

Faculty of Health Sciences | School of Medicine



Queen's  
UNIVERSITY

DEPARTMENT OF

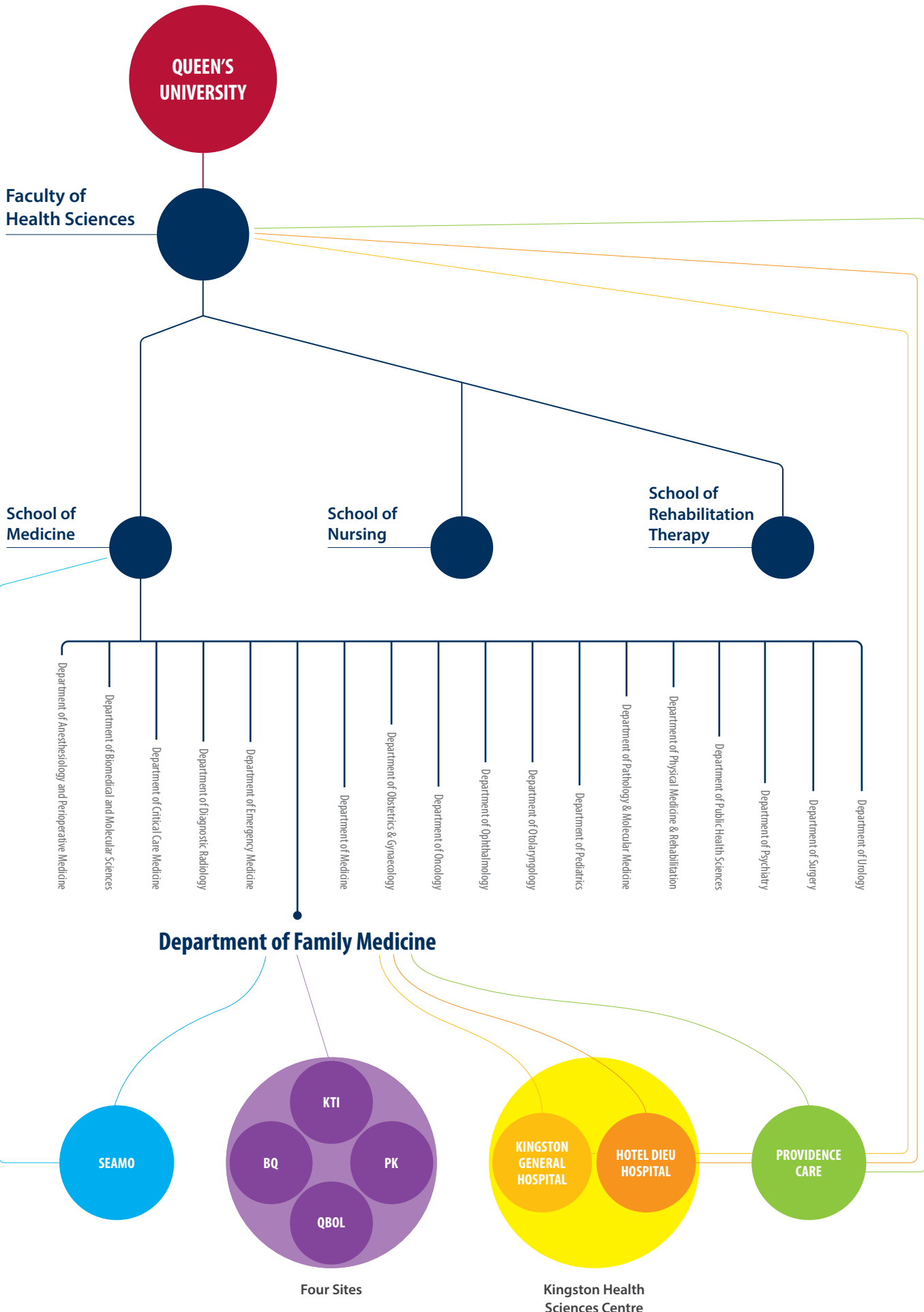
# Family Medicine

## 2018/19

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Annual Report





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## OUR VISION

Leading family medicine through education, research, advocacy, and socially accountable practices.

## OUR MISSION

Preparing tomorrow's family physicians to provide exemplary, comprehensive care for all, within the diverse communities they serve.

## OUR VALUES

Respect. Leadership.  
Inquisitiveness. Equity.  
Diversity. Compassion.  
Collaboration.  
Accountability.

## OUR STRATEGIC PRIORITIES

P5

Take advantage of technological opportunities emerging for the DFM and within family medicine.

P1

Advance family medicine education and family medicine research.

P4

Cultivate a supportive, communicative workplace culture to create a healthy work environment with effective structures throughout the department.

P2

Strengthen and build upon connections and partnerships in and with communities.

P3

Incorporate social accountability and health equity throughout our work.

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## MESSAGE FROM THE DEPARTMENT HEAD

I am thrilled to share with you the Department of Family Medicine 2018-19 Annual Report.

As I had a chance to read over an early draft, I couldn't help but be amazed once again by the great work all our faculty, residents, and staff contribute.



Dr. Michael Green  
Department Head

This was a year of transformation and planning for the department's future, with the development of a new five-year strategic plan being a highlight. Developing the plan was a year-long open and inclusive process that engaged all areas of the department and all sites. Through this process, we generated renewed Mission, Vision, and Values statements and a set of five strategic priorities for the coming years. (See opposite page for summary; [click here](#) for the full plan.) I'd like to thank our strategic-planning steering committee members, facilitator Rob Wood (CEO, 8020Info Inc.), and staff members Allen McAvoy and Tracy Weaver for their outstanding work in making this valuable undertaking a success.

It was also a big year for changes in our Kingston-based full-time faculty, and in major departmental leadership roles and in our postgraduate education program, in particular. Jumping into their new roles with great enthusiasm, these individuals are doing a great job in these positions.

Dr. Brent Wolfrom had his first full year as our new Postgraduate Education Program Director, replacing Dr. Karen (Pinky) Schultz. With the retirement of Dr. Geoff Hodgetts after many years of service and leadership, we also

welcomed Dr. Kelly Howse to the role of KTI Site Director and Dr. Meg Gemmill as our Enhanced Skills Program Director. Regionally, Dr. Nadia Knarr (Belleville) took on the role of Curriculum Director, and Dr. Jessica Ladouceur (Belleville) and Dr. Matt Simpson (KTI) are our new co-directors for faculty development.

We also created a new leadership position in Indigenous Health, and Dr. Sarah Funnell has accepted this role. As co-chair of the CFPC Indigenous Health Working Group, Dr. Funnell, a First Nations physician, is a leader in this area nationally.

We also welcomed Drs. Alenia Kysela, Anthony Train, Laura Kroeker, and Erin Beattie as full-time faculty, and we are expecting our final recent recruits to arrive in the summer and fall of 2019.

To accommodate all these changes and new arrivals, we've seen the successful implementation of our new clinical structure. Lead Physician Dr. Karen Hall Barber and Clinic Manager Diane Cross provided leadership and support for this enormous undertaking, which saw the first major restructuring of our clinical operations in a decade, coinciding with the arrival of a new group of residents on July 1 – no small feat! This process required all of our staff and faculty to pull together to provide a smooth transition for our patients. They not only pulled it off, but continued to grow our clinical

operations with additional after hours clinics and the addition of more patients rostered to our Queen's Family Health Team.

We also launched a new Division of Hospital Medicine this year. A partnership with Providence Care, this initiative is focused initially on patients in the hospital's complex continuing care program. Dr. Ammar Rashid took up the first full-time position as division head in January 2019, and will work on gradual expansion to include other program areas offered at Providence Care over the coming years.

Dr. Susan Phillips and the team at the Centre for Studies in Primary Care have been busy mentoring our new faculty and updating and revising our research curriculum. They've had a fantastic year, with successful research grants and a growing focus on research that addresses important issues related to health equity.

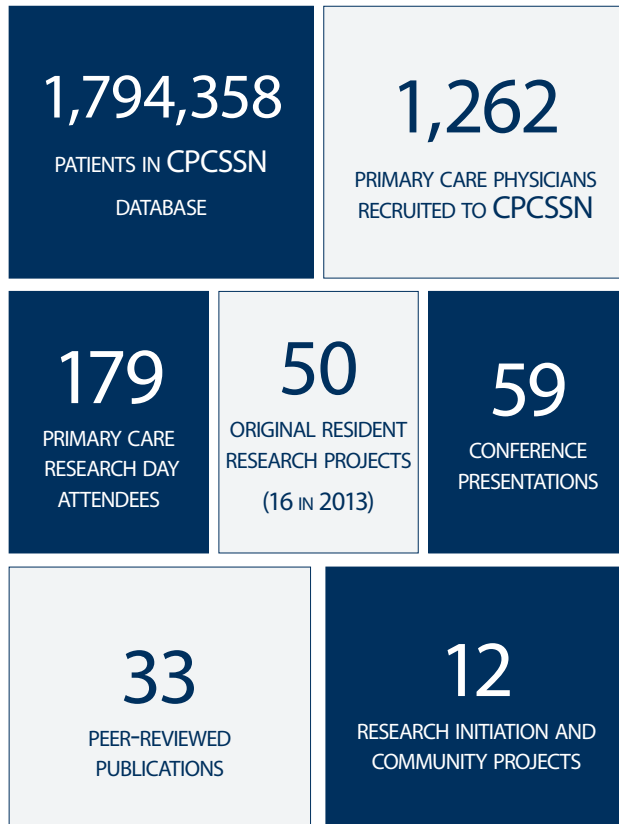
This is an exciting time at the Department of Family Medicine. I look forward to everyone's involvement over the coming year as we continue to further strengthen the provincial and national prominence of our academic research, educational programs, and clinical initiatives.

Remember that together, WE are Family Medicine! For Learners. For Patients. For Communities.



**We are Family Medicine.**  
For Learners. For Patients. For Communities.

# RESEARCH



# EDUCATION

KINGSTON-THOUSAND ISLANDS			
898 APPLICATIONS	577 INTERVIEWED	520 RANKED	35 MATCHED (QUOTA)
BELLEVILLE-QUINTE			
454 APPLICATIONS	339 INTERVIEWED	334 RANKED	6 MATCHED (QUOTA)
PETERBOROUGH-KAWARTHA			
477 APPLICATIONS	359 INTERVIEWED	276 RANKED	6 MATCHED (QUOTA)
BOWMANVILLE-OSHAWA-LAKERIDGE			
495 APPLICATIONS	360 INTERVIEWED	293 RANKED	8 MATCHED (QUOTA)
INTERNATIONAL MEDICAL GRADUATES			
1,042 APPLICATIONS	303 INTERVIEWED	114 RANKED	10 MATCHED (QUOTA)
PUBLIC HEALTH AND PREVENTIVE MEDICINE			
23 APPLICATIONS	16 INTERVIEWED	16 RANKED	2 MATCHED (QUOTA)
DEPARTMENT OF NATIONAL DEFENCE			
14 APPLICATIONS	14 INTERVIEWED	11 RANKED	8 MATCHED (QUOTA)

# CLINICAL SERVICES

## PATIENT ENROLMENT

KINGSTON	BELLEVILLE
17,791 16,572 MARCH 2018	11,690 11,972 MARCH 2018

## AFTER HOURS CLINIC VISITS

KINGSTON	BELLEVILLE
5,324 4,963 - 2017/2018	1,144 NEW 2018

## GROUP PROGRAMS

10	2,812 PATIENT VISITS TO GROUP PROGRAMS KINGSTON/BELLEVILLE
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### AWARDS AND ACCOMPLISHMENTS

**Dr. David Barber** is co-investigator on a \$1M project that will help frail and elderly patients diagnosed with a traumatic brain injury. The project team will design and implement an imaging technology that will evaluate the presence of bleeding on or in the brain of patients awaiting CT imaging. The \$1,004,587 project, entitled *Improved Management of Frail and Elderly Patients with Traumatic Brain Injury*, is jointly funded by the Ontario Centres of Excellence and Archeoptix Biomedical, Inc.

**Dr. Imaan Bayoumi** received a SEAMO Innovation Fund award for her research, *Targeting Child Mental Health and Household Poverty: Impact of a Poverty Intervention in Primary Care on Preschool Children's Emotional and Behavioural Health*. This pilot study was funded for \$99,960 from 2019 to 2021. Recruitment is currently underway at the QFHT. Nine unique projects aimed at transforming health-care delivery in Ontario were funded this year.

Occupational therapists **Dr. Catherine Donnelly** and **Nicole Bobbette**, and pharmacist **Dr. Stephanie Lynch**, all from the Queen's Family Health Team Belleville Site, are co-investigators on a CIHR Operating Grant (\$100,000) for *Evaluating the Outcomes and Experiences Of Chronic Pain Self-Management Support with an Opioid De-Prescribing Intervention: A Mixed Methods Study*.

**Dr. Donnelly** is also co-lead on a program designed to support aging well at home that received more than \$1M in provincial funding to expand. The OASIS Senior Support Living Program brings seniors together and empowers them to make decisions and social connections that help them thrive at home. The program will launch three new locations in Kingston and one in Belleville. In

collaboration with university partners at McMaster and Western, two OASIS locations will also open in London and one in Hamilton.

Department Head **Dr. Michael Green** was elected as a fellow of the Canadian Academy of Health Sciences, one of Canada's premier academic honours. Fellows of the academy are elected based on their demonstrated leadership, creativity, distinctive competencies, and commitment to advancing academic health sciences.

**Dr. Jason Malinowski**, a 2002 Queen's graduate (Family Medicine/Palliative Care) and preceptor for Queen's Family Medicine in Barry's Bay, received a College of Physicians and Surgeons of Ontario (CPSO) Council Award in recognition of his work as an advocate for rural medicine. The award, bestowed to four physicians annually, recognizes outstanding performance in each of the eight physician roles identified by Educating Future Physicians of Ontario.

**Dr. Kieran Moore**, PHPM Program Director, and his research team were awarded \$4M to battle Lyme disease across Canada. Funded by the Canadian Institutes of Health Research and the Public Health Agency of Canada, the Pan-Canadian Research Network on Lyme Disease will bring together scientists, clinicians, and patients to advance the science of Lyme disease prevention and control, diagnosis, and treatment.

**Dr. Susan Phillips**, Director of Research for the department and the Centre for Studies in Primary Care, received a College of Family Physicians of Canada Lifetime Achievement in Family Medicine Research Award. This award honours trailblazers and leaders who have made a significant contribution to family medicine research during their active careers. Dr. Phillips was one of four family physicians to receive the award this year.

Dr. Phillips also received two CIHR grants to support her work in gender studies: 1) GENDER-NET Plus, Gender, and UN Sustainable Development Goals (CIHR, European Union, Swedish Research Council): *Evolving Gender Differences in Health & Care Across Cohorts*. Principal Investigator. 745,950 Euro; March 2019 to March 2022, and 2) CIHR: *Gender-Based Inequalities in Adolescent Health in Canada*. Co-Investigator. \$500,000; April 2019 to February 2023.

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### CFPC RESIDENT/STUDENT AWARDS

#### Resident Awards

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

**Dr. Betty Chiu** (QBOL): Family Medicine Resident Award for Scholarly Achievement

**Dr. Philip Lee** (PGY3 EM): Family Medicine Resident Leadership Award

#### Student Awards

(One medical student from each family medicine program across Canada is selected for each award annually.)

**Akshay Rajaram**: Medical Student Scholarship

**Dr. Aleksander Trajkovski**: Medical Student Leadership Award

#### PARO

(Presented annually to a recipient at each of the province's six medical schools.)

**Dr. Joey Newbigging**, Program Director, Enhanced Skills Emergency Medicine, earned this year's Professional Association of Residents of Ontario (PARO) Excellence in Clinical Teaching Award for Queen's University. This award acknowledges the essential role good clinical teachers play in the training of new physicians.



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## QUEEN'S FHS REGIONAL EDUCATION AWARDS

### Teaching Awards

**Dr. Davit Khachatryan:** Department of Psychiatry, Lakeridge Health, Oshawa

**Dr. Mahmoud Sakran:** Department of Pediatrics, Lakeridge Health, Oshawa

### Mentorship Awards

**Dr. Elaine Blau:** Peninsula Family Health Team, Tobermory

**Dr. Kirk Haunts:** Cobourg Health Centre, Cobourg

### Education Development Awards\*

**Amanda Aquilina,** Specialty Discipline Site Coordinator, Lakeridge Health/Queen's

**Dr. Randy Wax,** Regional Director of Clinical Education, Lakeridge Health/Queen's

\*Awarded for work developing and implementing the Comprehensive Clerkship Program at Lakeridge Health (including the Bowmanville Health Centre)

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## QUEEN'S FAMILY MEDICINE AWARDS

### Resident Experience Enhancement Award (June 2018)

**Cynthia Leung,** Pharmacist, Kingston site, earned this annual award, given to an allied health or administrative professional who has brought significant enhancement to the residency experience.

### Resident and Preceptor Awards

**Dr. Brendan Caraher** (PK; PGY2) and **Dr. Samantha Graitson** (BQ; PGY2): **The Richard Milner Award** – Awarded to postgraduate family medicine residents (PGY1, PGY2, or PGY3) who have demonstrated a passion for teaching and expertise in leadership and practice management.

**Dr. Breanne Carey** (BQ); **Dr. Henry Chen** (QBOL); **Dr. Angela Coccimiglio** (PK); and **Dr. Heather Khey-Beldman** (KTI; 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. Puneet Chawla** (KTI; PGY3 Rural Skills) and **Dr. Ashley Epp** (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.

**Dr. Josh Colby,** Kingston preceptor (Picton): **Dr. Donald L. Potvin Memorial Teaching Award** – Awarded to a community family medicine preceptor to further their training in evidence-based medicine.

**Dr. Brittany Dyer** (BQ); **Dr. Tara He** (QBOL); **Dr. Alexander Leung** (PGY3 EM); **Dr. Hao Shi** (KTI; PGY3 Rural Skills); **Dr. Supreet Sunil** (KTI; PGY3 EM); and **Dr. Shain Thakrar** (PK): **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. Barbara Haas,** Kingston preceptor (Sunnybrook Hospital, Trauma): **Dr. John T. Tweddell Memorial Teaching Award** – Awarded to recognize specialty preceptors who exemplify teaching excellence to family medicine residents.

**Dr. Sheila Wang** (KTI; PGY3 Rural Skills): **Dr. 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.

### EM PGY3 Distinguished Preceptor

The department's Emergency Medicine Enhanced Skills Residency Program (CCFP-EM) initiated an annual CCFP-EM Distinguished Preceptor Award this year. Each year, the graduating class of CCFP-EM residents will select two or three off-service or community preceptors and one Kingston Health

Sciences Centre (KHSC) emergency medicine preceptor to receive this award in recognition of each preceptor's outstanding teaching and mentorship. This year's recipients:

### Community and/or Off-Service Preceptors

**Dr. J.D. Cyr:** Anaesthesiology, Humber River Hospital

**Dr. Ryan Hall:** Emergency Medicine, Belleville General Hospital

**Dr. Ahmed Mian:** Emergency Medicine, Humber River Hospital

### KHSC Emergency Medicine Preceptor

**Dr. Erin Brennan:** Emergency Medicine, Kingston Health Sciences Centre

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## CENTRE FOR STUDIES IN PRIMARY CARE AWARDS

The Centre for Studies in Primary Care hosted its **Primary Care Research Day** on February 28, 2019, at the Four Points Sheraton in Kingston. Plenary speaker was Dr. Minna Johansson, Cochrane Sweden Fellow, General Practitioner, Herrestad HCC, Region Västra Götaland.

Residents from all four sites presented their PGY2 academic research projects as either oral or poster presentations at this annual event.

### The winners for best overall project are:

**Dr. Vanessa Audet** (Kingston)

"Family Medicine Residency In Canada: Is Two Years Long Enough?"

**Dr. Helene Baldwin** (Kingston)

"Mentoring Uncertainty: Is it a Skill to be Fostered in Family Medicine Residency?"

**Drs. Samantha Graitson & Justin Pang** (Belleville)

"The Nightmares App: A Point-Of-Care Mobile App for Nightmares Simulations"

**Dr. Steve Slobodian** (Kingston)

"Performance Enhancing Psychological Skills in Medical Simulation (PEPSIMS)"





# Education

MESSAGE FROM THE PROGRAM CHIEF  
PGY 1&2

POSTGRADUATE EDUCATION  
PGY 1&2

PUBLIC HEALTH AND PREVENTIVE  
MEDICINE

ENHANCED SKILLS

UNDERGRADUATE EDUCATION



**DR. CHRISTINE HANNA**  
Program Chief

# Message from the Program Chief

PGY 1&2

“The experience of family medicine residency here at Queen’s has always been widely received as being a wonderful, formative part in residents’ medical careers. This year was no different. The residents from all sites, as well as our military and Public Health and Preventive Medicine residents, have come together and continued to shine bright this year.”

## Accreditation

This year, the Queen’s Family Medicine Residency program underwent accreditation by the College of Family Physicians of Canada. Residents from all sites and enhanced skills programs were excited to be involved in the process, and were overwhelmingly positive about their experiences. In its report to the department, the College highlighted this great engagement and positive attitude demonstrated.

## CaRMS

The matching process via CaRMS has always been an exciting time for residents, faculty, and staff at Queen’s Family Medicine. This year, there was continued enthusiastic involvement from residents for both our Canadian and international medical graduate candidates. They helped with interviews as well as the anonymous question-answer panel for candidates, allowing candidates to ask unfiltered questions and receive honest answers. This year, an extra helper was also present at the interviews: Leo the labradoodle, who helped to unwind stressed and nervous candidates!

## Wellness

Residents continue to highlight the importance of wellness and self-care. They continued to support one another and promote engaging activities at all sites. Many resident-driven activities were organized, such as hot yoga, dinners, wine tours, Treetop Trekking, and even a step challenge between residents and staff. These initiatives were well-received and highly praised.

Thank you to all the wonderful residents, faculty, and staff who continue to be an integral part of the resident experience!





**DR. BRENT WOLFROM**  
Program Director

# Postgraduate Education

## PGY 1&2

Benjamin Franklin stated that “When you’re finished changing, you’re finished,” and change is certainly something Queen’s Department of Family Medicine Postgraduate Medical Education has experienced and embraced over the past year. We have said farewell to committed and experienced faculty, welcomed new faculty, created a new division of hospital medicine, and undergone significant changes within the program leadership.

Dr. Karen (Pinky) Schultz “retired” as postgraduate program director in spring 2018, a role she assumed in 2011. There is no question that the exceptional status of our residency training program is due to Pinky’s dedication and strong leadership, innovation, and collaboration. While Pinky has stepped down as program director, she has assumed the responsibilities of assessment director, following Dr. Jane Griffiths’ retirement from the department – a role for which Dr. Griffiths will continue to provide guidance and leadership within the program.

The Kingston and Thousand Islands site also said goodbye to Dr. Geoff Hodgetts, with Dr. Kelly Howse taking on the role of site director and Dr. Meg Gemmill assuming the enhanced skills director role, both positions Dr. Hodgetts held over the past eight years. Also retiring from Queen’s after many years of service were Dr. Ruth Wilson and Dr. Ian Casson, with their faculty development duties being assumed by Dr. Jessica Ladouceur and Dr. Matt Simpson.

The program also welcomed Dr. Sarah Funnell in the new role of Indigenous health director, and we are extremely excited to advance that aspect of the curriculum across all sites.

Other new program leadership includes Dr. Nadia Knarr, who, while maintaining her role as the Belleville-Quinte site director, has assumed the duties of curriculum director. Both Dr. Knarr and Dr. Ladouceur bring a fresh community-oriented perspective to the program through distributed leadership that will further embolden our focus on distributed medical education and involvement in our communities.

A significant accomplishment this year includes the addition of Indigenous health to our “matrix” structure, assigning it alongside other programmatic priorities such as faculty development, assessment, curriculum, and research. Placing Indigenous health on the same footing as these fundamental components of the program will represent this vital topic at all levels of our education program, as well as within both faculty development and research.

Another highlight of this year was receiving the final accreditation report for all programs, including all sites and the enhanced skills programs. This report can only be described as glowing. Recognized strengths include strong program leadership, resident involvement, robust assessment methodology, and programmatic quality improvement. Also of note is our impressive performance on the CFPC exam, with a 100-per-cent pass rate for first-time writers in the most recent exam.

While the program clearly excels with the support and dedication from outstanding faculty, preceptors, and staff, it would not be what it is without the dedicated elected resident leaders who make Queen’s Family Medicine truly stand out:

**FM Program Chief:** Dr. Christine Hanna

**KTI Site Co-Chiefs:** Dr. James Burrows and Dr. Christine Prudhoe

**BQ Site Chief:** Dr. Samantha Graitson

**PK Site Chief:** Dr. Brian Paige

**QBOL Site Chief:** Dr. Katherine Liu

**PGY3 Chief:** Dr. Sandra Huynh

**PHPM Chiefs:** Dr. Michelle Foote and Dr. Golden Gao

**OCP Resident Representatives:** Dr. Paule Bertholet and Dr. Stephanie Michael

**CFPC Resident Representatives:** Dr. Sabrina Dzafovic and Dr. Emily Quick

**PARO Resident Representatives:** Dr. Christine Prudhoe and Dr. Vanessa Audet

**Resident Wellness Representatives:**

**KTI:** Erin Budd (PGY2); Marianne Godbout (PGY2); Alistair MacDonald (PGY1); and Rufina Kim (PGY1)

**BQ:** Andrew Kamphais (PGY2); and Miriam Layefsky (PGY1)

**PK:** Elizabeth Morrison (PGY2); and Sonya Swift (PGY1)

**QBOL:** Vance Tran (PGY1)



Camp Oconto photos Rob Whelan Photography

## EDUCATION



Also vital to the program's functioning are its dedicated leaders, preceptors, and administrative staff, some of whom are represented below.

	Queen's Family Medicine Program	BQ	PK	QBOL	KTi
<b>Directors</b>	Dr. Brent Wolfrom	Dr. Nadia Knarr	Dr. Kim Curtin	Dr. Wei Hsi-Pang	Dr. Kelly Howse
<b>Curriculum</b>	Dr. Nadia Knarr	Dr. Hanga Agoston	Dr. Sandra Khan	Dr. Aubrey Kassirer	Dr. Ian Sempowski
<b>Assessment</b>	Dr. Karen Schultz	Dr. Rob Pincock	Dr. Kathleen Nichols	Dr. Seema Jain Dr. Joel Pariag	Dr. Tara McGregor
<b>Research</b>	Dr. Eva Purkey	Dr. Patrick Esperanzate	Dr. Ben Chan	Dr. Michael Ward	Dr. Eva Purkey
<b>Indigenous Health</b>	Dr. Sarah Funnell	Dr. Erin Falconer	Dr. Michelle Fraser	Vacant	Dr. Sarah Funnell
<b>Faculty Development</b>	Dr. Jessica Ladouceur Dr. Matt Simpson	Dr. Jessica Ladouceur	Dr. Natalie Whiting	Dr. Sina Sajedk	Dr. Matt Simpson
<b>Administration</b>	TBA	Jessica Hughson	Chantal Van Parys	Julie Hodges	Jennifer Brierley, Dana Doll, Sue Jarzylo, Jess Murray, Tammy Parr, Sarah Taylor, Kim Wallace, Jennifer Wells

Finally, the hard work and dedication of the education staff must be recognized. These individuals, who work tirelessly to ensure the program runs smoothly and continues to achieve its stellar reputation, include Jessica Hughson in Belleville; Chantal Van

Parys in Peterborough; Julie Hodges in Oshawa; and Jennifer Brierley, Dana Doll, Sue Jarzylo, Jessica Murray, Tammy Parr, Sarah Taylor, Kim Wallace, and Jennifer Wells in Kingston.





**DR. KIERAN MOORE**  
Program Director

## Public Health and Preventive Medicine

The Queen's Public Health and Preventive Medicine (PHPM) program continued to innovate by providing a new media training day in March 2019, as well as undergoing continuous quality improvement through strategic planning. The co-chief residents, in partnership with Dr. Paul Roumeliotis and the Eastern Ontario Health Unit, planned the media training day. 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. Kelly Howse, Dr. Ian Gemmill, and Dr. David Walker (Queen's University); Dr. George Pasut (Public Health Ontario); Dr. Fareen Karachiwalla (York Region Public Health); Dr. Piotr Oglaza (Hastings and Prince Edward 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 continues to lead the program's transition to competency-based medical education and chairs the competency committee.

A special appreciation and retirement celebration took place in December 2018 for Dr. Geoff Hodgetts, a longtime champion of PHPM within the Department of Family Medicine.

## EDUCATION

### Co-Chiefs

PHPM co-chief residents Dr. Michelle Foote and Dr. Golden Gao 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.

### Annual Resident Retreat

The PHPM program's annual retreat was held in Picton on September 20 and 21, 2018. The curriculum included the following themes:

- Budget and Finance 101 with Dr. Matt Hodge
- Local Business Management with Alida Moffatt
- Fireside Chats with Canadian public health leaders
- Professionalism Training with Pat Stonehouse

### PHPM National Review Course

The Queen's Department of Family Medicine and the PHPM Residency Program hosted the fourth national public health and preventive medicine review course from October 15 to 19, 2018, at Kingston's Donald Gordon Centre, and all Queen's PHPM residents attended. This course was also offered to current practitioners and residents from other PHPM programs in

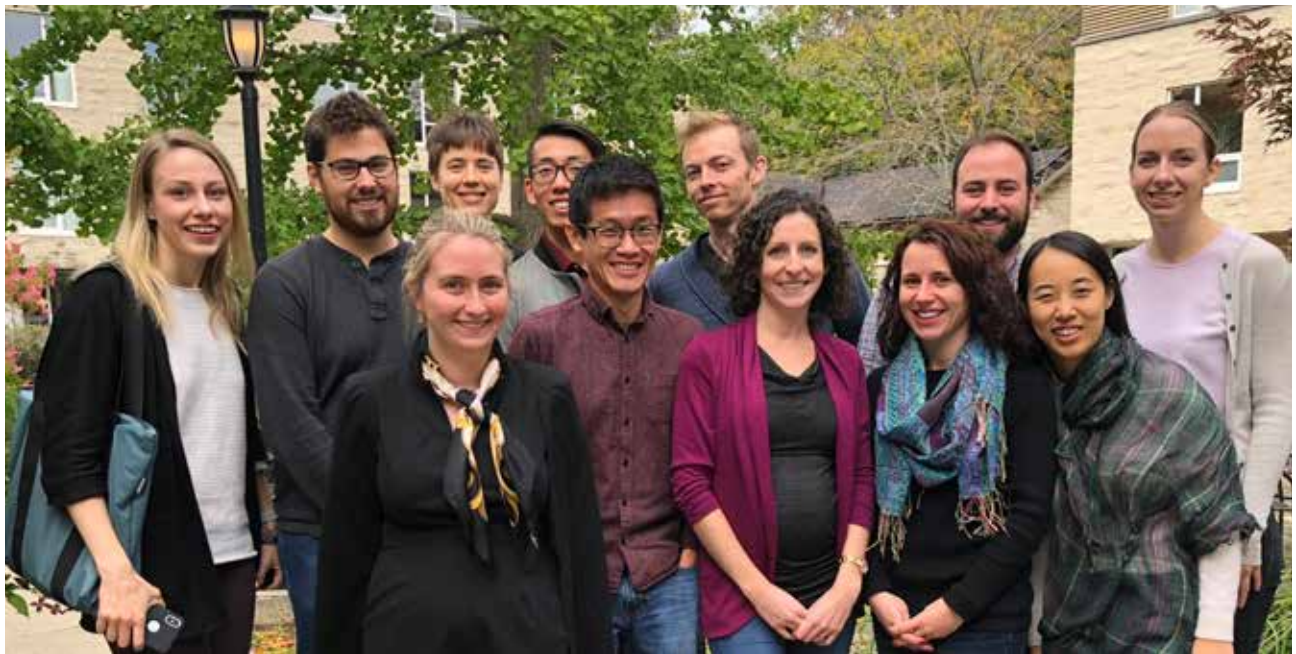
Canada. In total, more than 40 participants attended from across the country. The course features academic sessions delivered by public health leaders from across Canada, a team-based simulation of a public health emergency, and Royal College oral examination preparation. Course evaluations continue to be very positive, and the fifth annual course has been scheduled for October 2019.

### PHPM Strategic Planning

A resident-driven initiative, the PHPM strategic plan aims to renew the mission and vision of the Queen's PHPM Residency Program. The strategic plan development process will help the program to better identify whether its current structure is set up to achieve residents' goals, and where gaps may exist. A SWOT (strengths, weaknesses, opportunities, and threats) analysis has been completed, and subsequent sessions will focus on the development of a logic model and strategic directions. Stakeholder engagement will begin in spring 2019 with the first draft of the strategic plan to be completed by September 2019.

### CaRMS Match Results

The PHPM program continues to receive a record number of applications for its two CaRMS positions. For the fifth consecutive year, the program filled both positions in the first iteration. The program currently has 13 residents, which is beyond its normal capacity of 10.



*Top Row, L-R: Samantha Buttemer (PGY4), Ethan Touishey (PGY3), Lindsay Bowthorpe (PGY3), Golden Gao (PGY2), Richard Mather (PGY4), Mark McKelvie (PGY1), and Kathryn Cleverley (PGY1)*  
*Bottom Row, L-R: Alexa Caturay (PGY5), Hugh Guan (PGY4), Michelle Foote (PGY4), Jenna Webber (PGY2), and Linna Li (PGY5) at the PHPM National Review Course*

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## 2018-2019 RESIDENT RESEARCH AND SCHOLARLY ACTIVITY

### GOLDEN GAO

#### **Presentations:**

Gao G, Di Tomasso J, Chan A, Dawson C, Mihaylova A, Hall-Barber K. (2018) Impact and Correlates of Outside Use Within an Academic Family Health Organization (FHO). Family Medicine Forum 2018. Toronto, ON, Canada.

Gao G, Duff P, Pick N, Braschel M, Ogilvie G, Money D, & Shannon K. (2018) Younger Age of HIV Diagnosis Correlated with Early Menopause among a Cohort of Canadian Women Living with HIV. International AIDS Conference. Amsterdam, the Netherlands.

#### **Current Research:**

Opioid Use Before and After Major Joint Replacement Surgery in the Elderly in Ontario. Principal Investigator: Dr. Kieran Moore.

### JENNA WEBBER

#### **Publications:**

Phillips SP, Webber J, Imbeau S, Quaife T, Hagan D, Maar M, Abourbih J. Sexual Harassment of Canadian Medical Students: A National Survey. EclinicalMedicine.

#### **Presentations:**

Webber J. Trauma & Violence Informed Care in the Perinatal Period. KFL&A Public Health Conference on Maternal Health. Nov 2018.

Webber J. Deconstructing colonialism: Trauma Informed Care with First Nations peoples using substances. Weeneebayko General Hospital Grand Rounds. Sept 2018.

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**The PHPM residency  
program committee  
continues to meet regularly  
to assist with the program's  
development, operation,  
oversight, and planning.**

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## Enhanced Skills

The Department of Family Medicine Enhanced Skills program continues to provide additional training to family medicine residents who have specific career goals that require skills beyond those acquired through a core family medicine residency program.



**DR. MEG GEMMILL**  
Program Director

Of the department's nine enhanced skills programs, seven are active. Among them, four programs – emergency medicine, care of the elderly, family practice-anaesthesia, and palliative care – are category 1, meaning they have national standards. The other three active programs – women's health, intellectual and developmental disabilities, and rural skills – are category 2. The two inactive programs – global health and Indigenous health – are also category 2.

The biggest change this year was in the program's leadership, with the retirement of Dr. Geoff Hodgetts. Dr. Hodgetts provided invaluable support, experience, and direction to the program. Dr. Meg Gemmill has taken over as enhanced skills program director and is excited about this new opportunity. Dr. Sandra Huynh was the PGY3 program chief resident for the 2018-2019 academic year, representing the interests of all PGY3 residents. Dr. Christine Hanna will take over as PGY3 program chief for the 2019-2020 academic year. The hard work and commitment the chief residents give to the program is invaluable.

Another exciting change is the development of a return-of-service emergency medicine training program. Through the leadership of Family Medicine – Emergency Medicine (FM-EM) Program Director Dr. Joey Newbigging, this innovative partnership was created with the Cornwall Community Hospital. This year, the Cornwall program successfully matched two residents to the newly created positions: one graduating PGY2 resident and one re-entry family physician. Going forward, there will be funding for one resident. Dr. Newbigging has been working closely with his colleagues in Cornwall to develop the new program's clinical rotations to ensure all rotations meet the goals and objectives of the Queen's FM-EM program.

Finally, along with all other enhanced skills programs across Canada, Queen's has decided to use the Canadian Resident Matching System (CaRMS) for all category 1 applications. Currently, CaRMS is only being used for the FM-EM program. This process will ensure a standardized and equitable approach to offers for enhanced skills training positions across the country.

## PROGRAM UPDATES – CATEGORY 1 PROGRAMS

The department's **emergency medicine** program – led by Dr. Newbigging and assistant program director Dr. Matt Stacey – is one of the largest FM-EM programs in the country, and is the largest enhanced skills program at Queen's. In addition to the exciting addition of the Cornwall return-of-service program, the FM-EM program has developed new curriculum, including horizontal experiences in toxicology and airway management, a cadaver course to practise airway management and rare procedures, a central line training course, and three airway management OSCE exams annually. Work has also begun on drafting entrusted professional activities (EPAs) as part of the transition to competency-based medical education (CBME).

Dr. Agata Szlanta is the program director for the **care of the elderly** program. The 2017-2018 resident successfully completed the program and is now providing comprehensive primary care in the GTA. Following a year of inactivity in 2018-2019, a resident has been accepted into the program for 2019-2020. The geriatric division has grown, and welcomed Dr. Leah Nemiroff as a full-time internist geriatrician in July 2018; and in spring 2019, faculty attended a care of the elderly retreat.

Dr. Valerie McLeod is the program director of the **family practice – anesthesia** (FP-A) program, which had two residents this year and has one accepted for 2019-2020. A new longitudinal rotation at Lennox and Addington County General Hospital (LACGH) in Napanee was established with the objective to increase the time FP-A residents work with FP-A preceptors and to enhance their exposure to community anesthesia. There is also an opportunity to add some low-acuity ER shifts at LACGH for increased primary care experiences for the residents during their FP-A training year. Other opportunities for potential new rotations are in Cornwall Community Hospital and Humber River Hospital in Toronto.

Effective September 2019, Dr. Craig Goldie is the new program director for the concurrent enhanced skills (family medicine) and sub-specialty (internal medicine) **palliative medicine** programs, having taken over from Dr. Ingrid Harle. For 2019-2020, there will be three enhanced skills residents and no sub-specialty resident in the program. Work on updating and harmonizing assessments between the enhanced skills and subspecialty programs continues, with a completely revised CBME program for the sub-specialty program taking effect in the 2018-2019 academic year. In an effort to expand clinical services, education, and capacity-building for primary palliative care, work continues to expand the department's complement of palliative care faculty.

## PROGRAM UPDATES – ACTIVE CATEGORY 2 PROGRAMS

Dr. Rupa Patel is the program director for the women's health program, which had two residents this year, both with six blocks of clinical experiences. Rotations in Kingston, Ottawa, and Toronto ensure residents can access specialized women's health experiences, and can meet the program's demands for flexibility.

A new rotation with the Community Midwives of Kingston was added, with one resident attending a home birth and multiple postpartum home visits. The program will have one resident in the 2019-2020 academic year.

Dr. Meg Gemmill is the program director for the **intellectual and developmental disabilities (IDD)** program, with support from Dr. Liz Grier, who co-ordinated the residents' clinical work while Dr. Gemmill was on maternity leave. This year, the IDD program had three residents who each did six blocks of training. The residents spend four blocks doing a core rotation in Kingston and then have two blocks of elective at the end of their training. This year's residents are already showing leadership on a national level, taking their skills back to primary care clinics in Montreal and Vancouver.

Dr. Gemmill also assumed the role of **rural skills** program director following Dr. Hodgetts' retirement. There were 21 applicants to this unique program this year, and 14 residents will be completing three or four extra blocks in areas such as obstetrics, hospital medicine, and mental health.

Program	2017-18	2018-19	2019-20
Emergency Medicine Kingston Cornwall	8 -	8 -	8 1 (+1 re-entry)
Care of the Elderly	1	0	1
FP-Anesthesia	0	2	1
Palliative Care	1	2	3
Women's Health	3	2	1
IDD	0	3	0
Rural Skills	12	8	14
Indigenous Health	0	0	0
Global Health	1	0	0



**DR. SHAYNA WATSON**  
Program Director

# Undergraduate Education

A keen group of faculty, community preceptors, and residents participate in all aspects of the department's undergraduate medical education (UGME) program. Through formal teaching in the family medicine courses; leadership roles at the Queen's School of Medicine; small-group work in clinical skills or facilitated small-group learning; 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:

*"I love this course. The lecture format is structured so that the first 20 minutes or so really solidify what we learned in the prep material. The instructors randomly pick students to answer questions about material. I feel this is helping me solidify my learning and provides an opportunity to discuss more difficult concepts."*

*"This course is extremely well organized. I really appreciated that the concepts are reiterated frequently, and that tangible examples are provided for every scenario explored."*

*"This class is very well taught and the course design is outstanding. Students always come prepared because the amount of preparatory material is manageable and it is well explained through videos, narrated slides, and modules. In class, professors are interactive and are able to explain and test the material in a superb manner. Very enjoyable course."*





*Student Mike Christie, left, with his community week preceptor, Dr. Ian Arnold, in Lanark.*

*"I loved how clinically applicable the content covered in this course was, and how Dr. Gilic and Dr. Simpson made all content very memorable and interesting."*

*"Dr. Simpson and Dr. Gilic are approachable, funny, and engaging."*

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 154 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.

### **Community Week**

At the end of first year, all students participate in a one-week community experience co-ordinated by the program's friends and partners at the Rural Ontario Medical Program (ROMP) and Eastern Regional Medical Education Program (ERMEP). Communities across southeast and central Ontario welcome students to become a part of the community for the week to see what it's like to live and work there. Community week is a great end to first year, as it consolidates students' learning, and provides a window into what real practice is like. Sometimes, the community makes students feel so welcome, they request to go back for their clerkship placement.

Mike Christie thanked his preceptor on Twitter with this: "Thanks Dr. Arnold for a great week. A mentor, a gentleman, and a skilled country doctor."

## EDUCATION

### Family Medicine Interest Group (FMIG)

Sophie Rossini (Class of 2021) and Rohini Pasricha (Class of 2022) provide leadership to the Queen's Family Medicine Interest Group (FMIG), which promotes family medicine as a top career choice. Ramita Verma (Class of 2020) entered clerkship and continued to provide support to the present co-chairs.

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.

### Clerkship

The family medicine clerkship rotation is regional, and students are placed from Kenora to Cornwall. Most 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.

Akshay Rajaram, who started medical school by spending community week in the Parry Sound region, went on to spend his core family medicine clerkship rotation in Wasaga Beach/Collingwood. Like so many of the program's students, the chance to be part of a medical community was a career-defining experience for him:

*"I was very fortunate to start clerkship on family medicine and spend six weeks in Wasaga Beach and Collingwood. During this time, I was exposed to the full scope of family medicine, and learned from my primary preceptor as he cared for patients in the clinic, on the wards, and in their home. I also had the opportunity to spend some time in the emergency room, and gained a tremendous appreciation for how family doctors were able to swiftly wield broad knowledge bases and skills to manage diverse presentations, from children with coughs and rashes to multi-level resuscitations. These formative experiences set the stage for the rest of my rotations in clerkship, and will continue to influence my career as a family medicine trainee."*

Each year, 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, through which they 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.

In recent years, leaders from undergraduate medical education and regional education have worked with ROMP to build on existing ties to Collingwood, and in 2018, the first students participated in this exciting learning experience. They were active participants in the community and worked in the offices, emergency and operating rooms, and wards with their preceptors in family medicine, anesthesia, OB/GYN, surgery, emergency medicine, and orthopedics. They also participated in community outreach, in the youth career fair, and the Georgian Bay Innovation and Quality Day, a collaboration between Collingwood General and Marine Hospital, ROMP, Georgian College, and the Town of Collingwood.



*Claire Tardif and Dan Weadick were Queen's inaugural students at Georgian Bay Innovation and Quality Day.*

In 2019, the integrated experience grew again as an 11-month integrated clerkship launched in Bowmanville-Oshawa-Lakeridge (QBOL). This longitudinal experience builds on the established strengths of the QBOL postgraduate team and the leadership of Drs. Wei-Hsi Pang, Randy Wax, and Mike Ward. Clerks are based in Bowmanville and area for a longer and more integrated experience that includes tertiary care experiences in Oshawa.

Queen's students experience family medicine from the first term of first year, in the Queen's Family Health Team's (QFHT) after-hours clinic, QFHT observerships and electives, and clerkship placements across the province ranging from six weeks to 11 months.

Kim Wallace, undergraduate program assistant, is involved in every aspect of these educational opportunities for students, often problem-solving the unexpected. With her calm and kind approach when engaging with students, preceptors, faculty, and provincial organizations, Kim represents the department exceptionally well.

### Preceptor Mentorship Awards

The Queen's Office of Distributed Medical Education selected Dr. Elaine Blau (community family physician in Tobermory and preceptor in the program's family medicine clerkship) and Dr. Kirk Haunts (preceptor and community family physician in Cobourg) from more than 1,500 community preceptors to receive regional education mentorship awards this year.

### Student Awards

From a list of excellent candidates from the graduating class of 2018, the following were chosen for family medicine awards:

Kousha Azimi	Pamela C. Williams Memorial Award
Michael Kroeker	Professor's Prize in Family Medicine
Wilson Lam	Philips Macdonnell Memorial Award
Laura MacMillan Jones	James Walker Wood Scholarship in Medicine and Matthews Medal in Family Medicine
Akshay Rajaram	CFPC Scholarship
Jocelyn Stewart	Shane Klein Scholarship
Aleksander Trajkovski	CFPC Medical Student Leadership Award
Kathryn Trebuss	Rattray Scholarship in Family Medicine and G.H. Ettinger Scholarship

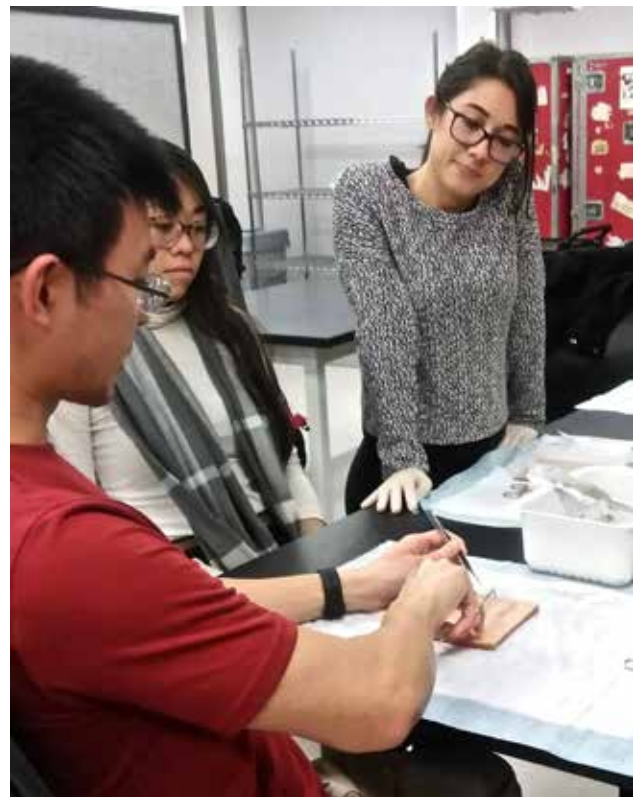
### Family Medicine Undergraduate Education Committee

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 individuals for their contributions to this committee and these efforts:

**Faculty** – Drs. Meg Gemmill, Fil Gilic, Kelly Howse, Susan MacDonald, Tara McGregor, Karen Schultz, Matt Simpson, Shayna Watson, and Brent Wolfrom

**Residents** – Drs. Jordan Anderson, Samantha Britton, Timothy Chung, Megan Collie, Tom Curry, Wilson Lam, and Daniel Mendoca

**Students** – Rohini Pasricha, Sophie Rossini, and Ramita Verma



*Dr. Wilson Lam (PGY1, KTI) demonstrates for students Victoria Lee-Kim and Alessia DiCarlo at an FMIG "All Things Sharp" workshop.*





# Clinical Services

QUEEN'S FAMILY HEALTH TEAM

# Queen's Family Health Team

Now in its 13th year of operation, Queen's Family Health Team (QFHT) continues to provide exemplary clinical care and service to patients. Changes in the past year are reflective of the general population demographics, with several retirements of our "baby boomer" physicians and the changing demographics of their incoming replacements.



**DIANE CROSS**  
Clinic Manager



**DR. KAREN HALL BARBER**  
Physician Lead

## Clinic Overview

Over the 2018-2019 year, QFHT family physicians accepted more than 1,000 new patients. The combined patient enrolment for the Kingston and Belleville sites was 29,481 patients on March 31, 2019.

Access to family physicians' practices in Kingston continues to be a concern, as we currently have a new-patient wait list of more than 1,200 individuals, and receive calls, emails, and requests from 100 to 150 additional individuals each month. This issue of family physician access has been raised and discussed with regional FHTs and the South East LHIN. In comparison to other areas of the province, the Kingston area has not been designated as under-served.

In July 2018, significant faculty physician retirements necessitated a re-organization of the Kingston clinic areas (10 clinic team groups in two building locations). Drs. Ian Casson, Jane Griffiths, and Ruth Wilson retired in June 2018. Dr. Cathy Vakil retired in February 2019 and Dr. David MacPherson in May 2019. The clinic re-organization changes required considerable planning (EMR schedule changes, support staff relocation, phone extensions, signage, communication with patients, etc.), and co-ordination of many moving pieces. As a follow-up with our patients, the annual patient experience survey included questions regarding how the change in physician, clinic location, staff, etc., had been managed from their perspective. As with any change of this magnitude, there were varying responses from patients. Many, after seeing their family physician for more than 20 years, felt a personal loss.

As part of the department's strategic-planning process, initiated in fall 2018, clinical staff, advisory board members, community agencies, partners, and stakeholders were included in several discussion forums and meetings in developing the 2019-2024 plan.

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## CLINICAL SERVICES

### Programs

As the overall QFHT patient numbers continue to increase, support from, and access to, allied health professionals and programs necessitates review. Group programs offer an opportunity for allied health professionals to present information and lead discussions while also facilitating patients learning from one another. Group programs are led by our nursing staff, dietitian, pharmacist, and social workers. Areas of focus include chronic pain; smoking cessation; breastfeeding and infant feeding; best health, best weight; craving change; anxiety and depression; facing uncertainty; and, new in 2018, sleep therapy. Most group programs are open to the Kingston community (not limited to QFHT patients), consistent with the Ministry of Health's directive to improve patient access to allied health services.

One particular need identified for patients is in the area of opioid dependence. The QFHT created a safer opioid prescribing program in fall 2017 that was specifically designed for the treatment of patients with non-cancer-related chronic pain on high doses of morphine or equivalent opioids. Initially, the program provided a coaching/mentoring opportunity for physicians, centred on a monthly drop-in, case-based rounds. These events were led by physician colleagues from the North Kingston Community Health Centre, where significant work had already been done in this area, and our QFHT pharmacist. The feedback has been positive, with results and processes shared broadly at meetings with Kingston, Frontenac, Lennox and Addington Public Health.

Providers continued this year to offer patient tapering, support physicians' efforts in addressing patients with opioid dependencies, and improve care. Based on physician feedback, a renewed plan of services and support was developed in November 2018. The breadth and scope of opioid-prescribing issues requires a long-term perspective. Success over the past year is reflective of our physicians' commitment to change, and an understanding that some patients require additional time and support.

Programs and services to support patients with chronic non-cancer pain at the QFHT include social work counselling support, pharmacist consults for medication review, and the new group program for patients with insomnia, as sleep issues are a common side-effect in patients reducing their opioid medications.

The QFHT's sleep therapy group program was developed in consultation with a clinical psychologist whose primary expertise is sleep therapy. Our pharmacist and social worker participated in cognitive behavioural therapy for insomnia (CBT-I) training sessions to gain the appropriate skills in leading

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**"I have really enjoyed and appreciated this program" ... "All the tools needed for a good night's sleep" ... "Good group!"**

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this six-week program, launched in June 2018 for adults who have chronic insomnia and who wish to learn strategies to restore good sleep. Based on a CBT-I approach, the program involves learning an effective set of techniques that include scheduling time in bed and learning strategies to deal with thoughts that interfere with sleep.

The program was delivered three times this year, with the majority of patients significantly reducing their Insomnia Severity Index and successfully reducing or eliminating their use of sleep medications.

In a feedback survey, patients commented that: they were happy not to be alone in their struggle to sleep well; QFHT staff members were knowledgeable and supportive; material was presented in a comfortable way; and practical strategies for success were provided.

"I have really enjoyed and appreciated this program" ... "All the tools needed for a good night's sleep" ... "Good group!"

With the increasing number of active patients, the after hours clinic at Kingston experienced an overall increase in patient utilization. In April 2018, the Belleville Queen's Family Health Organization (FHO) offered its first after hours clinic, which operates Monday to Friday from 5 p.m. to 8 p.m. and sees patients who have urgent/acute health concerns. (See graph next page.)

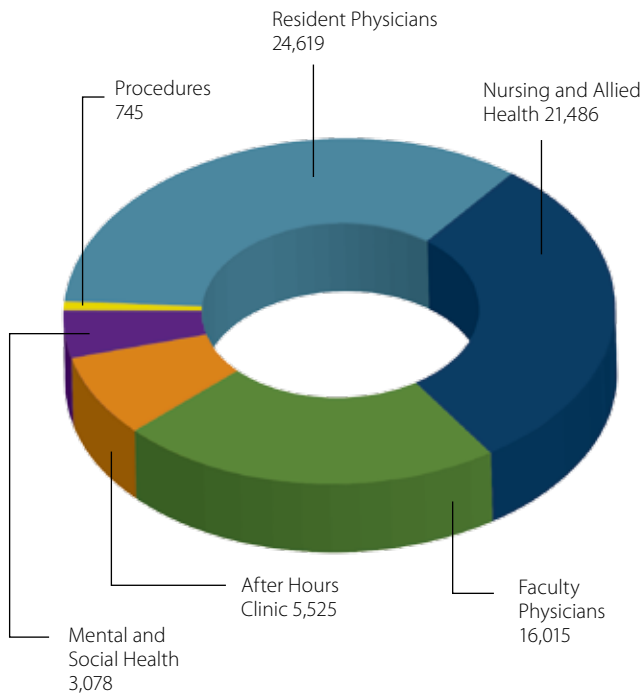


## QFHT PATIENT VISITS

### Kingston Site

Total Patient Visits between April 1, 2018, and March 31, 2019

Over 71,400 Total Visits

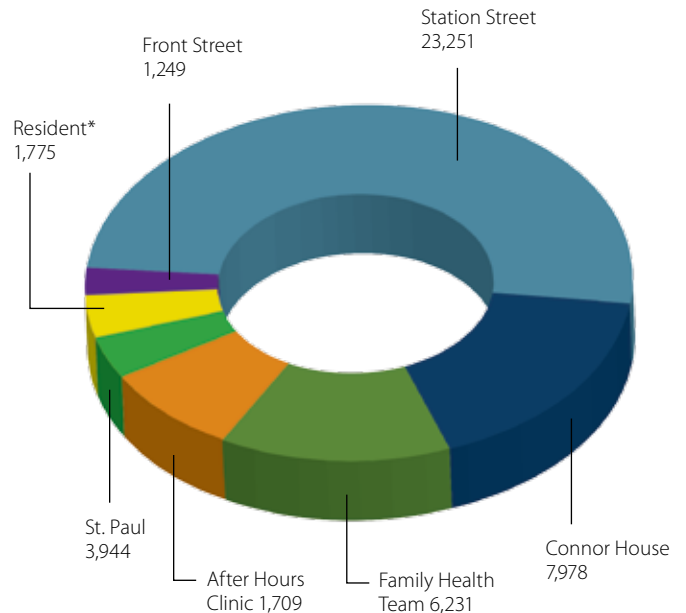


## QFHT PATIENT VISITS

### Belleville Site

Total Patient Visits between April 1, 2018, and March 31, 2019

Over 46,000 Total Visits

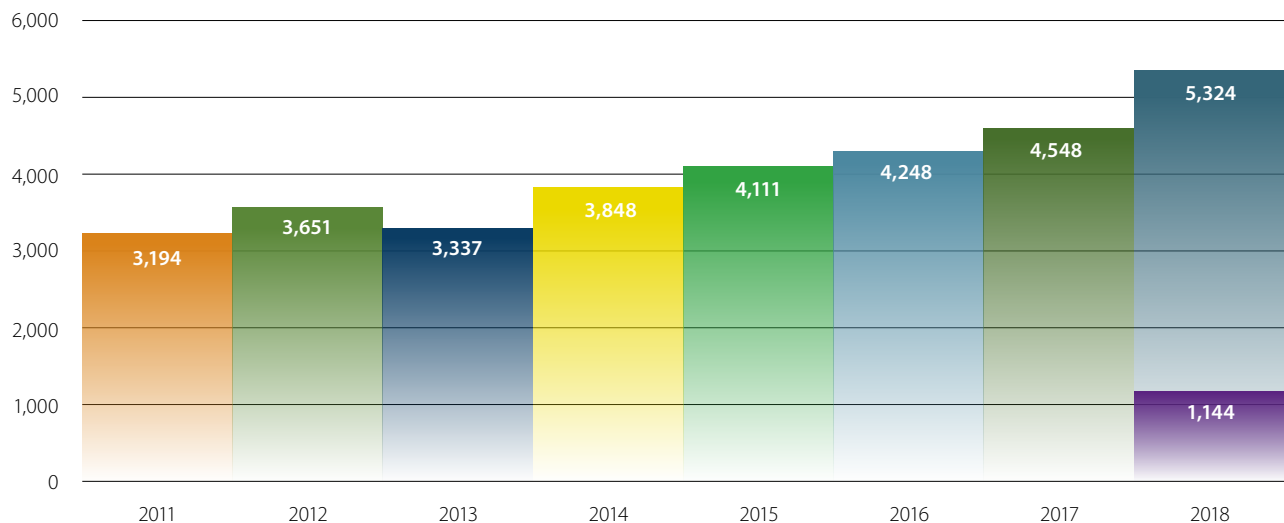


\*Residents move from building to building, and sometimes patient appointments are not scheduled directly with the resident. Residents see more patients than indicated on this chart, with these visits included in the location totals.

## AFTER HOURS CLINICS

Kingston Site (2011-2018)

Belleville Site (Opened April 2018)



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## CLINICAL SERVICES



*QFHT Advisory Board Chair Eleanor Rivoire addresses a group at the department's strategic-planning retreat in Picton. (Dr. David Zelt, Kingston Health Sciences Centre, at right.) Tim Forbes/Forbes Photographer*

### QFHT Advisory Board

In fall 2018, the QFHT Advisory Board welcomed a new chair, Eleanor Rivoire, who has been a board member for four years. Rob Wood, who served in this role for six years, will continue his work with the board as past-chair. Two new board members also joined the group, adding diversity and new skills. Agenda items at the quarterly QFHT Advisory Board meetings included presentations on a social prescription program, strategic-planning discussions, a seniors' supportive living model, and Compassionate Communities Kingston. Advisory board members are well-connected with various stakeholder communities.

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 St. Lawrence College; financial services; consulting and communications organizations; 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 various topics.

### Staff Workshop

The annual staff workshop in February 2019 was developed on the theme of creating a positive workplace. Guest speaker Meg Soper, RN and motivational humorist, shared her entertaining and engaging style that captivated her audience and provided strategies for working together as a team. Her humour with respect to working with others across the generations was particularly well-received.

Françoise Mathieu, mental health counsellor, presented on working in the unique environment of health care, where we regularly face secondary trauma and compassion fatigue through our patient interactions. She provided helpful advice on monitoring personal warning signs that we may be getting overloaded with stress (physical, emotional, and behavioural). Both speakers emphasized the benefits of creating a healthy workplace environment and the value of maintaining a sense of balance.



# Research

CENTRE FOR STUDIES IN  
PRIMARY CARE



**DR. SUSAN PHILLIPS**  
Director of Research

## Centre for Studies in Primary Care

The Centre for Studies in Primary Care (CSPC) has had a busy and productive year of scholarly work and research programs, currently managing about 37 projects of varying size, scope, and duration. The centre continues to mobilize knowledge through numerous publications and presentations, and is viewed as an important contributor at national and international conferences related to the advancement of knowledge in primary care.

Dr. Susan Phillips, Director of Research, brought back “Research-in-Progress” rounds, which are quickly gaining momentum, as faculty and staff meet over lunch to hear about projects under development and to provide feedback to those who are developing these studies. It is a great opportunity to build research skills, and encourages collective thought aimed at building robust studies and enabling knowledge translation early in a project.

The centre continues to house the Canadian Primary Care Sentinel Surveillance Network (CPCSSN) – a major national initiative co-ordinated in the Queen’s Department of Family Medicine and a tool that enables extensive research on the diagnosis and management of illness. The CPCSSN data is now recognized as integral to continuous improvement in the primary-care setting. The network welcomes Dr. Sabrina Wong and Dr. David Barber, incoming CPCSSN co-chairs.

The department embarked upon an inclusive and consultative process this year to renew its strategic plan for the next five years, and the CSPC played an active role. The centre contributed to identifying strategic priorities, objectives, and actions that will help steer the department forward in a progressive and collective way to ensure alignment with the needs of the populations it serves – patients, learners, and communities. The departmental plan will be a framework for the centre to now engage in its own process of strategic planning to support scholarship in family medicine, continue to partner with community-based researchers, engage patients in the process of discovery and knowledge creation, and enhance research capacity and quality-improvement activities.





*Dr. Alenia Kysela chats with resident physician Brendan Caraher (PGY2, PK) at Primary Care Research Day, at which residents present their research projects.*

Tim Forbes/Forbes Photographer

### **Primary Care Research Day 2019**

Under the direction of Dr. Colleen Grady (DBA), CSPC Research Manager, the Centre for Studies in Primary Care hosted its 15th annual Primary Care Research Day on February 28, 2019, at Kingston's Four Points Sheraton. Residents from all four sites presented their PGY2 academic research projects as either oral or poster presentations. This year's keynote speaker was Dr. Minna Johansson, Cochrane Sweden Fellow, General Practitioner, Herrestad HCC, Region Västra Götaland. Dr. Johansson presented two talks: "Why the World Needs More Primary Care Research – Personal Reflections Based on My Path into Research" and "Evaluating Benefits and Harms Of Screening – The Streetlight Effect?" (See Accolades, Page 8, for this year's Best Academic Project award winners.)

To learn more about the CSPC's research activities and project highlights, consult the CSPC's website at [queensu.ca/cspc/](http://queensu.ca/cspc/) and follow along on Twitter @CSPC\_QueensU.

## RESEARCH

### FACULTY FUNDING HIGHLIGHTS

Peer-Reviewed Grants	Title of Project	Awarded
I. Bayoumi (PI)	Targeting child mental health and household poverty: Impact of a poverty intervention in primary care on preschool children's emotional and behavioural health. Southeastern Ontario Academic Medical Organization (SEAMO).	\$ 99,960
I. Bayoumi (PI)	Targeting child mental health and household poverty in primary care. Faculty of Health Sciences Research Initiation Grant.	\$ 30,000
I. Bayoumi (PI)	The impact of financial incentives and primary care model on health care utilization for people with Schizophrenia and Bipolar Disorder. Centre for Studies in Primary Care Research Initiation Grant.	\$ 15,000
C. Donnelly (Co-PI)	Oasis senior supportive living: A model for active aging-in-place. Ontario Ministry of Health and Long-Term Care, Baycrest Centre for Ageing and Brain Health Innovations, Ontario Ministry of Seniors and Accessibility.	\$ 1,123,000
C. Grady (Co-PI)	Effectively engaging physicians in the NSM LHIN to enable improved patient care. Physicians' Services Incorporated Foundation.	\$ 14,500
M. Green (PI)	IDEATE - InDigEnous heAlTh equity network for primary care and policy research in Alberta. Canadian Institutes of Health Research.	\$ 75,000
J. Ladouceur (PI)	Effectiveness of PlanWell decision aid in engaging hospitalized older patients and improving goals of care conversations with their physicians. Centre for Studies in Primary Care Community Research Initiation Grant.	\$ 8,861
T. McGregor (PI)	Resident and Preceptor Perceptions of Assessment: How much is enough? Centre for Studies in Primary Care Research Initiation Grant.	\$ 12,750.85
S. Phillips (Co-PI)	Gender-based inequalities in adolescent health in Canada. Canadian Institutes of Health Research.	\$ 500,000
S. Phillips (PI)	GENDER-NET Plus, gender, and UN sustainable development goals: Evolving gender differences in health & care across cohorts. Canadian Institutes of Health Research/ European Union/ Swedish Research Council.	\$ 1,117,313
M. Ward (PI)	Do community preceptors prepare for academic promotion? An assessment of their interest and understanding of the process. Centre for Studies in Primary Care Community Research Initiation Grant.	\$ 9,302
B. Wolfrom (PI)	Fostering leadership development in family medicine: How do faculty effect educational outcomes? Centre for Studies in Primary Care Research Initiation Grant.	\$ 14,893.69



## FACULTY FUNDING HIGHLIGHTS

Contracts	Title of Project	Awarded
D. Barber (PI)	Enhancing case definition of frailty in primary care and engaging in knowledge translation/exchange with CPCSSN clinicians. Canadian Frailty Network.	\$ 60,000
R. Birtwhistle (PI)	The implementation of the 'CPCSSN Data Presentation Tool' in primary care clinics to enhance the surveillance, prevention and management of chronic disease. Public Health Agency of Canada.	\$ 536,199

## PUBLICATIONS AND PRESENTATIONS

### Publications

- Adams O, Aitken A, Allin S, Belanger S, Burch J, Carson AS, Davidson JJ, Denny K, Golding L, **Green ME**, Fraser N, Medves J, Muscade J. Innovation and healthcare for Indigenous Peoples. In Carson AS, Richard Nossal K (Eds.), A Canadian Healthcare Innovation Agenda –Policy, Governance and Strategy. Montreal, Quebec: McGill-Queen's University Press.
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- Bélanger E, Pérez-Zepeda MU, Castrejón-Pérez RC, Ahmed T, Moullec G, **Phillips SP**, Zunzunegui MV. Domains and determinants of a person-centered index of aging well in Canada: A mixed-methods study. Canadian Journal of Public Health. 2018; 109(5-6): 855-865.
- Bell J, **Purkey E**. Trans individuals' experiences in primary care. Canadian Family Physician. 2019; 65(4): e147-e154.
- Carver L, Beamish R, **Phillips SP**. Successful aging: Illness and social connections. Geriatrics. 2018; 3(1): 3.
- Carver L, Beamish R, **Phillips SP**, Villeneuve M. A scoping review: Social participation as a cornerstone of successful aging in place among rural older adults. Geriatrics. 2018; 3(4): 75-91.
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9. **Dalgarno N, Griffiths J, Schultz K**. Competency-based medical education implementation: How are we shifting the culture of assessment? 2018 World Summit on CBME. Basel, Switzerland. August 25-29, 2018. [Oral]
10. **Dalgarno N, Han H, Schultz K, Griffiths J**. Feedback on feedback. Improving preceptor feedback on electronic workplace-based daily assessments in a competency-based medical education world. International Conference on Residency Education (ICRE). Halifax, Nova Scotia. October 18-20, 2018. [Poster]
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14. **Ehsani B, Queenan J, MacKenzie J, Birtwhistle R**. Predictive modeling for hunter syndrome: An example of patient classification and risk prediction for a rare disease using electronic medical records from the Canadian Primary Care Sentinel Surveillance Network (CPCSSN). North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Poster]
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16. **Gilic F, Sempowski I**, Blagojevic A, **Schultz K**. "Nightmares" course is an effective acute care teaching tool for family medicine residents. Family Medicine Forum (FMF). Toronto, Ontario. November 14-17, 2018. [Oral]
17. **Grady C, Knarr N, Wolfrom B, Schultz K**. Defining learning objectives and assessment of leadership skills to inform curriculum in family medicine postgraduate program. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 10, 2018. [Poster]
18. **Grady C, Wolfrom B, Dalgarno N, Schultz K**, Bishop K, Edwards P, Chan W, Laverty C, **Roberts L**. Integrating a leadership curriculum into a family medicine residency program. 2018 International Conference on Residency Education (ICRE). Halifax, Nova Scotia, October 20, 2018. [Oral]
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## RESEARCH

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30. **Morkem R**, **Queenan J**, **Barber D**. Material and social deprivation and receipt of opioid medication in primary care. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Poster]
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34. **Phillips SP**, Lakkadghatwala R. Can a brief clinical intervention help parents build preschoolers' social and emotional strengths? North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Poster]
35. **Phillips SP**. How to address sex and gender in research methods, analysis, and interpretation. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Oral]
36. **Phillips SP**. Gender, genetics, generations and medicine. Homecoming Continuing Medical Education, Queen's University. Kingston, Ontario. October 20, 2018. [Oral]
37. **Phillips SP**. Professionalism, professionalization, compassion and empathy: An untenable co-existence? The Canadian Conference on Medical Education. Halifax, Nova Scotia. April 28-May 1, 2018. [Oral]
38. **Phillips SP**. Professional power meets gender vulnerability: Sexual harassment of medical women. 19th Annual Women's Health Care Seminar. Toronto, Ontario. April 26, 2018. [Oral]
39. **Phillips SP**. Mood improves over time in older adults. Canadian Geriatrics Society. Montreal, Quebec. April 19-21, 2018. [Oral]
40. Premji K, Ryan B, Hogg W, Glazier R, Wodchis W, Frymire E, Freeman T, Kiran T, **Green ME**. Does patient-reported access to primary care correlate with access bonus achievement? A study of an Ontario "Pay-for-performance" incentive payment. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Poster]
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42. **Purkey E**, Beckett T, Soucie K, MacKenzie M, Davison C, Bartels S, Korpall D. Experience of Emergency Department use among persons with elevated ACE scores. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Poster]
43. **Purkey E**, MacKenzie M. Palliative care and end of life needs of vulnerably housed. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 11, 2018. [Oral]
44. **Purkey E**. What can health workers do to address violence endemic in their communities (part 1&2). 2018 Network: TUFH Conference. Limerick, Ireland. August 16-20, 2018. [Oral]



45. **Purkey E.** Pigiaqtitsijit as a Cornerstone of Community Wellness: Collaborative training for emerging leaders in Arviat, Nunavut. Indigenous Health Conference. Toronto, Ontario. May 24-26, 2018. [Oral]
46. **Purkey E.** Preliminary results: Adverse Childhood Experiences as a predictor of emergency room utilization. CAEP 2018: Strengthening Connections, Canadian Association of Emergency Physicians. Calgary Alberta. May 26 – 30, 2018. [Oral]
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49. **Schultz K, Wycliffe-Jones K, O'Keefe D.** Avoiding potholes and road-blocks: Family Medicine residency program directors share lessons learned about what works in successful CBME implementation. International Conference on Residency Education (ICRE). Halifax, Nova Scotia. October 18-20, 2018. [Workshop]
50. **Thorpe C, Brown J, Mowat S, Hameed S, Scime N, Green ME.** Strategies for engaging family physicians in primary health care system change. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 12, 2018. [Poster]
51. **Vakil C.** Physician advocacy and the nuclear energy industry. Pegasus Conference 2018: From evidence to action. Toronto, Ontario. April 28, 2018. [Oral]
52. **Van der Goes T, Schultz K.** The Preceptor as the assessment tool. 2018 World Summit on CBME. Basel, Switzerland. August 25-29, 2018. [Poster]
53. **Ward M, Schultz K, Griffiths J, Grady C, Roberts L.** Understanding and promoting educational scholarship among community family medicine preceptors. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 10, 2018. [Poster]
54. **Wolf from B, Grady C, Dalgarno N, Schultz K, Bishop K, Edwards P, Chan W, Laverty C, Roberts L.** Integrating a leadership curriculum into a family medicine residency program. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 10, 2018. [Poster]
55. **Wong S, Langton J, Katz A, Fortin M, Godwin M, Green ME, Grunfeld E, Hassani K, Kendall C, Liddy C, Ploeg J, Wodchis W, Haggerty J.** Cross-jurisdictional research in Canada: Developing common indicators across 12 CBPHC Teams. Joint Meeting: Accelerating the Impact of Cross Jurisdictional Primary Health Care Research in Canada. Montreal, Quebec. December 2018. [Oral]
56. **Wu P, Leger D, Adler S, Arman M, Archibald, Schultz K, et al.** Does spaced-education encourage clinical case completion in residency? Family Medicine Forum (FMF). Toronto, Ontario. November 14-17, 2018. [Poster]
57. **Wycliffe-Jones K, O'Keefe D, Schultz K.** Learn from our experience! Family Medicine Residency Program Directors share lessons learned about CBME implementation in Canada. 2018 World Summit on CBME. Basel, Switzerland. August 25-29, 2018. [Oral]
58. **Zevin B, Dalgarno N, Martin M, Grady C, Chan L, Houlden R, Birtwhistle R, Smith K, Morkem R, Barber D.** The management of morbid obesity in primary care: A mixed methods study. North American Primary Care Research Group (NAPCRG). Chicago, Illinois. November 10, 2018. [Poster]
59. **Zevin B, Morkem R, Barber D, Anvari M, Dalgarno N, Houlden R, Smith K.** Examining the Gap Between Eligible and Referred Patients for Bariatric Surgery in South Eastern Ontario. Obesity Summit, Ottawa, Ontario. April 2019. [Special Feature Pecha Kucha Oral presentation & Poster]



# Inside the Department

FACULTY DEVELOPMENT

FACULTY RECRUITMENT

INFORMATION MANAGEMENT

WORKPLACE SAFETY

# Faculty Development

The most important resource the Queen's Family Medicine program has is its faculty members. A robust faculty development program is an essential element in nurturing and supporting this invaluable resource.



**DR. JESSICA LADOUCEUR**  
Faculty Development Director

This year, the overall structure of the faculty development program has evolved. The program now has a faculty development/continuing professional development director for the Kingston site (Dr. Matthew Simpson) and a faculty development director for the community sites (Dr. Jessica Ladouceur). Each community site will also have a faculty development lead: Dr. Ladouceur at Belleville-Quinte, Dr. Natalie Whiting at Peterborough-Kawartha, and Dr. Sina Sajed at Oshawa-Lakeridge. This change links continuing professional development and faculty development within the department. Strategic planning for the department's faculty development program is currently underway, including the creation of a framework, vision and mission statements, and goals for the program. At the Belleville-Quinte site, a faculty needs assessment has been distributed and will soon be shared with the other sites. Ultimately, each teaching site will offer programming that meets its unique needs, while aligning with the program's overall goals. Each site will offer comprehensive programming including events; courses; longitudinal, online, and mentorship opportunities; and, ultimately, a community of practice.

The scope of faculty development is to support faculty in all their various roles:

## Educators

Common areas of focus have included large- and small-group instruction, feedback and assessment, teaching and learning in the clinical setting, and specific high-priority content areas such as Indigenous health and trauma-informed care.

## Leaders

Health-care delivery, clinical practice, and medical education are rapidly changing, and equipping faculty with leadership and management skills is essential. Potential areas of focus include leadership styles, conflict resolution, negotiation, team building and collaboration, change management, and organizational change.

## Researchers and Scholars

Faculty development has a critical role to play in developing research capacity within the department and especially at the community sites. Potential areas of focus include supervising resident research, understanding the principles of research design, and academic writing.

## Career Development

Faculty development programming should support career progression and growth. Potential areas of focus could include career planning, resources related to academic roles, and assessing process and outcome of work.



**DR. MATT SIMPSON**  
Faculty Development Director

# Faculty Recruitment



**LAURA KENNEDY**  
Faculty Support Co-ordinator

## **Academic Family Physician (Half-Time)**

The Department of Family Medicine (DFM) will soon name a successful candidate in its recruitment efforts for a half-time academic family physician. The incumbent will primarily be responsible for providing patient care to individuals rostered to the Queen's Family Health Team, and will participate in various academic responsibilities, as the department determines.

## **Physician – Hospitalist: Providence Care Hospital Inpatient Rehabilitation Units (Full-Time or Part-Time)**

Providence Care Hospital, the DFM, and the Department of Physical Medicine & Rehabilitation are seeking a full-time or part-time physician for a hospitalist position on the inpatient rehabilitation units at Providence Care Hospital.

Clinical responsibilities will be based within Providence Care's rehabilitation program, and accountability will fall under the DFM's division of hospital medicine. The preferred candidate will work within a team of hospitalists to provide medical coverage for the inpatient rehabilitation units and participate in an on-call schedule. Given Providence Care Hospital's focus on rehabilitation, aging, and mental health, all hospitalists have access to specialist resources including consultations from psychiatry, geriatric medicine, and palliative medicine.

## **Academic Family Physician – Hospitalist (Half-Time)**

The DFM is seeking one half-time academic family physician for a hospitalist position.

The preferred candidate will have a combination of academic and clinical experience, and will have their clinical responsibilities based within Providence Care's complex medical program. Accountability will fall under the DFM's hospitalist medicine division.

The preferred candidate will continue to strengthen DFM's existing collaboration with Providence Care, providing (a) medical coverage to a 50-bed complex care in-patient unit at the new Providence Care Hospital and (b) call coverage to these in-patient complex care beds, with the goal of achieving one call schedule for all members providing hospitalist medicine at Providence Care Hospital.

## **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.





**DR. DAVID BARBER**  
Physician Lead  
Information Management

# Information Management

Over the last year, the information management committee has been focusing on three areas: the department's local IT platform, EMR OSCAR, and participation in the regional health information system procurement.

In 2016, the department implemented the virtual desktop infrastructure, which allows users to access any terminal via a "tap in" with a key fob. All the initial kinks have now been worked out, and the system is working as expected.

As an indication of how quickly the department continues to grow, this infrastructure is already in need of more servers to speed up the system, and this is expected to be in place by early summer.

OSCAR continues to serve the department's clinical needs very well. One of the most important clinical tools at the Queen's Family Health Team in the last decade has been the introduction of e-consults. This system allows the team's health-care providers to send quick questions to specialists with answers in days, which cuts down on unnecessary referrals and speeds up patient care. OSCAR has been able to integrate this system nicely, and discussions are underway for further integration.

The most important IT development regionally is the ongoing procurement of a health information system, with participation among all six hospitals in this region. The department has been involved in gathering requirements for this system to ensure it helps meet the needs of all participating primary-care teams. The potential to integrate health-care information within the region is great, and will bolster the quality of patient care.

# Workplace Safety

**VICKY GARRAH**  
Workplace Safety Co-ordinator

The Queen's Family Health Team (QFHT) participates in submitting annual quality-improvement plans developed by the Ministry of Health and Long-Term Care. These plans represent a public commitment to meet quality-improvement goals.

Part of the QFHT plan addresses continuing commitment to prevent workplace violence, and to put in place safeguards to reduce violent incidents. Work in this area has included installation of security cameras and panic buttons, restricted access to certain areas of the buildings, crisis-intervention education, and signs in waiting rooms that inform patients and visitors of the department's no-tolerance policy on aggressive or violent behaviour.

Most recently, additional security equipment has been installed in the QFHT after hours clinical area, and security personnel have been contracted to conduct on-site sweeps of the building at the close of each clinic. Additional remote panic buttons have also been added to all physician team rooms at the clinics. The department continually looks for areas of improvement in workplace violence prevention, and welcomes feedback from physicians, residents, and staff.

Over the past year, the department has been involved in roundtable discussions with the university's chief privacy officer to help guide the development of new policy and best practices with respect to securing health information. This work continues, and it is expected that new policy will be completed in the near future for all Queen's departments who are considered to be health-information custodians.

# In the Community & Globally

GLOBAL HEALTH CURRICULUM

INTELLECTUAL & DEVELOPMENTAL  
DISABILITIES PROGRAM

PARTNERSHIPS AND PLANNING  
ACTIVITIES





**DR. EVA PURKEY**  
Program Director

## Global Health Curriculum

The department's global health/health equity team has strong leadership at all sites. A major curriculum review in 2018 had input from site leads Dr. Michelle Fraser (Peterborough-Kawartha), Dr. Erin Falconer (Belleville-Quinte), Dr. Wei-Hsi Pang (Bowmanville-Oshawa-Lakeridge), Dr. Eva Purkey (Kingston-Thousand Islands), and newly arrived faculty member Dr. Sarah Funnell, the department's Indigenous health lead.

The curriculum review seeks to highlight the importance of social accountability, to recognize the colonial roots of Indigenous health inequities, and to consider trauma- and violence-informed care as ways to move the curriculum forward. The program's dynamic team will assist with these changes.

Building on the department's goal to enhance Indigenous health curriculum, a new Indigenous health academic day, open to all sites, was rolled out through partnership with Dionne Nolan, Aboriginal Navigator for the South East Regional Cancer Program, and Laura Maracle from Four Directions Indigenous Student Centre. This was a truly excellent day during which Indigenous community leaders came to support the education of PGY1 residents in a multi-sensorial way that was very well received.

In research, residents continue to do important work looking at health challenges facing homeless people, the LGBTQ+ community, and people prescribed opioids, among others. At a faculty level, faculty members at the department's Centre for Studies in Primary Care investigate many health-equity issues, including child poverty, developmental disabilities, and the effects of adverse childhood experiences.





Clinically, the Queen's Family Health Team (QFHT) continues to document equity-seeking populations, including patients needing interpreters, immigrant and refugee clients, and Indigenous persons. The team's staff works hard on this initiative, and these continued efforts are key to enabling the department to track its health-equity mandate in the years ahead.

External to the department, Dr. Purkey was on leave in Thailand for six months (ending in July 2019), where she worked, along with other Queen's faculty members, to build connections between academics there and at Queen's. Dr. Michael Green, Dr. Shayna Watson, and Dr. Brent Wolfrom joined Dr. Purkey for a week in April to assess possibilities for an ongoing international partnership between Queen's Department of Family Medicine and the Mae Fah Luang University School of Medicine, which may present an interesting opportunity for other international partnerships for the department, as well.

*(Top) Drs. Watson and Purkey (with Drs. Green and Wolfrom, centre), brought family members along for their visit to Thailand, keeping the "family" in family medicine.*

*(Left) Dr. Chitlada Utaipiboon, Mae Fah Luang University, takes a selfie with Drs. Wolfrom and Watson.*





*Phaya Mengrai Community Hospital*



*Mae Fah Luang University campus*



*Research workshop with Thai and Burmese teams from Mae Fah Luang University and Mae Tao Clinic (Mae Sot), held at MFU*



*Dr. Eva Purkey (fifth from left), and Dr. Colleen Davison (Queen's Public Health, fifth from right) with Thai and Burmese colleagues from a multi-centre maternal and child equity research project following a workshop at Mae Fah Luang University*

*In front of the Mekong River while visiting Chiang Kong Hospital (with Dr. Waraporn Eoaskoon from Mae Fah Luang University)*





**DR. MEG GEMMILL**  
Program Director

# Intellectual & Developmental Disabilities Program

The Queen's Department of Family Medicine Intellectual and Developmental Disabilities (IDD) program continues to be a leader in research, medical education, and the clinical care of adults with IDD.

## Clinical

Clinic re-organization of the Queen's Family Health Team (QFHT) in July 2018, as well as the retirement of Dr. Ian Casson from his clinical practice, provided the opportunity to distribute the medical care of patients at some of Ongwanada's group homes to new physicians at the QFHT. This accomplished the goal of having one group home in every clinical demi-team, allowing all residents at the Kingston site to be involved in the medical care of patients with IDD who are living in a group home.

The QFHT's physicians now care for patients at 16 group homes. In addition, Ongwanada has created a new group home, for which Dr. Liz Grier will provide medical care.

## Education

The enhanced skills PGY3 program in IDD had a record three residents this year, each of whom completed six blocks of training. These residents have shown commitment to leadership in the field of IDD as they participate in research and national committees, and have plans to return to their home towns of Montreal and Vancouver where they will be a resource in the care of adults with IDD.

Over the past year, Dr. Grier has also worked with six undergraduate medical students who chose an elective in primary care of adults with IDD, and Dr. Gemmill continues to lead the PGY1 curriculum on primary care of adults with IDD.





*Kaitlyn, a person supported at Ongwanada's McKeown Community Residence, enjoyed a day in the country when she had the opportunity to visit a therapeutic riding farm in Harrowsmith. It didn't take long for Kaitlyn to make quick friends with a horse named Candyman. Photo Courtesy Ongwanda*

## Research

Through funding from a SEAMO Innovation grant, the IDD program has had a research collaboration with the Health Links program for the past two years. This project is currently in the knowledge translation phase, and a manuscript has been accepted for publication in the upcoming second special IDD supplemental issue of *Canadian Family Physician*.

New research collaborations include a study with the medical genetics unit at Kingston Health Sciences Centre to study the rational and benefit of genetic assessment for adult patients with IDD of unknown etiology, as well as a study with the Queen's Department of Pediatrics looking at a transition tool for youth with autism spectrum disorder.

## Leadership

Dr. Casson is the chair of the CFPC Developmental Disabilities Program Committee. This committee supports primary care providers who provide care for adults with IDD through activities such as continuing medical education and development of clinical tools. Following the Developmental Disabilities Primary Care Program publication of the 2018 Canadian Consensus Guidelines on Primary Care of Adults with IDD, Dr. Casson, Dr. Grier, and Dr. Gemmill are involved in the preparation of clinical tools designed to support primary care providers in implementing the guidelines. Specifically, Dr. Casson has led a group working to revise the Comprehensive Health Assessment ("Health Check") Tool, based on the IDD Health Check program at the QFHT, the Queen's Family Medicine residency program, and participation in the Health Care Access Research and Developmental Disabilities (HCARDD) research program.

Finally, Dr. Gemmill, Dr. Grier, and Dr. Casson presented at this year's Family Medicine Forum on topics supporting the care of adults with IDD.



# Partnerships and Planning Activities

**ALLEN MCAVOY**  
Strategic Relations Manager

Beginning in fall 2018, numerous consultations with faculty, staff, residents, and community partners played a primary role in the development of the Queen's Department of Family Medicine (DFM) 2019-2024 strategic plan. The department's strategic-planning steering committee – led by Department Head Dr. Michael Green and comprising a patient representative, a site director, the chief program resident, two faculty members, two staff members, and a colleague from the Queen's Faculty of Health Sciences – advised on the strategy-development process to identify priorities and directions for new strategic activities.

The strategic-planning project team led in-person engagement sessions and conducted online surveys with faculty, public health resident physicians, preceptors, staff, and community partners. A strategic-planning retreat in Picton in December 2018 provided an opportunity for participants from across the department and within various communities to consider and integrate ideas, concerns, and priorities that emerged from those information-gathering activities.

The strategic-planning process culminated in March 2019 at a town hall event, where faculty, staff, residents, and preceptors discussed draft priorities for the next five years, and the department approved the plan in late March 2019.

The department's strategic plan aligns with the strategic framework of Queen's University, the Queen's Faculty of Health Sciences, and School of Medicine, all of which provide the foundation for the department to advance its family medicine education and related initiatives, as well as Queen's University's vision.



*Dr. Samantha Buttemer (PHPM, PGY4), left, and strategic-planning steering committee member Sheilagh Dunn (Executive Director, Queen's Office of the Principal), at the department's strategic-planning retreat in Picton in December 2018. Tim Forbes/Forbes Photographer*

## Hospital Medicine

Providence Care Hospital welcomed Dr. Ammar Rashid as chair for the Department of Family Medicine's hospital medicine division in early 2019. Dr. Rashid provides medical coverage for a complex-care inpatient unit at Providence Care Hospital. As division chair, he will also be responsible for developing a practice plan for the hospital medicine division, and he will work with physician colleagues and senior administrators in complex care, physical medicine and rehabilitation, and mental health on eventually achieving a combined call schedule for all hospitalists at Providence Care Hospital. Dr. Rashid will also explore educational opportunities for residents, medical students, and staff interested in hospital medicine.

The department's commitment to implementing a comprehensive approach to hospital medicine aligns with 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 for residents interested in hospital medicine.

## Addictions Medicine

Until recently, there have been no programs to help patients with addictions who are admitted to the Kingston Health Sciences Centre (KHSC). Without a dedicated addictions-medicine service at KHSC, the opportunity to engage patients with addictions during their hospital stay is often missed.

Recognizing the establishment of a multidisciplinary, collaborating team is necessary to address Kingston patients with addictions, the DFM and department of psychiatry have submitted a formal request to the Southeastern Ontario Academic Medical Organization (SEAMO) for funding for addiction medicine faculty positions. Working with the recently launched Substance Treatment and Rehabilitation Team (START), we hope to see outpatient clinics and, eventually, support patients with addictions who are admitted to hospital, regardless of their reason for admission, with space in KHSC to offer inpatient medical withdrawal management and addiction rehabilitation.

This proposal is now with SEAMO's strategic priorities and recruitment committee as part of the DFM's three-year physician staffing and recruitment plan. The proposal recommends the implementation of an addictions medicine consult service at KHSC, which will work collaboratively with community partners. These positions will provide initial addictions medicine consults, prescribe therapies, provide ongoing in-hospital support to the admitting team, and collaborate with outpatient services for discharge planning. This clinical opportunity will provide family medicine residents with an innovative inpatient, medical education experience.

The establishment of such a team to address addiction is also an important step for talent recruitment and retention in an important and yet under-served area. The DFM continues to work with its academic and community partners in moving this proposal forward. A strategic element of the proposal could see the department establish a division of addictions medicine in the future.

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## SECTION COVER PHOTOGRAPHY

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**Front Cover:** Mason, a young patient of the Queen's Family Health Team, entertains resident physician Karen Ngo. *Tim Forbes/Forbes Photographer*

**Education** (Page 9): Residents discover that team-building and getting to know each other is what it's all about at Camp Oconto. *Rob Whelan Photography*

**Clinical Services** (Page 24): Dr. Anthony Train introduces himself to patient Maggie at the Queen's Family Health Team. *Tim Forbes/Forbes Photographer*

**Research** (Pages 29): Resident physicians Ioulia Pronina (KTI) and Christopher Welsh (QBOL) at Primary Care Research Day. *Tim Forbes/Forbes Photographer*

**Inside the Department** (Page 38): Ashleigh Van Luven at reception at the Queen's Family Health Team's Haynes Hall. *Tim Forbes/Forbes Photographer*

**In the Community & Globally** (Page 43): Department faculty members Shayna Watson, Brent Wolfrom, Mike Green, and Eva Purkey with some of their hosts on the steps at the Wat Rong Lord temple during their visit to Mae Fah Luang University in Chiang Rai, Thailand. The university's students spend a couple of weeks at the temple, which is an integral part of the community's health-care delivery system.

**Back Cover:** Residents at Camp Oconto 2018. *Rob Whelan Photography*



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