EDITORIAL / ÉDITORIAL

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President's Message. A productive fall council meeting

he pandemic has changed the way we connect. There have been many positive spinoffs from the expansion of virtual communication including improved access to care for rural patients and decreased costs and disruption related to medical travel. The aggravating downside of our scaled-up virtual presence is the screen fatigue that many of us are facing.

In October, the Society of Rural Physicians of Canada (SRPC) council held the fall meeting virtually. Despite the confines of Zoom, our meeting was productive and invigorating. We covered critical issues such as the future of our annual conference, organisational finances, the Choosing Wisely Canada rural recommendations,1 College of Family Physicians of Canada (emergency medicine) practice eligibility and the Rural Road Map Implementation Committee. I'd like to briefly highlight several other points from the council's discussions.

With changes approaching the federal Medical Assistance in (MAiD) legislation, the Dying council voted to endorse our proposed recommendations to the Bill C-7 deliberations. SRPC's neither agrees nor disagrees with MAiD as a legal procedure as our membership includes both proponents and conscientious objectors. Rather, our recommendations are solely to ensure that the legislation does not create inequality for rural communities.

The College of Physicians and Surgeons of British Columbia has

proposed changes to the Practice Standard for Non-Sexual Boundary Violations which would on patient-physician restrictions social and business interactions. Proposals put forward in British Columbia (BC) and by other colleges fail to recognise the multiple roles that rural physicians play in their communities, and do not appreciate the value of our social relationships. We will continue to monitor for similarly impractical amendments and advocate when necessary.

Finally, the council discussed the recent stories of anti-indigenous racism in healthcare, including the painful example captured by Joyce Echaquan. Many of us have witnessed subtle and egregious displays of discrimination towards patients in our care. The SRPC council is committed to working with our members and indigenous partners to develop a robust strategy for anti-racist and culturally safe medical education.

The SRPC council discussions reflected the complexity of the time we're in. Our organisation, like our members, has had to adapt to the ever-changing social and political conditions that shape the health of rural communities. Fortunately, working at a distance is something we're all very good at. I left the virtual council meeting feeling energised, inspired and confident that together we can tackle the challenges that lie ahead.

REFERENCE

1. Available from: https://choosingwiselycanada. org/rural-medicine/. [Last accessed on 2020 Oct 16].

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