

President's Letter

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Lynn Dwyer, MD
President

Commentary on Minister of Health's recent remarks

Dear Colleagues,

Doctors throughout our province are angered by recent comments by Minister of Health and Community Services John Haggie. He has disrespected the work of all family physicians by issuing provocative remarks in the mainstream media and on social media. At the NLMA, we have been assessing the impact of his remarks, what they reveal about government policy, and what the NLMA and the membership can do to improve this situation.

The impact of his remarks is actually quite devastating to family physicians who are the fundamental foundation of health care in this province. The NLMA has received many emails, letters and phone calls from members voicing their concerns and dismay. The anguished voices of these doctors speak volumes:

"I feel very strongly about John Haggie's comments. I think they are totally disrespectful and shows he has no idea of what happens in family physician offices."

"How do I carry on caring for these patients, doing the 'heavy lifting' and carrying the burden of fearing for their safety and the safety of others in this system with such disrespect for what family doctors do? I spend hours each week trying to keep patients safe and help them navigate the system. Because of the complexity of my cases, today I saw 14 people. One was an inpatient, one was a procedure, I saw 12 in clinic, had one one-hour meeting and worked from 8:15-6:00 in clinic."

(The following items respond specifically to Dr. Haggie's endorsement of a claim on social media that 80% of psychiatric medications are inappropriately prescribed by general practitioners.)

"THIS is the scope of a family physician. I develop relationships with my patients. I get to know the entire family - their jobs, their finances, their stressors, their hopes and dreams. YES I occasionally prescribe psychiatric medications - after comprehensive assessments. Since I started practice here in March 2016 - would you like to know how many of my patients have seen a psychiatrist without presenting to the emergency room? TWO. Otherwise when I have referred to psychiatry I have received a letter stating the waitlist...is currently TWELVE - EIGHTEEN MONTHS. Perhaps this is an area for your attention and focus. To know that you, as our minister, but also as a physician colleague, have such disdainful views towards my specialty is extremely disheartening."

"Once again it feels like he is trying to push out GPs. His lack of regard for our work is not only disrespectful and demoralizing but actually brought me to tears. I worked a 13-hour day yesterday and saw 28 patients. I have no idea what pharmaceutical company makes which drug and I spend as much time as needed with all my patients. His misunderstanding of what we actually do is very disturbing."

Dr. Haggie's provocation, with or without malice, has created a destructive environment. Family doctors motivated by a sense of mission, who take on the burdens and sacrifices of their busy practices every day, have been undermined. Doctors receive inspiration and appreciation from their patients, but they need to know that system leaders are also in their corner; that government, RHAs, the NLMA and individual doctors are collaborating in good faith. When this foundation crumbles, it affects everything else – the recruitment of new family doctors is made harder, the participation on professional committees is less enticing, the engagement of preceptors to spend time with learners of various professions is jeopardized. These are the impacts that have been brought down on family doctors.



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What do the Minister's remarks reveal about government policy? We have reached out to the Minister for a meeting so that we have a direct and unfiltered answer to this question. We will report to you when we have that dialogue. In the meantime, it is difficult to say whether the Minister's comments reflect a determined strategy to reduce the recruitment and retention of family doctors, to replace family doctors with other providers, and whether they foreshadow more decisions like the delisting of flu shots. The government has not developed a comprehensive health care plan, or a complimentary human resource strategy, to guide cost reduction decisions. But we do know that fiscal pressures force the department to regularly look for cost savings. Without a shared plan or strategy, and without understanding the real value of family medicine, the ad hoc approach we have witnessed will result in sub-standard decisions. This is our challenge.

Some physicians have asked me to convene a meeting of family doctors to discuss the Minister's remarks. Some have asked for a public relations campaign to compare family doctors to nurse practitioners. Others have asked us to call for an apology or the Minister's resignation. Please be assured that we are listening to all these views and will be having an extended and serious conversation about options at the the NLMA Board of Directors on February 10.

We will take all of the valuable input from doctors – emails and messages sent to me, to the Minister, and the media – and have a discussion about next steps. We will build this input into our preparation for negotiations, and also have special consultations over the coming months with family doctors on primary care team models, payment models, the future evolution of the Family Practice Renewal Program, overhead costs of family physicians, and recruitment and retention. We will collaborate with the College of Family Physicians Canada to ensure our voices remain united as we take on these challenges. We will raise awareness about the role and value of family doctors, in the public and among decision makers. We will also remain active in the media as necessary to correct and balance the Minister's statements. And we ask that you, our members, continue to raise your voices in feedback to us, in messages to the Minister, and even to the media. One thing, however, we will not do is allow Minister Haggie to determine our priorities, pit us against other health professionals, or start a senseless fight.

Out of difficult times opportunities often arise, and we will continue to look for these opportunities in partnership with our members. The disrespect of a minister cannot be allowed to over-shadow the mission we have to protect and promote the health of our patients.

Sincerely,

Lynn Dwyer

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