New CEO links CMA's future to Internet, knowledge economy

Charlotte Gray

ive years ago, Dr. Peter Vaughan was sitting silently in his flak jacket and wearing a blue UN helmet as his lumbering Hercules abruptly aborted its landing at Sarajevo Airport and went into a steep ascent.

It wasn't a typical day at work for the Ontario family physician. Gunfire was crackling across the runway below. Inside the plane, 2 Sarajevans wept.

Vaughan, a former air force flight surgeon, had volunteered for the 1994 humanitarian mission in Bosnia. And like his fellow passengers, he was scared. Very scared. "I kept

thinking, 'I'm just a GP from Guelph. I'm not supposed to be in this movie.' "

A sense of humour functions as a defence mechanism at stressful moments, but Vaughan's also serves to leaven his intensity.

On June 30, when he took over from Dr. Léo-Paul Landry as the CMA's secretary general, Vaughan already knew the organization well because he had been director of professional affairs for almost 2 years. Nevertheless, had anybody asked him 10 years ago if he anticipated a senior role in the CMA, the answer would have been "No." He was "just a GP from Guelph."

In that southwestern Ontario city he was founding president of the Guelph After-Hours Clinic, where he developed medical and community partnerships to reorganize access to after-hours health care, and he was

president of the local branch of the OMA. "In a town the size of Guelph, a family practitioner gets the opportunity to do so much more than in a larger city. I had hospital admitting privileges. I was involved with hospital boards. I knew my patients so well they felt like family — I saw them when they were healthy as well as when they were sick."

So why isn't he still practising in Guelph? Vaughan admits that he began itching to do more than treat individuals, and developed a strong interest in public health — that's why he welcomed the chance to go to Sarajevo. He also took a step that few physicians with firmly established practices ever take: he went back to school, to the Johns Hopkins University School of Hygiene and Public Health

in Baltimore, where he earned a master's degree in public health. He met people from around the world — the deputy minister of health from Yemen was a classmate — and he acquired the biostatistical skills he needed to flesh out his knowledge of epidemiology.

The breadth of Vaughan's medical experience is less surprising when his starting point — philosophy — is considered. Born in Nova Scotia, he is the youngest of 8 children. His father was a businessman, his uncle Charlie was the mayor of Halifax and his eldest brother was a member

of Premier Robert Stanfield's cabinet. When Vaughan was a teenager his father died, and he and his mother moved to Ontario to live with his brother. At the University of Guelph, where his brother Fred taught political science, Peter studied philosophy and then completed a master's degree in medical ethics.

In 1976 he went to Guatemala, and was caught in Guatemala City during an earthquake that killed 25 000 people. "I had worked as an ambulance attendant all through university, but when I looked around and saw all the injured and dying I realized that if I wanted to help, I had to be a doctor. I had to have practical knowledge."

On his return he was accepted at McMaster's medical school. The armed forces paid his way through in return for a 3-year hitch, which he spent as a flight surgeon in Winnipeg.

When his stint ended he returned to Guelph to start his practice. He constantly reassessed the goals he wanted to achieve. Early each morning he spent 10 to 30 minutes writing down his ideas and plans. "I have to write," he says. "It's a compulsion and a form of therapy."



Dr. Peter Vaughan: just a family doc from Guelph

Unity in the community

So what are his plans for the CMA? Vaughan's initial emphasis is on advocacy on behalf of both physicians and the public. While describing the CMA's role as a unifying force for physicians "of all different flavours, stripes and interests," he used the phrase "organized medicine" and then





Vaughan (centre) and classmates undergo basic training in 1983

stopped abruptly, rolling his eyes. "I hate that term — it sounds like organized crime."

Nevertheless, Vaughan considers professional unity a crucial CMA goal. "There are pressures in this country that can drive wedges between physician groups, especially as we head into a period of jeopardy for our health care system. Different groups can have diverging views — that's healthy — but we need convergence around common areas, such as ethics and accessibility."

He thinks the sustainability of medicare is the crucial issue facing Canada's doctors. "The profession has a leadership role to play in acknowledging that this is important, and in presenting different models. Physicians cannot dictate to the public what model it chooses, but we want to be involved in the debate. Part of the problem is that physicians and nurses have been isolated from the policy gurus, who have been making the decisions according to ideology without knowing anything about health care delivery or patient need."

The health care system is going to look very different in 10 years because of demographic pressures. So far, debate about how to maintain its sustainability has too often focused on whether the balance between public and private provision of services should shift. "That's a false dichotomy," says Vaughan. "The question is how can Canadians get the best treatment possible within the limited resources available. Who delivers the service is of secondary importance to how the system is organized."

After his year in the US, Vaughan is exasperated by the ideological blinkers that Canadians wear when discussing health care. "We keep saying this is the best system in the world, but when people are on waiting lists for cancer treatment there is clearly a problem. But every time physicians talk about a different way of doing things, we are accused of distorting the debate." Posing the question does not presuppose the answer, he says, but at the moment politicians are afraid even to pose the question and to discuss creative solutions. Why? "Because governments are shackled by their desire to please."

Vaughan thinks the CMA "can take some credit for the health initiatives in the last budget, because we helped to define the needs on issues like waiting-list management and to develop the model for the pilot health project in the Western provinces." However, the association hasn't done as solid a job communicating with the public. "And that," says Vaughan, "is who politicians listen to the most."

He is eager to fast-forward the CMA into the knowledge economy. He sees enormous potential for an enlarged CMA role in professional development, in "helping retool physicians for the new economy." He also wants to see *CMA Online*expand to provide physicians with relevant information throughout their working lives. The expanded service might include a module on practice development for new graduates, modules with regular updates on the Human Genome Project or new treatment options, and on medical writing and leadership skills. "These tools are not pursued in medical schools. We need to provide the information in a way that will fit within a physician's schedule and life cycle."

Vaughan thinks the CMA's Internet services have huge potential for educating physicians and the public. Today 14% of Web sites are health related, but the quality of information varies enormously. "We want to develop our CMA Web site so that we become the trusted source."

However, Vaughan hopes that communication between the CMA and its members will not be a one-way street. "We need a much better capacity to get member input. I want to see email panels for members, so we can find out what physicians are interested in and what they need from us."

As he talked about his new job, Vaughan was at pains to ensure he made himself clear. Once discussion shifted to his private life, he relaxed visibly and adopted a more lighthearted tone. His interests include photography — 4 of his photographs of French villages are on his office walls — cycling and music.

What kind of music? "Well, I have played the guitar since I was 12 and I belonged to many, many bands. Perhaps the worst was The Sphincters during my days in medical school."

He is married (his wife Anne is a social worker), and he has a cat named Astra. His chief diversion is reading — at the moment, the books on his bedside table are by Anthony Burgess, Peter Drucker and Anthony Trollope. And he is writing a novel, a mystery adventure set in Central America that features the Knights Templars. When I seem surprised that there had been Knights Templars in Central America, he held up his hands in mock astonishment: "That's fiction for you."

The range of his reading matter demonstrates Vaughan's appetite for new intellectual experiences, but after 5 weeks in Sarajevo in 1994 there are some forms of entertainment he no longer enjoys. "I don't go to war movies any more."

Charlotte Gray is a CMAJ contributing editor.