

DEPARTMENT OF FAMILY MEDICINE

STRATEGIC PLAN

2019-2024



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



Dr. Michael Green Brian Hennen Chair and Head Queen's Department of Family Medicine

The development of the Queen's Department of Family Medicine (DFM) 2019–2024 Strategic Plan is the first step in a multi-year journey, one that begins with positioning the department to build on its existing strengths and meet its challenges over the coming five years.

The plan's title – We are Family Medicine. For Learners. For Patients. For Communities. - speaks to our view that we are the leader in family medicine, and provides a starting point as we move forward together.

This plan reflects a future that will be defined by strategic engagement and renewed participation among faculty, staff, residents, patients, and preceptors, as well as with our community, institutional, and health-care partners. It outlines our priorities, objectives, and actions while remaining flexible to respond to opportunities with our partners and within our communities.

Many individual voices, both inside and outside the department, contributed to the development of this strategic plan. Over a six-month process, faculty, staff, residents, and preceptors participated in a variety of engagement sessions and surveys. We also hosted a day-long workshop retreat during which our community partners provided their valuable insights, and a departmental town hall. Importantly, too, the department's strategic-planning steering committee advised

on the development process. The committee comprised a patient representative, a site director, our program's chief resident, two faculty members, two staff members, and a colleague from the Queen's Faculty of Health Sciences.

We sincerely thank everyone, including our community partners and stakeholders, who participated by offering ideas, thoughtful reflection, and advice. The resulting success of DFM's 2019–2024 strategic plan rests not only on the quality of our initiatives undertaken, but also on the collective commitment of faculty and staff in realizing them. Our team of dedicated faculty, staff, and residents is the foundation that makes this all possible.

Creating a shared understanding of our goals and priorities allows us to work more effectively together. Bringing our mission, vision, and values to life depends upon the commitment of everyone in the department.

The Queen's Faculty of Health Sciences and Queen's School of Medicine launched their five-year strategic plans in 2017. Consistent with their priorities and direction, our renewed mission, vision, and values build consensus behind our own strategies, with action objectives to bring them to life.

By aligning our efforts, we can help the Faculty of Health Sciences meet its mission, which is to "Ask Questions, Seek Answers, Advance Care, and Inspire Change."

Queen's Department of Family Medicine will celebrate its 50th anniversary in 2023. In the years to come, we will demonstrate our commitment to exemplary patient care and education, and to the scientific pursuit of knowledge.



SETTING THE CONTEXT

SIGNIFICANT ISSUES

This strategic plan was developed with awareness of significant issues that may determine the opportunities, and present the challenges, we encounter in the years to come. Among them:

Financial Impact of Ongoing OMA/MOHLTC Negotiations

In mid-February 2019, a board of arbitration settled a four-year contract dispute between the Ontario Ministry of Health and Long-Term Care (MOHLTC) and the Ontario Medical Association (OMA) with a decision that gave physicians a salary increase of at least 3.5 per cent over the next four years. The OMA and MOHLTC will also establish a working group to examine primary care access, among other issues, and make recommendations by summer 2020. Financial implications of such recommendations are unknown.

Alignment with Queen's University/FHS Financial Plans

The Queen's Faculty of Health Sciences' (FHS) and School of Medicine's 2017–2021 strategic plans state: "Through our continued commitment to pragmatism, we recognize the imperative to pursue our strategic aims in a manner that is effective and efficient, and that improves the financial health and sustainability of the Faculty of Health Sciences through thoughtful use of our collective resources and through opportunities for new revenue to support our priorities."

As the FHS has requested that all departments submit structurally balanced budgets, we must demonstrate our ability to do so.

Tied to the FHS's financial consideration, the provincial government announced tuition cuts and student assistance changes in January 2019. While Queen's University works through this impact on its budget, we know the 10-per-cent reduction will apply to the domestic seats for all programs in the FHS. The government also announced changes to the Ontario Student Assistance Program (OSAP), which will affect students who count on that funding source to attend

university. For Queen's, this means a \$31.4-million reduction in operating revenues in 2019–2020, followed by another \$7-million reduction in 2020–2021, as tuition fees remain frozen.

Impact of SEAMO's New Accountability Framework

The Southeastern Ontario Academic Medical Organization (SEAMO) Accountability Framework outlines the connection between (a) the funding SEAMO provides to SEAMO-funded departments and (b) the administrative, academic, clinical, and research deliverables departments are accountable for providing to earn SEAMO funding. SEAMO has engaged faculty to discuss how to refine, enhance, and update accountability metrics. Following consultations, the SEAMO Deliverables Committee will recommend an updated accountability framework to SEAMO governors. This updated framework will affect the department as it meets its administrative, academic, clinical, and research deliverables to acquire SEAMO funding.

Extension of the FM Residency Program to Three Years

Within the last few years, the College of Family Physicians of Canada (CFPC) has been reviewing family medicine training requirements with the potential view of transitioning training from the current two-year program to a three-year program.

Motivation for the evaluation stems from the release of the CFPC's Family Medicine Professional Profile, which notes the importance of family physicians providing a range of care to their patients. An additional year would provide residents with more experience to develop skills in a range of care before entering independent practice.

Beyond financial implications, this program extension would require curriculum redesign, and would impact our training sites and preceptors, etc. The change could also create a potential new role for senior residents training junior residents.

STRATEGIC DRIVERS AND PLANNING ENVIRONMENT

The Department of Family Medicine's external stakeholders have their own specific priorities, but many recurring priorities/themes run through our partners' strategic plans.

Indeed, the Queen's School of Medicine 2017–2022 Strategic Plan, which emphasizes education, research, partnerships, and patient care, helped develop our strategic framework.

To the extent possible, we considered the vision, mission, and priorities of our stakeholders/partners to ensure the department's resulting priorities support them. Those stakeholders/partners included Queen's University, Queen's Faculty of Health Sciences, Queen's School of Medicine, Queen's Regional Education, Southeastern Ontario Academic Medical Organization, Kingston Health Sciences Centre, Providence Care Hospital, the College of Family Physicians of Canada, and the Ontario College of Family Physicians.

We must also consider the Ministry of Health and Long-Term Care's new priorities when they are announced. Similarly, we will need to respond to the strategies and priorities of Queen's University's new principal, who assumes his role on July 1, 2019.

The strategic plans, policy directions, and clinical expectations of our institutional and organizational partners, as well as our community, provided our strategic-planning process important context. These drivers shaped our education, clinical, and research priorities.

Our main strategic-planning considerations included:

Outcome-Related Considerations

- Education deliver innovative postgraduate education programs and undergraduate training opportunities
- Patients and Populations improve care access and system delivery through collaboration and integration
- Research increase capacity, invest in infrastructure, integrate research into practice, and inform health policy
- Social Accountability create equity and address the health needs of populations regionally, provincially, nationally, and globally

Enabler-Related Considerations

- Collaboration address health-system challenges/leverage expertise through partnerships and community organizations
- Communication raise the department's profile, undertake outreach, demonstrate impact, and improve overall communications
- Financial Accountability ensure financial sustainability/transparency given the fiscal restraint environment
- Organizational/Workplace Development foster faculty, staff, and resident recruitment, leadership, and wellness

OUR VISION

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

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



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.

OUR STRATEGIC PRIORITIES



Strengthen and build upon connections and partnerships in and with

 $(P3)_{aa}$

Incorporate social accountability and health equity throughout our work.



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.



Queen's DFM will be recognized as the family medicine and public health and preventive medicine residency programs of choice, preferred for its innovative teaching, impactful research, and comprehensive care. It will build a provincial, national, and international reputation for preparing the next generation of skilled family physicians who can provide care in diverse settings. We will also be recognized for our robust engagement in all aspects of the Queen's undergraduate medical program.

OBJECTIVE 1

CHAMPION COMPREHENSIVE TEACHING

Develop an innovative curriculum and assessment strategy in anticipation of future changes in family medicine and public health practices. Undertake initiatives to prepare family medicine and public health residents for their transition into comprehensive practice, working anywhere.

OBJECTIVE 2

STRATEGIC PARTICIPATION IN UNDERGRADUATE MEDICAL EDUCATION

Be strategic in our participation, presence, and leadership within Queen's undergraduate medical education.

OBJECTIVE 3

Expand the Scholarship that Guides Family Medicine

Foster research and research capacity among faculty and residents across the spectrum of family medicine, with a particular focus on the social determinants of health.





STRENGTHEN AND BUILD UPON CONNECTIONS AND PARTNERSHIPS IN AND WITH COMMUNITIES.

Queen's DFM will be a recognized leader and partner in developing relationships and collaborations that benefit patients, communities, and learners. These partnerships will involve agencies, communities, organizations, hospitals, governments, educators, preceptors, researchers, and other colleagues.

OBJECTIVE 1

SOLIDIFY LEADERSHIP WITH PARTNERS AND IN COMMUNITIES

Solidify our leadership and influence through partnership and governance opportunities with patients, families, communities, policy-makers, and hospitals.

OBJECTIVE 2

STRENGTHEN THE ROLE OF RESIDENCY AND UNDERGRADUATE TEACHING SITES

Engage and amplify the roles of our four residency sites and many undergraduate medical education clerkship locations, including development of strategies for faculty and preceptor recruitment, retention, and engagement to strengthen community teaching and research capacity. Support junior researchers, in particular, doing research on medical education.

OBJECTIVE 3

GROW COMMUNITY-BASED RESEARCH AND DEVELOP RESEARCH-READY RESIDENTS

Grow our community-based research capacity and research-ready residents. In so doing, we will demonstrate the valuable role our research plays within the broader research and education community, including our teaching sites.



INCORPORATE SOCIAL ACCOUNTABILITY AND HEALTH EQUITY THROUGHOUT OUR WORK.

Queen's DFM will be recognized for anticipating and responding to emerging community-health needs through education, research, and clinical care. The department will embrace a community-focused, patient-engagement approach to improve the health of marginalized and under-serviced populations. We will pursue national and international initiatives in research and education to support population-health needs and enhance health equity.

OBJECTIVE 1

MODEL SOCIAL ACCOUNTABILITY WITHIN DFM

Lead, model, and advocate for social accountability, cultural safety, and environmental health throughout our work. Tied to this objective, we will grow our capacity for research to support health equity, and will develop national/international research partnerships in these areas.

OBJECTIVE 2

ENHANCE CAPACITY TO SERVE DIVERSE POPULATIONS

Contribute to the delivery of care that meets the evolving health-care needs within regional, provincial, national, and international communities, including, but not limited to, members of Indigenous, culturally diverse, intellectually and developmentally disabled, and other marginalized populations.

OBJECTIVE 3

ADVANCE COMMUNITY AND PATIENT ENGAGEMENT

Pursue initiatives to improve patient access, engagement, and satisfaction, and to manage clinical demand through innovative, appropriately resourced services and programs based on, and informed by, patient need. Throughout, we will evaluate and measure the impact of our efforts.





CULTIVATE A SUPPORTIVE, COMMUNICATIVE WORKPLACE CULTURE TO CREATE A HEALTHY WORK ENVIRONMENT WITH EFFECTIVE STRUCTURES THROUGHOUT THE DEPARTMENT.

Queen's DFM will be recognized for being a workplace of choice at Queen's University. The department will work to create an environment that cultivates and supports all members, where all members feel respected, valued, and supported in their roles and for their contributions, and where the health and well-being of all members is paramount. We will also ensure expectations and goals are reinforced through shared accountability, leadership, teamwork, and support.

OBJECTIVE 1

FOSTER A SUPPORTIVE AND ACCOUNTABLE CULTURE

Promote an understanding and respect for each other's roles, and address barriers, to foster a culture within the organization where all members take joy in their work. Within this approach, we will communicate expectations of individual and collective responsibility through performance reviews and team-building.

OBJECTIVE 2

Invest Time and Resources to Bring about Timely Communication and Improved Engagement

Prioritize effective collaboration and dynamic communication by investing in time, people, and resources, and by valuing open and honest discussions that promote information sharing and departmental participation. In developing all members at all our teaching and training sites, we will demonstrate our commitment to helping everyone grow.

OBJECTIVE 3

FOSTER NIMBLE APPROACHES AND CONSTANT IMPROVEMENTS

Foster an environment that values agility, efficiency, and innovation between and within all functional areas: education, research, clinical care, and operations. Throughout, we will seize opportunities to recognize everyone's contributions. In addition, develop human resource strategies that allow us to identify and develop opportunities for members to carry out cross-departmental roles and permit all members to act with purpose in their work.

TAKE ADVANTAGE OF TECHNOLOGICAL OPPORTUNITIES EMERGING FOR THE DFM AND WITHIN FAMILY MEDICINE.

Queen's DFM will be recognized for employing new technologies in innovative ways that help identify and deliver the best patient experiences, and for embracing advances in technology to achieve efficiencies that benefit its clinical, education, research, and operational efforts.

OBJECTIVE 1

Integrate Systems to Improve Patient Outcomes

Adopt and integrate e-platforms, region-wide EMR, and administrative systems to improve operational and clinical efficiencies, patient access, and resident preparation.

OBJECTIVE 2

Employ Emerging Technologies to Inform Health Policy

Employ artificial intelligence, machine learning, predictive analytics, and other emerging health-care technologies to support quality-improvement initiatives, improve patient outcomes, and influence health-care policies.

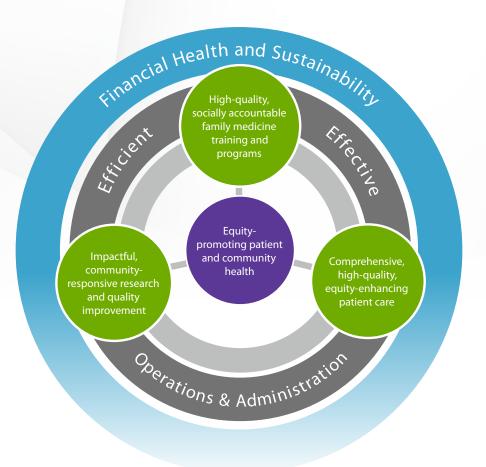
OBJECTIVE 3

Enhance and Increase Data for Research and QI

Secure and enhance the role of Queen's DFM as a national and international leader in the acquisition and use of Canadian primary care EMR data for research and quality improvement. Improve the quality of care and teaching offered by reviewing and revising clinical practice using the best methods for quality improvement.



ORGANIZATIONAL ALIGNMENT AND CO-ORDINATION



Critical to OUT SUCCESS in achieving our strategic objectives is alignment and co-ordination among the department's functional areas – education, patient care, and research. To achieve real success, we must work together.

We will require efficient and effective operations and administration built on a sustainable financial foundation. We will align our internal structures, processes, and resources to support and engage everyone in advancing our strategic priorities and direction.

IMPLEMENTATION

The Queen's Department of Family Medicine 2019–2024 Strategic Plan sets out our priorities and strategies over the next five years, and challenges us to collaborate as we translate them into actions. However, the realization — and celebration — of these priorities and strategies depends upon the full engagement and shared responsibility of everyone within the department.

The framework established in this strategic plan will be co-ordinated through a collaborative planning process to ensure we take a focused, cohesive, and accountable approach to making progress toward each of our goals. We will deliver on the plan's commitments to our faculty, staff, educators, patients, researchers, partners, and communities.

The plan's implementation — with associated short-, medium-, and long-term actions — will require leadership from across the department, and within our four residency sites and many undergraduate medical education clerkship locations. Together, we can ensure that Queen's DFM is viewed as a valued partner and leader in delivering family medicine training and programs, disseminating impactful community research, implementing quality improvement, and providing comprehensive care.

While departmental leadership will play an important role in guiding the work, all within the department will need to champion the strategic plan through daily operations and financial reporting, cross-departmental initiatives, and shared commitment to success.

Fundamental to our context is financial sustainability. In alignment with the Queen's School of Medicine, we will "pursue our priorities in a manner that is effective and efficient" and that improves the department's financial health and sustainability "through thoughtful use of our collective resources to support our priorities."

Clearly, the success of this strategic plan depends upon everyone seeing themselves within it. In the months ahead, we will move forward with operational and performance plans to help everyone most effectively contribute to the department's success.

We have much to look forward to over the coming months and years.

We will regularly update our operational plans to ensure we continue to pursue activities in alignment with our mission and vision, and that we adapt and respond to circumstances and challenges that occur during the lifespan of this strategic plan.

As we all work to implement this plan, communication within the department and with our partners will be critical. We know successful rollout will depend on an effective communications strategy and ongoing related efforts to develop understanding, both at Queen's University and with community, hospital, ministry, and organizational partners. Crucially, everyone should feel connected and integral to the strategic plan.

Our senior leadership team will employ change management, capacity building, partnership relations, and policy development to further these efforts.

Finally, of particular note, Department Head Dr. Michael Green initiated an organizational review in parallel with our strategic-planning process. While our new strategic plan will provide overall strategic direction, the organizational review — conducted by an external consultant — will support it through role clarification, organizational alignment, and developmental opportunities.



