President's Letter

June 4, 2012

New governance model for NLMA approved in principle at annual meeting



Tony Gabriel, MD, CCFP, FCFP President

Dear Colleagues:

A new governance model for the NLMA received endorsement in principle at the annual general meeting on Saturday. The new model would see a shift to a smaller, "at-large" board, the creation of a number of standing committees, councils and ad hoc committees, and improved outreach to members.

Extensive consultations are planned in the coming months to ensure all members have an opportunity to provide feedback on the proposed governance model and strategic plan. The consultations will include face-to-face meetings over the summer with Executive Director Rob Ritter and, later in the fall, during my President's Tour. We will conclude our consultations with a province-wide special general meeting. The new governance structure will then be put to a vote of the whole membership through a mail-in ballot process.

The proposed changes are the result of significant consultation with members through focus groups, interviews and surveys, and a board retreat this past January. The work is being guided by our Governance Steering Committee, co-chaired by Drs. Pat O'Shea and Brendan Lewis. Other members include Drs. Eric Stone, Vicki Crosbie and Sandra Luscombe, our past-president. The Executive Committee and the Board of Directors are also involved in the undertaking.

Why change and why now? For those of us following what is happening in other provinces, most recently in Ontario, it is clear that there are significant challenges ahead. Provincial governments are preoccupied with the sustainability of the health care system. The public is concerned about quality, safety and accessibility. We must be prepared to provide leadership in the search for solutions to the new and difficult challenges that Canadians face. We must earn and enhance public trust and confidence in physicians, and we must preserve our professional autonomy.

To do this, we need to have a united medical profession that speaks with one voice. We have to be champions of excellence and accessibility, issues that are most important to our patients. In order to achieve this mission, we need member involvement and engagement. If we're going to make headway, it will require more than just relying on the NLMA to do the work; we have to be partners in that effort.

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That is why we are moving away from a board that is representational in nature and towards a board that is policy and strategy oriented, where the interests of the entire profession are what drive us. The Board will be supported by four standing committees:

- Governance and Policy
- Finance and Administration
- External Relations
- Membership Support

There will also be sub-committees, ad hoc committees and advisory councils, whose role it will be to provide input and process information that will be escalated to the Board. These will include a negotiations committee, physician wellness advisory council, a rural physicians' advisory council and a committee to respond to concerns of international medical graduates, among others. The terms of reference and composition of these committees will be flushed out as part of our consultation with members in the coming months.

To further strengthen member engagement and ensure input from the grassroots of our association, we are proposing multiple provincial tours a year involving board members and senior staff of the NLMA. There will also be regular province-wide meetings using tele-and video-conferencing; more use of technology to encourage discussion and feedback on issues of the day; and, rotating board meetings outside of St. John's.

Our meetings with you over the summer and fall will allow us to get a sense of whether you are comfortable with these ideas. Based on our discussions with you, we would then revise and refine our plan. Ultimately, the decision on any changes to our governance model will rest with the members.

Regards.

Tony Gabriel, MD, CCFP, FCFP President