OUR VISION
The Department of Family Medicine at Queen's University is a leader, striving for excellence in patient-centred health care, education, and research.
**RESEARCH**

1,796,235 Patients in the CPCSSN Database

1,293 Primary care physicians recruited to CPCSSN

178 Primary Care Research Day attendees

53 Original resident research projects (16 in 2013)

47 Conference presentations

39 Peer-reviewed publications

7 Research initiation and community projects

6 Ongoing research portfolios

**EDUCATION**

Kingston-Thousand Islands
- 817 applications
- 508 interviewed
- 463 ranked
- 35 residents matched (quota)

Belleville-Quinte
- 479 applications
- 302 interviewed
- 282 ranked
- 6 residents matched (quota)

Peterborough-Kawartha
- 523 applications
- 359 interviewed
- 277 ranked
- 6 residents matched (quota)

Bowmanville-Oshawa-Lakeridge
- 522 applications
- 362 interviewed
- 303 ranked
- 8 residents matched (quota)

International Medical Graduates (IMGs)
- 971 applications
- 371 interviewed
- 91 ranked
- 10 residents matched (quota)

Public Health and Preventive Medicine
- 18 applications
- 15 interviewed
- 13 ranked
- 2 residents matched (quota)

**CLINICAL SERVICES (QFHT)**

- **Patient Enrolment**
  - 11,972 Belleville
  - 16,572 Kingston
  - 10,735 March 2017
  - 15,597 March 2017

- **After Hours Clinic (AHC) Kingston**
  - 2 New physician clinics added in 2017 (booked appointments)

- **Group Programs for Patients**
  - 3 Belleville
  - 5 Kingston
MESSAGE FROM
THE DEPARTMENT HEAD

In my first year as head of the Queen’s Department of Family Medicine, it is with great pride that I share our 2017-2018 annual report. It has been a dynamic year with much to celebrate, attributed to the dedication of all our team members, who individually and collectively contribute to our success.

I’d like to thank three retiring faculty members for their unyielding contributions to our department and to family medicine. Dr. Ian Casson’s devotion to teaching, collaboration, and advancing the care of patients with intellectual and developmental disabilities has set the groundwork for others to follow; Dr. Jane Griffiths’ measured, thoughtful approach to resident assessment and evaluation has had national impact; and Dr. Ruth Wilson has mentored professionalism, educated generously, and advanced health care for patients here and globally. We wish them all very well.

A highlight of the year was the recommendation for full accreditation for our residency (Family Medicine and Enhanced Skills) and Public Health and Preventive Medicine (PHPM) programs. Both the Canadian Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada were highly complimentary in their comments, which is testament to the tireless work of Postgraduate Education Program Director Dr. Karen Schultz, Enhanced Skills Program Director Dr. Geoff Hodgetts, and PHPM Program Director Dr. Kieran Moore, and their respective teams.

In our Undergraduate Program, Director Dr. Shayna Watson continues to demonstrate unwavering dedication to Queen’s medical students. Our valued faculty, community preceptors, and residents all contribute significantly to the program’s success.

To meet the needs of our growing and diverse patient population, the Queen’s Family Health Team (QFHT) has launched a number of new group programs, and patients can now schedule visits with their doctor at the QFHT After Hours Clinic. Under the leadership of Dr. Karen Hall Barber and Clinic Manager Diane Cross, such progression speaks to our clinic team’s commitment to patient-centred care.

As our retiring faculty members leave us, we are well underway with our faculty renewal process. Two new full-time faculty members (Dr. Imaan Bayoumi and Dr. Tara McGregor) have already arrived, and a number of others will join us early in the next academic year. This is giving us the opportunity to embark upon a multi-pronged re-organization of our physician clinics, and I have every confidence in our faculty, nursing team, and administrative staff to ensure a smooth transition for our patients over the coming year.

At our Centre for Studies in Primary Care (CSPC), we bid adieu to Dr. Richard Birtwhistle, who has been at the centre’s helm since 2007, and welcomed Dr. Susan Phillips as incoming Research Director. A Queen’s faculty member since 1994, Dr. Phillips is a professor in Family Medicine and Public Health Sciences with expertise in epidemiology, gender, equity, and women’s health. We look forward to supporting the CSPC under Dr. Phillips’ guidance as new research areas are explored and faculty members continue to be supported in their pursuit of knowledge in family medicine. We also welcomed Dr. Eva Purkey as the department’s Associate Director of Research. A faculty member since 2014, Dr. Purkey brings expertise in the health of vulnerable populations and global health.

Looking ahead, work begins on the development of the department’s 2018-2022 strategic plan. As we celebrate the many successes achieved in our 2012-2017 strategic plan, we will identify new and continued challenges in education; research; patient care and community health; and partnerships and programming. Throughout this process, we will engage the participation of our faculty and staff members, whose valuable insights will inform our priorities over the coming years.

This is an exciting time at the Department of Family Medicine. I look forward to everyone’s involvement as we continue to further strengthen the provincial and national prominence of our academic research, educational programs, and clinical initiatives.
ACCOLADES

AWARDS AND ACCOMPLISHMENTS

Dr. David Barber has been elected as the Ontario Medical Association’s (OMA’s) representative for District 7 of the Section on General and Family Practice (SGFP). The SGFP represents more than 13,000 practising general physicians and family doctors in the province, and is the OMA’s largest clinical section, comprising almost one-half of the total membership.

Dr. Ian Casson, a leader in the department’s research, education, and clinical work with adults with intellectual and developmental disabilities (IDD), received the Queen’s Human Rights and Equity Offices’ 2017 Steve Cutway Accessibility Award. Established in 2008 to honour long-serving Queen’s employee Steve Cutway, the award acknowledges the efforts of faculty, staff, and students who demonstrate creativity, enthusiasm, innovation, and commitment to creating a learning and work environment in which persons with disabilities at Queen’s enjoy full participation.

Dr. Catherine Donnelly, occupational therapist, Queen’s Family Health Team, Belleville, earned Queen’s 2017 Chancellor A. Charles Baillie Teaching Award. This award recognizes undergraduate or graduate teaching or professional teaching that has had an outstanding influence on the quality of the university’s student learning.

Dr. Michael Green is nominated principal investigator for a $2 million grant that will enable him to continue to study the state of primary health-care services in Ontario. The INSPIRE-PHC-2 (Innovations Strengthening Primary Healthcare through Research-Phase 2) program was awarded through the Ministry of Health and Long-Term Care’s Health System Research Fund (HSRF). Dr. Green and his team will further evaluate Ontario’s primary health-care services and make recommendations to the ministry to bridge identified gaps.

As senior adjunct scientist for the Institute for Clinical Evaluative Sciences (ICES), Dr. Green also authored a geographic analysis that demonstrates an uneven distribution of family doctors across the province that is impacting Ontarians’ access to health care. Geographic Variation in the Supply and Distribution of Comprehensive Primary Care Physicians in Ontario provides valuable insight into the availability of and access to primary care physicians relative to population numbers and needs in Ontario.

Dr. Susan Phillips was appointed director of the department’s Centre for Studies in Primary Care (CSPC) effective November 1, 2017, to June 30, 2020. Dr. Phillips, who joined the department as a faculty member in 1994, will be responsible for shaping the centre’s vision and direction.

Dr. Eva Purkey, Program Director, Global Health, was appointed the department’s associate research director. In this role, Dr. Purkey will support resident research education as well as the activities of Dr. Susan Phillips, director of the department’s Centre for Studies in Primary Care.

Dr. Purkey was also named a recipient of a Sadok Besrour Grant for Global Health Projects, supported by the Canadian Family Physicians of Canada’s (CFPC’s) Foundation for Advancing Family Medicine and the Sadok Besrour Foundation. The College bestows two such grants of $2,500 each year. The grant will support Dr. Purkey’s work developing research capacity among health workers on the Thai-Burmese border.

Dr. Karen Schultz, Program Director, Postgraduate Education, was named 2017 recipient of the CFPC’s Jim Ruderman Academic Family Medicine Leadership Award, which recognizes outstanding family physician academics who embody qualities including wisdom, equanimity, compassion, and the capacity to attract and mentor talented individuals and forge them into a dynamic and productive team.
**CFPC Resident/Student Awards**

**Resident Awards**
(One resident from each family medicine program across Canada is selected for each award each year.)

- **Dr. Benjamin Frid** (KTI): Family Medicine Resident Leadership Award
- **Dr. Maria Merziotis** (KTI; PGY3 Rural Skills): Family Medicine Resident Award for Scholarly Achievement

**Student Awards**
(One medical student from each family medicine program across Canada is selected for each award each year.)

- **Kristen Reipas**: Medical Student Leadership Award
- **Jocelyn Stewart**: Medical Student Scholarship

**OCFP**

Dr. Kathy Barnard-Thompson, a Cobourg-based preceptor for the department’s Kingston site, earned this year’s Ontario College of Family Physicians Regional Family Physician of the Year (Region 6).

**OMA**

Dr. Alex Leung (KTI; PGY3 Emergency Medicine) earned this year’s Ontario Medical Association (OMA) Resident Achievement Award. Awarded each year to one resident from each of Ontario’s six medical schools, it recognizes outstanding contributions to the advancement of postgraduate training.

**PARO**

Dr. Greg Bishop, a preceptor for the department’s Peterborough-Kawartha program and Regional Learner Advocate for the Queen’s School of Medicine, was named recipient of the 2018 Professional Association of Residents of Ontario (PARO) Excellence in Clinical Teaching Award. This award, which acknowledges the essential role good clinical teachers play in the training of new physicians, is presented annually to a preceptor at each of the province’s six medical schools.

**Queen’s FHS Regional Education Awards (2017-2018)**

- **Dr. Cliff Rice**, a family physician in Picton, earned the Queen’s School of Medicine Regional Education 2017 Mentorship Award as a role model in supporting, encouraging, and promoting educational, professional, and personal development to colleagues and learners. **Dr. Christie Freeman**, a dermatologist in Peterborough, earned the 2017 Excellence in Teaching Award, recognizing her significant contributions to advancing teaching and learning at distributed sites.
- **Dr. Greg Bishop**, a preceptor for the department’s Peterborough-Kawartha program and Regional Learner Advocate for the Queen’s School of Medicine, earned the 2018 Excellence in Teaching Award. **Dr. Hanga Agoston**, curriculum lead at the department’s Belleville-Quinte site, earned the 2018 award for Education Development, which recognizes major administrative contributions to education or innovative curriculum development in community sites.

**Queen’s Family Medicine Awards (June 2017)**

**Julie Hodges**, Program Co-ordinator, QBOL site, earned the department’s annual Resident Experience Enhancement Award. This award is given to an allied health or administrative professional who has brought significant enhancement to the residency experience.

**Resident and Preceptor Awards**

- **Dr. Tiffany Chow** (PK); **Dr. Paige Hacking** (KTI; PGY3 Rural Skills); **Dr. Richard Wang** (QBOL); **Dr. Alex Leung** (KTI; PGY3 Emergency Medicine); **Dr. Robin Morin** (BQ); and **Dr. Barbara Tatham** (PGY3 Emergency Medicine): Fred Allan Vokes Memorial Fund Award – Awarded to family medicine residents who, at the end of two or three years in the program, have demonstrated overall excellence and achievement.
- **Dr. Rachel Li** (KTI; PGY3 Rural Skills); **Dr. Robin Morin** (BQ); **Dr. Amanda Murdoch** (PK; PGY3 Rural Skills); and **Dr. Amy Toderian** (QBOL; PGY3 Rural Skills): Sparkly Glue Award – Awarded to a graduating PGY2 resident at each site for acting as a positive influence on resident morale and atmosphere.
- **Dr. Lindsey Griffith** (KTI): Harold Latham Award in Family Medicine – Awarded to a PGY2 resident in family medicine who has completed the best-quality academic project dealing with mental health issues in family medicine.
- **Dr. Tim Heeley-Ray**: Kingston preceptor: Dr. John T. Tweddel Memorial Teaching Award – Awarded to recognize specialty preceptors who exemplify teaching excellence to family medicine residents.
- **Dr. Mike Ward**, research lead, QBOL site, Dr. Donald L. Potvin Memorial Teaching Award
- **Dr. Alanna Durand** (KTI): Janet Sorbie Award in Family Medicine – Awarded to a family medicine resident who has undertaken original research in the field of women’s health, care of the elderly, or palliative care.

**Centre for Studies in Primary Care Resident Awards**

The Centre for Studies in Primary Care hosted its annual Primary Care Research Day on February 22, 2018. The following four residents won Best Academic Research Project:

- **Dr. Hannah Buhariwalla** (Peterborough-Kawartha): Application of the ‘Surprise Question’ to Improve Code Status Discussion and Documentation in Primary Care
- **Drs. Puneet Chawla** (KTI) and **Ashley Epp** (KTI): Loved Ones’ Experiences of a Medically Assisted Death
- **Dr. Farah Pabani** (Belleville-Quinte): Student Self-Assessment of Global Competency Performance on a Clerkship OSCE
- **Dr. Madura Sundareswaran** (Peterborough-Kawartha): Screening for Hepatitis C Among Patients with a Documented History of Intravenous Drug Use: An Evaluation of 2 Primary Care Practices in Peterborough, Ontario
Reflecting on this academic year, it’s been a wonderful example of Queen’s Family Medicine residents readily expanding on an amazing foundation of curriculum and community.

**Resident Resources**

There was a strong focus this year on improving resident-focused resources in order to complement an already outstanding residency experience. The Queen’s Family Medicine Blog was debuted as a central resource for all residents, offering everything from resident lectures to social calendars and available locum positions. As a supplement to the program’s monthly newsletter, the blog has also served as a place to find the most up-to-date resident-related news.

Residents have spoken highly of the program’s website, and analytical data has demonstrated regular usage. The revamped and improved electives database was successfully integrated into One45 evaluations, giving residents invaluable information when choosing the most relevant elective experiences for their education.

**CaRMS**

This is an exceptionally exciting and important time for Queen’s Family Medicine each year, with an incredible amount of involvement from all department members, including residents.

Residents lent a welcoming hand throughout the interviewing process, answering questions in the waiting rooms and showing off our collegial nature at the evening socials. Residents enthusiastically sat on the daily anonymous panels that allowed candidates to ask unfiltered questions to help make the most educated decisions. These contributions clearly had a positive impact on prospective candidates, as the program celebrated filling all available positions in the match’s first iteration.

**Resident Initiatives**

Residents continue to develop novel and self-driven initiatives that work to create a stronger program for all. The survey introduced and distributed to Kingston-Thousand Islands 2016-2017 PGY1 residents at year’s end was extended to all sites. This survey will continue to allow the department to keep its finger on the pulse of residents, and assess what they are doing well and what needs can be effectively addressed.

Resident Teaching Nights continue to be exceptionally well received. At these events, offered semi-monthly, family medicine residents teach medical students approaches to common topics in family medicine in a relaxed, “no pressure” environment. Students have an opportunity to ask the residents questions, and develop informal mentors.
POSTGRADUATE EDUCATION
PGY 1&2

In preparation for Queen’s University’s Postgraduate Medical Education accreditation visits from the College of Family Physicians of Canada (CFPC) and Royal College of Physicians and Surgeons of Canada this year, the Queen’s Family Medicine program carried out an in-depth review of all that has happened since Queen’s last accreditation in 2011.

Accreditation is a critical quality-assurance process that all Canadian residency programs are mandated to participate in on a cyclical basis. The purpose is to ensure that all 17 universities, with their multitude of programs and different strengths and resources, are training their residents to competently and independently care for their patients upon graduation.

This annual report will summarize the program’s significant achievements since 2011. They represent the dedicated work of many, and the support from the department and the university to carry out this work.

Launch of the QBOL Site
The Queen’s Bowmanville-Oshawa-Lakeridge (QBOL) site was launched in 2012 as the program’s fourth site. All four sites – Kingston-Thousand Islands (KTI), Belleville-Quinte (BQ), Peterborough-Kawartha (PK) and QBOL – are robust competency-based programs attracting strong residents, many of whom set up practice in or near their home site communities upon graduation and remain involved with the program as preceptors.

Competency-Based Assessment
Under the very able leadership of Dr. Jane Griffiths, with the technical expertise of Rachelle Porter and the department’s technical support, the program’s Portfolio Assessment Support System (PASS) has grown into a sophisticated system that fully supports residents’ competency development, earning international recognition. The system has two equally important aspects – an electronic component (field notes and the portfolio with its multiple tools) and a mentoring/interpreting component (the very important academic advisors).

Innovative Curriculum Initiatives
Among many innovative curriculum initiatives, a few of the bigger ones – under the able guidance of Drs. Ian Sempowski, Fil Gilic, Brent Wolfrom, Wei-Hsi Pang, and Geoff Hodgetts – have been the introduction of “Boot Camp” or the “Toolkit” weeks to smooth the transition from medical school to residency; Nightmares FM, a layered simulation course to prepare residents for their clinical work with acutely unwell patients; the Wilderness Medicine and Camp Oconto retreats (held alternately each year, in September) to address the important skills of communication, collaboration, leadership, and professionalism; and the Falkland Islands remote family medicine experience.

In addition, there have been initiatives that are a wonderful marriage of clinical and educational developments supporting and bettering each other. These include quality-
improvement projects Dr. Karen Hall Barber and her team oversee, through which residents learn about quality improvement with real-world issues the clinical team identifies, often resulting in outcomes leading to better patient care; clinical work on optimizing and rationalizing opioid prescribing, informing education; Drs. Meg Gemmill and Ian Casson’s intellectual and developmental disabilities work; and Dr. Eva Purkey’s work with Syrian refugees and their families, improving care for both groups and simultaneously educating residents.

In addition, for the last four years the department has supported education through a “Blue Sky Matrix Retreat.” At these events, the department’s educational leaders from all four sites – including faculty and residents – as well as those with expertise in each year’s topic have gathered to think creatively about how to begin or grow an initiative in the education program. The themes for the four retreats have included competency-based medical education; competency decisions; leadership; and, this past year, Indigenous health. From these retreats, projects involving curriculum, assessment, faculty development, and research have been developed, and many of the ideas successfully implemented.

Strong Resident Engagement in the Program

Each year, chief residents are elected at each site and an overall program chief is elected by all. This group and the other resident leaders meet with the program director each month for “chief chats” to bring forward issues and new ideas. The creativity and energy of these resident leaders is inspiring, and very positively impact the program. There is also an opportunity for an interested resident or group of residents to propose an idea to develop an initiative for their colleagues, which, if approved, results in some departmental seed money to support going forward. Ultrasound teaching, Resident Teaching Nights, and Readiness for Advanced
Practice are some of the initiatives that have been very well received and have now become an entrenched part of the program.

Wellness
Wellness and resiliency are necessary, both in training and beyond, for health-care providers to be healthy and to have a sustained, optimal ability to do their work. Dr. Kelly Howse has taken a scholarly, organized approach to identifying residents’ wellness needs, creating an active wellness and resiliency committee and establishing a four-site approach with resident wellness reps at each site and some departmental funding for use for wellness events. The collegial, supportive nature of the residents and program staff also greatly enhances wellness.

Education Research
Through the department’s support in hiring a part-time PhD education researcher to work with faculty and residents interested in medical education research, the number of grants, research projects, academic papers, and national and international presentations has grown exponentially. The cross-pollination of ideas afforded by working with those with different backgrounds and expertise has been very enriching.

The program has been honoured to receive a number of meaningful awards over the last number of years. Among them is the Keith Award, in 2009 and 2014 (coming second in 2012), an award the Society of Rural Physicians of Canada gives to the program with the greatest number of residents practising in a rural
area 10 years after graduation. Having residents feel confident and competent to practise in settings with often limited resources is taken as a good endorsement of the program’s ability to prepare residents to begin independent practice anywhere in Canada.

The program has also received a number of Professional Association of Residents of Ontario (PARO) awards. Residents in all of the hundreds of training programs in Ontario nominate individuals and programs they believe are very supportive of their learning. Jennifer Brierley and Chantal Van Parys, the KTI and PK site co-ordinators, respectively, have been nominated for the PARO Lois Ross award, with Chantal winning in 2015. The program has been nominated for program of the year four times since 2011, winning in 2012 and 2016.

All of these efforts and outcomes would not have been possible without the engagement and hard work of many people. Gratitude is extended to all those in the leadership roles below, knowing there are many others who are also doing incredible work and whose efforts are also greatly appreciated.

All of this work and these successes would not be possible without the dedicated work of the program leads in each of the sites, the site directors, and the education staff:

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<th>Department Head</th>
<th>Director of Education</th>
<th>Regional Education Co-ordinator</th>
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<td>Dr. Glenn Brown/ Dr. Michael Green</td>
<td>Dr. Geoff Hodgetts</td>
<td>Dr. Jeff Sloan</td>
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<td>Queen’s Family Medicine Program BQ PK QBOL KTI</td>
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<td>Directors</td>
<td>Dr. Karen Schultz</td>
<td>Dr. Wei-Hsi Pang</td>
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<td>Dr. Nadia Knarr</td>
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<td>Curriculum</td>
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<td>Dr. Hanga Agoston</td>
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<td>Dr. Seema Jain</td>
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<td>Faculty Development</td>
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<td>Dr. Michael Ward</td>
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<td>Dr. Nadia Knarr</td>
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<td>Resident Chief</td>
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<td>Dr. Sina Sajied</td>
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<td>Dr. Samantha Graitson</td>
<td>Dr. Ian Casson</td>
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<td>Administration</td>
<td>Judy Sakell</td>
<td>Dr. James Burrows</td>
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<td>Manager of Education</td>
<td>Dr. Christine Prudhoe</td>
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<td>Jessica Hughson</td>
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<td>Chantal Van Parys</td>
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<td>Jennifer Wells</td>
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PGY3 Resident Chief: Dr. Sandra Huynh  •  PHPM Resident Chiefs: Dr. Michelle Foote and Dr. Golden Gao

It has been an honour to be the program director of this amazing program for the last seven years. With the national introduction of the CFPC’s competency-based Triple C curriculum in 2010, the last number of years have been a time of growth and creativity, and it has been a real privilege to work with the program’s preceptors, faculty, and residents as Queen’s Family Medicine has embraced competency-based medical education.

Following accreditation, Dr. Brent Wolf from assumed the role of program director after a number of years as curriculum director. With the energy, ideas, and organizational skills he brings to this role, the program will be in great hands.
The Queen’s Public Health and Preventive Medicine (PHPM) program continued to innovate by providing a new two-day public health training boot camp in August 2017, as well as further integration of population-based emergency simulations into the residency training. Senior resident Dr. Emily Groot, in partnership with Public Health Ontario, created the boot camp. These two teaching methods – which residents have evaluated highly – are critical as the program moves to competency-based medical education.

The PHPM Residency Program Committee continues to meet regularly to assist with the program’s development, operation, oversight, and planning. Appreciation is extended to committee members Dr. Geoffrey Hodgetts and Dr. David Walker (Queen’s University); Dr. Ian Gemmill and Dr. Fareen Karachiwalla (KFL&A Public Health); Dr. Howard Njoo (Public Health Agency of Canada); Dr. Rosana Salvaterra (Peterborough County-City Health Unit); and Dr. Paula Stewart (Leeds, Grenville & Lanark District Health Unit).

The committee met on four occasions during the year. Members’ feedback and input has been instrumental in improving the program, and their advice ensures the program continuously strives to improve and to be a national leader in education. Dr. Gemmill has taken the lead on competency-based medical education and will chair the competency committee.

**Co-Chiefs**

PHPM co-chief residents Dr. Alexa Caturay and Dr. Ethan Toumishey provided excellent leadership and played vital roles in helping with all aspects of the program, including curricula development, academic sessions, the annual retreat, and the CaRMS interviews. They have been tireless in their efforts to improve the residency program and to unite the program’s junior and senior residents.
2017 Annual Resident Retreat
The PHPM program’s annual retreat was held in Picton on September 18 and 19, 2017. The curriculum included the following themes:

- Population-Based Emergency Simulation Training with Dr. Karachiwalla and Dr. Harvey
- Review of History and Future of Public Health in Ontario with Dr. George Passut
- Aboriginal Health Review and Discussion with Dr. Rosanna Salvaterra and Dr. Karachiwalla

PHPM National Review Course
The Queen’s Department of Family Medicine and the Public Health and Preventive Medicine residency Program hosted the third national public health and preventive medicine review course October 16 to 20, 2017, at Kingston’s Donald Gordon Centre, and all Queen’s PHPM residents attended. This course was also offered to all residents from other Royal College training programs in public health and preventive medicine. In total, more than 40 residents attended from across Canada. This year, optional evening events were added, including a team-based simulation of a pandemic event competition and oral examination preparation.

Course evaluations continue to be very positive, and the fourth annual course has been scheduled for October 2018.

CaRMS Match Results
For the fifth consecutive year, the PHPM program filled both positions in the first iteration. The program has a total of 11 residents, which is beyond its normal capacity of 10 residents.

2017 RESIDENT RESEARCH AND SCHOLARLY ACTIVITY

Samantha Buttemer

Online Module: Acute Opioid Prescribing: Information, guidelines and best practices. Continuing Professional Development, Educational Programs & Opportunities, Queen’s University

Hugh Guan
Edginton S, Guan TH, Evans G, Srivastava S. Human granulocytic anaplasmosis acquired from a blacklegged tick in Ontario. CMAJ. In press

Piotr Oglaza

Ethan Toumishey
Presentation: Mixed Methods Assessment of the Implementation of the SHIIP tool amongst Family Physicians. Dr. Ethan Toumishey, Dr. Ruth Wilson, Dr. Fareen Karachiwalla, Dr. Kieran Moore. Presented at Queen’s Primary Care Research Day. February 22, 2018

Jenna Webber
Presentations: Lumps and bumps and blisters…oh my! Common perineal lumps & bumps. Presented at Queen’s University to Family Medicine Residents, Kingston, ON. Dec 2017
LGBTQ+ Health in The Americas. Online webinar presented to medical students in 28 countries across North, South and Central America. Nov 2017
Machismo in The Americas: Breaking the Cycle. Online webinar presented to medical students in 28 countries across North, South and Central America. Aug 2017
Research: Differences in response to treatment between PCOS and non-PCOS transgender men who initiate testosterone therapy. Principal Investigator. Dec 2017 – present
Preparedness for and perceptions of person-down care scenarios at the Queen’s Family Health Team. Quality improvement project. Member of 5-person investigator team. Aug 2017 – present
Leadership: Regional Assistant for the Americas, Standing Committee on Reproductive & Sexual Health including HIV / AIDS (SCORA). International Federation of Medical Students Associations. Oct 2016 – Nov 2017
The department's Enhanced Skills (ES) programs continue to serve as a drawing card to Queen's Family Medicine (FM), with large numbers of applicants for PGY3 programs in 2017 and again for the 2018 start date. Queen's offers 10 programs – four Category 1 and six Category 2, the new Falkland Islands Scholarship being the most recent addition. Looking at numbers for the current year, of the 63 PGY2s eligible (all four sites) for a PGY3 program, 24 (38 per cent) are doing full or partial years. For 2018, of the 62 eligible, 17 (27 per cent) will be completing some enhanced training.

One of the year's highlights was the College of Family Physicians of Canada's (CFPC's) accreditation survey of ES programs in March 2018. All programs were reviewed in depth using the College's current accreditation standards and methods, with a shadow survey team gathering information to assist the College in its transition to a completely new accreditation cycle and methodology. By the new calendar, Queen's will be surveyed again in eight years. At the verbal exit report, only a few recommendations were made to further strengthen our programs; no major issues were found.

In the application period in fall 2017, another large number of applicants applied for the eight FM-Emergency positions, a trend that is country-wide. It would seem there is a growing trend among medical students to enter family medicine residency with a pre-determined focus to limit practice to the emergency department. This is borne out in the fact that of the 49 incoming PGY1s, 29 have self-declared as intending to pursue emergency medicine as a career.

The applicant pool for FP-Anesthesia (FP-A) and Palliative Care (PC) programs was strong this year, and attracted significant applicant numbers from Queen's and elsewhere. Both domains of practice are in need of more skilled practitioners, and the PC division is actively recruiting to fill vacancies. The latter situation formed part of the selection process this year, the strategy being that it may be more likely to retain someone as a new faculty person if they trained here. It was decided to allocate two positions to this program as part of this strategy for 2018.
The July 2017 entry group was the first year of the separate PC program for both the CFPC and the Royal College of Physicians and Surgeons of Canada (RC) – the CFPC retaining its one-year program and the RC moving to a two-year program under a competency-based framework using RC terminology, EPAs, and assessment rubrics. For the Queen’s FM program, this has meant harmonizing the two approaches towards curriculum content and competency assessment.

For FP-A, the move to CBME training frameworks for all RC programs at Queen’s in July 2017 had more impact. The Royal College Anesthesia program had to make significant changes to its PGY1 curriculum with overlap of key elements with the existing PGY2 curriculum, creating a double cohort for the first year of implementation (2017-2018). To accommodate this, it reduced its PGY1 intake by one position and the FP-A program was put on hold for one year. While this came as a great disappointment to the many applicants, the program will resume operations in 2018 with two residents as usual. The hiatus has provided an opportunity to develop further clinical contact with Queen’s FP-A community preceptors, something the 2016 internal review recommended.

The Category Two programs active in 2017-2018 are: Women’s Health (three residents), Global Health (one), and Rural Skills (12), as well as the first resident to take up the Falkland Islands scholarship with one-year return of service (ROS). For 2018, there will be a record three residents in the Intellectual and Developmental Disabilities program, two residents in Women’s Health, and eight in Rural Skills.

Dr. Alex Leung served as the ES chief resident this year, representing all PGY3 residents, and will turn these duties over to Dr. Sandra Huynh in July 2018. Dr. Phil Lee, family medicine program chief resident, has also participated in all ES program committee meetings this year, with Dr. Christine Hanna assuming this position for the coming year. Appreciation is extended to all residents who have contributed greatly to the successful running of all ES programs.

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<td>Emergency Medicine</td>
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<td>Global Health</td>
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This table shows the distribution of the department’s 16 training positions for the past two years, and looking ahead to next year. The actual number of residents is in parentheses.
CENTRAL ES PROGRAM ADMINISTRATION

Enhanced Skills Director Dr. Geoff Hodgetts will be retiring in December 2018, and Dr. Meg Gemmill will assume the leadership role. A plan for orientation and handover is being developed to ensure a smooth transition.

Dr. Rupa Patel has taken over as program director for the Women’s Health program, as Dr. Susan Phillips has assumed the reins as the department’s research director. A big thank-you to Susan for her decades of leadership of the Women’s Health program.

FP-Anesthesia program director Dr. Valerie McLeod is on maternity leave effective March 2018, and Dr. Mike Cummings has assumed this role in her absence. Dr. Cummings was the former program director for the RC program, and has worked closely with Queen’s FM on the FP-A program for many years. The department is grateful for his assistance with this, especially as this program was being returned to action after a one-year hiatus.

EMERGENCY MEDICINE

Program Director: Dr. Joey Newbigging; Assistant Program Director: Dr. Matt Stacey
2017-2018: Eight residents
2018-2019: Eight residents

A major activity this year has been the alignment between the CFPC’s Priority Topics-Key Features and the new Royal College EPAs for the five-year Emergency Medicine program. Development of assessment tools that satisfy both programs has been a focus. Because the two programs hold conjoint residency program committee meetings, with distinct agendas, there has been good communication about these shared challenges. In recent months, discussions with Cornwall Hospital have led to the creation of a community-funded residency position with a return-of-service to Cornwall’s Emergency Department as an effective recruiting tool. This will come into effect for the 2019 entry group.

FP-ANESTHESIA

Program Director: Dr. Valerie McLeod
2017-2018: No residents (see above)
2018-2019: Two residents

Dr. Valerie McLeod continues to provide strong leadership to this program, which has thrived amidst a provincial atmosphere that has challenged other universities’ programs. As noted earlier, this program was placed on hold for the current year while the affiliated RC program, upon which it depends for much of its clinical teaching, adjusts to a new competency-based curriculum. The program will resume in July 2018 with two residents.

CARE OF THE ELDERLY

Program Director: Dr. Agata Szlanta
2017-2018: One resident
2018-2019: No residents

Dr. Agata Szlanta continues as director of the Care of the Elderly program, supported by a strong residency program committee. Last year’s resident, Dr. Melodie Adler, will be taking up a practice in Cornwall, where she will provide geriatric consultation support as part of a comprehensive family practice. An electronic resident portfolio was developed for this current year. The Geriatric division moved into its new facility at Providence Care, providing fantastic new space for the program.

PALLIATIVE MEDICINE

Program Director: Dr. Ingrid Harle
2017-2018: One resident
2018-2019: Two residents

Much work has gone into the mapping of RC EPAs, CFPC Priority Topics-Key Features, and assessment methods. This work will continue after accreditation, with a goal of completing the exercise for the July 2018 entry group. The division is actively recruiting new members to replace retirements and make up for existing gaps.

WOMEN’S HEALTH

Program Director: Drs. Susan Phillips & Rupa Patel (2018)
2017-2018: Three residents
2018-2019: Two residents

This year there were three residents in the program, two with six blocks of experiences and one with nine blocks. Challenges with gaining access to valuable experiences outside of Kingston, mainly in Toronto, have continued. Despite this, all have been able to meet personal objectives in relevant areas. Dr. Patel has now taken over the program’s direction, and will have two excellent residents to work with next year.

RURAL SKILLS

Program Director: Dr. Geoff Hodgetts
2017-2018: 12 residents (partial years)
2018-2019: Eight residents (partial years)

The demand for supplementary training through the rural skills programs continues to be an annual reality. This has now been a consistent pattern for the last five years, with demand exceeding supply. The current year has 12 individuals sharing approximately three-and-a-half positions – half of the residents completing
ENHANCED SKILLS

enhanced OB training, the other half doing a mix of emergency and hospitalist experiences. This pattern will continue for the 2018 year. Attention will need to be paid to developing a more competency-based approach to the program’s structure, which will be challenging since every resident does something unique.

GLOBAL HEALTH

Program Director: Dr. Geoff Hodgetts
2017-2018: One resident

In the current year, Dr. Justin Bell has been increasingly engaged in Indigenous Health issues. He has recently signed a contract with Sioux Lookout (SLO) to provide care to a very small Indigenous community north of SLO upon completion of the program. With this end goal in mind, his schedule has been adapted to reflect the need to gain competencies in relevant areas. As a result, the Global Health program can be seen as an exemplar of social responsiveness and accountability. This program has included work in SLO, training in Indigenous child-adolescent psychiatry; public health experience in the SLO district; addictions medicine; trauma; and enhanced obstetrics. Justin has also assisted the department in its curriculum development for LGBTQ issues.

FALKLAND ISLANDS SCHOLARSHIP

Program Director: Dr. Geoff Hodgetts
2017-2018: One resident

This program is an extension of the PGY2 rural FM experience in the Falkland Islands (FI) offered to Queen’s residents, with the goal of attracting residents to the PGY3 year with its one-year of ROS. This is an essential part of the Queen’s-FI collaboration to improve the recruitment and retention of well-trained family physicians for the Falklands. Dr. Belle Song will complete her year of enhanced rural skills in the late summer of 2018 and begin her ROS in the fall.

INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

Program Director: Dr. Meg Gemmill
2018-2019: Three residents

Looking ahead to next year, there will be three residents in the IDD program, a record number in one year. Unique in Canada, this program serves as a national resource, and it is gratifying to see this level of interest. This is another great example of how the department’s Enhanced Skills programs can respond to societal needs.

Enhanced Skills Program Director Dr. Geoff Hodgetts chats with Dr. Rebecca Edwards, King Edward VII Memorial Hospital in Stanley, Falkland Islands, during a site visit there in February 2018 to discuss the program and renew relationships.
A keen group of faculty, community preceptors, and residents participate in all aspects of the department’s undergraduate medical education program (UGME). Through formal teaching in the family medicine courses; leadership roles at the Queen’s School of Medicine; small-group work in clinical skills or FSGL; formal and informal mentoring; resident teaching nights for medical students; teaching in clinical settings; research supervision; and volunteering to participate in the admissions interview process, the department’s members are engaged in all aspects of UGME.

Pre-Clerkship Teaching
The first exposure to family medicine is through the exciting and engaging family medicine course in first year, taught by Drs. Fil Gilic and Matt Simpson. Student course evaluations show that students appreciate the course’s clinical focus and pedagogical approach:

“This is easily the most organized, engaging course we’ve had in med school so far. Extremely well done. Necessitating material be reviewed before class is very helpful.”

“I loved the way this course was taught … the flipped classroom actually enhanced our learning.”

“The case-based learning really helped solidify concepts.”

“Doing physical activity during breaks is a great idea that should be used for every other course as well.”

“The style hits the perfect point where I feel treated like a professional to get my work done, but still have the correct amount of guidance so that I do not feel lost and left completely to my own devices. Lecture material is clearly presented by both professors, and they do an excellent job teaching the concrete parts of the material as well as the more nuanced aspects such as decision-making.”

Students are placed with community preceptors and are mentored and learn as they work with expert preceptors and the interprofessional team.
First-year medical students can consolidate what they have learned in clinical skills and in the classroom and apply it by joining Queen’s Family Health Team faculty and residents in the after-hours clinic. Some students attended more than once, resulting in 172 clinics attended by medical students this year. This learning experience is very popular with the students, and rewarding for the residents and faculty who work with them.

**Family Medicine Interest Group (FMIG)**

Ramita Verma (Class of 2020) and Sophie Rossini (Class of 2021) provide leadership to the Queen’s Family Medicine Interest Group (FMIG), which promotes family medicine as a top career choice. Andrew Kwan (Class of 2019) has started clerkship and continues to provide support to the present co-chairs. Aleksander Trajkovski (Class of 2018) will graduate this year and pursue training in family medicine at Dalhousie University.

The group’s activities focus on exploring what it means to be a family physician in rural, community, and city settings; examining the value and role of primary care in the health-care system; and showcasing the scope and diversity of practice in family medicine. It is also a great opportunity to develop skills and address emerging areas of interest such as suturing, opioid de-prescribing, naloxone training, family medicine research, and the CaRMS match.

Resident teaching nights align with, and supplement, the formal teaching curriculum. Residents also participate in practical skill sessions such as suture and sharps training.
The family medicine clerkship rotation is regional, and students are placed from Kenora to Cornwall. Students are placed with community preceptors for a six-week family medicine clerkship rotation. They are mentored and learn as they work side-by-side with expert preceptors and the interprofessional team in Ontario’s small towns. Most students are placed through the Eastern Regional Medical Education Program (ERMEP) and the Rural Ontario Medical Program (ROMP). The support of the preceptors ERMEP and ROMP work with, and the communities they represent, is greatly appreciated.

Gray Moonen was placed in Atikokan through the department’s ongoing relationship with the Northern Ontario School of Medicine, which places eight Queen’s students per year in its region. While this part of the province may not be familiar to students from the south, Gray says it is a welcoming and rich learning environment:

I could not be more thrilled with my experience so far in the remote community of Atikokan, Ontario. Above all, the physicians, nurses, administrative staff, and town at large have really embraced me and included me in their lives. The sense of community is unique, and the end result is feeling genuinely valued. From a career perspective, I’ve gotten the opportunity to see the true scope of what family doctors are capable of doing, or any doctor for that matter. It’s truly inspiring to see the skillset one can develop when you are the only option in town. The learning has also been top-notch, and the preceptors in these communities that are willing to accept students really make an effort to seek out learning opportunities and pass along their incredibly practical knowledge. Lastly, Atikokan is a beautiful town nestled beside Quetico Provincial Park. I’ve seen dozens of bald eagles, deer, fox, and even a lynx! The stars are also bright. I’m so far north; there are the northern lights. I could not recommend a remote rotation enough, or the town of Atikokan!
Eight students from each class also have the opportunity to work in the communities of Ontario’s saltwater coast when they are placed in Moose Factory and the Indigenous coastal communities. The department is grateful to the Weeneebayko Health Authority and the communities who host and teach Queen’s students.

An increasing number of students are participating in longer, integrated rotations. On the integrated rotation, students are able to settle into their placement and participate in the life of medical practice and the broader community for an 18-week block. This model has been very successful in Picton, Perth, and Brockville/Prescott, where family medicine is paired with pediatrics and psychiatry. Dr. Cliff Rice, a faculty member and preceptor in Picton, received the Queen’s School of Medicine Regional Education Award for Mentorship.

In 2017, leaders from undergraduate medical education and regional education worked with ROMP to build on existing ties to Collingwood, and in 2018 the first students will participate in this exciting learning experience. They will be active participants in the community and work in the offices, emergency and operating rooms, and wards with their preceptors in family medicine, anesthesia, OB/GYN, surgery, emergency medicine, and orthopedics.

In 2019, the program will grow again as a 10-month integrated experience is launched that builds on the established strengths of the QBOL PG team and the leadership of Drs. Wei-Hsi Pang, Randy Wax, and Mike Ward. Clerks will be based in Bowmanville and area for a longer and more integrated experience that will include tertiary care experiences in Oshawa.

Students contribute to the curriculum in many ways, and the work of family medicine clerkship representatives Jocelyn Stewart (Class of 2018) and Rohit Ghat (Class of 2019) is especially appreciated. Jocelyn will remain with the department as she pursues her family medicine training at the QBOL site.

### AWARD WINNERS

From a list of excellent candidates from the graduating class of 2017, the following were chosen for family medicine awards:

- **Emily Kerr** .................................................................Philips Macdonell Memorial Award
- **Lauren Kielstra** .............................................................James Walker Wood Scholarship in Medicine (shared)
- **Nick Latham** ...............................................................The Matthews Medal in Family Medicine and the Professor’s Prize in Family Medicine
- **Craig Lynch** .................................................................Pamela C. Williams Memorial Award
- **Danielle Nelson** ...............................................................James Walker Wood Scholarship in Medicine (shared)
- **Kristen Reipas** .............................................................CFPC Medical Student Leadership Award
- **Jordan Sugie** .................................................................Shane Klein Scholarship
- **Nothando Swan** .............................................................Rattray Scholarship in Family Medicine
- **Elaine Xie** ........................................................................G.H. Ettinger Scholarship

Two awards given to non-graduating students include:

- **Akshay Rajaram (Class of 2019)** ................................S.S. Robinson Summer Studentship in Family Medicine Award
- **Jocelyn Stewart (Class of 2018)** ................................CFPC Scholarship
2018 CaRMS Match

This year, 26 Queen’s graduates were matched to family medicine residency positions across the country. This speaks to the commitment of all preceptors and teachers who act as ambassadors for family medicine, but especially to the dedication of the community preceptors who invite the students into their practices and show them what it means to practise broad-scope family medicine as part of a community.

Family Medicine Undergraduate Committee

Within the undergraduate education committee, residents and medical students (with representation from faculty) meet to oversee the program’s curricular and extracurricular offerings and to engage in discussions about family medicine and ways to encourage, mentor, and teach medical students and future colleagues. Appreciation is extended to the following people for their contributions to this committee and these efforts:

**Faculty** – Drs. Meg Gemmill, Phil Gilic, Kelly Howse, Susan MacDonald, Karen Schultz, Matt Simpson, and Brent Wolfrom

**Residents** – Drs. Daniel Glatt, Antoinette Mihaylova, Heli Tank, and Jenna Webber

**Students** – Rohit Ghate, Sophie Rossini, and Ramita Verma

The contributions of program assistant Kim Wallace must also be noted. Kim’s quiet competence and organizational skills have made a great impact on the department’s undergraduate mission. Kim is also the point of contact for students, community preceptors, and outside organizations, and she represents the department well as it delivers high-quality educational experiences in family medicine, in the classroom, and in the clinic, in Kingston and across the province.
CLINICAL SERVICES

Queen’s Family Health Team
Queen’s Family Health Team (QFHT), now in its 12th year of operation, continues to provide exemplary clinical care and service to patients. The theme of expansion within clinical services was evident throughout this year, with additional physicians joining the department and creating new patient practices, and allied-health professionals offering increased patient group programs and services.

**Patient Enrolment**

With the addition of new physicians, and a re-focus on patient enrolment per clinic, the Kingston site accepted more than 1,600 new patients, while the Belleville site accepted more than 1,100. The QFHT’s current combined patient enrolment of 28,637 well surpasses its goal of 28,000 patients by March 2018 for both sites.

New patients are accepted from many sources, including family members of current patients, Health Care Connect, hospital and emergency discharges, pregnant moms who have no family doctor, graduate-level university students who are not eligible for Queen’s student health services, post-doctoral fellows new to Queen’s, military families, and newly arrived refugee families. Prior to new patients’ first visit with their assigned physician, a dedicated intake team of clerical and nursing staff members co-ordinates their appointments, populates their e-chart with relevant data, and ensures they’re up to date on immunizations. This process provides timely documentation and standardization of patients’ e-chart information.
**Programs**

With the overall increase in QFHT patient numbers, a review of access to allied-health professionals and programs was conducted, with a goal of increasing the number of group programs offered. Led by nursing staff, a dietitian, and a social worker, group programs are offered for chronic pain; smoking cessation; breastfeeding (weekly drop-in); infant feeding; Best Health, Best Weight; Craving Change weight-management; and anxiety and depression. A group program for insomnia will be launched in 2018.

Most group programs are open to the Kingston community (not limited to QFHT patients), consistent with the Ministry of Health’s directive to improve access to allied-health services.

In 2017, physician lead Dr. Karen Hall Barber initiated a Safer Opioid Prescribing program, specifically related to the treatment of patients with non-cancer-related chronic pain. Within Ontario, the South East Local Health Integration Network (LHIN) was reported as the fourth-highest (of 11 LHINs) for opioid prescribing, and had the highest rate of individuals who were dispensed morphine per 10,000 population. Within the QFHT, clinicians noted that opioids have proven efficacy in treating acute and cancer pain. However, opioids do not have proven efficacy or safety to treat chronic pain. Pain relief from opioids diminishes over time, such that patients become tolerant to opioids and develop hyperalgesia.

With consultation and leadership from physicians at the North Kingston Community Health Centre, a series of workshops and drop-in rounds were held with physicians to support them in working with patients who have a high-dose prescription of morphine equivalents. Categories of change included a) patient referral to treatment program; b) second opinion from another QFHT physician; c) tapering of prescription in consultation with the pharmacist.

The design of this new program was based on the following key principles:

- The initiation of patient review and continuity is with the most-responsible physician (MRP).
- One prescription is created to establish the dosage-reduction schedule.
- Prescriptions are restricted to morphine and hydromorphone.
- Establish slow tapers to minimize patient anxiety and possible withdrawal effects.
- Maintain frequent contact with the QFHT pharmacist and social worker between MRP visits to support patient.
- MRPs will be provided with regular coaching/case discussions with Drs. Rupa Patel, Mary Rowland and Hall Barber.

The team’s pharmacist provides regular updates to clinicians regarding safe opioid prescribing that include resources for both clinicians and patients. (See example on Page 31.) As part of the patient-support resources, the team’s pharmacist and social worker are developing a group program for insomnia, as sleep issues are a common side-effect in patients reducing their opioid medications.
QUEEN’S FAMILY HEALTH TEAM

QUEEN’S FAMILY HEALTH TEAM

Kingston Site
Total Patient Visits between April 1, 2017, and March 31, 2018
Over 68,900 Total Visits

QUEEN’S FAMILY HEALTH TEAM

Belleville Site
Total Patient Visits between April 1, 2017, and March 31, 2018
Over 45,000 Visits

**QFHT Advisory Board**

Under the continued leadership of Rob Wood, agenda discussions at the quarterly QFHT Advisory Board meetings have included presentations on vulnerable patients and equitable access to health care; the South East Health Integrated Information Portal (SHIIP); the e-referral pilot project via OTN; regular updates on the SE LHIN governance meeting forums; compassionate communities (role in palliative care); the Vital Signs report and care of seniors; optimizing QFHT resources; workforce development strategy (recruitment, retention, and succession of health resources); patient engagement; and safer opioid prescribing.

As the QFHT accountability and financial reporting is through the university structure, advisory board members focus on providing consultative advice and contributions with respect to strategic and collaborative community initiatives for the QFHT. Members bring a broad and diverse set of skills, resources, and knowledge to each discussion, with representation from Queen’s Policy Studies; St. Lawrence College; KFL&A Public Health; the City of Kingston; consulting and communications organizations; Kingston hospital, long-term care, and government-community retirees; and QFHT faculty and staff members. Community expertise is also provided through invitations to key external guests who participate in discussions on the topics noted above.

**Staff Workshop**

The annual staff workshop in February 2018 was developed on the theme of diversity and inclusivity. Special guest speaker Waneek Horn-Miller has overcome discrimination and trauma to emerge as one of North America’s most inspiring activists and Olympians. From her iconic *Time* magazine cover to her key role in the National Inquiry into Missing and Murdered Indigenous Women and Girls, she has empowered communities to overcome adversity, and helped to turn reconciliation – justice, healing, and dialogue – into a cornerstone of our national institutions. Waneek shared her inspiring and motivational life-journey with staff, captivating her audience and providing a frame of reference for resilience, perseverance, and respect.

Laura Maracle, Aboriginal Cultural Safety Co-ordinator for Queen’s Four Directions Aboriginal Student Centre, presented an interactive learning experience on the history of Indigenous Peoples, using the KAIROS blanket exercise. This workshop has also been delivered to all first-year Queen’s Family Medicine resident physicians.

Dr. Eva Purkey, director of the department’s Global Health Program, closed the workshop by providing the context and framework for staff working with diverse patient populations to reflect on their understanding and interactions of the afternoon.

Three staff members who retired in spring 2018 were recognized at the event. Evelyn Bowering, MSW; Rose Miller, RPN; and Sara McHugh, clinic receptionist, have a combined work contribution to the department and hospital of more than 100 years. Their colleagues and patients will miss them, and the team wishes Evelyn, Rose, and Sarah well in their retirement.
We are excited that the Safer Opioid prescribing (SOP) program is off to a great start! We have received many questions and comments to-date and happy to see that many patients have either started a conversation on tapering or have begun the tapering journey.

Here’s a quick overview of things to consider for your patients currently on 90 MME/day or more of opioids:

**Resources for Clinicians**
- Clinician Tips on Approaching an Opioid Taper
  - [Clinician Tips on approaching an Opioid Taper](#)
- Resource Hooks Chart (describe testing behaviours and strategies for response)
  - [Resource Hooks Chart Handout](#)
- Managing Opioid Withdrawal
  - [Managing Opioid Withdrawal](#)
- For Physicians-TCM P-2014-Managing-O

**Resources for Patients**
- Doctor Mike Evan’s Video on “Best Advice on People Taking Opioid Medication” (Video)
- A Patient’s Guide to Opioid Tapering (Video)
- Opioid Patient Pamphlet
  - [Opioid Patient Pamphlet Final.pdf](#)

**Upcoming SOP Rounds:**
- With Rupa Patel on Nov 22 at noon (HH 3rd Floor)
- With Rupa Patel on Dec 6 at noon (HH 3rd Floor)
- With Mary Rowland on Dec 20 at noon (Bagot 3rd Floor)

*Bring your cases and questions to these rounds. Lunch is provided.*
As the new director of research for the department and the Centre for Studies in Primary Care (CSPC), Dr. Susan Phillips feels fortunate to have joined a dynamic, well-run centre where research questions “float in the air” with faculty, learners, and research staff keen to look for answers that will make a difference to individual and population health.

Dr. Eva Purkey, the department’s new associate director of research, and Dr. Imaan Bayoumi, incoming faculty member dedicated to research, share Dr. Phillips’ focus on social determinants of health. In different ways, all three ask how “who a person is” determines their health, and, perhaps more importantly, they try to identify methods for equalizing the impact of social inequalities on health. Of course, the CSPC’s strong foci of utilizing the Canadian Primary Care Sentinel Surveillance Network (CPCSSN) to describe the health of Canadians, and of studying aspects of medical education, will continue, supported by a small but skilled team of quantitative and qualitative research associates.

A key role of the CSPC is to build research capacity among students, residents, and faculty. The Queen’s Department of Family Medicine stretches across much of southern and eastern Ontario. With the aim of encouraging community physicians wishing to do research, the CSPC will continue to offer advice, research support, and some innovation funding across all sites.
PriMArY CArE rEsEArCH DAY 2018

The Centre for Studies in Primary Care hosted its 14th annual Primary Care Research Day on February 22, 2018, at the Queen’s Biosciences Complex. Residents from all four sites presented their PGY2 academic research projects as either oral or poster presentations. This year’s keynote speaker was Dr. Gail Webber, assistant professor in the Department of Family Medicine at the University of Ottawa. Dr. Webber presented her talk on Why be a Family Physician researcher? My Top Ten reasons.

Each year, four prizes are awarded for Best Academic Project. See Accolades, Page 7, for this year’s recipients.

To learn more about the CSPC’s research activities and project highlights, consult the CSPC’s website at www.queensu.ca/cspc/ and follow along on Twitter @CSPC_QueensU.


10. Grady C, Hinings CR. Turning the Titanic: Physicians as both leaders and managers...


38. Xie E, Gemmill M. Exploring the prenatal experience of women with intellectual and developmental disabilities: In a southeastern Ontario family health team. Canadian Family Physician. 2018; 64(Suppl 2):S70-S75.

PRESENTATIONS

1. Adel S, Song B, **Purkey E.** Overcoming language barriers through the training of health professional students as volunteer interpreters. Family Medicine Forum (FMF). Montreal, Quebec. November 8, 2017. [Poster]


INSIDE THE DEPARTMENT

› Faculty Development
› Faculty Recruitment
› Information Management
› Workplace Safety
The department’s faculty development program supports faculty members in their roles as teachers, scholars, and leaders. Through a variety of formats and methods, formal and informal, group and individual, the program offers seminars, retreats, individual support, informal mentorships, and, for new teachers, orientation to faculty roles. Activities are directed to geographic full time (GFT) teachers in Kingston and adjunct teachers at all sites where the department’s residents are based.

**Co-ordination**

Monthly faculty development teleconferences for site leads connect and support faculty development activities across the department’s Kingston and three satellite sites. Site leads are Dr. Ian Casson and Dr. Ruth Wilson (Kingston-Thousand Islands), Dr. Jennifer Webster and Dr. Nadia Knarr (Belleville-Quinte), Dr. Natalie Whiting (Peterborough-Kawartha), and Dr. Ed Osborne and Dr. Sina Sajed (Queen’s Bowmanville-Oshawa-Lakeridge). Dr. Jessica Ladouceur joined the site leads team for Belleville-Quinte in February 2018, replacing Dr. Jennifer Webster.

Dr. Michael Green, left, and Dr. Aubrey Kassirer get down and doughy at this year’s matrix retreat, where participants learned how to prepare Indigenous foods. This year’s theme was Indigenous Health Curriculum.
Liaison with Queen’s Offices and Beyond

Dr. Richard van Wylick, Director of Faculty Development, Faculty of Health Sciences, joins in these teleconferences, as well as Dr. Phillip Wattam, Assistant Dean, Regional Education; Kris Bowes, Manager of Regional Education; and Laura McDiarmid, Education Consultant, to co-ordinate faculty development efforts. Because of the objective-setting and evaluation components of the seminars and retreats, and the collaboration of the Faculty of Health Sciences Faculty Development Office and the Department of Family Medicine faculty development co-directors, participants are eligible to claim Mainpro+ credits if they are College of Family Physicians of Canada (CFPC) members. Royal College members who are teaching family medicine residents are similarly eligible to claim Maintenance of Certification (MOC) credits.

Faculty development resources organized by these two offices – as well as by the Faculty of Health Sciences’ Office of Health Sciences Education and the Queen’s Centre for Teaching and Learning – are available to the department’s faculty members at all four sites.

Regional Presentations by Department of Family Medicine Faculty

- Fundamentals of Assessment: Best Practices in CBME, by Dr. Karen Schultz, June 2017
- Update from Family Medicine (ERMEP and Perth Site) by Dr. Jeff Sloan, April 2018

In September 2017, Dr. Wattam initiated talks with faculty in Moose Factory to find ways to better connect that group to Queen’s faculty development sessions, and to acquire input into session topics and a possible site visit in the future. These talks are ongoing with the Moose Factory education lead.

Seminars and Workshops

The department supports travel for faculty development activities and events among all four program sites. As part of their roles, Postgraduate Education Program Director Dr. Karen Schultz and Resident Assessment Co-ordinator Dr. Jane Griffiths offer support throughout the year to all department faculty members and preceptors. Sessions are also shared between sites via teleconference or videoconference. Individual sites also provide local sessions:

**KINGSTON-THOUSAND ISLANDS (KTI)**

Seminars the site leads organize in Kingston are primarily attended by Kingston-based family physicians and interdisciplinary health professionals who teach family medicine residents. As examples, recent seminars have included:

- The Craft of Feedback and Assessment – Residents Help Us Learn What They Need (Dr. Karen Schultz, June 2017)
- The Learner in Difficulty (Dr. Ruth Wilson, July 2017)
- Time-Efficient Teaching Strategies: Teaching on the Fly (Dr. Ian Casson, August 2017)
- Feedback (Dr. Ruth Wilson, October 2017)
- Evaluation of Learner Performance (Dr. Ruth Wilson, December 2017)
- Medical Mistakes – How to Help Learners with Errors and Adverse Outcomes (Dr. Ruth Wilson, February 2018)

**BELLEVILLE-QUINTE (BQ)**

- The Top 5 Things Residents Want (Preceptor Group Participation, May 2017)

**PETERBOROUGH-KAWARTHA (PK)**

- The Top 5 Things Residents Want (Dr. K. Curtin, May 2017)
- Making the Most of the Teachable Moment (Dr. N. Whiting, May 2018)

**QUEEN’S BOWMANVILLE-OSHAWA-LAKERIDGE (QBOL)**

- Competency (June, 2017)
**Matrix Retreat**

The theme of this year’s Queen’s Family Medicine Postgraduate Matrix Retreat was Indigenous Health Curriculum, and one of the objectives was to engage in creative thinking for projects within matrix areas – including faculty development. The faculty development component looked at enabling core family medicine preceptors to support residents in the Indigenous health curriculum. Three key recommendations from the matrix include: have faculty development leads participate in the San’yas course; provide Indigenous health resources via the department’s website; and develop a small group session in the next year, using the residents’ Indigenous health module. Work continues to develop these recommendations.

**Website**

The department’s faculty development website provides links to online resources for self-directed learning, organized under learning objectives specific to Queen’s faculty members. The CFPC also hosts an increasing number of faculty development resources.

**Individual Teaching and Mentoring**

Individual teaching and mentoring occurs at all sites. Plans are underway to implement monthly rounds for faculty to provide support, mentoring, and skills development.

**New Faculty Orientation**

As new GFT and community-based faculty members begin their work, the faculty development site leads provide orientation to their academic roles and promote mentorship opportunities. A resource manual for faculty is available to support this process and is available online. The School of Medicine also provides a new faculty orientation program for GFTs each year.

**Funding for Events**

The department funded faculty participation in a variety of faculty development-related events throughout the year, including:

- International Association for Medical Education (AMEE): Helsinki, Finland, August 2017;
- International Conference on Residency Education (ICRE): Quebec City, Que., October 2017;

As part of a team-building event at this year’s matrix retreat at The Waring House, CFPC resident representative Dr. Sabrina Dzafovic prepares food in celebration of the event’s theme, Indigenous Health Curriculum.
The SEAMO Strategic Priorities and Recruitment Committee has approved the department to begin recruitment for family physicians in the following roles:

- **Academic Family Physicians:** The incumbents will primarily be responsible for providing patient care to individuals rostered to the Queen’s Family Health Team. Incumbents will also participate in various academic responsibilities, as the department determines.

- **Walter Wylie Rosser Chair in Family Medicine Research:** This prestigious position recognizes the pioneering work of Dr. Walter Rosser in advancing the research contributions of family physicians in the advancement of clinical care for the department’s patients. The chair’s responsibilities include conducting, supporting, and developing research in the Queen’s Department of Family Medicine. The chair will also foster and support education, supervision, and mentorship of research students and trainees at the undergraduate through to postdoctoral levels. Applications are invited for a faculty position at the associate/full professor rank for this research chair. The successful candidates will have a combination of academic and clinical responsibilities.

**Faculty Associates**

The department continues to employ an exceptional group of physicians within its faculty associate (locum) resource pool. This group of early-career to retired physicians provides first-class patient care, as well as outstanding teaching and mentoring to the department’s residents. The employment of these highly respected physicians enables regular faculty members to attend to the many academic and educational responsibilities they hold.

Recruitment for the faculty associate resource pool is an ongoing initiative co-ordinated by the faculty support co-ordinator.
This was a year of fine-tuning the department’s new Virtual Desktop Infrastructure (VDI). Implemented in 2016, this system allows all staff members to use any computer with “tap login” capability.

Teething problems post-implementation centred around the system’s speed, especially when first logging in each day and when switching from one computer to another. These issues have been rectified, and speed will continue to be optimized as more about the system is learned. Ongoing issues include optimizing printer speed and functionality.

Staff members especially appreciate the system’s capability to provide secure access from anywhere in the world. With this stabilized system now, the department is able to offer the service to other organizations within Queen’s University.

In the world of OSCAR, the department’s electronic medical system (EMR), features continue to be added via the vendor, KAI Innovations. At the top of the priority list is acquiring the ability to communicate securely with patients, and to enable them to book their own appointments online.

The department continues to engage with Kingston Health Sciences Centre (KHSC) to optimize the mutual flow of patient information. Some of this work has been spearheaded by eHealth Ontario and implemented by OntarioMD. Efforts continue in this area, and the department and KHSC expect to be pilot sites for any innovations provincial agencies roll out.

In the near future, it’s expected that OSCAR will be able to capture all patient information, province wide. Practically, this means that even when Queen’s Family Health Team patients have visits, lab and diagnostic tests outside of Kingston, the team’s faculty and staff will be able to access them through OSCAR.
Following a staff safety culture survey in 2017, the department made improvements and created initiatives in areas such as infection control, vaccine procedures, physical safeguards, and incident reporting. The survey was a follow-up to one conducted in 2014.

The survey results revealed an overall positive safety culture. Work will continue to promote a positive and effective patient-safety climate, which will be a focus of the patient safety committee in the coming months.

The workplace safety co-ordinator has been serving as chair of the Southeast LHIN Regional Privacy Advisory Group for a number of months. Recent communications between the LHIN, Kingston hospitals, and other community-sector groups have served to assess the desire to integrate the hospital and regional privacy groups. This idea has support from all stakeholders, and work is in progress to create a South East Regional Privacy Advisory Group. This group will share common privacy-related materials and ideas, and will bring privacy-related issues to the table for discussion. The LHIN will continue to provide support and bring ideas from a broader perspective.

The workplace safety co-ordinator has also been involved in a university committee that is working on policy initiatives in the area of personal health information.

The Clinical Risk Management Committee has re-examined its terms of reference and has decided to place more emphasis on patient safety. To that end, the committee will change its name to the Patient Safety Committee and will begin to focus on areas of critical incidents and privacy, as well as ad hoc topics that arise during day-to-day operations. The renamed committee will have resident, nursing, and clerical representation for a broader input.

The department’s Health and Safety Committee will continue to focus on areas directly related to health and safety from a labour-standards perspective.
The DFM in the Community & Globally

- Intellectual & Developmental Disabilities Program
- Partnerships and Planning Activities
- Global Health Curriculum
- WONCA Promotes Value of Family Doctors
Congratulations to Dr. Ian Casson, who was chosen as Queen’s Human Rights and Equity Offices’ 2017 recipient of the Steve Cutway Accessibility Award. This award recognizes Dr. Casson’s commitment to reducing health-care inequities for adults with intellectual and developmental disabilities (IDD), specifically through his work introducing the Annual Health Check program in the Queen’s Department of Family Medicine. Dr. Casson has also been involved in developing tools to facilitate the annual health check. The program and tools have now gained a national scope and have had a significant impact on the care of adults with IDD.

This year, the Queen’s Department of Family Medicine’s Intellectual and Developmental Disabilities (IDD) Program team had the exciting opportunity to be involved in the revision of the Primary Care of Adults with Developmental Disabilities: Canadian Consensus Guidelines. Originally published in 2006, these guidelines were updated in 2011, and expanded further for publication in April 2018 in the Canadian Family Physician (CFP). The guidelines provide evidence-based recommendations to help support primary-care providers in caring for their patients with IDD, and to help inform clinical and resident-education programs.

The new recommendations will be accompanied by a special issue of the CFP, which will include publications with a focus on primary care for adults with IDD. Dr. Casson, Dr. Liz Grier, and Dr. Meg Gemmill were key contributors to the guidelines’ development, and will have articles published in the special issue.

The IDD program’s continued research focus, the Implementation and Evaluation of Health Links’ Coordinated Care Plans for Adults with Intellectual and Developmental Disabilities, is now in its completion stage. Preliminary results were presented at several conferences over the year, including the Canadian Association for Health Services and Policy Research (CAHSPR) conference, the Family Medicine Forum (FMF), and the North American Primary Care Research Group (NAPCRG) conference. Results were presented at the Ontario Association on Developmental Disabilities (OADD) Research Special Interest Group (RSIG) research day in April 2018. The project’s expansion to the Quinte Health Link, under the leadership of Dr. Jessica Ladouceur and Nicole Bobbette (OT), is into its recruitment stage, and promises to continue to advance the understanding of the use of co-ordinated care plans for adults with IDD.

Clinically, the IDD program continues to achieve its goals of providing proactive Annual Health Checks for patients with IDD.

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In the education program, Dr. Gemmill, Dr. Grier, and Dr. Casson continue to provide unique elective experiences for family medicine residents, and have expanded the elective experience to include clinical clerks. The PGY3 Enhanced Skills Program in IDD is fortunate to have accepted three residents for the 2018-2019 year. This program continues to foster the educational goals of future physicians who have a special interest in developmental disabilities medicine.

Finally, Dr. Gemmill presented at the Faculty of Health Sciences Continuing Professional Development series Challenges Around Sex and Sexuality when Impaired with a Physical and/or Cognitive Impairment. Her seminar on considerations around sexuality in patients with IDD was very well received.
In 2015-2016, the department and the Falkland Islands Government signed a medical training agreement for Queen’s Family Medicine residents. The primary intention of this agreement was to recruit well-trained family physicians to work in the Falkland Islands. As part of that strategy, the Department of Family Medicine (DFM) and the Falkland Islands implemented a two-month residency rotation experience for Queen’s Family Medicine residents.

Since forming the agreement, approximately six family medicine residents per year have spent time in the Falkland Islands, with one resident making the trip at a time. During their rotations, residents work under the direction of the Falklands’ chief medical officer and her delegates. This rotation gives residents an opportunity to experience the area and assess their interest in its enhanced training scholarship – a postgraduate third-year training position that comes with a one-year return of service. This enhanced training will better prepare residents to provide comprehensive services in the Falkland Islands.

Dr. Belle Song, a recent Queen’s family medicine graduate, is the first resident to take advantage of the Falkland Islands’ training scholarship. During 2017-2018, Dr. Song will complete her enhanced rural skills training program in Canada. When she completes her training, she will be employed at the King Edward VII Memorial Hospital.

With several faculty members either retiring or taking on other positions this year, the department acknowledged the need to renew the Queen’s-Falklands relationship. In spring 2018, a small DFM contingent travelled to the Falkland Islands for a site visit, where they recommitted its support with hospital and government officials. The department will continue to examine ways to enhance and expand this initiative with its Queen’s colleagues.
Hospitalist Medicine

Following ministry and university approval, the DFM and Providence Care Hospital began the formal recruitment process for two hospitalists at Providence Care in October 2017. Once hired, the two hospitalists will (a) provide medical coverage for a complex-care inpatient unit at the new Providence Care Hospital and (b) provide call coverage for these in-patient complex-care beds, working toward the goal of achieving a combined call schedule for all hospitalists at Providence Care Hospital. Further, among their academic responsibilities, these two hospitalists will undertake family medicine-based hospital medicine research and will assume educational duties. The department’s commitment to implementing a comprehensive approach to hospitalist medicine aligns and supports the strategic objectives of both Providence Care and the DFM. This approach provides appropriate medical coverage for patients within Providence Care Hospital, and will eventually establish viable educational opportunities to residents interested in hospitalist medicine.

Department Accountabilities

In early 2018, the department submitted its department-specific accountabilities deliverables proposal to the southeastern Ontario Academic Medical Organization (SEAMO). These accountabilities metrics state what each department is to achieve in UGME, PGME, clinical, and research areas. The department’s proposal made the case that its accountabilities should recognize the fact that it has the largest postgraduate medical education program within the Queen’s school of Medicine. However, SEAMO noted that because broader discussion on the accountabilities framework for all SEAMO-funded departments will need to occur later this year, SEAMO deferred approval and will revisit the department’s proposed UGME, PGME, and research metrics at that time. As a result, SEAMO agreed to leave DFM’s UGME, PGME, and research accountabilities unchanged from previous years, and consistent with many other SEAMO-funded departments for this coming year. The ongoing need for DFM’s proposal has been in the wings for many years. SEAMO has long recognized...
that it could not apply clinical deliverables to the DFM, as the department is funded primarily through a capitation-based model. The DFM, with SEAMO approval and involvement, initiated negotiations with the MoHLTC to convert its physician practice model from two family health networks (FHns) to one family health organization (FHO), in acknowledgement of those successful negotiations, SEAMO exempted the DFM from the clinical deliverables component; however, the department’s physicians remain accountable to the MoHLTC for patient care. With this transition, the DFM will no longer receive SEAMO clinical funding for its Queen’s FHO activities, but it will receive SEAMO academic funding in meeting its agreed-upon contributions in undergraduate and postgraduate medical education, and scholarly research.

Governance
The department saw several governance-improvement changes this year. Chief among them was DFM meeting SEAMO’s recommendation that all SEAMO-funded departments develop and implement an association. By extension, this work led to the revision and incorporation of the department’s existing practice plan into the resulting association agreement.

The SEAMO DFM Association Agreement established the unincorporated association. Its purpose is to co-ordinate the associates’ individual practices to ensure patients’ needs are met; to co-ordinate the associates’ interaction with hospitals, the university, and SEAMO; and to facilitate the collection and distribution of billings, among other common costs. The new association agreement incorporates Queen’s Family Health Organization (FHO) Association Agreement, a separate unincorporated association that facilitates the Queen’s FHO requirements among signatory physicians. An associate is a department member who performs clinical activities within the Queen’s Family Health Team (QFHT) or engages in academic activities in the department or university. It does not include faculty associates or locums.

In approving the SEAMO DFM Association, faculty members have a governance mechanism to support the equitable, transparent, and effective management of DFM policies, SEAMO responsibilities, and Ministry of Health and Long-Term Care (MoHLTC) obligations. The agreement gives members authority to establish requisite committees, processes, or structures to operationalize the SEAMO DFM Association Agreement, the Queen’s FHO Association Agreement, and the SEAMO DFM Practice Plan, with a requirement that departmental staff provide regular progress updates on those efforts.

2018-2022 Strategic Plan
With the appointment of Dr. Michael Green as department head, work to develop the DFM’s 2018-2022 strategic plan will begin in summer/fall 2018. This process will engage new faculty and staff, as well as retiring faculty, who can provide valuable insights into current and future academic, clinical, departmental, and educational initiatives. With every challenge the department faces, an opportunity is presented to engage with Queen’s University departments, schools, and centres, as well as community partners and colleagues. The 2018-2022 strategic plan will align with the Faculty of Health Sciences’ strategic framework, the School of Medicine’s strategic plan, and the Queen’s University strategic framework, all of which will provide the foundation for the department to advance its family medicine education and related initiatives, as well as Queen’s University’s vision.

The department’s Dr. Brent Wolfson, left, and Dr. Ahmad Cheema, the general surgeon at King Edward VII Memorial Hospital in Stanley, chat with Dr. Rebecca Edwards at a reception during the Queen’s team’s visit to the Falkland Islands.
This year marked the end of the department’s first Global Health Strategic Plan. The Global Health Working Group (GHWG) did a great job at meeting most of its objectives for this period, and members are looking forward to direction from the department’s 2018-2022 strategic plan to inform and develop its own.

The program’s global health newsletter, Horizons, launched in 2016, will continue with two editions annually, with input from across campus, the department’s distributed sites, and the broader community. Editions published in 2017 focused on refugee health and Indigenous health, and the GHWG is proud of this initiative.

The refugee health initiative, launched in 2017, continues full force, and the Queen’s Family Health Team (QFHT) is now able to accept virtually all refugee patients who approach the clinic. The QFHT administrative team has worked hard to capture and record patients’ demographic information to ensure that clinical and quality-improvement initiatives recognize equity-seeking groups, in particular.

It was a terrific year for global health/health equity research within the department, with residents investigating topics including the opioid crisis, the experience of primary care in Kingston’s transgender community, and adolescent health behaviours in Uganda, among others.

The education team has started to address gaps in the department’s Indigenous health curriculum for residents and staff members alike. The annual matrix retreat for educational leaders at all four of the department’s sites focused on how to improve Indigenous health and cultural safety throughout the department. In addition, department staff members participated in a cultural safety training initiative featuring a presentation from Waneek Horn-Miller, Olympic athlete, activist, entrepreneur, and Director of Community Engagement for the National Inquiry into Missing and Murdered Indigenous Women and Girls; as well as an engaging exercise facilitated by Laura Maracle, Aboriginal Cultural Safety Co-ordinator at Queen’s Four Directions Aboriginal Student Centre. Michelle Fraser of the Peterborough-Kawartha site has taken the lead in creating innovative ways to address this curriculum, and the department is hoping to hire an Indigenous health lead to focus on this area. Queen’s University’s initiatives in response to the Truth and Reconciliation Commission can serve as a guide in this process.

Finally, the GHWG has worked to raise its profile, in part by hosting speaking events. The group hosted two speakers – Dr. Joe Vipond of the Canadian Association of Physicians for the Environment, and Steve Buist, lead author of the Code Red: Health, Wealth and Social Determinants project, from the Hamilton Spectator. All Queen’s and Kingston community members are welcome at these events, which are meant to highlight global health/health equity issues of interest to the broader community, as well as the global health work within the department.
At the invitation of Dr. Ruth Wilson, President, North American Region, of the World Organization of Family Doctors (WONCA), the organization’s president visited Queen’s Department of Family Medicine in 2017. Professor Amanda Howe presented at the department’s grand rounds, speaking about global health challenges.

In her role, Dr. Wilson represents the region’s member organizations on the world executive, and works to encourage and enhance family medicine in North America and globally. The organization’s mission is to promote the value of family doctors to the health-care system around the world.

This year, Dr. Wilson served as an external examiner for family medicine in the Caribbean at the University of the West Indies. She represented family doctors and spoke about the work of WONCA at meetings in the Bahamas, Bangkok, Geneva, Montreal, Rome, San Antonio, Warsaw, and Zagreb. This work is aimed at sharing knowledge, information, and best practices to ensure the goal that every family around the world has a family doctor may someday be achieved.

The World Health Organization recognizes the need to strengthen family medicine and primary care in countries throughout the world. Unlike Canada, where 50 per cent of physicians are family doctors, the role of family medicine in the health-care system is not yet valued and understood in many countries.

In 2015, the United Nations introduced a set of 17 goals to “end poverty, protect the planet and ensure prosperity for all.” Following “No Poverty” and “Zero Hunger” as the first two goals, the third goal is “Good Health and Well-Being” – “ensuring healthy lives and promoting well-being for all at all ages.” Currently, there are no measures of primary care in the indicators being developed to measure progress towards this goal. Lobbying for inclusion of this key metric has been a particular focus for WONCA.

All members of the College of Family Physicians of Canada are members of the organization, which unites family doctors from around the world through its special-interest groups and working parties. This year, the Department of Family Medicine at Queen’s will be joining WONCA as an academic member, further supporting this global-health initiative.
OUR MISSION

To be recognized as opinion leaders and valued partners, advancing the discipline of family medicine and health-care systems within Queen’s, locally, regionally, nationally, and internationally;

To be committed to a distinctive, foundational education program that prepares family doctors to be competent, confident generalists who are responsive to the needs of the communities they serve – from urban settings to small towns, rural or remote regions of Canada;

To act as a model of outstanding patient-centred health care;

To contribute to improving the health of individuals and populations by supporting our researchers and the Centre for Studies in Primary Care;

To be dedicated to social responsibilities and service, acting as advocates for our patients and as champions for issues that affect health so as to improve society and better care for vulnerable and underserved populations, locally and abroad;

To cultivate a highly collaborative environment where personnel are integrated into the clinical, education, and research processes, and to foster a work environment that enables and sustains outstanding teamwork and performance.
Education (Page 7): Belleville-Quinte residents Dr. Andrew Kamphuis, centre, and Dr. Farah Pabani enjoy a hike with a guide at the Temagami Wilderness Medicine retreat. Photo by Ben Wolfe

Clinical Services (Page 24): Dr. Dash Randsalu, left, and Dr. Richard Rowland with a patient at the Queen’s Family Health Team. Photo by Rob Whelan Photography

Research (Page 29): Dr. Shayna Watson, left, and Dr. Ruth Wilson at Primary Care Research Day. Photo by Rob Whelan Photography

Inside the Department (Page 38): Faculty members at this year’s Queen’s Family Medicine Postgraduate Matrix Retreat in Picton. Photo by Judy Sakell

The DFM in the Community & Globally (Page 45): Dr. Geoff Hodgetts, right, presented His Excellency Nigel Phillips, Governor of the Falkland Islands, with a Queen’s University scarf as a gesture of appreciation during the department’s visit in February. Also pictured is Dr. Rebecca Edwards of the Falkland Islands. Photo by Allen McAvoy

BACK PAGE:
Gail Shinniman, RPN; Dr. Ruth Wilson; Dr. Jane Griffiths; and Dr. Susan MacDonald. Photo by Allen McAvoy