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Hospital GPs reach pay agreement: Deal comes two days before deadline for 191 doctors to quit

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The B.C. government and health authorities have reached an agreement with the province's hospital-based general physicians, ending the threat by doctors to quit.

The agreement came Thursday morning, two days before the July 1 deadline set by the doctors -- called hospitalists -- as the day they would begin winding down patient care.

Vancouver lawyer Murray Tevlin, who negotiated the settlement for the hospitalists, said they were happy the dispute over fees and working conditions has been resolved.

"Our people feel that with this agreement they will be able to help people more. That's why they went to medical school all those years -- to help people -- and this deal will allow them to do that. They are very happy," Tevlin said.

Initially, the health authorities had offered the hospitalists about \$111 an hour, which they rejected, claiming it was only slightly more than what they have been receiving over the past four years and in some cases, less.

Tevlin said the deal calls for a complicated scale that varies pay according to hours of work and type of work but boils down to about \$125 an hour.

Health Minister George Abbott said he was pleased with the agreement. "Hospitalists play an important role in some of our hospitals, and this agreement will provide stability to ensure the best care for patients," he said in a statement.

The agreement applies to all 191 hospitalists in B.C. and makes this the only province to provide standard pay rates for **hospitalist** services, Abbott said.

The tentative agreement runs from April 1, 2006 to the end of March 2007.

"While common in the U.S., **hospitalist** programs in B.C. are relatively new," Abbott said.

Hospitalists are general practitioners who work full-time in hospitals to support admissions, treatment and discharge of patients, as well as care for patients in hospitals who do not have a doctor with hospital privileges.

Tevlin said a big issue for the hospitalists was the sustainability of the program and a commitment from the health regions that they would develop a model that reduced workload and prevented physician burnout.

"It's difficult to get people to do this work. There are five positions open in hospitals and they can't be filled. It's hard work; people have to do night work and they deal with the most seriously ill patients," Tevlin said.

"It's important that there's a workload model developed so that 10 doctors aren't doing the work of 20 and they can have a life."

Tevlin said the agreement allows for the creation of a task force to study the issue of staffing levels and program sustainability.

"This is challenging work. A lot of the hospitalists are younger and idealistic and are attracted to the model but if you have a choice of working in a calm environment which you can control or working in a system that's a madhouse where do you go?" he said.

"But our doctors didn't want to walk out."

Some of the hospitalists have already found other work since the dispute started, he said.

"At a meeting [Wednesday night] I asked for a show of hands of people who had accepted other work. About 15 or 20 persons raised their hands. Hopefully, they'll come back," Tevlin said.

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