

Agenda Item#

Report on 2025 Member Motion

At the 2025 Annual General Meeting (AGM), delegates voted in favour of the following member motions:

BE IT RESOLVED that the Doctors Nova Scotia Annual General Meeting asks the Board of Directors to support Doctors Nova Scotia in formally recognizing Family Medicine as a speciality.

The intent of the motion is to formally recognize family medicine as a unique medical speciality to bolster the profile of the profession, raise awareness about its critical role, and to demonstrate that DNS, at an organizational level, values family medicine.

Based on the supplementary conversation at the AGM, it seems that the mover (Dr. Colin Newman) and seconder (Dr. Roop Conyers), are primarily interested in DNS changing the language used to reference family medicine and advocating on the behalf of the speciality. It was noted that changing the language could set expectations for higher compensation, but the mover and seconder clarified that this was not the intention of the motion. However, the evidence presented in the motion did point to the PEI physician contract that does recognize family physicians as specialists and resulted in increased compensation. Additionally, in subsequent conversations with DNS staff and members, the issue of compensation continues to come up.

The rationale for the motion can be found [here](#).

The Board of Directors approved a phased approach to implementation:

1. **Language:** Although recognizing family medicine as a speciality seems easy, it's important to choose the right language that can be consistently used throughout the association communications, governance documents, policy work, and potentially contracts. To ensure best language:
 - DNS staff will complete a jurisdictional scan to see what language is used in other provinces, and unintended impact of changing language.
 - DNS staff have created an engagement strategy and will consult the DNS Policy and Health Issues Committee (PHIC), Family Doctors Council (FDC), College of Family Physicians, Department of Health and Wellness and Nova Scotia Health.
 - When recommended language is developed it will be brought forward to FDC and PHIC. A recommendation will be made to the Board for approval in Fall 2026.
2. **Family medicine policy development:** DNS staff are currently developing a policy document focused on family medicine. Although preferred language will not be determined by the time the document is released, the intention of the motion will be reflected in the policy document. It is anticipated to be released Spring/Summer 2026.

The following work will be completed in the 2026-27 business year:

3. **Finalize language:** It is anticipated that DNS will complete their review and engagement in the 2026-27 business year and propose language to the Board of Directors in Fall 2026.
4. **Member communication:** DNS will share the Board’s approved language and required actions with members through DNS communication channels.
4. **Partner communications:** DNS will share the updated language and the reason for this change with system partners at various levels to avoid any unintended impacts and encourage consistent use and adoption of this language across the system.
5. **Governance:** DNS’s governance documents do not use language that positions family medicine as a speciality. At the 2025 Annual General Meeting, the bylaws were amended to clarify representation on the Board of Directors. While specific seats were designated for family physicians, concerns were raised that individuals not practicing traditional family medicine might not identify with that category. To address this, the Governance Committee recommended broadening the definition to “family physicians (including those with a Certificate of Added Competence)”. As a result, governance documents related to Board elections and appointments were updated with that language. Once the appropriate language has been determined (as outlined in #1), the Governance Committee will be engaged in how to proceed with updating the language in our existing governance documents.
6. **Compensation:** There are significant implications for compensation, such as changing CME funding, retention incentives, etc. As DNS prepares for the next round of negotiations, DNS staff will consider ‘asks’ that align with the motion.

When considering these actions, DNS staff will identify specific instances where language will be updated in existing materials and where it makes sense to update language moving forward. For example, we will correct language in governance documents and ‘live’ documents like the website and current policies, but we will not generally update old publications.