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Official says Ontario's government will respect the results of the specialists referendum

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Toronto – A senior government source closely involved with negotiations with the Ontario Medical Association has told the *Medical Post* that the Progressive Conservative government intends to respect the results of the upcoming specialist referendum.

In that referendum, thousands of Ontario's specialists are expected vote on whether they want to leave the association and join the newly formed Ontario Specialists Association (OSA).

"Physicians should have the full right to determine who represents them," said the source, who was not authorized to speak on the record. "Until the vote happens, we're not going to have any conversations that are outside the existing legal framework, but if the vote shows a large section of them are unhappy with the OMA we're prepared to begin having that conversation."

The "existing legal framework" is a reference to the representation rights agreement which makes the OMA the sole bargaining agent for all of the province's doctors. But the source said that if the vote shows "a critical mass" of doctors wish to leave the OMA, then they would be open to amending existing laws to allow them to do so.

Notably, however, the source could not say what constituted a "critical mass." There are currently 15 specialty sections—comprised of nearly 7,000 doctors—that are expected to vote in the referendum. Every member of those specialties will receive either an emailed or paper ballot. More than 50% of voting members must ask to leave the OMA for the referendum to pass.

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But it's unclear how many specialties would need to pass the referendum before the government pursues the necessary legislative changes. The source couldn't say if it was just one, two or 10 sections.

The *Medical Post* attempted to contact the government's media relations department, but they did not respond to multiple requests for an on-the-record comment.

Lead up to the vote

The vote will take place over two days beginning Nov. 25, but the lead up has already been tense.

Last month, following much work from the OMA's relativity advisory committee, council (the OMA's governing body) voted in favour of redistributing a maximum of 1% of funding annually from overvalued specialties in order to level out pay inequities with undervalued specialties—a move that some doctors felt guaranteed the exodus of at least some of these members.

The OSA also appears to have had some trouble attaining the necessary contact information in order to conduct a full vote.

All section communications must go through the OMA's central offices, which holds all physician contact

information. But recently Dr. Myron Haluk, a former head of the OMA section on emergency medicine, said that the OMA had been delaying time-sensitive communications from the sections to members, and the OMA has refused to provide full email lists to the section heads themselves, claiming it would violate privacy law.

"They're trying to make it as difficult as possible to vote," Dr. David Jacobs, a radiologist and the chair of the OSA, told the *Medical Post*.

Dr. Nadia Alam, president of the OMA, claimed that only 30% to 40% of members have consented to having their emails shared for the purposes of the vote. In order to ensure all members of the interested sections are given the opportunity to vote, Dr. Jacobs said the rest will be sent a paper ballot, since the OMA is obligated by corporate law to provide any member that asks with a mailing address for other members.

While the OMA was not available to comment on the information from the government source, Dr. Alam said in a previous interview that if the referendums showed support for several sections leaving the OMA, it would be "the start of a conversation."

She has, however, publicly spoken out against the proposed move, suggesting it would be bad for the profession in Ontario. She also suggested the separation would undermine the OMA's bargaining position in contract negotiations with the ministry of health.

The referendum wording:

Be it resolved that the [] Section of the OMA should withdraw from the OMA and join the OSA to permit the OSA to negotiate directly with the Ontario government on behalf of the section.

The sections that will vote, according to Dr. Jacobs:

- Anesthesia
 - Cardiac surgery
 - Cardiology
 - Dermatology
 - Diagnostic imaging
 - Emergency medicine
 - Ophthalmology
 - Gastroenterology
 - Nephrology
 - Neuroradiology
 - Nuclear medicine
 - Occupational medicine
 - Otolaryngology
 - Plastic surgery
 - Vascular surgery
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