**NATIONAL OFFICER REPORT**

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National Officer of Health Policy (NOHP)

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**I. DESCRIPTION OF POSITION**

The National Officer of Health Policy is responsible for overseeing the development and maintenance of the CFMS’s health policy position papers as well as chairing the Committee on Health Policy (COHP). This includes identification of new position paper topics, review and revisions to previously approved papers and providing support to other colleagues engaging in the policy development process.

**II. ACTIVITIES**

COHP chair

As the chair of the Committee on Health Policy, I work with 11 other committee members to review outdated CFMS policy papers and revise them for re-approval at SGM and AGM. The committee has also begun developing new policy papers to expand the advocacy portfolio of the CFMS. This committee meets as a whole roughly once a month with small group working meetings for specific projects in between.

 *Policy paper review*

 Over the first half of the year, the committee has been working on reviewing and revising some of CFMS’ oldest policy documents as well as timely updates to others. This is done through a three step process: 1. Reviewing the current paper and identifying strengths and weaknesses; 2. Evidence review of the current literature on the subject; and 3. Revising or re-writing a new draft. The COHP is bringing forward new versions of our pharmacare, disaster management, family medicine and interprofessional education papers at SGM.

 *Policy paper development*

The COHP has begun working on new policy papers as well. We are currently working on a climate change paper and will be starting work on physician-assisted suicide and national vaccination registry papers. The COHP and EdCom are also working together to produce a backgrounder document on IMG issues, which will be discussed throughout SGM.

Flagship report

The idea for a flagship report was born out of the desire for CFMS to expand its external advocacy efforts beyond lobby day and reactionary efforts to media releases from the government or other medical organizations such as the CMA. This year, a subgroup of the COHP is working on completely the first ever CFMS flagship report on health human resource planning. The goal of the report is to: 1. Explore national HHR issues from the perspective of medical students and examine systemic solutions to address these issues; and 2. Promote the CFMS as a well-informed, national stakeholder in healthcare matters, with the hopes of increasing our reach and developing new advocacy opportunities.

Engaging with general membership

One of the key goals that the VP Governmental Affairs and myself set for ourselves was to encourage the general membership of the CFMS to get involved in the policy development process and work alongside the COHP. We now have an email address for members to contact the NOHP directly at NOHP@cfms.org and have a policy paper template on the advocacy section of the CFMS website. Some of the other papers that are being voted on at SGM, although not initiated by the COHP, have used our templates and processes. This allows our policy portfolio to have a uniform style, which brings legitimacy and cohesion to our advocacy efforts.

**III. FOLLOW-UP GOALS**

A systematic and strategic approach to our policy development

One area where I think the CFMS and the COHP could still improve is in how we decide what to advocate for and how we choose policy paper topics. With the strategic planning sessions that the CFMS went through last year, I think there has been progress made in regards to the goals of the organization and what our mandate truly is (i.e. how much of health and health care should the organization concern themselves with). However, I do not think our advocacy portfolio has caught up with this mentality of strategic planning. Right now, most of our new policies are developed because of an interest to a group of members. While it is important to have input and engagement from general membership as I stated earlier but I think we need to ensure that our policy development is in line with the strategic priorities of the organization. If you look at the current policies we have on the books, they range from social issues, to political issues, to health system issues, to medical education issues, etc. I think our advocacy portfolio would benefit from its own strategic planning sessions to determine how we want to move forward with our policy portfolio and strategically choose topics to allocate resources towards. This then could be reflected by grouping the papers into key strategic categories on the website, instead one long list.