

FAMILY MEDICINE ANNUAL REPORT

2021 - 2022



FAMILY MEDICINE
Faculty of Medicine

OUR MISSION

MISSION STATEMENT OF MEMORIAL UNIVERSITY

Memorial University is an inclusive community dedicated to innovation and excellence in teaching and learning, research, scholarship, creative activity, service and public engagement.

Memorial welcomes and supports students and scholars from all over the world and contributes knowledge and expertise locally, nationally and internationally.

MISSION STATEMENT OF THE FACULTY OF MEDICINE

Working in the spirit of partnership and respect, the Faculty of Medicine is committed to delivering integrated excellence in education, research and evidence informed care; meeting the unique health needs of our rural, remote and urban communities; and advocating for health, equity, Indigenous health and healthy populations

MISSION STATEMENT OF THE DISCIPLINE OF FAMILY MEDICINE

Through respectful collaboration, the Discipline of Family Medicine (DFM) delivers excellence in learner-centred, and evidence-informed education, patient-centered research and comprehensive primary care; meets the unique needs of diverse people and communities we serve; and advocates for equity in health.

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MESSAGE FROM THE CHAIR



This annual report represents the period of time when we headed into living with COVID and the loosening of travel restrictions. We saw the return of in-person conferences and meetings, and many of us resumed personal travel. Our clinics opened to more in-person appointments, our undergraduate program participated in accreditation, and our residency training programs prepared for their upcoming accreditation review. Research continued with the ability to return to in office work.

Our collective efforts in undergraduate medical education were highlighted with the Faculty of Medicine being a co-recipient of the Society of Rural Physicians of Canada's Rural Medical Education Award and our work in Family Medicine residency education was recognized with the Keith Award for the 9th time!

Our contribution to research was the highest ever for our Discipline. Over the course of the year, 63 peer-reviewed papers and eight non-peer reviewed papers were published and faculty and staff were involved with poster presentations, oral presentations, and workshops - locally, nationally, and internationally. Together, our researchers were successful in receiving over 5 million dollars in research grant funding.

I am so proud of our team – staff, faculty, and medical learners. We lived and worked through a really challenging time. We showed up, we put our best foot forward, and we helped make a difference.

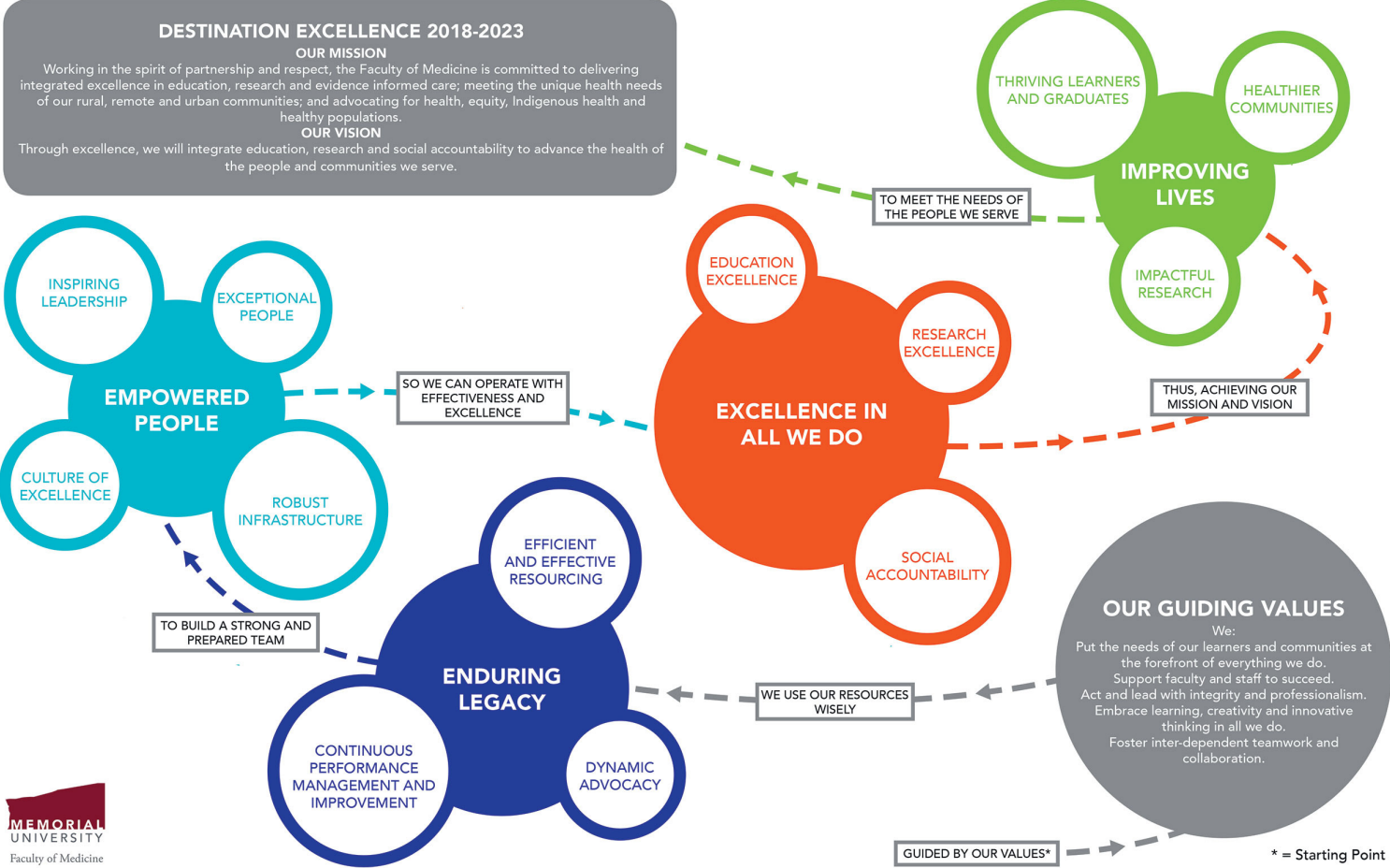
Thank you for your ongoing dedication to patient care and medical education. I look forward to another great year!

Sincerely,

A handwritten signature in black ink, appearing to read 'Danielle O'Keefe'.

Danielle O'Keefe, MD CCFP FCFP MSc
Chair, Discipline of Family Medicine

FACULTY OF MEDICINE DESTINATION EXCELLENCE STRATEGIC PLAN



DISCIPLINE OF FAMILY MEDICINE STRATEGIC PLAN IMPLEMENTATION MAP 2019-2024

WE ACHIEVE OUR VISION AND MISSION	OUR MISSION Through respectful collaboration, the Discipline of Family Medicine (DFM) delivers excellence in learner-centred, and evidence-informed education, patient-centered research and comprehensive primary care; meets the unique needs of diverse people and communities we serve; and advocates for equity in health.			
	OUR VISION To advance health through leadership in socially accountable education, research, and patient-centred care.			
AND OUR OUTCOMES TO MEET THE NEEDS OF THE PEOPLE WE SERVE	IMPROVING LIVES			
	Thriving learners and graduates	Impactful research and scholarship	Healthier communities	
	Develop and maintain relationships with our alumni and retirees	Support our faculty, staff, researchers and learners to be active in research and scholarly pursuits	Participate in sustainable partnerships to shape and improve health equity and the health system	
BY OPERATING WITH EFFECTIVENESS AND EXCELLENCE,	EXCELLENCE IN ALL WE DO			
	Education excellence	Research excellence	Social accountability	
	<ul style="list-style-type: none">Promote generalism in a family medicine contextIncrease number of DFM residency spots to 50%Promote layered learning at every teaching sitePromote innovative educational approaches, layered learning, IPE and faculty development at all teaching sites	<ul style="list-style-type: none">Foster a productive research environment with clear research prioritiesIncrease the number of funded research projects, and publications	<ul style="list-style-type: none">Champion efficient and effective use of resourcesAdvocate for health equity, indigenous health, and healthy populationsDevelop a comprehensive, inclusive DFM Social Accountability frameworkConsider the patient voice in all that we do	
BUILDING A STRONG AND PREPARED TEAM,	OUR EMPOWERED PEOPLE			
	Culture of Excellence	Inspiring Leadership	Exceptional People	Robust Infrastructure
	<ul style="list-style-type: none">Create a productive, unified, engaging and supportive work environment promoting wellnessEmbrace the changes required to implement our strategic plan	<ul style="list-style-type: none">Embrace innovationDevelop an integrated communications plan for internal and external stakeholders	<ul style="list-style-type: none">Develop a revitalized organizational structure highlighting faculty and staff position descriptions, accountability and succession planning	<ul style="list-style-type: none">Advocate for continued creation and implementation of new technologies in education, research and clinical care
AND USING OUR RESOURCES WISELY,	OUR ENDURING LEGACY - SUSTAINABILITY			
	Efficient, Effective Resourcing	Continuous Performance Management and Improvement	Dynamic Advocacy	
	<ul style="list-style-type: none">Develop a structured process for new initiatives including resource and sustainability planningExplore donor opportunities	<ul style="list-style-type: none">Develop metrics to track, monitor and analyze our performance, opportunities, risks and challenges.Share our performance results with our various stakeholders	<ul style="list-style-type: none">Develop key messages and mechanisms to promote the DFMFormalize outreach for engagement of community partnersEngage alumni and retirees as mentors	
WHILE BEING GUIDED BY OUR VALUES.	OUR VALUES			
	Strong, respectful relationships with patients, partners, communities, and each other			
	Advocacy to improve healthcare and medical education			
	A supportive, innovative environment that promotes success for all			
	Integrity and professionalism			
	Leadership across the educational continuum			
	Ethical, impactful research			
	Collaboration and interdependent teamwork			
	Providing access to rural medical education opportunities			

CONTACT INFORMATION

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Faculty of Medicine
Memorial University
St. John's, NL A1B 3V6
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www.mun.ca/medicine/familymedicine/

Chair's Office

Telephone:	709-864-6549
Fax:	709-864-3349

Academic Offices

Residency Training Program:	709-864-6493
Undergraduate Program:	709-864-6485
Enhanced Skills Program:	709-864-6535
Fax:	709-777-7913

Clinics

Family Medicine Clinic, Janeway Hostel:	709-864-7795
Ross Family Medicine Clinic:	709-777-6301
Shea Heights Community Health Centre:	709-737-3369

Research

Primary Healthcare Research Unit:	709-777-6645
6for6 Program	709-864-4976
Fax:	709-777-6118

DISCIPLINE OF FAMILY MEDICINE

CHAIR'S OFFICE

CHAIR	DR. DANIELLE O'KEEFE
MANAGER OF OPERATIONS	KRISTIN HANLON (to September 2021) NEHA BHUTANI (from November 2021)
SENIOR SECRETARY	SUSAN HUTCHINGS (to March 2022) SHENOA WHITE (from April 2022)
SECRETARY	VACANT

2021-2022 HIGHLIGHTS

New Faculty

The Discipline welcomed Dr. Meghan Greene and Dr. Elaine Xie as new full-time faculty members during the year.

Retirements

Karen Griffiths, Intermediate Secretary for the Primary Healthcare Research Unit, retired after 9 years on the team.

Barbara Morrissey, Clinic Administrator, retired after 17 years with the Discipline.

Susan Hutchings, Senior Secretary, retired after three years in the Chair's Office.

Leaders in Rural Medicine

The Discipline of Family Medicine won the Keith Award for the ninth time from the Society of Rural Physicians of Canada. The Keith Award is presented to a Canadian postgraduate program with the most graduates practicing in rural Canada for the most recent ten years after graduation.

Memorial tied with the Northern Ontario School of Medicine for the Rural Medical Education Award from the Society of Rural Physicians of Canada. This is the fourth time Memorial has won this award. The Rural Education Award is presented to the medical school matching the most graduates to rural family medicine residency programs based on the Canadian Resident Matching Service data for the preceding year.

Iqaluit has been recognized both by the College of Family Physicians of Canada and the Society of Rural Physicians as one of three sites that have been chosen as a model of recruitment and retention for rural family doctors.

AWARDS

DISCIPLINE OF FAMILY MEDICINE AWARDS

Each year the Discipline of Family Medicine recognizes physician and resident leaders with a number of awards. Congratulations to our 2021-22 award winners!

Dr. Jim Sheridan

The Dr. Craig Loveys Award: Awarded to a specialist physician in recognition of excellent contribution to the Discipline of Family Medicine residency training program.

Dr. Charlene Fitzgerald

The Dr. Yong Kee Jeon Award: Awarded to a Family Physician who holds a part-time faculty appointment with the Discipline of Family Medicine, in honour of Dr. Yong Kee Jeon for his dedication to resident teaching throughout his 25 years of practice in Brookfield, NL.

Dr. Stephen Darcy

The Gus Rowe Teaching Award: Awarded to a full-time faculty member or Stream Lead in the Discipline of Family Medicine, in recognition of being an exemplary physician, a laudable teacher who is able to communicate knowledge and skills with sensitivity and humour.

Dr. Carmen Grinton

The Enid and Roy Williams Award: Awarded to a Family Medicine resident who has a professional demeanor and genuine passion for care of the elderly.

OTHER AWARDS

Faculty, residents and staff in the Discipline are recognized nationally for their dedication and leadership. Here are some highlights from the 2021-22 year.

Dr. Shabnam Asghari

The Max House Teaching Award for Excellence in Continuing Medical Education/Continuing Professional Development (CME/CPD). This Dean's Excellence Award recognizes the outstanding contribution to advancing CME/CPD planning, teaching and/or scholarly research for physicians and health professionals in the Province of Newfoundland and Labrador and beyond.

Dr. Jessica Reiniger

The Dr. John Ross Award: Awarded to a Family Medicine resident or Nurse Practitioner student who has a genuine interest in practicing in an underserved area.

Dr. Jenna Poole

The Thomas Gleason Award for Social Accountability in Research

Dr. Taylor Anderson and Dr. Carmen Grinton

Resident Research Award for Best Oral Presentation

Dr. Laurence Rioux-Hetu

Resident Research Award for Best Overall Resident Project

Dr. Maria Doyle

Resident Research Award for Best Poster Presentation

Dr. Katie Bennett and Dr. Yousif Kellow

Resident's Choice Award

Dr. Wendy Graham

Named the 2021 Family Physician of the Year for Newfoundland and Labrador. This award recognizes the outstanding achievements of family doctors from across Canada.

Dr. Robbie McCarthy

Recognized with the Rural Resident Leadership Award by the Society of Rural Physicians of Canada and the NL CFP Family Medicine Resident Award.

DISCIPLINE OF FAMILY MEDICINE BY THE NUMBERS

30

Full-time faculty members

26

Non-academic staff supporting
the discipline

552

Part-time faculty members

\$5,508,449

Research grant funding received

21

Affiliated hospital teaching sites
(NL, NB, NU)

33

Affiliated community practice
clinics

39

Residents who completed
Residency and Enhanced Skills
training programs

21

Residents practicing in NL
after graduating



EDUCATION

UNDERGRADUATE PROGRAM

PROGRAM DIRECTOR	DR. LYN POWER
CLERKSHIP DIRECTOR	DR. KERRY-LYNN WILLIAMS (ACTING)
PRECLERKSHIP DIRECTORS	DR. CHRISTINE AUBREY-BASSLER & DR. MEGHAN GREEN (ACTING)
FMIG LIAISON	DR. CHRIS PATEY
ACADEMIC PROGRAM ASSISTANT	SARAH EUSTACE

IMPROVING LIVES

From reviewing essays from the Early Clinical Experience and workbooks from both the Community Visit and Black Bag, it is clear that our learners have had significant exposure to working in different practices, collaborating with allied health and community partners, as well as learning about cultural and medical issues unique to our communities. These exposures have helped promote both the Discipline of Family Medicine and the Faculty of Medicine in these communities.

Numerous research projects were completed by both students and faculty in the Discipline of Family Medicine throughout the year. Many of these projects have been presented at local, national and international conferences.

EXCELLENCE IN ALL WE DO

Feedback is received from all clinical rotations. The Undergraduate Executive Committee meets regularly to review and modify the courses we offer based on this feedback.

Our Early Clinical Experience (ECE) has had great feedback. Based on the suggestions made by the learners we have made changes, such as matching with different faculty each session and offering more days of the week as options.

The Black Bag and Community Visit opportunities for learners each have great feedback. Following the rotation, a debrief is held to gather feedback and suggestions from the learners. Preceptors are given the opportunity to provide feedback as well. These debriefing sessions help to identify any issues such as gaps in experiences, housing issues, etc., but also to highlight positives. Learners have provided very positive feedback about being given this opportunity.

By providing our learners with these robust opportunities, most in rural and often remote communities, we are not only providing excellence in education but also fulfilling our social accountability mandate.

EMPOWERED PEOPLE

Within the undergraduate program, the team is led by Dr. Lyn Power, Undergraduate Program Director. Dr. Power is co-chair of the Canadian Undergraduate Family Medicine Directors (CUFMED), faculty representative on the Section of Medical Students for the College of Family Physicians of Canada (CFPC), and Eastern Health's Rural Clinical Chief for the Burin Peninsula. Dr. Chris Patey is responsible for undergraduate program selectives and electives and the Family Medicine Interest Group (FMIG), and is Clinical Chief for the Carbonear emergency room. Dr. Patey also runs a rural research program. Dr. Christine Aubrey-Bassler co-chairs pre-clerkship rotations with Dr. Meghan Greene (acting). Dr. Kerry-Lynn Williams (acting) is the Clerkship Director and oversees clerkship rotations.

Providing learners with the best learning opportunities and giving both learners and preceptors more options for teaching and learning has allowed us to create a culture of teamwork. In addition, these UG learners are often placed in academic settings where residents teach them. This helps empower our residents to become teachers and creates a culture of multilevel, layered learning.

ENDURING LEGACY

The Discipline of Family Medicine, under the guidance of Dr. Vina Broderick, is working with Dr. Alison Haynes, the curriculum lead on the Curriculum Oversight Subcommittee at Memorial University to try to have more Family Medicine lectures in the first- and second-year curriculum, as well as trying to recruit more family physicians to Integrated Learning Sessions (ILS).

As a Discipline, Family Medicine has gathered data on our faculty to assess each members' hours and contributions to the curriculum delivery, such as ILS, lectures, clinical skills, Objective Structural Clinical Examination (OSCE), academic half day, etc. Based on these numbers, planning is ongoing to assess how much manpower we have to contribute further in the curriculum and where best to utilize these hours.

GOING FORWARD

Priority #1:

Pillars: Improving Lives, Excellence in All We Do

Promote and deliver generalism in the curriculum. Having more generalists involved in delivery of curriculum (lectures, ILS, etc.) will increase students exposure to generalism and potentially lead to more students choosing generalist careers.

Priority #2:

Pillars: Improving Lives, Excellence in All We Do, Enduring Legacy

Working with UGME towards the development of an longitudinal integrated clerkship (LIC) expansion plan for Newfoundland & Labrador. Memorial currently has LIC rotations in New Brunswick. Work is beginning to start the development of LICs in rural sites in the province.

Priority #3:

Pillars: Excellence in All We Do, Enduring Legacy

Utilization of Canadian produced peer reviewed educational materials as part of Clerkship teaching tools. Discipline of Family Medicine faculty members are part of LEARN-FM, a group of FM Undergraduate leaders producing peer-reviewed educational materials. These documents cover the FM Clerkship learning objectives. The University of Calgary has developed an educational tool utilizing these dynamic case-based materials and is partnering with Memorial to provide access to these tools to our learners. University of Calgary staff help us track our learners' progress with these cases and report back to the FM UG team. This will not only be cost saving but more importantly will provide our learners with Canadian based peer-reviewed educational content mapped to the Clerkship learning objectives.

Priority #4:

Pillar: Empowered People

With Changing roles and staff within the UG Department in Family Medicine, measures will be implemented to ensure a smooth transition of people into these roles. Efforts are in place to ensure staff are supported in their roles and empowered to be effective team players. Fostering a culture of teamwork with clear roles and expectations is key to success.

FAMILY MEDICINE INTEREST GROUP

With the current healthcare crisis in our province and country, along with alarmingly high rates of residents without a family doctor, this is a critical time to recruit and retain family physicians. The Family Medicine Interest Group (FMIG) at Memorial aims to promote family medicine and showcase the diversity of practice that is possible within Newfoundland and Labrador. This task has been a rewarding one, as students continue to be interested and engaged throughout all events and interactions with family physicians.



This year, all of our events were delivered either in-person or via a hybrid model with the additional opportunity to participate online. Our well-known Fridays with Family events continued with presentations on Emergency Medicine Enhanced Skills, the Family Practice Renewal Program, and Care of Underserved Populations. Students continue to enjoy these events as they allow direct communication with family physicians and give us the opportunity to ask questions we may otherwise not have the chance to. We also introduced a new interactive panel event this year that included family physicians from various areas of practice across the province. This allowed students to ask questions and receive answers from varying perspectives. The event was well attended and very well received. We plan to make this at least a yearly event if not more frequent with the aim of covering a host of different family medicine related topics.

Our annual family medicine information night was held in December. This event brings together family physicians from various areas of practice in an informal setting that allows for relaxed small-group question and answer sessions along with conversations about all aspects of practice and work-life balance. We would like to extend our thanks to Dr. Parsons, Dr. Duggan, Dr. Xie, Dr. Foster, Dr. MacDonald, Dr. Mercer and Dr. Guigné for giving us their time and for the enthusiasm they share for family medicine. This is an important networking opportunity for medical students and one that we look forward to yearly.

This year also brought new opportunities in the form of conferences. Rebecca, Jasmine and Amanda attended the NL CFPC conference at Humber Valley Resort in October as representatives of our interest group along with a group of general student attendees. We were also invited to the CFPC conference in Toronto in November as members of the section of medical students which Jasmine and Rebecca attended. Both conferences provided valuable information and insight about the future of family medicine and residency that we shared with other FMIG members and the general student body upon return. We are grateful for the support of the CFPC on both the provincial and national levels that allow us to have these opportunities.

To close out the year we are planning a walk in May that will incorporate some wilderness medicine and emergency preparedness along with more interaction between students and physicians. We look forward to this event (along with the warmer weather) that will enable us the opportunity to continue to engage students in yet another format.

None of the events we host or the success of our group as a whole would be possible without the support from the CFPC-NL, especially Mrs. Debbie Rideout and Dr. Chris Patey. The background support and advice they give us allow our events to take place and provide us with physician contacts to attend the events. We would also like to send our thanks to Sarah Eustace in the Undergraduate Family Medicine office who does much work behind the scenes to help organize our meetings and events at the university.

Once again, thank you to the CFPC-NL and all the physicians who take time out of their busy schedules to engage with our interest group. We appreciate your support in building the future of family medicine.

Sincerely,

FMIG Executive Team 2022-2023

Rebecca Tizzard, Jasmine Eng, Amanda Meliambro, Zachary Parsons, Annemie MacPhee, and Samantha Bungay

RESIDENCY TRAINING (POSTGRADUATE) PROGRAM

PROGRAM DIRECTOR

ASSISTANT PROGRAM DIRECTOR

ACADEMIC PROGRAM ADMINISTRATOR

ACADEMIC PROGRAM ASSISTANT

(EVALUATIONS & LEAVES)

SECRETARY (CURRICULUM)

SECRETARY

DR. RUSSELL DAWE

DR. AMANDA TZENOV (to Sept. 2021)

DR. SUSAN AVERY (acting Sept. 2021 - Sept. 2022)

DAWN CORBETT

VAL HUNT

JACQUELINE RYAN

KRISTEN PIERCEY

The Family Medicine Residency Training Program at Memorial trains residents for urban, rural and remote practice. Over the two-year residency, residents train in a variety of sites throughout our five training streams (Eastern, Central, Western, Goose Bay, and Nunavut). Thirty-five new residents were welcomed to the program on July 1, 2021.

Training sites across Newfoundland and Labrador include:

St. John's and surrounding areas:

Airport Heights Medical Clinic
Bay Bulls Family Practice
Eleven Elizabeth Avenue
Health Sciences Centre (HSC)
Family Medicine Clinic, HSC
Janeway Child Health Centre
L. A. Miller Centre
Major's Path Family Practice
Riverdale Medical Clinic, Kelligrews
Ross Family Medicine Clinic
Torbay Medical Clinic
Shea Heights Community Health Centre
St. Clare's Mercy Hospital
Waterford Hospital

Rural:

Bay Roberts

Bonne Bay

Botwood

Burin

Carbonear

Clarenville

Corner Brook

Deer Lake

Gander

Happy Valley - Goose Bay

Grand Falls-Windsor

Harbour Grace

Pasadena

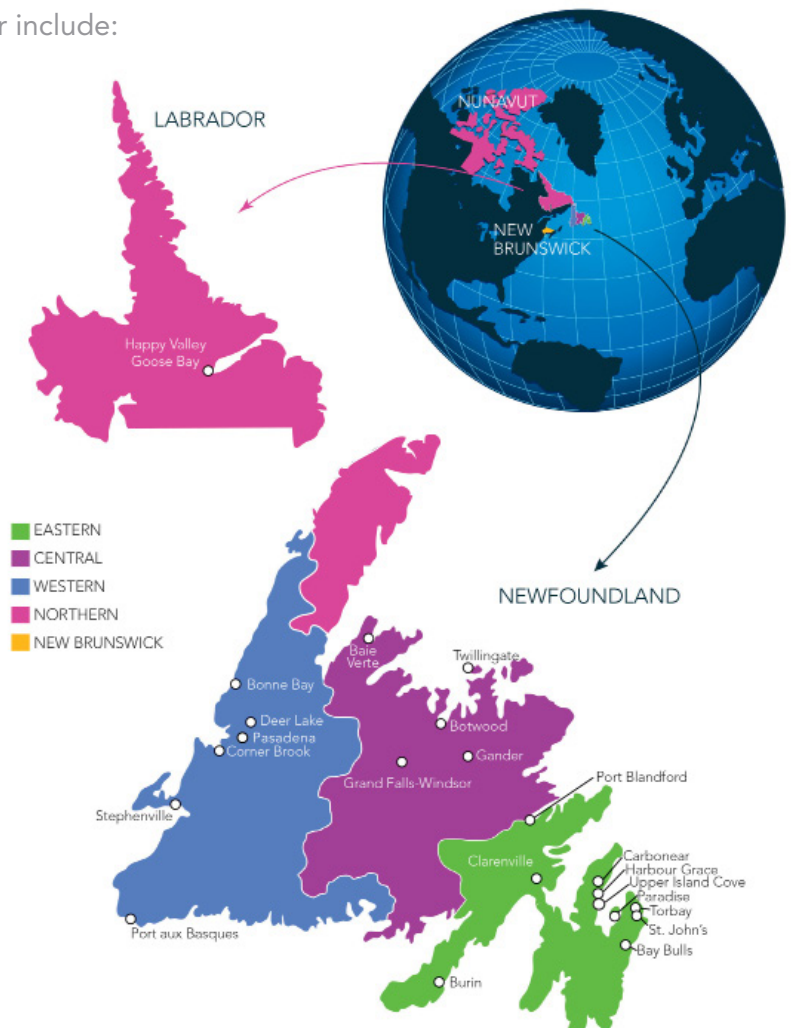
Port aux Basques

Port Blandford

Stephenville

Twillingate

Upper Island Cove



Our New Brunswick and Nunavut training sites include:

- Fredericton, New Brunswick
- Saint John, New Brunswick
- Iqaluit, Nunavut (including visits to satellite communities)

STREAM TRAINING AND RETENTION



EASTERN (EASTFAM): Six of the thirteen residents who trained in the area are staying to practice and/or locum within the Eastern Stream. Four of the thirteen will commence an Enhanced Skills program and three will locum throughout other Atlantic provinces.

CENTRAL (CENFAM): Four of the six residents who trained in the area intend to practice within the Central Stream. This includes one full-time and several who plan to locum, with one also locuming in urban NL. One of these residents will begin an Enhanced Skills program elsewhere in Canada. Another resident will practice elsewhere in rural NL, and one will practice elsewhere in Canada.

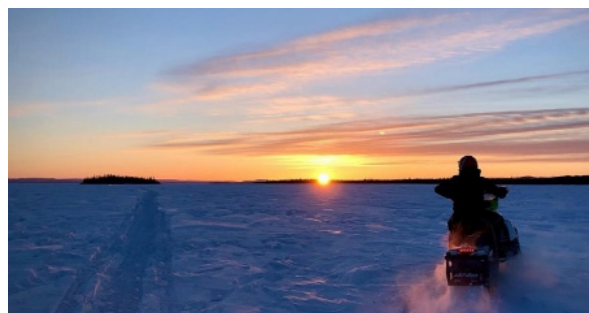
Photo credit: Dr. Russell Dawe



WESTERN (WESTFAM): Three of the six residents who trained in the area intend to practice in rural NL. Three residents plan to practice elsewhere in Canada.

Photo credit: Ritche Perez

GOOSE BAY (NORFAM): Five residents completed their training in Goose Bay this year. Four of these graduates continue to locum in Goose Bay and elsewhere in Canada. One graduate is working elsewhere in Canada for the Canadian Armed Forces.



NUNAVUT (NUNAFAM): One of the two residents who completed training this year intends to stay to practice in Nunavut. The other resident will be starting an Enhanced Skills program.

Photo credit by Dr. Russell Dawe

IMPROVING LIVES

Our Family Medicine and Enhanced Skills training programs graduated thirty-one Family Medicine residents, six Emergency Medicine (EM) residents, one Care of Underserved Populations (CUP) resident and one Care of the Elderly (COE) resident in the 2021-2022 academic year.

Of those graduates, seventeen Family Medicine graduates, three Family Medicine-Emergency Medicine graduates, and one Care of the Elderly graduate are staying to improve the lives of people in Newfoundland and Labrador. Of these seventeen graduates, thirteen will be practicing in a rural setting (including one from EM), and four will be practicing in an urban setting (including three from EM and one from COE). Additionally, one resident plans to start work in Nunavut, six have enrolled in Enhanced Skills training programs, and the remainder intend to practice elsewhere in Canada.

EXCELLENCE IN ALL WE DO

CURRICULUM

Our Family Medicine Residency Training Program uses the *Family Medicine Residency Program Curriculum Objectives*, a document that combines the concept of the Triple C Competency Based Curriculum with the Four Principles of Family Medicine and the CanMEDS-FM roles as a foundation for curriculum. Additionally, each stream has a unique *Curriculum Mapping Document* whereby each learning objective is mapped by Priority Topic, CanMEDS-FM role, In-Training Assessment Report (ITAR) Core Competencies & Procedures, Clinical Setting and Teaching Session.

The entire academic curriculum is organized into topical areas or components with a designated lead faculty member with expertise and/or a special interest in their respective areas overseeing each component. The lead faculty liaise with their organizing committees to plan and implement their respective curricular content. Throughout 2021-2022, there has been some great work put into updating and introducing content. The Academic Half Day structure changed a little as a result of resident feedback and we currently have a faculty member and a PGY2 presenting individual topics in Family Medicine, and a PGY1 sharing an interesting case. The Residency Program was delighted to resume face-to-face PGY1 Orientation in June, which included the Neonatal Resuscitation Program (NRP), Advanced Cardiovascular Life Support (ACLS) course and Advances in Labour and Risk Management (ALARM) course, as well as the jam packed, twice-yearly Core Content weeks in November and March. Further, we have also routinely offered Balint sessions (led by Dr. Guigné) to all residents virtually in conjunction with the resident-led peer support sessions. Finally, the Residency Program was able to provide additional funding for conference leave; Family Medicine residents can now access \$1,000 of funding each year of their two-year program.

A common curriculum exists throughout the Residency Program. However, implementation and delivery of content may look somewhat different depending on the stream and their local needs and resources. In the sections to follow, each stream, with their rural training sites, highlight some of the unique and longitudinal training experiences they provide.

Overall, our goal is to support Memorial Family Medicine residents to become competent providers of comprehensive care with the skills to base this care on the evolving needs of society and the best available evidence. We feel that this has been a mutually beneficial training strategy for all stakeholders and anticipate its continuance with occasional modifications over time, resulting from our continuous quality improvement processes.

Residents complete projects on a wide range of topics throughout their program. This year's projects can be found in the table below.

Resident Name	2022 Resident Projects
Ngozi Abu	A descriptive analysis study of a retrospective paper-based chart and Meditech review of patients diagnosed with Diabetic Mellitus that received an annual diabetic foot exam in 2019/2020 as a standard of care in one family medicine practice in GBHV in the LGH region.
Taylor Anderson	Prenatal visit timeline, for use in NL: a patient education resource.
Katie Bennett	Examining future practice preference, recruitment, and retention efforts in primary care: A survey of Family Medicine resident physicians.
Raphael Benzaki	Operation vaccine
Natasha Buckle	COVID-19, Suboxone Opioid Agonist Therapy and Family Medicine: Patient Comparisons Before, During and After Initial Public Health Restrictions.
Maria Doyle	CCFP Quick Reference Study Guide for Family Medicine Residents
Haley Flemming	A systematic literature review regarding the efficacy of telepsychiatry platforms when treating anxiety in rural settings.
Samantha Foster	Creation of a new protocol: Suboxone induction in the emergency department
Carmen Grinton	Into the woods: Updates in wilderness medicine.
Sarah Hicks	A description of the reasons for consultation with geriatrics in Central Health.
Brandon Katz	What you ought to know about ED flow.
Yousif Kellow	Uncoupling Orderset: The utility of INR/PTT testing as a part of "Cardiac Workup" orderset in Western Memorial Regional hospital, Corner Brook, NL
Hasnain Khan	A resource for cost comparison of drugs commonly prescribed in family practice in Newfoundland and Labrador.
Aisha Khayyam	Cannabis: medicine or poison; a literature review.
Ravneet Mangat	Ending the stigma: The connection between art and mental health.
Esme (Nadine) Marquis	Investigations Ordered for Patients with and Without an Intellectual or Developmental Disability (IDD) in the Emergency Department.
David Menticoglou	Should doctors encourage well-feeling people to seek medical care? Do screening and preventative care in asymptomatic males 60 and older lead to decreased mortality and morbidity?
Abdulkarim Muhaseen	House calls: A guide for Eastern Stream Residents.
Lindsay Noonan	Primary care physician resources in rural Newfoundland set.
Michelle O'Keefe	Type two diabetes and you.
Benjamin Ong	Sugar, death and taxes: Analysis of the taxation of sugar-sweetened beverages.
Jenna Paul	Are Family Physicians in Newfoundland and Labrador prepared to recognize and treat anaphylaxis in office-based settings?
Jenna Poole	We were children
Eli Prentice Crapper	Opioid agonist therapy: A synthesis of Canadian guidelines for treating opioids use disorders.
Deepak Sangha	EMR Implementation at LGH.
Andrew Sidhu	The Online Prescription.
Evan Slaney	A virtue ethics of harm reduction.
Victoria Sparrow-Downes	First trimester bleeding in remote Nunavut: a retrospective chart review and cost assessment.
Ting Wang	A guide on advanced care planning (ACP) in primary care.

ASSESSMENT, EVALUATION AND PROMOTIONS (AEP)

The AEP Committee met regularly throughout the year. Work continues to streamline the longitudinal ITAR to fit the overall program needs as well as the strengths of each stream. The Stream AEP Coordinators have been tremendously valuable in this work. Remediation/additional training plans for a number of residents were developed and implemented. There continues to be a need to emphasize the use of field notes as an integral part of the assessment system with full and part-time faculty and residents.

Given the continued disruption of the COVID-19 pandemic, many residents had alterations in their learning schedules, and alternate means to achieve competencies, with good results. Ensuring achievement and clinical exposure in such a setting has created challenges, but with the use of local and national resources, the AEP Committee has risen to the challenge and continues to make changes as required, while maintaining the integrity of the program.

EMPOWERED PEOPLE

RESIDENCY STREAMS

The 2021-2022 academic year was like no other and certainly unique. The year has brought various challenges through the continued COVID-19 pandemic, which motivated us to adapt and innovate our residency training and medical care delivery for our patients. It is thanks to the dedication of our streams, faculty, residents and staff that we were able to push through and achieve all of our goals. How we reached our goals may have been different than planned at times, but we were successful.

EASTERN (EASTFAM) STREAM

STREAM LEAD

ACADEMIC PROGRAM ADMINISTRATOR

ACADEMIC PROGRAM ADMINISTRATOR

CURRICULUM COORDINATOR

AEP COORDINATOR

EBM/RESEARCH COORDINATOR

FACULTY DEVELOPMENT COORDINATOR

RESIDENT REPRESENTATIVE (R2)

RESIDENT REPRESENTATIVE (R1)

HEALTH AUTHORITY REPRESENTATIVE

DR. SONNY COLLIS

JACKIE FEWER

CASSANDRA INGRAM

DR. LISA KIELEY

DR. STACEY SAUNDERS

DR. CHRIS PATEY

DR. REBECCA POWELL

DR. NATASHA BUCKLE

DR. EMILY PELLEY

DR. REBECCA RUDOFISKY

The 2021-2022 academic year brought some great success with minor challenges in the Eastern Stream as we continued to maneuver through the ongoing COVID-19 pandemic.

The CaRMS process was delivered virtually and we matched fully for the upcoming academic year. In May 2022, we held a Resident Academic Workshop in Burin and it was a great success. This was the first regular in-person workshop since the pandemic.

The Office of Distributed Medical Education (DME) has fully transitioned as of November 2021. As this shift was being integrated, the Eastern Stream cabinet expanded to include the new DME lead for the Eastern region, Dr. Sarah Small. Our Regional Health Authority (RHA) representative, Dr. Rebecca Rudofsky, has continued as a member at large to help collaborate innovative ways to deliver and promote academic and wellness programs for residents.

Our longitudinal second-year experiences were quite popular and we have committed to providing more longitudinal experiences in another interested site in the upcoming academic years. The rural longitudinal residents in Clarendville started on July 1, 2022 with Dr. Stockwell and Dr. Small. They are very eager and excited to develop this rural site.



CENTRAL (CENFAM) STREAM

STREAM LEAD

DR. LYNETTE POWELL (TO OCTOBER 2021)

DR. DAVID BRADBURY-SQUIRES (NOV. 2021-PRESENT)

ACADEMIC PROGRAM ADMINISTRATOR

SHERRI CHIPPETT

ACADEMIC PROGRAM ADMINISTRATOR

GAIL DIAMOND

CURRICULUM COORDINATOR

DR. RAIE LENE KIRBY

AEP COORDINATOR

DR. CHRISTY NOFTALL

EBM/RESEARCH COORDINATOR

DR. DAVID BRADBURY-SQUIRES (TO NOVEMBER 2021)

FACULTY DEVELOPMENT COORDINATOR

DR. JARED BUTLER

RESIDENT REPRESENTATIVE (R2)

DR. LINDSAY NOONAN

RESIDENT REPRESENTATIVE (R1)

DR. ABBY ROBBINS

This past academic year was an eventful one in the CenFam Stream. With a reshuffled cabinet and continued support from our community preceptors, we were able to get back to our roots by offering our in-person educational and social activities while embarking on continuous quality improvement initiatives based on an educational needs assessment completed by the Stream Lead.

Our resident workshops in Pilley's Island and the Bay of Exploits region (Lewisporte and Botwood) were hits! We were able to get our residents and preceptors out into lesser travelled parts of our region to enjoy some amazing scenery while hiking and kayaking. Educational events focused on simulating hands-on skills such as casting, intubating, and intraosseous (IO) placement allowed residents to gain further clinical confidence. Overnight events allowed residents to relax and stick around to enjoy the beauty of the local communities.

We were further able to focus on the longitudinal aspect of our second year, as all of our residents are now aware of formal mechanisms they can use to gain further competency in areas such as care of the elderly, maternity care, palliative care, and pediatrics. Exam practice was stepped up as we now offer twice yearly simulated office oral (SOO) practice exams in the fall and spring.

We continued to develop partnerships with our local towns, Family Practice Network (Shalloway), and Regional Health Authority. These partnerships have allowed for residents to gain enhanced experiences in rural and remote training, including residents having the opportunity to train in Fogo Island and Harbour Breton for the first time in many years. Furthermore, our partnerships have allowed our residents and faculty to participate in many events aimed at recruitment and retention of our residents.

The Behavioural Medicine curriculum has continued to be delivered virtually by local faculty and allied health care providers. Our residents also continue to participate in Academic Half Day. The Evidence Based Medicine curriculum has been delivered to the first-year residents during their Family Medicine rotations.



WESTERN (WESTFAM) STREAM

STREAM LEAD

ACADEMIC PROGRAM ADMINISTRATOR

ACADEMIC PROGRAM ADMINISTRATOR

CURRICULUM COORDINATOR

AEP COORDINATOR

EBM/RESEARCH COORDINATOR

FACULTY DEVELOPMENT COORDINATOR

RESIDENT REPRESENTATIVE (R2)

RESIDENT REPRESENTATIVE (R1)

DR. ERIN SMALLWOOD

RENEE COUGHLIN

LAVINIA CHIN

DR. AMY PIEROWAY (TO MARCH 2022)

DR. REBECCA LETHBRIDGE

DR. LORENA POWER

DR. WENDY GRAHAM (TO OCTOBER 2021)

DR. AMY PIEROWAY (FROM APRIL 2022)

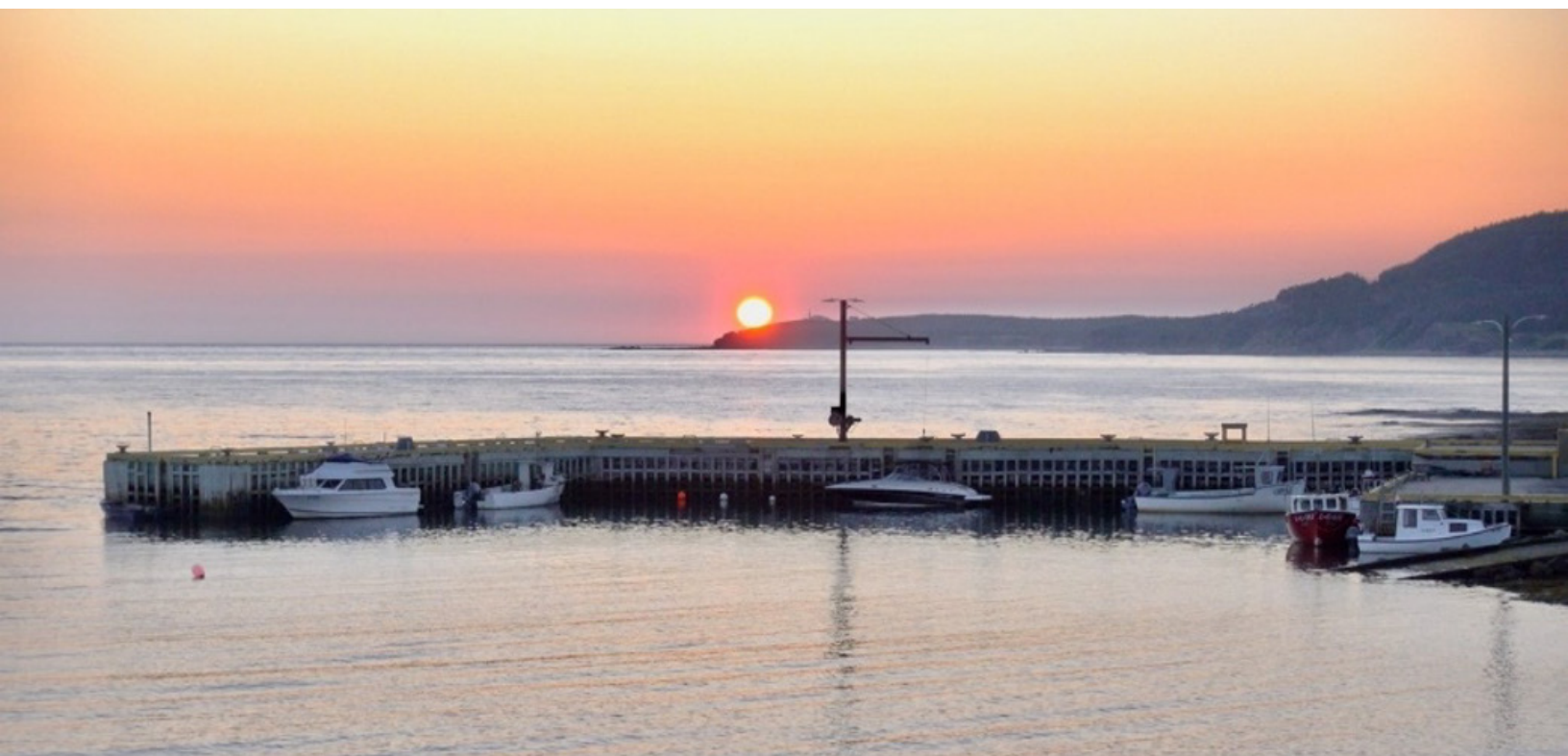
KATIE BENNETT

KRISTEN PECKFORD

We welcomed six new residents this year - two who were Memorial medical school graduates and four international medical graduates (IMGs) from Ireland. Our residents have enjoyed getting to know one another and have formed a tight-knit group.

We held a resident academic workshop in the fall, which was well received and provided opportunities for a physiatrist session on back pain, antimicrobial stewardship, SIMs, IUDs and a wellness session with yoga.

At the end of this academic year, two of our graduates returned to the eastern region to set up practice, three moved to other parts of Canada, and one remained on the west coast providing locum coverage.



GOOSE BAY (NORFAM) STREAM

STREAM LEAD

ADMINISTRATIVE OFFICER

ACADEMIC PROGRAM ADMINISTRATOR

ACADEMIC PROGRAM ADMINISTRATOR

CURRICULUM COORDINATOR

AEP COORDINATOR

EBM/RESEARCH COORDINATOR

FACULTY DEVELOPMENT COORDINATOR

RESIDENT REPRESENTATIVE (R2)

RESIDENT REPRESENTATIVE (R1)

DR. ROBERT FORSEY

TIFFANY DORMODY

SHELLY SMITH

KYLA BATTCOCK

DR. SAMANTHA HARPER

DR. PAUL CROCKER

DR. YORDAN KARAIVANOV

DR. CHARLENE FITZGERALD

DEEPAK SANGHA

BETHANY POWER

This CFPC award-winning NorFam Stream continues to train six PGY1 and six PGY2 residents yearly. We accepted PGY3 residents for the Enhanced Skills programs (Emergency Medicine and Care of Underserved Populations) this past year as well. We also have upwards of 50 medical students yearly.



Medical learners enjoy a longitudinal Triple C training program in Labrador covering palliative care, orthopedics, surgery, pediatrics, care of the elderly, emergency medicine and family medicine - in a rural, remote site staffed by 13 family physicians and five consultants (obstetrics and gynecology, surgery, anesthesia, psychiatry and pediatrics). Practice in Goose Bay truly follows the shared care model.

Training is centred in Family Medicine and all the family physicians practice full scope generalist medicine which includes intrapartum obstetrics and inpatient care. Residents spend 32 weeks of their PGY1 year and 44 weeks of their PGY2 year in Labrador and care for their patients at the Labrador Health Center's outpatient department and in-patient ward. They also drive or fly to the various Indigenous communities that are located inland and on the coast of Labrador. There is an active research program and monthly faculty development sessions. Residents participate in a yearly medevac course and join in a variety of "on the land" community experiences (e.g. Innu fall gathering, winter camping). Residents participate in monthly high-fidelity simulations, as well as Pediatric Advanced Life Support (PALS), Neonatal Resuscitation Program (NRP), Learning Essentials Approaches to Palliative and End of Life Care (LEAP) and Advanced Cardiac Life Support (ACLS) with local instructors. There is ongoing faculty development, research and excellent working relationships with our Indigenous partners.



NUNAVUT (NUNAFAM) STREAM

STREAM LEAD

RESIDENT PROGRAM COORDINATOR

ACADEMIC PROGRAM ASSISTANT

DR. PATRICK FOUCAULT

REBECCA IRWIN

VACANT

It was another busy year for the NunaFam program. Despite the pandemic, we have continued training residents and exploring the territory by doing remote in-person and virtual clinics in several communities of Baffin but also in other regions (Rankin Inlet and Kivalliq). The residents are always very involved in our interprofessional rounds as well as our obstetrical and emergency medicine rounds happening every week. We have also continued to integrate more pediatrics in the residents' curriculum, allowing the residents to spend a week in Iqaluit or in the community covering the pediatric department.



We increased the number of Memorial's Family Medicine residents that we welcome at the same time in Iqaluit. Starting with the 2022 CaRMS match, the NunaFam Stream has been accepting six residents per year. NunaFam is growing, as is our desire to make sure the stream is providing residents with a deep understanding of the practice of northern medicine and Inuit culture. Therefore, we have developed a new online orientation manual and are working on new training in cultural safety in Nunavut.



ENDURING LEGACY

Our team is dedicated to medical education and training residents who are ready to begin independent practice upon completion of the residency training program. This year we were frequently challenged to adjust residency training in light of public health restrictions on travel, patient care, etc. as a result of COVID-19. Our leaders adjusted training based on local capacities and opportunities to ensure that residents received quality training while also ensuring that the patients of our province were being cared for. Our leaders were resourceful and they advocated for medical education at a very challenging time. Despite the pandemic, our Curriculum and Assessment, Evaluation and Promotions committees continued to work to ensure that residency education stayed on track. Thanks to the tireless energy of so many of our full- and part-time faculty, we were able to deliver high-quality residency education to all our learners. This resulted in residents graduating on time and our being poised to welcome a new group of residents in July.

Throughout the year as the pandemic persisted, we have looked for ways to support and advocate for resident wellness. This has led to our Residency Training Committee revising and approving multiple policies and guidelines regarding how different types of leave can be used to best meet our residents' needs. Additionally, residents in leadership positions within our program have continued to maintain our resident peer support group, which began meeting in the spring of 2021 after conducting a needs assessment and establishing terms of reference for the group.

We continue to be dedicated to performance review and improvement. As part of this work, our program completes an annual review of the curriculum and faculty and clinical experiences receive feedback on performance annually.

RESIDENT HIGHLIGHT - DR. EMILY PELLEY

WHAT DO YOU APPRECIATE ABOUT BEING A MEMORIAL UNIVERSITY RESIDENT?

Memorial University has an excellent reputation for medical education, striking a good balance between education and clinical duties/responsibility. As a smaller institution, residents can avail of one-on-one time with their preceptors to optimize their learning, with preceptors being very supportive of residents' learning needs and adaptable to achieving the same. What I appreciate most about Memorial Family Medicine is the sense of community within our learning environment. By connecting with faculty, resident colleagues, and support staff in a smaller working environment, you do feel valued and supported as an individual within the program.

WHAT DO YOU LIKE MOST ABOUT RESIDENCY IN THE EASTERN STREAM?

Eastern Stream offers the ideal balance of both urban and rural clinical experiences. By completing family medicine rotations in rural Newfoundland, I gained significant clinical experience in a busy clinic that I feel has prepared me well for independent practice. In this setting, residents can take ownership of their patients care, and form meaningful relationships with them. In the urban setting, we residents receive clinical teaching and mentorship from both our family medicine preceptors and specialist colleagues, with the ability to avail of all services offered in a tertiary care environment.



ENHANCED SKILLS TRAINING PROGRAMS

PROGRAM DIRECTOR, ENHANCED SKILLS & PROGRAM DIRECTOR, EMERGENCY MEDICINE	DR. PETER ROGERS
PROGRAM DIRECTOR, CARE OF THE ELDERLY	DR. SUSAN MERCER
PROGRAM DIRECTOR, CARE OF UNDERSERVED POPULATIONS	DR. FRANÇOISE GUIGNÉ
ACADEMIC PROGRAM ASSISTANT	KIMBERLY PARSONS

EMERGENCY MEDICINE (EM)

The EM Enhanced Skills program continues to be a successful adjunct to the core Family Medicine Program; it has been training residents since 2003. Each year, up to six residents are matched through a competitive CaRMS process for a July 1 start. The EM residents and faculty contribute to both clinical and formal teaching of the residents. In addition to St. John's, rotations are held in Grand Falls-Windsor and Goose Bay. Highlights of the program include regular high-fidelity simulation, a procedural swine lab and a cadaver lab. A total of six residents completed the program this year; two are working in St. John's, one in Burin, and three are locuming in a variety of provinces.

CARE OF THE ELDERLY (COE)

The COE Enhanced Skills program began in 2016-2017 in efforts to be more socially accountable to this rapidly expanding portion of our population and to ensure that our residents had additional skills in COE should they wish to focus a part of their practice on caring for older adults. To date, the COE program has graduated five residents in our six-month program, four of whom are working in both primary care and geriatrics, and one who is in a full-time geriatrics role. As of fall 2020, residents match to our program through CaRMS. In the 2021-2022 academic year we had one resident graduate from the first iteration of our 12-month curriculum, planning to practice in urban Newfoundland. We continue to have 100% retention of COE graduates working in NL. We are approved for two residency training positions in the 2023-2024 academic year. Expansion of the COE program will help to achieve some of the calls to action for the aging population from the Government of Newfoundland and Labrador's Health Accord.

CARE OF UNDERSERVED POPULATIONS (CUP)

Our program's commitment to social accountability includes the CUP Enhanced Skills program, which provides interested residents who have relevant career goals with the opportunity to gain additional skills in the care of our underserved patient populations, both locally, through inner-city (St. John's) and Indigenous rotations (Labrador), and abroad. The CUP Enhanced Skills program commenced on July 1, 2017. The mission of this program is to educate family physicians to provide and lead innovation in evidence-informed, patient-centred care that addresses the social determinants of health, to advocate for health equity in their communities, and to build health care system capacity at home and abroad. The CUP program typically accepts one resident per year, including one in 2021-2022, graduating in the fall of 2022, with a plan to practice elsewhere in Canada. We have had a total of four graduates to date and their clinical practices provide primary care with a health equity lens.

FACULTY DEVELOPMENT (FD)

DIRECTOR (ACADEMIC)	DR. PAMELA SNOW
DIRECTOR (DISTRIBUTED)	DR. WENDY GRAHAM
EDUCATIONAL SPECIALIST	DR. STEPHEN SHORLIN
RESIDENT REPRESENTATIVE	DR. YOUSIF KELLOW
MANAGER OF OPERATIONS	NEHA BHUTANI (from November 2021)
COMMITTEE SECRETARY	SUSAN HUTCHINGS (to March 2022)
	SHENOA WHITE (from April 2022)

Stream Faculty Development Coordinators:

WESTERN	DR. WENDY GRAHAM (to October 2021)
	AMY PIEROWAY (from April 2022)
CENTRAL	DR. JARED BUTLER
EASTERN	DR. REBECCA POWELL
GOOSE BAY	DR. CHARLENE FITZGERALD

IMPROVING LIVES

Faculty Development Committee members have organized events within their respective streams, providing collaboration for medical education outcomes based on their individual preceptor needs. Curriculum change updates and faculty development regarding teaching/Faculty of Medicine policy have been provided regionally. Monthly full-time faculty development sessions have occurred throughout the academic year and are archived for deferred use. Examples of session topics include successful supervision in your virtual practice, qualitative research in medical education, Balint, and CaRMs updates.

EXCELLENCE IN ALL WE DO

The Family Medicine Faculty Development Committee continues to meet regularly. The Faculty Development Coordinators in each stream liaise with their respective cabinet members to plan faculty development events based on their stream's specific needs. Family Medicine continues to be represented on the Faculty of Medicine Faculty Development Committee. An internal family medicine needs assessment was conducted and a Faculty of Medicine wide faculty development needs assessment has been delivered; results are pending at the time of this report. The College of Family Physicians of Canada (CFPC) Faculty Development Interest Group meetings have been attended virtually due to the COVID-19 pandemic. The annual Faculty Development retreat which is usually held in the fall was postponed due to the COVID-19 pandemic.

EMPOWERED PEOPLE

The Faculty Development Committee continues to represent all streams throughout the province. We have added a resident representative position on the committee to further inform learner/faculty needs.

ENDURING LEGACY

The Discipline of Family Medicine is distributed throughout the province. Resulting from this, our Faculty Development Committee structure allows for two-way communication between faculty and our communities province-wide. We continue to work on enhancements to allow for robust virtual teaching and learning opportunities.

CLINICAL SERVICES

CLINICAL MEDICAL DIRECTOR

DR. MICHELLE LEVY

& ROSS CLINIC UNIT DIRECTOR

CLINIC ADMINISTRATOR

FAITH FLYNN

FAMILY MEDICINE CLINIC UNIT DIRECTOR

DR. CHRISTINE AUBREY-BASSLER

SHEA HEIGHTS CLINIC UNIT DIRECTOR

DR. SUSAN AVERY

& FAMILY CENTRED MATERNITY CARE LEAD

EMR SPECIALIST

MIKE FOLEY

OUR PEOPLE

Each of our clinical teams is made up of a group of physicians, administrative staff, pharmacists and nurses.

Family Medicine Clinic – Team 1	Family Medicine Clinic – Team 2	Ross Family Medicine Clinic	Shea Heights Community Health Centre
Dr. Scott Moffatt Dr. Christine Aubrey-Bassler Dr. Vina Broderick Dr. Heather Flynn Dr. Petra Joller Dr. Danielle O’Keefe Karina Arnold Mary Earles Jessica Mahon Agnes Whelan Jeanine Janes	Dr. Kris Aubrey-Bassler Dr. Jessica Bishop Dr. Russell Dawe Dr. Françoise Guigné Dr. Ean Parsons Dr. Pamela Snow Dr. Elaine Xie Erin Davis Cathy Trickett-Lockyer Jessica Mahon Kristen Parrott Sandra Reid	Dr. Michelle Levy Dr. Meghan Greene Dr. Joel Koops Dr. Aaron McKim Dr. Amanda Tzenov Stephen Coombs Denise Cahill Jasmine Miller Juanita Peach Ruth Dixon	Dr. Susan Avery Dr. Stephen Darcy Dr. Norah Duggan Dr. Amanda Nofall Dr. Amanda Pendergast Lisa Bishop Rhonda Hooper Shelly Yetman

IMPROVING LIVES

Through constant evolution of patient-centred care, the focus remains on providing efficient care while educating patients on basic health care, such as diet and healthy lifestyle habits. The purchase of three point of care ultrasounds (PoCUS) for each of the clinics has improved patient care, satisfaction, outcomes, and access for those with mobility concerns. It has also eased some of the burden on our health care system as it has prevented patients from needing further high resource investigations.

During the 2021-2022 academic year, Family-Centred Maternity Care (FCMC) delivered approximately 225 babies. FCMC also had the pleasure of working closely with four residents whose training templates were specifically designed to incorporate low-risk, family medicine obstetrical training. FCMC cares for patients in their own practices and also accepts referrals from other family physicians. Prenatal, intra-partum and post-partum care is offered in addition to breastfeeding support and tongue tie assessments and management. Despite the sleepless nights, we love what we do!

EXCELLENCE IN ALL WE DO

The clinical program continues to collaborate with other health professionals in both scholarly and educational projects. For example, the integration of Clinical Pharmacists into Family Medicine clinics through a monthly scheduled meeting (Targeted Substances Rounds) that provides a multi-disciplinary review

of patients with complex medication issues involving targeted or controlled substances, especially opioids. The involvement of many different experiences and viewpoints from practicing physicians and pharmacists, and the inclusion of learners is expected to result in better individual patient care and enriched resident learning. Patients who are reviewed will be followed up on during a future session.

EMPOWERED PEOPLE

Physicians in the Discipline of Family Medicine continue to take part in Family Practice Networks (FPNs) across the province. FPNs provide a mechanism through which a physician group can address common practice and patient needs, have a collective voice on issues facing family practice, and address local population health needs in coordination with the Regional Health Authority (RHA). Much of the FPNs' focus this past year aligns well with DFM priorities such as: improved recruitment (locums) and retention of family physicians, and the establishment of collaborative, community-based multidisciplinary teams (Family Care Teams).

The continuation of the Shared Care Psychiatry program in conjunction with the Psychiatry Residency Training Program has been very successful, with participation not only within the three Family Medicine Clinics but also with Choices for Youth and the Lemarchant Road Clinic. This collaboration provides a 6-week cycle that also includes a collaborative session, "Ask the Psychiatrist", which is an opportunity for physicians and learners in both disciplines to come together as a group.

ENDURING LEGACY

Our attention to social accountability continues in a number of areas. Some examples include:

- A faculty member participates as a member of the Social Determinants of Health subcommittee of the Health Accord Task Force.
- Ever expanding involvement and expertise in the area of Refugee Health in NL, including faculty members speaking in public health seminars, coordinating the "Morning in Refugee Health" series for the medical school, acting as faculty advisors and co-chairing MUN Med Gateway, acting as Clinic Lead for the Eastern Health Refugee Health Collaborative.
- A faculty member continues to be involved in the Provincial Amputee Clinic at the Miller Center.
- A faculty member continues to participate in the medical assistance in dying (MAID) program.

DISCIPLINE WELLNESS

DISCIPLINE OF FAMILY MEDICINE WELLNESS COMMITTEE

WELLNESS COMMITTEE CHAIR

DR. HEATHER FLYNN

COMMITTEE SECRETARY

JEANINE JANES

KIMBERLY PARSONS (ACTING)

COMMITTEE MEMBERS

DR. JOEL KOOPS

DR. AMANDA PENDERGAST

DR. MIKAELA MURPHY

DR. MEGHAN GREENE

AGNES WHELAN

SHENOA WHITE

NEHA BHUTANI

The Discipline of Family Medicine Wellness Committee was created in 2021 for the purpose of providing information and building awareness about Discipline, faculty and university wellness activities and strategies. Committee membership includes representation from Family Medicine faculty, staff and residents. It is the committee's mandate to encourage participation in and promotion of wellness activities and strategies within the Discipline. To date, the committee has organized several social events ranging from a summer picnic to a trivia event. As the committee's mandate continues to grow we look forward to increasing our presence within the Discipline of Family Medicine.



John Ross Walk 2021

Summer Picnic 2022



RESEARCH

PRIMARY HEALTHCARE RESEARCH UNIT (PHRU)

RESEARCH DIRECTOR

DR. KRIS AUBREY-BASSLER

DIRECTOR, CENTRE FOR RURAL
HEALTH STUDIES (CRHS)

DR. SHABNAM ASGHARI

ASSOCIATE PROFESSOR

DR. AMANDA HALL

INTERMEDIATE SECRETARY

KAREN GRIFFITHS (to October 2021)

STEPH O'KEEFE (from December 2021)

OUR TEAM

As the Discipline of Family Medicine's research arm, PHRU conducts high-quality primary healthcare research that is translated into policy and practice. We are guided by our vision of better health for Newfoundland and Labrador through an evidence-informed, effective, and efficient primary healthcare system. The research unit also houses the Centre for Rural Health Studies (CRHS), which conducts research involving the provision of healthcare and services and the examination of health policy in Canada with a particular emphasis on disparities between rural and urban geographic locations. Rural360 is a research incubator within the CRHS, which helps fund rural research ideas led by rural physicians.

Faculty members, each with their own program of research, contribute to PHRU's overall research productivity. Research focuses on health services, primary healthcare epidemiology, rural research capacity building, rural health research and implementation science. Faculty are supported by a dedicated staff of research professionals who make this work possible, including:

RESEARCH ASSISTANT III

DR. DANA HOWSE

RESEARCH ASSISTANT III

ANDREA PIKE

RESEARCH COORDINATOR (CRHS)

OLIVER HURLEY

RESEARCH COORDINATOR (RURAL360)

ALI MODIR-ROUSTA

RESEARCH ASSOCIATE (SURGEON)

DR. HENSLEY MARIATHAS

6FOR6 PROGRAM

The 6for6 Program is a faculty development initiative of Memorial University's Faculty of Medicine which provides six rural and remote physicians (per cohort) with access to a research skills development program. The program is delivered over a two-year cycle: year one is devoted to the course curriculum (from April to March), while year two provides alums with an opportunity to avail of dedicated research supports to complete their individual projects. The 6for6 Program is supported by a team of faculty and administrative staff:

6FOR6 FACULTY LEADS

DR. SHABNAM ASGHARI

DR. WENDY GRAHAM

DR. CHERI BETHUNE

6FOR6 PROJECT COORDINATOR

JONATHAN PRICE (to February 2022)

ALEXANDRIA TOBIN (from April 2022)

6FOR6 SECRETARY

STEPH O'KEEFE (to December 2021)

TASBEEH ALY (from February 2022)



IMPROVING LIVES

IMPACTFUL RESEARCH

- To increase impact and ensure clinical relevance, PHRU and CRHS collaborated with clinical and policymaker knowledge users when creating research questions. These efforts ensure our interdependent research projects are community-informed and inspired.
- The geographic analysis of healthcare utilization conducted by CRHS and PHRU addresses pressing and emerging needs and concerns of the province's rural population with regard to healthcare service accessibility and rural-urban differences in prescribing, use of diagnostic tests and health outcomes.
- 6for6 supported 38 research projects addressing pressing and emerging needs of rural populations, including four with Indigenous populations. These projects are integrated research and scholarly pursuits, engaging faculty, staff, researchers and learners as active partners, and are community-informed and inspired.
- The SurgeCon project is following an adaptive, innovative clinical trial design that aims to accelerate the transfer of discoveries into clinical practice, education and the health system.
- In 2021-22, Family Medicine faculty, staff and students published 63 peer-reviewed papers and eight non-peer reviewed papers, the highest ever for the discipline.
- PHRU researchers are currently conducting a CIHR-funded study of reforms to primary care in Ontario. This research topic was identified as a priority of the NL Department of Health and Community Services, and the results of the project will inform NL policy decisions.
- Researchers in PHRU are currently conducting three related studies examining how to collect and use socio-demographic and social need data in primary care settings to better understand patient populations and to improve health outcomes. This work aligns with findings in the recently released NL Health Accord report highlighting the importance of understanding and addressing social determinants of health.
- PHRU researchers are conducting an implementation and evaluation study of a case management intervention in primary care to examine the feasibility and effectiveness of nurse-led needs assessment, care coordination, and patient empowerment for patients with chronic conditions and complex needs. Findings are expected to support the NL Health Accord's proposal to prioritize team-based care.
- PHRU researchers are conducting a study that is examining experiences of care transitions across community, primary care and hospital settings for patients with complex health and social needs. The objective is to gain an understanding of care transitions from the perspective of both i) patients and families and ii) providers and managers in order to reduce the impacts associated with problematic and complicated transitions through care, including negative physical and mental health impacts for patients, provider dissatisfaction with system coordination, and increased testing and hospital admissions.
- PHRU's research program on musculoskeletal health, led by Dr. Hall, is responding to the most impactful research questions driven by knowledge users and global experts. The current focus is on prevention of chronic low back pain which is a pivotal challenge that is understudied worldwide. In 2021, they launched their pilot trial of a back-care coach within a primary care setting and are collaborating with researchers in Australia on this project before conducting a full provincial trial.
- PHRU's Implementation Science Research program, led by Dr. Hall, has ten active projects that study the effectiveness of various implementation strategies (e.g., decision support tools, local champions, educational outreach) for adopting evidence into practice. These projects respond to calls for action to reduce unnecessary healthcare and implement well-established interventions and pathways of care. This year, the program:
 - Started the planning of an electronic decision aid to provide avenues and linkages for best community care prescriptions and reduce unnecessary imaging related to back pain;
 - Continued to adapt its champion training program for health providers to learn to adopt the recommended biopsychosocial approach for assessing and treating chronic non-cancer pain; and
 - Published an invited BMJ article for health providers on how to determine when imaging is necessary for patients with low back pain and resources for how to discuss with patients why imaging is not necessary. This paper was written in partnership with family physicians and patients.

HEALTHIER COMMUNITIES

- The SurgeCon team forged sustainable regional, provincial, national and global partnerships to shape and improve health equity and the emergency health system. We actively engaged the communities we serve in identifying community needs and influencing research and service priorities expressed in the ultimately successful multi-million-dollar application to CIHR.
- PHRU faculty and staff continue to support the rollout of the BETTER Program, designed to improve health outcomes through improvements to lifestyle and disease screening. A successful research project led the Department of Health and Community Services to allocate funding towards the training of both new and existing providers to offer BETTER as part of routine health program in all regional health authorities of the province. PHRU faculty and staff are leading a new BETTER project to compare the BETTER intervention delivered in-person, by phone or by video conference.
- As part of the multi-province, CIHR-funded 'PriCARE' study, PHRU faculty and staff are supporting a case management intervention for patients with chronic conditions and complex needs in two clinics in NL. Leading the intervention at each clinic is a nurse case manager who works with patients and their families to assess their needs, develop an individualized care plan, coordinate care and healthcare providers, and develop patient capacity to manage their health and needs. NL has the highest recruitment of patients to this project, surpassing all other sites combined.
- The continuing success of the NL eConsult Service allows physicians to access specialist opinions quickly and efficiently through an electronic portal, thereby allowing more patients to be treated by their primary care providers in their home communities and avoiding unnecessary referrals to a specialist. This lowered the costs to the patient as well as the health care system as a whole.
- PHRU's Implementation Science program is working to design a decision support tool that will reduce unnecessary imaging and provide better community links and resources for appropriate patient treatment based on a comprehensive assessment of patient needs.
- The 6for6 Program provides participants with the tools to be able to conduct research in their communities following face-to-face sessions on campus or virtually. All projects emerge from locally-defined, rural-specific health needs and ultimately strive to contribute to quality healthcare improvement in each community.

EXCELLENCE IN ALL WE DO

RESEARCH EXCELLENCE: RESEARCH, DISCOVERY AND SCHOLARSHIP

- 6for6 continued to build robust academic and external partnerships and networks in the Faculty of Medicine's rural jurisdictions. Social capital data measured throughout the program show substantial improvements in participants' perceived research networks across the program. This growth is supported by qualitative data from participants.
- In 2021-22, the 6for6 team published four papers, while 6for6 alums published 12 papers. In addition, the 6for6 team and alumni attended several national and provincial conferences in 2021-22. CRHS and PHRU researchers have provided research support for many Translational Personalized Medicine Initiative projects (Quality of Care NL, Choosing Wisely NL).
- PHRU researchers adopted the Lancet recommendations on reducing research waste and improving value, which includes publishing protocols for all studies, and publishing results in a timely fashion.
- PHRU promoted and nurtured the development of inter-dependent research teams by building collaborative relationships with cross-



- jurisdictional academic, clinical, policy maker and patient partners.
- PHRU faculty continue to lead the local SPOR Primary Care Research Network called the Primary healthcare Research and Integration to Improve health system Efficiency (PRIIME) network. PRIIME connects researchers, clinicians, policymakers, and patients with a shared interest in improving our healthcare system and facilitates building robust academic and external partnerships and networks.
- PHRU and CRHS have effectively disseminated research outcomes to the scientific and clinical communities and the public by focusing not only on high-impact journals and conferences, but also on creating plain-language summaries and infographics to be shared with policymakers, patients and the general public.
- See Appendices A and B to view all publications, presentations and grants for the 2021-2022 year.

EDUCATION EXCELLENCE

- 6for6 is delivered as two graduate courses: MED 6150 (Principles of Scholarly Writing for Rural Doctors) and MED 6151 (Principles of Research for Rural Doctors). These courses are the first of their kind in Canada, have incorporated competency-based learning with individual learning plans, and prepare participants with the tools to be able to return to their communities and conduct research.
- The 6for6 Program is a complex web of integrated hands-on work, self and group learning, and regular follow-up and guidance by mentors and the core team. 6for6 is actively supporting 38 rural physicians as they navigate becoming new researchers and develop key skills to succeed. The program also engages many undergraduate/graduate students annually (e.g., Summer Undergraduate Research Awards [SURA], graduate student assistantships, post-doctoral fellows, and supervision) to enhance support for participants while providing students with exposure to rural health research and opportunities to develop their skills and competencies.
- In addition to developing crucial collaborations at Memorial University, the 6for6 team continues to foster and develop collaborations with researchers and other stakeholders in key hubs across the province (e.g., Carbonear, Central Newfoundland, Happy Valley-Goose Bay), as well as nationally and internationally. International colleagues with similar rural research goals in Australia and New Zealand have delivered keynote presentations to the 6for6 program participants. As well, 2022 saw the first international 6for6 participant (self-funded, from Nepal).
- Dr. Hall, who chairs the Discipline's Strategic Plan Research – Implementation Committee and is also the new Residency Research Director, has responded to the faculty needs assessment by starting a resource library with short video tutorials and resources for the conduct and reporting of common study designs that Family Medicine residents undertake, and has started offering virtual information sessions for residents and faculty advisors on these topics. The sessions and materials will be continuously evaluated and offered on an annual basis.
- The DFM's Strategic Plan for Research – Implementation Committee has started its evaluation of previous, current and other viable models for faculty research mentorship and train the trainer models for interested Evidence Based Medicine Coordinators and faculty advisors. Choice and piloting of identified programs are planned for the upcoming year.
- In the past fiscal year, faculty have supervised numerous medical students, all of our Family Medicine residents, four post-doctoral fellows, nine Ph.D. students, eight masters students, and numerous undergraduate students in meaningful, challenging work that aligns with their career objectives and opportunities for continued advancement.
- Of note, this year Daphne To (implementation science program) completed her MSc studying fidelity of interventions to reduce imaging for low back pain and has moved on to start her Ph.D. at the University of Toronto and Ryan Greene (Ph.D. candidate – implementation science program) passed his comprehensive exams and is completing his thesis work studying patient education as a strategy to enhance recovery after spinal surgery. As well, our recent post-doctoral fellow, Dr. Helen Richmond (implementation science program) was successful in securing a senior research position with the

Implementation Science Unit at Exeter University.

- The SurgeCon team is currently developing educational materials for a patient flow training course which is primarily designed for emergency department physicians and nurses. Eastern Health's Multimedia department is assisting with the development of audio/video content, which will be used for the online asynchronous version of the training course.

EMPOWERED PEOPLE

EXCEPTIONAL PEOPLE

- PHRU has facilitated exceptional faculty and staff development and mentoring at all career stages by debuting a staff development program designed to drive personal development, increase professional competency and facilitate career growth. Professional development sessions have been scheduled every few months over the last year.
- PHRU fosters an environment that encourages wellness for all by supporting employees in incorporating wellness goals into their work schedules.
- 6for6 and Rural360 facilitated exceptional faculty and staff development, as well as mentoring at all career stages by continuing to provide support to 38 6for6 participants. Several 6for6 graduates have made a significant impact with their research (Dr. Chris Patey — SurgeCon, Dr. Daniel Hewitt — Arsenic contamination in well water), and hold appointments with organizational bodies promoting rural research (President SRPC — Dr. Sarah Lespérance, former president SRPC — Dr. Gabe Woollam).
- The work Anna Walsh completed alongside patient research partners was recognized through multiple awards, which include the Dr. Alfred T.H. Burness Graduate Award in Medicine, Medical Graduate Students Society Scholar and Community Involvement Award, David Kirkland Student Leadership Award from the Memorial Student Volunteer Bureau and the City of St. John's, and she received a designation as a Fellow of graduate studies from Memorial University. She also co-designed and co-presented a patient engagement workshop alongside patient research partners at the North American Primary Care Research Group (NAPCRG) Annual Conference. The workshop was well received by conference attendees and it was selected as the recipient of the NAPCRG Patients' Choice Award.
- The SurgeCon team's principal patient knowledge user, Dorothy Senior, was recognized for the many contributions she has made to this project and her work as a patient advisor at NLSUPPORT through the 'Seniors of Distinction Award' from the Newfoundland and Labrador Government.

ENDURING LEGACY

EFFICIENT AND EFFECTIVE RESOURCING

- PHRU continued to expand and diversify Faculty of Medicine revenue by securing external research funding.
- With the award of \$5.2 million to SurgeCon, as well as Rural360, Mitacs matching funds, and alumni awards, 6for6 has now leveraged \$13 in return for every \$1 invested by Memorial University.
- 6for6 has partnered with the external evaluator, MQO Research Inc., to conduct a thorough program evaluation of the 6for6 and Rural360 programs. The goal of the evaluation is to assess the programs' relevance, efficiency, effectiveness, and reach, identify areas of focus and opportunities moving forward, make recommendations towards program quality improvement, and assess how the programs meet the strategic objectives of Memorial's Faculty of Medicine. The evaluation is expected to be completed by winter 2024.

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APPENDIX A: PUBLICATIONS AND PRESENTATIONS 2021-2022

PUBLICATIONS

1. Walsh, A., Heeley, T., Furlong, B., Bethune, C., Graham, W., Asghari, S. (2021). Rural Health Research Capacity Building: An Anchored Solution. *Rural and Remote Health*, 21(2).
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63. Spencer, S., Hedden, L., Vaughan, C., Marshall, E. G., Lukewich, J., Asghari, S., Gill, P., Buote, R., Meredith, L., Moritz, L., Ryan, D., Mathews, M. (2022). "It was horrible for that community, but not for the way we had imagined": A qualitative study of family physicians' experiences of caring for communities experiencing marginalisation during COVID-19. *Ssm. Qualitative Research in Health*, 2, 100176. <https://doi.org/10.1016/j.ssmqr.2022.100176>. December 2022.

NON-PEER REVIEWED ARTICLES

1. Brunger, F., Allison, J., Bassler, C., Dicker, K., Isshak, R., Pack, A., Semigak, S., Shakil, M., Sheppard, C. The Eastern Health Diversity Project: Examining Needs and Establishing Priorities. Report to Eastern Health and Community Stakeholders, May 10, 2021. <https://eadp2021.wixsite.com/my-site/>.

2. Asghari, S., Bethune, C., Graham, W., Price, J., Tobin, A., Goulet, L. (2022). 6 for 6—Dean's Annual Report 2021—A Research Skills Program for Rural and Remote Doctors (p. 23). Memorial University of Newfoundland.

3. Asghari, S., Hurley, O., Patey, C., Johnson, R., Senior, D. (2021). SPOR Rewarding Success in Innovative Clinical Trials Progress Report (April 1, 2019—September 30, 2021)—SurgeCon: An Emergency Department Management Platform (Interim Report No. 1; p. 21). Canadian Institutes of Health Research.

4. Government of Canada, C. I. of H. R. (2022, November 9). Surging ahead: How an innovative digital platform is helping reduce emergency room wait times - CIHR. <https://cihr-irsc.gc.ca/e/53164.html>.

5. Hudon, C., Bisson, M., Chouinard, M-C., Delahunty-Pike, A., Lambert, M., Howse, D., Schwarz, C., Dumont-Samson, O., Aubrey-Bassler, K., Burge, F., Doucet, S., Ramsden, V., Luke, L., Macdonald, M., Gaudreault, A., Porter, J., Rubenstein, D., Sctt, C., Warren, M., Wilhelm, L. Implementation analysis of a case management intervention for frequent users of health care services in primary care: a multiple case study across Canada. *British Journal of General Practice* (submitted).

6. Bisson M, Aubrey K, Chouinard M-C, Doucet S, Ramsden V R, Dumont-Samson O, Doucet S, Howse D, Lambert M, Schwarz C, Luke A, Rabbitskin N, Gaudreault A, Porter J, Rubenstein D, Taylor J, Warren M, Hudon C. Patient Engagement in Primary Care Implementation Research: A Logic Model. *Health Expectations*. Submitted.

7. M Lambert, M-C Chouinard, Dana Howse, Émilie Robert, Mathieu Bisson, Alannah Delahunty-Pike, Olivier Dumont-Samson, Charlotte Schwarz, Catherine Hudon (submitted). Interviewing in realist

evaluation in healthcare research: theoretical and practical guidelines. *International Journal of Health Planning and Management*.

8. Adekoya, I., Delahunty-Pike, A., Howse, D., Kosowan, L., Seshie, Z., Abaga, E., Cooney, J., Robinson, M., Senior, D., Thompson, L., Zsager, A., Aubrey-Bassler, K., Burge, F., Irwin, M., Jackson, L., Katz, A., Marshall, E., Muhajarine, N., Neudorf, C., Pinto, A. (2022). Screening for Poverty And Related Social determinants to improve Knowledge of and links to resources (SPARK): development and cognitive testing of a tool for primary care. Preprint. <https://www.medrxiv.org/content/10.1101/2022.12.30.22283580v1>

POSTERS PRESENTATIONS

1. Tzenov, A., Fairbridge, N., Hurtubise, K., Levy, M., Moores, P., O'Keefe, C., Pereira, D., Shaw, L., Stringer, K., Zed, J. Development of interprofessional health education programs in two academic family medicine practices: Moving towards the Patients Medical Home. Canadian Conference on Medical Education 2021 Abstracts. *Canadian Medical Education Journal*. <https://doi.org/10.36834/cmej.72402>.

2. O'Keefe, D., Avery, S., Parsons, E., Bethune, C. Tips in Preparing For and Conducting A Faculty Advisor Meeting, Association of Medical Education in Europe (AMEE) Conference, Virtual Event August 2021.

3. Stuti, T., He, B., Aubrey-Bassler, C. "Eye Care utilization among Newfoundland and Labrador's diabetic refugee population: A pilot study", North American Refugee Health Conference, 9-11 Sept 2021.

4. Long, J., McClintock, V., Avery, S., Dawe, R. A Program Evaluation Investigating Stakeholder Perspectives of the Family Medicine Low-Risk Obstetrics Resident Training Program. Poster Presentation, Faculty of Medicine OPED Health Professions Educational Scholarship Forum, Memorial University, Online (Nov 23, 2021)

5. Anaraki, N., Asghari, S., Wilson, M. (2021, November). How rural physicians working are being impact by the COVID-19 pandemic [Poster presentation]. North American Primary Care Research Group Annual Meeting, Virtual.

6. Aylward, S., Chafe, R., Godwin, M., Walsh, A. (2021, November). Discussing the healthcare experiences of people with Autism Spectrum Disorder in Labrador and Northern Newfoundland communities [Poster presentation]. North American Primary Care Research Group Annual Meeting, Virtual.

7. Walsh, A., Bodaghkhani, E., Asghari, S., Etchegary, H., Patey, C., Alcock, L., Senior, D. (2021, November). Patient-Centered Care in the Emergency Department: Engaging Patients in a Systematic Review [Poster presentation]. North American Primary Care Research Group Annual Meeting, Virtual.

8. Young, C., Patey, C., Norman, P., Swab, M., Hurley, O., Asghari, S. (2021, November). Skills and training required for physicians to decrease wait times in emergency departments: A scoping review [Poster presentation]. North American Primary Care Research Group Annual Meeting, Virtual.

9. Dawe, R., Martin, H., Winsor, M., Pollock, N. Preferences and practices for location of death: A narrative literature review. Poster Presentation, Family Medicine Forum/Besrou Forum, Online (Nov 10-13, 2021).

10. Hunt, A. Exploring distributed medicine from an educational delivery standpoint in Newfoundland and Labrador. First author. Rural and Remote Conference - Society of Rural Physicians of Canada (SRPC), Ottawa, April, 2022.

11. Hunt, A. Enhancing distributed medical education at Memorial University via a virtual provincial tour of Newfoundland and Labrador. First author. Canadian Conference on Medical Education (CCME), Calgary, April, 2022.

12. Schwarz, C., Wilhelm, L., Howse, D., Delahunty-Pike, A., Chouinard, M-C., Aubrey-Bassler, K., Burge, F., Doucet, S., Luke, A., Lambert, M., Gaudreau, A., Porter, J., Rubenstein, D., Scott, C., Warren, M., Hudon, C. Telehealth case management in primary care: An innovative approach for service disruption. A poster presentation to the Canadian Association for Health Services and Policy Research (CAHSPR) Annual Conference. Virtual Conference. May 31 – June 2, 2022.

13. Hurley, O., Asghari, S., Mahdavian, H., Walsh, A., Etchegary, H., Senior, D., Patey, C., Norman, P. (2022, June 14). Emergency Department Environments:

A System Change Review [Poster Presentation]. International Conference on Emergency Medicine, Virtual (Melbourne, Australia).

14. Patey, C., Norman, P., Hurley, O., Asghari, S. (2022, June 14). The Flow Centre: An Intervention for Improving Patient Flow in the Emergency Department [Poster Presentation]. International Conference on Emergency Medicine, Virtual (Melbourne, Australia).

15. Walsh, A., Bodaghkhani, E., Alcock, L., Patey, C., Etchegary, H., Senior, D., Asghari, S. (2022, June 26). Identifying patient-centered care in the emergency department: A systematic review and meta-ethnographic analysis [Poster Presentation]. Canadian Association of Emergency Physicians 2022, Quebec City, QC.

16. Young, C., Asghari, S. (2022, November 18). Social isolation and loneliness in rural long-term care: Before and during the COVID-19 pandemic [Poster Presentation]. North American Primary Care Research Group (NAPCRG) Conference, Phoenix, Arizona.

17. Asghari, S., Price, J., Graham, A., Bethune, C., Graham, W., Anaraki, N., Mariathas, H. (2022, November 18). Retain or remove the pandemic adaptation: What is the optimal delivery model for research skill faculty development programs post-pandemic? [Poster presentation]. North American Primary Care Research Group, Phoenix, Arizona.

18. Asghari, S., Modir, A., Bent, J., MacDonald, A., Bethune, C., Graham, W., Farrell, A. (2022, November 19). Building a Learning Health Care Community in Rural and Remote Areas: A Systematic Review. [Poster Presentation]. North American Primary Care Research Group (NAPCRG) Conference, Phoenix, Arizona.

19. Hudson, C., Aubrey-Bassler, K., Chouinard, M-C., Doucet, S., Dubois, M-F., Karam, M., Luke, A., Moullec, G., Pluye, P., Tzenov, A., Angrignon-Girouard, E., Ouadfel, S., Lambert, M., Schwartz, C., Howse, D., MacLeod, K., Gaudier, A. Better Understanding Care Transitions of Adults with Complex Health and Social Care Needs: A Mixed Methods Study Protocol. Poster Presentation: NAPCRG 50th Annual Meeting, Nov 18-22, 2022, Phoenix, Arizona.

20. Bisson, M., Hudon, c., Doucet, S., Dumont-Samson, O., Delahunty-Pike, A., Lambert, M., Schwarz, C., Howse, D., Ramsden, V., Gaudreau, A.,

Burge, F., Chouinard, M-C., Aubrey-Bassler, K. Case management program for patients with complex healthcare needs in primary care: a realist evaluation protocol. A poster presentation to the North American Primary Care Research Group (NAPCRG) 2022 Annual Meeting, November 18-22, 2022. Phoenix, Arizona.

21. Angrignon-Girouard, E., Hudon, C., Doucet, S., Schwarz, C., Howse, D., Tzenov, A., Moullec, G., Karam, M., Luke, A., Dubois, M-F., Kehoe MacLeod, K., Aubrey-Bassler, K., Chouinard, M-C. Better understanding care transitions of adults with complex health and social care needs: a study protocol. A poster presentation to the North American Primary Care Research Group (NAPCRG) 2022 Annual Meeting, November 18-22, 2022. Phoenix, Arizona.

22. Ramsden, V., Hudon, C., Doucet, S., Rubenstein, D., Bryce, R., Gaudreau, A., Aubrey-Bassler, K., Dumont-Samson, O., Howse, D., Delahunty-Pike, A., Jacobson, N. Sturgeon Lake First Nation: Co-Created Case Management with Individuals with Chronic Diseases and who require Complex Care. A poster presentation to the North American Primary Care Research Group (NAPCRG) 2022 Annual Meeting, November 18-22, 2022. Phoenix, Arizona.

WORKSHOPS

1. Mariathas, H., Asghari, S., Hurley, O. (2021, September). Stepped wedge cluster randomized trials in practice-based research: Sample size calculation with fixed number of cluster [Workshop]. World Epidemiology Conference, Virtual.

2. Dyck, C., Besigye, I., Destine, R., Ichsan, I., Yakubu, K., Dawe, R., Redwood-Campbell, L., Rouleau, K., Whalen-Browne, M., Ponka, D. Maximizing Co-learning between Global FM Partners: Exploring Innovative Approaches. Workshop. WONCA World, Abu Dhabi, Online (Nov 22, 2021).

3. Bethune, C., Graham, W., Asghari, S. (2021, November). Unmasking your research ideas: Steps to creating research that matters [Workshop]. Family Medicine Forum, Virtual.

4. Patey, C., Norman, P., Young, C. (2022a, April 21). Emergency Department Flow Course: An Interactive Workshop on Improving Patient Flow [Workshop].

Society of Rural Physicians of Canada (SRPC), Ottawa, ON, Canada.

5. Patey, C., Norman, P. (2022a, April 21). Practical tips to improve rural emergency department efficiency and patient flow [Oral Presentation]. Society of Rural Physicians of Canada (SRPC), Ottawa, ON, Canada.

6. Patey, C., Stratton, S. (2022, April 21). Bog Bikes & Snow Crab—Rural Newfoundland Emergency Cases [Oral Presentation]. Society of Rural Physicians of Canada (SRPC), Ottawa, ON.

7. Power, L., MclayCarthy, R. (2022, April 21). Layered Learning: Teaching Tips for Residents and Early Career Preceptors [Oral presentation]. Society of Rural Physicians of Canada (SRPC) – Rural and Remote, Ottawa, ON.

8. Patey, C., Campbell, C., Engelbrecht, R., Wade, R. (2022, April 22). Procedural Skills in a 3D Printed World (Fishhook Removal, Adult IO, Peds IO) [Closed workshop]. Society of Rural Physicians of Canada (SRPC), Ottawa, ON, Canada.

9. Patey, C., Norman, P., Young, C. (2022b, June 28). Emergency Department Flow Course: An Interactive ED Flow Improvement Workshop [Workshop]. Canadian Association of Emergency Physicians 2022, Quebec City, QC.

10. Patey, C., Norman, P. (2022b, August 4). Innovations in Emergency Department Flow and Surge [Oral Presentation]. ESMED General Assembly 2022, Virtual.

11. Walsh, A., Mariathas, H. H., Senior, D., Abdi, P., Burgess, J., Thistle, R., Fewer, J., Etchegary, H., Allison, J., turner, A., Hurley, O., Patey, C., Norman, P., Asghari, S. (2022, October 15). Patient-reported satisfaction and experiences with receiving care in the emergency department [Oral Presentation]. The European Emergency Medicine Congress, Berlin, Germany.

12. Graham, W., Asghari, S., Bethune, C., Price, J. (2022, November 9). From The Front Lines: Introduction to scholarly writing in Family Medicine [Workshop]. FMF World Rural Health Conference, Toronto, ON, Canada.

13. Hunt, A. Coaching and Mentoring module as part of Memorial University's Advanced Physician Management and Leadership Program. Co-created and co-facilitated with Lyn Ansara, Gardiner Centre. November 17, 2022.

14. Walsh, A., Senior, D., Fewer, J., Norman, P., Thistle, R., Abdi, P., Hurley, O., Etchegary, H., Allison, J., Patey, C., Asghari, S. (2022, November 18). Engaging Patients to Build Patient-Centered Care [Workshop]. North American Primary Care Research Group (NAPCRG), Phoenix, Arizona.

15. Howse, D., Lambert, M., Chouinard, M-C., Schwarz, C., Bisson, M., Delahunty-Pike, A., Dumont-Samson, O., Hudon, C. Realist interviewing in primary healthcare research. Workshop presented to the North American Primary Care Research Group (NAPCRG) 2022 Annual Meeting, November 18-22, 2022. Phoenix, Arizona.

ORAL PRESENTATIONS

1. Aubrey-Bassler, C. Presenter, Alternate Forms of Payment, DFM Core Content, 2021, 2022.

2. Aubrey-Bassler, C. Guest speaker, MPH Med 6700 Public Health Seminar, Session V, "Refugee Health and Implications for Public Health", 8 Oct 2021.

3. Aubrey-Bassler, C. Coordinator and Presenter, Morning in Refugee Health, Med I Communications Course, 13 Oct 2021.

4. Aubrey-Bassler, C., Haghighi, S., Joller, P. Overview of ANC Services and the Refugee Health Collaborative, Refugee Health Symposium, MUN, 15 and 16 Oct 2021.

5. Brunger, F., Allison, J., Bassler, C., Dicker, K. Isshak, R., Pack, A, Semigak, S., Shakil, M., Sheppard, C. The Eastern Health Diversity Project: Examining Needs and Establishing Priorities, Share (Science, Health and Research Education) Summit, Quality of Care NL. November 12, 2021 (online), St. John's NL.

6. Howse, D., Shwarz, C., Gaudreau, A., Porter, J., Rubenstein, D., Sabourin, V., Scott, C., Warren, M., Wilhelm, L., Aubrey-Bassler, K., Burge, F., Chouinard, M-C., Doucet, S., Bisson, M., Delahunty-Pike, A., Dumont-Samson, O., Lambert, M., Hudon, C. Patient

partner engagement works: Patient and researcher experiences of patient partnership in primary healthcare research. Oral presentation to the North American Primary Care Research Group (NAPCRG) 2021 Annual Meeting, November 2021. Virtual Meeting.

7. Asghari, S., Bethune, C., Graham, W., Walsh, A., Heeley, T., Furlong, B. (2021a, November). Anchored Delivery Model – A Socially Accountable Model for Rural and Remote Research Skills Training [Oral presentation]. Office of Professional and Educational Development, Faculty of Medicine, Memorial University of Newfoundland, Virtual.

8. Asghari, S., Bethune, C., Graham, W., Walsh, A., Heeley, T., Furlong, B. (2021b, November). Anchored Delivery Model – A Socially Accountable Model for Rural and Remote Research Skills Training. Health Professions Educational Scholarship Forum [Oral Presentation]. Office of Professional and Educational Development, Faculty of Medicine, Memorial University of Newfoundland.

9. Asghari, S., Graham, W., Bethune, C., Price, J. (2022, April 21). Evaluating a capacity building program for rural health research in Labrador and Northern Newfoundland [Oral presentation]. Society of Rural Physicians of Canada (SRPC) – Rural and Remote, Ottawa, ON.

10. Harper, S. (2022, April 21). So you've agreed to be an Event Medic? [Oral Presentation]. Society of Rural Physicians of Canada (SRPC), Ottawa, ON.

11. Hunt, A. (2022a, April 21). Exploring Distributed Medicine from an Education Delivery Standpoint in NL [Oral presentation]. Society of Rural Physicians of Canada (SRPC) – Rural and Remote, Ottawa, ON.

12. Graham, W., Asghari, S., Bethune, C., Price, J. (2022, April 21). A Faculty development rural research program fostering socially accountable research—6for6 six years down the road [Oral presentation]. Society of Rural Physicians of Canada (SRPC) – Rural and Remote, Ottawa, ON.

13. Graham, W., Asghari, S., Bethune, C., Price, J. (2022b, April 21). Tackling 'wicked' problems in rural health care: The adaptive action method (AAM) in action [Oral presentation]. Society of Rural Physicians of Canada (SRPC) – Rural and Remote, Ottawa, ON.

14. Wilson, M., Lee, D. (2022, April 21). Beyond the Overpass: Highlights of Rural Research [Oral Presentation]. Society of Rural Physicians of Canada (SRPC), Ottawa, ON, Canada.

15. Wilson, L., Hunt, A. (2022, April 21). From Early Years to Early Learners: Current Topics in Medical Education [Oral Presentation]. Society of Rural Physicians of Canada (SRPC) – Rural and Remote, Ottawa, ON.

16. Aubrey-Bassler, C. Presenter, Teaching Session to Eastern Health Collaborative Team Clinic, "Refugee Health Care in St. John's: an Overview", 18 Mar 2022 (3h).

17. Delahunty-Pike, A., Hudon, C., Howse, D., Rubenstein, D., and Wilhelm, L. Implementing Case Management in Primary Care: Findings and reflections from a multi-province SPOR Study. A virtual seminar presented to the Primary and Integrated Health Care Innovations (PIHCI) Network Learning Series. March 22, 2022.

18. Patey, C. (2022, April 21). Grabbing Medicine by the Horns—Early and Mid-Career Perspective on Rural Practice [Oral Presentation]. Society of Rural Physicians of Canada (SRPC), Ottawa, ON.

19. Aubrey-Bassler, C. Co-Presenter, Black Bag Orientation plenary, Phase III Med 7750 Community Engagement Course, Faculty Evaluation Report 4.8/5, 12 May 2022.

20. Aubrey-Bassler, C. Co-Guest Speaker, Emergency Medicine Academic Half Day, "Refugee Health", 25 May 2022.

21. Anaraki, N., Asghari, S., Etchegary, H., Jewer, J., Patey, C., Norman, P. (2022, June 14). Assessing Emergency Department Readiness for Implementation: Barriers and Facilitators for Change Prior to Implementation of SurgeCon [Oral presentation]. International Conference on Emergency Medicine, Melbourne, Australia.

22. Anaraki, N., Asghari, S., Karaivanov, Y., Wilson, M. (2022, June 17). Virtual Healthcare: A Controversial Response to the Pandemic [Oral presentation]. World Rural Health Conference (WONCA), Limerick, Ireland.

23. Graham, W., Asghari, S., Bethune, C., Price, J. (2022c, June 17). Fostering socially accountable rural health research relevant to local contexts using an Adaptive Action Method (AAM) [Oral presentation]. WONCA World Rural Health Conference, Limerick, Ireland.
24. Asghari, S., Bethune, C., Graham, W., Modir, A., Bent, J., McDonald, A. (2022, June 17). Building a learning health care community (LHCC) in rural and remote areas to support research and healthcare [Oral presentation]. World Rural Health Conference (WONCA), Limerick, Ireland.
25. Asghari, S., Bethune, C., Graham, W., Walsh, A., Heeley, T., Furlong, B. (2022, June 17). Anchored delivery model – an innovative medical education program to engage rural community physicians in healthcare research [Oral Presentation]. WONCA World Rural Health Conference, Limerick, Ireland.
26. Young, C., Patey, C., Norman, P., Chan, T., Hurley, O., Asghari, S. (2022a, June 28). Designing an evidence-based flow training curriculum for emergency department staff. [Oral presentation]. Canadian Association of Emergency Physicians, Quebec City, QC.
27. Asghari, S., Bethune, C., Graham, W. (2022, August 27). Anchored delivery – A competency-based model for continuing medical education for rural physicians in research skills [Oral presentation]. The Association for Medical Education in Europe (AMEE), Lyon, France.
28. Anaraki, N., Mukhopadhyay, M., Jewer, J., Etchegary, H., Patey, C., Norman, P., Asghari, S. (2022, October 15). Barriers and Facilitators to the Implementation of E-Health Systems in Emergency Departments: A Qualitative Study of Assessing Emergency Department Readiness Prior to Implementation. [Oral Presentation]. The European Emergency Medicine Congress, Berlin, Germany.
29. Young, C., Patey, C., Norman, P., Chan, T., Hurley, O., Asghari, S. (2022b, October 15). Identifying flow training strategies and modalities through an integrative systematic review and modified Delphi [Oral Presentation]. The European Emergency Medicine Congress, Berlin, Germany.
30. Graham, W., Asghari, S., Bethune, C., Price, J. (2022d, November 9). Becoming a Family Physician writer: Finding your voice [Oral Presentation]. FMF, Toronto, ON.
31. Hurley, O., Young, C., Mariathas, H. H., Anaraki, N. R. (2022, November 10). SurgeCon: Improving Emergency Department Wait Times Through Process Improvement and eHealth Systems Integration [Oral Presentation]. SHARE Summit, St. John's, NL.
32. Anaraki, N. R., Mukhopadhyay, M., Karaivanov, Y., Wilson, M., Asghari, S. (2022, November 18). Exploration of Rural Family Physicians' lived-experiences of coping with the COVID-19 pandemic [Oral Presentation]. North American Primary Care Group, Phoenix, Arizona.

APPENDIX B: EXTERNAL AND INTERNAL GRANTS 2021-2022

EXTERNAL GRANTS

Nominated PI / Co-PI	Title	Funding source	Funding Amount
Kris Aubrey-Bassler	Better understanding care transitions of adults with complex health and social care needs: an essential step towards integrated care.	CIHR	\$980,000
Kris Aubrey-Bassler	Building on Existing Tools to Improve Chronic Disease Prevention and Screening in Primary Care Virtually: the Virtual (BETTER Study).	CIHR	\$150,000
Kris Aubrey-Bassler	Health surveillance of community, dwelling, person with dementia and caregiver dyads.	Public Health Agency of Canada	\$992,533
Susan Avery, Collaborator	Cancer prevention in cancer predisposition syndromes: Testing the feasibility of building a hereditary cancer research registry and nurse navigator follow up mode.	CIHR Strategy for Patient-Oriented Research (CIHR- SPOR)	\$100,000
Christine Aubrey-Bassler	Characterizing Canada's Refugee Healthcare System amidst a Global Crisis	CIHR (Canadian Institutes of Health Research)	\$459,000
Christine Aubrey-Bassler, Collaborator	The Eastern Health Diversity Project: Examining Needs and Establishing Priorities	NLSPOR	\$69,022
Amanda Hall	Strategy for Patient Oriented Research (SPOR) Primary Care Network	Canadian Institutes of Health Research (CIHR)	\$2,000,000
Christina Young (NPI), Shabnam Asghari (Co-PI)	Social isolation and loneliness in long-term care: The case of Northern Newfoundland and Coastal Labrador.	Mitacs/International Grenfell Association	\$15,000
Christina Young (NPI), Shabnam Asghari (COPI).	Social isolation and loneliness in long-term care facilities in Newfoundland and Labrador.	ARC-NL	\$24,816.15
Shabnam Asghari	Building Rural Research Capacity through Mobilizing Local Thinking: A Strength-Based Approach to Rural Innovation	Mitacs Accelerate - Carbonear Institute for Rural Research & Innovation by the Sea (CIRRIS)	\$261,000
Shabnam Asghari	Rural 360: Expanding and Enhancing the Capacity for Rural Community	International Grenfell Association	\$300,000
Shree Mulay (NPI), Shabnam Asghari (Co-PI)	Enhancing the lives of older Canadians in long-term care in Newfoundland	Canadian Institute for Health Research	\$100,000

INTERNAL GRANTS

Nominated PI / Co-PI	Title	Funding source	Funding Amount
Christine Aubrey-Bassler	Assessment of the Current Newcomer Refugee Lab Intake Protocol in St. Johns, Newfoundland.	SURA (Summer Undergraduate Research Award)	\$1600
Susan Avery and Russell Dawe	Family Medicine-Low Risk Obstetrics Program Evaluation - Resident & Patient Survey Analysis and Reports.	SURA (Summer Undergraduate Research Award)	\$1600
Susan Avery and Russell Dawe	Family centered maternity care program evaluation: Stakeholder Interview.	SURA (Summer Undergraduate Research Award)	\$1600
Susan Avery, Russell Dawe, Norah Duggan, Lisa Bishop, Amanda Pendergast and Stephen Darcy	Shea Heights Medical Clinic Patient Resource Development.	SURA (Summer Undergraduate Research Award)	\$1600
Fern Brunger (PI) / Christine Aubrey-Bassler (Co PI)	The MUN Med Gateway Project: Evaluation of effectiveness of a service learning strategy for teaching cultural humility	Medical Research Foundation, Memorial University Faculty of Medicine, Cox Award	\$35,000
Christine Aubrey-Bassler	Assessment of the Current Newcomer Refugee Lab Intake Protocol in St. Johns, Newfoundland	SURA	\$1600
Wendy Graham	A Research Training Program for Rural Physicians	SURA 2022 (Summer Undergraduate Research Award)	\$1600
Wendy Graham	A Research Training Program for Rural Physicians	SURA 2021 (Summer Undergraduate Research Award)	\$1600
Lynette Power	Residents as Teachers	MUN Faculty of Medicine	\$9,277.60
Shabnam Asghari	A Research Training Program for Rural Physicians	SURA 2021 (Summer Undergraduate Research Award)	\$1600

APPENDIX C: COMMON ACRONYMS

APA	Academic Program Assistant/Administrator
ATLS	Advanced Trauma Life Support
CaRMS	Canadian Resident Matching Service
CFPC	College of Family Physicians of Canada
COE	Care of the Elderly
CRHS	Centre for Rural Health Studies
CPD	Continuing Professional Development
CPSNL	College of Physicians and Surgeons of Newfoundland and Labrador
CUP	Care of Underserved Populations
DFM	Discipline of Family Medicine
DME	Distributed Medical Education (formerly Rural Medicine Education Network (RMEN))
DO	Direct Observation
EM	Emergency Medicine
ES	Enhanced Skills
FD	Faculty Development
FMF	Family Medicine Forum
FMNEA	Family Medicine National Education Administrators
FPN	Family Practice Network
FPRP	Family Practice Renewal Program
FPU	Family Practice Unit (clinic in Janeway Hostel)
GFT	Geographic Full-Time Faculty
HSC	Health Sciences Center (Eastern Health/Faculty of Medicine)
ICAM	International Congress on Academic Medicine
ICRE	International Conference on Residency Education
NAPCRG	North American Primary Care Research Group
OSCE	Objective Structural Clinical Examination
OPED	Office of Professional and Educational Development
P&T	Promotion and Tenure
PARNL	Provincial Association of Residents of Newfoundland
PDCS	Professional Development and Conferencing Services
PEACI	Psychiatric Emergencies and Crisis Intervention
PERRT	Program for Enhanced Rural and Remote Training
PGFM	Former acronym for Family Medicine Residency Program
PGME	Postgraduate Medical Education (Faculty of Medicine)

PHRU	Primary Healthcare Research Unit
PoCUS	Point of Care Ultrasound
PT	Part-time Faculty
QUIPS	Questions in Practice
RTC	Residency Training Committee
SAMPs	Short answer management problems
SRPC	Society of Rural Physicians of Canada
UGFM	Undergraduate Family Medicine Program
UGME	Undergraduate Medical Education (Faculty of Medicine)
WONCA	World Organization of Family Doctors
6FOR6	Research and faculty development program within the Centre for Rural Health Studies, Discipline of Family Medicine