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Coming Events

Please join us for

Distributed Medical Education (Post-conference) Workshop

May 3, 2006 (8:30 – 15:30) – Hilton London Ontario

Sponsored by AFMC

Across Canada, faculties of medicine are engaged in distributed educational activities beyond the walls of their institutions. Distributed Medical Education (DME) encompasses a broad definition of activities. In undergraduate, postgraduate and continuing medical education, educational events and activities involve learners and teachers who are outside of the immediate classroom or clinical site. For example, medical students may be assigned to different hospitals for clinical experiences or to family physicians' offices distant from the university site. Residents may undertake all or part of their specialty education at hospitals or in communities outside the university, and practicing physicians may participate in online learning programs, or with colleagues in their own and other communities in programs conducted by the university. These activities may range from a single clinical or community rotation to situations where an entire educational program is offered at a distant site.

As Distributed Medical Education has increased in Canada, with initiatives such as the opening of the Northern Ontario School of Medicine, and the development of two satellite campuses at both the Université de Sherbrooke and UBC, the AFMC Council of Deans requested this workshop be organized for interested parties to come together to share ideas and progress, identify facilitators and barriers, and discuss solutions.

The workshop has been planned to meet these goals. The day-long workshop, scheduled for May 3rd, immediately follows the annual conference. All those involved or interested in DME are encouraged to attend.

The goals and objectives of the workshop are as follows:

Goals:

- To share current initiatives in DME across Canada
- To discuss sharing of resources and potential opportunities for collaboration
- To consider approaches for evaluating process and outcomes of DME programs

Learning Objectives:

Participants will have the opportunity to:

- Learn about current developments and initiatives in DME
- Understand some common challenges facing DME development and implementation
- Participate in developing approaches to common problems
- Gain knowledge of frameworks for evaluating the process and outcomes of DME

The day will include a variety of activities: among them will be a plenary presentation which will address the overall progress and challenges in the development of DME; an update on the Canadian situation; working groups to discuss particular issues and a panel discussion. The day will be very interactive, and your input is welcomed. The cost for the day will be \$50 which includes lunch.

This will be an important forum in which to share experience and discuss the challenges and opportunities in continuing to develop and evaluate Distributed Medical Education initiatives.

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Reflections ...

It bears repeating that the health status of the First Nations / Métis / Inuit Canadians is inferior to that of the rest of the Canadian population. The differences are dramatic and worrying. For example, the rate of diabetes is more than double that of the non-Aboriginal Canadian population; smoking rates in 15 to 17 year-olds are three to four higher than that of other Canadians; infections (tuberculosis for example), accidents and the suicide rate exceed the national averages. Life expectancy among First Nations men is at least seven years less than that for the rest of Canadians. Other factors impact on health, such as poverty, lower educational accomplishment, contaminated water and poor living conditions. These determinants of health unfortunately all apply to our First Nations / Métis / Inuit Canadian communities.

Approximately 3% of the Canadian population is Aboriginal (status and non-status First Nations / Métis / Inuit). Those of Aboriginal ancestry may be as high as 4.4% of the population. Between 1901 and 2001, the population of those of Aboriginal ancestry increased tenfold when the total population of Canada increased only sixfold.

There are currently about 200 Aboriginal physicians practising in Canada. If 3% of our physician population (60,000) was Aboriginal, we would have 1800 Aboriginal physicians. What a gap!

In 1999 there were 8 Aboriginal students in the first year of our medical schools. In 2001 there were 18 and in 2005 there are 36 new Aboriginal enrollees. Progress, but so very modest. Medical education and our research activities are challenged to be socially accountable in order to better represent and serve the needs of our communities and to train physicians to be culturally competent.

AFMC has made a start in addressing these issues and has identified Aboriginal health as a priority. An Aboriginal Health Task Group was formed in December 2004 to initially focus on admissions and student support and curriculum development.

A workshop on admissions and support of Aboriginal students in medical schools was held in June 2005. At the meeting a consensus emerged that a "tool kit" of information resources and success stories should be developed. Literature should be gathered to educate us all. For example, information on effective community engagement processes and working collaboratively with Aboriginal communities is needed. Joint advocacy between Aboriginal communities and the faculties of medicine should be encouraged. Strategies to increase the enrolment of Aboriginal medical students are required to be articulated, implemented and constantly refined.

The important work of increasing the number of Aboriginal students in medical schools has just begun. We have to ensure a sustainable process to share information, gather statistics, reach out to Aboriginal communities and develop innovative ways to encourage more Aboriginal students into medicine and creatively support them when they are in training.



Nick Busing
President & CEO
Président directeur

Réflexions ...

Il est bon de rappeler que l'état de santé des membres des Premières nations, des Métis et des Inuits est inférieur à celui du reste de la population canadienne. Les différences sont dramatiques et inquiétantes. Par exemple, le nombre de diabétiques est deux fois plus élevé que celui de la population canadienne non autochtone. Le nombre de fumeurs dans la tranche des 15 à 17 ans est de trois à quatre fois plus élevé que pour les autres Canadiens. Le nombre d'infections (comme par exemple la tuberculose), d'accidents et de suicides dépasse les moyennes nationales. L'espérance de vie des hommes des Premières nations est inférieure d'au moins sept ans à celle des autres Canadiens. D'autres facteurs comme la pauvreté, un niveau d'instruction inférieur, de l'eau contaminée et de piètres conditions de vie influent sur la santé. Ces déterminants de la santé s'appliquent malheureusement tous aux collectivités métis et inuites de même qu'à celles des Premières nations.

Les Autochtones (membres des Premières nations/Métis/Inuits inscrits ou non) comptent pour environ 3 % de la population canadienne. Les personnes d'ascendance autochtone comptent pour jusqu'à 4,4 % de la population. Entre 1901 et 2001, le nombre de personnes d'ascendance autochtone a été décuplé alors que le nombre total de Canadiens n'a été multiplié que par six.

À l'heure actuelle, environ 200 médecins autochtones pratiquent au Canada. Si 3 % de l'ensemble de nos médecins (60 000) étaient autochtones, nous aurions 1 800 médecins autochtones. Quelle différence !

En 1999, on recensait 8 étudiants autochtones de première année dans les facultés de médecine du pays. En 2001, ce nombre était passé à 18 et en 2005, on comptait 36 nouveaux étudiants autochtones. Cette augmentation constituait certes un progrès, mais de nature très modeste. L'enseignement médical et les activités de recherche doivent s'inscrire dans une optique de responsabilité sociale afin de mieux représenter et servir les besoins de nos collectivités et de former des médecins sensibles aux réalités culturelles.

L'AFMC a commencé à se pencher sur ces questions et a qualifié de priorité le problème de la santé des Autochtones. En décembre 2004, un groupe de travail sur la santé des Autochtones a été formé pour se pencher initialement sur la question des admissions et de l'appui accordé aux étudiants de même que sur l'élaboration des programmes d'études.

Un atelier portant sur les admissions des étudiants autochtones dans les facultés de médecine et sur l'appui qui leur est fourni a eu lieu en juin 2005. Lors de la rencontre, on a décidé d'un commun accord qu'une « trousse d'outils » composée de ressources informatives et d'exemples de réussites devait être constituée. Nous devons recueillir de la documentation afin de nous familiariser avec le sujet. Par exemple, on recherche de l'information sur les processus liés à un engagement communautaire efficace et sur la collaboration avec les collectivités autochtones. On devrait encourager la collaboration des collectivités autochtones et des facultés de médecine pour défendre conjointement

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**The 2006 AFMC – AstraZeneca Award for Exemplary Contribution to Faculty Development
to Be Presented to Dr. Meridith Marks at the 2006 Medical Education Conference (London ON)**



Dr. Marks is a physiatrist with an active clinical practice in the area of amputee rehabilitation. As the Assistant Dean, Professional Affairs in the Faculty of Medicine at the University of Ottawa she is responsible for overseeing the academic appointments and promotion process, as well as providing career development initiatives for faculty members. Dr. Marks has a long standing commitment to excellence in education and in promoting medical education as an academic pursuit both locally and nationally. A recipient of multiple teaching awards, she is well regarded as a teacher and educator. Her areas of scholarly pursuit primarily relate to career development of physicians and assessment of impact of professional development programs. Her contributions to the advancement of medical education and leadership development at the University of Ottawa were recently acknowledged with a 2005 Faculty of Medicine Award of Excellence.

**The 2006 AFMC – GlaxoSmithKline Young Educators Award
to Be Presented to Dr. Bruce Ballon at the 2006 Medical Education Conference (London ON)**

Dr. Ballon is a psychiatrist at the Centre for Addiction and Mental Health and an Assistant Professor of Psychiatry at the University of Toronto. He is a Clinical Education Specialist in the Concurrent Disorders Service and a Consultant to the Youth Addiction and the Problem Gambling Services. He is the Addiction Education Coordinator for the Department of Addiction Psychiatry. Dr. Ballon is also the Chair of Innovation and Teaching Methods for the Association of Academic Psychiatry. He has received numerous awards for his work in psychotherapy, education and the humanities and has a special interest in media and their relationship with psychiatric issues. He has designed a variety of novel psychoeducational and therapy initiatives involving the use of film, television, the internet, creative writing and art and has been a psychiatric content consultant for television and film productions. He also is an award-winning game designer, creating simulations that deal with mental health and addiction.



**The 2006 AFMC – John Ruedy Award for Innovation in Medical Education
to Be Presented to Dr. Pat Croskerry at the 2006 Medical Education Conference (London ON)**



Dr. Croskerry is an Associate Professor in Emergency Medicine in the Faculty of Medicine, and a Senior Clinical Research Scholar at Dalhousie University. He implemented the first undergraduate course on patient safety in Canada at Dalhousie University in 2000, and adapted the course for residents in 2002. Both courses are now fixtures in undergraduate and postgraduate curricula. His research interests lie primarily in medical error and patient safety. He has worked in the areas of clinical decision-making, human factors ergonomics, medication safety and shift-work. He has published over 50 articles, and a number of book chapters on these topics. He is an Associate Editor of *Academic Emergency Medicine* and a reviewer for several major journals. He currently serves on the Medical Education and Professional Development Advisory Committee of the Canadian Patient Safety Institute and is Chair of the Provincial Patient Safety Advisory Committee of Nova Scotia.

**The 2006 AFMC – May Cohen Gender Equity Award
to Be Presented to Dr. Blye Frank and Dr. Susan Philips at the 2006 Medical Education Conference (London ON)**



Dr. Frank is a Professor in the Division of Medical Education and the Director of Faculty Development in the Faculty of Medicine at Dalhousie University. He has taught and conducted research for over three decades in the areas of social justice and equity with a concentration on gender. He serves on several national advisory boards including the Institute of Gender & Equity for CIHR; the Rainbow Health Coalition, a national primary health care funded initiative; as well as Co-chair of the Committee on Gender & Equity Issues for AFMC. He was recently awarded funding by CIHR Institute of Gender and Health to initiate a national network on Men, Masculinities and Health. He is involved in faculty development at the Khyber Medical School in Peshawar, Pakistan and with the Medical School at Gazi University in Ankara, Turkey, as well as facilitating an active faculty development program at Dalhousie University.

Dr. Phillips is a Professor and the Equity Officer for Queen's University's School of Medicine. Her parents' valuing of equality and education underpin a career as a physician and educator in Ontario's remote First Nations communities, downtown Toronto, Kingston's Community Health Centre and the Department of Family Medicine at Queen's. Her research has been published in the *New England Journal of Medicine*, *Social Science and Medicine* and the *International Journal for Equity in Health*. Dr. Phillips has been invited by the WHO, several Australian and Canadian universities, and the EU, to facilitate the integration of gender into medical education and research. The Gender and Curriculum Project, a web enabled undergraduate curriculum of Ontario's medical schools, owes much to her initiative and ongoing involvement in conjunction with her role as a founding member and current Chair of the Gender Issues Committee of the Council of Ontario Faculties of Medicine.



DME (continued from page 1)

To register for the workshop please complete the 2006 Medical Education Conference registration form which can be found at http://www.afmc.ca/pages/annual_meetings_2006.html. It is listed near the bottom of the form under "Wednesday" sessions.

The organizing committee members are Dr. Joanna Bates (UBC), Dr. Dan Hunt (NOSM), Dr. Tom LaCroix (UWO), Dr. Paul Grand'Maison (Université de Sherbrooke), Ms. Susan Maskill (AFMC) and Dr. Karen Mann, Chair (Dalhousie). For further information, please contact any of the organizing committee members. We hope you will be able to join us for the important conference.

See you there ...

"Inventory of Socially Accountable Activities" of Our 17 Schools is Now Available at www.afmc.ca/search_tool/index.html

Search this database to see some of the work our 17 Canadian medical schools are doing to meet the needs of their communities. Presently there are 123 projects included in this searchable database.

This inventory began as a result of an informal survey of participants at the symposium "Social Accountability of Canadian Medical Schools" held during the 2003 ACMC – CAME Annual Meeting. Subsequently an Inventory Working Group, under the leadership of Dr. Alan Neville, McMaster University, was established to formalize the ongoing collection of such information adapting the framework developed by the WHO in Defining and Measuring the Social Accountability of Medical Schools (WHO, 1995).

The 2006 CAME – Ian Hart Award for Distinguished Contribution to Medical Education

to Be Presented to Dr. Richard Cruess and Dr. Sylvia Cruess at the 2006 Medical Education Conference (London ON)



Dr. Richard Cruess graduated with a Bachelor of Arts from Princeton in 1951 and an MD from Columbia University in 1955. He is Professor of Orthopaedic Surgery and a Member of the Centre for Medical Education at McGill University. He previously served as Chair of Orthopaedics (1976-1981); Dean of the Faculty of Medicine at McGill University (1981-1995); and as President of the Canadian Orthopedic Association (1977-1978), the American Orthopedic Research Society (1975-1976), and the Association of Canadian Medical Colleges (1992-1994). He is an Officer of The Order of Canada and of *L'Ordre National du Québec*.

Dr. Sylvia Cruess graduated from Vassar College with a Bachelor of Arts in 1951 and an MD from Columbia University in 1955. She is an endocrinologist, Professor of Medicine and a Member of the Centre for Medical Education at McGill University. She previously served as Director of the Metabolic Day Centre (1968-1978) and as Medical Director of the Royal Victoria Hospital (1978-1995) in Montreal, and as a Member of the Deschamps Commission on Conduct of Research on Humans in Establishments.

In collaboration since 1995, they have carried out research on professionalism in medicine. They have published extensively on the subject and have been invited speakers at universities, hospitals and organizations in many parts of the world.

"Partnerships for Improving Health Care"

**2006 Medical Education Conference (London ON)
April 29 – May 3, 2006**

"Partnerships: Interprofessional Teams for Better Health"

Monday Plenary, May 1

"Future of Assessment Across the Education Continuum"

Tuesday Plenary, May 2

"Social Accountability – Affirmative Action or Freedom of Choice"

Tuesday Plenary, May 2

Have you registered for the conference yet?
Save \$75 by registering before March 6th!

Remember the following deadlines:

- **Full Conference Registration Fees**
 - \$450 **before March 6th**
 - \$525 **March 6th – April 7th**
Any registrations received after April 7th will only be processed on-site at the \$650 rate.
 - \$650 **on-site**
- **Hilton London Reservation – March 27th**

Visit http://www.afmc.ca/pages/annual_meetings_2006.html for up-to-date information including a local link of services and events developed by conference host Schulich School of Medicine & Dentistry

Reflections (continued from page 3)

The second priority for AFMC, the medical schools and the Aboriginal community is to establish a curriculum for both undergraduate medical students and for many of our post-graduate training programs. This curriculum needs to address the health needs of Aboriginals in a culturally appropriate way. Aboriginal physicians, other Aboriginal organizations, AFMC and governments are talking about the way to develop, introduce and sustain this curriculum in the future. The process to do so needs to be collaborative and needs to recognize the true partnership that is required to move forward effectively.

Recently, I listened to a presentation encouraging all of us to make explicit in our standards (CACMS undergraduate standards or RCPSC and CFPC postgraduate standards) the expectation of the educational process to address Aboriginal health needs through the learning process. I think this is an idea worth pursuing.

I believe that an extremely important measure of our success as socially accountable medical schools will be to develop a vibrant and adequate medical school population of Aboriginal physicians, as well as a curriculum that addresses the specific health needs of the diversity of our Aboriginal communities. I look forward to working with many of you on this essential task.

Visit http://www.afmc.ca/pages/articles_social_accountability.html
to read this article:

Honouring the Social Contract – Medical Schools Take Social Responsibility Seriously

by Sarita Verma Associate Dean, PGME,
University of Toronto

University of Toronto Bulletin,
November 14, 2005

Réflexions (suite de la page 3)

la cause. Des stratégies visant à accroître le nombre d'inscriptions d'étudiants en médecine autochtones doivent être élaborées, mises en œuvre et constamment améliorées.

Le travail important visant à augmenter le nombre d'étudiants autochtones dans les facultés de médecine ne fait que commencer. Nous devons mettre sur pied un processus durable visant le partage de renseignements, la collecte de statistiques, l'établissement de liens avec des collectivités autochtones, l'établissement de méthodes innovatrices afin d'encourager un nombre accru d'étudiants autochtones à choisir la médecine et de les appuyer de façons créatives durant leur formation.

La deuxième priorité de l'AFMC, des facultés de médecine et des collectivités autochtones consiste à établir un programme d'études à la fois pour les étudiants en médecine de premier cycle et pour plusieurs de nos programmes de formation post-doctorale. Ce programme doit traiter des besoins en santé des Autochtones d'une manière appropriée sur le plan culturel. Les médecins autochtones, les autres organisations autochtones, l'AFMC et les gouvernements étudient les moyens d'élaborer, de présenter et de poursuivre ce programme d'études dans le futur. Le processus dans le cadre duquel s'inscrira cette démarche se doit d'être collaboratif et de reconnaître le véritable partenariat requis pour nous permettre d'aller de l'avant efficacement.

J'ai récemment assisté à une présentation où nous étions tous encouragés à énoncer explicitement dans nos normes (normes du CAFMC relatives aux programmes de premier cycle ou normes du CRMCC ou du CMFC relatives aux programmes de niveau post-doctoral) l'attente voulant que le processus éducatif doive traiter des besoins en santé des Autochtones dans le cadre du processus d'apprentissage. Je crois qu'il s'agit d'une idée méritant d'être approfondie.

Je crois qu'une des mesures extrêmement importantes de notre succès en tant que facultés de médecine responsables sur le plan social consistera à former une population vivante et compétente de médecins autochtones dans les facultés de médecine de même qu'à élaborer un programme d'études traitant des besoins en santé précis des collectivités autochtones diverses. Je me réjouis de travailler avec plusieurs d'entre vous à cette tâche essentielle.

New Dean Appointed in Medicine at University of Toronto

Professor Catharine Whiteside has been named the new Dean of the Faculty of Medicine. Dr. Whiteside became Interim Dean of the Faculty of Medicine on June 16, 2005. A graduate of U of T's Faculty of Medicine, she completed RCPSC postgraduate training in internal medicine and nephrology.

Following clinical training, she obtained her PhD from U of T's Institute of Medical Science and joined the Department of Medicine in 1985 as a clinician-scientist. Her field of study involves cellular mechanisms of kidney disease with a particular interest in the study of diabetic nephropathy.

From 1993 to 1999, Dr. Whiteside was the graduate co-ordinator of the Institute of Medical Science, which is the largest graduate unit in the Faculty of Medicine and serves the clinical departments. She directed the clinician-scientist training program in the Department of Medicine from 1997 to 2002. In 2000, she became Associate Dean (Graduate and Interfaculty Affairs), overseeing the graduate and second-entry allied health academic programs as well as the MD/PhD program.

Launch at 2006 Medical Education Conference (London ON)

A Faculty Development Program for Teachers of International Medical Graduates (IMGs)

by Allyn Walsh, McMaster University

The Faculty Development Program

Over the past few years, educational programs across the country have been increasingly active in providing retraining and re-entry positions for the many internationally educated physicians already living in Canada. Because programs, IMGs, and teachers themselves have identified a need for teaching tools and skills for teachers focused on the needs of international graduates, an AFMC initiative has produced a Faculty Development Program for Teachers of International Medical Graduates, funded by Health Canada, under the leadership of Drs. Yvonne Steinert and Allyn Walsh.

This program, part of a larger project as described in the December 2004 issue of Forum, will be officially launched at the AFMC-CAME-CFPC-MCC-RCPSC 2006 Medical Education Conference in London, Ontario this Spring. Those attending the meeting will have an opportunity to see and review all of the program materials just before they will be sent to faculties of medicine across the country. Also, two of the conference workshops feature the "Working with Internationally Educated Health Care Professionals: Educating for Cultural Awareness" module (W.1) and the "Orienting Teachers and International Medical Graduates: Understanding the IMG World; Understanding the Canadian Health Care System" (W.8). They will be available in both English and French.

The Faculty Development Program consists of a series of easy-to-use modules on six different topics, each containing a pertinent literature review, suggestions for effective teaching, and detailed directions for mounting faculty development workshops and activities. Educational tools and materials, including PowerPoint slides and DVDs, are also included, as are faculty development guidelines for conducting site-specific activities. Modules can be used independently of one another; however, they are also designed to fit together into an overall ongoing faculty development program. While the materials are designed to be implemented with a group of teachers, instructions for using them in independent study by a single teacher are also included.

The Modules

Included in the program are two large modules, designed to provide the necessary basics to all teachers of IMGs:

Educating For Cultural Awareness

The focus of *Educating for Cultural Awareness* is to facilitate the teaching of those working with internationally educated health care professionals through enhancing cultural awareness and responsiveness. (Authors: Patricia Thille MA and Blye Frank PhD, Dalhousie University)

Orienting Teachers and IMGs

This module consists of two sections. The first section, *Orienting Teachers: Understanding the IMGs' World*, focuses on developing an understanding of the IMG as a learner and as a physician. The second section, *Orienting IMGs: Understand-*

ing the Canadian Health Care System and Learning Environment, highlights the features of the Canadian system that may differ from the IMGs' previous learning and medical environments. (Authors: Heather Armson MD and Rod Crutcher MD, University of Calgary)

There are also four other modules that comprise a Faculty Development "Toolbox" focused on specific teaching skills:

Working with IMGs: Assessing Learner Needs and Designing Individually Tailored Teaching Programs

This module presents a general overview to approaching the diverse learning needs of individual IMG learners and ways in which to devise individualized learning plans. (Authors: Allyn Walsh MD, McMaster University and Yvonne Steinert PhD, McGill University)

Working with IMGs: Delivering Effective Feedback

This module is designed to provide concepts and tools to help teachers take the specific needs of IMG learners into account when providing feedback. (Author: Allyn Walsh MD, McMaster University)

Working with IMGs: Patient-Centred Care and Communication

The purpose of this module is to provide teachers with an overview of key learning issues identified for IMGs pertaining to the development of effective communication skills in the Canadian context. (Author: Nancy Fowler MD, McMaster University)

Working with IMGs: Untangling the Web of Clinical Skills Assessment

This module addresses selected clinical skills that are frequently noted as posing difficulties for IMGs. They include the physical examination, evidence-based medicine and literature searching, and medical literacy. (Author: Lynn Russell MD, University of Toronto)

The Bottom Line

This Faculty Development Program for Teachers of IMGs provides materials in such a way that educational programs will be able to mount successful faculty development activities for their teachers. Indeed, although the program is designed to enhance the teaching of IMGs, the teaching of all learners is likely to benefit.

All of the materials in the program will be on display and available for review at the 2006 Medical Education Conference. Copies will be sent to each faculty of medicine and will also be available on the AFMC website, but for a "sneak preview", check out the display on the second floor of the London Convention Centre.

ANNOUNCEMENTS

ANNONCES

*Memorial University of
Newfoundland*

Dr. Jennifer Connor's major research interests and experience are in the area of communications. In the Division of Community Health and Humanities she will be developing graduate-level courses on biomedical communication, looking mainly at the larger theoretical issues in this area so students can apply rhetorical analysis to a document and their own writing.

Dr. Marshall Godwin has returned to the Faculty of Medicine as Director of the new Primary Healthcare Research Unit. He has brought one research project with him on an automated blood pressure machine to be used in doctors' offices to avoid inaccurate blood pressure readings. This study will look at the use of the machine in clinical patient care.

Dr. Sue Moore is expanding her research interests in her new position as a faculty member. She is already well-known for receiving the Governor General's Gold Medal at the 2004 Spring convocation for her master's thesis on Bardet Biedl Syndrome.

Dr. Tim Strand did his undergraduate and medical degrees at the University of Alberta, graduating in 1977. Following his residency at MUN, he worked for a year then spent a year at the University of Calgary for specialized training in urogynecology and pelvic floor reconstruction as well as laparoscopic gynecology. He returns to MUN to be in charge of the second-year course for medical students.

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The Resource Group on Medical Informatics *Invitation to Open House and Cocktail Reception Events* at the 2006 Medical Education Conference (London ON), Saturday, April 29, 2006

It all began more than ten years ago when a determined group of visionary educators, led by Dr. David Fleiszer, foresaw opportunities to enhance medical education in Canada through the emerging field of medical informatics. At first, these pioneers — including Dr. Lawrence Spero, Mr. Marc Broudo, and others — gathered as an informal working group, developed innovative e-learning solutions, and gradually built awareness among their AFMC colleagues. Their efforts led to the creation in 2000 of the Resource Group on Medical Informatics, with a mandate to encourage the sharing of ideas and resources and to promote collaborative projects in medical informatics among Canadian medical schools. Dr. Fleiszer, with invaluable assistance from Ms. Nancy Posel, continued leading the group as Chair of the Resource Group and was recognized for his contributions with the AFMC's John Ruedy Award for Innovation in Medical Education in 2005. Meanwhile, in 2004, Mr. Wes Robertson formed the vital Information Technology (IT) subgroup to address the growing importance of a solid IT infrastructure and strategy to support, not only medical informatics initiatives, but also the broader educational mission at each medical school.

Initial successes by the Resource Group include the creation of the AFMC's digital repository for shareable multimedia learning objects (www.healthlibrary.ca), the implementation of e-curriculum initiatives at several schools, and publications in *Academic Medicine*.

The Resource Group's annual events have become a highlight for many AFMC participants. Aside from the usual business meetings, the Resource Group also hosts an Open House event, interactive exhibits, and poster displays for all interested faculty and students. For example, last year's Open House included presentations on the history of medical informatics in Canada, administrative database solutions, collaborative e-curriculum projects, open-source & open-standard e-learning solutions, shareable multimedia learning objects, interactive online cases, and digital repositories.

At this year's upcoming 2006 Medical Education Conference (London ON) the Resource Group will again feature an Open House on the Saturday (April 29th) morning at 8:30 am, where various schools will present their latest innovations, experiences, and visions in medical informatics. A detailed list of the Open House's program will be posted shortly on the AFMC website. There will also be a Cocktail Reception on the Saturday afternoon at 5:00 pm where visitors can view posters and desktop demonstrations or consult with medical informatics experts from across Canada. All conference participants are welcome at these two events.

The future promises more exciting innovations from the world of medical informatics to enhance learning and teaching through adult learning principles. The momentum for further innovations and collaboration among Canadian medical schools is now unstoppable, thanks to the groundbreaking work of our mentors and the emergence of a new generation of innovative educators.

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McGill University

Dr. Ann Macaulay has been elected to the National Academy of Sciences, one of the most prestigious scientific awards in the world. This election recognizes her unique work in preventing diabetes, her outstanding research and her scholarly activities.

University of Ottawa

Dr. Robert Swenson, Associate Head of Psychiatry and Director of Outpatient Psychiatry Services at the Ottawa Hospital, has won the Canadian Psychiatric Association C.A. Roberts award for clinical leadership.

University of Toronto

Professor Donna Reece of Medicine is one of this year's prestigious Gerald Kirsh Humanitarian Award recipients. The awards honour Princess Margaret Hospital staff who demonstrate compassionate care. Individuals are nominated by patients and their families and selected by a group of peers at the hospital.

Professor Jack Tu of Health Policy, Management and Evaluation is the leader of the Canadian cardiovascular outcomes research team that received the Canadian Institutes of Health Research Knowledge Translation Award, honouring teams or organizations that make an outstanding contribution to the health of Canadians or to the health system through exemplary knowledge translation.

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Educating Future Physicians in Palliative and End-of-Life Care (EFPPEC)

by Louise Hanvey, Project Manager, EFPPEC

EFPPEC is a project of AFMC in collaboration with the Canadian Hospice Palliative Care Association. Local Leaders are working with teams in all seventeen faculties of medicine to address palliative and end-of-life care issues in their curricula. EFPPEC began in February of 2004 and in 2005/06, the project has been involved in a number of important activities.

EFPPEC Symposia

In 2005 EFPPEC held its first educational Symposium. It was attended by over 70 medical educators and was a resounding success. EFPPEC's second Symposium is being held in London, Ontario — April 28th to 30th, 2006 — in conjunction with the 2006 Medical Education Conference (AFMC/CAME/CFPC/MCC/RCPSC). This year's Symposium — Partnerships for Improving Palliative and End-of-Life Care Education — will focus on interprofessional education and will bring together people from a number of professions to discuss education in palliative and end-of-life care. Key note speakers include Dr. David Weissman, Dr. Pippa Hall, Michael Aherne and Dr. Glen Regehr. The program will address issues in integrating palliative and end-of-life care into the curriculum; opportunities and challenges in interprofessional end-of-life care education; on-line learning; and student and program evaluation. There will be ample opportunity for Local Teams to be involved in the program through papers, workshops and posters. EFPPEC has some funds to provide travel subsidies for participants, and we are encouraging faculties to support their Local Leaders' and team members' attendance.

Competencies and Curriculum

Last year, EFPPEC achieved consensus on competencies in palliative and end-of-life care for undergraduate medical education. These competencies are being used by Local EFPPEC Teams to integrate palliative and end-of-life care into their curricula. They are found on the EFPPEC website — www.efppec.ca. At the request of the Local Teams, a

working group has been formed to develop undergraduate curriculum in palliative and end-of-life care that could be utilized by the teams, based on these competencies. This working group consists of representatives from two provincial networks — in Ontario, Ontario Palliative Undergraduate Network (OPUN) and Québec, Réseau universitaire Québécois en soins palliatifs (RUQSP). The draft curriculum is expected to be shared with the EFPPEC Symposium participants.

This year, a survey to achieve consensus on competencies for postgraduate family medicine education was conducted in cooperation with the College of Family Physicians of Canada. Consensus has been reached on these competencies. We are now working with the CFPC and Family Medicine Program Directors to promote these competencies for family medicine residents. A national collaboration is planned to determine how the teaching of the competencies in end-of-life care can be incorporated into family medicine training in a way that respects the different cultures of each family medicine program in our system.

Learning Commons

On the recommendation of last year's Symposium participants, EFPPEC has moved forward to develop a Learning Commons. With the assistance of the Pallium Project, this Commons provides an on-line resource centre for teaching and learning resources in palliative and end-of-life care. The Commons will enable Local Teams to share their resources, and benefit from those of others. It will ultimately provide the opportunity for collaborative resource development. The site is currently being tested and will be fully operational later in the Spring.

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Professor Ian Wanless of Laboratory Medicine and Pathobiology was the 2006 winner of the Canadian Liver Foundation Gold Medal Award, established in 1983 to recognize doctors and scientists who have made a significant contribution to moving the field of liver research forward.

Northern Ontario School of Medicine

Drs. John Augustine and John Whitfield have been named two of Lakehead University's "40 Northern Lights" at the school's 40th anniversary celebration honouring men and women who have made a difference to the university's growth and development. Both worked tirelessly in advocating for the creation of the Northern Ontario School of Medicine.

University of Alberta

Dr. Christopher de Gara has been appointed Associate Dean of Continuous Professional Learning. He did most of his training in Britain, worked for some years at McMaster and has been at the University of Alberta for the last 8 years. He is a general surgeon with an interest in surgical oncology and has been the Director of the Division of General Surgery and the Director of the Department of Surgical Oncology in Edmonton.

University of British Columbia

Dr. Joanna Bates has been appointed Senior Associate Dean, Education for a five year term. She is well-known to the Faculty of Medicine in her previous role as

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Two Canadian MDs Make Exclusive List

Two Canadians are among 65 physicians cited in a new World Medical Association (WMA) book, *Caring Physicians of the World*.

Dr. May Cohen, who played a key role in advancing the status of Canada's women patients and MDs, and **Dr. John Armstrong**, noted for his work with Aboriginal Canadians, were nominated by the CMA (one of the 80 national associations that form the WMA).

The book praises Cohen, a family physician from McMaster University, for the work as a mentor and role model. With women now outnumbering men at medical schools, she says today's atmosphere is much different from the one she encountered as an undergraduate 50 years ago.

Armstrong, a Winnipeg paediatrician from the University of Manitoba and a past president of the CMA, said he was "humbled" by his inclusion. "One of the President's duties is to present the CMA's senior memberships, and I was overawed by what those doctors had accomplished. That helps me to keep things in perspective."

UBC Continuing Medical Education Announces Name Change

The UBC Division of Continuing Medical Education is pleased to announce it has changed the name to the Division of Continuing Professional Development and Knowledge Translation (CPD-KT). Over the past 10 years, CPD-KT has evolved into a multi-faceted organization offering a broad range of activities to support the learning of physicians in professional practice. Current CPD-KT initiatives include a wide range of educational programs; educational research; and technology research and development.

The name change better reflects the scope of activities the division undertakes and recognizes the many roles physicians need to assume such as medical expert, communicator, collaborator, researcher, and life long learner; all of which are better described within the auspices of continuing professional development. It also acknowledges the importance of the knowledge translation (KT) process. As a research intensive university, UBC has a mandate and a responsibility to focus on the timely uptake of the latest health research in day-to-day medical practice.

Contributions to **FORUM** in either English or French are welcomed.

Les contributions à cette publication sont les bienvenues et peuvent être rédigées en français ou en anglais.

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Senior Associate Dean, Undergraduate Medical Education. The move to this more strategic portfolio will ensure that health professional education within the faculty is considered across professions and as a continuum of learning.

Dr. Alison Buchan has been appointed Senior Associate Dean, Research, for a three year term until June 30, 2008. Her previous role was Associate Dean Research and she is a Professor in the Department of Medicine and the Department of Cellular and Physiological Sciences. The creation of this new position reflects the designation of research as one of the five key portfolios constructed to support the activities of our faculty.

Dr. Susan Porter has been appointed Assistant Dean, Graduate and Postdoctoral Education. She joined UBC in 1991 as an Assistant Professor in the Department of Pathology and Laboratory Medicine and developed an MRC-funded research program directed at understanding the role of chromatin structure and nuclear location in the developmental and cell type specific control of gene expression in melanocytes and neutrophils.

Dr. Dorothy Shaw has been appointed Senior Associate Dean, Faculty Affairs for a five year term. She is a Clinical Professor in the Departments of Obstetrics and Gynecology and Medical Genetics, and has served as Associate Dean, Equity since 2000. She has recently completed a one year term as the Acting Associate Vice-President of Equity for UBC. Dr. Shaw is also the President Elect of the International Federation of Gynecology and Obstetrics (FIGO) and will become President in 2006, the first woman to hold this office.

COMING EVENTS

À VENIR

McMaster University

The following interdisciplinary Workshops/Short Sessions/Seminars provide an excellent forum for scholarly networking and are beneficial to both novice and experienced faculty and educators. Events will be held in the Faculty of Health Sciences, McMaster University (MUMC), or Michael G. DeGroote Centre for Learning & Discovery (location will be confirmed upon registration). These academic events are approved for study credits by the McMaster University Continuing Education Program, Faculty of Health Sciences; the College of Family Physicians of Canada; the Royal College of Physicians and Surgeons of Canada and the American Medical Association PRA Category 1. Please see FACULTY DEVELOPMENT website www.fhs.mcmaster.ca/facdev (re: online registration & additional information).

REGISTER EARLY TO AVOID DISAPPOINTMENT.

March 24, 2006 (08:45–12:00)
Effective Meeting Management

March 31, 2006 (08:45–12:00)
Getting Yourself Promoted

April 11, 2006 (12:45–16:00)
Tutorial McBloopers (Tips for Tutorials Gone Wrong)

April 21, 2006 (08:45–12:00)
Teaching on the Fly

May 11, 2006 (08:45–16:30)
Problem Based Learning in Small Groups

May 12, 2006 (08:45–16:00)
Role of the Tutor in Small Group Learning

May 26, 2006 (08:45–11:00)
All Work and No Play? Time for 'Time Management'

June 5–June 7, 2006 (08:45–17:00 approximately with last day ending at 13:30)
Visitors' Workshop (An Overview)

For more information, please contact:

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Program Administrator,
Program for Faculty Development
Tel: (905) 525-9140 x. 22954
E-mail: facdev@gmail.com
www.fhs.mcmaster.ca/facdev*

COMING EVENTS

À VENIR

University of Saskatchewan

March 17 & 18, 2006

The 3rd Annual Peter & Anna
Zbeetnoff Memorial
DRUG THERAPY DECISION
MAKING CONFERENCE
Hilton Garden Inn
(formerly Quality Hotel)
Saskatoon, Saskatchewan

April 29, 2006

26th Annual SASKATCHEWAN
PSYCHIATRIC ASSOCIATION*
Continuing Education Conference
Regina, Saskatchewan

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VISIT THE AFMC WEB-SITE

(www.afmc.ca/pages/articles_links.html)

FOR ACCESS TO THE FOLLOWING INFORMATION

**Collaboration Between Family Physicians And Medical Specialists
*The Gulf Between Preferred and Actual Practice***

Study on the perceptions of medical residents and their educators of the roles to be assumed by future physicians in collaborative practice and their evaluation of future physicians' preparedness for these roles
Marie-Dominique Beaulieu, Louise Samson, Guy Rocher, Marc Rioux,
Laurier Boucher, Université de Montréal

CANADIAN MEDICAL ASSOCIATION JOURNAL

Are Applicants to Canadian Residency Programs Rejected Because of Their Sex?

December 6, 2005

Mark O. Baerlocher, Allan S. Detsky, University of Toronto

The Use of Provisionally Licensed International Medical Graduates in Canada

November 22, 2005

Rick Audas, Amanda Ross and David Vardy, Memorial University of Newfoundland

MEDICAL EDUCATION

Survey on Aboriginal Issues Within Canadian Medical Programmes

November 2005

Adam Spencer, Todd Young, Sarah Williams, Doris Yan and Susan Horsfall, McMaster University

A Practical Guide to Assessing Clinical Decision-Making Skills Using the Key Features Approach

December 2005

Elizabeth A. Farmer, Royal Australian College of General Practitioners and Gordon Page, University of British Columbia

Educating Doctors in France and Canada: Are the Differences Based on Evidence or History

December 2005

Christophe Segouin, Université Denis Diderot, France and Brian Hodges, University of Toronto

Analysing the Concept of Context in Medical Education

December 2005

Franciska Koens, UMC Utrecht, The Netherlands; Karen V. Mann, Dalhousie University; Eugène J.F.M. Custers and Olle T.J. Ten Cate, UMC Utrecht, The Netherlands