



Clarity in the centre of the storm

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This is my second column as your Executive Director and Chief Executive Officer, but the first focusing on my new role. I know what you are thinking: “How bad are things at the College if they’ve hired Mike Allan?” I asked myself the same question! In truth, my hire is a reflection of our board’s commitment to members. The board requested nominations from you, the members, and targeted family physicians known to members. Of course, the board needed experience in leadership, administration, et cetera for the Executive Director and Chief Executive Officer role but, most of all, the person needed to be grounded in family medicine.

What does that mean? Years ago, at the end of a Friday after seeing patients for 8 hours, I was settling into paperwork (ie, chart notes, laboratory results, referrals, and forms), the unavoidable and least enjoyable part of each day. Staff had mostly packed up, but the last person there popped her head into my office and asked if I could take a phone call. The call was from an emergency doctor in a different province. He was seeing one of my patients who was almost certainly having a myocardial infarction. The emergency doctor asked if I could reassure my patient so treatment could proceed.


I did just that, including saying at one point, “You have to let this man save your life.” After brief closure with the emergency doctor, I went back to the drudgery of paperwork for the next 2 to 3 hours. Intermittently, I tried to recall what I had done to make this patient overly dependent on me, but then I remembered all the things I had helped her and her family through over time. I got a little closer to appreciating the profound role we play in patients’ lives and the immense trust they place in us. While driving home, I came to a place of acceptance—to try not to foster dependence, but also to be grateful for the opportunity to make a difference.

I realize there is a lot to do at the College. Goodness, there is a lot to do. What is worse is that it is all very

important. We are in crisis in family medicine in Canada, and we should not let a good crisis go to waste. For the past few decades we have been saying, to almost anyone who would listen, but in particular to politicians and leaders with influence, family physicians provide the most care in Canada and our profession produces the best health outcomes.

If that portion was heard, what was certainly never acted on was the idea that family physicians have been grossly undercompensated in type and manner. The problem was we were speaking in facts. Reflecting on government and policy choices, a good friend once said, “The facts, while interesting, are irrelevant.” While the value of family medicine is indisputable, a thousand variables including election cycles and competing opportunity costs act like a hurricane on the best efforts of planning. Now, as we reach the centre of that storm, we begin to see real change for family physicians.

We are seeing improvement in compensation and in other areas such as administrative burden. Still, many issues remain. One challenge is the numerous groups the College serves and interacts with, starting with you, our members, as well as patients, provincial Chapters of the College, residents, medical students, universities, partner organizations, governments, and the list goes on, perhaps limited only by imagination.

Despite the wide array of partners and affiliates we have, sometimes each with different and conflicting priorities, there is one thing we can all get behind: We all want to see family medicine prosper. We want our profession to get the kind of care to which we have dedicated our lives. The kind where all Canadians and partners value the profession of family medicine the way our patients value each of us. 

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