



## 2014: what's all the fuss about?

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*It is easy to sit up and take notice. What is difficult is getting up and taking action.*

Al Batt

**B**y now you might have heard that the current Health Accord between the federal and provincial governments will expire in 2014, thus opening the door to a new set of negotiations that will set the rules for how money will be distributed to the provinces for health care expenditures. This topic has certainly been fodder for discussion at many of the meetings I have attended recently, and it has prompted a lot of speculation as to what this new deal might resemble. I must admit that the world of federal-provincial-territorial agreements seems to be a long way from the reality of practising family medicine in a small town in any province or territory—or is it?

It is quite easy, I think, for family doctors to feel quite distant and removed from these types of discussions. The reality, of course, is that the federal-provincial Health Accord has ramifications for all Canadians. The agreement that we are currently living with has allowed for annual growth of our health budgets, something that the last federal election saw all political parties pledge to maintain—the “six percent escalator” that we heard about during the campaign. However, what we need to be assured of is how this money will be doled out. Will there be conditions on these transfers over and above those outlined in the Canada Health Act? Will there be higher levels of accountability passed down to the provinces? In turn, will accountability be passed down to a greater extent to front-line health care providers?

These questions, along with many others, are the reasons why family physicians working at the coal face of health care provision in Canada must be involved and engaged in the discussions leading up to 2014. We must continue to impress upon policy makers the pivotal role that family medicine plays in the overall health outcomes of Canadians. Furthermore, we have to continue to show how we provide excellent value for every health care dollar spent on our services. Indeed, I have, at every opportunity given, expounded the fact that patients who are “attached” to family doctors have better health outcomes at lower costs. One thing I have noticed throughout the past year is that decision makers like to hear from the grass roots of their constituencies; they really do want individual Canadians to express their opinions on this and other matters. Therefore, there has never been a better or more important time for us to speak out about the work that we do for our patients. Likewise, there has never been a better time for us to demonstrate our commitment to patient-centred care, a model that our College will expand upon and promote in its soon-to-be-released vision paper outlining what the Patient’s Medical Home could and should resemble.

I truly hope that everyone had a good summer. Now that September has rolled around, as we get back into our work and school routines, it will be quite natural for us all to get buried in seemingly never-ending mountains of work and to-do lists. However, I urge you to continue to take a bit of extra time to provide leadership to your patients and your communities across Canada, be they large or small, so that all Canadians will continue to understand the crucial role that family medicine plays in the provision of their health care. 

Cet article se trouve aussi en français à la page 1093.