MEMORANDUM OF UNDERSTANDING

PROVINCIAL ENGAGEMENT

BETWEEN:

HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF BRITISH COLUMBIA, as represented by the Ministry of Health

(the "Ministry")

AND:

FRASER HEALTH AUTHORITY, INTERIOR HEALTH AUTHORITY, ISLAND HEALTH, VANCOUVER COASTAL HEALTH, NORTHERN HEALTH and PROVINCIAL HEALTH SERVICES AUTHORITY

(the "Health Authorities")

AND:

THE BRITISH COLUMBIA MEDICAL ASSOCIATION doing business as Doctors of BC

(the "Doctors of BC")

(individually a "Party" and collectively the "Parties")

Public Sector Governance and Accountability

The Ministry of Health and Health Authorities are taking important steps to strengthen governance and accountability in the health system in British Columbia. These efforts are guided by two key government documents:

- From the Ministry of Finance, Taxpayer Accountability Principles: Strengthening Public Sector Governance and Accountability, which sets out principles to strengthen accountability, promote cost control and ensure public sector entities operate in the best interests of taxpayers.1
- From the Ministry of Health, Setting Priorities for the BC Health System, which sets out government's strategic priorities for the health system, including:
 - Hard wiring patient-centered care into health service delivery systems, board and executive management decision making and policy development;
 - Driving health service performance management and accountability through continuous quality improvement; and,
 - Establishing a cross system focus on a number of key patient populations and service delivery areas that are critical to both quality and sustainability.²

Both documents highlight the need to strengthen and clarify relationships, both across the public sector and within the health sector, in order to promote strategic collaboration and ensure public funds are spent in a responsible manner.

Strengthening the Relationship with Physicians

Within this context, the Ministry and Health Authorities are committed to and will be mutually accountable for strengthening and clarifying their relationship with physicians at provincial, regional and local levels. At the provincial level, this will be carried out through constructive engagement and dialogue between senior executives of the Ministry, Health Authorities and the Doctors of BC, primarily through a number of key individual points of contact as well as the senior decision making committees of the Ministry, Health Authorities and Doctors of BC. Constructive engagement and dialogue between the Parties is intended to:

- Enable effective alignment of strategic planning on issues significantly affecting physicians;
- Enable strategic level discussions on major issues/policies affecting the Parties;

¹ Available online at:

http://www2.gov.bc.ca/gov/DownloadAsset?assetId=B613CF138959439D9A947CF3D586FE6B

² Available online at: http://www.health.gov.bc.ca/library/publications/year/2014/Setting-priorites-BC-Health-Feb14.pdf

- Support the development of effective relationships at senior decision making levels; and,
- Support the improvement of engagement and consultation and mutual accountability between physicians and Health Authorities at Regional and Local levels throughout the province.

The following are the key interactive contacts for the Parties:

a) President Doctors of BC – Minister of Health

On an annual basis, prior to the finalization of the Ministry's annual Service Plan, the Minister and the Deputy Minister of Health and the President and the CEO of Doctors of BC will hold a meeting to share and discuss their strategic priorities for the upcoming year.

b) Doctors of BC Executive Committee – Leadership Council

- i) The President and the CEO of the Doctors of BC will be invited to make an annual presentation to the Leadership Council on the strategic plan and priorities of Doctors of BC for the year;
- ii) Doctors of BC will be invited to add agenda items for consideration by Leadership Council on a quarterly basis, or on an ad hoc basis as determined appropriate by the Chair of Leadership Council;
- iii) Leadership Council will be invited to make an annual presentation on health system priorities for the year to the Executive Committee of Doctors of BC;
- iv) Leadership Council will be invited to add agenda items for consideration by the Executive Committee of Doctors of BC on a quarterly basis, or on an ad hoc basis as determined appropriate by the CEO of Doctors of BC; and,
- v) Doctors of BC will be invited to participate in initiatives of the Leadership Council Standing Committees as determined appropriate by Leadership Council and/or the Chairs of the Standing Committees.

c) Doctors of BC Executive Committee – Physician Strategic Services Advisory Committee

- i) The President and the CEO of the Doctors of BC will be invited to make an annual presentation to the Physician Strategic Services Advisory Committee (PSSAC) on the strategic plan and priorities of Doctors of BC for the year;
- Doctors of BC will be invited to add agenda items for consideration by PSSAC on a quarterly basis, or on an ad hoc basis as determined appropriate by the Co-Chairs of the Committee;

- iii) PSSAC will be invited to make an annual presentation on its strategic plan and/or priorities for the year to the Executive Committee of Doctors of BC;
- iv) PSSAC will be invited to add agenda items for consideration by the Executive Committee of Doctors of BC on a quarterly basis, or on an ad hoc basis as determined appropriate by the CEO of Doctors of BC.

d) Doctors of BC Executive Director of Communications and Public Engagement – Ministry and Health Authority Communications Directors

e) Doctors of BC Executive Director(s) responsible for Joint Clinical Committees – Ministry and Health Authority Senior Staff Responsible for Joint Committees

The Parties mutually share the goal of providing excellent health care to British Columbians. To that end they will work collaboratively to implement and continue the process outlined in this Memorandum.

It is an expectation of the Parties that they will also pursue other avenues of constructive engagement and dialogue or undertake communication on other matters including:

- i) Provincial Programs/Provincial Policy Changes;
- ii) Regional Programs/Regional Policy Changes; and
- iii) Issues management.

The Parties recognize that the Doctors of BC Department of Physician and External Affairs has a key role in such engagement and dialogue.

Separate Agreement

This Memorandum is a separate and distinct agreement and its construction is not to be influenced or affected by the provisions of the Physician Master Agreement (PMA). The provisions of the PMA do not apply to this Memorandum. For greater certainty, and without limiting the generality of the foregoing, the following provisions of the PMA have no applications: (i) Articles 20 through 23; and (ii) Articles 26 through 28. In the event of a conflict between the terms of this Memorandum and that of the PMA, the PMA terms will take precedent.

Resolution of Disagreements

If any of the Parties has a concern respecting this Memorandum, the CEO of Doctors of BC, the Deputy Minister of Health and/or the Health Authority CEOs will meet to attempt to resolve these issues. Failing resolution, there are no further steps under this Memorandum to address such concerns.

Termination

This Memorandum shall terminate effective March 31, 2019, or as otherwise agreed by the Parties.

Dated this _____day of ____ 2014

Dr. William Cavers President Doctors of BC

Allan Seckel Q.C. Chief Executive Officer Doctors of BC Stephen Brown Deputy Minister Ministry of Health

Michael Marchbank President and Chief Executive Officer Fraser Health Authority Carl Roy Chief Executive Officer Provincial Health Services Authority

Dr. Brendan Carr Chief Executive Officer Island Health Mary Ackenhusen Chief Executive Officer Vancouver Coastal Health Authority

Cathy Ulrich Chief Executive Officer Northern Health Dr. Robert Halpenny Chief Executive Officer Interior Health Authority