This last year, 2019, proved to be quite an eventful one for the Dallas County Medical Society. DCMS saw the departure of Michael Darrouzet, who was only the third EVP/CEO our esteemed society has had. Thankfully, Michael is not far, and is now serving the TMA with the same degree of equanimity that he brought to DCMS. With the steady handed leadership of Drs. Ruben Velez and Kevin Klein, and a little help from a renowned search firm, we were able to seamlessly bring on board a new CEO to helm the ship, Jon Roth. Meanwhile, with Connie Webster in front of the scenes, behind the scenes, and everywhere in between, DCMS members and staff alike were comforted in knowing that our beloved COO was watching over the Society, like one of her own children. Then came the news, late in the year that Connie would also be transitioning to TMA, in order to assist Michael in advancing the interest and missions of the House of Medicine, at a State level.
Our physician members should continue to expect that DCMS will promote and foster physician, and physician family, well-being.

All of this change, in a relatively short timeframe, would naturally give rise to the question, “So Mark, what are your plans as DCMS President, for 2020?”

My response is simply, “Absolutely nothing!”

Absolutely nothing, different, should be expected of DCMS in 2020, a year of transition, change, and potential for new opportunities.

Our physician members should continue to expect that DCMS will be a forward thinking leader, in all things related to the promotion of health and welfare of the citizens of Dallas. We will remain a trusted leader during times of crises, whether this be infectious disease assaults on our community, or works of Mother Nature. The society will do all that it can to support our County Health Department in their efforts to stem the tide of HIV/AIDS in our county.

Our physician members should continue to expect that DCMS will look to advance the interests and needs of not just individual physicians, but groups of physicians, as well. This includes continued promotion — at a county and state level — of our efforts in uplifting the Women in Medicine objectives. It includes engagement with residents and younger physicians in our county, in order to foster their development, not to mention a pipeline of leadership for ourselves. Acknowledging the rapidly changing employment dynamics in medicine, we will continue to foster our relationship with the large medical groups within our county, emphasizing the unique support that DCMS and TMA membership offers their physicians, that is independent of their “employment benefits.”

Our physician members should continue to expect that DCMS will pursue a thoughtful, informed evaluation of our current membership, but more specifically, friends and colleagues in the county who are not members. As many of our sister societies are experiencing a larger degree of attrition than we at DCMS, I do not see why we couldn’t actually see growth in 2020. We will need to have an informed approach, in order to accomplish this endeavor — what I would call “Mission 8,000.” As part of our strategic retreat that will take place later this year, we will look for ways to promote membership in ways that may not have been explored as of yet. In addition to these efforts, we will also continue our commitment to making progressive headway with our young physicians. Specifically, our medical student, resident, and fellow members, who are destined to become long-term members of DCMS, and our eventual leadership.

Our physician members should continue to expect that DCMS will promote and foster physician, and physician family, well-being. We will look to moving the physician resiliency support services, envisioned in the North Texas Alliance for Clinical Resiliency, from concept to practice. Additionally, we will continue the family-oriented outings that foster camaraderie and fellowship among our medical family.

Our physician members should continue to expect that DCMS will maintain its position as an honest and respectful broker in the fostering of positive relationships between physicians and hospitals, large groups, and the medical industrial complex, at large. The society, through its representation at the Dallas Medical Resource, will continue to collaborate with its hospital partners, expand on the areas where we already have common ground — the provision of care for our patients. In the areas that our own interests find us approaching our common objectives from different angles, and at times, candidly, with different goals in mind, we will stand strong in our advocacy, but in a way that is respectful and with the utmost professionalism, front and center.

Our physician members should continue to expect that DCMS will be prudent with its resources and practical in how we financially support our mission. At the same time, we will continue to look into areas of potential saving, as well as in new, as of yet, unexplored opportunities for non-dues-related financing. After all, as a non-profit, and to borrow the wisdom of the Sisters of Mercy, “no money, no mission.” And, “no mission’ is not an option.”

So to conclude, along with my fellow Board members, I will look to Jon, Rebekah, Anna, Deanna, Steve, Jackie, Cara, Pamela, Lindsey, and John, to ensure that we do absolutely nothing in 2020. Absolutely nothing...different, from arguably, the best County Medical Society in the nation. DMJ