



RESIDENT
DOCTORS
OF BC

PULSE GROW YOUR FINANCES

january 2016 | issue 29

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RESIDENT DOCTORS OF BC

The purpose of Resident Doctors of BC is to support residents in fulfilling their education to become well-informed, prepared and professional physicians to enhance patient care.

MISSION STATEMENT

- To advocate for contractual matters
- To support members' education and encourage excellence in the teaching environment
- To promote its members' professional, personal and financial well-being
- To foster collegiality among its members throughout British Columbia
- To facilitate collaboration with the community and other professional groups

CONTACT US

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A WORD FROM OUR BOARD

“TAKE THIS OPPORTUNITY TO REFLECT ON WHERE OUR SYSTEM WOULD BE WITHOUT ALL OUR TIRELESS WORK.”

Happy New Year to all! After a brief winter break, things are kicking back into gear at Resident Doctors of BC with a number of exciting projects. From political advocacy to strategic planning, it's shaping up to be a busy 2016.

This fall we began a process of compiling a resident response to the Ministry of Health's newly released strategic plan. We have been soliciting resident feedback via focus groups and online surveys, and will be analysing these results this spring. We thank all those who contributed, this effort will go a long way towards ensuring residents have a voice in the future of BC healthcare.

February 15-19th will also mark our annual Resident Awareness Week, a national event to raise awareness of the role that residents play in our healthcare system. Watch for your colleagues making appearances in the local media, and take this opportunity to reflect on where our system would be without all our tireless work.

Lastly, this spring will be one of introspection, as it is time we revisit the RDBC strategic plan. We will be seeking resident input to help us in evaluating new priorities, so please take advantage of this chance to provide your thoughts to ensure our organization can effectively represent the interests of all BC residents.

Sincerely,

Dr. Paxton Bach
Vice President 2015-2016





UPCOMING EVENTS

- February 2**
CoPR Meeting at 6:30pm at Resident Doctors of BC. See pg 11.
- February 3**
Board of Directors meeting. Email info@residentdoctorsbc.ca to RSVP.
- February 15-19**
Resident Awareness Week. See page 19 & 20 for how you can get involved.
- March 2**
Board of Directors meeting. Email info@residentdoctorsbc.ca to RSVP.
- March 29**
Resident Library at the MSAC. See pg 16.
- March 30 & 31st**
Income tax clinic & workshop. See pg 4.
- April 27**
Annual Parenting Workshop, to be held at the Sandman Hotel Vancouver. Details TBA.

SAVE THE DATES!



FINANCIAL LITERACY
C O U N S E L I N C.

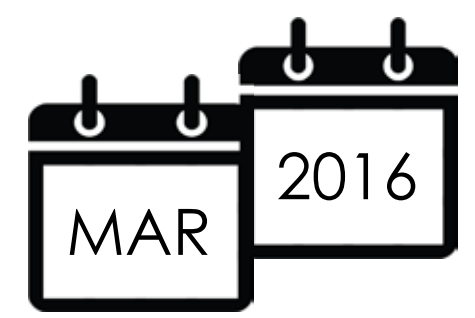
2nd Annual Resident Tax Preparation Clinics

Get your taxes done, increase your financial literacy and get your financial house in order.

Workshop topics:

- Can you manage debt and start a family in residency?
- The Trudeau Effect: What's the impact on you and your taxes as a Physician?
- What is the true cost of not incorporating properly?

WHEN & WHERE?



**There will be no promotion of any financial institution or their products.*

- TAX CLINIC #1: March 30th, 2016**
Time: 4:30 – 9:00pm
Location: MSAC
- TAX CLINIC #2: March 31st, 2016**
Time: 4:30 – 9:00pm
Location: VGH, Paetzold Auditorium
- INFO + SIGNUP**
Esther Lee
Education Program Manager, FLC
esther.lee@flci.ca

LOHN CAULDER LLP
CHARTERED ACCOUNTANTS

ALEXANDER
HOLBURN
ALEXANDER HOLBURN BEAULIEU + LANG LLP

PREPARING TO PRACTICE: DISABILITY OPTIONS

If you're a resident who is preparing to enter practice this summer, start considering your disability insurance options now so that you are properly covered after your transition.

If you have the Doctors of BC Resident Disability Insurance plan, you can continue coverage in practice. You will receive a letter in May, providing you with options to increase coverage and add extra features without proof of health. The plan will continue to cover you regardless of where you practice in the world, as long as you maintain Doctors of BC membership (cost is nominal if you live outside of BC). Disability covers you for accidents, injuries, and mental health issues that prevent you from working.

As a practicing physician in BC earning eligible MSP income (including service contract, sessional, and fee-for-service), you will be eligible to apply for the Physicians' Disability Insurance (PDI) negotiated benefit. PDI is a government paid short and long term disability plan. If you have at least \$2,000 coverage of the Doctors of BC Resident Disability for 12 or more months prior to practice, you will be eligible for PDI without proof of good health. Otherwise, you may have to provide a full application and proof of health to qualify for this negotiated benefit. PDI can be coordinated with any disability program you may already have in place.

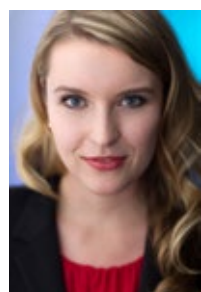
Residents who've decided to enter fellowship may increase their Doctors of BC Resident Disability up to \$7500 of monthly coverage.

Please book an appointment at 1-800-665-2262 or insurance@doctorsofbc.ca to discuss your options with a local Doctors of BC Insurance Advisors. Our advisors are licensed and non-commissioned to ensure you receive quality and unbiased advice. In addition to disability reviews, Advisors can provide a full assessment of your situation and insurance needs.

Whether you're starting residency or transitioning to practice, we welcome you to book a complimentary insurance check-up. We understand your schedule is busy - we offer daytime and evening in-person, phone, and Skype appointments. Contact us at insurance@doctorsofbc.ca or 1-800-665-2262 ext. 2807 or 604-638-2807 to get unbiased, non-pushy, real advice.

**doctors
of bc**

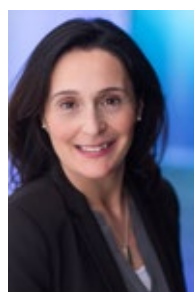
**YOUR RESIDENT
INSURANCE
ADVISOR TEAM**



Channelle Sawyer
Vancouver Island
Kelowna



Erin Higgins
Metro Vancouver
Prince George
Northern Interior



Paula Rooney
Metro Vancouver



Renee Brickner
Fraser Valley
Kamloops/Interior
Metro Vancouver



Julie Kwan
All regions

Awards of Excellence 2015

Three awards are given each year to outstanding individuals in the field of medicine.

RECIPIENTS RECEIVE:
Commemoration on a plaque at the Resident Doctors of BC office
A personal commemorative award
\$1000 donation to the charity/charities of their choice

AWARD OF MERIT

The purpose of this award is to recognize a Resident whose outstanding achievements and/or leadership reflect the aims and objectives of Resident Doctors of BC. The award will be presented annually to a Resident who has shown outstanding initiative in any of the following areas:

- Resident health and well-being
- Promotion of the role of residents in the healthcare system
- Advocacy and representation of Residents leading to improved work or learning environments

DR. PATRICIA CLUGSTON MEMORIAL AWARD FOR EXCELLENCE IN TEACHING

The purpose of this award is to recognize a physician clinical educator for his or her contributions to Residents' medical education. The recipient will have created a safe learning environment that encourages self-inquiry, supports adult learning, and fosters within learners a desire to achieve their highest potential.

All nominations require a nominator, a letter of support, contact information for two references and the CV of the nominee

RESIDENT ADVOCATE AWARD

The purpose of this award is to recognize an individual who displays significant interest in issues of importance to Residents. The award will be presented annually to a person who advocates for the personal, professional or educational advancement of Residents.

**RESIDENT
DOCTORS
OF BC**

Nominations open January 27th
and will close February 24th.
Visit residentdoctorsbc.ca/achievements/awards-of-excellence/ for more details

5 QUESTIONS ABOUT DEBT



**MD Financial
Management**
CMA Companies



If you're grappling with debt during residency, you're not alone. The vast majority of Canadian medical students report graduating with a fair amount of debt related to their education—about 30% expected debt of over \$100,000 and 13% expected debt of more than \$160,000.¹

While a heavy debt load can be stressful, you can take some control by learning more about budgeting, borrowing and strategies for lowering debt.

Here are five questions you may have about your debt.

1. How much can I borrow during residency?

As a medical student, you may have relied on government student loans as well as a line of credit. Financial institutions typically offer lines of credit for medical school through to the end of residency for amounts ranging from \$250,000 to \$275,000.

2. How can I lower my debt during residency?

Here are some practices that will help you manage your expenses and minimize debt during residency:

- Start by developing an annual budget, estimating your costs and potential income.
- Try to stick to your budget as closely as possible.
- Borrow only the amount you need, which will help avoid overspending.
- Try to minimize the interest that will accumulate on your line of credit by properly timing your withdrawals.

3. Should I consolidate my debt?

Consolidating your student loans can lower your monthly payments, simplify your finances and free up cash flow. Consolidation means you can stretch the time it takes to repay your loans. You may also be able to refinance loans at lower interest rates and reduce your monthly payments. And consolidating your debt can make your financial planning and day-to-day finances more convenient.

Together with your financial advisor, you can decide if consolidating your student loans makes

sense. You need to consider things like whether taking a line of credit to consolidate loans could restrict your access to credit in case of an emergency. There are also potential tax implications of forfeiting student loan status. And there are loan forgiveness programs that you may qualify for (see below).

4. What kind of information do financial institutions have about me and my debt?

Whenever you apply for a loan, you give the financial institution permission to access your credit report, which is a personal credit history that tracks your financial activities and personal financial habits.

The credit report includes details such as when you opened your bank accounts, whether you make your payments on time, and whether you have missed payments. If your credit history is poor, you may have difficulty getting a loan or mortgage, or renting an apartment or house. It may also result in you having to pay higher interest rates.

You can obtain your report once every six months from [Equifax Canada](#) or [TransUnion](#), either online or by mail.

5. Can I have my student loans forgiven?

Canada: Since April 2013, the Government of Canada has offered forgiveness of Canada Student Loans to eligible family doctors, residents in family medicine, nurse practitioners and nurses who work in rural or remote communities. If you're a family doctor or resident in family medicine, the federal government will forgive up to \$8,000 per year for a maximum of five years, or \$40,000, if you're eligible. Find out more about the eligibility requirements, application process and locations of communities by searching "[Canada Student Loan Forgiveness for Family Doctors and Nurses](#)."

British Columbia: If you're a medical resident or physician with a B.C. student loan, you can have your loan forgiven—up to a maximum of 20% per year for up to five years—if you work in certain facilities in underserved B.C. communities. More details about the B.C. Loan Forgiveness Program can be found at <https://studentaidbc.ca/repay>.

This article is courtesy of the Canadian Medical Association (www.cma.ca) and MD Financial Management (md.cma.ca). MD Financial Management provides financial products and services, the MD Family of Funds and investment counselling services through the MD Group of Companies. For a detailed list of these companies, visit md.cma.ca.

¹ <http://nationalphysicianssurvey.ca/off-to-work-i-owe-education-related-debt>



INCOME TAX RATES

Taxable Income	Tax Savings
\$55,000	\$154
\$65,000	\$304
\$75,000	\$454
\$85,000	\$604
\$95,000	\$670

The practical effect of the various changes on various levels of income is illustrated below:

Taxable Income	Income Tax		
	2014	2015	2016
\$30,000	\$3,817	\$3,769	\$3,733
\$40,000	\$5,917	\$5,878	\$5,842
\$50,000	\$8,611	\$8,519	\$8,372
\$60,000	\$11,581	\$11,489	\$11,192
\$70,000	\$14,551	\$14,459	\$14,012
\$80,000	\$17,655	\$17,548	\$16,933
\$90,000	\$21,053	\$20,877	\$20,072
\$100,000	\$24,882	\$24,706	\$23,871

Note: Income tax calculated on regular employment, business and investment income, excluding all tax credits except the basic personal tax credit.

EDUCATION AND TEXTBOOK TAX CREDITS

CHILDREN

- **Child Tax Credit**

- **Childcare Expenses**

- **Benefits**

The new Liberal government has promised to eliminate the UCCB and the CCTB and replace them with a new non-taxable income dependant Canada Child Benefit, expected to take effect in July 2016.

FAMILY TAX CUT

The Family Tax Cut, often referred to as income splitting, was introduced in 2014. Although not technically income splitting, it allows a non-refundable tax credit based on a notional transfer of income. Eligible couples with children under the age of 18, for purposes of this credit only, are able to transfer up to \$50,000 of taxable income from the higher income spouse to the lower income spouse, resulting in a maximum tax reduction of \$2,000. The family tax cut is available for 2015, but has been eliminated for 2016.

INCORPORATION

There has been much commentary on this issue. It has been suggested that medical corporations may be denied access to the low small business tax rate, or income splitting with family members through medical corporations may be cancelled. However, nobody actually knows what will eventually happen. The benefits of medical incorporation may be eliminated, or simply reduced.

INCOME TAX CHANGES FOR 2015 & 2016 CONT'D

We should find out when the next federal budget is released, probably in March 2016.

HIGH INCOME EARNERS

The Liberal government has pledged to review all tax expenditures, specifically targeting people who earn in excess of \$200,000. Again, nobody actually knows what will happen as a result of this review, but more change is likely.

Some of these tax changes will affect you immediately, and some in the future. For questions or assistance, please feel free to contact me.

Article courtesy of John Moore, CPA, CA
John Moore is a Chartered Professional Accountant who focuses on accounting, tax and financial planning for physicians through all stages of their career. Additional information and resources for medical residents and physicians are available at www.medicalcpa.ca and www.professional-edge.ca
Contact: 778.668.5914 or john@johnmoore.ca

COUNCIL OF PROGRAM REPRESENTATIVES MEETING

THE NEXT COPR MEETING WILL BE HELD ON
TUESDAY, FEBRUARY 2ND, 6:30 TO 8:30 PM

16th floor Conference Room, 650 West Georgia St, Vancouver

An agenda will be sent out to all CoPR representatives prior to the meeting. If there are any issues you would like addressed, please notify your program's representative: residentdoctorsbc.ca/governance/council-of-program-representatives/

Is your program without a representative?
Please consider joining CoPR! Email info@residentdoctorsbc.ca

RESILIENCY TRAINING FOR
POSTGRADUATE MEDICAL EDUCATION

Resiliency is the ability to recover from or adjust easily to adverse situations. It's a critical trait for individuals who work in high-stress environments. Resiliency can be fostered through the development of skills that allow one to effectively identify, cope with, and recover from challenging experiences. Training in resiliency aims to provide residents with the tools to better assist and support their patients, peers, and themselves – not only during medical training, but throughout their careers.

Resiliency training is important

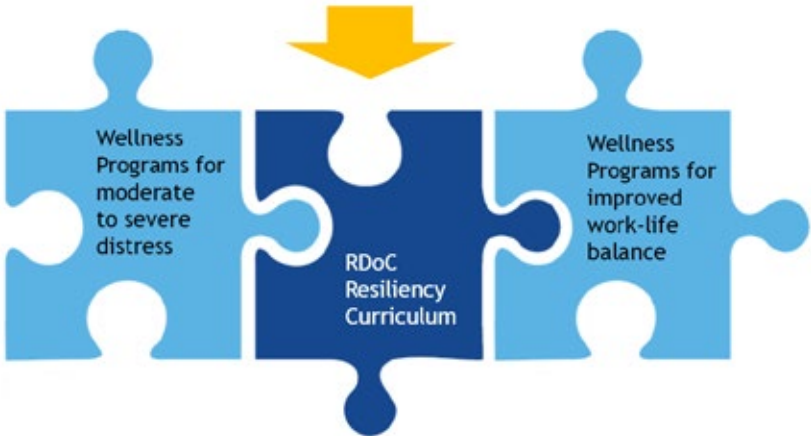
Data supports the importance of resiliency for medical residents. Consider:

- Burnout, a work-related syndrome due to chronic exposure to occupational stress, is prevalent in 45-75% of residents, depending on specialty.
- The majority of residents report that work-related fatigue impacts their mental health, physical health, and relationships with family and friends.
- The overall depression rate in U.S. medical residents is as high as 1 in 5.



RDoC's resiliency curriculum

RDoC has led the development of a skills-based resiliency curriculum that is designed to help mitigate stress and optimize performance during medical training and beyond. While most trainees have access to local wellness initiatives that address work-life balance or how to handle a crisis, RDoC's resiliency curriculum provides a coordinated, national approach.



The curriculum has been tailored for residents, using the Road to Mental Readiness training program created by the Canadian Armed Forces and later adapted by the Mental Health Commission of Canada (MHCC). RDoC's resiliency training introduces residents to the colour-coded Mental Health Continuum model that encourages individuals to be self-aware and reflect on their own stress levels. It also provides the following:

- Indicators to identify one's own declining or poor mental health, and to consider what actions to take in order to improve one's state of mental health.
- Key tools ("the Big 4+") based on cognitive behavioural therapy, performance psychology and mindfulness. These tools are practical exercises that can be used at any time to build and strengthen resiliency.
- Awareness of the barriers to seeking help, such as concerns regarding privacy or a fear of losing control, as well as a tool, "H.E.L.P", which can be used to assist peers who appear to be in in distress.

RDoC's next steps on this initiative include further refining the resiliency curriculum and developing a strategy for the implementation of training. The curriculum will be piloted at select programs in Fall 2016. This training is instrumental in helping residents overcome both the anticipated and the unexpected adversities of medical training. It will prepare them for long, rewarding, and sustainable careers – which yields benefits for physicians, patients and Canada's healthcare system as a whole.

It's the start of a new year, and time to make your annual resolutions. Consider making a financial resolution this year. Below are a couple common resolutions and some tips to help you be successful.

I WILL USE MY DISPOSABLE INCOME WISELY.

- Follow the "One-Third Rule": whenever you get extra cash, either through bonuses, gifts, or extra work, use the one-third rule to determine how you will use this money.
 - PAST: Pay down 1/3 of any debts
 - PRESENT: Spend 1/3 however you want
 - FUTURE: Put 1/3 into savings
- It is recommended that you have enough savings to cover three months of expenses, in the event you are unable to work.
- You should be saving about 6% of your income for retirement.
- Investments are a great way to grow any extra money.

I WILL PAY OFF MY DEBTS FASTER.

- Your total monthly debt payments (including mortgage, student loans, car, and credit card payments) should not be more than 35% of your monthly gross income. Some mortgage brokers will stretch this ratio up to 40%, but that leaves you very little budgetary wiggle room.
- There are a few ways you can decrease your loans faster:
 - Get a loan consolidation. It's easier to pay back one loan than multiple loans. You can also use loan consolidation for credit card debt. Interest rates on credit cards are much higher than bank loans.
 - Stop using your credit cards. If you have trouble controlling your spending, put your credit card away (or cut it up!) and use funds you actually have.
 - Renegotiate or refinance your loans. If you are in good standing at your bank, ask about getting a lower rate. Is another bank offering an interest rate promotion? Use that as leverage, or take your loan to them. Lower interest rates mean lower payments... but you can use this to shave some time off your loan if you are willing to keep making the same monthly payment.
 - Sell off some assets. Get rid of that gas-guzzler! Or do some purging and host a garage sale! You'll feel lighter, and you'll have extra cash to lighten your debts. Note that your mortgage should not be more than 2.5 times your annual gross household income.

I AM GOING TO SAVE FOR [FILL IN THE BLANK].

- Carry cash. The problem with plastic is that you can't readily see your balance and track your spending. Carry cash and you'll always know exactly how much you have left.
- Cut unnecessary expenses. Do you need cable if you primarily watch Netflix? Can you do yoga in your living room instead of at a yoga studio? Review your expenses and see what you can cut out.
- Drink at home and eat at home. Both of these will be cheaper in the long run than going out for food and drinks.
- To retire comfortably, your nest egg should be about 20 times what you want your annual income to be. If you anticipate needing about \$75,000 a year to live on when you retire, you'll need to save a nest egg of about \$1.5 million. Of course, this will vary if you retire early or continue to work longer than usual.

I WILL MAKE A BUDGET AND STICK TO IT.

- Take the time to sit down and review your transaction history. Calculate a reasonable budget for all your expenses, and make sure you keep track so you stay on budget.
 - There are multiple apps you can download that can help with keeping track of your savings and purchasing history:
 - Free apps: Wally/BillGuard/Dollarbird/Mint/Acorns/Digit
 - Use a budget template. Download one for free from mint.com, tidyforms.com, or Excel; or use the one on the Canadian government website: www.fcac-acfc.gc.ca/Eng/resources/toolsCalculators/Pages/BudgetCa-Calculat.aspx
- The Credit Counselling Society recommends the following breakdown:
 - 35%: Housing. This includes mortgage or rent payments, home taxes, strata fees, insurance and hydro.
 - 5%: Utilities such as phone or cell phone, gas (for your home), cable and Internet.
 - 10-20%: Food, including personal care and baby/pet needs.
 - 15-20%: Transportation (transit, taxi, fuel, insurance maintenance, parking)
 - 3-5%: Clothing
 - 3%: Medical costs (MSP, specialists, over-the-counter medication)
 - 5-10%: Personal & Discretionary, such as entertainment, recreation, alcohol, dining out, gaming
 - 5-10%: Savings. Plan to put aside money for unexpected expenses, retirement, and of course for any big expenses you might have planned for the future.
 - 5-15%: Debt Payments.
- Still struggling? Meet with a financial advisor and get their expertise.

**TIPS FOR TAX
SEASON**

TAX TIME

Tax season is here again! Get your taxes done right and on time by following these simple tips!

1. GET ORGANIZED.

Are your tax papers shoved haphazardly in a drawer somewhere? Spend some time now to organize your files. Separate taxes by year, make sure they are secured together properly so you don't lose anything. Hunt down any tax papers you may have received during the year, and collect your transit passes or receipts. Make sure this year's papers are easy to access so you can add to the file over the coming weeks as the rest of your tax forms come in.

2. FIGURE OUT WHO IS GOING TO FILE YOUR TAXES.

Turbo tax is a user-friendly online program that allows you to file direct to the CRA and pay any balance owed. But if your taxes aren't straightforward, which for many residents they aren't, an accountant can help you get the most claims and credits, and make sure you have filed everything correctly. Don't leave it too late to start contacting someone, as accountants are very busy this time of year.

3. MAKE YOUR RRSP CONTRIBUTIONS BY THE END OF FEBRUARY.

If you suspect you will owe taxes this year, make an RRSP contribution to lower your taxable income. The deadline for 2015 RRSP contributions is February 29, 2016. But don't leave it until the last day because the banks will be very busy as the deadline approaches. If you don't have enough funds on hand for a contribution, you can ask your bank to front you the funds through an RSP loan – just make sure you weigh your options carefully before taking on more debt.

4. REMEMBER TO CLAIM CMPA AND YOUR EDUCATION & TEXTBOOK TAX CREDIT!

CMPA is mandatory for all residents as per our Collective Agreement. They should send you a tax form so you can claim the fees; make sure you follow up with them if you don't receive it. Also, don't forget that UBC now recognizes residents as students for the purposes of taxes, so sign into the student system and download your T2202A so you can claim those education and textbook tax credits.

5. MAKE SURE YOU CLAIM FOR ALL THE DEDUCTIONS YOU ARE ELIGIBLE FOR!

Did you have extraordinary medical expenses? Did you take transit? Do you have children? Did you renovate your home? Did you make charitable donation? Did you take any continuing education classes? Do your research and make sure you don't miss out on any opportunities for deductions. If you are going to an accountant, make sure you have any receipts or proof you need to claim these deductions.



Residents' Library

March 29th, 2016

6:30-8:30 PM

The Medical Student and
Alumni Centre
2750 Heather St.
Vancouver
Right beside VGH

Register: <https://mus.med.ubc.ca/residents-library>

**MIX AND MINGLE; HELP MEDICAL STUDENTS FIND
THEIR IDEAL CAREER AND RESIDENCY!**



Food will be provided!

FINANCIAL LITERACY FOR RESIDENTS PROGRAM



FINANCIAL LITERACY
COUNSEL INC.



THE 3 HABITS OF FINANCIALLY LITERATE RESIDENTS

The more I help doctors increase their financial literacy rates, the more I see several recurring habits and disciplines that cause them to thrive financially, support their families, and create a lasting legacy to impact the communities they serve in a positive way.

I welcome your comments on the habits written below and how you practice some or all of them in your life. Moreover, I would be happy to help you put these habits into practice by getting to know you during one of the annual tax preparation clinics coming up in March 2016. You can email me at bobby.ning@fcli.ca to request a private consultation through the “EFAP Financial Literacy Program for Residents”. This program provides every resident in British Columbia with access to 3 hours of integrated financial, tax and legal counseling every year to get their financial houses in order as part of their EFAP benefits through Vancouver Coastal Health.

HABIT ONE: PERSONAL TAXES ARE FILED ON TIME

My team and I began providing tax preparation clinics to doctors in training 12 years ago through UBC Medicine and to this day we still come across medical professionals who still rely on their parents or their parents’ accountants to file their taxes.

In my mind, residency is the time to cut the proverbial umbilical cord because the gestation period is over and at some point you need to get a handle on your own finances and filing your taxes on time is a good habit to develop early on in your medical career.

Filing your own taxes on time or finding a professional who will file it for you is an important

part of the journey towards being a responsible professional because it helps you develop personal accountability as well as financial accountability towards your loved ones.

For residents who are newlyweds or in a common law relationship, it is paramount that you have a discussion about filing taxes on time either as joint tax filers or continue the practice of filing taxes individually.

For R1’s it is especially important to prioritize filing your taxes on time as you are getting the first taste of a modest income and there may be a myriad of unused tax credits from your years of undergrad and medical school.

For residents expecting a child or had a child in 2015, I encourage you to reach out to us for a private consultation via the “EFAP Financial Literacy Program for Residents” in order to receive guidance on how to get your finances in order and to ensure that you maximize the various top up programs as well as tax credits available to you and your household.

Last but not least, for residents finishing up their training in 2016 and transitioning into practice or a fellowship, our door is always open to assist you with an integrated financial, tax and legal transition plan which will outline the next steps to take in order to ensure that your financial house is in order as you begin your practice either as a locum, hospitalist or clinic owner.

HABIT TWO: GENEROSITY BEGINS IN R1

Over my 15 years of practice as a financial planner, I have witnessed a common pattern of how generosity through charitable giving benefits not

only the recipients but also the giver. I am happy to see that during the tax clinics we’ve provided over the past 12 years for doctors in training, there has been a growing trend towards giving to charities year after year since 2011.

According to one resident who participated in a tax clinic, “giving to charity helps me to get back to centre, reminding me why I chose medicine in the first place even though I am in the midst of the pressure, expectations and pace of residency training”.

I truly believe that when residents practice a “pay it forward” attitude through generosity, they are making a commitment to develop their character alongside the training they are receiving which is developing their competence. In my experience, you need both character and competence to develop into an effective and successful leader.

HABIT THREE: CASHCOWS > CASHPIGS

A nationally well-known accountant named David Trahair published a book titled “Cashcows, Cashpigs and Jackpots” wherein he simply articulates the secret to successfully managing finances. “Make sure your cashcows are greater than your cashpigs”.

Think about it, when you look back at your last three months of spending did you spend it wisely on products and services that will yield you a return? Or, did you spend more towards things that drain you of more money in the future?

I am confident that you can come up with a long list of cashpigs that residents tend to spend money on but there is not enough room in this article to list them. However, it may be more beneficial to list out 5 potential cashcows to consider during residency and as you transition into practice. Each cashcow below needs to be addressed on a case by case

basis and my team and I would be happy to help you customize each one to your personal and family situation.

Cashcow 1: Tax refund. It’s a good thing to get back what you paid in taxes.

Cashcow 2: Decide if you should do an RRSP, TFSA or both during residency. The bottom line is you need to make it a goal to begin putting away 10% of your income towards savings.

Cashcow 3: Choose the right insurance products. Consult a trusted professional on the various types of disability, life and critical illness insurance available to residents and that will serve you well throughout your lifetime.

Cashcow 4: Identify whether or not incorporating your practice makes sense right after the completion of residency or should you wait.

Cashcow 5: “There’s nothing like cooking and eating at home.” My team and I have noticed that the average amount spent on eating out for residents has gone up from \$475 in 2011 to \$650 per month in 2015 which is about 20% of the average resident’s salary.

For more information about our private consultations or to share your comments about the habits above and how you practice some or all of them in your life, you can contact me directly at bobby.ning@fcli.ca. I also look forward to meeting you at our upcoming tax clinic for residents on March 31st (see page 4 for details).

Article by:
Bobby Ning, CFP
Managing Director
Financial Literacy Counsel Inc.





Resident Awareness Week Social Media Participation Contest

Resident Awareness Week will take place February 15-19th, 2016, and the goal is to draw attention to the important role BC’s resident doctors play in the healthcare system.

Help us out by promoting residents on social media! The program with the most participation will win extra funding for Plan Your Own Social: residentdoctorsbc.ca/events/plan-your-own-social/

Ways to participate:

Facebook (fb.com/ResidentDoctorsBC)

- Share a Resident Doctors of BC post
- Post on the Resident Doctors of BC wall
- Tag Resident Doctors of BC in a post

Twitter (@ResidentDocsBC)

- Tweet using the hashtag #residentweek
- Tweet and mention @ResidentDocsBC
- Retweet a Resident Doctors of BC tweet

Your first participation is worth 1 point, everything after that is a bonus 1/4 point; so the more you post the better your program’s chances of winning!

Email info@residentdoctorsbc.ca if you have any questions.

A resident is a doctor engaged in supervised training prior to independent practice.

Residents care for you in hospitals and clinics in your community. Learn more at www.residentdoctorsbc.ca

RESIDENT
DOCTORS
OF BC

“I love that in family medicine I get to know and understand my patients well. I can share in the joy of a new birth, or support a patient who is going through a difficult time in their life.”
- 1st Year Family Medicine Resident



Our transit advertisement for RAW 2016. Check out the other Humans of Residency on our website and social media!

It’s that time of year again! **Resident Awareness Week** is coming up mid-February and we are leading the pack with lots of initiatives planned to help bring residents into the public eye. These are all the projects we have confirmed for 2016:

- Residents in the media: The Communications Committee has reached out to a number of media outlets, from television to newspaper to radio. Watch for links on our website!
- Humans of Residency will be making a come-back with 10 new faces! Watch for our ads on the skytrain, and on buses in Victoria and Prince George. We will also be posting images to our website and social media, and on posters in hospitals around BC.
- We’ll be working with our stakeholders to get their help promoting RAW on their websites and social media, and in their communications.
- The BC government has officially proclaimed February 15 to 19th, 2016 to be Resident Awareness Week.
- We will be setting up awareness booths at hospitals around BC with games and prizes to promote residents. The schedule is below, if you are free, please join us!
- We are developing an infographic about residents’ daily lives. We surveyed the membership and you told us what time you normally wake up, how much coffee you drink, how many patients you see, etc. We’ve put that data together into an infographic that we will share with the public so they know just how hard you work!

Check our social media pages daily for more information, interesting facts and comments, and more! Help promote us by interacting with us - you could win a prize for your program if you do! (See page opposite for contest information.)

VOLUNTEERS NEEDED FOR HOSPITAL BOOTHS!

We are looking for residents to help man the awareness booths, and interact with the public. The list of dates and locations are as follows, if you can help out at any of them, please email info@residentdoctorsbc.ca. Thank you!

LOCATION	DATE	TIME
St. Paul’s Hospital (4th floor outside cafeteria)	Monday, Feb 15	11AM - 1PM
Vancouver General Hospital (JPP, across from gift shop)	Tuesday, Feb 16	11AM - 1PM
Kelowna General Hospital (lobby)	Tuesday, Feb 16	11AM - 1PM
Prince George Regional Hospital (foyer)	Tuesday, Feb 16	11AM - 1PM
Royal Columbian Hospital (tower lobby)	Wednesday, Feb 17	11:30 - 1:30
Royal Jubilee Hospital (Patient Care Centre Atrium)	Wednesday, Feb 17	11AM - 1PM
BC Children’s Hospital (Shaughnessy Cafeteria)	Friday, Feb 19	11AM - 1PM

RRSP VS TFSA: AN OVERVIEW & USEFUL TIPS

RRSP

What is an RRSP?
An RRSP (Registered Retirement Savings Plan) is an investment plan that is set up through a financial institution and registered with the government. One can invest in a variety of investments in their RRSPs including stocks, mutual funds, savings accounts, and term deposits.

When one makes a contribution into their RRSP, they are entitled to deduct this amount from their taxable income which could result in a tax refund. Any earnings from those investments are not taxed within the RRSP; however, withdrawals from the RRSP are taxable.

Tax Advantage

Ideally, one would contribute to their RRSP from their income during their working years when their income is high (and in a high tax bracket and thus maximize the tax deduction) and then withdraw the RRSPs during their retirement years when their income is low (and in a low tax bracket and minimize taxes paid on withdrawal).

Key Facts and Tips

- February 29, 2016 is the deadline for RRSP contributions for the 2015 tax return.
- The amount of RRSP contributions one can make (and deduct from income) is based on one's prior year income. This deduction limit can be found on one's tax Notice of Assessment.
- Since undeducted amounts are carried forward to future years, those who expect a higher income in the near future (e.g. post-residency) should wait until then to make a deduction.

- Avoid contributing in excess of one's limit; contributions that exceed the limit by more than \$2,000 are subjected to a penalty of 1% per month.
- Pros**
 - Tax refund: The RRSP deduction can result in a tax refund; it is not a bad idea to use this refund for debt repayment or purchasing additional investments.
 - Home Buyer's Plan: First time home buyers can withdraw up to \$25,000 tax-free (up to \$50,000 per couple) from their RRSP provided the contributions were made at least 90 days before the withdrawal date. The amount needs to be repaid over 15 years.
 - Doctors of BC RRSP Matching Program: Open to eligible practicing physicians.
 - Income splitting: A high income spouse (at a high tax bracket) can deduct contributions made to their lower income spouse's RRSP; the lower income spouse would be subjected to a lower tax rate upon withdrawal. Furthermore, RRSP withdrawals during retirement are eligible for spousal pension income splitting.

Cons

- Withdrawals are taxable: As such, RRSPs are not suitable for those who plan to make withdrawals on a regular basis before retirement. In retirement, those with significant amounts of other income could be at risk of OAS (Old Age Security) clawback.

TFSA

What is a TFSA?
Like an RRSP, a TFSA (Tax Free Savings Account) is also an investment plan that is set up through a financial institution and registered with the government (TFSAs were introduced in 2009). Eligible investments mirror those for RRSPs including stocks, mutual funds, savings accounts, and term deposits.

Tax Advantage

Unlike an RRSP, one does not get a tax deduction for contributions made to a TFSA; however, investment earnings grow tax-free within the plan and all withdrawals are tax-free.

Key Facts and Tips

- The annual contribution limit is set by the government: \$5,000 per year for 2009 - 2012, \$5,500 per year for 2013 - 2014, \$10,000 for 2015, and \$5,500 for 2016.
- The contribution limits are cumulative; unused amounts are carried forward to future years.
- One needs to keep proper records to ensure

SUMMARY

Ultimately, while both RRSPs and TFSAs confer tax savings, their different attributes need to be considered for one's prudent financial planning. Here are a couple of key recommendations:

- Since TFSA withdrawals are not taxable and the contribution limit is replenished in the following year, they are recommended for those who intend to withdraw from them before retirement.
- Since RRSPs result in a greater tax benefit for those in a high tax bracket, I recommend that residents contribute to TFSAs during residency and save the RRSP deductions for post-residency when their incomes are higher.

their limits are met at all times; excess contributions are subjected to a penalty of 1% per month. (One can also contact the Canada Revenue Agency (CRA) for their unused contribution limit.)

- TFSAs are NOT RECOMMENDED for US citizens since the TFSAs are still subjected to US tax.

Pros

- Tax-free withdrawals: Withdrawals are not taxed and one can withdraw funds as needed. Furthermore, withdrawals during retirement will not subject a taxpayer to OAS clawback.
- Contribution limit replenished with prior year withdrawals: Withdrawals are added back to the contribution limit in the following year.

Cons

- No income splitting: TFSAs cannot be used to split income from higher to lower income spouse.
- No tax deduction: Contributions are not deductible for tax.

This article is courtesy of Richard Wong, CPA, CA of Wolrige Mahon LLP. Richard has extensive experience in providing accounting and tax services to physicians and other health professionals. For more information, Richard can be reached at rwong@wm.ca or at 604-691-6886.

Two great opportunities for rural CME this year!

2016 Rural Locum Forum: Choices and Transformations

February 25-27, 2016

Vancouver Island Convention Centre, Nanaimo, BC

Register: ubccpd.ca/course/Rural-Locum2016

For more information, email kyoung@rccbc.ca



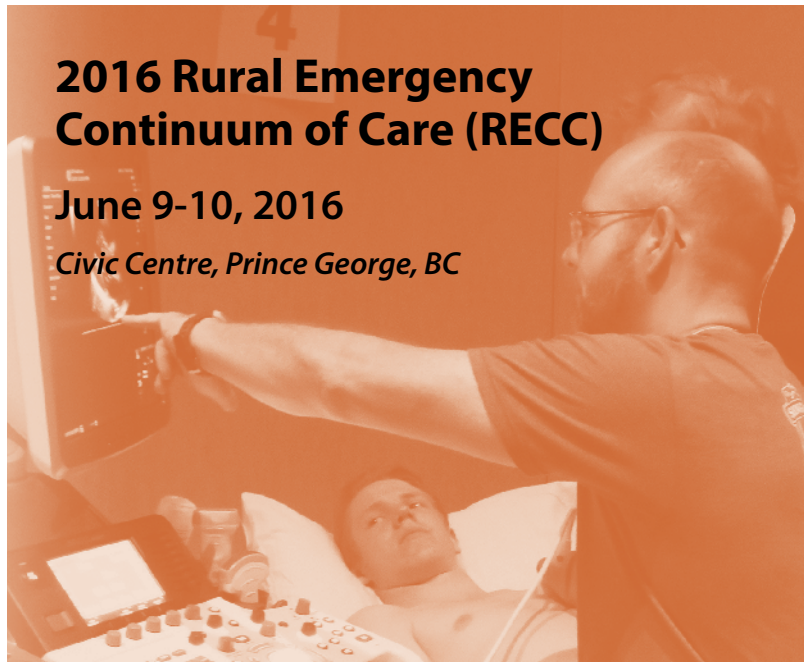
- network with rural BC locums, and practitioners interested in locuming
- share experiences, learning, and ideas for innovation
- pre-conference courses:
 - The CARE Course (*this course is full*)
 - CASTED
 - ACLS
 - BLS



2016 Rural Emergency Continuum of Care (RECC)

June 9-10, 2016

Civic Centre, Prince George, BC



- hands-on skills workshops
- rural medicine
- emergency medicine
- pre- /post-conference courses:
 - The CARE Course
 - The Shock Course
 - HOUSE Program
 - Wilderness Medicine Course
 - CASTED
- rural faculty development
- networking
- interprofessional learning



For more information,
email conference@rccbc.ca

www.rccbc.ca/conferences

A resource for BC doctors from the Divisions of Family Practice

The Practice Toolkit (divisionsbc.ca/provincial/practicetoolkit) is a new online resource to help BC doctors manage practices of all sizes efficiently and effectively. Comprehensive and customizable to suit any GP or specialist's practice, the toolkit contains information and sample documents covering:

- Workplace safety
- Employee conduct
- Privacy and confidentiality
- Facility checklists
- Clinician contracts
- Confidentiality agreements

The toolkit is a creation of the Divisions of Family Practice (divisionsbc.ca/provincial/aboutus), a provincial initiative involving 35 community-based groups of family physicians throughout BC who collaborate at the local level to achieve common health care goals. Originally launched by the South Island Division of Family Practice, the toolkit was adopted by other divisions and further revised to be useful to any medical practice in BC. A downloadable MS Word version of the toolkit is also available, accompanied by an editing guide that clinics can use to customize their clinic manuals: divisionsbc.ca/CMSMedia/WebPageRevisions/PageRev-5370/Toolkit-Final.docx

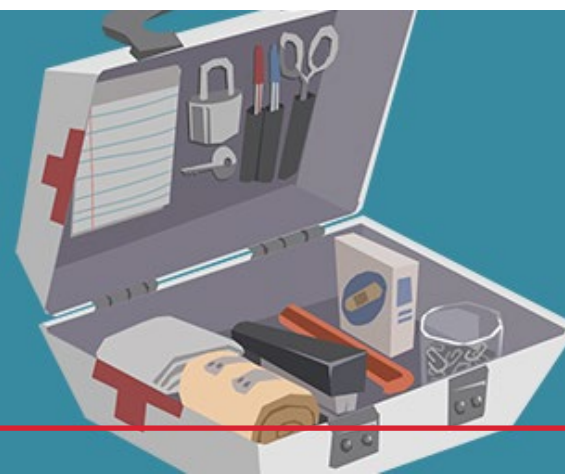
An evolving resource, the toolkit will be updated as feedback from users is implemented and revisions are made to policies and processes. The sample forms, agreements, and contracts are based on best practices that have been tried and tested by many different practices, and accessing them can save clinics time and money by eliminating or reducing the need for outside consultants. An online log tracks the latest updates and visitors can request notifications to ensure they are using the most recent version.

Medical clinics aren't legally obligated to use an operations manual like the Practice Toolkit, but the resource is invaluable in helping clinics comply with employment and privacy law, stay abreast of new CMA and College of Physicians and Surgeons of BC guidelines, and keep EMRs and other documents organized and up to date to improve efficiency in the event of an audit.

British Columbia doctors are invited to review the toolkit by visiting divisionsbc.ca/provincial/practicetoolkit and utilize any resources they feel might be beneficial to their practice. Questions and comments about the toolkit can be e-mailed to webmaster@divisionsbc.ca.

The Divisions of Family Practice initiative is funded by the General Practice Service Committee (GPSC), a joint committee of the provincial government and Doctors of BC. Visit www.gpsc.bc.ca for more information.

**PRACTICE
TOOLKIT FOR
BC DOCTORS**



**Practice
Toolkit**



1) What have you been up to since residency?

A whole lifetime is behind me since those days! I've had a busy professional career, and a family. I have been the regional medical director for laboratory medicine at Fraser Health for 20 years. I have one son, who is now a lawyer. Through my involvement with PARI-BC, I got involved with other medical associations in the community, and I do a lot of volunteer work now, especially with the South-Asian community, trying to promote healthy living. Family time is very precious to me, we like to travel to Asia and go cruising. I'm also fond of golfing, and lately I've become interested in yoga.

2) What are some highlights from your presidency?

When I became President, I felt that PARI-BC was viewed as a bit of a maverick in the medical community. I set out to change that, by talking about it, changing the colour of the newsletter from an aggressive red to a calming sky blue, and by developing a clearer identity of ourselves. Over the year there was a shift and we started to be viewed as a serious organization. We had our second successful round of bargaining, and we started developing national relationships with the other provincial organizations.

3) What were some challenges you faced during residency?

My program (pathology) was very well established, so residency was actually smooth sailing for me. We were established locally and didn't have to move around, we would get together with other residents on Fridays to socialize. Our biggest challenge was just making sure we met our credentials.

4) What advice would you give to residents?

Believe in yourselves, and believe what you are doing is what you want to do. Becoming a doctor is a lifelong commitment, so you need to be passionate and dedicated. I think the most important value is availability; you can be a good doctor, but if you're not available, you won't be successful. Follow the 3 A's: Availability, affability, and ability.

I encourage all residents to get more involved in their association; it's a good training group for building your leadership skillset, and your formative years during residency are the best time to learn and practice.

5) Who inspires you in your medical career?

My family was very encouraging, and my wife was very supportive. In terms of service and value as a doctor, my biggest inspiration as my Chief, who I worked with even before medical school when I was a scientist. He had a strong belief that as physicians we should work together as a group, that we were unified by our profession and all in it together. He was the biggest influence that drove me to get involved in organized medicine.



Tofino is located in the Clayoquot Sound, which is made up of 400,000 hectares of land and marine inlets. The area has been inhabited by First Nations for thousands of years. It was first discovered by Spanish Europeans in 1774, and claimed for England by Captain James Cook three years later. The townsite of Tofino, named after Tofino Inlet, was officially established in 1909, and was a popular tourist destination even before that time. When the restrictions on the logging road between Port Alberni and the coast eased up in the late 60s, Tofino's beach quickly gained popularity as a spot for camping and surfing. Today, the region receives over 600,000 visitors annually.

POPULAR ACTIVITIES

- **Storm Watching:** Storm season spans November to February, and Tofino has some fantastic vantage points from which to take in the powerful ocean storms with swells up to 20ft tall. Check out Kwisitis Visitor Centre, the Tonquin Trail, or Chesterman Beach for good storm-watching locations.
- **Surfing:** Tofino is Canada's surf capital with 35km of surf-able beach, a fairly constant temperature of 10 degrees Celsius, and great waves, especially during the winter months. Just don't forget your wetsuit, booties, gloves and hood.
- **Whale Watching:** Between March and October, catch a glimpse of gray whales, humpback whales, orcas, or porpoises on a whale watching tour.
- **Hot Springs Cove:** Take a boat or seaplane out to the Maquinna Provincial Park for a day of soaking in the untouched geothermal hot springs surrounded by old-growth forest. A series of pools vary in temperature from 109 degrees Celsius to 50 degrees Celsius, cooling gradually as they get closer to the ocean.
- **Fishing:** Clayoquot Sound is teeming with fish. You can catch silver and Chinook salmon in in-shore waters, and halibut in off-shore waters. And for those willing to travel the distance, freshwater in the region offers steelhead, rainbow and cutthroat trout.
- **Zip Lining:** Spend 2 hours speeding over the Winchee River Canyon from 100ft up on a series of zip lines.
- **Hiking:** Tofino is surrounded by hiking trails and destinations. The closest to the city include Tonquin Trail and the Tonquin Connector, and the boardwalks of Pacific Rim National Reserve Park. Or go off path and wander down one of the area's many beaches, you never know what you mind find after the tide goes out!

For more information about Tofino, including tours and accommodations, visit www.tourismtofino.com

Still settling in after moving for residency? In a new community for a rotation?
Check out Resident Doctors of BC's resident resource: "Living in BC"

To access the Living in BC guide, visit the Resident Doctors of BC website at www.residentdoctorsbc.ca/resources/living-in-bc/



PULSE

The Pulse newsletter is always looking for submissions from residents like you! If you have article ideas, announcements, or other interesting insights about life as a resident doctor, please contact us at: pulse@residentdoctorsbc.ca

IMPORTANT PHONE NUMBERS

HSSBC Benefits &
Payroll
1-866-875-5306

Physician Health
Program
1-800-663-6729

Employee Family
Assistance Program
1-800-505-4929