



Nominee: **Michael Kates**

Geographic Representation: **East Mississauga**
PEM Representation: **FHO, FHT**

Position(s): **Board Member**

Why are you excited to be part of the MH PCN leadership team?

Experienced, Engaged and Committed Family Doc. Busy Community docs are a diverse group but issues arise that many will share concerns about. It is important to have that Voice to represent all, and this makes us stronger, and allows us to be heard.

If you were part of the MH PCN leadership team, what would be one issue you would like to champion? Why?

Supporting others, with all the changes we face, need to support one another, address needs, serve as link to Hospital, and OMA. Burnout are issues we are addressing at OMA level as well. Need to attempt to connect with community docs in Primary Care irrespective of their FFS / Capitation model. Need to be able to support OHT docs in their endeavors and not exclude those that are not committed to OHTs.

Do you have deep expertise in an area that you think would be valuable for the MH PCN leadership team?

I helped initiate PCN in its old form, and certainly could help with the new model. My experience as Primary Care Lead for the LHIN allowed me to meet many community physicians, but also we can learn by challenges we faced. I think its great to see fresh faces on the PCN Board but I think my experience and expertise are important at this stage in helping the PCN move forward.

Do you have any potential conflicts of interest by being involved with the MH PCN leadership team?

OMA SGFP Executive, but I think this is an asset and not a conflict. I am a FHO doc, but strongly support FFS docs.

