	• Created and distributed 10 hospitality grants to physicians worth \$5,000 each to help support physician recruitment and retention activities in communities across the province
	• Co-sponsored and continued work implementing Choosing Wisely Nova Scotia
	<ul> <li>Supported DNS's Healthy Tomorrow Foundation to develop a new strategic plan and launch a new program aimed at getting more Nova Scotians moving</li> </ul>
	• Supported enhanced collaboration between physicians and other providers given changing scopes of practice, specifically pharmacists and physician assistants
	• Provided feedback on the expanding scope of practice of allied health care providers
	• Focused government relations efforts on negotiations priorities, while building and nurturing relationships with government, Nova Scotia Health and the IWK Health Centre
	• Developed an election strategy for the federal election
Pursue fair compensation for physicians by negotiating provincial and local agree- ments	• Concluded a successful negotiation for the Master Agreement and C/AFP contracts with significant new investment, bringing physician compensation in Nova Scotia to a more competitive position for recruitment and retention
	<ul> <li>Restored the role of sole bargaining agent for DNS through a contractual Memorandum of Agreement</li> </ul>
	• Successfully ratified the new Master Agreement and C/AFP contracts
	• Ongoing implementation of commitments contained in the new agreements (improved audit process, blended capitation funding model, APP working framework)

# STRATEGIC PLAN PROGRESS REPORT

## STRATEGIC PRIORITY 2: Advocate for the profession (cont.)

Commitment	Actions
Foster a strong and stable physician workforce	• Appealed to the Nova Scotia Court of Appeal to overturn the decision of the Supreme Court of Nova Scotia regarding DNS's role as sole bargaining agent for physicians in Nova Scotia. Appeal was successful in part
	• Developed and implemented income stability program to support fee-for-service physicians during the COVID-19 pandemic
	• Developed and implemented new fee codes to enable physicians to use synchronous virtual care tools during the COVID-19 pandemic
	• Continued to develop the blended capitation payment model
	• Implemented new Community Hospital Inpatient Program and Primary Maternity Compensation payment models
	• Established key contract governance bodies, including the Master Agreement Management Group (MAMG) and C/AFP Management Group and related working groups and committees
	• Conducted ongoing work to finalize details of new teaching stipends
Enhance the reputation of physicians and of DNS	• Worked actively with the Office of Regulatory Affairs in support of a pilot project to reduce unnecessary physician administrative burden
as their professional association	• Continued to support members in fee applications and billing audits
	• Developed and implemented public relations and digital marketing strategies to enhance trust and confidence in doctors
	• Launched social media campaign for Doctors Day recognizing Nova Scotia's physicians and their commitment to exceptional patient care. Included a thank-you video from doctors to Nova Scotians to motivate compliance of public health recommendations during COVID-19
	• Launched public awareness campaigns during COVID-19 pandemic: understanding and using virtual care; supporting and implementing personal public health measures, such as mask wearing, hand hygiene and social distancing

## STRATEGIC PRIORITY 3: Serve the profession

Commitment	Actions
Provide practice supports to assist with the business side of practising medicine	<ul> <li>Supported physicians through various issues and conflicts impacting their ability to practise effectively, including support with contract matters, help navigating system processes and securing decisions, support with billing and audit appeals, support with retirement planning and the orientation of new physicians</li> <li>Provided enhanced e-health, privacy and security support to physicians through the E-health Committee, strategic e-health support and an e-health advisor</li> <li>Published two new tool kits: <i>Care During COVID-19</i> and <i>Getting Started with Virtual Care</i></li> </ul>
Foster a healthy physician workforce	<ul> <li>Held more than 15 CPD-accredited webinars to support physicians during the COVID-19 pandemic</li> <li>Enhanced the Professional Support Program by offering new physician wellness line through collaboration with the CMA, collaborating with Nova Scotia Health to offer enhanced programming, including webinars and online resources</li> <li>Physician Advisory Team and staff supported members in need of support dealing with unhealthy workplace behaviors such as bullying and discrimination</li> <li>Developed a strategy for inclusivity, equity and diversity in the medical profession and established internal working group to guide the association's work in this space for the coming year</li> </ul>

## 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		
Commitment	Actions	
Ensure financial sustainability	Finalized long-term financial framework with a view to financial stability	
Enhance organizational structure, capacity and systems	More appropriately resourced the organization to support health policy, government relations and physician wellness initiatives Initiated records management project (scanning and storage of archived files) for enhanced privacy and security of DNS records	
Enhance member communications	Developed and implemented an organizational communications strategy	

# In Memoriam (May 11, 2019 – June 5, 2020)

Dr. Murdock A. Smith, 78 May 11, 2019, in Sydney, N.S.

Dr. William "Bill" F. Snow, 72 May 24, 2019, in Sydney, N.S.

Dr. Anita A. Foley, 76 May 25, 2019, in Guysborough, N.S.

Dr. Charles A. Murchland, 88 June 28, 2019, in Halifax

Dr. Vahdettin Ketene, 93 June 30, 2019, in Halifax

Dr. Laszlo A. Fried, 89 July 8, 2019, in Halifax

Dr. Daniel F. Glasgow, 71 July 17, 2019, in Sydney River, N.S.

Dr. Colin Dyack, 82 Sept. 8, 2019, in Scotsburn, N.S. Dr. Nadine MacIntosh, 98 Sept. 26, 2019, in Halifax

Dr. Matthew Ntambazi, 61 Oct. 14, 2019, in Yarmouth, N.S.

Dr. Alexander A. Brand, 92 Oct. 15, 2019, in Antigonish, N.S.

Dr. Robert K. Mahar, 66 Dec. 10, 2019, in Halifax

Dr. James A. Smith, 84 Jan. 18, 2020, in Halifax

Dr. Richard W. Kydd, 64 Jan. 22, 2020, in Hebbville, N.S.

> Dr. Joe Dooley, 70 Feb. 1, 2020, in Halifax

Dr. David B. Fraser, 87 Feb. 15, 2020, in Halifax Dr. Zbigniew Marek Knott, 63 Feb. 26, 2020, in Sydney Mines, N.S.

Dr. Roland A. Langille, 84 March 27, 2020, in Tatamagouche, N.S.

> Dr. Vernon Bowes, 78 April 19, 2020, in Halifax

Dr. Sai-Tao Chui, 82 May 7, 2020, in Lower Sackville, N.S.

**Dr. Magdalina Nestel, 61** May 13, 2020, in Bridgewater, N.S.

Dr. G. Bruce E. Montgomery, 63 May 21, 2020, in Enfield, N.S.

Dr. Katharine S. Worton, 55 June 5, 2020, in Port Williams, N.S.

