

The Department of Family Medicine Chronicle

McMaster University, Faculty of Health Sciences
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In this issue

Welcome & Introduction P.1
Spotlight on KW P.2/3

Faculty Evaluation Changes P.4

The Art of Seeing P.5

Family Medicine on the Borders P.5

Quality Book of Tools P.5

Funding & Publications P.6

Report from the Chair P. 7

Upcoming Events P.8

The Department of Family Medicine Inaugural Edition of the "Chronicle"

Welcome to the first edition of the Chronicle . We hope you find the information within to be both informative and helpful. Our goal is to publish this report on a regular basis, to keep you apprised of the many exciting events happening within this broad Department of ours and to focus, each quarter, on a certain area or aspect of our Department.

We need your input to help us do that! We encourage you to keep us posted regarding any special events, acknowledgements, accolades or human interest stories that may take place within your area.

Our goal is to make this report fun, interesting and informative. If you have any suggestions or ideas as to how we can make this report better, please let us know by contacting Jennifer Gough (goughj@mcmaster.ca).

Welcome to new GFT, Dr. Judy Baird!

The Department welcomes Dr. Judy Baird, a new GFT in the Department of Family Medicine, effective January 1, 2011.

Dr. Baird comes to McMaster from Northern Ontario where she practiced family medicine for 11 years and was an Assistant Professor of Medicine in the Northern Ontario School of Medicine (NOSM). In her role as Assistant Professor, Dr Baird was involved in curriculum development and served as a member of the AFMC national clinical skills working group. Dr. Baird has considerable teaching experience and is involved in research in the areas of clinical reasoning skill development and assessment, the use of virtual tools to aid in education and assessment, and the development of community leadership skills through service learning. In addition to her clinical and teaching commitments, Dr. Baird is part way through completing a Master's degree in Education at the Ontario Institute for Studies in Education (OISE) at the University of Toronto.

Dr. Baird will be located at our Stonechurch Family Health Centre. We are delighted that she has decided to join our Department!

Spotlight on Kitchener -Waterloo

We asked faculty members and a staff member what they love most about the discipline of Family Medicine and the job that they do



Dr. Linda Lee,

How do you successfully integrate clinical care and research?

While finding adequate time for research is often a challenge with managing a full-time practice and our FHT Memory Clinic, I find that each can be complementary. For example, the primary care memory clinic model was inspired by difficulties I noticed in optimally managing patients with dementia in regular family practice. Through evaluative research, we were able to refine our model of care and ultimately develop a training program to help other FHTs and CHCs to replicate the model. The 12 primary care memory clinics we've trained have all been under evaluative study and this has allowed us to further refine our training program and processes. So the research is inspired by clinical practice and results allow for continued improvement to practice in an iterative fashion. It becomes very interesting and meaningful research and integrated seamlessly into clinical practice.

What excites you about the discipline of Family Medicine? Why did you choose Family Medicine?

I was attracted to Family Medicine because of the broad scope of practice. When I graduated from medical school, it wasn't clear to me which areas I'd find most interesting. With time, I found myself most intrigued by the problems of cognition and family medicine allowed me the flexibility to delve further into this. Being in an FHT, I had access to nurses, pharmacists, and social workers and we could be creative in developing a better model of care for these patients.

I am excited by the trend towards comprehensive, team-based primary health care for patients. Working with highly trained interprofessional health care providers has improved our capacity for care while maintaining the central role of the family physician. I think this is a significant advance in the primary care management of complex chronic diseases of the elderly.

What is special and unique about the KW learning experience?

The Centre for Family Medicine FHT was founded on the principles of providing excellence in health care and teaching. Our FHT executive board has abided by these principles in their decision-making and in fostering a culture of continued improvement and learning. This applies to learners as well as to our staff and physicians. Any ideas for improving care are considered, even if they are out-of-the-box or novel approaches, and as a result our FHT has become an incubator for many unique projects in teaching and in patient care. As well, we have a relatively flat hierarchy within our FHT. I think learners find this modeling positive and unique.

Any other tidbits you'd like to add about your career, practice, research endeavours etc.

Looking back, I'd say that completing a Masters of Clinical Science in Family Medicine degree through a thesis route was a transformative experience. Not only did this help me to develop skills for research and clinical teaching, I gained a much greater appreciation of the importance of primary care research. The support of the Centre for Family Medicine FHT physicians and staff has hugely contributed to the success of our Memory Clinic and research projects. I am really fortunate to work with such wonderful colleagues.



Dr. Joe Lee, Site Director of the CFFM, praises Glenda O'Brien

"Glenda began her professional life as a nurse. She eventually transitioned to work as a receptionist/administrator in family practice offices. She continued in an administrative capacity with the formation of the Centre for Family Medicine in 2005.

The KW Family Medicine Residency Program began in 2005 without any local admin support. When a position was created in 2007 for the KW Site Program Assistant, Glenda was quickly earmarked for the position. As there were no "how to" manuals available, Glenda embraced the job by fully immersing herself and found and created answers and solutions. Her presence had an immediate positive impact on the KW residents. Review after review has shown that the residents absolutely love and respect Glenda in her role as their surrogate "mom".

Glenda also holds the role of Inter-professional Education Coordinator at the Centre for Family Medicine and sits on its Collaborative Quality Innovation Board. She provides oversight for the administrative support provided to learners in medicine, pharmacy, social work, and many other professions. Her strong efforts have won her kudos from preceptors and learners alike. She is a valued team member!!"

-Dr. Joe Lee, Kitchener-Waterloo Site Director

Glenda is the Site Program Assistant, KW and Area Program and the Inter-Professional Education Coordinator, Centre for Family Medicine, Kitchener-Waterloo

See next page for an interview with Glenda, "in her own words".....



Glenda O'Brien — In Her Own Words

Glenda is the Site Program Assistant, KW and Area Program and the Interprofessional Education Coordinator, Centre for Family Medicine, Kitchener-Waterloo

What is your role within the Department?

In my regular role, I work with local resources to anticipate capacity needs and plan the residency program for all KW and Rural Fergus/MT Forest residents. I provide oversight to the Centre's Education Staff –as well as support staff at other KW and Area Program teaching practices. I also work with Dr. Joe Lee to plan and implement new programming such as all horizontal pieces of the new Integrated Curriculum. I am the first point of contact for residents with concerns and work with Site Director and Assistant Site Director to provide adequate support. I am the liaison between local Faculty, Residents, DFM, Hospitals, Waterloo Regional Campus, Community Placements, CPLO, ROMP, etc. I oversee placement of all learners within the Centre for Family Medicine (CFM); medicine, nutrition, pharmacy, social work, nursing and assist in the coordination of inter-professional education sessions and clinical opportunities for inter-disciplinary learning.

What is the most satisfying part of your job? What makes you tick?

The most satisfying part of my job is the contact I have with residents, learners and faculty. The feeling that I've made a positive impact on a resident's training and potential future goals as a physician is incredibly satisfying as well. Thirdly, I love a new challenge and trying to solve the jigsaw puzzle!

What makes me tick? I have a passion for the work I do and a belief in what we are trying to achieve. I have a strong respect for our Physician group and have nurturing tendencies ('retired' RN and mother of three daughters). I have worked in health-care all of my adult life – in hospital, specialist office, walk-in clinic and family practice as an RN as well as administratively.

What do you feel is unique about the KW learning experience?

From a resident's perspective, it seems that one of the most valued aspects is the Resident/Preceptor ratio during the family medicine rotation as well as in community hospital placements, which also translates into an opportunity for much hands-on practice. We have a very receptive

program, meaning that resident feedback is received in a number of formats, and residents see changes occur in response to that feedback. Our academic sessions include learners from the various disciplines. Working in multi-disciplinary teams and also learning in those teams alongside other learners is beneficial to all learners.

What do you think is the most important quality for an admin person, working in a teaching unit, to have?

The most important qualities, for me, are for one to have experience in a family medicine environment, possess strong organizational skills and have a respect for confidentiality, be flexible, and have the ability to think on one's feet as well as being able to adapt to change.

What does customer service mean to you?

Good customer service is absolutely essential. All of our customers (residents, faculty, preceptors, administrative staff) need to know they can come to us and receive the utmost care and service.



We also asked Dr. Colleen McMillan what she loves about Family Medicine and teaching in Kitchener - Waterloo....

What do you enjoy most about working with learners in a clinical setting? What are the challenges?

The mosaic of knowledge and life experiences that our learners bring. Each learner brings a unique perspective of health and illness that shapes them as a future practitioner. Facilitating the praxis between theory and practice is exciting to watch. To teach learners that health is a narrative, that we as helping professionals are privileged to hear, is satisfying.

As for challenges, social work training brings a unique perspective that reframes

challenges as opportunities. So, I can't really think of any challenges.

Tell us a bit about your research endeavours. What excites you about Family Medicine?

Clinically driven research is exciting because of its immediacy in changing people's lives. Current research studies include eating disorders, building capacity for Spinal Cord Injury patients in primary care, adverse drug effects in the marginalized elderly, curriculum changes in family residency program and using photo-voice as a tool to understand obesity in lung transplant patients.

What is exciting about being in Family Medicine is the community of people it draws from – people who enjoy working relationally to improve health across the spectrum of age, ethnicity, gender and social position.

What inspires you? Personally/Professionally?

A passion for knowledge and new opportunities to practice innovation.

What do you feel is unique about the KW learning experience?

There exists a culture of learning that is respectful and reciprocal. Learning is encouraged to occur outside of traditional disciplinary boundaries. The outcome is a richer, more textured understanding of health because of how other professions are involved in teaching and learning.

There is also a feeling of community that is explicitly fostered here. The environment encourages individuals to tap into their potential to grow.

This is a site that supports possibilities.

Dr. Colleen McMillan (PhD) is a Social Worker, who teaches behavioural science, teaches residents and social work students in the clinical setting, and has been conducting collaborative research on the KW Mobility Clinic, the Triple C curriculum, and other areas

Faculty Evaluation Changes

Dr. Allyn Walsh



With the University Senate policy revision on encouraging teaching excellence (SPS 10), our Department has led the way in implementing a number of the initiatives

in faculty evaluation set in play by the Department Education Coordinators in our Faculty.

Among the initiatives is the use of a generic template for the evaluation of teachers by learners. This generic template was developed by Dr. Geoff Norman in January 2010, and agreed to by the Department Education Coordinators later that month. In our Department, we have modified the template for use in evaluating clinical teaching; small group teaching; and the teaching of single sessions or lectures. Each division or program uses the template to develop their own faculty evaluation forms. The template consists of four domains and an overall teaching effectiveness, each to be rated using a 7-point Likert scale. This simple template facilitates compilation of faculty evaluations into tables for annual reports and for Tenure and Promotion (T&P) dossiers.

As part of this process, we have begun calculating departmental means for the "overall teaching effectiveness" scores on these faculty evaluation forms. We can now provide this information to each faculty member, the Department Education Coordinator, and the Department Chair. This information will also be used on the T&P dossiers. As evaluation scores tend to be quite high in our Department, the comparison allows faculty members to better assess their teaching relative to their peers. The Chair is finding this information very helpful, and it is expected that it will also provide clarity to the T&P dossiers.

Upcoming Education/ Research Events

Tuesday, March 22

Practice Management Part II (R2's - Ministry session) / SAMPs evening for R2's / Enhanced Skills Information Session for R1's

Wednesday, March 23

Large Group BS (R2's in am) SOOS (R2's in pm) / Large Group BS (R1's in pm)

Thursday, March 24

Academic Forum 8:00—9:00, SFHC Room H

Dr. Linda Lee, Primary Care Memory Clinics: An opportunity for enhanced dementia care and teaching

Wednesday, May 4

Rural Mini Research Day

Thursday, May 19

Stonechurch Mini Research Day

Wednesday, May 25

KW Mini Research Day

Friday, May 27

CBRT Mini Research Day

Wednesday, June 1

Brampton Mini Research Day

Wednesday June 8

Large Group BS in am / Research Day in pm

Trillium Primary Health Care Research Day

www.trilliumresearchday.com

Tuesday, June 21

2011 REC Retreat

Tuesday, June 28

Procedural Skills Day / Orientation / Welcome BBQ

Welcome to Dr. Lawrence Grierson

Please welcome our newest faculty member, Dr. Lawrence Grierson, to the Department of Family Medicine as an Assistant Professor who will focus on Medical Education research. His position is shared with the Program for Educational Research and Development and he will also work collaboratively with the McMaster Community and Rural Education Program (Mac-CARE) and others in the distributed education network. One of his main roles will be to assist and mentor faculty in the Department of Family Medicine who wish to pursue educational research. Dr. Grierson will also be focused on continuing to develop his own externally-funded research program. He is especially interested in the feasibility of internet-mediated networked learning tools for clinical skills training as well as peer feedback, the way various forms of sensory information impact our control of precision movements and on the innovation and application of assistive technologies for both health professions skills educators and persons from special populations. His research has exciting application in a number of areas of health care education research.

Dr. Grierson obtained his PhD in kinesiology at McMaster University and he comes to us from his most recent position as a post doctoral fellow with the Toronto Rehabilitation Institute, SickKids Learning Institute, and Psychomotor Skills for Health Professions Education laboratory group that is housed at the University of Toronto's Wilson Centre.

He can be reached through email (lawrencegrierson@gmail.com) and has offices in the Department of Family Medicine at McMaster Innovation Park (research area) or in the Program for Educational Research and Development (MDCL).



The Art of Seeing

The “Art of Seeing”, an innovative collaboration between the Department of Family Medicine and the McMaster Museum of Art, culminated in a hugely successful exhibition entitled “Landscape, Memory and Desire” curated by our second year family medicine residents. This exhibit was the closing act to the eight-week Art of Seeing course, aimed at sharpening observation skills and enhancing empathy and self-reflection through the examination of original works of art. The goal of this course was to hone residents’ ability to look and then to have them look deeper. The course provided residents with the opportunity to observe something at face value but also to look further into the story behind what is presented — a skill which can only serve to improve their care of patients.

This Program received widespread media coverage and was highlighted in Maclean’s magazine, on Global TV Toronto and on The National!! To access the articles or to view the television coverage, please go to: [The Art of Seeing](#)

Family Medicine on the Borders

“Family Medicine on the Borders: Exploring Theory and Practice” was an invitational summit hosted by the Department of Family Medicine and the David Braley and Nancy Gordon Endowed Chair-holder, Dr. Cathy Risdon. In her final year of the endowment, Dr. Risdon wanted to honour the mandate of the Chair by convening a diverse group of clinicians, scientists, artists and researchers for a chance to meaningfully and thoughtfully explore some of the most pressing and current issues in family medicine. The international list of invitees included guests from across Canada, the UK, Germany, Norway and the US, whose fields of inquiry and practice included ethics, business, mathematics, geography, neuroscience, philosophy, critical studies, sociology as well as nursing, internal medicine, physiotherapy, pharmacy, occupational therapy – and family medicine. Proceedings of the meeting were recorded by a graphic facilitator for distribution to all participants.

The four half day sessions included a mix of short keynote addresses followed by smaller group discussions, initiated by participants. On the last day, participants nominated a series of project groups, reflecting the themes and questions which emerged from the ongoing discussions. A sample of these identified projects offers a glimpse into the nature of the creative and diverse ideas and interests held by the group: “The clinical encounter as a local moral world”; “Not “Just” Family Docs. Seeing ourselves through other eyes and claiming/naming our place in the medical world”; “Formalizing ways to honour/measure “particularity” in research on guidelines”; “Teacher error and learner safety”.

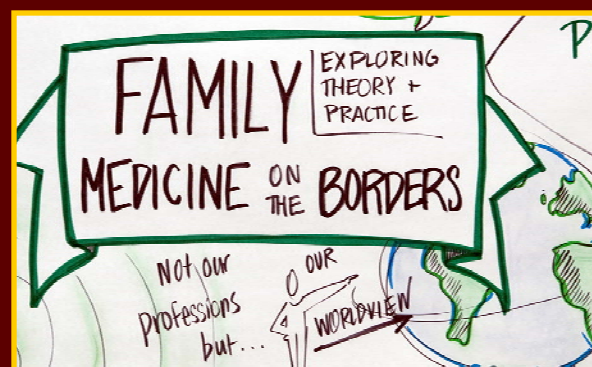
In the words of one participant, the summit invited a rich and deep consideration of the following question in relation to family medicine: **what is the story we are telling about ourselves, and what is the story others are telling about us?** Setting aside time to take that question seriously may at first seem like a luxury, but if our experience at the summit is any indication, the question took on some urgency. Our department’s capacity to take that question seriously – and to create an event which attracted so many people to participate so thoughtfully – is an example of the kind of leadership the David Braley and Nancy Gordon Endowment has allowed us to offer the discipline of family medicine and our many allies and colleagues in other fields.



The Quality Book of Tools

The Quality in Family Practice: Book of Tools was launched at the OCFP Annual Scientific Assembly at the end of November 2010. The book developed from an earlier version based on Australian and New Zealand tools. The earlier version was tested in family practices in Ontario. The categories align with the established aims of the Institute of Medicine: Crossing the Quality Chasm and the Ontario Health Quality Council’s Reporting Framework: Attributes of a High Performing Health System. The book has helpful resources that link to Ontario and other sites. It is available free for download or for purchase by order form from www.qualityinfamilypractice.com <<http://www.qualityinfamilypractice.com>> .

Plans are to develop an HTML format for download and to hold a provincial webinar on how to get started using the book. Stay tuned.



Research Funding & Publications

July 31—December 31, 2010



Funding Awarded: (\$2,242,012)

Bray S (PI), Cairney J, Ginis KM, Shupe DM, Pettit A. "They believe I can do it...maybe I can!" The effects of interpersonal feedback on relation-inferred self-efficacy (RISE), self-efficacy, and intrinsic motivation in children's sport. Social Sciences and Humanities Research Council (SSHRC) July, 2010 to June, 2013. \$127,260

Cairney J (Co-PI) Kurdyak P, Wade T, Streiner D, Vigod S, Schaffer A. Prevalence and Correlates of Unmet Need and Access to Care for Mental Health Problems: Linking population-based data to administrative records. Canadian Institutes of Health Research (CIHR) Oct. 1, 2010 to Sept. 30, 2012. \$207,086

Brazil K (Co-PI) Kelley ML (Co-PI), Hampton M, Hanson G, Katt M, Minore B, O'Brien V, Prince. Improving End-of-Life Care in First Nations Communities: Generating a Theory of Change to Guide Program and Policy Development. Canadian Institutes of Health Research (CIHR) \$1,800,000. 2010 – 2015

Jason W. Busse JW (PI), Guyatt GH, Keown K, Montori VM. Knowledge Users: Morgan A, Hynes G, Bellman M, Roos G, Howe J, Gurewan V, Buckley N, Riva J, Price D, Soric R, Wilson L. Management of Fibromyalgia: A Systematic Review of Randomized Controlled Trials. Canadian Institutes of Health Research (CIHR) \$97,234

Marshall D. et al. The McMaster-Ottawa team observed structured clinical encounter (TOSCE) workshop. \$10,432

Publications:

Hopkins J, **Agarwal G**, **Dolovich L**. Quality indicators for the prevention of cardiovascular disease in primary care. *Can Fam Physician* 2010;56:e255-62.

Levitt C, Lupea D, Lewis N. Recruiting Regional Primary Care Leads for Cancer Care Ontario. *Can Fam Physician* 2010;56:628-31.

Shaw EA, **Marshall D**, **Howard M**, **Taniguchi A**, **Winemaker S**, **Burns S**. A Systematic Review of Postgraduate Palliative Care Curricula. *Journal of Palliative Medicine* 2010;13(9):1091-1108.

Riva J, Muller GD, Hornich AA, Mior SA, Gupta A, Burnie SJ. Chiropractors and collaborative care: An overview illustrated with a case report. *J Can Chiropr Assoc* 2010; 54(3):147-154.

Huynh J, **Howard M**, Lytwyn A. Self-collection for vaginal human papillomavirus testing: Systematic review of studies asking women their perceptions. *Journal of lower Genital Tract Disease* 2010;14(4):356-362.

Howell D, **Marshall D**, **Brazil K**, **Taniguchi A**, **Howard M**, Foster G, Lehana, T. (2010). A shared care model pilot for palliative home care in a rural area: Impact on symptoms, distress and place of death. *Journal of Pain and Symptom Management*. In Press

Brazil K, Kassalainen S, Ploeg J, **Marshall D**. Moral distress experienced by health care professionals who provide home-based palliative care. *Social Science & Medicine* 2010 doi:10.1016/j.socscimed.2010.07.032.

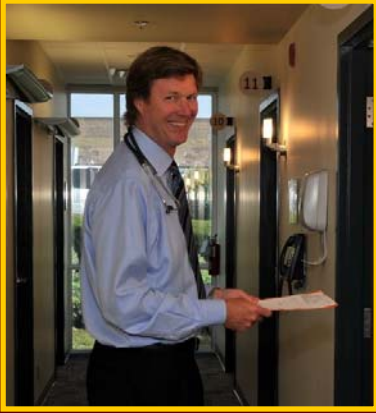
Schwartz L, Sinding C, Hunt M, Elit L, **Redwood-Campbell L**, Adelson N, Luther L, Ranford J, DeLaat S. Ethics in Humanitarian Aid Work: Learning From the Narratives of Humanitarian Health Workers. *AJOB Primary Research* 2010;1(3)45-54.

Kaasalainen s, Brazil K, Coker E, Ploeg J, Martin-Misener R, Donald F, DiCenso A, Hadjistavropoulos T, Dolovich L, Papaioannou A, Emili A, Burns T. An Action-Based Approach to Improving Pain Management in Long-Term Care. *Canadian Journal on Aging* 2010;29 (4):503– 517 (2010)

Riva JJ, Lam JMS, Stanford EC, Moore AE, Endicott AR, Krawchenko IE. Interprofessional Education Through Shadowing Experiences in Multi-disciplinary Clinical Settings. *Chiropr Osteopat* 2010 Dec 2;18:30.

Bhogal AK, Brunger F. Prenatal genetic counseling in cross-cultural medicine: A framework for family physicians. *Can Fam Physician* 2010;56:993-9.

Report from the Chair — Dr. David Price



The healthcare system in Ontario is under stress from many different directions. Two that are particularly relevant for Family Medicine are: the aging population with their attendant increased complexity and burden of chronic illness; and the financial squeeze that governments and thus hospitals and healthcare institutions find themselves in. While healthcare is, and will continue to be, well-funded in Ontario, it is apparent that the system needs to evolve to cope with these pressures.

The Department of Family Medicine contributes to this evolution in a number of ways. In this inaugural quarterly report, you have read about the wonderful work that is being done at our site in Kitchener-Waterloo in terms of both education and clinical care. The novel clinical programs developed at the Centre for Family Medicine by Dr. Linda Lee and her associates are perfect examples of the evolution in the way that healthcare is provided. It is imperative that we provide education “closer to home” and develop clinical care models to accommodate for our changing demographics. Our department is providing education to undergraduate students and family medicine residents, not only in the City of Hamilton (a tertiary care centre with our partners at Hamilton Health Sciences and St. Joseph’s Healthcare), but in a number of “distributed sites”: Brampton, Burlington/Halton, Kitchener-Waterloo, Niagara and soon in the Haldimand Norfolk Brant Region.

The Department of Family Medicine at McMaster has been providing education in an interprofessional manner since its inception. Recently, we have become increasingly focused on providing education for a number of different disciplines in primary care in an interprofessional model. In many of our teaching units, family physicians are working side by side and seamlessly with various members of the healthcare team; including nurse practitioners, registered nurses, social workers, pharmacists, lactation consultants and our newest addition to the team, the physician assistant (PA). Not only have we integrated PAs into a number of our teaching units, we are also providing education for the PAs and our PA students from McMaster University are working side by side with their colleagues in Family Medicine, Nursing etc.

It is only by continuing to evolve and innovate that we are going to be anywhere near able to meet the healthcare challenges of tomorrow. The contents of this report should give you real confidence that the Department of Family Medicine at McMaster is poised to meet these challenges.





Take Our Kids to Work Day

The Central Department had a very successful Take Our Kids to Work Day on October 19, 2010!

Three Grade Nine students participated in an Amazing Race-type afternoon, complete with clues and rewards. These clues led them to the various areas within the Central Department where they were asked to perform a task regularly performed by our staff and/or residents. They can now effectively boast that they know how to calculate travel expenses, upload documents to the website and even intubate an NRP baby!

Are these future family physicians in the making???

Time will tell.



Faculty Development Opportunities

Annual Faculty Spring Meeting—April 1-2, 2011

Theme: Arts in Medicine

Location: Millcroft Inn and Spa

Caledon, Ontario

To register or for further information, please contact

Andrea Colbert-DeGeit (colbert@mcmaster.ca) or 905.525.9140 ext 21659

Carl Moore Lectureship—April 14, 2011

Topic: The Joys and Challenges of Rural Practice

Speaker: Dr. Mohamed Ravalia, Memorial University

Location: McMaster Innovation Park Atrium

Videoconferencing is available

For further information or to register, please contact Andrea Colbert-DeGeit (colbert@mcmaster.ca) or 905.525.9140 ext 21659

Faculty Development Meeting—May 17, 2011

8:30 am—10:30 am

Stonechurch Family Health Centre, Room H

“An Update on the Triple C Curriculum” - Dr. Nancy Fowler

“The New 6-month Portfolio Review” - Dr. Liz Shaw

For further information, please contact Andrea Colbert-DeGeit (colbert@mcmaster.ca) or 905.525.9140 ext 21659

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