
President's Letter

June 2, 2008

Detailed report on government decision to increase salaries for pathologists, medical and radiation oncologists

Dear Colleagues:

On Thursday May 22, 2008, Premier Danny Williams and Health Minister Ross Wiseman announced that the government will be "investing" millions of dollars to address recruitment and retention concerns in the areas of pathology and medical and radiation oncology.

Since that announcement was made, the NLMA has received a number of inquiries about how this came to pass. We also received a number of complaints about the selective approach by government to deal with only the "noisy" problems when so many physicians around the province face the same hardship as the medical and radiation oncologists and pathologists. The purpose of this communiqué is to inform our membership about the events and developments leading up to the government's announcement, examine the implications of the government's actions, and explain how the NLMA intends to proceed.

Background

Rob Ritter and I met with Premier Williams and Health Minister Wiseman in mid-April to discuss the enormous impact that the hormone receptor testing crisis was having on the pathologists and the medical and radiation oncologists. The key message we conveyed at that time was that some short-term relief measures were urgently needed to help the physicians in question deal with the massive workload increase. We also suggested to them that that a multi-phased plan of action be introduced to give both the public and physicians a sense of comfort that chronic problems would finally be confronted, with a view to developing comprehensive sustainable solutions. Finally, we suggested that a face-to-face meeting between the Premier and the physicians that were dealing directly (i.e. pathologists, medical and radiation oncologists) with the enormous workload impacts and stresses of the ERPR crisis would be mutually beneficial.

The Premier agreed to meet with the group. That meeting occurred on Thursday, May 8, 2008.

A number of other physicians, including our Medical School Dean, Dr. James Rourke, and Dr. Patti Power, a gynecology-oncologist, having heard about the meeting, asked if they could attend and we agreed. This meeting was not intended to be, nor was it, a negotiation session. Rather, it was an opportunity to inform our political decision-makers about the complex challenges facing the cancer centre and the labs with a view to having a frank and constructive exchange. To that end, Dr. Kara Laing and Dr. Ford Elms made presentations on behalf of their respective groups. The Premier indicated that he wanted to act swiftly on our concerns and indicated that Minister Wiseman himself would oversee a *joint* undertaking to advance suitable solutions within the next two weeks.

The following afternoon, on May 9, the NLMA, with representatives from pathology, medical and radiation oncology, met with Minister Wiseman and his senior officials. During that meeting we discussed a number of wide-ranging ideas, including block funding options, but did not really focus on any specific solutions. It was agreed that the physicians would explore some alternatives over the coming week and present some proposals to the Minister. Before the meeting concluded, the Minister asked if we would agree to keep discussions confidential until a mutually agreeable arrangement was reached. The NLMA agreed.



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During the following week, the NLMA had several intensive discussions with the individual groups to develop proposals. We realized early on that an alternative payment approach raised many questions that could not be answered without extensive expert advice. We also recognized that the circumstances between the labs and cancer centre were not symmetrical and required different solutions.

The morning of Friday, May 16, our Executive Director submitted written proposals to Minister Wiseman, who later that day indicated that he would be discussing them with the Premier and would be in touch with Rob Ritter by phone before the end of the long weekend. That call never came. Over the next few days, the NLMA made repeated attempts to contact the Minister, all of which were rebuffed.

On the morning of May 22, the NLMA received a number of phone calls from pathologists, and medical and radiation oncologists who had been approached unannounced by Minister Wiseman personally to discuss future arrangements. All of those approached felt surprised, uncomfortable and somewhat intimidated by this kind of unprecedented gesture and sought to refer the matter to the NLMA. It was not until later that day, when the NLMA received a phone call from the media seeking comment on the announcement by the Premier and Minister of Health, that we became aware of the government's intentions.

On Friday, May 23, individual pathologists began receiving letters from Minister Wiseman and later that day the medical and radiation oncologists also received letters detailing the options they had with respect to compensation. The NLMA did not receive any documentation from government until long after it had been forwarded to us by individual members.

The NLMA Proposal

Our proposal was based on a clear realization that the problems we were dealing with could not be properly addressed in a matter of a week or two. Consequently, the centre-piece of our proposal was to establish a bilateral planning process segregated from the intensity of the current environment and with sufficient time to develop thoughtful plans.

In reference to compensation, our proposals for pathology and medical and radiation oncology were somewhat different, given the distinct circumstances.

Given the challenge of immediate shortages and the very grim prospects for the future in recruiting pathologists, we proposed a topping-up arrangement similar to the model in Ontario in both methodology and funding levels. We also sought extra resources for administrative and technical support so that pathologists would not have to consume a great deal of time doing work that could be carried out by others.

In the area of medical and radiation oncology, we proposed that current funding arrangements remain unchanged until such time that the physicians in question had ample time to examine a variety of options. The group felt it more important to methodically address long-term concerns for safer and more manageable workloads, as well as recognize the value of teaching, administration and workload, than to attempt some quick fixes. They did ask for more administrative support through clinical associates and administrative staff. As well, we recommended that incentives be given to physicians who work in peripheral clinics, clinical associates and palliative care physicians.

The Current Situation

The NLMA did not propose, at any time, the introduction of a new or distinct salary scale that would be exclusive to only a select group of salaried specialists. On the contrary, had the government engaged us on the matter, we would have alerted them to how divisive such a measure would be to the medical community if not applied across the board. The decision by the government was entirely unilateral with absolutely no consultation whatsoever.

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It is also important to recognize that the measures introduced by government on May 22 were not intended to be an offer but are a declaration of their intent. Neither the NLMA nor any of the physicians involved have been asked if there were any better alternatives or whether there were variations of the approach that might be better suited to our long-term objectives. The government has already made their decision. In doing so, intentionally or not, they have created an unfair double standard.

The unwillingness of the government to engage the NLMA in meaningful consultation has now created an additional strain on the medical system when it can least afford it. What appears to be a deliberate attempt to stonewall or circumvent the NLMA in these matters is detrimental to the delivery of medical services. Moreover, these tactics run contrary to the spirit and intent of the *Canada Health Act* and our own provincial *Medical Care Act*. This must not continue.

What's Next?

The unilateral decisions taken by government create a double standard that is unfair to physicians in the province and must now be corrected. Individuals from several specialty areas have, justifiably, complained about the government's creation of a two-tiered system. A number of those who have contacted us have also requested the NLMA to organize a meeting with the Minister to address this matter. That is precisely what we intend to do.

As you know, from preceding correspondence, the planning and consultation phase for our upcoming negotiations will be launched at our upcoming AGM at the end of June. If ever there was a time for the physicians of this province to unite and support one another, that time is NOW. It is only by remaining united and working together that we will be able to achieve a healthier, more effective and sustainable medical care system for all physicians. The NLMA must not and will not be deterred by government pressure tactics or intimidation. We are fighting for better medical services for the people of our province and for a healthier working life for our physicians. And these two goals are indivisible.

We will keep you posted on further developments.

Regards,



Joseph Tumilty, MD, FRCSC
President

2008 NLMA AGM - June 27 & 28

*Join your colleagues at the 2008 NLMA AGM on June 27 & 28
at the Humber Valley Resort near Corner Brook.*

A meeting package with a preliminary program, registration form and accommodations form was mailed to all members on April 22. Forms are also available online at www.nlma.nl.ca/agm or by calling the NLMA Office at (709) 726-7424 or toll-free at (800) 563-2003.